HSB DATASCOPE™ Diabetes Care Management Report Nevada Public Employees' Benefits Program July 2021 – March 2022

# Reimagine | Rediscover Benefits

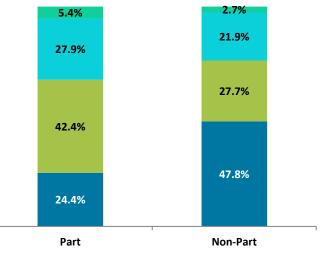


## **Diabetes Care Management – Financial Summary**

Summary	Participants	Non-	Variance	
Enrollment		Participants		
Avg # Employees	315	1,964	-83.9%	
Avg # Members	434	2,480	-82.5%	
Member/Employee Ratio	1.4	1.3	9.5%	
Financial Summary				
Gross Cost	\$3,302,128	\$26,401,767		
Client Paid	\$2,636,682	\$22,833,368		
Employee Paid	\$665,446	\$3,568,399		
Client Paid-PEPY	\$11,149	\$15,505	-28.1%	
Client Paid-PMPY	\$8,094	\$12,275	-34.1%	
Client Paid-PEPM	\$929	\$1,292	-28.1%	
Client Paid-PMPM	\$675	\$1,023	-34.0%	
High Cost Claimants (HCC's) > \$100k				
# of HCC's	5	43		
HCC's / 1,000	11.5	17.3	0.0%	
Avg HCC Paid	\$204,411	\$266,313	0.0%	
HCC's % of Plan Paid	38.8%	50.2%	0.0%	
Cost Distribution - PMPY				
Hospital Inpatient	\$1,972	\$5 <i>,</i> 867	-66.4%	
Facility Outpatient	\$3,430	\$3,395	1.0%	
Physician	\$2,256	\$2,683	-15.9%	
Other	\$436	\$331	31.7%	
Total	\$8,094	\$12,275	-34.1%	
	Annualized	Annualized		

\*Non-Participant is defined as a member who has been diagnosed with diabetes, but is not enrolled in the program \*Analysis based on active members

#### **Cost Distribution by Claim Type**



Hospital Inpatient Facility Outpatient Physician Other

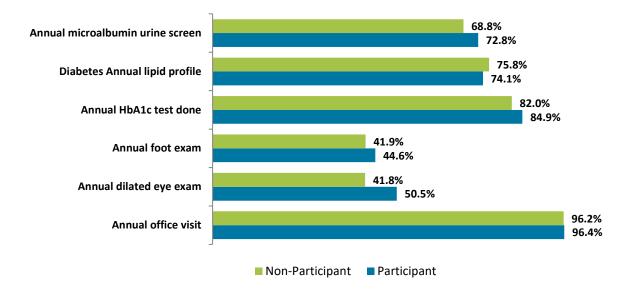
### **Diabetes Care Management – Utilization Summary**

Summary	Participants	Non- Participants	Variance	
Inpatient Facility				
# of Admits	29	246		
# of Bed Days	178	1,567		
Paid Per Admit	\$19,091	\$36,601	-47.8%	
Paid Per Day	\$3,110	\$5,746	-45.9%	
Admits Per 1,000	89	132	-32.6%	
Days Per 1,000	546	842	-35.2%	
Avg LOS	6.1	6.4	-4.7%	
# of Admits From ER	19	177	-89.3%	
Physician Office				
OV Utilization per Member	7.6	8.1	-6.2%	
Avg Paid per OV	\$82	\$94	-12.8%	
Avg OV Paid per Member	\$623	\$623 \$760		
DX&L Utilization per Member	16.5 20.8		-20.7%	
Avg Paid per DX&L	\$54	\$63	-14.3%	
Avg DX&L Paid per Member	\$892 \$1,311		-32.0%	
Emergency Room				
# of Visits	55	502	_	
Visits Per Member	0.17 0.27		-37.0%	
Visits Per 1,000	169	169 270		
Avg Paid per Visit	\$2,217	\$2,217 \$2,607		
Urgent Care				
# of Visits	90	658		
Visits Per Member	0.28	0.35	-20.0%	
Visits Per 1,000	276	354	-22.0%	
Avg Paid per Visit	\$53	\$110	-51.8%	
	Annualized	Annualized		

\*Non-Participant is defined as a member who has been diagnosed with diabetes, but is not enrolled in the program \*Analysis based on active members

### **Quality Metrics**

		Participant			Non-Participant				
Condition	Metric	#Members in Group	#Meeting Metric	#Not Meeting Metric	% Meeting Metric	#Members in Group	#Meeting Metric	#Not Meeting Metric	% Meeting Metric
Diabetes	Annual office visit	305	294	11	96.4%	2,352	2,263	89	96.2%
	Annual dilated eye exam	305	154	151	50.5%	2,352	983	1,369	41.8%
	Annual foot exam	305	136	169	44.6%	2,352	986	1,366	41.9%
	Annual HbA1c test done	305	259	46	84.9%	2,352	1,929	423	82.0%
	Diabetes Annual lipid profile	305	226	79	74.1%	2,352	1,782	570	75.8%
	Annual microalbumin urine screen	305	222	83	72.8%	2,352	1,617	735	68.8%



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