TOP FIVE HEALTH CONDITIONS FOR HIGH COST CLAIMANTS (> $75K)

Current Period

Primary Health Condition Category	Number of High Cost Claimants	Percent of Total Claimants	Total Paid Medical	HCC Percent of Total Paid for Health Condition Category	Percent Paid in Recent 30 Days	Percent of Subscribers Among HCCs	Percent of HCCs Paid for Subscribers
Neoplasms	30	0.4%	$2,283,223	6.0%	0.1%	21.4%	10.5%
Circulatory System	59	0.7%	$2,048,398	5.4%	0.2%	42.9%	11.9%
Musc Sys/Connect Tis	48	0.6%	$1,364,068	3.6%	0.0%	31.4%	4.6%
Health Status	59	0.7%	$989,816	2.6%	0.0%	41.4%	3.3%
Respiratory System	37	0.4%	$970,006	2.5%	0.0%	22.9%	6.2%
Subtotal of Top Five Health Condition Categories	**70**	**0.8%**	**$7,655,511**				**36.5%**
All Other HCC	**0**	**0.0%**	**$3,603,715**				**13.5%**
Total of All HCC	**70**	**0.8%**	**$11,259,225**				
All Other Claimants	**8,187**	**99.2%**	**$26,928,039**				
Grand Total	**8,257**	**100.0%**	**$38,187,264**				
HCC Paid - Percent of All Employer Paid				**29.5%**			

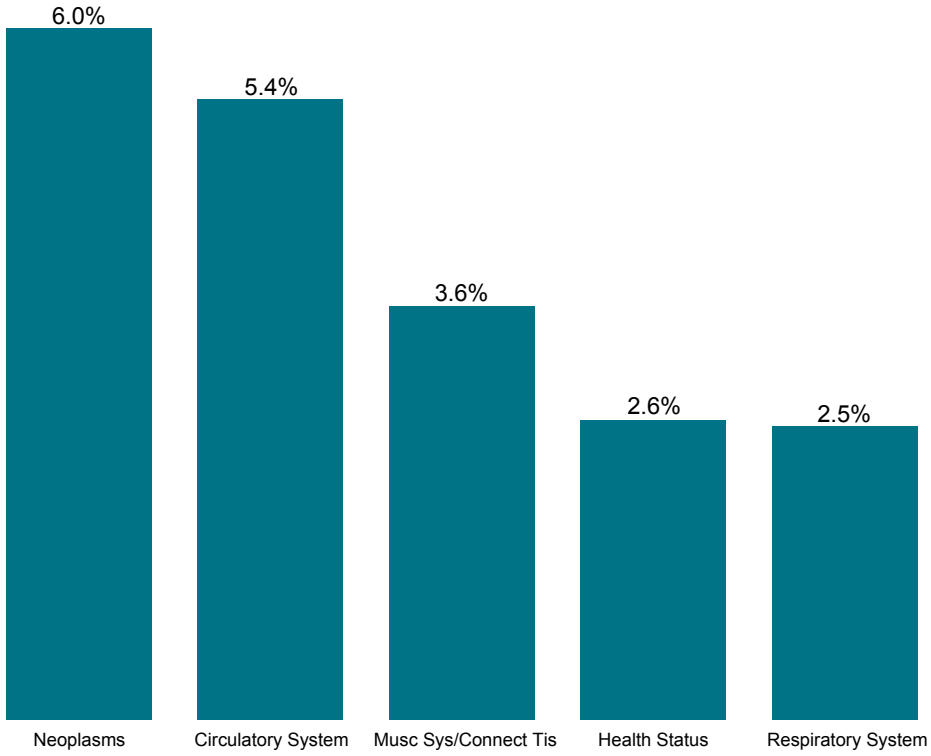
Prior Period

Primary Health Condition Category	Number of High Cost Claimants	Percent of Total Claimants	Total Paid Medical	HCC Percent of Total Paid for Health Condition Category	Percent Paid in Recent 30 Days	Percent of Subscribers Among HCCs	Percent of HCCs Paid for Subscribers
Circulatory System	49	0.6%	$2,780,015	7.7%	0.2%	47.5%	21.1%
Neoplasms	27	0.3%	$1,743,280	4.8%		27.1%	14.1%
Injury & Poisoning	40	0.5%	$1,048,847	2.9%	0.1%	37.3%	4.9%
Musc Sys/Connect Tis	38	0.5%	$769,847	2.1%	0.0%	32.2%	2.4%
Endo/Nutr/Mtblc/Imm	35	0.4%	$569,964	1.6%		33.9%	0.8%
Subtotal of Top Five Health Condition Categories	**59**	**0.7%**	**$6,911,953**				**43.3%**
All Other HCC	**0**	**0.0%**	**$2,715,661**				**11.4%**
Total of All HCC	**59**	**0.7%**	**$9,627,615**				
All Other Claimants	**8,355**	**99.3%**	**$26,633,391**				
Grand Total	**8,414**	**100.0%**	**$36,261,005**				
HCC Paid - Percent of All Employer Paid				**26.6%**			

TOP FIVE HEALTH CONDITIONS FOR HIGH COST CLAIMANTS (> $75K)

Current Period

Top Health Condition Categories for HCC's and Percent Share of Total Paid Category



Fast Facts

1. The percentage of claimants with claims paid greater than $75,000 increased from 0.7% to 0.8% driving 29.5% of the total claims paid, and is a 20.9% increase from the prior period paid claims.
2. Of the High Cost Claimants, 50.0% were Subscribers, with total claims paid $5,625,139 representing 50.0% of total paid for High Cost Claimants and 29.5% of total paid under the medical plan.

MEDICAL PAID AMOUNTS AND PLAN SAVINGS

Product: All Medical Including Primary Payor and Third Party/Medicare Claims

							Reductions From Allowed Amount					
Setting	Network Status	Charge Submitted	Non Covered Amount	Covered Expense Amount	Discount Amount	Allowed Amount	Deductible	Coinsurance/ Copayment	Member Sanctions Penalty Amount	Third Party Savings/ Medicare	Other	Paid Amount
Inpatient Facility	In-Network	$28,465,464	$296,294	$28,169,170	$14,416,513	$13,752,657	$0	$0	$16,460	$466,094	($134,535)	$13,404,637
	Out-of-Network	$222,506	$32,767	$189,739	$0	$189,739	$0	$0	$0	$26,629	$92,081	$71,029
Total Inpatient Facility		**$28,687,970**	**$329,061**	**$28,358,909**	**$14,416,513**	**$13,942,396**	**$0**	**$0**	**$16,460**	**$492,723**	**($42,454)**	**$13,475,666**
Outpatient Facility	In-Network	$21,931,618	$2,528,776	$19,402,842	$10,165,585	$9,237,257	$118	$128,069	$14,868	$291,986	$12,512	$8,789,703
	Out-of-Network	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
Total Outpatient Facility		**$21,931,618**	**$2,528,776**	**$19,402,842**	**$10,165,585**	**$9,237,257**	**$118**	**$128,069**	**$14,868**	**$291,986**	**$12,512**	**$8,789,703**
Professional	In-Network	$43,037,008	$2,047,003	$40,990,005	$25,989,696	$15,000,310	$0	$903,003	$53,630	$165,817	$3,665	$13,874,194
	Out-of-Network	$3,901,568	$1,078,823	$2,822,745	$662,583	$2,160,162	$0	$4,426	$767	$84,858	$22,410	$2,047,701
Total Professional		**$46,938,576**	**$3,125,826**	**$43,812,751**	**$26,652,279**	**$17,160,472**	**$0**	**$907,429**	**$54,396**	**$250,676**	**$26,076**	**$15,921,895**

							Reductions From Allowed Amount					
Network Status		Charge Submitted	Non Covered Amount	Covered Expense Amount	Discount Amount	Allowed Amount	Deductible	Coinsurance/ Copayment	Member Sanctions Penalty Amount	Third Party Savings/ Medicare	Other	Paid Amount
Total In-Network		$93,434,090	$4,872,074	$88,562,016	$50,571,794	$37,990,223	$118	$1,031,072	$84,958	$923,898	($118,357)	$36,068,534
	Percent of Total	95.8%	81.4%	96.7%	98.7%	94.2%	100.0%	99.6%	99.1%	89.2%	3,061.5%	94.5%
Total Out-of-Network		$4,124,074	$1,111,590	$3,012,485	$662,583	$2,349,901	$0	$4,426	$767	$111,488	$114,492	$2,118,730
	Percent of Total	4.2%	18.6%	3.3%	1.3%	5.8%	0.0%	0.4%	0.9%	10.8%	-2,961.5%	5.5%
Total Medical		**$97,558,164**	**$5,983,663**	**$91,574,501**	**$51,234,377**	**$40,340,124**	**$118**	**$1,035,498**	**$85,724**	**$1,035,386**	**($3,866)**	**$38,187,264**

Discount Calculation: All Medical Where Employer Plans Are Primary

	Inpatient Facility			Outpatient Facility			Professional			Total Medical		
Network Status	Covered Expense Amount	Discount Amount	Discount Percent	Covered Expense Amount	Discount Amount	Discount Percent	Covered Expense Amount	Discount Amount	Discount Percent	Covered Expense Amount	Discount Amount	Discount Percent
In-Network	$27,387,890	$14,328,190	52.3%	$18,895,914	$10,100,414	53.5%	$40,442,832	$25,642,305	63.4%	$86,726,636	$50,070,909	57.7%
Out-of-Network	$44,380	$0	0.0%	$0	$0		$2,596,811	$591,569	22.8%	$2,641,192	$591,569	22.4%
Total Where WellPoint is Primary	**$27,432,270**	**$14,328,190**	**52.2%**	**$18,895,914**	**$10,100,414**	**53.5%**	**$43,039,643**	**$26,233,874**	**61.0%**	**$89,367,828**	**$50,662,478**	**56.7%**

The claims savings data noted in this report is based on a uniform method of determining network effectiveness, and may vary from group-specific discount or savings calculations.

To be consistent with all other CII reports, it is essential to include all medical claims, including third-party and Medicare claims, in the upper tables. However, to ensure the validity of the discount percentage calculation, only claims where the employer plan is primary are included in the Discount Calculation table.

TOP 25 EPISODE GROUPS

	Group						Benchmark		
Episode Summary Group	Paid Amount	Episode Count	Unique Claimants	Episodes Per 1000	Percent of Total Episodes	Episodes Per 1000 Trend	Episodes Per 1000	Percent of Total Episodes	Episodes Per 1000 Trend
Prevent/Admin Hlth Encounters	$1,511,828	4,647	4,132	463.17	15.9%	2.6%	444.05	15.4%	2.3%
Osteoarthritis	$1,161,215	363	310	36.18	1.2%	-6.7%	42.78	1.5%	-15.0%
Coronary Artery Disease	$1,038,742	223	183	22.23	0.8%	-8.5%	21.47	0.7%	-20.3%
Condition Rel to Tx - Med/Surg	$933,978	88	80	8.77	0.3%	11.9%	9.59	0.3%	-3.1%
Cerebrovascular Disease	$790,591	115	83	11.46	0.4%	-0.4%	9.73	0.3%	-14.5%
Newborns, w/wo Complication	$776,887	104	85	10.37	0.4%	35.6%	10.18	0.4%	-1.9%
Cancer - Oral Cavity/Mandible	$723,837	3	3	0.30	0.0%	-55.8%	0.56	0.0%	-11.2%
Cancer - Breast	$659,907	53	47	5.28	0.2%	-10.5%	6.91	0.2%	-11.5%
Gastroint Disord, NEC	$603,299	510	468	50.83	1.7%	-1.6%	50.58	1.8%	-2.4%
Cardiomyopathy	$595,373	37	34	3.69	0.1%	-13.4%	2.81	0.1%	-15.4%
Infec/Inflam - Skin/Subcu Tiss	$590,331	1,838	1,375	183.20	6.3%	1.5%	160.84	5.6%	-2.1%
Spinal/Back Disord, Low Back	$579,435	609	487	60.70	2.1%	-2.0%	86.76	3.0%	-1.9%
Arthropathies/Joint Disord NEC	$576,421	955	825	95.19	3.3%	-0.8%	97.17	3.4%	-0.4%
Pneumonia, Bacterial	$572,651	87	85	8.67	0.3%	-14.6%	11.09	0.4%	-9.8%
Pregnancy w Cesarean Section	$561,213	29	29	2.89	0.1%	24.5%	2.54	0.1%	-23.3%
Diabetes	$546,771	475	400	47.34	1.6%	-12.0%	43.68	1.5%	-16.1%
Rheumatic Fever/Valvular Dis	$529,423	59	55	5.88	0.2%	-9.3%	5.82	0.2%	-16.7%
Infections - ENT Ex Otitis Med	$501,779	2,234	1,769	222.67	7.6%	1.5%	206.87	7.2%	0.5%
Pregnancy w Vaginal Delivery	$479,373	32	32	3.19	0.1%	-23.3%	5.30	0.2%	-17.9%
Hernia, External	$473,612	62	59	6.18	0.2%	14.1%	5.67	0.2%	-5.1%
Overweight/Obesity	$403,519	164	150	16.35	0.6%	10.4%	8.95	0.3%	7.8%
Cardiovasc Disord, NEC	$387,102	240	221	23.92	0.8%	-2.7%	17.36	0.6%	-0.7%
Musculosk Disord, Congenital	$381,957	62	54	6.18	0.2%	-6.1%	4.64	0.2%	-2.4%
Cholecystitis/Cholelithiasis	$378,973	37	37	3.69	0.1%	19.1%	4.04	0.1%	-7.7%

TOP 25 EPISODE GROUPS

	Group						Benchmark		
Episode Summary Group	Paid Amount	Episode Count	Unique Claimants	Episodes Per 1000	Percent of Total Episodes	Episodes Per 1000 Trend	Episodes Per 1000	Percent of Total Episodes	Episodes Per 1000 Trend
Gastritis/Gastroenteritis	$369,149	279	256	27.81	1.0%	-10.2%	20.42	0.7%	-1.8%
Subtotal of Top 25 Episodes	**$16,127,365**	**13,305**		**1,326.12**	**45.4%**	**0.2%**	**1,279.82**	**44.4%**	**-2.0%**
All Other Episodes	**$13,886,943**	**15,972**		**1,591.95**	**54.6%**	**-4.4%**	**1,599.90**	**55.6%**	**-4.1%**
Total	**$30,014,308**	**29,277**		**2,918.07**	**100.0%**	**-2.4%**	**2,879.72**	**100.0%**	**-3.1%**

Fast Facts

1. The leading episode family based upon paid amount is **Prevent/Admin Hlth Encounters**.
2. The top three Episodes/1000 are **Prevent/Admin Hlth Encounters**; **Infections - ENT Ex Otitis Med** and **Infec/Inflam - Skin/Subcu Tiss**.
3. In comparison, the top 3 Episodes/1000 for the Benchmark are **Prevent/Admin Hlth Encounters**; **Infections - ENT Ex Otitis Med** and **Infec/Inflam - Skin/Subcu Tiss**.

Episode: all services related to the condition for a period of time.

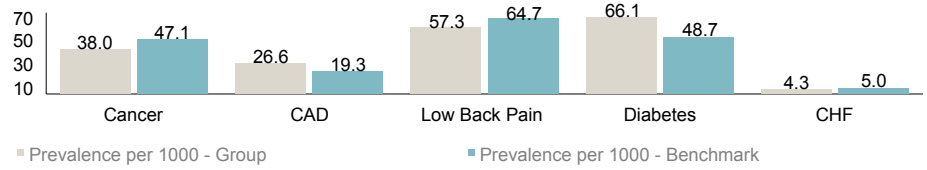
LOCAL 1500 WELFARE FUND-EPO

Current Incurred Period: Apr 2012 - Mar 2013 Paid thru: Jun 2013
Prior Incurred Period: Apr 2011 - Mar 2012 Paid thru: Jun 2013

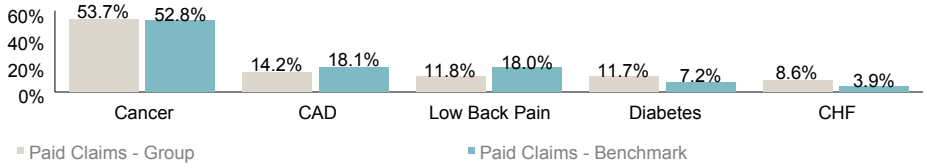
CLINICAL DASHBOARD (INCURRED MEDICAL CLAIMS)

Top Five Chronic Conditions Compared to Benchmark

Prevalence per 1000 for Chronic Conditions

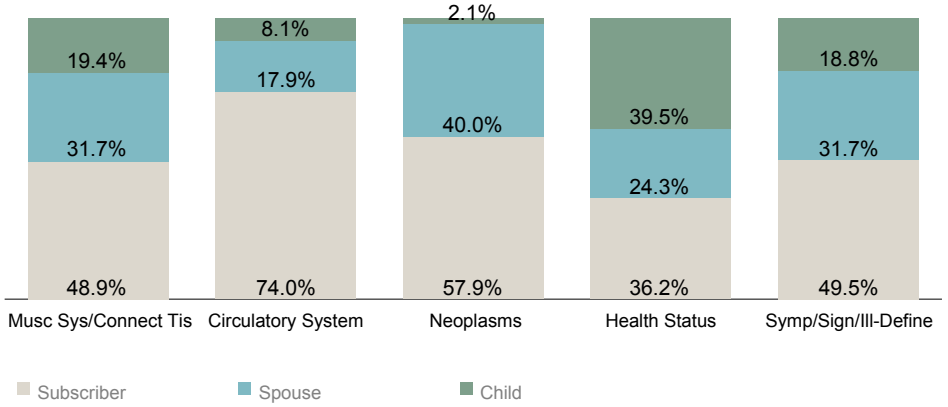


Percent of Claims Paid for Members with Chronic Conditions



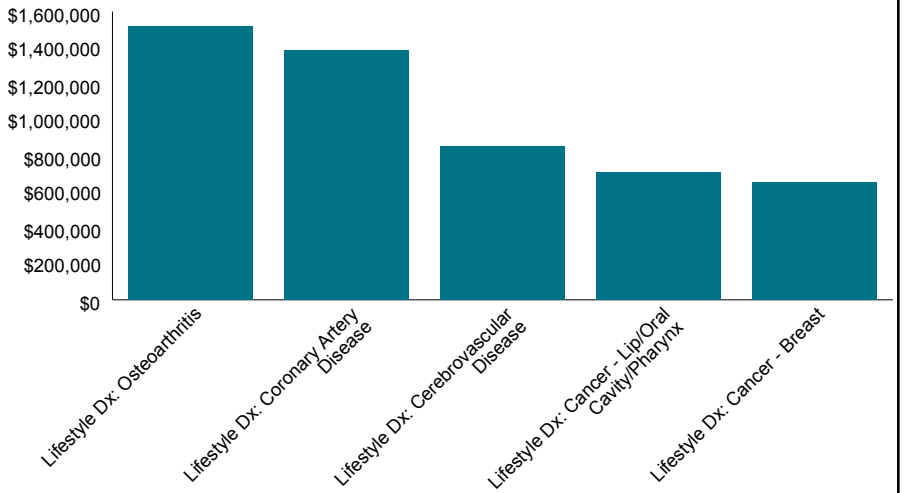
Top Five Health Conditions by Claims Paid and Relationship

Top Health Conditions by Paid Amount and Relationship



Top Five Lifestyle Related Conditions Based on Paid Amount

Lifestyle Paid Claims



Health Risk Index

The Risk Index is based on incurred and paid claims

	Current	Prior	Percent Change
Group	1.00	0.98	2.4%
Benchmark	1.00	1.00	0.0%
Percent Variance from Benchmark	0.2%	-2.1%	

The WellPoint Health Risk Index is a diagnostic and age/sex adjusted projection of the population's likely level of risk for the period indicated. The Benchmark is presented for comparison. A higher score indicates a higher level of utilization and a higher level of risk.

ENROLLMENT AND DEMOGRAPHICS

Contracts by Month

	Medical															Pharmacy
Contract Type	Jul 2012	Aug 2012	Sep 2012	Oct 2012	Nov 2012	Dec 2012	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	Jun 2013	Average Current	Average Prior	Trend	Average Current Contracts*
Subscriber	1,610	1,609	1,600	1,585	1,583	1,601	1,582	1,597	1,599	1,589	1,594	42	1,466	1,680	-12.7%	
Family	2,719	2,719	2,700	2,682	2,678	2,680	2,633	2,593	2,581	2,572	2,560	21	2,428	2,760	-12.0%	
Total Contracts	4,329	4,328	4,300	4,267	4,261	4,281	4,215	4,190	4,180	4,161	4,154	63	3,894	4,440	-12.3%	

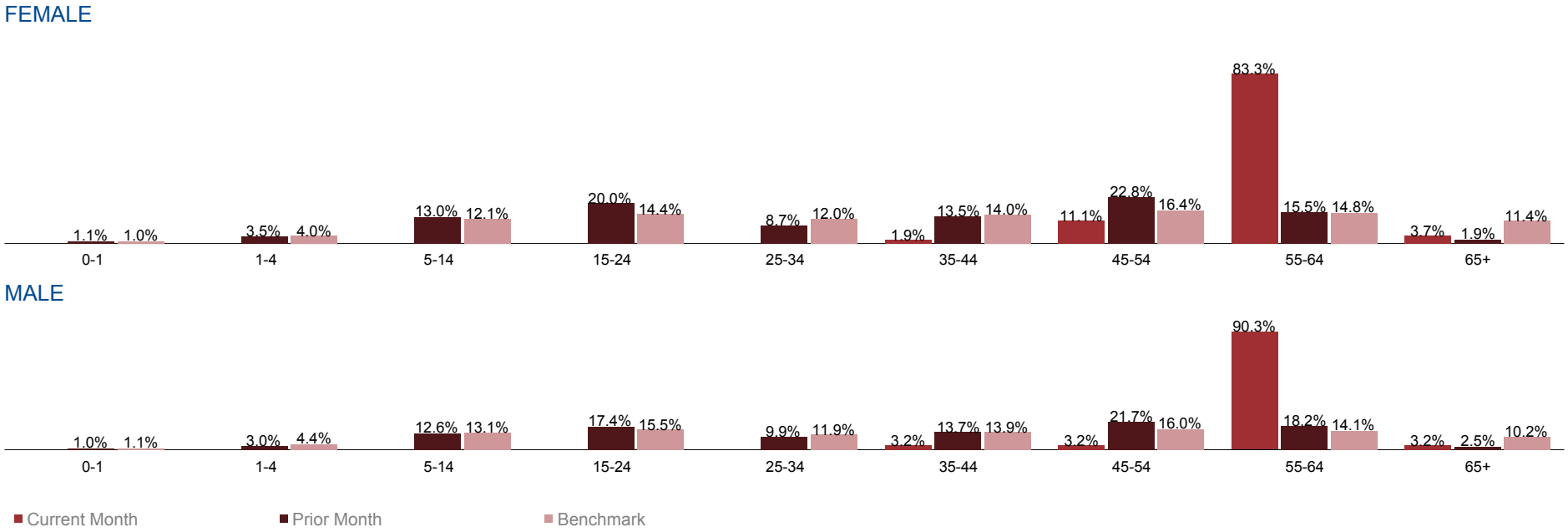
Current Member Months

	Medical																Pharmacy
Contract Type	Jul 2012	Aug 2012	Sep 2012	Oct 2012	Nov 2012	Dec 2012	Jan 2013	Feb 2013	Mar 2013	Apr 2013	May 2013	Jun 2013	Average Current	Average Prior	Trend	Member Months	Current Member Months*
Subscriber	1,633	1,632	1,619	1,604	1,602	1,620	1,600	1,618	1,620	1,610	1,615	43	1,485	1,700	-12.7%	17,816	
Family	8,492	8,503	8,457	8,388	8,384	8,394	8,268	8,173	8,132	8,111	8,044	42	7,616	8,591	-11.4%	91,388	
Total Members	10,125	10,135	10,076	9,992	9,986	10,014	9,868	9,791	9,752	9,721	9,659	85	9,100	10,291	-11.6%	109,204	
Average Members per Contract	2.34	2.34	2.34	2.34	2.34	2.34	2.34	2.34	2.33	2.34	2.33	1.35	2.34	2.32	0.8%		
Benchmark Avg Members per Contract													2.01	1.96	2.6%		

* Results are not shown because the volume of data was not sufficient to ensure reliable results.

ENROLLMENT AND DEMOGRAPHICS

Membership Distribution Compared to Benchmark



Gender, Average Age and Member Count

	Average Age			Percent of Members	
Gender	Subscriber	Member	Member Count	Group	Benchmark
Female	48	35	4,263	46.8%	50.9%
Male	47	36	4,837	53.2%	49.1%
Unassigned			1	0.0%	0.0%
All Genders	**47**	**36**	**9,100**	**100.0%**	**100.0%**

Fast Facts

1. The average number of contracts decreased by **12.3%** from the prior period.
2. The average age of the subscriber is **47.1**, representing a **1.2%** increase when compared to the prior period's average age of **46.5** and is **3.2%** lower than the Benchmark of **48.6**.
3. The average age of a member is **36**, representing a **0.8%** increase when compared to the prior period's average age of **35.2** and is **6.3%** lower than the Benchmark average age of **37.9**.

LOCAL 1500 WELFARE FUND-EPO

Current Period (CP): Jul 2012 - Jun 2013
Prior Period (PP): Jul 2011 - Jun 2012

FINANCIAL AND UTILIZATION DASHBOARD (PAID CLAIMS)

Medical Paid Amount Summary

	Current	Prior	Trend	Prior Trend
Medical				
Paid Amount	$38,187,264	$36,261,005		
Paid PMPM	$349.69	$293.64	19.1%	11.0%

Results are not shown because the current period average pharmacy membership is 0, which is less than the threshold of 30.

High Cost Claimants with Paid Amounts > $75,000

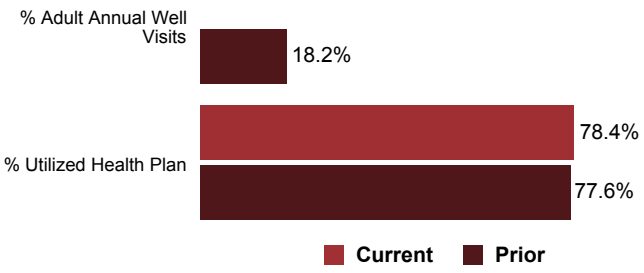
High Cost Claimant (HCC) Summary	Current	Prior	Trend	Benchmark	Percent Paid In Network
Total Paid Amount	$38,187,264	$36,261,005			94.5%
Total HCC Paid Amount	$11,259,225	$9,627,615			94.5%
Total HCC Paid Amount w/o Rx	$11,259,225	$9,627,615			94.5%
HCC Paid Amount as % of Total Paid Amount	29.5%	26.6%	11.0%	25.1%	
Number of HCC Members > $75K	70	59			
HCC Members as Percent of Total Members	0.7%	0.5%	22.2%	0.4%	

High Cost Claimant (HCC) Detail	Current	Prior	Trend	Benchmark
Medical PMPM - HCC	$103.10	$77.96	32.2%	$64.43
Medical PEPM - HCC	$240.95	$180.72	33.3%	$129.78
Medical PMPM - Non-HCC	$246.58	$215.68	14.3%	$177.58
Medical PEPM - Non-HCC	$576.26	$499.92	15.3%	$357.68

Note: High Cost Claimants are defined as those claimants with more than $75,000 in paid amount during the report period.
Results are not shown because the current period average pharmacy membership is 0, which is less than the threshold of 30.

Benefit Utilization Indicators

Key Indicators

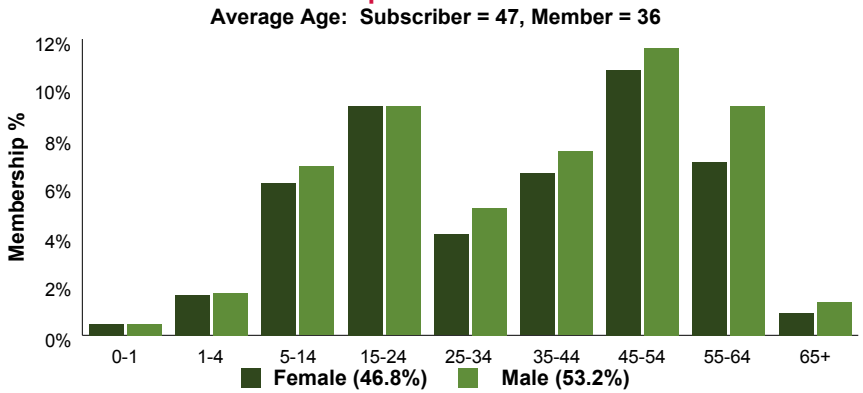


Pharmacy Highlights

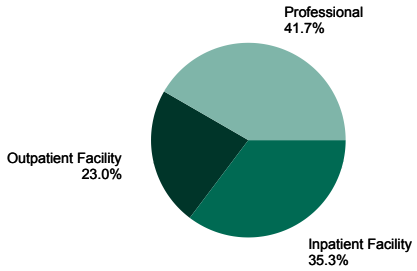
Results are not shown because the current period average pharmacy membership is 0, which is less than the threshold of 30.

FINANCIAL AND UTILIZATION DASHBOARD (PAID CLAIMS)

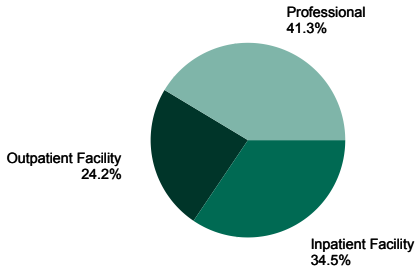
Medical Membership Overview



Paid Amount By Setting



Percent of Paid Amount - Current

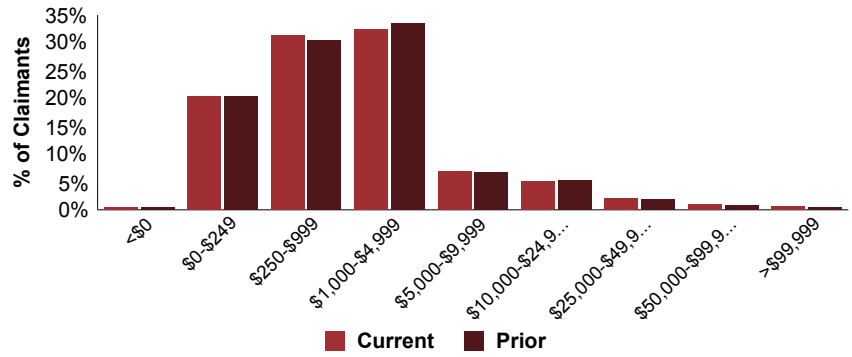


Percent of Paid Amount - Prior

Average Medical Paid Per Claimant	Current	Prior
Female	$4,729	$4,056
Male	$4,521	$4,567

Period	Med and Rx Subscribers	Contract Size	Med and Rx Members	Member Trend
Current	3,894	2.34	9,100	-11.6%
Prior	4,440	2.32	10,291	-1.2%

Paid Claims Distribution



Based on medical and pharmacy where applicable.

Utilization Breakdown

	Group			Benchmark		
Utilization	**Current**	**Prior**	**Trend**	**Current**	**Prior**	**Trend**
Inpatient Facility Acute Admits per 1000	77.5	68.2	13.6%	68.6	73.0	-6.1%
Inpatient Facility Acute Days per 1000	374.6	335.2	11.8%	309.4	330.0	-6.2%
Inpatient Facility Acute Average LOS	4.84	4.91	-1.6%	4.51	4.52	-0.2%
Outpatient Facility Visits per 1000	821.9	771.6	6.5%	1,125.3	1,202.5	-6.4%
Professional Services per 1000	24,171.9	22,642.9	6.8%	17,923.6	18,606.2	-3.7%
Average Paid Amount						
Inpatient Facility Acute Admit	$19,171	$17,171	11.6%	$13,036		
Outpatient Facility Visit	$1,175	$1,104	6.5%	$829		
Professional Service	$72	$64	12.6%	$58		

MEDICAL CHARGES AND PAID AMOUNTS

Network Experience by Setting

Network Status	Charge Submitted	Non Covered Amount	Discount Amount	Member Out of Pocket	Member Sanctions Penalty Amount	Third Party Savings / Medicare	Other	Paid Amount
In-Network	$93,434,090	$4,872,074	$50,571,794	$1,031,190	$84,958	$923,898	($118,357)	$36,068,534
Out-of-Network	$4,124,074	$1,111,590	$662,583	$4,426	$767	$111,488	$114,492	$2,118,730
Total	**$97,558,164**	**$5,983,663**	**$51,234,377**	**$1,035,616**	**$85,724**	**$1,035,386**	**($3,866)**	**$38,187,264**

In and Out of Network Comparison

	Current	Prior	Trend	Benchmark	Variance
Discount Percent	56.7%	57.7%	-1.7%	54.0%	2.7%
Percent Paid In-Network	94.5%	96.3%	-2.0%	94.2%	0.3%

Fast Facts

1. The percent of Discount Amount is 56.7%. This represents a decrease of 1.7% from the prior period.
2. The percentage of benefits paid in-network is 94.5%. This is a decrease over the prior period's percentage of 96.3%.

The claims savings data noted in this report is based on a uniform method of determining network effectiveness, and may vary from group-specific discount or savings calculations.

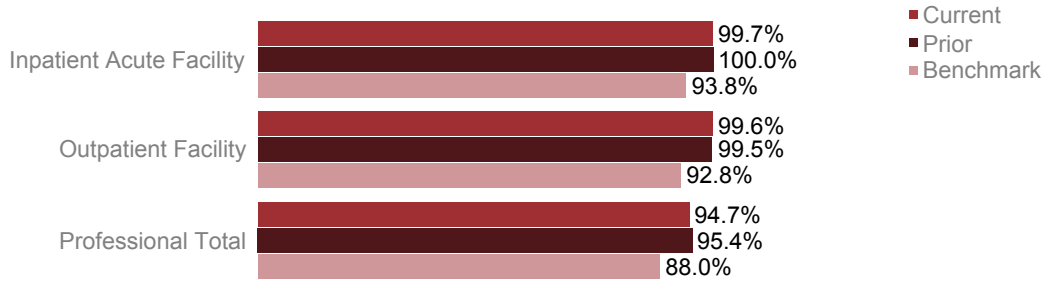
The claims data used in the upper table and for the calculation of the Percent Paid In Network measure in the lower table include all claims. To more accurately reflect plan discounts, the calculation of the Discount Percent measure in the lower table excludes 3rd Party and Medicare claims.

NETWORK UTILIZATION BY SETTING

Paid Amount by Setting

	Current		Prior	
	Paid Amount	Percent Total	Paid Amount	Percent Total
Inpatient Facility	$13,475,666	35.3%	$12,523,229	34.5%
Outpatient Facility	$8,789,703	23.0%	$8,763,769	24.2%
Professional	$15,921,895	41.7%	$14,974,008	41.3%
Pharmacy				
Total	**$38,187,264**	**100%**	**$36,261,005**	**100%**

In Network Claims Percent Utilization



Network Utilization by Setting

	In-Network				Out-of-Network				Network Utilization		
	Current		Prior		Current		Prior		In-Network - Percent Total Admits/Visits		
Setting	Acute Admits/Visits	Paid Amount	Acute Admits/Visits	Paid Amount	Acute Admits/Visits	Paid Amount	Acute Admits/Visits	Paid Amount	Current	Prior	Benchmark
Inpatient Acute Facility	703	$13,460,662	702	$12,054,105	2	$54,600			99.7%	100.0%	93.8%
Inpatient Facility		$13,404,637		$12,523,229		$71,029		$0			
Outpatient Facility	7,480	$8,789,703	7,940	$8,763,769	29	$0	39	$0	99.6%	99.5%	92.8%
Professional - Primary Care	24,022	$2,567,514	25,903	$2,543,723	620	$138,925	584	$90,500	97.5%	97.8%	90.5%
Professional - Specialty Care	61,366	$11,306,681	63,694	$11,104,318	4,197	$1,908,776	3,711	$1,235,466	93.6%	94.5%	48.4%
Professional Totals	85,388	$13,874,194	89,597	$13,648,041	4,817	$2,047,701	4,295	$1,325,967	94.7%	95.4%	88.0%
Total	**92,868**	**$36,068,534**	**97,537**	**$34,935,039**	**4,846**	**$2,118,730**	**4,334**	**$1,325,967**	**95.0%**	**95.7%**	**88.6%**

The network utilization data noted in this report is based on a uniform method of determining network usage, and may vary from group-specific utilization calculations.

LOCAL 1500 WELFARE FUND-EPO

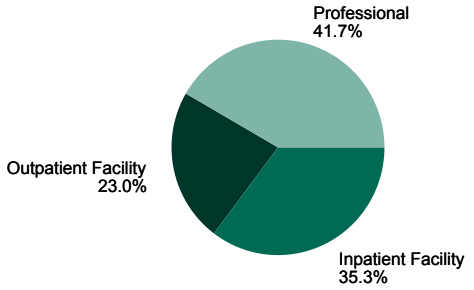
Current Period (CP): Jul 2012 - Jun 2013
Prior Period (PP): Jul 2011 - Jun 2012

UTILIZATION BY SETTING

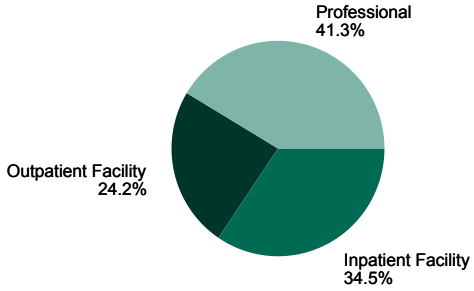
Utilization Breakdown

	Group			Benchmark		
	Current	Prior	Trend	Current	Prior	Trend
Utilization						
Inpatient Facility Acute Admits per 1000	77.5	68.2	13.6%	68.6	73.0	-6.1%
Inpatient Facility Acute Days per 1000	374.6	335.2	11.8%	309.4	330.0	-6.2%
Inpatient Facility Acute Average LOS	4.84	4.91	-1.6%	4.51	4.52	-0.2%
Outpatient Facility Visits per 1000	821.9	771.6	6.5%	1,125.3	1,202.5	-6.4%
Professional Services per 1000	24,171.9	22,642.9	6.8%	17,923.6	18,606.2	-3.7%
Average Paid Amount						
Inpatient Facility Acute Admit	$19,171	$17,171	11.6%	$13,036		
Outpatient Facility Visit	$1,175	$1,104	6.5%	$829		
Professional Service	$72	$64	12.6%	$58		

Percent of Paid Amount-Current



Percent of Paid Amount-Prior



* Pharmacy results are not shown because the volume of data was not sufficient to ensure reliable results.

Fast Facts

1. For the current period, Inpatient Facility Acute Admits per 1000 trend is 13.6%. The utilization is 13.0% higher than the Benchmark.
2. For the current period, Inpatient Facility Acute Days per 1000 trend is 11.8%. The utilization is 21.1% higher than the Benchmark.

UTILIZATION BY TOP 25 FACILITY PROVIDERS

Product: All Medical

Inpatient Facility In-Network Provider Name and Location	Unique Claimants	Paid Amount In-Network	Paid Amount Per Claimant	Percent of Total In-Network	Percent Paid In Network
STONY BROOK UNIV HOSPITAL - STONY BROOK, NY	39	$1,576,181	$40,415	11.8%	100.0%
WINTHROP - UNIVERSITY HOSPITAL - MINEOLA, NY	31	$661,234	$21,330	4.9%	100.0%
MONTEFIORE MEDICAL CENTER - BRONX, NY	17	$621,941	$36,585	4.6%	100.0%
SI UNIVERSITY HOSP NORTH ATT PATIENT ACCOUNTS DEPT - STATEN ISLAND, NY	20	$544,314	$27,216	4.1%	100.0%
THE STEVEN AND ALEXANDRA COHEN CHILDREN MED CTR NY - NEW HYDE PARK, NY	6	$505,071	$84,178	3.8%	100.0%
ITS MEMBER OTHER PLAN	27	$470,458	$17,424	3.5%	100.0%
MAIMONIDES MEDICAL CTR - BROOKLYN, NY	4	$458,947	$114,737	3.4%	100.0%
SOUTHSIDE HOSPITAL - BAY SHORE, NY	20	$458,860	$22,943	3.4%	100.0%
GOOD SAMARITAN HOSPITAL WEST ISLIP - WEST ISLIP, NY	16	$439,671	$27,479	3.3%	100.0%
NY HOSPITAL WEILL CORNELL - NEW YORK, NY	11	$402,223	$36,566	3.0%	100.0%
VASSAR BROTHERS MED CTR - POUGHKEEPSIE, NY	17	$400,415	$23,554	3.0%	100.0%
ST CHARLES HOSPITAL & REHAB CENTER - PORT JEFFERSON, NY	17	$366,387	$21,552	2.7%	100.0%
JOHN T. MATHER MEMORIAL HOSPITAL - PORT JEFFERSON, NY	19	$304,591	$16,031	2.3%	100.0%
HUNTINGTON HOSPITAL - HUNTINGTON, NY	12	$284,817	$23,735	2.1%	100.0%
SUNY DOWNSTATE LONG ISLAND COLLEGE HOSP - BROOKLYN, NY	2	$279,814	$139,907	2.1%	100.0%
NORTH SHORE HOSP AT MANHASSET - MANHASSET, NY	19	$261,804	$13,779	2.0%	100.0%
NYU HOSPITALS CTR TISCH - NEW YORK, NY	3	$224,406	$74,802	1.7%	100.0%
MOUNT SINAI HOSPITAL - NEW YORK, NY	12	$223,827	$18,652	1.7%	100.0%
HOSPITAL FOR SPECIAL SURGERY - NEW YORK, NY	6	$202,993	$33,832	1.5%	100.0%
LI JEWISH MEDICAL CENTER - NEW HYDE PARK, NY	14	$198,806	$14,200	1.5%	100.0%
BROOKHAVEN MEMORIAL HOSP - PATCHOGUE, NY	12	$177,025	$14,752	1.3%	100.0%
PECONIC BAY MEDICAL CENTER - RIVERHEAD, NY	9	$167,466	$18,607	1.2%	85.7%
PLAINVIEW HOSPITAL - PLAINVIEW, NY	18	$166,436	$9,246	1.2%	100.0%
FRANKLIN HOSPITAL - VALLEY STREAM, NY	4	$164,196	$41,049	1.2%	100.0%
NYU HOSPITAL CENTER HJD - NEW YORK, NY	1	$146,654	$146,654	1.1%	100.0%
All Other Providers	233	$3,696,100	$15,863	27.6%	98.8%
Total Inpatient Facility In-Network	**575**	**$13,404,637**	**$23,312**	**100.0%**	**99.5%**

UTILIZATION BY TOP 25 FACILITY PROVIDERS

Inpatient Facility Out-of-Network Provider Name and Location	Unique Claimants	Paid Amount Out-of-Network	Paid Amount Per Claimant	Percent of Total Out-of-Network	Percent Paid In Network
PECONIC BAY MEDICAL CENTER - RIVERHEAD, NY	1	$27,951	$27,951	39.4%	85.7%
NORTH CAROLINA DHH - ATLANTA, GA	1	$26,649	$26,649	37.5%	
NASSAU UNIVERSITY MEDICAL - EAST MEADOW, NY	1	$16,429	$16,429	23.1%	78.7%
ISLAND NURSING & REHAB CTR - HOLTSVILLE, NY	1	$0	$0	0.0%	
JOHN T. MATHER MEMORIAL HOSPITAL - PORT JEFFERSON, NY	1	$0	$0	0.0%	
NESCONSET NURSING CENTER - NESCONSET, NY	1	$0	$0	0.0%	
STONY BROOK UNIV HOSPITAL - STONY BROOK, NY	2	$0	$0	0.0%	
All Other Providers	0	$0	--	0.0%	
Total Inpatient Facility Out of Network	**8**	**$71,029**	**$8,879**	**100.0%**	**99.5%**
Total Inpatient Facility	**577**	**$13,475,666**	**$23,355**	**100.0%**	**99.5%**

UTILIZATION BY TOP 25 FACILITY PROVIDERS

Outpatient Facility In-Network Provider Name and Location	Unique Claimants	Visits	Paid Amount In-Network	Paid Amount Per Claimant	Percent of Total In-Network	Percent Paid In Network
ITS MEMBER OTHER PLAN	219	451	$944,484	$4,313	10.7%	100.0%
STONY BROOK UNIV HOSPITAL - STONY BROOK, NY	212	604	$772,850	$3,646	8.8%	100.0%
GOOD SAMARITAN HOSPITAL WEST ISLIP - WEST ISLIP, NY	134	235	$368,590	$2,751	4.2%	100.0%
JOHN T. MATHER MEMORIAL HOSPITAL - PORT JEFFERSON, NY	125	209	$309,769	$2,478	3.5%	100.0%
NORTH SHORE HOSP AT MANHASSET - MANHASSET, NY	133	218	$301,414	$2,266	3.4%	100.0%
MEMORIAL SLOAN-KETTERING CANCER CENTER - NEW YORK, NY	31	212	$290,203	$9,361	3.3%	100.0%
SI UNIVERSITY HOSP NORTH ATT PATIENT ACCOUNTS DEPT - STATEN ISLAND, NY	138	267	$270,747	$1,962	3.1%	100.0%
NY PRESBYTERIAN HOSPITAL - NEW YORK, NY	46	100	$262,992	$5,717	3.0%	100.0%
BROOKHAVEN MEMORIAL HOSP - PATCHOGUE, NY	117	192	$259,706	$2,220	3.0%	100.0%
MONTEFIORE MEDICAL CENTER - BRONX, NY	182	357	$240,292	$1,320	2.7%	100.0%
MOUNT SINAI HOSPITAL - NEW YORK, NY	96	227	$210,274	$2,190	2.4%	100.0%
LI JEWISH MEDICAL CENTER - NEW HYDE PARK, NY	86	159	$206,608	$2,402	2.4%	100.0%
VASSAR BROTHERS MED CTR - POUGHKEEPSIE, NY	71	119	$172,440	$2,429	2.0%	100.0%
SOUTHSIDE HOSPITAL - BAY SHORE, NY	79	130	$167,892	$2,125	1.9%	100.0%
WINTHROP - UNIVERSITY HOSPITAL - MINEOLA, NY	60	96	$159,473	$2,658	1.8%	100.0%
ST CHARLES HOSPITAL & REHAB CENTER - PORT JEFFERSON, NY	75	132	$148,822	$1,984	1.7%	100.0%
ST. JOHNS RIVERSIDE HOSPITAL - YONKERS, NY	72	142	$138,091	$1,918	1.6%	100.0%
WHITE PLAINS HOSP CENTER - WHITE PLAINS, NY	79	167	$132,047	$1,671	1.5%	100.0%
TRUDE WEISHAUPT MEMORIAL SATELLITE DIALYSIS CTR - FRESH MEADOWS, NY	1	9	$115,034	$115,034	1.3%	100.0%
HACKENSACK UNIVERSITY MEDICAL CENTER - HACKENSACK, NJ	1	1	$106,478	$106,478	1.2%	100.0%
HUDSON VALLEY HOSPITAL CENTER AT PEEKSKILL CORTLAN - CORTLANDT MANOR, NY	48	96	$103,552	$2,157	1.2%	100.0%
NEW YORK HOSPITAL MEDICAL CENTER OF QUEENS - FLUSHING, NY	42	88	$103,323	$2,460	1.2%	100.0%
NEW YORK METHODIST HOSP - BROOKLYN, NY	52	109	$103,305	$1,987	1.2%	100.0%
ST FRANCIS HOSPITAL - ROSLYN, NY	43	101	$103,003	$2,395	1.2%	100.0%
NORTHERN WESTCHESTER HOSP CTR - MOUNT KISCO, NY	52	115	$100,027	$1,924	1.1%	100.0%
All Other Providers	1,105	2,944	$2,698,287	$2,442	30.7%	100.0%
Total Outpatient Facility In-Network	**3,059**	**7,480**	**$8,789,703**	**$2,873**	**100.0%**	**100.0%**

UTILIZATION BY TOP 25 FACILITY PROVIDERS

Outpatient Facility Out-of-Network Provider Name and Location			Unique Claimants	Visits	Paid Amount Out-of-Network		Paid Amount Per Claimant
BROOKHAVEN MEMORIAL HOSP - PATCHOGUE, NY			5	5	$0		$0
GOOD SAMARITAN HOSPITAL WEST ISLIP - WEST ISLIP, NY			1	1	$0		$0
HOSPITAL FOR SPECIAL SURGERY - NEW YORK, NY			2	2	$0		$0
KINGSTON HOSPITAL - KINGSTON, NY			1	1	$0		$0
MEMORIAL SLOAN-KETTERING CANCER CENTER - NEW YORK, NY			2	4	$0		$0
NORTH SHORE HOSP AT MANHASSET - MANHASSET, NY			1	1	$0		$0
NORTHERN DUTCHESS HOSPITAL - RHINEBECK, NY			1	1	$0		$0
NORTHPORT VAMC - NORTHPORT, NY			1	1	$0		$0
NYU HOSPITAL CENTER HJD - NEW YORK, NY			1	1	$0		$0
PECONIC BAY MEDICAL CENTER - RIVERHEAD, NY			1	1	$0		$0
PHELPS MEMORIAL HOSP CTR - TARRYTOWN, NY			1	1	$0		$0
SI UNIVERSITY HOSP NORTH ATT PATIENT ACCOUNTS DEPT - STATEN ISLAND, NY			1	1	$0		$0
SOUTHAMPTON HOSPITAL - SOUTHAMPTON, NY			1	1	$0		$0
SOUTHSIDE HOSPITAL - BAY SHORE, NY			1	1	$0		$0
ST FRANCIS HOSPITAL - ROSLYN, NY			1	1	$0		$0
STONY BROOK UNIV HOSPITAL - STONY BROOK, NY			4	4	$0		$0
UNIVERSITY HOSP OF BKLYN DBA SUNY DOWNSTATE MEDICA - BROOKLYN, NY			1	1	$0		$0
VASSAR BROTHERS MED CTR - POUGHKEEPSIE, NY			1	1	$0		$0
All Other Providers			0	0	$0		--
Total Outpatient Facility Out of Network			**27**	**29**	**$0**		**$0**
Total Outpatient Facility	**3,059**	**7,480**	**$8,789,703**		**$2,873**	**100.0%**	**100.0%**
Total Facility			**$22,265,369**		**$6,124**	**100.0%**	**99.7%**