

Commonwealth of Kentucky
Personnel Cabinet

Health Insurance Program Monthly Report



Prepared for:

Kentucky Group Health Insurance
Board Members

June 2014

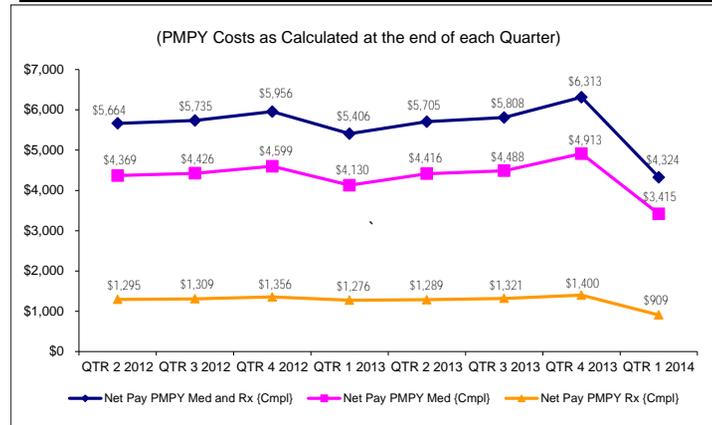
DASHBOARD REPORT: BASED ON INCURRED CLAIMS

Includes Projections for Incurred, but Not Yet Reported (IBNR or CMPL)

Enrollment

| Fact | Feb 2013 - Jan 2014 | Feb 2012 - Jan 2013 | % Change |
|-------------------|---------------------|---------------------|----------|
| Employees Avg Med | 153,413 | 156,616 | -2.05% |
| Members Avg Med | 266,898 | 270,165 | -1.21% |
| Family Size Avg | 1.7 | 1.7 | 0.85% |
| Member Age Avg | 37.1 | 37.4 | -0.83% |

Net Incurred Claims Cost per Member

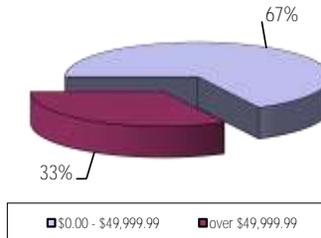


High Cost Claimants Jan 13–Dec 13

% of High Cost Patients



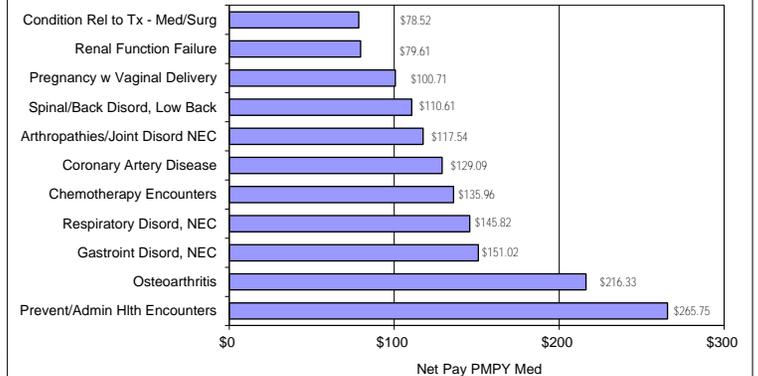
% of Total Net Payments (Med and Rx)



Prescription Drug Programs

| | Fact | Feb 2012 - Jan 2013 | Feb 2013 - Jan 2014 | % Change |
|------------|-------------------------------|---------------------|---------------------|----------|
| Mail Order | Discount Off AWP % Rx | 48.49% | 53.88% | 11.11% |
| | Scripts Generic Efficiency Rx | 92.68% | 93.87% | 1.28% |
| Retail | Discount Off AWP % Rx | 47.39% | 49.32% | 4.08% |
| | Scripts Generic Efficiency Rx | 93.63% | 94.49% | 0.92% |
| Total | Discount Off AWP % Rx | 47.64% | 50.38% | 5.75% |
| | Scripts Generic Efficiency Rx | 93.55% | 94.43% | 0.95% |
| | Scripts Maint Rx % Mail Order | 12.42% | 12.97% | 4.49% |

Top 10 Clinical Conditions



Allowed Claims Costs PMPY with Norms

| | Feb 2012 - Jan 2013 | Feb 2013 - Jan 2014 | % Change | Recent US Norm | Comp to Norm |
|----------------------------------|---------------------|---------------------|----------|----------------|--------------|
| Allow Amt PMPY Med {Cmpl} | \$4,997.51 | \$5,074.05 | 2% | \$4,088.12 | 19.43% |
| Allow Amt PMPY IP Acute {Cmpl} | \$1,398.00 | \$1,422.71 | 2% | N/A | N/A |
| Allow Amt PMPY OP Med {Cmpl} | \$3,579.41 | \$3,626.63 | 1% | \$2,820.68 | 22.22% |
| Allow Amt PMPY OP Fac Med {Cmpl} | \$1,970.88 | \$2,021.63 | 3% | N/A | N/A |
| Allow Amt PMPY Office Med {Cmpl} | \$969.84 | \$955.48 | -1% | \$0.00 | N/A |
| Allow Amt PMPY OP Lab {Cmpl} | \$342.98 | \$342.63 | 0% | \$0.00 | N/A |
| Allow Amt PMPY OP Rad {Cmpl} | \$544.91 | \$544.16 | 0% | \$0.00 | N/A |
| Out of Pocket PMPY Med {Cmpl} | \$523.26 | \$585.82 | 12% | \$528.65 | 9.76% |
| Allow Amt PMPY Rx {Cmpl} | \$1,579.18 | \$1,559.99 | -1% | \$1,018.21 | 34.73% |
| Out of Pocket PMPY Rx {Cmpl} | \$265.76 | \$273.20 | 3% | \$0.00 | N/A |

Cost Drivers Support

| Fact | Feb 2012 - Jan 2013 | Feb 2013 - Jan 2014 | % Change |
|--------------------------------|---------------------|---------------------|----------|
| Allow Amt Per Day Adm Acute | \$4,270.58 | \$4,576.97 | 7.17% |
| Days Per 1000 Adm Acute | 322.48 | 302.23 | -6.28% |
| Allow Amt Per Visit OP Fac Med | \$1,040.56 | \$1,076.60 | 3.46% |
| Visits Per 1000 OP Fac Med | 1,894.05 | 1,869.72 | -1.28% |
| Allow Amt Per Visit Office Med | \$116.20 | \$117.62 | 1.22% |
| Visits Per 1000 Office Med | 8,346.31 | 8,091.37 | -3.05% |
| Allow Amt Per Day Supply Rx | \$2.70 | \$2.72 | 0.93% |
| Days Supply PMPY Rx | 585.44 | 572.82 | -2.16% |

Cost Drivers—Utilization and Price Trends

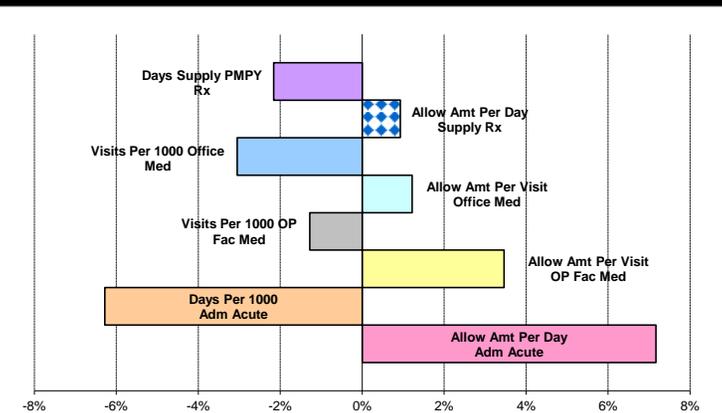


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Introduction

The Department of Employee Insurance (DEI) is pleased to provide an analysis of the Kentucky Employees' Health Plan. In response to requests for data analysis, this report has been prepared to provide information related to enrollment, claims payment, and utilization.

It is the Department's intent to update this information on a monthly basis in an effort to provide current information about Kentucky's Health Insurance Program.

Overview

This report is compiled using Medstat, which is DEI's health insurance information management system. Medstat warehouses enrollment and claims data. Enrollment data is provided by DEI while claims data is provided by each carrier and/or TPA.

Claims information may be analyzed by either "incurred" or "paid" dates. "Incurred" reports specify paid amounts for claims that were incurred in a specified timeframe. Due to the lag time in submittal and payment of claims, historical reports that are based on incurred claims may change significantly with each new database update since additional incurred claims will be added. "Paid" claims reports specify the paid amount for claims regardless of when the claims may have been incurred. Unless otherwise specified, data contained in this report are based on "incurred" claims.

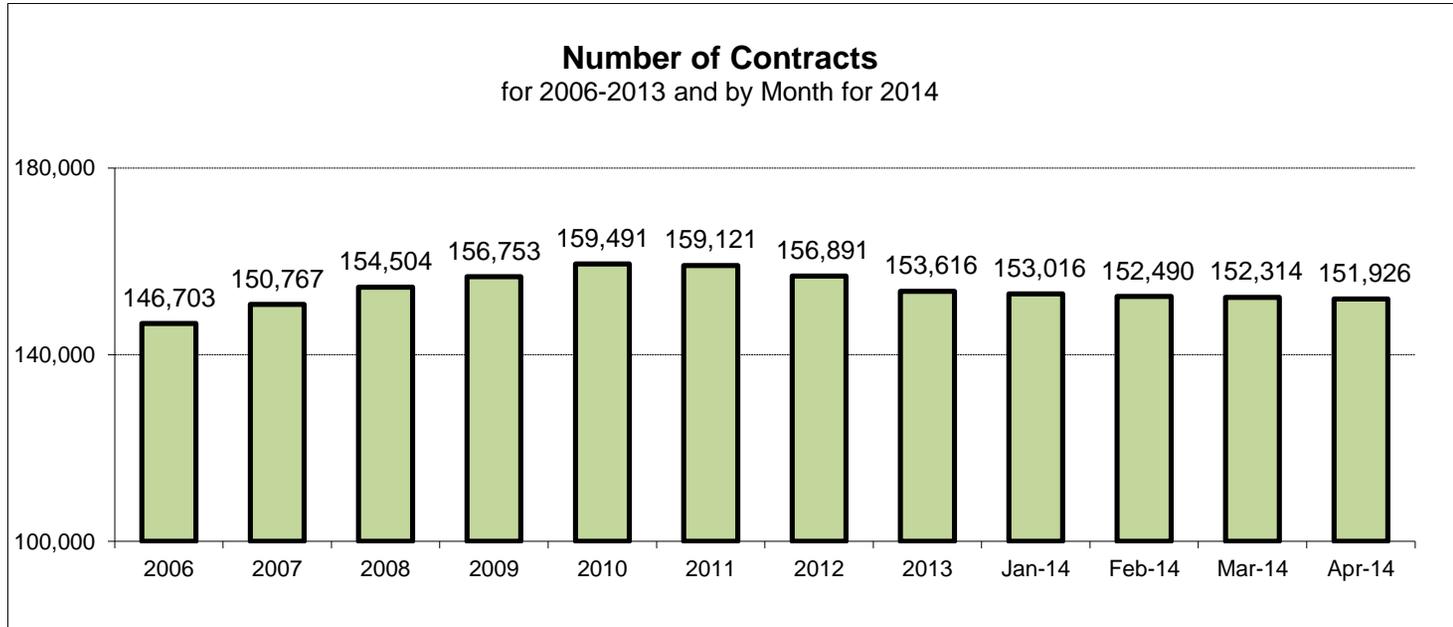
Enrollment in the KEHP changes on a daily basis due to a variety of reasons such as: new hires, adding dependents, dropping dependents, marriage, divorce, becoming Medicare eligible, etc. Therefore, Medstat is dealing with a fluid enrollment base. Also, each carrier processes claims slightly differently. During 2012 Medstat processed enrollment information for a total of 270,404 members as well as 8,891,904 claims (3,894,285 Medical claims and 4,997,619 prescriptions) from different carriers. When dealing with such large numbers it is impossible to tag every claim to a corresponding group, carrier, service type, etc. While the tagging rate for the KEHP data exceeds 99%, you may still see information on reports stated as "~Missing". This indicates any enrollment or claims that could not be "tagged" by Medstat.

Definitions

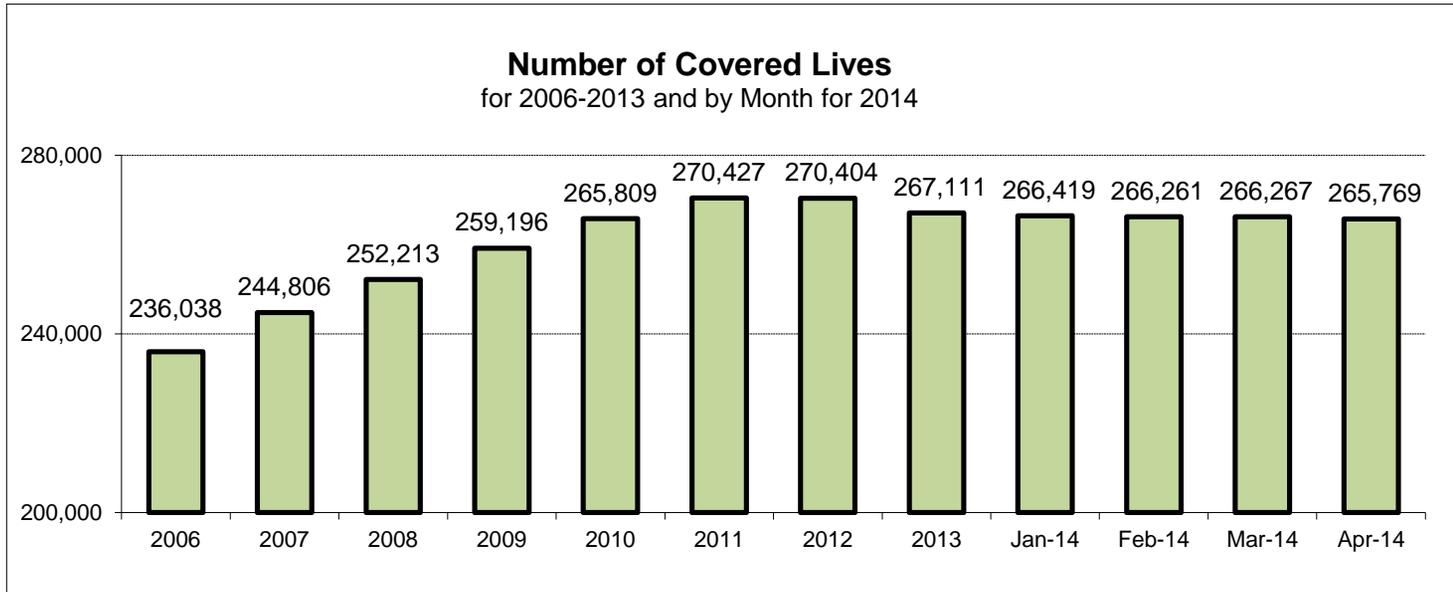
- **Employee** represents an individual eligible to participate in KEHP as a retiree in either KTRS or KRS, or by being employed by one of the agencies that participate with KEHP (example: state employee, school boards, Quasi agency, etc.). Employee may also be referred to as “planholder” or “contracts”. Please note that Medstat deals with Cross-reference plans uniquely. Although there are in fact two “employees” Medstat can only designate the planholder as an employee. Therefore, the cross-referenced spouse is considered a dependent and all claims and utilization data related to them is counted as a “member”.
- **Member** includes all employees plus any dependents that are covered through the KEHP. Members may also be referred to as “covered lives”.
- **Group** is Kentucky Retirement System (KRS), Kentucky Teachers Retirement System (KTRS), State Employees, School Boards, or Other (includes: COBRA, Health Departments, KCTCS, Quasi/Local Governments).
- **Plan** is Standard PPO, Capitol Choice, Optimum PPO, Maximum Choice, Commonwealth Essential, Commonwealth Enhanced, Commonwealth Premier, or Commonwealth Select.
- **Carrier** is claims listed by carrier. (Please note that Express Scripts data is designated as Humana).
- **Generic Efficiency** means the number of prescriptions that are filled with a generic product as a percentage of the total number of prescriptions where a generic is available.
- **OOP** is the amount paid out-of-pocket by the member for facility, professional, and prescription drug services. This generally includes coinsurance, co-payment, and deductible amounts.
- **Allowed Amount** is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.
- **Net Payment** is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, co-payment, coinsurance, and deductible amounts have been subtracted.
- **Patients** is the unique count of members who received facility, professional, or pharmacy services.
- **Days Supply** is the number of days for which drugs were supplied for prescriptions filled. It represents the number of days of drug therapy covered by a prescription.
- **Mail Order** is computed as any script filled with a “days supply” of more than 30 days, regardless of the physical location where the prescription was filled.
- **Retail** is computed as any script filled with a “days supply” of 30 days or less, regardless of the physical location where the prescription was filled.

Enrollment

The following chart shows planholder enrollment (contracts) for 2006-2013 and monthly year-to-date for 2014. Enrollment will fluctuate on a monthly basis (Approximately 8,000 cross-referenced spouses in any given month are not included)

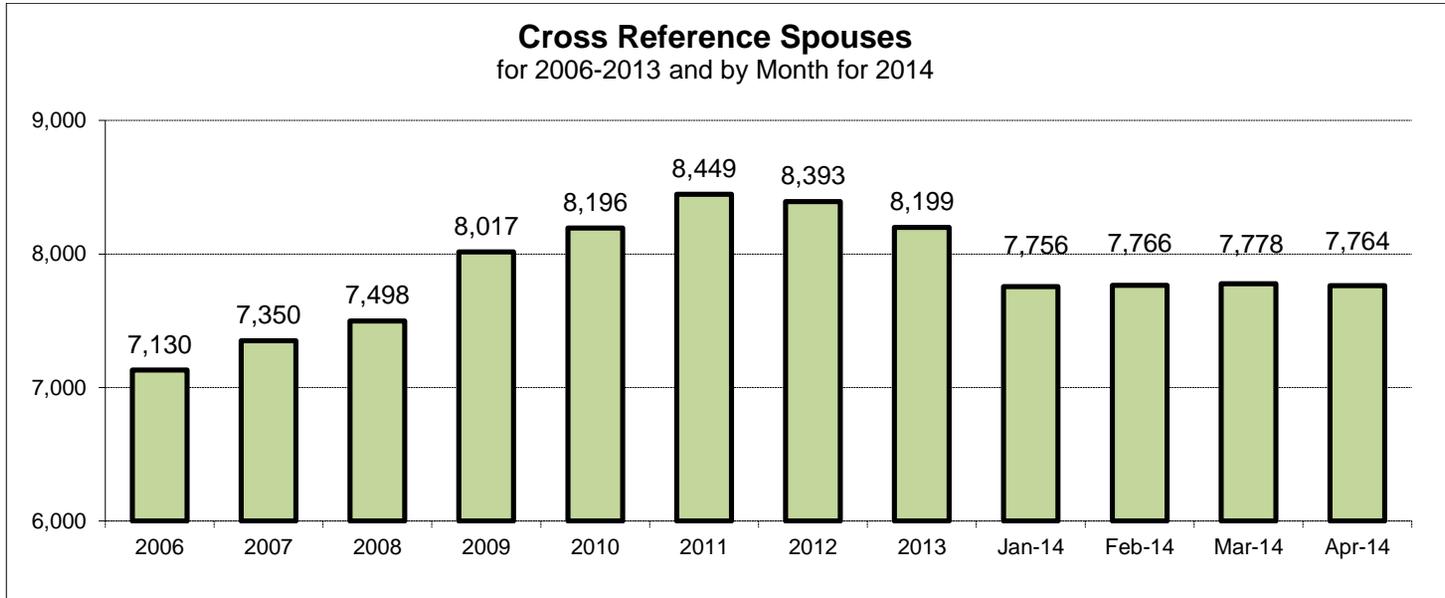


The following chart shows member enrollment (covered lives) for 2006-2013 and monthly year-to-date for 2014. Enrollment will fluctuate on a monthly basis.



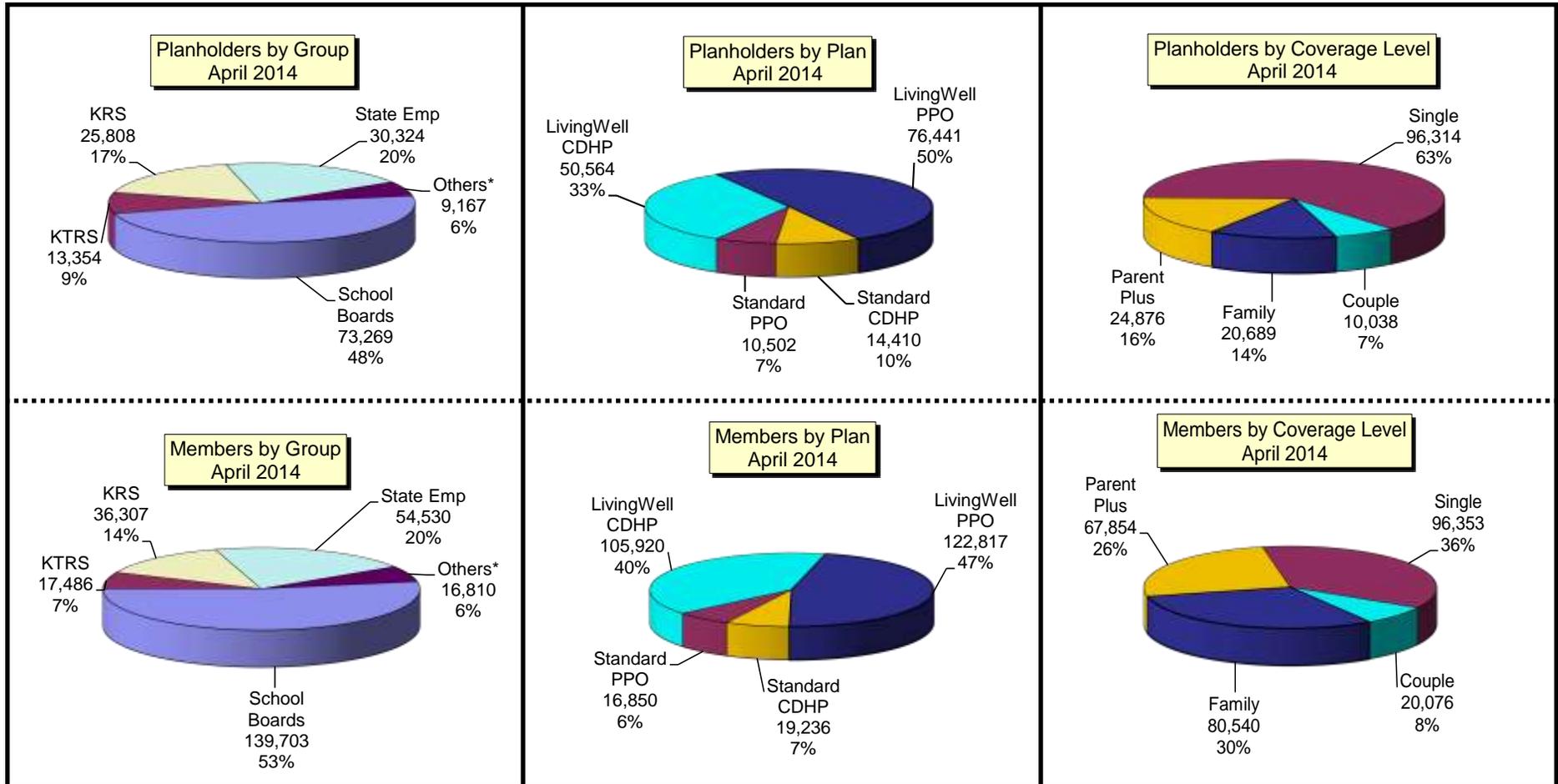
Enrollment *(continued)*

The following graph shows the number of cross-reference spouses for 2006-2013 and monthly year-to-date for 2014. The number of Cross Referenced Spouses will fluctuate on a monthly basis.



Enrollment *(continued)*

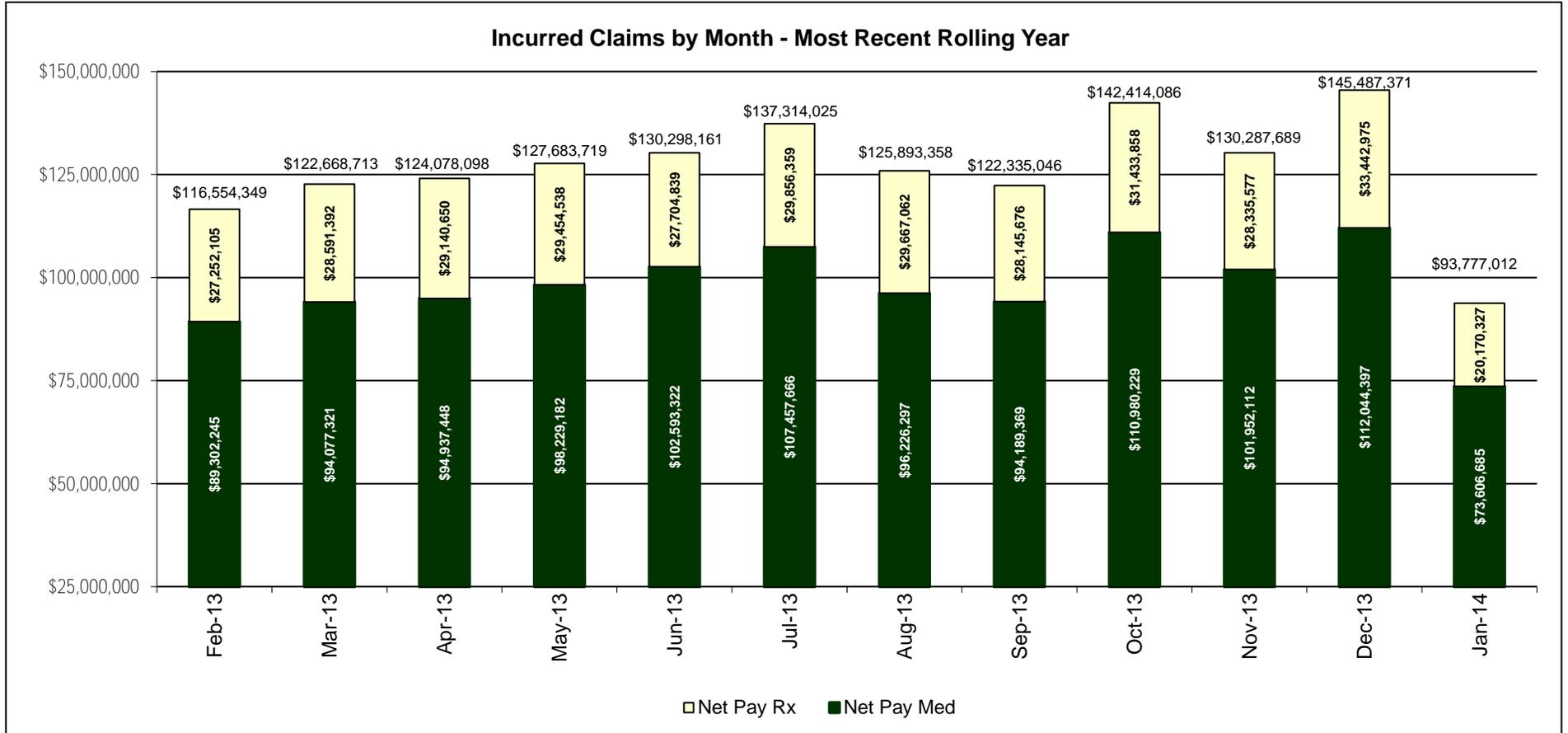
The following charts show Planholder and Member enrollment by group, plan, and coverage level.



* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs

Claims costs include Medical and Prescription (Rx) for the most recent rolling year. Based on Incurred Claims.



Claims Costs *(continued)*

The following tables represent incurred claims by Group for 2006 - 2013 and monthly year-to-date for 2014.

INCURRED MEDICAL CLAIMS (no Rx) by Group:

| | School Boards | KTRS | KRS | State Employees | Others* | Totals |
|----------|----------------------|---------------|---------------|------------------------|----------------|-----------------|
| 2006 | \$307,404,829 | \$93,874,833 | \$147,000,881 | \$151,118,572 | \$48,943,683 | \$748,342,797 |
| 2007 | \$335,233,747 | \$96,138,953 | \$156,119,263 | \$147,816,830 | \$50,969,860 | \$786,278,653 |
| 2008 | \$402,843,851 | \$109,319,917 | \$194,688,095 | \$178,641,561 | \$64,333,716 | \$949,827,140 |
| 2009 | \$427,644,878 | \$123,944,338 | \$220,434,791 | \$177,195,445 | \$68,628,440 | \$1,017,847,892 |
| 2010 | \$467,251,898 | \$134,399,726 | \$218,395,487 | \$193,151,301 | \$79,182,411 | \$1,092,380,824 |
| 2011 | \$475,939,979 | \$137,632,074 | \$239,407,280 | \$200,932,917 | \$80,536,373 | \$1,134,448,624 |
| 2012 | \$508,368,959 | \$138,278,216 | \$243,296,451 | \$206,968,378 | \$90,474,927 | \$1,187,386,931 |
| 2013 | \$521,386,154 | \$134,398,594 | \$232,019,864 | \$212,762,311 | \$95,155,830 | \$1,195,722,753 |
| Jan 2014 | \$30,473,882 | \$7,920,526 | \$15,848,386 | \$13,603,243 | \$5,760,648 | \$73,606,685 |

* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs *(continued)*

The following tables represent incurred claims by Group for 2006 - 2013 and monthly year-to-date for 2014.

INCURRED Rx CLAIMS (no Med) by Group:

| | School Boards | KTRS | KRS | State Employees | Others* | Totals |
|----------|----------------------|--------------|--------------|------------------------|----------------|---------------|
| 2006 | \$92,676,509 | \$35,017,335 | \$53,095,577 | \$42,857,791 | \$13,481,498 | \$237,128,711 |
| 2007 | \$102,883,195 | \$37,889,011 | \$61,585,393 | \$46,102,562 | \$15,361,507 | \$263,821,668 |
| 2008 | \$114,318,657 | \$42,211,258 | \$72,457,449 | \$51,523,178 | \$17,638,869 | \$298,149,411 |
| 2009 | \$119,002,425 | \$45,308,689 | \$82,234,684 | \$50,881,577 | \$18,339,245 | \$315,766,619 |
| 2010 | \$129,624,203 | \$49,399,459 | \$89,783,758 | \$55,125,407 | \$21,022,918 | \$344,955,745 |
| 2011 | \$126,659,101 | \$48,675,489 | \$92,082,668 | \$54,232,323 | \$20,434,256 | \$342,083,837 |
| 2012 | \$133,981,557 | \$50,750,453 | \$88,779,439 | \$58,569,889 | \$21,667,683 | \$353,749,022 |
| 2013 | \$140,280,007 | \$50,974,255 | \$78,480,457 | \$60,317,358 | \$22,772,060 | \$352,824,137 |
| Jan 2014 | \$8,020,805 | \$2,606,468 | \$4,973,663 | \$3,318,623 | \$1,250,767 | \$20,170,327 |

* Others include Cobra, Health Departments, KCTCS, Quasi/Local Governments, or Missing (unable to determine group).

Claims Costs *(continued)*

The following tables represent incurred claims by Plan for 2006-2013 and monthly year-to-date for 2014.

INCURRED MEDICAL CLAIMS (no Rx) by PLAN:

| Time Period | Capitol Choice | Maximum Choice | Optimum PPO | CW Standard PPO | Standard PPO | Standard CDHP | LivingWell PPO | LivingWell CDHP | Missing* | Total |
|--------------------|-----------------------|-----------------------|--------------------|------------------------|---------------------|----------------------|-----------------------|------------------------|-----------------|-----------------|
| 2009 | \$115,052,390 | \$44,250,277 | \$839,555,872 | \$14,550,862 | | | | | \$4,290,752 | \$1,017,847,892 |
| 2010 | \$120,801,466 | \$56,099,090 | \$893,370,461 | \$15,244,745 | | | | | \$6,865,062 | \$1,092,380,824 |
| 2011 | \$145,752,975 | \$71,531,690 | \$872,004,689 | \$39,637,013 | | | | | \$5,522,257 | \$1,134,448,624 |
| 2012 | \$159,398,015 | \$75,680,650 | \$888,704,660 | \$53,581,940 | \$0 | (\$1,306) | (\$4,665) | \$0 | \$10,027,637 | \$1,187,388,943 |
| 2013 | \$156,615,118 | \$78,032,103 | \$873,330,573 | \$64,357,152 | \$46,897 | \$129,454 | \$485,151 | \$587,239 | \$22,139,064 | \$1,195,724,766 |
| Jan-14 | \$14,870 | \$529 | \$58,281 | \$15,652 | \$3,350,703 | \$3,911,698 | \$43,178,374 | \$21,530,991 | \$1,545,588 | \$73,648,325 |

*Missing means the claims could not be tagged to a specific plan.

Claims Costs *(continued)*

The following tables represent incurred claims by Plan for 2006-2013 and monthly year-to-date for 2014.

INCURRED Rx CLAIMS (no Med) by PLAN:

| Time Period | Capitol Choice | Maximum Choice | Optimum PPO | CW Standard PPO | Standard PPO | Standard CDHP | LivingWell PPO | LivingWell CDHP | Missing* | Total |
|-------------|----------------|----------------|---------------|-----------------|--------------|---------------|----------------|-----------------|-----------|---------------|
| 2009 | \$35,845,894 | \$7,804,096 | \$267,798,635 | \$3,632,729 | | | | | \$627,662 | \$315,766,619 |
| 2010 | \$37,400,953 | \$10,541,054 | \$292,411,029 | \$3,839,193 | | | | | \$763,517 | \$344,955,745 |
| 2011 | \$44,303,915 | \$13,658,792 | \$275,615,919 | \$8,069,769 | | | | | \$435,441 | \$342,083,836 |
| 2012 | \$47,435,900 | \$14,365,499 | \$280,627,553 | \$10,763,677 | | | | | \$556,393 | \$353,749,022 |
| 2013 | \$46,693,042 | \$15,371,931 | \$276,546,797 | \$14,027,259 | \$14 | \$1,605 | \$12,078 | \$7,897 | \$163,514 | \$352,824,137 |
| Jan-14 | \$2,590 | \$197 | \$31,073 | \$2,985 | \$1,321,099 | \$119,787 | \$16,591,318 | \$2,059,108 | \$42,170 | \$20,170,327 |

*Missing means the claims could not be tagged to a specific plan.

Claims Costs *(continued)*

The following represents incurred medical claims only (does not include Rx) by Coverage Level for 2006-2013 and monthly year-to-date for 2014.

INCURRED MEDICAL CLAIMS (no Rx) by Coverage Level:

| Time Period | Couple | Family | Parent Plus | Single | Unknown* | Total |
|--------------------|---------------|---------------|--------------------|---------------|-----------------|-----------------|
| 2006 | \$105,900,696 | \$142,637,212 | \$104,245,315 | \$391,585,566 | \$3,974,007 | \$748,342,797 |
| 2007 | \$123,989,294 | \$160,349,021 | \$118,430,067 | \$447,682,122 | \$3,721,482 | \$854,171,987 |
| 2008 | \$138,340,738 | \$179,204,916 | \$138,984,028 | \$489,769,922 | \$3,527,536 | \$949,827,140 |
| 2009 | \$148,834,766 | \$197,496,335 | \$148,195,132 | \$519,153,082 | \$4,168,576 | \$1,017,847,892 |
| 2010 | \$161,490,560 | \$207,327,688 | \$168,831,673 | \$547,945,617 | \$6,785,286 | \$1,092,380,824 |
| 2011 | \$159,396,394 | \$231,596,907 | \$184,530,296 | \$553,457,501 | \$5,467,525 | \$1,134,448,624 |
| 2012 | \$160,059,748 | \$247,339,214 | \$194,472,962 | \$575,601,924 | \$9,913,083 | \$1,187,386,931 |
| 2013 | \$144,913,994 | \$248,968,192 | \$204,619,005 | \$582,036,076 | \$15,185,486 | \$1,195,722,753 |
| Jan 2014 | \$9,046,532 | \$14,546,878 | \$12,238,165 | \$36,580,787 | \$1,194,324 | \$73,606,685 |

**Unable to tag claims to a specific coverage level*

Claims Costs *(continued)*

The following represents incurred RX claims only (does not include medical) by Coverage Level for 2006-2013 and monthly year-to-date for 2014.

INCURRED Rx CLAIMS (no Med) by Coverage Level:

| Time Period | Couple | Family | Parent Plus | Single | Unknown* | Total |
|--------------------|---------------|---------------|--------------------|---------------|-----------------|---------------|
| 2006 | \$38,228,159 | \$43,809,856 | \$25,948,520 | \$128,164,514 | \$977,662 | \$237,128,711 |
| 2007 | \$42,590,719 | \$49,329,230 | \$29,736,616 | \$141,680,238 | \$484,865 | \$263,821,668 |
| 2008 | \$48,563,951 | \$54,628,661 | \$34,879,637 | \$159,504,290 | \$572,873 | \$298,149,411 |
| 2009 | \$51,545,047 | \$59,726,568 | \$37,315,867 | \$166,599,775 | \$579,363 | \$315,766,619 |
| 2010 | \$57,195,759 | \$64,920,207 | \$41,129,813 | \$180,993,674 | \$716,292 | \$344,955,745 |
| 2011 | \$54,760,963 | \$70,977,270 | \$47,930,366 | \$179,707,941 | \$372,482 | \$353,749,022 |
| 2012 | \$50,579,074 | \$72,732,825 | \$51,891,804 | \$177,527,245 | \$93,190 | \$352,824,137 |
| Jan 2014 | \$2,779,515 | \$3,632,732 | \$2,897,194 | \$10,820,860 | \$40,025 | \$20,170,327 |

**Unable to tag claims to a specific coverage level*

Medical Claims Utilization

The following is based on medical claims* (does not include Rx) incurred for January 2014.

| Commonwealth Plan | Admits Per 1000 Acute | Admits Per 1000 Acute Rcmt Sgovt | %Diff from {Rcmt SGovt} | Days LOS Admit Acute | Days LOS Admit Acute Rcmt Sgovt | %Diff from Rcmt SGovt | Days Per 1000 Adm Acute | Days Per 1000 Adm Acute Rcmt Sgovt | %Diff from Rcmt Sgovt |
|-------------------|-----------------------|----------------------------------|-------------------------|----------------------|---------------------------------|-----------------------|-------------------------|------------------------------------|-----------------------|
| LivingWell CDHP | 58.85 | 66.46 | -11.44% | 3.91 | 5.19 | -24.58% | 230.19 | 270.70 | -14.96% |
| LivingWell PPO | 71.11 | 71.54 | -0.60% | 4.60 | 5.99 | -23.13% | 327.36 | 305.20 | 7.26% |
| Standard CDHP | 48.57 | 68.75 | -29.35% | 5.60 | 6.68 | -16.07% | 272.25 | 285.59 | -4.67% |
| Standard PPO | 55.61 | 72.55 | -23.34% | 4.92 | 5.86 | -15.94% | 273.85 | 313.19 | -12.56% |
| Average | 63.55 | 69.37 | -8.39% | 4.42 | 5.73 | -22.73% | 281.20 | 290.53 | -3.21% |

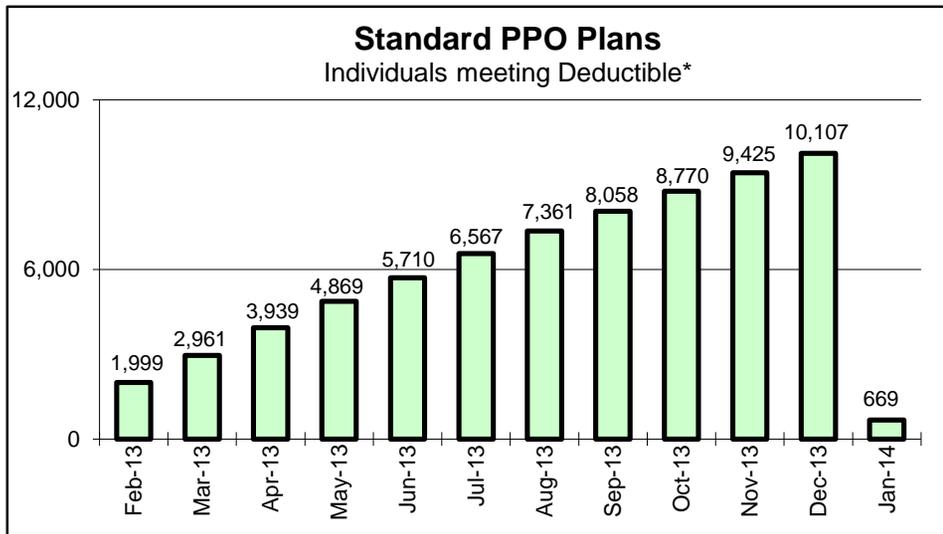
| Commonwealth Plan | Visits Per 1000 Office Med | Visits Per 1000 Office Med Rcmt Sgovt | %Diff from Rcmt SGovt | Visits Per 1000 ER | Visits Per 1000 ER Rcmt Sgovt | %Diff from Rcmt Sgovt |
|-------------------|----------------------------|---------------------------------------|-----------------------|--------------------|-------------------------------|-----------------------|
| LivingWell CDHP | 6,650.89 | 6,925.85 | -3.97% | 165.10 | 245.67 | -32.80% |
| LivingWell PPO | 8,334.38 | 7,695.90 | 8.30% | 219.92 | 244.58 | -10.08% |
| Standard CDHP | 4,015.99 | 7,263.87 | -44.71% | 181.70 | 244.03 | -25.54% |
| Standard PPO | 5,578.32 | 7,619.71 | -26.79% | 195.00 | 242.99 | -19.75% |
| Average | 7,164.98 | 7,352.70 | -2.55% | 193.68 | 244.87 | -20.90% |

| Commonwealth Plan | Svcs Per 1000 OP Lab | Svcs Per 1000 OP Lab Rcmt US | %Diff from Rcmt US | Svcs Per 1000 OP Rad | Svcs Per 1000 OP Rad Rcmt US | %Diff from Rcmt US |
|-------------------|----------------------|------------------------------|--------------------|----------------------|------------------------------|--------------------|
| LivingWell CDHP | 8,141.03 | 7,041.11 | 15.62% | 2,022.30 | 1,900.81 | 6.39% |
| LivingWell PPO | 11,933.56 | 8,175.27 | 45.97% | 2,957.28 | 2,364.83 | 25.05% |
| Standard CDHP | 6,289.94 | 7,936.37 | -20.75% | 1,629.90 | 2,166.52 | -24.77% |
| Standard PPO | 8,192.89 | 8,202.65 | -0.12% | 2,082.37 | 2,317.05 | -10.13% |
| Average | 9,763.87 | 7,708.57 | 26.66% | 2,430.21 | 2,162.56 | 12.38% |

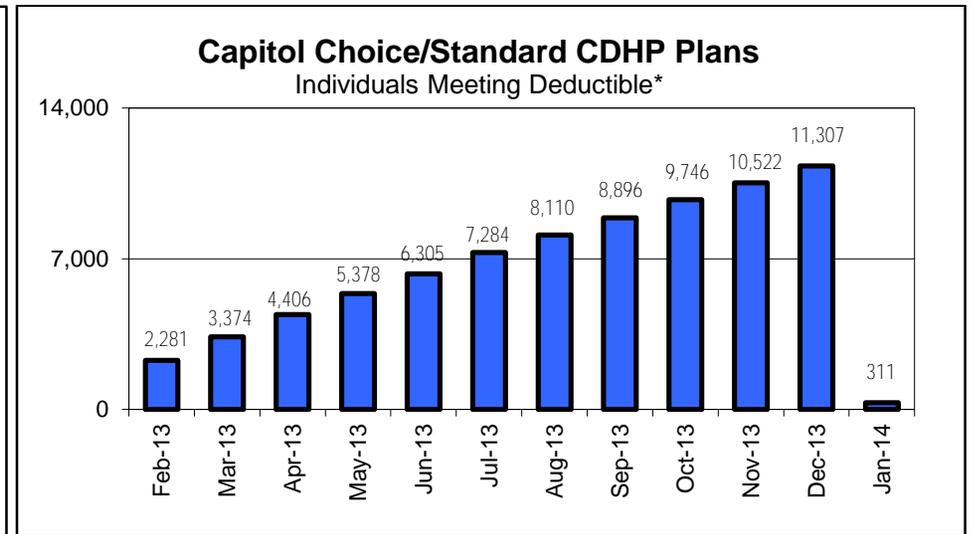
*Services are tracked by each service, not by each visit. Therefore, if two laboratory services are performed at one visit, it will count as two services.

Analysis of Individuals and Families Meeting Their Deductibles

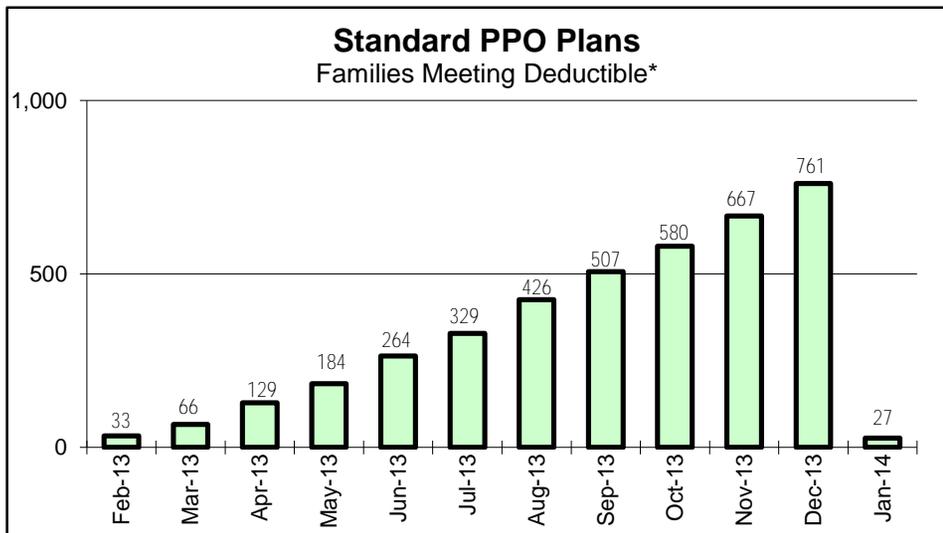
The following details the number of individuals and families by plan that met their deductible for the latest rolling year. This report is based on incurred claims.



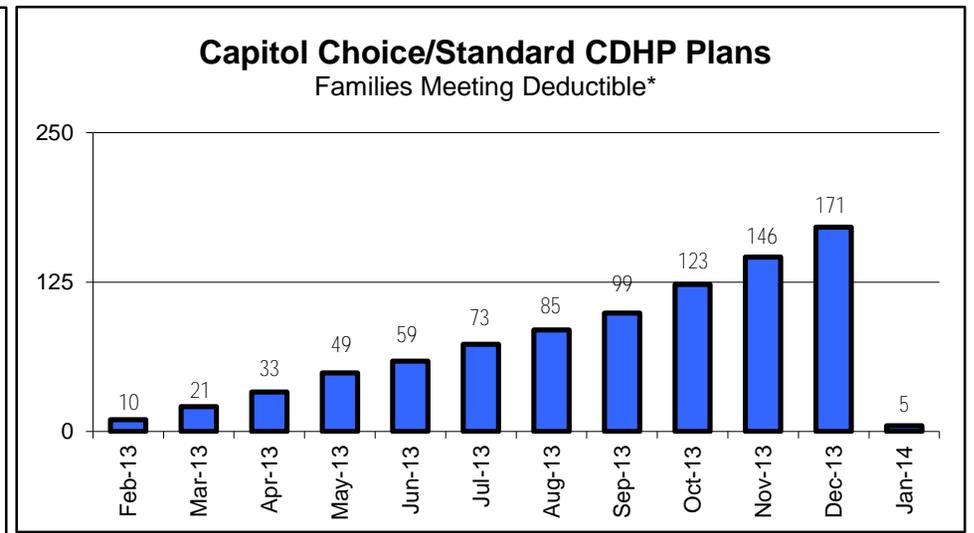
* 2012 Individual Deductible is \$500; 2013 Individual Deductible is \$600



* 2012 Individual Deductible is \$600; 2013 Individual Deductible is \$615



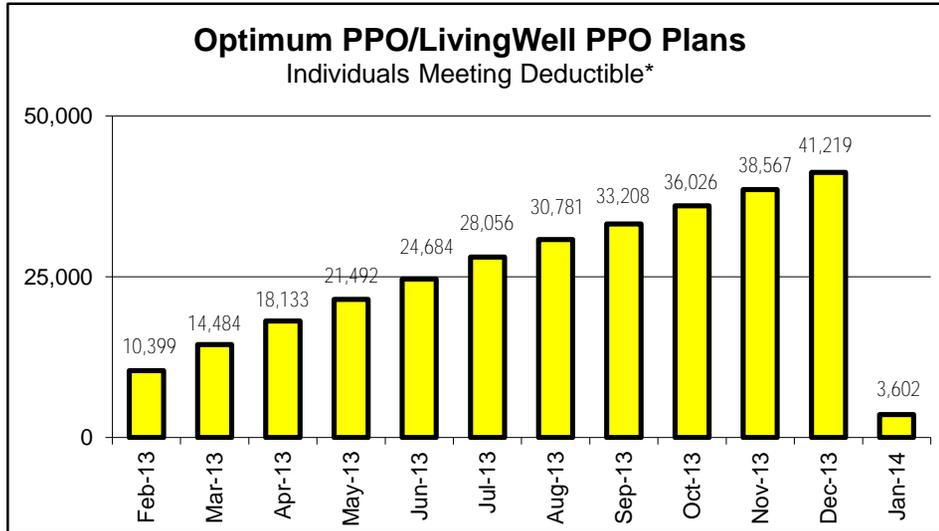
* 2012 Family Deductible is \$1,500; 2013 Family Deductible is \$1,800



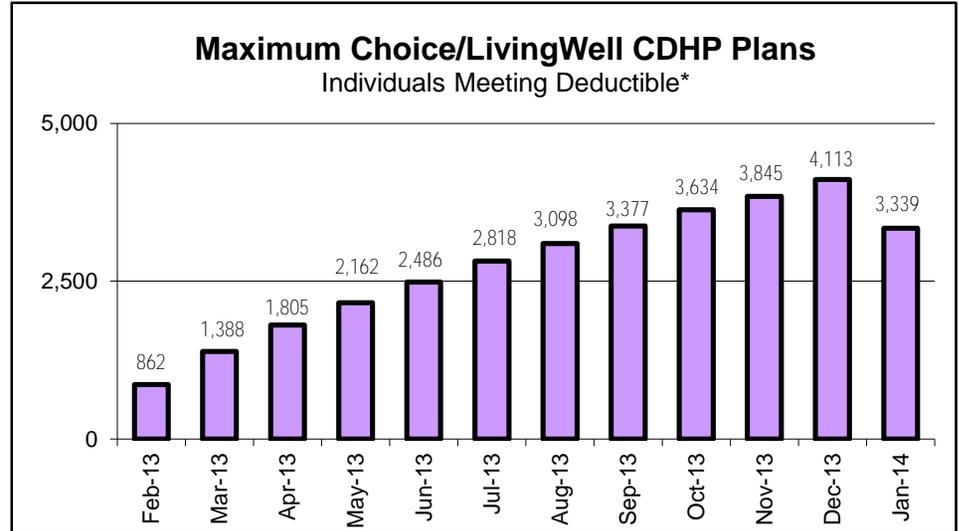
* 2012 Family Deductible is \$1,800; 2013 Family Deductible is \$1,850

Analysis of Individuals and Families Meeting Their Deductibles *(continued)*

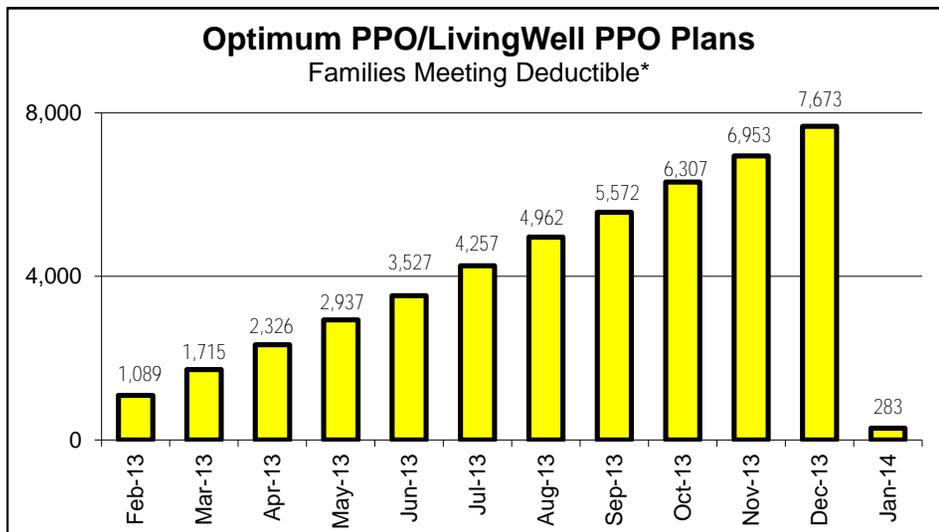
The following details the number of individuals and families by plan that met their deductible for the latest rolling year. This report is based on incurred claims.



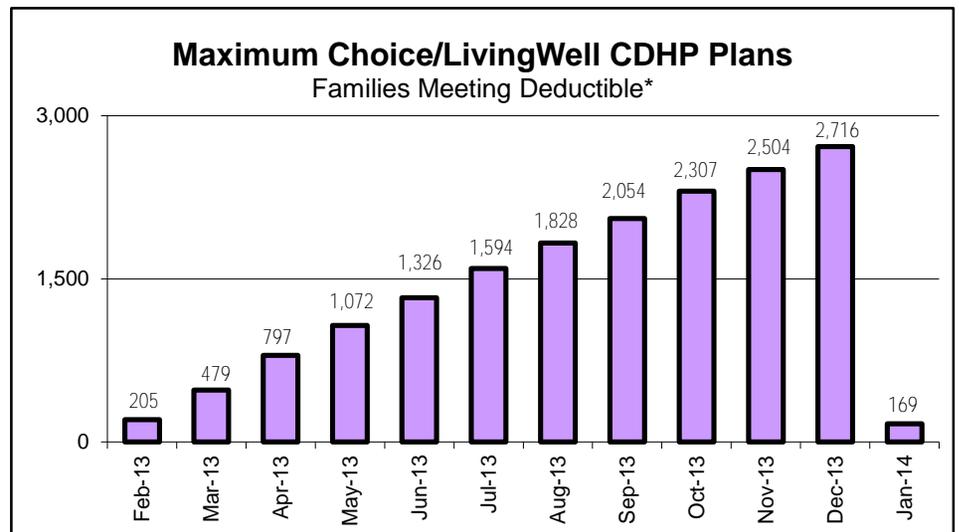
* 2012 Individual Deductible is \$355; 2013 Individual Deductible is \$370



* 2012 Individual Deductible is \$2,325; 2013 Individual Deductible is \$2,450



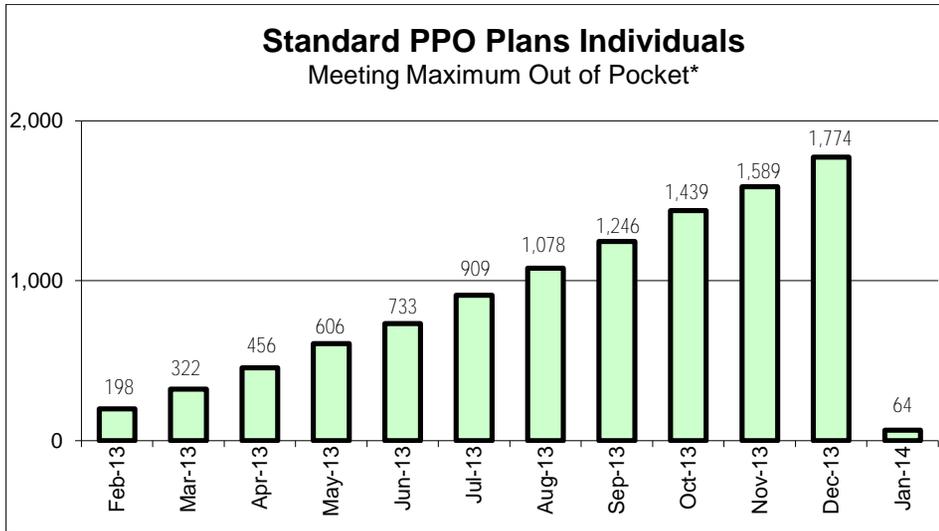
* 2012 Family Deductible is \$720; 2013 Family Deductible is \$740



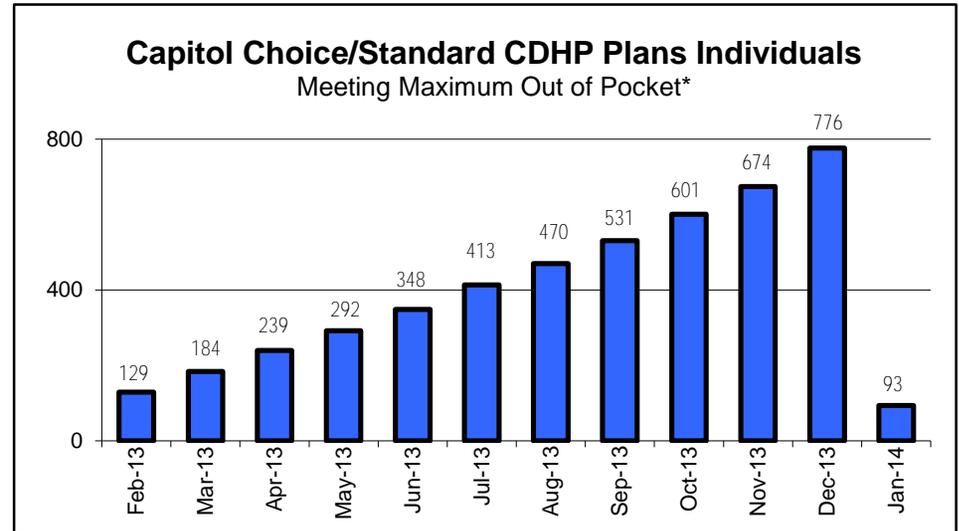
* 2012 Family Deductible is \$3,530; 2013 Family Deductible is \$3,650

Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses *(continued)*

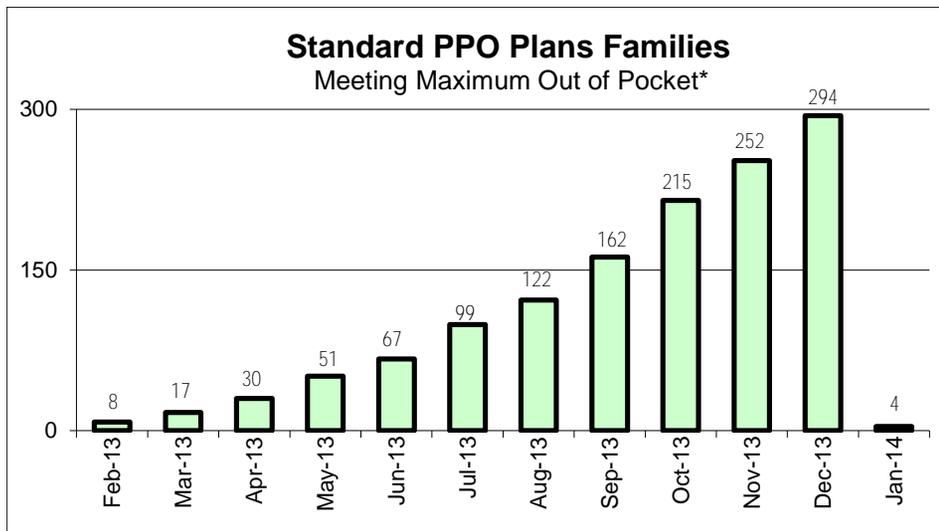
The following details the number of individuals and families by plan that met their maximum out of pocket expense for the latest rolling year. This report is based on incurred claims.



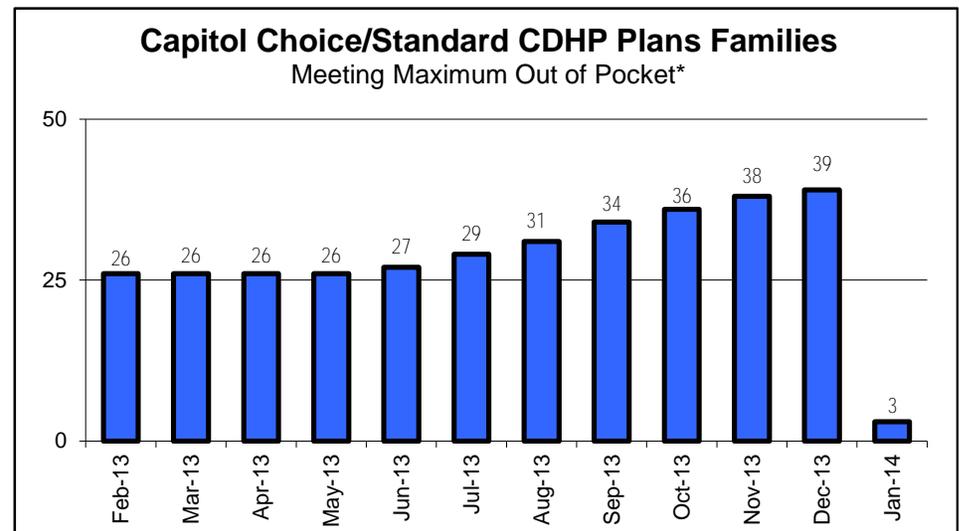
* 2012 Individual Maximum Out of Pocket is \$3,500; 2013 Individual Maximum Out of Pocket is \$3,000



* 2012 Individual Maximum Out of Pocket is \$2,400; 2013 Individual Maximum Out of Pocket is \$2,470



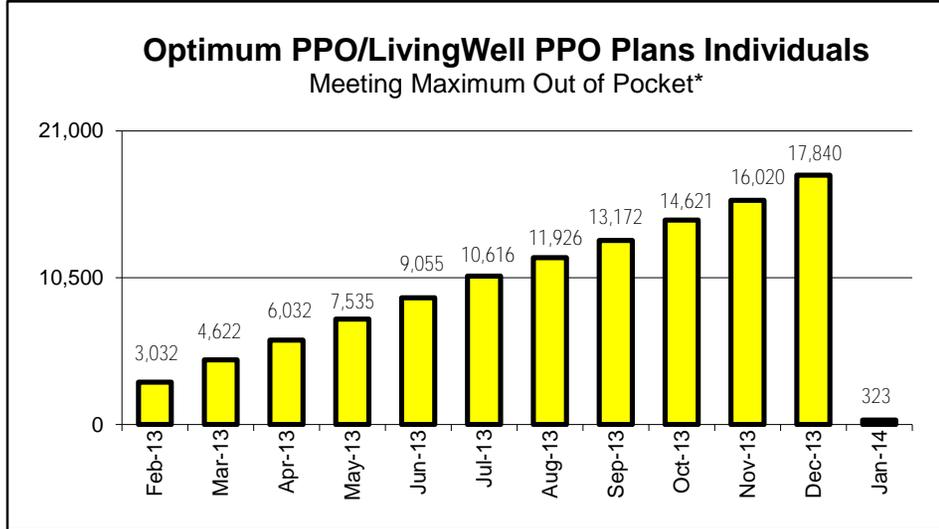
* 2012 Family Maximum Out of Pocket is \$7,000; 2013 Maximum Out of Pocket is \$6,000



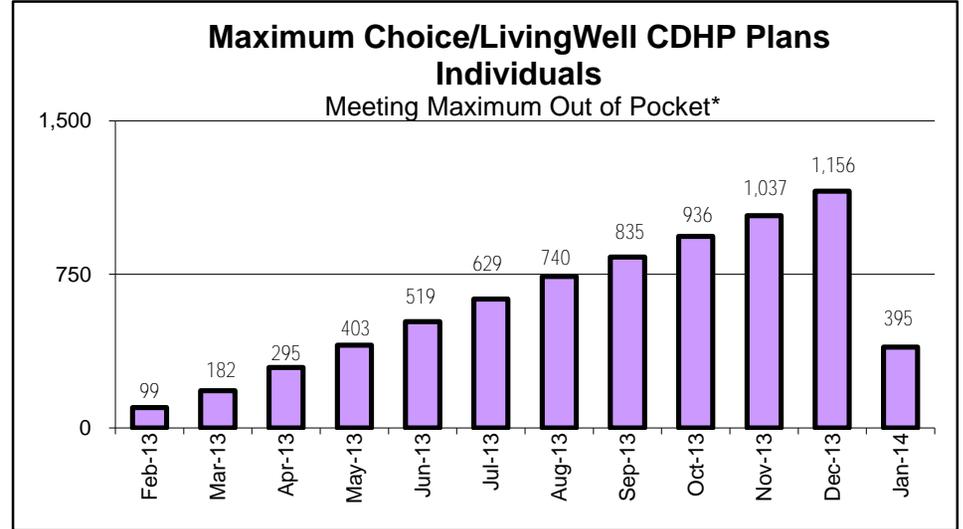
* 2012 Family Maximum Out of Pocket is \$7,000; 2013 Family Maximum Out of Pocket is \$7,400

Analysis of Individuals and Families Meeting Their Maximum Out of Pocket Expenses *(continued)*

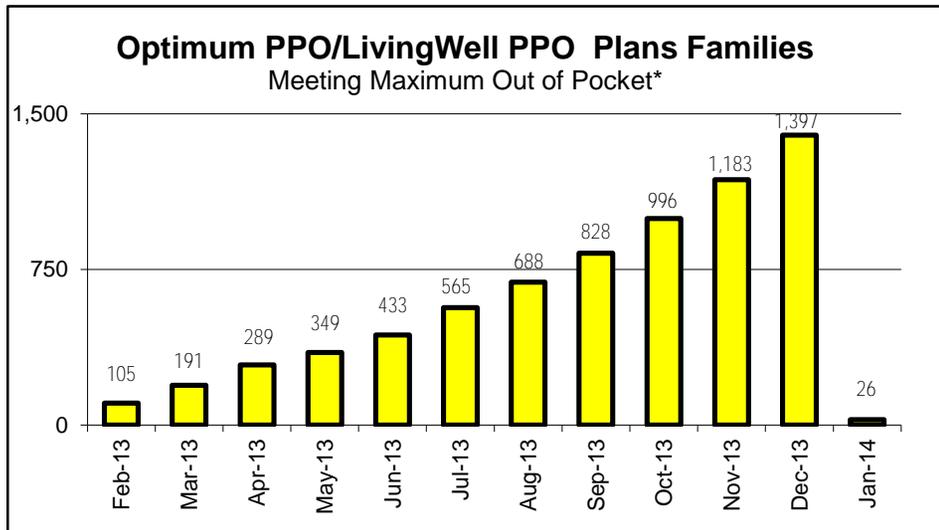
The following details the number of individuals and families by plan that met their maximum out of pocket expense for the latest rolling year. This report is based on incurred claims.



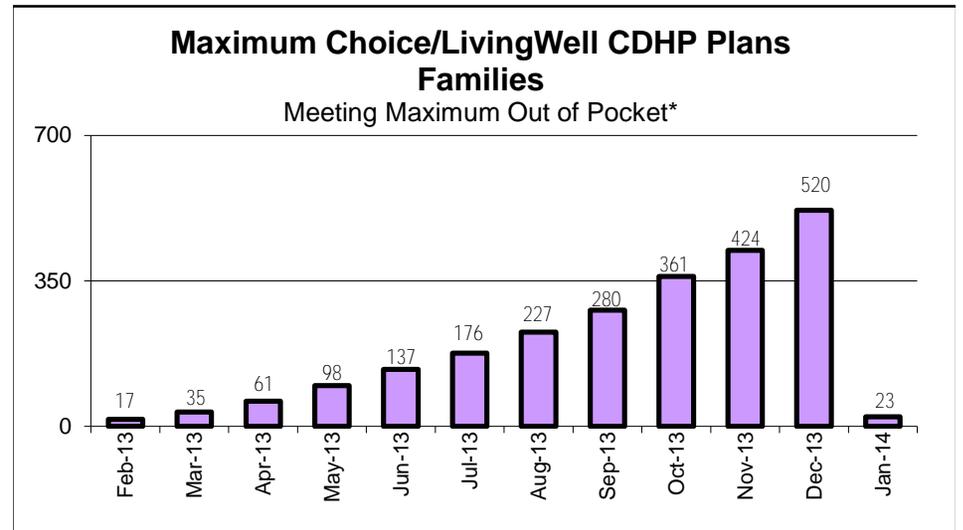
* 2012 Individual Maximum Out of Pocket is \$1,350; 2013 Maximum Out of Pocket is \$1,390



* 2012 Individual Maximum Out of Pocket is \$3,550; 2013 Individual Max Out of Pocket is \$3,700



* 2012 Family Maximum Out of Pocket is \$2,700; 2013 Family Maximum Out of Pocket is \$2,780



* 2012 Family Maximum Out of Pocket is \$5,280; 2013 Family Maximum Out of Pocket is \$5,400

Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out of Pocket Expenses

(continued)

The following details the number of individuals and families by plan that met their deductibles and/or maximum out of pocket (MOOP) expense for the years 2006-2013 This report is based on incurred claims.

| Individuals and Families in Essential (2006-08) and CW Standard PPO (2009-13) and Standard PPO (2014 -) | | | | | | | | | |
|---|------------------|--------------------|-----------------------------------|--------------------------|-----------------------------|-------------------|-----------------------------------|--------------------------|-----------------------------|
| | | Individuals | | | | Families | | | |
| Plan year | Plan Name | Deductible | Percent Meeting Deductible | Max Out of Pocket | Percent Meeting MOOP | Deductible | Percent Meeting Deductible | Max Out of Pocket | Percent Meeting MOOP |
| 2006 | Essential | \$750 | 22.14% | \$3,500 | 2.96% | \$1,500 | 16.35% | \$7,000 | 1.08% |
| 2007 | Essential | \$750 | 22.41% | \$3,500 | 3.30% | \$1,500 | 17.70% | \$7,000 | 1.16% |
| 2008 | Essential | \$750 | 24.25% | \$3,500 | 4.01% | \$1,500 | 19.35% | \$7,000 | 1.51% |
| 2009 | Standard PPO | \$750 | 32.06% | \$3,500 | 5.85% | \$1,500 | 8.74% | \$7,000 | 1.14% |
| 2010 | Standard PPO | \$500 | 38.12% | \$3,500 | 4.81% | \$1,500 | 3.61% | \$7,000 | 0.73% |
| 2011 | Standard PPO | \$500 | 39.40% | \$3,500 | 4.55% | \$1,500 | 3.99% | \$7,000 | 0.56% |
| 2012 | Standard PPO | \$500 | 40.49% | \$3,500 | 4.80% | \$1,500 | 4.98% | \$7,000 | 0.77% |
| 2013 | Standard PPO | \$600 | 36.51% | \$3,000 | 6.41% | \$1,800 | 4.16% | \$6,000 | 1.61% |
| 2014 | Standard PPO | \$750 | 3.92% | \$3,500 | 0.38% | \$1,500 | 0.25% | \$7,000 | 0.04% |

| Individuals and Families in Enhanced (2006-08) and Capitol Choice (2009-13) and Standard CDHP (2014 -) | | | | | | | | | |
|--|------------------|--------------------|-----------------------------------|--------------------------|-----------------------------|-------------------|-----------------------------------|--------------------------|-----------------------------|
| | | Individuals | | | | Families | | | |
| Plan year | Plan Name | Deductible | Percent Meeting Deductible | Max Out of Pocket | Percent Meeting MOOP | Deductible | Percent Meeting Deductible | Max Out of Pocket | Percent Meeting MOOP |
| 2006 | Enhanced | \$250 | 21.52% | \$1,250 | 5.80% | \$500 | 9.95% | \$2,500 | 0.94% |
| 2007 | Enhanced | \$250 | 21.31% | \$1,250 | 7.48% | \$500 | 8.93% | \$2,500 | 1.00% |
| 2008 | Enhanced | \$250 | 21.95% | \$1,250 | 8.11% | \$500 | 9.06% | \$2,500 | 1.20% |
| 2009 | Capitol Choice | \$500 | 27.85% | \$2,000 | 1.86% | \$1,500 | 0.59% | \$6,000 | 0.01% |
| 2010 | Capitol Choice | \$500 | 25.19% | \$2,000 | 1.84% | \$1,500 | 0.49% | \$6,000 | 0.01% |
| 2011 | Capitol Choice | \$575 | 24.93% | \$2,300 | 1.61% | \$1,725 | 0.45% | \$6,900 | 0.01% |
| 2012 | Capitol Choice | \$600 | 25.70% | \$2,400 | 1.46% | \$1,800 | 0.55% | \$7,000 | 0.01% |
| 2013 | Capitol Choice | \$615 | 25.14% | \$2,470 | 1.73% | \$1,850 | 0.50% | \$7,400 | 0.11% |
| 2014 | Standard CDHP | \$1,750 | 1.55% | \$3,500 | 0.62% | \$3,500 | 0.03% | \$7,000 | 0.02% |

Historical Analysis of Individuals and Families Meeting Their Deductibles and Maximum Out of Pocket Expenses

(continued)

The following details the number of individuals and families by plan that met their deductibles and/or maximum out of pocket expense for the years 2006-2013 This report is based on incurred claims.

| Individuals and Families in Premier (2006-08) and Optimum PPO (2009-13) and LivingWell PPO (2014 -) | | | | | | | | | |
|---|----------------|-------------|----------------------------|-------------------|----------------------|------------|----------------------------|-------------------|----------------------|
| | | Individuals | | | | Families | | | |
| Plan year | Plan Name | Deductible | Percent Meeting Deductible | Max Out of Pocket | Percent Meeting MOOP | Deductible | Percent Meeting Deductible | Max Out of Pocket | Percent Meeting MOOP |
| 2006 | Premier | \$250 | 30.15% | \$1,000 | 6.70% | \$500 | 9.95% | \$2,000 | 1.17% |
| 2007 | Premier | \$250 | 30.04% | \$1,000 | 7.78% | \$500 | 8.93% | \$2,000 | 1.20% |
| 2008 | Premier | \$250 | 30.51% | \$1,000 | 8.60% | \$500 | 9.06% | \$2,000 | 1.26% |
| 2009 | Optimum PPO | \$250 | 27.18% | \$1,125 | 10.05% | \$500 | 8.42% | \$2,250 | 1.51% |
| 2010 | Optimum PPO | \$300 | 25.80% | \$1,125 | 10.89% | \$600 | 7.05% | \$2,250 | 1.47% |
| 2011 | Optimum PPO | \$345 | 25.16% | \$1,295 | 9.99% | \$690 | 7.31% | \$2,590 | 1.36% |
| 2012 | Optimum PPO | \$355 | 24.87% | \$1,350 | 9.93% | \$720 | 5.51% | \$2,700 | 1.38% |
| 2013 | Optimum PPO | \$370 | 24.81% | \$1,390 | 10.74% | \$740 | 7.52% | \$2,780 | 1.37% |
| 2014 | LivingWell PPO | \$500 | 2.92% | \$2,500 | 0.26% | \$1,000 | 0.37% | \$3,000 | 0.03% |

| Individuals and Families in Select (2007-08) and Maximum Choice (2009-13) and LivingWell CDHP (2014 -) | | | | | | | | | |
|--|-----------------|-------------|----------------------------|-------------------|----------------------|------------|----------------------------|-------------------|----------------------|
| | | Individuals | | | | Families | | | |
| Plan year | Plan Name | Deductible | Percent Meeting Deductible | Max Out of Pocket | Percent Meeting MOOP | Deductible | Percent Meeting Deductible | Max Out of Pocket | Percent Meeting MOOP |
| 2007 | Select | \$2,000 | 11.72% | \$3,000 | 3.01% | \$3,000 | 18.50% | \$4,500 | 2.61% |
| 2008 | Select | \$2,000 | 12.81% | \$3,000 | 3.63% | \$3,000 | 20.03% | \$4,500 | 3.91% |
| 2009 | Maximum Choice | \$2,000 | 14.90% | \$3,000 | 4.52% | \$3,000 | 15.96% | \$4,500 | 3.64% |
| 2010 | Maximum Choice | \$2,000 | 15.12% | \$3,000 | 4.91% | \$3,000 | 16.78% | \$4,500 | 4.14% |
| 2011 | Maximum Choice | \$2,300 | 14.60% | \$3,455 | 4.53% | \$3,455 | 18.28% | \$5,185 | 4.37% |
| 2012 | Maximum Choice | \$2,325 | 14.71% | \$3,550 | 4.16% | \$3,530 | 18.82% | \$5,280 | 3.99% |
| 2013 | Maximum Choice | \$2,450 | 14.54% | \$3,700 | 4.09% | \$3,650 | 19.13% | \$5,400 | 3.66% |
| 2014 | LivingWell CDHP | \$1,250 | 3.16% | \$2,500 | 0.37% | \$2,500 | 0.33% | \$5,000 | 0.05% |

Premium (or Premium Equivalent)

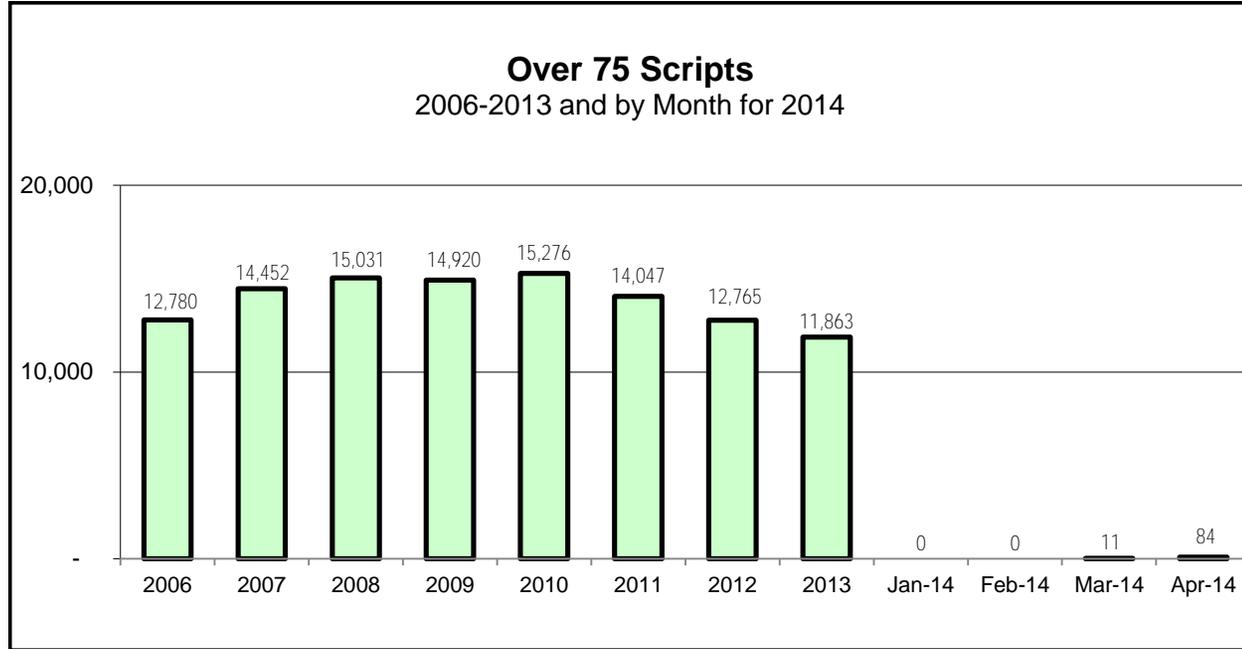
The following details the amount of premium* (or premium equivalent) paid by the employee and employer for 2006-2013 and monthly through 2014.

| Time Period | Employee Premium Amount | Employer Premium Amount | Total Premium Amount |
|--------------------|--------------------------------|--------------------------------|-----------------------------|
| 2006 | \$153,787,780 | \$948,458,338 | \$1,102,246,118 |
| 2007 | \$167,530,819 | \$973,220,791 | \$1,140,751,611 |
| 2008 | \$179,094,322 | \$1,039,574,462 | \$1,218,668,784 |
| 2009 | \$210,980,360 | \$1,190,104,292 | \$1,401,084,653 |
| 2010 | \$223,160,749 | \$1,325,801,265 | \$1,548,962,014 |
| 2011 | \$274,375,886 | \$1,324,091,690 | \$1,598,467,575 |
| 2012 | \$271,663,955 | \$1,332,767,157 | \$1,604,431,112 |
| 2013 | \$271,156,377 | \$1,329,854,915 | \$1,601,011,292 |
| Jan-14 | \$22,376,004 | \$113,923,845 | \$136,299,849 |
| Feb-14 | \$22,375,131 | \$113,632,543 | \$136,007,674 |
| Mar-14 | \$22,344,015 | \$113,537,770 | \$135,881,785 |
| Apr-14 | \$22,297,687 | \$113,281,606 | \$135,579,293 |

**Premium (or premium equivalent) is based on enrollment using published premium rates—it is NOT based on actual payments received.*

Prescription Drug Utilization

The following details the number of families that have purchased 75 scripts or more during 2006-2013 and by month for 2014. After a family has filled 75 prescriptions via retail purchase, the co-payment is reduced to \$30 for 2nd tier and \$44 for 3rd tier.



The table below summarizes plan impact for families regarding the scripts benefit in 2014:

| Script Count, per Family | Number of Families | Number of Scripts | Avg. # of Scripts per Patient | Avg. Net Payment per Script | Net Payments For All Scripts |
|--------------------------|--------------------|-------------------|-------------------------------|-----------------------------|------------------------------|
| 0 - 75 | 69,455 | 841,800 | 8.77 | \$74.97 | \$63,109,774.37 |
| Over 75 | 84 | 7,374 | 34.78 | \$91.31 | \$673,288.16 |
| Total | 69,539 | 849,174 | 8.83 | \$75.11 | \$63,783,062.53 |

Prescription Drug Utilization *(continued)*

The following details the type of prescription filled, the percent that were generic, and the generic efficiency rate for the most recent rolling year. Based on paid claims..

| Time Period: Paid Month | Generic | Brand Name, Generic Available | Brand Name | Other* | Total | Scripts Rx % Generic | Scripts Generic Efficiency Rx |
|------------------------------------|----------------|--|-------------------|---------------|--------------|---------------------------------|--|
| May 2013 | 274,430 | 15,208 | 51,697 | 7,305 | 348,640 | 78.71% | 94.75% |
| Jun 2013 | 285,057 | 15,789 | 54,929 | 8,016 | 363,791 | 78.36% | 94.75% |
| Jul 2013 | 340,069 | 18,042 | 65,775 | 10,138 | 434,024 | 78.35% | 94.96% |
| Aug 2013 | 274,980 | 14,617 | 51,707 | 8,674 | 349,978 | 78.57% | 94.95% |
| Sep 2013 | 283,778 | 16,857 | 52,075 | 8,344 | 361,054 | 78.60% | 94.39% |
| Oct 2013 | 359,694 | 30,013 | 66,303 | 12,295 | 468,305 | 76.81% | 92.30% |
| Nov 2013 | 297,604 | 19,707 | 54,012 | 9,294 | 380,617 | 78.19% | 93.79% |
| Dec 2013 | 374,144 | 20,660 | 68,154 | 12,264 | 475,222 | 78.73% | 94.77% |
| Jan 2014 | 273,713 | 15,392 | 44,118 | 8,933 | 342,156 | 80.00% | 94.68% |
| Feb 2014 | 278,313 | 13,166 | 40,914 | 9,381 | 341,774 | 81.43% | 95.48% |
| Mar 2014 | 287,366 | 13,526 | 42,020 | 11,136 | 354,048 | 81.17% | 95.50% |
| Apr 2014 | 352,848 | 16,590 | 51,959 | 12,845 | 434,242 | 81.26% | 95.51% |

**Includes: Over the Counter (usually items such as diabetic supplies, syringes, and test strips, etc.), Other/Unavailable or Missing (Unable to tag to a specific group).*

Prescription Drug Utilization (continued)

The following details the number of members and patients utilizing prescription benefits and the associated costs for the most recent rolling year. Based on Incurred Claims.

| Time Period | Members | Patients | Scripts | Scripts Per Member | Scripts Per Patient | Allow Amt* Per Script | Net Pay Per Script | Member Cost Per Script | Patient Cost Per Script |
|-------------|---------|----------|---------|--------------------|---------------------|-----------------------|--------------------|------------------------|-------------------------|
| Feb 2013 | 267,120 | 166,328 | 386,382 | 1.44 | 2.80 | \$86.67 | \$70.53 | \$23.33 | \$37.47 |
| Mar 2013 | 267,302 | 168,245 | 411,238 | 1.53 | 2.92 | \$85.08 | \$69.53 | \$23.93 | \$38.02 |
| Apr 2013 | 267,292 | 165,146 | 396,699 | 1.48 | 2.91 | \$88.65 | \$73.46 | \$22.55 | \$36.49 |
| May 2013 | 267,117 | 164,132 | 401,510 | 1.50 | 2.95 | \$88.19 | \$73.36 | \$22.29 | \$36.27 |
| Jun 2013 | 266,521 | 159,668 | 367,206 | 1.37 | 2.83 | \$90.13 | \$75.45 | \$20.23 | \$33.77 |
| Jul 2013 | 265,629 | 164,994 | 391,534 | 1.47 | 2.96 | \$90.64 | \$76.25 | \$21.21 | \$34.14 |
| Aug 2013 | 264,947 | 164,174 | 390,689 | 1.47 | 2.91 | \$90.13 | \$75.94 | \$20.93 | \$33.77 |
| Sep 2013 | 263,037 | 163,076 | 385,555 | 1.46 | 2.86 | \$86.63 | \$73.00 | \$19.98 | \$32.22 |
| Oct 2013 | 265,526 | 181,765 | 419,345 | 1.57 | 2.86 | \$88.30 | \$74.96 | \$21.07 | \$30.78 |
| Nov 2013 | 265,687 | 166,466 | 391,772 | 1.47 | 2.87 | \$86.24 | \$72.33 | \$20.34 | \$32.46 |
| Dec 2013 | 265,605 | 166,901 | 436,547 | 1.64 | 3.10 | \$90.55 | \$76.61 | \$22.74 | \$36.19 |
| Jan 2014 | 265,466 | 158,714 | 375,257 | 1.41 | 2.85 | \$78.94 | \$53.75 | \$35.48 | \$59.34 |

***Allow Amt** is the amount of submitted charges eligible for payment for all claims. It is the amount eligible after applying pricing guidelines, but before deducting third party, co-payment, coinsurance, or deductible amounts.*

Prescription Drug Utilization *(continued)*

The following Top 25 Drug Analysis is based on Rx claims incurred January 2014.

| Prev Rank | Curr Rank | Product Name | Brand/Generic | Therapeutic Class General | Net Pay Rx | Net Pay Rx as Pct of All Drugs | Scripts Rx | Net Pay Per Day Supply Rx | Patients Rx |
|-----------|-----------|-----------------|-------------------------------|----------------------------|----------------|--------------------------------|------------|---------------------------|-------------|
| 1 | 1 | NEXIUM | Single source brand | Gastrointestinal Drugs | \$726,773.75 | 3.60% | 3,034 | \$5.72 | 3,227 |
| 2 | 2 | HUMIRA | Single source brand | Immunosuppressants | \$672,728.92 | 3.34% | 205 | \$86.20 | 201 |
| 5 | 3 | ENBREL | Single source brand | Immunosuppressants | \$535,905.40 | 2.66% | 166 | \$85.69 | 163 |
| 4 | 4 | CRESTOR | Single source brand | Cardiovascular Agents | \$517,939.94 | 2.57% | 3,613 | \$3.46 | 3,679 |
| 15 | 5 | HUMALOG | Multisource brand, no generic | Hormones & Synthetic Subst | \$395,783.96 | 1.96% | 920 | \$10.21 | 968 |
| 6 | 6 | ABILIFY | Single source brand | Central Nervous System | \$356,694.66 | 1.77% | 488 | \$18.67 | 531 |
| 7 | 7 | COPAXONE | Single source brand | Misc Therapeutic Agents | \$304,997.80 | 1.51% | 43 | \$161.37 | 43 |
| - | 8 | DULOXETINE | Single source generic | Central Nervous System | \$298,637.29 | 1.48% | 1,799 | \$4.79 | 1,792 |
| 8 | 9 | LANTUS SOLOSTAR | Single source brand | Hormones & Synthetic Subst | \$272,297.96 | 1.35% | 826 | \$8.00 | 843 |
| 9 | 10 | JANUVIA | Single source brand | Hormones & Synthetic Subst | \$236,679.07 | 1.17% | 894 | \$6.12 | 963 |
| - | 11 | SOVALDI | Single source brand | Anti-Infective Agents | \$222,463.07 | 1.10% | 8 | \$794.51 | 7 |
| 10 | 12 | ANDROGEL | Multisource brand, no generic | Hormones & Synthetic Subst | \$216,896.34 | 1.08% | 515 | \$11.74 | 545 |
| - | 13 | TECFIDERA | Single source brand | Misc Therapeutic Agents | \$209,485.92 | 1.04% | 38 | \$157.27 | 34 |
| 16 | 14 | STELARA | Single source brand | Immunosuppressants | \$204,447.67 | 1.01% | 18 | \$354.94 | 18 |
| 12 | 15 | GILENYA | Single source brand | Misc Therapeutic Agents | \$203,889.26 | 1.01% | 29 | \$161.82 | 28 |
| - | 16 | TAMIFLU | Single source brand | Anti-Infective Agents | \$176,961.54 | 0.88% | 3,263 | \$8.15 | 3,420 |
| 14 | 17 | CELEBREX | Single source brand | Central Nervous System | \$163,071.27 | 0.81% | 810 | \$4.91 | 858 |
| 24 | 18 | LEVEMIR FLEXPEN | Single source brand | Hormones & Synthetic Subst | \$150,105.38 | 0.74% | 373 | \$9.47 | 391 |
| 25 | 19 | GLEEVEC | Single source brand | Antineoplastic Agents | \$145,330.44 | 0.72% | 13 | \$242.22 | 13 |
| 19 | 20 | LYRICA | Single source brand | Central Nervous System | \$144,192.92 | 0.71% | 640 | \$6.50 | 642 |
| - | 21 | SYMBICORT | Single source brand | Hormones & Synthetic Subst | \$137,982.85 | 0.68% | 715 | \$4.62 | 824 |
| 17 | 22 | ZETIA | Multisource brand, generic | Cardiovascular Agents | \$136,683.63 | 0.68% | 960 | \$3.23 | 1,025 |
| - | 23 | LANTUS | Single source brand | Hormones & Synthetic Subst | \$125,330.87 | 0.62% | 373 | \$8.44 | 388 |
| - | 24 | ONE TOUCH ULTRA | Other/unavailable | Diagnostic Agents | \$121,282.84 | 0.60% | 1,393 | \$2.09 | 1,503 |
| 22 | 25 | REBIF | Single source brand | Misc Therapeutic Agents | \$2,134,497.14 | 0.60% | 20 | \$163.07 | 20 |

Prescription Drug Utilization *(continued)*

In summary, the top 25 drugs represent 6.73% of total scripts and 37.28% of total Rx expenditures.

| Summary | Net Pay Rx | Scripts Rx | Days Supply Rx |
|-------------------------------|--------------|------------|----------------|
| Top Drugs | \$7,520,399 | 25,242 | 879,678 |
| All Product Names | \$20,170,327 | 375,257 | 12,049,611 |
| Top Drugs as Pct of All Drugs | 37.28% | 6.73% | 7.30% |

Utilization

The top 25 clinical conditions based on incurred claims for January 2014.

| Prev Rank | Curr Rank | Clinical Condition | Net Pay Med | Net Pay IP Acute | Net Pay OP Med | Admits Per 1000 Acute | Days LOS Admit Acute | Visits Per 1000 Office Med | Visits Per 1000 ER | Patients Med | Net Pay Per Pat Med |
|-----------|-----------|--------------------------------|-------------|------------------|----------------|-----------------------|----------------------|----------------------------|--------------------|--------------|---------------------|
| 2 | 1 | Prevent/Admin Hlth Encounters | \$4,994,172 | \$23,073 | \$4,954,443 | 0.00 | 0.00 | 718.64 | 0.50 | 19,675 | \$253.83 |
| 1 | 2 | Signs/Symptoms/Oth Cond, NEC | \$3,789,131 | \$725,067 | \$2,903,538 | 1.80 | 12.58 | 474.34 | 11.04 | 15,400 | \$246.05 |
| 3 | 3 | Osteoarthritis | \$3,525,968 | \$2,419,306 | \$1,105,043 | 3.60 | 2.74 | 189.13 | 0.68 | 3,689 | \$955.81 |
| 6 | 4 | Chemotherapy Encounters | \$2,898,723 | \$492,888 | \$2,405,835 | 0.45 | 6.60 | 0.86 | 0.00 | 203 | \$14,279.42 |
| 5 | 5 | Respiratory Disord, NEC | \$2,860,195 | \$1,484,343 | \$1,373,977 | 0.63 | 4.29 | 77.38 | 11.71 | 3,155 | \$906.56 |
| 7 | 6 | Coronary Artery Disease | \$2,359,157 | \$1,472,043 | \$885,656 | 2.30 | 3.33 | 35.90 | 3.42 | 1,000 | \$2,359.16 |
| 4 | 7 | Gastroint Disord, NEC | \$2,336,573 | \$700,850 | \$1,627,224 | 1.58 | 5.37 | 129.13 | 16.94 | 3,939 | \$593.19 |
| 10 | 8 | Pregnancy w Vaginal Delivery | \$1,941,144 | \$1,936,899 | \$4,245 | 6.40 | 2.51 | 0.54 | 0.36 | 254 | \$7,642.30 |
| 13 | 9 | Newborns, w/wo Complication | \$1,761,901 | \$1,682,322 | \$79,579 | 8.78 | 3.16 | 3.78 | 0.05 | 311 | \$5,665.28 |
| 11 | 10 | Renal Function Failure | \$1,536,814 | \$273,826 | \$1,240,247 | 0.63 | 6.93 | 15.81 | 1.08 | 659 | \$2,332.04 |
| 9 | 11 | Spinal/Back Disord, Low Back | \$1,394,441 | \$382,140 | \$1,012,141 | 0.59 | 2.62 | 446.14 | 5.04 | 6,010 | \$232.02 |
| 12 | 12 | Condition Rel to Tx - Med/Surg | \$1,386,140 | \$941,253 | \$438,480 | 1.85 | 4.05 | 6.35 | 1.62 | 402 | \$3,448.11 |
| 8 | 13 | Arthropathies/Joint Disord NEC | \$1,272,787 | \$70,965 | \$1,193,819 | 0.18 | 2.00 | 395.42 | 4.23 | 6,820 | \$186.63 |
| 15 | 14 | Cancer - Breast | \$1,243,804 | \$42,238 | \$1,196,239 | 0.18 | 2.50 | 27.43 | 0.05 | 672 | \$1,850.90 |
| 18 | 15 | Cardiac Arrhythmias | \$1,224,730 | \$763,809 | \$460,558 | 0.95 | 4.05 | 35.94 | 1.85 | 1,017 | \$1,204.26 |
| - | 16 | Infections, NEC | \$1,188,995 | \$1,039,657 | \$149,330 | 0.09 | 4.50 | 77.38 | 3.69 | 2,154 | \$551.99 |
| 17 | 17 | Cholecystitis/Cholelithiasis | \$1,167,592 | \$557,933 | \$609,659 | 0.99 | 2.95 | 4.41 | 1.71 | 221 | \$5,283.22 |
| 19 | 18 | Urinary Tract Calculus | \$1,007,940 | \$61,528 | \$946,412 | 0.50 | 2.45 | 15.90 | 4.77 | 481 | \$2,095.51 |
| - | 19 | Congestive Heart Failure | \$978,824 | \$797,281 | \$181,340 | 0.00 | 0.00 | 4.23 | 1.17 | 237 | \$4,130.06 |
| - | 20 | Cardiovasc Disord, NEC | \$929,647 | \$203,828 | \$722,576 | 0.54 | 6.25 | 42.52 | 9.28 | 1,568 | \$592.89 |
| - | 21 | Cerebrovascular Disease | \$842,270 | \$599,993 | \$237,599 | 1.31 | 4.66 | 10.04 | 1.71 | 365 | \$2,307.59 |
| 22 | 22 | Infec/Inflam - Skin/Subcu Tiss | \$841,209 | \$418,464 | \$421,608 | 0.81 | 5.72 | 210.89 | 3.74 | 4,925 | \$170.80 |
| - | 23 | Cancer - Lung | \$825,329 | \$606,969 | \$209,222 | 0.32 | 13.57 | 3.56 | 0.09 | 118 | \$6,994.32 |
| 14 | 24 | Spinal/Back Disord, Ex Low | \$819,009 | \$232,445 | \$586,560 | 0.27 | 7.83 | 416.95 | 2.34 | 5,318 | \$154.01 |
| 21 | 25 | Diabetes | \$808,525 | \$196,307 | \$611,572 | 1.08 | 3.38 | 193.63 | 2.16 | 5,018 | \$161.12 |

NOTE: Medical payments represent only the payments made for the specified condition.

Utilization (continued)

In Summary, the top clinical conditions represent more than 59.69 of total paid claims for all clinical conditions.

| Summary | Net Pay Med | Net Pay IP Acute | Net Pay OP Med | Admits Per 1000 Acute | Days LOS Admit Acute | Visits Per 1000 Office Med | Visits Per 1000 ER |
|---|--------------|------------------|----------------|-----------------------|----------------------|----------------------------|--------------------|
| Top Clinical Conditions | \$43,935,021 | \$18,125,429 | \$25,556,901 | 35.81 | 4.05 | 3,536.32 | 89.23 |
| All Clinical Conditions | \$73,606,685 | \$27,413,154 | \$45,746,158 | 68.33 | 4.37 | 7,330.51 | 199.90 |
| Top Clinical Conditions as Pct of All Clinical Conditions | 59.69% | 66.12% | 55.87% | 52.41% | 92.52% | 48.24% | 4464.00 % |

Claims Lag Analysis

The following claims lag information is based on medical claims (does not include Rx) incurred January 2014.

| Plan | Number of Medical Claims | Avg Days Lag Per Claim | % Claims Paid Within 30 Days | % Claims Paid Within 60 Days | % Claims Paid Within 90 Days |
|-----------------|--------------------------|------------------------|------------------------------|------------------------------|------------------------------|
| Capitol Choice | 1,308,212 | 20 | 84.49% | 93.29% | 96.09% |
| CW Standard PPO | 574,608 | 25 | 78.55% | 90.38% | 94.62% |
| Maximum Choice | 672,059 | 21 | 84.17% | 93.18% | 95.99% |
| Optimum PPO | 6,233,862 | 21 | 83.56% | 93.34% | 96.22% |
| ~Missing | 70,512 | 28 | 75.97% | 89.16% | 93.96% |
| All Plans | 9,039,242 | 22 | 82.51% | 92.86% | 95.95% |

**Missing means the claims could not be tagged to a specific plan.*

Claims Lag Analysis *(continued)*

The following claims lag information is based on all claims (**Medical and Rx**) incurred and paid during the most recent rolling year.

| | Month Paid | | | | | |
|---------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Service Month | May-13 | Jun-13 | Jul-13 | Aug-13 | Sep-13 | Oct-13 |
| Feb 2013 | \$3,984,404.79 | \$1,987,054.84 | \$647,885.56 | \$268,687.32 | \$132,252.90 | \$376,943.02 |
| Mar 2013 | \$9,073,716.17 | \$2,535,530.70 | \$1,624,936.82 | \$705,350.13 | \$99,654.50 | \$481,775.16 |
| Apr 2013 | \$42,582,680.25 | \$6,661,399.58 | \$3,692,926.53 | \$1,531,384.85 | \$534,113.40 | \$500,705.82 |
| May 2013 | \$65,724,306.71 | \$46,061,334.59 | \$9,253,643.26 | \$2,894,596.71 | \$1,607,951.22 | \$840,803.36 |
| Jun 2013 | \$0.00 | \$59,631,810.31 | \$51,340,902.59 | \$11,977,599.99 | \$3,801,897.25 | \$1,453,341.45 |
| Jul 2013 | \$0.00 | \$0.00 | \$67,544,195.90 | \$53,369,897.36 | \$9,624,605.76 | \$3,829,006.71 |
| Aug 2013 | \$0.00 | \$0.00 | \$0.00 | \$64,692,545.46 | \$45,081,934.60 | \$10,378,822.39 |
| Sep 2013 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$51,206,399.25 | \$54,185,907.47 |
| Oct 2013 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$72,506,843.20 |
| Nov 2013 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Dec 2013 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Jan 2014 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |

| | Month Paid | | | | | |
|---------------|-----------------|-----------------|-----------------|-----------------|-----------------|----------------|
| Service Month | Nov-13 | Dec-13 | Jan-14 | Feb-14 | Mar-14 | Apr-14 |
| Feb 2013 | (\$27,636.81) | \$51,011.38 | \$138,851.41 | (\$76,945.10) | (\$22,941.95) | (\$349,332.09) |
| Mar 2013 | (\$30,495.14) | \$214,198.57 | \$103,652.89 | \$2,195.82 | \$16,065.31 | (\$38,449.05) |
| Apr 2013 | \$177,814.27 | \$148,214.74 | \$94,657.18 | (\$87,201.97) | \$31,875.84 | \$92,088.34 |
| May 2013 | \$362,304.64 | \$181,056.92 | \$603,893.68 | (\$83,425.30) | \$139,886.32 | \$97,367.31 |
| Jun 2013 | \$1,104,601.92 | \$442,116.77 | \$251,015.68 | \$171,729.04 | \$125,552.99 | (\$2,406.96) |
| Jul 2013 | \$1,377,995.04 | \$595,974.21 | \$754,581.44 | \$142,619.30 | (\$67,030.91) | \$142,180.39 |
| Aug 2013 | \$2,501,849.41 | \$1,355,141.75 | \$1,482,333.01 | \$127,578.02 | \$213,104.37 | \$60,049.07 |
| Sep 2013 | \$9,376,751.71 | \$3,078,946.78 | \$1,984,229.92 | \$1,866,979.33 | \$545,858.93 | \$89,972.14 |
| Oct 2013 | \$48,269,775.72 | \$11,680,370.65 | \$5,986,683.78 | \$2,841,539.18 | \$802,145.84 | \$326,727.73 |
| Nov 2013 | \$65,527,997.27 | \$44,937,083.45 | \$14,049,226.94 | \$2,907,409.74 | \$1,919,143.02 | \$941,757.47 |
| Dec 2013 | \$0.00 | \$76,282,722.74 | \$54,745,919.58 | \$8,015,968.78 | \$4,189,231.06 | \$2,253,529.31 |
| Jan 2014 | \$0.00 | \$0.00 | \$42,128,314.79 | \$34,796,820.20 | \$11,663,326.40 | \$5,188,550.40 |

Claims Distribution Based on Age/Gender

The following is based on claims incurred January 2014.

| | Female | | | Male | | |
|------------|-------------|--------------------|--------------------|-------------|--------------------|--------------------|
| Age Group | Members Avg | Net Pay Med and Rx | Net Pay Per Member | Members Avg | Net Pay Med and Rx | Net Pay Per Member |
| Ages < 1 | 1,256 | \$1,192,669.08 | \$949.58 | 1,306 | \$2,312,787.09 | \$1,770.89 |
| Ages 1-4 | 5,469 | \$510,805.71 | \$93.40 | 5,779 | \$641,025.91 | \$110.92 |
| Ages 5-9 | 7,849 | \$741,435.96 | \$94.46 | 8,078 | \$643,469.15 | \$79.66 |
| Ages 10-14 | 8,626 | \$663,487.55 | \$76.92 | 9,090 | \$861,522.43 | \$94.78 |
| Ages 15-17 | 5,578 | \$753,408.27 | \$135.07 | 5,903 | \$804,110.70 | \$136.22 |
| Ages 18-19 | 3,781 | \$531,598.19 | \$140.60 | 3,879 | \$415,961.06 | \$107.23 |
| Ages 20-24 | 9,235 | \$1,820,382.28 | \$197.12 | 8,490 | \$1,113,782.29 | \$131.19 |
| Ages 25-29 | 8,489 | \$2,345,865.03 | \$276.34 | 4,676 | \$818,243.05 | \$174.99 |
| Ages 30-34 | 10,199 | \$2,743,706.85 | \$269.02 | 5,513 | \$1,266,753.08 | \$229.78 |
| Ages 35-39 | 10,894 | \$2,882,851.10 | \$264.63 | 6,102 | \$1,138,999.22 | \$186.66 |
| Ages 40-44 | 13,165 | \$4,051,733.60 | \$307.77 | 7,351 | \$2,757,196.45 | \$375.08 |
| Ages 45-49 | 13,871 | \$5,086,865.59 | \$366.73 | 8,223 | \$3,372,028.16 | \$410.07 |
| Ages 50-54 | 16,199 | \$6,704,814.65 | \$413.90 | 9,482 | \$4,545,655.34 | \$479.40 |
| Ages 55-59 | 19,154 | \$10,456,277.65 | \$545.91 | 11,307 | \$7,021,508.81 | \$620.99 |
| Ages 60-64 | 20,264 | \$12,139,018.10 | \$599.04 | 12,740 | \$9,348,979.86 | \$733.83 |
| Ages 65-74 | 2,429 | \$1,583,220.34 | \$651.80 | 1,739 | \$1,697,244.07 | \$975.99 |
| Ages 75-84 | 132 | \$230,548.84 | \$1,746.58 | 152 | \$116,328.20 | \$765.32 |
| Ages 85+ | 12 | \$88,693.58 | \$7,391.13 | 6 | \$51,375.98 | \$8,562.66 |

Allowed Amount Distribution

The following table shows the distribution of members for whom the amounts of charges within the specified ranges were allowed. The data appears for the years of 2006—2013 and year to date for 2014.

| Allowed Amount | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|-----------------------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| less than 0.00 | 9 | 16 | 27 | 22 | 42 | 63 | 62 | 5,706 | 0 |
| \$0.00 - \$499.99 | 54,058 | 53,891 | 53,571 | 53,160 | 57,392 | 58,044 | 60,330 | 62,079 | 122,581 |
| \$500.00 - \$999.99 | 32,931 | 33,830 | 34,248 | 34,982 | 34,386 | 36,012 | 36,437 | 37,419 | 16,953 |
| \$1,000.00 - \$1,999.99 | 40,360 | 42,464 | 42,360 | 43,452 | 42,988 | 44,147 | 44,297 | 43,945 | 9,009 |
| \$2,000.00 - \$4,999.99 | 54,430 | 56,819 | 58,612 | 59,566 | 60,341 | 60,339 | 60,134 | 58,030 | 5,852 |
| \$5,000.00 - \$9,999.99 | 30,373 | 32,271 | 34,487 | 35,696 | 36,028 | 36,375 | 36,005 | 34,664 | 2,243 |
| \$10,000.00 - \$14,999.99 | 10,608 | 11,983 | 13,272 | 14,198 | 14,874 | 15,009 | 15,277 | 14,888 | 829 |
| \$15,000.00 - \$19,999.99 | 4,726 | 5,470 | 6,332 | 6,849 | 7,184 | 7,339 | 7,658 | 7,636 | 440 |
| \$20,000.00 - \$29,999.99 | 4,284 | 5,050 | 5,930 | 6,475 | 6,960 | 7,131 | 7,106 | 7,357 | 354 |
| \$30,000.00 - \$49,999.99 | 2,844 | 3,268 | 3,820 | 4,451 | 4,935 | 5,155 | 5,313 | 5,431 | 263 |
| \$50,000.00 - \$74,999.99 | 1,090 | 1,306 | 1,492 | 1,773 | 2,022 | 2,256 | 2,397 | 2,524 | 105 |
| \$75,000.00 - \$99,999.99 | 465 | 536 | 589 | 688 | 829 | 839 | 912 | 1,012 | 42 |
| \$100,000.00 - \$149,999.99 | 354 | 406 | 499 | 545 | 651 | 707 | 786 | 806 | 20 |
| \$150,000.00 - \$199,999.99 | 117 | 160 | 194 | 203 | 225 | 274 | 301 | 356 | 11 |
| \$200,000.00 - \$249,999.99 | 60 | 81 | 83 | 116 | 117 | 118 | 136 | 142 | 5 |
| over \$249,999.99 | 99 | 127 | 152 | 166 | 196 | 259 | 268 | 290 | 7 |
| Total | 236,808 | 247,678 | 255,668 | 262,342 | 269,170 | 274,067 | 277,419 | 282,285 | 158,714 |

Summary of Enrollment and Claims

The following provides a summary of members, incurred medical claims, and incurred Rx claims for the most recent rolling year.

| Time Period | Members | Net Pay Med and Rx | Net Pay Med | Net Pay Rx | Claims Paid | Claims Paid Med | Scripts Rx |
|-------------|---------|--------------------|------------------|-----------------|-------------|-----------------|------------|
| Feb 2013 | 267,120 | \$116,554,349.48 | \$89,302,244.96 | \$27,252,104.52 | 714,547 | 313,421 | 386,382 |
| Mar 2013 | 267,302 | \$122,668,713.16 | \$94,077,321.09 | \$28,591,392.07 | 748,188 | 321,254 | 411,238 |
| Apr 2013 | 267,292 | \$124,078,097.59 | \$94,937,447.74 | \$29,140,649.85 | 736,084 | 323,173 | 396,699 |
| May 2013 | 267,117 | \$127,683,719.42 | \$98,229,181.54 | \$29,454,537.88 | 733,047 | 315,267 | 401,510 |
| Jun 2013 | 266,521 | \$130,298,161.03 | \$102,593,321.66 | \$27,704,839.37 | 687,105 | 303,350 | 367,206 |
| Jul 2013 | 265,629 | \$137,314,025.20 | \$107,457,665.97 | \$29,856,359.23 | 748,651 | 339,544 | 391,534 |
| Aug 2013 | 264,947 | \$125,893,358.08 | \$96,226,296.56 | \$29,667,061.52 | 724,359 | 316,519 | 390,689 |
| Oct 2013 | 265,526 | \$142,414,086.10 | \$110,980,228.51 | \$31,433,857.59 | 796,655 | 359,258 | 419,345 |
| Sep 2013 | 263,037 | \$122,335,045.53 | \$94,189,369.37 | \$28,145,676.16 | 704,526 | 302,352 | 385,555 |
| Nov 2013 | 265,687 | \$130,287,689.45 | \$101,952,112.22 | \$28,335,577.23 | 721,304 | 312,908 | 391,772 |
| Dec 2013 | 265,605 | \$145,487,371.47 | \$112,044,396.51 | \$33,442,974.96 | 777,867 | 323,861 | 436,547 |
| Jan 2014 | 265,466 | \$93,777,011.79 | \$73,606,685.26 | \$20,170,326.53 | 681,518 | 284,857 | 375,257 |

NOTE: Includes run out data from all Carriers

The following illustrates the change in incurred claims (includes medical and Rx) by rolling year.

| Time Period | Members | Total Medical and Rx Claims | Total Medical Claims | Total Rx Claims |
|---------------------|---------|-----------------------------|----------------------|-----------------|
| Feb 2012 - Jan 2013 | 270,165 | \$1,544,374,297 | \$1,189,534,971 | \$354,839,326 |
| Feb 2013 - Jan 2014 | 266,898 | \$1,523,602,196 | \$1,180,294,365 | \$343,307,830 |
| % Change (Roll Yrs) | -1.20% | -1.30% | -0.80% | -3.20% |