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STATE OF NEVADA
PUBLIC EMPLOYEES' BENEFITS PROGRAM

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AGENDA ITEM

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Action Item

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Information Only

Date: January 23, 2025

Item Number: 4.2.1

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

This report addresses medical, dental, prescription drug and HSA/HRA utilization for the PY 2024 period ending September 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 Q1 Plan Year 2025 utilization data.

Executive Summary

CONSUMER DRIVEN HEALTH PLAN (CDHP)

The Consumer Driven Health Plan (CDHP) experience for Q1 of Plan Year 2025 compared to Q1 of Plan Year 2024 is summarized below.

- Population:
 - 4.8% decrease for primary participants
 - 6.3% decrease for primary participants plus dependents (members)
- Medical Cost:
 - 2.6% increase for primary participants
 - 4.3% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 24 High-Cost Claimants accounting for 21.2% of the total plan paid for Q1 of Plan Year 2025
 - 16.5% increase in High-Cost Claimants per 1,000 members
 - 13.0% decrease in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - Health Status/Encounters (\$3.1 million)
 - Musculoskeletal System (\$2.3 million)
 - Circulatory System (\$2.2 million)
- Emergency Room:
 - ER visits per 1,000 members increased by 5.1%
 - Total paid PMPM per ER visit increased by 8.5%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased 5.7%
 - Average paid per Urgent Care visit increased 28.8% (increase from \$23 to \$29)
- Network Utilization:
 - 96.2% of claims are from In-Network providers
 - Q1 of Plan Year 2025 In-Network utilization decreased 1.0% over PY 2024
 - Q1 of Plan Year 2025 In-Network discounts increased 0.3% over PY 2024
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims decreased 1.0%
 - Total Gross Claims Costs increased 9.4% (\$1.0 million)
 - Average Total Cost per Claim increased 10.6%
 - From \$122.90 to \$135.87
 - Member:
 - Total Member Cost increased 12.1%
 - Average Participant Share per Claim increased 13.2%
 - Net Member PMPM increased 19.9%
 - From \$34.68 to \$41.58

- Plan
 - Total Plan Cost increased 8.5%
 - Average Plan Share per Claim increased 9.7%
 - Net Plan PMPM increased 16.1%
 - From \$104.92 to \$121.83
 - Net Plan PMPM factoring rebates decreased 22.5%
 - From \$62.23 to \$48.22

LOW DEDUCTIBLE PPO PLAN (LDPPPO)

The Low Deductible PPO Plan (LDPPPO) experience for Q1 of Plan Year 2025 is summarized below.

- Population:
 - 26.2% increase for primary participants
 - 24.4% increase for primary participants plus dependents (members)
- Medical Cost:
 - 16.0% increase for primary participants
 - 17.7% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 18 High-Cost Claimants accounting for 14.0% of the total plan paid for Q1 of Plan Year 2025
 - 44.7 increase in High-Cost Claimants per 1,000 members
 - 11.9% decrease in average cost of High-Cost Claimant paid.
- Top three highest cost clinical classifications include:
 - Health Status Encounters (\$2.8 million)
 - Musculoskeletal System (\$2.6 million)
 - Injury, Poisoning & External Causes (\$2.1 million)
- Emergency Room:
 - ER visits per 1,000 members increased 9.9%
 - Average paid per ER visit decreased 0.3%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased by 10.3%
 - Average paid per Urgent Care visit increased 16.2% (increased from \$90 to \$104)
- Network Utilization:
 - 97.7% of claims are from In-Network providers
 - Q1 of Plan Year 2025 In-Network utilization decreased 0.2% over PY 2024
 - Q1 of Plan Year 2025 In-Network discounts increased 1.1% over PY 2024
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims increased 33.7%
 - Total Gross Claims Costs increased 42.9% (\$3.9 million)
 - Average Total Cost per Claim increased 6.9%
 - From \$144.51 to \$154.48
 - Member:

- Total Member Cost increased 46.3%
- Average Participant Share per Claim increased 9.5%
- Net Member PMPM increased 17.6%
 - From \$23.83 to \$28.03
- Plan
 - Total Plan Cost increased 42.3%
 - Average Plan Share per Claim increased 6.5
 - Net Plan PMPM increased 14.4%
 - From \$143.98 to \$164.76
 - Net Plan PMPM factoring rebates increased 18.7%
 - From \$91.33 to \$108.43

PEBP PREMIER PLAN (EPO)

The PEBP Premier Plan (EPO) experience for Q1 of Plan Year 2025 compared to Q1 of Plan Year 2024 is summarized below.

- Population:
 - 9.4% decrease for primary participants
 - 9.5% decrease for primary participants plus dependents (members)
- Medical Cost:
 - 55.8% increase for primary participants
 - 56.0% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 11 High-Cost Claimants accounting for 39.0% of the total plan paid for Q1 Plan Year 2025
 - 73.7% increase in High-Cost Claimants per 1,000 members
 - 192.2% increase in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - Perinatal Originating Conditions (\$3.0 million)
 - Circulatory System (\$1.4 million)
 - Injury, Poising & External Causes (\$1.2 million)
- Emergency Room:
 - ER visits per 1,000 members reflected no change
 - Average paid per ER visit increased by 14.8%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased 24.3%
 - Average paid per Urgent Care visit increased 9.4%
- Network Utilization:
 - 96.2% of claims are from In-Network providers
 - In-Network utilization increased 0.1%
 - In-Network discounts decreased 8.3%
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims decreased 3.8%
 - Total Gross Claims Costs increased 9.8% (\$0.5 million)

- Average Total Cost per Claim increased 14.1%
 - From \$158.50 to \$180.84
- Member:
 - Total Member Cost increased 12.0%
 - Average Participant Share per Claim increased 16.5%
 - Net Member PMPM increased 23.7%
 - From \$38.18 to \$47.23
- Plan
 - Total Plan Cost increased 9.4%
 - Average Plan Share per Claim increased 13.7%
 - Net Plan PMPM increased 20.8%
 - From \$243.80 to \$294.56
 - Net Plan PMPM factoring rebates increased 6.0%
 - From \$158.92 to \$168.50

DENTAL PLAN

The Dental Plan experience for Q1 of Plan Year 2025 is summarized below.

- Dental Cost:
 - Total of \$7,161,865 paid for Dental claims.
 - Preventative claims account for 25% (\$1.8 million)
 - Basic claims account for 35% (\$2.4 million)
 - Major claims account for 19% (\$1.4 million)
 - Diagnostic claims account for 22% (\$1.6 million)

HEALTH REIMBURSEMENT ARRANGEMENT

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

HRA Account Balances as of Septembr 30, 2024			
\$Range	# Accounts	Total Account Balance	Average Per Account Balance
0	45,843	0.00	0.00
\$.01 - \$500.00	19,603	4,757,958.65	242.72
\$500.01 - \$1,000	10,888	7,676,723.92	705.06
\$1,000.01 - \$1,500	2,862	3,407,578.11	1,190.63
\$1,500.01 - \$2,000	645	1,127,931.79	1,748.73
\$2,000.01 - \$2,500	425	945,785.38	2,225.38
\$2,500.01 - \$3,000	219	598,290.82	2,731.92
\$3,000.01 - \$3,500	160	518,964.79	3,243.53
\$3,500.01 - \$4,000	150	558,610.84	3,724.07
\$4,000.01 - \$4,500	120	511,085.30	4,259.04
\$4,500.01 - \$5,000	107	509,448.34	4,761.20
\$5,000.01 +	667	5,700,602.71	8,546.63
Total	81,689	\$ 26,312,981	\$ 322.11

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) through the first quarter of Plan Year 2025. The CDHP total plan paid costs decreased 8.0% over the same time for Plan Year 2024. The LDPPO total plan paid costs increased 2.0% over Q1 of Plan Year 2024. The EPO total plan paid costs increased 27.0% over Q1 of Plan Year 2024. The change in the plan paid year over year is based on the per employee per year costs (PEPY). For HMO utilization and cost data please see the report provided in Appendix D.

Appendix A

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

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PEBP

Public Employees' Benefits Program

Quarterly Plan Performance Review

HDHP Plan • 2025-1Q



A UnitedHealthcare Company

Report Criteria & Contents



Experience Periods*

➤ 2025 Plan Year (Current)

2025-1Q.1st Quarter: Claims Paid 7/1/2024 - 9/30/2024

➤ 2024 Plan Year

2024-1Q.1st Quarter: Claims Paid 7/1/2023 - 9/30/2023

2024 Full Year: Claims paid 7/1/2023 - 6/30/2024

➤ 2023 Plan Year

2023-1Q.1st Quarter: Claims Paid 7/1/2022 - 9/30/2022

2023 Full Year: Claims paid 7/1/2022 - 6/30/2023

Group Data

- Data reported is for the HDHP Plan only:
- Contract = 7670-06-414946 or 7670-10-414946
- Except where indicated, Report is for Medical data only excluding claim expenses

Normative Comparison Data

- Norm Groups: UMR Book of Business in InfoPortSM
- Composition: 4,555 groups with approximately 6.5 million members
- Norm Period matches Current Year: Claims Paid 7/1/2024 - 9/30/2024

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* Additional date ranges for specific figures are defined on the page if applicable



Cost Drivers

- Overall Cost Trend based on Medical Paid PEPY: +2.6%
- High-Cost Claimants Paid PMPM trend: +1.4%; Non HCCs trend: +5.0%
- Top Paid Diagnostic Chapters: Health Status & Services (+12.5% Paid PMPM), Musculoskeletal (+9.7%), Circulatory System (-11.6%)



Membership & Demographics

- Total membership is 6.3% lower than prior period
- Employees decreased 4.8%, while Dependents were down 8.7%
- 95.2% of members had < \$2,500 medical paid, with 41.2% having no claims paid at all during the reporting period



Utilization Key Indicators

- Paid per IP Admit was \$23,138, which is 38.2% lower than 2024-1Q
- Paid per ER Visit was \$2,160, which is 3.3% higher than 2024-1Q



Network Utilization & Savings

- 96.2% of all Medical spend dollars were to In Network providers
- The average In Network discount was 68.8%, which is somewhat (+0.3 pts) above the 2024 average discount of 68.5%

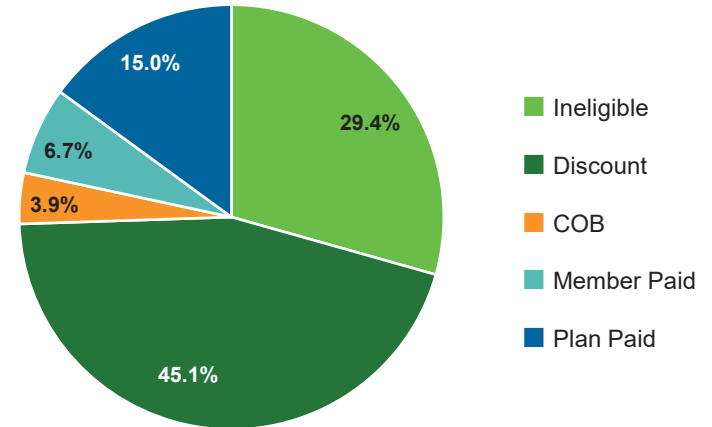
Medical Total Savings Summary



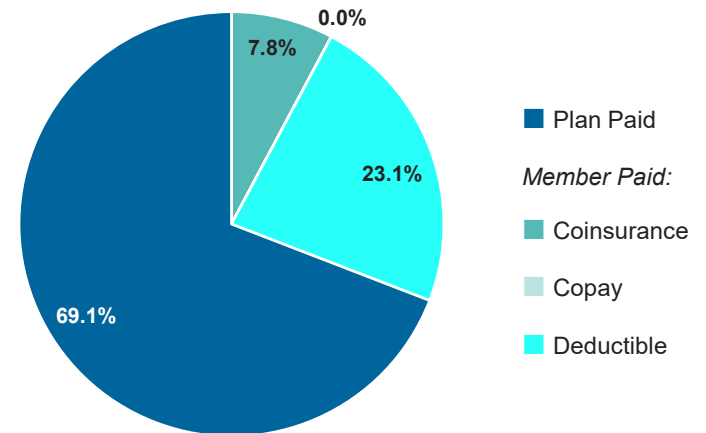
Dollar Chain: Billed to Paid Dollars

Dollar Amount	2025-1Q Total Dollars	2025-1Q PMPM*	2024 PMPM*	Trend
Medical Billed	\$138,230,100	\$2,011	\$1,916	5.0%
(-) Ineligible	\$40,596,081	\$591	\$590	0.1%
Medical Covered	\$97,634,020	\$1,420	\$1,326	7.1%
(-) Discount	\$62,361,902	\$907	\$870	4.3%
Medical Allowed	\$35,272,117	\$513	\$456	12.4%
(-) COB	\$5,380,572	\$78	\$27	188.4%
(-) Coinsurance	\$2,328,794	\$34	\$32	5.4%
(-) Copay	\$190	\$0	\$0	-92.5%
(-) Deductible	\$6,895,396	\$100	\$63	58.5%
Total Member Paid	\$9,224,379	\$134	\$95	40.6%
Total Plan Paid	\$20,665,729	\$301	\$324	-7.1%

Breakout of Billed Dollars



Breakout of Paid Dollars: Plan vs. Member Paid



* PMPM (per member per month): Amount per the average total membership (both primary subscribers and dependents) per month.

Medical & Rx Paid Claims by Age Range



Age	2024-1Q (7/1/2023 - 9/30/2023)						2025-1Q (7/1/2024 - 9/30/2024)						Change	
	Med Paid	Med Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	Med Paid	Med Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	Total Paid	Tot Paid PMPM
<1	\$1,112,435	\$2,971	-\$2,203	-\$6	\$1,110,232	\$2,966	\$785,957	\$2,421	\$30	\$0	\$785,987	\$2,421	-29.2%	-18.4%
1	\$76,582	\$176	\$17,259	\$40	\$93,842	\$216	\$58,569	\$187	\$38	\$0	\$58,607	\$187	-37.5%	-13.2%
2 - 4	\$199,419	\$122	\$33,196	\$20	\$232,614	\$143	\$228,484	\$161	\$15,941	\$11	\$244,425	\$172	5.1%	20.7%
5 - 9	\$343,571	\$100	\$104,032	\$30	\$447,603	\$130	\$388,809	\$125	\$93,471	\$30	\$482,280	\$155	7.7%	18.7%
10 - 14	\$597,567	\$142	\$124,214	\$30	\$721,780	\$172	\$316,828	\$80	\$105,042	\$27	\$421,871	\$106	-41.6%	-37.9%
15 - 19	\$768,775	\$154	\$96,712	\$19	\$865,487	\$174	\$952,113	\$204	\$132,240	\$28	\$1,084,353	\$232	25.3%	33.7%
20 - 24	\$791,479	\$134	\$305,354	\$52	\$1,096,833	\$185	\$835,034	\$147	\$340,517	\$60	\$1,175,551	\$206	7.2%	11.5%
25 - 29	\$632,425	\$160	\$119,385	\$30	\$751,811	\$190	\$447,327	\$118	\$144,572	\$38	\$591,900	\$156	-21.3%	-18.0%
30 - 34	\$905,784	\$186	\$182,980	\$37	\$1,088,764	\$223	\$1,164,715	\$256	\$218,518	\$48	\$1,383,233	\$304	27.0%	36.2%
35 - 39	\$1,200,170	\$226	\$321,361	\$60	\$1,521,531	\$286	\$1,249,456	\$254	\$308,923	\$63	\$1,558,379	\$317	2.4%	10.7%
40 - 44	\$996,740	\$170	\$421,291	\$72	\$1,418,031	\$242	\$1,080,541	\$197	\$484,385	\$88	\$1,564,926	\$285	10.4%	17.7%
45 - 49	\$1,451,069	\$269	\$476,207	\$88	\$1,927,276	\$357	\$1,197,107	\$236	\$759,532	\$150	\$1,956,640	\$386	1.5%	8.1%
50 - 54	\$1,723,481	\$278	\$912,750	\$147	\$2,636,230	\$425	\$1,909,678	\$324	\$1,109,573	\$188	\$3,019,252	\$513	14.5%	20.7%
55 - 59	\$2,842,205	\$416	\$731,544	\$107	\$3,573,750	\$524	\$2,739,246	\$433	\$1,061,694	\$168	\$3,800,939	\$601	6.4%	14.7%
60 - 64	\$4,203,809	\$506	\$1,720,840	\$207	\$5,924,650	\$714	\$4,732,932	\$620	\$1,662,430	\$218	\$6,395,362	\$838	7.9%	17.4%
65+	\$3,320,898	\$585	\$1,523,402	\$268	\$4,844,299	\$853	\$2,578,932	\$464	\$1,667,551	\$300	\$4,246,483	\$764	-12.3%	-10.5%
Total	\$21,166,409	\$288	\$7,088,325	\$97	\$28,254,733	\$385	\$20,665,729	\$301	\$8,104,458	\$118	\$28,770,187	\$419	1.8%	8.7%

Financial Summary – YTD Trend

Total Plan & Norm



Measure	Total Plan					UMR Norm	
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2025-1Q	Variance
Average Enrollment							
Employees	16,652	-10.9%	14,829	-4.8%	14,117		
Spouses	3,373	-16.3%	2,824	-9.5%	2,557		
Children	8,137	-16.3%	6,811	-8.4%	6,237		
Tot. Members	28,162	-13.1%	24,464	-6.3%	22,911		
Avg. Family Size	1.7	-2.5%	1.6	-1.6%	1.6	1.9	-15.4%
Financial Summary							
Allowed	\$15,593,334	109.5%	\$32,665,502	8.0%	\$35,272,117		
Plan Paid	\$6,528,098	224.2%	\$21,166,409	-2.4%	\$20,665,729		
Member Paid (OOP)	\$6,447,745	32.5%	\$8,543,700	8.0%	\$9,224,379		
Paid PEPY	\$1,568	264.1%	\$5,709	2.6%	\$5,856	\$10,338	-43.4%
Paid PMPY	\$927	273.2%	\$3,461	4.3%	\$3,608	\$5,392	-33.1%
Paid PEPM	\$131	264.1%	\$476	2.6%	\$488	\$861	-43.4%
Paid PMPM	\$77	273.2%	\$288	4.3%	\$301	\$449	-33.1%
High-Cost Claimants (Med Paid \$100,000+)							
# of HCCs	6	266.7%	22	9.1%	24		
HCCs per 1000	0.2	322.1%	0.9	16.5%	1.0	1.1	-6.9%
Paid per HCC	\$158,334	32.2%	\$209,302	-13.0%	\$182,154	\$203,568	-10.5%
HCC Paid % of Tot	14.6%	7.2	21.8%	-0.6	21.2%	18.4%	2.8
Cost Distribution by Claim Type (Paid PMPY)							
Inpatient	\$140	691.5%	\$1,111	-10.9%	\$989	\$1,382	-28.4%
Outpatient	\$328	214.7%	\$1,032	14.2%	\$1,178	\$1,573	-25.1%
Physician	\$453	181.5%	\$1,275	6.8%	\$1,361	\$2,325	-41.5%
Ancillary	\$6	591.8%	\$43	84.0%	\$80	\$112	-28.6%

- With \$15.7M paid, the State Active population is 76.1% of total 2025-1Q med spend
- On a Paid PMPM basis, State Actives are up 3.2% compared to prior year
- Total HDHP Plan Paid PMPM trend is +4.3%

PEPY (per employee per year) and **PEPM** (per employee per month) represent amounts per the primary subscriber (employee or retiree).

PMPY (per member per year) and **PMPM** (per member per month) represent amounts per all covered members, including dependents.

Amounts **Per Year (PEPY and PMPY)** have been annualized.

HCCs (High-cost Claimants) are based on patients with \$100,000+ paid medical in the period.

Claim Type: Ancillary includes Durable Medical Equipment, prosthetics, some drugs paid on the medical plan, et al.

Financial Summary – YTD Trend

Active Members



Measure	State Active					Non-State Active				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Average Enrollment										
Employees	13,482	-11.0%	11,996	-4.0%	11,513	2	50.0%	3	11.1%	3
Spouses	2,581	-17.0%	2,142	-9.2%	1,944	1	50.0%	1	-66.7%	0
Children	7,493	-16.7%	6,239	-8.2%	5,725	3	50.0%	4	-75.0%	1
Tot. Members	23,556	-13.5%	20,376	-5.9%	19,182	5	50.0%	8	-41.7%	5
Avg. Family Size	1.7	-2.8%	1.7	-1.9%	1.7	2.7	0.0%	2.7	-47.5%	1.4
Financial Summary										
Allowed	\$10,340,379	126.2%	\$23,394,535	-0.3%	\$23,331,103	\$1,905	326.4%	\$8,122	90.8%	\$15,493
Plan Paid	\$5,153,091	214.2%	\$16,193,581	-2.9%	\$15,729,486	\$0	-	\$4,269	115.0%	\$9,179
Member Paid (OOP)	\$4,650,911	37.0%	\$6,372,943	8.0%	\$6,881,402	\$1,905	102.2%	\$3,852	63.9%	\$6,314
Paid PEPY	\$1,529	253.2%	\$5,400	1.2%	\$5,465	\$0	-	\$5,692	93.5%	\$11,015
Paid PMPY	\$875	263.3%	\$3,179	3.2%	\$3,280	\$0	-	\$2,135	268.6%	\$7,868
Paid PEPM	\$127	253.2%	\$450	1.2%	\$455	\$0	-	\$474	93.5%	\$918
Paid PMPM	\$73	263.3%	\$265	3.2%	\$273	\$0	-	\$178	268.6%	\$656
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	5	240.0%	17	-5.9%	16	0	-	0	-	0
HCCs per 1000	0.2	293.1%	0.8	0.0%	0.8	0.0	-	0.0	-	0.0
Paid per HCC	\$156,539	39.6%	\$218,501	-14.0%	\$188,007	\$0	-	\$0	-	\$0
HCC Paid % of Tot	15.2%	7.7	22.9%	-3.8	19.1%	-	-	0.0%	-	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$136	669.9%	\$1,050	-5.0%	\$997	\$0	-	\$0	-	\$0
Outpatient	\$313	196.7%	\$928	13.9%	\$1,057	\$0	-	-\$472	-	\$3,108
Physician	\$419	177.3%	\$1,163	2.3%	\$1,190	\$0	-	\$2,607	82.6%	\$4,760
Ancillary	\$7	480.3%	\$38	-3.8%	\$37	\$0	-	\$0	-	\$0

Financial Summary – YTD Trend

Retired Members



Measure	State Retirees					Non-State Retirees				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Average Enrollment										
Employees	2,781	-10.2%	2,498	-7.8%	2,303	387	-14.0%	333	-10.5%	298
Spouses	737	-12.9%	642	-9.5%	581	54	-27.2%	39	-20.3%	31
Children	625	-11.4%	554	-9.9%	499	17	-17.6%	14	-14.3%	12
Tot. Members	4,142	-10.8%	3,694	-8.4%	3,383	458	-15.7%	386	-11.7%	341
Avg. Family Size	1.5	-0.7%	1.5	-0.7%	1.5	1.2	-2.0%	1.2	-1.3%	1.1
Financial Summary										
Allowed	\$3,770,848	105.7%	\$7,755,821	27.6%	\$9,894,014	\$1,480,202	1.8%	\$1,507,023	34.8%	\$2,031,507
Plan Paid	\$1,236,097	249.6%	\$4,320,997	5.2%	\$4,545,535	\$138,910	366.2%	\$647,561	-41.1%	\$381,528
Member Paid (OOP)	\$1,486,969	25.8%	\$1,870,067	6.6%	\$1,994,216	\$307,960	-3.6%	\$296,838	15.4%	\$342,448
Paid PEPY	\$1,778	289.1%	\$6,919	14.1%	\$7,894	\$1,436	442.3%	\$7,786	-34.2%	\$5,127
Paid PMPY	\$1,194	292.0%	\$4,679	14.8%	\$5,374	\$1,213	453.1%	\$6,710	-33.3%	\$4,475
Paid PEPM	\$148	289.1%	\$577	14.1%	\$658	\$120	442.3%	\$649	-34.2%	\$427
Paid PMPM	\$99	292.0%	\$390	14.8%	\$448	\$101	453.1%	\$559	-33.3%	\$373
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	1	300.0%	4	100.0%	8	0	-	1	-100.0%	0
HCCs per 1000	0.2	348.5%	1.1	118.3%	2.4	0.0	-	2.6	-100.0%	0.0
Paid per HCC	\$167,310	12.0%	\$187,452	-9.1%	\$170,448	\$0	-	\$139,706	-100.0%	\$0
HCC Paid % of Tot	13.5%	3.8	17.4%	12.6	30.0%	0.0%	-	21.6%	-21.6	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$154	645.9%	\$1,150	-21.9%	\$898	\$222	1690.0%	\$3,982	-62.7%	\$1,486
Outpatient	\$415	286.2%	\$1,601	14.9%	\$1,839	\$322	240.8%	\$1,096	26.3%	\$1,385
Physician	\$621	201.5%	\$1,872	23.0%	\$2,303	\$660	117.6%	\$1,436	13.1%	\$1,624
Ancillary	\$4	1223.4%	\$57	491.2%	\$334	\$9	2020.4%	\$197	-109.5%	-\$19

Financial Summary – Full Year Trend

Plan Totals & Norm



Measure	Total Plan					UMR Norm	
	2023	⇒	2024	⇒	2025-1Q	2025-1Q	Variance
Average Enrollment							
Employees	16,404	-9.9%	14,777	-4.5%	14,117		
Spouses	3,265	-15.3%	2,766	-7.6%	2,557		
Children	7,863	-14.9%	6,691	-6.8%	6,237		
Tot. Members	27,533	-12.0%	24,234	-5.5%	22,911		
Avg. Family Size	1.7	-2.3%	1.6	-1.0%	1.6	1.9	-15.4%
Financial Summary							
Allowed	\$121,418,893	9.3%	\$132,731,482	-73.4%	\$35,272,117		
Plan Paid	\$79,070,065	19.0%	\$94,099,719	-78.0%	\$20,665,729		
Member Paid (OOP)	\$26,629,008	4.3%	\$27,764,440	-66.8%	\$9,224,379		
Paid PEPY	\$4,820	32.1%	\$6,368	-8.0%	\$5,856	\$10,338	-43.4%
Paid PMPY	\$2,872	35.2%	\$3,883	-7.1%	\$3,608	\$5,392	-33.1%
Paid PEPM	\$402	32.1%	\$531	-8.0%	\$488	\$861	-43.4%
Paid PMPM	\$239	35.2%	\$324	-7.1%	\$301	\$449	-33.1%
High-Cost Claimants (Med Paid \$100,000+)							
# of HCCs	108	37.0%	148	-83.8%	24		
HCCs per 1000	3.9	55.7%	6.1	-82.8%	1.0	1.1	-6.9%
Paid per HCC	\$244,463	-5.8%	\$230,303	-20.9%	\$182,154	\$203,568	-10.5%
HCC Paid % of Tot	33.4%	2.8	36.2%	-15.1	21.2%	18.4%	2.8
Cost Distribution by Claim Type (Paid PMPY)							
Inpatient	\$897	39.3%	\$1,249	-20.8%	\$989	\$1,382	-28.4%
Outpatient	\$883	28.7%	\$1,136	3.6%	\$1,178	\$1,573	-25.1%
Physician	\$1,059	36.0%	\$1,440	-5.5%	\$1,361	\$2,325	-41.5%
Ancillary	\$33	71.9%	\$57	39.9%	\$80	\$112	-28.6%

- Total plan paid amount for the first quarter of 2023 was 22.5% of the full year
- Annualizing 2024 paid dollars using the same ratio would result in a total paid of \$91.9 M

PEPY (per employee per year) and **PEPM** (per employee per month) represent amounts per the primary subscriber (employee or retiree).

PMPY (per member per year) and **PMPM** (per member per month) represent amounts per all covered members, including dependents.

Amounts **Per Year (PEPY and PMPY)** have been annualized for the 2024 Plan Year.

HCCs (High-cost Claimants) are based on patients with \$100,000+ paid medical in the period.

Claim Type: Ancillary includes Durable Medical Equipment, prosthetics, some drugs paid on the medical plan, et al.

Financial Summary – Full Year Trend

Active Members



Measure	State Active					Non-State Active				
	2023	⇒	2024	⇒	2025-1Q	2023	⇒	2024	⇒	2025-1Q
Average Enrollment										
Employees	13,323	-9.8%	12,013	-4.2%	11,513	3	30.3%	4	-7.0%	3
Spouses	2,502	-15.8%	2,107	-7.7%	1,944	1	-36.4%	1	-42.9%	0
Children	7,219	-15.1%	6,130	-6.6%	5,725	4	-34.1%	2	-58.6%	1
Tot. Members	23,044	-12.1%	20,250	-5.3%	19,182	7	-10.2%	7	-29.1%	5
Avg. Family Size	1.7	-2.5%	1.7	-1.2%	1.7	2.7	-31.1%	1.8	-23.8%	1.4
Financial Summary										
Allowed	\$83,431,399	15.8%	\$96,646,156	-75.9%	\$23,331,103	\$41,848	96.3%	\$82,160	-81.1%	\$15,493
Plan Paid	\$59,395,971	22.6%	\$72,836,689	-78.4%	\$15,729,486	\$30,169	120.2%	\$66,431	-86.2%	\$9,179
Member Paid (OOP)	\$20,090,146	4.8%	\$21,061,579	-67.3%	\$6,881,402	\$11,813	33.2%	\$15,729	-59.9%	\$6,314
Paid PEPY	\$4,458	36.0%	\$6,063	-9.9%	\$5,465	\$10,970	69.0%	\$18,539	-40.6%	\$11,015
Paid PMPY	\$2,578	39.5%	\$3,597	-8.8%	\$3,280	\$4,114	145.3%	\$10,091	-22.0%	\$7,868
Paid PEPM	\$372	36.0%	\$505	-9.9%	\$455	\$914	69.0%	\$1,545	-40.6%	\$918
Paid PMPM	\$215	39.5%	\$300	-8.8%	\$273	\$343	145.3%	\$841	-22.0%	\$656
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	79	39.2%	110	-85.5%	16	0	-	0	-	0
HCCs per 1000	3.4	58.5%	5.4	-84.6%	0.8	0.0	-	0.0	-	0.0
Paid per HCC	\$245,944	-0.3%	\$245,319	-23.4%	\$188,007	\$0	-	\$0	-	\$0
HCC Paid % of Tot	32.7%	4.3	37.0%	-17.9	19.1%	0.0%	-	0.0%	-	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$820	44.4%	\$1,184	-15.8%	\$997	\$0	-	\$0	-	\$0
Outpatient	\$795	29.9%	\$1,032	2.4%	\$1,057	\$2,193	163.5%	\$5,778	-46.2%	\$3,108
Physician	\$934	42.3%	\$1,329	-10.5%	\$1,190	\$1,898	127.0%	\$4,310	10.4%	\$4,760
Ancillary	\$29	80.3%	\$51	-28.9%	\$37	\$23	-87.5%	\$3	-100.0%	\$0

Financial Summary – Full Year Trend

Retired Members



Measure	State Retirees					Non-State Retirees				
	2023	⇒	2024	⇒	2025-1Q	2023	⇒	2024	⇒	2025-1Q
Average Enrollment										
Employees	2,713	-9.9%	2,443	-5.7%	2,303	366	-13.0%	318	-6.4%	298
Spouses	716	-13.0%	623	-6.7%	581	46	-22.7%	36	-12.4%	31
Children	626	-13.0%	544	-8.4%	499	16	-12.4%	14	-11.7%	12
Tot. Members	4,054	-11.0%	3,610	-6.3%	3,383	427	-14.0%	367	-7.2%	341
Avg. Family Size	1.5	-1.1%	1.5	-0.6%	1.5	1.2	-1.2%	1.2	-0.8%	1.1
Financial Summary										
Allowed	\$29,544,219	5.5%	\$31,168,930	-68.3%	\$9,894,014	\$8,401,427	-42.5%	\$4,834,236	-58.0%	\$2,031,507
Plan Paid	\$16,933,507	12.7%	\$19,082,580	-76.2%	\$4,545,535	\$2,710,419	-22.0%	\$2,114,018	-82.0%	\$381,528
Member Paid (OOP)	\$5,595,993	3.4%	\$5,786,040	-65.5%	\$1,994,216	\$931,057	-3.2%	\$901,093	-62.0%	\$342,448
Paid PEPY	\$6,242	25.1%	\$7,811	1.1%	\$7,894	\$7,414	-10.3%	\$6,648	-22.9%	\$5,127
Paid PMPY	\$4,177	26.5%	\$5,285	1.7%	\$5,374	\$6,343	-9.3%	\$5,755	-22.2%	\$4,475
Paid PEPM	\$520	25.1%	\$651	1.1%	\$658	\$618	-10.3%	\$554	-22.9%	\$427
Paid PMPM	\$348	26.5%	\$440	1.7%	\$448	\$529	-9.3%	\$480	-22.2%	\$373
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	24	54.2%	37	-78.4%	8	3	0.0%	3	-100.0%	0
HCCs per 1000	5.9	73.1%	10.2	-76.9%	2.4	7.0	16.3%	8.2	-100.0%	0.0
Paid per HCC	\$226,331	-22.5%	\$175,418	-2.8%	\$170,448	\$406,605	-56.8%	\$175,672	-100.0%	\$0
HCC Paid % of Tot	32.1%	1.9	34.0%	-4.0	30.0%	45.0%	-20.1	24.9%	-24.9	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$1,066	35.5%	\$1,445	-37.8%	\$898	\$3,426	-14.4%	\$2,932	-49.3%	\$1,486
Outpatient	\$1,318	29.3%	\$1,705	7.9%	\$1,839	\$1,493	-19.6%	\$1,201	15.3%	\$1,385
Physician	\$1,746	17.9%	\$2,058	11.9%	\$2,303	\$1,268	15.2%	\$1,460	11.2%	\$1,624
Ancillary	\$46	66.8%	\$77	332.5%	\$334	\$156	4.0%	\$162	-111.6%	-\$19

Medical Paid Claims by Claim Type

Breakout of State vs. Non-State by Member Status



Claim Type	2024-1Q (7/1/2023 - 9/30/2023)				2025-1Q (7/1/2024 - 9/30/2024)				Trend
	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Total
State Members									
Inpatient	\$5,348,469	\$650,594	\$411,663	\$6,410,726	\$4,781,010	\$518,749	\$240,961	\$5,540,719	-13.6%
Outpatient	\$4,725,589	\$1,243,973	\$234,313	\$6,203,875	\$5,068,565	\$1,394,127	\$161,298	\$6,623,989	6.8%
Physician	\$5,925,791	\$1,257,335	\$470,943	\$7,654,069	\$5,704,402	\$1,670,110	\$277,721	\$7,652,233	0.0%
Ancillary	\$193,732	\$41,939	\$10,237	\$245,908	\$175,509	\$44,069	\$238,501	\$458,080	86.3%
Total	\$16,193,581	\$3,193,842	\$1,127,155	\$20,514,578	\$15,729,486	\$3,627,055	\$918,480	\$20,275,021	-1.2%
PMPM	\$264.91	\$378.69	\$425.85	\$284.10	\$273.33	\$480.07	\$353.95	\$299.50	5.4%
Non-State Members									
Inpatient	\$0	\$33,824	\$350,394	\$384,219	\$0	\$19,363	\$107,314	\$126,677	-67.0%
Outpatient	-\$944	\$53,732	\$52,052	\$104,840	\$3,626	\$65,822	\$52,209	\$121,657	16.0%
Physician	\$5,213	\$51,332	\$87,222	\$143,768	\$5,553	\$38,270	\$100,146	\$143,969	0.1%
Ancillary	\$0	\$853	\$18,152	\$19,005	\$0	\$1,660	-\$3,255	-\$1,596	-108.4%
Total	\$4,269	\$139,741	\$507,821	\$651,831	\$9,179	\$125,115	\$256,413	\$390,707	-40.1%
PMPM	\$177.89	\$459.56	\$594.69	\$551.46	\$655.66	\$592.93	\$315.78	\$376.77	-31.7%
All Members									
Inpatient	\$5,348,469	\$684,419	\$762,057	\$6,794,944	\$4,781,010	\$538,112	\$348,274	\$5,667,396	-16.6%
Outpatient	\$4,724,645	\$1,297,705	\$286,364	\$6,308,714	\$5,072,191	\$1,459,949	\$213,507	\$6,745,646	6.9%
Physician	\$5,931,004	\$1,308,668	\$558,165	\$7,797,837	\$5,709,955	\$1,708,380	\$377,867	\$7,796,202	0.0%
Ancillary	\$193,732	\$42,791	\$28,389	\$264,913	\$175,509	\$45,729	\$235,246	\$456,484	72.3%
Total	\$16,197,850	\$3,333,582	\$1,634,976	\$21,166,409	\$15,738,665	\$3,752,169	\$1,174,894	\$20,665,729	-2.4%
PMPM	\$264.88	\$381.51	\$467.03	\$288.40	\$273.43	\$483.13	\$344.86	\$300.66	4.3%

Medical Cost Distribution

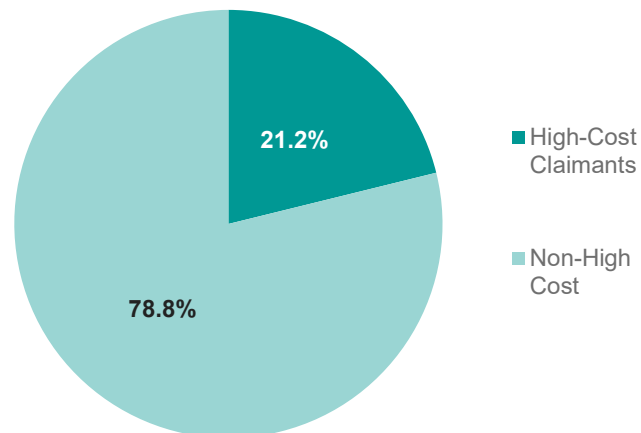
Distribution by Member Cost



Member Total Paid Range	2024-1Q (7/1/2023 - 9/30/2023)						2025-1Q (7/1/2024 - 9/30/2024)					
	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot
No Claims	11,219	42.3%	\$0	0.0%	\$0	0.0%	10,253	41.2%	\$0	0.0%	\$0	0.0%
< \$0 - \$0	5,792	21.8%	-\$397,037	-1.9%	\$1,544,510	18.1%	5,583	22.4%	-\$175,010	-0.8%	\$1,547,335	16.8%
> \$0 - \$2,500	8,407	31.7%	\$3,602,022	17.0%	\$3,822,054	44.7%	7,876	31.6%	\$3,403,912	16.5%	\$4,255,853	46.1%
> \$2,500 - \$5,000	442	1.7%	\$1,541,800	7.3%	\$894,417	10.5%	512	2.1%	\$1,829,492	8.9%	\$1,102,451	12.0%
> \$5,000 - \$10,000	320	1.2%	\$2,230,296	10.5%	\$831,345	9.7%	325	1.3%	\$2,298,853	11.1%	\$885,581	9.6%
> \$10,000 - \$25,000	214	0.8%	\$3,321,339	15.7%	\$819,787	9.6%	229	0.9%	\$3,643,552	17.6%	\$882,857	9.6%
> \$25,000 - \$50,000	80	0.3%	\$2,720,173	12.9%	\$352,850	4.1%	74	0.3%	\$2,563,098	12.4%	\$295,442	3.2%
> \$50,000 - \$100,000	49	0.2%	\$3,543,168	16.7%	\$199,600	2.3%	39	0.2%	\$2,730,136	13.2%	\$151,911	1.6%
> \$100,000	22	0.1%	\$4,604,648	21.8%	\$79,137	0.9%	24	0.1%	\$4,371,696	21.2%	\$102,950	1.1%
Total	26,545	100.0%	\$21,166,409	100.0%	\$8,543,700	100.0%	24,915	100.0%	\$20,665,729	100.0%	\$9,224,379	100.0%

* Unique Members are counted equally regardless of length of coverage. Note that because data is on a paid basis, member counts may also include those not active in the period.

Cost Distribution: HCCs vs. Non-HCCs



HCC Cost Breakout by Diagnostic Chapter

#	Diagnostic Chapter	Patients	Total Paid	% of Tot
1	Injury, Poisoning & External Causes	9	\$1,039,497	23.8%
2	Health Status & Health Services	21	\$699,487	16.0%
3	Circulatory System	17	\$602,162	13.8%
4	Infectious & Parasitic Diseases	7	\$524,740	12.0%
5	Perinatal Originating Conditions	3	\$492,404	11.3%
6	Neoplasms	10	\$365,212	8.4%
7	Musculoskeletal System	12	\$194,834	4.5%
8	Genitourinary System	8	\$154,523	3.5%
9	Endocrine, Nutritional & Metabolic	7	\$121,397	2.8%
10	Digestive System	8	\$87,964	2.0%
...	All Others		\$89,476	2.0%
=	Total	24	\$4,371,696	100.0%

Utilization Summary – YTD Trend

Plan Totals & Norm



Measure	Total Plan					UMR Norm	
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2025-1Q	Variance
Inpatient Admissions							
# of Admits	72	263.9%	262	-7.3%	243		
# of Admit Days	489	448.9%	2,684	-54.0%	1,235		
Paid per Admit	\$33,155	13.0%	\$37,466	-38.2%	\$23,138	\$28,630	-19.2%
Paid per Admit Day	\$4,882	-25.1%	\$3,657	24.5%	\$4,553	\$5,743	-20.7%
Admits per 1000	10.2	318.9%	42.8	-1.0%	42.4	47.8	-11.3%
Average LOS	6.8	50.8%	10.2	-50.4%	5.1	5.0	2.0%
Emergency Room Visits							
# of ER Visits	664	81.8%	1,207	-1.6%	1,188		
~ % resulting in Admit	7.4%	5.5	12.8%	-1.8	11.0%	10.9%	0.2
ER Visits per Patient	1.2	4.3%	1.2	0.2%	1.2		
ER Visits per 1000	94.3	109.3%	197.4	5.1%	207.4	237.5	-12.7%
Paid per ER Visit	\$1,564	33.7%	\$2,092	3.3%	\$2,160	\$2,194	-1.5%
Urgent Care Visits							
# of UC Visits	1,274	41.3%	1,800	-1.0%	1,782		
UC Visits per Patient	1.2	4.5%	1.2	-0.2%	1.2		-
UC Visits per 1000	181.0	62.6%	294.3	5.7%	311.1	246.8	26.1%
Paid per UC Visit	\$25	-11.1%	\$23	28.8%	\$29	\$112	-74.1%
Office Visits							
Off Visits per Patient	1.8	17.7%	2.1	5.6%	2.2		
Paid per Office Visit	\$19	61.8%	\$31	6.2%	\$33	\$90	-63.6%
Office Visits Paid PMPY	\$42	168.7%	\$114	13.3%	\$129	\$350	-63.1%
Services							
Radiology Svcs per 1000	1,767.8	97.4%	3,490.1	23.5%	4,309.0	4,009.8	7.5%
Radiology Paid PMPY	\$86	171.6%	\$234	9.7%	\$256		
Lab Services per 1000	6,018.3	60.8%	9,677.6	13.1%	10,947.2	11,268.9	-2.9%
Labs Paid PMPY	\$59	148.1%	\$147	19.8%	\$176		

- Inpatient Admission rate per 1000 decreased 1.0%, and amount paid per Admission is significantly (-38.2%) lower than prior period
- ER utilization increased 5.1%, and amount paid per ER visit is 3.3% higher than prior period

Admissions and all other **Visits** are counted for utilization if the *initial Paid Date* for the first primary claim (facility claim for non-Office Visits) fell within the time period. For cost purposes, however, all visit costs paid within the time period are included.

Counts **per 1000** and amounts **PMPY** (per member per year) have been annualized.

Utilization Summary – YTD Trend

Active Members



Measure	State Active					Non-State Active				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Inpatient Admissions										
# of Admits	58	231.0%	192	-3.6%	185	0	-	0	-	0
# of Admit Days	401	451.4%	2,211	-57.2%	946	0	-	0	-	0
Paid per Admit	\$32,465	22.3%	\$39,710	-35.4%	\$25,649	\$0	-	\$0	-	\$0
Paid per Admit Day	\$4,696	-26.6%	\$3,448	45.5%	\$5,016	\$0	-	\$0	-	\$0
Admits per 1000	9.8	282.7%	37.7	2.4%	38.6	0.0	-	0.0	-	0.0
Average LOS	6.9	66.6%	11.5	-55.6%	5.1	0.0	-	0.0	-	0.0
Emergency Room Visits										
# of ER Visits	527	75.5%	925	5.5%	976	0	-	0	-	1
~ % resulting in Admit	7.2%	4.0	11.2%	-1.0	10.2%	0.0%	-	0.0%	-	0.0%
ER Visits per Patient	1.1	2.9%	1.2	2.5%	1.2	0.0	-	0.0	-	1.0
ER Visits per 1000	89.5	102.9%	181.6	12.1%	203.5	0.0	-	0.0	-	857.1
Paid per ER Visit	\$1,476	52.1%	\$2,245	-1.1%	\$2,221	\$0	-	\$0	-	\$4,710
Urgent Care Visits										
# of UC Visits	1,109	40.7%	1,560	-1.2%	1,542	1	0.0%	1	-100.0%	0
UC Visits per Patient	1.2	3.7%	1.2	0.2%	1.2	1.0	0.0%	1.0	-100.0%	0.0
UC Visits per 1000	188.3	62.6%	306.2	5.0%	321.5	750.0	-33.3%	500.0	-100.0%	0.0
Paid per UC Visit	\$26	-12.7%	\$23	27.1%	\$29	\$0	-	\$0	-	\$0
Office Visits										
Off Visits per Patient	1.7	15.3%	2.0	6.0%	2.1	2.0	-16.7%	1.7	-40.0%	1.0
Paid per Office Visit	\$19	64.0%	\$32	2.6%	\$33	\$0	-	\$100	-25.0%	\$75
Office Visits Paid PMPY	\$39	173.0%	\$107	9.0%	\$117	\$0	-	\$250	-74.3%	\$64
Services										
Radiology Svcs per 1000	1,533.3	96.2%	3,008.8	24.5%	3,747.4	3,750.0	-6.7%	3,500.0	-51.0%	1,714.3
Radiology Paid PMPY	\$75	186.6%	\$215	-1.6%	\$211	\$0	-	\$2,357	-90.4%	\$226
Lab Services per 1000	5,745.0	57.6%	9,052.9	12.9%	10,218.4	750.0	33.3%	1,000.0	157.1%	2,571.4
Labs Paid PMPY	\$56	145.5%	\$138	24.6%	\$172	\$0	-	\$0	-	\$612

Utilization Summary – YTD Trend

Retired Members



Measure	State Retirees					Non-State Retirees				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Inpatient Admissions										
# of Admits	8	600.0%	56	-17.9%	46	6	133.3%	14	-14.3%	12
# of Admit Days	51	668.6%	392	-42.3%	226	37	118.9%	81	-22.2%	63
Paid per Admit	\$47,084	-28.7%	\$33,555	-48.0%	\$17,443	\$21,249	5.1%	\$22,338	-71.9%	\$6,267
Paid per Admit Day	\$7,386	-35.1%	\$4,794	-25.9%	\$3,550	\$3,446	12.1%	\$3,861	-69.1%	\$1,194
Admits per 1000	7.7	684.9%	60.6	-10.3%	54.4	52.4	176.9%	145.1	-3.0%	140.8
Average LOS	6.4	9.8%	7.0	-29.8%	4.9	6.2	-6.2%	5.8	-9.3%	5.3
Emergency Room Visits										
# of ER Visits	123	87.0%	230	-21.7%	180	14	271.4%	52	-40.4%	31
~ % resulting in Admit	4.9%	10.8	15.7%	-0.7	15.0%	35.7%	-6.9	28.8%	-15.9	12.9%
ER Visits per Patient	1.2	4.8%	1.3	-2.4%	1.2	1.3	27.7%	1.6	-26.6%	1.2
ER Visits per 1000	118.8	109.7%	249.1	-14.6%	212.8	122.3	340.7%	538.9	-32.5%	363.6
Paid per ER Visit	\$1,903	0.2%	\$1,907	7.6%	\$2,053	\$1,916	-90.8%	\$175	349.4%	\$789
Urgent Care Visits										
# of UC Visits	151	44.4%	218	-1.8%	214	13	61.5%	21	23.8%	26
UC Visits per Patient	1.1	9.1%	1.2	-2.4%	1.2	1.2	11.1%	1.3	-5.7%	1.2
UC Visits per 1000	145.8	61.9%	236.1	7.2%	253.0	113.5	91.7%	217.6	40.1%	305.0
Paid per UC Visit	\$21	11.5%	\$23	30.1%	\$30	\$29	-72.8%	\$8	330.3%	\$33
Office Visits										
Off Visits per Patient	1.8	23.7%	2.3	5.0%	2.4	2.2	41.7%	3.2	3.0%	3.3
Paid per Office Visit	\$19	56.3%	\$30	16.9%	\$35	\$12	32.0%	\$15	36.0%	\$21
Office Visits Paid PMPY	\$58	155.3%	\$149	29.3%	\$193	\$62	122.7%	\$139	38.3%	\$192
Services										
Radiology Svcs per 1000	2,996.8	82.2%	5,460.3	21.5%	6,632.4	2,690.0	273.3%	10,041.5	28.3%	12,879.8
Radiology Paid PMPY	\$138	144.7%	\$338	52.2%	\$514	\$181	-3.7%	\$174	27.5%	\$222
Lab Services per 1000	7,072.3	67.4%	11,841.1	22.2%	14,474.2	10,602.6	108.8%	22,134.7	-22.9%	17,067.4
Labs Paid PMPY	\$80	149.2%	\$199	2.9%	\$205	\$39	279.7%	\$147	-1.3%	\$146

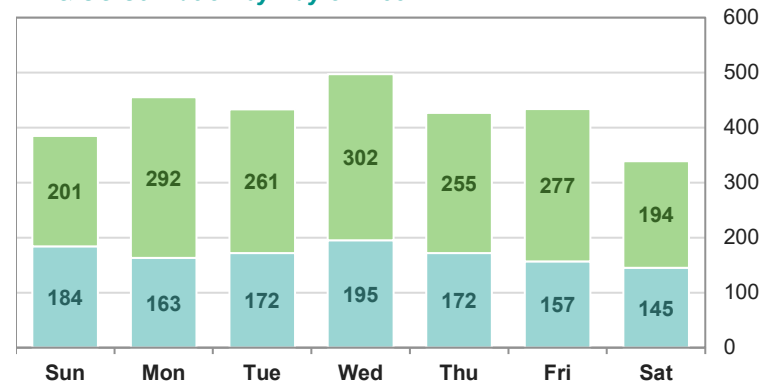
On Demand Care Summary

Emergency Room & Urgent Care

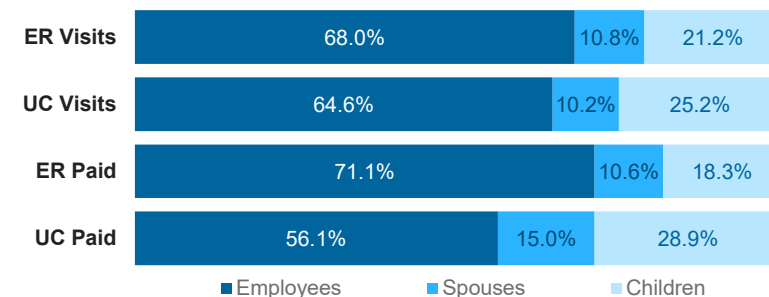


Measure	2024-1Q	2025-1Q	Change	UMR Norm	Variance
Emergency Room					
# of Visits	1,207	1,188	-1.6%		
# of Patients	1,002	984	-1.8%		
Total Plan Paid	\$2,524,690	\$2,566,364	1.7%		
Total Mem Paid	\$1,477,334	\$1,647,815	11.5%		
Visits per 1000	197.4	207.4	5.1%	237.5	-12.7%
Paid per Visit	\$2,092	\$2,160	3.3%	\$2,194	-1.5%
Paid PMPM	\$34	\$37	8.5%	\$43	-14.0%
% ER Patients w/ Office Visit*	89.8%	88.4%	-1.4		
% Potentially Avoidable**	13.5%	17.3%	3.8	15.7%	1.6
Urgent Care					
# of Visits	1,800	1,782	-1.0%		
# of Patients	1,492	1,480	-0.8%		
Total Plan Paid	\$40,603	\$51,785	27.5%		
Total Mem Paid	\$247,777	\$260,680	5.2%		
Visits per 1000	294.3	311.1	5.7%	246.8	26.1%
Paid per Visit	\$23	\$29	28.8%	\$112	-74.1%
Paid PMPM	\$1	\$1	36.2%	\$2	-67.3%

ER & UC Utilization by Day of Week



ER & UC Utilization & Cost by Relationship



	# of Visits			Total Paid		
	ER	UC	Total	ER	UC	Total
Employee	808	1,151	1,959	\$1,823,975	\$29,052	\$1,853,027
Spouse	128	182	310	\$271,581	\$7,749	\$279,330
Child	252	449	701	\$470,808	\$14,984	\$485,792
Total	1,188	1,782	2,970	\$2,566,364	\$51,785	\$2,618,149

* Office Visit within prior 12 months..

** ER Visits are categorized as potentially avoidable based on primary and secondary diagnosis and do not necessarily indicate misuse of the ER for the patient's specific circumstances.

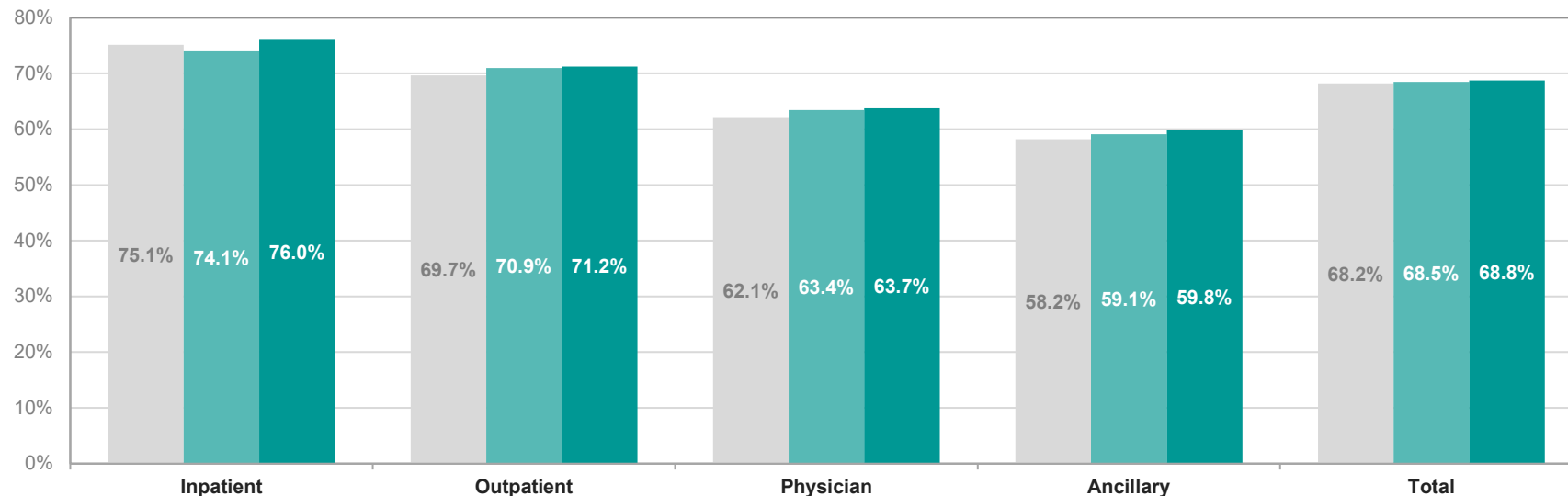
Network Summary

Discount Percentage & Network Utilization

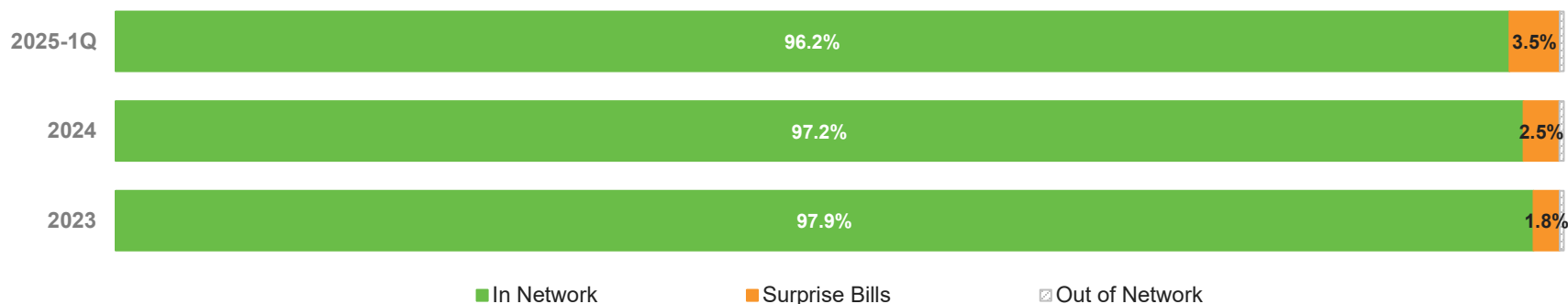


Discount Percentage* by Claim Type

Plan Year: 2023 2024 2025-1Q



Network Utilization*



* Network Discounts and Utilization exclude COB Claims, and Network Discounts additionally exclude Surprise Bills.

Clinical Classification Summary

Breakout by Diagnostic Chapter



Diagnostic Chapter	2024 (Full Year)		2025-1Q		CYTD Paid by Relationship			CYTD Paid by Sex	
	Patients	Total Paid	Patients	Total Paid	Employee	Spouse	Child	Male	Female
Health Status & Health Services	14,301	\$11,677,955	6,017	\$3,103,800	\$2,235,217	\$387,240	\$481,343	\$1,250,477	\$1,853,324
Musculoskeletal System	6,363	\$8,891,851	3,087	\$2,304,499	\$1,784,331	\$363,756	\$156,413	\$923,083	\$1,381,416
Circulatory System	4,299	\$10,388,505	1,915	\$2,169,358	\$1,358,767	\$260,893	\$549,699	\$1,169,893	\$999,465
Injury, Poisoning & External Causes	3,089	\$6,988,732	1,061	\$2,128,362	\$1,576,570	\$168,425	\$383,368	\$1,380,488	\$747,874
Neoplasms	3,094	\$9,469,226	1,311	\$1,466,683	\$1,127,966	\$324,826	\$13,890	\$650,626	\$816,057
Digestive System	2,673	\$7,363,331	1,062	\$1,306,591	\$1,128,633	\$113,702	\$64,256	\$730,878	\$575,713
Genitourinary System	4,239	\$4,643,464	1,683	\$1,235,340	\$1,069,221	\$101,960	\$64,159	\$517,609	\$717,731
Symptoms, Signs & Findings, NEC	8,898	\$4,971,465	3,568	\$1,005,172	\$781,153	\$102,751	\$121,268	\$413,365	\$591,807
Infectious & Parasitic Diseases	1,853	\$2,544,375	605	\$879,108	\$706,589	\$145,096	\$27,423	\$643,437	\$235,671
Nervous System	2,989	\$4,637,075	1,390	\$819,014	\$468,839	\$150,466	\$199,709	\$293,869	\$525,145
Mental, Behavioral & Neurodevelopmental	3,269	\$4,218,922	1,790	\$798,047	\$266,558	\$47,449	\$484,040	\$353,874	\$444,173
Endocrine, Nutritional & Metabolic	6,419	\$3,708,461	3,005	\$745,736	\$643,725	\$67,615	\$34,396	\$333,969	\$411,767
Perinatal Originating Conditions	213	\$2,826,203	68	\$689,090	\$127	\$0	\$688,962	\$545,084	\$144,006
Respiratory System	5,447	\$3,963,399	1,544	\$607,103	\$296,404	\$170,032	\$140,666	\$236,341	\$370,762
Pregnancy, Childbirth & the Puerperium	418	\$2,643,975	196	\$482,890	\$313,973	\$122,024	\$46,892	\$2,755	\$480,135
Skin & Subcutaneous Tissue	4,799	\$1,211,542	1,895	\$333,289	\$285,650	\$37,277	\$10,362	\$135,698	\$197,590
Eye and Adnexa	4,994	\$1,059,135	1,530	\$191,810	\$159,374	\$21,791	\$10,645	\$84,909	\$106,901
Ear and Mastoid Process	1,692	\$574,395	474	\$162,866	\$135,489	\$9,644	\$17,732	\$126,061	\$36,805
Blood & Immune Disorders	932	\$1,640,703	377	\$149,772	\$114,288	\$13,120	\$22,365	\$50,283	\$99,489
Congenital Malformations & Abnormalities	260	\$676,174	87	\$87,199	\$47,319	\$2,414	\$37,466	\$29,805	\$57,393
External Causes of Morbidity	6	\$832	0	\$0	\$0	\$0	\$0	\$0	\$0
Total	22,265	\$94,099,719	14,086	\$20,665,729	\$14,500,193	\$2,610,482	\$3,555,053	\$9,872,505	\$10,793,224

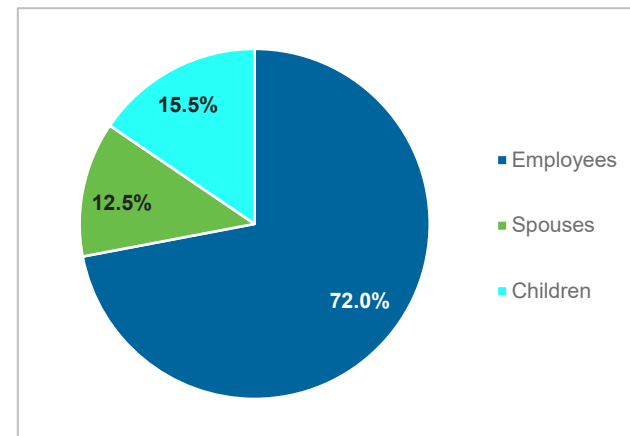
Health Status & Health Services

Breakout by Diagnostic Grouping & Demographics

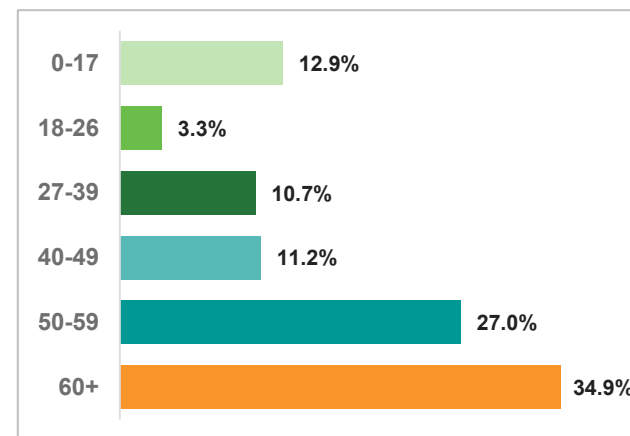


#	Health Status & Services Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Encounter for antineoplastic therapies	44	246	\$1,130,197	36.4%
2	Neoplasm-related encounters	1,371	2,091	\$593,084	19.1%
3	Medical examination/evaluation	3,734	5,076	\$549,905	17.7%
4	Exposure, enc, screen or contact w infectious dz	1,304	1,609	\$323,777	10.4%
5	Contraceptive & procreative management	225	302	\$134,091	4.3%
6	Implant, device or graft related encounter	146	308	\$107,459	3.5%
7	Other aftercare encounter	203	326	\$68,419	2.2%
8	Personal/family history of disease	231	330	\$63,752	2.1%
9	Other specified status	322	447	\$29,998	1.0%
10	Encount for obs & exam for conds ruled out	469	543	\$23,845	0.8%
11	Organ transplant status	22	55	\$22,733	0.7%
12	Other specified encounters & counseling	99	251	\$16,783	0.5%
13	Acquired absence of limb or organ	13	22	\$12,317	0.4%
14	Encounter for prophylactic or oth procedures	12	12	\$10,084	0.3%
15	Lifestyle/life management factors	17	33	\$8,173	0.3%
16	Enc for prophylactic measures (ex immuniz)	18	28	\$3,164	0.1%
17	Encounter for mental health conditions	264	269	\$2,573	0.1%
18	Encounter for administrative purposes	9	10	\$2,245	0.1%
19	Socioeconomic/psychosocial factors	6	10	\$542	0.0%
20	Carrier status	3	10	\$474	0.0%
...	All Others	22	24	\$184	0.0%
=	Total	6,017	12,769	\$3,103,800	100.0%

Health Status & Services Paid by Relationship



Health Status & Services Paid by Age Range

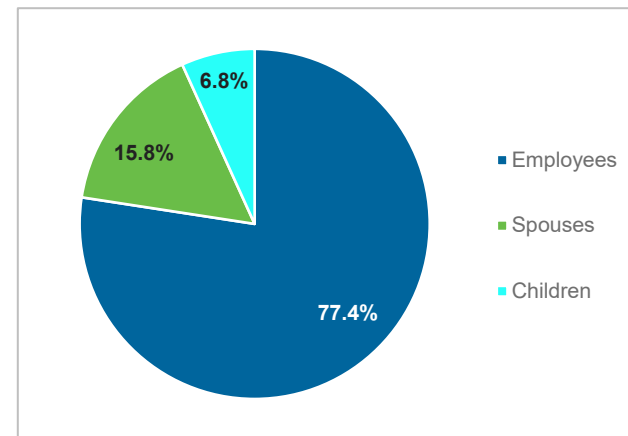


Musculoskeletal System

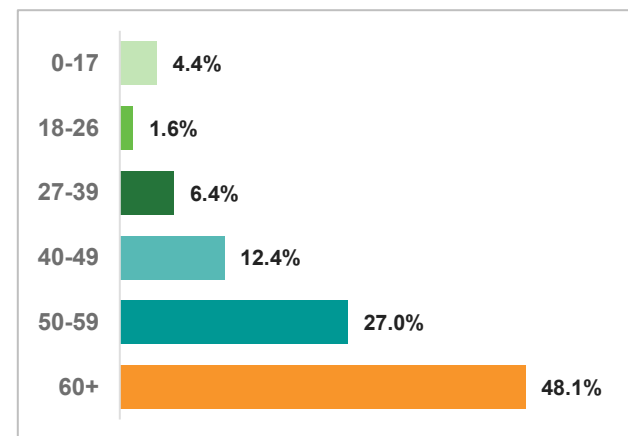
Breakout by Diagnostic Grouping & Demographics

#	Musculoskeletal Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Spondylopathies & arthropathy	808	2,412	\$867,452	37.6%
2	Osteoarthritis & osteoporosis	453	1,042	\$572,820	24.9%
3	Scoliosis & oth deformities	193	334	\$223,646	9.7%
4	Other musculoskeletal pain	1,426	3,745	\$219,472	9.5%
5	Tendon, tissue, muscle disorders	553	1,310	\$138,316	6.0%
6	Joint disorders & fractures	160	276	\$91,383	4.0%
7	Low back pain	363	1,002	\$84,027	3.6%
8	Other MSK	59	116	\$55,347	2.4%
9	Rheumatoid arthritis & related disease	77	154	\$28,481	1.2%
10	Lupus	53	113	\$9,828	0.4%
11	Biomechanical lesions	270	774	\$9,595	0.4%
12	Gout & crystal arthropathies	58	86	\$4,132	0.2%
=	Total	3,087	12,377	\$2,304,499	100.0%

Musculoskeletal Paid by Relationship



Musculoskeletal Paid by Age Range



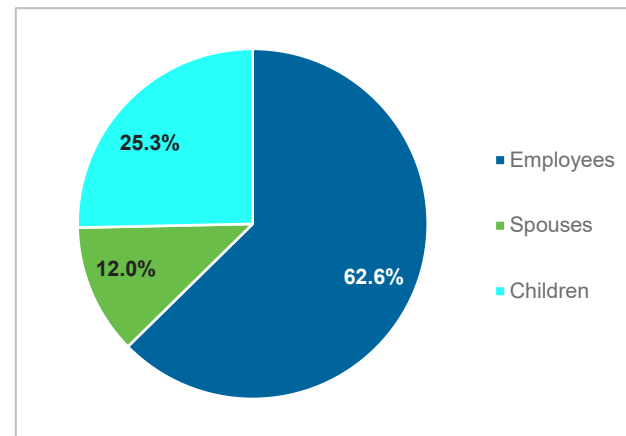
Circulatory System

Breakout by Diagnostic Grouping & Demographics

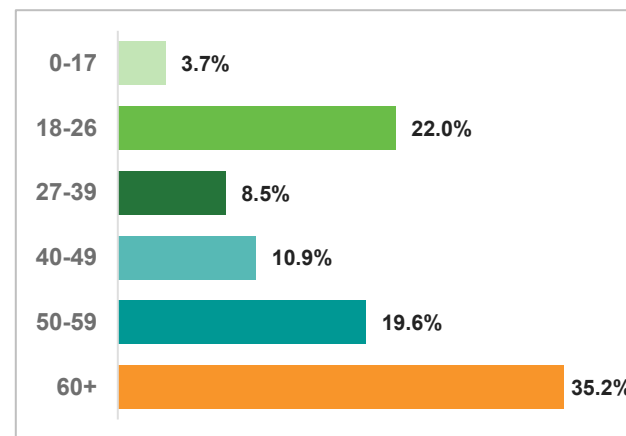


#	Circulatory System Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Coronary atherosclerosis & oth heart disease	256	494	\$469,064	21.6%
2	Other circulatory	72	122	\$400,083	18.4%
3	Cerebrovascular disease	73	215	\$310,532	14.3%
4	Cardiac dysrhythmias	278	618	\$289,402	13.3%
5	Nonspecific chest pain	395	719	\$223,873	10.3%
6	Acute pulmonary embolism, DVT	47	108	\$115,081	5.3%
7	Hypertension	1,038	1,558	\$105,073	4.8%
8	Vascular disease	128	237	\$99,317	4.6%
9	Heart failure	76	167	\$95,752	4.4%
10	Myocardial infarction	13	58	\$37,814	1.7%
11	Myocarditis & cardiomyopathy	18	40	\$18,932	0.9%
12	Nonrheumatic & unspecified valve disorders	73	107	\$4,436	0.2%
=	Total	1,915	5,096	\$2,169,358	100.0%

Circulatory System Paid by Relationship



Circulatory System Paid by Age Range



Mental & Behavioral Trend

Prevalence & Cost by Diagnostic Grouping

Mental & Behavioral Diagnostic Grouping	2023 (Full Year)		2024 (Full Year)		2025-1Q		2025-1Q Paid by Claim Type			
	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid	Inpatient	Outpatient	Physician	Ancillary
Neurodevelopmental disorders	440	\$812,021	502	\$1,242,281	255	\$337,308	\$0	\$44,311	\$292,997	\$0
Depressive disorders	850	\$890,095	1,005	\$728,698	489	\$134,488	\$55,857	\$7,202	\$69,471	\$1,958
Alcohol-related disorders	109	\$462,127	124	\$806,533	46	\$97,661	\$61,111	\$9,139	\$27,411	\$0
Anxiety & related Disorders	1,099	\$265,201	1,199	\$362,534	568	\$65,855	\$9,232	\$11,187	\$45,436	\$0
Trauma & stressor disorders	617	\$182,525	760	\$288,426	416	\$58,749	\$0	\$3,687	\$55,062	\$0
Bipolar & related Disorders	133	\$160,245	172	\$99,260	101	\$29,870	\$17,198	\$0	\$12,671	\$0
Suicidal ideation, attempt or self-harm	50	\$204,626	51	\$205,797	16	\$28,511	\$0	\$27,129	\$1,382	\$0
Other mental health	254	\$144,260	261	\$122,179	122	\$14,790	\$0	\$1,482	\$8,867	\$4,440
Schizophrenia spectrum disorders	45	\$164,022	48	\$121,142	17	\$13,955	\$8,983	\$2,537	\$2,400	\$35
Cannabis-related disorders	25	\$7,995	24	\$15,571	9	\$4,219	\$0	\$3,443	\$776	\$0
Obsessive compulsive disorders	57	\$38,034	54	\$72,146	36	\$3,792	\$0	\$0	\$3,792	\$0
Eating disorders	24	\$110,628	30	\$83,704	11	\$3,649	\$0	\$0	\$3,649	\$0
Other substance use	72	\$7,648	105	\$12,324	26	\$2,574	\$0	\$0	\$908	\$1,666
Opiod disorders	31	\$43,726	34	\$37,172	20	\$1,896	\$0	\$0	\$1,896	\$0
Stimulant disorders	8	\$29,616	7	\$21,155	4	\$731	\$0	\$0	\$731	\$0
Total	2,916	\$3,522,768	3,269	\$4,218,922	1,790	\$798,047	\$152,381	\$110,117	\$527,450	\$8,100

Chronic Conditions

Prevalence & Severity of 24 Chronic Conditions



Chronic Condition	With Condition			Moderate/High Risk Condition					
	# of Mems	Mems per 1000	Change vs LY	# of Mems	Mems per 1000	Change vs LY	Allowed PMPY	Admits per 1000	ER Visits per 1000
Affective Psychosis	44	1.8	15.8%	29	1.2	26.1%	\$7,210	113.6	409.1
Asthma	620	25.6	-7.3%	252	10.4	-2.3%	\$6,765	69.4	291.9
Atrial Fibrillation	218	9.0	-5.2%	157	6.5	2.6%	\$29,146	334.9	701.8
Blood Disorders	914	37.7	3.6%	400	16.5	0.5%	\$19,053	198.0	358.9
CAD	394	16.3	-1.7%	217	9.0	-0.5%	\$20,406	192.9	421.3
COPD	111	4.6	-2.6%	74	3.1	15.6%	\$29,937	423.4	837.8
Cancer	1,775	73.2	-5.5%	909	37.5	-3.4%	\$14,923	108.2	201.7
Chronic Pain	123	5.1	-24.5%	57	2.4	-31.3%	\$63,868	642.3	756.1
CHF	81	3.3	5.2%	42	1.7	-10.6%	\$54,067	703.7	1,074.1
Demyelinating Diseases	67	2.8	-11.8%	48	2.0	-14.3%	\$25,752	149.3	432.8
Depression	965	39.8	6.9%	628	25.9	11.9%	\$8,418	116.1	342.0
Diabetes	1,459	60.2	-2.6%	1,014	41.8	-4.5%	\$10,957	91.8	259.8
ESRD	115	4.7	11.7%	95	3.9	11.8%	\$80,795	1,287.0	1,765.2
Eating Disorders	24	1.0	-7.7%	11	0.5	-38.9%	\$20,237	291.7	708.3
HIV/AIDS	36	1.5	-20.0%	28	1.2	-20.0%	\$8,714	27.8	305.6
Hyperlipidemia	814	33.6	-1.5%	273	11.3	-3.9%	\$3,084	19.7	65.1
Hypertension	2,424	100.0	-3.7%	1,161	47.9	-0.3%	\$8,552	84.2	243.8
Immune Disorders	58	2.4	1.8%	25	1.0	0.0%	\$27,342	206.9	431.0
IBD	62	2.6	8.8%	12	0.5	33.3%	\$1,628	16.1	112.9
Liver Disease	8	0.3	-27.3%	6	0.2	-33.3%	\$114,138	2,500.0	2,375.0
Morbid Obesity	218	9.0	14.7%	98	4.0	8.9%	\$8,077	114.7	247.7
Osteoarthritis	853	35.2	-10.2%	379	15.6	-9.5%	\$9,576	50.4	153.6
Peripheral Vascular Disease	129	5.3	-3.7%	42	1.7	2.4%	\$16,908	186.0	310.1
Rheumatoid Arthritis	118	4.9	-12.6%	89	3.7	-3.3%	\$11,827	76.3	313.6

- Most prevalent chronic condition is Hypertension, with 2,424 members
- Hypertension is also the condition with the most moderate/high risk members (1,161)
- Members with mod/high risk Cancer have the highest combined cost: 909 members totaling \$13.6M

Date Range: Service Dates 7/1/2023 - 6/30/2024, Paid through 9/30/2024

With Condition members are identified by having any covered claim with a diagnosis for the condition in Dx position 1.

Moderate/High-Risk Condition members had either multiple provider visits for the condition (based on Dx position 1) during the date range or at least one ER Visit or Admission for the condition in the range.

Cost & Utilization for All Members:

- Allowed PMPY: \$5,262
- Admits per 1000: 42.4
- ER Visits per 1000: 187.2

Prevention, Wellness, & Maintenance

Preventive & Condition-specific Screening Rate Trends



Preventive Service	Population	Jul 2022 - Jun 2023			Jul 2023 - Jun 2024			Rate Change	UMR Norm	
		Eligible	Actual	Rate	Eligible	Actual	Rate		Rate	Variance
Well Visits	Rate for Well Baby & Well Child is Visits per 1,000. Rate for adults is the percentage who had a well visit.									
Well Baby Visit	0 - 15 months	196.3	1,022	5,207.4	144.2	814	5,646.7	8.4%	5,262.6	7.3%
Well Child Visit	3 - 6 years	951.4	673	707.4	767.8	587	764.5	8.1%	781.1	-2.1%
Adults w/ Well Visit	Adults 18+	22,485	7,852	34.9%	20,020	7,265	36.3%	1.4	40.0%	-3.7
Screenings	Rate for all screenings is the percentage of eligible population who had the screening during the period.									
Mammogram	Females 40 - 69	7,030	2,927	41.6%	6,259	2,657	42.4%	0.8	46.8%	-4.3
Cervical Cancer	Females 21 - 64	10,291	2,541	24.7%	9,023	2,245	24.9%	0.2	23.7%	1.2
Prostate Cancer	Males 50 - 70	4,292	1,617	37.7%	3,852	1,548	40.2%	2.5	41.1%	-0.9
Colorectal Cancer	Members 45 - 75	11,610	1,636	14.1%	10,377	1,629	15.7%	1.6	17.1%	-1.4
Cholesterol	Female 45+ Male 35+	13,867	6,225	44.9%	12,474	5,904	47.3%	2.4	47.3%	0.0
Condition-specific	Screening									
Asthma	Office Visit for Asthma	669	516	77.1%	620	503	81.1%	4.0		
COPD	Spirometry Test	114	19	16.7%	111	19	17.1%	0.5		
Type 2 Diabetes	A1c Test	1,402	1,172	83.6%	1,372	1,174	85.6%	2.0	86.0%	-0.5
	Eye Exam	1,402	369	26.3%	1,372	369	26.9%	0.6	25.5%	1.4
	Lipid Panel	1,402	1,056	75.3%	1,372	1,023	74.6%	-0.8	72.1%	2.5
	Urine Protein Test	1,402	892	63.6%	1,372	872	63.6%	-0.1	63.0%	0.6
	Any Diabetes Screen	1,402	1,282	91.4%	1,372	1,285	93.7%	2.2	93.8%	-0.1
Hyperlipidemia	Lipid Profile	826	403	48.8%	814	431	52.9%	4.2		
Hypertension	Creatinine Test	2,516	468	18.6%	2,424	475	19.6%	1.0		
	Lipid Profile	2,516	662	26.3%	2,424	633	26.1%	-0.2		

Date Range: Reporting periods are service-based with 3 months of runout: Current period is Service Dates 7/1/2023 - 6/30/2024, Paid through 9/30/2024

Note: Preventive Services do not include those performed at onsite clinics or ones for which no claim was submitted to UMR.

**Public Employees' Benefits Program - RX Costs
PY 2025 - Quarter Ending September 30, 2024**

Express Scripts

1Q FY2025 CDHP		1Q FY2024 CDHP	Difference	% Change
Membership Summary			Membership Summary	
Member Count (Membership)	22,775	24,365	(1,590)	-6.5%
Utilizing Member Count (Patients)	11,103	11,703	(600)	-5.1%
Percent Utilizing (Utilization)	48.8%	48.0%	0.01	1.5%
Claim Summary			Claims Summary	
Net Claims (Total Rx's)	82,174	83,031	(857)	-1.0%
Claims per Elig Member per Month (Claims PMPM)	1.20	1.14	0.06	5.3%
Total Claims for Generic (Generic Rx)	71,706	72,817	(1,111.00)	-1.5%
Total Claims for Brand (Brand Rx)	10,468	10,214	254.00	2.5%
Total Claims for Brand w/Gen Equiv (Multisource Brand Claims)	146	315	(169.00)	-53.7%
Total Non-Specialty Claims	81,152	82,077	(925.00)	-1.1%
Total Specialty Claims	1,022	954	68.00	7.1%
Generic % of Total Claims (GFR)	87.3%	87.7%	(0.00)	-0.5%
Generic Effective Rate (GCR)	99.8%	99.6%	0.00	0.2%
Mail Order Claims	21,457	23,453	(1,996.00)	-8.5%
Mail Penetration Rate*	29.5%	31.8%	(0.02)	-2.3%
Claims Cost Summary			Claims Cost Summary	
Total Prescription Cost (Total Gross Cost)	\$11,164,795	\$10,204,216	\$960,579.00	9.4%
Total Generic Gross Cost	\$1,087,557	\$1,027,449	\$60,108.00	5.9%
Total Brand Gross Cost	\$10,077,238	\$9,176,768	\$900,470.00	9.8%
Total MSB Gross Cost	\$108,548	\$139,084	(\$30,536.00)	-22.0%
Total Ingredient Cost	\$10,794,006	\$9,854,938	\$939,068.00	9.5%
Total Dispensing Fee	\$364,500	\$342,436	\$22,064.00	6.4%
Total Other (e.g. tax)	\$6,738	\$9,843	(\$3,105.00)	-31.5%
Avg Total Cost per Claim (Gross Cost/Rx)	\$135.87	\$122.90	\$12.97	10.6%
Avg Total Cost for Generic (Gross Cost/Generic Rx)	\$15.17	\$14.11	\$1.06	7.5%
Avg Total Cost for Brand (Gross Cost/Brand Rx)	\$962.67	\$898.45	\$64.22	7.1%
Avg Total Cost for MSB (MSB Gross Cost/MSB ARx)	\$743.48	\$441.54	\$301.94	68.4%
Member Cost Summary			Member Cost Summary	
Total Member Cost	\$2,840,749	\$2,535,118	\$305,631.00	12.1%
Total Copay	\$615,586	\$1,771,104	(\$1,155,518.00)	-65.2%
Total Deductible	\$2,225,163	\$764,014	\$1,461,149.00	191.2%
Avg Copay per Claim (Copay/Rx)	\$7.49	\$21.33	(\$13.84)	-64.9%
Avg Participant Share per Claim (Copay+Deductible/RX)	\$34.57	\$30.53	\$4.04	13.2%
Avg Copay for Generic (Copay/Generic Rx)	\$8.58	\$7.59	\$0.99	13.0%
Avg Copay for Brand (Copay/Brand Rx)	\$212.57	\$194.12	\$18.45	9.5%
Avg Copay for Brand w/ Generic Equiv (Copay/Multisource Rx)	\$293.39	\$110.45	\$182.94	165.6%
Net PMPM (Participant Cost PMPM)	\$41.58	\$34.68	\$6.89	19.9%
Copay % of Total Prescription Cost (Member Cost Share %)	25.4%	24.8%	0.6%	2.4%
Plan Cost Summary			Plan Cost Summary	
Total Plan Cost (Plan Cost)	\$8,324,046	\$7,669,098	\$654,948.00	8.5%
Total Non-Specialty Cost (Non-Specialty Plan Cost)	\$3,234,650	\$2,975,141	\$259,509.00	8.7%
Total Specialty Drug Cost (Specialty Plan Cost)	\$5,089,396	\$4,693,927	\$395,469.00	8.4%
Avg Plan Cost per Claim (Plan Cost/Rx)	\$101.30	\$92.36	\$8.93	9.7%
Avg Plan Cost for Generic (Plan Cost/Generic Rx)	\$6.58	\$6.52	\$0.06	0.9%
Avg Plan Cost for Brand (Plan Cost/Brand Rx)	\$750.10	\$704.33	\$45.77	6.5%
Avg Plan Cost for MSB (MSB Plan Cost/MSB ARx)	\$450.08	\$331.09	\$118.99	35.9%
Net PMPM (Plan Cost PMPM)	\$121.83	\$104.92	\$16.91	16.1%
PMPM without Specialty (Non-Specialty PMPM)	\$47.34	\$40.70	\$6.64	16.3%
PMPM for Specialty Only (Specialty PMPM)	\$74.49	\$64.22	\$10.27	16.0%
Specialty % of Plan Cost	61.1%	61.20%	(\$0.00)	-0.2%
Rebates Received (Q1 FY2024 actual)	\$5,029,261	\$3,120,343	\$1,908,917.96	61.2%
Net PMPM (Plan Cost PMPM factoring Rebates)	\$48.22	\$62.23	(\$14.01)	-22.5%
PMPM without Specialty (Non-Specialty PMPM)	\$21.02	\$20.86	\$0.16	0.8%
PMPM for Specialty Only (Specialty PMPM)	\$47.16	\$41.51	\$5.65	13.6%

Appendix B

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PEBP

Public Employees' Benefits Program

Quarterly Plan Performance Review

Low Ded Plan • 2025-1Q



A UnitedHealthcare Company

Report Criteria & Contents



Experience Periods*

➤ 2025 Plan Year (Current)

2025-1Q.1st Quarter: Claims Paid 7/1/2024 - 9/30/2024

➤ 2024 Plan Year

2024-1Q.1st Quarter: Claims Paid 7/1/2023 - 9/30/2023

2024 Full Year: Claims paid 7/1/2023 - 6/30/2024

➤ 2023 Plan Year

2023-1Q.1st Quarter: Claims Paid 7/1/2022 - 9/30/2022

2023 Full Year: Claims paid 7/1/2022 - 6/30/2023

Group Data

- Data reported is for the Low Ded Plan only:
- Contract = 7670-07-414946 or 7670-11-414946
- Except where indicated, Report is for Medical data only excluding claim expenses

Normative Comparison Data

- Norm Groups: UMR Book of Business in InfoPortSM
- Composition: 4,555 groups with approximately 6.5 million members
- Norm Period matches Current Year: Claims Paid 7/1/2024 - 9/30/2024

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* Additional date ranges for specific figures are defined on the page if applicable



Cost Drivers

- Overall Cost Trend based on Medical Paid PEPY: +16.0%
- High-Cost Claimants Paid PMPM trend: +27.5%; Non HCCs trend: +16.3%
- Top Paid Diagnostic Chapters: Health Status & Services (-2.3% Paid PMPM), Musculoskeletal (+7.6%), Injury & Poisoning (+40.9%)



Membership & Demographics

- Total membership is 24.4% higher than prior period
- Employees increased 26.2%, while Dependents were up 22.4%
- 93.3% of members had < \$2,500 medical paid, with 36.1% having no claims paid at all during the reporting period



Utilization Key Indicators

- Paid per IP Admit was \$28,698, which is 12.8% higher than 2024-1Q
- Paid per ER Visit was \$2,972, which is 0.3% lower than 2024-1Q



Network Utilization & Savings

- 97.7% of all Medical spend dollars were to In Network providers
- The average In Network discount was 66.3%, which is 1.1 pts above the 2024 average discount of 65.2%

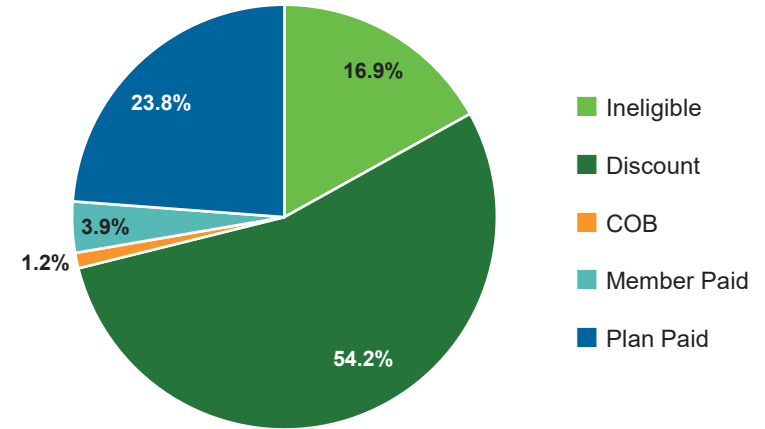
Medical Total Savings Summary



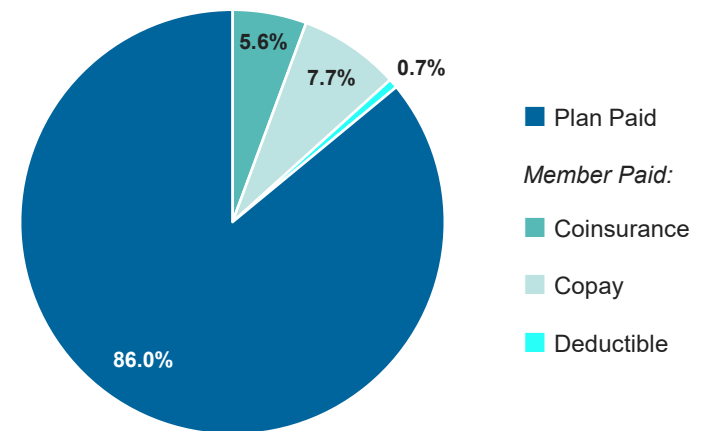
Dollar Chain: Billed to Paid Dollars

Dollar Amount	2025-1Q Total Dollars	2025-1Q PMPM*	2024 PMPM*	Trend
Medical Billed	\$106,804,672	\$1,563	\$1,519	2.9%
(-) Ineligible	\$18,075,488	\$264	\$303	-12.6%
Medical Covered	\$88,729,185	\$1,298	\$1,216	6.8%
(-) Discount	\$57,887,615	\$847	\$780	8.6%
Medical Allowed	\$30,841,570	\$451	\$436	3.5%
(-) COB	\$1,253,218	\$18	\$11	68.7%
(-) Coinsurance	\$1,669,577	\$24	\$23	7.4%
(-) Copay	\$2,271,737	\$33	\$32	4.3%
(-) Deductible	\$209,567	\$3	\$2	36.5%
Total Member Paid	\$4,150,880	\$61	\$57	6.8%
Total Plan Paid	\$25,437,498	\$372	\$363	2.6%

Breakout of Billed Dollars



Breakout of Paid Dollars: Plan vs. Member Paid



* PMPM (per member per month): Amount per the average total membership (both primary subscribers and dependents) per month.

Medical & Rx Paid Claims by Age Range



Age	2024-1Q (7/1/2023 - 9/30/2023)						2025-1Q (7/1/2024 - 9/30/2024)						Change	
	Med Paid	Med Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	Med Paid	Med Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	Total Paid	Tot Paid PMPM
<1	\$1,665,445	\$2,969	\$1,846	\$3	\$1,667,292	\$2,972	\$890,701	\$1,286	\$5,975	\$9	\$896,677	\$1,295	-46.2%	-56.4%
1	\$123,262	\$210	\$1,271	\$2	\$124,534	\$212	\$240,880	\$308	\$2,782	\$4	\$243,662	\$312	95.7%	47.0%
2 - 4	\$289,383	\$146	\$5,399	\$3	\$294,782	\$148	\$371,349	\$151	\$14,182	\$6	\$385,531	\$156	30.8%	5.4%
5 - 9	\$431,238	\$116	\$105,141	\$28	\$536,379	\$145	\$590,344	\$128	\$241,126	\$52	\$831,470	\$181	55.0%	25.0%
10 - 14	\$558,590	\$138	\$131,829	\$33	\$690,418	\$171	\$659,284	\$136	\$108,696	\$22	\$767,981	\$159	11.2%	-7.1%
15 - 19	\$739,887	\$160	\$158,157	\$34	\$898,044	\$194	\$1,524,774	\$269	\$327,987	\$58	\$1,852,761	\$327	106.3%	68.4%
20 - 24	\$852,769	\$194	\$189,361	\$43	\$1,042,130	\$238	\$1,029,837	\$189	\$349,808	\$64	\$1,379,645	\$254	32.4%	6.7%
25 - 29	\$871,452	\$241	\$381,356	\$105	\$1,252,809	\$346	\$1,225,808	\$260	\$592,842	\$126	\$1,818,649	\$385	45.2%	11.3%
30 - 34	\$1,141,315	\$264	\$944,474	\$219	\$2,085,789	\$483	\$1,777,320	\$324	\$679,104	\$124	\$2,456,423	\$448	17.8%	-7.2%
35 - 39	\$1,385,092	\$293	\$575,030	\$122	\$1,960,122	\$414	\$2,062,539	\$349	\$1,033,508	\$175	\$3,096,047	\$524	58.0%	26.5%
40 - 44	\$1,387,140	\$294	\$731,901	\$155	\$2,119,041	\$450	\$2,257,803	\$387	\$1,069,373	\$183	\$3,327,176	\$571	57.0%	26.9%
45 - 49	\$1,521,168	\$374	\$705,475	\$173	\$2,226,643	\$547	\$2,060,739	\$401	\$1,175,163	\$229	\$3,235,903	\$630	45.3%	15.1%
50 - 54	\$1,667,543	\$363	\$947,087	\$206	\$2,614,630	\$570	\$2,317,465	\$416	\$1,354,085	\$243	\$3,671,550	\$659	40.4%	15.6%
55 - 59	\$2,020,709	\$492	\$1,048,335	\$255	\$3,069,044	\$748	\$3,274,573	\$646	\$1,486,140	\$293	\$4,760,713	\$939	55.1%	25.6%
60 - 64	\$1,986,931	\$566	\$1,060,069	\$302	\$3,047,001	\$868	\$3,284,624	\$752	\$1,467,487	\$336	\$4,752,111	\$1,088	56.0%	25.4%
65+	\$726,776	\$520	\$320,581	\$229	\$1,047,357	\$750	\$1,869,460	\$1,047	\$765,663	\$429	\$2,635,122	\$1,477	151.6%	97.0%
Total	\$17,368,700	\$316	\$7,307,313	\$133	\$24,676,014	\$449	\$25,437,498	\$372	\$10,673,920	\$156	\$36,111,418	\$528	46.3%	17.6%

Financial Summary – YTD Trend

Total Plan & Norm



Measure	Total Plan					UMR Norm	
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2025-1Q	Variance
Average Enrollment							
Employees	6,908	36.6%	9,438	26.2%	11,914		
Spouses	1,790	31.7%	2,359	20.1%	2,832		
Children	4,930	32.3%	6,522	23.2%	8,038		
Tot. Members	13,629	34.4%	18,319	24.4%	22,785		
Avg. Family Size	2.0	-1.6%	1.9	-1.5%	1.9	1.9	-0.3%
Financial Summary							
Allowed	\$6,601,897	225.3%	\$21,473,240	43.6%	\$30,841,570		
Plan Paid	\$5,264,573	229.9%	\$17,368,700	46.5%	\$25,437,498		
Member Paid (OOP)	\$1,260,018	146.7%	\$3,108,161	33.5%	\$4,150,880		
Paid PEPY	\$3,048	141.5%	\$7,361	16.0%	\$8,541	\$10,338	-17.4%
Paid PMPY	\$1,545	145.5%	\$3,793	17.7%	\$4,466	\$5,392	-17.2%
Paid PEPM	\$254	141.5%	\$613	16.0%	\$712	\$861	-17.4%
Paid PMPM	\$129	145.5%	\$316	17.7%	\$372	\$449	-17.2%
High-Cost Claimants (Med Paid \$100,000+)							
# of HCCs	0	-	10	80.0%	18		
HCCs per 1000	0.0	-	0.5	44.7%	0.8	1.1	-29.8%
Paid per HCC	\$0	-	\$224,697	-11.9%	\$197,965	\$203,568	-2.8%
HCC Paid % of Tot	0.0%	-	12.9%	1.1	14.0%	18.4%	-4.4
Cost Distribution by Claim Type (Paid PMPY)							
Inpatient	\$131	414.7%	\$676	40.0%	\$946	\$1,382	-31.5%
Outpatient	\$443	149.3%	\$1,105	11.5%	\$1,232	\$1,573	-21.7%
Physician	\$951	104.7%	\$1,946	13.5%	\$2,209	\$2,325	-5.0%
Ancillary	\$20	232.8%	\$66	19.5%	\$79	\$112	-29.5%

- With \$22.2M paid, the State Active population is 87.5% of total 2025-1Q med spend
- On a Paid PMPM basis, State Actives are up 16.5% compared to prior year
- Total Low Ded Plan Paid PMPM trend is +17.7%

PEPY (per employee per year) and **PEPM** (per employee per month) represent amounts per the primary subscriber (employee or retiree).

PMPY (per member per year) and **PMPM** (per member per month) represent amounts per all covered members, including dependents.

Amounts **Per Year (PEPY and PMPY)** have been annualized.

HCCs (High-cost Claimants) are based on patients with \$100,000+ paid medical in the period.

Claim Type: Ancillary includes Durable Medical Equipment, prosthetics, some drugs paid on the medical plan, et al.

Financial Summary – YTD Trend

Active Members



Measure	State Active					Non-State Active				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Average Enrollment										
Employees	6,278	37.1%	8,607	27.5%	10,971	1	50.0%	1	100.0%	2
Spouses	1,590	31.9%	2,097	20.7%	2,532	1	50.0%	1	0.0%	1
Children	4,690	32.6%	6,221	23.8%	7,702	0	-	0	-	0
Tot. Members	12,558	34.8%	16,925	25.3%	21,205	1	50.0%	2	50.0%	3
Avg. Family Size	2.0	-1.7%	2.0	-1.7%	1.9	2.0	0.0%	2.0	-25.0%	1.5
Financial Summary										
Allowed	\$5,754,052	226.9%	\$18,811,182	43.8%	\$27,056,684	\$3,705	156.1%	\$9,487	21.8%	\$11,551
Plan Paid	\$4,629,581	229.2%	\$15,240,731	46.0%	\$22,246,230	\$2,894	163.2%	\$7,618	23.9%	\$9,435
Member Paid (OOP)	\$1,099,858	152.2%	\$2,773,779	35.5%	\$3,758,665	\$810	130.7%	\$1,869	13.2%	\$2,116
Paid PEPY	\$2,950	140.2%	\$7,083	14.5%	\$8,111	\$17,367	75.5%	\$30,471	-38.1%	\$18,870
Paid PMPY	\$1,475	144.3%	\$3,602	16.5%	\$4,196	\$8,683	75.5%	\$15,236	-17.4%	\$12,580
Paid PEPM	\$246	140.2%	\$590	14.5%	\$676	\$1,447	75.5%	\$2,539	-38.1%	\$1,572
Paid PMPM	\$123	144.3%	\$300	16.5%	\$350	\$724	75.5%	\$1,270	-17.4%	\$1,048
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	0	-	7	100.0%	14	0	-	0	-	0
HCCs per 1000	0.0	-	0.4	59.6%	0.7	0.0	-	0.0	-	0.0
Paid per HCC	\$0	-	\$248,284	-28.2%	\$178,292	\$0	-	\$0	-	\$0
HCC Paid % of Tot	0.0%	-	11.4%	-0.2	11.2%	0.0%	-	0.0%	-	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$130	389.8%	\$635	28.7%	\$816	\$0	-	\$0	-	\$0
Outpatient	\$429	157.0%	\$1,103	5.5%	\$1,163	\$0	-	\$0	-	\$5,761
Physician	\$897	101.2%	\$1,805	18.6%	\$2,141	\$8,407	81.2%	\$15,236	-55.2%	\$6,819
Ancillary	\$19	215.3%	\$60	25.8%	\$76	\$276	-100.0%	\$0	-	\$0

Financial Summary – YTD Trend

Retired Members



Measure	State Retirees					Non-State Retirees				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Average Enrollment										
Employees	611	30.8%	800	14.2%	913	18	68.5%	30	-9.9%	27
Spouses	192	28.7%	247	16.0%	287	8	62.5%	13	-5.1%	12
Children	241	24.9%	300	11.8%	336	0	-	1	0.0%	1
Tot. Members	1,044	29.1%	1,347	14.0%	1,536	26	70.5%	44	-8.3%	41
Avg. Family Size	1.7	-1.4%	1.7	-0.2%	1.7	1.4	1.2%	1.5	1.8%	1.5
Financial Summary										
Allowed	\$815,876	212.8%	\$2,552,217	44.2%	\$3,679,280	\$28,264	255.1%	\$100,353	-6.3%	\$94,054
Plan Paid	\$622,296	237.0%	\$2,096,908	50.0%	\$3,146,052	\$9,801	139.2%	\$23,444	52.6%	\$35,781
Member Paid (OOP)	\$152,495	103.0%	\$309,546	19.1%	\$368,778	\$6,855	235.1%	\$22,967	-7.2%	\$21,322
Paid PEPY	\$4,073	157.5%	\$10,488	31.4%	\$13,785	\$2,178	41.9%	\$3,091	69.4%	\$5,236
Paid PMPY	\$2,384	161.1%	\$6,225	31.6%	\$8,195	\$1,508	40.3%	\$2,115	66.4%	\$3,519
Paid PEPM	\$339	157.5%	\$874	31.4%	\$1,149	\$181	41.9%	\$258	69.4%	\$436
Paid PMPM	\$199	161.1%	\$519	31.6%	\$683	\$126	40.3%	\$176	66.4%	\$293
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	0	-	3	33.3%	4	0	-	0	-	0
HCCs per 1000	0.0	-	2.2	17.0%	2.6	0.0	-	0.0	-	0.0
Paid per HCC	\$0	-	\$159,287	67.5%	\$266,805	\$0	-	\$0	-	\$0
HCC Paid % of Tot	0.0%	-	22.8%	11.1	33.9%	0.0%	-	0.0%	-	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$155	681.4%	\$1,215	127.4%	\$2,763	\$0	-	\$0	-	\$0
Outpatient	\$624	89.0%	\$1,180	85.4%	\$2,188	\$179	-139.0%	-\$70	-1170.1%	\$745
Physician	\$1,577	134.2%	\$3,693	-15.4%	\$3,123	\$1,292	64.2%	\$2,122	29.4%	\$2,746
Ancillary	\$28	400.1%	\$138	-11.4%	\$122	\$37	68.7%	\$63	-54.4%	\$29

Financial Summary – Full Year Trend

Plan Totals & Norm



Measure	Total Plan					UMR Norm	
	2023	⇒	2024	⇒	2025-1Q	2025-1Q	Variance
Average Enrollment							
Employees	7,359	35.9%	10,001	19.1%	11,914		
Spouses	1,855	31.8%	2,446	15.8%	2,832		
Children	5,142	32.0%	6,788	18.4%	8,038		
Tot. Members	14,356	34.0%	19,235	18.5%	22,785		
Avg. Family Size	2.0	-1.4%	1.9	-0.6%	1.9	1.9	-0.3%
Financial Summary							
Allowed	\$60,798,189	65.4%	\$100,584,108	-69.3%	\$30,841,570		
Plan Paid	\$50,569,529	65.6%	\$83,741,413	-69.6%	\$25,437,498		
Member Paid (OOP)	\$8,076,903	62.5%	\$13,125,142	-68.4%	\$4,150,880		
Paid PEPY	\$6,872	21.9%	\$8,374	2.0%	\$8,541	\$10,338	-17.4%
Paid PMPY	\$3,522	23.6%	\$4,354	2.6%	\$4,466	\$5,392	-17.2%
Paid PEPM	\$573	21.9%	\$698	2.0%	\$712	\$861	-17.4%
Paid PMPM	\$294	23.6%	\$363	2.6%	\$372	\$449	-17.2%
High-Cost Claimants (Med Paid \$100,000+)							
# of HCCs	48	83.3%	88	-79.5%	18		
HCCs per 1000	3.3	36.8%	4.6	-82.7%	0.8	1.1	-29.8%
Paid per HCC	\$234,319	-2.3%	\$228,980	-13.5%	\$197,965	\$203,568	-2.8%
HCC Paid % of Tot	22.2%	1.8	24.1%	-10.1	14.0%	18.4%	-4.4
Cost Distribution by Claim Type (Paid PMPY)							
Inpatient	\$699	19.6%	\$836	13.2%	\$946	\$1,382	-31.5%
Outpatient	\$1,047	21.7%	\$1,273	-3.2%	\$1,232	\$1,573	-21.7%
Physician	\$1,704	26.7%	\$2,159	2.3%	\$2,209	\$2,325	-5.0%
Ancillary	\$73	17.1%	\$86	-8.2%	\$79	\$112	-29.5%

- Total plan paid amount for the first quarter of 2023 was 20.7% of the full year
- Annualizing 2024 paid dollars using the same ratio would result in a total paid of \$123 M

PEPY (per employee per year) and **PEPM** (per employee per month) represent amounts per the primary subscriber (employee or retiree).

PMPY (per member per year) and **PMPM** (per member per month) represent amounts per all covered members, including dependents.

Amounts **Per Year (PEPY and PMPY)** have been annualized for the 2024 Plan Year.

HCCs (High-cost Claimants) are based on patients with \$100,000+ paid medical in the period.

Claim Type: Ancillary includes Durable Medical Equipment, prosthetics, some drugs paid on the medical plan, et al.

Financial Summary – Full Year Trend

Active Members



Measure	State Active					Non-State Active				
	2023	⇒	2024	⇒	2025-1Q	2023	⇒	2024	⇒	2025-1Q
Average Enrollment										
Employees	6,690	36.8%	9,150	19.9%	10,971	1	36.4%	1	60.0%	2
Spouses	1,644	32.4%	2,176	16.4%	2,532	1	36.4%	1	-20.0%	1
Children	4,894	32.4%	6,478	18.9%	7,702	0	-	0	-	0
Tot. Members	13,227	34.6%	17,804	19.1%	21,205	2	36.4%	3	20.0%	3
Avg. Family Size	2.0	-1.6%	1.9	-0.7%	1.9	2.0	0.0%	2.0	-25.0%	1.5
Financial Summary										
Allowed	\$52,542,961	66.5%	\$87,492,756	-69.1%	\$27,056,684	\$17,169	92.5%	\$33,055	-65.1%	\$11,551
Plan Paid	\$43,734,101	67.2%	\$73,120,641	-69.6%	\$22,246,230	\$13,293	99.3%	\$26,488	-64.4%	\$9,435
Member Paid (OOP)	\$7,182,499	64.2%	\$11,795,191	-68.1%	\$3,758,665	\$3,876	69.4%	\$6,566	-67.8%	\$2,116
Paid PEPY	\$6,538	22.2%	\$7,991	1.5%	\$8,111	\$14,501	46.1%	\$21,191	-11.0%	\$18,870
Paid PMPY	\$3,306	24.2%	\$4,107	2.2%	\$4,196	\$7,251	46.1%	\$10,595	18.7%	\$12,580
Paid PEPM	\$545	22.2%	\$666	1.5%	\$676	\$1,208	46.1%	\$1,766	-11.0%	\$1,572
Paid PMPM	\$276	24.2%	\$342	2.2%	\$350	\$604	46.1%	\$883	18.7%	\$1,048
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	37	89.2%	70	-80.0%	14	0	-	0	-	0
HCCs per 1000	2.8	40.6%	3.9	-83.2%	0.7	0.0	-	0.0	-	0.0
Paid per HCC	\$238,408	-3.3%	\$230,519	-22.7%	\$178,292	\$0	-	\$0	-	\$0
HCC Paid % of Tot	20.2%	1.9	22.1%	-10.8	11.2%	0.0%	-	0.0%	-	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$654	21.4%	\$794	2.8%	\$816	\$0	-	\$0	-	\$0
Outpatient	\$986	21.7%	\$1,199	-3.0%	\$1,163	\$0	-	\$527	993.7%	\$5,761
Physician	\$1,601	26.7%	\$2,029	5.5%	\$2,141	\$7,201	39.1%	\$10,017	-31.9%	\$6,819
Ancillary	\$66	27.9%	\$84	-9.8%	\$76	\$50	3.6%	\$52	-100.0%	\$0

Financial Summary – Full Year Trend

Retired Members



Measure	State Retirees					Non-State Retirees				
	2023	⇒	2024	⇒	2025-1Q	2023	⇒	2024	⇒	2025-1Q
Average Enrollment										
Employees	644	27.5%	821	11.2%	913	24	16.4%	28	-3.8%	27
Spouses	199	28.9%	256	12.0%	287	12	6.5%	12	0.7%	12
Children	249	24.3%	309	8.7%	336	0	500.0%	1	0.0%	1
Tot. Members	1,091	27.0%	1,386	10.8%	1,536	36	15.5%	42	-2.4%	41
Avg. Family Size	1.7	-0.4%	1.7	-0.4%	1.7	1.5	-0.8%	1.5	1.5%	1.5
Financial Summary										
Allowed	\$7,750,997	60.3%	\$12,423,242	-70.4%	\$3,679,280	\$487,062	30.4%	\$635,055	-85.2%	\$94,054
Plan Paid	\$6,450,503	60.1%	\$10,327,679	-69.5%	\$3,146,052	\$371,632	-28.3%	\$266,605	-86.6%	\$35,781
Member Paid (OOP)	\$840,443	46.4%	\$1,230,503	-70.0%	\$368,778	\$50,085	85.4%	\$92,881	-77.0%	\$21,322
Paid PEPY	\$10,017	25.6%	\$12,577	9.6%	\$13,785	\$15,220	-38.4%	\$9,382	-44.2%	\$5,236
Paid PMPY	\$5,912	26.0%	\$7,450	10.0%	\$8,195	\$10,299	-37.9%	\$6,399	-45.0%	\$3,519
Paid PEPM	\$835	25.6%	\$1,048	9.6%	\$1,149	\$1,268	-38.4%	\$782	-44.2%	\$436
Paid PMPM	\$493	26.0%	\$621	10.0%	\$683	\$858	-37.9%	\$533	-45.0%	\$293
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	10	80.0%	18	-77.8%	4	1	0.0%	1	-100.0%	0
HCCs per 1000	9.2	41.7%	13.0	-79.9%	2.6	27.7	-13.4%	24.0	-100.0%	0.0
Paid per HCC	\$215,577	0.5%	\$216,572	23.2%	\$266,805	\$178,686	-38.7%	\$109,572	-100.0%	\$0
HCC Paid % of Tot	33.4%	4.3	37.7%	-3.8	33.9%	48.1%	-7.0	41.1%	-41.1	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$1,219	7.8%	\$1,314	110.3%	\$2,763	\$1,230	106.9%	\$2,544	-100.0%	\$0
Outpatient	\$1,631	36.3%	\$2,224	-1.6%	\$2,188	\$5,785	-76.2%	\$1,379	-46.0%	\$745
Physician	\$2,898	31.3%	\$3,805	-17.9%	\$3,123	\$3,152	-25.8%	\$2,338	17.5%	\$2,746
Ancillary	\$164	-34.3%	\$108	13.3%	\$122	\$132	4.5%	\$138	-79.3%	\$29

Medical Paid Claims by Claim Type

Breakout of State vs. Non-State by Member Status



Claim Type	2024-1Q (7/1/2023 - 9/30/2023)				2025-1Q (7/1/2024 - 9/30/2024)				Trend
	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Total
State Members									
Inpatient	\$2,684,800	\$402,079	\$7,148	\$3,094,027	\$4,327,835	\$1,057,334	\$3,225	\$5,388,393	74.2%
Outpatient	\$4,665,356	\$384,279	\$13,177	\$5,062,812	\$6,167,028	\$821,959	\$17,929	\$7,006,917	38.4%
Physician	\$7,635,851	\$1,199,781	\$44,060	\$8,879,693	\$11,349,976	\$1,138,378	\$60,410	\$12,548,764	41.3%
Ancillary	\$254,724	\$42,071	\$4,312	\$301,106	\$401,391	\$45,814	\$1,003	\$448,208	48.9%
Total	\$15,240,731	\$2,028,210	\$68,698	\$17,337,639	\$22,246,230	\$3,063,485	\$82,567	\$25,392,282	46.5%
PMPM	\$300.17	\$546.79	\$206.35	\$316.28	\$349.70	\$730.72	\$199.23	\$372.20	17.7%
Non-State Members									
Inpatient	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	-
Outpatient	\$0	-\$4,700	\$3,928	-\$772	\$4,321	\$4,807	\$2,767	\$11,895	-1641.5%
Physician	\$7,618	\$6,069	\$17,450	\$31,137	\$5,114	\$15,078	\$12,838	\$33,030	6.1%
Ancillary	\$0	\$174	\$522	\$696	\$0	\$0	\$291	\$291	-58.1%
Total	\$7,618	\$1,543	\$21,900	\$31,061	\$9,435	\$19,885	\$15,897	\$45,216	45.6%
PMPM	\$1,269.64	\$42.83	\$225.85	\$223.46	\$1,048.31	\$903.40	\$158.98	\$345.16	54.5%
All Members									
Inpatient	\$2,684,800	\$402,079	\$7,148	\$3,094,027	\$4,327,835	\$1,057,334	\$3,225	\$5,388,393	74.2%
Outpatient	\$4,665,356	\$379,579	\$17,106	\$5,062,041	\$6,171,349	\$826,766	\$20,697	\$7,018,812	38.7%
Physician	\$7,643,469	\$1,205,851	\$61,511	\$8,910,830	\$11,355,090	\$1,153,456	\$73,248	\$12,581,794	41.2%
Ancillary	\$254,724	\$42,245	\$4,833	\$301,802	\$401,391	\$45,814	\$1,294	\$448,499	48.6%
Total	\$15,248,349	\$2,029,754	\$90,598	\$17,368,700	\$22,255,665	\$3,083,370	\$98,464	\$25,437,498	46.5%
PMPM	\$300.28	\$541.94	\$210.75	\$316.05	\$349.80	\$731.62	\$191.41	\$372.15	17.7%

Medical Cost Distribution

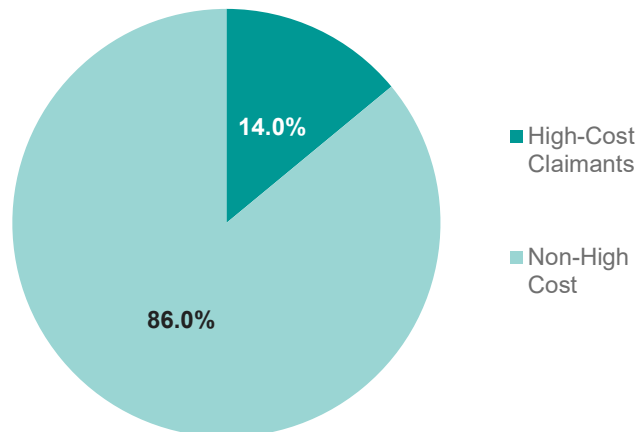
Distribution by Member Cost



Member Total Paid Range	2024-1Q (7/1/2023 - 9/30/2023)						2025-1Q (7/1/2024 - 9/30/2024)					
	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot
No Claims	7,570	38.8%	\$0	0.0%	\$0	0.0%	8,759	36.1%	\$0	0.0%	\$0	0.0%
< \$0 - \$0	560	2.9%	-\$62,673	-0.4%	\$10,539	0.3%	849	3.5%	-\$130,907	-0.5%	\$27,613	0.7%
> \$0 - \$2,500	10,263	52.6%	\$4,732,748	27.2%	\$1,517,453	48.8%	13,039	53.7%	\$6,427,889	25.3%	\$2,044,631	49.3%
> \$2,500 - \$5,000	535	2.7%	\$1,903,477	11.0%	\$489,197	15.7%	781	3.2%	\$2,730,867	10.7%	\$665,972	16.0%
> \$5,000 - \$10,000	309	1.6%	\$2,132,092	12.3%	\$383,460	12.3%	433	1.8%	\$2,965,447	11.7%	\$535,114	12.9%
> \$10,000 - \$25,000	198	1.0%	\$2,937,882	16.9%	\$391,056	12.6%	256	1.1%	\$3,981,797	15.7%	\$511,348	12.3%
> \$25,000 - \$50,000	58	0.3%	\$1,846,825	10.6%	\$180,395	5.8%	91	0.4%	\$3,171,853	12.5%	\$205,359	4.9%
> \$50,000 - \$100,000	25	0.1%	\$1,631,381	9.4%	\$95,008	3.1%	40	0.2%	\$2,727,179	10.7%	\$98,269	2.4%
> \$100,000	10	0.1%	\$2,246,967	12.9%	\$41,054	1.3%	18	0.1%	\$3,563,372	14.0%	\$62,574	1.5%
Total	19,528	100.0%	\$17,368,700	100.0%	\$3,108,161	100.0%	24,266	100.0%	\$25,437,498	100.0%	\$4,150,880	100.0%

* Unique Members are counted equally regardless of length of coverage. Note that because data is on a paid basis, member counts may also include those not active in the period.

Cost Distribution: HCCs vs. Non-HCCs



HCC Cost Breakout by Diagnostic Chapter

#	Diagnostic Chapter	Patients	Total Paid	% of Tot
1	Injury, Poisoning & External Causes	5	\$704,071	19.8%
2	Respiratory System	7	\$532,599	14.9%
3	Neoplasms	7	\$419,456	11.8%
4	Musculoskeletal System	7	\$336,102	9.4%
5	Perinatal Originating Conditions	2	\$316,579	8.9%
6	Digestive System	6	\$237,349	6.7%
7	Blood & Immune Disorders	4	\$199,634	5.6%
8	Circulatory System	10	\$177,475	5.0%
9	Nervous System	11	\$166,230	4.7%
10	Infectious & Parasitic Diseases	5	\$133,616	3.7%
...	All Others		\$340,261	9.5%
=	Total	18	\$3,563,372	100.0%

Utilization Summary – YTD Trend

Plan Totals & Norm



Measure	Total Plan					UMR Norm	
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2025-1Q	Variance
Inpatient Admissions							
# of Admits	42	304.8%	170	7.1%	182		
# of Admit Days	200	269.0%	738	31.7%	972		
Paid per Admit	\$22,716	12.0%	\$25,435	12.8%	\$28,698	\$28,630	0.2%
Paid per Admit Day	\$4,770	22.8%	\$5,859	-8.3%	\$5,374	\$5,743	-6.4%
Admits per 1000	12.3	201.1%	37.1	-13.9%	32.0	47.8	-33.2%
Average LOS	4.8	-8.8%	4.3	23.0%	5.3	5.0	7.1%
Emergency Room Visits							
# of ER Visits	298	167.1%	796	36.7%	1,088		
~ % resulting in Admit	5.4%	4.2	9.5%	0.0	9.6%	10.9%	-1.3
ER Visits per Patient	1.1	7.4%	1.2	-0.2%	1.2		
ER Visits per 1000	87.5	98.7%	173.8	9.9%	191.0	237.5	-19.6%
Paid per ER Visit	\$2,695	10.7%	\$2,982	-0.3%	\$2,972	\$2,194	35.5%
Urgent Care Visits							
# of UC Visits	788	89.3%	1,492	37.2%	2,047		
UC Visits per Patient	1.2	2.1%	1.2	-1.3%	1.2		-
UC Visits per 1000	231.3	40.9%	325.8	10.3%	359.4	246.8	45.6%
Paid per UC Visit	\$92	-2.2%	\$90	16.2%	\$104	\$112	-7.0%
Office Visits							
Off Visits per Patient	1.8	19.9%	2.1	4.3%	2.2		
Paid per Office Visit	\$76	10.4%	\$84	5.5%	\$89	\$90	-1.8%
Office Visits Paid PMPY	\$193	79.6%	\$347	14.3%	\$396	\$350	13.2%
Services							
Radiology Svcs per 1000	1,729.5	90.0%	3,286.5	21.0%	3,976.4	4,009.8	-0.8%
Radiology Paid PMPY	\$174	76.3%	\$307	24.8%	\$383		
Lab Services per 1000	6,444.1	47.7%	9,519.5	14.4%	10,889.3	11,268.9	-3.4%
Labs Paid PMPY	\$123	72.5%	\$213	21.5%	\$258		

- Inpatient Admission rate per 1000 decreased 13.9%, but amount paid per Admission is 12.8% higher than prior period
- ER utilization increased 9.9%, but amount paid per ER visit is a little (-0.3%) lower than prior period

Admissions and all other **Visits** are counted for utilization if the *Initial Paid Date* for the first primary claim (facility claim for non-Office Visits) fell within the time period. For cost purposes, however, all visit costs paid within the time period are included.

Counts **per 1000** and amounts **PMPY** (per member per year) have been annualized.

Utilization Summary – YTD Trend

Active Members



Measure	State Active					Non-State Active				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Inpatient Admissions										
# of Admits	37	324.3%	157	9.6%	172	0	-	0	-	0
# of Admit Days	181	282.9%	693	27.6%	884	0	-	0	-	0
Paid per Admit	\$19,922	30.8%	\$26,065	6.4%	\$27,729	\$0	-	\$0	-	\$0
Paid per Admit Day	\$4,072	45.0%	\$5,905	-8.6%	\$5,395	\$0	-	\$0	-	\$0
Admits per 1000	11.8	214.8%	37.1	-12.6%	32.4	0.0	-	0.0	-	0.0
Average LOS	4.9	-9.8%	4.4	16.4%	5.1	0.0	-	0.0	-	0.0
Emergency Room Visits										
# of ER Visits	271	169.4%	730	40.4%	1,025	0	-	0	-	2
~ % resulting in Admit	4.8%	4.7	9.5%	-0.1	9.4%	0.0%	-	0.0%	-	0.0%
ER Visits per Patient	1.1	6.8%	1.2	-0.5%	1.2	0.0	-	0.0	-	2.0
ER Visits per 1000	86.3	99.9%	172.5	12.1%	193.3	0.0	-	0.0	-	2,666.7
Paid per ER Visit	\$2,786	10.0%	\$3,066	-4.4%	\$2,932	\$0	-	\$0	-	\$1,852
Urgent Care Visits										
# of UC Visits	733	92.9%	1,414	36.4%	1,928	0	-	1	-100.0%	0
UC Visits per Patient	1.2	1.7%	1.2	-2.0%	1.2	0.0	-	1.0	-100.0%	0.0
UC Visits per 1000	233.5	43.1%	334.2	8.8%	363.7	0.0	-	2,000.0	-100.0%	0.0
Paid per UC Visit	\$92	-1.3%	\$91	15.2%	\$104	\$0	-	\$170	-100.0%	\$0
Office Visits										
Off Visits per Patient	1.8	19.5%	2.1	4.7%	2.2	3.0	33.3%	4.0	-25.0%	3.0
Paid per Office Visit	\$75	11.1%	\$83	5.9%	\$88	\$58	181.3%	\$163	10.5%	\$180
Office Visits Paid PMPY	\$182	83.3%	\$334	15.2%	\$385	\$522	400.0%	\$2,609	-44.8%	\$1,441
Services										
Radiology Svcs per 1000	1,625.1	88.8%	3,068.9	21.9%	3,742.1	9,000.0	-11.1%	8,000.0	66.7%	13,333.3
Radiology Paid PMPY	\$166	69.2%	\$281	26.8%	\$356	\$3,866	58.1%	\$6,111	-26.8%	\$4,476
Lab Services per 1000	6,247.0	48.3%	9,264.3	16.2%	10,763.5	18,000.0	44.4%	26,000.0	53.8%	40,000.0
Labs Paid PMPY	\$121	75.9%	\$213	19.5%	\$255	\$48	338.6%	\$211	69.9%	\$359

Utilization Summary – YTD Trend

Retired Members



Measure	State Retirees					Non-State Retirees				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Inpatient Admissions										
# of Admits	5	160.0%	13	-23.1%	10	0	-	0	-	0
# of Admit Days	19	136.8%	45	95.6%	88	0	-	0	-	0
Paid per Admit	\$43,394	-58.9%	\$17,821	154.6%	\$45,372	\$0	-	\$0	-	\$0
Paid per Admit Day	\$11,419	-54.9%	\$5,148	0.1%	\$5,156	\$0	-	\$0	-	\$0
Admits per 1000	19.2	101.4%	38.6	-32.5%	26.0	0.0	-	0.0	-	0.0
Average LOS	3.8	-8.9%	3.5	154.2%	8.8	0.0	-	0.0	-	0.0
Emergency Room Visits										
# of ER Visits	26	153.8%	66	-10.6%	59	1	-100.0%	0	-	2
~ % resulting in Admit	11.5%	-0.9	10.6%	3.0	13.6%	0.0%	0.0	0.0%	-	0.0%
ER Visits per Patient	1.0	13.3%	1.2	2.2%	1.2	1.0	-100.0%	0.0	-	2.0
ER Visits per 1000	99.6	96.7%	195.9	-21.6%	153.7	153.8	-100.0%	0.0	-	196.7
Paid per ER Visit	\$1,796	14.1%	\$2,050	81.7%	\$3,726	\$1,161	-100.0%	\$0	-	\$2,457
Urgent Care Visits										
# of UC Visits	54	29.6%	70	64.3%	115	1	600.0%	7	-42.9%	4
UC Visits per Patient	1.1	2.9%	1.1	12.5%	1.3	1.0	40.0%	1.4	-28.6%	1.0
UC Visits per 1000	206.9	0.4%	207.8	44.2%	299.6	153.8	310.5%	631.6	-37.7%	393.4
Paid per UC Visit	\$90	-19.5%	\$73	43.8%	\$105	\$52	22.4%	\$63	-27.9%	\$46
Office Visits										
Off Visits per Patient	1.9	25.8%	2.4	0.4%	2.4	1.7	22.6%	2.1	51.2%	3.2
Paid per Office Visit	\$86	4.6%	\$90	0.7%	\$90	\$42	61.0%	\$68	70.9%	\$117
Office Visits Paid PMPY	\$317	55.9%	\$494	7.0%	\$529	\$268	54.3%	\$413	164.2%	\$1,091
Services										
Radiology Svcs per 1000	2,915.8	104.4%	5,961.0	20.6%	7,189.3	4,153.8	17.3%	4,872.2	-15.2%	4,131.1
Radiology Paid PMPY	\$262	140.5%	\$630	17.8%	\$743	\$356	-59.0%	\$146	266.6%	\$536
Lab Services per 1000	8,697.5	45.3%	12,637.5	-2.1%	12,378.0	10,615.4	7.9%	11,458.6	57.9%	18,098.4
Labs Paid PMPY	\$143	44.3%	\$207	49.6%	\$309	\$291	-60.3%	\$116	14.4%	\$132

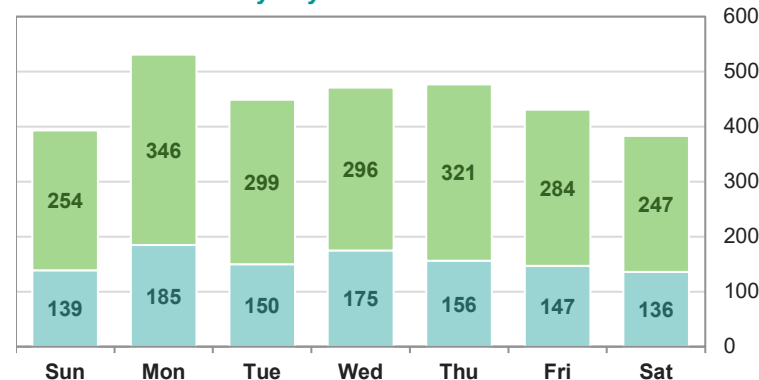
On Demand Care Summary

Emergency Room & Urgent Care

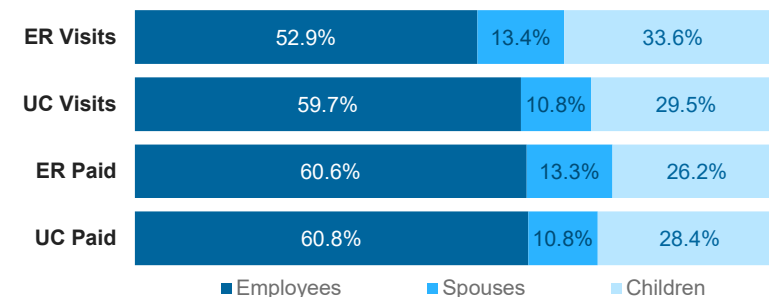


Measure	2024-1Q	2025-1Q	Change	UMR Norm	Variance
Emergency Room					
# of Visits	796	1,088	36.7%		
# of Patients	669	916	36.9%		
Total Plan Paid	\$2,373,611	\$3,233,583	36.2%		
Total Mem Paid	\$520,993	\$698,928	34.2%		
Visits per 1000	173.8	191.0	9.9%	237.5	-19.6%
Paid per Visit	\$2,982	\$2,972	-0.3%	\$2,194	35.5%
Paid PMPM	\$43	\$47	9.5%	\$43	9.0%
% ER Patients w/ Office Visit*	87.7%	88.9%	1.1		
% Potentially Avoidable**	13.2%	16.7%	3.5	15.7%	1.0
Urgent Care					
# of Visits	1,492	2,047	37.2%		
# of Patients	1,254	1,744	39.1%		
Total Plan Paid	\$133,969	\$213,605	59.4%		
Total Mem Paid	\$107,665	\$145,627	35.3%		
Visits per 1000	325.8	359.4	10.3%	246.8	45.6%
Paid per Visit	\$90	\$104	16.2%	\$112	-7.0%
Paid PMPM	\$2	\$3	28.2%	\$2	35.5%

ER & UC Utilization by Day of Week



ER & UC Utilization & Cost by Relationship



	# of Visits			Total Paid		
	ER	UC	Total	ER	UC	Total
Employee	576	1,222	1,798	\$1,958,381	\$129,865	\$2,088,246
Spouse	146	221	367	\$428,479	\$23,009	\$451,489
Child	366	604	970	\$846,723	\$60,731	\$907,454
Total	1,088	2,047	3,135	\$3,233,583	\$213,605	\$3,447,188

* Office Visit within prior 12 months..

** ER Visits are categorized as potentially avoidable based on primary and secondary diagnosis and do not necessarily indicate misuse of the ER for the patient's specific circumstances.

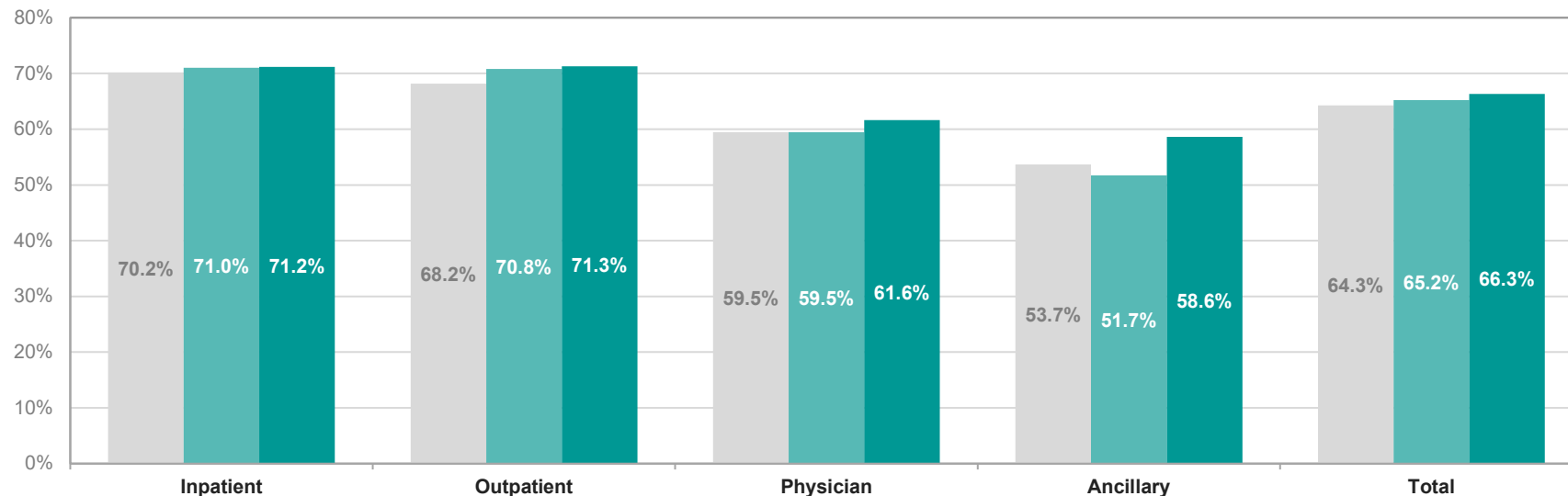
Network Summary

Discount Percentage & Network Utilization

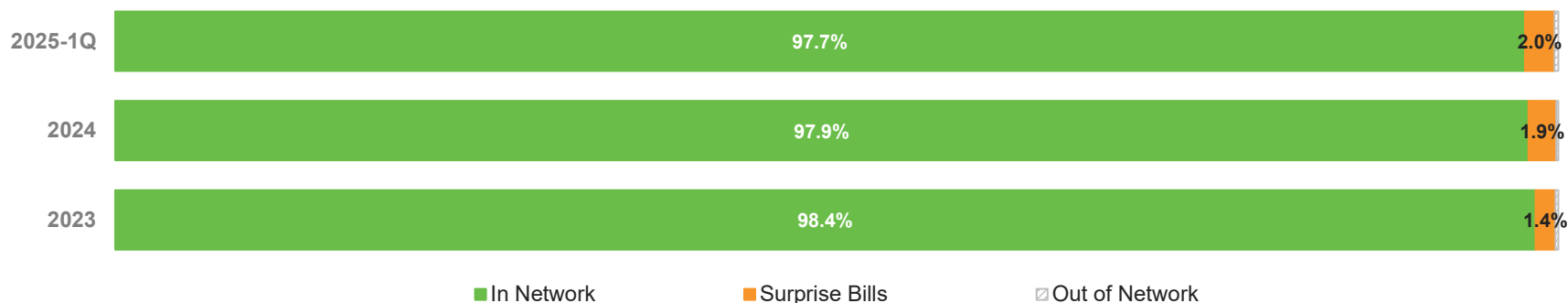


Discount Percentage* by Claim Type

Plan Year: 2023 2024 2025-1Q



Network Utilization*



* Network Discounts and Utilization exclude COB Claims, and Network Discounts additionally exclude Surprise Bills.

Clinical Classification Summary

Breakout by Diagnostic Chapter



Diagnostic Chapter	2024 (Full Year)		2025-1Q		CYTD Paid by Relationship			CYTD Paid by Sex	
	Patients	Total Paid	Patients	Total Paid	Employee	Spouse	Child	Male	Female
Health Status & Health Services	12,860	\$9,799,414	6,666	\$2,835,267	\$1,778,771	\$369,697	\$686,799	\$1,017,459	\$1,817,808
Musculoskeletal System	5,252	\$8,247,149	2,848	\$2,628,605	\$1,939,536	\$445,375	\$243,693	\$1,319,724	\$1,308,880
Injury, Poisoning & External Causes	2,586	\$5,001,111	1,114	\$2,086,979	\$1,041,086	\$226,960	\$818,932	\$1,052,118	\$1,034,860
Mental, Behavioral & Neurodevelopmental	4,161	\$6,596,135	2,965	\$2,083,066	\$959,988	\$180,423	\$942,655	\$808,367	\$1,274,699
Circulatory System	2,897	\$6,856,254	1,461	\$1,848,642	\$1,194,691	\$534,210	\$119,740	\$880,856	\$967,786
Digestive System	2,577	\$4,958,096	1,205	\$1,827,336	\$1,288,170	\$323,059	\$216,107	\$552,504	\$1,274,832
Neoplasms	2,400	\$5,750,257	1,138	\$1,816,400	\$1,449,135	\$357,791	\$9,474	\$578,269	\$1,238,131
Symptoms, Signs & Findings, NEC	8,003	\$5,392,767	3,857	\$1,714,471	\$1,102,846	\$291,050	\$320,575	\$592,582	\$1,121,889
Respiratory System	5,652	\$3,772,490	2,003	\$1,561,801	\$519,643	\$653,274	\$388,884	\$993,704	\$568,097
Genitourinary System	3,804	\$4,801,920	1,908	\$1,398,347	\$1,018,459	\$251,425	\$128,463	\$302,810	\$1,095,537
Endocrine, Nutritional & Metabolic	5,290	\$3,869,576	3,066	\$1,164,114	\$897,210	\$170,586	\$96,318	\$497,042	\$667,072
Nervous System	2,751	\$5,952,179	1,499	\$1,063,087	\$776,177	\$152,264	\$134,646	\$341,417	\$721,670
Pregnancy, Childbirth & the Puerperium	476	\$3,930,375	303	\$927,360	\$652,753	\$204,094	\$70,513	\$0	\$927,360
Perinatal Originating Conditions	226	\$3,322,086	94	\$586,587	\$171	\$0	\$586,416	\$159,083	\$427,504
Infectious & Parasitic Diseases	1,650	\$1,677,923	674	\$581,535	\$307,483	\$124,524	\$149,527	\$369,066	\$212,468
Eye and Adnexa	4,615	\$1,199,451	1,803	\$379,559	\$253,958	\$74,066	\$51,534	\$157,664	\$221,895
Skin & Subcutaneous Tissue	3,978	\$941,344	1,811	\$300,543	\$144,304	\$39,130	\$117,109	\$117,329	\$183,214
Blood & Immune Disorders	718	\$416,460	327	\$297,258	\$259,009	\$16,463	\$21,787	\$215,142	\$82,116
Congenital Malformations & Abnormalities	311	\$611,052	129	\$179,923	\$27,872	\$1,403	\$150,648	\$95,679	\$84,244
Ear and Mastoid Process	1,597	\$644,319	543	\$134,464	\$76,688	\$14,059	\$43,716	\$62,588	\$71,876
External Causes of Morbidity	6	\$1,053	6	\$22,158	\$21,183	\$436	\$540	\$414	\$21,744
Total	18,957	\$83,741,413	15,125	\$25,437,498	\$15,709,134	\$4,430,291	\$5,298,074	\$10,113,818	\$15,323,680

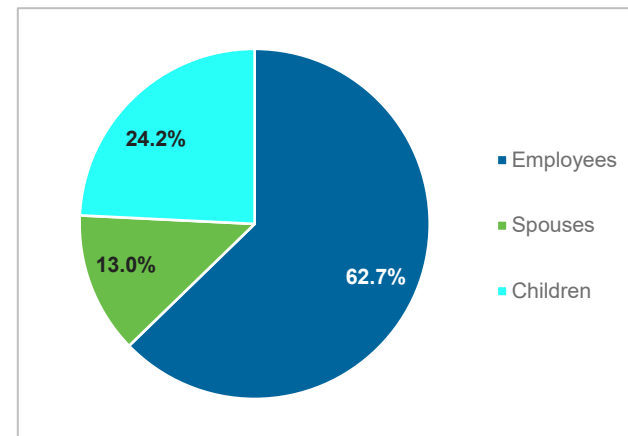
Health Status & Health Services

Breakout by Diagnostic Grouping & Demographics

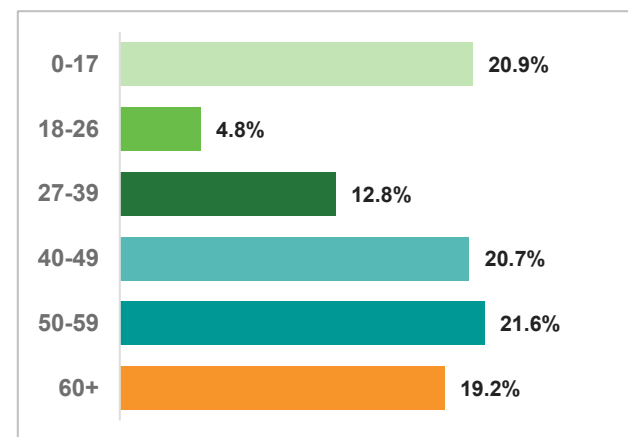


#	Health Status & Services Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Medical examination/evaluation	4,208	5,752	\$744,314	26.3%
2	Neoplasm-related encounters	1,329	2,036	\$525,333	18.5%
3	Encounter for antineoplastic therapies	25	84	\$463,995	16.4%
4	Exposure, enc, screen or contact w infectious dz	1,631	1,990	\$431,477	15.2%
5	Other aftercare encounter	161	275	\$152,079	5.4%
6	Contraceptive & procreative management	294	435	\$142,433	5.0%
7	Personal/family history of disease	231	313	\$110,980	3.9%
8	Encount for obs & exam for conds ruled out	585	679	\$46,377	1.6%
9	Other specified status	340	463	\$41,245	1.5%
10	Implant, device or graft related encounter	130	255	\$40,247	1.4%
11	Encounter for prophylactic or oth procedures	23	25	\$39,262	1.4%
12	Acquired absence of limb or organ	14	23	\$37,930	1.3%
13	Other specified encounters & counseling	128	392	\$32,667	1.2%
14	Organ transplant status	15	23	\$13,876	0.5%
15	Lifestyle/life management factors	29	43	\$5,119	0.2%
16	Encounter for administrative purposes	14	15	\$3,293	0.1%
17	Enc for prophylactic measures (ex immuniz)	19	26	\$2,684	0.1%
18	Screen for neuro -cognitive or -developmntl cond	42	43	\$1,107	0.0%
19	Counseling rel to sexual behavior or orientation	5	8	\$447	0.0%
20	Carrier status	3	6	\$180	0.0%
...	All Others	313	328	\$222	0.0%
=	Total	6,666	13,475	\$2,835,267	100.0%

Health Status & Services Paid by Relationship



Health Status & Services Paid by Age Range



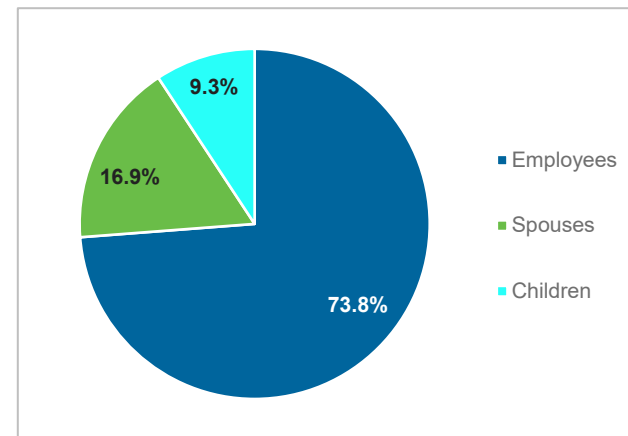
Musculoskeletal System

Breakout by Diagnostic Grouping & Demographics

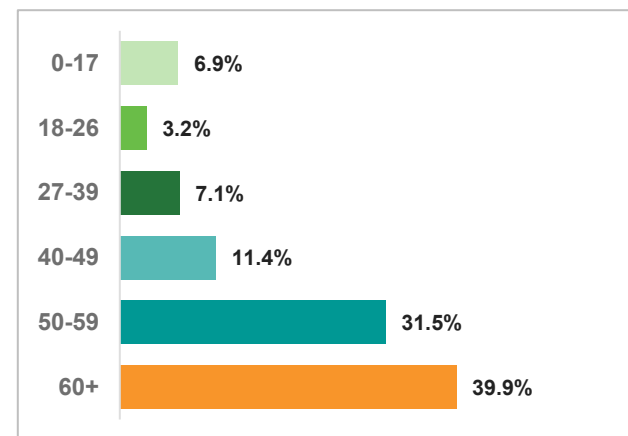


#	Musculoskeletal Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Spondylopathies & arthropathy	743	1,932	\$669,180	25.5%
2	Other musculoskeletal pain	1,346	3,072	\$521,792	19.9%
3	Scoliosis & oth deformities	187	302	\$382,063	14.5%
4	Osteoarthritis & osteoporosis	298	641	\$357,495	13.6%
5	Tendon, tissue, muscle disorders	513	1,074	\$303,243	11.5%
6	Other MSK	56	134	\$153,177	5.8%
7	Joint disorders & fractures	159	282	\$102,805	3.9%
8	Low back pain	313	727	\$60,852	2.3%
9	Rheumatoid arthritis & related disease	82	169	\$49,371	1.9%
10	Lupus	60	129	\$20,035	0.8%
11	Biomechanical lesions	234	609	\$5,529	0.2%
12	Gout & crystal arthropathies	37	47	\$3,063	0.1%
=	Total	2,848	9,637	\$2,628,605	100.0%

Musculoskeletal Paid by Relationship



Musculoskeletal Paid by Age Range



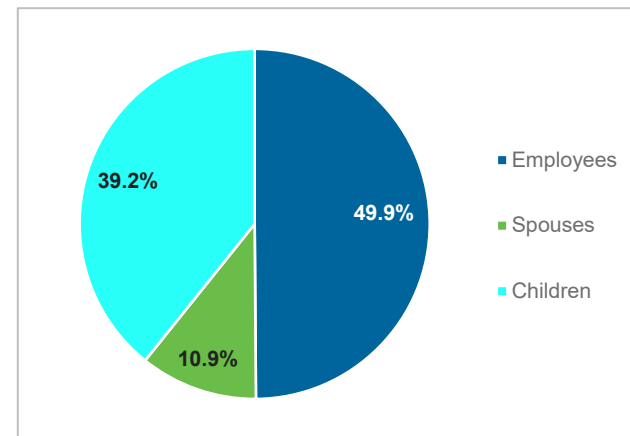
Injury, Poisoning & External Causes

Breakout by Diagnostic Grouping & Demographics

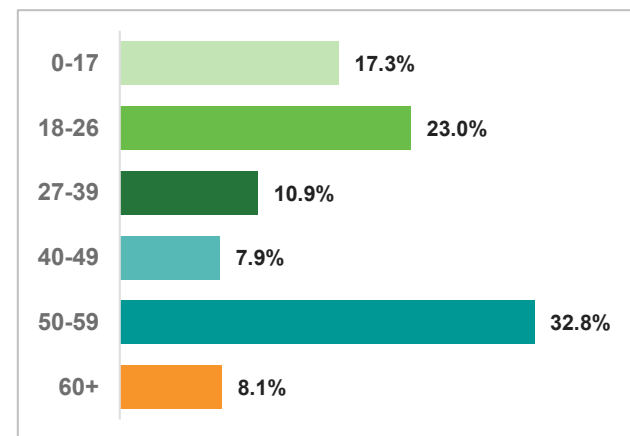


#	Injury & Poisoning Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Fracture of lower limb (except hip)	70	308	\$548,284	26.3%
2	Traumatic brain injury (TBI); concuss	31	78	\$338,372	16.2%
3	Sprains & strains	331	753	\$271,339	13.0%
4	Fracture of the upper limb	97	325	\$141,130	6.8%
5	Superficial injury; contusion	161	213	\$105,956	5.1%
6	Open wounds of head & neck	42	80	\$90,090	4.3%
7	Open wounds to limbs	112	179	\$87,507	4.2%
8	Compl of intern orthop device or implant	15	24	\$87,063	4.2%
9	Burn & corrosion	13	17	\$63,300	3.0%
10	Compl of surg or med care, injury	25	64	\$56,877	2.7%
11	Fracture of the spine & back	11	28	\$50,106	2.4%
12	Other unspecified injury	173	266	\$42,346	2.0%
13	Allergic reactions	65	89	\$34,220	1.6%
14	Internal organ injury	7	17	\$32,251	1.5%
15	Other injury	33	44	\$30,154	1.4%
16	Dislocations	30	63	\$30,083	1.4%
17	Fracture of head & neck	11	26	\$15,811	0.8%
18	Fracture of torso	12	28	\$15,660	0.8%
19	Effect of for body entering opening	20	29	\$10,934	0.5%
20	Toxic effects	21	27	\$6,338	0.3%
...	All Others	63	130	\$29,158	1.4%
=	Total	1,114	2,967	\$2,086,979	100.0%

Injury & Poisoning Paid by Relationship



Injury & Poisoning Paid by Age Range



Mental & Behavioral Trend

Prevalence & Cost by Diagnostic Grouping

Mental & Behavioral Diagnostic Grouping	2023 (Full Year)		2024 (Full Year)		2025-1Q		2025-1Q Paid by Claim Type			
	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid	Inpatient	Outpatient	Physician	Ancillary
Neurodevelopmental disorders	475	\$333,190	839	\$967,358	552	\$521,279	\$0	\$330	\$520,949	\$0
Depressive disorders	809	\$816,779	1,312	\$1,765,217	833	\$467,984	\$68,170	\$12,724	\$387,091	\$0
Anxiety & related Disorders	1,022	\$497,830	1,659	\$914,955	990	\$310,692	\$0	\$9,917	\$299,558	\$1,217
Trauma & stressor disorders	656	\$443,281	1,151	\$777,003	721	\$280,364	\$0	\$5,603	\$274,761	\$0
Alcohol-related disorders	68	\$264,765	100	\$479,637	52	\$138,498	\$114,816	\$2,196	\$21,487	\$0
Other mental health	225	\$81,468	370	\$451,071	193	\$89,786	\$0	\$39,426	\$50,359	\$0
Schizophrenia spectrum disorders	23	\$59,238	29	\$162,208	16	\$81,561	\$56,120	\$5,605	\$19,835	\$0
Bipolar & related Disorders	142	\$184,393	220	\$270,639	175	\$56,514	\$0	\$36	\$56,478	\$0
Eating disorders	38	\$115,900	53	\$266,949	33	\$55,948	\$0	\$0	\$55,948	\$0
Suicidal ideation, attempt or self-harm	40	\$168,577	61	\$408,763	18	\$42,072	\$0	\$34,531	\$7,541	\$0
Obsessive compulsive disorders	35	\$95,327	82	\$67,055	57	\$27,791	\$0	\$0	\$27,791	\$0
Opioid disorders	19	\$18,055	20	\$34,948	15	\$4,175	\$0	\$0	\$4,175	\$0
Other substance use	43	\$8,400	90	\$9,948	17	\$2,938	\$0	\$651	\$2,287	\$0
Cannabis-related disorders	12	\$2,064	19	\$5,491	9	\$2,398	\$0	\$0	\$2,398	\$0
Stimulant disorders	7	\$6,127	11	\$14,892	3	\$1,066	\$0	\$0	\$1,066	\$0
Total	2,630	\$3,095,394	4,161	\$6,596,135	2,965	\$2,083,066	\$239,106	\$111,018	\$1,731,724	\$1,217

Chronic Conditions

Prevalence & Severity of 24 Chronic Conditions



Chronic Condition	With Condition			Moderate/High Risk Condition					
	# of Mems	Mems per 1000	Change vs LY	# of Mems	Mems per 1000	Change vs LY	Allowed PMPY	Admits per 1000	ER Visits per 1000
Affective Psychosis	50	2.6	100.0%	30	1.6	66.7%	\$4,821	60.0	140.0
Asthma	693	36.0	32.3%	267	13.9	38.3%	\$5,808	67.8	254.0
Atrial Fibrillation	121	6.3	31.5%	82	4.3	32.3%	\$31,472	256.2	487.6
Blood Disorders	714	37.1	43.4%	304	15.8	36.3%	\$11,155	121.8	303.9
CAD	196	10.2	56.8%	96	5.0	50.0%	\$16,534	193.9	387.8
COPD	43	2.2	38.7%	29	1.5	93.3%	\$37,662	674.4	1,069.8
Cancer	1,217	63.3	38.8%	567	29.5	42.1%	\$12,148	50.1	166.0
Chronic Pain	128	6.7	18.5%	54	2.8	38.5%	\$21,569	179.7	367.2
CHF	48	2.5	140.0%	27	1.4	92.9%	\$55,768	458.3	583.3
Demyelinating Diseases	57	3.0	9.6%	38	2.0	22.6%	\$23,817	52.6	280.7
Depression	1,290	67.1	52.1%	930	48.4	64.0%	\$7,516	88.4	260.5
Diabetes	1,122	58.3	51.6%	806	41.9	56.2%	\$7,696	66.8	278.1
ESRD	48	2.5	108.7%	30	1.6	57.9%	\$58,423	1,041.7	1,520.8
Eating Disorders	51	2.7	30.8%	39	2.0	69.6%	\$13,728	117.6	509.8
HIV/AIDS	30	1.6	50.0%	23	1.2	53.3%	\$2,399	33.3	133.3
Hyperlipidemia	638	33.2	46.7%	206	10.7	42.1%	\$2,553	14.1	64.3
Hypertension	1,570	81.6	41.4%	779	40.5	44.8%	\$5,774	54.1	175.2
Immune Disorders	63	3.3	34.0%	27	1.4	35.0%	\$7,122	15.9	238.1
IBD	92	4.8	70.4%	37	1.9	105.6%	\$2,873	43.5	97.8
Liver Disease	3	0.2	-	3	0.2	-	\$52,256	666.7	2,333.3
Morbid Obesity	256	13.3	43.8%	126	6.6	44.8%	\$6,415	101.6	125.0
Osteoarthritis	585	30.4	43.7%	254	13.2	39.6%	\$9,938	42.7	153.8
Peripheral Vascular Disease	70	3.6	112.1%	13	0.7	30.0%	\$7,620	100.0	228.6
Rheumatoid Arthritis	114	5.9	21.3%	84	4.4	29.2%	\$9,109	87.7	254.4

- Most prevalent chronic condition is Hypertension, with 1,570 members
- Depression is the condition with the most moderate/high risk members (930)
- Members with mod/high risk Depression also have the highest combined cost, totaling \$6.99M

Date Range: Service Dates 7/1/2023 - 6/30/2024, Paid through 9/30/2024

With Condition members are identified by having any covered claim with a diagnosis for the condition in Dx position 1.

Moderate/High-Risk Condition members had either multiple provider visits for the condition (based on Dx position 1) during the date range or at least one ER Visit or Admission for the condition in the range.

Cost & Utilization for All Members:

- Allowed PMPY: \$5,286
- Admits per 1000: 40.3
- ER Visits per 1000: 188.5

Prevention, Wellness, & Maintenance

Preventive & Condition-specific Screening Rate Trends



Preventive Service	Population	Jul 2022 - Jun 2023			Jul 2023 - Jun 2024			Rate Change	UMR Norm	
		Eligible	Actual	Rate	Eligible	Actual	Rate		Rate	Variance
Well Visits	Rate for Well Baby & Well Child is Visits per 1,000. Rate for adults is the percentage who had a well visit.									
Well Baby Visit	0 - 15 months	185.2	1,004	5,421.1	241.0	1,306	5,418.0	-0.1%	5,262.6	3.0%
Well Child Visit	3 - 6 years	749.3	589	786.0	961.6	788	819.5	4.3%	781.1	4.9%
Adults w/ Well Visit	Adults 18+	10,729	4,506	42.0%	14,500	6,249	43.1%	1.1	40.0%	3.1
Screenings	Rate for all screenings is the percentage of eligible population who had the screening during the period.									
Mammogram	Females 40 - 69	3,356	1,537	45.8%	4,456	2,076	46.6%	0.8	46.8%	-0.2
Cervical Cancer	Females 21 - 64	5,728	1,698	29.6%	7,671	2,306	30.1%	0.4	23.7%	6.4
Prostate Cancer	Males 50 - 70	1,428	603	42.2%	1,976	871	44.1%	1.8	41.1%	3.0
Colorectal Cancer	Members 45 - 75	4,575	805	17.6%	6,163	1,124	18.2%	0.6	17.1%	1.2
Cholesterol	Female 45+ Male 35+	5,625	3,077	54.7%	7,581	4,311	56.9%	2.2	47.3%	9.5
Condition-specific	Screening									
Asthma	Office Visit for Asthma	524	416	79.4%	693	566	81.7%	2.3		
COPD	Spirometry Test	31	8	25.8%	43	5	11.6%	-14.2		
Type 2 Diabetes	A1c Test	676	598	88.5%	1,034	959	92.7%	4.3	86.0%	6.7
	Eye Exam	676	166	24.6%	1,034	234	22.6%	-1.9	25.5%	-2.9
	Lipid Panel	676	537	79.4%	1,034	873	84.4%	5.0	72.1%	12.3
	Urine Protein Test	676	450	66.6%	1,034	717	69.3%	2.8	63.0%	6.4
	Any Diabetes Screen	676	631	93.3%	1,034	996	96.3%	3.0	93.8%	2.6
Hyperlipidemia	Lipid Profile	435	239	54.9%	638	334	52.4%	-2.6		
Hypertension	Creatinine Test	1,110	242	21.8%	1,570	309	19.7%	-2.1		
	Lipid Profile	1,110	332	29.9%	1,570	435	27.7%	-2.2		

Date Range: Reporting periods are service-based with 3 months of runout: Current period is Service Dates 7/1/2023 - 6/30/2024, Paid through 9/30/2024

Note: Preventive Services do not include those performed at onsite clinics or ones for which no claim was submitted to UMR.

Public Employees' Benefits Program - RX Costs
PY 2025 - Quarter Ending September 30, 2024

Express Scripts

1Q FY2025 LDPPO		1Q FY2025 LDPPO	Difference		% Change
Membership Summary			Membership Summary		
Member Count (Membership)	22,712	18,259	4,453		24.4%
Utilizing Member Count (Patients)	12,015	9,373	2,642		28.2%
Percent Utilizing (Utilization)	52.9%	51.3%	0		3.1%
Claim Summary			Claims Summary		
Net Claims (Total Rx's)	85,035	63,609	21,426		33.7%
Claims per Elig Member per Month (Claims PMPM)	1.25	1.16	0.09		7.8%
Total Claims for Generic (Generic Rx)	72,498	54,269	18,229.00		33.6%
Total Claims for Brand (Brand Rx)	1,537	9,340	(7,803.00)		-83.5%
Total Claims for Brand w/Gen Equiv (Multisource Brand Claims)	253	370	(117.00)		-31.6%
Total Non-Specialty Claims	84,059	62,781	21,278.00		33.9%
Total Specialty Claims	976	828	148.00		17.9%
Generic % of Total Claims (GFR)	85.3%	85.3%	(0.00)		-0.1%
Generic Effective Rate (GCR)	99.7%	99.3%	0.00		0.3%
Mail Order Claims	22,982	19,378	3,604.00		18.6%
Mail Penetration Rate*	30.8%	34.5%	(0.04)		-3.7%
Claims Cost Summary			Claims Cost Summary		
Total Prescription Cost (Total Gross Cost)	\$13,136,403	\$9,192,157	\$3,944,246.00		42.9%
Total Generic Gross Cost	\$1,396,021	\$1,005,248	\$390,773.00		38.9%
Total Brand Gross Cost	\$11,740,382	\$8,186,909	\$3,553,473.00		43.4%
Total MSB Gross Cost	\$117,445	\$176,029	(\$58,584.00)		-33.3%
Total Ingredient Cost	\$12,766,859	\$8,917,016	\$3,849,843.00		43.2%
Total Dispensing Fee	\$360,181	\$267,610	\$92,571.00		34.6%
Total Other (e.g. tax)	\$9,363	\$7,531	\$1,832.00		24.3%
Avg Total Cost per Claim (Gross Cost/Rx)	\$154.48	\$144.51	\$9.97		6.9%
Avg Total Cost for Generic (Gross Cost/Generic Rx)	\$19.26	\$18.52	\$0.74		4.0%
Avg Total Cost for Brand (Gross Cost/Brand Rx)	\$936.46	\$876.54	\$59.92		6.8%
Avg Total Cost for MSB (MSB Gross Cost/MSB ARx)	\$464.21	\$475.75	(\$11.54)		-2.4%
Member Cost Summary			Member Cost Summary		
Total Member Cost	\$1,910,096	\$1,305,360	\$604,736.00		46.3%
Total Copay	\$1,910,096	\$1,305,360	\$604,736.00		46.3%
Total Deductible	\$0	\$0	\$0.00		0.0%
Avg Copay per Claim (Copay/Rx)	\$22.46	\$20.52	\$1.94		9.5%
Avg Participant Share per Claim (Copay+Deductible/RX)	\$22.46	\$20.52	\$1.94		9.5%
Avg Copay for Generic (Copay/Generic Rx)	\$7.09	\$6.57	\$0.52		7.9%
Avg Copay for Brand (Copay/Brand Rx)	\$111.38	\$101.56	\$9.82		9.7%
Avg Copay for Brand w/ Generic Equiv (Copay/Multisource Rx)	\$38.28	\$28.55	\$9.73		34.1%
Net PMPM (Participant Cost PMPM)	\$28.03	\$23.83	\$4.20		17.6%
Copay % of Total Prescription Cost (Member Cost Share %)	14.5%	14.2%	0.3%		2.4%
Plan Cost Summary			Plan Cost Summary		
Total Plan Cost (Plan Cost)	\$11,226,307	\$7,886,797	\$3,339,510.00		42.3%
Total Non-Specialty Cost (Non-Specialty Plan Cost)	\$882,275	\$4,043,471	(\$3,161,196.00)		-78.2%
Total Specialty Drug Cost (Specialty Plan Cost)	\$10,344,032	\$3,843,326	\$6,500,706.00		169.1%
Avg Plan Cost per Claim (Plan Cost/Rx)	\$132.02	\$123.99	\$8.03		6.5%
Avg Plan Cost for Generic (Plan Cost/Generic Rx)	\$12.17	\$11.95	\$0.22		1.8%
Avg Plan Cost for Brand (Plan Cost/Brand Rx)	\$825.08	\$774.98	\$50.10		6.5%
Avg Plan Cost for MSB (MSB Plan Cost/MSB ARx)	\$425.92	\$447.20	(\$21.28)		-4.8%
Net PMPM (Plan Cost PMPM)	\$164.76	\$143.98	\$20.78		14.4%
PMPM for Specialty Only (Specialty PMPM)	\$72.01	\$73.82	(\$1.81)		-2.5%
PMPM without Specialty (Non-Specialty PMPM)	\$92.76	\$70.16	\$22.60		32.2%
Rebates Received (Q1 FY2023 actual)	\$3,838,639	\$2,884,075	\$954,563.91		33.1%
Net PMPM (Plan Cost PMPM factoring Rebates)	\$108.43	\$91.33	\$17.10		18.7%
PMPM without Specialty (Non-Specialty PMPM)	\$56.09	\$47.08	\$9.01		19.1%
PMPM for Specialty Only (Specialty PMPM)	\$46.14	\$44.39	\$1.75		3.9%

Appendix C

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UMR Inc. – EPO Utilization Review for PEBP

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PEBP

Public Employees' Benefits Program

Quarterly Plan Performance Review

EPO Plan • 2025-1Q



A UnitedHealthcare Company

Report Criteria & Contents



Experience Periods*

➤ 2025 Plan Year (Current)

2025-1Q.1st Quarter: Claims Paid 7/1/2024 - 9/30/2024

➤ 2024 Plan Year

2024-1Q.1st Quarter: Claims Paid 7/1/2023 - 9/30/2023

2024 Full Year: Claims paid 7/1/2023 - 6/30/2024

➤ 2023 Plan Year

2023-1Q.1st Quarter: Claims Paid 7/1/2022 - 9/30/2022

2023 Full Year: Claims paid 7/1/2022 - 6/30/2023

Group Data

- Data reported is for the EPO Plan only:
- Contract = 7670-00-414946 or 7670-09-414946
- Except where indicated, Report is for Medical data only excluding claim expenses

Normative Comparison Data

- Norm Groups: UMR Book of Business in InfoPortSM
- Composition: 4,555 groups with approximately 6.5 million members
- Norm Period matches Current Year: Claims Paid 7/1/2024 - 9/30/2024

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* Additional date ranges for specific figures are defined on the page if applicable



Cost Drivers

- Overall Cost Trend based on Medical Paid PEPY: +55.8%
- High-Cost Claimants Paid PMPM trend: +407.5%; Non HCCs trend: +8.2%
- Top Paid Diagnostic Chapters: Perinatal Conditions (+547.5% Paid PMPM), Circulatory System (+33.9%), Musculoskeletal (+11.0%)



Membership & Demographics

- Total membership is 9.5% lower than prior period
- Employees decreased 9.4%, while Dependents were down 9.7%
- 89.5% of members had < \$2,500 medical paid, with 27.6% having no claims paid at all during the reporting period



Utilization Key Indicators

- Paid per IP Admit was \$29,758, which is 4.8% lower than 2024-1Q
- Paid per ER Visit was \$3,312, which is 14.8% higher than 2024-1Q



Network Utilization & Savings

- 96.2% of all Medical spend dollars were to In Network providers
- The average In Network discount was 47.9%, which is 8.3 pts below the 2024 average discount of 56.2%

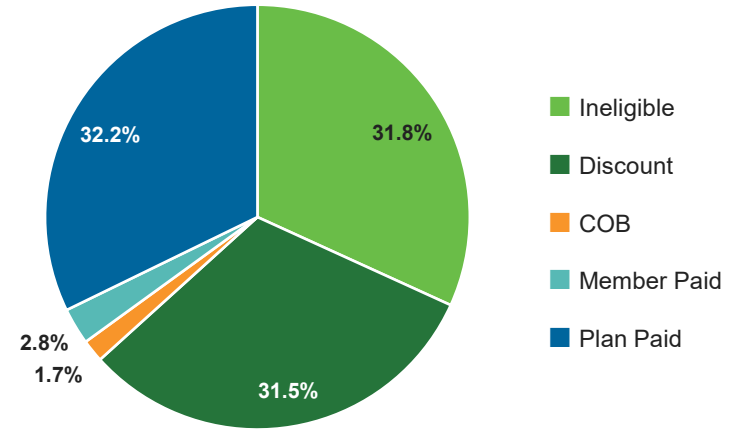
Medical Total Savings Summary



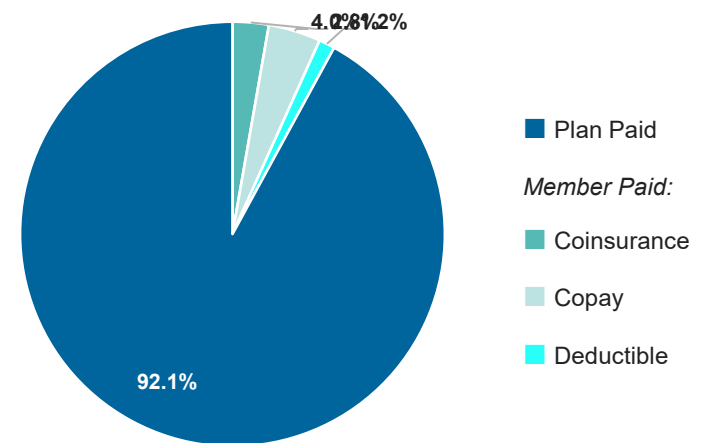
Dollar Chain: Billed to Paid Dollars

Dollar Amount	2025-1Q Total Dollars	2025-1Q PMPM*	2024 PMPM*	Trend
Medical Billed	\$40,289,273	\$2,548	\$2,127	19.8%
(-) Ineligible	\$12,813,330	\$810	\$504	60.9%
Medical Covered	\$27,475,942	\$1,737	\$1,623	7.1%
(-) Discount	\$12,685,459	\$802	\$890	-9.9%
Medical Allowed	\$14,790,483	\$935	\$733	27.6%
(-) COB	\$691,922	\$44	\$24	78.6%
(-) Coinsurance	\$387,842	\$25	\$21	18.3%
(-) Copay	\$561,053	\$35	\$34	4.6%
(-) Deductible	\$171,048	\$11	\$6	69.7%
Total Member Paid	\$1,119,943	\$71	\$61	16.0%
Total Plan Paid	\$12,977,563	\$821	\$643	27.6%

Breakout of Billed Dollars



Breakout of Paid Dollars: Plan vs. Member Paid



* PMPM (per member per month): Amount per the average total membership (both primary subscribers and dependents) per month.

Medical & Rx Paid Claims by Age Range



Age	2024-1Q (7/1/2023 - 9/30/2023)						2025-1Q (7/1/2024 - 9/30/2024)						Change	
	Med Paid	Med Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	Med Paid	Med Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	Total Paid	Tot Paid PMPM
<1	\$38,754	\$234	\$1,896	\$11	\$40,650	\$246	\$2,997,979	\$29,802	\$25	\$0	\$2,998,004	\$29,802	7275.1%	12034.9%
1	\$33,965	\$253	\$827	\$6	\$34,791	\$259	\$118,205	\$856	\$518	\$4	\$118,723	\$859	241.2%	231.7%
2 - 4	\$221,384	\$385	\$2,341	\$4	\$223,725	\$389	\$40,227	\$97	\$1,720	\$4	\$41,947	\$101	-81.3%	-74.1%
5 - 9	\$108,077	\$115	\$8,642	\$9	\$116,719	\$124	\$122,846	\$127	\$10,732	\$11	\$133,578	\$138	14.4%	11.3%
10 - 14	\$370,473	\$284	\$36,255	\$28	\$406,728	\$311	\$259,082	\$226	\$46,300	\$40	\$305,382	\$266	-24.9%	-14.6%
15 - 19	\$430,472	\$292	\$179,787	\$122	\$610,259	\$415	\$579,158	\$440	\$191,255	\$145	\$770,413	\$585	26.2%	41.1%
20 - 24	\$331,699	\$232	\$51,215	\$36	\$382,914	\$267	\$309,036	\$227	\$124,573	\$92	\$433,608	\$319	13.2%	19.3%
25 - 29	\$124,795	\$226	\$115,943	\$210	\$240,738	\$436	\$115,519	\$266	\$97,752	\$225	\$213,270	\$491	-11.4%	12.8%
30 - 34	\$381,765	\$535	\$419,645	\$588	\$801,410	\$1,122	\$289,020	\$463	\$181,320	\$290	\$470,340	\$753	-41.3%	-32.9%
35 - 39	\$651,111	\$588	\$168,837	\$152	\$819,948	\$740	\$566,221	\$623	\$101,208	\$111	\$667,429	\$735	-18.6%	-0.7%
40 - 44	\$586,504	\$493	\$318,094	\$268	\$904,599	\$761	\$438,057	\$399	\$559,970	\$511	\$998,028	\$910	10.3%	19.6%
45 - 49	\$650,667	\$496	\$498,222	\$380	\$1,148,889	\$876	\$1,781,625	\$1,561	\$445,527	\$390	\$2,227,152	\$1,952	93.9%	122.8%
50 - 54	\$1,344,851	\$777	\$416,875	\$241	\$1,761,727	\$1,018	\$1,046,206	\$682	\$476,198	\$310	\$1,522,404	\$993	-13.6%	-2.5%
55 - 59	\$1,312,570	\$753	\$641,178	\$368	\$1,953,748	\$1,121	\$1,323,623	\$774	\$774,707	\$453	\$2,098,330	\$1,227	7.4%	9.5%
60 - 64	\$1,794,015	\$867	\$873,721	\$422	\$2,667,736	\$1,289	\$1,900,487	\$1,023	\$1,063,520	\$572	\$2,964,007	\$1,595	11.1%	23.8%
65+	\$810,995	\$783	\$440,129	\$425	\$1,251,124	\$1,207	\$1,090,272	\$1,029	\$538,181	\$508	\$1,628,453	\$1,537	30.2%	27.3%
Total	\$9,192,097	\$526	\$4,173,608	\$239	\$13,365,705	\$765	\$12,977,563	\$821	\$4,613,505	\$292	\$17,591,067	\$1,112	31.6%	45.5%

Financial Summary – YTD Trend

Total Plan & Norm



Measure	Total Plan					UMR Norm	
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2025-1Q	Variance
Average Enrollment							
Employees	3,554	-11.3%	3,151	-9.4%	2,855		
Spouses	700	-13.5%	605	-9.0%	551		
Children	2,348	-11.8%	2,070	-9.9%	1,865		
Tot. Members	6,602	-11.8%	5,826	-9.5%	5,271		
Avg. Family Size	1.9	-0.5%	1.8	-0.2%	1.8	1.9	-3.7%
Financial Summary							
Allowed	\$4,406,939	144.0%	\$10,753,039	37.5%	\$14,790,483		
Plan Paid	\$3,363,915	173.3%	\$9,192,097	41.2%	\$12,977,563		
Member Paid (OOP)	\$782,570	45.2%	\$1,136,084	-1.4%	\$1,119,943		
Paid PEPY	\$3,786	208.2%	\$11,670	55.8%	\$18,180	\$10,338	75.9%
Paid PMPY	\$2,038	209.7%	\$6,311	56.0%	\$9,848	\$5,392	82.6%
Paid PEPM	\$316	208.2%	\$973	55.8%	\$1,515	\$861	75.9%
Paid PMPM	\$170	209.7%	\$526	56.0%	\$821	\$449	82.6%
High-Cost Claimants (Med Paid \$100,000+)							
# of HCCs	0	-	7	57.1%	11		
HCCs per 1000	0.0	-	1.2	73.7%	2.1	1.1	85.5%
Paid per HCC	\$0	-	\$157,437	192.2%	\$459,985	\$203,568	126.0%
HCC Paid % of Tot	0.0%	-	12.0%	27.0	39.0%	18.4%	20.6
Cost Distribution by Claim Type (Paid PMPY)							
Inpatient	\$154	751.6%	\$1,314	222.2%	\$4,235	\$1,382	206.5%
Outpatient	\$529	299.1%	\$2,110	7.9%	\$2,276	\$1,573	44.7%
Physician	\$1,334	109.4%	\$2,794	15.8%	\$3,237	\$2,325	39.2%
Ancillary	\$21	344.5%	\$93	8.9%	\$101	\$112	-9.8%

- With \$11.1M paid, the State Active population is 85.8% of total 2025-1Q med spend
- On a Paid PMPM basis, State Actives are up 56.2% compared to prior year
- Total EPO Plan Paid PMPM trend is +56.0%

PEPY (per employee per year) and **PEPM** (per employee per month) represent amounts per the primary subscriber (employee or retiree).

PMPY (per member per year) and **PMPM** (per member per month) represent amounts per all covered members, including dependents.

Amounts **Per Year (PEPY and PMPY)** have been annualized.

HCCs (High-cost Claimants) are based on patients with \$100,000+ paid medical in the period.

Claim Type: Ancillary includes Durable Medical Equipment, prosthetics, some drugs paid on the medical plan, et al.

Financial Summary – YTD Trend

Active Members



Measure	State Active					Non-State Active				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Average Enrollment										
Employees	2,960	-11.9%	2,606	-10.3%	2,339	1	0.0%	1	50.0%	2
Spouses	598	-14.2%	513	-9.2%	466	0	-	0	-	0
Children	2,193	-12.0%	1,930	-10.3%	1,732	0	-	0	-	0
Tot. Members	5,751	-12.2%	5,050	-10.2%	4,536	1	0.0%	1	50.0%	2
Avg. Family Size	1.9	-0.3%	1.9	0.1%	1.9	1.0	0.0%	1.0	0.0%	1.0
Financial Summary										
Allowed	\$3,653,830	147.1%	\$9,029,275	35.3%	\$12,220,522	\$427	-47.7%	\$223	1107.7%	\$2,698
Plan Paid	\$2,868,930	176.7%	\$7,938,117	40.3%	\$11,140,926	\$262	-31.4%	\$179	990.6%	\$1,957
Member Paid (OOP)	\$635,546	48.9%	\$946,220	-3.9%	\$908,947	\$165	-73.4%	\$44	1585.6%	\$741
Paid PEPY	\$3,877	214.2%	\$12,184	56.4%	\$19,056	\$785	-31.4%	\$538	627.1%	\$3,914
Paid PMPY	\$1,995	215.1%	\$6,288	56.2%	\$9,823	\$785	-31.4%	\$538	627.1%	\$3,914
Paid PEPM	\$323	214.2%	\$1,015	56.4%	\$1,588	\$65	-31.4%	\$45	627.1%	\$326
Paid PMPM	\$166	215.1%	\$524	56.2%	\$819	\$65	-31.4%	\$45	627.1%	\$326
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	0	-	7	28.6%	9	0	-	0	-	0
HCCs per 1000	0.0	-	1.4	43.1%	2.0	0.0	-	0.0	-	0.0
Paid per HCC	\$0	-	\$157,437	228.9%	\$517,762	\$0	-	\$0	-	\$0
HCC Paid % of Tot	0.0%	-	13.9%	27.9	41.8%	0.0%	-	0.0%	-	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$164	740.9%	\$1,377	223.8%	\$4,460	\$0	-	\$0	-	\$0
Outpatient	\$524	302.3%	\$2,110	0.7%	\$2,124	\$0	-	\$0	-	\$0
Physician	\$1,286	110.7%	\$2,710	16.0%	\$3,144	\$723	-25.5%	\$538	558.3%	\$3,544
Ancillary	\$21	325.8%	\$91	5.1%	\$95	\$62	-100.0%	\$0	-	\$370

Financial Summary – YTD Trend

Retired Members



Measure	State Retirees					Non-State Retirees				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Average Enrollment										
Employees	524	-6.8%	488	-3.8%	470	69	-20.3%	55	-18.2%	45
Spouses	87	-7.2%	81	-5.6%	76	15	-25.0%	11	-27.3%	8
Children	144	-11.1%	128	-2.8%	124	11	5.9%	12	-22.2%	9
Tot. Members	755	-7.7%	697	-3.8%	670	95	-17.9%	78	-20.1%	62
Avg. Family Size	1.4	-0.9%	1.4	0.0%	1.4	1.4	3.0%	1.4	-2.3%	1.4
Financial Summary										
Allowed	\$667,258	135.4%	\$1,570,647	58.8%	\$2,494,499	\$85,425	79.0%	\$152,894	-52.4%	\$72,764
Plan Paid	\$452,878	159.6%	\$1,175,470	53.5%	\$1,804,708	\$41,846	87.2%	\$78,330	-61.7%	\$29,972
Member Paid (OOP)	\$126,173	35.7%	\$171,167	15.5%	\$197,741	\$20,686	-9.8%	\$18,653	-32.9%	\$12,514
Paid PEPY	\$3,457	178.6%	\$9,629	59.6%	\$15,365	\$2,426	134.8%	\$5,697	-53.2%	\$2,664
Paid PMPY	\$2,399	181.2%	\$6,745	59.6%	\$10,768	\$1,762	128.0%	\$4,017	-52.1%	\$1,923
Paid PEPM	\$288	178.6%	\$802	59.6%	\$1,280	\$202	134.8%	\$475	-53.2%	\$222
Paid PMPM	\$200	181.2%	\$562	59.6%	\$897	\$147	128.0%	\$335	-52.1%	\$160
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	0	-	0	-	2	0	-	0	-	0
HCCs per 1000	0.0	-	0.0	-	3.0	0.0	-	0.0	-	0.0
Paid per HCC	\$0	-	\$0	-	\$198,233	\$0	-	\$0	-	\$0
HCC Paid % of Tot	0.0%	-	0.0%	-	22.0%	0.0%	-	0.0%	-	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$102	878.7%	\$997	208.8%	\$3,078	\$0	-	\$82	395.6%	\$407
Outpatient	\$589	245.7%	\$2,037	70.2%	\$3,468	\$321	783.6%	\$2,836	-79.8%	\$574
Physician	\$1,691	112.8%	\$3,599	12.7%	\$4,056	\$1,419	-24.5%	\$1,071	8.0%	\$1,157
Ancillary	\$17	569.9%	\$113	47.2%	\$166	\$22	27.6%	\$28	-869.6%	-\$214

Financial Summary – Full Year Trend

Plan Totals & Norm



Measure	Total Plan					UMR Norm	
	2023	⇒	2024	⇒	2025-1Q	2025-1Q	Variance
Average Enrollment							
Employees	3,446	-10.4%	3,089	-7.6%	2,855		
Spouses	677	-11.1%	602	-8.5%	551		
Children	2,295	-11.3%	2,037	-8.4%	1,865		
Tot. Members	6,418	-10.8%	5,727	-8.0%	5,271		
Avg. Family Size	1.9	-0.4%	1.9	-0.4%	1.8	1.9	-3.7%
Financial Summary							
Allowed	\$44,484,565	13.3%	\$50,382,246	-70.6%	\$14,790,483		
Plan Paid	\$38,860,556	13.8%	\$44,213,123	-70.6%	\$12,977,563		
Member Paid (OOP)	\$3,958,946	5.9%	\$4,194,135	-73.3%	\$1,119,943		
Paid PEPY	\$11,276	27.0%	\$14,315	27.0%	\$18,180	\$10,338	75.9%
Paid PMPY	\$6,055	27.5%	\$7,720	27.6%	\$9,848	\$5,392	82.6%
Paid PEPM	\$940	27.0%	\$1,193	27.0%	\$1,515	\$861	75.9%
Paid PMPM	\$505	27.5%	\$643	27.6%	\$821	\$449	82.6%
High-Cost Claimants (Med Paid \$100,000+)							
# of HCCs	50	24.0%	62	-82.3%	11		
HCCs per 1000	7.8	39.0%	10.8	-80.7%	2.1	1.1	85.5%
Paid per HCC	\$256,471	4.8%	\$268,731	71.2%	\$459,985	\$203,568	126.0%
HCC Paid % of Tot	33.0%	4.7	37.7%	1.3	39.0%	18.4%	20.6
Cost Distribution by Claim Type (Paid PMPY)							
Inpatient	\$1,705	35.6%	\$2,312	83.2%	\$4,235	\$1,382	206.5%
Outpatient	\$1,829	19.0%	\$2,177	4.6%	\$2,276	\$1,573	44.7%
Physician	\$2,454	27.7%	\$3,134	3.3%	\$3,237	\$2,325	39.2%
Ancillary	\$66	48.5%	\$98	2.9%	\$101	\$112	-9.8%

- Total plan paid amount for the first quarter of 2023 was 20.8% of the full year
- Annualizing 2024 paid dollars using the same ratio would result in a total paid of \$62.4 M

PEPY (per employee per year) and **PEPM** (per employee per month) represent amounts per the primary subscriber (employee or retiree).

PMPY (per member per year) and **PMPM** (per member per month) represent amounts per all covered members, including dependents.

Amounts **Per Year (PEPY and PMPY)** have been annualized for the 2024 Plan Year.

HCCs (High-cost Claimants) are based on patients with \$100,000+ paid medical in the period.

Claim Type: Ancillary includes Durable Medical Equipment, prosthetics, some drugs paid on the medical plan, et al.

Financial Summary – Full Year Trend

Active Members



Measure	State Active					Non-State Active				
	2023	⇒	2024	⇒	2025-1Q	2023	⇒	2024	⇒	2025-1Q
Average Enrollment										
Employees	2,873	-11.2%	2,551	-8.3%	2,339	2	10.0%	2	9.1%	2
Spouses	581	-11.9%	512	-8.9%	466	0	-	0	-	0
Children	2,142	-11.5%	1,896	-8.6%	1,732	0	-	0	-	0
Tot. Members	5,596	-11.4%	4,959	-8.5%	4,536	2	10.0%	2	9.1%	2
Avg. Family Size	1.9	-0.2%	1.9	-0.2%	1.9	1.0	0.0%	1.0	0.0%	1.0
Financial Summary										
Allowed	\$36,079,039	16.2%	\$41,912,359	-70.8%	\$12,220,522	\$4,201	7.5%	\$4,517	-40.3%	\$2,698
Plan Paid	\$32,177,090	18.7%	\$38,203,284	-70.8%	\$11,140,926	\$3,335	6.4%	\$3,547	-44.8%	\$1,957
Member Paid (OOP)	\$3,239,988	6.8%	\$3,460,814	-73.7%	\$908,947	\$866	12.0%	\$970	-23.6%	\$741
Paid PEPY	\$11,198	33.7%	\$14,974	27.3%	\$19,056	\$2,001	-3.3%	\$1,935	102.3%	\$3,914
Paid PMPY	\$5,750	34.0%	\$7,704	27.5%	\$9,823	\$2,001	-3.3%	\$1,935	102.3%	\$3,914
Paid PEPM	\$933	33.7%	\$1,248	27.3%	\$1,588	\$167	-3.3%	\$161	102.3%	\$326
Paid PMPM	\$479	34.0%	\$642	27.5%	\$819	\$167	-3.3%	\$161	102.3%	\$326
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	39	38.5%	54	-83.3%	9	0	-	0	-	0
HCCs per 1000	7.0	56.3%	10.9	-81.8%	2.0	0.0	-	0.0	-	0.0
Paid per HCC	\$260,607	6.8%	\$278,222	86.1%	\$517,762	\$0	-	\$0	-	\$0
HCC Paid % of Tot	31.6%	7.7	39.3%	2.5	41.8%	0.0%	-	0.0%	-	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$1,629	52.0%	\$2,476	80.2%	\$4,460	\$0	-	\$0	-	\$0
Outpatient	\$1,708	21.2%	\$2,071	2.6%	\$2,124	\$0	-	\$0	-	\$0
Physician	\$2,354	30.2%	\$3,067	2.5%	\$3,144	\$1,667	8.2%	\$1,804	96.5%	\$3,544
Ancillary	\$58	56.7%	\$92	4.1%	\$95	\$334	-60.7%	\$131	181.6%	\$370

Financial Summary – Full Year Trend

Retired Members



Measure	State Retirees					Non-State Retirees				
	2023	⇒	2024	⇒	2025-1Q	2023	⇒	2024	⇒	2025-1Q
Average Enrollment										
Employees	510	-4.8%	486	-3.3%	470	61	-18.6%	50	-9.5%	45
Spouses	83	-3.4%	80	-4.8%	76	13	-26.9%	10	-17.9%	8
Children	140	-7.5%	130	-4.0%	124	13	-11.5%	12	-18.8%	9
Tot. Members	733	-5.1%	695	-3.6%	670	87	-18.8%	71	-12.2%	62
Avg. Family Size	1.4	-0.4%	1.4	-0.3%	1.4	1.4	-0.3%	1.4	-2.9%	1.4
Financial Summary										
Allowed	\$7,841,856	-0.7%	\$7,783,435	-68.0%	\$2,494,499	\$559,469	21.9%	\$681,934	-89.3%	\$72,764
Plan Paid	\$6,449,727	-12.4%	\$5,652,251	-68.1%	\$1,804,708	\$230,404	53.7%	\$354,041	-91.5%	\$29,972
Member Paid (OOP)	\$633,860	3.4%	\$655,475	-69.8%	\$197,741	\$84,231	-8.7%	\$76,876	-83.7%	\$12,514
Paid PEPY	\$12,643	-8.0%	\$11,637	32.0%	\$15,365	\$3,772	88.7%	\$7,116	-62.6%	\$2,664
Paid PMPY	\$8,799	-7.6%	\$8,129	32.5%	\$10,768	\$2,636	89.2%	\$4,986	-61.4%	\$1,923
Paid PEPM	\$1,054	-8.0%	\$970	32.0%	\$1,280	\$314	88.7%	\$593	-62.6%	\$222
Paid PMPM	\$733	-7.6%	\$677	32.5%	\$897	\$220	89.2%	\$416	-61.4%	\$160
High-Cost Claimants (Med Paid \$100,000+)										
# of HCCs	12	-41.7%	7	-71.4%	2	0	-	1	-100.0%	0
HCCs per 1000	16.4	-38.5%	10.1	-70.4%	3.0	0.0	-	14.1	-100.0%	0.0
Paid per HCC	\$221,656	-9.1%	\$201,561	-1.7%	\$198,233	\$0	-	\$132,680	-100.0%	\$0
HCC Paid % of Tot	41.2%	-16.3	25.0%	-3.0	22.0%	0.0%	-	37.5%	-37.5	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$2,476	-48.2%	\$1,283	139.9%	\$3,078	\$165	510.1%	\$1,007	-59.6%	\$407
Outpatient	\$2,865	1.1%	\$2,898	19.7%	\$3,468	\$949	171.6%	\$2,576	-77.7%	\$574
Physician	\$3,335	14.3%	\$3,812	6.4%	\$4,056	\$1,457	-15.7%	\$1,228	-5.8%	\$1,157
Ancillary	\$123	10.3%	\$135	23.0%	\$166	\$65	167.6%	\$175	-221.9%	-\$214

Medical Paid Claims by Claim Type

Breakout of State vs. Non-State by Member Status



Claim Type	2024-1Q (7/1/2023 - 9/30/2023)				2025-1Q (7/1/2024 - 9/30/2024)				Trend
	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Total
State Members									
Inpatient	\$1,739,004	\$172,119	\$1,600	\$1,912,722	\$5,058,268	\$306,425	\$209,507	\$5,574,200	191.4%
Outpatient	\$2,663,173	\$342,733	\$12,250	\$3,018,156	\$2,408,981	\$533,173	\$47,985	\$2,990,139	-0.9%
Physician	\$3,421,406	\$591,132	\$35,948	\$4,048,487	\$3,565,581	\$591,769	\$87,969	\$4,245,320	4.9%
Ancillary	\$114,534	\$14,766	\$4,922	\$134,222	\$108,095	\$19,914	\$7,965	\$135,974	1.3%
Total	\$7,938,117	\$1,120,751	\$54,720	\$9,113,587	\$11,140,926	\$1,451,281	\$353,427	\$12,945,634	42.0%
PMPM	\$523.99	\$633.26	\$170.30	\$528.62	\$818.62	\$866.26	\$1,052.37	\$828.76	56.8%
Non-State Members									
Inpatient	\$0	\$0	\$1,600	\$1,600	\$0	\$0	\$6,337	\$6,337	296.1%
Outpatient	\$0	\$0	\$55,301	\$55,301	\$0	\$0	\$8,939	\$8,939	-83.8%
Physician	\$179	\$4,478	\$16,410	\$21,067	\$1,772	\$2,800	\$15,226	\$19,798	-6.0%
Ancillary	\$0	\$0	\$541	\$541	\$185	\$0	-\$3,329	-\$3,144	-680.9%
Total	\$179	\$4,478	\$73,852	\$78,509	\$1,957	\$2,800	\$27,172	\$31,929	-59.3%
PMPM	\$44.86	\$124.39	\$372.99	\$329.87	\$326.16	\$186.68	\$157.98	\$165.44	-49.8%
All Members									
Inpatient	\$1,739,004	\$172,119	\$3,200	\$1,914,322	\$5,058,268	\$306,425	\$215,844	\$5,580,537	191.5%
Outpatient	\$2,663,173	\$342,733	\$67,551	\$3,073,457	\$2,408,981	\$533,173	\$56,924	\$2,999,078	-2.4%
Physician	\$3,421,586	\$595,610	\$52,358	\$4,069,554	\$3,567,353	\$594,570	\$103,195	\$4,265,118	4.8%
Ancillary	\$114,534	\$14,766	\$5,463	\$134,763	\$108,280	\$19,914	\$4,636	\$132,830	-1.4%
Total	\$7,938,297	\$1,125,229	\$128,571	\$9,192,097	\$11,142,882	\$1,454,081	\$380,599	\$12,977,563	41.2%
PMPM	\$523.87	\$623.12	\$247.58	\$525.91	\$818.41	\$860.23	\$749.45	\$820.66	56.0%

Medical Cost Distribution

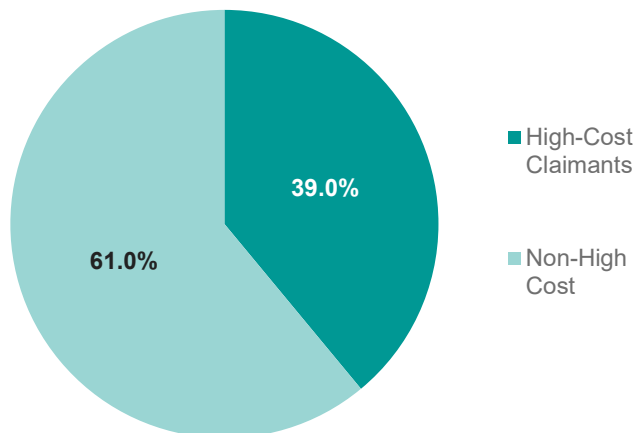
Distribution by Member Cost



Member Total Paid Range	2024-1Q (7/1/2023 - 9/30/2023)						2025-1Q (7/1/2024 - 9/30/2024)					
	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot
No Claims	1,724	27.6%	\$0	0.0%	\$0	0.0%	1,550	27.6%	\$0	0.0%	\$0	0.0%
< \$0 - \$0	254	4.1%	-\$76,616	-0.8%	\$3,311	0.3%	202	3.6%	-\$65,352	-0.5%	-\$2,458	-0.2%
> \$0 - \$2,500	3,706	59.3%	\$1,991,794	21.7%	\$539,336	47.5%	3,267	58.3%	\$1,784,124	13.7%	\$506,547	45.2%
> \$2,500 - \$5,000	248	4.0%	\$850,593	9.3%	\$177,499	15.6%	255	4.5%	\$891,978	6.9%	\$174,562	15.6%
> \$5,000 - \$10,000	151	2.4%	\$1,050,844	11.4%	\$157,399	13.9%	151	2.7%	\$1,026,982	7.9%	\$165,955	14.8%
> \$10,000 - \$25,000	96	1.5%	\$1,567,000	17.0%	\$114,049	10.0%	115	2.1%	\$1,810,843	14.0%	\$146,311	13.1%
> \$25,000 - \$50,000	43	0.7%	\$1,476,584	16.1%	\$87,616	7.7%	41	0.7%	\$1,389,510	10.7%	\$72,251	6.5%
> \$50,000 - \$100,000	18	0.3%	\$1,229,836	13.4%	\$38,429	3.4%	15	0.3%	\$1,079,648	8.3%	\$35,990	3.2%
> \$100,000	7	0.1%	\$1,102,062	12.0%	\$18,444	1.6%	11	0.2%	\$5,059,831	39.0%	\$20,786	1.9%
Total	6,247	100.0%	\$9,192,097	100.0%	\$1,136,084	100.0%	5,607	100.0%	\$12,977,563	100.0%	\$1,119,943	100.0%

* Unique Members are counted equally regardless of length of coverage. Note that because data is on a paid basis, member counts may also include those not active in the period.

Cost Distribution: HCCs vs. Non-HCCs



HCC Cost Breakout by Diagnostic Chapter

#	Diagnostic Chapter	Patients	Total Paid	% of Tot
1	Perinatal Originating Conditions	2	\$2,906,393	57.4%
2	Circulatory System	6	\$699,052	13.8%
3	Injury, Poisoning & External Causes	3	\$483,483	9.6%
4	Blood & Immune Disorders	3	\$248,095	4.9%
5	Neoplasms	4	\$246,594	4.9%
6	Infectious & Parasitic Diseases	3	\$164,291	3.2%
7	Digestive System	4	\$143,908	2.8%
8	Health Status & Health Services	9	\$98,281	1.9%
9	Nervous System	6	\$46,066	0.9%
10	Genitourinary System	4	\$8,365	0.2%
...	All Others		\$15,301	0.3%
=	Total	11	\$5,059,831	100.0%

Utilization Summary – YTD Trend

Plan Totals & Norm



Measure	Total Plan					UMR Norm	
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2025-1Q	Variance
Inpatient Admissions							
# of Admits	33	160.6%	86	-17.4%	71		
# of Admit Days	93	321.5%	392	6.1%	416		
Paid per Admit	\$25,404	23.1%	\$31,260	-4.8%	\$29,758	\$28,630	3.9%
Paid per Admit Day	\$9,014	-23.9%	\$6,858	-25.9%	\$5,079	\$5,743	-11.6%
Admits per 1000	20.0	195.3%	59.0	-8.7%	53.9	47.8	12.6%
Average LOS	2.8	61.7%	4.6	28.5%	5.9	5.0	17.5%
Emergency Room Visits							
# of ER Visits	176	97.2%	347	-9.5%	314		
~ % resulting in Admit	7.4%	7.0	14.4%	-1.4	13.1%	10.9%	2.2
ER Visits per Patient	1.1	8.8%	1.2	0.6%	1.3		
ER Visits per 1000	106.6	123.4%	238.2	0.0%	238.3	237.5	0.3%
Paid per ER Visit	\$2,687	7.3%	\$2,884	14.8%	\$3,312	\$2,194	51.0%
Urgent Care Visits							
# of UC Visits	371	51.2%	561	12.5%	631		
UC Visits per Patient	1.2	0.2%	1.2	4.4%	1.2		-
UC Visits per 1000	224.8	71.4%	385.2	24.3%	478.8	246.8	94.0%
Paid per UC Visit	\$103	18.8%	\$122	9.4%	\$134	\$112	19.4%
Office Visits							
Off Visits per Patient	1.8	23.7%	2.3	4.0%	2.4		
Paid per Office Visit	\$102	8.2%	\$110	5.8%	\$116	\$90	28.9%
Office Visits Paid PMPY	\$311	84.1%	\$572	12.6%	\$644	\$350	84.2%
Services							
Radiology Svcs per 1000	1,906.0	80.3%	3,435.6	17.3%	4,029.5	4,009.8	0.5%
Radiology Paid PMPY	\$214	139.7%	\$514	21.6%	\$625		
Lab Services per 1000	5,117.6	119.0%	11,205.4	8.7%	12,179.5	11,268.9	8.1%
Labs Paid PMPY	\$105	90.3%	\$199	35.0%	\$269		

- Inpatient Admission rate per 1000 decreased 8.7%, and amount paid per Admission is 4.8% lower than prior period
- ER utilization remained flat, but amount paid per ER visit is 14.8% higher than prior period

Admissions and all other **Visits** are counted for utilization if the *initial Paid Date* for the first primary claim (facility claim for non-Office Visits) fell within the time period. For cost purposes, however, all visit costs paid within the time period are included.

Counts **per 1000** and amounts **PMPY** (per member per year) have been annualized.

Utilization Summary – YTD Trend

Active Members



Measure	State Active					Non-State Active				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Inpatient Admissions										
# of Admits	31	141.9%	75	-30.7%	52	0	-	0	-	0
# of Admit Days	86	320.9%	362	-12.7%	316	0	-	0	-	0
Paid per Admit	\$25,612	26.8%	\$32,473	-7.1%	\$30,174	\$0	-	\$0	-	\$0
Paid per Admit Day	\$9,232	-27.1%	\$6,728	-26.2%	\$4,965	\$0	-	\$0	-	\$0
Admits per 1000	21.6	175.5%	59.4	-22.8%	45.9	0.0	-	0.0	-	0.0
Average LOS	2.8	74.0%	4.8	25.9%	6.1	0.0	-	0.0	-	0.0
Emergency Room Visits										
# of ER Visits	147	100.0%	294	-16.0%	247	0	-	0	-	1
~ % resulting in Admit	8.2%	5.8	13.9%	-4.2	9.7%	0.0%	-	0.0%	-	0.0%
ER Visits per Patient	1.1	9.9%	1.2	2.2%	1.2	0.0	-	0.0	-	1.0
ER Visits per 1000	102.2	127.8%	232.9	-6.5%	217.8	0.0	-	0.0	-	2,000.0
Paid per ER Visit	\$2,662	10.9%	\$2,953	8.2%	\$3,195	\$0	-	\$0	-	\$369
Urgent Care Visits										
# of UC Visits	322	53.1%	493	10.5%	545	0	-	0	-	0
UC Visits per Patient	1.2	-1.1%	1.2	4.6%	1.2	0.0	-	0.0	-	0.0
UC Visits per 1000	224.0	74.4%	390.5	23.1%	480.6	0.0	-	0.0	-	0.0
Paid per UC Visit	\$104	20.4%	\$125	8.7%	\$136	\$0	-	\$0	-	\$0
Office Visits										
Off Visits per Patient	1.8	23.3%	2.2	1.8%	2.3	2.0	-50.0%	1.0	100.0%	2.0
Paid per Office Visit	\$104	8.6%	\$113	7.4%	\$121	\$120	43.4%	\$173	-27.6%	\$125
Office Visits Paid PMPY	\$299	87.5%	\$560	12.4%	\$629	\$723	-28.3%	\$518	-3.5%	\$500
Services										
Radiology Svcs per 1000	1,716.6	94.0%	3,330.1	11.2%	3,702.5	0.0	-	0.0	-	8,000.0
Radiology Paid PMPY	\$202	155.6%	\$516	18.3%	\$611	\$0	-	\$0	-	\$753
Lab Services per 1000	4,891.1	121.5%	10,831.4	6.4%	11,527.1	24,000.0	25.0%	30,000.0	-13.3%	26,000.0
Labs Paid PMPY	\$99	94.3%	\$192	36.5%	\$262	\$0	-	\$20	3306.1%	\$681

Utilization Summary – YTD Trend

Retired Members



Measure	State Retirees					Non-State Retirees				
	2023-1Q	⇒	2024-1Q	⇒	2025-1Q	2023-1Q	⇒	2024-1Q	⇒	2025-1Q
Inpatient Admissions										
# of Admits	2	400.0%	10	80.0%	18	0	-	1	0.0%	1
# of Admit Days	7	314.3%	29	237.9%	98	0	-	1	100.0%	2
Paid per Admit	\$22,184	13.2%	\$25,113	18.8%	\$29,827	\$0	-	\$1,744	292.9%	\$6,853
Paid per Admit Day	\$6,338	36.6%	\$8,660	-36.7%	\$5,478	\$0	-	\$1,744	96.5%	\$3,426
Admits per 1000	10.6	441.7%	57.4	87.2%	107.4	0.0	-	51.3	25.1%	64.2
Average LOS	3.5	-17.1%	2.9	87.7%	5.4	0.0	-	1.0	100.0%	2.0
Emergency Room Visits										
# of ER Visits	26	88.5%	49	20.4%	59	3	33.3%	4	75.0%	7
~ % resulting in Admit	3.8%	10.4	14.3%	12.8	27.1%	0.0%	50.0	50.0%	-35.7	14.3%
ER Visits per Patient	1.4	2.8%	1.5	-11.7%	1.3	1.0	0.0%	1.0	16.7%	1.2
ER Visits per 1000	137.7	104.2%	281.2	25.2%	352.0	126.3	62.4%	205.1	119.0%	449.2
Paid per ER Visit	\$3,015	-25.3%	\$2,253	86.0%	\$4,192	\$1,101	404.5%	\$5,552	-92.1%	\$436
Urgent Care Visits										
# of UC Visits	44	31.8%	58	36.2%	79	5	100.0%	10	-30.0%	7
UC Visits per Patient	1.1	4.9%	1.2	5.9%	1.3	1.0	42.9%	1.4	-18.3%	1.2
UC Visits per 1000	233.1	42.8%	332.8	41.6%	471.4	210.5	143.6%	512.8	-12.4%	449.2
Paid per UC Visit	\$96	15.8%	\$111	13.7%	\$126	\$107	-54.0%	\$49	-7.5%	\$45
Office Visits										
Off Visits per Patient	2.0	26.2%	2.5	13.0%	2.9	2.0	27.3%	2.5	10.5%	2.8
Paid per Office Visit	\$96	4.8%	\$101	-1.1%	\$100	\$44	17.5%	\$52	3.6%	\$54
Office Visits Paid PMPY	\$423	63.5%	\$691	12.0%	\$774	\$163	98.5%	\$323	16.9%	\$378
Services										
Radiology Svcs per 1000	3,406.1	26.4%	4,303.9	44.5%	6,217.3	1,473.7	74.0%	2,564.1	62.7%	4,171.1
Radiology Paid PMPY	\$317	72.8%	\$549	38.4%	\$760	\$150	-65.3%	\$52	198.9%	\$155
Lab Services per 1000	6,875.7	106.1%	14,168.5	19.6%	16,945.3	4,589.5	87.7%	8,615.4	-7.6%	7,957.2
Labs Paid PMPY	\$143	75.1%	\$251	32.9%	\$333	\$150	32.0%	\$198	-74.0%	\$52

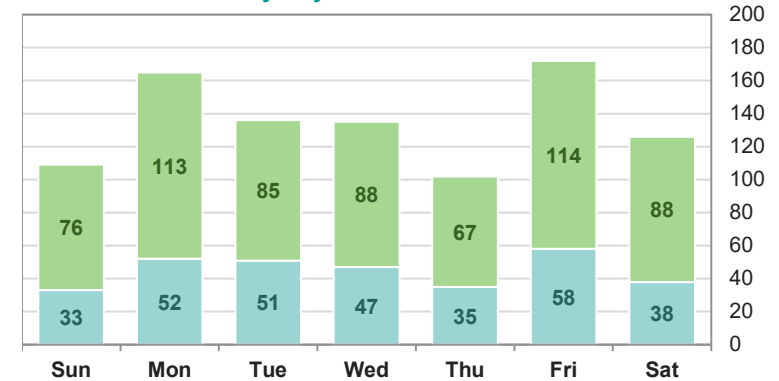
On Demand Care Summary

Emergency Room & Urgent Care

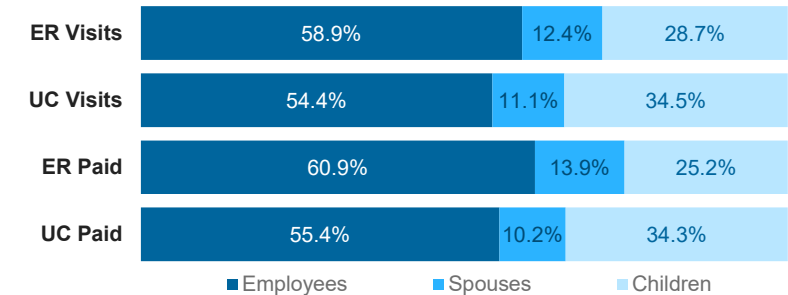


Measure	2024-1Q	2025-1Q	Change	UMR Norm	Variance
Emergency Room					
# of Visits	347	314	-9.5%		
# of Patients	279	251	-10.0%		
Total Plan Paid	\$1,000,823	\$1,039,860	3.9%		
Total Mem Paid	\$170,630	\$151,488	-11.2%		
Visits per 1000	238.2	238.3	0.0%	237.5	0.3%
Paid per Visit	\$2,884	\$3,312	14.8%	\$2,194	51.0%
Paid PMPM	\$57	\$66	14.8%	\$43	51.5%
% ER Patients w/ Office Visit*	92.8%	95.6%	2.8		
% Potentially Avoidable**	13.5%	8.6%	-4.9	15.7%	-7.1
Urgent Care					
# of Visits	561	631	12.5%		
# of Patients	477	514	7.8%		
Total Plan Paid	\$68,704	\$84,506	23.0%		
Total Mem Paid	\$24,567	\$27,899	13.6%		
Visits per 1000	385.2	478.8	24.3%	246.8	94.0%
Paid per Visit	\$122	\$134	9.4%	\$112	19.4%
Paid PMPM	\$4	\$5	35.9%	\$2	131.6%

ER & UC Utilization by Day of Week



ER & UC Utilization & Cost by Relationship



	# of Visits			Total Paid		
	ER	UC	Total	ER	UC	Total
Employee	185	343	528	\$633,361	\$46,832	\$680,193
Spouse	39	70	109	\$144,338	\$8,656	\$152,994
Child	90	218	308	\$262,160	\$29,018	\$291,178
Total	314	631	945	\$1,039,860	\$84,506	\$1,124,366

* Office Visit within prior 12 months..

** ER Visits are categorized as potentially avoidable based on primary and secondary diagnosis and do not necessarily indicate misuse of the ER for the patient's specific circumstances.

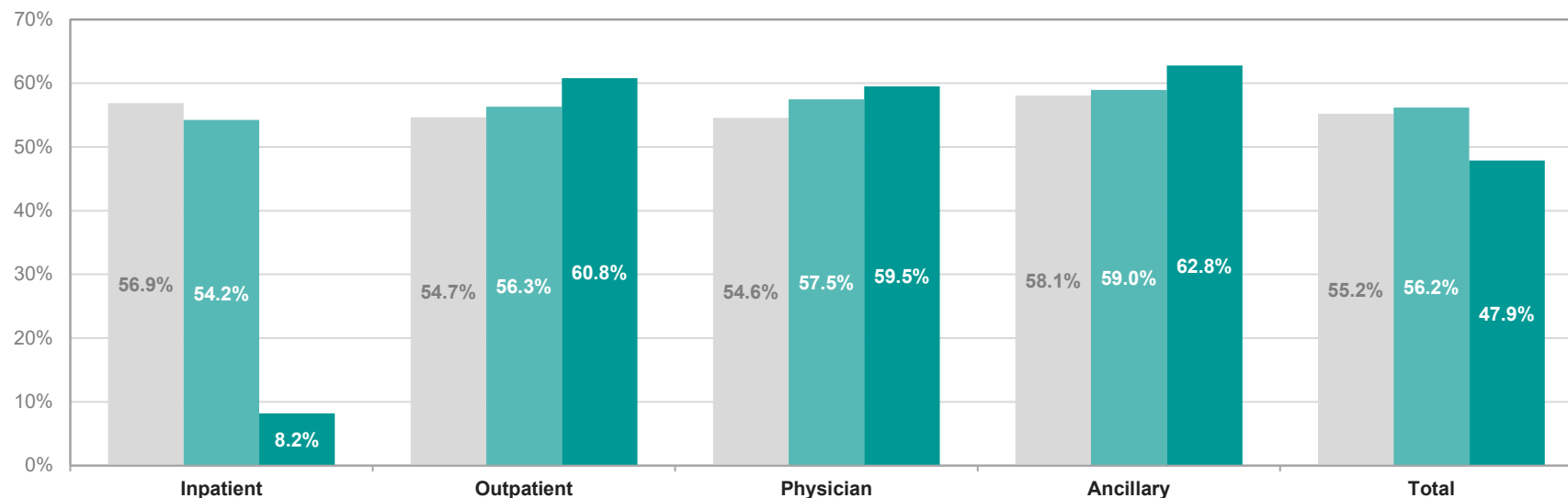
Network Summary

Discount Percentage & Network Utilization

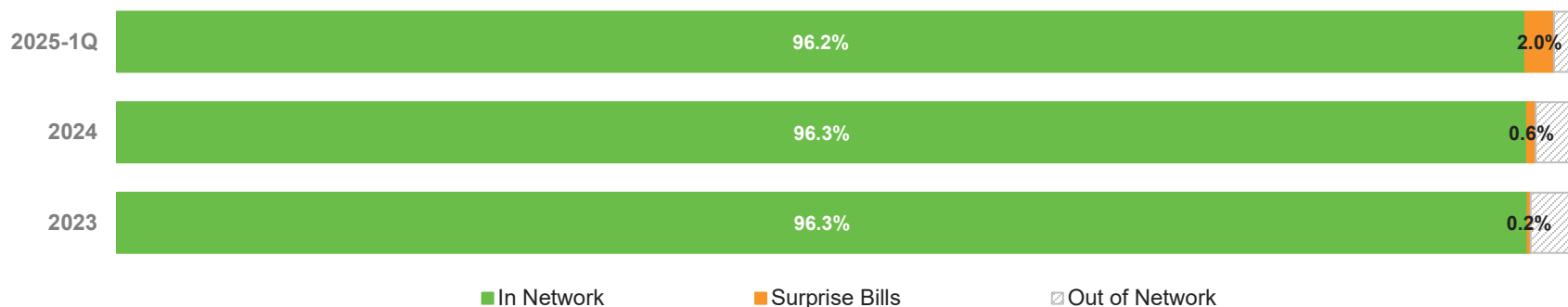


Discount Percentage* by Claim Type

Plan Year: 2023 2024 2025-1Q



Network Utilization*



* Network Discounts and Utilization exclude COB Claims, and Network Discounts additionally exclude Surprise Bills.

Clinical Classification Summary

Breakout by Diagnostic Chapter



Diagnostic Chapter	2024 (Full Year)		2025-1Q		CYTD Paid by Relationship			CYTD Paid by Sex	
	Patients	Total Paid	Patients	Total Paid	Employee	Spouse	Child	Male	Female
Perinatal Originating Conditions	76	\$1,990,280	24	\$2,965,451	\$0	\$0	\$2,965,451	\$181,257	\$2,784,194
Circulatory System	1,084	\$4,487,845	433	\$1,383,175	\$1,103,420	\$253,732	\$26,022	\$539,269	\$843,906
Musculoskeletal System	2,070	\$4,602,332	989	\$1,175,746	\$955,038	\$129,138	\$91,569	\$417,777	\$757,968
Injury, Poisoning & External Causes	987	\$3,319,950	343	\$968,267	\$736,218	\$102,604	\$129,446	\$177,322	\$790,945
Neoplasms	956	\$4,619,242	385	\$918,042	\$753,762	\$141,809	\$22,471	\$277,575	\$640,467
Health Status & Health Services	4,187	\$4,675,804	1,643	\$829,400	\$471,743	\$124,134	\$233,524	\$401,438	\$427,962
Genitourinary System	1,208	\$2,173,973	435	\$590,277	\$483,293	\$44,413	\$62,571	\$196,905	\$393,373
Digestive System	848	\$2,625,472	297	\$580,556	\$484,535	\$44,790	\$51,230	\$173,501	\$407,055
Symptoms, Signs & Findings, NEC	2,600	\$2,268,545	977	\$549,574	\$341,916	\$92,369	\$115,289	\$167,833	\$381,741
Mental, Behavioral & Neurodevelopmental	1,352	\$2,322,608	785	\$539,231	\$240,574	\$86,380	\$212,277	\$175,215	\$364,016
Nervous System	1,174	\$1,812,222	587	\$514,489	\$290,774	\$125,445	\$98,270	\$195,708	\$318,781
Endocrine, Nutritional & Metabolic	1,892	\$2,071,739	872	\$404,532	\$329,549	\$37,251	\$37,732	\$222,456	\$182,077
Respiratory System	1,820	\$1,973,123	532	\$361,484	\$182,217	\$98,975	\$80,292	\$158,758	\$202,726
Blood & Immune Disorders	252	\$886,310	71	\$279,578	\$183,510	\$2,978	\$93,090	\$225,094	\$54,484
Infectious & Parasitic Diseases	519	\$1,452,642	175	\$225,169	\$211,006	\$2,350	\$11,812	\$47,879	\$177,289
Pregnancy, Childbirth & the Puerperium	117	\$1,094,523	60	\$216,294	\$102,463	\$73,581	\$40,250	\$125	\$216,170
Congenital Malformations & Abnormalities	93	\$115,196	37	\$174,087	\$44,532	\$0	\$129,555	\$105,074	\$69,013
Skin & Subcutaneous Tissue	1,429	\$854,655	550	\$108,013	\$85,599	\$9,572	\$12,842	\$34,338	\$73,675
Eye and Adnexa	1,733	\$533,279	547	\$100,245	\$71,188	\$11,005	\$18,052	\$48,857	\$51,388
Ear and Mastoid Process	573	\$333,384	173	\$93,953	\$59,132	\$2,451	\$32,370	\$36,586	\$57,367
External Causes of Morbidity	1	\$0	0	\$0	\$0	\$0	\$0	\$0	\$0
Total	5,860	\$44,213,123	3,942	\$12,977,563	\$7,130,469	\$1,382,979	\$4,464,115	\$3,782,966	\$9,194,597

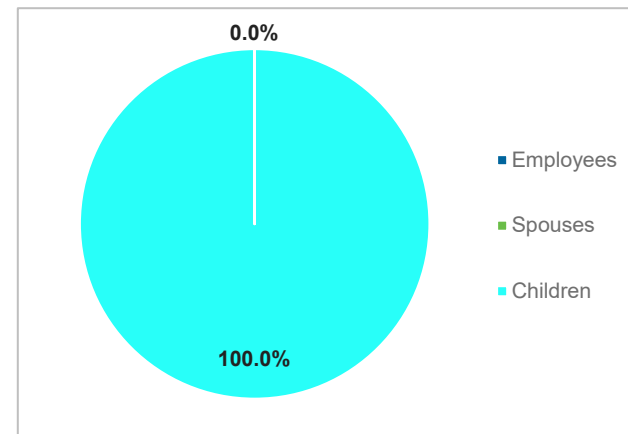
Perinatal Originating Conditions

Breakout by Diagnostic Grouping & Demographics

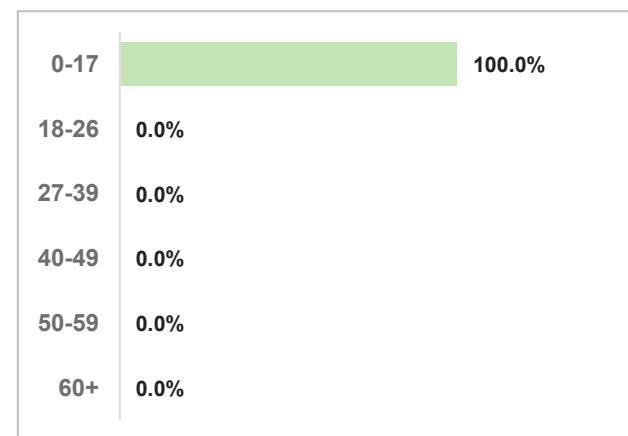


#	Perinatal Conditions Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Respiratory perinatal condition	3	5	\$1,560,200	52.6%
2	Other specified & unspec perinatal conds	4	4	\$1,350,840	45.6%
3	Liveborn	15	22	\$30,671	1.0%
4	Respiratory distress syndrome	1	15	\$14,661	0.5%
5	Neonatal abstinence syndrome	1	1	\$3,716	0.1%
6	Short gestation; low birth weight; fetal growth	2	2	\$3,249	0.1%
7	Hemolytic jaundice & perinatal jaundice	1	3	\$1,565	0.1%
8	Perinatal infections	1	1	\$275	0.0%
9	Birth trauma	1	1	\$188	0.0%
10	Neonatal digestive & feeding disorders	1	2	\$86	0.0%
11	Hemorrhagic & hematologic disorders of newborn	1	1	\$0	0.0%
=	Total	24	79	\$2,965,451	100.0%

Perinatal Conditions Paid by Relationship



Perinatal Conditions Paid by Age Range



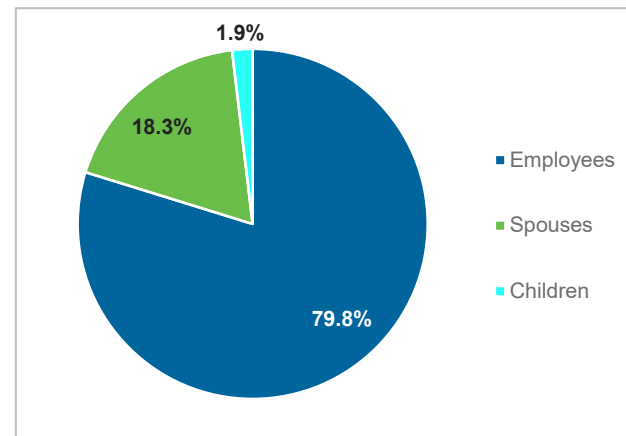
Circulatory System

Breakout by Diagnostic Grouping & Demographics

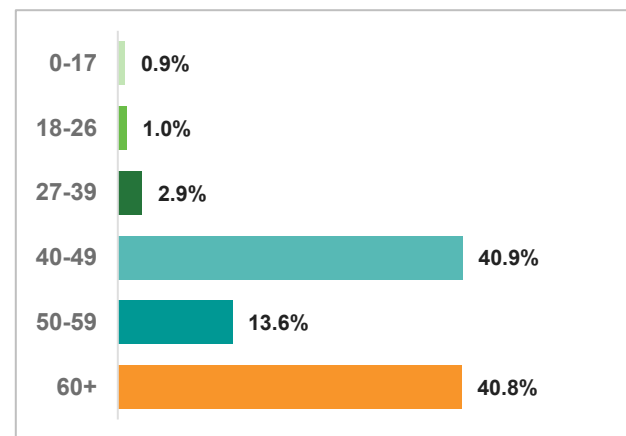


#	Circulatory System Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Cerebrovascular disease	18	63	\$568,571	41.1%
2	Cardiac dysrhythmias	83	178	\$222,785	16.1%
3	Nonrheumatic & unspecified valve disorders	21	23	\$177,425	12.8%
4	Myocardial infarction	6	24	\$88,350	6.4%
5	Nonspecific chest pain	68	117	\$64,614	4.7%
6	Vascular disease	27	49	\$60,951	4.4%
7	Hypertension	208	278	\$58,295	4.2%
8	Coronary atherosclerosis & oth heart disease	65	119	\$51,931	3.8%
9	Acute pulmonary embolism, DVT	17	61	\$36,186	2.6%
10	Other circulatory	13	23	\$32,217	2.3%
11	Heart failure	16	48	\$21,045	1.5%
12	Myocarditis & cardiomyopathy	5	5	\$805	0.1%
=	Total	433	1,138	\$1,383,175	100.0%

Circulatory System Paid by Relationship



Circulatory System Paid by Age Range



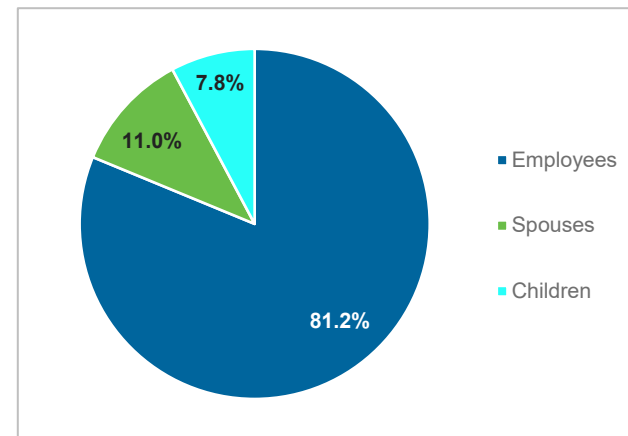
Musculoskeletal System

Breakout by Diagnostic Grouping & Demographics

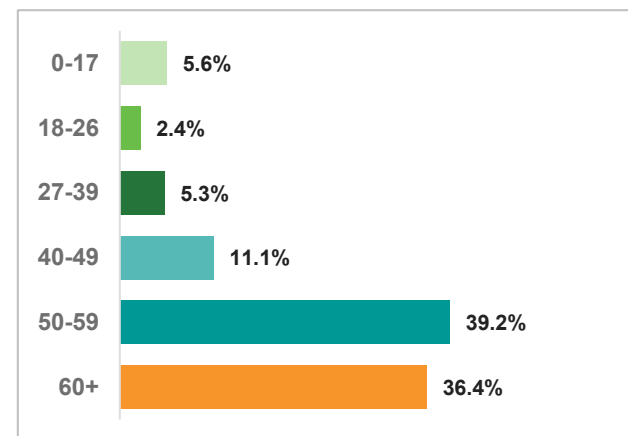


#	Musculoskeletal Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Spondylopathies & arthropathy	305	803	\$432,588	36.8%
2	Other musculoskeletal pain	480	1,053	\$172,075	14.6%
3	Tendon, tissue, muscle disorders	180	315	\$151,795	12.9%
4	Osteoarthritis & osteoporosis	137	253	\$132,157	11.2%
5	Scoliosis & oth deformities	63	123	\$70,051	6.0%
6	Other MSK	20	51	\$67,548	5.7%
7	Lupus	20	46	\$47,405	4.0%
8	Rheumatoid arthritis & related disease	38	72	\$38,602	3.3%
9	Low back pain	104	242	\$23,681	2.0%
10	Biomechanical lesions	55	144	\$20,570	1.7%
11	Joint disorders & fractures	48	96	\$16,776	1.4%
12	Gout & crystal arthropathies	17	31	\$2,498	0.2%
=	Total	989	3,470	\$1,175,746	100.0%

Musculoskeletal Paid by Relationship



Musculoskeletal Paid by Age Range



Mental & Behavioral Trend

Prevalence & Cost by Diagnostic Grouping

Mental & Behavioral Diagnostic Grouping	2023 (Full Year)		2024 (Full Year)		2025-1Q		2025-1Q Paid by Claim Type			
	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid	Inpatient	Outpatient	Physician	Ancillary
Depressive disorders	394	\$484,494	424	\$531,931	235	\$145,447	\$46,203	\$7,759	\$91,485	\$0
Anxiety & related Disorders	521	\$279,609	512	\$337,685	234	\$83,622	\$0	\$2,904	\$80,718	\$0
Trauma & stressor disorders	294	\$210,733	338	\$370,626	183	\$70,306	\$0	\$0	\$70,306	\$0
Alcohol-related disorders	29	\$154,326	45	\$307,936	16	\$56,469	\$38,005	\$6,267	\$12,197	\$0
Neurodevelopmental disorders	225	\$140,318	253	\$292,459	138	\$55,631	\$0	\$0	\$55,631	\$0
Other mental health	143	\$50,896	146	\$124,135	67	\$49,523	\$0	\$18,000	\$31,524	\$0
Suicidal ideation, attempt or self-harm	21	\$78,998	23	\$42,788	9	\$31,726	\$0	\$28,123	\$3,603	\$0
Bipolar & related Disorders	82	\$64,002	79	\$92,390	44	\$19,632	\$2,460	\$0	\$17,172	\$0
Eating disorders	17	\$31,584	15	\$51,171	4	\$11,541	\$0	\$0	\$11,541	\$0
Schizophrenia spectrum disorders	14	\$17,003	16	\$33,159	9	\$8,396	\$0	\$1,089	\$7,299	\$8
Opioid disorders	15	\$8,462	11	\$36,789	4	\$3,178	\$0	\$0	\$3,178	\$0
Obsessive compulsive disorders	20	\$19,073	22	\$60,775	10	\$3,022	\$0	\$0	\$3,022	\$0
Other substance use	37	\$3,370	37	\$8,935	5	\$407	\$0	\$0	\$407	\$0
Cannabis-related disorders	9	\$2,149	4	\$681	1	\$331	\$0	\$0	\$331	\$0
Stimulant disorders	5	\$31,458	6	\$31,146	0	\$0	\$0	\$0	\$0	\$0
Total	1,310	\$1,576,476	1,352	\$2,322,608	785	\$539,231	\$86,667	\$64,142	\$388,414	\$8

Chronic Conditions

Prevalence & Severity of 24 Chronic Conditions



Chronic Condition	With Condition			Moderate/High Risk Condition					
	# of Mems	Mems per 1000	Change vs LY	# of Mems	Mems per 1000	Change vs LY	Allowed PMPY	Admits per 1000	ER Visits per 1000
Affective Psychosis	9	1.6	-35.7%	8	1.4	33.3%	\$17,679	777.8	1,000.0
Asthma	246	43.0	-4.7%	122	21.3	8.9%	\$5,755	61.0	321.1
Atrial Fibrillation	54	9.4	-14.3%	42	7.3	5.0%	\$49,837	185.2	500.0
Blood Disorders	224	39.1	-12.8%	105	18.3	1.9%	\$37,982	321.4	433.0
CAD	90	15.7	-5.3%	43	7.5	-2.3%	\$21,493	177.8	488.9
COPD	40	7.0	42.9%	27	4.7	35.0%	\$34,340	450.0	850.0
Cancer	562	98.1	13.3%	263	45.9	0.0%	\$17,866	112.1	183.3
Chronic Pain	46	8.0	4.5%	23	4.0	9.5%	\$69,381	608.7	1,000.0
CHF	28	4.9	-9.7%	17	3.0	-10.5%	\$51,602	357.1	785.7
Demyelinating Diseases	20	3.5	-23.1%	12	2.1	-40.0%	\$24,747	150.0	600.0
Depression	404	70.5	-0.2%	274	47.8	-0.7%	\$10,475	141.1	341.6
Diabetes	496	86.6	-1.4%	391	68.3	-2.5%	\$15,566	92.7	258.1
ESRD	18	3.1	-43.8%	15	2.6	-40.0%	\$227,408	1,500.0	2,277.8
Eating Disorders	14	2.4	-17.6%	9	1.6	-30.8%	\$12,082	214.3	500.0
HIV/AIDS	7	1.2	-30.0%	5	0.9	-44.4%	\$3,426	0.0	142.9
Hyperlipidemia	210	36.7	1.9%	61	10.7	0.0%	\$2,272	4.8	57.1
Hypertension	565	98.6	-10.2%	254	44.3	-10.9%	\$11,834	99.1	283.2
Immune Disorders	26	4.5	-3.7%	14	2.4	7.7%	\$26,710	38.5	230.8
IBD	31	5.4	10.7%	7	1.2	-12.5%	\$1,746	0.0	32.3
Liver Disease	3	0.5	0.0%	1	0.2	-66.7%	\$14,188	333.3	666.7
Morbid Obesity	103	18.0	-1.9%	59	10.3	11.3%	\$23,697	194.2	320.4
Osteoarthritis	284	49.6	-5.6%	127	22.2	-2.3%	\$12,125	45.8	267.6
Peripheral Vascular Disease	31	5.4	24.0%	11	1.9	37.5%	\$36,474	419.4	709.7
Rheumatoid Arthritis	61	10.7	-6.2%	44	7.7	-13.7%	\$8,408	16.4	114.8

- *Most prevalent chronic condition is Hypertension, with 565 members*
- *Diabetes is the condition with the most moderate/high risk members (391)*
- *Members with mod/high risk Diabetes also have the highest combined cost, totaling \$6.09M*

Date Range: Service Dates 7/1/2023 - 6/30/2024, Paid through 9/30/2024

With Condition members are identified by having any covered claim with a diagnosis for the condition in Dx position 1.

Moderate/High-Risk Condition members had either multiple provider visits for the condition (based on Dx position 1) during the date range or at least one ER Visit or Admission for the condition in the range.

Cost & Utilization for All Members:

- **Allowed PMPY:** \$8,242
- **Admits per 1000:** 59.5
- **ER Visits per 1000:** 237.6

Prevention, Wellness, & Maintenance

Preventive & Condition-specific Screening Rate Trends



Preventive Service	Population	Jul 2022 - Jun 2023			Jul 2023 - Jun 2024			Rate Change	UMR Norm	
		Eligible	Actual	Rate	Eligible	Actual	Rate		Rate	Variance
Well Visits	Rate for Well Baby & Well Child is Visits per 1,000. Rate for adults is the percentage who had a well visit.									
Well Baby Visit	0 - 15 months	82.7	501	6,055.7	58.8	322	5,476.1	-9.6%	5,262.6	4.1%
Well Child Visit	3 - 6 years	276.1	233	843.9	248.2	205	826.1	-2.1%	781.1	5.8%
Adults w/ Well Visit	Adults 18+	4,958	2,018	40.7%	4,435	1,869	42.1%	1.4	40.0%	2.1
Screenings	Rate for all screenings is the percentage of eligible population who had the screening during the period.									
Mammogram	Females 40 - 69	1,771	860	48.6%	1,596	769	48.2%	-0.4	46.8%	1.4
Cervical Cancer	Females 21 - 64	2,434	617	25.4%	2,153	513	23.8%	-1.5	23.7%	0.2
Prostate Cancer	Males 50 - 70	1,000	444	44.4%	914	416	45.5%	1.1	41.1%	4.5
Colorectal Cancer	Members 45 - 75	2,821	468	16.6%	2,557	422	16.5%	-0.1	17.1%	-0.5
Cholesterol	Female 45+ Male 35+	3,181	1,722	54.1%	2,882	1,619	56.2%	2.0	47.3%	8.8
Condition-specific	Screening									
Asthma	Office Visit for Asthma	258	197	76.4%	246	207	84.1%	7.8		
COPD	Spirometry Test	28	3	10.7%	40	8	20.0%	9.3		
Type 2 Diabetes	A1c Test	446	404	90.6%	451	412	91.4%	0.8	86.0%	5.3
	Eye Exam	446	150	33.6%	451	127	28.2%	-5.5	25.5%	2.6
	Lipid Panel	446	347	77.8%	451	353	78.3%	0.5	72.1%	6.2
	Urine Protein Test	446	321	72.0%	451	292	64.7%	-7.2	63.0%	1.8
	Any Diabetes Screen	446	432	96.9%	451	435	96.5%	-0.4	93.8%	2.7
Hyperlipidemia	Lipid Profile	206	95	46.1%	210	109	51.9%	5.8		
Hypertension	Creatinine Test	629	163	25.9%	565	153	27.1%	1.2		
	Lipid Profile	629	167	26.6%	565	174	30.8%	4.2		

Date Range: Reporting periods are service-based with 3 months of runout: Current period is Service Dates 7/1/2023 - 6/30/2024, Paid through 9/30/2024

Note: Preventive Services do not include those performed at onsite clinics or ones for which no claim was submitted to UMR.

Public Employees' Benefits Program - RX Costs
PY 2025 - Quarter Ending September 30, 2024

Express Scripts

1Q FY2025 EPO		1Q FY2024 EPO	Difference	% Change
Membership Summary			Membership Summary	
Member Count (Membership)	5,275	5,825	(550)	-9.4%
Utilizing Member Count (Patients)	3,307	3,492	(185)	-5.3%
Percent Utilizing (Utilization)	62.7%	59.9%	0	4.6%
Claim Summary			Claims Summary	
Net Claims (Total Rx's)	29,909	31,089	(1,180)	-3.8%
Claims per Elig Member per Month (Claims PMPM)	1.89	1.78	0.11	6.2%
Total Claims for Generic (Generic Rx)	25,535	26,673	(1,138.00)	-4.3%
Total Claims for Brand (Brand Rx)	4,374	4,416	(42.00)	-1.0%
Total Claims for Brand w/Gen Equiv (Multisource Brand Claims)	106	187	(81.00)	-43.3%
Total Non-Specialty Claims	29,458	30,698	(1,240.00)	-4.0%
Total Specialty Claims	451	391	60.00	15.3%
Generic % of Total Claims (GFR)	85.4%	85.8%	(0.00)	-0.5%
Generic Effective Rate (GCR)	99.6%	99.3%	0.00	0.3%
Mail Order Claims	8,643	9,359	(716.00)	-7.7%
Mail Penetration Rate*	31.8%	32.9%	(0.01)	-1.1%
Claims Cost Summary			Claims Cost Summary	
Total Prescription Cost (Total Gross Cost)	\$5,408,893	\$4,927,524	\$481,369.00	9.8%
Total Generic Gross Cost	\$465,440	\$442,768	\$22,672.00	5.1%
Total Brand Gross Cost	\$4,943,453	\$4,484,755	\$458,698.00	10.2%
Total MSB Gross Cost	\$158,869	\$102,466	\$56,403.00	55.0%
Total Ingredient Cost	\$5,272,118	\$4,796,842	\$475,276.00	9.9%
Total Dispensing Fee	\$1,335,560	\$125,926	\$1,209,634.00	960.6%
Total Other (e.g. tax)	\$3,215	\$4,755	(\$1,540.00)	-32.4%
Avg Total Cost per Claim (Gross Cost/Rx)	\$180.84	\$158.50	\$22.35	14.1%
Avg Total Cost for Generic (Gross Cost/Generic Rx)	\$18.23	\$16.60	\$1.63	9.8%
Avg Total Cost for Brand (Gross Cost/Brand Rx)	\$1,130.19	\$1,015.57	\$114.62	11.3%
Avg Total Cost for MSB (MSB Gross Cost/MSB ARx)	\$1,498.76	\$547.95	\$950.81	173.5%
Member Cost Summary			Member Cost Summary	
Total Member Cost	\$747,420	\$667,120	\$80,300.00	12.0%
Total Copay	\$744,520	\$665,406	\$79,114.00	11.9%
Total Deductible	\$2,900	\$1,714	\$1,186.00	0.0%
Avg Copay per Claim (Copay/Rx)	\$24.89	\$21.40	\$3.49	16.3%
Avg Participant Share per Claim (Copay+Deductible/RX)	\$24.99	\$21.46	\$3.53	16.5%
Avg Copay for Generic (Copay/Generic Rx)	\$7.03	\$6.90	\$0.13	1.9%
Avg Copay for Brand (Copay/Brand Rx)	\$129.83	\$109.37	\$20.46	18.7%
Avg Copay for Brand w/ Generic Equiv (Copay/Multisource Rx)	\$74.21	\$85.19	(\$10.98)	-12.9%
Net PMPM (Participant Cost PMPM)	\$47.23	\$38.18	\$9.05	23.7%
Copay % of Total Prescription Cost (Member Cost Share %)	13.8%	13.5%	0.3%	2.1%
Plan Cost Summary			Plan Cost Summary	
Total Plan Cost (Plan Cost)	\$4,661,473	\$4,260,404	\$401,069.00	9.4%
Total Non-Specialty Cost (Non-Specialty Plan Cost)	\$2,184,417	\$1,966,606	\$217,811.00	11.1%
Total Specialty Drug Cost (Specialty Plan Cost)	\$2,477,056	\$2,293,797	\$183,259.00	8.0%
Avg Plan Cost per Claim (Plan Cost/Rx)	\$155.86	\$137.04	\$18.82	13.7%
Avg Plan Cost for Generic (Plan Cost/Generic Rx)	\$11.20	\$9.70	\$1.50	15.5%
Avg Plan Cost for Brand (Plan Cost/Brand Rx)	\$1,000.36	\$906.20	\$94.16	10.4%
Avg Plan Cost for MSB (MSB Plan Cost/MSB ARx)	\$1,424.56	\$462.75	\$961.81	207.8%
Net PMPM (Plan Cost PMPM)	\$294.56	\$243.80	\$50.76	20.8%
PMPM for Specialty Only (Specialty PMPM)	\$156.53	\$112.54	\$43.99	39.1%
PMPM without Specialty (Non-Specialty PMPM)	\$138.04	\$131.26	\$6.78	5.2%
Rebates Received (Q1 FY2023 actual)	\$1,994,887	\$1,483,247	\$511,640.16	34.5%
Net PMPM (Plan Cost PMPM factoring Rebates)	\$168.50	\$158.92	\$9.58	6.0%
PMPM without Specialty (Non-Specialty PMPM)	\$79.90	\$68.65	\$11.25	16.4%
PMPM for Specialty Only (Specialty PMPM)	\$111.38	\$91.83	\$19.55	21.3%

Appendix D

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Health Plan of Nevada –Utilization Review for PEBP
July 1, 2024 – September 30, 2024

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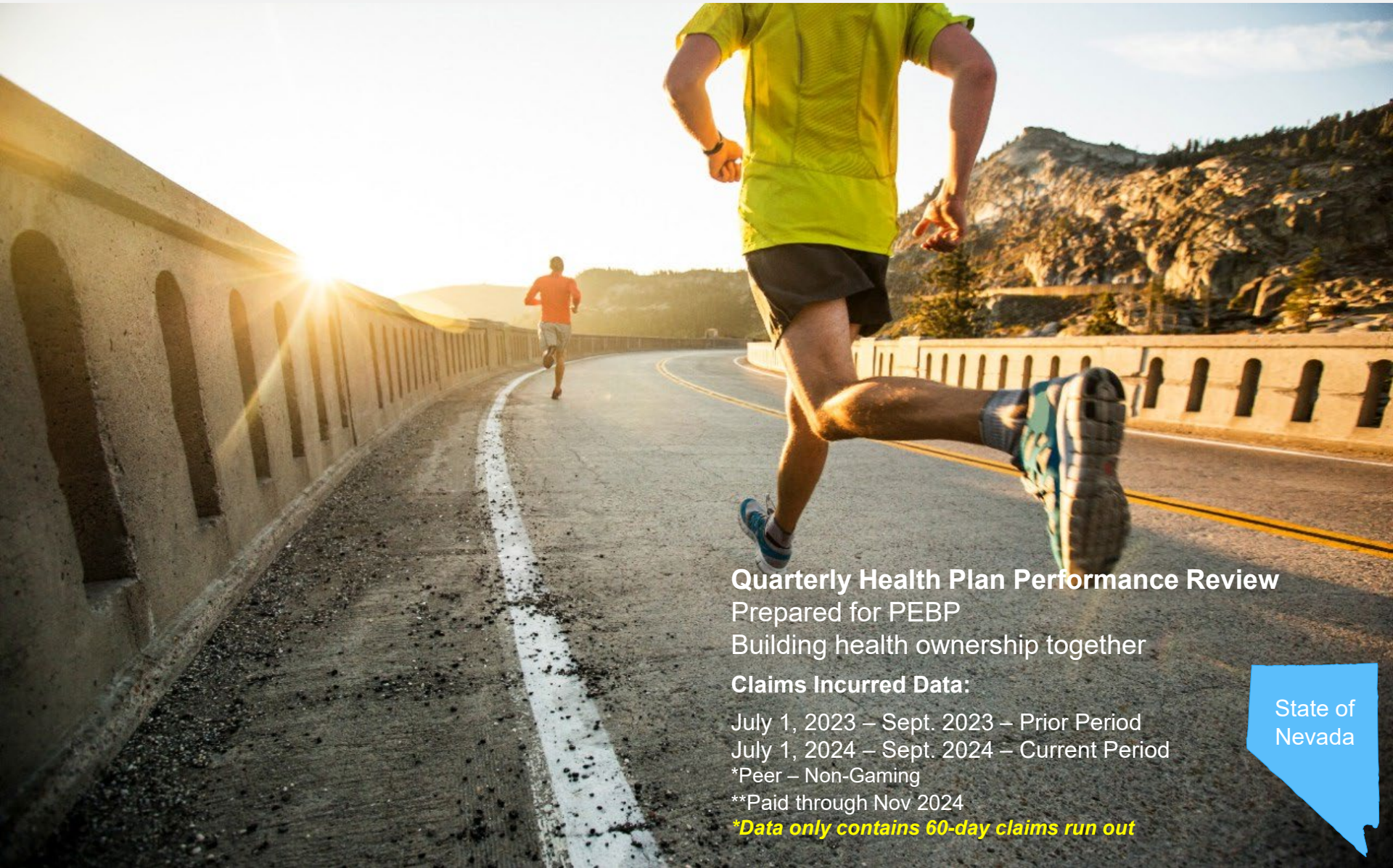
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PRESCRIPTION DRUG COSTS

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Power Of Partnership.



Quarterly Health Plan Performance Review

Prepared for PEBP

Building health ownership together

Claims Incurred Data:

July 1, 2023 – Sept. 2023 – Prior Period

July 1, 2024 – Sept. 2024 – Current Period

*Peer – Non-Gaming

**Paid through Nov 2024

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

State of
Nevada

Executive Summary
Spend and Utilization

Executive Summary Utilization & Spend



Population

- -1.0% decrease for employees from prior period
- -1.9% decrease for members from prior period

Medical Paid PMPM

- 11.6% increase in overall medical paid from prior period
- 7.7% increase in non-Catastrophic spend
- 34.4% increase in Catastrophic spend

High-Cost Claimants

- 16 HCC in 1Q24, up by 2 members from prior period
- % of HCC spend saw increase in current period
- Avg. Paid per case increased 19.1%

Emergency Room

- ER Visits Per 1,000 members decreased -8.0%
- Avg. paid per ER Visit increased 30.8%

Urgent Care

- Urgent Care visits per 1,000 members decreased by -18.1%
- Avg. paid per Urgent care visit increased 14.2%

Rx Drivers

- Rx Net Paid PMPM increased 8.4%
- Specialty Spend decreased -1.8%
- Specialty Rx driving -11.7% of total Rx Spend

Overall Medical / Rx

- Total Medical/Rx increased 10.5% on PMPM basis

Executive Summary Utilization & Spend



Claims Paid by Age Group														
July - Sept. 2023 Q1							July - Sept. 2024 Q1						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	\$160,087	\$1,168	\$100	\$1	\$160,187	\$1,168	\$68,516	\$589	\$531	\$5	\$69,047	\$594	-56.9%	524.9%
01	\$47,093	\$318	\$1,333	\$9	\$48,426	\$327	\$24,432	\$207	\$179	\$2	\$24,611	\$209	-35.0%	-83.2%
02-04	\$107,953	\$218	\$4,481	\$9	\$112,435	\$227	\$304,423	\$623	\$1,710	\$3	\$306,133	\$626	185.2%	-61.4%
05-09	\$214,282	\$222	\$14,880	\$15	\$229,162	\$237	\$188,260	\$200	\$8,975	\$10	\$197,235	\$209	-10.0%	-38.2%
10-14	\$231,027	\$169	\$50,618	\$37	\$281,645	\$206	\$217,293	\$167	\$31,775	\$24	\$249,068	\$192	-1.0%	-33.9%
15-19	\$229,750	\$148	\$76,435	\$49	\$306,185	\$198	\$298,790	\$194	\$52,647	\$34	\$351,437	\$228	30.9%	-30.7%
20-24	\$302,805	\$208	\$32,376	\$22	\$335,181	\$230	\$376,274	\$260	\$43,319	\$30	\$419,593	\$290	25.4%	35.0%
25-29	\$368,223	\$487	\$52,477	\$69	\$420,700	\$557	\$259,713	\$303	\$84,407	\$98	\$344,120	\$401	-37.8%	41.8%
30-34	\$269,466	\$294	\$148,751	\$162	\$418,217	\$456	\$285,361	\$328	\$122,886	\$141	\$408,247	\$469	11.6%	-12.9%
35-39	\$258,342	\$217	\$331,842	\$278	\$590,184	\$495	\$294,791	\$267	\$191,151	\$173	\$485,941	\$440	23.2%	-37.8%
40-44	\$721,218	\$561	\$182,949	\$142	\$904,167	\$704	\$431,633	\$341	\$245,816	\$194	\$677,449	\$535	-39.3%	36.3%
45-49	\$632,006	\$389	\$327,012	\$201	\$959,018	\$590	\$964,651	\$632	\$509,867	\$334	\$1,474,518	\$966	62.7%	66.2%
50-54	\$575,460	\$308	\$542,545	\$291	\$1,118,005	\$599	\$724,417	\$384	\$694,158	\$368	\$1,418,576	\$751	24.5%	26.5%
55-59	\$764,444	\$413	\$749,159	\$405	\$1,513,604	\$818	\$851,905	\$474	\$705,773	\$393	\$1,557,678	\$867	14.8%	-3.0%
60-64	\$805,826	\$445	\$555,049	\$307	\$1,360,875	\$752	\$861,984	\$488	\$615,406	\$348	\$1,477,390	\$836	9.6%	13.6%
65+	\$914,861	\$744	\$522,502	\$425	\$1,437,363	\$1,169	\$1,078,060	\$846	\$510,186	\$400	\$1,588,246	\$1,247	13.7%	-5.8%
Total	\$6,602,842	\$354	\$3,592,509	\$193	\$10,195,352	\$546	\$7,230,503	\$395	\$3,818,785	\$209	\$11,049,288	\$604	8.4%	10.5%

Financial Summary



Financial and Demographic (July 2024 thru Sept 2024 Q1)												
	Total				State Active				Retiree (State/Non-State)			
Summary	Thru 1Q22	Thru 1Q23	Thru 1Q24	▲	Thru 1Q22	Thru 1Q23	Thru 1Q24	▲	Thru 1Q22	Thru 1Q23	Thru 1Q24	▲
Avg. # Employees	3,703	3,535	3,501	-1.0%	3,260	3,087	3,087	0.0%	443	448	414	-7.6%
Avg. # Members	6,539	6,219	6,100	-1.9%	5,938	5,605	5,534	-1.3%	601	614	566	-7.7%
Ratio	1.8	1.8	1.7	-1.0%	1.8	1.8	1.8	-1.3%	1.4	1.4	1.4	-0.1%
Financial												
Medical Paid	\$6,668,630	\$6,602,842	\$7,230,503	9.5%	\$5,741,833	\$4,587,142	\$4,410,746	-3.8%	\$926,797	\$2,015,700	\$2,819,756	39.9%
Member Paid	\$558,443	\$604,663	\$667,773	10.4%	\$376,249	\$433,173	\$492,296	13.6%	\$182,194	\$171,490	\$175,476	2.3%
Net Paid PEPY	\$7,203	\$7,471	\$8,261	10.6%	\$7,347	\$7,081	\$8,299	17.2%	\$6,144	\$10,161	\$7,976	-21.5%
Net Paid PMPY	\$4,079	\$4,247	\$4,741	11.6%	\$4,033	\$3,900	\$4,630	18.7%	\$4,535	\$7,412	\$5,826	-21.4%
Net Paid PEPM	\$600	\$623	\$688	10.6%	\$612	\$590	\$692	17.2%	\$512	\$847	\$665	-21.5%
Net Paid PMPM	\$340	\$354	\$395	11.6%	\$336	\$325	\$386	18.7%	\$378	\$618	\$486	-21.4%
High Cost Claimants												
# of HCC's > \$50k	15	14	16	14.3%	13	9	14	55.6%	2	5	2	-60.0%
Avg. paid per claimant	\$93,368	\$91,431	\$105,533	15.4%	\$92,747	\$81,470	\$110,960	36.2%	\$97,398	\$109,360	\$67,544	-38.2%
HCC % of Spend	21.0%	19.4%	23.1%	19.1%	20.1%	13.4%	24.1%	79.6%	28.6%	48.0%	15.6%	-67.6%
Spend by Location (PMPY)												
Inpatient	\$982	\$1,216	\$1,436	18.0%	\$1,775	\$1,058	\$1,570	48.4%	\$1,455	\$3,069	\$1,705	-44.4%
Outpatient	\$1,142	\$1,112	\$1,117	0.5%	\$989	\$859	\$1,039	20.9%	\$996	\$2,025	\$1,269	-37.3%
Professional	\$1,927	\$1,954	\$2,104	7.7%	\$1,104	\$1,210	\$1,499	23.9%	\$2,110	\$2,326	\$2,899	24.6%
Total	\$4,051	\$4,282	\$4,657	8.7%	\$3,868	\$3,273	\$3,188	-2.6%	\$4,562	\$7,420	\$5,873	-20.8%

Paid Claims by Claim Type



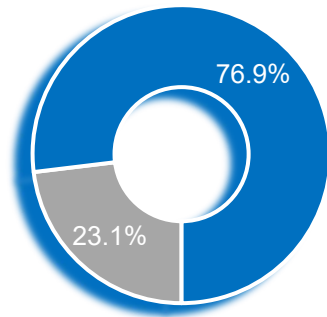
Net Paid Claims - Total									
Total Participants									
	July - Sept. 2023 Q1				July - Sept. 2024 Q1				▲
	Actives	Pre-Medicare	Medicare	Total	Actives	Pre-Medicare	Medicare	Total	
Medical									
InPatient	\$1,271,304	\$167,821	\$452,090	\$1,891,215	\$1,465,417	\$95,558	\$628,581	\$2,189,556	15.8%
OutPatient	\$4,241,550	\$130,814	\$339,263	\$4,711,627	\$4,504,902	\$123,640	\$412,405	\$5,040,947	7.0%
Total - Medical	\$5,512,854	\$298,635	\$791,353	\$6,602,842	\$5,970,319	\$219,198	\$1,040,986	\$7,230,503	9.5%
Net Paid Claims - Total									
Total Participants									
	July - Sept. 2023 Q1				July - Sept. 2024 Q1				▲
	Actives	Pre-Medicare	Medicare	Total	Actives	Pre-Medicare	Medicare	Total	
Medical PMPM	\$323	\$797	\$2,113	\$354	\$359	\$547	\$817	\$395	11.6%

Cost Distribution – Medical Claims > \$50K



July - Sept. 1Q23							July - Sept 1Q24					
# of Members	% of Population	Total Paid	% of Paid	Subscriber Paid	% of Subscribers paid	Paid Claims	# of Members	% of Population	Total Paid	% of Paid	Subscriber Paid	% of Subscribers paid
2	0.0%	\$419,114	6.3%	\$0	0.0%	> \$100k	2	0.0%	\$443,086	6.1%	\$443,086	100.0%
7	0.1%	\$514,795	7.8%	\$245,737	47.7%	\$50k- \$100k	9	0.1%	\$630,455	8.7%	\$275,251	43.7%
20	0.3%	\$730,635	11.1%	\$431,197	59.0%	\$25k - \$50k	25	0.4%	\$903,806	12.5%	\$565,334	62.6%
73	1.2%	\$1,239,905	18.8%	\$744,711	60.1%	\$10k - \$25k	72	1.2%	\$1,319,576	18.3%	\$667,873	50.6%
92	1.5%	\$715,934	10.8%	\$465,575	65.0%	\$5k - \$10k	142	2.3%	\$1,044,062	14.4%	\$699,992	67.0%

% Paid Attributed to Catastrophic Cases



■ HCC ■ NON HCC

HCC > \$50k - AHRQ Chapter Conditions - Thru 1Q24			
Top 5 AHRQ Category conditions	# of Patients	Total Paid	% of Med Paid
Congenital anomalies	1	\$329,117	4.5%
Injury and poisoning	3	\$290,265	4.0%
Diseases of the respiratory system	3	\$276,255	3.8%
Neoplasms	2	\$154,277	2.1%
Diseases of the genitourinary system	1	\$126,996	1.7%

Utilization Summary



Utilization Summary									
	Total			State Active			Retiree State/Non-State		
	July - Sept. 1Q23	July - Sept. 1Q24	▲	July - Sept. 1Q23	July - Sept. 1Q24	▲	July - Sept. 1Q23	July - Sept. 1Q24	▲
Inpatient									
# of Admits	112	109	-1.9%	86	94	9.2%	25	15	-40.2%
# of Bedays	590	899	52.5%	408	712	74.5%	181	187	3.0%
Avg. Paid per Admit	\$16,941	\$19,644	16.0%	\$16,487	\$20,242	22.8%	\$18,503	\$15,891	-14.1%
Avg. Paid per Day	\$3,207	\$2,391	-25.4%	\$3,493	\$2,683	-23.2%	\$2,564	\$1,279	-50.1%
Admits Per K	71.8	71.8	0.0%	61.7	68.3	10.6%	163.8	106.2	-35.2%
Days Per K	379.2	589.7	55.5%	291.3	515.0	76.8%	1,182.2	1,319.5	11.6%
ALOS	5.3	8.2	55.5%	4.7	7.5	59.9%	5.5	5.9	7.3%
Admits from ER	56	41	-26.8%	42	34	-19.0%	14	7	-50.0%
Physician Office Visits									
Per Member Per Year	2.3	2.2	-4.1%	2.3	2.2	-3.6%	2.6	2.4	-7.0%
Paid Per Visit	\$149	\$169	13.5%	\$154	\$174	13.0%	\$107	\$123	15.6%
Net Paid PMPM	\$29	\$31	8.9%	\$29	\$32	8.9%	\$23	\$25	7.5%
Emergency Room									
# of Visits	199	183	-8.0%	182	168	-7.7%	17	15	-11.8%
Visits Per K	128.0	120.0	-6.2%	129.9	121.4	-6.5%	110.8	105.9	-4.4%
Avg Paid Per Visit	\$2,617	\$3,424	30.8%	\$2,678	\$3,436	28.3%	\$1,960	\$3,294	68.0%
Urgent Care									
# of Visits	962	860	-10.6%	858	778	-9.3%	104	82	-21.2%
Visits Per K	618.8	563.9	-8.9%	612.3	562.4	-8.2%	677.9	579.2	-14.6%
Avg Paid Per Visit	\$120	\$134	12.1%	\$91	\$96	4.7%	\$80	\$96	19.9%

*Not Representative of all utilization

*Data based on medical spend only

Diagnosis Grouper Summary – Top 25



Top 25 AHRQ Category	Total Paid	% Paid
Cardiac and circulatory congenital anomalies	\$283,758	4.9%
Spondylosis; intervertebral disc disorders	\$282,396	4.9%
Pneumonia (except that caused by tuberculosis or std)	\$268,832	4.7%
Burns	\$171,394	3.0%
Septicemia (except in labor)	\$159,363	2.8%
Disorders usually diagnosed in infancy childhood	\$156,592	2.7%
Maintenance chemotherapy; radiotherapy	\$150,955	2.6%
Mood disorders	\$150,289	2.6%
Biliary tract disease	\$129,338	2.2%
Other ear and sense organ disorders	\$127,189	2.2%
Osteoarthritis	\$98,096	1.7%
Other nutritional; endocrine; and metabolic disorders	\$98,028	1.7%
Other screening for suspected conditions	\$92,215	1.6%
Nonspecific chest pain	\$91,688	1.6%
Aortic; peripheral; and visceral artery aneurysms	\$90,071	1.6%
Complications of surgical procedures or medical care	\$87,769	1.5%
Medical examination/evaluation	\$84,472	1.5%
Sprains and strains	\$82,785	1.4%
Diabetes mellitus with complications	\$82,388	1.4%
Abdominal pain	\$78,847	1.4%
Anxiety disorders	\$76,846	1.3%
Inflammatory conditions of male genital organs	\$76,842	1.3%
Cancer of pancreas	\$74,539	1.3%
Cancer of esophagus	\$72,617	1.3%
Acute and unspecified renal failure	\$71,502	1.2%

*Not Representative of all utilization

Insured	Spouse	Dependent
\$283,268	\$42	\$449
\$223,900	\$46,413	\$12,083
\$249,517	\$19,315	
\$5,741		\$165,654
\$95,740	\$63,623	
\$1,679		\$154,913
\$112,097	\$38,858	
\$49,857	\$9,149	\$91,283
\$75,728	\$451	\$53,160
\$95,867	\$22,713	\$8,609
\$75,259	\$22,837	
\$60,536	\$36,817	\$674
\$78,398	\$12,292	\$1,525
\$64,400	\$9,150	\$18,138
\$36,312	\$53,759	
\$73,929	\$0	\$13,840
\$15,299	\$13,737	\$55,436
\$64,151	\$11,230	\$7,404
\$65,956	\$6,543	\$9,889
\$59,348	\$9,219	\$10,279
\$48,208	\$12,688	\$15,950
\$76,817		\$25
\$74,539		
	\$72,617	
\$24,085	\$41,646	\$5,771

Male	Female	Unassigned
\$283,183	\$576	\$0
\$116,463	\$165,934	\$0
\$197,722	\$71,110	\$0
\$74	\$171,321	\$0
\$135,230	\$24,133	\$0
\$105,690	\$50,902	\$0
\$21,925	\$129,029	\$0
\$80,889	\$69,400	\$0
\$66,569	\$62,770	\$0
\$35,010	\$92,179	\$0
\$23,570	\$74,526	\$0
\$25,113	\$72,915	\$0
\$26,598	\$65,616	\$0
\$32,605	\$59,083	\$0
\$89,886	\$185	\$0
\$83,999	\$3,770	\$0
\$40,486	\$43,986	\$0
\$63,008	\$19,776	\$0
\$25,979	\$56,409	\$0
\$25,090	\$53,757	\$0
\$17,271	\$59,574	\$0
\$76,842		\$0
\$2,498	\$72,041	\$0
\$72,617		\$0
\$70,762	\$741	\$0

*Data based on medical spend only

Mental Health Drilldown



Top 10 Mental Health				
AHRQ Category Description	July - Sept. 1Q23		July - Sept. 1Q24	
	Patients	Total Paid	Patients	Total Paid
Disorders usually diagnosed in infancy childhood or adolescence	31	\$124,693	30	\$156,592
Mood disorders	218	\$112,397	252	\$150,289
Anxiety disorders	230	\$52,922	268	\$76,846
Adjustment disorders	92	\$21,466	100	\$29,137
Suicide and intentional self-inflicted injury	6	\$21,690	6	\$27,677
Attention-deficit conduct and disruptive behavior disorders	103	\$12,750	84	\$18,615
Schizophrenia and other psychotic disorders	13	\$5,161	13	\$13,734
Alcohol-related disorders	15	\$3,161	16	\$7,672
Miscellaneous mental health disorders	22	\$3,815	28	\$3,957
Delirium dementia and amnestic and other cognitive disorders	9	\$8,787	6	\$3,510

**Not Representative of all utilization*

**Data based on medical spend only*

Respiratory Disorders

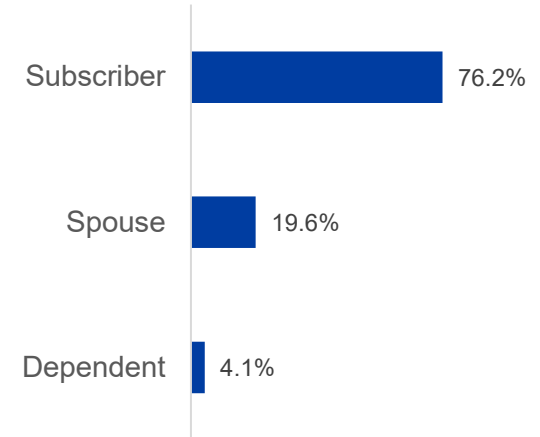
Top 10 Respiratory Disorders

AHRQ Category Description	Patients	Claims	Total Paid	% Paid
Pneumonia	12	67	\$268,832	52.8%
Other upper respiratory infections	219	263	\$50,100	9.8%
Lung disease due to external agents	1	1	\$36,673	7.2%
Other lower respiratory disease	125	235	\$35,955	7.1%
Other upper respiratory disease	173	414	\$29,167	5.7%
Respiratory failure; insufficiency; arrest (adult)	10	81	\$29,097	5.7%
Acute and chronic tonsillitis	23	38	\$24,914	4.9%
Asthma	75	114	\$20,697	4.1%
Pleurisy; pneumothorax; pulmonary collapse	14	95	\$11,178	2.2%
Aspiration pneumonitis; food/vomitus	1	14	\$792	0.2%

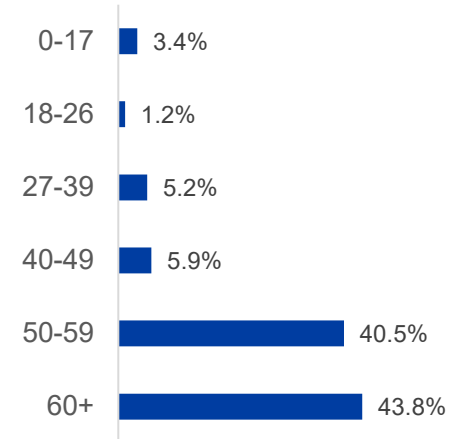
**Not Representative of all utilization*

**Data based on medical spend only*

Spend by Relationship



Spend by Age Range

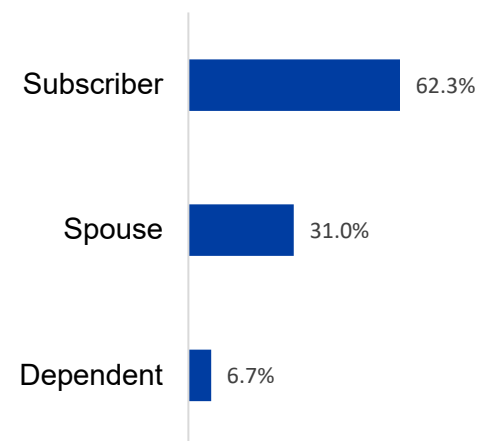


Top 10 Infectious and Parasitic Diseases				
AHRQ Description	Patients	Claims	Total Paid	% Paid
Septicemia (except in labor)	8	19	\$159,363	73.2%
Immunizations and screening	197	294	\$27,443	12.6%
Viral infection	120	159	\$18,223	8.4%
Tuberculosis	5	22	\$7,721	3.5%
HIV infection	17	27	\$1,631	0.7%
Bacterial infection; unspecified site	7	11	\$1,501	0.7%
Hepatitis	6	17	\$1,290	0.6%
Mycoses	41	48	\$314	0.1%
Other infections; including parasitic	4	6	\$291	0.1%
Sexually transmitted infections	1	2	\$0	0.0%

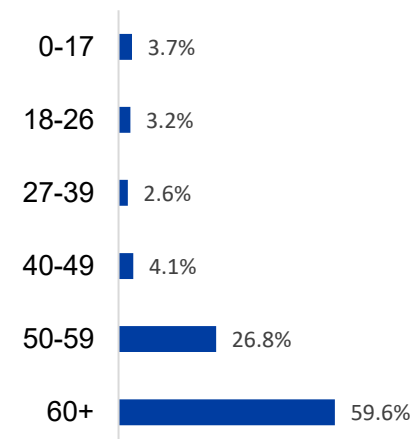
**Not Representative of all utilization*

**Data based on medical spend only*

Spend by Relationship



Spend by Age Range



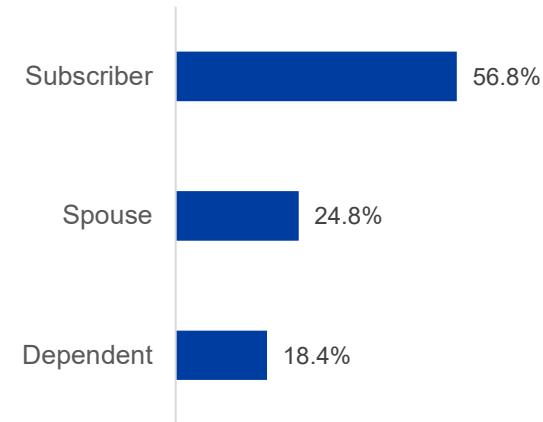
Pregnancy Related Disorders

Top 10 Complications of Pregnancy				
AHRQ Description	Patients	Claims	Total Paid	% Paid
Other complications of pregnancy	31	84	\$49,847	24.1%
Other pregnancy and delivery including normal	36	104	\$43,825	21.2%
Hypertension complicating pregnancy;	3	17	\$27,106	13.1%
Hemorrhage during pregnancy; abruptio placenta	9	26	\$15,604	7.5%
Diabetes or abnormal glucose tolerance complicating	6	11	\$15,058	7.3%
Polyhydramnios and other problems of amniotic cavity	3	4	\$13,435	6.5%
Contraceptive and procreative management	57	81	\$13,106	6.3%
Early or threatened labor	4	6	\$11,895	5.7%
Spontaneous abortion	5	20	\$10,628	5.1%
Other complications of birth; puerperium affecting management	9	12	\$6,390	3.1%

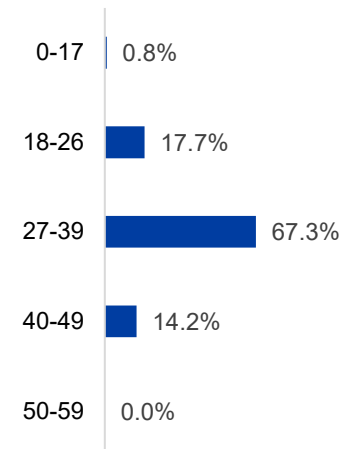
**Not Representative of all utilization*

**Data based on medical spend only*

Spend by Relationship



Spend by Age Range



Emergency Room and Urgent Care



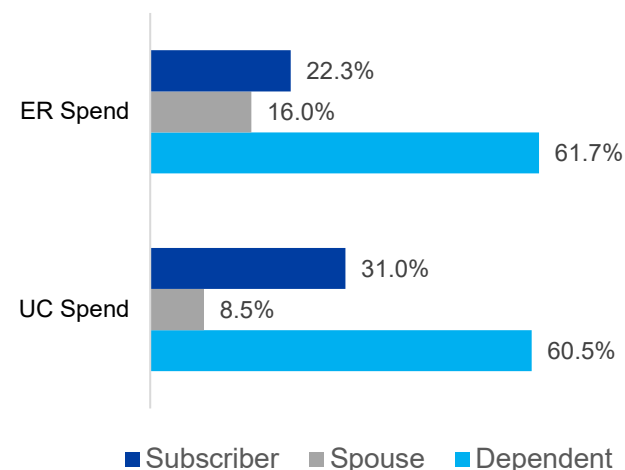
Metric	July - Sept. 1Q23		July - Sept. 1Q24		Peer	
	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care
# of Visits	199	962	183	860		
Visits Per Member	0.03	0.48	0.03	0.54	0.09	0.15
Visits Per K	128.0	618.8	120.0	563.9	101.3	465.2
Avg. Paid Per Visit	\$2,617	\$114	\$3,423.91	\$120	\$2,714	\$116

**Not Representative of all utilization*

**Data based on medical spend only*

Emergency Room and Urgent Care Visits by Relationships - 1Q24				
Relationship	ER Visits	ER Per K	UC Visits	UC Per K
Member	47	30.8	213	139.7
Spouse	28	18.4	105	68.9
Dependent	108	70.8	542	355.4
Total	183	120.0	860	563.9

ER / UC Spend by Relationship



Clinical Conditions by Medical Spend



Top 15 Common Condition	# of Members	% of Members	Members Per K	PMPM
Mental Disorders	504	24.8%	247.9	\$18.72
Intervertebral Disc Disorders	308	15.1%	151.5	\$15.43
Diabetes with complications	284	14.0%	139.7	\$4.50
Breast Cancer	45	2.2%	22.1	\$3.40
Coronary Atherosclerosis	46	2.3%	22.6	\$2.66
Hypertension	264	13.0%	129.8	\$1.18
Diabetes without complications	278	13.7%	136.7	\$3.13
Prostate Cancer	12	0.6%	5.9	\$1.13
Chronic Renal Failure	56	2.8%	27.5	\$1.10
Asthma	75	3.7%	36.9	\$1.99
Acute Myocardial Infarction	4	0.2%	2.0	\$1.38
Colon Cancer	3	0.1%	1.5	\$0.81
Congestive Heart Failure (CHF)	20	1.0%	9.8	\$0.66
Cervical Cancer	10	0.5%	4.9	\$0.04
COPD	30	1.5%	14.8	\$0.10

**Not Representative of all utilization*

**Data based on medical spend only*

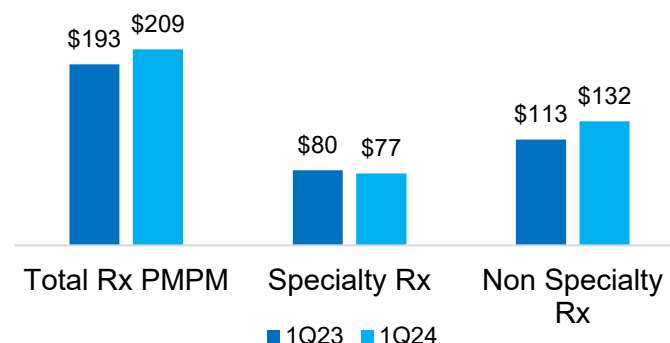
Pharmacy Drivers

	July - Sept. 1Q23	July - Sept. 1Q24	Δ
Enrolled Members	6,219	6,100	-1.9%
Average Prescriptions PMPY	16.9	17.4	3.0%
Formulary Rate	87.7%	88.2%	0.6%
Generic Use Rate	84.5%	84.4%	0.0%
Generic Substitution Rate	98.2%	98.9%	0.7%
Avg Net Paid per Prescription	\$137	\$144	5.3%
Net Paid PMPM	\$193	\$209	8.4%

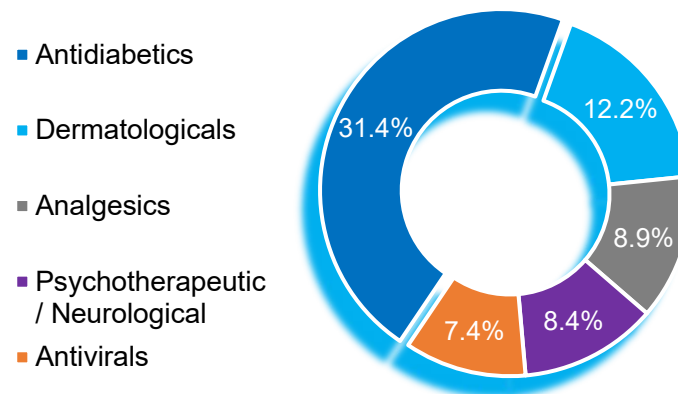
Pharmacy Performance

- Rx spend increased of **8.4%**, (**\$16 PMPM**) from prior period
- Avg. paid per Script increased **5.3%** (**\$7 PMPM**) year over year
- Specialty Rx spend driving **36.7%** of Rx Spend
- Specialty Rx spend remained relatively flat from prior period
 - Specialty Rx Drivers:
 - Mounjaro** (Antidiabetic) Spend up **83.5%**
 - Ozempic** (Antidiabetic) Spend up **30.8%**
- Tier 1 Rx drove **74.4%** of total claim volume, but only accounts for **5.6%** of overall Rx Spend

Total Rx Spend by Benefit and Type



Top 5 Therapeutic Classes by Spend



Appendix E

Index of Tables

**Dental Plan –Utilization Review for PEBP
July 1, 2024 – September 30, 2024**

DENTAL TOTAL SAVINGS SUMMARY 2

DENTAL CLAIMS BREAKOUTS.....3

DENTAL PAID BY MEMBER STATUS.....4



Public Employees' Benefits Program

Quarterly Plan Performance Review

Dental • 2025-1Q

Claims Paid 7/1/2024 - 9/30/2024



A UnitedHealthcare Company



Dental Total Savings Summary

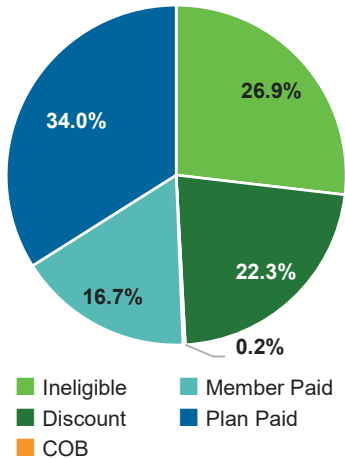
Breakouts & Network Performance



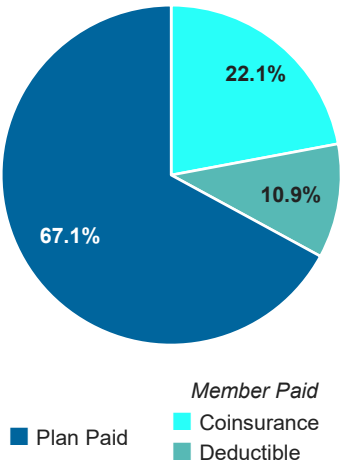
Dental Dollar Chain: Billed to Paid Dollars

Dollar Amount	Total Dollars	PMPM
Dental Billed	\$21,067,053	\$104.29
(-) Ineligible	\$5,663,020	\$28.03
Dental Covered	\$15,404,033	\$76.25
(-) Discount	\$4,700,012	\$23.27
Dental Allowed	\$10,704,021	\$52.99
(-) COB	\$47,468	\$0.23
(-) Coinsurance	\$2,354,901	\$11.66
(-) Deductible	\$1,161,567	\$5.75
Total Member Paid	\$3,516,469	\$17.41
Total Plan Paid	\$7,161,865	\$35.45

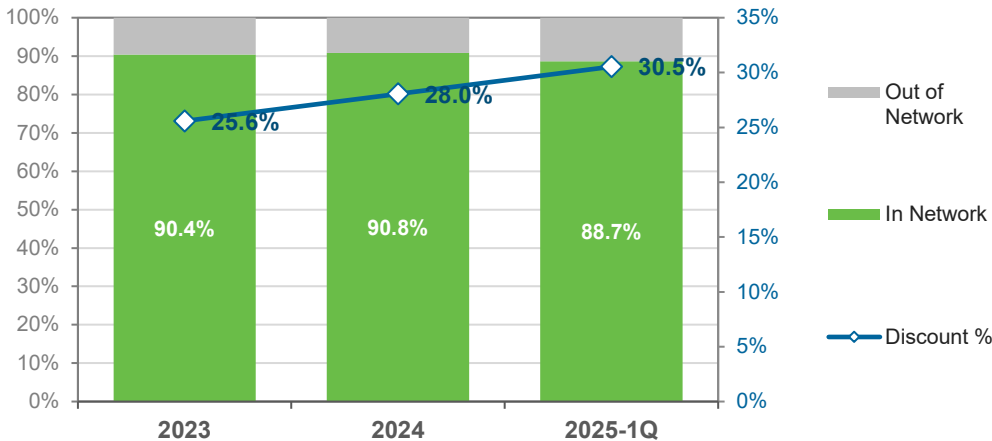
Breakout of Billed Dollars



Breakout of Paid Dollars



Dental Network Performance





Dental Claims Breakouts

Age Range, Member Cost, and Dental Category



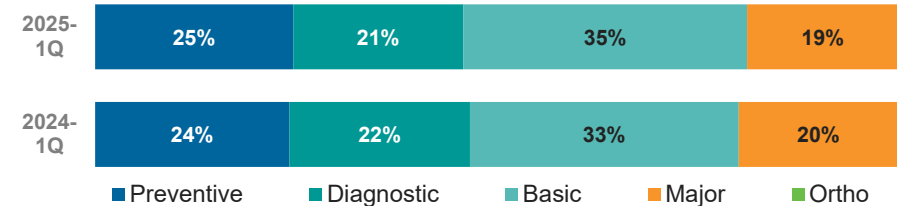
Dental Paid Claims by Age Range

Age	2024-1Q		2025-1Q		Change	
	Total Paid	Paid PMPM	Total Paid	Paid PMPM	Total	PMPM
< 01	\$2,238	\$1.90	\$3,027	\$2.57	35.3%	35.6%
01	\$12,872	\$9.89	\$13,667	\$10.05	6.2%	1.6%
02 - 04	\$112,267	\$23.96	\$118,993	\$24.87	6.0%	3.8%
05 - 09	\$324,087	\$35.84	\$317,898	\$33.05	-1.9%	-7.8%
10 - 14	\$353,333	\$32.38	\$377,838	\$33.66	6.9%	3.9%
15 - 19	\$558,725	\$44.30	\$511,984	\$38.81	-8.4%	-12.4%
20 - 24	\$273,026	\$20.74	\$288,809	\$20.73	5.8%	0.0%
25 - 29	\$214,215	\$24.15	\$264,494	\$26.99	23.5%	11.8%
30 - 34	\$328,432	\$30.31	\$320,215	\$27.76	-2.5%	-8.4%
35 - 39	\$373,000	\$30.24	\$391,371	\$30.50	4.9%	0.9%
40 - 44	\$431,970	\$33.15	\$429,015	\$31.37	-0.7%	-5.4%
45 - 49	\$437,635	\$35.32	\$407,842	\$31.72	-6.8%	-10.2%
50 - 54	\$513,513	\$35.68	\$513,321	\$34.49	0.0%	-3.3%
55 - 59	\$565,340	\$38.92	\$535,228	\$35.91	-5.3%	-7.7%
60 - 64	\$699,286	\$44.46	\$679,239	\$43.40	-2.9%	-2.4%
65+	\$2,005,172	\$49.70	\$1,988,923	\$49.00	-0.8%	-1.4%
Total	\$7,205,110	\$36.88	\$7,161,865	\$35.45	-0.6%	-3.9%

Dental Cost Distribution

Member Total Paid Range	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Mem Paid)	OOP % of Tot
No Claims	42,904	62.0%	\$0	0.0%	\$0	0.0%
< \$0 - \$0	1,397	2.0%	-\$6,529	-0.1%	\$74,934	2.1%
> \$0 - \$250	18,680	27.0%	\$2,464,912	34.4%	\$729,316	20.7%
> \$250 - \$500	2,642	3.8%	\$934,933	13.1%	\$459,124	13.1%
> \$500 - \$750	1,319	1.9%	\$808,511	11.3%	\$506,586	14.4%
> \$750 - \$1000	684	1.0%	\$590,418	8.2%	\$362,001	10.3%
> \$1000	1,526	2.2%	\$2,369,620	33.1%	\$1,384,507	39.4%
Total	69,152	100.0%	\$7,161,865	100.0%	\$3,516,469	100.0%

Paid Breakout by Dental Category



Dental Category	2024-1Q		2025-1Q		Change
	Patients	Total Paid	Patients	Total Paid	Total Paid
Preventive	17,879	\$1,743,119	18,139	\$1,766,024	1.3%
Diagnostic	17,147	\$1,617,816	17,448	\$1,515,380	-6.3%
Basic	8,535	\$2,408,340	8,707	\$2,528,886	5.0%
Major	2,375	\$1,435,835	2,144	\$1,351,576	-5.9%
Orthodontia	1	\$0	1	\$0	-
Total Dental	25,182	\$7,205,110	25,714	\$7,161,865	-0.6%



Dental Paid by Member Status

Breakout of State vs. Non-State by Member Status



Program	2024-1Q (7/1/2023 - 9/30/2023)				2025-1Q (7/1/2024 - 9/30/2024)				Trend
	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Total
State Members									
Dental	\$4,806,718	\$606,821	\$163,004	\$5,576,543	\$4,791,739	\$585,879	\$160,527	\$5,538,144	-0.7%
Dental Exchange			\$1,012,274	\$1,012,274			\$1,060,666	\$1,060,666	4.8%
Total	\$4,806,718	\$606,821	\$1,175,278	\$6,588,817	\$4,791,739	\$585,879	\$1,221,193	\$6,598,810	0.2%
PMPM	\$33.45	\$40.47	\$49.48	\$36.11	\$31.68	\$40.65	\$50.64	\$34.77	-3.7%
Non-State Members									
Dental	\$2,601	\$18,708	\$56,626	\$77,935	\$712	\$19,594	\$58,039	\$78,346	0.5%
Dental Exchange			\$538,358	\$538,358			\$484,710	\$484,710	-10.0%
Total	\$2,601	\$18,708	\$594,984	\$616,293	\$712	\$19,594	\$542,749	\$563,055	-8.6%
PMPM	\$72.25	\$35.09	\$48.25	\$47.77	\$24.59	\$53.67	\$45.78	\$45.96	-3.8%
All Members									
Dental	\$4,809,319	\$625,530	\$219,629	\$5,654,478	\$4,792,451	\$605,473	\$218,566	\$5,616,490	-0.7%
Dental Exchange			\$1,550,632	\$1,550,632			\$1,545,376	\$1,545,376	-0.3%
Total	\$4,809,319	\$625,530	\$1,770,262	\$7,205,110	\$4,792,451	\$605,473	\$1,763,942	\$7,161,865	-0.6%
PMPM	\$33.46	\$40.29	\$49.06	\$36.88	\$31.68	\$40.97	\$49.04	\$35.45	-3.9%