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JOY GRIMMER Board Chair

AGENDA ITEM

Х	Action Item
	Information Only

Date: March 20, 2025

Item Number: 4.2.2

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

This report addresses medical, dental, and prescription drug utilization for PY 2025 period ending December 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 Q2 Plan Year 2025 utilization data.

Executive Summary

CONSUMER DRIVEN HEALTH PLAN (CDHP)

The Consumer Driven Health Plan (CDHP) experience for Q2 of Plan Year 2025 compared to Q2 of Plan Year 2024 is summarized below.

- Population:
 - 3.8% decrease for primary participants
 - 5.5% decrease for primary participants plus dependents (members)
- Medical Cost:
 - 6.2% increase for primary participants
 - 8.1% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 59 High-Cost Claimants accounting for 27.9% of the total plan paid for Q2 of Plan Year 2025
 - o 9.5% increase in High-Cost Claimants per 1,000 members
 - 4.7% increase in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - Health Status & Health Services (\$6.6 million)
 - Circulatory System (\$4.5 million)
 - Musculoskeletal System (\$4.3 million)
- Emergency Room:
 - ER visits per 1,000 members increased by 2.2%
 - Total paid per ER visit decreased by 1.2%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased 0.1%
 - Average paid per Urgent Care visit increased 17.0% (increase from \$31 to \$36)
- Network Utilization:
 - o 97.5% of claims are from In-Network providers
 - Q2 of Plan Year 2025 In-Network utilization increased 0.3% over PY 2024
 - o Q2 of Plan Year 2025 In-Network discounts increased 0.4% over PY 2024
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims decreased 2.1%
 - Total Gross Claims Costs increased 4.5% (\$1.0 million)
 - Average Total Cost per Claim increased 6.7%
 - From \$125.69 to \$134.11
 - Member:
 - Total Member Cost increased 7.1%
 - Average Participant Share per Claim increased 9.4
 - Net Member PMPM increased 13.5%
 - From \$32.76 to \$37.20

- o Plan
 - Total Plan Cost increased 3.7%
 - Average Plan Share per Claim increased 5.9%
 - Net Plan PMPM increased 10.0%
 - From \$114.66 to \$126.09
 - Net Plan PMPM factoring rebates increased 1.9%
 - From \$55.52 to \$56.55

LOW DEDUCTIBLE PPO PLAN (LDPPO)

The Low Deductible PPO Plan (LDPPO) experience for Q2 of Plan Year 2025 compare to QC of Plan Year 2024 is summarized below.

- Population:
 - 25.6% increase for primary participants
 - 24.0% increase for primary participants plus dependents (members)
- Medical Cost:
 - 21.6% increase for primary participants
 - 23.1% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 51 High-Cost Claimants accounting for 19.6% of the total plan paid for Q2 of Plan Year 2025
 - o 58.1 increase in High-Cost Claimants per 1,000 members
 - 0 1.7% increase in average cost of High-Cost Claimant paid.
- Top three highest cost clinical classifications include:
 - Health Status & Services (\$6.3 million)
 - Musculoskeletal System (\$5.0 million)
 - Neoplasms (Cancer) (\$4.7 million)
- Emergency Room:
 - ER visits per 1,000 members increased 4.5%
 - Average paid per ER visit increased 6.2%
- Urgent Care:
 - Urgent Care visits per 1,000 members decreased by 1.1%
 - Average paid per Urgent Care visit increased 9.6% (increased from \$97 to \$107)
- Network Utilization:
 - o 97.9% of claims are from In-Network providers
 - Q2 of Plan Year 2025 In-Network utilization did not change over PY 2024
 - Q2 of Plan Year 2025 In-Network discounts increased 0.2% from 65.2% to 65.4%
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims increased 29.4%
 - Total Gross Claims Costs increased 36.5% (\$7.2 million)
 - Average Total Cost per Claim increased 5.4%
 - From \$145.70 to \$153.62
 - Member:

- Total Member Cost increased 37.0%
- Average Participant Share per Claim increased 5.9%
- Net Member PMPM increased 10.5%
 - From \$24.45 to \$27.01

o Plan

- Total Plan Cost increased 36.4%
- Average Plan Share per Claim increased 5.4%
 - Net Plan PMPM increased 9.9%
 - From \$152.00 to \$167.08
- Net Plan PMPM factoring rebates increased 3.5%
 - From \$111.75 to \$115.67

PEBP PREMIER PLAN (EPO)

The PEBP Premier Plan (EPO) experience for Q2 of Plan Year 2025 compared to Q2 of Plan Year 2024 is summarized below.

- Population:
 - 9.4% decrease for primary participants
 - 9.7% decrease for primary participants plus dependents (members)
- Medical Cost:
 - 42.4% increase for primary participants
 - o 42.9% increase for primary participants plus dependents (members)
- High-Cost Claims:
 - There were 31 High-Cost Claimants accounting for 40.3% of the total plan paid for Q2 Plan Year 2025
 - o 63.4% increase in High-Cost Claimants per 1,000 members
 - 65.3% increase in average cost of High-Cost Claimant paid
- Top three highest cost clinical classifications include:
 - Perinatal Conditions (\$3.2 million)
 - Neoplasms (cancer) (\$3.2 million)
 - Circulatory System (\$2.8 million)
- Emergency Room:
 - ER visits per 1,000 members increased 4.8%
 - Average paid per ER visit increased 10.0%
- Urgent Care:
 - Urgent Care visits per 1,000 members increased 5.9%
 - Average paid per Urgent Care visit increased 3.1%
- Network Utilization:
 - o 97.0% of claims are from In-Network providers
 - In-Network utilization increased 0.7%
 - In-Network discounts decreased 3.2% from 56.2% to 53.0%
- Prescription Drug Utilization:
 - Overall:
 - Total Net Claims decreased 4.0%
 - Total Gross Claims Costs increased 5.8% (\$0.5 million)

- Average Total Cost per Claim increased 9.2%
 - From \$158.71 to \$173.35
- Member:
 - Total Member Cost increased 11.9%
 - Average Participant Share per Claim increased 16.6%
 - Net Member PMPM increased 23.8%
 - From \$38.29 to \$47.41
- o Plan
 - Total Plan Cost increased 3.7%
 - Average Plan Share per Claim increased 8.1%
 - Net Plan PMPM increased 14.8%
 - From \$250.51 to \$287.60
 - Net Plan PMPM factoring rebates increased 0.7%
 - From \$169.05 to \$170.23

DENTAL PLAN

The Dental Plan experience for Q2 of Plan Year 2025 is summarized below.

- Dental Cost:
 - Total of \$14,534,236 paid for Dental claims.
 - Preventative claims account for 24% (\$3.4 million)
 - Basic claims account for 36% (\$5.2 million)
 - Major claims account for 19% (\$2.8 million)
 - Diagnostic claims account for 21% (\$3.1 million)

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 second quarter of Plan Year 2025. The CDHP total plan paid costs increased 6.2% over the same time as Plan Year 2024. The LDPPO total plan paid costs increased 5.9% over Q2 of Plan Year 2024. The EPO total plan paid costs increased 42.4% over Q2 of Plan Year 2024. The change in the plan paid year over year is based on the per employee per year costs (PEPY). For HMO utilization and cost data please see the report provided in Appendix D.

Appendix A

Index of Tables UMR Inc. – CDHP Utilization Review for PEBP July 1, 2024 – December31, 2024

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PRESCRIPTION DRUG COSTS

Prescription Drug	Cost Comparison	
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Public Employees' Benefits Program

Quarterly Plan Performance Review HDHP Plan • 2025-2Q



RPG 4.81 • Run Date: 2/27/2025

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Report Criteria & Contents



Experience Periods*

> 2025 Plan Year (Current)

2025-2Q.1st two Quarters: Claims Paid 7/1/2024 - 12/31/2024

> 2024 Plan Year

2024-2Q.1st two Quarters: Claims Paid 7/1/2023 - 12/31/2023 2024 Full Year: Claims paid 7/1/2023 - 6/30/2024

> 2023 Plan Year

2023-2Q.1st two Quarters: Claims Paid 7/1/2022 - 12/31/2022 2023 Full Year: Claims paid 7/1/2022 - 6/30/2023

Group Data

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

Normative Comparison Data

- ➢ Norm Groups: UMR Book of Business in InfoPort[™]
- > Composition: 4,609 groups with approximately 6.5 million members
- Norm Period matches Current Year: Claims Paid 7/1/2024 12/31/2024

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

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Executive Summary





Cost Drivers

- Overall Cost Trend based on Medical Paid PEPY: +6.2%
- High-Cost Claimants Paid PMPM trend: +14.6%; Non HCCs trend: +5.7%
- Top Paid Diagnostic Chapters: Health Status & Services (+19.8% Paid PMPM), Circulatory System (-8.4%), Musculoskeletal (+2.2%)

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Membership & Demographics

- Total membership is 5.5% lower than prior period
- Employees decreased 3.8%, while Dependents were down 8.0%
- 91.6% of members had < \$2,500 medical paid, with 30.4% having no claims paid at all during the reporting period



Utilization Key Indicators

- Paid per IP Admit was \$25,016, which is 18.9% lower than 2024-2Q
- Paid per ER Visit was \$2,192, which is 1.2% lower than 2024-2Q



Network Utilization & Savings

- 97.5% of all Medical spend dollars were to In Network providers
- The average In Network discount was 68.9%, which is somewhat (+0.4 pts) above the 2024 average discount of 68.5%

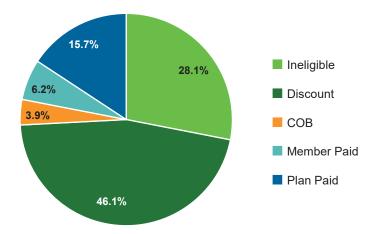
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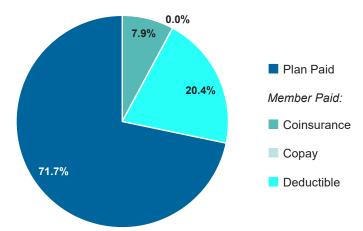
Dollar Chain: Billed to Paid Dollars

Dollar Amount	2025-2Q Total Dollars	2025-2Q PMPM*	2024 PMPM*	Trend
Medical Billed	\$265,008,066	\$1,917	\$1,916	0.1%
(-) Ineligible	\$74,317,856	\$538	\$590	-8.9%
Medical Covered	\$190,690,210	\$1,379	\$1,326	4.0%
(-) Discount	\$122,095,109	\$883	\$870	1.6%
Medical Allowed	\$68,595,101	\$496	\$456	8.7%
(-) COB	\$10,256,424	\$74	\$27	173.3%
(-) Coinsurance	\$4,573,860	\$33	\$32	3.0%
(-) Copay	\$1,061	\$0	\$0	-79.1%
(-) Deductible	\$11,854,837	\$86	\$63	35.5%
Total Member Paid	\$16,429,759	\$119	\$95	24.5%
Total Plan Paid	\$41,692,730	\$302	\$324	-6.8%

Breakout of Billed Dollars



Breakout of Paid Dollars: Plan vs. Member Paid



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



Med Paid PMPM Rx Paid PMPM Total Paid PMPM <1 \$1,690,642 \$2,403 -\$2,082 -\$3 \$1,688,560 \$2,400 1 \$184,253 \$223 \$42,420 \$51 \$226,673 \$275 2 - 4 \$385,394 \$119 \$64,579 \$20 \$449,974 \$139 5 - 9 \$745,645 \$110 \$175,803 \$26 \$921,447 \$136						2025-2Q (7/1/2024 - 12/31/2024)						Cha	ange	
Age					Total Paid	Tot Paid PMPM	l Med Paid	Med Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	Total Paid	Tot Paid PMPM
<1	\$1,690,642	\$2,403	-\$2,082	-\$3	\$1,688,560	\$2,400	\$1,443,306	\$2,078	\$409	\$1	\$1,443,716	\$2,078	-14.5%	-13.4%
1	\$184,253	\$223	\$42,420	\$51	\$226,673	\$275	\$94,108	\$156	\$67	\$0	\$94,175	\$156	-58.5%	-43.1%
2 - 4	\$385,394	\$119	\$64,579	\$20	\$449,974	\$139	\$416,243	\$147	\$32,174	\$11	\$448,417	\$158	-0.3%	13.7%
5 - 9	\$745,645	\$110	\$175,803	\$26	\$921,447	\$136	\$728,990	\$117	\$228,620	\$37	\$957,610	\$154	3.9%	13.2%
10 - 14	\$989,650	\$118	\$284,831	\$34	\$1,274,481	\$152	\$625,726	\$79	\$181,278	\$23	\$807,004	\$101	-36.7%	-33.3%
15 - 19	\$1,323,497	\$134	\$225,409	\$23	\$1,548,906	\$157	\$1,716,083	\$184	\$254,644	\$27	\$1,970,727	\$211	27.2%	34.9%
20 - 24	\$1,434,061	\$122	\$819,089	\$70	\$2,253,150	\$192	\$1,540,967	\$134	\$876,198	\$76	\$2,417,165	\$211	7.3%	9.7%
25 - 29	\$1,282,218	\$163	\$243,675	\$31	\$1,525,893	\$194	\$993,378	\$128	\$368,761	\$47	\$1,362,139	\$175	-10.7%	-9.7%
30 - 34	\$2,148,499	\$222	\$439,034	\$45	\$2,587,533	\$267	\$2,537,522	\$274	\$531,015	\$57	\$3,068,537	\$331	18.6%	23.8%
35 - 39	\$2,025,615	\$190	\$724,812	\$68	\$2,750,427	\$257	\$2,728,750	\$274	\$730,525	\$73	\$3,459,276	\$348	25.8%	35.1%
40 - 44	\$2,139,665	\$183	\$956,363	\$82	\$3,096,028	\$265	\$1,995,677	\$179	\$966,226	\$87	\$2,961,903	\$266	-4.3%	0.5%
45 - 49	\$2,801,613	\$258	\$1,269,234	\$117	\$4,070,847	\$375	\$2,535,515	\$247	\$1,647,281	\$160	\$4,182,796	\$407	2.8%	8.5%
50 - 54	\$4,020,156	\$324	\$2,138,771	\$172	\$6,158,928	\$496	\$3,972,571	\$338	\$2,221,340	\$189	\$6,193,911	\$527	0.6%	6.4%
55 - 59	\$5,060,230	\$373	\$1,851,026	\$137	\$6,911,256	\$510	\$5,993,613	\$473	\$2,380,332	\$188	\$8,373,945	\$661	21.2%	29.6%
60 - 64	\$8,691,747	\$525	\$3,715,041	\$225	\$12,406,788	\$750	\$8,519,463	\$562	\$3,478,980	\$230	\$11,998,443	\$792	-3.3%	5.5%
65+	\$5,890,032	\$517	\$3,617,388	\$317	\$9,507,420	\$834	\$5,850,817	\$525	\$3,468,500	\$311	\$9,319,317	\$836	-2.0%	0.2%
Total	\$40,812,916	\$279	\$16,565,393	\$113	\$57,378,310	\$392	\$41,692,730	\$302	\$17,366,352	\$126	\$59,059,082	\$427	2.9%	8.9%

Financial Summary – YTD Trend



Total Plan & Norm

# of HCCs HCCs per 1000 Paid per HCC HCC Paid % of Tot			Total Plan				orm
weasure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2025-2Q	Variance
Average Enrollment							
Employees	10,987	34.7%	14,802	-3.8%	14,232		
Spouses	2,204	27.3%	2,805	-8.8%	2,558		
Children	5,307	27.5%	6,765	-7.6%	6,250		
Tot. Members	18,499	31.7%	24,372	-5.5%	23,040		
Avg. Family Size	1.7	-2.2%	1.6	-1.7%	1.6	1.9	-15.5%
Financial Summary							
Allowed	\$42,009,657	44.4%	\$60,674,651	13.1%	\$68,595,101		
Plan Paid	\$25,315,757	61.2%	\$40,812,916	2.2%	\$41,692,730		
Member Paid (OOP)	\$11,563,765	41.0%	\$16,309,131	0.7%	\$16,429,759		
Paid PEPY	\$4,608	19.7%	\$5,515	6.2%	\$5,859	\$10,830	-45.9%
Paid PMPY	\$2,737	22.4%	\$3,349	8.1%	\$3,619	\$5,651	-36.0%
Paid PEPM	\$384	19.7%	\$460	6.2%	\$488	\$903	-45.9%
Paid PMPM	\$228	22.4%	\$279	8.1%	\$302	\$471	-36.0%
High-Cost Claimants	(Med Paid \$100,0	000+)					
# of HCCs	29	96.6%	57	3.5%	59		
HCCs per 1000	1.6	49.2%	2.3	9.5%	2.6	3.0	-15.7%
Paid per HCC	\$255,558	-26.4%	\$188,047	4.7%	\$196,836	\$208,900	-5.8%
HCC Paid % of Tot	29.3%	-3.0	26.3%	1.6	27.9%	24.8%	3.0
Cost Distribution by	Claim Type (Paid	PMPY)					
Inpatient	\$915	11.3%	\$1,018	-1.1%	\$1,007	\$1,464	-31.2%
Outpatient	\$841	20.7%	\$1,015	15.7%	\$1,174	\$1,635	-28.2%
Physician	\$963	32.7%	\$1,277	7.3%	\$1,371	\$2,430	-43.6%
Ancillary	\$19	109.5%	\$40	70.4%	\$68	\$122	-44.7%

- With \$32.0M paid, the State Active population is 76.6% of total 2025-2Q med spend
- On a Paid PMPM basis, State Actives are up 9.0% compared to prior year
- Total HDHP Plan Paid PMPM trend is +8.1%

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

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

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

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

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

Financial Summary – YTD Trend



Active Members

Measure			State Active			Non-State Active				
Measure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2023-2Q	⇔	2024-2Q	₽	2025-2Q
Average Enrollment										
Employees	8,917	34.5%	11,991	-2.7%	11,667	2	75.0%	4	0.0%	4
Spouses	1,687	26.3%	2,130	-8.2%	1,955	1	50.0%	1	-50.0%	1
Children	4,876	27.1%	6,195	-7.2%	5,746	3	31.3%	4	-76.2%	1
Tot. Members	15,480	31.2%	20,316	-4.7%	19,368	5	50.0%	8	-39.6%	5
Avg. Family Size	1.7	-2.4%	1.7	-2.0%	1.7	2.7	-14.3%	2.3	-39.6%	1.4
Financial Summary										
Allowed	\$30,586,113	44.9%	\$44,306,285	4.4%	\$46,239,027	\$8,995	28.9%	\$11,597	172.5%	\$31,600
Plan Paid	\$20,072,973	53.1%	\$30,735,820	4.0%	\$31,950,910	\$3,007	136.1%	\$7,099	221.8%	\$22,847
Member Paid (OOP)	\$8,868,606	37.1%	\$12,157,112	2.8%	\$12,493,598	\$5,988	-24.9%	\$4,498	94.6%	\$8,754
Paid PEPY	\$4,502	13.9%	\$5,127	6.8%	\$5,477	\$3,007	34.9%	\$4,057	221.8%	\$13,055
Paid PMPY	\$2,593	16.7%	\$3,026	9.0%	\$3,299	\$1,128	57.4%	\$1,775	432.7%	\$9,454
Paid PEPM	\$375	13.9%	\$427	6.8%	\$456	\$251	34.9%	\$338	221.8%	\$1,088
Paid PMPM	\$216	16.7%	\$252	9.0%	\$275	\$94	57.4%	\$148	432.7%	\$788
High-Cost Claimants	(Med Paid \$100,0	000+)								
# of HCCs	23	87.0%	43	0.0%	43	0	-	0	-	0
HCCs per 1000	1.5	42.4%	2.1	4.9%	2.2	0.0	-	0.0	-	0.0
Paid per HCC	\$271,649	-29.0%	\$192,960	4.8%	\$202,305	\$0	-	\$0	-	\$0
HCC Paid % of Tot	31.1%	-4.1	27.0%	0.2	27.2%	0.0%	-	0.0%	-	0.0%
Cost Distribution by	Claim Type (Paid	PMPY)								
Inpatient	\$911	-0.1%	\$910	6.1%	\$965	\$0	-	\$0	-	\$0
Outpatient	\$774	18.3%	\$915	15.9%	\$1,061	\$928	-125.4%	-\$236	-3115.2%	\$7,114
Physician	\$890	30.9%	\$1,166	6.0%	\$1,236	\$199	908.7%	\$2,011	16.4%	\$2,340
Ancillary	\$19	87.1%	\$35	8.4%	\$38	\$0	-	\$0	-	\$0

Financial Summary – YTD Trend



Retired Members

Measure			State Retirees			Non-State Retirees				
weasure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q
Average Enrollment										
Employees	1,820	36.3%	2,480	-8.5%	2,268	249	32.0%	328	-10.6%	293
Spouses	484	31.3%	636	-9.9%	573	33	17.4%	38	-21.8%	30
Children	419	31.7%	552	-11.0%	491	10	35.5%	14	-14.3%	12
Tot. Members	2,723	34.7%	3,667	-9.1%	3,332	291	30.5%	380	-11.8%	335
Avg. Family Size	1.5	-1.2%	1.5	-0.7%	1.5	1.2	-1.1%	1.2	-1.4%	1.1
Financial Summary										
Allowed	\$8,887,596	67.3%	\$14,871,988	21.2%	\$18,031,202	\$2,526,952	-41.2%	\$1,484,781	189.2%	\$4,293,271
Plan Paid	\$4,422,214	98.2%	\$8,766,328	1.6%	\$8,907,759	\$817,563	59.5%	\$1,303,669	-37.8%	\$811,214
Member Paid (OOP)	\$2,283,879	58.1%	\$3,610,640	-6.7%	\$3,370,159	\$405,292	32.5%	\$536,881	3.8%	\$557,248
Paid PEPY	\$4,860	45.5%	\$7,071	11.1%	\$7,854	\$6,580	20.8%	\$7,949	-30.4%	\$5,531
Paid PMPY	\$3,248	47.2%	\$4,781	11.8%	\$5,347	\$5,613	22.2%	\$6,858	-29.4%	\$4,841
Paid PEPM	\$405	45.5%	\$589	11.1%	\$655	\$548	20.8%	\$662	-30.4%	\$461
Paid PMPM	\$271	47.2%	\$398	11.8%	\$446	\$468	22.2%	\$572	-29.4%	\$403
High-Cost Claimants	(Med Paid \$100,	000+)								
# of HCCs	4	175.0%	11	36.4%	15	2	50.0%	3	-66.7%	1
HCCs per 1000	1.5	104.2%	3.0	50.1%	4.5	6.9	14.9%	7.9	-62.2%	3.0
Paid per HCC	\$186,409	-1.8%	\$183,081	2.4%	\$187,439	\$208,395	-34.9%	\$135,647	-24.4%	\$102,583
HCC Paid % of Tot	16.9%	6.1	23.0%	8.6	31.6%	51.0%	-19.8	31.2%	-18.6	12.6%
Cost Distribution by	Claim Type (Paid	IPMPY)								
Inpatient	\$748	77.1%	\$1,325	-13.3%	\$1,149	\$2,690	42.4%	\$3,830	-47.0%	\$2,031
Outpatient	\$1,134	32.9%	\$1,506	22.5%	\$1,845	\$1,679	-3.9%	\$1,614	-40.1%	\$967
Physician	\$1,348	40.1%	\$1,888	11.7%	\$2,110	\$1,206	9.8%	\$1,324	35.5%	\$1,793
Ancillary	\$19	224.3%	\$62	294.6%	\$243	\$37	142.6%	\$91	-45.9%	\$49

Financial Summary – Full Year Trend



Plan Totals & Norm

MeasureAverage EnrollmentEmployeesSpousesChildrenTot. MembersAvg. Family SizeFinancial SummaryAllowedPlan PaidMember Paid (OOP)Paid PEPYPaid PEPMPaid PEPMPaid PMPMHigh-Cost Claimants# of HCCs			Total Plan				orm
Measure	2023	⇒	2024	⇔	2025-2Q	2025-2Q	Variance
Average Enrollment							
Employees	13,625	8.5%	14,778	-3.7%	14,232		
Spouses	2,700	2.5%	2,766	-7.5%	2,558		
Children	6,501	2.9%	6,691	-6.6%	6,250		
Tot. Members	22,825	6.2%	24,235	-4.9%	23,040		
Avg. Family Size	1.7	-2.1%	1.6	-1.3%	1.6	1.9	-15.5%
Financial Summary							
Allowed	\$116,506,949	13.9%	\$132,731,482	-48.3%	\$68,595,101		
Plan Paid	\$77,185,029	21.9%	\$94,099,719	-55.7%	\$41,692,730		
Member Paid (OOP)	\$24,128,619	15.1%	\$27,764,440	-40.8%	\$16,429,759		
Paid PEPY	\$5,665	12.4%	\$6,368	-8.0%	\$5,859	\$10,830	-45.9%
Paid PMPY	\$3,382	14.8%	\$3,883	-6.8%	\$3,619	\$5,651	-36.0%
Paid PEPM	\$472	12.4%	\$531	-8.0%	\$488	\$903	-45.9%
Paid PMPM	\$282	14.8%	\$324	-6.8%	\$302	\$471	-36.0%
High-Cost Claimants	(Med Paid \$100,0	00+)					
# of HCCs	108	37.0%	148	-60.1%	59		
HCCs per 1000	4.7	29.1%	6.1	-58.1%	2.6	3.0	-15.7%
Paid per HCC	\$244,463	-5.8%	\$230,303	-14.5%	\$196,836	\$208,900	-5.8%
HCC Paid % of Tot	34.2%	2.0	36.2%	-8.4	27.9%	24.8%	3.0
Cost Distribution by	Claim Type (Paid	PMPY)					
Inpatient	\$1,078	15.9%	\$1,249	-19.4%	\$1,007	\$1,464	-31.2%
Outpatient	\$1,037	9.6%	\$1,137	3.3%	\$1,174	\$1,635	-28.2%
Physician	\$1,227	17.4%	\$1,440	-4.8%	\$1,371	\$2,430	-43.6%
Ancillary	\$40	42.6%	\$57	19.5%	\$68	\$122	-44.7%

- Total plan paid amount for the first two quarters of 2023 was 43.4% of the full year
- Annualizing 2024 paid dollars using the same ratio would result in a total paid of \$96.1 M

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

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

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

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

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

Financial Summary – Full Year Trend



Active Members

Measure			State Active			Non-State Active				
Measure	2023	⇔	2024	⇔	2025-2Q	2023	⇔	2024	⇔	2025-2Q
Average Enrollment										
Employees	11,074	8.5%	12,013	-2.9%	11,667	3	43.3%	4	-2.3%	4
Spouses	2,069	1.8%	2,107	-7.2%	1,955	1	-30.0%	1	-14.3%	1
Children	5,963	2.8%	6,131	-6.3%	5,746	3	-27.5%	2	-65.5%	1
Tot. Members	19,106	6.0%	20,251	-4.4%	19,368	7	-1.3%	7	-26.6%	5
Avg. Family Size	1.7	-2.3%	1.7	-1.5%	1.7	2.7	-31.1%	1.8	-24.8%	1.4
Financial Summary										
Allowed	\$80,297,048	20.4%	\$96,646,156	-52.2%	\$46,239,027	\$41,591	97.5%	\$82,160	-61.5%	\$31,600
Plan Paid	\$57,989,947	25.6%	\$72,836,689	-56.1%	\$31,950,910	\$30,169	120.2%	\$66,431	-65.6%	\$22,847
Member Paid (OOP)	\$18,438,883	14.2%	\$21,061,579	-40.7%	\$12,493,598	\$11,556	36.1%	\$15,729	-44.3%	\$8,754
Paid PEPY	\$5,237	15.8%	\$6,063	-9.7%	\$5,477	\$12,067	53.6%	\$18,539	-29.6%	\$13,055
Paid PMPY	\$3,035	18.5%	\$3,597	-8.3%	\$3,299	\$4,525	123.0%	\$10,091	-6.3%	\$9,454
Paid PEPM	\$436	15.8%	\$505	-9.7%	\$456	\$1,006	53.6%	\$1,545	-29.6%	\$1,088
Paid PMPM	\$253	18.5%	\$300	-8.3%	\$275	\$377	123.0%	\$841	-6.3%	\$788
High-Cost Claimants	(Med Paid \$100,	000+)								
# of HCCs	79	39.2%	110	-60.9%	43	0	-	0	-	0
HCCs per 1000	4.1	31.4%	5.4	-59.1%	2.2	0.0	-	0.0	-	0.0
Paid per HCC	\$245,944	-0.3%	\$245,319	-17.5%	\$202,305	\$0	-	\$0	-	\$0
HCC Paid % of Tot	33.5%	3.5	37.0%	-9.8	27.2%	0.0%	-	0.0%	-	0.0%
Cost Distribution by	Claim Type (Paid	I PMPY)								
Inpatient	\$986	20.2%	\$1,184	-18.5%	\$965	\$0	-	\$0	-	\$0
Outpatient	\$934	10.6%	\$1,032	2.7%	\$1,061	\$2,412	139.6%	\$5,778	23.1%	\$7,114
Physician	\$1,082	22.8%	\$1,329	-7.0%	\$1,236	\$2,088	106.4%	\$4,310	-45.7%	\$2,340
Ancillary	\$34	50.0%	\$51	-26.7%	\$38	\$25	-88.6%	\$3	-100.0%	\$0

Financial Summary – Full Year Trend



Retired Members

Measure			State Retirees				N	on-State Retire	es	
weasure	2023	⇔	2024	⇔	2025-2Q	2023	⇔	2024	⇔	2025-2Q
Average Enrollment										
Employees	2,248	8.7%	2,443	-7.1%	2,268	301	5.8%	318	-7.8%	293
Spouses	593	5.0%	623	-8.1%	573	37	-3.6%	36	-16.6%	30
Children	522	4.4%	544	-9.8%	491	13	7.2%	14	-11.7%	12
Tot. Members	3,363	7.4%	3,610	-7.7%	3,332	350	4.9%	367	-8.8%	335
Avg. Family Size	1.5	-1.2%	1.5	-0.6%	1.5	1.2	-0.9%	1.2	-1.1%	1.1
Financial Summary										
Allowed	\$28,074,335	11.0%	\$31,168,930	-42.2%	\$18,031,202	\$8,093,975	-40.3%	\$4,834,236	-11.2%	\$4,293,271
Plan Paid	\$16,518,779	15.5%	\$19,082,580	-53.3%	\$8,907,759	\$2,646,135	-20.1%	\$2,114,018	-61.6%	\$811,214
Member Paid (OOP)	\$4,884,749	18.5%	\$5,786,040	-41.8%	\$3,370,159	\$793,432	13.6%	\$901,093	-38.2%	\$557,248
Paid PEPY	\$7,349	6.3%	\$7,812	0.5%	\$7,854	\$8,803	-24.5%	\$6,648	-16.8%	\$5,531
Paid PMPY	\$4,913	7.6%	\$5,286	1.2%	\$5,347	\$7,553	-23.8%	\$5,755	-15.9%	\$4,841
Paid PEPM	\$612	6.3%	\$651	0.5%	\$655	\$734	-24.5%	\$554	-16.8%	\$461
Paid PMPM	\$409	7.6%	\$440	1.2%	\$446	\$629	-23.8%	\$480	-15.9%	\$403
High-Cost Claimants	(Med Paid \$100,0	000+)								
# of HCCs	24	54.2%	37	-59.5%	15	3	0.0%	3	-66.7%	1
HCCs per 1000	7.1	43.6%	10.2	-56.1%	4.5	8.6	-4.6%	8.2	-63.5%	3.0
Paid per HCC	\$226,331	-22.5%	\$175,418	6.9%	\$187,439	\$406,605	-56.8%	\$175,672	-41.6%	\$102,583
HCC Paid % of Tot	32.9%	1.1	34.0%	-2.4	31.6%	46.1%	-21.2	24.9%	-12.3	12.6%
Cost Distribution by	Claim Type (Paid	IPMPY)								
Inpatient	\$1,286	12.4%	\$1,445	-20.5%	\$1,149	\$4,124	-28.9%	\$2,932	-30.7%	\$2,031
Outpatient	\$1,544	10.4%	\$1,705	8.2%	\$1,845	\$1,802	-31.9%	\$1,227	-21.1%	\$967
Physician	\$2,027	1.6%	\$2,058	2.5%	\$2,110	\$1,448	0.9%	\$1,460	22.8%	\$1,793
Ancillary	\$56	38.9%	\$77	215.1%	\$243	\$180	-24.1%	\$136	-63.9%	\$49

Medical Paid Claims by Claim Type

Breakout of State vs. Non-State by Member Status



		2024-2Q (7/1/2023	- 12/31/2023)			2025-2Q (7/1/2024	4 - 12/31/2024)		Trend
Claim Type	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Total
State Membe	ers								
Inpatient	\$9,242,482	\$1,502,069	\$927,639	\$11,672,190	\$9,344,087	\$1,283,635	\$630,472	\$11,258,193	-3.5%
Outpatient	\$9,298,627	\$2,389,934	\$371,606	\$12,060,167	\$10,271,254	\$2,546,964	\$526,743	\$13,344,962	10.7%
Physician	\$11,841,611	\$2,522,639	\$939,306	\$15,303,555	\$11,970,554	\$3,016,027	\$498,323	\$15,484,904	1.2%
Ancillary	\$353,101	\$86,413	\$26,722	\$466,237	\$365,015	\$91,971	\$313,624	\$770,611	65.3%
Total	\$30,735,820	\$6,501,055	\$2,265,273	\$39,502,149	\$31,950,910	\$6,938,597	\$1,969,162	\$40,858,669	3.4%
РМРМ	\$252.14	\$388.59	\$429.67	\$274.51	\$274.95	\$467.36	\$382.76	\$299.99	9.3%
Non-State M	embers								
Inpatient	\$0	\$75,635	\$652,315	\$727,950	\$0	\$32,305	\$308,032	\$340,337	-53.2%
Outpatient	-\$944	\$152,304	\$154,551	\$305,911	\$17,192	\$86,742	\$75,390	\$179,325	-41.4%
Physician	\$8,043	\$107,214	\$144,367	\$259,624	\$5,654	\$69,850	\$230,656	\$306,161	17.9%
Ancillary	\$0	\$2,813	\$14,471	\$17,283	\$0	\$7,496	\$741	\$8,237	-52.3%
Total	\$7,099	\$337,966	\$965,703	\$1,310,768	\$22,847	\$196,394	\$614,820	\$834,060	-36.4%
РМРМ	\$147.90	\$572.80	\$571.09	\$562.80	\$787.81	\$480.21	\$383.78	\$408.85	-27.4%
All Members									
Inpatient	\$9,242,482	\$1,577,704	\$1,579,954	\$12,400,140	\$9,344,087	\$1,315,940	\$938,504	\$11,598,531	-6.5%
Outpatient	\$9,297,683	\$2,542,238	\$526,157	\$12,366,077	\$10,288,447	\$2,633,706	\$602,133	\$13,524,286	9.4%
Physician	\$11,849,654	\$2,629,853	\$1,083,672	\$15,563,179	\$11,976,209	\$3,085,877	\$728,979	\$15,791,065	1.5%
Ancillary	\$353,101	\$89,226	\$41,193	\$483,520	\$365,015	\$99,468	\$314,365	\$778,848	61.1%
Total	\$30,742,920	\$6,839,021	\$3,230,976	\$40,812,916	\$31,973,757	\$7,134,991	\$2,583,982	\$41,692,730	2.2%
РМРМ	\$252.10	\$394.86	\$464.01	\$279.10	\$275.08	\$467.70	\$383.00	\$301.60	8.1%

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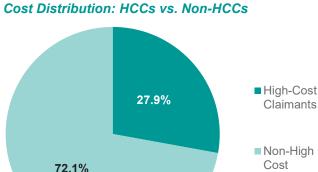
Medical Cost Distribution

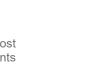


Distribution by Member Cost

Member Total		2	024-2Q (7/1/20	23 - 12/31	/2023)		2025-2Q (7/1/2024 - 12/31/2024)						
Paid Range	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot	
No Claims	8,263	30.2%	\$0	0.0%	\$0	0.0%	7,929	30.4%	\$0	0.0%	\$0	0.0%	
< \$0 - \$0	6,082	22.2%	-\$437,913	-1.1%	\$2,047,978	12.6%	5,750	22.0%	-\$503,586	-1.2%	\$2,000,270	12.2%	
> \$0 - \$2,500	10,941	39.9%	\$5,481,665	13.4%	\$7,182,611	44.0%	10,226	39.2%	\$5,211,852	12.5%	\$7,091,309	43.2%	
> \$2,500 - \$5,000	796	2.9%	\$2,796,845	6.9%	\$1,917,848	11.8%	850	3.3%	\$3,006,654	7.2%	\$2,021,980	12.3%	
> \$5,000 - \$10,000	615	2.2%	\$4,290,423	10.5%	\$1,865,087	11.4%	596	2.3%	\$4,189,387	10.0%	\$1,893,938	11.5%	
> \$10,000 - \$25,000	395	1.4%	\$6,160,412	15.1%	\$1,750,913	10.7%	441	1.7%	\$6,787,755	16.3%	\$1,892,097	11.5%	
> \$25,000 - \$50,000	156	0.6%	\$5,327,520	13.1%	\$761,616	4.7%	161	0.6%	\$5,573,072	13.4%	\$779,282	4.7%	
> \$50,000 - \$100,000	90	0.3%	\$6,475,260	15.9%	\$474,103	2.9%	83	0.3%	\$5,814,297	13.9%	\$441,377	2.7%	
> \$100,000	57	0.2%	\$10,718,704	26.3%	\$308,974	1.9%	59	0.2%	\$11,613,298	27.9%	\$309,506	1.9%	
Total	27,395	100.0%	\$40,812,916	100.0%	\$16,309,131	100.0%	26,095	100.0%	\$41,692,730	100.0%	\$16,429,759	100.0%	

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





Non-High Cost

HCC Cost Breakout by Diagnostic Chapter

#	Diagnostic Chapter	Patients	Total Paid	% of Tot
1	Health Status & Health Services	53	\$2,413,214	20.8%
2	Injury, Poisoning & External Causes	21	\$1,913,409	16.5%
3	Circulatory System	40	\$1,683,077	14.5%
4	Neoplasms	25	\$1,574,930	13.6%
5	Infectious & Parasitic Diseases	21	\$1,062,635	9.2%
6	Perinatal Originating Conditions	5	\$896,696	7.7%
7	Genitourinary System	24	\$435,052	3.7%
8	Digestive System	27	\$398,315	3.4%
9	Musculoskeletal System	23	\$348,357	3.0%
10	Endocrine, Nutritional & Metabolic	28	\$346,066	3.0%
	All Others		\$541,548	4.7%
=	Total	59	\$11,613,298	100.0%

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Utilization Summary – YTD Trend



Plan Totals & Norm

Measure			Total Plan			UMR N	orm
Measure	2023-2Q	⇒	2024-2Q	⇒	2025-2Q	2025-2Q	Variance
Inpatient Admissions							
# of Admits	409	24.0%	507	-10.1%	456		
# of Admit Days	3,003	34.6%	4,041	-44.8%	2,231		
Paid per Admit	\$34,715	-11.1%	\$30,852	-18.9%	\$25,016	\$31,394	-20.3%
Paid per Admit Day	\$4,728	-18.1%	\$3,871	32.1%	\$5,113	\$6,014	-15.0%
Admits per 1000	44.2	-5.9%	41.6	-4.9%	39.6	48.0	-17.5%
Average LOS	7.3	8.6%	8.0	-38.6%	4.9	5.2	-6.3%
Emergency Room Visits							
# of ER Visits	1,818	30.1%	2,365	-3.3%	2,286		
~% resulting in Admit	12.3%	1.1	13.4%	-1.6	11.7%	10.2%	1.5
ER Visits per Patient	1.3	4.5%	1.3	0.2%	1.3		
ER Visits per 1000	196.6	-1.3%	194.1	2.2%	198.4	222.5	-10.8%
Paid per ER Visit	\$1,841	20.6%	\$2,220	-1.2%	\$2,192	\$2,383	-8.0%
Urgent Care Visits							
# of UC Visits	3,445	9.4%	3,769	-5.4%	3,567		
UC Visits per Patient	1.3	3.0%	1.3	-0.1%	1.3		-
UC Visits per 1000	372.5	-17.0%	309.3	0.1%	309.6	260.9	18.7%
Paid per UC Visit	\$33	-5.5%	\$31	17.0%	\$36	\$117	-68.8%
Office Visits							
Off Visits per Patient	2.6	14.6%	3.0	4.8%	3.1		
Paid per Office Visit	\$29	23.0%	\$35	8.2%	\$38	\$97	-60.7%
Office Visits Paid PMPY	\$116	10.2%	\$128	12.2%	\$144	\$369	-61.1%
Services							
Radiology Svcs per 1000	3,915.6	-6.9%	3,646.0	9.3%	3,983.6	3,626.2	9.9%
Radiology Paid PMPY	\$216	7.4%	\$232	8.5%	\$252		
Lab Services per 1000	10,807.3	-12.9%	9,410.3	8.0%	10,163.1	9,516.9	6.8%
Labs Paid PMPY	\$131	11.9%	\$146	14.7%	\$168		

- Inpatient Admission rate per 1000 decreased 4.9%, and amount paid per Admission is significantly (-18.9%) lower than prior period
- ER utilization increased 2.2%, but amount paid per ER visit is 1.2% lower than prior period

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

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

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Utilization Summary – YTD Trend



Active Members

Measure			State Active				N	Ion-State Activ	ve	
Measure	2023-2Q	⇔	2024-2Q	⇒	2025-2Q	2023-2Q	⇔	2024-2Q	⇒	2025-2Q
Inpatient Admissions										
# of Admits	309	17.8%	364	-4.1%	349	0	-	0	-	0
# of Admit Days	2,390	24.6%	2,977	-42.8%	1,702	0	-	0	-	0
Paid per Admit	\$37,257	-16.0%	\$31,291	-15.0%	\$26,591	\$0	-	\$0	-	\$0
Paid per Admit Day	\$4,817	-20.6%	\$3,826	42.5%	\$5,452	\$0	-	\$0	-	\$0
Admits per 1000	39.9	-10.2%	35.8	0.6%	36.0	0.0	-	0.0	-	0.0
Average LOS	7.7	5.7%	8.2	-40.4%	4.9	0.0	-	0.0	-	0.0
Emergency Room Visits										
# of ER Visits	1,451	28.5%	1,864	1.3%	1,889	1	-100.0%	0	-	1
~ % resulting in Admit	11.3%	0.4	11.7%	-1.0	10.7%	0.0%	0.0	0.0%	-	0.0%
ER Visits per Patient	1.2	4.8%	1.3	0.4%	1.3	1.0	-100.0%	0.0	-	1.0
ER Visits per 1000	187.5	-2.1%	183.5	6.3%	195.1	375.0	-100.0%	0.0	-	413.8
Paid per ER Visit	\$1,815	29.2%	\$2,344	-5.1%	\$2,224	\$2,476	-100.0%	\$0	-	\$18,276
Urgent Care Visits										
# of UC Visits	3,057	7.0%	3,271	-4.9%	3,112	2	0.0%	2	-100.0%	0
UC Visits per Patient	1.3	2.7%	1.3	0.3%	1.3	1.0	0.0%	1.0	-100.0%	0.0
UC Visits per 1000	395.0	-18.5%	322.0	-0.2%	321.4	750.0	-33.3%	500.0	-100.0%	0.0
Paid per UC Visit	\$33	-5.3%	\$31	14.1%	\$36	\$0	-	\$130	-100.0%	\$0
Office Visits										
Off Visits per Patient	2.5	13.3%	2.8	5.3%	3.0	3.7	-31.8%	2.5	-60.0%	1.0
Paid per Office Visit	\$29	25.7%	\$36	5.6%	\$38	\$12	970.9%	\$133	-33.8%	\$88
Office Visits Paid PMPY	\$107	12.9%	\$121	9.3%	\$132	\$51	549.0%	\$332	-78.1%	\$73
Services										
Radiology Svcs per 1000	3,431.8	-8.8%	3,128.6	11.1%	3,477.2	2,250.0	-22.2%	1,750.0	-5.4%	1,655.2
Radiology Paid PMPY	\$185	12.5%	\$208	1.0%	\$210	\$0	-	\$1,178	100.1%	\$2,358
Lab Services per 1000	10,084.9	-13.0%	8,770.5	7.8%	9,454.7	3,375.0	3.7%	3,500.0	-29.1%	2,482.8
Labs Paid PMPY	\$127	7.0%	\$136	17.8%	\$161	\$4	931.2%	\$39	1800.0%	\$743

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Utilization Summary – YTD Trend



Retired Members

Measure		State Retirees		Non-State Retirees						
Weasure	2023-2Q	⇔	2024-2Q	⇒	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q
Inpatient Admissions										
# of Admits	77	42.9%	110	-21.8%	86	23	43.5%	33	-36.4%	21
# of Admit Days	370	129.2%	848	-50.8%	417	243	-11.1%	216	-48.1%	112
Paid per Admit	\$25,629	21.5%	\$31,133	-26.7%	\$22,834	\$30,978	-19.0%	\$25,079	-69.0%	\$7,786
Paid per Admit Day	\$5,334	-24.3%	\$4,039	16.6%	\$4,709	\$2,932	30.7%	\$3,831	-61.9%	\$1,460
Admits per 1000	56.6	6.1%	60.0	-14.0%	51.6	157.9	10.0%	173.6	-27.8%	125.3
Average LOS	4.8	60.4%	7.7	-37.1%	4.8	10.6	-38.0%	6.5	-18.5%	5.3
Emergency Room Visits										
# of ER Visits	307	35.8%	417	-20.4%	332	59	42.4%	84	-23.8%	64
~% resulting in Admit	15.3%	2.4	17.7%	-0.3	17.5%	20.3%	8.2	28.6%	-16.1	12.5%
ER Visits per Patient	1.3	0.5%	1.4	3.0%	1.4	1.4	14.5%	1.6	-7.5%	1.5
ER Visits per 1000	225.5	0.8%	227.4	-12.4%	199.3	405.0	9.1%	441.9	-13.6%	381.9
Paid per ER Visit	\$1,944	1.0%	\$1,963	15.2%	\$2,262	\$1,936	-61.9%	\$737	-13.0%	\$641
Urgent Care Visits										
# of UC Visits	343	32.7%	455	-9.5%	412	43	-4.7%	41	4.9%	43
UC Visits per Patient	1.2	7.4%	1.3	-1.8%	1.3	1.7	-11.5%	1.5	-8.2%	1.3
UC Visits per 1000	252.0	-1.5%	248.2	-0.3%	247.3	295.2	-26.9%	215.7	19.0%	256.6
Paid per UC Visit	\$34	-7.0%	\$31	37.7%	\$43	\$20	-57.8%	\$9	158.2%	\$22
Office Visits										
Off Visits per Patient	2.9	18.0%	3.5	3.5%	3.6	4.0	31.3%	5.2	5.4%	5.5
Paid per Office Visit	\$30	14.1%	\$34	17.0%	\$40	\$16	10.9%	\$18	24.0%	\$22
Office Visits Paid PMPY	\$166	0.2%	\$166	24.7%	\$207	\$156	0.1%	\$156	29.5%	\$202
Services										
Radiology Svcs per 1000	5,897.2	-3.5%	5,688.0	7.7%	6,126.3	11,128.1	4.6%	11,642.3	2.9%	11,982.1
Radiology Paid PMPY	\$385	-6.2%	\$361	36.0%	\$491	\$297	-14.7%	\$253	-0.7%	\$252
Lab Services per 1000	13,554.5	-15.0%	11,520.6	16.8%	13,456.2	23,649.9	-1.2%	23,368.7	-20.9%	18,474.4
Labs Paid PMPY	\$151	34.6%	\$203	4.4%	\$212	\$125	12.5%	\$141	2.0%	\$143

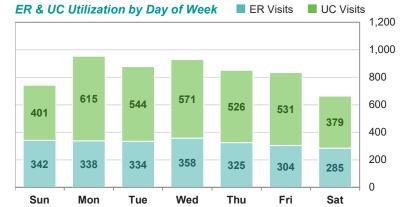
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On Demand Care Summary

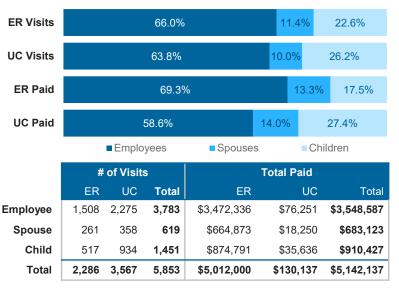
Emergency Room & Urgent Care

		UM	K
ek	ER Visits	UC Visits	, 1,200

Measure	2024-2Q	2025-2Q	Change	UMR Norm	Variance
Emergency Room					
# of Visits	2,365	2,286	-3.3%		
# of Patients	1,795	1,732	-3.5%		
Total Plan Paid	\$5,249,929	\$5,012,000	-4.5%		
Total Mem Paid	\$2,887,333	\$2,942,238	1.9%		
Visits per 1000	194.1	198.4	2.2%	222.5	-10.8%
Paid per Visit	\$2,220	\$2,192	-1.2%	\$2,383	-8.0%
Paid PMPM	\$36	\$36	1.0%	\$44	-17.9%
% ER Patients w/ Office Visit*	91.1%	90.1%	-1.1		
% Potentially Avoidable**	14.2%	16.2%	2.1	83.1%	-66.9
Urgent Care					
# of Visits	3,769	3,567	-5.4%		
# of Patients	2,819	2,670	-5.3%		
Total Plan Paid	\$117,523	\$130,137	10.7%		
Total Mem Paid	\$524,515	\$507,903	-3.2%		
Visits per 1000	309.3	309.6	0.1%	260.9	18.7%
Paid per Visit	\$31	\$36	17.0%	\$117	-68.8%
Paid PMPM	\$1	\$1	17.1%	\$3	-62.9%



ER & UC Utilization & Cost by Relationship



* Office Visit within prior 12 months..

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

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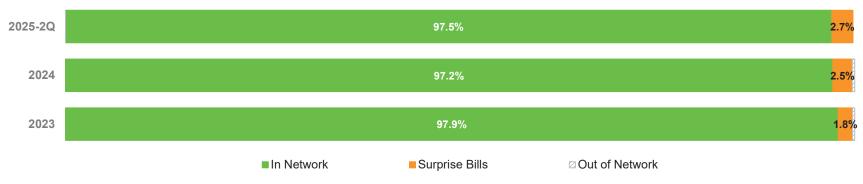
Network Summary

Discount Percentage & Network Utilization



Discount Percentage* by Claim Type Plan Year: 2023 2024 2025-2Q 80% 70% 60% 50% 40% 75.1% 74.1% 76.1% 70.9% 71.2% 69.7% 68.2% 68.5% 68.9% 63.4% 63.3% 62.1% 30% 59.1% 60.0% 58.2% 20% 10% 0% Physician Ancillary Inpatient Outpatient Total

Network Utilization*



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

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Clinical Classification Summary

Breakout by Diagnostic Chapter

UMR	

Diamastic Chantor	2024 (Full Year)	202	25-2Q	CYTD P	aid by Relatior	nship	CYTD Paid by Sex		
Diagnostic Chapter	Patients	Total Paid	Patients	Total Paid	Employee	Spouse	Child	Male	Female	
Health Status & Health Services	14,301	\$11,677,955	9,490	\$6,648,446	\$4,980,324	\$751,309	\$916,813	\$2,369,646	\$4,278,800	
Circulatory System	4,299	\$10,388,505	2,901	\$4,524,897	\$3,084,197	\$706,316	\$734,384	\$2,581,144	\$1,943,753	
Musculoskeletal System	6,363	\$8,891,851	4,347	\$4,318,455	\$3,205,187	\$802,056	\$311,212	\$1,783,562	\$2,534,893	
Injury, Poisoning & External Causes	3,089	\$6,988,732	1,734	\$4,197,599	\$3,185,372	\$260,010	\$752,217	\$2,951,151	\$1,246,448	
Neoplasms	3,094	\$9,469,226	2,030	\$3,454,813	\$2,813,119	\$624,554	\$17,141	\$1,586,613	\$1,868,200	
Digestive System	2,673	\$7,363,331	1,750	\$2,502,542	\$2,023,887	\$324,386	\$154,269	\$1,409,104	\$1,093,437	
Symptoms, Signs & Findings, NEC	8,898	\$4,971,465	5,692	\$2,191,559	\$1,618,771	\$282,111	\$290,677	\$872,226	\$1,319,333	
Genitourinary System	4,239	\$4,643,464	2,643	\$2,106,634	\$1,747,301	\$207,994	\$151,338	\$829,977	\$1,276,657	
Nervous System	2,989	\$4,637,075	2,013	\$1,680,760	\$1,088,724	\$283,246	\$308,790	\$518,817	\$1,161,943	
Endocrine, Nutritional & Metabolic	6,419	\$3,708,461	4,501	\$1,637,848	\$1,353,569	\$218,375	\$65,904	\$822,991	\$814,857	
Infectious & Parasitic Diseases	1,853	\$2,544,375	969	\$1,569,549	\$1,275,915	\$165,159	\$128,475	\$980,445	\$589,104	
Mental, Behavioral & Neurodevelopmental	3,269	\$4,218,922	2,397	\$1,548,138	\$546,939	\$80,258	\$920,941	\$754,537	\$793,601	
Perinatal Originating Conditions	213	\$2,826,203	114	\$1,216,260	\$153	\$0	\$1,216,107	\$819,703	\$396,558	
Respiratory System	5,447	\$3,963,399	2,793	\$1,165,039	\$617,520	\$237,714	\$309,806	\$531,087	\$633,952	
Pregnancy, Childbirth & the Puerperium	418	\$2,643,975	278	\$1,110,703	\$775,550	\$235,814	\$99,339	\$3,943	\$1,106,760	
Skin & Subcutaneous Tissue	4,799	\$1,211,542	3,058	\$596,468	\$506,231	\$65,091	\$25,147	\$215,892	\$380,576	
Eye and Adnexa	4,994	\$1,059,135	2,438	\$360,507	\$294,216	\$46,252	\$20,040	\$149,269	\$211,239	
Blood & Immune Disorders	932	\$1,640,703	574	\$360,034	\$303,196	\$31,176	\$25,661	\$144,206	\$215,828	
Ear and Mastoid Process	1,692	\$574,395	873	\$284,849	\$207,589	\$43,007	\$34,252	\$183,888	\$100,960	
Congenital Malformations & Abnormalities	260	\$676,174	138	\$172,014	\$60,444	\$4,867	\$106,702	\$73,199	\$98,814	
External Causes of Morbidity	6	\$832	0	\$0	\$0	\$0	\$0	\$0	\$0	
Total	22,265	\$94,099,719	17,551	\$41,692,730	\$29,724,383	\$5,372,363	\$6,595,984	\$19,612,490	\$22,080,240	

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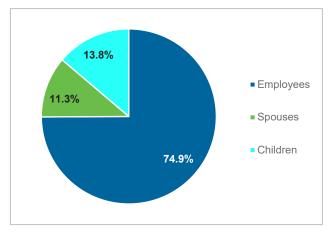
Health Status & Health Services

Breakout by Diagnostic Grouping & Demographics

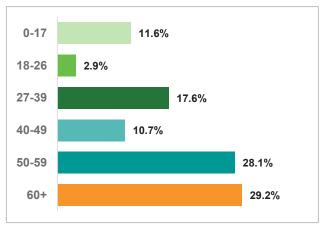


#	Health Status & Services Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Encounter for antineoplastic therapies	52	365	\$2,910,856	43.8%
2	Neoplasm-related encounters	2.458	4,024	\$1,136,799	17.1%
3	Medical examination/evaluation	6,127	9,253	\$987,818	14.9%
4	Exposure, enc, screen or contact w infectious dz	2,803	3,643	\$621,550	9.3%
		,	,		
5	Contraceptive & procreative management	389	587	\$243,333	3.7%
6	Other aftercare encounter	329	596	\$194,348	2.9%
7	Implant, device or graft related encounter	236	547	\$158,952	2.4%
8	Personal/family history of disease	415	615	\$115,792	1.7%
9	Other specified status	527	865	\$56,288	0.8%
10	Organ transplant status	30	102	\$52,362	0.8%
11	Other specified encounters & counseling	203	636	\$44,961	0.7%
12	Encount for obs & exam for conds ruled out	861	1,033	\$38,065	0.6%
13	Encounter for prophylactic or oth procedures	25	26	\$31,904	0.5%
14	Enc for prophylactic measures (ex immuniz)	41	64	\$17,631	0.3%
15	Acquired absence of limb or organ	25	46	\$14,291	0.2%
16	Lifestyle/life management factors	32	62	\$10,288	0.2%
17	Encounter for mental health conditions	626	687	\$5,361	0.1%
18	Encounter for administrative purposes	17	19	\$3,375	0.1%
19	No immunization or underimmunization	10	10	\$1,482	0.0%
20	Counseling rel to sexual behavior or orientation	7	11	\$990	0.0%
	All Others	43	63	\$2,001	0.0%
=	Total	9,490	24,417	\$6,648,446	100.0%

Health Status & Services Paid by Relationship



Health Status & Services Paid by Age Range



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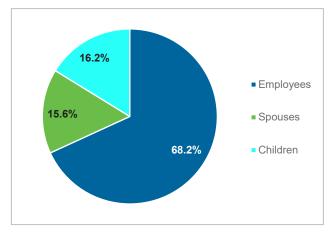
Circulatory System

Breakout by Diagnostic Grouping & Demographics

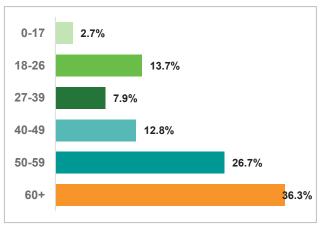


#	Circulatory System Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Coronary atherosclerosis & oth heart disease	434	972	\$1,008,845	22.3%
2	Cardiac dysrhythmias	399	1,209	\$687,004	15.2%
3	Other circulatory	121	200	\$612,812	13.5%
4	Nonspecific chest pain	635	1,299	\$594,404	13.1%
5	Cerebrovascular disease	129	364	\$499,335	11.0%
6	Myocardial infarction	29	135	\$296,837	6.6%
7	Vascular disease	206	469	\$226,733	5.0%
8	Hypertension	1,674	3,050	\$212,692	4.7%
9	Heart failure	103	285	\$191,275	4.2%
10	Acute pulmonary embolism, DVT	64	198	\$147,405	3.3%
11	Nonrheumatic & unspecified valve disorders	130	217	\$23,830	0.5%
12	Myocarditis & cardiomyopathy	30	63	\$23,724	0.5%
=	Total	2,901	9,650	\$4,524,897	100.0%

Circulatory System Paid by Relationship



Circulatory System Paid by Age Range



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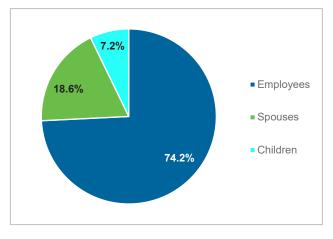
Musculoskeletal System

Breakout by Diagnostic Grouping & Demographics

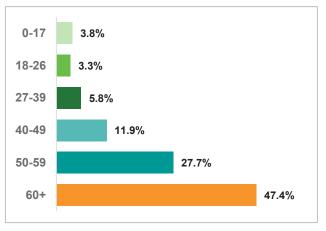


#	Musculoskeletal Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Spondylopathies & arthropathy	1,191	4,672	\$1,594,324	36.9%
2	Osteoarthritis & osteoporosis	688	1,797	\$976,508	22.6%
3	Other musculoskeletal pain	2,189	7,115	\$442,729	10.3%
4	Tendon, tissue, muscle disorders	892	2,352	\$368,421	8.5%
5	Scoliosis & oth deformities	352	640	\$313,960	7.3%
6	Joint disorders & fractures	275	575	\$203,728	4.7%
7	Low back pain	573	1,817	\$153,571	3.6%
8	Other MSK	80	209	\$147,651	3.4%
9	Rheumatoid arthritis & related disease	114	354	\$74,512	1.7%
10	Lupus	74	218	\$18,938	0.4%
11	Biomechanical lesions	370	1,474	\$16,925	0.4%
12	Gout & crystal arthropathies	85	142	\$7,188	0.2%
=	Total	4,347	23,032	\$4,318,455	100.0%

Musculoskeletal Paid by Relationship



Musculoskeletal Paid by Age Range



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Mental & Behavioral Trend

Prevalence & Cost by Diagnostic Grouping



Mental & Behavioral	2023 (F	⁻ ull Year)	2024 (I	Full Year)	202	25-2Q	20	25-2Q Paid b	by Claim Type			
Diagnostic Grouping	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid	Inpatient	Outpatient	Physician	Ancillary		
Neurodevelopmental disorders	440	\$812,021	502	\$1,242,281	365	\$619,580	\$0	\$44,311	\$575,269	\$0		
Depressive disorders	850	\$890,095	1,005	\$728,698	676	\$268,333	\$73,893	\$29,072	\$163,410	\$1,958		
Alcohol-related disorders	109	\$462,127	124	\$806,533	78	\$193,413	\$124,660	\$24,648	\$43,301	\$803		
Trauma & stressor disorders	617	\$182,525	760	\$288,426	558	\$141,203	\$0	\$25,330	\$115,873	\$0		
Anxiety & related Disorders	1,099	\$265,201	1,199	\$362,534	832	\$139,080	\$9,232	\$27,181	\$102,667	\$0		
Suicidal ideation, attempt or self-harm	50	\$204,626	51	\$205,797	27	\$47,610	\$0	\$43,708	\$3,901	\$0		
Bipolar & related Disorders	133	\$160,245	172	\$99,260	124	\$40,752	\$17,198	\$1,138	\$22,416	\$0		
Other mental health	254	\$144,260	261	\$122,179	187	\$35,307	\$2,411	\$4,567	\$23,888	\$4,440		
Schizophrenia spectrum disorders	45	\$164,022	48	\$121,142	26	\$22,659	\$10,966	\$5,051	\$6,607	\$35		
Cannabis-related disorders	25	\$7,995	24	\$15,571	18	\$9,527	\$0	\$7,731	\$1,796	\$0		
Other substance use	72	\$7,648	105	\$12,324	62	\$9,053	\$5,337	\$0	\$2,050	\$1,666		
Obsessive compulsive disorders	57	\$38,034	54	\$72,146	47	\$8,155	\$0	\$0	\$8,155	\$0		
Eating disorders	24	\$110,628	30	\$83,704	14	\$5,721	\$0	\$0	\$5,721	\$0		
Opiod disorders	31	\$43,726	34	\$37,172	23	\$5,548	\$0	\$0	\$5,548	\$0		
Stimulant disorders	8	\$29,616	7	\$21,155	8	\$2,196	\$0	\$905	\$1,291	\$0		
Total	2,916	\$3,522,768	3,269	\$4,218,922	2,397	\$1,548,138	\$243,696	\$213,642	\$1,081,897	\$8,903		

Chronic Conditions

Prevalence & Severity of 24 Chronic Conditions



	Wi	th Conditi	ion		Мо	derate/Hig	gh Risk Co	ndition	
Chronic Condition	# of Mems	Mems per 1000	Change vs LY	# of Mems	Mems per 1000	Change vs LY	Allowed PMPY	Admits per 1000	ER Visits per 1000
Affective Psychosis	46	1.9	17.9%	29	1.2	20.8%	\$7,716	173.9	500.0
Asthma	610	25.6	-9.0%	248	10.4	-3.9%	\$6,347	59.0	249.2
Atrial Fibrillation	213	8.9	-9.7%	160	6.7	7.4%	\$39,574	309.9	727.7
Blood Disorders	927	38.9	1.1%	395	16.6	-5.5%	\$17,719	170.4	321.5
CAD	391	16.4	-3.0%	212	8.9	4.4%	\$18,553	150.9	337.6
COPD	114	4.8	9.6%	67	2.8	1.5%	\$19,612	350.9	640.4
Cancer	1,811	76.0	0.4%	928	38.9	-0.5%	\$14,993	98.8	181.1
Chronic Pain	117	4.9	-27.3%	53	2.2	-23.2%	\$70,022	735.0	786.3
CHF	85	3.6	7.6%	45	1.9	0.0%	\$44,171	658.8	1,000.0
Demyelinating Diseases	61	2.6	-18.7%	44	1.8	-22.8%	\$28,166	147.5	377.0
Depression	968	40.6	3.5%	607	25.5	3.4%	\$8,421	104.3	321.3
Diabetes	1,481	62.1	-2.1%	1,009	42.3	-5.3%	\$11,822	88.5	245.8
ESRD	117	4.9	19.4%	92	3.9	10.8%	\$70,253	1,102.6	1,521.4
Eating Disorders	24	1.0	-20.0%	14	0.6	0.0%	\$22,734	333.3	750.0
HIV/AIDS	40	1.7	-4.8%	30	1.3	-16.7%	\$12,525	50.0	300.0
Hyperlipidemia	793	33.3	-5.8%	273	11.4	-8.7%	\$3,106	10.1	66.8
Hypertension	2,432	102.0	-2.3%	1,191	50.0	1.3%	\$8,193	77.3	222.9
Immune Disorders	55	2.3	-19.1%	22	0.9	-4.3%	\$35,941	218.2	618.2
IBD	57	2.4	-6.6%	14	0.6	27.3%	\$2,421	17.5	140.4
Liver Disease	4	0.2	-50.0%	4	0.2	-20.0%	\$147,659	3,500.0	3,750.0
Morbid Obesity	247	10.4	19.9%	117	4.9	28.6%	\$6,923	85.0	226.7
Osteoarthritis	868	36.4	-5.9%	398	16.7	1.5%	\$9,341	55.3	145.2
Peripheral Vascular Disease	126	5.3	-2.3%	40	1.7	8.1%	\$16,911	174.6	277.8
Rheumatoid Arthritis	117	4.9	-6.4%	85	3.6	-6.6%	\$10,133	51.3	273.5

- Most prevalent chronic condition is Hypertension, with 2,432 members
- Hypertension is also the condition with the most moderate/high risk members (1,191)
- Members with mod/high risk Cancer have the highest combined cost: 928 members totaling \$13.9M

Date Range: Service Dates 10/1/2023 - 9/30/2024, Paid through 12/31/2024

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

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

|--|

Allowed PMPY: \$5,452
Admits per 1000: 42.4
ER Visits per 1000: 187.0

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Prevention, Wellness, & Maintenance



Preventive & Condition-specific Screening Rate Trends

		Oc	t 2022 - Sep 20	023	Oc	t 2023 - Sep 2)23 - Sep 2024		UMR Norm	
Preventive Service	Population	Eligible	Actual	Rate	Eligible	Actual	Rate	Rate Change	Rate	Variance
Well Visits	Rate for Well Baby & We	ell Child is Visits	s per 1,000. Ra	ate for adults is	the percentage	who had a we	ll visit.			
Well Baby Visit	0 - 15 months	178.2	956	5,366.0	139.0	798	5,740.1	7.0%	5,308.6	8.1%
Well Child Visit	3 - 6 years	891.2	626	702.4	753.1	572	759.5	8.1%	792.3	-4.1%
Adults w/ Well Visit	Adults 18+	21,794	7,819	35.9%	19,724	7,239	36.7%	0.8	41.2%	-4.5
Screenings	Rate for all screenings is	the percentage	e of eligible pop	oulation who ha	d the screening	during the per	riod.			
Mammogram	Females 40 - 69	6,823	2,846	41.7%	6,140	2,633	42.9%	1.2	47.9%	-5.1
Cervical Cancer	Females 21 - 64	9,951	2,513	25.3%	8,849	2,178	24.6%	-0.6	24.1%	0.5
Prostate Cancer	Males 50 - 70	4,170	1,593	38.2%	3,796	1,561	41.1%	2.9	42.5%	-1.4
Colorectal Cancer	Members 45 - 75	11,272	1,641	14.6%	10,207	1,587	15.5%	1.0	17.4%	-1.8
Cholesterol	Female 45+ Male 35+	13,473	6,213	46.1%	12,293	5,859	47.7%	1.5	48.6%	-0.9
Condition-specific	Screening									
Asthma	Office Visit for Asthma	670	526	78.5%	610	498	81.6%	3.1		
COPD	Spirometry Test	104	13	12.5%	114	20	17.5%	5.0		
	A1c Test	1,424	1,192	83.7%	1,402	1,200	85.6%	1.9	86.2%	-0.6
	Eye Exam	1,424	358	25.1%	1,402	367	26.2%	1.0	25.7%	0.5
Type 2 Diabetes	Lipid Panel	1,424	1,062	74.6%	1,402	1,058	75.5%	0.9	73.2%	2.3
	Urine Protein Test	1,424	887	62.3%	1,402	883	63.0%	0.7	64.2%	-1.2
	Any Diabetes Screen	1,424	1,314	92.3%	1,402	1,308	93.3%	1.0	93.8%	-0.5
Hyperlipidemia	Lipid Profile	842	447	53.1%	793	411	51.8%	-1.3		
I have a store store	Creatinine Test	2,490	481	19.3%	2,432	467	19.2%	-0.1		
Hypertension	Lipid Profile	2,490	653	26.2%	2,432	595	24.5%	-1.8		

Date Range: Reporting periods are service-based with 3 months of runout: Current period is Service Dates 10/1/2023 - 9/30/2024, Paid through 12/31/2024 **Note:** Preventive Services do not include those performed at onsite clinics or ones for which no claim was submitted to UMR.

Public Employees' Benefits Program - RX Costs PY 2024 - Through Quarter Ending December 31, 2023 Express Scripts

	Express Scripts			
	1Q-2Q FY2025 CDHP	1Q-2Q FY2024 CDHP	Difference	% Change
Membership Summary			Membership Su	immary
Member Count (Membership)	22,923	24,297	(1,374)	-5.7%
Utilizing Member Count (Patients)	13,847	14,819	(972)	-6.6%
Percent Utilizing (Utilization)	60.4%	61.0%	(0.01)	-1.0%
Claim Summary			Claims Sum	mary
Net Claims (Total Rx's)	167,463	170,990	(3,527)	-2.1%
Claims per Elig Member per Month (Claims PMPM)	1.22	1.17	0.05	4.3%
Total Claims for Generic (Generic Rx)	145,400	147,083	(1,683.00)	-1.1%
Total Claims for Brand (Brand Rx)	22,063	23,907	(1,844.00)	-7.7%
Total Claims for Brand w/Gen Equiv (Multisource Brand Claims)	291	754	(463.00)	-61.4%
Total Non-Specialty Claims	165,441	169,049	(3,608.00)	-2.1%
Total Specialty Claims	2,022	1,941	81.00	4.2%
Generic % of Total Claims (GFR)	86.8%	86.0%	0.01	0.9%
Generic Effective Rate (GCR)	99.8%	99.5%	0.00	0.3%
Mail Order Claims	42,791	46,573	(3,782.00)	-8.1%
Mail Penetration Rate*	29.2%	31.4%	(0.02)	-2.2%
Claims Cost Summary			Claims Cost Su	mmary
Total Prescription Cost (Total Gross Cost)	\$22,458,284	\$21,492,348	\$965,936.00	4.5%
Total Generic Gross Cost	\$2,251,760	\$2,170,769	\$80,991.00	3.7%
Total Brand Gross Cost	\$20,206,524	\$19,321,579	\$884,945.00	4.6%
Total MSB Gross Cost	\$182,276	\$322,777	(\$140,501.00)	-43.5%
Total Ingredient Cost	\$21,681,872	\$20,692,082	\$989,790.00	4.8%
Total Dispensing Fee	\$763,476	\$786,385	(\$22,909.00)	-2.9%
Total Other (e.g. tax)	\$12,937	\$13,880	(\$943.00)	-6.8%
Avg Total Cost per Claim (Gross Cost/Rx)	\$134.11	\$125.69	\$8.42	6.7%
Avg Total Cost for Generic (Gross Cost/Generic Rx)	\$15.49	\$14.76	\$0.73	4.9%
Avg Total Cost for Brand (Gross Cost/Brand Rx)	\$915.86	\$808.20	\$107.66	13.3%
Avg Total Cost for MSB (MSB Gross Cost/MSB ARx)	\$626.38	\$428.09	\$198.29	46.3%
Member Cost Summary			Member Cost S	ummary
Total Member Cost	\$5,116,449	\$4,776,329	\$340,120.00	7.1%
Total Copay	\$3,717,578	\$3,630,113	\$87,465.00	2.4%
Total Deductible	\$1,398,872	\$1,146,216	\$252,656.00	22.0%
Avg Copay per Claim (Copay/Rx)	\$22.20	\$21.23	\$0.97	4.6%
Avg Participant Share per Claim (Copay+Deductible/RX)	\$30.55	\$27.93	\$2.62	9.4%
Avg Copay for Generic (Copay/Generic Rx)	\$7.72	\$7.17	\$0.55	7.7%
Avg Copay for Brand (Copay/Brand Rx)	\$180.99	\$155.67	\$25.32	16.3%
Avg Copay for Brand w/ Generic Equiv (Copay/Multisource Rx)	\$285.16	\$98.33	\$186.83	190.0%
Net PMPM (Participant Cost PMPM)	\$37.20	\$32.76	\$4.44	13.5%
Copay % of Total Prescription Cost (Member Cost Share %)	22.8%	22.2%	0.6%	2.5%
Plan Cost Summary			Plan Cost Sur	nmary
Total Plan Cost (Plan Cost)	\$17,341,835	\$16,716,019	\$625,816.00	3.7%
Total Non-Specialty Cost (Non-Specialty Plan Cost)	\$7,059,361	\$6,877,440	\$181,921.00	2.6%
Total Specialty Drug Cost (Specialty Plan Cost)	\$10,282,474	\$9,838,579	\$443,895.00	4.5%
Avg Plan Cost per Claim (Plan Cost/Rx)	\$103.56	\$97.76	\$5.80	5.9%
Avg Plan Cost for Generic (Plan Cost/Generic Rx)	\$7.76	\$7.59	\$0.17	2.2%
Avg Plan Cost for Brand (Plan Cost/Brand Rx)	\$734.86	\$652.53	\$82.33	12.6%
Avg Plan Cost for MSB (MSB Plan Cost/MSB ARx)	\$341.21	\$329.76	\$11.45	3.5%
Net PMPM (Plan Cost PMPM)	\$126.09	\$114.66	\$11.42	10.0%
PMPM without Specialty (Non-Specialty PMPM)	\$51.33	\$47.18	\$4.15	8.8%
PMPM for Specialty Only (Specialty PMPM)	\$74.76	\$67.49	\$7.27	10.8%
Specialty % of Plan Cost	59.3%	58.9%	\$0.00	0.7%
Rebates Received (Q1-Q2 FY2024 actual)	\$9,563,987	\$8,622,319	\$941,667.51	10.9%
Net PMPM (Plan Cost PMPM factoring Rebates)	\$56.55	\$55.52	\$1.03	1.9%
PMPM without Specialty (Non-Specialty PMPM)	\$25.29	\$27.76	(\$2.47)	-8.9%
PMPM for Specialty Only (Specialty PMPM)	\$46.60	\$45.63	\$0.97	2.1%

Appendix B

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

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PRESCRIPTION DRUG COSTS

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Public Employees' Benefits Program

Quarterly Plan Performance Review Low Ded Plan • 2025-2Q



RPG 4.81 • Run Date: 2/27/2025

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Report Criteria & Contents



Experience Periods*

> 2025 Plan Year (Current)

2025-2Q.1st two Quarters: Claims Paid 7/1/2024 - 12/31/2024

> 2024 Plan Year

2024-2Q.1st two Quarters: Claims Paid 7/1/2023 - 12/31/2023 2024 Full Year: Claims paid 7/1/2023 - 6/30/2024

> 2023 Plan Year

2023-2Q.1st two Quarters: Claims Paid 7/1/2022 - 12/31/2022 2023 Full Year: Claims paid 7/1/2022 - 6/30/2023

Group Data

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

Normative Comparison Data

- ➤ Norm Groups: UMR Book of Business in InfoPortSM
- > Composition: 4,609 groups with approximately 6.5 million members
- Norm Period matches Current Year: Claims Paid 7/1/2024 12/31/2024

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

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Executive Summary





Cost Drivers

- Overall Cost Trend based on Medical Paid PEPY: +5.9%
- High-Cost Claimants Paid PMPM trend: -12.9%; Non HCCs trend: +12.9%
- Top Paid Diagnostic Chapters: Health Status & Services (+8.0% Paid PMPM), Musculoskeletal (+0.6%), Neoplasms (Cancer) (+36.4%)

Membership & Demographics

- Total membership is 19.9% higher than prior period
- Employees increased 20.7%, while Dependents were up 19.0%
- 86.9% of members had < \$2,500 medical paid, with 24.3% having no claims paid at all during the reporting period



Utilization Key Indicators

- Paid per IP Admit was \$24,834, which is 5.6% higher than 2024-2Q
- Paid per ER Visit was \$3,059, which is 6.2% higher than 2024-2Q



Network Utilization & Savings

- 97.9% of all Medical spend dollars were to In Network providers
- The average In Network discount was 66.4%, which is 1.2 pts above the 2024 average discount of 65.2%

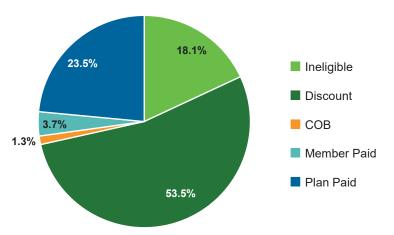
3



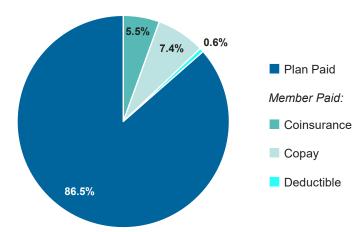
Dollar Chain: Billed to Paid Dollars

Dollar Amount	2025-2Q Total Dollars	2025-2Q PMPM*	2024 PMPM*	Trend
Medical Billed	\$227,919,662	\$1,647	\$1,519	8.5%
(-) Ineligible	\$41,156,228	\$297	\$303	-1.7%
Medical Covered	\$186,763,434	\$1,350	\$1,216	11.0%
(-) Discount	\$121,788,256	\$880	\$780	12.8%
Medical Allowed	\$64,975,178	\$470	\$436	7.8%
(-) COB	\$2,932,172	\$21	\$11	95.0%
(-) Coinsurance	\$3,421,344	\$25	\$23	8.7%
(-) Copay	\$4,583,882	\$33	\$32	4.0%
(-) Deductible	\$385,332	\$3	\$2	24.0%
Total Member Paid	\$8,390,558	\$61	\$57	6.6%
Total Plan Paid	\$53,557,219	\$387	\$363	6.7%

Breakout of Billed Dollars



Breakout of Paid Dollars: Plan vs. Member Paid



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



		2024	-2Q (7/1/2023	- 12/31/2	2023)			2025	-2Q (7/1/2024	- 12/31/2	2024)		Change	
Age	Med Paid	/led Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	ا Med Paid	Med Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	Total Paid	Tot Paid PMPM
<1	\$2,216,505	\$1,960	\$2,907	\$3	\$2,219,412	\$1,963	\$2,252,886	\$1,595	\$14,313	\$10	\$2,267,199	\$1,605	2.2%	-18.2%
1	\$225,970	\$196	\$2,313	\$2	\$228,283	\$198	\$415,513	\$271	\$4,853	\$3	\$420,366	\$274	84.1%	38.6%
2 - 4	\$525,919	\$131	\$20,122	\$5	\$546,041	\$136	\$763,744	\$153	\$49,850	\$10	\$813,593	\$163	49.0%	19.4%
5 - 9	\$962,319	\$129	\$261,980	\$35	\$1,224,299	\$164	\$1,186,523	\$127	\$513,071	\$55	\$1,699,594	\$182	38.8%	10.9%
10 - 14	\$1,115,152	\$137	\$242,136	\$30	\$1,357,288	\$167	\$1,404,176	\$144	\$198,095	\$20	\$1,602,271	\$164	18.0%	-2.0%
15 - 19	\$1,442,862	\$153	\$353,431	\$38	\$1,796,293	\$191	\$2,684,305	\$234	\$684,322	\$60	\$3,368,627	\$294	87.5%	53.9%
20 - 24	\$1,964,430	\$220	\$407,909	\$46	\$2,372,340	\$265	\$2,058,615	\$187	\$821,977	\$75	\$2,880,592	\$262	21.4%	-1.3%
25 - 29	\$1,863,531	\$250	\$855,092	\$115	\$2,718,623	\$364	\$2,859,759	\$300	\$1,277,441	\$134	\$4,137,200	\$433	52.2%	19.0%
30 - 34	\$2,298,603	\$263	\$1,852,510	\$212	\$4,151,113	\$474	\$3,624,439	\$330	\$1,653,641	\$150	\$5,278,079	\$480	27.1%	1.2%
35 - 39	\$2,808,835	\$293	\$1,257,440	\$131	\$4,066,275	\$425	\$4,799,667	\$397	\$2,026,782	\$168	\$6,826,450	\$565	67.9%	33.1%
40 - 44	\$3,043,231	\$318	\$1,486,209	\$155	\$4,529,440	\$474	\$4,869,305	\$413	\$2,236,795	\$190	\$7,106,100	\$602	56.9%	27.2%
45 - 49	\$2,808,143	\$338	\$1,659,391	\$200	\$4,467,534	\$539	\$4,334,818	\$416	\$2,329,444	\$223	\$6,664,262	\$639	49.2%	18.7%
50 - 54	\$3,587,301	\$383	\$2,233,991	\$239	\$5,821,293	\$622	\$4,867,425	\$432	\$2,989,700	\$266	\$7,857,125	\$698	35.0%	12.2%
55 - 59	\$4,132,559	\$498	\$2,344,762	\$283	\$6,477,321	\$781	\$6,221,772	\$607	\$3,205,078	\$313	\$9,426,849	\$920	45.5%	17.8%
60 - 64	\$4,308,003	\$603	\$2,338,412	\$327	\$6,646,414	\$930	\$7,391,748	\$834	\$3,178,994	\$359	\$10,570,742	\$1,193	59.0%	28.3%
65+	\$1,773,176	\$618	\$769,449	\$268	\$2,542,625	\$887	\$3,822,524	\$1,058	\$1,541,696	\$427	\$5,364,219	\$1,485	111.0%	67.4%
Total	\$35,076,538	\$314	\$16,088,055	\$144	\$51,164,593	\$459	\$53,557,219	\$387	\$22,726,051	\$164	\$76,283,270	\$551	49.1%	20.2%



Total Plan & Norm

Measure			Total Plan			UMR N	orm
weasure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2025-2Q	Variance
Average Enrollment							
Employees	4,809	99.9%	9,613	25.6%	12,075		
Spouses	1,220	95.2%	2,382	19.8%	2,852		
Children	3,386	94.8%	6,596	23.3%	8,133		
Tot. Members	9,415	97.5%	18,591	24.0%	23,060		
Avg. Family Size	2.0	-1.2%	1.9	-1.2%	1.9	1.9	-0.4%
Financial Summary							
Allowed	\$20,400,428	113.0%	\$43,458,944	49.5%	\$64,975,178		
Plan Paid	\$16,773,687	109.1%	\$35,076,538	52.7%	\$53,557,219		
Member Paid (OOP)	\$3,133,889	102.8%	\$6,355,367	32.0%	\$8,390,558		
Paid PEPY	\$6,976	4.6%	\$7,298	21.6%	\$8,871	\$10,830	-18.1%
Paid PMPY	\$3,563	5.9%	\$3,774	23.1%	\$4,645	\$5,651	-17.8%
Paid PEPM	\$581	4.6%	\$608	21.6%	\$739	\$903	-18.1%
Paid PMPM	\$297	5.9%	\$314	23.1%	\$387	\$471	-17.8%
High-Cost Claimants	(Med Paid \$100,0	000+)					
# of HCCs	12	116.7%	26	96.2%	51		
HCCs per 1000	1.3	9.7%	1.4	58.1%	2.2	3.0	-27.2%
Paid per HCC	\$213,105	-4.8%	\$202,956	1.7%	\$206,321	\$208,900	-1.2%
HCC Paid % of Tot	15.2%	-0.2	15.0%	4.6	19.6%	24.8%	-5.2
Cost Distribution by	Claim Type (Paid	PMPY)					
Inpatient	\$656	-6.8%	\$611	43.3%	\$875	\$1,464	-40.2%
Outpatient	\$1,017	10.1%	\$1,120	18.7%	\$1,330	\$1,635	-18.6%
Physician	\$1,841	6.6%	\$1,962	20.6%	\$2,367	\$2,430	-2.6%
Ancillary	\$49	63.6%	\$80	-9.1%	\$73	\$122	-40.2%

- With \$47.7M paid, the State Active population is 89.1% of total 2025-2Q med spend
- On a Paid PMPM basis, State Actives are up 24.8% compared to prior year
- Total Low Ded Plan Paid PMPM trend is +23.1%

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

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

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

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

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



Active Members

Measure			State Active			Non-State Active					
Measure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	
Average Enrollment											
Employees	4,366	101.0%	8,774	26.9%	11,131	1	50.0%	1	116.7%	2	
Spouses	1,080	96.0%	2,117	20.6%	2,553	1	50.0%	1	16.7%	1	
Children	3,222	95.2%	6,290	24.0%	7,796	0	-	0	-	0	
Tot. Members	8,667	98.2%	17,180	25.0%	21,479	1	50.0%	2	66.7%	3	
Avg. Family Size	2.0	-1.4%	2.0	-1.4%	1.9	2.0	0.0%	2.0	-23.1%	1.5	
Financial Summary											
Allowed	\$17,566,145	114.3%	\$37,652,665	53.8%	\$57,922,197	\$5,696	208.5%	\$17,572	-15.1%	\$14,924	
Plan Paid	\$14,477,253	111.1%	\$30,566,974	56.0%	\$47,699,376	\$4,426	217.3%	\$14,043	-16.2%	\$11,768	
Member Paid (OOP)	\$2,783,205	103.2%	\$5,654,277	34.4%	\$7,599,844	\$1,269	178.0%	\$3,529	-10.6%	\$3,155	
Paid PEPY	\$6,632	5.1%	\$6,967	23.0%	\$8,571	\$13,278	111.5%	\$28,087	-61.3%	\$10,863	
Paid PMPY	\$3,341	6.5%	\$3,558	24.8%	\$4,441	\$6,639	111.5%	\$14,043	-49.7%	\$7,061	
Paid PEPM	\$553	5.1%	\$581	23.0%	\$714	\$1,106	111.5%	\$2,341	-61.3%	\$905	
Paid PMPM	\$278	6.5%	\$297	24.8%	\$370	\$553	111.5%	\$1,170	-49.7%	\$588	
High-Cost Claimants	(Med Paid \$100,0	000+)									
# of HCCs	9	111.1%	19	131.6%	44	0	-	0	-	0	
HCCs per 1000	1.0	6.5%	1.1	85.2%	2.0	0.0	-	0.0	-	0.0	
Paid per HCC	\$222,262	-5.8%	\$209,364	-7.4%	\$193,814	\$0	-	\$0	-	\$0	
HCC Paid % of Tot	13.8%	-0.8	13.0%	4.9	17.9%	0.0%	-	0.0%	-	0.0%	
Cost Distribution by	Claim Type (Paid	I PMPY)									
Inpatient	\$569	0.5%	\$572	43.2%	\$819	\$0	-	\$0	-	\$0	
Outpatient	\$975	11.3%	\$1,085	15.8%	\$1,256	\$0	-	\$0	-	\$2,592	
Physician	\$1,753	4.1%	\$1,825	25.6%	\$2,293	\$6,501	116.0%	\$14,043	-68.2%	\$4,468	
Ancillary	\$44	74.1%	\$77	-4.5%	\$73	\$138	-100.0%	\$0	-	\$0	



Retired Members

Measure			State Retirees			Non-State Retirees					
Weasure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	
Average Enrollment											
Employees	424	90.3%	808	13.4%	916	18	68.2%	30	-14.4%	26	
Spouses	132	90.7%	251	14.3%	287	8	60.4%	13	-13.0%	11	
Children	164	85.6%	305	10.1%	336	0	-	1	0.0%	1	
Tot. Members	721	89.3%	1,364	12.8%	1,540	26	69.7%	44	-13.7%	38	
Avg. Family Size	1.7	-0.5%	1.7	-0.5%	1.7	1.4	0.9%	1.5	0.9%	1.5	
Financial Summary											
Allowed	\$2,753,908	97.4%	\$5,435,689	26.7%	\$6,886,492	\$74,680	372.7%	\$353,018	-57.1%	\$151,565	
Plan Paid	\$2,239,722	96.6%	\$4,404,230	31.1%	\$5,772,291	\$52,287	74.6%	\$91,290	-19.2%	\$73,784	
Member Paid (OOP)	\$337,586	87.9%	\$634,278	19.8%	\$759,699	\$11,828	435.0%	\$63,283	-56.0%	\$27,861	
Paid PEPY	\$10,553	3.3%	\$10,902	15.6%	\$12,600	\$5,864	3.8%	\$6,086	-5.5%	\$5,749	
Paid PMPY	\$6,215	3.9%	\$6,456	16.2%	\$7,499	\$4,048	2.9%	\$4,165	-6.4%	\$3,900	
Paid PEPM	\$879	3.3%	\$909	15.6%	\$1,050	\$489	3.8%	\$507	-5.5%	\$479	
Paid PMPM	\$518	3.9%	\$538	16.2%	\$625	\$337	2.9%	\$347	-6.4%	\$325	
High-Cost Claimants	(Med Paid \$100,	000+)									
# of HCCs	3	166.7%	8	-12.5%	7	0	-	0	-	0	
HCCs per 1000	4.2	40.9%	5.9	-22.5%	4.5	0.0	-	0.0	-	0.0	
Paid per HCC	\$185,633	-12.9%	\$161,609	76.3%	\$284,926	\$0	-	\$0	-	\$0	
HCC Paid % of Tot	24.9%	4.5	29.4%	5.2	34.6%	0.0%	-	0.0%	-	0.0%	
Cost Distribution by	Claim Type (Paid	IPMPY)									
Inpatient	\$1,719	-37.4%	\$1,077	56.6%	\$1,687	\$0	-	\$1,414	-100.0%	\$0	
Outpatient	\$1,532	4.2%	\$1,596	47.7%	\$2,358	\$1,007	-67.8%	\$325	204.9%	\$990	
Physician	\$2,863	27.7%	\$3,658	-7.3%	\$3,390	\$2,765	-15.1%	\$2,347	15.8%	\$2,717	
Ancillary	\$101	23.8%	\$125	-48.1%	\$65	\$277	-71.1%	\$80	141.8%	\$193	



Plan Totals & Norm

Measure			Total Plan				orm
weasure	2023	⇔	2024	⇒	2025-2Q	2025-2Q	Variance
Average Enrollment							
Employees	6,223	60.7%	10,001	20.7%	12,075		
Spouses	1,558	56.9%	2,446	16.6%	2,852		
Children	4,326	56.9%	6,788	19.8%	8,133		
Tot. Members	12,107	58.9%	19,235	19.9%	23,060		
Avg. Family Size	1.9	-1.1%	1.9	-0.7%	1.9	1.9	-0.4%
Financial Summary							
Allowed	\$58,723,398	71.3%	\$100,584,108	-35.4%	\$64,975,178		
Plan Paid	\$48,928,857	71.1%	\$83,741,413	-36.0%	\$53,557,219		
Member Paid (OOP)	\$7,685,021	70.8%	\$13,125,142	-36.1%	\$8,390,558		
Paid PEPY	\$7,863	6.5%	\$8,374	5.9%	\$8,871	\$10,830	-18.1%
Paid PMPY	\$4,041	7.7%	\$4,354	6.7%	\$4,645	\$5,651	-17.8%
Paid PEPM	\$655	6.5%	\$698	5.9%	\$739	\$903	-18.1%
Paid PMPM	\$337	7.7%	\$363	6.7%	\$387	\$471	-17.8%
High-Cost Claimants	(Med Paid \$100,0	000+)					
# of HCCs	48	83.3%	88	-42.0%	51		
HCCs per 1000	4.0	15.4%	4.6	-51.7%	2.2	3.0	-27.2%
Paid per HCC	\$234,319	-2.3%	\$228,980	-9.9%	\$206,321	\$208,900	-1.2%
HCC Paid % of Tot	23.0%	1.1	24.1%	-4.4	19.6%	24.8%	-5.2
Cost Distribution by	Claim Type (Paid	PMPY)					
Inpatient	\$821	1.8%	\$836	4.8%	\$875	\$1,464	-40.2%
Outpatient	\$1,204	5.8%	\$1,273	4.4%	\$1,330	\$1,635	-18.6%
Physician	\$1,931	11.8%	\$2,159	9.6%	\$2,367	\$2,430	-2.6%
Ancillary	\$85	0.6%	\$86	-14.8%	\$73	\$122	-40.2%

- Total plan paid amount for the first two quarters of 2023 was 41.9% of the full year
- Annualizing 2024 paid dollars using the same ratio would result in a total paid of \$128 M

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

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

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

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

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



Active Members

Measure			State Active			Non-State Active					
Weasure	2023	⇔	2024	⇔	2025-2Q	2023	⇔	2024	⇔	2025-2Q	
Average Enrollment											
Employees	5,657	61.8%	9,150	21.6%	11,131	1	50.0%	1	73.3%	2	
Spouses	1,380	57.7%	2,176	17.3%	2,553	1	50.0%	1	-6.7%	1	
Children	4,117	57.3%	6,478	20.3%	7,796	0	-	0	-	0	
Tot. Members	11,154	59.6%	17,804	20.6%	21,479	2	50.0%	3	33.3%	3	
Avg. Family Size	2.0	-1.3%	1.9	-0.8%	1.9	2.0	0.0%	2.0	-23.1%	1.5	
Financial Summary											
Allowed	\$50,806,828	72.2%	\$87,492,756	-33.8%	\$57,922,197	\$15,927	107.5%	\$33,055	-54.9%	\$14,924	
Plan Paid	\$42,329,452	72.7%	\$73,120,641	-34.8%	\$47,699,376	\$12,324	114.9%	\$26,488	-55.6%	\$11,768	
Member Paid (OOP)	\$6,852,589	72.1%	\$11,795,191	-35.6%	\$7,599,844	\$3,603	82.2%	\$6,566	-51.9%	\$3,155	
Paid PEPY	\$7,483	6.8%	\$7,991	7.2%	\$8,571	\$14,788	43.3%	\$21,191	-48.7%	\$10,863	
Paid PMPY	\$3,795	8.2%	\$4,107	8.1%	\$4,441	\$7,394	43.3%	\$10,595	-33.4%	\$7,061	
Paid PEPM	\$624	6.8%	\$666	7.2%	\$714	\$1,232	43.3%	\$1,766	-48.7%	\$905	
Paid PMPM	\$316	8.2%	\$342	8.1%	\$370	\$616	43.3%	\$883	-33.4%	\$588	
High-Cost Claimants	(Med Paid \$100,	000+)									
# of HCCs	37	89.2%	70	-37.1%	44	0	-	0	-	0	
HCCs per 1000	3.3	18.5%	3.9	-47.9%	2.0	0.0	-	0.0	-	0.0	
Paid per HCC	\$238,408	-3.3%	\$230,519	-15.9%	\$193,814	\$0	-	\$0	-	\$0	
HCC Paid % of Tot	20.8%	1.2	22.1%	-4.2	17.9%	0.0%	-	0.0%	-	0.0%	
Cost Distribution by	Claim Type (Paid	I PMPY)									
Inpatient	\$768	3.4%	\$794	3.1%	\$819	\$0	-	\$0	-	\$0	
Outpatient	\$1,133	5.9%	\$1,199	4.8%	\$1,256	\$0	-	\$527	392.1%	\$2,592	
Physician	\$1,818	11.6%	\$2,029	13.0%	\$2,293	\$7,339	36.5%	\$10,017	-55.4%	\$4,468	
Ancillary	\$76	9.9%	\$84	-12.5%	\$73	\$55	-5.8%	\$52	-100.0%	\$0	



Retired Members

Measure			State Retirees				No	on-State Retire	es	
Measure	2023	⇔	2024	⇔	2025-2Q	2023	⇔	2024	⇔	2025-2Q
Average Enrollment										
Employees	543	51.2%	821	11.6%	916	22	28.2%	28	-9.7%	26
Spouses	167	53.4%	256	12.2%	287	11	16.7%	12	-8.8%	11
Children	209	48.0%	309	8.8%	336	0	500.0%	1	0.0%	1
Tot. Members	919	50.9%	1,386	11.1%	1,540	33	26.9%	42	-9.2%	38
Avg. Family Size	1.7	-0.2%	1.7	-0.5%	1.7	1.5	-1.0%	1.5	0.5%	1.5
Financial Summary										
Allowed	\$7,428,459	67.2%	\$12,423,242	-44.6%	\$6,886,492	\$472,184	34.5%	\$635,055	-76.1%	\$151,565
Plan Paid	\$6,219,868	66.0%	\$10,327,679	-44.1%	\$5,772,291	\$367,213	-27.4%	\$266,605	-72.3%	\$73,784
Member Paid (OOP)	\$782,561	57.2%	\$1,230,503	-38.3%	\$759,699	\$46,268	100.7%	\$92,881	-70.0%	\$27,861
Paid PEPY	\$11,454	9.8%	\$12,577	0.2%	\$12,600	\$16,566	-43.4%	\$9,382	-38.7%	\$5,749
Paid PMPY	\$6,771	10.0%	\$7,450	0.7%	\$7,499	\$11,184	-42.8%	\$6,399	-39.0%	\$3,900
Paid PEPM	\$955	9.8%	\$1,048	0.2%	\$1,050	\$1,380	-43.4%	\$782	-38.7%	\$479
Paid PMPM	\$564	10.0%	\$621	0.7%	\$625	\$932	-42.8%	\$533	-39.0%	\$325
High-Cost Claimants	(Med Paid \$100,	000+)								
# of HCCs	10	80.0%	18	-61.1%	7	1	0.0%	1	-100.0%	0
HCCs per 1000	10.9	19.3%	13.0	-65.0%	4.5	30.5	-21.2%	24.0	-100.0%	0.0
Paid per HCC	\$215,577	0.5%	\$216,572	31.6%	\$284,926	\$178,686	-38.7%	\$109,572	-100.0%	\$0
HCC Paid % of Tot	34.7%	3.1	37.7%	-3.2	34.6%	48.7%	-7.6	41.1%	-41.1	0.0%
Cost Distribution by	Claim Type (Paid	IPMPY)								
Inpatient	\$1,448	-9.3%	\$1,314	28.4%	\$1,687	\$1,352	88.2%	\$2,544	-100.0%	\$0
Outpatient	\$1,879	18.3%	\$2,224	6.0%	\$2,358	\$6,322	-78.2%	\$1,379	-28.2%	\$990
Physician	\$3,252	17.0%	\$3,805	-10.9%	\$3,390	\$3,369	-30.6%	\$2,338	16.2%	\$2,717
Ancillary	\$192	-43.8%	\$108	-39.9%	\$65	\$142	-2.5%	\$138	39.9%	\$193

Medical Paid Claims by Claim Type

Breakout of State vs. Non-State by Member Status



		2024-2Q (7/1/2023	- 12/31/2023)			2025-2Q (7/1/2024	- 12/31/2024)		Trend
Claim Type	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Total
State Membe	ers								
Inpatient	\$4,913,602	\$727,416	\$7,148	\$5,648,166	\$8,794,778	\$1,290,061	\$8,184	\$10,093,023	78.7%
Outpatient	\$9,316,632	\$1,033,149	\$55,962	\$10,405,743	\$13,493,802	\$1,775,954	\$38,826	\$15,308,582	47.1%
Physician	\$15,676,119	\$2,402,037	\$93,443	\$18,171,598	\$24,621,678	\$2,491,522	\$117,961	\$27,231,162	49.9%
Ancillary	\$660,622	\$80,125	\$4,951	\$745,697	\$789,118	\$44,342	\$5,441	\$838,901	12.5%
Total	\$30,566,974	\$4,242,727	\$161,503	\$34,971,205	\$47,699,376	\$5,601,880	\$170,412	\$53,471,667	52.9%
РМРМ	\$296.53	\$565.74	\$234.96	\$314.30	\$370.12	\$667.16	\$202.70	\$387.16	23.2%
Non-State M	embers								
Inpatient	\$0	\$0	\$30,985	\$30,985	\$0	\$0	\$0	\$0	-100.0%
Outpatient	\$0	-\$4,700	\$11,815	\$7,115	\$4,321	\$12,311	\$6,413	\$23,045	223.9%
Physician	\$14,043	\$11,611	\$39,828	\$65,482	\$7,447	\$25,076	\$26,328	\$58,851	-10.1%
Ancillary	\$0	\$795	\$957	\$1,752	\$0	\$145	\$3,511	\$3,656	108.7%
Total	\$14,043	\$7,707	\$83,583	\$105,333	\$11,768	\$37,532	\$36,252	\$85,552	-18.8%
РМРМ	\$1,170.27	\$111.64	\$430.91	\$383.03	\$588.41	\$872.61	\$197.03	\$346.36	-9.6%
All Members									
Inpatient	\$4,913,602	\$727,416	\$38,132	\$5,679,150	\$8,794,778	\$1,290,061	\$8,184	\$10,093,023	77.7%
Outpatient	\$9,316,632	\$1,028,449	\$67,777	\$10,412,858	\$13,498,123	\$1,788,264	\$45,239	\$15,331,627	47.2%
Physician	\$15,690,162	\$2,413,648	\$133,270	\$18,237,080	\$24,629,126	\$2,516,598	\$144,289	\$27,290,013	49.6%
Ancillary	\$660,622	\$80,920	\$5,907	\$747,449	\$789,118	\$44,487	\$8,952	\$842,557	12.7%
Total	\$30,581,018	\$4,250,434	\$245,087	\$35,076,538	\$47,711,144	\$5,639,411	\$206,664	\$53,557,219	52.7%
РМРМ	\$296.63	\$561.59	\$278.08	\$314.46	\$370.15	\$668.21	\$201.68	\$387.08	23.1%

Medical Cost Distribution

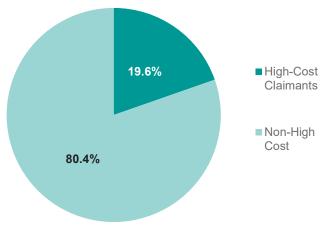


Distribution by Member Cost

Member Total		2	024-2Q (7/1/20	23 - 12/31	/2023)			202	25-2Q (7/1/202	4 - 12/31/2	2024)	
Paid Range	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot
No Claims	5,414	26.1%	\$0	0.0%	\$0	0.0%	6,198	24.3%	\$0	0.0%	\$0	0.0%
< \$0 - \$0	514	2.5%	-\$146,787	-0.4%	\$10,611	0.2%	828	3.2%	-\$232,139	-0.4%	\$27,371	0.3%
> \$0 - \$2,500	12,313	59.5%	\$7,400,863	21.1%	\$2,489,474	39.2%	15,180	59.4%	\$9,474,384	17.7%	\$3,169,828	37.8%
> \$2,500 - \$5,000	1,147	5.5%	\$4,025,034	11.5%	\$1,106,701	17.4%	1,538	6.0%	\$5,336,773	10.0%	\$1,445,041	17.2%
> \$5,000 - \$10,000	703	3.4%	\$4,940,218	14.1%	\$1,019,010	16.0%	896	3.5%	\$6,173,890	11.5%	\$1,300,139	15.5%
> \$10,000 - \$25,000	417	2.0%	\$6,308,454	18.0%	\$962,678	15.1%	563	2.2%	\$8,760,592	16.4%	\$1,331,515	15.9%
> \$25,000 - \$50,000	130	0.6%	\$4,356,642	12.4%	\$480,191	7.6%	204	0.8%	\$6,916,334	12.9%	\$631,242	7.5%
> \$50,000 - \$100,000	44	0.2%	\$2,915,267	8.3%	\$180,941	2.8%	94	0.4%	\$6,605,020	12.3%	\$294,728	3.5%
> \$100,000	26	0.1%	\$5,276,846	15.0%	\$105,762	1.7%	51	0.2%	\$10,522,365	19.6%	\$190,694	2.3%
Total	20,708	100.0%	\$35,076,538	100.0%	\$6,355,367	100.0%	25,552	100.0%	\$53,557,219	100.0%	\$8,390,558	100.0%

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





HCC Cost Breakout by Diagnostic Chapter

#	Diagnostic Chapter	Patients	Total Paid	% of Tot
1	Neoplasms	21	\$1,959,432	18.6%
2	Circulatory System	25	\$1,108,199	10.5%
3	Health Status & Health Services	45	\$1,038,944	9.9%
4	Injury, Poisoning & External Causes	16	\$968,036	9.2%
5	Perinatal Originating Conditions	6	\$883,120	8.4%
6	Endocrine, Nutritional & Metabolic	22	\$725,443	6.9%
7	Musculoskeletal System	24	\$689,659	6.6%
8	Nervous System	22	\$677,989	6.4%
9	Blood & Immune Disorders	16	\$556,920	5.3%
10	Respiratory System	18	\$484,943	4.6%
	All Others		\$1,429,681	13.6%
=	Total	51	\$10,522,365	100.0%

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Utilization Summary – YTD Trend



Plan Totals & Norm

Measure			Total Plan			UMR Norm		
Measure	2023-2Q	⇒	2024-2Q	⇒	2025-2Q	2025-2Q	Variance	
Inpatient Admissions								
# of Admits	174	86.8%	325	30.5%	424			
# of Admit Days	778	104.4%	1,590	22.1%	1,941			
Paid per Admit	\$26,807	-12.2%	\$23,525	5.6%	\$24,834	\$31,394	-20.9%	
Paid per Admit Day	\$5,995	-19.8%	\$4,809	12.8%	\$5,425	\$6,014	-9.8%	
Admits per 1000	37.0	-5.4%	35.0	5.2%	36.8	48.0	-23.4%	
Average LOS	4.5	9.4%	4.9	-6.4%	4.6	5.2	-12.3%	
Emergency Room Visits								
# of ER Visits	881	92.8%	1,699	29.7%	2,203			
~ % resulting in Admit	10.4%	-1.7	8.7%	1.7	10.4%	10.2%	0.2	
ER Visits per Patient	1.2	7.3%	1.3	-0.4%	1.3			
ER Visits per 1000	187.1	-2.3%	182.8	4.5%	191.1	222.5	-14.1%	
Paid per ER Visit	\$2,739	5.2%	\$2,881	6.2%	\$3,059	\$2,383	28.4%	
Urgent Care Visits								
# of UC Visits	2,369	47.2%	3,488	22.7%	4,280			
UC Visits per Patient	1.3	2.3%	1.3	-1.2%	1.3		-	
UC Visits per 1000	503.2	-25.4%	375.2	-1.1%	371.2	260.9	42.3%	
Paid per UC Visit	\$92	6.3%	\$97	9.6%	\$107	\$117	-8.6%	
Office Visits								
Off Visits per Patient	2.7	17.1%	3.2	3.6%	3.3			
Paid per Office Visit	\$77	10.1%	\$85	5.4%	\$89	\$97	-8.0%	
Office Visits Paid PMPY	\$357	0.2%	\$358	9.7%	\$392	\$369	6.2%	
Services								
Radiology Svcs per 1000	3,473.6	0.6%	3,494.2	11.7%	3,902.8	3,626.2	7.6%	
Radiology Paid PMPY	\$373	-10.1%	\$336	15.4%	\$387			
Lab Services per 1000	11,449.3	-16.9%	9,517.1	11.7%	10,634.5	9,516.9	11.7%	
Labs Paid PMPY	\$243	-7.1%	\$226	16.9%	\$264			

- Inpatient Admission rate per 1000 increased 5.2%, and amount paid per Admission is 5.6% higher than prior period
- ER utilization increased 4.5%, and amount paid per ER visit is 6.2% higher than prior period

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

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

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Utilization Summary – YTD Trend



Active Members

Measure			State Active				N	Ion-State Activ	/e	
Measure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q
Inpatient Admissions										
# of Admits	159	85.5%	295	39.0%	410	0	-	0	-	0
# of Admit Days	713	102.8%	1,446	27.2%	1,839	0	-	0	-	0
Paid per Admit	\$24,277	-2.4%	\$23,686	1.2%	\$23,959	\$0	-	\$0	-	\$0
Paid per Admit Day	\$5,414	-10.7%	\$4,832	10.5%	\$5,341	\$0	-	\$0	-	\$0
Admits per 1000	36.7	-6.4%	34.3	11.2%	38.2	0.0	-	0.0	-	0.0
Average LOS	4.5	9.3%	4.9	-8.5%	4.5	0.0	-	0.0	-	0.0
Emergency Room Visits										
# of ER Visits	811	92.5%	1,561	32.0%	2,061	0	-	0	-	2
~ % resulting in Admit	10.1%	-1.6	8.5%	2.0	10.5%	0.0%	-	0.0%	-	0.0%
ER Visits per Patient	1.2	5.3%	1.3	-0.5%	1.3	0.0	-	0.0	-	2.0
ER Visits per 1000	187.1	-2.9%	181.7	5.6%	191.9	0.0	-	0.0	-	1,200.0
Paid per ER Visit	\$2,744	7.6%	\$2,952	0.8%	\$2,975	\$0	-	\$0	-	\$1,852
Urgent Care Visits										
# of UC Visits	2,241	47.5%	3,305	22.6%	4,053	1	100.0%	2	-100.0%	0
UC Visits per Patient	1.3	2.3%	1.3	-1.6%	1.3	1.0	0.0%	1.0	-100.0%	0.0
UC Visits per 1000	517.1	-25.6%	384.7	-1.9%	377.4	1,500.0	33.3%	2,000.0	-100.0%	0.0
Paid per UC Visit	\$92	5.9%	\$98	9.5%	\$107	\$144	18.3%	\$170	-100.0%	\$0
Office Visits										
Off Visits per Patient	2.6	17.0%	3.1	4.1%	3.2	4.5	55.6%	7.0	-35.7%	4.5
Paid per Office Visit	\$76	10.1%	\$84	5.6%	\$89	\$102	39.3%	\$142	11.2%	\$158
Office Visits Paid PMPY	\$342	0.8%	\$344	10.4%	\$380	\$1,379	44.4%	\$1,992	-57.1%	\$855
Services										
Radiology Svcs per 1000	3,221.1	0.2%	3,228.9	13.6%	3,668.5	4,500.0	33.3%	6,000.0	10.0%	6,600.0
Radiology Paid PMPY	\$343	-10.2%	\$308	16.7%	\$359	\$1,933	99.8%	\$3,863	-46.6%	\$2,064
Lab Services per 1000	11,039.8	-16.2%	9,253.2	12.9%	10,450.3	49,500.0	-49.5%	25,000.0	-4.0%	24,000.0
Labs Paid PMPY	\$237	-6.3%	\$222	16.2%	\$258	\$190	2.4%	\$194	14.7%	\$223

Utilization Summary – YTD Trend



Retired Members

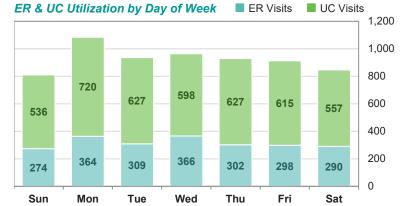
Measure			State Retirees	5		Non-State Retirees					
measure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	
Inpatient Admissions											
# of Admits	15	93.3%	29	-51.7%	14	0	-	1	-100.0%	0	
# of Admit Days	65	104.6%	133	-23.3%	102	0	-	11	-100.0%	0	
Paid per Admit	\$53,621	-62.5%	\$20,085	151.3%	\$50,476	\$0	-	\$75,918	-100.0%	\$0	
Paid per Admit Day	\$12,374	-64.6%	\$4,379	58.2%	\$6,928	\$0	-	\$6,902	-100.0%	\$0	
Admits per 1000	41.6	2.1%	42.5	-57.2%	18.2	0.0	-	45.6	-100.0%	0.0	
Average LOS	4.3	5.8%	4.6	58.9%	7.3	0.0	-	11.0	-100.0%	0.0	
Emergency Room Visits											
# of ER Visits	69	95.7%	135	1.5%	137	1	200.0%	3	0.0%	3	
~ % resulting in Admit	14.5%	-3.4	11.1%	-2.4	8.8%	0.0%	0.0	0.0%	0.0	0.0%	
ER Visits per Patient	1.0	32.4%	1.4	0.5%	1.4	1.0	0.0%	1.0	50.0%	1.5	
ER Visits per 1000	191.5	3.3%	197.9	-10.1%	178.0	77.4	76.8%	136.9	15.9%	158.6	
Paid per ER Visit	\$2,696	-22.1%	\$2,099	107.6%	\$4,358	\$1,702	-60.4%	\$673	316.7%	\$2,805	
Urgent Care Visits											
# of UC Visits	123	39.8%	172	26.2%	217	4	125.0%	9	11.1%	10	
UC Visits per Patient	1.2	2.3%	1.2	6.8%	1.3	2.0	-25.0%	1.5	-16.7%	1.3	
UC Visits per 1000	341.3	-26.1%	252.1	11.8%	281.9	309.7	32.6%	410.6	28.7%	528.6	
Paid per UC Visit	\$84	10.9%	\$93	12.4%	\$105	\$13	350.9%	\$58	3.9%	\$61	
Office Visits											
Off Visits per Patient	3.1	20.3%	3.7	-0.2%	3.7	3.2	30.6%	4.2	18.3%	4.9	
Paid per Office Visit	\$84	10.3%	\$93	2.6%	\$95	\$48	13.6%	\$55	65.2%	\$91	
Office Visits Paid PMPY	\$539	-3.1%	\$522	5.8%	\$552	\$419	-2.5%	\$409	109.0%	\$854	
Services											
Radiology Svcs per 1000	6,163.4	4.3%	6,427.4	9.1%	7,015.0	13,083.9	22.8%	16,060.8	-37.8%	9,991.2	
Radiology Paid PMPY	\$720	-5.3%	\$682	13.2%	\$772	\$790	-61.7%	\$303	114.3%	\$649	
Lab Services per 1000	16,092.6	-22.2%	12,525.0	4.1%	13,033.7	17,341.9	7.3%	18,616.0	-12.0%	16,387.7	
Labs Paid PMPY	\$309	-11.3%	\$274	27.9%	\$350	\$388	-61.3%	\$150	-5.9%	\$141	

On Demand Care Summary

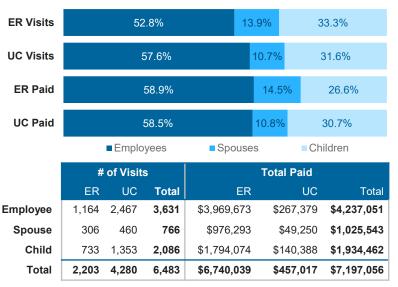
Emergency Room & Urgent Care

U	M	R	

Measure	2024-2Q	2025-2Q	Change	UMR Norm	Variance
Emergency Room					
# of Visits	1,699	2,203	29.7%		
# of Patients	1,317	1,715	30.2%		
Total Plan Paid	\$4,894,015	\$6,740,039	37.7%		
Total Mem Paid	\$1,123,158	\$1,403,517	25.0%		
Visits per 1000	182.8	191.1	4.5%	222.5	-14.1%
Paid per Visit	\$2,881	\$3,059	6.2%	\$2,383	28.4%
Paid PMPM	\$44	\$49	11.0%	\$44	10.3%
% ER Patients w/ Office Visit*	90.4%	90.4%	0.0		
% Potentially Avoidable**	14.1%	16.3%	2.2	83.1%	-66.8
Urgent Care					
# of Visits	3,488	4,280	22.7%		
# of Patients	2,630	3,268	24.3%		
Total Plan Paid	\$339,799	\$457,017	34.5%		
Total Mem Paid	\$254,665	\$307,525	20.8%		
Visits per 1000	375.2	371.2	-1.1%	260.9	42.3%
Paid per Visit	\$97	\$107	9.6%	\$117	-8.6%
Paid PMPM	\$3	\$3	8.4%	\$3	30.0%



ER & UC Utilization & Cost by Relationship



* Office Visit within prior 12 months..

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

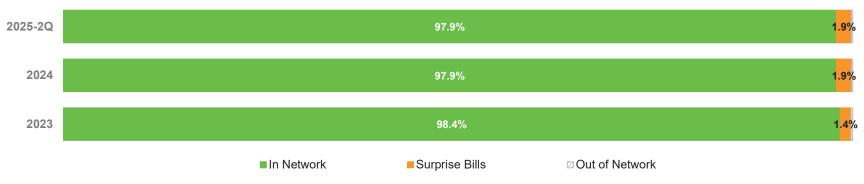
Network Summary

Discount Percentage & Network Utilization



Discount Percentage* by Claim Type Plan Year: 2023 2024 2025-2Q 80% 70% 60% 50% 40% 74.4% 70.2% 71.0% 70.8% 70.5% 68.2% 66.4% 65.2% 64.3% 30% 60.4% 59.5% 59.5% 58.7% 53.7% 51.7% 20% 10% 0% Physician Ancillary Inpatient Outpatient Total

Network Utilization*



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

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Clinical Classification Summary

Breakout by Diagnostic Chapter

UMR	SM

Diamastic Charton	2024 (i	⁻ ull Year)	202	25-2Q	CYTD P	aid by Relatio	nship	CYTD Paid by Sex		
Diagnostic Chapter	Patients	Total Paid	Patients	Total Paid	Employee	Spouse	Child	Male	Female	
Health Status & Health Services	12,860	\$9,799,414	10,803	\$6,343,752	\$3,995,808	\$927,286	\$1,420,659	\$2,200,309	\$4,143,444	
Musculoskeletal System	5,252	\$8,247,149	4,239	\$4,973,682	\$3,534,075	\$876,618	\$562,989	\$2,302,857	\$2,670,825	
Neoplasms	2,400	\$5,750,257	1,812	\$4,700,689	\$3,711,888	\$869,023	\$119,778	\$1,534,510	\$3,166,179	
Circulatory System	2,897	\$6,856,254	2,296	\$4,541,633	\$3,190,744	\$1,175,761	\$175,128	\$2,876,923	\$1,664,709	
Mental, Behavioral & Neurodevelopmental	4,161	\$6,596,135	3,901	\$4,060,433	\$1,844,259	\$364,129	\$1,852,046	\$1,616,215	\$2,444,218	
Injury, Poisoning & External Causes	2,586	\$5,001,111	1,938	\$3,721,740	\$1,961,561	\$520,230	\$1,239,949	\$1,897,877	\$1,823,864	
Symptoms, Signs & Findings, NEC	8,003	\$5,392,767	6,336	\$3,494,887	\$2,129,850	\$616,218	\$748,819	\$1,149,134	\$2,345,753	
Digestive System	2,577	\$4,958,096	1,959	\$3,449,049	\$2,360,563	\$610,345	\$478,141	\$1,217,127	\$2,231,922	
Genitourinary System	3,804	\$4,801,920	3,039	\$2,928,188	\$2,169,045	\$458,251	\$300,892	\$646,157	\$2,282,032	
Nervous System	2,751	\$5,952,179	2,228	\$2,577,685	\$2,025,459	\$309,570	\$242,657	\$940,786	\$1,636,899	
Endocrine, Nutritional & Metabolic	5,290	\$3,869,576	4,615	\$2,575,026	\$2,038,564	\$361,003	\$175,459	\$1,077,333	\$1,497,693	
Respiratory System	5,652	\$3,772,490	3,628	\$2,489,146	\$1,125,958	\$661,103	\$702,085	\$1,287,284	\$1,201,862	
Pregnancy, Childbirth & the Puerperium	476	\$3,930,375	435	\$2,364,740	\$1,667,688	\$508,568	\$188,484	\$4,571	\$2,360,169	
Perinatal Originating Conditions	226	\$3,322,086	171	\$1,476,490	\$874	\$0	\$1,475,616	\$887,809	\$588,681	
Infectious & Parasitic Diseases	1,650	\$1,677,923	1,118	\$935,424	\$529,944	\$203,593	\$201,887	\$519,021	\$416,403	
Blood & Immune Disorders	718	\$416,460	599	\$886,554	\$747,357	\$102,612	\$36,586	\$659,578	\$226,976	
Eye and Adnexa	4,615	\$1,199,451	2,897	\$743,745	\$449,457	\$117,148	\$177,141	\$343,156	\$400,589	
Skin & Subcutaneous Tissue	3,978	\$941,344	3,037	\$553,845	\$300,911	\$83,692	\$169,242	\$227,004	\$326,840	
Ear and Mastoid Process	1,597	\$644,319	1,015	\$374,749	\$184,997	\$35,170	\$154,582	\$179,560	\$195,189	
Congenital Malformations & Abnormalities	311	\$611,052	223	\$278,272	\$33,824	\$4,114	\$240,335	\$137,037	\$141,235	
External Causes of Morbidity	6	\$1,053	8	\$22,254	\$21,183	\$532	\$540	\$510	\$21,744	
Total	18,957	\$83,741,413	18,967	\$53,557,219	\$34,083,417	\$8,809,836	\$10,663,967	\$21,724,857	\$31,832,363	

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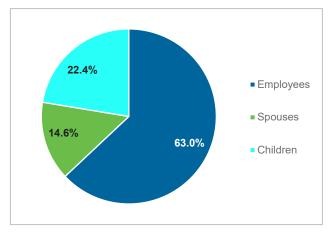
Health Status & Health Services

Breakout by Diagnostic Grouping & Demographics

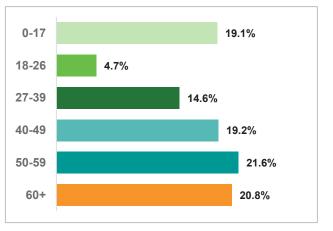


#	Health Status & Services Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Encounter for antineoplastic therapies	38	194	\$1,642,719	25.9%
2	Medical examination/evaluation	7,150	10,967	\$1,437,956	22.7%
3	Neoplasm-related encounters	2,402	4,007	\$1,058,470	16.7%
4	Exposure, enc, screen or contact w infectious dz	3,797	5,017	\$935,580	14.7%
5	Contraceptive & procreative management	545	914	\$321,042	5.1%
6	Personal/family history of disease	438	596	\$237,949	3.8%
7	Other aftercare encounter	305	564	\$191,390	3.0%
8	Encount for obs & exam for conds ruled out	1,099	1,334	\$89,808	1.4%
9	Implant, device or graft related encounter	232	583	\$87,687	1.4%
10	Other specified encounters & counseling	275	890	\$72,051	1.1%
11	Other specified status	550	860	\$68,265	1.1%
12	Organ transplant status	22	58	\$56,172	0.9%
13	Encounter for prophylactic or oth procedures	37	41	\$44,144	0.7%
14	Acquired absence of limb or organ	22	34	\$40,506	0.6%
15	Enc for prophylactic measures (ex immuniz)	80	108	\$32,143	0.5%
16	Lifestyle/life management factors	52	94	\$10,119	0.2%
17	Encounter for administrative purposes	30	36	\$9,159	0.1%
18	Encounter for mental health conditions	649	742	\$3,556	0.1%
19	No immunization or underimmunization	14	14	\$2,366	0.0%
20	Screen for neuro -cognitive or -developmntl cond	61	68	\$1,474	0.0%
	All Others	17	30	\$1,195	0.0%
=	Total	10,803	27,274	\$6,343,752	100.0%

Health Status & Services Paid by Relationship



Health Status & Services Paid by Age Range



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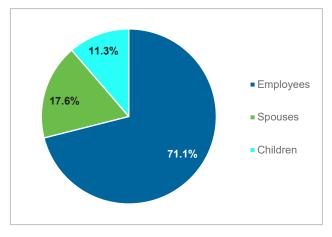
Musculoskeletal System

Breakout by Diagnostic Grouping & Demographics

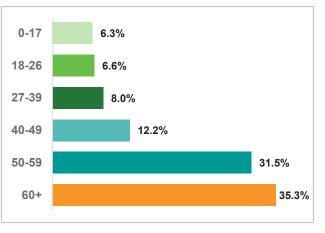


#	Musculoskeletal Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Spondylopathies & arthropathy	1,143	3,831	\$1,234,519	24.8%
2	Osteoarthritis & osteoporosis	488	1,212	\$977,418	19.7%
3	Other musculoskeletal pain	2,215	6,093	\$882,128	17.7%
4	Scoliosis & oth deformities	321	619	\$527,162	10.6%
5	Tendon, tissue, muscle disorders	835	1,958	\$485,460	9.8%
6	Other MSK	80	271	\$274,201	5.5%
7	Joint disorders & fractures	293	641	\$208,912	4.2%
8	Low back pain	535	1,421	\$178,758	3.6%
9	Rheumatoid arthritis & related disease	127	374	\$142,294	2.9%
10	Lupus	93	271	\$40,386	0.8%
11	Biomechanical lesions	331	1,183	\$13,221	0.3%
12	Gout & crystal arthropathies	73	106	\$9,222	0.2%
=	Total	4,239	18,884	\$4,973,682	100.0%

Musculoskeletal Paid by Relationship



Musculoskeletal Paid by Age Range



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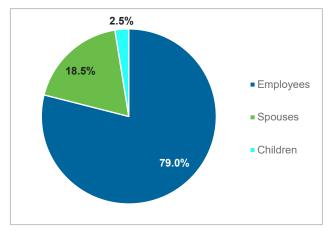
Neoplasms (Cancer)

Breakout by Diagnostic Grouping & Demographics

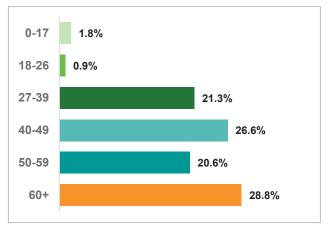


#	Neoplasms (Cancer) Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Breast cancer	121	1,058	\$1,151,000	24.5%
2	Benign neoplasms	1,192	1,667	\$624,538	13.3%
3	Lymphoma	28	182	\$444,048	9.4%
4	Secondary malignancies	24	112	\$443,659	9.4%
5	Skin cancer	135	327	\$292,752	6.2%
6	Prostate cancer	42	288	\$209,367	4.5%
7	Other cancer	36	199	\$208,248	4.4%
8	Other gastrointestinal cancers	15	160	\$196,618	4.2%
9	Brain cancer	9	87	\$194,880	4.1%
10	Thyroid cancer	46	182	\$192,051	4.1%
11	Colorectal cancer	23	215	\$146,589	3.1%
12	Neoplasms of unspec nature	589	787	\$117,068	2.5%
13	Head & neck cancers	13	102	\$78,444	1.7%
14	Multiple myeloma	2	17	\$71,312	1.5%
15	Cervical cancer	14	48	\$64,996	1.4%
16	Endometrial cancer	13	40	\$56,388	1.2%
17	Respiratory cancers	10	141	\$55,179	1.2%
18	Leukemia	15	164	\$49,843	1.1%
19	Pancreatic cancer	3	47	\$42,274	0.9%
20	Other urinary system cancer	6	31	\$28,662	0.6%
	All Others	24	48	\$32,775	0.7%
=	Total	1,812	6,318	\$4,700,689	100.0%

Neoplasms (Cancer) Paid by Relationship



Neoplasms (Cancer) Paid by Age Range



Note: there are additional cancer-related costs for encounters and therapy, totaling \$2,701,189 - see Health Status for more details

Mental & Behavioral Trend

Prevalence & Cost by Diagnostic Grouping



Mental & Behavioral	2023 (F	⁻ ull Year)	2024 (I	Full Year)	202	25-2Q	20	25-2Q Paid b	oy Claim Type	
Diagnostic Grouping	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid	Inpatient	Outpatient	Physician	Ancillary
Depressive disorders	809	\$816,779	1,312	\$1,765,217	1,141	\$1,069,485	\$197,993	\$25,191	\$845,084	\$1,217
Neurodevelopmental disorders	475	\$333,190	839	\$967,358	782	\$958,705	\$0	\$3,909	\$954,796	\$0
Anxiety & related Disorders	1,022	\$497,830	1,659	\$914,955	1,473	\$635,240	\$0	\$15,855	\$618,168	\$1,217
Trauma & stressor disorders	656	\$443,281	1,151	\$777,003	991	\$541,214	\$0	\$9,013	\$532,201	\$0
Alcohol-related disorders	68	\$264,765	100	\$479,637	73	\$207,192	\$130,954	\$11,546	\$64,692	\$0
Other mental health	225	\$81,468	370	\$451,071	290	\$150,261	\$10,209	\$42,266	\$97,343	\$443
Bipolar & related Disorders	142	\$184,393	220	\$270,639	213	\$105,561	\$0	\$6,660	\$98,901	\$0
Suicidal ideation, attempt or self-harm	40	\$168,577	61	\$408,763	33	\$104,382	\$14,569	\$73,741	\$16,072	\$0
Schizophrenia spectrum disorders	23	\$59,238	29	\$162,208	26	\$103,721	\$63,072	\$14,756	\$25,892	\$0
Eating disorders	38	\$115,900	53	\$266,949	42	\$86,114	\$0	\$0	\$86,114	\$0
Obsessive compulsive disorders	35	\$95,327	82	\$67,055	78	\$68,075	\$0	\$0	\$68,075	\$0
Cannabis-related disorders	12	\$2,064	19	\$5,491	15	\$12,227	\$0	\$7,690	\$4,537	\$0
Opiod disorders	19	\$18,055	20	\$34,948	18	\$9,132	\$0	\$0	\$9,132	\$0
Other substance use	43	\$8,400	90	\$9,948	38	\$6,314	\$0	\$651	\$5,663	\$0
Stimulant disorders	7	\$6,127	11	\$14,892	3	\$2,811	\$0	\$0	\$2,811	\$0
Total	2,630	\$3,095,394	4,161	\$6,596,135	3,901	\$4,060,433	\$416,797	\$211,277	\$3,429,483	\$2,877

Chronic Conditions

Prevalence & Severity of 24 Chronic Conditions



	Wi	th Conditi	ion		Мо	derate/Hig	h Risk Co	ndition	
Chronic Condition	# of Mems	Mems per 1000	Change vs LY	# of Mems	Mems per 1000	Change vs LY	Allowed PMPY	Admits per 1000	ER Visits per 1000
Affective Psychosis	59	2.9	90.3%	37	1.8	76.2%	\$4,341	50.8	118.6
Asthma	729	35.8	30.4%	292	14.3	41.7%	\$4,809	52.1	220.9
Atrial Fibrillation	135	6.6	27.4%	97	4.8	38.6%	\$38,618	407.4	570.4
Blood Disorders	788	38.7	42.2%	345	17.0	47.4%	\$12,292	134.5	327.4
CAD	211	10.4	39.7%	104	5.1	40.5%	\$20,347	260.7	421.8
COPD	47	2.3	38.2%	28	1.4	75.0%	\$33,395	595.7	893.6
Cancer	1,317	64.7	33.2%	609	29.9	37.2%	\$12,567	54.7	155.7
Chronic Pain	135	6.6	18.4%	59	2.9	55.3%	\$23,511	281.5	459.3
CHF	52	2.6	147.6%	33	1.6	83.3%	\$57,512	653.8	673.1
Demyelinating Diseases	56	2.8	-3.4%	39	1.9	11.4%	\$29,553	107.1	250.0
Depression	1,403	68.9	38.1%	1,028	50.5	50.3%	\$7,193	74.1	239.5
Diabetes	1,271	62.4	39.8%	892	43.8	47.4%	\$7,181	66.1	252.6
ESRD	56	2.8	86.7%	34	1.7	41.7%	\$56,294	910.7	1,500.0
Eating Disorders	51	2.5	34.2%	36	1.8	33.3%	\$12,084	39.2	333.3
HIV/AIDS	34	1.7	25.9%	22	1.1	4.8%	\$2,242	29.4	147.1
Hyperlipidemia	672	33.0	34.9%	235	11.5	52.6%	\$2,560	10.4	68.5
Hypertension	1,710	84.0	34.9%	814	40.0	38.7%	\$6,119	63.7	209.4
Immune Disorders	62	3.0	5.1%	26	1.3	8.3%	\$7,444	16.1	177.4
IBD	90	4.4	28.6%	30	1.5	50.0%	\$2,044	11.1	55.6
Liver Disease	4	0.2	-	4	0.2	-	\$83,763	1,000.0	1,750.0
Morbid Obesity	310	15.2	67.6%	149	7.3	62.0%	\$6,748	74.2	119.4
Osteoarthritis	644	31.6	37.9%	272	13.4	40.2%	\$9,167	51.2	139.8
Peripheral Vascular Disease	74	3.6	76.2%	16	0.8	77.8%	\$6,414	81.1	229.7
Rheumatoid Arthritis	127	6.2	23.3%	87	4.3	22.5%	\$9,543	78.7	236.2

- Most prevalent chronic condition is Hypertension, with 1,710 members
- Depression is the condition with the most moderate/high risk members (1,028)
- Members with mod/high risk Cancer have the highest combined cost: 609 members totaling \$7.65M

Date Range: Service Dates 10/1/2023 - 9/30/2024, Paid through 12/31/2024

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

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

Cost & Utilization for All Me	mbers:
-------------------------------	--------

Allowed PMPY: \$5,379
Admits per 1000: 40.9
ER Visits per 1000: 190.3

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Prevention, Wellness, & Maintenance



Preventive & Condition-specific Screening Rate Trends

		Oc	t 2022 - Sep 2	023	Oc	t 2023 - Sep 2	024	Rate	UMR Norm		
Preventive Service	Population	Eligible	Actual	Rate	Eligible	Actual	Rate	Change	Rate	Variance	
Well Visits	Rate for Well Baby & We	ell Child is Visits	s per 1,000. Ra	ate for adults is	the percentage	who had a we	ll visit.				
Well Baby Visit	0 - 15 months	197.7	1,087	5,497.9	256.0	1,398	5,459.9	-0.7%	5,308.6	2.9%	
Well Child Visit	3 - 6 years	808.0	648	802.0	1,009.2	827	819.4	2.2%	792.3	3.4%	
Adults w/ Well Visit	Adults 18+	11,641	5,054	43.4%	15,358	6,756	44.0%	0.6	41.2%	2.8	
Screenings	Rate for all screenings is	for all screenings is the percentage of eligible population who had the screening during the period.									
Mammogram	Females 40 - 69	3,626	1,668	46.0%	4,700	2,265	48.2%	2.2	47.9%	0.2	
Cervical Cancer	Females 21 - 64	6,198	1,888	30.5%	8,115	2,460	30.3%	-0.1	24.1%	6.2	
Prostate Cancer	Males 50 - 70	1,560	666	42.7%	2,092	959	45.8%	3.1	42.5%	3.3	
Colorectal Cancer	Members 45 - 75	4,953	841	17.0%	6,519	1,233	18.9%	1.9	17.4%	1.5	
Cholesterol	Female 45+ Male 35+	6,095	3,446	56.5%	8,022	4,654	58.0%	1.5	48.6%	9.5	
Condition-specific	Screening										
Asthma	Office Visit for Asthma	559	437	78.2%	729	588	80.7%	2.5			
COPD	Spirometry Test	34	5	14.7%	47	9	19.1%	4.4			
	A1c Test	830	725	87.3%	1,166	1,064	91.3%	3.9	86.2%	5.1	
	Eye Exam	830	188	22.7%	1,166	246	21.1%	-1.6	25.7%	-4.6	
Type 2 Diabetes	Lipid Panel	830	638	76.9%	1,166	947	81.2%	4.4	73.2%	8.1	
	Urine Protein Test	830	547	65.9%	1,166	783	67.2%	1.2	64.2%	3.0	
	Any Diabetes Screen	830	779	93.9%	1,166	1,102	94.5%	0.7	93.8%	0.7	
Hyperlipidemia	Lipid Profile	498	261	52.4%	672	354	52.7%	0.3			
Umentension	Creatinine Test	1,268	256	20.2%	1,710	320	18.7%	-1.5			
Hypertension	Lipid Profile	1,268	369	29.1%	1,710	439	25.7%	-3.4			

Date Range: Reporting periods are service-based with 3 months of runout: Current period is Service Dates 10/1/2023 - 9/30/2024, Paid through 12/31/2024 **Note:** Preventive Services do not include those performed at onsite clinics or ones for which no claim was submitted to UMR.

Public Employees' Benefits Program - RX Costs PY 2024 - Through Quarter Ending December 31, 2023 Express Scripts

	Express Scripts			
	1Q-2Q FY2025 LDPPO	1Q-2Q FY2024 LDPPO	Difference	% Change
Membership Summary			Membership S	
Member Count (Membership)	23,010	18,549	4,461	24.0%
Utilizing Member Count (Patients)	15,040	12,302	2,738	22.3%
Percent Utilizing (Utilization)	65.4%	66.3%	(0)	-1.4%
Claim Summary			Claims Sum	
Net Claims (Total Rx's)	174,430	134,780	39,650	29.4%
Claims per Elig Member per Month (Claims PMPM)	1.26	1.21	0.05	4.1%
Total Claims for Generic (Generic Rx)	148,000	113,404	34,596.00	30.5%
Total Claims for Brand (Brand Rx)	26,430	21,376	5,054.00	23.6%
Total Claims for Brand w/Gen Equiv (Multisource Brand Claims)	518	823	(305.00)	-37.1% 29.4%
Total Non-Specialty Claims Total Specialty Claims	172,280 2,150	133,098 1,682	39,182.00 468.00	29.4%
Generic % of Total Claims (GFR)	84.8%	84.1%	0.01	0.8%
Generic Effective Rate (GCR)	99.7%	99.3%	0.00	0.4%
Mail Order Claims	46,041	38,934	7,107.00	18.3%
Mail Penetration Rate*	30.4%	33.5%	(0.03)	-3.1%
	· · · · · · · · · · · · · · · · · · ·			
Claims Cost Summary Total Prescription Cost (Total Gross Cost)	\$26,795,778	\$19,637,591	Claims Cost St 7,158,187.00	36.5%
Total Generic Gross Cost	\$2,873,199	\$2,257,816	615,383.00	27.3%
Total Brand Gross Cost	\$23,922,579	\$17,379,775	6,542,804.00	37.6%
Total MSB Gross Cost	\$231,238	\$375,742	(144,504.00)	-38.5%
Total Ingredient Cost	\$26,003,118	\$19,003,397	6,999,721.00	36.8%
Total Dispensing Fee	\$773,895	\$618,608	155,287.00	25.1%
Total Other (e.g. tax)	\$18,766	\$15,587	\$3,179	20.4%
Avg Total Cost per Claim (Gross Cost/Rx)	\$153.62	\$145.70	\$7.92	5.4%
Avg Total Cost for Generic (Gross Cost/Generic Rx)	\$19.41	\$19.91	(0.50)	-2.5%
Avg Total Cost for Brand (Gross Cost/Brand Rx)	\$905.13	\$813.05	92.08	11.3%
Avg Total Cost for MSB (MSB Gross Cost/MSB ARx)	\$446.41	\$456.55	(10.14)	-2.2%
Member Cost Summary			Member Cost S	ummary
Total Member Cost	\$3,728,835	\$2,721,339	\$1,007,496.00	37.0%
Total Copay	\$3,728,835	\$2,721,339	\$1,007,496.00	37.0%
Total Deductible	\$0	\$0	\$0.00	0.0%
Avg Copay per Claim (Copay/Rx)	\$21.38	\$20.19	\$1.19	5.9%
Avg Participant Share per Claim (Copay+Deductible/RX)	\$21.38	\$20.19	\$1.19	5.9%
Avg Copay for Generic (Copay/Generic Rx)	\$7.07	\$6.71	\$0.36	5.4%
Avg Copay for Brand (Copay/Brand Rx)	\$101.52	\$91.69	\$9.83	10.7%
Avg Copay for Brand w/ Generic Equiv (Copay/Multisource Rx)	\$36.30	\$30.62	\$5.68	18.5%
Net PMPM (Participant Cost PMPM)	\$27.01	\$24.45 13.9%	\$2.56	10.5%
Copay % of Total Prescription Cost (Member Cost Share %)	13.9%	15.9%	0.1%	0.4%
Plan Cost Summary			Plan Cost Sur	
Total Plan Cost (Plan Cost)	\$23,066,943	\$16,916,252	\$6,150,691.00	36.4%
Total Non-Specialty Cost (Non-Specialty Plan Cost)	\$12,810,809	\$8,740,916	\$4,069,893.00	46.6%
Total Specialty Drug Cost (Specialty Plan Cost)	\$10,256,134	\$8,175,336	\$2,080,798.00	25.5%
Avg Plan Cost per Claim (Plan Cost/Rx)	\$132.24	\$125.51	\$6.73	5.4%
Avg Plan Cost for Generic (Plan Cost/Generic Rx)	\$12.35	\$13.20 \$721.26	(\$0.85)	-6.4%
Avg Plan Cost for Brand (Plan Cost/Brand Rx) Avg Plan Cost for MSB (MSB Plan Cost/MSB ARx)	\$803.61 \$410.10	\$721.36 \$425.93	\$82.25 (\$15.83)	11.4% -3.7%
Net PMPM (Plan Cost PMPM)	\$410.10 \$167.08	\$425.93 \$152.00	(\$15.83) \$15.08	-3.7% 9.9%
PMPM without Specialty (Non-Specialty PMPM)	\$92.79	\$78.54	\$13.08	18.1%
PMPM for Specialty Only (Specialty PMPM)	\$74.29	\$73.46	\$0.83	1.1%
Rebates Received (Q1-Q2 FY2024 actual)	\$7,098,113	\$4,478,754	\$2,619,359.46	58.5%
Net PMPM (Plan Cost PMPM factoring Rebates)	\$115.67	\$111.75	\$3.91	3.5%
PMPM without Specialty (Non-Specialty PMPM)	\$56.83	\$34.67	\$22.16	63.9%
PMPM for Specialty Only (Specialty PMPM)	\$45.82	\$44.75	\$1.07	2.4%

Appendix C

Index of Tables UMR Inc. – EPO Utilization Review for PEBP July 1, 2024 – December 31, 2024

PRESCRIPTION DRUG COSTS

Prescription Drug Cost Comparison	
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Public Employees' Benefits Program

Quarterly Plan Performance Review EPO Plan • 2025-2Q



RPG 4.81 • Run Date: 2/27/2025

Report Criteria & Contents



Experience Periods*

> 2025 Plan Year (Current)

2025-2Q.1st two Quarters: Claims Paid 7/1/2024 - 12/31/2024

> 2024 Plan Year

2024-2Q.1st two Quarters: Claims Paid 7/1/2023 - 12/31/2023 2024 Full Year: Claims paid 7/1/2023 - 6/30/2024

> 2023 Plan Year

2023-2Q.1st two Quarters: Claims Paid 7/1/2022 - 12/31/2022 2023 Full Year: Claims paid 7/1/2022 - 6/30/2023

Group Data

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

Normative Comparison Data

- ➤ Norm Groups: UMR Book of Business in InfoPortSM
- > Composition: 4,609 groups with approximately 6.5 million members
- Norm Period matches Current Year: Claims Paid 7/1/2024 12/31/2024

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

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Executive Summary





Cost Drivers

- Overall Cost Trend based on Medical Paid PEPY: +42.4%
- High-Cost Claimants Paid PMPM trend: +170.2%; Non HCCs trend: +8.4%
- Top Paid Diagnostic Chapters: Perinatal Conditions (+253.0% Paid PMPM), Neoplasms (Cancer) (+49.4%), Circulatory System (+36.8%)

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Membership & Demographics

- Total membership is 9.7% lower than prior period
- Employees decreased 9.4%, while Dependents were down 10.0%
- 80.4% of members had < \$2,500 medical paid, with 16.4% having no claims paid at all during the reporting period



Utilization Key Indicators

- Paid per IP Admit was \$42,628, which is 48.7% higher than 2024-2Q
- Paid per ER Visit was \$3,224, which is 10.0% higher than 2024-2Q



Network Utilization & Savings

- 97.0% of all Medical spend dollars were to In Network providers
- The average In Network discount was 53.0%, which is 3.2 pts below the 2024 average discount of 56.2%

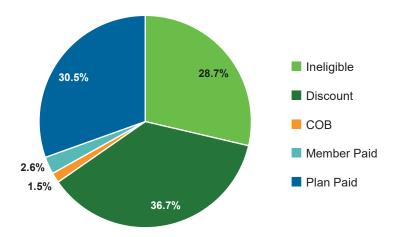
3



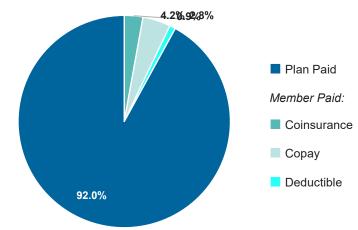
Dollar Chain: Billed to Paid Dollars

Dollar Amount	2025-2Q Total Dollars	2025-2Q PMPM*	2024 PMPM*	Trend
Medical Billed	\$80,018,701	\$2,548	\$2,127	19.8%
(-) Ineligible	\$22,904,831	\$729	\$504	44.8%
Medical Covered	\$57,113,870	\$1,818	\$1,623	12.0%
(-) Discount	\$29,317,139	\$933	\$890	4.9%
Medical Allowed	\$27,796,732	\$885	\$733	20.7%
(-) COB	\$1,230,443	\$39	\$24	59.9%
(-) Coinsurance	\$751,532	\$24	\$21	15.4%
(-) Copay	\$1,122,472	\$36	\$34	5.4%
(-) Deductible	\$240,229	\$8	\$6	20.0%
Total Member Paid	\$2,114,233	\$67	\$61	10.3%
Total Plan Paid	\$24,359,762	\$776	\$643	20.5%

Breakout of Billed Dollars



Breakout of Paid Dollars: Plan vs. Member Paid



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



	Med Paid PMPM Rx Paid PMPM Total Paid <1 \$1,049,945 \$3,480 \$3,641 \$12 \$1,053,586 1 \$94,317 \$327 \$1,499 \$5 \$95,816 2 - 4 \$332,042 \$294 \$5,918 \$5 \$337,960 5 - 9 \$180,268 \$95 \$28,313 \$15 \$208,581 10 - 14 \$550,873 \$214 \$73,718 \$29 \$624,592 15 - 19 \$904,692 \$307 \$343,584 \$117 \$1,248,276 20 - 24 \$626,178 \$219 \$110,231 \$39 \$736,409 25 - 29 \$312,998 \$284 \$211,510 \$192 \$524,508 30 - 34 \$740,382 \$570 \$340,225 \$155 \$1,592,866 40 - 44 \$1,028,389 \$432 \$737,118 \$310 \$1,765,507 45 - 49 \$1,299,195 \$495 \$1,001,287 \$381 \$2,300,483 50 - 54 \$2,267,103 \$663					2025	-2Q (7/1/2024	- 12/31/2	2024)		Change			
Age						Tot Paid PMPM	Med Paid	Med Paid PMPM	Rx Paid	Rx Paid PMPM	Total Paid	Tot Paid PMPM	Total Paid	Tot Paid PMPM
<1	\$1,049,945	\$3,480	\$3,641	\$12	\$1,053,586	\$3,492	\$3,293,367	\$16,633	\$1,177	\$6	\$3,294,544	\$16,639	212.7%	376.5%
1	\$94,317	\$327	\$1,499	\$5	\$95,816	\$333	\$152,050	\$606	\$1,962	\$8	\$154,012	\$613	60.7%	84.4%
2 - 4	\$332,042	\$294	\$5,918	\$5	\$337,960	\$300	\$87,462	\$105	\$4,561	\$5	\$92,022	\$110	-72.8%	-63.3%
5 - 9	\$180,268	\$95	\$28,313	\$15	\$208,581	\$110	\$253,896	\$132	\$31,576	\$16	\$285,471	\$149	36.9%	35.2%
10 - 14	\$550,873	\$214	\$73,718	\$29	\$624,592	\$243	\$505,461	\$222	\$95,288	\$42	\$600,749	\$264	-3.8%	8.7%
15 - 19	\$904,692	\$307	\$343,584	\$117	\$1,248,276	\$424	\$998,903	\$380	\$384,030	\$146	\$1,382,933	\$525	10.8%	23.9%
20 - 24	\$626,178	\$219	\$110,231	\$39	\$736,409	\$258	\$671,886	\$250	\$265,311	\$99	\$937,197	\$349	27.3%	35.6%
25 - 29	\$312,998	\$284	\$211,510	\$192	\$524,508	\$476	\$295,064	\$332	\$161,814	\$182	\$456,878	\$514	-12.9%	8.1%
30 - 34	\$740,382	\$528	\$800,854	\$571	\$1,541,236	\$1,099	\$640,216	\$523	\$341,002	\$278	\$981,218	\$801	-36.3%	-27.1%
35 - 39	\$1,252,641	\$570	\$340,225	\$155	\$1,592,866	\$725	\$954,245	\$528	\$216,060	\$120	\$1,170,304	\$648	-26.5%	-10.7%
40 - 44	\$1,028,389	\$432	\$737,118	\$310	\$1,765,507	\$742	\$1,152,762	\$528	\$1,111,567	\$509	\$2,264,328	\$1,038	28.3%	39.8%
45 - 49	\$1,299,195	\$495	\$1,001,287	\$381	\$2,300,483	\$876	\$3,097,330	\$1,381	\$752,722	\$336	\$3,850,052	\$1,717	67.4%	95.9%
50 - 54	\$2,267,103	\$663	\$845,002	\$247	\$3,112,105	\$911	\$1,915,386	\$634	\$924,691	\$306	\$2,840,076	\$940	-8.7%	3.3%
55 - 59	\$2,829,760	\$810	\$1,401,078	\$401	\$4,230,838	\$1,211	\$3,147,378	\$914	\$1,603,886	\$466	\$4,751,264	\$1,380	12.3%	13.9%
60 - 64	\$3,641,323	\$890	\$1,901,346	\$465	\$5,542,669	\$1,354	\$3,752,253	\$1,019	\$1,947,647	\$529	\$5,699,900	\$1,548	2.8%	14.3%
65+	\$1,767,678	\$849	\$902,379	\$433	\$2,670,057	\$1,282	\$3,442,105	\$1,616	\$1,181,327	\$555	\$4,623,432	\$2,171	73.2%	69.4%
Total	\$18,877,784	\$543	\$8,707,703	\$250	\$27,585,487	\$793	\$24,359,762	\$775	\$9,024,620	\$287	\$33,384,383	\$1,063	21.0%	34.0%



Total Plan & Norm

Measure			Total Plan				orm
weasure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2025-2Q	Variance
Average Enrollment							
Employees	2,320	34.9%	3,131	-9.4%	2,837		
Spouses	460	31.6%	605	-9.7%	546		
Children	1,539	33.8%	2,060	-10.1%	1,851		
Tot. Members	4,319	34.2%	5,796	-9 .7%	5,235		
Avg. Family Size	1.9	-0.6%	1.9	-0.3%	1.8	1.9	-3.7%
Financial Summary							
Allowed	\$14,159,388	53.6%	\$21,750,264	27.8%	\$27,796,732		
Plan Paid	\$11,874,152	59.0%	\$18,877,784	29.0%	\$24,359,762		
Member Paid (OOP)	\$1,598,943	37.0%	\$2,189,860	-3.5%	\$2,114,233		
Paid PEPY	\$10,236	17.8%	\$12,059	42.4%	\$17,171	\$10,830	58.5%
Paid PMPY	\$5,499	18.5%	\$6,514	42.9%	\$9,306	\$5,651	64.7%
Paid PEPM	\$853	17.8%	\$1,005	42.4%	\$1,431	\$903	58.5%
Paid PMPM	\$458	18.5%	\$543	42.9%	\$776	\$471	64.7%
High-Cost Claimants	(Med Paid \$100,0)00+)					
# of HCCs	12	75.0%	21	47.6%	31		
HCCs per 1000	2.8	30.4%	3.6	63.4%	5.9	3.0	95.0%
Paid per HCC	\$174,563	9.6%	\$191,350	65.3%	\$316,384	\$208,900	51.5%
HCC Paid % of Tot	17.6%	3.6	21.3%	19.0	40.3%	24.8%	15.4
Cost Distribution by	Claim Type (Paid	PMPY)					
Inpatient	\$1,283	24.8%	\$1,602	124.5%	\$3,595	\$1,464	145.5%
Outpatient	\$1,881	3.8%	\$1,953	25.0%	\$2,441	\$1,635	49.3%
Physician	\$2,280	26.2%	\$2,876	10.2%	\$3,170	\$2,430	30.4%
Ancillary	\$54	54.1%	\$83	20.5%	\$101	\$122	-17.8%

- With \$20.9M paid, the State Active population is 85.8% of total 2025-2Q med spend
- On a Paid PMPM basis, State Actives are up 44.6% compared to prior year
- > Total EPO Plan Paid PMPM trend is +42.9%

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

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

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

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

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



Active Members

Measure			State Active			Non-State Active					
weasure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	
Average Enrollment											
Employees	1,935	33.7%	2,588	-10.3%	2,321	1	25.0%	2	0.0%	2	
Spouses	393	31.0%	514	-9.8%	464	0	-	0	-	0	
Children	1,435	33.8%	1,920	-10.5%	1,719	0	-	0	-	0	
Tot. Members	3,763	33.5%	5,022	-10.3%	4,504	1	25.0%	2	0.0%	2	
Avg. Family Size	1.9	-0.2%	1.9	0.0%	1.9	1.0	0.0%	1.0	0.0%	1.0	
Financial Summary	Financial Summary										
Allowed	\$11,256,250	59.7%	\$17,977,921	27.7%	\$22,959,098	\$1,734	-6.9%	\$1,615	150.2%	\$4,040	
Plan Paid	\$9,609,643	67.6%	\$16,109,752	29.7%	\$20,894,147	\$1,360	-5.3%	\$1,287	135.6%	\$3,033	
Member Paid (OOP)	\$1,316,812	37.2%	\$1,806,848	-5.2%	\$1,712,296	\$373	-12.3%	\$327	207.7%	\$1,007	
Paid PEPY	\$9,932	25.4%	\$12,451	44.6%	\$18,002	\$2,040	-24.3%	\$1,545	135.6%	\$3,640	
Paid PMPY	\$5,108	25.6%	\$6,416	44.6%	\$9,279	\$2,040	-24.3%	\$1,545	135.6%	\$3,640	
Paid PEPM	\$828	25.4%	\$1,038	44.6%	\$1,500	\$170	-24.3%	\$129	135.6%	\$303	
Paid PMPM	\$426	25.6%	\$535	44.6%	\$773	\$170	-24.3%	\$129	135.6%	\$303	
High-Cost Claimants	(Med Paid \$100,0	000+)									
# of HCCs	10	70.0%	17	41.2%	24	0	-	0	-	0	
HCCs per 1000	2.7	27.4%	3.4	57.4%	5.3	0.0	-	0.0	-	0.0	
Paid per HCC	\$150,598	35.3%	\$203,690	75.8%	\$358,140	\$0	-	\$0	-	\$0	
HCC Paid % of Tot	15.7%	5.8	21.5%	19.6	41.1%	0.0%	-	0.0%	-	0.0%	
Cost Distribution by	Claim Type (Paid	I PMPY)									
Inpatient	\$1,148	40.4%	\$1,612	137.9%	\$3,835	\$0	-	\$0	-	\$0	
Outpatient	\$1,746	9.9%	\$1,919	18.5%	\$2,274	\$0	-	\$0	-	\$0	
Physician	\$2,167	29.5%	\$2,807	9.4%	\$3,072	\$1,801	-14.2%	\$1,545	104.9%	\$3,165	
Ancillary	\$46	70.0%	\$78	25.2%	\$98	\$240	-100.0%	\$0	-	\$475	



Retired Members

Measure			State Retirees				Non-State Retirees				
Weasure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	
Average Enrollment											
Employees	342	43.1%	489	-3.8%	470	42	25.7%	53	-16.0%	45	
Spouses	57	40.6%	80	-7.0%	75	10	5.0%	11	-23.8%	8	
Children	95	35.3%	128	-3.2%	124	9	28.6%	12	-27.8%	9	
Tot. Members	493	41.3%	697	-4.1%	668	62	22.8%	76	-19.0%	61	
Avg. Family Size	1.4	-1.2%	1.4	-0.3%	1.4	1.5	-2.3%	1.4	-3.5%	1.4	
Financial Summary											
Allowed	\$2,621,011	33.8%	\$3,506,100	33.1%	\$4,668,156	\$280,393	-5.6%	\$264,627	-37.5%	\$165,438	
Plan Paid	\$2,135,673	24.1%	\$2,649,716	28.2%	\$3,398,202	\$127,475	-8.2%	\$117,029	-45.0%	\$64,379	
Member Paid (OOP)	\$243,201	42.2%	\$345,786	7.7%	\$372,355	\$38,557	-4.3%	\$36,898	-22.6%	\$28,576	
Paid PEPY	\$12,507	-13.3%	\$10,846	33.4%	\$14,464	\$6,046	-27.0%	\$4,416	-34.5%	\$2,893	
Paid PMPY	\$8,660	-12.2%	\$7,605	33.7%	\$10,167	\$4,146	-25.2%	\$3,100	-32.1%	\$2,105	
Paid PEPM	\$1,042	-13.3%	\$904	33.4%	\$1,205	\$504	-27.0%	\$368	-34.5%	\$241	
Paid PMPM	\$722	-12.2%	\$634	33.7%	\$847	\$345	-25.2%	\$258	-32.1%	\$175	
High-Cost Claimants	(Med Paid \$100,	000+)									
# of HCCs	2	100.0%	4	75.0%	7	0	-	0	-	0	
HCCs per 1000	4.1	41.5%	5.7	82.4%	10.5	0.0	-	0.0	-	0.0	
Paid per HCC	\$294,386	-52.8%	\$138,905	21.5%	\$168,765	\$0	-	\$0	-	\$0	
HCC Paid % of Tot	27.6%	-6.6	21.0%	13.8	34.8%	0.0%	-	0.0%	-	0.0%	
Cost Distribution by	Claim Type (Paid	IPMPY)									
Inpatient	\$2,418	-30.3%	\$1,685	36.4%	\$2,298	\$469	-64.7%	\$166	25.0%	\$207	
Outpatient	\$2,940	-24.2%	\$2,227	68.1%	\$3,744	\$1,658	2.8%	\$1,704	-68.5%	\$536	
Physician	\$3,189	11.8%	\$3,564	11.9%	\$3,990	\$1,936	-38.1%	\$1,198	20.5%	\$1,444	
Ancillary	\$113	13.4%	\$128	5.4%	\$135	\$82	-61.0%	\$32	-358.5%	-\$83	



Plan Totals & Norm

Measure			Total Plan				orm
weasure	2023	⇒	2024	⇔	2025-2Q	2025-2Q	Variance
Average Enrollment							
Employees	2,851	8.3%	3,089	-8.1%	2,837		
Spouses	560	7.5%	602	-9.2%	546		
Children	1,902	7.1%	2,037	-9.1%	1,851		
Tot. Members	5,312	7.8%	5,727	-8.6%	5,235		
Avg. Family Size	1.9	-0.5%	1.9	-0.5%	1.8	1.9	-3.7%
Financial Summary							
Allowed	\$42,927,918	17.4%	\$50,382,246	-44.8%	\$27,796,732		
Plan Paid	\$37,698,949	17.3%	\$44,213,123	-44.9%	\$24,359,762		
Member Paid (OOP)	\$3,655,799	14.7%	\$4,194,135	-49.6%	\$2,114,233		
Paid PEPY	\$13,224	8.2%	\$14,315	20.0%	\$17,171	\$10,830	58.5%
Paid PMPY	\$7,097	8.8%	\$7,720	20.5%	\$9,306	\$5,651	64.7%
Paid PEPM	\$1,102	8.2%	\$1,193	20.0%	\$1,431	\$903	58.5%
Paid PMPM	\$591	8.8%	\$643	20.5%	\$776	\$471	64.7%
High-Cost Claimants	(Med Paid \$100,0)00+)					
# of HCCs	50	24.0%	62	-50.0%	31		
HCCs per 1000	9.4	15.0%	10.8	-45.3%	5.9	3.0	95.0%
Paid per HCC	\$256,471	4.8%	\$268,731	17.7%	\$316,384	\$208,900	51.5%
HCC Paid % of Tot	34.0%	3.7	37.7%	2.6	40.3%	24.8%	15.4
Cost Distribution by	Claim Type (Paid	PMPY)					
Inpatient	\$2,047	12.9%	\$2,312	55.5%	\$3,595	\$1,464	145.5%
Outpatient	\$2,174	0.1%	\$2,177	12.1%	\$2,441	\$1,635	49.3%
Physician	\$2,798	12.0%	\$3,134	1.1%	\$3,170	\$2,430	30.4%
Ancillary	\$78	25.6%	\$98	2.7%	\$101	\$122	-17.8%

- Total plan paid amount for the first two quarters of 2023 was 42.7% of the full year
- Annualizing 2024 paid dollars using the same ratio would result in a total paid of \$57.1 M

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

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

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

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

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



Active Members

Measure			State Active			Non-State Active				
Weasure	2023	⇔	2024	⇔	2025-2Q	2023	⇔	2024	⇔	2025-2Q
Average Enrollment										
Employees	2,378	7.3%	2,551	-9.0%	2,321	2	22.2%	2	-9.1%	2
Spouses	480	6.6%	512	-9.4%	464	0	-	0	-	0
Children	1,775	6.8%	1,896	-9.3%	1,719	0	-	0	-	0
Tot. Members	4,632	7.0%	4,959	-9.2%	4,504	2	22.2%	2	-9.1%	2
Avg. Family Size	1.9	-0.2%	1.9	-0.2%	1.9	1.0	0.0%	1.0	0.0%	1.0
Financial Summary										
Allowed	\$34,840,103	20.3%	\$41,912,359	-45.2%	\$22,959,098	\$3,978	13.6%	\$4,517	-10.6%	\$4,040
Plan Paid	\$31,178,774	22.5%	\$38,203,284	-45.3%	\$20,894,147	\$3,168	12.0%	\$3,547	-14.5%	\$3,033
Member Paid (OOP)	\$3,001,569	15.3%	\$3,460,814	-50.5%	\$1,712,296	\$810	19.8%	\$970	3.8%	\$1,007
Paid PEPY	\$13,113	14.2%	\$14,974	20.2%	\$18,002	\$2,112	-8.4%	\$1,935	88.1%	\$3,640
Paid PMPY	\$6,731	14.5%	\$7,704	20.4%	\$9,279	\$2,112	-8.4%	\$1,935	88.1%	\$3,640
Paid PEPM	\$1,093	14.2%	\$1,248	20.2%	\$1,500	\$176	-8.4%	\$161	88.1%	\$303
Paid PMPM	\$561	14.5%	\$642	20.4%	\$773	\$176	-8.4%	\$161	88.1%	\$303
High-Cost Claimants	(Med Paid \$100,	000+)								
# of HCCs	39	38.5%	54	-55.6%	24	0	-	0	-	0
HCCs per 1000	8.4	29.4%	10.9	-51.1%	5.3	0.0	-	0.0	-	0.0
Paid per HCC	\$260,607	6.8%	\$278,222	28.7%	\$358,140	\$0	-	\$0	-	\$0
HCC Paid % of Tot	32.6%	6.7	39.3%	1.8	41.1%	0.0%	-	0.0%	-	0.0%
Cost Distribution by	Claim Type (Paid	I PMPY)								
Inpatient	\$1,952	26.8%	\$2,476	54.9%	\$3,835	\$0	-	\$0	-	\$0
Outpatient	\$2,029	2.0%	\$2,071	9.8%	\$2,274	\$0	-	\$0	-	\$0
Physician	\$2,680	14.4%	\$3,067	0.2%	\$3,072	\$1,741	3.6%	\$1,804	75.5%	\$3,165
Ancillary	\$69	33.0%	\$92	6.8%	\$98	\$371	-64.6%	\$131	261.5%	\$475



Retired Members

Measure	State Retirees					Non-State Retirees				
	2023	⇔	2024	⇔	2025-2Q	2023	⇔	2024	⇔	2025-2Q
Average Enrollment										
Employees	422	15.0%	486	-3.3%	470	49	0.8%	50	-10.6%	45
Spouses	69	16.9%	80	-6.8%	75	11	-10.7%	10	-17.9%	8
Children	116	11.7%	130	-4.3%	124	11	1.5%	12	-24.6%	9
Tot. Members	607	14.6%	695	-3.9%	668	72	-0.8%	71	-13.8%	61
Avg. Family Size	1.4	-0.4%	1.4	-0.6%	1.4	1.5	-1.6%	1.4	-3.7%	1.4
Financial Summary										
Allowed	\$7,555,779	3.0%	\$7,783,435	-40.0%	\$4,668,156	\$528,058	29.1%	\$681,934	-75.7%	\$165,438
Plan Paid	\$6,296,019	-10.2%	\$5,652,251	-39.9%	\$3,398,202	\$220,989	60.2%	\$354,041	-81.8%	\$64,379
Member Paid (OOP)	\$577,466	13.5%	\$655,475	-43.2%	\$372,355	\$75,953	1.2%	\$76,876	-62.8%	\$28,576
Paid PEPY	\$14,911	-22.0%	\$11,637	24.3%	\$14,464	\$4,480	58.9%	\$7,116	-59.3%	\$2,893
Paid PMPY	\$10,376	-21.7%	\$8,129	25.1%	\$10,167	\$3,087	61.5%	\$4,986	-57.8%	\$2,105
Paid PEPM	\$1,243	-22.0%	\$970	24.3%	\$1,205	\$373	58.9%	\$593	-59.3%	\$241
Paid PMPM	\$865	-21.7%	\$677	25.1%	\$847	\$257	61.5%	\$416	-57.8%	\$175
High-Cost Claimants	(Med Paid \$100,	000+)								
# of HCCs	12	-41.7%	7	0.0%	7	0	-	1	-100.0%	0
HCCs per 1000	19.8	-49.1%	10.1	4.0%	10.5	0.0	-	14.1	-100.0%	0.0
Paid per HCC	\$221,656	-9.1%	\$201,561	-16.3%	\$168,765	\$0	-	\$132,680	-100.0%	\$0
HCC Paid % of Tot	42.2%	-17.3	25.0%	9.8	34.8%	0.0%	-	37.5%	-37.5	0.0%
Cost Distribution by Claim Type (Paid PMPY)										
Inpatient	\$2,991	-57.1%	\$1,283	79.1%	\$2,298	\$202	399.6%	\$1,007	-79.4%	\$207
Outpatient	\$3,410	-15.0%	\$2,898	29.2%	\$3,744	\$1,145	125.1%	\$2,576	-79.2%	\$536
Physician	\$3,829	-0.4%	\$3,812	4.7%	\$3,990	\$1,661	-26.1%	\$1,228	17.7%	\$1,444
Ancillary	\$146	-7.6%	\$135	-0.2%	\$135	\$79	120.9%	\$175	-147.3%	-\$83

Medical Paid Claims by Claim Type

Breakout of State vs. Non-State by Member Status



		2024-2Q (7/1/2023	- 12/31/2023)		2025-2Q (7/1/2024 - 12/31/2024)				
Claim Type	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Total
State Membe	ers								
Inpatient	\$4,047,822	\$506,696	\$80,388	\$4,634,907	\$8,635,418	\$522,856	\$245,327	\$9,403,601	102.9%
Outpatient	\$4,818,426	\$746,795	\$29,308	\$5,594,529	\$5,121,893	\$1,181,147	\$70,214	\$6,373,253	13.9%
Physician	\$7,047,594	\$1,163,796	\$78,067	\$8,289,457	\$6,916,779	\$1,180,762	\$152,749	\$8,250,290	-0.5%
Ancillary	\$195,911	\$31,674	\$12,990	\$240,575	\$220,058	\$32,263	\$12,884	\$265,205	10.2%
Total	\$16,109,752	\$2,448,962	\$200,754	\$18,759,468	\$20,894,147	\$2,917,028	\$481,174	\$24,292,350	29.5%
РМРМ	\$534.64	\$695.38	\$304.39	\$546.72	\$773.21	\$872.30	\$721.56	\$782.78	43.2%
Non-State M	embers								
Inpatient	\$0	\$0	\$6,259	\$6,259	\$0	\$0	\$6,337	\$6,337	1.2%
Outpatient	\$0	\$5,174	\$59,155	\$64,328	\$0	\$0	\$16,404	\$16,404	-74.5%
Physician	\$1,287	\$9,464	\$35,768	\$46,519	\$2,637	\$5,257	\$38,915	\$46,810	0.6%
Ancillary	\$0	\$0	\$1,210	\$1,210	\$396	\$0	-\$2,534	-\$2,138	-276.7%
Total	\$1,287	\$14,638	\$102,391	\$118,316	\$3,033	\$5,257	\$59,123	\$67,413	-43.0%
РМРМ	\$128.74	\$232.35	\$262.54	\$255.54	\$303.33	\$175.22	\$175.44	\$178.81	-30.0%
All Members									
Inpatient	\$4,047,822	\$506,696	\$86,647	\$4,641,166	\$8,635,418	\$522,856	\$251,664	\$9,409,938	102.7%
Outpatient	\$4,818,426	\$751,969	\$88,463	\$5,658,858	\$5,121,893	\$1,181,147	\$86,618	\$6,389,657	12.9%
Physician	\$7,048,881	\$1,173,260	\$113,835	\$8,335,976	\$6,919,417	\$1,186,019	\$191,664	\$8,297,099	-0.5%
Ancillary	\$195,911	\$31,674	\$14,200	\$241,785	\$220,453	\$32,263	\$10,351	\$263,068	8.8%
Total	\$16,111,039	\$2,463,600	\$303,145	\$18,877,784	\$20,897,181	\$2,922,285	\$540,296	\$24,359,762	29.0%
РМРМ	\$534.51	\$687.25	\$288.84	\$542.84	\$773.04	\$866.10	\$538.22	\$775.53	42.9%

Medical Cost Distribution

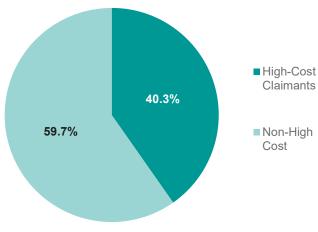


Distribution by Member Cost

Member Total		2024-2Q (7/1/2023 - 12/31/2023)						2025-2Q (7/1/2024 - 12/31/2024)					
Paid Range	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Member Paid)	OOP % of Tot	
No Claims	1,050	16.5%	\$0	0.0%	\$0	0.0%	938	16.4%	\$0	0.0%	\$0	0.0%	
< \$0 - \$0	201	3.2%	-\$25,301	-0.1%	-\$1,385	-0.1%	195	3.4%	-\$110,239	-0.5%	\$2,375	0.1%	
> \$0 - \$2,500	3,977	62.4%	\$2,690,636	14.3%	\$747,041	34.1%	3,478	60.6%	\$2,420,374	9.9%	\$686,814	32.5%	
> \$2,500 - \$5,000	516	8.1%	\$1,794,654	9.5%	\$405,526	18.5%	492	8.6%	\$1,733,276	7.1%	\$380,879	18.0%	
> \$5,000 - \$10,000	299	4.7%	\$2,076,734	11.0%	\$363,417	16.6%	267	4.7%	\$1,845,403	7.6%	\$325,889	15.4%	
> \$10,000 - \$25,000	197	3.1%	\$3,074,842	16.3%	\$315,682	14.4%	218	3.8%	\$3,512,617	14.4%	\$375,923	17.8%	
> \$25,000 - \$50,000	74	1.2%	\$2,558,649	13.6%	\$177,919	8.1%	85	1.5%	\$2,890,887	11.9%	\$165,985	7.9%	
> \$50,000 - \$100,000	39	0.6%	\$2,689,214	14.2%	\$113,338	5.2%	31	0.5%	\$2,259,536	9.3%	\$88,675	4.2%	
> \$100,000	21	0.3%	\$4,018,355	21.3%	\$68,321	3.1%	31	0.5%	\$9,807,909	40.3%	\$87,693	4.1%	
Total	6,374	100.0%	\$18,877,784	100.0%	\$2,189,860	100.0%	5,735	100.0%	\$24,359,762	100.0%	\$2,114,233	100.0%	

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





HCC Cost Breakout by Diagnostic Chapter

#	Diagnostic Chapter	Patients	Total Paid	% of Tot
1	Perinatal Originating Conditions	3	\$3,082,258	31.4%
2	Neoplasms	13	\$2,036,223	20.8%
3	Circulatory System	22	\$1,394,832	14.2%
4	Injury, Poisoning & External Causes	12	\$1,137,872	11.6%
5	Infectious & Parasitic Diseases	6	\$425,184	4.3%
6	Digestive System	11	\$401,694	4.1%
7	Health Status & Health Services	25	\$299,149	3.1%
8	Blood & Immune Disorders	7	\$265,774	2.7%
9	Endocrine, Nutritional & Metabolic	12	\$154,768	1.6%
10	Ear and Mastoid Process	2	\$117,439	1.2%
	All Others		\$492,715	5.0%
=	Total	31	\$9,807,909	100.0%

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Utilization Summary – YTD Trend



Plan Totals & Norm

Measure			Total Plan				orm
measure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2025-2Q	Variance
Inpatient Admissions							
# of Admits	139	13.7%	158	-7.0%	147		
# of Admit Days	684	2.8%	703	34.7%	947		
Paid per Admit	\$39,264	-27.0%	\$28,673	48.7%	\$42,628	\$31,394	35.8%
Paid per Admit Day	\$7,979	-19.2%	\$6,444	2.7%	\$6,617	\$6,014	10.0%
Admits per 1000	64.4	-15.3%	54.5	3.0%	56.2	48.0	17.0%
Average LOS	4.9	-9.6%	4.4	44.8%	6.4	5.2	23.4%
Emergency Room Visits							
# of ER Visits	544	21.1%	659	-5.3%	624		
~ % resulting in Admit	10.7%	4.2	14.9%	-0.3	14.6%	10.2%	4.4
ER Visits per Patient	1.3	6.4%	1.3	-1.9%	1.3		
ER Visits per 1000	251.9	-9.7%	227.4	4.8%	238.4	222.5	7.2%
Paid per ER Visit	\$2,648	10.7%	\$2,932	10.0%	\$3,224	\$2,383	35.3%
Urgent Care Visits							
# of UC Visits	1,187	7.9%	1,281	-4.4%	1,225		
UC Visits per Patient	1.3	1.9%	1.4	1.6%	1.4		-
UC Visits per 1000	549.7	-19.6%	442.0	5.9%	468.0	260.9	79.4%
Paid per UC Visit	\$106	19.5%	\$126	3.1%	\$130	\$117	11.5%
Office Visits							
Off Visits per Patient	2.9	21.6%	3.5	3.2%	3.6		
Paid per Office Visit	\$103	7.6%	\$111	5.0%	\$117	\$97	20.3%
Office Visits Paid PMPY	\$585	-1.4%	\$577	9.0%	\$629	\$369	70.3%
Services							
Radiology Svcs per 1000	3,731.9	-10.8%	3,328.5	15.5%	3,843.7	3,626.2	6.0%
Radiology Paid PMPY	\$536	-2.8%	\$521	14.8%	\$598		
Lab Services per 1000	11,463.8	-7.8%	10,568.7	5.7%	11,169.6	9,516.9	17.4%
Labs Paid PMPY	\$220	-5.7%	\$208	29.6%	\$269		

- Inpatient Admission rate per 1000 increased 3.0%, and amount paid per Admission is significantly (+48.7%) higher than prior period
- ER utilization increased 4.8%, and amount paid per ER visit is 10.0% higher than prior period

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

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

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Utilization Summary – YTD Trend



Active Members

Measure			State Active			Non-State Active				
Measure	2023-2Q	⇔	2024-2Q	⇔	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q
Inpatient Admissions										
# of Admits	119	11.8%	133	-12.8%	116	0	-	0	-	0
# of Admit Days	592	-0.8%	587	29.1%	758	0	-	0	-	0
Paid per Admit	\$36,903	-19.1%	\$29,868	55.7%	\$46,496	\$0	-	\$0	-	\$0
Paid per Admit Day	\$7,418	-8.8%	\$6,767	5.1%	\$7,116	\$0	-	\$0	-	\$0
Admits per 1000	63.2	-16.3%	53.0	-2.7%	51.5	0.0	-	0.0	-	0.0
Average LOS	5.0	-11.3%	4.4	48.1%	6.5	0.0	-	0.0	-	0.0
Emergency Room Visits										
# of ER Visits	473	20.5%	570	-8.9%	519	0	-	0	-	1
~ % resulting in Admit	10.4%	3.0	13.3%	-1.8	11.6%	0.0%	-	0.0%	-	0.0%
ER Visits per Patient	1.2	6.0%	1.3	-1.7%	1.3	0.0	-	0.0	-	1.0
ER Visits per 1000	251.4	-9.7%	227.0	1.5%	230.5	0.0	-	0.0	-	1,200.0
Paid per ER Visit	\$2,624	14.9%	\$3,016	7.0%	\$3,227	\$0	-	\$0	-	\$369
Urgent Care Visits										
# of UC Visits	1,052	8.1%	1,137	-5.4%	1,076	0	-	0	-	0
UC Visits per Patient	1.3	1.6%	1.4	1.6%	1.4	0.0	-	0.0	-	0.0
UC Visits per 1000	559.1	-19.0%	452.8	5.5%	477.8	0.0	-	0.0	-	0.0
Paid per UC Visit	\$107	20.5%	\$129	2.7%	\$132	\$0	-	\$0	-	\$0
Office Visits										
Off Visits per Patient	2.8	20.8%	3.4	2.3%	3.4	7.0	-42.9%	4.0	0.0%	4.0
Paid per Office Visit	\$106	8.4%	\$115	6.1%	\$122	\$112	71.9%	\$193	-34.9%	\$126
Office Visits Paid PMPY	\$570	-0.7%	\$566	9.3%	\$619	\$1,179	-21.4%	\$926	-34.9%	\$603
Services										
Radiology Svcs per 1000	3,343.1	-5.7%	3,151.0	13.2%	3,566.8	6,000.0	-60.0%	2,400.0	100.0%	4,800.0
Radiology Paid PMPY	\$522	-1.3%	\$515	13.5%	\$584	\$521	-100.0%	\$0	-	\$452
Lab Services per 1000	11,044.6	-7.9%	10,168.5	5.2%	10,699.0	27,000.0	-42.2%	15,600.0	7.7%	16,800.0
Labs Paid PMPY	\$216	-5.7%	\$204	31.0%	\$267	\$37	1019.3%	\$411	24.9%	\$514

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Utilization Summary – YTD Trend



Retired Members

Measure	State Retirees					Non-State Retirees				
Measure	2023-2Q	⇔	2024-2Q	⇒	2025-2Q	2023-2Q	⇔	2024-2Q	⇔	2025-2Q
Inpatient Admissions										
# of Admits	18	22.2%	22	36.4%	30	2	50.0%	3	-66.7%	1
# of Admit Days	85	28.2%	109	71.6%	187	7	0.0%	7	-71.4%	2
Paid per Admit	\$58,256	-57.1%	\$24,972	15.6%	\$28,863	\$8,833	-68.1%	\$2,816	143.4%	\$6,853
Paid per Admit Day	\$12,337	-59.1%	\$5,040	-8.1%	\$4,630	\$2,524	-52.2%	\$1,207	183.9%	\$3,426
Admits per 1000	73.0	-13.5%	63.1	42.2%	89.8	65.0	22.2%	79.5	-58.9%	32.7
Average LOS	4.7	4.9%	5.0	25.8%	6.2	3.5	-33.3%	2.3	-14.3%	2.0
Emergency Room Visits										
# of ER Visits	62	35.5%	84	14.3%	96	9	-44.4%	5	60.0%	8
~% resulting in Admit	12.9%	9.7	22.6%	8.6	31.3%	11.1%	48.9	60.0%	-47.5	12.5%
ER Visits per Patient	1.3	13.3%	1.5	-6.2%	1.4	1.5	-33.3%	1.0	14.3%	1.1
ER Visits per 1000	251.4	-4.1%	241.1	19.1%	287.2	292.7	-54.7%	132.5	97.5%	261.6
Paid per ER Visit	\$3,025	-25.1%	\$2,265	52.5%	\$3,456	\$1,289	245.2%	\$4,449	-86.3%	\$611
Urgent Care Visits										
# of UC Visits	122	5.7%	129	7.8%	139	13	15.4%	15	-33.3%	10
UC Visits per Patient	1.3	2.5%	1.3	3.5%	1.4	1.2	26.9%	1.5	-16.7%	1.3
UC Visits per 1000	494.7	-25.2%	370.2	12.3%	415.9	422.8	-6.0%	397.4	-17.7%	327.0
Paid per UC Visit	\$99	15.7%	\$114	5.4%	\$121	\$70	-46.6%	\$38	20.8%	\$45
Office Visits										
Off Visits per Patient	3.3	26.5%	4.1	6.9%	4.4	3.5	20.6%	4.2	-3.6%	4.1
Paid per Office Visit	\$96	3.2%	\$99	-0.6%	\$98	\$50	-3.8%	\$48	-0.8%	\$48
Office Visits Paid PMPY	\$722	-5.4%	\$683	6.5%	\$727	\$393	-16.4%	\$328	-3.3%	\$317
Services										
Radiology Svcs per 1000	6,528.7	-29.9%	4,574.7	26.0%	5,765.3	5,040.7	-27.5%	3,655.6	-12.3%	3,204.4
Radiology Paid PMPY	\$658	-6.9%	\$612	19.3%	\$731	\$435	-76.4%	\$102	43.2%	\$147
Lab Services per 1000	14,618.5	-6.9%	13,606.4	8.4%	14,743.8	11,479.7	-21.3%	9,033.1	-26.9%	6,604.9
Labs Paid PMPY	\$255	-4.1%	\$244	24.2%	\$303	\$221	-34.9%	\$143	-49.9%	\$72

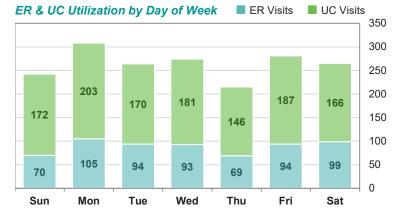
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On Demand Care Summary

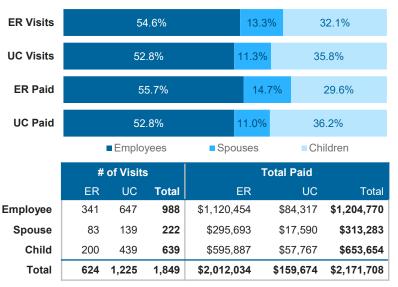
Emergency Room & Urgent Care

UM	IR

Measure	2024-2Q	2025-2Q	Change	UMR Norm	Variance
Emergency Room					
# of Visits	659	624	-5.3%		
# of Patients	492	475	-3.5%		
Total Plan Paid	\$1,931,912	\$2,012,034	4.1%		
Total Mem Paid	\$322,982	\$299,667	-7.2%		
Visits per 1000	227.4	238.4	4.8%	222.5	7.2%
Paid per Visit	\$2,932	\$3,224	10.0%	\$2,383	35.3%
Paid PMPM	\$56	\$64	15.3%	\$44	45.0%
% ER Patients w/ Office Visit*	95.7%	96.4%	0.7		
% Potentially Avoidable**	13.8%	10.6%	-3.2	83.1%	-72.5
Urgent Care					
# of Visits	1,281	1,225	-4.4%		
# of Patients	939	884	-5.9%		
Total Plan Paid	\$161,913	\$159,674	-1.4%		
Total Mem Paid	\$58,733	\$54,517	-7.2%		
Visits per 1000	442.0	468.0	5.9%	260.9	79.4%
Paid per Visit	\$126	\$130	3.1%	\$117	11.5%
Paid PMPM	\$5	\$5	9.2%	\$3	100.1%



ER & UC Utilization & Cost by Relationship



* Office Visit within prior 12 months..

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

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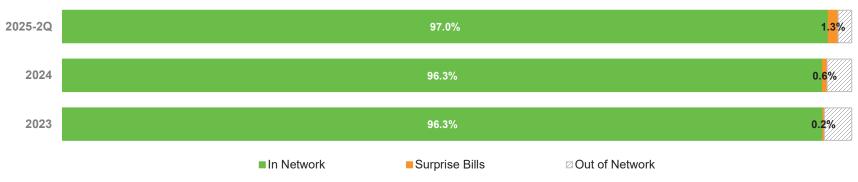
Network Summary

Discount Percentage & Network Utilization



Discount Percentage* by Claim Type Plan Year: 2023 2024 2025-2Q 70% 60% 50% 40% 30% 60.4% 59.4% 59.2% 59.0% 56.9% 56.3% 57.5% 58.1% 55.2% 56.2% 54.2% 54.7% 54.6% 53.0% 20% 36.5% 10% 0% Physician Ancillary Inpatient Outpatient Total

Network Utilization*



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

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Clinical Classification Summary

Breakout by Diagnostic Chapter

UMR

Diagnostic Chanter	2024 (1	Full Year)	202	25-2Q	CYTD P	aid by Relation	nship	CYTD Paid by Sex	
Diagnostic Chapter	Patients	Total Paid	Patients	Total Paid	Employee	Spouse	Child	Male	Female
Perinatal Originating Conditions	76	\$1,990,280	36	\$3,211,385	\$461	\$115	\$3,210,809	\$416,681	\$2,794,704
Neoplasms	956	\$4,619,242	617	\$3,154,338	\$1,485,892	\$1,576,154	\$92,292	\$611,279	\$2,543,059
Circulatory System	1,084	\$4,487,845	689	\$2,805,907	\$2,126,868	\$618,956	\$60,083	\$1,321,266	\$1,484,641
Musculoskeletal System	2,070	\$4,602,332	1,356	\$2,401,507	\$1,968,321	\$300,393	\$132,793	\$929,849	\$1,471,658
Injury, Poisoning & External Causes	987	\$3,319,950	576	\$1,980,720	\$1,278,656	\$291,199	\$410,864	\$658,859	\$1,321,860
Health Status & Health Services	4,187	\$4,675,804	2,710	\$1,546,881	\$947,220	\$217,767	\$381,895	\$696,421	\$850,460
Digestive System	848	\$2,625,472	481	\$1,408,171	\$1,137,289	\$125,962	\$144,920	\$449,249	\$958,921
Symptoms, Signs & Findings, NEC	2,600	\$2,268,545	1,561	\$1,091,959	\$720,574	\$168,229	\$203,156	\$383,106	\$708,853
Mental, Behavioral & Neurodevelopmental	1,352	\$2,322,608	1,006	\$1,065,328	\$460,912	\$161,173	\$443,244	\$357,421	\$707,908
Genitourinary System	1,208	\$2,173,973	721	\$1,007,389	\$803,673	\$84,603	\$119,114	\$323,944	\$683,445
Nervous System	1,174	\$1,812,222	789	\$879,889	\$591,360	\$150,855	\$137,674	\$352,926	\$526,963
Endocrine, Nutritional & Metabolic	1,892	\$2,071,739	1,238	\$761,374	\$598,954	\$78,923	\$83,497	\$393,278	\$368,097
Respiratory System	1,820	\$1,973,123	914	\$668,964	\$406,074	\$119,604	\$143,285	\$261,349	\$407,615
Infectious & Parasitic Diseases	519	\$1,452,642	280	\$562,583	\$517,362	\$19,135	\$26,086	\$112,904	\$449,680
Pregnancy, Childbirth & the Puerperium	117	\$1,094,523	76	\$519,939	\$300,302	\$109,943	\$109,694	\$125	\$519,815
Blood & Immune Disorders	252	\$886,310	124	\$355,605	\$219,952	\$10,019	\$125,634	\$252,739	\$102,866
Ear and Mastoid Process	573	\$333,384	273	\$302,972	\$209,548	\$41,435	\$51,990	\$104,440	\$198,533
Skin & Subcutaneous Tissue	1,429	\$854,655	899	\$215,698	\$161,423	\$26,795	\$27,481	\$79,092	\$136,607
Congenital Malformations & Abnormalities	93	\$115,196	53	\$202,295	\$61,926	\$0	\$140,369	\$113,468	\$88,827
Eye and Adnexa	1,733	\$533,279	860	\$195,129	\$141,511	\$23,076	\$30,541	\$91,874	\$103,255
External Causes of Morbidity	1	\$0	0	\$0	\$0	\$0	\$0	\$0	\$0
Total	5,860	\$44,213,123	4,689	\$24,359,762	\$14,156,304	\$4,128,038	\$6,075,420	\$7,914,780	\$16,444,982

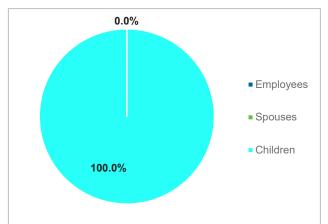
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Perinatal Originating Conditions

Breakout by Diagnostic Grouping & Demographics



#	Perinatal Conditions Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Respiratory perinatal condition	6	16	\$1,567,079	48.8%
2	Other specified & unspec perinatal conds	5	8	\$1,373,328	42.8%
3	Liveborn	26	44	\$241,407	7.5%
4	Respiratory distress syndrome	3	18	\$18,868	0.6%
5	Neonatal abstinence syndrome	1	1	\$3,716	0.1%
6	Short gestation; low birth weight; fetal growth	4	4	\$3,504	0.1%
7	Hemolytic jaundice & perinatal jaundice	3	5	\$1,757	0.1%
8	Neonatal digestive & feeding disorders	6	11	\$1,217	0.0%
9	Perinatal infections	1	1	\$275	0.0%
10	Birth trauma	1	1	\$188	0.0%
11	Neonatal acidemia & hypoxia	2	4	\$46	0.0%
12	Newborn aff by matern conds or comps of labor	1	1	\$0	0.0%
13	Hemorrhagic & hematologic disords of newborn	2	2	\$0	0.0%
=	Total	36	152	\$3,211,385	100.0%



Perinatal Conditions Paid by Age Range

0-17	100.0%
18-26	0.0%
27-39	0.0%
40-49	0.0%
50-59	0.0%
60+	0.0%

Perinatal Conditions Paid by Relationship

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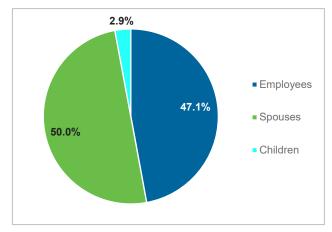
Neoplasms (Cancer)

Breakout by Diagnostic Grouping & Demographics

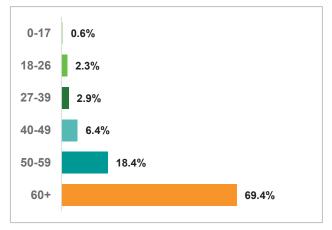


#	Neoplasms (Cancer) Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Other gastrointestinal cancers	6	36	\$1,294,934	41.1%
2	Breast cancer	39	248	\$479,484	15.2%
3	Benign neoplasms	375	574	\$330,698	10.5%
4	Lymphoma	16	138	\$213,639	6.8%
5	Ovarian cancer	5	25	\$126,918	4.0%
6	Respiratory cancers	5	43	\$100,801	3.2%
7	Other cancer	13	26	\$85,035	2.7%
8	Colorectal cancer	7	38	\$81,181	2.6%
9	Skin cancer	60	139	\$70,756	2.2%
10	Prostate cancer	20	169	\$63,541	2.0%
11	Head & neck cancers	4	33	\$58,746	1.9%
12	Pancreatic cancer	3	46	\$54,951	1.7%
13	Neoplasms of unspec nature	228	276	\$50,361	1.6%
14	Leukemia	8	41	\$39,576	1.3%
15	Kidney Cancer	6	20	\$32,991	1.0%
16	Secondary malignancies	12	52	\$27,616	0.9%
17	Endometrial cancer	6	23	\$25,559	0.8%
18	Oral cancer	2	5	\$14,333	0.5%
19	Female reproductive	3	3	\$993	0.0%
20	Brain cancer	4	8	\$860	0.0%
	All Others	7	12	\$1,366	0.0%
=	Total	617	2,082	\$3,154,338	100.0%

Neoplasms (Cancer) Paid by Relationship



Neoplasms (Cancer) Paid by Age Range



Note: there are additional cancer-related costs for encounters and therapy, totaling \$715,004 - these costs are categorized under Health Status

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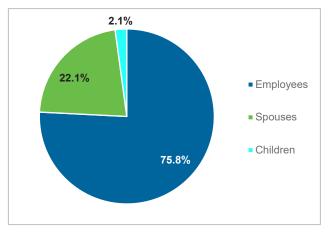
Circulatory System

Breakout by Diagnostic Grouping & Demographics

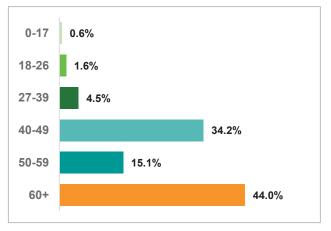


#	Circulatory System Dx Grouping	Patients	Claims	Total Paid	% Paid
1	Cerebrovascular disease	27	104	\$970,496	34.6%
2	Cardiac dysrhythmias	124	360	\$521,344	18.6%
3	Myocardial infarction	11	39	\$324,468	11.6%
4	Coronary atherosclerosis & oth heart disease	87	219	\$265,362	9.5%
5	Nonrheumatic & unspecified valve disorders	40	51	\$190,183	6.8%
6	Nonspecific chest pain	137	255	\$138,101	4.9%
7	Heart failure	29	106	\$97,780	3.5%
8	Vascular disease	48	105	\$92,503	3.3%
9	Hypertension	352	537	\$91,616	3.3%
10	Acute pulmonary embolism, DVT	26	102	\$56,887	2.0%
11	Other circulatory	30	54	\$54,445	1.9%
12	Myocarditis & cardiomyopathy	9	16	\$2,721	0.1%
=	Total	689	2,190	\$2,805,907	100.0%

Circulatory System Paid by Relationship



Circulatory System Paid by Age Range



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Mental & Behavioral Trend

Prevalence & Cost by Diagnostic Grouping



Mental & Behavioral	2023 (F	⁻ ull Year)	2024 (f	⁻ ull Year)	202	25-2Q	20	25-2Q Paid b	y Claim Type	
Diagnostic Grouping	Patients	Total Paid	Patients	Total Paid	Patients	Total Paid	Inpatient	Outpatient	Physician	Ancillary
Depressive disorders	394	\$484,494	424	\$531,931	305	\$242,761	\$46,203	\$7,916	\$187,226	\$1,416
Anxiety & related Disorders	521	\$279,609	512	\$337,685	329	\$177,103	\$0	\$2,904	\$174,199	\$0
Trauma & stressor disorders	294	\$210,733	338	\$370,626	241	\$150,361	\$0	\$0	\$150,361	\$0
Alcohol-related disorders	29	\$154,326	45	\$307,936	24	\$124,788	\$85,944	\$10,764	\$28,081	\$0
Neurodevelopmental disorders	225	\$140,318	253	\$292,459	197	\$119,651	\$0	\$0	\$119,651	\$0
Suicidal ideation, attempt or self-harm	21	\$78,998	23	\$42,788	13	\$72,931	\$33,084	\$33,066	\$6,781	\$0
Other mental health	143	\$50,896	146	\$124,135	92	\$68,549	\$0	\$18,000	\$50,550	\$0
Bipolar & related Disorders	82	\$64,002	79	\$92,390	54	\$41,205	\$10,440	\$0	\$30,765	\$0
Eating disorders	17	\$31,584	15	\$51,171	6	\$33,747	\$0	\$0	\$33,747	\$0
Schizophrenia spectrum disorders	14	\$17,003	16	\$33,159	11	\$16,380	\$3,480	\$1,089	\$11,803	\$8
Obsessive compulsive disorders	20	\$19,073	22	\$60,775	14	\$5,822	\$0	\$0	\$5,822	\$0
Stimulant disorders	5	\$31,458	6	\$31,146	1	\$5,176	\$2,656	\$0	\$2,520	\$0
Opiod disorders	15	\$8,462	11	\$36,789	5	\$3,299	\$0	\$0	\$3,299	\$0
Other substance use	37	\$3,370	37	\$8,935	12	\$2,714	\$0	\$0	\$2,714	\$0
Cannabis-related disorders	9	\$2,149	4	\$681	3	\$841	\$0	\$0	\$841	\$0
Total	1,310	\$1,576,476	1,352	\$2,322,608	1,006	\$1,065,328	\$181,806	\$73,738	\$808,359	\$1,425

Chronic Conditions

Prevalence & Severity of 24 Chronic Conditions



	Wi	th Conditi	ion		Мо	derate/Hig	gh Risk Co	ndition	
Chronic Condition	# of Mems	Mems per 1000	Change vs LY	# of Mems	Mems per 1000	Change vs LY	Allowed PMPY	Admits per 1000	ER Visits per 1000
Affective Psychosis	12	2.1	33.3%	6	1.1	-14.3%	\$4,321	83.3	250.0
Asthma	240	43.0	-8.0%	123	22.0	6.0%	\$5,857	45.8	266.7
Atrial Fibrillation	62	11.1	5.1%	45	8.1	18.4%	\$46,899	161.3	612.9
Blood Disorders	218	39.0	-11.4%	95	17.0	-12.8%	\$46,035	334.9	422.0
CAD	89	15.9	3.5%	40	7.2	-9.1%	\$19,860	146.1	337.1
COPD	38	6.8	18.8%	26	4.7	8.3%	\$36,264	394.7	789.5
Cancer	575	102.9	15.7%	263	47.1	6.9%	\$19,790	109.6	173.9
Chronic Pain	47	8.4	20.5%	24	4.3	26.3%	\$112,663	680.9	893.6
CHF	32	5.7	14.3%	20	3.6	-9.1%	\$164,184	625.0	625.0
Demyelinating Diseases	17	3.0	-43.3%	13	2.3	-35.0%	\$32,429	176.5	411.8
Depression	417	74.6	0.0%	293	52.4	3.2%	\$10,984	129.5	326.1
Diabetes	499	89.3	1.2%	385	68.9	-2.5%	\$16,943	100.2	260.5
ESRD	14	2.5	-48.1%	13	2.3	-35.0%	\$437,025	1,928.6	2,142.9
Eating Disorders	15	2.7	25.0%	11	2.0	37.5%	\$10,313	66.7	266.7
HIV/AIDS	6	1.1	-40.0%	5	0.9	-37.5%	\$3,415	0.0	0.0
Hyperlipidemia	195	34.9	-3.9%	66	11.8	13.8%	\$2,212	10.3	41.0
Hypertension	568	101.7	-8.2%	231	41.3	-18.1%	\$8,968	75.7	227.1
Immune Disorders	23	4.1	-11.5%	13	2.3	8.3%	\$31,652	43.5	130.4
IBD	24	4.3	-4.0%	5	0.9	-50.0%	\$1,492	0.0	41.7
Liver Disease	3	0.5	0.0%	1	0.2	-66.7%	\$544,864	666.7	333.3
Morbid Obesity	105	18.8	-9.5%	58	10.4	-4.9%	\$25,837	161.9	238.1
Osteoarthritis	277	49.6	-12.3%	122	21.8	-8.3%	\$11,466	46.9	205.8
Peripheral Vascular Disease	32	5.7	23.1%	11	2.0	57.1%	\$25,837	406.3	500.0
Rheumatoid Arthritis	64	11.5	-3.0%	45	8.1	-8.2%	\$9,141	0.0	171.9

- Most prevalent chronic condition is Cancer, with 575 members
- Diabetes is the condition with the most moderate/high risk members (385)
- Members with mod/high risk Diabetes also have the highest combined cost, totaling \$6.52M

Date Range: Service Dates 10/1/2023 - 9/30/2024, Paid through 12/31/2024

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

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

Cost & Utilization for All	Members:
Allowed PMPY:	\$8,884
Admits per 1000:	57.8

• ER Visits per 1000: 238.4

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Prevention, Wellness, & Maintenance



Preventive & Condition-specific Screening Rate Trends

		Oc	t 2022 - Sep 20	023	Oc	t 2023 - Sep 2	024	Rate	UMR	Norm
Preventive Service	Population	Eligible	Actual	Rate	Eligible	Actual	Rate	Change	Rate	Variance
Well Visits	Rate for Well Baby & We	ell Child is Visits	s per 1,000. Ra	ate for adults is	the percentage	who had a we	ll visit.			
Well Baby Visit	0 - 15 months	78.6	451	5,735.3	51.8	282	5,439.9	-5.2%	5,308.6	2.5%
Well Child Visit	3 - 6 years	270.0	228	844.4	238.2	188	789.4	-6.5%	792.3	-0.4%
Adults w/ Well Visit	Adults 18+	4,809	2,052	42.7%	4,332	1,828	42.2%	-0.5	41.2%	1.0
Screenings	Rate for all screenings is	s the percentage	e of eligible pop	oulation who ha	d the screening	during the per	riod.			
Mammogram	Females 40 - 69	1,721	858	49.9%	1,562	773	49.5%	-0.4	47.9%	1.6
Cervical Cancer	Females 21 - 64	2,352	615	26.1%	2,092	503	24.0%	-2.1	24.1%	0.0
Prostate Cancer	Males 50 - 70	976	420	43.0%	900	434	48.2%	5.2	42.5%	5.7
Colorectal Cancer	Members 45 - 75	2,746	459	16.7%	2,507	431	17.2%	0.5	17.4%	-0.2
Cholesterol	Female 45+ Male 35+	3,095	1,713	55.4%	2,826	1,594	56.4%	1.1	48.6%	7.9
Condition-specific	Screening									
Asthma	Office Visit for Asthma	261	204	78.2%	240	198	82.5%	4.3		
COPD	Spirometry Test	32	4	12.5%	38	8	21.1%	8.6		
	A1c Test	441	400	90.7%	457	414	90.6%	-0.1	86.2%	4.4
	Eye Exam	441	139	31.5%	457	121	26.5%	-5.0	25.7%	0.8
Type 2 Diabetes	Lipid Panel	441	348	78.9%	457	343	75.1%	-3.9	73.2%	1.9
	Urine Protein Test	441	329	74.6%	457	292	63.9%	-10.7	64.2%	-0.3
	Any Diabetes Screen	441	426	96.6%	457	435	95.2%	-1.4	93.8%	1.4
Hyperlipidemia	Lipid Profile	203	98	48.3%	195	102	52.3%	4.0		
11	Creatinine Test	619	160	25.8%	568	136	23.9%	-1.9		
Hypertension	Lipid Profile	619	168	27.1%	568	160	28.2%	1.0		

Date Range: Reporting periods are service-based with 3 months of runout: Current period is Service Dates 10/1/2023 - 9/30/2024, Paid through 12/31/2024 **Note:** Preventive Services do not include those performed at onsite clinics or ones for which no claim was submitted to UMR.

Public Employees' Benefits Program - RX Costs PY 2025 - Through Quarter Ending December 31, 2024 Express Scripts

	Express Scripts			
	1Q-2Q FY2025 EPO	1Q-2Q FY2023 EPO	Difference	% Change
Membership Summary			Membership Su	-
Member Count (Membership)	5,238	5,797	(559)	-9.6%
Utilizing Member Count (Patients)	3,866	4,161	(295)	-7.1%
Percent Utilizing (Utilization)	73.8%	71.8%	0	2.8%
Claim Summary			Claims Sum	
Net Claims (Total Rx's)	60,738	63,291	(2,553)	-4.0%
Claims per Elig Member per Month (Claims PMPM)	1.93	1.82	0.11	6.0%
Total Claims for Generic (Generic Rx)	51,800	53,768	(1,968.00)	-3.7%
Total Claims for Brand (Brand Rx)	8,938	9,523	(585.00)	-6.1%
Total Claims for Brand w/Gen Equiv (Multisource Brand Claims)	225	413	(188.00)	-45.5%
Total Non-Specialty Claims	59,828	62,523	(2,695.00)	-4.3%
Total Specialty Claims	910	768	142.00	18.5%
Generic % of Total Claims (GFR)	85.3% 99.6%	85.0%	$\begin{array}{c} 0.00\\ 0.00\end{array}$	0.4% 0.3%
Generic Effective Rate (GCR) Mail Order Claims	17,329	99.2% 18,689	(1,360.00)	-7.3%
Mail Penetration Rate*	31.6%	32.7%	(1,500.00) (0.01)	-1.1%
	31.070	32.770		
Claims Cost Summary			Claims Cost Su	<u></u>
Total Prescription Cost (Total Gross Cost)	\$10,528,698	\$10,045,058	\$483,640.00	4.8%
Total Generic Gross Cost	\$926,637	\$933,816	(\$7,179.00)	-0.8%
Total Brand Gross Cost	\$9,602,061	\$9,111,242	\$490,819.00	5.4%
Total MSB Gross Cost	\$238,411	\$223,146	\$15,265.00	6.8%
Total Ingredient Cost	\$10,245,895	\$9,763,024	\$482,871.00	4.9%
Total Dispensing Fee	\$276,668	\$273,452	\$3,216.00	1.2%
Total Other (e.g. tax)	\$6,135 \$173.35	\$8,581 \$158.71	(\$2,446.00) \$14.63	-28.5% 9.2%
Avg Total Cost per Claim (Gross Cost/Rx) Avg Total Cost for Generic (Gross Cost/Generic Rx)	\$175.55	\$158.71 \$17.37	\$14.03 \$0.52	9.2% 3.0%
Avg Total Cost for Brand (Gross Cost/Brand Rx)	\$1,074.30	\$956.76	\$117.54	12.3%
Avg Total Cost for MSB (MSB Gross Cost/MSB ARx)	\$1,059.60	\$540.31	\$519.29	96.1%
	\$1,039.00	\$5 10.51		
Member Cost Summary	et 100.001		Member Cost S	
Total Member Cost	\$1,490,034	\$1,331,951	\$158,083.00	11.9%
Total Copay Total Deductible	\$1,486,909	\$1,330,062	\$156,847.00	11.8%
Total Deductible	\$3,125 \$24.48	\$1,889 \$21.02	\$1,236.00 \$3.47	0.0% 16.5%
Avg Copay per Claim (Copay/Rx) Avg Participant Share per Claim (Copay+Deductible/RX)	\$24.48 \$24.53	\$21.02 \$21.04	\$3.47 \$ 3.49	16.5%
Avg Copay for Generic (Copay/Generic Rx)	\$7.02	\$6.84	\$0.18	2.6%
Avg Copay for Brand (Copay/Brand Rx)	\$126.01	\$101.25	\$24.76	24.5%
Avg Copay for Brand w/ Generic Equiv (Copay/Multisource Rx)	\$50.97	\$52.63	(\$1.66)	-3.2%
Net PMPM (Participant Cost PMPM)	\$47.41	\$38.29	\$9.12	23.8%
Copay % of Total Prescription Cost (Member Cost Share %)	14.2%	13.3%	0.9%	6.7%
Plan Cost Summary			Plan Cost Sur	
Total Plan Cost (Plan Cost)	\$9,038,664	\$8,713,107	\$325,557.00	3.7%
Total Non-Specialty Cost (Non-Specialty Plan Cost)	\$4,390,109	\$4,140,543	\$249,566.00	6.0%
Total Specialty Drug Cost (Specialty Plan Cost)	\$4,648,554	\$4,572,564	\$75,990.00	1.7%
Avg Plan Cost per Claim (Plan Cost/Rx)	\$148.81	\$137.67	\$11.15	8.1%
Avg Plan Cost for Generic (Plan Cost/Generic Rx)	\$10.87	\$10.53	\$0.34	3.2%
Avg Plan Cost for Brand (Plan Cost/Brand Rx)	\$948.29	\$855.51	\$92.78	10.8%
Avg Plan Cost for MSB (MSB Plan Cost/MSB ARx)	\$1,008.63	\$487.68	\$520.95	106.8%
Net PMPM (Plan Cost PMPM)	\$287.60	\$250.51	\$37.09	14.8%
PMPM without Specialty (Non-Specialty PMPM)	\$139.69	\$119.04	\$20.65	17.3%
PMPM for Specialty Only (Specialty PMPM)	\$147.91	\$131.46	\$16.45	12.5%
Rebates Received (Q1 FY2024 actual)	\$3,688,790	\$2,833,099	\$855,691.97	30.2%
Net PMPM (Plan Cost PMPM factoring Rebates)	\$170.23	\$169.05	\$1.17	0.7%
PMPM without Specialty (Non-Specialty PMPM)	\$82.44	\$75.05	\$7.39	9.8%
PMPM for Specialty Only (Specialty PMPM)	\$97.07	\$92.97	\$4.10	4.4%

Appendix D

Index of Tables Health Plan of Nevada –Utilization Review for PEBP July 1, 2024 – December 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, 2023 – Dec. 2023 – Prior Period July 1, 2024 – Dec. 2024 – Current Period *Peer – Non-Gaming **Paid through Feb 2024 *Data contains 60-day claims run out State of Nevada

Executive Summary

Spend and Utilization

Executive Summary Utilization & Spend

Population

- -0.8% decrease for employees
- -1.5% decrease for members

Medical Paid PMPM

- 8.5% increase in overall medical paid from prior period
- 1.5% increase in non-Catastrophic spend
- · 2.0% increase in Catastrophic spend

High-Cost Claimants

- 30 HCC in 2Q24, flat from prior period
- % of HCC spend saw a small increase of 2.0%
- Avg. Paid per case decreased -4.9%

Emergency Room

- ER Visits Per 1,000 members decreased -9.4%
- Avg. paid per ER Visit increased 12.4%

Urgent Care

- Urgent Care visits per 1,000 members decreased by -13.6%
- Avg. paid per Urgent care visit increased 12.4%

Rx Drivers

- Rx Net Paid PMPM increased 11.8%
- Specialty Spend decreased -5.9%
- Specialty Rx driving 37.7% of total Rx Spend

Overall Medical / Rx

• Total Medical/Rx increased 9.6% on PMPM basis

	Claims Paid by Age Group													
		July	- Dec. 2023	Q2					July - Dec 20)24 Q2			Ch	ange
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	\$290,128	\$1,131	\$896	\$3	\$291,024	\$1,135	\$210,135	\$857	\$667	\$3	\$210,802	\$860	-27.6%	-22.1%
01	\$85,476	\$289	\$1,948	\$7	\$87,424	\$295	\$43,699	\$198	\$355	\$2	\$44,055	\$200	-31.3%	-75.5%
02-04	\$242,756	\$250	\$9,240	\$10	\$251,996	\$259	\$462,247	\$468	\$3,286	\$3	\$465,533	\$472	87.6%	-65.0%
05-09	\$368,337	\$191	\$33,250	\$17	\$401,587	\$208	\$392,673	\$210	\$17,330	\$9	\$410,003	\$220	10.1%	-46.2%
10-14	\$456,047	\$170	\$93,177	\$35	\$549,224	\$204	\$461,170	\$176	\$51,668	\$20	\$512,838	\$195	3.6%	-43.2%
15-19	\$564,691	\$181	\$149,178	\$48	\$713,869	\$229	\$663,252	\$216	\$94,075	\$31	\$757,328	\$247	19.1%	-36.1%
20-24	\$573,603	\$199	\$62,015	\$22	\$635,618	\$220	\$665,618	\$230	\$134,397	\$46	\$800,015	\$276	15.4%	115.6%
25-29	\$656,957	\$425	\$110,379	\$71	\$767,336	\$497	\$517,139	\$302	\$151,373	\$88	\$668,512	\$391	-28.9%	23.8%
30-34	\$616,396	\$338	\$282,294	\$155	\$898,690	\$493	\$642,729	\$362	\$281,310	\$159	\$924,039	\$521	7.1%	2.3%
35-39	\$574,943	\$241	\$656,698	\$275	\$1,231,641	\$516	\$672,814	\$305	\$435,946	\$197	\$1,108,760	\$502	26.4%	-28.3%
40-44	\$1,146,004	\$450	\$331,767	\$130	\$1,477,771	\$580	\$803,399	\$317	\$447,914	\$177	\$1,251,313	\$494	-29.5%	35.7%
45-49	\$1,141,447	\$352	\$702,073	\$217	\$1,843,520	\$569	\$1,527,833	\$504	\$990,039	\$326	\$2,517,872	\$830	42.9%	50.6%
50-54	\$1,122,784	\$301	\$1,086,300	\$291	\$2,209,084	\$592	\$1,637,073	\$432	\$1,395,122	\$368	\$3,032,195	\$800	43.7%	26.5%
55-59	\$1,486,318	\$399	\$1,362,052	\$365	\$2,848,369	\$764	\$1,421,315	\$393	\$1,398,217	\$386	\$2,819,533	\$779	-1.5%	5.7%
60-64	\$1,714,598	\$476	\$1,094,153	\$304	\$2,808,751	\$779	\$1,645,585	\$471	\$1,232,524	\$352	\$2,878,109	\$823	-1.1%	16.1%
65+	\$1,672,293	\$670	\$1,031,547	\$413	\$2,703,840	\$1,083	\$1,814,167	\$700	\$1,077,318	\$416	\$2,891,485	\$1,116	4.5%	0.6%
Total	\$12,712,778	\$341	\$7,006,967	\$188	\$19,719,744	\$530	\$13,580,848	\$370	\$7,711,542	\$210	\$21,292,390	\$581	8.0%	9.6%

Financial Summary

	Financial and Demographic (<i>July 2024 thru Dec 2024</i> Q2)													
		Total				State Ac	tive		R	letiree (State/	Non-State)			
Summary	Thru 2Q22	Thru 2Q23	Thru 2Q24		Thru 2Q22	Thru 2Q23	Thru 2Q24		Thru 2Q22	Thru 2Q23	Thru 2Q24			
Avg. # Employees	3,665	3,539	3,512	-0.8%	3,232	3,094	3,103	0.3%	433	445	409	-8.1%		
Avg. # Members	6,461	6,206	6,112	-1.5%	5,875	5,597	5,552	-0.8%	586	610	560	-8.1%		
Ratio	1.8	1.8	1.7	-0.8%	1.8	1.8	1.8	-1.1%	1.4	1.4	1.4	-0.1%		
Financial														
Medical Paid	\$13,640,231	\$12,712,778	\$13,580,848	6.8%	\$12,571,555	\$10,880,065	\$12,078,769	11.0%	\$1,068,676	\$1,832,713	\$1,502,080	-18.0%		
Member Paid	\$1,032,769	\$1,088,174	\$1,139,813	4.7%	\$723,513	\$785,185	\$888,944	13.2%	\$309,256	\$302,990	\$250,868	-17.2%		
Net Paid PEPY	\$7,444	\$7,184	\$7,733	7.6%	\$7,666	\$6,886	\$7,785	13.1%	\$5,782	\$9,261	\$7,342	-20.7%		
Net Paid PMPY	\$4,222	\$4,097	\$4,444	8.5%	\$4,218	\$3,807	\$4,351	14.3%	\$4,268	\$6,759	\$5,362	-20.7%		
Net Paid PEPM	\$620	\$599	\$644	7.6%	\$639	\$574	\$649	13.1%	\$482	\$772	\$612	-20.7%		
Net Paid PMPM	\$352	\$341	\$370	8.5%	\$351	\$317	\$363	14.3%	\$356	\$563	\$447	-20.7%		
High Cost Claimants														
# of HCC's > \$50k	34	32	30	-6.3%	32	22	25	13.6%	2	10	5	-50.0%		
Avg. paid per claimant	\$109,700	\$95,110	\$103,527	8.9%	\$109,763	\$95,574	\$108,965	14.0%	\$108,694	\$94,088	\$76,338	-18.9%		
HCC % of Spend	27.3%	23.9%	22.7%	-4.9%	28.4%	19.7%	22.5%	14.0%	17.4%	45.3%	24.8%	-45.4%		
Spend by Location (PMF	PY)													
Inpatient	\$3,534	\$1,167	\$1,170	0.3%	\$1,122	\$987	\$1,256	27.3%	\$1,065	\$2,704	\$1,418	-47.6%		
Outpatient	\$1,191	\$1,230	\$1,090	-11.3%	\$1,195	\$861	\$1,152	33.8%	\$1,156	\$1,599	\$1,396	-12.7%		
Professional	\$2,168	\$2,004	\$2,015	0.5%	\$1,963	\$1,195	\$1,475	23.4%	\$2,115	\$2,432	\$2,632	8.2%		
Total	\$6,893	\$4,401	\$4,275	-2.8%	\$4,280	\$3,888	\$4,351	11.9%	\$4,336	\$6,734	\$5,446	-19.1%		

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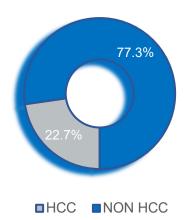
			Ne	et Paid Claim	s - Total								
Total Participants													
July - Dec 2023 Q2 July - Dec 2024 Q2													
	Actives	Pre-Medicare	Medicare	Total	Actives	Pre-Medicare	Medicare	Total					
Medical													
InPatient	\$2,451,823	\$241,236	\$765,229	\$3,458,288	\$2,425,118	\$187,808	\$865,417	\$3,478,343	0.6%				
OutPatient	\$8,099,089	\$272,047	\$883,354	\$9,254,489	\$8,935,372	\$220,994	\$946,140	\$10,102,506	9.2%				
Total - Medical	\$10,550,911	\$513,283	\$1,648,583	\$12,712,778	\$11,360,490	\$408,802	\$1,811,557	\$13,580,848	6.8%				
			Ne	et Paid Claims	s - Total								
				Total Particip	oants								
		July - Dec	2023 Q2			July - Dec	2024 Q2						
	Actives	Pre-Medicare	Medicare	Total	Actives	Pre-Medicare	Medicare	Total					
Medical PMPM	\$310	\$683	\$2,194	\$341	\$341	\$532	\$699	\$370	8.5%				

Cost Distribution – Medical Claims > \$50K



		July - D	Dec 2Q23						July - De	ec 2Q24		
# of Members	% of Population	Total Paid	% of Paid	Subscriber Paid	% of Subscribers paid	Paid Claims	# of Members	% of Population	Total Paid	% of Paid	Subscriber Paid	% of Subscribers paid
3	0.0%	\$539,847	4.2%	\$0	0.0%	> \$100k	3	0.0%	\$508,215	3.7%	\$508,215	100.0%
12	0.2%	\$939,977	7.4%	\$389,819	41.5%	\$50k- \$100k	12	0.2%	\$867,741	6.4%	\$326,795	37.7%
35	0.6%	\$1,313,714	10.3%	\$857,400	65.3%	\$25k - \$50k	50	0.8%	\$1,884,512	13.9%	\$1,099,034	58.3%
124	2.0%	\$2,473,114	19.5%	\$1,486,793	60.1%	\$10k - \$25k	129	2.1%	\$2,569,658	18.9%	\$1,420,288	55.3%
180	2.9%	\$1,504,805	11.8%	\$969,032	64.4%	\$5k - \$10k	252	4.1%	\$1,997,298	14.7%	\$1,268,034	63.5%

% Paid Attributed to Catastrophic Cases



HCC > \$50k - AHRQ Chapter Conditions - Thru 2Q24					
Top 5 AHRQ Category Conditions	# of Patients	Total Paid	% of Med Paid		
Neoplasms	4	\$318,082	2.3%		
Congenital malformations, chromosomal abnormalities	1	\$301,132	2.2%		
Diseases of the circulatory system	4	\$300,391	2.2%		
Diseases of the musculoskeletal system	4	\$254,147	1.9%		
Factors influencing health status	4	\$243,627	1.8%		

Utilization Summary



Utilization Summary									
		Total		St	ate Active		Retiree	State/Non-S	tate
	July - Dec 2Q23	July - Dec 2Q24		July - Dec 2Q23	July - Dec 2Q24		July - Dec 2Q23	July - Dec 2Q24	
Inpatient	-								
# of Admits	175	205	17.2%	158	165	4.3%	17	40	136.5%
# of Bedays	957	1,101	15.0%	885	745	-15.8%	72	356	393.8%
Avg. Paid per Admit	\$20,691	\$16,869	-18.5%	\$20,887	\$15,907	-23.8%	\$18,872	\$20,814	10.3%
Avg. Paid per Day	\$3,784	\$3,142	-16.9%	\$3,729	\$3,519	-5.6%	\$4,456	\$2,353	-47.2%
Admits Per K	56.4	67.1	19.0%	56.5	59.4	5.2%	55.8	143.6	157.4%
Days Per K	308.4	360.2	16.8%	316.3	268.5	-15.1%	236.2	1,269.7	437.6%
ALOS	5.5	5.4	-1.8%	5.6	4.5	-19.3%	5.5	5.9	7.3%
Admits from ER	87	104	19.5%	76	81	6.6%	11	23	109.1%
Physician Office Visits									
Per Member Per Year	2.2	2.0	-10.9%	2.2	2.0	-10.7%	2.5	2.2	-11.7%
Paid Per Visit	\$151	\$167	10.8%	\$156	\$172	10.1%	\$105	\$122	15.4%
Net Paid PMPM	\$28	\$28	-1.2%	\$29	\$28	-1.7%	\$22	\$22	1.9%
Emergency Room									
# of Visits	395	358	-9.4%	362	328	-9.4%	33	30	-9.1%
Visits Per K	127.3	117.1	-8.0%	129.4	118.1	-8.7%	108.3	107.1	-1.0%
Avg Paid Per Visit	\$2,696	\$3,491	29.5%	\$2,772	\$3,477	25.4%	\$1,863	\$3,646	95.7%
Urgent Care									
# of Visits	2,053	1,773	-13.6%	1,836	1,619	-11.8%	217	154	-29.0%
Visits Per K	661.6	580.1	-12.3%	656.1	583.2	-11.1%	711.9	550.0	-22.7%
Avg Paid Per Visit	\$123	\$138	12.4%	\$92	\$93	1.1%	\$91	\$88	-3.1%
*Not Representative of all util	ization						*Data based	l on medical spe	nd only

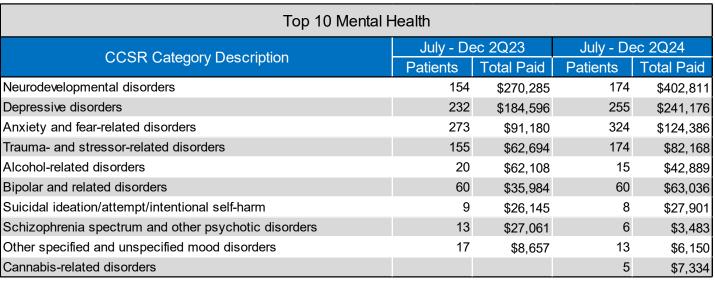
Diagnosis Grouper Summary – Top 25

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Top 25 AHRQ Category	Total Paid	% Paid		Insured	Spouse	Dependent	Male	Female	Unassigned
Neurodevelopmental disorders	\$402,811	3.7%		\$17,995	\$577	\$384,239	\$267,524	\$135,287	\$0
Spondylopathies/spondyloarthropathy (including infective)	\$328,898	3.1%		\$218,888	\$94,813	\$15,197	\$116,440	\$212,458	\$0
Osteoarthritis	\$272,075	2.5%		\$143,279	\$128,795		\$128,716	\$143,358	\$0
Encounter for antineoplastic therapies	\$252,303	2.3%		\$188,744	\$63,558		\$44,887	\$207,416	\$0
Cardiac and circulatory congenital anomalies	\$250,527	2.3%		\$249,341	\$39	\$1,148	\$249,997	\$531	\$0
Depressive disorders	\$241,176	2.2%		\$91,123	\$13,800	\$136,253	\$101,601	\$139,575	
Pneumonia (except that caused by tuberculosis)	\$216,930	2.0%		\$196,359	\$19,105	\$1,466	\$149,954	\$66,976	
Breast cancer - all other types	\$186,256	1.7%		\$104,133	\$82,123			\$186,256	-
Acute and unspecified renal failure	\$184,650	1.7%		. ,	\$101,966	\$5,079	\$183,996	\$654	
Coronary atherosclerosis and other heart disease	\$169,141	1.6%		\$162,699	\$6,443		\$137,784	\$31,357	
Abdominal pain and other digestive/abdomen signs and syn	\$158,738	1.5%		\$105,423	\$17,093	\$36,222	\$60,936	\$97,801	\$0
Sprains and strains, initial encounter	\$157,944	1.5%		\$106,923	\$36,831	\$14,190	\$57,018	\$100,926	
Medical examination/evaluation	\$156,954	1.5%		\$28,302	\$25,830	\$102,822	\$63,792	\$93,162	
Septicemia	\$155,529	1.4%		\$95,894	\$59,635		\$132,743	\$22,786	
Biliary tract disease	\$155,045	1.4%		\$99,416	\$6,405	\$49,224	\$88,554	\$66,491	
Diabetes mellitus with complication	\$154,105	1.4%		\$120,704	\$11,967	\$21,434	\$70,595	\$83,510	
Nonspecific chest pain	\$151,966	1.4%		\$99,172	\$17,380	\$35,414	\$49,602	\$102,364	
Hearing loss	\$134,730	1.3%		\$111,861	\$20,197	\$2,671	\$47,373	\$87,356	
Gastrointestinal cancers - esophagus	\$132,225	1.2%			\$132,225		\$132,225		\$0
Complication of other surgical or medical care, injury, initial	\$130,248	1.2%		\$93,849	\$32,201	\$4,199	\$31,071	\$99,177	
Neoplasm-related encounters	\$129,490	1.2%		\$108,730	\$20,352	\$408	\$56,958	\$72,532	
Obesity	\$124,925	1.2%		\$124,586	\$331	\$8	\$113	\$124,812	
Anxiety and fear-related disorders	\$124,386	1.2%		\$78,286	\$17,884	\$28,216	\$30,041	\$94,345	
Other specified and unspecified nutritional and metabolic dis	\$118,723	1.1%		\$41,103	\$77,536	\$84	\$40,436	\$78,286	
Cardiac dysrhythmias	\$105,533	1.0%	ΙL	\$45,614	\$58,048	\$1,871	\$83,699	\$21,834	\$0

*Not Representative of all utilization

*Data based on medical spend only

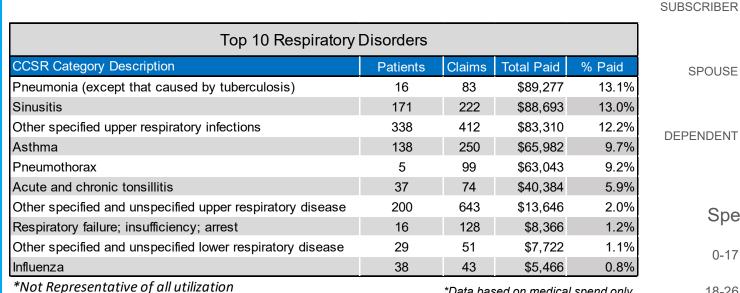


*Not Representative of all utilization

*Data based on medical spend only

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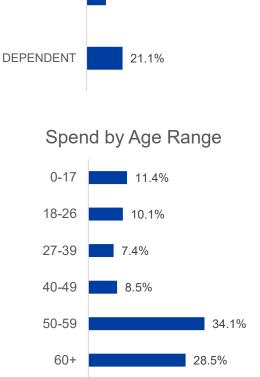
Spend by Relationship

11.3%

SPOUSE

67.6%

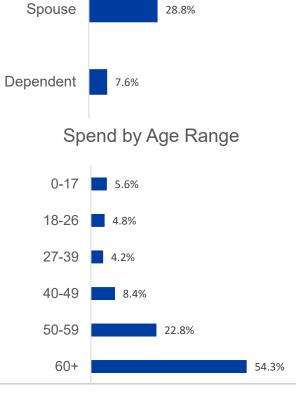
*Data based on medical spend only



Infections

Spend by Relationship

28.8%



Top 10 Infectious and Parasitic Diseases						
CCSR Description	Patients	Claims	Total Paid	% Paid		
Septicemia	46	155,529	\$108,632	46.7%		
Viral infection	122	34,076	\$91,625	39.4%		
COVID-19	146	25,348	\$38,379	16.5%		
Tuberculosis	19	8824	\$2,298	1.0%		
HIV infection	59	5926	\$1,156	0.5%		
Bacterial infections	16	1445	\$830	0.4%		
Sexually transmitted infections	15	901	\$729	0.3%		
Hepatitis	11	388	\$638	0.3%		
Fungal infections	57	222	\$158	0.1%		
Parasitic, other specified unspecified infections	2	135	\$0	0.0%		
*Not Representative of all utilization	*Da	ata based or	n medical spen	d only		

Subscriber



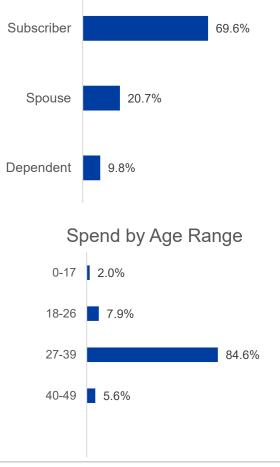
63.6%

Pregnancy Related Disorders



Top 10 Complications of Pregnancy Patients Claims Total Paid % Paid **AHRQ** Description 54 \$65,123 12.8% Uncomplicated pregnancy, delivery or puerperium 186 Previous C-section 4 12 \$61,908 12.1% Complications specified during childbirth \$60,611 11.9% 10 13 \$46,001 9.0% Maternal care related to fetal conditions 13 25 6.9% Hypertension and hypertensive-related conditions pregnancy 6 \$35,386 28 \$32,205 6.3% Other specified complications in pregnancy 28 61 \$30,811 Early or threatened labor 10 6.0% 16 Malposition, disproportion or other labor complications 5 \$30,295 5.9% 14 Prolonged pregnancy 3 \$29,280 5.7% 6 OB-related trauma to perineum and vulva 3 4 \$26,032 5.1%





*Not Representative of all utilization

*Data based on medical spend only

Emergency Room and Urgent Care

UnitedHealthcare®

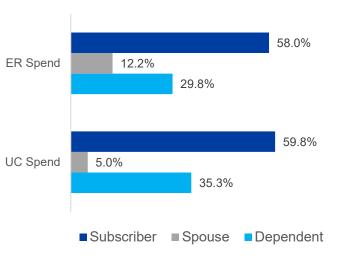
	July -	Dec 2Q23	July - Dec 2Q24		Peer	
Metric	ER	Urgent Care	ER	Urgent Care	ER	Urgent Care
# of Visits	395	2,053	358	1,773		(
Visits Per Member	0.06	0.33	0.06	0.29	0.08	0.31
Visits Per K	127.3	661.6	117.1	580.1	89.9	412.2
Avg. Paid Per Visit	\$2,696	\$123	\$3,490.98	\$138	\$2,605	\$116

*Not Representative of all utilization

*Data based on medical spend only

Emergency Room and Urgent Care Visits by Relationships - 2Q24						
Relationship	ER Visits	ER Per K	UC Visits	UC Per K		
Member	201	65.8	1,100	359.9		
Spouse	44	14.4	172	56.3		
Dependent	113	37.0	501	163.9		
Total	358	117.1	1,773	580.1		

ER / UC Spend by Relationship



	UnitedHealthcare
Ð	

Top 15 Common Condition	# of Members	% of Members	Members Per K	PMPM
Mental Disorders	602	9.7%	96.9	\$19.23
Intervertebral Disc Disorders	448	7.2%	72.1	\$8.36
Diabetes with complications	355	5.7%	57.1	\$6.73
Breast Cancer	61	1.0%	9.8	\$6.43
Asthma	183	2.9%	29.5	\$3.44
Hypertension	425	6.8%	68.4	\$3.98
Acute Myocardial Infarction	15	0.2%	2.4	\$1.87
Prostate Cancer	38	0.6%	6.1	\$1.56
Congestive Heart Failure (CHF)	48	0.8%	7.7	\$1.48
Cervical Cancer	21	0.3%	3.4	\$0.78
Diabetes without complications	301	4.8%	48.5	\$0.51
Chronic Renal Failure	32	0.5%	5.2	\$0.55
Coronary Atherosclerosis	38	0.6%	6.1	\$0.21
Colon Cancer	14	0.2%	2.3	\$0.33
COPD	72	1.2%	11.6	\$0.07

*Not Representative of all utilization

*Data based on medical spend only

Pharmacy Drivers

	July - Dec 2Q23	July - Dec 2Q24	Δ
Enrolled Members	6,206	6,112	-1.5%
Average Prescriptions PMPY	17.3	17.5	0.9%
Formulary Rate	86.9%	87.9%	1.2%
Generic Use Rate	84.0%	84.3%	0.3%
Generic Substitution Rate	98.1%	98.9%	0.8%
Avg Net Paid per Prescription	\$131	\$145	10.7%
Net Paid PMPM	\$188	\$210	11.8%

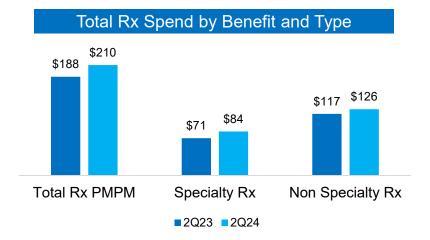
Pharmacy Performance

- Rx spend increased of 11.8%, (\$22 PMPM) from prior period
- Avg. paid per Script increased 10.7% (\$11 PMPM) year over year
- Specialty Rx spend driving 37.7% of Rx Spend
- Specialty Rx spend decreased **-5.6%** from prior period Specialty Rx Drivers:

Mounjaro (Antidiabetic) Spend up 134.7% Ozempic (Antidiabetic) Spend up 26.6%

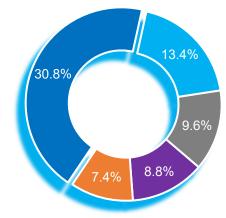
 Tier 1 Rx drove 74.1% of total claim volume, but only accounts for 5.2% of overall Rx Spend





Top 5 Therapeutic Classes by Spend

- Antidiabetics
- Dermatologicals
- Analgesics
- Psychotherapeutic / Neurological
- Antivirals



Appendix E

Index of Tables Dental Plan –Utilization Review for PEBP July 1, 2024 – December 31, 2024

DENTAL TOTAL SAVINGS SUMMARY	.2
DENTAL CLAIMS BREAKOUTS	3
DENTAL PAID BY MEMBER STATUS	4



Public Employees' Benefits Program

Quarterly Plan Performance Review Dental • 2025-2Q Claims Paid 7/1/2024 - 12/31/2024

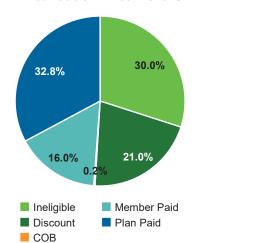


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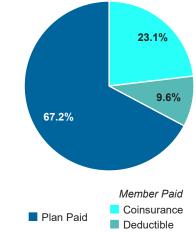
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Breakouts & Network Performance

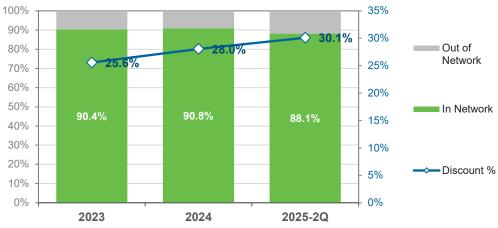




Breakout of Paid Dollars



Dental Network Performance



Dental Dollar Chain: Billed to Paid Dollars

Dollar Amount	Total Dollars	РМРМ
Dental Billed	\$44,211,849	\$108.81
(-) Ineligible	\$13,273,453	\$32.67
Dental Covered	\$30,938,396	\$76.15
(-) Discount	\$9,300,755	\$22.89
Dental Allowed	\$21,637,641	\$53.25
(-) СОВ	\$105,501	\$0.26
(-) Coinsurance	\$4,998,618	\$12.30
(-) Deductible	\$2,085,129	\$5.13
Total Member Paid	\$7,083,748	\$17.43
Total Plan Paid	\$14,534,236	\$35.77

Breakout of Billed Dollars

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Dental Claims Breakouts

Age Range, Member Cost, and Dental Category



	2024-2Q		2025-2	2Q	Change		
Age	Total Paid	Paid PMPM	Total Paid	Paid PMPM	Total	РМРМ	
< 01	\$5,026	\$2.22	\$4,039	\$1.68	-19.6%	-24.0%	
01	\$24,610	\$9.62	\$26,053	\$9.96	5.9%	3.5%	
02 - 04	\$214,693	\$22.96	\$232,327	\$24.04	8.2%	4.7%	
05 - 09	\$609,666	\$33.80	\$640,226	\$33.14	5.0%	-2.0%	
10 - 14	\$674,491	\$31.04	\$718,735	\$31.81	6.6%	2.5%	
15 - 19	\$968,339	\$38.22	\$933,239	\$35.22	-3.6%	-7.8%	
20 - 24	\$551,556	\$20.93	\$609,295	\$21.73	10.5%	3.8%	
25 - 29	\$450,701	\$25.06	\$502,466	\$25.23	11.5%	0.7%	
30 - 34	\$603,232	\$27.84	\$641,937	\$27.57	6.4%	-1.0%	
35 - 39	\$753,166	\$30.34	\$792,592	\$30.43	5.2%	0.3%	
40 - 44	\$840,015	\$32.12	\$861,683	\$31.19	2.6%	-2.9%	
45 - 49	\$871,596	\$34.89	\$896,234	\$34.52	2.8%	-1.0%	
50 - 54	\$999,367	\$34.54	\$1,088,255	\$36.50	8.9%	5.7%	
55 - 59	\$1,169,130	\$40.22	\$1,147,056	\$38.25	-1.9%	-4.9%	
60 - 64	\$1,378,200	\$43.82	\$1,342,069	\$42.95	-2.6%	-2.0%	
65+	\$3,971,708	\$49.17	\$4,098,030	\$50.41	3.2%	2.5%	
Total	\$14,085,496	\$35.98	\$14,534,236	\$35.77	3.2%	-0.6%	

Dental Cost Distribution

Member Total Paid Range	Unique Members	Members % of Tot	Total Paid	Tot Paid % of Tot	Total OOP (Mem Paid)	OOP % of Tot
No Claims	32,270	45.1%	\$0	0.0%	\$0	0.0%
< \$0 - \$0	1,112	1.6%	-\$5,060	0.0%	\$52,494	0.7%
> \$0 - \$250	23,824	33.3%	\$3,514,042	24.2%	\$1,059,469	15.0%
> \$250 - \$500	6,729	9.4%	\$2,303,592	15.8%	\$831,771	11.7%
> \$500 - \$750	2,504	3.5%	\$1,546,839	10.6%	\$894,295	12.6%
> \$750 - \$1000	1,461	2.0%	\$1,259,970	8.7%	\$746,142	10.5%
> \$1000	3,583	5.0%	\$5,914,854	40.7%	\$3,499,575	49.4%
Total	71,483	100.0%	\$14,534,236	100.0%	\$7,083,748	100.0%

Paid Breakout by Dental Category

2025- 2Q	24%	21%	36%	19%	
2024- 2Q	24%	22%	34%	20%	
	Preventive	■ Diagnostic	Basic	■ Major	Ortho

Dental	20	24-2Q	20	Change	
Category	Patients	Total Paid	Patients	Total Paid	Total Paid
Preventive	28,952	\$3,380,237	29,741	\$3,443,283	1.9%
Diagnostic	29,423	\$3,033,125	30,544	\$3,087,533	1.8%
Basic	13,794	\$4,801,062	14,515	\$5,181,443	7.9%
Major	4,383	\$2,871,071	4,240	\$2,821,978	-1.7%
Orthodontia	2	\$0	1	\$0	-
Total Dental	37,409	\$14,085,496	38,797	\$14,534,236	3.2%



Breakout of State vs. Non-State by Member Status

	2024-2Q (7/1/2023 - 12/31/2023)				2025-2Q (7/1/2024 - 12/31/2024)				Trend
Program	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Active	Pre-Medicare Retirees	Medicare Retirees	Total	Total
State Memb									
Dental	\$9,327,748	\$1,184,867	\$320,982	\$10,833,596	\$9,708,166	\$1,181,319	\$306,537	\$11,196,022	3.3%
Dental Exchange			\$2,032,808	\$2,032,808			\$2,171,512	\$2,171,512	6.8%
Total	\$9,327,748	\$1,184,867	\$2,353,790	\$12,866,405	\$9,708,166	\$1,181,319	\$2,478,049	\$13,367,534	3.9%
РМРМ	\$32.35	\$39.62	\$49.48	\$35.17	\$31.82	\$41.35	\$51.34	\$35.00	-0.5%
Non-State N	lembers								
Dental	\$2,915	\$37,534	\$132,992	\$173,441	\$1,726	\$33,772	\$121,531	\$157,029	-9.5%
Dental Exchange			\$1,045,650	\$1,045,650			\$1,009,674	\$1,009,674	-3.4%
Total	\$2,915	\$37,534	\$1,178,642	\$1,219,091	\$1,726	\$33,772	\$1,131,205	\$1,166,702	-4.3%
РМРМ	\$40.48	\$36.51	\$48.07	\$47.58	\$25.40	\$48.18	\$47.97	\$47.92	0.7%
All Members									
Dental	\$9,330,663	\$1,222,401	\$453,974	\$11,007,037	\$9,709,892	\$1,215,091	\$428,068	\$11,353,050	3.1%
Dental Exchange			\$3,078,459	\$3,078,459			\$3,181,186	\$3,181,186	3.3%
Total	\$9,330,663	\$1,222,401	\$3,532,432	\$14,085,496	\$9,709,892	\$1,215,091	\$3,609,254	\$14,534,236	3.2%
РМРМ	\$32.35	\$39.51	\$49.00	\$35.98	\$31.82	\$41.51	\$50.24	\$35.77	-0.6%