

CELESTENA GLOVER *Executive Officer*

JOE LOMBARDO Governor STATE OF NEVADA **PUBLIC EMPLOYEES' BENEFITS PROGRAM** 3427 Goni Road, Suite 109, Carson City, Nevada 89706 Telephone 775-684-7000 | 702-486-3100 | 1-800-326-5496 https://pebp.nv.gov

JOY GRIMMER Board Chair

AGENDA ITEM

X	Action Item
	Information Only

Date: July 25, 2024

Item Number: 4.2.2

Title:Self-Funded CDHP, LDPPO, and EPO Plan Utilization Report for the
period ending March 31, 2024

This report addresses medical, dental, prescription drug and HSA/HRA utilization for the PY 2024 period ending March 31, 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. LDPPO 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 Q3 Plan Year 2023 utilization data.

CONSUMER DRIVEN HEALTH PLAN (CDHP)

The Consumer Driven Health Plan (CDHP) experience for Q3 of Plan Year 2024 compared to Q3 of Plan Year 2023 is summarized below.

- Population:
 - 10.3% decrease for primary participants
 - 12.4% decrease for primary participants plus dependents (members)
- Medical Cost:
 - 2.8% increase for primary participants
 - 5.0% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 96 High-Cost Claimants accounting for 33.2% of the total plan paid for Q3 of Plan Year 2024
 - o 26.1% increase in High-Cost Claimants per 1,000 members
 - 0 19.3% decrease in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - \circ Cancer (\$5.4 million) 27.4% of paid claims
 - Neurological Disorders (\$2.2 million) 11.2% of paid claims
 - Cardia Disorders (\$2.2 million) 11.0% of paid claims
- Emergency Room:
 - ER visits per 1,000 members increased 3.4%
 - Average paid per ER visit increased 6.7%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased 10.1%
 - Average paid per Urgent Care visit decreased 6.7% (from \$45 to \$42)
- Network Utilization:
 - o 97.4% of claims are from In-Network providers (the same as Q3 of PY2023)
 - Q3 of Plan Year 2024 In-Network discounts stayed the same as PY 2023 at 68.4%
- Prescription Drug Utilization:
 - o Overall:
 - Total Net Claims decreased 10.5%
 - Total Gross Claims Costs decreased 0.4% (\$0.1 million)
 - Average Total Cost per Claim increased 11.2%
 - From \$115.05 to \$127.97
 - Member:

- Total Member Cost decreased 4.3%
- Average Participant Share per Claim increased 7.0%
 - Net Member PMPM increased 9.7%
 - From \$30.58 to \$33.54
- o Plan
 - Total Plan Cost increased 0.7%

- Average Plan Share per Claim increased 12.5%
 - Net Plan PMPM increased 15.4%
 - From \$100.53 to \$116.00
- Net Plan PMPM factoring rebates increased 14.0%
 - From \$65.97 to \$75.20

LOW DEDUCTIBLE PPO PLAN (LDPPO)

The Low Deductible PPO Plan (LDPPO) experience for Q3 of Plan Year 2024 compared to Q3 of Plan Year 2023 is summarized below.

- Population:
 - 35.5% increase for primary participants
 - o 33.5% increase for primary participants plus dependents (members)
- Medical Cost:
 - 8.3% increase for primary participants
 - 10.0% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 55 High-Cost Claimants accounting for 21.9% of the total plan paid for Q3 of Plan Year 2024
 - o 4.3% decrease in High-Cost Claimants per 1,000 members
 - o 5.2% decrease in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - \circ Cancer (\$3.6 million) 27.4% of paid claims
 - \circ Neurological Disorders (\$2.7 million) 21.0% of paid claims
 - \circ Cardiac Disorders (\$1.6 million) 12.5% of paid claims
- Emergency Room:
 - ER visits per 1,000 members increased 11.0%
 - Average paid per ER visit increased 1.6%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased by 1.4%
 - Average paid per Urgent Care visit increased 8.1% (from \$99 to \$107)
- Network Utilization:
 - o 97.8% of claims are from In-Network providers (the same as Q3 of PY 2023)
 - Q3 of Plan Year 2024 In-Network discounts increased 1.0% over PY 2023
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims increased 36.2%
 - Total Gross Claims Costs increased 66.9% (\$12.1million)
 - Average Total Cost per Claim increased 22.5%
 - From \$120.20 to \$147.28
 - o Member:
 - Total Member Cost increased 56.8%
 - Average Participant Share per Claim increased 15.1%

- Net Member PMPM increased 17.4%
 - From \$23.18 to \$27.21
- o Plan
 - Total Plan Cost increased 68.8%
 - Average Plan Share per Claim increased 24.0%
 - Net Plan PMPM increased 26.4%
 - From \$119.56 to \$151.11
 - Net Plan PMPM factoring rebates increased 27.5%
 - From \$78.59 to \$100.17

PEBP PREMIER PLAN (EPO)

The PEBP Premier Plan (EPO) experience for Q3 of Plan Year 2024 compared to Q3 of Plan Year 2023 is summarized below.

- Population:
 - o 10.6% decrease for primary participants
 - 11.0% decrease for primary participants plus dependents (members)
- Medical Cost:
 - 4.2% increase for primary participants
 - 4.5 increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 46 High-Cost Claimants accounting for 32.3% of the total plan paid for Q3 of Plan Year 2024
 - o 23.1% increase in High-Cost Claimants per 1,000 members
 - o 15.4% decrease in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - \circ Cancer (\$2.5 million) 26.7% of paid claims
 - Cardiac Disorders ((1.3 million) 13.9% of paid claims
 - \circ Infections (\$0.1 million) 9.8% of paid claims
- Emergency Room:
 - ER visits per 1,000 members increased by 5.9%
 - Average paid per ER visit increased by 9.0%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased by 7.8%
 - Average paid per Urgent Care visit increased 4.7%
- Network Utilization:
 - 96.2% of claims are from In-Network providers
 - In-Network utilization increased 0.1% over PY 2023
 - In-Network discounts increased 1.3% over PY 2023
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims decreased 7.3%
 - Total Gross Claims Costs increased 2.3% (\$0.3 million)
 - Average Total Cost per Claim increased 10.3%

- From \$145.79 to \$160.86
- Member:
 - Total Member Cost decreased 4.6%
 - Average Participant Share per Claim increased 2.9%
 - Net Member PMPM increased 7.5%
 - From \$40.97 to \$44.06
- o Plan
 - Total Plan Cost increased 3.7%
 - Average Plan Share per Claim increased 11.8%
 - Net Plan PMPM increased 16.8%
 - From \$214.11 to \$250.06
 - Net Plan PMPM factoring rebates increased 16.8%
 - From \$139.74 to \$163.19

DENTAL PLAN

The Dental Plan experience for Q3 of Plan Year 2024 is summarized below.

- Dental Cost:
 - Total of \$19,905,370 paid for Dental claims
 - Basic claims account for 34.0% (\$6.8million)
 - Preventive claims account for 25.1% (\$5.0 million)
 - Diagnostic claims account for 22.5% (\$4.5 million)
 - Major claims account for 18.3 (\$3.7 million)

HEALTH REIMBURSEMENT ARRANGEMENT

The table below provides a list of HRA account balances as of March 31, 2024.

HRA Ac	count Balance	es as of Mar. 31, 202	4
\$Range	# Accounts	Total Account Balance	Average Per Account Balance
0	17,679	0.00	0.00
\$.01 - \$500.00	35,636	8,875,776.60	249.07
\$500.01 - \$1,000	3,120	2,105,246.36	674.76
\$1,000.01 - \$1,500	1,039	1,252,242.03	1,205.24
\$1,500.01 - \$2,000	500	865,102.22	1,730.20
\$2,000.01 - \$2,500	297	669,271.49	2,253.44
\$2,500.01 - \$3,000	232	638,709.62	2,753.06
\$3,000.01 - \$3,500	142	459,398.64	3,235.20
\$3,500.01 - \$4,000	182	681,551.72	3,744.79
\$4,000.01 - \$4,500	132	558,951.85	4,234.48
\$4,500.01 - \$5,000	106	504,971.61	4,763.88
\$5,000.01 +	664	5,651,038.56	8,510.60
Total	59,729	\$ 22,262,261	\$ 373

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 third quarter of Plan Year 2024. The CDHP total plan paid decreased 8.0% over the same time for Plan Year 2023; however, on a PEPY basis the plan experienced an increase of 2.6%. The LDPPO total plan paid increased 8.3% over Q3 of Plan Year 2023. The EPO total plan paid decreased 6.9% over Q3 of Plan Year 2023. For HMO utilization and cost data please see the report provided in Appendix D.

Appendix A

Index of Tables UMR Inc. – CDHP Utilization Review for PEBP January 1, 2024 – March 31, 2024

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DATASCOPETM

Nevada Public Employees' Benefits Program HDHP Plan July 2023 – March 2024 Incurred, Paid through May 2024

Reimagine | Rediscover Benefits



Overview

- Total Medical Spend for 3Q24 was \$59,215,710 of which 75.3% was spent in the State Active population.
 When compared to 3Q23, this reflected a decrease of 8.0% in plan spend, with State Actives having a decrease of 3.9%.
 - When compared to 3Q22, 3Q24 decreased 18.2%, with State Actives having a decrease of 16.7%.
- On a PEPY basis, 3Q24 reflected an increase of 2.6% when compared to 3Q23. The largest group, State Actives, had a 7.2% increase when compared to the 3Q23 PEPY%.
 - When compared to 3Q22, 3Q24 increased 5.6%, with State Actives increasing 8.8%.
- 88.6% of the Average Membership had paid Medical claims less than \$2,500, with 24.8% having no claims paid at all during the reporting period.
- There were 96 high-cost Claimants (HCC's) over \$100K, that accounted for 33.2% of the total spend. HCCs accounted for 34.3% of total spend during 3Q23, with 87 members hitting the \$100K threshold. The largest diagnosis grouper was Cancer accounting for 27.4% of high-cost claimant dollars.
- IP Paid per Admit was \$28,380 which is an increase of 5.1% compared to 3Q23.
- ER Paid per Visit is \$2,435, which is an increase of 6.7% compared to 3Q23.
- 97.4% of all Medical spend dollars were to In Network providers. The average In Network discount was 68.2%, which is comparable to the PY23 average discount of 68.4%.

Paid Claims by Age Group

										Paid C	laim	s by Age Grou	o									
					3Q23										3Q24						% Chan	ige
Age Range	N	led Net Pay	Med MPM	F	Rx Net Pay	Rx	РМРМ	Net Pay	P	MPM	N	/led Net Pay		Med MPM	Rx Net Pay	Rx F	РМРМ	Net Pay	P	мрм	Net Pay	РМРМ
<1	\$	4,636,463	\$ 3,161	\$	33,929	\$	23	\$4,670,392	\$	3,184	\$	1,563,904	\$	1,401	\$ 513	\$	0	\$ 1,564,417	\$	1,402	-66.5%	-56.0%
1	\$	295,269	\$ 158	\$	17,144	\$	9	\$312,413	\$	168	\$	276,597	\$	233	\$ 70,754	\$	60	\$ 347,351	\$	292	11.2%	74.4%
2 - 4	\$	622,175	\$ 109	\$	124,473	\$	22	\$746 <i>,</i> 648	\$	131	\$	471,851	\$	98	\$ 122,783	\$	26	\$ 594,634	\$	124	-20.4%	-5.4%
5 - 9	\$	985 <i>,</i> 888	\$ 79	\$	200,278	\$	16	\$1,186,166	\$	95	\$	1,008,953	\$	100	\$ 228,275	\$	23	\$ 1,237,228	\$	123	4.3%	29.6%
10 - 14	\$	1,275,224	\$ 86	\$	238,634	\$	16	\$1,513,858	\$	102	\$	1,286,841	\$	103	\$ 419,140	\$	34	\$ 1,705,981	\$	137	12.7%	34.1%
15 - 19	\$	3,588,200	\$ 219	\$	555,472	\$	34	\$4,143,672	\$	253	\$	3,403,709	\$	232	\$ 395 <i>,</i> 864	\$	27	\$ 3,799,573	\$	259	-8.3%	2.3%
20 - 24	\$	2,479,557	\$ 123	\$	914,832	\$	45	\$3,394,389	\$	168	\$	2,324,750	\$	133	\$ 1,112,413	\$	64	\$ 3,437,163	\$	197	1.3%	17.0%
25 - 29	\$	2,726,306	\$ 198	\$	717,660	\$	52	\$3,443,966	\$	251	\$	1,854,300	\$	158	\$ 342,572	\$	29	\$ 2,196,872	\$	188	-36.2%	-25.1%
30 - 34	\$	4,203,153	\$ 249	\$	750,398	\$	45	\$4,953,551	\$	294	\$	3,263,468	\$	225	\$ 670,643	\$	46	\$ 3,934,111	\$	272	-20.6%	-7.5%
35 - 39	\$	2,672,843	\$ 146	\$	1,236,947	\$	67	\$3,909,790	\$	213	\$	3,752,657	\$	234	\$ 1,115,372	\$	69	\$ 4,868,029	\$	303	24.5%	42.4%
40 - 44	\$	3,331,268	\$ 172	\$	1,607,018	\$	83	\$4,938,286	\$	255	\$	3,210,536	\$	184	\$ 1,487,190	\$	85	\$ 4,697,726	\$	269	-4.9%	5.4%
45 - 49	\$	3,803,016	\$ 206	\$	1,677,703	\$	91	\$5,480,719	\$	297	\$	3,816,553	\$	234	\$ 2,047,721	\$	126	\$ 5,864,274	\$	360	7.0%	20.9%
50 - 54	\$	6,754,006	\$ 322	\$	2,982,170	\$	142	\$9,736,176	\$	463	\$	6,177,774	\$	332	\$ 3,259,624	\$	175	\$ 9,437,398	\$	507	-3.1%	9.3%
55 - 59	\$	7,948,416	\$ 343	\$	4,172,614	\$	180	\$12,121,030	\$	523	\$	7,701,246	\$	382	\$ 3,119,372	\$	155	\$ 10,820,618	\$	536	-10.7%	2.5%
60 - 64	\$	12,907,547	\$ 472	\$	5,434,512	\$	199	\$18,342,059	\$	670	\$	12,482,979	\$	507	\$ 5,693,097	\$	231	\$ 18,176,076	\$	738	-0.9%	10.1%
65+	\$	6,136,737	\$ 339	\$	4,422,523	\$	244	\$10,559,260	\$	583	\$	6,619,593	\$	387	\$ 5,178,284	\$	303	\$ 11,797,877	\$	689	11.7%	18.2%
Total	\$	64,366,069	\$ 258	\$	25,086,307	\$	101	\$ 89,452,376	\$	359	\$	59,215,710	\$	271	\$ 25,263,617	\$	116	\$ 84,479,327	\$	387	-5.6%	7.8%

Financial Summary (p. 1 of 2)

Summary 3Q22 3Q23 3Q24 Prior Year 3Q22 3Q23 3Q24 Prior Year Average Enrollment Employees 19,061 16,465 14,764 -10.3% 15,625 13,359 11,974 -10.4% 3 3 3 14,7% Spouses 40,30 3,298 2,782 -15.7% 31,88 2,527 2,115 16,3% 1 1 1 1 22,0% Children 10,289 7,948 6,721 -15.4% 9,534 7,301 6,159 -15.6% 4 4 3 -27.8% Total Members 33,300 2,7,711 24,267 -12.4% 28,347 23,187 20,248 +1.1% 549,469 534,301 567,783 97.6% Finncial Summary 1.8 1.7 1.6 -3.5% 1.8 1.7 1.7 -0.6% 534,301 557,98,584 -4.1% 549,469 534,301 557,783 97.6% Client Paid-PEry 55,062 <td< th=""><th></th><th></th><th>Tot</th><th>al</th><th></th><th></th><th>State A</th><th>ctive</th><th></th><th></th><th>Non-State</th><th>Active</th><th></th></td<>			Tot	al			State A	ctive			Non-State	Active	
Employees 19,061 16,465 14,764 -10.3% 15,625 13,359 11,974 -10.4% 3 3 3 14.7% Spouses 4,030 3,298 2,782 -15.7% 3,188 2,527 2,115 -16.3% 1 1 1 -22.0% Children 10,289 7,948 6,721 -15.4% 9,534 7,301 6,159 -15.6% 4 4 3 -27.8% Total Members 33,380 27,711 242.67 -12.4% 28,347 23,187 20.248 +12.7% 8 8 7 -11.8% Finands 1.8 1.7 1.6 -3.5% 1.8 1.7 1.7 -0.6% 2.7 2.7 2.1 -23.7% Gross Cost \$99.158,042 \$36,660 \$59.215,710 -8.0% \$55,684.946 \$62.788.584 -4.1% \$49.469 \$34.301 \$67.783 97.6% Client Paid-PEPY \$5,620.957 \$5,384 2.6% \$42.62	Summary	3Q22	3Q23	3Q24		3Q22	3Q23	3Q24		3Q22	3Q23	3Q24	Variance to Prior Year
Spuses 4,030 3,298 2,782 15.7% 3,188 2,527 2,115 -16.3% 1 1 1 -22.0% Children 10,289 7,948 6,721 -15.4% 9,534 7,301 6,159 -15.6% 4 4 3 -27.8% Total Members 33,380 27,711 24,267 -12.4% 28,347 23,187 20,248 -12.7% 8 8 7 -11.1% Financial Summary 1.8 1.7 1.7 7.06% 2.7 2.7 2.7 2.7 2.1 -23.7% Gross Cost \$99,158,042 \$86,94,559 \$80,818.684 -7.1% \$76,691,001 \$65,464,986 \$62,788,584 -4.1% \$49,469 \$34,301 \$67,783 97.6% Client Paid \$72,652,670 \$64,366,069 \$59,215,710 -8.0% \$55,885,730 \$48,458,781 \$46,580,031 -3.9% \$33,462 \$33,704 \$51,540 49.5% Client Paid-PEPY \$5,662 \$5,212 <	Average Enrollment												
Children 10,289 7,948 6,721 -15.4% 9,534 7,301 6,159 -15.6% 4 4 3 -27.8% Total Members 33,30 27,711 24,267 12.4% 28,347 23,187 20,248 12.7% 8 8 7 -11.1% Family Size 1.8 1.7 1.6 -3.5% 1.8 1.7 1.7 -0.6% 2.7 2.7 2.1 -23.7% Financial Summary 599,158,042 \$86,994,559 \$80,818,684 -7.1% \$76,691,001 \$65,464,986 \$62,788,584 -4.1% \$49,469 \$34,301 \$67,783 97.6% Client Paid \$72,863,670 \$64,366,069 \$59,215,710 -8.0% \$55,88,730 \$48,458,781 \$46,500,31 -3.9% \$31,462 \$21,602,963 \$19,91% Employee Paid \$52,672 \$5,1212 \$5,348 2.6% \$4,769 \$31,871 \$21,602,353 -4.7% \$14,872 \$10,553 \$20,105,35 \$21,052,35 \$21,052,35 \$21,	Employees	19,061	16,465	14,764	-10.3%	15,625	13,359	11,974	-10.4%	3	3	3	14.7%
Total Members 33,380 27,711 24,267 -12.4% 28,347 23,187 20,248 -12.7% 8 8 7 -11.1% Family Size 1.8 1.7 1.6 -3.5% 1.8 1.7 1.7 -0.6% 2.7 2.7 2.1 -23.7% Financial Summary 599,158,042 \$86,994,559 \$80,818,684 -7.1% \$76,691,001 \$65,464,986 \$62,788,584 -4.1% \$49,469 \$34,301 \$67,783 97,6% Client Paid \$72,363,670 \$64,366,069 \$59,215,710 -8.0% \$55,885,730 \$48,458,781 \$46,580,031 -3.9% \$33,462 \$23,704 \$51,943 119,1% Employee Paid \$26,794,372 \$22,628,491 \$21,602,974 -4.5% \$20,805,272 \$17,006,205 \$16,208,553 -4.7% \$16,008 \$10,595 \$20,107 90.9% Client Paid-PEPM \$2,890 \$3,097 \$3,254 5.1% \$2,279 \$3,067 10.0% \$5,577 \$3,951 \$9,739 146.5%	Spouses	4,030	3,298	2,782	-15.7%	3,188	2,527	2,115	-16.3%	1	1	1	-22.0%
Family Size 1.8 1.7 1.6 -3.5% 1.8 1.7 1.7 -0.6% 2.7 2.7 2.1 -23.7% Financial Summary	Children	10,289	7,948	6,721	-15.4%	9,534	7,301	6,159	-15.6%	4	4	3	-27.8%
Financial Summary Gross Cost \$99,158,042 \$86,994,559 \$80,818,684 -7.1% \$76,691,001 \$65,464,986 \$62,788,584 -4.1% \$49,469 \$34,301 \$67,783 97.6% Client Paid \$72,363,670 \$64,366,069 \$59,215,710 -8.0% \$55,885,730 \$48,458,781 \$46,580,031 -3.9% \$33,462 \$23,704 \$51,943 119.1% Employee Paid \$26,794,372 \$22,628,491 \$21,602,974 -4.5% \$20,805,272 \$17,006,205 \$16,208,553 -4.7% \$14,872 \$10,535 \$20,107 90.9% Client Paid-PEPY \$5,062 \$5,212 \$53,814 5.1% \$2,629 \$2,787 \$3,067 10.0% \$5,577 \$3,951 \$9,739 146.5% Client Paid-PEPM \$422 \$434 \$446 2.8% \$397 \$403 \$432 7.2% \$1,239 \$878 \$1,676 90.9% Client Paid-PEPM \$241 \$258 \$271 5.0% \$219 2.7 3.7 36.0%	Total Members	33,380	27,711	24,267	-12.4%	28,347	23,187	20,248	-12.7%	8	8	7	-11.1%
Gross Cost\$99,158,042\$80,94,559\$80,818,684-7.1%\$76,691,001\$65,464,986\$62,788,584-4.1%\$49,469\$34,301\$67,78397.6%Client Paid\$72,363,670\$64,366,069\$59,215,710-8.0%\$55,885,730\$48,458,781\$46,580,031-3.9%\$33,462\$23,704\$51,943119.1%Employee Paid\$26,794,372\$22,628,491\$21,602,974-4.5%\$20,805,272\$17,006,205\$16,208,553-4.7%\$16,008\$10,596\$15,84049.5%Client Paid-PEPY\$5,062\$5,212\$5,3482.6%\$4,769\$4,837\$5,1877.2%\$14,872\$10,535\$20,10790.9%Client Paid-PEPM\$422\$434\$4462.8%\$397\$403\$4327.2%\$1,239\$878\$1,67690.9%Client Paid-PMPM\$241\$258\$2715.0%\$219\$22610.3%\$4327.2%\$1,239\$878\$1,67690.9%Client Paid-PMPM\$241\$258\$2715.0%\$219\$22610.3%\$4327.2%\$1,239\$878\$1,67690.9%High Cost Claimants (HCC's) > \$100\$215\$10\$21,677\$2,9733.34%\$24.9%\$24.9%\$24.9%\$40.9% <td< td=""><td>Family Size</td><td>1.8</td><td>1.7</td><td>1.6</td><td>-3.5%</td><td>1.8</td><td>1.7</td><td>1.7</td><td>-0.6%</td><td>2.7</td><td>2.7</td><td>2.1</td><td>-23.7%</td></td<>	Family Size	1.8	1.7	1.6	-3.5%	1.8	1.7	1.7	-0.6%	2.7	2.7	2.1	-23.7%
Client Paid \$72,363,670 \$64,366,069 \$59,215,710 -8.0% \$55,885,730 \$48,458,781 \$46,580,031 -3.9% \$33,462 \$22,704 \$51,943 119.1% Employee Paid \$26,794,372 \$22,628,491 \$21,602,974 -4.5% \$20,805,272 \$17,006,205 \$16,208,553 -4.7% \$16,008 \$10,596 \$51,840 49.5% Client Paid-PEPY \$50,662 \$5,212 \$5,348 2.6% \$4,769 \$4,837 \$51,877 7.2% \$14,872 \$10,535 \$20,107 90.9% Client Paid-PEPY \$2,890 \$3,097 \$3,254 5.1% \$2,629 \$2,787 \$3,067 10.0% \$5,577 \$3,951 \$9,739 146.5% Client Paid-PEPM \$422 \$434 \$446 2.8% \$397 \$403 \$432 7.2% \$1,239 \$878 \$1,676 90.9% Client Paid-PMPM \$241 \$258 \$217 5.0% \$219 \$232 \$256 \$365 \$329 \$812 146.8% High Cost Claimants (HCC's) < \$1000	Financial Summary												
Employee Paid \$26,794,372 \$22,628,491 \$21,602,974 -4.5% \$20,805,272 \$17,006,205 \$16,208,553 -4.7% \$16,008 \$10,596 \$15,840 49.5% Client Paid-PEPY \$5,062 \$5,212 \$5,348 2.6% \$4,769 \$4,837 \$5,187 7.2% \$14,872 \$10,535 \$20,107 90.9% Client Paid-PEPY \$2,890 \$3,097 \$3,254 5.1% \$2,629 \$2,787 \$3,067 10.0% \$5,577 \$3,951 \$9,739 146.5% Client Paid-PEPM \$422 \$434 \$446 2.8% \$397 \$403 \$432 7.2% \$1,239 \$878 \$1,676 90.9% Client Paid-PMPM \$241 \$258 \$271 5.0% \$219 \$232 \$256 10.3% \$465 \$329 \$812 146.8% High Cost Claimants (HCC's) > \$100k \$1,7 \$7 3.7 36.0% 0.0 0.0 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0	Gross Cost	\$99,158,042	\$86,994,559	\$80,818,684	-7.1%	\$76,691,001	\$65,464,986	\$62,788,584	-4.1%	\$49,469	\$34,301	\$67,783	97.6%
Client Paid-PEPY \$5,062 \$5,212 \$5,348 2.6% \$4,69 \$4,837 \$5,187 7.2% \$14,872 \$10,535 \$20,107 90.9% Client Paid-PMPY \$2,890 \$3,097 \$3,254 5.1% \$2,629 \$2,787 \$3,067 10.0% \$5,577 \$3,951 \$9,739 146.5% Client Paid-PEPM \$422 \$434 \$446 2.8% \$397 \$403 \$432 7.2% \$1,239 \$878 \$1,676 90.9% Client Paid-PMPM \$241 \$258 \$271 5.0% \$219 \$232 \$256 10.3% \$465 \$329 \$812 146.8% High Cost Claimants (HCC's) > \$100k \$218,227 \$253,617 \$204,586 -19.3% \$219 \$2.7 3.7 36.0% 0.0 0.0 0.0% Avg HCC Paid \$218,227 \$253,617 \$204,586 -19.3% \$235,740 \$256,535 \$213,880 -16.6% \$0 \$0 0.0% 0.0% 0.0% <td>Client Paid</td> <td>\$72,363,670</td> <td>\$64,366,069</td> <td>\$59,215,710</td> <td>-8.0%</td> <td>\$55,885,730</td> <td>\$48,458,781</td> <td>\$46,580,031</td> <td>-3.9%</td> <td>\$33,462</td> <td>\$23,704</td> <td>\$51,943</td> <td>119.1%</td>	Client Paid	\$72,363,670	\$64,366,069	\$59,215,710	-8.0%	\$55,885,730	\$48,458,781	\$46,580,031	-3.9%	\$33,462	\$23,704	\$51,943	119.1%
Client Paid-PMPY\$2,890\$3,097\$3,254 5.1% \$2,629\$2,787\$3,067 10.0% \$5,577\$3,951\$9,739 146.5% Client Paid-PEPM\$422\$434\$446 2.8% \$397\$403\$432 7.2% \$1,239\$878\$1,67690.9%Client Paid-PMPM\$241\$258\$271 5.0% \$219\$232\$256 10.3% \$465\$329\$812 146.8% High Cost Claimants (HCC's) > \$100x $$117$ 87 96 10.3% 81 63 75 19.0% 0 0 0 0 0.0% Avg HCC 's / 1,000 3.5 3.1 4.0 26.1% 2.9 2.7 3.7 36.0% 0.0 0.0 0.0% Avg HCC Paid\$218,227\$253,617\$204,586 -19.3% \$235,740\$256,535\$213,880 -16.6% 50 50 50 0.0% $HC's % of Plan Paid35.3\%34.3\%33.2\%-3.2\%34.2\%33.4\%34.4\%3.0\%0.0\%0.0\%0.0\%0.0\%Cost Distribution by Claim51,041$1,049$947-9.7\%$923$956$932-2.5\%$0$0$00.0\%Facility Inpatient$1,041$1,049$947-9.7\%$768$869$1,02217.6\%$4,236$2,164$8,110274.8\%$ Physician\$930\$1,049\$1,19714.1\%\$889\$962\$1,11415.	Employee Paid	\$26,794,372	\$22,628,491	\$21,602,974	-4.5%	\$20,805,272	\$17,006,205	\$16,208,553	-4.7%	\$16,008	\$10,596	\$15,840	49.5%
Client Paid-PEPM \$422 \$434 \$446 2.8% \$397 \$403 \$432 7.2% \$1,239 \$878 \$1,676 90.9% Client Paid-PMPM \$241 \$258 \$271 5.0% \$219 \$232 \$256 10.3% \$465 \$329 \$812 146.8% High Cost Claimants (HCC's) > \$100k # # 63 75 19.0% 0 0 0 0.0% 0.0% # of HCC's 117 87 96 10.3% 81 63 75 19.0% 0 0 0 0.0% 0.0% Avg HCC Paid \$218,227 \$253,617 \$204,586 -19.3% \$235,740 \$256,535 \$213,880 -16.6% \$0 \$0 0.0%	Client Paid-PEPY	\$5,062	\$5,212	\$5,348	2.6%	\$4,769	\$4,837	\$5,187	7.2%	\$14,872	\$10,535	\$20,107	90.9%
Client Paid-PMPM \$241 \$258 \$271 5.0% \$219 \$232 \$256 10.3% \$465 \$329 \$812 146.8% High Cost Claimants (HCC's) > \$100k # f 17 87 96 10.3% 81 63 75 19.0% 0 0 0 0.0% HCC's / 1,000 3.5 3.1 4.0 26.1% 2.9 2.7 3.7 36.0% 0.0 0.0 0.0% Avg HCC Paid \$218,227 \$253,617 \$204,586 -19.3% \$235,740 \$256,535 \$213,880 -16.6% \$0 \$0 \$0 0.0% <t< td=""><td>Client Paid-PMPY</td><td>\$2,890</td><td>\$3,097</td><td>\$3,254</td><td>5.1%</td><td>\$2,629</td><td>\$2,787</td><td>\$3,067</td><td>10.0%</td><td>\$5<i>,</i>577</td><td>\$3,951</td><td>\$9,739</td><td>146.5%</td></t<>	Client Paid-PMPY	\$2,890	\$3,097	\$3,254	5.1%	\$2,629	\$2,787	\$3,067	10.0%	\$5 <i>,</i> 577	\$3,951	\$9,739	146.5%
High Cost Claimants (HCC's) > \$100k# of HCC's117879610.3%81637519.0%00000.0%HCC's1,0003.53.14.026.1%2.92.73.736.0%0.00.00.00.0%Avg HCC Paid\$218,227\$253,617\$204,586-19.3%\$235,740\$256,535\$213,880-16.6%\$0\$0\$00.0%0.0%HCC's % of Plan Paid35.3%34.3%33.2%-3.2%34.2%33.4%34.4%3.0%0.0%0.0%0.0%0.0%Facility Inpatient\$1,041\$1,049\$947-9.7%\$923\$956\$932-2.5%\$0\$0\$00.0%Facility Inpatient\$1,041\$1,049\$947-9.7%\$923\$956\$932-2.5%\$0\$0\$00.0%Facility Unpatient\$1,041\$1,049\$947-9.7%\$923\$956\$932-2.5%\$0\$0\$0.0%Facility Outpatient\$1,041\$1,049\$947-9.7%\$923\$956\$932-2.5%\$0\$0\$0 0.0% Facility Outpatient\$1,041\$1,049\$947-9.7%\$923\$956\$932-2.5%\$0\$0\$0.0%Facility Outpatient\$867\$1,000\$1,11011.0%\$768\$869\$1,02217.6%\$4,236\$2,164 <td>Client Paid-PEPM</td> <td>\$422</td> <td>\$434</td> <td>\$446</td> <td>2.8%</td> <td>\$397</td> <td>\$403</td> <td>\$432</td> <td>7.2%</td> <td>\$1,239</td> <td>\$878</td> <td>\$1,676</td> <td>90.9%</td>	Client Paid-PEPM	\$422	\$434	\$446	2.8%	\$397	\$403	\$432	7.2%	\$1,239	\$878	\$1,676	90.9%
# of HCC's117879610.3%81637519.0%00000.0%HCC's / 1,0003.53.14.026.1%2.92.73.736.0%0.00.00.00.0%Avg HCC Paid\$218,227\$253,617\$204,586-19.3%\$235,740\$256,535\$213,880-16.6%\$0\$0\$0.0%0.0%HCC's % of Plan Paid35.3%34.3%33.2%-3.2%34.2%33.4%34.4%3.0%0.0%0.0%0.0%0.0%Facility Inpatient\$1,041\$1,049\$947-9.7%\$923\$956\$932-2.5%\$0\$0\$00.0%Facility Inpatient\$1,041\$1,049\$947-9.7%\$923\$956\$932-2.5%\$0\$0\$0.0%Facility Outpatient\$867\$1,000\$1,11011.0%\$768\$869\$1,02217.6%\$4,236\$2,164\$8,110274.8%Physician\$930\$1,049\$1,19714.1%\$890\$962\$1,11415.8%\$1,306\$1,786\$1,6290.0%Other\$52\$0\$00.0%\$48\$0\$00.0%\$35\$0\$00.0%Total\$2,890\$3,097\$3,2545.1%\$2,629\$2,787\$3,06710.0%\$5,577\$3,951\$9,739146.5%	Client Paid-PMPM	\$241	\$258	\$271	5.0%	\$219	\$232	\$256	10.3%	\$465	\$329	\$812	146.8%
HCC's / 1,000 3.5 3.1 4.0 26.1% 2.9 2.7 3.7 36.0% 0.0 0.0 0.0 0.0% Avg HCC Paid \$218,227 \$253,617 \$204,586 -19.3% \$235,740 \$256,535 \$213,880 -16.6% \$0 \$0 \$0.0 0.0% 0.0% HCC's % of Plan Paid 35.3% 34.3% 33.2% -3.2% 34.2% 33.4% 34.4% 3.0% 0.0%	High Cost Claimants (HCC'	s) > \$100k											
Avg HCC Paid\$218,227\$253,617\$204,586-19.3%\$235,740\$256,535\$213,880-16.6%\$0\$0\$00.0%HCC's % of Plan Paid35.3%34.3%33.2%-3.2%34.2%33.4%34.4%3.0%0.0%0.0%0.0%0.0%0.0%Cost Distribution by Claim Type (PMPY)Facility Inpatient\$1,041\$1,049\$947-9.7%\$923\$956\$932-2.5%\$0\$0\$0\$0.0%Facility Outpatient\$867\$1,000\$1,11011.0%\$768\$869\$1,02217.6%\$4,236\$2,164\$8,110274.8%Physician\$930\$1,049\$1,19714.1%\$890\$962\$1,11415.8%\$1,306\$1,786\$1,6290.0%Other\$52\$0\$0\$0\$0\$0\$0\$0\$0\$0\$0\$0Total\$2,890\$3,097\$3,2545.1%\$2,629\$2,787\$3,06710.0%\$5,577\$3,951\$9,739146.5%	# of HCC's	117	87	96	10.3%	81	63	75	19.0%	0	0	0	0.0%
HCC's % of Plan Paid 35.3% 34.3% 33.2% -3.2% 34.2% 33.4% 34.4% 3.0% 0.0% 0.0% 0.0% 0.0% 0.0% 0.0% Cost Distribution by Claim Type (PMPY) Facility Inpatient \$1,041 \$1,049 \$947 -9.7% \$923 \$956 \$932 -2.5% \$0 \$0 \$0.0% 0.0% Facility Outpatient \$867 \$1,000 \$1,110 11.0% \$768 \$869 \$1,022 17.6% \$4,236 \$2,164 \$8,110 274.8% Physician \$930 \$1,049 \$1,197 14.1% \$890 \$962 \$1,114 15.8% \$1,306 \$1,786 \$1,629 0.0% Other \$52 \$0 \$0 0.0% \$48 \$0 \$0 0.0% \$35 \$0 \$0 0.0% Total \$2,890 \$3,097 \$3,254 5.1% \$2,629 \$2,787 \$3,067 10.0% \$5,577 \$3,951 \$9,739 146.5%	HCC's / 1,000	3.5	3.1	4.0	26.1%	2.9	2.7	3.7	36.0%	0.0	0.0	0.0	0.0%
Cost Distribution by Claim Type (PMPY) Facility Inpatient \$1,041 \$1,049 \$947 -9.7% \$956 \$932 -2.5% \$0 \$0.0% Facility Inpatient \$1,041 \$1,000 \$1,110 11.0% \$768 \$869 \$1,022 17.6% \$4,236 \$2,164 \$8,110 274.8% Physician \$930 \$1,049 \$1,197 14.1% \$8669 \$1,022 17.6% \$4,236 \$2,164 \$8,110 274.8% Physician \$930 \$1,049 \$1,147 \$1,806 \$1,786 \$1,629 0.0% Other \$52 \$0 0.0% \$4,236 \$5,577 \$3,951 \$9,739 146.5%	Avg HCC Paid	\$218,227	\$253,617	\$204,586	-19.3%	\$235,740	\$256,535	\$213,880	-16.6%	\$0	\$0	\$0	0.0%
Facility Inpatient\$1,041\$1,049\$947-9.7%\$923\$956\$932-2.5%\$0\$0\$00.0%Facility Outpatient\$867\$1,000\$1,11011.0%\$768\$869\$1,02217.6%\$4,236\$2,164\$8,110274.8%Physician\$930\$1,049\$1,19714.1%\$890\$962\$1,11415.8%\$1,306\$1,786\$1,6290.0%Other\$52\$0\$00.0%\$48\$0\$00.0%\$35\$0\$00.0%Total\$2,890\$3,097\$3,2545.1%\$2,629\$2,787\$3,06710.0%\$5,577\$3,951\$9,739146.5%	HCC's % of Plan Paid	35.3%	34.3%	33.2%	-3.2%	34.2%	33.4%	34.4%	3.0%	0.0%	0.0%	0.0%	0.0%
Facility Outpatient\$867\$1,000\$1,11011.0%\$768\$869\$1,02217.6%\$4,236\$2,164\$8,110274.8%Physician\$930\$1,049\$1,19714.1%\$890\$962\$1,11415.8%\$1,306\$1,786\$1,6290.0%Other\$52\$0\$00.0%\$48\$0\$00.0%\$35\$0\$00.0%Total\$2,890\$3,097\$3,2545.1%\$2,629\$2,787\$3,06710.0%\$5,577\$3,951\$9,739146.5%	Cost Distribution by Claim	Type (PMPY)											
Physician \$930 \$1,049 \$1,197 14.1% \$890 \$962 \$1,114 15.8% \$1,306 \$1,786 \$1,629 0.0% Other \$52 \$0 \$0 0.0% \$48 \$0 \$0 0.0% \$355 \$0 \$0 0.0% Total \$2,890 \$3,097 \$3,254 5.1% \$2,629 \$2,787 \$3,067 10.0% \$5,577 \$3,951 \$9,739 146.5%	Facility Inpatient	\$1,041	\$1,049	\$947	-9.7%	\$923	\$956	\$932	-2.5%	\$0	\$0	\$0	0.0%
Other \$52 \$0 \$0 \$48 \$0 \$0 0.0% \$35 \$0 \$0 0.0% Total \$2,890 \$3,097 \$3,254 5.1% \$2,629 \$2,787 \$3,067 10.0% \$5,577 \$3,951 \$9,739 146.5%	Facility Outpatient			\$1,110			•					• •	
Total \$2,890 \$3,097 \$3,254 5.1% \$2,629 \$2,787 \$3,067 10.0% \$5,577 \$3,951 \$9,739 146.5%													
	Iotal	\$2,890 Annualized	\$3,097 Annualized	\$3,254 Annualized	5.1%	\$2,629 Annualized	\$2,787 Annualized	\$3,067 Annualized	10.0%	\$5,577 Annualized	\$3,951 Annualized	\$9,739 Annualized	146.5%

Financial Summary (p. 2 of 2)

		State Re	tirees			Non-State	Retirees		
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	Peer Index
Average Enrollment									
Employees	2,991	2,732	2,464	-9.8%	442	371	323	-13.1%	
Spouses	777	722	630	-12.8%	64	48	37	-24.0%	
Children	733	626	545	-13.0%	18	16	14	-14.9%	
Total Members	4,502	4,081	3,639	-10.8%	523	436	373	-14.4%	
Family Size	1.5	1.5	1.5	-1.3%	1.2	1.2	1.2	-3.3%	1.6
Financial Summary									
Gross Cost	\$20,279,351	\$18,225,283	\$16,199,279	-11.1%	\$2,138,221	\$3,269,990	\$1,763,038	-46.1%	
Client Paid	\$15,085,396	\$13,455,139	\$11,575,357	-14.0%	\$1,359,082	\$2,428,444	\$1,008,379	-58.5%	
Employee Paid	\$5,193,955	\$4,770,144	\$4,623,922	-3.1%	\$779,138	\$841,546	\$754,659	-10.3%	
Client Paid-PEPY	\$6,724	\$6 <i>,</i> 567	\$6 <i>,</i> 265	-4.6%	\$4,104	\$8,722	\$4,168	-52.2%	\$6 <i>,</i> 258
Client Paid-PMPY	\$4,468	\$4 <i>,</i> 397	\$4,242	-3.5%	\$3,464	\$7 <i>,</i> 430	\$3,603	-51.5%	\$3 <i>,</i> 830
Client Paid-PEPM	\$560	\$547	\$522	-4.6%	\$342	\$727	\$347	-52.3%	\$521
Client Paid-PMPM	\$372	\$366	\$353	-3.6%	\$289	\$619	\$300	-51.5%	\$319
High Cost Claimants (HCC's	s) > \$100k								
# of HCC's	34	25	22	-12.0%	3	3	1	-66.7%	
HCC's / 1,000	7.6	6.1	6.1	-1.3%	5.7	6.9	2.7	-61.0%	
Avg HCC Paid	\$175 <i>,</i> 686	\$188,781	\$163,603	-13.3%	\$154,760	\$394,479	\$0	-100.0%	
HCC's % of Plan Paid	39.6%	35.1%	31.1%	-11.4%	34.2%	48.7%	0.0%	-100.0%	
Cost Distribution by Claim	Type (PMPY)								
Facility Inpatient	\$1,787	\$1,246	\$1,038	-16.7%	\$1,032	\$4,134	\$912	-77.9%	\$1,044
Facility Outpatient	\$1,442	\$1 <i>,</i> 670	\$1 <i>,</i> 559	-6.6%	\$1,258	\$1 <i>,</i> 695	\$1,367	-19.4%	\$1,310
Physician	\$1,160	\$1,480	\$1,644	11.1%	\$1,097	\$1,601	\$1,325	-17.2%	\$1,404
Other	\$79	\$0	\$0	0.0%	\$76	\$0	\$0	0.0%	\$72
Total	\$4 <i>,</i> 468	\$4,397	\$4,242	-3.5%	\$3,464	\$7 <i>,</i> 430	\$3,603	-51.5%	\$3,830
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		

Financial Summary – Prior Year Comparison (p. 1 of 2)

		Tota	al			State A	ctive			Non-State	e Active	
Summary	PY22	РҮ23	3Q24	Variance to Prior Year	РҮ22	РҮ23	3Q24	Variance to Prior Year	PY22	PY23	3Q24	Variance to Prior Year
Average Enrollment												
Employees	18,943	16,411	14,764	-10.0%	15,526	13,332	11,974	-10.2%	3	3	3	14.7%
Spouses	3,974	7,866	2,782	-64.6%	3,134	7,223	2,115	-70.7%	1	4	1	-80.5%
Children	10,172	3,266	6,721	105.8%	9,421	2,504	6,159	146.0%	4	1	3	189.0%
Total Members	33,089	27,544	24,267	-11.9%	28,082	23,059	20,248	-12.2%	8	8	7	-11.1%
Family Size	1.8	1.7	1.6	-2.4%	1.8	1.7	1.7	-2.3%	2.7	2.7	2.1	-22.8%
Financial Summary												
Gross Cost	\$138,077,453	\$116,590,277	\$80,818,684	-30.7%	\$106,593,460	\$87,356,314	\$62,788,584	-28.1%	\$55,484	\$42,591	\$67,783	59.1%
Client Paid	\$104,706,277	\$88,479,381	\$59,215,710	-33.1%	\$80,561,976	\$66,125,338	\$46,580,031	-29.6%	\$38,304	\$30,890	\$51,943	68.2%
Employee Paid	\$33,371,175	\$28,110,896	\$21,602,974	-23.2%	\$26,031,484	\$21,230,976	\$16,208,553	-23.7%	\$17,181	\$11,702	\$15 <i>,</i> 840	35.4%
Client Paid-PEPY	\$5,527	\$5,391	\$5,348	-0.8%	\$5,189	\$4,960	\$5,187	4.6%	\$12,768	\$10,297	\$20,107	95.3%
Client Paid-PMPY	\$3,164	\$3,212	\$3,254	1.3%	\$2,869	\$2,868	\$3,067	6.9%	\$4,788	\$3,861	\$9,739	152.2%
Client Paid-PEPM	\$461	\$449	\$446	-0.7%	\$432	\$413	\$432	4.6%	\$1,064	\$858	\$1,676	95.3%
Client Paid-PMPM	\$264	\$268	\$271	1.1%	\$239	\$239	\$256	7.1%	\$399	\$322	\$812	152.2%
High Cost Claimants (HCC	's) > \$100k											
# of HCC's	160	126	96		115	94	75		0	0	0	
HCC's / 1,000	4.8	4.6	4.0		4.1	4.1	3.7		0.0	0.0	0.0	
Avg HCC Paid	\$251,190	\$238,643	\$204,586	-14.3%	\$262,921	\$233,021	\$213,880	-8.2%	\$0	\$0	\$0	0.0%
HCC's % of Plan Paid	38.4%	34.0%	33.2%	-2.4%	37.5%	33.1%	34.4%	3.9%	0.0%	0.0%	0.0%	0.0%
Cost Distribution by Clain	n Type (PMPY)											
Facility Inpatient	\$1,153	\$995	\$947	-4.8%	\$1,028	\$895	\$932	4.1%	\$0	\$0	\$0	0.0%
Facility Outpatient	\$939	\$1,074	\$1,110	3.4%	\$821	\$930	\$1,022	9.9%	\$3,554	\$2,208	\$8,110	267.3%
Physician	\$1,011	\$1,143	\$1,197	4.7%	\$964	\$1,043	\$1,114	6.8%	\$1,200	\$1,653	\$1,629	-1.5%
Other	\$62	\$0	\$0	0.0%	\$56	\$0	\$0	0.0%	\$34	\$0	\$0	0.0%
Total	\$3,164	\$3,212	\$3,254	1.3%	\$2,869	\$2,868	\$3,067	6.9%	\$4,788	\$3,861	\$9,739	152.2%
			Annualized				Annualized				Annualized	

Financial Summary – Prior Year Comparison (p. 2 of 2)

		State Re	tirees			Non-State	Retirees		
Summary	PY22	РҮ23	3Q24	Variance to Prior Year	PY22	РҮ23	3Q24	Variance to Prior Year	Peer Index
Average Enrollment									
Employees	2,981	2,711	2,464	-9.1%	433	366	323	-11.8%	
Spouses	776	624	630	0.9%	62	16	37	136.6%	
Children	729	715	545	-23.8%	18	46	14	-70.0%	
Total Members	4,486	4,049	3,639	-10.1%	514	427	373	-12.7%	
Family Size	1.5	1.5	1.5	-0.7%	1.2	1.2	1.2	-0.9%	1.6
Financial Summary									
Gross Cost	\$27,879,066	\$25,102,026	\$16,199,279	-35.5%	\$3,549,442	\$4,089,345	\$1,763,038	-56.9%	
Client Paid	\$21,491,378	\$19,194,786	\$11,575,357	-39.7%	\$2,614,619	\$3,128,367	\$1,008,379	-67.8%	
Employee Paid	\$6 <i>,</i> 387,688	\$5,907,239	\$4,623,922	-21.7%	\$934 <i>,</i> 823	\$960,978	\$754,659	-21.5%	
Client Paid-PEPY	\$7,210	\$7 <i>,</i> 082	\$6,265	-11.5%	\$6,033	\$8 <i>,</i> 557	\$4,168	-51.3%	\$6 <i>,</i> 258
Client Paid-PMPY	\$4,791	\$4,740	\$4,242	-10.5%	\$5,091	\$7 <i>,</i> 321	\$3,603	-50.8%	\$3 <i>,</i> 830
Client Paid-PEPM	\$601	\$590	\$522	-11.5%	\$503	\$713	\$347	-51.3%	\$521
Client Paid-PMPM	\$399	\$395	\$353	-10.6%	\$424	\$610	\$300	-50.8%	\$319
High Cost Claimants (HCC'	s) > \$100k								
# of HCC's	44	31	22		5	5	1		
HCC's / 1,000	9.8	7.7	6.1		9.7	11.7	2.7		
Avg HCC Paid	\$199,873	\$213 <i>,</i> 853	\$163,603	-23.5%	\$231 <i>,</i> 987	\$307,109	\$0	-100.0%	
HCC's % of Plan Paid	40.9%	34.5%	31.1%	-9.9%	44.4%	49.1%	0.0%	-100.0%	
Cost Distribution by Claim	Type (PMPY)								
Facility Inpatient	\$1,808	\$1,250	\$1,038	-17.0%	\$2,262	\$4,005	\$912	-77.2%	\$1,044
Facility Outpatient	\$1,612	\$1,838	\$1,559	-15.2%	\$1,488	\$1,591	\$1,367	-14.1%	\$1,310
Physician	\$1,280	\$1,652	\$1,644	-0.5%	\$1,227	\$1,724	\$1,325	-23.1%	\$1,404
Other	\$91	\$0	\$0	0.0%	\$115	\$0	\$0	0.0%	\$72
Total	\$4,791	\$4,740	\$4,242	-10.5%	\$5,091	\$7,321	\$3,603	-50.8%	\$3,830
			Annualized				Annualized		

Paid Claims by Claim Type – State Participants

							Ν	et Paid Claims -	- Tot	al							
	State Participants																
	3Q23 3Q24															%	
																Change	
	Actives Pre-Medicare Medicare Total Actives Pre-Medicare Medicare Total															Total	
		Actives		Retirees		Retirees		TOtal		Actives		Retirees		Retirees		TOTAL	TUtai
Medical																	
Inpatient	\$	19,003,003	\$	3,794,559	\$	393,683	\$	23,191,246	\$	16,142,735	\$	2,760,560	\$	419,659	\$	19,322,953	-16.7%
Outpatient	\$	29,455,778	\$	8,187,369	\$	1,079,528	\$	38,722,675	\$	30,437,296	\$	6,574,387	\$	1,820,751	\$	38,832,435	0.3%
Total - Medical	\$	48,458,781	\$	11,981,929	\$	1,473,211	\$	61,913,921	\$	46,580,031	\$	9,334,947	\$	2,240,410	\$	58,155,388	-6.1%

						Net Paid	l Cla	ims - Per l	Partic	ipan	t per Month								
	3023 3024																%		
		3Q23 3Q24																Change	
		Actives	P	re-Medicare		Medicare		Total			Actives	P	re-Medicare		Medicare		Total		Total
		Actives		Retirees		Retirees		TULAI			Actives		Retirees		Retirees		TOCAL		TULAI
Medical	\$	403	\$	612	\$	295	\$		427	\$	432	\$	538	\$	464	1 :	\$	448	4.8%

Paid Claims by Claim Type – Non-State Participants

							N	et Paid Claims	Tot	al							
	Non-State Participants																
	3Q23 3Q24															%	
																Change	
		Actives	Pr	e-Medicare		Medicare		Total		Actives	F	Pre-Medicare		Medicare		Total	Total
		Actives		Retirees		Retirees		TOtal		Actives		Retirees		Retirees		TUtai	TOCAL
Medical																	
Inpatient	\$	-	\$	361,518	\$	1,082,334	\$	1,443,852			\$	62,617	\$	227,061	\$	289,678	-79.9%
Outpatient	\$	23,704	\$	580,477	\$	404,115	\$	1,008,296	\$	51,943	\$	308,831	\$	409,870	\$	770,644	-23.6%
Total - Medical	\$	23,704	\$	941,995	\$	1,486,449	\$	2,452,148	\$	51,943	\$	371,448	\$	636,931	\$	1,060,322	-56.8%

				Net Paid	Clai	ims - Per Parti	cipar	nt per Month						
		30	23							30	224			% Change
	Actives	Pre-Medicare		Medicare		Total		Actives	P	re-Medicare		Medicare	Total	Total
		Retirees		Retirees						Retirees		Retirees		
Medical	\$ 878	\$ 898	\$	649	\$	728	\$	1,678	\$	538	\$	288	\$ 361	-50.4%

Paid Claims by Claim Type – Total Participants

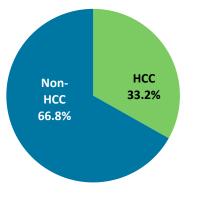
	Net Paid Claims - Total																
Total Participants																	
	3Q23									3Q24							% Change
		Actives	Pr	e-Medicare		Medicare		Total		Actives		Pre-Medicare		Medicare		Total	Total
		Actives		Retirees		Retirees		TOTAL		Actives		Retirees		Retirees		TOLAI	TOLAI
Medical																	
Inpatient	\$	19,003,003	\$	4,156,077	\$	1,476,017	\$	24,635,097	\$	16,142,735	\$	2,823,176	\$	646,720	\$	19,612,631	-20.4%
Outpatient	\$	29,479,482	\$	8,767,846	\$	1,483,643	\$	39,730,971	\$	30,489,240	\$	6,883,219	\$	2,230,621	\$	39,603,079	-0.3%
Total - Medical	\$	48,482,486	\$	12,923,923	\$	2,959,660	\$	64,366,068	\$	46,631,974	\$	9,706,395	\$	2,877,341	\$	59,215,710	-8.0%

	Net Paid Claims - Per Participant per Month																	
		3Q23								3Q24							% Change	
		Actives		Pre-Medicare		Medicare		Total			Actives	F	Pre-Medicare		Medicare		Total	
Medical	\$	403	\$	Retirees 626	\$	Retirees 406	\$		434	\$	433	\$	Retirees 538	\$	Retirees 409	\$	446	2.6%

Cost Distribution – Medical Claims

		30	223					3Q24							
Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid	Paid Claims Category	Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid			
81	0.3%	\$22,061,710	34.3%	\$539,659	2.4%	\$100,000.01 Plus	87	0.4%	\$19,640,253	33.2%	\$546,479	2.5%			
107	0.4%	\$8,068,065	12.5%	\$677,496	3.0%	\$50,000.01-\$100,000.00	112	0.5%	\$8,231,480	13.9%	\$631,841	2.9%			
235	0.8%	\$8,528,547	13.3%	\$1,286,496	5.7%	\$25,000.01-\$50,000.00	199	0.8%	\$7,092,638	12.0%	\$1,106,455	5.1%			
561	2.0%	\$9,156,663	14.2%	\$2,859,035	12.6%	\$10,000.01-\$25,000.00	523	2.2%	\$8,567,756	14.5%	\$2,576,288	11.9%			
766	2.8%	\$5,558,687	8.6%	\$2,596,454	11.5%	\$5,000.01-\$10,000.00	759	3.1%	\$5,494,080	9.3%	\$2,720,252	12.6%			
1,093	3.9%	\$4,026,747	6.3%	\$2,719,630	12.0%	\$2,500.01-\$5,000.00	1,090	4.5%	\$3,973,663	6.7%	\$2,813,934	13.0%			
12,940	46.7%	\$6,965,649	10.8%	\$9,658,452	42.7%	\$0.01-\$2,500.00	10,423	43.0%	\$6,215,840	10.5%	\$8,834,118	40.9%			
4,925	17.8%	\$0	0.0%	\$2,291,268	10.1%	\$0.00	5,053	20.8%	\$0	0.0%	\$2,373,608	11.0%			
7,004	25.3%	\$0	0.0%	\$0	0.0%	No Claims	6,020	24.8%	\$0	0.0%	\$0	0.0%			
27,711	100.0%	\$64,366,069	100.0%	\$22,628,491	100.0%		24,267	100.0%	\$59,215,710	100.0%	\$21,602,974	100.0%			

Distribution of HCC Medical Claims Paid



HCC – High-Cost Claimant over \$100K

HCC's by Diagnosis Grouper										
Top 10 Diagnosis Groupers	Patients	Total Paid	% Paid							
Cancer	38	\$5,388,807	27.4%							
Neurological Disorders	61	\$2,201,796	11.2%							
Cardiac Disorders	72	\$2,163,301	11.0%							
Hematological Disorders	40	\$1,138,384	5.8%							
Gastrointestinal Disorders	58	\$1,120,790	5.7%							
Pregnancy-related Disorders	6	\$1,004,848	5.1%							
Infections	35	\$924,906	4.7%							
Medical/Surgical Complications	26	\$764,840	3.9%							
Pulmonary Disorders	61	\$719,545	3.7%							
Endocrine/Metabolic Disorders	46	\$580,738	3.0%							
All Other		\$3,632,298	18.5%							
Overall		\$19,640,253	100.0%							

Utilization Summary (p. 1 of 2)

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

		То	tal			State	Active			Non-Stat	e Active	
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year
Inpatient Summary												
# of Admits	1,036	820	708		758	612	538		0	0	0	
# of Bed Days	7,071	4,956	4,076		5,152	3,665	2,977		0	0	0	
Paid Per Admit	\$36 <i>,</i> 824	\$27,014	\$28 <i>,</i> 380	5.1%	\$38 <i>,</i> 349	\$27,718	\$30,519	10.1%	\$0	\$0	\$0	0.0%
Paid Per Day	\$5 <i>,</i> 395	\$4,470	\$4,930	10.3%	\$5 <i>,</i> 642	\$4,628	\$5,515	19.2%	\$0	\$0	\$0	0.0%
Admits Per 1,000	41	39	39	0.0%	36	35	35	0.0%	0	0	0	0.0%
Days Per 1,000	282	238	224	-5.9%	242	211	196	-7.1%	0	0	0	0.0%
Avg LOS	6.8	6	5.8	-3.3%	6.8	6	5.5	-8.3%	0	0	0	0.0%
# Admits From ER	572	475	460	-3.2%	376	328	335	2.1%	0	0	0	0.0%
Physician Office												
OV Utilization per Member	3.7	3.7	4	8.1%	3.5	3.4	3.7	8.8%	3.7	3.2	3.4	6.2%
Avg Paid per OV	\$77	\$80	\$80	0.0%	\$79	\$76	\$76	0.0%	\$79	\$71	\$113	0.0%
Avg OV Paid per Member	\$286	\$293	\$319	8.9%	\$276	\$256	\$280	9.4%	\$290	\$224	\$382	0.0%
DX&L Utilization per Member	7.2	9.2	9.4	2.2%	6.8	8.4	8.8	4.8%	15.5	6.2	8.3	33.9%
Avg Paid per DX&L	\$50	\$46	\$48	4.3%	\$47	\$43	\$47	9.3%	\$204	\$92	\$276	0.0%
Avg DX&L Paid per Member	\$366	\$423	\$457	8.0%	\$322	\$366	\$419	14.5%	\$3,161	\$566	\$2,280	0.0%
Emergency Room												
# of Visits	3,691	3,088	2,808		3,077	2,461	2,269		4	3	5	_
Visits Per Member	0.15	0.15	0.15	0.0%	0.14	0.14	0.15	7.1%	0.67	0.50	0.94	88.0%
Visits Per 1,000	147	149	154	3.4%	145	142	149	4.9%	667	500	938	87.6%
Avg Paid per Visit	\$1,918	\$2,283	\$2,435	6.7%	\$1,948	\$2,379	\$2,548	7.1%	\$1,117	\$4,167	\$4,474	7.4%
Urgent Care												
# of Visits	6,732	5,566	5,373		5,944	4,920	4,692		5	3	2	
Visits Per Member	0.27	0.27	0.30	11.1%	0.28	0.28	0.31	10.7%	0.83	0.50	0.38	-24.0%
Visits Per 1,000	269	268	295	10.1%	280	283	309	9.2%	833	500	375	-25.0%
Avg Paid per Visit	\$66	\$45	\$42	-6.7%	\$66	\$45	\$42	-6.7%	\$106	\$42	\$130	0.0%
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		Annualized	Annualized	Annualized	

Utilization Summary (p. 2 of 2)

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

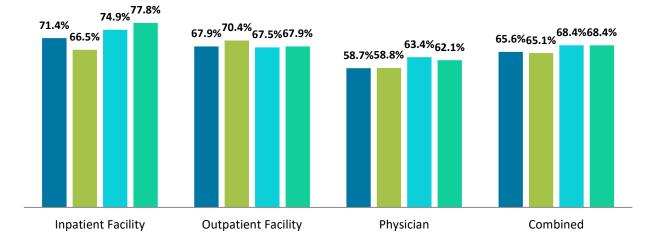
		State R	etirees			Non-State	e Retirees		
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	Peer Index
Inpatient Summary									
# of Admits	238	165	137		40	43	33		
# of Bed Days	1,697	966	951		222	325	148		
Paid Per Admit	\$34,238	\$25,474	\$24 <i>,</i> 479	-3.9%	\$23 <i>,</i> 317	\$22,909	\$9,714	-57.6%	\$19,305
Paid Per Day	\$4,802	\$4,351	\$3,526	-19.0%	\$4,201	\$3 <i>,</i> 031	\$2,166	-28.5%	\$3,615
Admits Per 1,000	70	54	50	-7.4%	102	132	118	-10.6%	64
Days Per 1,000	503	316	348	10.1%	566	994	529	-46.8%	342
Avg LOS	7.1	5.9	6.9	16.9%	5.6	7.6	4.5	-40.8%	5.3
# Admits From ER	168	118	100	-15.3%	28	29	25	-13.8%	
Physician Office									
OV Utilization per Member	4.9	4.9	5.0	2.0%	6.6	7.5	8.1	8.0%	5.2
Avg Paid per OV	\$73	\$102	\$108	5.9%	\$34	\$37	\$34	-8.1%	\$97
Avg OV Paid per Member	\$355	\$503	\$542	7.8%	\$227	\$279	\$274	-1.8%	\$502
DX&L Utilization per Member	9.7	12.8	12	-6.3%	9.5	19.7	17.9	-9.1%	9.0
Avg Paid per DX&L	\$63	\$56	\$53	-5.4%	\$52	\$35	\$41	17.1%	\$46
Avg DX&L Paid per Member	\$618	\$719	\$639	-11.1%	\$499	\$692	\$736	6.4%	\$412
Emergency Room									
# of Visits	530	523	435		80	101	99		
Visits Per Member	0.16	0.17	0.16	-5.9%	0.20	0.31	0.35	12.9%	0.23
Visits Per 1,000	157	171	159	-7.0%	204	309	354	14.6%	228
Avg Paid per Visit	\$1,821	\$1,987	\$2,204	10.9%	\$1,441	\$1,441	\$752	-47.8%	\$1,035
Urgent Care									
# of Visits	718	573	608		65	70	71		
Visits Per Member	0.21	0.19	0.22	15.8%	0.17	0.21	0.25	19.0%	0.38
Visits Per 1,000	213	187	223	19.3%	166	214	254	18.7%	379
Avg Paid per Visit	\$62	\$48	\$40	-16.7%	\$38	\$37	\$49	32.4%	\$132
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		

Total Health Management

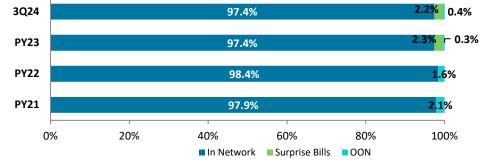
Provider Network Summary

In Network Discounts

■ PY21 ■ PY22 ■ PY23 ■ 2Q24



Network Utilization



Diagnosis Grouper Summary

Diagnosis Grouper	Total Paid	% Paid	Insured	Spouse	Child	Male	Female
Cancer	\$7,880,005	13.3%	\$6,008,739	\$1,815,274	\$55,992	\$3,241,030	\$4,638,975
Cardiac Disorders	\$5,191,621	8.8%	\$3,389,147	\$1,133,325	\$669,149	\$3,256,760	\$1,934,861
Health Status/Encounters	\$5,098,056	8.6%	\$3,335,388	\$698,934	\$1,063,735	\$1,896,985	\$3,201,071
Gastrointestinal Disorders	\$4,758,837	8.0%	\$3,362,979	\$566,530	\$829,328	\$1,734,849	\$3,023,988
Neurological Disorders	\$4,294,794	7.3%	\$2,023,092	\$590,391	\$1,681,311	\$1,003,819	\$3,290,976
Pregnancy-related Disorders	\$3,130,099	5.3%	\$1,418,791	\$334,284	\$1,377,024	\$697,194	\$2,432,905
Trauma/Accidents	\$3,087,896	5.2%	\$1,965,959	\$323,674	\$798,263	\$1,262,372	\$1,825,524
Musculoskeletal Disorders	\$2,722,239	4.6%	\$2,142,590	\$357,128	\$222,520	\$961,559	\$1,760,679
Mental Health	\$2,573,848	4.3%	\$1,008,680	\$258,866	\$1,306,301	\$1,262,326	\$1,311,521
Spine-related Disorders	\$2,238,038	3.8%	\$1,830,831	\$280,493	\$126,714	\$1,028,657	\$1,209,382
Infections	\$2,146,428	3.6%	\$1,730,065	\$262,983	\$153,380	\$981,431	\$1,164,998
Pulmonary Disorders	\$1,996,950	3.4%	\$1,236,772	\$245,716	\$514,461	\$1,034,195	\$962,754
Eye/ENT Disorders	\$1,996,820	3.4%	\$1,341,827	\$351,535	\$303,458	\$889,926	\$1,106,894
Renal/Urologic Disorders	\$1,873,221	3.2%	\$1,420,326	\$193,036	\$259,859	\$863,754	\$1,009,467
Endocrine/Metabolic Disorders	\$1,535,968	2.6%	\$1,316,519	\$172,536	\$46,914	\$832,989	\$702,980
Hematological Disorders	\$1,457,901	2.5%	\$692 <i>,</i> 653	\$734,444	\$30,803	\$1,000,020	\$457,881
Gynecological/Breast Disorders	\$1,270,032	2.1%	\$910,178	\$258,523	\$101,331	\$25,431	\$1,244,601
Non-malignant Neoplasm	\$1,182,133	2.0%	\$1,059,876	\$84,737	\$37,520	\$451,369	\$730,764
Medical/Surgical Complications	\$1,181,950	2.0%	\$957,044	\$115,166	\$109,739	\$180,961	\$1,000,988
Dermatological Disorders	\$693,835	1.2%	\$433,702	\$166,888	\$93,245	\$304,336	\$389,500
Diabetes	\$603,194	1.0%	\$450,197	\$37,439	\$115,559	\$239,323	\$363,872
Miscellaneous	\$596,728	1.0%	\$452,346	\$67,640	\$76,742	\$179,442	\$417,285
Vascular Disorders	\$514,296	0.9%	\$383,510	\$39,567	\$91,219	\$193,627	\$320,669
Abnormal Lab/Radiology	\$392,065	0.7%	\$298 <i>,</i> 376	\$80,618	\$13,071	\$138,706	\$253,359
Congenital/Chromosomal Anomalies	\$381,558	0.6%	\$71,630	\$139,149	\$170,779	\$86,740	\$294,818
Medication Related Conditions	\$198,544	0.3%	\$57,590	\$7 <i>,</i> 639	\$133,315	\$19,574	\$178,971
External Hazard Exposure	\$95,283	0.2%	\$4,746	\$2,466	\$88,071	\$88,737	\$6,546
Cholesterol Disorders	\$81,319	0.1%	\$67,460	\$12,177	\$1,681	\$48,321	\$32,998
Dental Conditions	\$21,443	0.0%	\$14,590	\$263	\$6,590	\$11,700	\$9,743
Allergic Reaction	\$20,361	0.0%	\$9,187	\$916	\$10,258	\$8,904	\$11,457
Cause of Morbidity	\$241	0.0%	\$0	\$0	\$241	\$241	\$0
Social Determinants of Health	\$6	0.0%	\$6	\$0	\$0	\$0	\$6
Total	\$59,215,710	100.0%	\$39,394,799	\$9,332,336	\$10,488,575	\$23,925,277	\$35,290,43

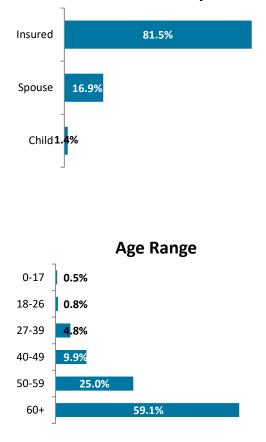
Mental Health Drilldown

	PY21		Р	Y22	Р	Y23	30	224
Grouper	Patients	Total Paid						
Developmental Disorders	179	\$1,179,402	113	\$719 <i>,</i> 871	106	\$1,143,180	95	\$659 <i>,</i> 222
Alcohol Abuse/Dependence	136	\$1,288,204	101	\$873,612	129	\$434,007	98	\$533 <i>,</i> 809
Depression	1,597	\$1,103,414	1,156	\$1,279,244	974	\$1,005,022	844	\$455,172
Mood and Anxiety Disorders	1,920	\$638,818	1,486	\$406,189	1,263	\$370,422	1,025	\$292,028
Mental Health Conditions, Other	1,220	\$771,034	911	\$431,490	774	\$383 <i>,</i> 973	658	\$216,730
Eating Disorders	55	\$647,596	44	\$596 <i>,</i> 928	34	\$112,463	24	\$79,085
Bipolar Disorder	315	\$464,418	225	\$197,224	193	\$202 <i>,</i> 937	185	\$69,127
Sexually Related Disorders	68	\$90,021	42	\$11,305	56	\$109,156	44	\$59,836
Substance Abuse/Dependence	140	\$213 <i>,</i> 345	86	\$540,594	81	\$99,940	58	\$45,337
Complications of Substance Abuse	42	\$202,208	22	\$89,081	26	\$88,753	24	\$38,860
Schizophrenia	26	\$141,033	25	\$110,357	21	\$81,413	16	\$32,132
Attention Deficit Disorder	482	\$72 <i>,</i> 965	374	\$57,319	369	\$42,820	332	\$31,699
Psychoses	54	\$86 <i>,</i> 357	32	\$70,201	35	\$108,586	21	\$27,609
Sleep Disorders	564	\$76,491	371	\$46,254	347	\$39,783	254	\$23,913
Personality Disorders	25	\$16 <i>,</i> 690	19	\$13,480	8	\$1,502	14	\$5,664
Tobacco Use Disorder	126	\$8,010	106	\$6,184	103	\$7,184	89	\$3,626
Total		\$7,000,007		\$5,449,334		\$4,231,141		\$2,573,848

Diagnosis Grouper – Cancer

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Cancer Therapies	63	379	\$2,776,154	4.7%
Cancers, Other	77	824	\$1,443,812	2.4%
Breast Cancer	151	1,431	\$847 <i>,</i> 886	1.4%
Secondary Cancers	44	365	\$600,782	1.0%
Prostate Cancer	92	567	\$443,364	0.7%
Colon Cancer	38	452	\$355,189	0.6%
Carcinoma in Situ	77	262	\$204,487	0.3%
Lung Cancer	19	166	\$179,684	0.3%
Cervical/Uterine Cancer	42	276	\$131,252	0.2%
Lymphomas	29	336	\$127,040	0.2%
Melanoma	35	139	\$114,225	0.2%
Thyroid Cancer	35	175	\$113,777	0.2%
Leukemias	23	317	\$110,480	0.2%
Ovarian Cancer	19	173	\$103,110	0.2%
Non-Melanoma Skin Cancers	206	519	\$98,769	0.2%
Myeloma	10	199	\$82 <i>,</i> 877	0.1%
Kidney Cancer	19	178	\$63 <i>,</i> 491	0.1%
Brain Cancer	4	13	\$39,616	0.1%
Pancreatic Cancer	4	108	\$30,454	0.1%
Bladder Cancer	15	79	\$13,555	0.0%
Overall			\$7,880,005	100.0%

Relationship

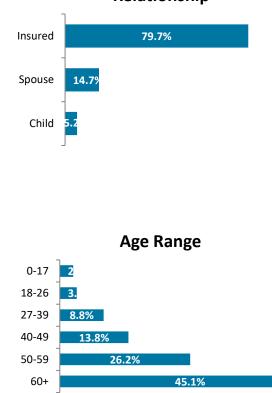


*Patient and claim counts are unique only within the category

Diagnosis Grouper – Cardiac Disorders

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Coronary Artery Disease	388	991	\$811,674	1.4%
Myocardial Infarction	40	229	\$772,588	1.3%
Heart Valve Disorders	263	424	\$731,347	1.2%
Atrial Fibrillation	193	868	\$725,777	1.2%
Chest Pain	863	1,999	\$652 <i>,</i> 320	1.1%
Congestive Heart Failure	121	374	\$433,170	0.7%
Hypertension	2,191	4,656	\$335,406	0.6%
Pulmonary Embolism	34	191	\$246,805	0.4%
Cardiac Arrhythmias	475	1,009	\$182,677	0.3%
Cardiac Conditions, Other	446	898	\$151,953	0.3%
Cardiomyopathy	31	69	\$91,982	0.2%
Cardio-Respiratory Arrest	55	164	\$46,758	0.1%
Shock	11	36	\$8 <i>,</i> 500	0.0%
Ventricular Fibrillation	4	4	\$666	0.0%
Overall			\$5,191,621	100.0%

*Patient and claim counts are unique only within the category

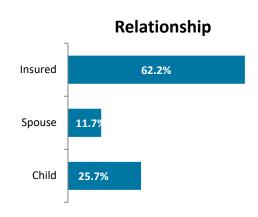


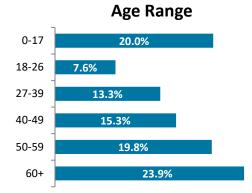
Relationship

Diagnosis Grouper – Health Status/Encounters

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Screenings	5,208	10,021	\$1,830,361	3.1%
Exams	6,561	11,826	\$1,217,082	2.1%
Prophylactic Measures	2,838	3,601	\$686,735	1.2%
Encounters - Infants/Children	2,004	2,853	\$405,217	0.7%
Aftercare	331	798	\$243,430	0.4%
Prosthetics/Devices/Implants	348	1,136	\$197,925	0.3%
Counseling	612	2,239	\$144,306	0.2%
Personal History of Condition	697	1,149	\$118,777	0.2%
Acquired Absence	55	92	\$104,528	0.2%
Family History of Condition	130	196	\$75 <i>,</i> 553	0.1%
Encounter - Transplant Related	34	165	\$24,752	0.0%
Encounter - Procedure	40	62	\$22,260	0.0%
Health Status, Other	84	132	\$14,153	0.0%
Lifestyle/Situational Issues	77	140	\$6,275	0.0%
Follow-Up Encounters	8	17	\$6,011	0.0%
Miscellaneous Examinations	18	32	\$526	0.0%
Donors	2	2	\$113	0.0%
Blood Type	1	2	\$51	0.0%
Patient Non-compliance	1	1	\$0	0.0%
Overall			\$5,098,056	8.5%

*Patient and claim counts are unique only within the category

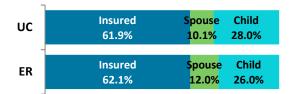




Emergency Room / Urgent Care Summary

	30	23	3Q	24	Pee	r Index	
	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care	
Number of Visits	3,088	5,566	2,808	5,373			
Visits Per Member	0.15	0.27	0.15	0.30	0.23	0.38	
Visits/1000 Members	149	268	154	296	228	379	
Avg Paid Per Visit	\$2,283	\$45	\$2 <i>,</i> 435	\$42	\$1,085	\$132	
% with OV*	80.7%	78.5%	81.8%	77.7%			
% Avoidable	16.1%	41.4%	15.5%	39.8%			
Total Member Paid	\$3,940,686	\$708,013	\$3,807,678	\$775,264			
Total Plan Paid	\$7,051,027	\$250,789	\$6,837,899	\$225,700			
*looks back 12 months	Annualized	Annualized	Annualized	Annualized			

% of Paid



15.0% -	14.4% <mark>1</mark> 2.6%	15.5% 14.6%	16.3% 14.5%	15.1% 15.4%	13.6% 14.4%	13.324.7%	13.6%
10.0% -							11.9%
5.0% -							
0.0% -				_			_
	Sunday	Monday	Tuesday	Wednesday	y Thursday	Friday	Saturday
			ER	Urgent Ca	re		

Visits by Day of Week

		ER / UC Vis	its by Rela	tionship		
Relationship	ER	Per 1,000	Urgent Care	Per 1,000	Total	Per 1,000
Insured	1,743	118	3,324	4,380	5 <i>,</i> 067	343
Spouse	337	121	542	863	879	316
Child	728	108	1,507	1,655	2,235	333
Total	2,808	116	5,373	221	8,181	337

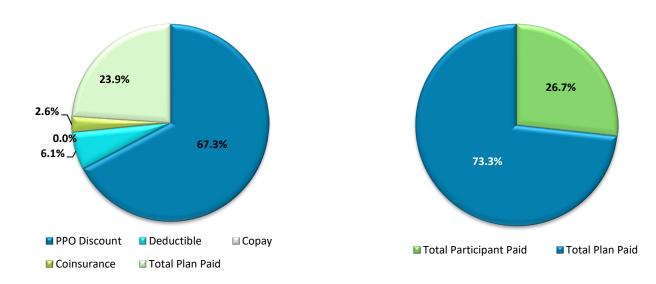
Hospital and physician urgent care centers are included in the data. Paid amount includes facility and professional fees.

20.0% ¬

Savings Summary – Medical Claims

Description	Dollars	PPPM	% of Eligible
Eligible Charges	\$256,362,971	\$1,929	100.0%
PPO Discount	\$166,454,402	\$1,253	64.9%
Deductible	\$15,167,712	\$114	5.9%
Сорау	\$243	\$0	0.0%
Coinsurance	\$6,435,019	\$48	2.5%
Total Participant Paid	\$21,602,974	\$163	8.4%
Total Plan Paid	\$59,215,710	\$446	23.1%

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



Paid Claims by Age Range – Dental

						Dental Paic	l Cl	aims by Ag	e G	roup				
		3Q2	22			3Q2	23			3Q2	24		% Chan	ge
Age Range	D	ental Plan		Dental	C	Dental Plan		Dental	C	ental Plan		Dental	Dental Plan	Dental
Age Nalige		Paid		PMPM		Paid		PMPM		Paid		PMPM	Paid	РМРМ
<1	\$	8,125	\$	2	\$	6,193	\$	1	\$	7,417	\$	3	19.8%	93.6%
1	\$	38,589	\$	8	\$	37,555	\$	9	\$	37,179	\$	12	-1.0%	29.9%
2 - 4	\$	304,460	\$	20	\$	297,020	\$	21	\$	314,053	\$	28	5.7%	33.7%
5 - 9	\$	942,227	\$	32	\$	868,316	\$	29	\$	908,404	\$	41	4.6%	39.4%
10 - 14	\$	951,380	\$	28	\$	953,784	\$	27	\$	991,833	\$	37	4.0%	35.5%
15 - 19	\$	1,076,080	\$	29	\$	1,072,350	\$	29	\$	1,348,925	\$	43	25.8%	50.1%
20 - 24	\$	678,238	\$	17	\$	650,075	\$	17	\$	808,561	\$	25	24.4%	47.5%
25 - 29	\$	646,038	\$	23	\$	555,431	\$	21	\$	669,214	\$	30	20.5%	43.9%
30 - 34	\$	857,552	\$	25	\$	724,862	\$	22	\$	846,314	\$	32	16.8%	43.5%
35 - 39	\$	1,038,679	\$	27	\$	919,981	\$	24	\$	1,051,516	\$	34	14.3%	40.6%
40 - 44	\$	1,025,864	\$	27	\$	995,763	\$	26	\$	1,173,151	\$	36	17.8%	39.4%
45 - 49	\$	1,080,130	\$	29	\$	989,198	\$	26	\$	1,194,426	\$	39	20.7%	46.5%
50 - 54	\$	1,343,834	\$	31	\$	1,263,941	\$	29	\$	1,411,371	\$	40	11.7%	36.2%
55 - 59	\$	1,519,728	\$	34	\$	1,414,266	\$	33	\$	1,626,915	\$	46	15.0%	39.0%
60 - 64	\$	1,934,543	\$	39	\$	1,717,029	\$	36	\$	1,916,045	\$	50	11.6%	36.8%
65+	\$	5,085,544	\$	42	\$	4,764,184	\$	40	\$	5,600,045	\$	56	17.5%	41.4%
Total	\$	18,531,011	\$	31	\$	17,229,950	\$	29	\$	19,905,369	\$	41	15.5%	40.9%

Dental Paid Claims – State Participants

						De	ntal Paid Claim	s - To	otal						
							State Participa	nts							
			30	23							30	24			% Change
	Actives	Pi	e-Medicare Retirees		Medicare Retirees		Total		Actives	P	re-Medicare Retirees		Medicare Retirees	Total	Total
Dental	\$ 11,370,567	\$	1,583,426	\$	342,505	\$	13,296,498	\$	13,233,287	\$	1,655,906	\$	428,524	\$ 15,317,718	15.2%
Dental Exchange	\$ -	\$	-	\$	2,453,723	\$	2,453,723	\$	-	\$	-	\$	2,906,269	\$ 2,906,269	18.4%
Total	\$ 11,370,567	\$	1,583,426	\$	2,796,228	\$	15,750,221	\$	13,233,287	\$	1,655,906	\$	3,334,793	\$ 18,223,986	33.6%

					Dental	Pai	id Cl	aims - Per F	Parti	icipa	ant per Mon	nth							
			2	Q23										30	24				%
			Э	Q25										54	(24				Change
	Actives		Pre-Medicare		Medicare			Total			Actives		Pre	e-Medicare		Medicare	Total		Total
	Actives		Retirees		Retirees			TOLdi			Actives			Retirees		Retirees	TULAI		TOLAI
Dental	\$ 4	9	\$51	\$	5	53	\$		49	\$		55	\$	55	\$	67	\$ 5	6	13.4%
Dental Exchange	\$	-	\$-	· \$	Ζ	17	\$		47	\$		-	\$	-	\$	55	\$ 5.	5	17.2%

Dental Paid Claims – Non-State Participants

						De	ntal Paid Claims	6 - To	otal					
						Ν	on-State Partic	ipan	ts					
			30	23						30	24			% Change
	Actives	Pr	e-Medicare Retirees		Medicare Retirees		Total		Actives	edicare rees		Medicare Retirees	Total	Total
Dental	\$ 3,120	\$	69,024	\$	156,068	\$	228,212	\$	2,645	\$ 48 <i>,</i> 368	\$	167,561	\$ 218,574	-4.2%
Dental Exchange	\$ -	\$	-	\$	1,251,517	\$	1,251,517	\$	-	\$ -	\$	1,462,810	\$ 1,462,810	16.9%
Total	\$ 3,120	\$	69,024	\$	1,407,586	\$	1,479,729	\$	2,645	\$ 48,368	\$	1,630,370	\$ 1,681,383	13.6%

							Dental I	Pai	id Cl	aims - Per Pa	rtici	pant per Mo	onth					
					3Q	23								30	24			% Change
	A	Actives		Pre-Medicar Retirees	e		Medicare Retirees			Total		Actives		Pre-Medicare Retirees		Medicare Retirees	Total	Total
Dental	\$	5	8	\$	39	\$	42	2	\$	41	. \$		44	\$ 39	\$	46	\$ 44	8.0%
Dental Exchange	\$		-	\$	-	\$	4:	1	\$	41	\$		-	\$ -	\$	50	\$ 50	21.1%

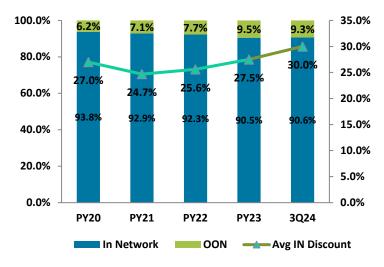
Dental Paid Claims – Total Participants

						De	ntal Paid Claims	s - To	otal					
							Total Participa	nts						
			20	23						30	24			% Change
														Change
	Actives	P	re-Medicare		Medicare		Total		Actives	Pre-Medicare		Medicare	Total	Total
	Actives		Retirees		Retirees		Total		Actives	Retirees		Retirees	Total	Total
Dental	\$ 11,373,687	\$	1,652,449	\$	498,574	\$	13,524,710	\$	13,235,932	\$ 1,704,274	\$	596,085	\$ 15,536,292	14.9%
Dental Exchange	\$ -	\$	-	\$	3,705,240	\$	3,705,240	\$	-	\$ -	\$	4,369,078	\$ 4,369,078	17.9%
Total	\$ 11,373,687	\$	1,652,449	\$	4,203,814	\$	17,229,950	\$	13,235,932	\$ 1,704,274	\$	4,965,163	\$ 19,905,370	15.5%

					Dental Pa	aid C	Claims - Per	Part	icip	ant per Mor	nth						
			20	223									30	224			% Change
	A	Actives	Pre-Medicare Retirees		Medicare Retirees		Total			Actives		Pre-Medic Retirees			Medicare Retirees	Total	
Dental	\$	49	\$ 50	\$	49	\$		49	\$		55	\$	54	\$	59	\$ 55	13.3%
Dental Exchange	\$		\$ -	\$	45	\$		45	\$		-	\$	-	\$	54	\$ 54	18.6%

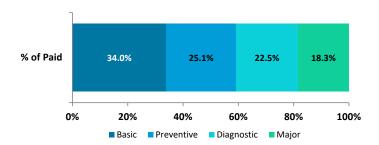
Dental Claims Analysis

			Cost [Distribution				
Paid Claims Category	Avg # of Members	% of Members	# Claims	# of Claims	Total Paid	% of Paid	Total EE Paid	% of EE Paid
\$1,000.01 Plus	4,239	7.9%	24,979	24.2%	\$8,735,269	43.9%	\$4,947,830	56.1%
\$750.01-\$1,000.00	1,726	3.2%	7,808	7.6%	\$1,861,722	9.4%	\$980,839	11.1%
\$500.01-\$750.00	2,820	5.3%	11,319	11.0%	\$2,166,022	10.9%	\$966,844	11.0%
\$250.01-\$500.00	9,764	18.3%	31,043	30.1%	\$4,253,051	21.4%	\$1,008,394	11.4%
\$0.01-\$250.00	14,499	27.1%	27,189	26.3%	\$2,889,307	14.5%	\$880,300	10.0%
\$0.00	432	0.8%	954	0.9%	\$0	0.0%	\$33,074	0.4%
No Claims	19,994	37.4%	0	0.0%	\$0	0.0%	\$0	0.0%
Total	53,473	100.0%	103,292	100.0%	\$19,905,370	100.0%	\$8,817,279	100.0%



Network Performance

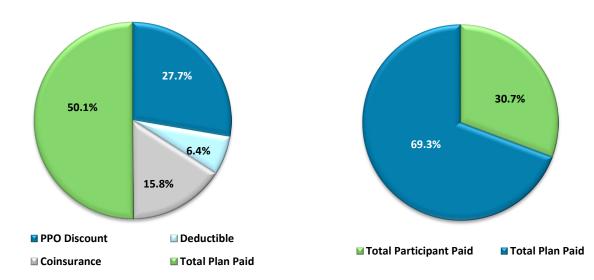
Claim Category	Total Paid	% of Paid
Basic	\$6,768,878	34.0%
Preventive	\$5,001,042	25.1%
Diagnostic	\$4,484,244	22.5%
Major	\$3,651,205	18.3%
Total	\$19,905,370	100.0%



Savings Summary – Dental Claims

% of Eligible
100.0%
27.6%
6.3%
15.8%
22.1%
50.0%

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



Total Health Management

Quality Metrics

Condition	Metric	#Members in Group	#Meeting Metric	#Not Meeting Metric	% Meeting Metric
	Asthma and a routine provider visit in the last 12 months	1,005	976	29	97.1%
Asthma	Two or more asthma related ER Visits in the last 6 months	1,005	3	1,002	0.3%
	Asthma related admit in last 12 months	1,005	8	997	0.8%
Chronic Obstructive	Exacerbations in last 12 months	229	8	221	3.5%
Pulmonary Disease	Members with COPD who had an annual spirometry test	229	38	191	16.6%
Congestive Heart Failure	Re-admission to hospital with Heart Failure diagnosis within 30 days following a HF inpat	8	0	8	0.0%
	ER Visit for Heart Failure in last 90 days	196	7	189	3.6%
i allui c	Follow-up OV within 4 weeks of discharge from HF admission	8	5	3	62.5%
Diabetes	Annual office visit	1,406	1,341	65	95.4%
	Annual dilated eye exam	1,406	485	921	34.5%
	Annual foot exam	1,406	638	768	45.4%
	Annual HbA1c test done	1,406	1,165	241	82.9%
	Diabetes Annual lipid profile	1,406	1,091	315	77.6%
	Annual microalbumin urine screen	1,406	959	447	68.2%
Hyperlipidemia	Hyperlipidemia Annual lipid profile	4,060	3,266	794	80.4%
Hyportonsion	Hypertension Annual lipid profile	3,963	2,746	1,217	69.3%
Hypertension	Annual serum creatinine test	3,876	3,099	777	80.0%
	Well Child Visit - 15 months	112	106	6	94.6%
	Routine office visit in last 6 months (All Ages)	24,015	14,391	9,624	59.9%
Wellness	Colorectal cancer screening ages 45-75 within the appropriate time period	10,060	4,960	5,100	49.3%
	Women age 25-65 with recommended cervical cancer/HPV screening	7,301	5,001	2,300	68.5%
	Males age greater than 49 with PSA test in last 24 months	4,046	1,988	2,058	49.1%
	Routine exam in last 24 months (All Ages)	24,015	19,790	4,225	82.4%
	Women age 40 to 75 with a screening mammogram last 24 months	6,406	3,897	2,509	60.8%

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

Chronic Conditions Prevalence

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

Two outpatient claims for the Dx on separate days of service

One ER Visit with the Dx as primary

> One IP admission with the Dx as the admitting

Chronic Condition	# With Condition	% of Members	Members per 1,000	Admits per 1,000	ER Visits per 1,000	ΡΜΡΥ
Affective Psychosis	177	0.74%	7.29	195.92	579.59	\$11,450
Asthma	1,139	4.74%	46.94	134.00	448.34	\$14,771
Atrial Fibrillation	287	1.19%	11.83	367.55	546.36	\$28,450
Blood Disorders	1,676	6.97%	69.07	252.79	444.35	\$22,030
CAD	600	2.49%	24.73	270.01	408.60	\$24,479
COPD	226	0.94%	9.31	352.37	561.17	\$24,916
Cancer	984	4.09%	40.55	202.54	250.98	\$26,762
Chronic Pain	710	2.95%	29.26	172.66	530.62	\$17,855
Congestive Heart Failure	195	0.81%	8.04	627.55	864.80	\$44,608
Demyelinating Diseases	61	0.25%	2.51	296.02	432.64	\$52,019
Depression	1,599	6.65%	65.89	124.84	413.07	\$11,366
Diabetes	1,578	6.56%	65.03	135.53	283.55	\$15,353
ESRD	30	0.12%	1.24	1,129.41	1,270.59	\$43,127
Eating Disorders	89	0.37%	3.67	219.18	566.21	\$17,614
HIV/AIDS	33	0.14%	1.36	41.24	247.42	\$42,942
Hyperlipidemia	5,021	20.88%	206.91	80.67	217.53	\$9 <i>,</i> 527
Hypertension	3,993	16.60%	164.55	116.18	299.05	\$11,900
Immune Disorders	135	0.56%	5.56	392.73	480.00	\$46,478
Inflammatory Bowel Disease	94	0.39%	3.87	134.83	524.34	\$33,785
Liver Diseases	552	2.30%	22.75	289.32	484.00	\$20,825
Morbid Obesity	824	3.43%	33.96	199.38	379.36	\$16,461
Osteoarthritis	1,121	4.66%	46.20	116.62	366.89	\$13,729
Peripheral Vascular Disease	166	0.69%	6.84	368.96	571.01	\$22,343
Rheumatoid Arthritis	144	0.60%	5.93	87.31	388.04	\$28,149

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

Data Includes Medical and Pharmacy Based on 24 months incurred dates

Methodology

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

Public Em	oloyees' Benefits Progra	m - RX Costs		
	hrough Quarter Ending N			
	Express Scripts			
	1Q-3Q FY2024 CDHP	1Q-3Q FY2023 CDHP	Difference	% Change
Membership Summary			Membership S	
Member Count (Membership)	24,197	27,720	(3,523)	-12.7%
Utilizing Member Count (Patients)	16,420	19,723	(3,303)	-16.7%
Percent Utilizing (Utilization)	67.9%	71.2%	(0.03)	-4.6%
Claim Summary			Claims Sum	mary
Net Claims (Total Rx's)	254,470	284,290	(29,820)	-10.5%
Claims per Elig Member per Month (Claims PMPM)	1.17	1.14	0.03	2.6%
Total Claims for Generic (Generic Rx)	222,058	243,426	(21,368.00)	-8.8%
Total Claims for Brand (Brand Rx)	32,412	40,864	(8,452.00)	-20.7%
Total Claims for Brand w/Gen Equiv (Multisource Brand Claims)		1,130	(209.00)	-18.5%
Total Non-Specialty Claims	251,565	280,345	(28,780.00)	-10.3%
Total Specialty Claims	2,905	3,945	(1,040.00)	-26.4%
Generic % of Total Claims (GFR)	87.3%	85.6%	0.02	1.9%
Generic Effective Rate (GCR)	99.6%	99.5%	0.00	0.0%
Mail Order Claims Mail Penetration Rate*	69,807 31.2%	79,194 32.0%	(9,387.00) (0.01)	-11.9% -0.8%
	31.270	52.0%		
Claims Cost Summary	000 EXE (5.5	000 E00 200	Claims Cost S	
Total Prescription Cost (Total Gross Cost)	\$32,565,038	\$32,708,629	(\$143,591.00)	-0.4%
Total Generic Gross Cost	\$3,324,684	\$3,738,579	(\$413,895.00)	-11.1%
Total Brand Gross Cost	\$29,240,354	\$28,970,050	\$270,304.00	0.9%
Total MSB Gross Cost	\$402,567	\$629,317	(\$226,750.00)	-36.0%
Total Ingredient Cost	\$31,451,608 \$1,091,671	\$32,225,558	(\$773,950.00)	-2.4%
Total Dispensing Fee		\$447,194	\$644,477.00	144.1% -39.4%
Total Other (e.g. tax)	\$21,758 \$127.97	\$35,878 \$115.05	(\$14,120.00) \$12.92	-39.4%
Avg Total Cost per Claim (Gross Cost/Rx) Avg Total Cost for Generic (Gross Cost/Generic Rx)	\$15.36	\$15.36	\$12.92	0.0%
Avg Total Cost for Brand (Gross Cost/Brand Rx)	\$15.56	\$708.94	\$193.21	27.3%
Avg Total Cost for MSB (MSB Gross Cost/MSB ARx)	\$437.10	\$556.92	(\$119.82)	-21.5%
Member Cost Summary Total Member Cost	\$7,303,881	\$7,629,342	Member Cost \$ (\$325,461.00)	Summary -4.3%
Total Copay	\$5,894,999	\$6,005,466	(\$110,467.00)	-1.8%
Total Deductible	\$1,408,882	\$1,623,877	(\$214,995.00)	-13.2%
Avg Copay per Claim (Copay/Rx)	\$23.17	\$21.12	\$2.04	9.7%
Avg Participant Share per Claim (Copay+Deductible/RX)	\$28.70	\$26.84	\$1.87	7.0%
Avg Copay for Generic (Copay/Generic Rx)	\$6.79	\$6.85	(\$0.06)	-0.9%
Avg Copay for Brand (Copay/Brand Rx)	\$178.81	\$145.87	\$32.94	22.6%
Avg Copay for Brand w/ Generic Equiv (Copay/Multisource Rx)	• • • •	\$162.88	(\$47.56)	-29.2%
Net PMPM (Participant Cost PMPM)	\$33.54	\$30.58	\$2.96	9.7%
Copay % of Total Prescription Cost (Member Cost Share %)	22.4%	23.3%	-0.9%	-3.8%
Plan Cost Summary			Plan Cost Su	mmarv
Total Plan Cost (Plan Cost)	\$25,261,156	\$25,079,287	\$181,869.00	0.7%
Total Non-Specialty Cost (Non-Specialty Plan Cost)	\$10,589,174	\$9,098,426	\$1,490,748.00	16.4%
Total Specialty Drug Cost (Specialty Plan Cost)	\$14,671,982	\$15,980,860	(\$1,308,878.00)	-8.2%
Avg Plan Cost per Claim (Plan Cost/Rx)	\$99.27	\$88.22	\$11.05	12.5%
Avg Plan Cost for Generic (Plan Cost/Generic Rx)	\$8.18	\$8.50	(\$0.32)	-3.8%
Avg Plan Cost for Brand (Plan Cost/Brand Rx)	\$723.34	\$563.06	\$160.28	28.5%
Avg Plan Cost for MSB (MSB Plan Cost/MSB ARx)	\$321.77	\$1,394.03	(\$1,072.26)	-76.9%
Net PMPM (Plan Cost PMPM)	\$116.00	\$100.53	\$15.47	15.4%
PMPM without Specialty (Non-Specialty PMPM)	\$42.09	\$36.47	\$4.02	17.3%
PMPM for Specialty Only (Specialty PMPM)	\$67.37	\$64.06	\$3.31	5.2%
Specialty % of Plan Cost	58.1%	63.70%	(\$0.06)	-8.8%
Rebates Received (Q1-Q3 FY2023 actual)	\$8,885,059	\$8,622,319	\$262,740.45	3.0%
Net PMPM (Plan Cost PMPM factoring Rebates)	\$75.20	\$65.97	\$9.23	14.0%
PMPM without Specialty (Non-Specialty PMPM)	\$29.36	\$15.36	\$0.92	5.0%
PMPM for Specialty Only (Specialty PMPM)	\$45.03	\$50.00	(\$4.97)	-9.9%

Appendix B

Index of Tables UMR Inc. – LDPPO Utilization Review for PEBP January 1, 2024 – March 31, 2024

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DATASCOPETM

Nevada Public Employees' Benefits Program Low Deductible Plan July 2023 – March 2024 Incurred,

Paid through May 2024

Reimagine | Rediscover Benefits



Overview

- Total Medical Spend for 3Q24 was \$59,634,480 with a plan cost per employee per year (PEPY) of \$8,122. This is an increase of 8.3% when compared to 3Q23.
 - IP Cost per Admit is \$24,045 which is 4.4% lower than 3Q23.
 - ER Cost per Visit is \$3,216 which is 1.6% higher than 3Q23.
- Employees shared in 13.8% of the medical cost.
- Inpatient facility costs were 17.7% of the plan spend.
- 80.9% of the Average Membership had paid Medical claims less than \$2,500, with 18.3% of those having no claims paid at all during the reporting period.
- 55 members exceeded the \$100k high-cost threshold during the reporting period, which accounted for 21.9% of the plan spend. The highest diagnosis category was Cancer, accounting for 27.4% of the high-cost claimant dollars.
- Total spending with in-network providers was 97.8%. The average In Network discount was 65.3%, which is 1.6% higher than the PY23 average discount of 64.3%.

Paid Claims by Age Group

										Paid C	lain	ns by Age Grou)									
					3Q23										3Q24						% Chan	ige
Age Range	м	led Net Pay	Med PMPM	F	Rx Net Pay	Rx I	РМРМ	Net Pay	P	мрм	ſ	Med Net Pay		Med MPM	Rx Net Pay	Rx I	РМРМ	Net Pay	P	MPM	Net Pay	РМРМ
<1	\$	1,518,680	\$ 1,096	\$	32,133	\$	23	\$ 1,550,813	\$	1,119	\$	5,035,887	\$	2,826	\$ 17,316	\$	10	\$ 5,053,203	\$	2,836	225.8%	153.4%
1	\$	316,887	\$ 241	\$	6,767	\$	5	\$ 323,654	\$	246	\$	415,641	\$	236	\$ 3,937	\$	2	\$ 419,578	\$	238	29.6%	-3.4%
2 - 4	\$	827,960	\$ 171	\$	36,202	\$	7	\$ 864,162	\$	178	\$	809,899	\$	134	\$ 30,447	\$	5	\$ 840,346	\$	139	-2.8%	-22.1%
5 - 9	\$	722,944	\$ 83	\$	408,937	\$	47	\$ 1,131,881	\$	130	\$	1,460,746	\$	129	\$ 426,311	\$	38	\$ 1,887,057	\$	166	66.7%	28.1%
10 - 14	\$	1,122,395	\$ 119	\$	254,200	\$	27	\$ 1,376,595	\$	146	\$	1,793,459	\$	146	\$ 338,219	\$	28	\$ 2,131,678	\$	174	54.9%	19.1%
15 - 19	\$	1,829,743	\$ 169	\$	384,266	\$	36	\$ 2,214,009	\$	205	\$	2,278,243	\$	158	\$ 593,537	\$	41	\$ 2,871,780	\$	200	29.7%	-2.6%
20 - 24	\$	1,888,855	\$ 184	\$	569,764	\$	56	\$ 2,458,619	\$	240	\$	3,118,432	\$	230	\$ 847,449	\$	63	\$ 3,965,881	\$	293	61.3%	22.1%
25 - 29	\$	1,739,117	\$ 214	\$	830,260	\$	102	\$ 2,569,377	\$	316	\$	3,025,067	\$	265	\$ 1,366,486	\$	120	\$ 4,391,553	\$	385	70.9%	21.9%
30 - 34	\$	2,973,992	\$ 304	\$	786,743	\$	80	\$ 3,760,735	\$	385	\$	3,760,089	\$	281	\$ 2,635,813	\$	197	\$ 6,395,902	\$	479	70.1%	24.4%
35 - 39	\$	3,032,290	\$ 272	\$	1,056,147	\$	95	\$ 4,088,437	\$	367	\$	4,709,587	\$	322	\$ 1,950,402	\$	134	\$ 6,659,989	\$	456	62.9%	24.3%
40 - 44	\$	3,483,133	\$ 324	\$	1,560,761	\$	145	\$ 5,043,894	\$	469	\$	4,906,438	\$	335	\$ 2,390,429	\$	163	\$ 7,296,867	\$	498	44.7%	6.3%
45 - 49	\$	3,701,372	\$ 386	\$	1,613,085	\$	168	\$ 5,314,457	\$	554	\$	4,045,687	\$	320	\$ 2,602,582	\$	206	\$ 6,648,269	\$	526	25.1%	-5.0%
50 - 54	\$	4,438,374	\$ 427	\$	2,139,231	\$	206	\$ 6,577,605	\$	632	\$	6,087,595	\$	428	\$ 3,750,769	\$	264	\$ 9,838,364	\$	692	49.6%	9.5%
55 - 59	\$	4,890,498	\$ 524	\$	1,967,460	\$	211	\$ 6,857,958	\$	735	\$	7,160,443	\$	568	\$ 3,449,739	\$	274	\$ 10,610,182	\$	841	54.7%	14.5%
60 - 64	\$	6,626,446	\$ 801	\$	2,764,763	\$	334	\$ 9,391,209	\$	1,135	\$	7,528,723	\$	691	\$ 3,790,938	\$	348	\$ 11,319,661	\$	1,039	20.5%	-8.5%
65+	\$	1,529,135	\$ 487	\$	775,753	\$	247	\$ 2,304,888	\$	734	\$	3,498,544	\$	805	\$ 1,444,090	\$	332	\$ 4,942,634	\$	1,137	114.4%	54.9%
Total	\$	40,641,821	\$ 319	\$	15,186,469	\$	119	\$ 55,828,290	\$	439	\$	59,634,480	\$	351	\$ 25,638,464	\$	151	\$ 85,272,944	\$	502	52.7%	14.5%

Financial Summary (p. 1 of 2)

		Тс	otal			State	Active			Non-Stat	te Active	
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year
Average Enrollment												
Employees	4,175	7,226	9,790	35.5%	3,780	6,561	8,946	36.3%	1	1	1	22.0%
Spouses	1,146	1,836	2,407	31.1%	1,020	1,626	2,139	31.6%	1	1	1	22.0%
Children	3,172	5,088	6,688	31.4%	3,030	4,841	6,378	31.8%	0	0	0	0.0%
Total Members	8,493	14,150	18,884	33.5%	7,830	13,028	17,463	34.0%	2	2	2	22.0%
Family Size	2.0	2.0	1.9	-3.5%	2.1	2.0	2.0	-2.5%	2.0	2.0	2.0	0.0%
Financial Summary												
Gross Cost	\$29,751,991	\$47,147,759	\$69,176,993	46.7%	\$25,837,154	\$40,990,958	\$60,632,684	47.9%	\$31,539	\$12,127	\$25,046	106.5%
Client Paid	\$25,158,456	\$40,641,821	\$59,634,480	46.7%	\$21,781,871	\$35,216,533	\$52,089,402	47.9%	\$26,601	\$9,284	\$20,541	121.3%
Employee Paid	\$4,593,536	\$6,505,938	\$9,542,513	46.7%	\$4,055,283	\$5,774,424	\$8,543,282	48.0%	\$4,938	\$2,842	\$4,505	58.5%
Client Paid-PEPY	\$8,034	\$7,500	\$8,122	8.3%	\$7,683	\$7,156	\$7,764	8.5%	\$35,468	\$12 <i>,</i> 379	\$22,408	81.0%
Client Paid-PMPY	\$3,949	\$3,830	\$4,211	9.9%	\$3,709	\$3,604	\$3,977	10.3%	\$17,734	\$6,190	\$11,204	81.0%
Client Paid-PEPM	\$669	\$625	\$677	8.3%	\$640	\$596	\$647	8.6%	\$2,956	\$1,032	\$1,867	80.9%
Client Paid-PMPM	\$329	\$319	\$351	10.0%	\$309	\$300	\$331	10.3%	\$1,478	\$516	\$934	81.0%
High Cost Claimants (HCC's	s) > \$100k											
# of HCC's	33	43	55	27.9%	27	34	42	23.5%	0	0	0	0.0%
HCC's / 1,000	3.9	3.0	2.9	-4.3%	3.5	2.6	2.4	-7.7%	0.0	0.0	0.0	0.0%
Avg HCC Paid	\$263,630	\$218,375	\$237,773	8.9%	\$273,797	\$225,632	\$246,902	9.4%	\$0	\$0	\$0	0.0%
HCC's % of Plan Paid	34.6%	23.1%	21.9%	-5.2%	33.9%	21.8%	19.9%	-8.7%	0.0%	0.0%	0.0%	0.0%
Cost Distribution by Claim	Type (PMPY)											
Facility Inpatient	\$1,330	\$822	\$745	-9.4%	\$1,299	\$769	\$708	-7.9%	\$566	\$0	\$0	0.0%
Facility Outpatient	\$1,023	\$1,366	\$1,666	22.0%	\$915	\$1,252	\$1,534	22.5%	\$6 <i>,</i> 869	\$584	\$560	-4.1%
Physician	\$1,545	\$1,642	\$1,800	9.6%	\$1,447	\$1,582	\$1,736	9.7%	\$10,299	\$5,606	\$10,644	89.9%
Other	\$52	\$0	\$0	0.0%	\$49	\$0	\$0	0.0%	\$0	\$0	\$0	0.0%
Total	\$3,949	\$3,830	\$4,211	9.9%	\$3,709	\$3,604	\$3,977	10.3%	\$17,734	\$6,190	\$11,204	81.0%
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		Annualized	Annualized	Annualized	

Financial Summary (p. 2 of 2)

		State R	letirees			Non-State	e Retirees		
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	Peer Index
Average Enrollment									
Employees	374	637	814	27.8%	21	27	29	9.3%	
Spouses	114	197	254	28.8%	11	12	13	1.9%	
Children	142	246	308	25.0%	0	0	1	0.0%	
Total Members	630	1,080	1,376	27.4%	32	39	43	10.0%	
Family Size	1.7	1.7	1.7	-0.6%	1.5	1.5	1.5	-2.7%	1.6
Financial Summary									
Gross Cost	\$3,641,943	\$5,851,517	\$8,243,113	40.9%	\$241 <i>,</i> 355	\$293,157	\$276,149	-5.8%	
Client Paid	\$3,152,224	\$5,156,304	\$7,309,799	41.8%	\$197,759	\$259 <i>,</i> 699	\$214,737	-17.3%	
Employee Paid	\$489,719	\$695,213	\$933,314	34.2%	\$43,596	\$33,458	\$61,412	83.5%	
Client Paid-PEPY	\$11,248	\$10,800	\$11,975	10.9%	\$12,490	\$12,985	\$9,761	-24.8%	\$6,258
Client Paid-PMPY	\$6,669	\$6 <i>,</i> 364	\$7 <i>,</i> 083	11.3%	\$8,211	\$8 <i>,</i> 879	\$6,676	-24.8%	\$3,830
Client Paid-PEPM	\$937	\$900	\$998	10.9%	\$1,041	\$1,082	\$813	-24.9%	\$521
Client Paid-PMPM	\$556	\$530	\$590	11.3%	\$684	\$740	\$556	-24.9%	\$319
High Cost Claimants (HCC'	s) > \$100k								
# of HCC's	6	9	13	0.0%	1	1	1	0.0%	
HCC's / 1,000	9.5	8.3	9.5	0.0%	31.1	25.6	23.3	0.0%	
Avg HCC Paid	\$199,468	\$179,387	\$199,858	0.0%	\$110,440	\$104,131	\$109 <i>,</i> 461	0.0%	
HCC's % of Plan Paid	38.0%	31.3%	35.5%	0.0%	55.8%	40.1%	51.0%	0.0%	
Cost Distribution by Claim	Type (PMPY)								
Facility Inpatient	\$1,743	\$1,435	\$1,137	-20.8%	\$901	\$1,517	\$3,292	0.0%	\$1,044
Facility Outpatient	\$2,188	\$2 <i>,</i> 600	\$3 <i>,</i> 346	28.7%	\$4,088	\$5,214	\$1,834	-64.8%	\$1,310
Physician	\$2,649	\$2 <i>,</i> 330	\$2,599	11.5%	\$3,174	\$2,148	\$1,550	-27.8%	\$1,404
Other	\$89	\$0	\$0	0.0%	\$48	\$0	\$0	0.0%	\$72
Total	\$6,669	\$6,364	\$7,083	11.3%	\$8,211	\$8 <i>,</i> 879	\$6,676	-24.8%	\$3 <i>,</i> 830
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		

Financial Summary – Prior Year Comparison (p. 1 of 2)

		Тс	tal			State	Active			Non-Sta	te Active	
Summary	PY22	PY23	3Q24	Variance to Prior Year	PY22	PY23	3Q24	Variance to Prior Year	PY22	PY23	3Q24	Variance to Prior Year
Average Enrollment												
Employees	4,336	7,362	9,790	33.0%	3,926	6,690	8,946	33.7%	1	1	1	22.0%
Spouses	1,172	5,149	2,407	-53.3%	1,042	4,901	2,139	-56.4%	1	0	1	0.0%
Children	3,255	1,857	6,688	260.2%	3,103	1,645	6,378	287.8%	0	1	0	-100.0%
Total Members	8,762	14,368	18,884	31.4%	8,071	13,235	17,463	31.9%	2	2	2	22.0%
Family Size	2.0	2.0	1.9	-1.0%	2.1	2.0	2.0	-1.5%	2.0	2.0	2.0	0.0%
Financial Summary												
Gross Cost	\$40,570,436	\$64,817,531	\$69,176,993	6.7%	\$35,366,785	\$56,350,280	\$60,632,684	7.6%	\$38,494	\$17,911	\$25,046	39.8%
Client Paid	\$34,446,692	\$55,997,776	\$59,634,480	6.5%	\$29,933,591	\$48,495,839	\$52,089,402	7.4%	\$33 <i>,</i> 556	\$13,953	\$20,541	47.2%
Employee Paid	\$6,123,744	\$8,819,755	\$9,542,513	8.2%	\$5,433,194	\$7,854,441	\$8,543,282	8.8%	\$4,938	\$3,958	\$4,505	13.8%
Client Paid-PEPY	\$7,944	\$7,606	\$8,122	6.8%	\$7,624	\$7,249	\$7,764	7.1%	\$33 <i>,</i> 556	\$13 <i>,</i> 953	\$22,408	60.6%
Client Paid-PMPY	\$3,931	\$3 <i>,</i> 897	\$4,211	8.1%	\$3,709	\$3,664	\$3,977	8.5%	\$16,778	\$6,976	\$11,204	60.6%
Client Paid-PEPM	\$662	\$634	\$677	6.8%	\$635	\$604	\$647	7.1%	\$2,796	\$1,163	\$1,867	60.5%
Client Paid-PMPM	\$328	\$325	\$351	8.0%	\$309	\$305	\$331	8.5%	\$1,398	\$581	\$934	60.8%
High Cost Claimants (HCC	's) > \$100k											
# of HCC's	41	54	55	1.9%	33	43	42	-2.3%	0	0	0	0.0%
HCC's / 1,000	4.7	3.8	2.9	-22.6%	4.1	3.3	2.4	-25.8%	0.0	0.0	0.0	0.0%
Avg HCC Paid	\$286,071	\$238,672	\$237,773	-0.4%	\$305,172	\$238,047	\$246,902	3.7%	\$0	\$0	\$0	0.0%
HCC's % of Plan Paid	34.0%	23.0%	21.9%	-4.8%	33.6%	21.1%	19.9%	-5.7%	0.0%	0.0%	0.0%	0.0%
Cost Distribution by Clain	n Type (PMPY)											
Facility Inpatient	\$1,269	\$783	\$745	-4.9%	\$1,257	\$725	\$708	-2.3%	\$424	\$0	\$0	0.0%
Facility Outpatient	\$1,043	\$1,412	\$1,666	18.0%	\$933	\$1,292	\$1,534	18.7%	\$5,152	\$1,007	\$560	-44.4%
Physician	\$1,567	\$1,702	\$1,800	5.8%	\$1,468	\$1,647	\$1,736	5.4%	\$9 <i>,</i> 883	\$5,969	\$10,644	78.3%
Other	\$53	\$0	\$0	0.0%	\$50	\$0	\$0	0.0%	\$1,319	\$0	\$0	0.0%
Total	\$3,931	\$3 <i>,</i> 897	\$4,211	8.1%	\$3,709	\$3,664	\$3,977	8.5%	\$16,778	\$6,976	\$11,204	60.6%
			Annualized				Annualized				Annualized	

Financial Summary – Prior Year Comparison (p. 2 of 2)

		State R	etirees			Non-State	e Retirees		
Summary	PY22	PY23	3Q24	Variance to Prior Year	PY22	PY23	3Q24	Variance to Prior Year	Peer Index
Average Enrollment									
Employees	388	644	814	26.3%	21	27	29	10.0%	
Spouses	118	248	254	2.3%	11	0	13	7439.0%	
Children	152	199	308	55.2%	0	13	1	-92.0%	
Total Members	657	1,091	1,376	26.1%	32	39	43	9.1%	
Family Size	1.7	1.7	1.7	0.0%	1.5	1.5	1.5	-1.4%	1.6
Financial Summary									
Gross Cost	\$4,886,927	\$8,012,597	\$8,243,113	2.9%	\$278,229	\$436,743	\$276,149	-36.8%	
Client Paid	\$4,252,910	\$7,107,682	\$7,309,799	2.8%	\$226 <i>,</i> 635	\$380,303	\$214,737	-43.5%	
Employee Paid	\$634,017	\$904,915	\$933,314	3.1%	\$51,594	\$56 <i>,</i> 440	\$61,412	8.8%	
Client Paid-PEPY	\$10,968	\$11,032	\$11,975	8.5%	\$10,665	\$14,261	\$9,761	-31.6%	\$6,258
Client Paid-PMPY	\$6,473	\$6,514	\$7 <i>,</i> 083	8.7%	\$7,027	\$9 <i>,</i> 669	\$6,676	-31.0%	\$3 <i>,</i> 830
Client Paid-PEPM	\$914	\$919	\$998	8.6%	\$889	\$1,188	\$813	-31.6%	\$521
Client Paid-PMPM	\$539	\$543	\$590	8.7%	\$586	\$806	\$556	-31.0%	\$319
High Cost Claimants (HCC'	s) > \$100k								
# of HCC's	8	11	13	18.2%	1	1	1	0.0%	
HCC's / 1,000	12.2	10.1	9.5	-6.3%	31.0	25.4	23.3	-8.3%	
Avg HCC Paid	\$193,399	\$224,298	\$199,858	-10.9%	\$111,053	\$185,019	\$109,461	-40.8%	
HCC's % of Plan Paid	36.4%	34.7%	35.5%	2.3%	49.0%	48.7%	51.0%	4.7%	
Cost Distribution by Claim	Type (PMPY)								
Facility Inpatient	\$1,452	\$1,476	\$1,137	-23.0%	\$675	\$1,128	\$3,292	191.8%	\$1,044
Facility Outpatient	\$2,262	\$2,697	\$3,346	24.1%	\$3,333	\$6,277	\$1,834	-70.8%	\$1,310
Physician	\$2,676	\$2,342	\$2 <i>,</i> 599	11.0%	\$2,969	\$2,264	\$1,550	-31.5%	\$1 <i>,</i> 404
Other	\$83	\$0	\$0	0.0%	\$50	\$0	\$0	0.0%	\$72
Total	\$6,473	\$6,514	\$7 <i>,</i> 083	8.7%	\$7,027	\$9,669	\$6,676	-31.0%	\$3,830
			Annualized				Annualized		

Paid Claims by Claim Type – State Participants

							Ν	et Paid Claims	- Tot	al							
								State Participa	ints								
				30	23							30	24				%
																	Change
		Actives	Pr	e-Medicare		Medicare		Total		Actives	F	Pre-Medicare		Medicare		Total	Total
		Actives		Retirees		Retirees		Total		Addres		Retirees		Retirees		Total	Total
Medical																	
Inpatient	\$	8,889,971	\$	1,283,201	\$	10,531	\$	10,183,702	\$	11,138,342	\$	1,276,158	\$	12,066	\$	12,426,565	22.0%
Outpatient	\$	26,326,563	\$	3,708,372	\$	154,199	\$	30,189,135	\$	40,951,061	\$	5,751,932	\$	269,644	\$	46,972,636	55.6%
Total - Medical	\$	35,216,533	\$	4,991,574	\$	164,730	\$	40,372,837	\$	52,089,402	\$	7,028,090	\$	281,709	\$	59,399,202	47.1%

					Net Paid	l Cla	ims - Per	Partic	ipan	t per Month						
			20	23								30	24			%
			30	(25								Su	(24			Change
	Actives	P	re-Medicare		Medicare		Total			Actives	F	Pre-Medicare		Medicare	Total	Total
	Actives		Retirees		Retirees		TOLA			Actives		Retirees		Retirees	TOLAI	TOLAI
Medical	\$ 596	\$	932	\$	443	\$		623	\$	647	\$	1,036	\$	523	\$ 676	8.5%

Paid Claims by Claim Type – Non-State Participants

						N	et Paid Claims	- To	tal					
						N	on-State Partic	ipar	nts					
			30	23					30	24			% Change	
	Actives	Pr	e-Medicare		Medicare		Total		Actives	Pre-Medicare		Medicare	Total	Total
	Actives		Retirees		Retirees		TOCAL		Actives	Retirees		Retirees	TOTAL	TULAI
Medical														
Inpatient	\$ -	\$	47,476	\$	564	\$	48,040				\$	106,760	\$ 106,760	0.0%
Outpatient	\$ 9,284	\$	88,780	\$	122,879	\$	220,943	\$	20,541	\$ 13,963	\$	94,014	\$ 128,518	-41.8%
Total - Medical	\$ 9,284	\$	136,256	\$	123,444	\$	268,984	\$	20,541	\$ 13,963	\$	200,774	\$ 235,278	-12.5%

					Net Paic	l Cla	ims - Per Partic	ipan	it per Month						
			20	23							20	224			%
			30	(23							30	<u>1</u> 24			Change
	Actives	F	Pre-Medicare		Medicare		Total		Actives	P	re-Medicare		Medicare	Total	Total
	Actives		Retirees		Retirees		TOLAI		Actives		Retirees		Retirees	TUTAI	TOLAI
Medical	\$ 1,032	\$	1,117	\$	1,046	\$	1,080	\$	1,871	\$	157	\$	1,148	\$ 856	-20.8%

Paid Claims by Claim Type – Total Participants

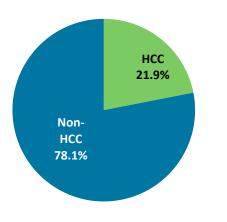
							Ν	et Paid Claims	- Tot	al							
								Total Participa	nts								
	3Q23 3Q24 Pre-Medicare Medicare Pre-Medicare Medicare Medicare																% Change
		Actives		e-Medicare Retirees		Medicare Retirees		Total		Actives	ł	Pre-Medicare Retirees		Medicare Retirees		Total	Total
Medical																	
Inpatient	\$	8,889,971	\$	1,330,677	\$	11,095	\$	10,231,743	\$	11,138,342	\$	1,276,158	\$	118 <i>,</i> 826	\$	12,533,325	22.5%
Outpatient	\$	26,335,847	\$	3,797,152	\$	277,079	\$	30,410,078	\$	40,971,602	\$	5,765,895	\$	363,658	\$	47,101,154	54.9%
Total - Medical	\$	35,225,818	\$	5,127,829	\$	288,174	\$	40,641,821	\$	52,109,944	\$	7,042,053	\$	482,484	\$	59,634,480	46.7%

	Net Paid Claims - Per Participant per Month																
	3Q23						3Q24							% Change			
		Actives	F	Pre-Medicare Retirees		Medicare Retirees		Total		Actives		Pre-Medicare Retirees		Medicare Retirees		Total	Total
Medical	\$	596	\$	936	\$	588	\$	625	\$	647	\$	1,024	\$	676	\$	677	8.3%

Cost Distribution – Medical Claims

		30	223				3Q24						
Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid	Paid Claims Category	Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid	
39	0.3%	\$9,291,746	22.9%	\$164,028	2.5%	\$100,000.01 Plus	48	0.3%	\$13,077,515	21.9%	\$254,161	2.7%	
52	0.4%	\$4,157,579	10.2%	\$222,857	3.4%	\$50,000.01-\$100,000.00	78	0.4%	\$6,095,461	10.2%	\$326,641	3.4%	
132	0.9%	\$4,738,511	11.7%	\$472,032	7.3%	\$25,000.01-\$50,000.00	232	1.2%	\$8,218,126	13.8%	\$829,241	8.7%	
468	3.3%	\$7,607,951	18.7%	\$1,281,956	19.7%	\$10,000.01-\$25,000.00	655	3.5%	\$10,529,096	17.7%	\$1,756,368	18.4%	
600	4.2%	\$4,426,192	10.9%	\$1,069,593	16.4%	\$5,000.01-\$10,000.00	942	5.0%	\$6,957,836	11.7%	\$1,566,752	16.4%	
1,061	7.5%	\$3,927,204	9.7%	\$1,132,702	17.4%	\$2,500.01-\$5,000.00	1,647	8.7%	\$6,062,154	10.2%	\$1,750,465	18.3%	
9,004	63.6%	\$6,492,638	16.0%	\$2,157,654	33.2%	\$0.01-\$2,500.00	11,633	61.6%	\$8,694,292	14.6%	\$3,038,434	31.8%	
103	0.7%	\$0	0.0%	\$5,115	0.1%	\$0.00	190	1.0%	\$0	0.0%	\$20,451	0.2%	
2,690	19.0%	\$0	0.0%	\$0	0.0%	No Claims	3,458	18.3%	\$0	0.0%	\$0	0.0%	
14,150	100.0%	\$40,641,821	100.0%	\$65,005,938	100.0%		18,884	100.0%	\$59,634,480	100.0%	\$9,542,513	100.0%	





HCC – High-Cost Claimant over \$100K

HCC's by Dia	gnosis Grouper		
Top 10 Diagnosis Groupers	Patients	Total Paid	% Paid
Cancer	19	\$3,585,306	27.4%
Neurological Disorders	24	\$2,743,588	21.0%
Cardiac Disorders	28	\$1,640,496	12.5%
Pregnancy-related Disorders	11	\$1,348,086	10.3%
Endocrine/Metabolic Disorders	20	\$572,943	4.4%
Pulmonary Disorders	30	\$407,383	3.1%
Mental Health	14	\$349,385	2.7%
Renal/Urologic Disorders	16	\$342,525	2.6%
Spine-related Disorders	12	\$264,366	2.0%
Medication Related Conditions	9	\$261,407	2.0%
All Other		\$1,562,031	11.9%
Overall		\$13,077,515	100.0%

Utilization Summary (p. 1 of 2)

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

		То	tal			State	Active			Non-Stat	e Active	
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year
Inpatient Facility												
# of Admits	239	411	531		206	370	486		1	0	0	
# of Bed Days	1,294	1,781	2,834		1,181	1,585	2,487		1	0	0	
Paid Per Admit	\$44,229	\$25,147	\$24,045	-4.4%	\$45,460	\$24,333	\$23,352	-4.0%	\$2 <i>,</i> 303	\$0	\$0	0.0%
Paid Per Day	\$8,169	\$5 <i>,</i> 803	\$4,505	-22.4%	\$7,930	\$5 <i>,</i> 680	\$4,563	-19.7%	\$2 <i>,</i> 303	\$0	\$0	0.0%
Admits Per 1,000	38	39	37	-5.1%	35	38	37	-2.6%	667	0	0	0.0%
Days Per 1,000	203	168	200	19.0%	201	162	190	17.3%	667	0	0	0.0%
Avg LOS	5.4	4.3	5.3	23.3%	5.7	4.3	5.1	18.6%	1	0	0	0.0%
# Admits From ER	120	205	282	37.6%	99	179	254	41.9%	0	0	0	0.0%
Physician Office												
OV Utilization per Member	4.6	4.9	5.5	12.2%	4.5	4.8	5.4	12.5%	14.7	12.7	9.3	-26.8%
Avg Paid per OV	\$126	\$116	\$120	3.4%	\$120	\$116	\$119	2.6%	\$299	\$295	\$560	89.8%
Avg OV Paid per Member	\$586	\$571	\$657	15.1%	\$539	\$553	\$640	15.7%	\$4,385	\$3,740	\$5,197	39.0%
DX&L Utilization per Member	8.1	10.1	10.5	4.0%	7.7	9.7	10.2	5.2%	29.3	25.3	22.4	-11.5%
Avg Paid per DX&L	\$51	\$58	\$65	12.1%	\$48	\$57	\$62	8.8%	\$97	\$57	\$155	171.9%
Avg DX&L Paid per Member	\$408	\$589	\$684	16.1%	\$368	\$552	\$633	14.7%	\$2 <i>,</i> 845	\$1,452	\$3,463	138.5%
Emergency Room												
# of Visits	850	1,536	2,284		788	1,406	2,109		1	0	0	
Visits Per Member	0.13	0.14	0.16	14.3%	0.13	0.14	0.16	14.3%	0.67	0	0	0.0%
Visits Per 1,000	133	145	161	11.0%	134	144	161	11.8%	667	0	0	0.0%
Avg Paid per Visit	\$2,490	\$3,164	\$3,216	1.6%	\$2,466	\$3,192	\$3,197	0.2%	\$4,222	\$0	\$0	0.0%
Urgent Care												
# of Visits	1,972	3,925	5,309		1,847	3,719	5,006		0	2	2	
Visits Per Member	0.31	0.37	0.37	0.0%	0.31	0.38	0.38	0.0%	0.00	1.33	1.09	0.0%
Visits Per 1,000	310	370	375	1.4%	315	381	382	0.3%	0	1,333	1,091	0.0%
Avg Paid per Visit	\$118	\$99	\$107	8.1%	\$117	\$98	\$107	9.2%	\$0	\$154	\$170	0.0%
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		Annualized	Annualized	Annualized	

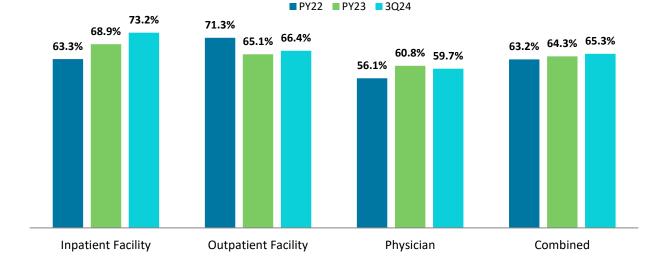
Utilization Summary (p. 2 of 2)

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

State Retirees Non-State Retirees Variance to Variance to 3024 3022 Summary 3022 3023 3023 3024 Peer Index Prior Year **Prior Year** Inpatient Facility 7 # of Admits 25 40 43 1 2 91 193 332 3 15 # of Bed Davs 21 Paid Per Admit \$41,443 \$32,111 \$31.212 -2.8% \$23,928 \$47,476 \$38,294 0.0% \$19.305 Paid Per Day \$11,385 \$6,655 \$4,043 -39.2% \$7,976 \$15,825 0.0% \$3,615 \$5,106 Admits Per 1,000 53 49 42 -14.3% 291 34 62 0.0% 64 Days Per 1,000 193 238 322 35.3% 872 103 466 0.0% 342 0.0% 5.3 Avg LOS 3.6 4.8 7.7 60.4% 3.0 3.0 7.5 # Admits From ER 17 26 27 4 0 1 0.0% Physician Office OV Utilization per Member 6.2 6.5 6.7 3.1% 6.9 7.8 8.5 9.0% 5.2 Avg Paid per OV \$185 \$120 \$131 9.2% \$100 \$87 \$79 -9.2% \$97 Avg OV Paid per Member \$1,153 \$775 \$875 12.9% \$694 \$683 \$669 -2.0% \$502 DX&L Utilization per Member 12.5 15.1 14.4 -4.6% 13 17.6 20.1 14.2% 9.0 Avg Paid per DX&L \$69 \$67 \$92 37.3% \$85 \$68 \$43 -36.8% \$46 Avg DX&L Paid per Member \$857 \$1,012 \$1,323 30.7% \$857 -28.4% \$412 \$1,103 \$1,197 Emergency Room # of Visits 60 126 166 1 4 9 0.16 0.04 0.28 Visits Per Member 0.13 0.16 0.0% 0.14 100.0% 0.23 Visits Per 1,000 127 156 161 3.2% 42 137 280 104.4% 228 Avg Paid per Visit \$2,785 \$2,921 \$3,331 14.0% \$1,827 \$1,034 \$5,431 425.2% \$1,035 Urgent Care # of Visits 123 200 297 2 4 4 Visits Per Member 0.26 0.25 0.29 16.0% 0.08 0.14 0.12 -14.3% 0.38 260 247 Visits Per 1,000 288 16.6% 83 137 124 -9.5% 379 Avg Paid per Visit \$139 \$102 \$103 1.0% \$70 \$69 \$51 -26.1% \$132 Annualized Annualized Annualized Annualized Annualized Annualized

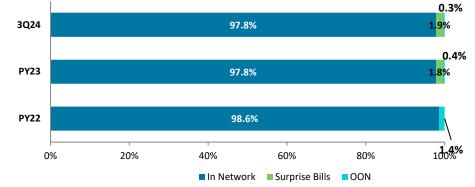
Total Health Management

Provider Network Summary



In Network Discounts

Network Utilization



Total Health Management

Diagnosis Grouper Summary

Diagnosis Grouper	Total Paid	% Paid	Insured	Spouse	Child	Male	Female
Cancer	\$5,371,620	9.0%	\$3,288,108	\$2,076,353	\$7 <i>,</i> 159	\$2,341,921	\$3,029,699
Gastrointestinal Disorders	\$5,011,415	8.4%	\$3,263,979	\$951,819	\$795,617	\$1,916,267	\$3,095,148
Neurological Disorders	\$4,909,825	8.2%	\$1,786,204	\$468,381	\$2,655,240	\$3,038,668	\$1,871,158
Health Status/Encounters	\$4,788,271	8.0%	\$2,665,080	\$729,989	\$1,393,202	\$1,530,237	\$3,258,034
Cardiac Disorders	\$4,649,983	7.8%	\$3,037,761	\$912,908	\$699,313	\$1,454,766	\$3,195,217
Pregnancy-related Disorders	\$4,615,365	7.7%	\$1,703,749	\$901,832	\$2,009,784	\$1,085,394	\$3,529,971
Mental Health	\$4,300,530	7.2%	\$2,003,577	\$368,887	\$1,928,066	\$1,398,802	\$2,901,728
Musculoskeletal Disorders	\$3,341,400	5.6%	\$2,243,411	\$660,562	\$437,428	\$1,314,035	\$2,027,365
Trauma/Accidents	\$2,868,062	4.8%	\$1,429,753	\$354,207	\$1,084,102	\$1,462,470	\$1,405,591
Eye/ENT Disorders	\$2,852,307	4.8%	\$1,538,256	\$406,859	\$907,192	\$1,294,872	\$1,557,435
Gynecological/Breast Disorders	\$2,167,054	3.6%	\$1,412,009	\$492,081	\$262,964	\$66,790	\$2,100,265
Spine-related Disorders	\$2,126,133	3.6%	\$1,530,608	\$475,171	\$120,354	\$866,788	\$1,259,345
Pulmonary Disorders	\$2,059,856	3.5%	\$1,010,857	\$358,351	\$690,648	\$1,079,065	\$980,791
Endocrine/Metabolic Disorders	\$1,986,542	3.3%	\$1,672,779	\$204,401	\$109,361	\$472,569	\$1,513,973
Renal/Urologic Disorders	\$1,816,666	3.0%	\$1,240,414	\$308,367	\$267 <i>,</i> 886	\$1,003,032	\$813,635
Infections	\$1,116,420	1.9%	\$666,584	\$178,310	\$271,526	\$477,818	\$638,601
Non-malignant Neoplas m	\$881,732	1.5%	\$659,218	\$127,750	\$94,765	\$173,047	\$708 <i>,</i> 686
Dermatological Disorders	\$667,654	1.1%	\$376,874	\$144,235	\$146,546	\$280,012	\$387,642
Miscellaneous	\$641,501	1.1%	\$369,741	\$121,393	\$150,367	\$272,557	\$368,944
Medical/Surgical Complications	\$593,490	1.0%	\$326,472	\$93,069	\$173,949	\$364,746	\$228,744
Diabetes	\$533,201	0.9%	\$356,781	\$89,745	\$86 <i>,</i> 675	\$236,884	\$296,317
Abnormal Lab/Radiology	\$485,945	0.8%	\$370,764	\$85,352	\$29 <i>,</i> 830	\$175,871	\$310,075
Vascular Disorders	\$480,082	0.8%	\$435,025	\$34,381	\$10,676	\$211,238	\$268,844
Congenital/Chromosomal Anomalies	\$399,081	0.7%	\$115,006	\$50,303	\$233,772	\$180,052	\$219,029
Medication Related Conditions	\$396,216	0.7%	\$66,390	\$268,000	\$61,826	\$33,485	\$362,731
Hematological Disorders	\$252,990	0.4%	\$221,080	\$17,710	\$14,200	\$56,496	\$196,494
Cholesterol Disorders	\$152,988	0.3%	\$119,827	\$29,047	\$4,114	\$68,245	\$84,743
Allergic Reaction	\$73,028	0.1%	\$29,372	\$5,561	\$38,095	\$15,646	\$57,381
Dental Conditions	\$70,953	0.1%	\$45,765	\$8,481	\$16,707	\$8,152	\$62,801
External Hazard Exposure	\$22,781	0.0%	\$14,518	\$196	\$8,068	\$16,843	\$5 <i>,</i> 938
Cause of Morbidity	\$773	0.0%	\$0	\$109	\$664	\$109	\$664
Social Determinants of Health	\$616	0.0%	\$0	\$139	\$477	\$133	\$483
Total	\$59,634,480	100.0%	\$33,999,962	\$10,923,947	\$14,710,571	\$22,897,007	\$36,737,473

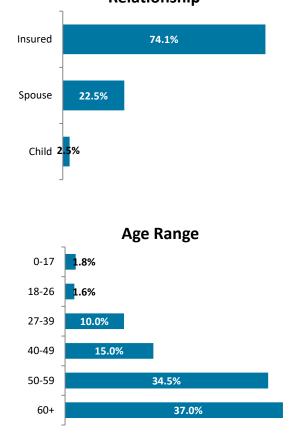
Mental Health Drilldown

	P	(22	P	Y23	3	Q24
Grouper	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid
Depression	453	\$568,975	883	\$898,381	1,112	\$1,301,323
Mood and Anxiety Disorders	613	\$271,735	1,144	\$681,784	1,447	\$688,313
Mental Health Conditions, Other	431	\$351,519	805	\$558,645	1,045	\$637,171
Developmental Disorders	59	\$215,640	108	\$250,524	138	\$490,124
Alcohol Abuse/Dependence	20	\$75,926	77	\$344,280	71	\$306 <i>,</i> 826
Bipolar Disorder	107	\$247,201	189	\$253,234	241	\$214,351
Attention Deficit Disorder	199	\$80,894	414	\$132,119	575	\$157 <i>,</i> 386
Eating Disorders	24	\$147,776	44	\$141,298	47	\$150,971
Sexually Related Disorders	28	\$8,553	55	\$30,340	68	\$149 <i>,</i> 659
Schizophrenia	4	\$2,259	12	\$47,488	12	\$75,705
Substance Abuse/Dependence	29	\$68,285	51	\$34,292	50	\$43 <i>,</i> 603
Sleep Disorders	124	\$26,517	242	\$63,421	257	\$40,033
Psychoses	6	\$10,965	17	\$18,602	10	\$14,084
Complications of Substance Abuse	6	\$27,466	13	\$3 <i>,</i> 466	14	\$14,021
Personality Disorders	14	\$15,495	17	\$12,003	23	\$12,299
Tobacco Use Disorder	16	\$4,458	54	\$3,385	85	\$4,661
Total		\$2,123,665		\$3,473,262		\$4,300,530

Diagnosis Grouper – Cancer

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Cancer Therapies	33	171	\$2,052,005	3.4%
Breast Cancer	94	905	\$862,456	1.4%
Colon Cancer	16	326	\$526,115	0.9%
Cancers, Other	61	411	\$388,085	0.7%
Prostate Cancer	44	294	\$289,055	0.5%
Pancreatic Cancer	3	73	\$261,986	0.4%
Secondary Cancers	26	190	\$189,381	0.3%
Lymphomas	27	269	\$165,082	0.3%
Non-Melanoma Skin Cancers	98	220	\$141,197	0.2%
Kidney Cancer	9	43	\$95 <i>,</i> 417	0.2%
Lung Cancer	6	178	\$81,918	0.1%
Carcinoma in Situ	38	135	\$73 <i>,</i> 659	0.1%
Thyroid Cancer	34	189	\$66,180	0.1%
Leukemias	10	95	\$64,759	0.1%
Cervical/Uterine Cancer	13	71	\$54,980	0.1%
Melanoma	17	67	\$23,444	0.0%
Brain Cancer	6	95	\$23,071	0.0%
Myeloma	4	16	\$5,162	0.0%
Ovarian Cancer	4	14	\$5,057	0.0%
Bladder Cancer	2	5	\$2,610	0.0%
Overall			\$5,371,620	100.0%

Relationship

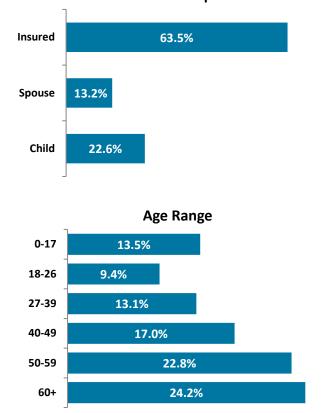


*Patient and claim counts are unique only within the category

Diagnosis Grouper – Gastrointestinal Orders

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Abdominal Disorders	1,173	2,770	\$955,277	1.6%
GI Disorders, Other	667	1,449	\$763,775	1.3%
Gallbladder and Biliary Disease	135	599	\$740,786	1.2%
Upper GI Disorders	600	1,345	\$564,293	0.9%
GI Symptoms	796	1,568	\$436,515	0.7%
Hernias	124	302	\$332,995	0.6%
Appendicitis	22	150	\$238,543	0.4%
Inflammatory Bowel Disease	74	368	\$235,778	0.4%
Constipation	218	406	\$139,339	0.2%
Diverticulitis	106	227	\$109,049	0.2%
Pancreatic Disorders	33	153	\$108,118	0.2%
Liver Diseases	226	426	\$88,955	0.1%
Hepatic Cirrhosis	17	50	\$81,379	0.1%
Hemorrhoids	151	263	\$76,189	0.1%
Peptic Ulcer/Related Disorders	17	26	\$70,756	0.1%
Ostomies	20	104	\$41,388	0.1%
Esophageal Varices	4	17	\$28,280	0.0%
			\$5,011,415	8.2%

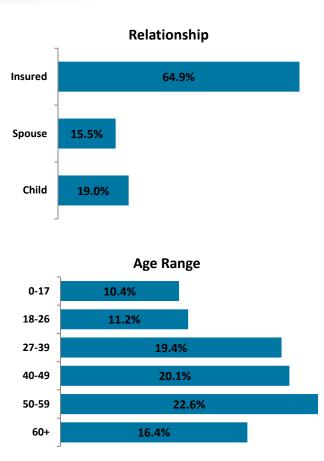
*Patient and claim counts are unique only within the category



Relationship

Diagnosis Grouper – Neurological Disorders

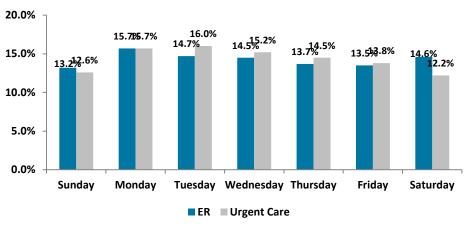
Diagnosis Category	Patients	Claims	Total Paid	% Paid
Spinal/Cerebellar Conditions	69	237	\$2,392,653	4.0%
Multiple Sclerosis	52	209	\$614,384	1.0%
Migraines	376	958	\$354,799	0.6%
Coma and Altered Consciousness	346	800	\$292,361	0.5%
Headaches	380	715	\$242,052	0.4%
Seizure Disorders	106	377	\$235,676	0.4%
Stroke	75	220	\$150,302	0.3%
Pain Disorders	342	602	\$124,576	0.2%
Carpal Tunnel Syndrome	77	183	\$80,949	0.1%
Central Nervous System Conditions, Other	108	222	\$79,654	0.1%
Neurological Disorders, Other	198	650	\$77,782	0.1%
Cerebral Hemorrhage	11	58	\$65,738	0.1%
Cerebrovascular Disorders	30	59	\$59,799	0.1%
Neuropathies	128	303	\$45,563	0.1%
Effects of Cerebrovascular Accident	10	15	\$26,884	0.0%
Paralytic Syndromes	14	39	\$16,457	0.0%
Parkinson's Disease	12	46	\$13,103	0.0%
Dementias	20	50	\$11,665	0.0%
Non-infectious Encephalomyelitis	14	39	\$8,393	0.0%
Cerebral Palsy	11	30	\$7,601	0.0%
Nerve Root and Plexus Disorders	11	43	\$5,178	0.0%
Alzheimers Disease	4	10	\$3,618	0.0%
Myasthenia Gravis	3	8	\$640	0.0%
			\$4,909,825	100.0%



*Patient and claim counts are unique only within the category

Emergency Room / Urgent Care Summary

	30	3Q23		224	Peer Index	
ER/Urgent Care	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care
Number of Visits	1,536	3,925	2,284	5,309		
Visits Per Member	0.14	0.37	0.16	0.37	0.23	0.38
Visits/1000 Members	145	370	159	370	228	379
Avg Paid Per Visit	\$3,164	\$99	\$3,216	\$107	\$1,085	\$132
% with OV*	80.6%	75.2%	82.4%	80.1%		
% Avoidable	14.8%	43.2%	16.4%	40.1%		
Total Member Paid	\$1,045,041	\$286,090	\$1,574,322	\$409,012		
Total Plan Paid	\$4,860,123	\$386,704	\$7,344,922	\$566,853		
*looks back 12 months	Annualized	Annualized	Annualized	Annualized		



Visits by Day of Week

	ER / UC Visits by Relationship									
Relationship	ER	Per 1,000	Urgent Care	Per 1,000	Total	Per 1,000				
Insured	1,231	126	3,034	310	4,265	436				
Spouse	321	133	597	248	918	381				
Child	732	109	1,678	251	2,410	360				
Total	2,284	121	5,309	281	7,593	402				



UC	Insured 57.1%	Spouse 11.2%	Child 31.8%	
ER	Insured 53.9%	Spouse 14.1%	Child 32.0%	

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

Inc Jul23-Mar24, Pd through May24

Savings Summary – Medical Claims

Description	Dollars	PPPM	% of Eligible
Eligible Charges	\$201,672,436	\$7,206	100.0%
PPO Discount	\$130,519,485	\$4,664	64.7%
Deductible	\$428 <i>,</i> 450	\$15	0.2%
Сорау	\$5,410,489	\$193	2.7%
Coinsurance	\$3,703,575	\$132	1.8%
Total Participant Paid	\$9,542,513	\$341	4.7%
Total Plan Paid	\$59,634,480	\$677	29.6%

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



Quality Metrics

Condition	Metric	#Members in Group	#Meeting Metric	#Not Meeting Metric	% Meeting Metric
	Asthma and a routine provider visit in the last 12 months	1,024	1,012	12	98.8%
Asthma	<2 asthma related ER Visits in the last 6 months	1,024	1	1,023	0.1%
	Asthma related admit in last 12 months	1,024	6	1,018	0.6%
Chronic Obstructive	No exacerbations in last 12 months	96	6	90	6.3%
Pulmonary Disease	Members with COPD who had an annual spirometry test	96	14	82	14.6%
Congestive Heart	No re-admit to hosp with Heart Failure diag w/in 30 days of HF inpatient stay discharge	4	0	4	0.0%
Failure	No ER Visit for Heart Failure in last 90 days	84	3	81	3.6%
Failure	Follow-up OV within 4 weeks of discharge from HF admission	4	1	3	25.0%
	Annual office visit	1,132	1,086	46	95.9%
	Annual dilated eye exam	1,132	413	719	36.5%
Diabetes	Annual foot exam	1,132	550	582	48.6%
Diabetes	Annual HbA1c test done	1,132	967	165	85.4%
	Diabetes Annual lipid profile	1,132	884	248	78.1%
	Annual microalbumin urine screen	1,132	803	329	70.9%
Hyperlipidemia	Hyperlipidemia Annual lipid profile	2,861	2,439	422	85.2%
Hypertension	Annual lipid profile	2,473	1,919	554	77.6%
	Annual serum creatinine test	2,196	1,880	316	85.6%
	Well Child Visit - 15 months	173	153	20	88.4%
	Routine office visit in last 6 months (All Ages)	19,797	13,259	6,538	67.0%
	Colorectal cancer screening ages 45-75 within the appropriate time period	6,278	2,936	3,342	46.8%
Wellness	Women age 25-65 with recommended cervical cancer/HPV screening	6,551	4,237	2,314	64.7%
	Males age greater than 49 with PSA test in last 24 months	2,033	1,036	997	51.0%
	Routine exam in last 24 months (All Ages)	19,797	16,637	3,160	84.0%
	Women age 40 to 75 with a screening mammogram last 24 months	4,601	2,842	1,759	61.8%

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

Chronic Conditions Prevalence

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

> Two outpatient claims for the Dx on separate days of service

One ER Visit with the Dx as primary

> One IP admission with the Dx as the admitting

Chronic Condition	# With Condition	% of Members	Members per 1,000	Admits per 1,000	ER Visits per 1,000	PMPY
Affective Psychosis	232	1.17%	12.29	186.98	367.28	\$14,215
Asthma	1,099	5.55%	58.20	117.30	385.62	\$13,822
Atrial Fibrillation	149	0.75%	7.89	212.12	515.15	\$28 <i>,</i> 054
Blood Disorders	1,141	5.76%	60.42	209.55	468.08	\$24,115
CAD	326	1.65%	17.26	259.76	510.24	\$28,999
COPD	93	0.47%	4.92	320.22	589.89	\$34 <i>,</i> 587
Cancer	534	2.70%	28.28	89.18	281.47	\$30 <i>,</i> 578
Chronic Pain	571	2.88%	30.24	116.11	488.75	\$19,148
Congestive Heart Failure	82	0.41%	4.34	640.00	622.22	\$68,153
Demyelinating Diseases	60	0.30%	3.18	101.05	429.47	\$51,811
Depression	1,945	9.82%	103.00	115.54	331.01	\$11,995
Diabetes	1,175	5.93%	62.22	86.81	320.43	\$18,602
ESRD	17	0.09%	0.90	1,551.72	517.24	\$86,856
Eating Disorders	122	0.62%	6.46	197.18	464.79	\$17,182
HIV/AIDS	24	0.12%	1.27	61.22	122.45	\$39 <i>,</i> 950
Hyperlipidemia	3,417	17.25%	180.94	56.40	224.75	\$11 <i>,</i> 594
Hypertension	2,494	12.59%	132.07	84.95	277.55	\$14,192
Immune Disorders	123	0.62%	6.51	205.85	629.67	\$44,800
Inflammatory Bowel Disease	101	0.51%	5.35	180.90	497.49	\$35,303
Liver Diseases	434	2.19%	22.98	170.98	446.64	\$19,116
Morbid Obesity	744	3.76%	39.40	101.35	320.27	\$14,633
Osteoarthritis	651	3.29%	34.47	76.37	277.72	\$18,206
Peripheral Vascular Disease	80	0.40%	4.24	290.66	415.22	\$29,187
Rheumatoid Arthritis	135	0.68%	7.15	121.88	354.57	\$34,477

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

Data Includes Medical and Pharmacy Based on 24 months incurred dates

Methodology

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

	0	March 31, 2024		
	ess Scripts			
	2024 LDPPO	1Q-3Q FY2023 LDPPC	Difference	% Change
Membership Summary			Membership S	ummary
Member Count (Membership)	18,852	14,114	4,738	33.6%
Utilizing Member Count (Patients)	14,049	10,992	3,057	27.8%
Percent Utilizing (Utilization)	74.5%	77.9%	(0)	-4.3%
Claim Summary			Claims Sum	mary
Net Claims (Total Rx's)	205,430	150,839	54,591	36.2%
Claims per Elig Member per Month (Claims PMPM)	1.21	1.19	0.02	1.7%
Total Claims for Generic (Generic Rx)	175,530	126,915	48,615.00	38.3%
Total Claims for Brand (Brand Rx)	29,900	23,924	5,976.00	25.0%
Total Claims for Brand w/Gen Equiv (Multisource Brand Claims)	1,110	791	319.00	40.3%
Total Non-Specialty Claims	202,881 2,549	148,712 2,127	54,169.00 422.00	36.4% 19.8%
Total Specialty Claims Generic % of Total Claims (GFR)	2,549 85.4%	2,127 84,1%	422.00	19.8%
Generic Effective Rate (GCR)	99.4%	99.4%	(0.00)	0.0%
Mail Order Claims	59,172	46,900	12,272.00	26.2%
Mail Penetration Rate*	33.0%	36.0%	(0.03)	-3.0%
			Claims Coat S	
Claims Cost Summary Total Prescription Cost (Total Gross Cost)	\$30,255,099	\$18,130,993	Claims Cost St \$12,124,106.00	<u>immary</u> 66.9%
Total Generic Gross Cost	\$3,452,025	\$2,397,534	\$1,054,491.00	44.0%
Total Brand Gross Cost	\$26,803,074	\$15,733,460	\$11,069,614.00	70.4%
Total MSB Gross Cost	\$519,461	\$385,529	\$133,932.00	34.7%
Total Ingredient Cost	\$29,361,766	\$17,877,625	\$11,484,141.00	64.2%
Total Dispensing Fee	\$869,084	\$227,143	\$641,941.00	282.6%
Total Other (e.g. tax)	\$24,249	\$26,225	(\$1,976.00)	-7.5%
Avg Total Cost per Claim (Gross Cost/Rx)	\$147.28	\$120.20	\$27.08	22.5%
Avg Total Cost for Generic (Gross Cost/Generic Rx)	\$19.67	\$18.89	\$0.78	4.1%
Avg Total Cost for Brand (Gross Cost/Brand Rx)	\$896.42	\$657.64	\$238.78	36.3%
Avg Total Cost for MSB (MSB Gross Cost/MSB ARx)	\$467.98	\$487.39	(\$19.41)	-4.0%
Member Cost Summary			Member Cost S	Summary
Total Member Cost	\$4,615,853	\$2,944,180	\$1,671,673.00	56.8%
Total Copay	\$4,615,853	\$2,944,180	\$1,671,673.00	56.8%
Total Deductible	\$0	\$0	\$0.00	0.0%
Avg Copay per Claim (Copay/Rx)	\$22.47	\$19.52	\$2.95	15.1%
Avg Participant Share per Claim (Copay+Deductible/RX)	\$22.47	\$19.52	\$2.95	15.1%
Avg Copay for Generic (Copay/Generic Rx)	\$6.72	\$6.30	\$0.42	6.7%
Avg Copay for Brand (Copay/Brand Rx)	\$114.90	\$89.65	\$25.25	28.2%
Avg Copay for Brand w/ Generic Equiv (Copay/Multisource Rx)	\$36.36	\$26.74	\$9.62	36.0%
Net PMPM (Participant Cost PMPM) Copay % of Total Prescription Cost (Member Cost Share %)	\$27.21 15.3%	\$23.18 16.2%	\$4.03 -1.0%	17.4% -6.0%
Copay 70 of Total Trescription Cost (Memoer Cost Share 70)	13.370	10.276	-1:0/8	-0.078
Plan Cost Summary			Plan Cost Su	
	\$25,639,246	\$15,186,813	\$10,452,433.00	68.8%
Total Non-Specialty Cost (Non-Specialty Plan Cost)	\$13,460,060	\$7,646,094	\$5,813,966.00	76.0%
Total Specialty Drug Cost (Specialty Plan Cost)	\$12,179,186	\$7,540,719	\$4,638,467.00	61.5%
Avg Plan Cost per Claim (Plan Cost/Rx)	\$124.81	\$100.68	\$24.13	24.0%
Avg Plan Cost for Generic (Plan Cost/Generic Rx)	\$12.94	\$12.59 \$567.00	\$0.35 \$212.52	2.8%
Avg Plan Cost for Brand (Plan Cost/Brand Rx)	\$781.52 \$431.62	\$567.99 \$460.66	\$213.53 (\$29.04)	37.6% -6.3%
Avg Plan Cost for MSB (MSB Plan Cost/MSB ARx) Net PMPM (Plan Cost PMPM)	\$431.62 \$151.11	\$460.66 \$119.56	(\$29.04) \$31.56	-6.3% 26.4%
PMPM without Specialty (Non-Specialty PMPM)	\$151.11 \$79.33	\$119.56 \$60.19	\$31.56 \$19.14	26.4% 31.8%
PMPM for Specialty Only (Specialty PMPM)	\$79.33	\$59.36	\$19.14	20.9%
Rebates Received (Q1-Q3FY2023 actual)	\$8,643,702	\$5,203,910	\$3,439,792.25	66.1%
Net PMPM (Plan Cost PMPM factoring Rebates)	\$100.17	\$3,203,910 \$78.59	\$3,439,792.25 \$21.58	27.5%
PMPM without Specialty (Non-Specialty PMPM)	\$53.22	\$34.20	\$0.92	5.0%
PMPM for Specialty Only (Specialty PMPM)	\$45.97	\$43.75	\$2.22	5.1%

Appendix C

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DATASCOPETM

Nevada Public Employees' Benefits Program EPO Plan July 2023 – March 2024 Incurred,

Paid through May 2024

Reimagine | Rediscover Benefits



Overview

- Total Medical Spend for 3Q24 was \$29,185,074 with an annualized plan cost per employee per year (PEPY) of \$12,514. This is a decrease of 6.9% when compared to 3Q23.
 - IP Cost per Admit is \$34,179 which is 5.3% lower than 3Q23.
 - ER Cost per Visit is \$3,235 which is 9.0% higher than 3Q23.
- Employees shared in 9.7% of the medical cost.
- Inpatient facility costs were 25.0% of the plan spend.
- 73.2% of the Average Membership had paid Medical claims less than \$2,500, with 11.9% having no claims paid at all during the reporting period.
- 46 members exceeded the \$100k high-cost threshold during the reporting period, which accounted for 32.3% of the plan spend. The highest diagnosis category was Cancer, accounting for 26.7% of the high-cost claimant dollars.
- Total spending with in-network providers was 96.6%. The average In Network discount was 56.8%, which is 3.5% higher than the PY23 average discount of 54.9%.

Paid Claims by Age Group

										Paid C	laim	s by Age Grou	p										
					3Q23						3Q24									% Chan	ge		
Age Range	M	led Net Pay	Med MPM	F	8x Net Pay	Rx I	РМРМ	Net Pay	F	PMPM	N	/led Net Pay		Med MPM	l	Rx Net Pay	Rx I	РМРМ	Net Pay	P	MPM	Net Pay	РМРМ
<1	\$	2,379,872	\$ 3,724	\$	13,867	\$	22	\$ 2,393,739	\$	3,151	\$	704,268	\$	1,565	\$	3,909	\$	9	\$ 708,177	\$	1,574	-70.4%	-50.1%
1	\$	227,152	\$ 428	\$	622	\$	1	\$ 227,774	\$	332	\$	192,521	\$	419	\$	2,276	\$	5	\$ 194,797	\$	424	-14.5%	27.8%
2 - 4	\$	420,955	\$ 227	\$	11,697	\$	6	\$ 432,652	\$	228	\$	362,619	\$	220	\$	8,400	\$	5	\$ 371,019	\$	225	-14.2%	-1.0%
5 - 9	\$	280,221	\$ 88	\$	58,186	\$	18	\$ 338,407	\$	105	\$	342,571	\$	120	\$	39,478	\$	14	\$ 382,049	\$	133	12.9%	27.1%
10 - 14	\$	671,772	\$ 159	\$	114,048	\$	27	\$ 785,820	\$	157	\$	1,154,924	\$	302	\$	114,571	\$	30	\$ 1,269,495	\$	332	61.6%	110.9%
15 - 19	\$	1,053,568	\$ 207	\$	442,665	\$	87	\$ 1,496,233	\$	250	\$	1,115,642	\$	255	\$	507,806	\$	116	\$ 1,623,448	\$	370	8.5%	48.0%
20 - 24	\$	1,002,478	\$ 212	\$	168,786	\$	36	\$ 1,171,264	\$	253	\$	799,337	\$	185	\$	162,260	\$	38	\$ 961,597	\$	223	-17.9%	-11.8%
25 - 29	\$	870,027	\$ 439	\$	207,726	\$	105	\$ 1,077,753	\$	386	\$	584,112	\$	365	\$	281,181	\$	176	\$ 865,293	\$	540	-19.7%	39.9%
30 - 34	\$	1,122,946	\$ 422	\$	1,177,122	\$	442	\$ 2,300,068	\$	877	\$	977,518	\$	464	\$	1,024,894	\$	487	\$ 2,002,412	\$	951	-12.9%	8.4%
35 - 39	\$	2,625,510	\$ 720	\$	649,214	\$	178	\$ 3,274,724	\$	736	\$	1,928,256	\$	593	\$	506,083	\$	156	\$ 2,434,339	\$	749	-25.7%	1.8%
40 - 44	\$	2,270,331	\$ 584	\$	1,163,597	\$	299	\$ 3,433,928	\$	849	\$	1,474,509	\$	413	\$	1,145,395	\$	321	\$ 2,619,904	\$	733	-23.7%	-13.6%
45 - 49	\$	1,846,880	\$ 424	\$	958,636	\$	220	\$ 2,805,516	\$	575	\$	3,047,334	\$	780	\$	1,480,961	\$	379	\$ 4,528,295	\$	1,159	61.4%	101.6%
50 - 54	\$	3,853,217	\$ 652	\$	1,570,454	\$	266	\$ 5,423,671	\$	799	\$	3,055,897	\$	602	\$	1,238,798	\$	244	\$ 4,294,695	\$	846	-20.8%	5.9%
55 - 59	\$	4,104,232	\$ 707	\$	1,918,213	\$	330	\$ 6,022,445	\$	1,018	\$	4,129,411	\$	790	\$	2,208,144	\$	422	\$ 6,337,555	\$	1,212	5.2%	19.0%
60 - 64	\$	6,368,155	\$ 957	\$	2,769,661	\$	416	\$ 9,137,816	\$	1,262	\$	6,612,255	\$	1,092	\$	2,905,119	\$	480	\$ 9,517,374	\$	1,571	4.2%	24.5%
65+	\$	2,256,983	\$ 714	\$	1,307,445	\$	414	\$ 3,564,428	\$	1,026	\$	2,703,898	\$	858	\$	1,350,473	\$	429	\$ 4,054,371	\$	1,287	13.7%	25.4%
Total	\$	31,354,299	\$ 538	\$	12,531,941	\$	215	\$ 43,886,240	\$	684	\$	29,185,074	\$	562	\$	12,979,748	\$	250	\$ 42,164,822	\$	813	-3.9%	18.8%

Financial Summary (p. 1 of 2)

		Тс	otal			State	Active			Non-Stat	te Active	
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year
Average Enrollment												
Employees	4,058	3,479	3,110	-10.6%	3,403	2,903	2,569	-11.5%	3	2	2	0.0%
Spouses	793	687	603	-12.1%	684	589	513	-12.8%	0	0	0	0.0%
Children	2,698	2,315	2,052	-11.3%	2,549	2,162	1,912	-11.5%	0	0	0	0.0%
Total Members	7,549	6,481	5,765	-11.0%	6,635	5,653	4,994	-11.6%	3	2	2	0.0%
Family Size	1.9	1.9	1.9	-2.6%	2.0	2.0	1.9	-3.0%	1.0	1.0	1.0	0.0%
Financial Summary												
Gross Cost	\$32,474,418	\$34,617,679	\$32,328,577	-6.6%	\$27,933,037	\$28,755,420	\$27,454,652	-4.5%	\$4,170	\$3,859	\$3,897	1.0%
Client Paid	\$28,738,168	\$31,354,299	\$29,185,074	-6.9%	\$24,842,309	\$26,085,488	\$24,872,107	-4.7%	\$3,120	\$3,050	\$3,049	0.0%
Employee Paid	\$3,736,250	\$3,263,380	\$3,143,503	-3.7%	\$3,090,728	\$2,669,933	\$2,582,545	-3.3%	\$1,050	\$810	\$848	4.7%
Client Paid-PEPY	\$9,443	\$12,015	\$12,514	4.2%	\$9,734	\$11,982	\$12,907	7.7%	\$1,337	\$2,033	\$2,033	0.0%
Client Paid-PMPY	\$5,076	\$6,451	\$6,749	4.6%	\$4,992	\$6,153	\$6,640	7.9%	\$1,337	\$2,033	\$2,033	0.0%
Client Paid-PEPM	\$787	\$1,001	\$1,043	4.2%	\$811	\$998	\$1,076	7.8%	\$111	\$169	\$169	0.0%
Client Paid-PMPM	\$423	\$538	\$562	4.5%	\$416	\$513	\$553	7.8%	\$111	\$169	\$169	0.0%
High Cost Claimants (HCC	C's) > \$100k											
# of HCC's	35	42	46	9.5%	30	33	39	18.2%	0	0	0	0.0%
HCC's / 1,000	4.6	6.5	8.0	23.1%	4.5	5.8	7.8	33.7%	0.0	0.0	0.0	0.0%
Avg HCC Paid	\$224,770	\$242,425	\$205,165	-15.4%	\$238,978	\$246,809	\$211,322	-14.4%	\$0	\$0	\$0	0.0%
HCC's % of Plan Paid	27.4%	32.5%	32.3%	-0.6%	28.9%	31.2%	33.1%	6.1%	0.0%	0.0%	0.0%	0.0%
Cost Distribution by Clair	m Type (PMPY)											
Facility Inpatient	\$1,409	\$1,910	\$1,686	-11.7%	\$1,425	\$1,787	\$1,779	-0.4%	\$0	\$0	\$0	0.0%
Facility Outpatient	\$1,331	\$2,168	\$2,533	16.8%	\$1,282	\$2,065	\$2,459	19.1%	\$33	\$210	\$286	0.0%
Physician	\$2,232	\$2,373	\$2,530	6.6%	\$2,188	\$2,301	\$2,402	4.4%	\$1,172	\$1,823	\$1,746	-4.2%
Other	\$103	\$0	\$0	0.0%	\$97	\$0	\$0	0.0%	\$132	\$0	\$0	0.0%
Total	\$5,076	\$6,451	\$6,749	4.6%	\$4,992	\$6,153	\$6,640	7.9%	\$1,337	\$2,033	\$2,033	0.0%
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		Annualized	Annualized	Annualized	

Financial Summary (p. 2 of 2)

		State R	etirees			Non-State	e Retirees		
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	Peer Index
Average Enrollment									
Employees	564	511	487	-4.6%	88	63	51	-19.0%	
Spouses	90	84	80	-4.5%	19	14	10	-29.1%	
Children	139	140	129	-8.3%	10	13	12	-6.6%	
Total Members	794	736	696	-5.4%	117	90	73	-19.3%	
Family Size	1.4	1.4	1.4	-0.7%	1.3	1.4	1.4	1.4%	1.6
Financial Summary									
Gross Cost	\$4,047,960	\$5,579,441	\$4,517,192	-19.0%	\$489 <i>,</i> 251	\$278,958	\$352,836	26.5%	
Client Paid	\$3,504,302	\$5,063,279	\$4,017,549	-20.7%	\$388 <i>,</i> 437	\$202 <i>,</i> 482	\$292,369	44.4%	
Employee Paid	\$543 <i>,</i> 658	\$516 <i>,</i> 162	\$499,643	-3.2%	\$100,814	\$76 <i>,</i> 476	\$60,467	-20.9%	
Client Paid-PEPY	\$8,281	\$13,200	\$10,992	-16.7%	\$5,900	\$4,278	\$7,644	78.7%	\$6,258
Client Paid-PMPY	\$5,888	\$9,174	\$7 <i>,</i> 693	-16.1%	\$4,418	\$2,992	\$5 <i>,</i> 365	79.3%	\$3 <i>,</i> 830
Client Paid-PEPM	\$690	\$1,100	\$916	-16.7%	\$492	\$356	\$637	78.9%	\$521
Client Paid-PMPM	\$491	\$764	\$641	-16.1%	\$368	\$249	\$447	79.5%	\$319
High Cost Claimants (HCC's	s) > \$100k								
# of HCC's	6	10	8	0.0%	0	0	1	0.0%	
HCC's / 1,000	7.6	13.6	11.5	0.0%	0.0	0.0	13.8	0.0%	
Avg HCC Paid	\$116,268	\$203,715	\$132,918	0.0%	\$0	\$0	\$132,680	0.0%	
HCC's % of Plan Paid	19.9%	40.2%	26.5%	0.0%	0.0%	0.0%	45.4%	0.0%	
Cost Distribution by Claim	Type (PMPY)								
Facility Inpatient	\$1,280	\$3 <i>,</i> 065	\$1,075	-64.9%	\$1,403	\$213	\$1,229	477.0%	\$1,044
Facility Outpatient	\$1,794	\$3,091	\$3,251	5.2%	\$1,047	\$1,150	\$823	-28.4%	\$1,310
Physician	\$2,667	\$3,018	\$3 <i>,</i> 367	11.6%	\$1,839	\$1,629	\$3,312	103.3%	\$1,404
Other	\$147	\$0	\$0	0.0%	\$129	\$0	\$0	0.0%	\$72
Total	\$5,888	\$9,174	\$7,693	-16.1%	\$4,418	\$2,992	\$5,365	79.3%	\$3 <i>,</i> 830
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		

Financial Summary – Prior Year Comparison (p. 1 of 2)

		Тс	tal			State	Active			Non-Sta	te Active	
Summary	PY22	PY23	3Q24	Variance to Prior Year	PY22	PY23	3Q24	Variance to Prior Year	PY22	PY23	3Q24	Variance to Prior Year
Average Enrollment												
Employees	4,021	3,447	3,110	-9.8%	3,370	2,876	2,569	-10.7%	3	2	2	0.0%
Spouses	786	2,297	603	-73.7%	678	2,145	513	-76.1%	0	0	0	0.0%
Children	2,683	676	2,052	203.4%	2,531	580	1,912	229.5%	0	0	0	0.0%
Total Members	7,491	6,421	5,765	-10.2%	6,579	5,601	4,994	-10.8%	3	2	2	0.0%
Family Size	1.9	1.9	1.9	-0.5%	2.0	2.0	1.9	-0.5%	1.0	1.0	1.0	0.0%
Financial Summary												
Gross Cost	\$44,187,042	\$46,490,212	\$32,328,577	-30.5%	\$37,820,607	\$38,595,575	\$27,454,652	-28.9%	\$4,744	\$4,201	\$3,897	-7.2%
Client Paid	\$39,320,787	\$42,257,152	\$29,185,074	-30.9%	\$33,797,612	\$35,128,252	\$24,872,107	-29.2%	\$3,622	\$3,335	\$3,049	-8.6%
Employee Paid	\$4,866,255	\$4,233,060	\$3,143,503	-25.7%	\$4,022,996	\$3,467,323	\$2,582,545	-25.5%	\$1,122	\$866	\$848	-2.1%
Client Paid-PEPY	\$9,779	\$12,259	\$12,514	2.1%	\$10,030	\$12,216	\$12,907	5.7%	\$1,278	\$1,667	\$2,033	22.0%
Client Paid-PMPY	\$5,249	\$6,581	\$6,749	2.6%	\$5,137	\$6,272	\$6,640	5.9%	\$1,278	\$1,667	\$2,033	22.0%
Client Paid-PEPM	\$815	\$1,022	\$1,043	2.1%	\$836	\$1,018	\$1,076	5.7%	\$107	\$139	\$169	21.6%
Client Paid-PMPM	\$437	\$548	\$562	2.6%	\$428	\$523	\$553	5.7%	\$107	\$139	\$169	21.6%
High Cost Claimants (HCC	C's) > \$100k											
# of HCC's	46	54	46	-14.8%	40	43	39	-9.3%	0	0	0	0.0%
HCC's / 1,000	6.1	8.4	8.0	-5.1%	6.1	7.7	7.8	1.7%	0.0	0.0	0.0	0.0%
Avg HCC Paid	\$237,083	\$257,429	\$205,165	-20.3%	\$246,357	\$257,598	\$211,322	-18.0%	\$0	\$0	\$0	0.0%
HCC's % of Plan Paid	27.7%	32.9%	32.3%	-1.8%	29.2%	31.5%	33.1%	5.1%	0.0%	0.0%	0.0%	0.0%
Cost Distribution by Clair	n Type (PMPY)											
Facility Inpatient	\$1,432	\$1,804	\$1,686	-6.5%	\$1,437	\$1,735	\$1,779	2.5%	\$0	\$0	\$0	0.0%
Facility Outpatient	\$1,442	\$2,319	\$2 <i>,</i> 533	9.2%	\$1,382	\$2,176	\$2 <i>,</i> 459	13.0%	\$27	\$158	\$286	81.0%
Physician	\$2,259	\$2,458	\$2 <i>,</i> 530	2.9%	\$2,209	\$2,361	\$2,402	1.7%	\$1,142	\$1,510	\$1,746	15.6%
Other	\$116	\$0	\$0	0.0%	\$109	\$0	\$0	0.0%	\$109	\$0	\$0	0.0%
Total	\$5,249	\$6,581	\$6,749	2.6%	\$5,137	\$6,272	\$6,640	5.9%	\$1,278	\$1,667	\$2,033	22.0%
			Annualized				Annualized				Annualized	

Financial Summary – Prior Year Comparison (p. 2 of 2)

		State R	etirees			Non-Stat	e Retirees		
Summary	PY22	РҮ23	3Q24	Variance to Prior Year	PY22	РҮ23	3Q24	Variance to Prior Year	Peer Index
Average Enrollment									
Employees	564	509	487	-4.2%	85	61	51	-16.5%	
Spouses	90	139	80	-42.3%	19	13	10	-23.1%	
Children	142	83	129	55.3%	10	13	12	-12.5%	
Total Members	796	731	696	-4.7%	114	87	73	-16.9%	
Family Size	1.4	1.4	1.4	-0.7%	1.3	1.4	1.4	-0.7%	1.6
Financial Summary									
Gross Cost	\$5,794,991	\$7,535,647	\$4,517,192	-40.1%	\$566 <i>,</i> 699	\$354,790	\$352,836	-0.6%	
Client Paid	\$5,071,309	\$6,861,336	\$4,017,549	-41.4%	\$448,244	\$264,230	\$292,369	10.6%	
Employee Paid	\$723,682	\$674,311	\$499,643	-25.9%	\$118,455	\$90,560	\$60,467	-33.2%	
Client Paid-PEPY	\$8 <i>,</i> 998	\$13,493	\$10,992	-18.5%	\$5 <i>,</i> 279	\$4,326	\$7,644	76.7%	\$6 <i>,</i> 258
Client Paid-PMPY	\$6 <i>,</i> 373	\$9,392	\$7 <i>,</i> 693	-18.1%	\$3,946	\$3 <i>,</i> 023	\$5,365	77.5%	\$3 <i>,</i> 830
Client Paid-PEPM	\$750	\$1,124	\$916	-18.5%	\$440	\$360	\$637	76.9%	\$521
Client Paid-PMPM	\$531	\$783	\$641	-18.1%	\$329	\$252	\$447	77.4%	\$319
High Cost Claimants (HCC's	s) > \$100k								
# of HCC's	8	12	8	-33.3%	0	0	1	0.0%	
HCC's / 1,000	10.1	16.4	11.5	-30.1%	0.0	0.0	13.8	0.0%	
Avg HCC Paid	\$131,446	\$235,373	\$132,918	-43.5%	\$0	\$0	\$132,680	0.0%	
HCC's % of Plan Paid	20.7%	41.2%	26.5%	-35.7%	0.0%	0.0%	45.4%	0.0%	
Cost Distribution by Claim	Type (PMPY)								
Facility Inpatient	\$1,443	\$2 <i>,</i> 534	\$1 <i>,</i> 075	-57.6%	\$1,101	\$183	\$1,229	571.6%	\$1,044
Facility Outpatient	\$2,015	\$3,585	\$3,251	-9.3%	\$940	\$1,007	\$823	-18.3%	\$1,310
Physician	\$2,742	\$3,273	\$3,367	2.9%	\$1,800	\$1,832	\$3,312	80.8%	\$1,404
Other	\$174	\$0	\$0	0.0%	\$106	\$0	\$0	0.0%	\$72
Total	\$6,373	\$9,392	\$7,693 Annualized	-18.1%	\$3,946	\$3,023	\$5,365 Annualized	77.5%	\$3,830

Paid Claims by Claim Type – State Participants

						Ν	et Paid Claims	- Tot	al						
							State Participa	ints							
			30	22							3Q	24			%
			30	23							30	24			Change
	Actives	Pr	e-Medicare		Medicare		Total		Actives	P	re-Medicare		Medicare	Total	Total
	Actives		Retirees		Retirees		TUCAI		Actives		Retirees		Retirees	TULAI	TOLAI
Medical															
Inpatient	\$ 9,033,701	\$	1,090,193	\$	798,039	\$	10,921,934	\$	7,578,449	\$	571,116	\$	51,762	\$ 8,201,327	-24.9%
Outpatient	\$ 17,051,786	\$	2,918,420	\$	256,627	\$	20,226,833	\$	17,293,658	\$	3,088,718	\$	305,953	\$ 20,688,329	2.3%
Total - Medical	\$ 26,085,488	\$	4,008,613	\$	1,054,666	\$	31,148,767	\$	24,872,107	\$	3,659,834	\$	357,715	\$ 28,889,656	-7.3%

					Net Paic	l Clai	ims - Per Partic	ipan	t per Month						
			30	23							30	224			% Change
	Actives	Pi	re-Medicare Retirees		Medicare Retirees		Total		Actives	P	re-Medicare Retirees		Medicare Retirees	Total	Total
Medical	\$ 998	\$	1,005	\$	1,715	\$	1,014	\$	1,076	\$	977	\$	560	\$ 1,050	3.6%

Paid Claims by Claim Type – Non-State Participants

						N	et Paid Claims -	· Tot	tal					
						Ν	on-State Partic	ipar	nts					
			30	23						3Q2	24			% Change
	Actives Pre-Medicare Medicare Retirees Retirees					Total		Actives	Pre-Medicare Retirees		Medicare Retirees	Total	Total	
Medical														
Inpatient	\$ -	\$	14,081	\$	3,066	\$	17,147					\$74,973.71	\$ 74,974	337.2%
Outpatient	\$ 3,050	\$	68,241	\$	117,094	\$	188,385	\$	3,049	\$ 14,648		\$202,746.81	\$ 220,444	17.0%
Total - Medical	\$ 3,050	\$	82,323	\$	120,159	\$	205,532	\$	3,049	\$ 14,648	\$	277,721	\$ 295,418	43.7%

					Net Paid	l Clai	ims - Per Partic	ipar	nt per Month						
			30	23							30	24			%
															Change
	Actives	P	Pre-Medicare		Medicare		Total		Actives	(Pre-Medicare		Medicare	Total	Total
	Actives		Retirees		Retirees		TUtai		Actives		Retirees		Retirees	TUtal	TOLAI
Medical	\$ 169	\$	601	\$	279	\$	351	\$	169	\$	222	\$	707	\$ 619	76.4%

Paid Claims by Claim Type – Total

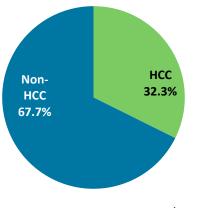
						Ν	et Paid Claims	- Tot	al						
							Total Participa	ints							
			30	23							30	24			% Change
	Actives	P	re-Medicare		Medicare		Total		Actives	F	Pre-Medicare		Medicare	Total	Total
	Actives		Retirees		Retirees		TOTAL		Actives		Retirees		Retirees	TOLAI	TOLAI
Medical															
Inpatient	\$ 9,033,701	\$	1,104,274	\$	801,105	\$	10,939,081	\$	7,578,449	\$	571,116	\$	126,736	\$ 8,276,301	-24.3%
Outpatient	\$ 17,054,836	\$	2,986,662	\$	373,720	\$	20,415,218	\$	17,296,707	\$	3,103,366	\$	508,700	\$ 20,908,773	2.4%
Total - Medical	\$ 26,088,537	\$	4,090,936	\$	1,174,826	\$	31,354,299	\$	24,875,156	\$	3,674,482	\$	635,436	\$ 29,185,074	-6.9%

					Net Paid	l Cla	ims - Per Partic	ipan	t per Month						
			30	23							30	24			% Change
	Actives	P	re-Medicare Retirees		Medicare Retirees		Total		Actives	P	Pre-Medicare Retirees		Medicare Retirees	Total	Total
Medical	\$ 998	\$	992	\$	1,123	\$	1,001	\$	1,075	\$	964	\$	616	\$ 1,043	4.1%

Cost Distribution – Medical Claims

		30	23						30	224		
Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid	Paid Claims Category	Avg # of Members	% of Members	Total Paid	% of Paid	EE Paid	% EE Paid
39	0.6%	\$10,181,843	32.5%	\$159,612	4.9%	\$100,000.01 Plus	41	0.7%	\$9,437,599	32.3%	\$176,339	5.6%
42	0.7%	\$2,968,710	9.5%	\$139,181	4.3%	\$50,000.01-\$100,000.00	42	0.7%	\$3,005,403	10.3%	\$154,597	4.9%
149	2.3%	\$5,198,545	16.6%	\$384,316	11.8%	\$25,000.01-\$50,000.00	115	2.0%	\$4,154,888	14.2%	\$311,352	9.9%
299	4.6%	\$4,798,981	15.3%	\$554,771	17.0%	\$10,000.01-\$25,000.00	271	4.7%	\$4,384,171	15.0%	\$524,092	16.7%
370	5.7%	\$2,694,737	8.6%	\$518,302	15.9%	\$5,000.01-\$10,000.00	419	7.3%	\$2,964,477	10.2%	\$598,133	19.0%
600	9.3%	\$2,235,486	7.1%	\$531,489	16.3%	\$2,500.01-\$5,000.00	656	11.4%	\$2,390,697	8.2%	\$560,680	17.8%
4,031	62.2%	\$3,275,996	10.4%	\$974,103	29.8%	\$0.01-\$2,500.00	3,491	60.5%	\$2,847,839	9.8%	\$817,707	26.0%
76	1.2%	\$0	0.0%	\$1,605	0.0%	\$0.00	46	0.8%	\$0	0.0%	\$602	0.0%
875	13.5%	\$0	0.0%	\$0	0.0%	No Claims	685	11.9%	\$0	0.0%	\$0	0.0%
6,481	100.0%	\$31,354,299	100.0%	\$3,263,380	100.0%		5,765	100.0%	\$29,185,074	100.0%	\$3,143,503	100.0%

Distribution of HCC Medical Claims Paid



HCC – High-Cost Claimant over \$100K

HCC's by Diag	nosis Grouper		
Top 10 Diagnosis Groupers	Patients	Total Paid	% Paid
Cancer	19	\$2,517,429	26.7%
Cardiac Disorders	33	\$1,311,041	13.9%
Infections	18	\$922,013	9.8%
Medical/Surgical Complications	9	\$706,680	7.5%
Hematological Disorders	13	\$633 <i>,</i> 570	6.7%
Gastrointestinal Disorders	22	\$523,375	5.5%
Neurological Disorders	22	\$473,232	5.0%
Pregnancy-related Disorders	3	\$419,934	4.4%
Renal/Urologic Disorders	17	\$370,117	3.9%
Endocrine/Metabolic Disorders	19	\$292,593	3.1%
All Other		\$1,267,615	13.4%
Overall		\$9,437,599	100.0%

Utilization Summary (p. 1 of 2)

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

		То	tal			State	Active			Non-Sta	te Active	
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year
Inpatient Summary												
# of Admits	312	293	264		269	240	221		0	0	0	
# of Bed Days	1,857	1,444	1,410		1,577	1,103	1,167		0	0	0	
Paid Per Admit	\$35,747	\$36,091	\$34,179	-5.3%	\$36 <i>,</i> 815	\$35 <i>,</i> 866	\$36 <i>,</i> 878	2.8%	\$0	\$0	\$0	0.0%
Paid Per Day	\$6,006	\$7,323	\$6 <i>,</i> 399	-12.6%	\$6,280	\$7 <i>,</i> 804	\$6,984	-10.5%	\$0	\$0	\$0	0.0%
Admits Per 1,000	55	60	61	1.7%	54	57	59	3.5%	0	0	0	0.0%
Days Per 1,000	328	297	326	9.8%	317	260	312	20.0%	0	0	0	0.0%
Avg LOS	6.0	4.9	5.3	8.2%	5.9	4.6	5.3	15.2%	0.0	0.0	0.0	0.0%
# Admits From ER	158	133	146	9.8%	129	103	120	16.5%	0	0	0	0.0%
Physician Office												
OV Utilization per Member	5.6	5.5	6.3	14.5%	5.4	5.3	6.2	17.0%	5.6	6.0	6.0	0.0%
Avg Paid per OV	\$152	\$158	\$156	-1.3%	\$153	\$163	\$151	-7.4%	\$158	\$132	\$153	15.9%
Avg OV Paid per Member	\$853	\$863	\$986	14.3%	\$829	\$866	\$932	7.6%	\$881	\$793	\$917	15.6%
DX&L Utilization per Member	9.6	11.4	11.9	4.4%	9.2	10.9	11.3	3.7%	4.7	29.3	16.7	-43.0%
Avg Paid per DX&L	\$56	\$70	\$82	17.1%	\$57	\$73	\$82	12.3%	\$40	\$17	\$32	88.2%
Avg DX&L Paid per Member	\$540	\$806	\$976	21.1%	\$524	\$794	\$924	16.4%	\$189	\$513	\$541	5.5%
Emergency Room												
# of Visits	1,021	897	848		877	763	751		0	0	0	
Visits Per Member	0.18	0.18	0.20	11.1%	0.18	0.18	0.20	11.1%	0.00	0.00	0.00	0.0%
Visits Per 1,000	180	185	196	5.9%	176	180	200	11.1%	0	0	0	0.0%
Avg Paid per Visit	\$2,080	\$2,969	\$3,235	9.0%	\$2 <i>,</i> 057	\$3 <i>,</i> 026	\$3,254	7.5%	\$0	\$0	\$0	0.0%
Urgent Care												
# of Visits	2,343	2,046	1,964		2,121	1,838	1,763		0	0	0	
Visits Per Member	0.41	0.42	0.45	7.1%	0.43	0.43	0.47	9.3%	0.00	0.00	0.00	0.0%
Visits Per 1,000	414	421	454	7.8%	426	434	471	8.5%	0	0	0	0.0%
Avg Paid per Visit	\$151	\$128	\$134	4.7%	\$153	\$130	\$136	4.6%	\$0	\$0	\$0	0.0%
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		Annualized	Annualized	Annualized	

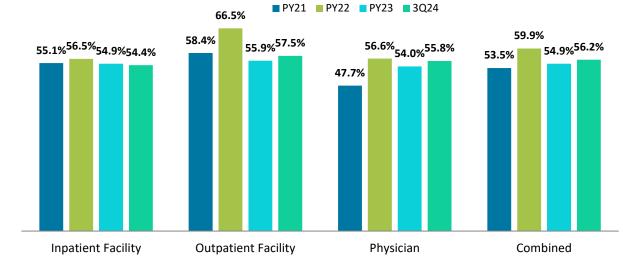
Utilization Summary (p. 2 of 2)

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

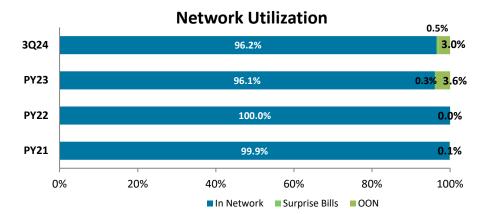
		State R	etirees			Non-State	e Retirees		
Summary	3Q22	3Q23	3Q24	Variance to Prior Year	3Q22	3Q23	3Q24	Variance to Prior Year	Peer Index
Inpatient Summary									
# of Admits	35	51	36		8	2	7		
# of Bed Days	215	334	226		65	7	17		
Paid Per Admit	\$31,922	\$38,220	\$19,164	-49.9%	\$16,574	\$8,773	\$26,178	198.4%	\$19,305
Paid Per Day	\$5,197	\$5 <i>,</i> 836	\$3,053	-47.7%	\$2,040	\$2,507	\$10,779	330.0%	\$3,615
Admits Per 1,000	59	92	69	-25.0%	91	30	128	326.7%	64
Days Per 1,000	361	605	433	-28.4%	739	103	312	202.9%	342
Avg LOS	6.1	6.5	6.3	-3.1%	8.1	3.5	2.4	-31.4%	5.3
# Admits From ER	24	29	21	-27.6%	5	1	5	0.0%	
Physician Office									
OV Utilization per Member	6.9	6.6	7.4	12.1%	7.1	6.5	6.2	-4.6%	5.2
Avg Paid per OV	\$153	\$134	\$194	44.8%	\$117	\$73	\$58	-20.5%	\$97
Avg OV Paid per Member	\$1,059	\$883	\$1,434	62.4%	\$826	\$473	\$360	-23.9%	\$502
DX&L Utilization per Member	13.3	15.6	16.2	3.8%	9.9	13.1	10.6	-19.1%	9.0
Avg Paid per DX&L	\$52	\$60	\$87	45.0%	\$49	\$37	\$39	5.4%	\$46
Avg DX&L Paid per Member	\$684	\$941	\$1,404	49.2%	\$481	\$480	\$409	-14.8%	\$412
Emergency Room									
# of Visits	125	113	95		19	21	2	_	
Visits Per Member	0.21	0.20	0.18	-10.0%	0.22	0.31	0.04	-87.1%	0.23
Visits Per 1,000	210	205	182	-11.2%	216	310	37	-88.1%	228
Avg Paid per Visit	\$2,428	\$2 <i>,</i> 933	\$3,145	7.2%	\$825	\$1,092	\$291	-73.4%	\$1,035
Urgent Care									
# of Visits	193	187	180		29	21	21		
Visits Per Member	0.32	0.34	0.34	0.0%	0.33	0.31	0.39	25.8%	0.38
Visits Per 1,000	324	339	345	1.8%	330	310	385	24.2%	379
Avg Paid per Visit	\$148	\$121	\$122	0.8%	\$63	\$62	\$54	-12.9%	\$132
	Annualized	Annualized	Annualized		Annualized	Annualized	Annualized		

Total Health Management

Provider Network Summary



In Network Discounts



Diagnosis Grouper Summary

Diagnosis Grouper	Total Paid	% Paid	Insured	Spouse	Child	Male	Female
Cancer	\$3,217,162	11.0%	\$1,958,425	\$796 <i>,</i> 459	\$462,278	\$1,525,262	\$1,691,900
Cardiac Disorders	\$2,317,536	7.9%	\$1,435,719	\$837 <i>,</i> 957	\$43 <i>,</i> 861	\$1,230,425	\$1,087,110
Gastrointestinal Disorders	\$2,147,866	7.4%	\$1,342,451	\$534,706	\$270,710	\$898,318	\$1,249,548
Musculoskeletal Disorders	\$1,826,802	6.3%	\$1,387,204	\$321,236	\$118,363	\$779,613	\$1,047,189
Health Status/Encounters	\$1,824,417	6.3%	\$1,120,563	\$229,603	\$474,252	\$669,383	\$1,155,034
Mental Health	\$1,692,434	5.8%	\$666 <i>,</i> 887	\$266,456	\$759,091	\$482,862	\$1,209,572
Neurological Disorders	\$1,489,329	5.1%	\$1,033,076	\$279,026	\$177,226	\$361,215	\$1,128,114
Trauma/Accidents	\$1,421,341	4.9%	\$951,069	\$142,796	\$327,475	\$768,318	\$653,023
Pregnancy-related Disorders	\$1,394,249	4.8%	\$707,108	\$58 <i>,</i> 862	\$628,279	\$360,478	\$1,033,771
Infections	\$1,393,134	4.8%	\$1,044,261	\$258 <i>,</i> 967	\$89 <i>,</i> 906	\$750,319	\$642,815
Pulmonary Disorders	\$1,236,345	4.2%	\$833,906	\$154,392	\$248,047	\$404,720	\$831,625
Eye/ENT Disorders	\$1,201,898	4.1%	\$760,580	\$116,871	\$324,447	\$494,061	\$707 <i>,</i> 837
Spine-related Disorders	\$1,045,766	3.6%	\$876,171	\$145,099	\$24,496	\$373,197	\$672,569
Renal/Urologic Disorders	\$960,870	3.3%	\$783 <i>,</i> 805	\$31,967	\$145,098	\$457,545	\$503 <i>,</i> 324
Medical/Surgical Complications	\$926,073	3.2%	\$898,007	\$9,800	\$18,266	\$167,572	\$758,501
Endocrine/Metabolic Disorders	\$921,365	3.2%	\$822,568	\$74,098	\$24,699	\$341,984	\$579,381
Hematological Disorders	\$778,318	2.7%	\$621,864	\$16,711	\$139,743	\$649,748	\$128,570
Gynecological/Breast Disorders	\$748,260	2.6%	\$558,092	\$108,339	\$81,830	\$7,580	\$740,680
Non-malignant Neoplasm	\$723,309	2.5%	\$548,959	\$46,389	\$127,960	\$263,273	\$460,036
Diabetes	\$542,994	1.9%	\$282,295	\$171,061	\$89 <i>,</i> 637	\$372,694	\$170,300
Dermatological Disorders	\$343,251	1.2%	\$233,254	\$44,870	\$65,127	\$171,427	\$171,824
Vascular Disorders	\$262,754	0.9%	\$215,512	\$46,741	\$501	\$162,508	\$100,245
Miscellaneous	\$255,570	0.9%	\$130,631	\$44,714	\$80,225	\$105,622	\$149,948
Abnormal Lab/Radiology	\$235,441	0.8%	\$179,991	\$47,971	\$7,479	\$94,609	\$140,832
Cholesterol Disorders	\$87,323	0.3%	\$76,610	\$8,794	\$1,920	\$40,651	\$46,673
Congenital/Chromosomal Anomalies	\$80,443	0.3%	\$13,425	\$1,070	\$65,948	\$66,138	\$14,305
Medication Related Conditions	\$64,951	0.2%	\$30,939	\$3,959	\$30,053	\$32,899	\$32,051
Allergic Reaction	\$21,738	0.1%	\$4,417	\$401	\$16,919	\$11,134	\$10,604
Dental Conditions	\$11,943	0.0%	\$5,297	\$299	\$6,348	\$6,040	\$5,904
External Hazard Exposure	\$9,792	0.0%	\$6,332	\$0	\$3,460	\$6,990	\$2,802
Social Determinants of Health	\$2,400	0.0%	\$73	\$0	\$2,327	\$0	\$2,400
Total	\$29,185,074	0.0%	\$19,529,493	\$4,799,611	\$4,855,971	\$12,056,585	\$17,128,489

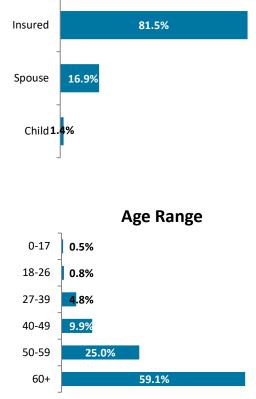
Mental Health Drilldown

	P	Y21	P	(22	P	Y23	30	Q24
Grouper	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid
Depression	625	\$833,183	505	\$720,907	454	\$529,695	380	\$422,433
Mood and Anxiety Disorders	711	\$655 <i>,</i> 375	636	\$361 <i>,</i> 898	591	\$339,214	454	\$345,927
Mental Health Conditions, Other	609	\$876 <i>,</i> 606	458	\$367 <i>,</i> 897	394	\$287,517	310	\$301,996
Alcohol Abuse/Dependence	43	\$163,692	37	\$110,736	30	\$167,010	37	\$171,646
Developmental Disorders	65	\$155,300	58	\$89,043	47	\$93,123	41	\$142,376
Bipolar Disorder	127	\$261,349	107	\$171,696	109	\$84,620	81	\$87 <i>,</i> 455
Attention Deficit Disorder	180	\$98,736	179	\$76,754	202	\$61,595	171	\$56,100
Complications of Substance Abuse	14	\$63,661	8	\$12,407	7	\$9,434	8	\$43 <i>,</i> 933
Substance Abuse/Dependence	57	\$45,039	39	\$14,853	35	\$72,695	18	\$38 <i>,</i> 840
Psychoses	7	\$55,219	6	\$9,762	9	\$6,025	6	\$24,160
Sexually Related Disorders	27	\$81,154	27	\$85,457	26	\$8,339	17	\$20,473
Sleep Disorders	187	\$38,478	148	\$43,716	141	\$25,583	102	\$20,262
Eating Disorders	24	\$370,761	23	\$51 <i>,</i> 995	19	\$32,076	15	\$7,149
Schizophrenia	9	\$10,631	6	\$2,286	9	\$13,689	7	\$5,511
Tobacco Use Disorder	38	\$4,775	36	\$4,114	42	\$3,344	35	\$3,477
Personality Disorders	14	\$20,064	17	\$47,043	15	\$7,832	4	\$697
Total		\$3,734,023		\$2,170,566		\$1,741,788		\$1,692,434

Diagnosis Grouper – Cancer

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Cancer Therapies	63	379	\$2,776,154	4.7%
Cancers, Other	77	824	\$1,443,812	2.4%
Breast Cancer	151	1,431	\$847,886	1.4%
Secondary Cancers	44	365	\$600,782	1.0%
Prostate Cancer	92	567	\$443,364	0.7%
Colon Cancer	38	452	\$355,189	0.6%
Carcinoma in Situ	77	262	\$204,487	0.3%
Lung Cancer	19	166	\$179,684	0.3%
Cervical/Uterine Cancer	42	276	\$131,252	0.2%
Lymphomas	29	336	\$127,040	0.2%
Melanoma	35	139	\$114,225	0.2%
Thyroid Cancer	35	175	\$113,777	0.2%
Leukemias	23	317	\$110,480	0.2%
Ovarian Cancer	19	173	\$103,110	0.2%
Non-Melanoma Skin Cancers	206	519	\$98,769	0.2%
Myeloma	10	199	\$82,877	0.1%
Kidney Cancer	19	178	\$63,491	0.1%
Brain Cancer	4	13	\$39,616	0.1%
Pancreatic Cancer	4	108	\$30,454	0.1%
Bladder Cancer	15	79	\$13,555	0.0%
Overall			\$7,880,005	100.0%



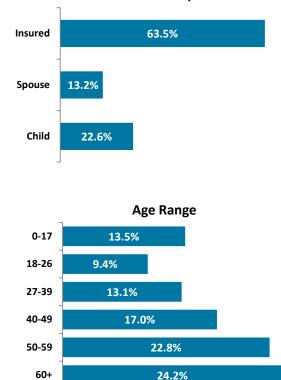


*Patient and claim counts are unique only within the category

Diagnosis Grouper – Gastrointestinal Disorders

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Abdominal Disorders	348	872	\$449 <i>,</i> 587	1.5%
GI Disorders, Other	210	609	\$357 <i>,</i> 069	1.2%
Inflammatory Bowel Disease	43	121	\$175,764	0.6%
Diverticulitis	49	140	\$163,946	0.6%
Gallbladder and Biliary Disease	34	128	\$152,156	0.5%
GI Symptoms	251	465	\$134,848	0.5%
Appendicitis	7	41	\$133,994	0.5%
Upper GI Disorders	190	406	\$132,838	0.5%
Liver Diseases	87	204	\$115,740	0.4%
Hernias	37	90	\$103,364	0.4%
Hepatic Cirrhosis	10	18	\$66 <i>,</i> 354	0.2%
Pancreatic Disorders	9	38	\$62,511	0.2%
Constipation	72	112	\$36,681	0.1%
Ostomies	8	41	\$28,109	0.1%
Hemorrhoids	32	62	\$19,909	0.1%
Peptic Ulcer/Related Disorders	8	9	\$14,998	0.1%
			\$2,147,866	7.5%

*Patient and claim counts are unique only within the category

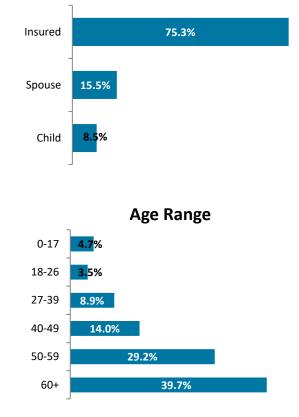


Relationship

Diagnosis Grouper – Cardiac Disorders

Diagnosis Sub-Grouper	Patients	Claims	Total Paid	% Paid
Atrial Fibrillation	53	339	\$868,107	3.0%
Myocardial Infarction	9	51	\$405 <i>,</i> 987	1.4%
Chest Pain	193	461	\$234,974	0.8%
Heart Valve Disorders	53	137	\$203,450	0.7%
Hypertension	514	1,007	\$141,226	0.5%
Congestive Heart Failure	40	210	\$114,319	0.4%
Cardiac Arrhythmias	146	296	\$108,508	0.4%
Cardiac Conditions, Other	131	267	\$75 <i>,</i> 890	0.3%
Coronary Artery Disease	77	150	\$55,216	0.2%
Pulmonary Embolism	13	41	\$44,730	0.2%
Shock	6	14	\$28,865	0.1%
Cardio-Respiratory Arrest	23	61	\$18,911	0.1%
Cardiomyopathy	14	31	\$17,352	0.1%
Overall			\$2,317,536	100.0%

*Patient and claim counts are unique only within the category

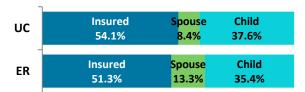


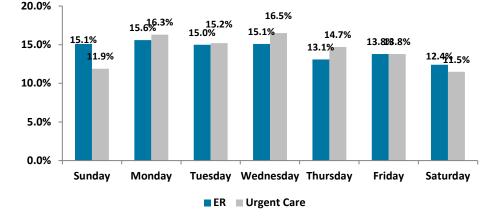
Relationship

Emergency Room / Urgent Care Summary

	30	223	30	224	Pee	r Index
ER/Urgent Care	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care
Number of Visits	897	2,046	848	1,964		
Visits Per Member	0.18	0.42	0.20	0.46	0.23	0.38
Visits/1000 Members	185	421	197	456	228	379
Avg Paid Per Visit	\$2,969	\$128	\$3,235	\$134	\$1 <i>,</i> 085	\$132
% with OV*	89.9%	88.9%	89.5%	88.2%		
% Avoidable	14.5%	43.2%	13.4%	41.0%		
Total Member Paid	\$498,378	\$97,039	\$478,153	\$966,675		
Total Plan Paid	\$2,662,933	\$262,221	\$2,743,407	\$263,145		
*looks back 12 months	Annualized	Annualized	Annualized	Annualized		

% of Paid





Visits by Day of Week

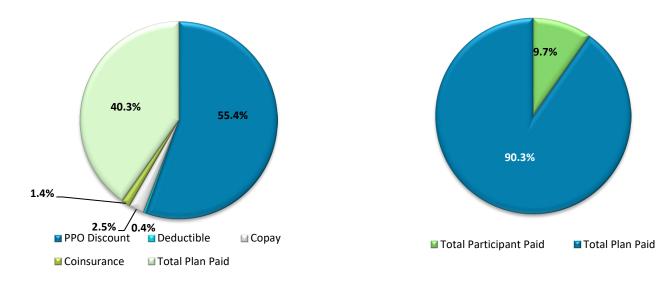
	ER / UC Visits by Relationship					
Relationship	ER	Per 1,000	Urgent Care	Per 1,000	Total	Per 1,000
Insured	435	140	1,062	342	1,497	481
Spouse	113	187	164	272	277	459
Child	300	146	738	360	1,038	506
Total	848	147	1,964	341	2,812	488

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

Savings Summary – Medical Claims

Description	Dollars	PPPM	% of Eligible
Eligible Charges	\$73,826,254	\$2,638	100.0%
PPO Discount	\$40,167,762	\$1 <i>,</i> 435	54.4%
Deductible	\$306 <i>,</i> 533	\$11	0.4%
Сорау	\$1,799,540	\$64	2.4%
Coinsurance	\$1,037,431	\$37	1.4%
Total Participant Paid	\$3,143,504	\$112	4.3%
Total Plan Paid	\$29,185,074	\$1,043	39.5%

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



Quality Metrics

Condition	Metric	#Members in Group	#Meeting Metric	#Not Meeting Metric	% Meeting Metric
	Asthma and a routine provider visit in the last 12 months	446	439	7	98.4%
Asthma	<2 asthma related ER Visits in the last 6 months	446	1	445	0.2%
	Asthma related admit in last 12 months	446	6	440	1.3%
Chronic Obstructive	No exacerbations in last 12 months	73	4	69	5.5%
Pulmonary Disease	Members with COPD who had an annual spirometry test	73	13	60	17.8%
Congostivo Hoort	Congestive Heart No re-admit to hosp with Heart Failure diag w/in 30 days of HF inpatient stay discharge		0	3	0.0%
Congestive Heart Failure	No ER Visit for Heart Failure in last 90 days	56	3	53	5.4%
ranure	Failure Follow-up OV within 4 weeks of discharge from HF admission Annual office visit Annual office visit			1	66.7%
Annual office visit		527	516	11	97.9%
Diabetes	Annual dilated eye exam	527	254	273	48.2%
	Annual foot exam	527	255	272	48.4%
	Annual HbA1c test done	527	475	52	90.1%
	Diabetes Annual lipid profile	527	424	103	80.5%
	Diabetes Annual foot exam Annual HbA1c test done Diabetes Annual lipid profile Diabetes Annual microalbumin urine screen Hyperlipidemia Annual lipid profile		392	135	74.4%
Hyperlipidemia	Hyperlipidemia Annual lipid profile	1,210	960	250	79.3%
Hyportonsion	Annual lipid profile	1,125	825	300	73.3%
Hypertension	Annual serum creatinine test	1,106	941	165	85.1%
	Well Child Visit - 15 months	51	50	1	98.0%
	Routine office visit in last 6 months (All Ages)	5,671	4,313	1,358	76.1%
	Colorectal cancer screening ages 45-75 within the appropriate time period	2,462	1,413	1,049	57.4%
Wellness	Women age 25-65 with recommended cervical cancer/HPV screening	1,655	1,310	345	79.2%
	Males age greater than 49 with PSA test in last 24 months	924	532	392	57.6%
	Routine exam in last 24 months (All Ages)	5,671	5,281	390	93.1%
	Women age 40 to 75 with a screening mammogram last 24 months	1,621	1,139	482	70.3%

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

Chronic Conditions Prevalence

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

> Two outpatient claims for the Dx on separate days of service

One ER Visit with the Dx as primary

One IP admission with the Dx as the admitting

Chronic Condition	# With Condition	% of Members	Members per 1,000	Admits per 1,000	ER Visits per 1,000	РМРҮ
Affective Psychosis	98	1.73%	17.00	246.38	449.28	\$21,485
Asthma Atrial Fibrillation	492	8.67%	85.34	147.19	467.53	\$19,294
Atrial Fibrillation	69	1.22%	11.97	260.43	480.80	\$42,762
Blood Disorders	514	9.06%	89.15	298.92	454.13	\$34,103
CAD	166	2.93%	28.79	261.06	435.10	\$32,134
COPD	71	1.25%	12.31	541.81	702.34	\$45 <i>,</i> 989
Cancer	291	5.13%	50.47	240.00	240.00	\$36,130
Chronic Pain	403	7.10%	69.90	186.59	508.54	\$25 <i>,</i> 432
Congestive Heart Failure	56	0.99%	9.71	611.97	745.01	\$41,157
Demyelinating Diseases	20	0.35%	3.47	338.98	474.58	\$38 <i>,</i> 504
Depression	766	13.50%	132.86	158.27	410.74	\$16,726
Diabetes	563	9.92%	97.65	126.11	259.63	\$26,699
ESRD	8	0.14%	1.39	1,217.39	521.74	\$85 <i>,</i> 865
Eating Disorders	43	0.76%	7.46	566.37	1,026.55	\$34,861
HIV/AIDS	8	0.14%	1.39	0.00	333.33	\$31,511
Hyperlipidemia	1,504	26.50%	260.86	91.08	207.25	\$18,418
Hypertension	1,131	19.93%	196.17	132.58	292.17	\$20,502
Immune Disorders	48	0.85%	8.33	387.10	506.20	\$63,424
Inflammatory Bowel Disease	43	0.76%	7.46	633.43	527.86	\$57 <i>,</i> 091
Liver Diseases	180	3.17%	31.22	344.06	604.20	\$35,331
Morbid Obesity	348	6.13%	60.36	175.87	327.20	\$24,528
Osteoarthritis	350	6.17%	60.71	152.16	386.57	\$21,535
Peripheral Vascular Disease	47	0.83%	8.15	160.43	417.11	\$38 <i>,</i> 504
Rheumatoid Arthritis	64	1.13%	11.10	151.62	281.59	\$35,663

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

Data Includes Medical and Pharmacy Based on 24 months incurred dates

Methodology

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

Public Employees' Benefits Program - RX Costs					
PY 2024 - T	hrough Quarter Ending	March 31, 2024			
	Express Scripts 1Q-3Q FY2024 EPO	10.20 EV2022 ED0	D:0:	% Change	
Membership Summary	IQ-3Q F 12024 EFO	1Q-3Q FY2023 EPO	Difference Membership S		
Member Count (Membership)	5,767	6,498	(731)	-11.2%	
Utilizing Member Count (Patients)	4,508	5,300	(792)	-14.9%	
Percent Utilizing (Utilization)	78.2%	81.6%	(0)	-4.2%	
Claim Summary			Claims Sum	mary	
Net Claims (Total Rx's)	94,902	102,323	(7,421)	-7.3%	
Claims per Elig Member per Month (Claims PMPM)	1.83	1.75	0.08	4.6%	
Total Claims for Generic (Generic Rx)	81,545	87,084	(5,539.00)	-6.4%	
Total Claims for Brand (Brand Rx)	13,357	15,239	(1,882.00)	-12.3%	
Total Claims for Brand w/Gen Equiv (Multisource Brand Claims)		500	15.00	3.0%	
Total Non-Specialty Claims	93,757	100,666	(6,909.00)	-6.9%	
Total Specialty Claims	1,145	1,657	(512.00)	-30.9%	
Generic % of Total Claims (GFR)	85.9%	85.1%	0.01	1.0%	
Generic Effective Rate (GCR)	99.4%	99.4%	(0.00)	-0.1%	
Mail Order Claims Mail Penetration Rate*	27,959 32.4%	28,562 31.0%	(603.00) 0.01	-2.1% 1.4%	
	52.170	51.070			
Claims Cost Summary	\$15 265 026	\$14.017.070	Claims Cost S	ummary 2.3%	
Total Prescription Cost (Total Gross Cost) Total Generic Gross Cost	\$15,265,936 \$1,434,234	\$14,917,970 \$1,577,469	\$347,966.00 (\$143,235.00)	-9.1%	
Total Brand Gross Cost	\$13,831,701	\$13,340,501	\$491,200.00	-9.1%	
Total MSB Gross Cost	\$300,275	\$15,540,501 \$296,707	\$3,568.00	1.2%	
Total Ingredient Cost	\$14,862,685	\$14,784,656	\$78,029.00	0.5%	
Total Dispensing Fee	\$390,394	\$118,673	\$271,721.00	229.0%	
Total Other (e.g. tax)	\$12,856	\$14.642	(\$1,786.00)	-12.2%	
Avg Total Cost per Claim (Gross Cost/Rx)	\$160.86	\$145.79	\$15.07	10.3%	
Avg Total Cost for Generic (Gross Cost/Generic Rx)	\$17.59	\$18.11	(\$0.52)	-2.9%	
Avg Total Cost for Brand (Gross Cost/Brand Rx)	\$1,035.54	\$875.42	\$160.12	18.3%	
Avg Total Cost for MSB (MSB Gross Cost/MSB ARx)	\$583.06	\$593.41	(\$10.35)	-1.7%	
Member Cost Summary			Member Cost S	Summary	
Total Member Cost	\$2,287,037	\$2,396,124	(\$109,087.00)	-4.6%	
Total Copay	\$2,285,109	\$2,393,649	(\$108,540.00)	-4.5%	
Total Deductible	\$1,929	\$2,474	(\$545.00)	0.0%	
Avg Copay per Claim (Copay/Rx)	\$24.08	\$23.39	\$0.69	2.9%	
Avg Participant Share per Claim (Copay+Deductible/RX)	\$24.10	\$23.42	\$0.68	2.9%	
Avg Copay for Generic (Copay/Generic Rx)	\$6.88	\$6.67	\$0.21	3.1%	
Avg Copay for Brand (Copay/Brand Rx)	\$129.21	\$119.12	\$10.09	8.5%	
Avg Copay for Brand w/ Generic Equiv (Copay/Multisource Rx)		\$70.83	(\$1.63)	-2.3%	
Net PMPM (Participant Cost PMPM)	\$44.06	\$40.97	\$3.09	7.5%	
Copay % of Total Prescription Cost (Member Cost Share %)	15.0%	16.1%	-1.1%	-6.7%	
Plan Cost Summary			Plan Cost Su		
Total Plan Cost (Plan Cost)	\$12,978,898	\$12,521,847	\$457,051.00	3.7%	
Total Non-Specialty Cost (Non-Specialty Plan Cost)	\$6,236,188	\$5,711,902	\$524,286.00	9.2%	
Total Specialty Drug Cost (Specialty Plan Cost)	\$6,742,711	\$6,809,944	(\$67,233.00)	-1.0%	
Avg Plan Cost per Claim (Plan Cost/Rx)	\$136.76	\$122.38	\$14.39	11.8%	
Avg Plan Cost for Generic (Plan Cost/Generic Rx)	\$10.71	\$11.44	(\$0.73)	-6.4%	
Avg Plan Cost for Brand (Plan Cost/Brand Rx)	\$906.33	\$756.30	\$150.03	19.8%	
Avg Plan Cost for MSB (MSB Plan Cost/MSB ARx) Net PMPM (Plan Cost PMPM)	\$513.86 \$250.06	\$522.59 \$214.11	(\$8.73) \$35.05	-1.7%	
Net PMPM (Plan Cost PMPM) PMPM without Specialty (Non-Specialty PMPM)	\$250.06 \$120.15	\$214.11 \$97.67	\$35.95 \$22.48	16.8%	
PMPM without Specialty (Non-Specialty PMPM) PMPM for Specialty Only (Specialty PMPM)	\$120.15 \$129.91	\$97.67 \$116.45	\$22.48 \$13.46	23.0%	
Rebates Received (Q1-Q3 FY2023 actual)	\$129.91	\$116.43	\$159,354.09	11.6% 3.7%	
Net PMPM (Plan Cost PMPM factoring Rebates)	\$163.19	\$139.74	\$139,334.09	16.8%	
PMPM without Specialty (Non-Specialty PMPM)	\$76.00	\$54.31	\$0.92	5.0%	
PMPM for Specialty Only (Specialty PMPM)	\$92.00	\$89.06	\$2.94	3.3%	

Appendix D

Index of Tables Health Plan of Nevada –Utilization Review for PEBP January 1, 2024 – March 31, 2024

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PRESCRIPTION DRUG COSTS

Prescription Drug Cos	t Comparison	 6
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Power Of Partnership.

Quarterly Health Plan Performance Review Prepared for PEBP Building health ownership together Claims Incurred Data:

July 1, 2022 – March. 2023 Q3– Prior Period July 1, 2023 – March 2024 Q3– Current Period *Paid through May 2024 *Peer – Non-Gaming *Data only contains <u>60-day claims run out</u>

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State of Nevada

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Executive Summary

Spend and Utilization

Executive Summary Utilization & Spend UnitedHealthcare*

Population

- -2.7% decrease for employees
- -3.2% decrease for members

Medical Paid PMPM

- 1.3% increase in overall medical paid from prior period
- 4.7% increase in non-Catastrophic spend
- · -13.1% decrease in Catastrophic spend

High-Cost Claimants

- 53 HCC in 2Q23, -7.0% decrease from prior period
- % of HCC spend saw a small decrease of -14.4%
- Avg. Paid per case increased -13.1%

Emergency Room

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

Urgent Care

- Urgent Care visits per 1,000 members increased by 2.6%
- Avg. paid per Urgent care visit increased 8.0%

Rx Drivers

- Rx Net Paid PMPM increased 5.8%
- Specialty Spend decreased -10.2%
- Specialty Rx driving 37.3% of total Rx Spend

Overall Medical / Rx

• Total Medical/Rx increased 2.8% on PMPM basis

	Claims Paid by Age Group													
		July 2022	2 - March 2023	3 Q 3				July	/ 2023 - Marc	ch 2024	Q3		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	\$302,798	\$605	\$1,396	\$3	\$304,195	\$608	\$442,661	\$1,230	\$1,201	\$3	\$443,862	\$1,233	45.9%	19.5%
01	\$248,133	\$541	\$3,745	\$8	\$251,879	\$550	\$140,495	\$314	\$2,180	\$5	\$142,674	\$319	-41.9%	-40.3%
02-04	\$552,113	\$322	\$14,526	\$8	\$566,639	\$331	\$470,586	\$326	\$12,198	\$8	\$482,783	\$334	1.1%	-0.4%
05-09	\$668,756	\$207	\$52,714	\$16	\$721,470	\$223	\$553,295	\$192	\$59,967	\$21	\$613,262	\$213	-7.0%	27.9%
10-14	\$705,238	\$172	\$268,489	\$65	\$973,728	\$237	\$680,661	\$170	\$124,503	\$31	\$805,164	\$201	-1.0%	-52.4%
15-19	\$845,954	\$179	\$165,010	\$35	\$1,010,964	\$214	\$872,765	\$187	\$209,478	\$45	\$1,082,243	\$232	4.7%	28.8%
20-24	\$602,588	\$145	\$156,344	\$38	\$758,932	\$183	\$892,162	\$205	\$79,314	\$18	\$971,476	\$224	41.3%	-51.6%
25-29	\$1,110,968	\$424	\$267,600	\$102	\$1,378,568	\$526	\$1,009,992	\$432	\$153,411	\$66	\$1,163,404	\$497	1.7%	-35.8%
30-34	\$1,048,375	\$337	\$438,069	\$141	\$1,486,444	\$478	\$858,348	\$314	\$403,574	\$147	\$1,261,923	\$461	-7.0%	4.7%
35-39	\$1,194,240	\$319	\$708,303	\$189	\$1,902,542	\$509	\$1,224,666	\$345	\$909,584	\$256	\$2,134,250	\$601	7.9%	35.2%
40-44	\$1,291,342	\$322	\$590,612	\$147	\$1,881,953	\$470	\$1,721,338	\$455	\$482,667	\$127	\$2,204,005	\$582	41.0%	-13.5%
45-49	\$1,850,677	\$367	\$829,975	\$164	\$2,680,652	\$531	\$1,728,110	\$358	\$1,178,238	\$244	\$2,906,348	\$602	-2.4%	48.4%
50-54	\$2,673,946	\$473	\$1,817,348	\$321	\$4,491,294	\$794	\$1,722,540	\$308	\$1,567,466	\$280	\$3,290,006	\$589	-34.8%	-12.7%
55-59	\$2,311,115	\$422	\$1,758,379	\$321	\$4,069,493	\$742	\$2,111,989	\$376	\$2,028,152	\$361	\$4,140,141	\$737	-10.8%	12.6%
60-64	\$3,052,616	\$574	\$1,754,917	\$330	\$4,807,533	\$905	\$2,869,576	\$534	\$1,560,315	\$290	\$4,429,891	\$824	-7.0%	-12.1%
65+	\$2,024,250	\$538	\$1,202,041	\$319	\$3,226,291	\$857	\$2,781,230	\$732	\$1,494,698	\$393	\$4,275,928	\$1,125	36.1%	23.1%
Total	\$20,483,110	\$355	\$10,029,468	\$174	\$30,512,578	\$529	\$20,080,415	\$360	\$10,266,944	\$184	\$30,347,359	\$544	-0.5%	2.8%

Financial Summarv

I Inited I lealthcare

Financial and Demographic (July 2023 thru March 2024 Q3)

	Total				State Act	ive		Re	etire
ru 3Q22	Thru 3Q23	Thru 3Q24		Thru 3Q22	Thru 3Q23	Thru 3Q24		Thru 3Q22	Tł
3,793	3,636	3,539	-2.7%	3,322	3,212	3,099	-3.5%	471	
6,695	6,403	6,196	-3.2%	6,075	5,829	5,593	-4.0%	620	
1.8	1.8	1.8	-0.6%	1.8	1.8	1.8	-0.6%	1.3	
<mark>,1</mark> 88,250	\$20,483,110	\$20,080,415	-2.0%	\$26,993,296	\$18,274,176	\$17,080,513	-6.5%	\$4,194,954	\$2
2,0 <mark>8</mark> 7,757	\$1,394,423	\$1,693,072	21.4%	\$1,468,124	\$1,042,020	\$1,246,829	19.7%	\$619,633	
\$ 10,962	\$7,511	\$7,565	0.7%	\$10,823	\$7,578	\$7,334	-3.2%	\$11,948	
\$6,211	\$4,265	\$4,321	1.3%	\$5,919	\$4,175	\$4,064	-2.7%	\$9,081	
\$914	\$626	\$630	0.7%	\$902	\$632	\$611	-3.2%	\$996	
\$518	\$355	\$360	1.3%	\$493	\$348	\$339	-2.7%	\$757	
<mark>7</mark> 5	57	53	-7.0%	60	51	40	-21.6%	15	
<mark>221</mark> ,758	\$117,404	\$108,048	-8.0%	\$237,436	\$115,925	\$106,865	-7.8%	\$159,045	\$
<mark>52.</mark> 9%	32.7%	28.4%	-13.1%	52.5%	32.4%	25.0%	-22.8%	55.1%	
\$2,907	\$1,123	\$1,195	6.5%	\$2,725	\$1,295	\$1,122	-13.3%	\$4,694	
\$ 1,149	\$1,232	\$1,111	-9.9%	\$1,115	\$1,111	\$932	-16.1%	\$1,369	
\$2,155	\$1,910	\$2,015	5.5%	\$2,084	\$1,306	\$1,297	-0.6%	\$2,965	
\$ 6,211	\$4,265	\$4,321	1.3%	\$5,924	\$4,180	\$4,072	-2.6%	\$9,028	

Paid Claims by Claim Type



			N	let Paid Claims	s - Total				
				Total Particip	ants				
		July - March	2023 Q3			July - March	1 2024 Q3		
	Actives	Pre-Medicare	Medicare	Total	Actives	Pre-Medicare	Medicare	Total	
Medical					l				
InPatient	\$4,376,828	\$119,560	\$895,073	\$5,391,461	\$3,954,823	\$331,945	\$1,268,189	\$5,554,957	3.0%
OutPatient	\$13,300,930	\$661,541	\$1,129,178	\$15,091,649	\$12,569,785	\$442,509	\$1,513,164	\$14,525,458	-3.8%
Total - Medical	\$17,677,759	\$781,101	\$2,024,250	\$20,483,110	\$16,524,608	\$774,454	\$2,781,353	\$20,080,415	-2.0%
			N	let Paid Claims	a - Total				
				Total Particip	oants				
		July - March	2023 Q3			July - March	1 2024 Q3		
	Actives	Pre-Medicare	Medicare	Total	Actives	Pre-Medicare	Medicare	Total	

\$355

\$1,795

\$325

\$678

\$732

\$693

Medical PMPM

\$335

1.3%

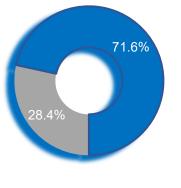
\$360

Cost Distribution – Medical Claims > \$50K

UnitedHealthcare®

July - Mar	ch 2023 Q3				July - March 202				
⁻ otal Paid	% of Paid	Subscriber Paid	% of Subscribers paid	Paid Claims	# of Members	% of Population	Total Paid	% of Paid	
1,517,931	7.4%	\$750,657	49.5%	> \$100k	6	0.1%	\$975,449	4.9%	
<mark>2,1</mark> 46,677	10.5%	\$1,537,324	71.6%	\$50k- \$100k	17	0.3%	\$1,332,139	6.6%	
1,982,851	9.7%	\$1,448,813	73.1%	\$25k - \$50k	73	1.2%	\$2,776,249	13.8%	
<mark>3,5</mark> 17,886	17.2%	\$2,425,483	68.9%	\$10k - \$25k	179	2.9%	\$3,714,569	18.5%	
2,358,896	11.5%	\$1,678,147	71.1%	\$5k - \$10k	294	4.7%	\$2,564,899	12.8%	

% Paid Attributed to Catastrophic Cases



nuc > \$50k - Anky Chapter Conditions - The March 2024 Q5										
Condition	# of Patients	Total Paid	% of Med Paid							
Diseases of the circulatory system	12	\$1,104,754	5.5%							
Neoplasms	11	\$989,876	4.9%							
Complications of pregnancy	4	\$663,180	3.3%							
Injury and poisoning	4	\$483,994	2.4%							
Diseases of the digestive system	3	\$471,965	2.3%							

HCC > \$50k - AHRO Chapter Conditions - Thru March 2024 O3

HCC NON HCC

Utilization Summary



			Utiliza	tion Summa	ry				
		Total		St	ate Active		Retiree	State/Non-S	tate
	July-March 3Q23	July - March 3Q24		July - March 3Q23	July - March 3Q24		July - March 3Q23	July - March 3Q24	
Inpatient									
# of Admits	265	310	17.1%	242	253	4.6%	23	57	147.4%
# of Bedays	1,513	1,767	16.8%	1,410	1,279	-9.3%	103	488	375.4%
Avg. Paid per Admit	\$20,468	\$18,044	-11.8%	\$20,552	\$17,691	-13.9%	\$19,592	\$19,604	0.1%
Avg. Paid per Day	\$3,583	\$3,166	-11.6%	\$3,523	\$3,497	-0.7%	\$4,410	\$2,296	-47.9%
Admits Per K	55.2	66.7	21.0%	55.3	60.3	9.0%	53.6	126.4	136.0%
Days Per K	315.1	380.3	20.7%	322.6	305.0	-5.5%	238.0	1,079.3	353.4%
ALOS	5.7	5.7	-0.2%	5.8	5.1	-13.3%	5.5	5.9	7.3%
Admits from ER	135	150	11.1%	119	119	0.0%	16	31	93.8%
Physician Office Visits									
Per Member Per Year	2.3	2.3	-2.2%	2.3	2.2	-1.5%	2.7	2.5	-8.3%
Paid Per Visit	\$149	\$152	2.3%	\$154	\$158	2.8%	\$107	\$105	-2.1%
Net Paid PMPM	\$29	\$29	0.1%	\$29	\$30	1.2%	\$24	\$22	-10.2%
Emergency Room									
# of Visits	585	570	-2.6%	532	520	-2.3%	53	50	-5.7%
Visits Per K	121.8	122.7	0.7%	121.7	124.0	1.9%	123.0	110.7	-10.0%
Avg Paid Per Visit	\$2,573	\$3,072	19.4%	\$2,625	\$3,114	18.7%	\$2,057	\$2,635	28.1%
Urgent Care									
# of Visits	3,036	3,014	-0.7%	2,755	2,706	-1.8%	281	308	9.6%
Visits Per K	632.2	648.6	2.6%	630.2	645.1	2.4%	652.2	681.8	4.5%
Avg Paid Per Visit	\$119	\$126	5.6%	\$92	\$93	1.0%	\$80	\$91	13.3%
*Not Representative of all util	ization						*Data ba	sed on medical	spend only

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Diagnosis Grouper Summary – Top 25

Top 25 AHRQ Category	Total Paid	% Paid		Insured	Spouse	Dependent	Male	Female	Unassigned
Other nutritional; endocrine; and metabolic disorders	\$605,989	3.8%		\$386,071	\$183,783	\$36,135	\$81,162	\$524,826	\$0
Spondylosis; intervertebral disc disorders; other back proble	\$515,532	3.3%		\$392,281	\$105,967	\$17,284	\$231,917	\$283,615	\$0
Other nervous system disorders	\$439,560	2.8%		\$138,174	\$290,407	\$10,979	\$77,356	\$362,204	\$0
Disorders usually diagnosed in infancy childhood or adolesc	\$438,942	2.8%		\$0	\$0	\$438,942	\$347,157	\$91,784	\$0
Cancer of breast	\$425,478	2.7%		\$286,058	\$139,421	\$0	\$0	\$425,478	\$0
Osteoarthritis	\$418,442	2.6%		\$374,433	\$44,009	\$0	\$142,173	\$276,269	\$0
Diabetes mellitus with complications	\$345,230	2.2%		\$268,957	\$54,591	\$21,682	\$203,596	\$141,634	\$0
Mood disorders	\$314,829	2.0%		\$134,434	\$20,475	\$159,921	\$58,693	\$256,136	\$0
Septicemia (except in labor)	\$283,392	1.8%		\$174,237	\$109,133	\$23	\$61,215	\$222,177	\$0
Liveborn	\$281,834	1.8%		\$0	\$0	. ,	\$272,994	\$8,840	\$0
Coronary atherosclerosis and other heart disease	\$271,262	1.7%		\$69,335	\$201,928	\$0	\$231,306	\$39,956	\$0
Other screening for suspected conditions (not mental disord	\$261,866	1.7%		\$212,193	\$44,637	\$5,036	\$87,951	\$173,915	
Cancer of esophagus	\$237,601	1.5%		\$0	\$237,601	\$0	\$237,601	\$0	\$0
Noninfectious gastroenteritis	\$233,692	1.5%		\$52,137	\$173,021	\$8,534	\$196,696	\$36,996	\$0
Peri-; endo-; and myocarditis; cardiomyopathy (except that	\$233,331	1.5%		\$233,331	\$0	\$0	\$202,303	\$31,027	\$0
Nonspecific chest pain	\$230,509	1.5%		\$140,020	\$74,627	\$15,862	\$119,865	\$110,644	\$0
Cardiac dysrhythmias	\$218,176	1.4%		\$188,154	\$24,896	\$5,126	\$115,768	\$102,407	\$0
Acute cerebrovascular disease	\$206,423	1.3%		\$172,213	\$33,818	\$392	\$147,748	\$58,675	\$0
Abdominal pain	\$199,514	1.3%		\$143,591	\$24,171	\$31,751	\$65,434	\$134,079	\$0
Multiple sclerosis	\$190,055	1.2%		\$190,055	\$0		\$0	\$190,055	
Medical examination/evaluation	\$187,213	1.2%		\$40,618	\$7,271	\$139,324	\$80,564	\$106,649	
Anxiety disorders	\$187,173	1.2%		\$110,480	\$20,502	\$56,191	\$49,373	\$137,800	\$0
Other complications of pregnancy	\$184,779	1.2%		\$128,017	. ,	\$26,466	\$0	\$184,779	\$0
Other female genital disorders	\$181,660	1.1%		\$168,194	\$10,536	\$2,931	\$0	\$181,660	
Urinary tract infections	\$180,643	1.1%	JL	\$92,070	\$56,769	\$31,804	\$66,399	\$114,244	\$0

*Not Representative of all utilization

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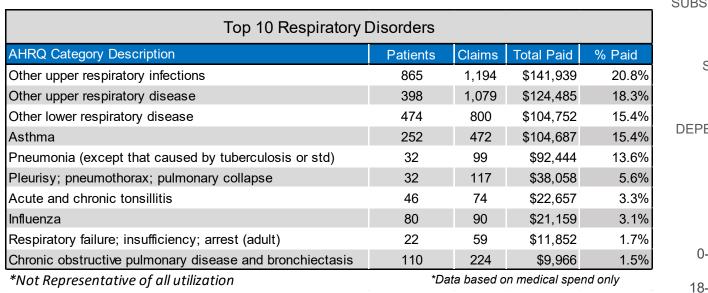


Top 10 Mental Health									
	July - Ma	rch 3Q23	July - Mai	rch 2Q24					
AHRQ Category Description	Patients	Total Paid	Patients	Total Paid					
Disorders usually diagnosed in infancy childhood	39	\$372,816	43	\$438,942					
Mood disorders	412	\$285,852	372	\$314,829					
Anxiety disorders	391	\$157,998	408	\$187,173					
Alcohol-related disorders	14	\$14,664	29	\$114,243					
Adjustment disorders	129	\$50,308	148	\$70,169					
Attention-deficit conduct and disruptive behavior disorders	132	\$26,639	152	\$41,989					
Suicide and intentional self-inflicted injury	13	\$21,932	9	\$26,700					
Schizophrenia and other psychotic disorders	12	\$21,323	14	\$24,571					
Miscellaneous mental health disorders	44	\$36,028	52	\$9,826					
Substance-related disorders	32	\$49,038	32	\$9,815					
*Not Representative of all utilization		*Data base	d on medical s	pend only					

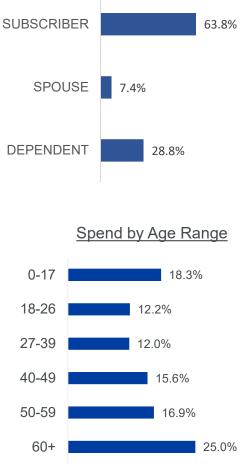
*Not Representative of all utilization

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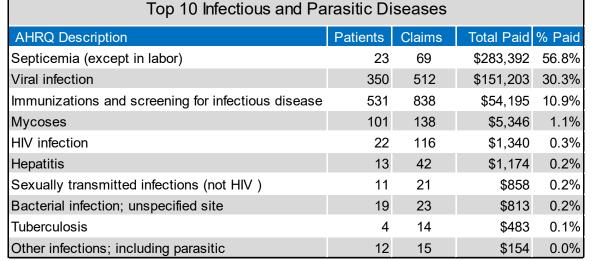
UnitedHealthcare®



Spend by Relationship

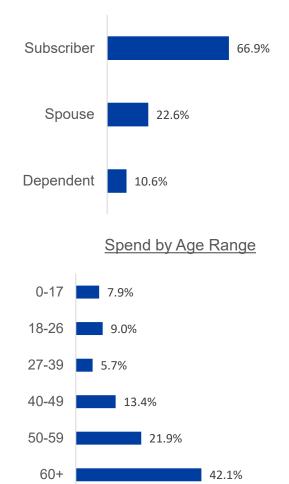


Infections



*Not Representative of all utilization

*Data based on medical spend only

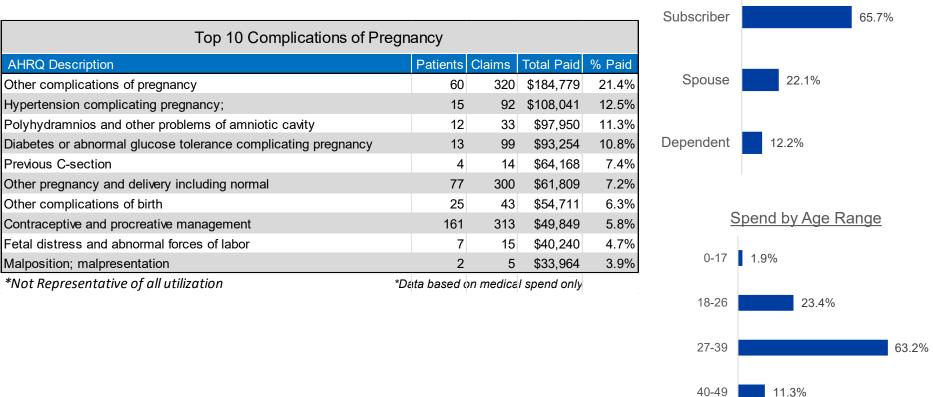


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Spend by Relationship

Pregnancy Related Disorders

UnitedHealthcare



Spend by Relationship

*Not Representative of all utilization

AHRQ Description

Previous C-section

Other complications of birth

Malposition; malpresentation

50-59

0.2%

Emergency Room and Urgent Care

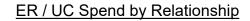


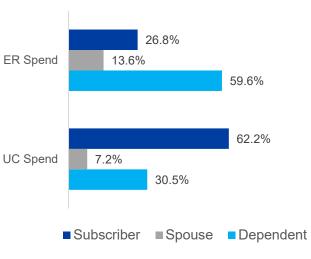
Metric	July - I	March 3Q23	July - N	larch 3Q24	Peer		
	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care	
# of Visits	585	3,036	570	3,014			
Visits Per Member	0.09	0.47	0.09	0.49	0.089	0.02	
Visits Per K	121.8	632.2	122.7	648.6	90.1	387.1	
Avg. Paid Per Visit	\$2,573	\$112	\$3,072.22	\$121	\$2,619	\$117	

*Not Representative of all utilization

*Data based on medical spend only

Emergency Room and Urgent Care Visits by Relationships - 3Q24									
Relationship	ER Visits	ER Per K	UC Visits	UC Per K					
Member	173	37.2	1,916	412.3					
Spouse	81	17.4	289	62.2					
Dependent	316	68.0	809	174.1					
Total	570	122.7	3,014	648.6					





Clinical Conditions by Medical Spend

Top 15 Common Condition	# of Members	% of Members	Members Per K	PMPM
Mental Disorders	745	12.0%	120.2	\$16.63
Intervertebral Disc Disorders	544	8.8%	87.8	\$9.25
Diabetes with complications	66	1.1%	10.7	\$7.63
Breast Cancer	437	7.1%	70.5	\$6.19
Hypertension	98	1.6%	15.8	\$4.17
Coronary Atherosclerosis	585	9.4%	94.4	\$4.86
Diabetes without complications	436	7.0%	70.4	\$0.57
Asthma	250	4.0%	40.4	\$1.76
Prostate Cancer	8	0.1%	1.3	\$1.88
Acute Myocardial Infarction	24	0.4%	3.9	\$2.04
Chronic Renal Failure	49	0.8%	7.9	\$0.33
Congestive Heart Failure (CHF)	72	1.2%	11.6	\$0.94
Colon Cancer	4	0.1%	0.6	\$0.18
COPD	109	1.8%	17.6	\$0.05
Cervical Cancer	34	0.5%	5.5	\$0.65

*Not Representative of all utilization

*Data based on medical spend only

UnitedHealthcare

Pharmacy Drivers

	July - March 3Q23	July - March 3Q24	Δ
Enrolled Members	6,403	6,196	-3.2%
Average Prescriptions PMPY	17.0	17.2	1.2%
Formulary Rate	89.8%	87.9%	-2.1%
Generic Use Rate	84.7%	85.2%	0.6%
Generic Substitution Rate	98.3%	98.3%	0.0%
Avg Net Paid per Prescription	\$123	\$129	4.5%
Net Paid PMPM	\$174	\$184	5.8%

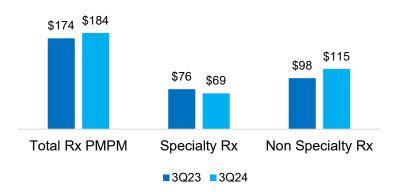
Pharmacy Performance

- Rx spend increased of **5.8%**, (**\$10 PMPM**) from prior period
- Avg. paid per Script increased 4.5% (\$6 PMPM) year over year
- Specialty Rx spend driving 37.3% of Rx Spend
- Specialty Rx spend decreased **-10.2%** from prior period Specialty Rx Drivers:

Ozempic (Antidiabetic) Spend up 44.1% Jardiance (Antidiabetic) Spend up 17.3%

• Tier 1 Rx drove **75.4%** of total claim volume, but only accounts for **9.6%** of overall Rx Spend

Total Rx Spend by Benefit and Type



Top 5 Therapeutic Classes by Spend

- ANTIDIABETICS
- DERMATOLOGICALS
- ANALGESICS
- ANTINEOPLASTICS



