

UFCW – Richmond/Tidewater

2Q14 Report



2Q14 Plan Highlights

Observations

- Medical paid claims for the rolling 12 month period July 2013 – June 2014 totaled \$7.3M or \$373.78 on a per member per month (PMPM) basis. This was an decrease of 3.0% over the prior year. With in-network penetration of 99.8% the Fund realized a 63.6% discount -- 58.4% inpatient, 71.9% outpatient, 56.6% professional. The Fund paid 77.3% of all covered medical expenses leaving a member cost share of 10.5% and 12.2% picked up by third parties.

Key Demographic Statistics:

- Membership averaged 1,633, compared to 1,697 for the prior period, a decrease of 3.8%
- Average employee age is 46; average member age is 41, and member to contract ratio is 1.53
- Population is 47.4% male, 52.6% female

Key Financial Statistics:

- High-cost claimants over \$75k drove 42.6% of costs which was a decrease of 13.6% from the prior period. (benchmark = 26.3%)
- 72.3% of members utilized the plan during the period and 75.3% in the prior period
- Hot topic is new specialty RX for Hep. C – For cost projections. . .there are 2 members with this diagnosis on the medical plan. New drug is oral and would be obtained through the retail pharmacy side of the plan.

Key Clinical Cost Drivers:

- Neoplasms (cancers) were the top cost driver for the period which accounted for 14.1% of expenses
- Circulatory System conditions represented 12.6% of the medical spend
- Musculoskeletal conditions was next highest at 13.6% of medical spend

Top Lifestyle-Related Conditions:

- Cerebrovascular Disease 13.9/1,000 (benchmark = 12.8)
- Osteoarthritis 69.7/1,000 (benchmark = 54.5)
- Colorectal Cancer – 4.2/1,000 (benchmark = 1.8)



FINANCIAL AND UTILIZATION DASHBOARD (PAID CLAIMS)

Medical Paid Amount Summary

	Current	Prior	Trend	Prior Trend
Medical				
Paid Amount	\$7,323,562	\$7,850,275		
Paid PMPM	\$373.78	\$385.44	-3.0%	18.2%

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	\$7,323,562	\$7,850,275			99.8%
Total HCC Paid Amount	\$3,122,283	\$3,874,045			99.8%
Total HCC Paid Amount w/o Rx	\$3,122,283	\$3,874,045			99.8%
HCC Paid Amount as % of Total Paid Amount	42.6%	49.3%	-13.6%	26.3%	
Number of HCC Members > \$75K	16	24			
HCC Members as Percent of Total Members	0.8%	1.2%	-35.4%	0.4%	

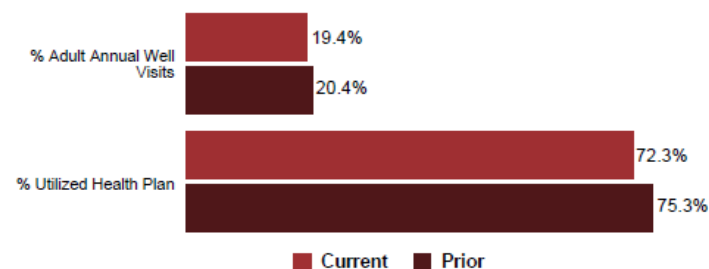
High Cost Claimant (HCC) Detail	Current	Prior	Trend	Benchmark
Medical PMPM - HCC	\$159.36	\$190.21	-16.2%	\$70.95
Medical PEPM - HCC	\$243.78	\$290.58	-16.1%	\$143.67
Medical PMPM - Non-HCC	\$214.43	\$195.23	9.8%	\$184.01
Medical PEPM - Non-HCC	\$328.02	\$298.25	10.0%	\$372.64

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



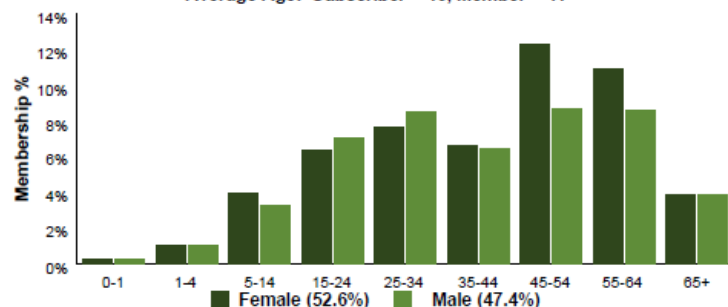
Pharmacy Highlights

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

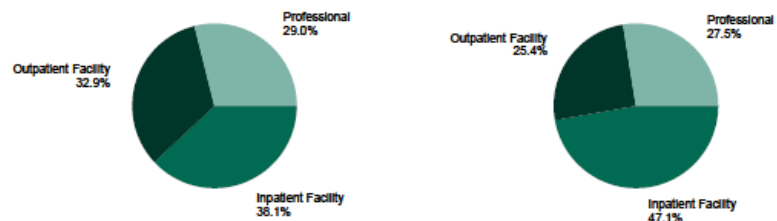
FINANCIAL AND UTILIZATION DASHBOARD (PAID CLAIMS)

Medical Membership Overview

Average Age: Subscriber = 46, Member = 41



Paid Amount By Setting



Percent of Paid Amount - Current

Percent of Paid Amount - Prior

Average Medical Paid Per Claimant	Current	Prior
Female	\$5,803	\$5,714
Male	\$3,888	\$4,727

Period	Med and Rx Subscribers	Contract Size	Med and Rx Members	Member Trend
Current	1,067	1.53	1,633	-3.8%
Prior	1,111	1.53	1,697	0.5%

Paid Claims Distribution



Based on medical and pharmacy where applicable.

Utilization Breakdown

Utilization	Group			Benchmark		
	Current	Prior	Trend	Current	Prior	Trend
Inpatient Facility Acute Admits per 1000	73.5	85.4	-14.0%	65.9	69.3	-4.9%
Inpatient Facility Acute Days per 1000	368.7	573.9	-35.8%	295.6	311.8	-5.2%
Inpatient Facility Acute Average LOS	5.02	6.72	-25.3%	4.48	4.50	-0.4%
Outpatient Facility Visits per 1000	1,110.4	1,106.5	0.4%	1,131.2	1,144.9	-1.2%
Professional Services per 1000	18,638.5	18,517.6	0.7%	16,538.5	18,061.9	-8.4%
Average Paid Amount						
Inpatient Facility Acute Admit	\$22,945	\$25,260	-9.2%	\$14,229		
Outpatient Facility Visit	\$1,327	\$1,061	25.1%	\$893		
Professional Service	\$70	\$69	1.7%	\$65		

LIFESTYLE CONDITIONS BY PAID AMOUNT

Lifestyle Condition	Group						Benchmark			
	Paid Amount	Unique Claimants	Average Paid Amount Per Unique Claimant	Paid Amount PMPM	Prevalence Per 1000	Prevalence Trend	Average Paid Amount Per Unique Claimant	Paid Amount PMPM	Prevalence Per 1000	Prevalence Trend
Lifestyle Dx: Cerebrovascular Disease	\$451,339	23	\$19,623	\$22.80	13.9	-20.6%	\$2,628	\$2.81	12.8	-2.1%
Lifestyle Dx: Osteoarthritis	\$340,101	115	\$2,957	\$17.18	69.7	26.7%	\$2,093	\$9.50	54.4	1.7%
Lifestyle Dx: Cancer - Colorectal	\$281,398	7	\$40,200	\$14.22	4.2	20.8%	\$10,483	\$1.55	1.8	-0.6%
Lifestyle Dx: Cancer - Breast	\$158,943	12	\$13,245	\$8.03	7.3	13.0%	\$6,411	\$3.85	7.2	1.7%
Lifestyle Dx: Peripheral Vascular Disease	\$134,274	9	\$14,919	\$6.78	5.5	-15.3%	\$1,624	\$1.04	7.7	-2.0%
Lifestyle Dx: Cancer - Skin	\$133,648	6	\$22,275	\$6.75	3.6	55.4%	\$962	\$0.89	11.2	1.4%
Lifestyle Dx: Coronary Artery Disease	\$97,041	55	\$1,764	\$4.90	33.3	13.9%	\$3,623	\$8.12	26.9	-3.8%
Lifestyle Dx: Diabetes Mellitus, Non-Insulin Depen	\$72,398	130	\$557	\$3.66	78.8	8.6%	\$421	\$1.81	51.7	2.2%
Lifestyle Dx: Asthma	\$67,798	41	\$1,654	\$3.43	24.9	-11.5%	\$457	\$1.00	26.3	-4.0%
Lifestyle Dx: Cholecystitis/Cholelithiasis	\$67,443	8	\$8,430	\$3.41	4.9	-7.9%	\$5,195	\$2.31	5.3	-1.5%
Lifestyle Dx: Cancer - Trachea/Bronchus/Lung	\$64,520	3	\$21,507	\$3.26	1.8	3.6%	\$10,633	\$1.33	1.5	-1.5%
Lifestyle Dx: Cancer - Gallbladder/Biliary Tract	\$64,060	1	\$64,060	\$3.24	.6		\$9,598	\$0.07	.1	3.0%
Lifestyle Dx: Hypertension	\$51,882	288	\$180	\$2.62	174.6	4.7%	\$215	\$1.93	107.9	-0.3%
Lifestyle Dx: Pneumonia	\$49,102	18	\$2,728	\$2.48	10.9	-41.7%	\$1,565	\$1.46	11.2	-12.4%
Lifestyle Dx: Cancer - Pancreas	\$31,634	1	\$31,634	\$1.60	.6		\$16,271	\$0.46	.3	0.6%
Lifestyle Dx: Stress/Anxiety/Depression	\$30,434	83	\$367	\$1.54	50.3	-2.3%	\$432	\$1.55	43.1	4.5%
Lifestyle Dx: Sleep Apnea	\$29,270	22	\$1,330	\$1.48	13.3	-8.9%	\$817	\$1.51	22.2	1.7%
Lifestyle Dx: COPD	\$29,187	37	\$789	\$1.47	22.4	-20.2%	\$440	\$0.74	20.1	-7.0%
Lifestyle Dx: Venous Embolism/Thrombosis	\$25,528	11	\$2,321	\$1.29	6.7	13.9%	\$1,852	\$0.67	4.3	-2.5%
Lifestyle Dx: Alcohol Abuse	\$19,879	9	\$2,209	\$1.00	5.5	55.4%	\$2,378	\$0.53	2.7	2.9%

LIFESTYLE CONDITIONS BY PAID AMOUNT

Lifestyle Condition	Paid Amount	Group					Benchmark			
		Unique Claimants	Average Paid Amount Per Unique Claimant	Paid Amount PMPM	Prevalence Per 1000	Prevalence Trend	Average Paid Amount Per Unique Claimant	Paid Amount PMPM	Prevalence Per 1000	Prevalence Trend
All Other Lifestyle Conditions	\$99,899	318	\$314	\$5.05	192.8	-0.2%	\$721	\$10.08	167.8	-3.7%
Total of All Lifestyle Conditions	\$2,299,779	715	\$3,216	\$116.20	433.5	3.7%	\$1,757	\$53.22	363.5	-0.2%
Total of All Non-Lifestyle Conditions	\$4,982,048									
Grand Total	\$7,281,827									

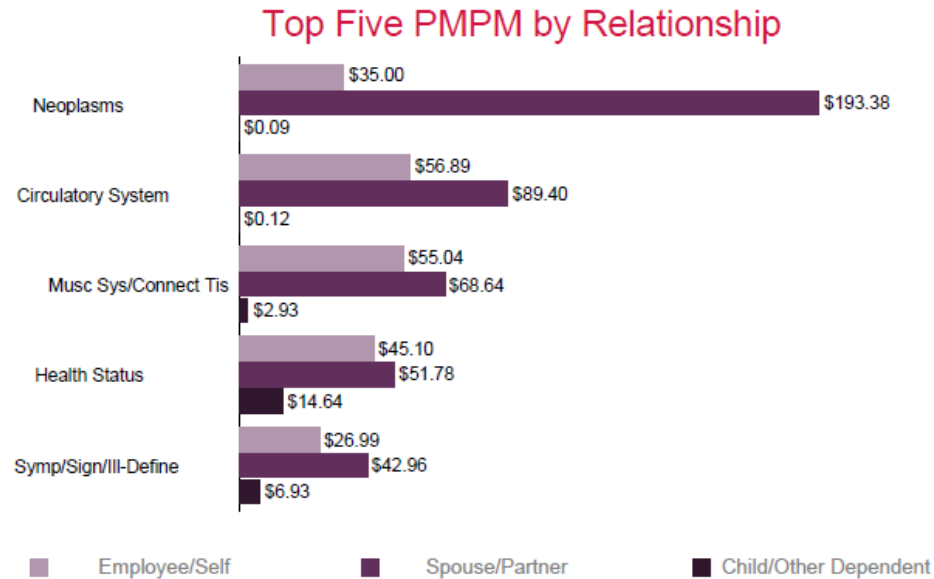
Fast Facts

1. Lifestyle Dx: Cerebrovascular Disease represents the primary Lifestyle Related Condition by paid amount and is 6.2% of the total paid claims amount in the current period.
2. Lifestyle Dx: Hypertension represents the highest Lifestyle Related Condition per 1000 and is 61.8% above the Benchmark.

TOP TEN PAID HEALTH CONDITIONS BY RELATIONSHIP AND PMPM

Health Conditions	Employee/Self		Spouse/Partner		Child/Other Dependent		Total			
	Paid Amount	PMPM	Paid Amount	PMPM	Paid Amount	PMPM	Paid Amount	PMPM	PMPM Trend	Percent Variance to Benchmark PMPM
Neoplasms	\$447,849	\$35.00	\$584,599	\$193.38	\$322	\$0.09	\$1,032,770	\$52.71	21.7%	108.0%
Circulatory System	\$727,845	\$56.89	\$270,266	\$89.40	\$457	\$0.12	\$998,568	\$50.97	16.0%	119.4%
Musc Sys/Connect Tis	\$704,213	\$55.04	\$207,511	\$68.64	\$11,081	\$2.93	\$922,805	\$47.10	3.2%	48.4%
Health Status	\$576,953	\$45.10	\$156,543	\$51.78	\$55,271	\$14.64	\$788,767	\$40.26	-31.7%	18.8%
Symp/Sign/Ill-Define	\$345,352	\$26.99	\$129,863	\$42.96	\$26,171	\$6.93	\$501,386	\$25.59	-3.5%	28.0%
Genitourinary System	\$305,729	\$23.90	\$162,838	\$53.87	\$22,632	\$5.99	\$491,199	\$25.07	-8.9%	77.4%
Respiratory System	\$388,793	\$30.39	\$36,825	\$12.18	\$31,962	\$8.46	\$457,580	\$23.35	60.8%	107.9%
Injury & Poisoning	\$222,650	\$17.40	\$206,699	\$68.38	\$26,215	\$6.94	\$455,564	\$23.25	-1.8%	21.3%
Infectious/Parasitic	\$337,747	\$26.40	\$31,081	\$10.28	\$7,051	\$1.87	\$375,879	\$19.18	111.7%	238.4%
Endo/Nutr/Mtblc/Imm	\$101,533	\$7.94	\$249,007	\$82.37	\$949	\$0.25	\$351,488	\$17.94	77.8%	103.5%
Subtotal	\$4,158,662	\$325.05	\$2,035,231	\$673.25	\$182,112	\$48.23	\$6,376,006	\$325.42	7.3%	68.4%
All Other	\$537,413	\$42.01	\$262,422	\$86.81	\$147,721	\$39.12	\$947,556	\$48.36	-41.2%	-21.7%
Total	\$4,696,076	\$367.05	\$2,297,653	\$760.06	\$329,833	\$87.35	\$7,323,562	\$373.78	-3.0%	46.6%

TOP TEN PAID HEALTH CONDITIONS BY RELATIONSHIP AND PMPM



TOTAL HEALTH CONDITIONS BY PAID AMOUNT

Product: All Medical

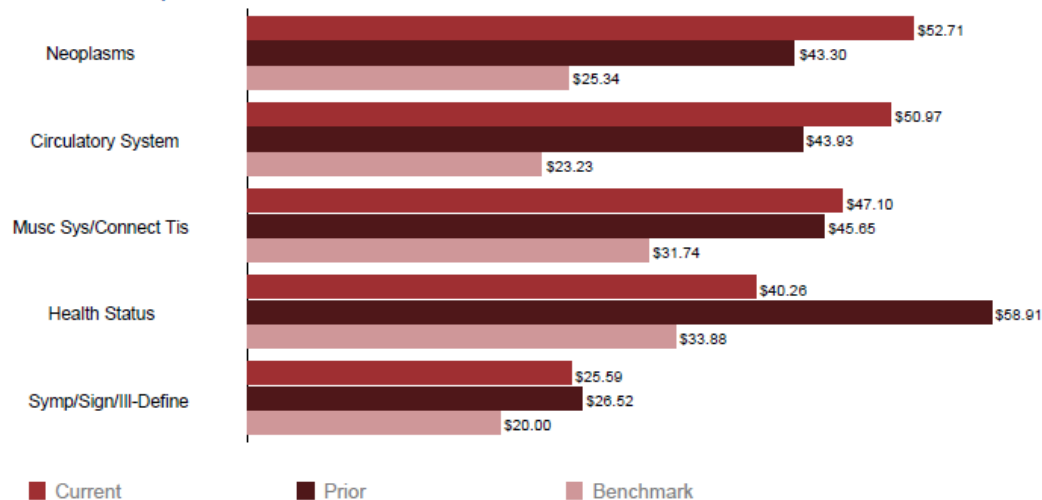
Health Conditions	Paid Amount by Setting							Paid Amount PMPM				
	Unique Claimants	Inpatient Facility	Outpatient Facility	Professional	Total	Percent Total	Paid Amount Per Unique Claimant	Current	Prior	Trend	Benchmark	Percent Variance
Neoplasms	112	\$134,473	\$643,055	\$255,241	\$1,032,770	14.1%	\$9,221	\$52.71	\$43.30	21.7%	\$25.34	108.0%
Circulatory System	389	\$722,984	\$115,929	\$159,655	\$998,568	13.6%	\$2,567	\$50.97	\$43.93	16.0%	\$23.23	119.4%
Musc Sys/Connect Tis	483	\$444,734	\$147,771	\$330,299	\$922,805	12.6%	\$1,911	\$47.10	\$45.65	3.2%	\$31.74	48.4%
Health Status	713	\$4,370	\$457,094	\$327,303	\$788,767	10.8%	\$1,106	\$40.26	\$58.91	-31.7%	\$33.88	18.8%
Symp/Sign/Ill-Define	552	\$24,740	\$275,103	\$201,543	\$501,386	6.8%	\$908	\$25.59	\$26.52	-3.5%	\$20.00	28.0%
Genitourinary System	268	\$39,775	\$316,016	\$135,407	\$491,199	6.7%	\$1,833	\$25.07	\$27.52	-8.9%	\$14.13	77.4%
Respiratory System	446	\$285,507	\$57,403	\$114,670	\$457,580	6.2%	\$1,026	\$23.35	\$14.52	60.8%	\$11.23	107.9%
Injury & Poisoning	308	\$195,509	\$128,494	\$131,562	\$455,564	6.2%	\$1,479	\$23.25	\$23.68	-1.8%	\$19.16	21.3%
Infectious/Parasitic	157	\$345,890	\$7,765	\$22,223	\$375,879	5.1%	\$2,394	\$19.18	\$9.06	111.7%	\$5.67	238.4%
Endo/Nutr/Mtble/Imm	376	\$234,903	\$25,989	\$90,597	\$351,488	4.8%	\$935	\$17.94	\$10.09	77.8%	\$8.82	103.5%
Digestive System	169	\$168,697	\$98,580	\$82,334	\$349,611	4.8%	\$2,069	\$17.84	\$40.17	-55.6%	\$17.74	0.6%
Nerv Sys/Sense Organs	342		\$78,932	\$126,373	\$205,304	2.8%	\$600	\$10.48	\$16.69	-37.2%	\$13.21	-20.7%
Mental Disorders	203	\$43,322	\$4,831	\$58,363	\$106,517	1.5%	\$525	\$5.44	\$9.06	-40.0%	\$8.06	-32.6%
Pregnancy & Complic	30	\$44,340	\$16,189	\$32,100	\$92,629	1.3%	\$3,088	\$4.73	\$7.98	-40.7%	\$10.70	-55.8%
Skin/Subcutan Tissue	195	\$19,722	\$12,767	\$40,993	\$73,481	1.0%	\$377	\$3.75	\$4.16	-9.9%	\$4.02	-6.7%
Congenital Anomalies	17	\$51,502	\$9,335	\$1,399	\$62,236	0.8%	\$3,661	\$3.18	\$0.60	429.8%	\$2.79	13.6%
Blood Diseases	46	\$32,151	\$11,059	\$13,438	\$56,648	0.8%	\$1,231	\$2.89	\$1.68	72.2%	\$2.96	-2.2%
Perinatal Conditions	9		\$0	\$1,130	\$1,130	0.0%	\$126	\$0.06	\$1.93	-97.0%	\$2.03	-97.2%
Extrnl Causes						0.0%				0.0%	\$0.01	-100.0%
Inj/Poison						0.0%				0.0%	\$0.23	-100.0%
Unassigned						0.0%				0.0%	\$0.00	-100.0%
~						0.0%				0.0%	\$0.00	-100.0%
Total	1,466	\$2,792,619	\$2,406,312	\$2,124,630	\$7,323,562	100.0%	\$4,996	\$373.78	\$385.44	-3.0%	\$254.96	46.6%

Summary Paid	Current	Prior	Trend
Paid Amount	\$7,323,562	\$7,850,275	-6.7%
Unique Claimants	1,466	1,481	-1.0%
Paid Amount per Unique Claimant	\$4,996	\$5,301	-5.8%

TOTAL HEALTH CONDITIONS BY PAID AMOUNT

Top Five Health Conditions

PMPM Comparison to Benchmark



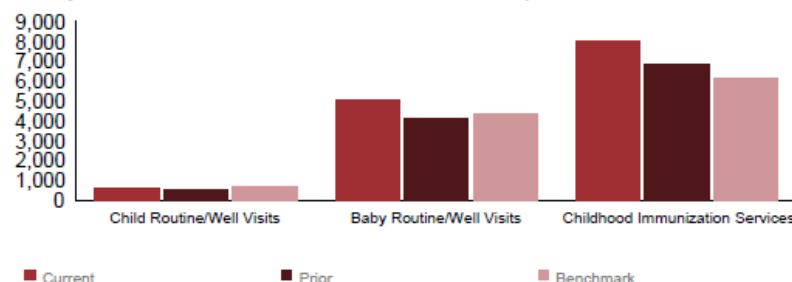
PREVENTIVE CARE SERVICES

Category	Eligible Members	Visits / Services	Current Rate per 1000	Prior Rate per 1000	Benchmark Rate per 1000
Child Routine/Well Visits	32	19	589.1	548.9	655.5
Baby Routine/Well Visits	9	46	5,018.2	4,122.7	4,321.9
Childhood Immunizations Services	16	130	8,041.2	6,864.2	6,126.8

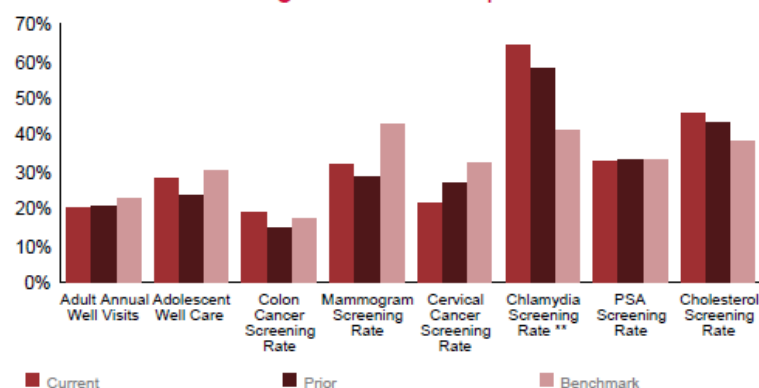
Category	Eligible Members	Members Receiving Care	Current Percent Compliance	Prior Percent Compliance	Benchmark Percent Compliance
Adult Annual Well Visits	1,124	225	20.0%	20.3%	22.7%
Adolescent Well Care	132	37	28.0%	23.5%	30.2%
Colon Cancer Screening Rate	625	116	18.6%	14.5%	17.0%
Mammogram Screening Rate	484	154	31.8%	28.2%	42.6%
Cervical Cancer Screening Rate	670	142	21.2%	26.7%	32.0%
Chlamydia Screening Rate**	36	23	63.9%	57.6%	41.0%
PSA Screening Rate	260	85	32.7%	33.1%	32.9%
Cholesterol Screening Rate	887	405	45.7%	43.2%	38.0%

** If your pharmacy data is not included, this metric is incomplete.

Baby and Child Preventive Care Rates per 1000



Preventive Screenings Percent Compliance



Fast Facts

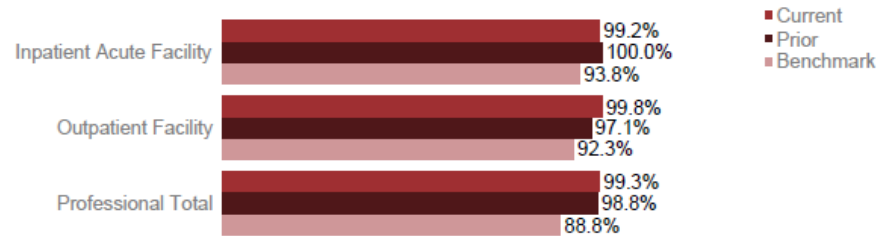
- Screening compliance rates improved from the prior period for 54.5% of the Preventive Care Screenings.
- Membership compliance with Preventive Care Screenings and Immunizations had the greatest difference from the WellPoint Benchmark for these three categories:
 - Chlamydia Screening Rate ** 22.9% difference from the Benchmark
 - Cervical Cancer Screening Rate -10.8% difference from the Benchmark
 - Mammogram Screening Rate -10.8% difference from the Benchmark

NETWORK UTILIZATION BY SETTING

Paid Amount by Setting

	Current		Prior	
	Paid Amount	Percent Total	Paid Amount	Percent Total
Inpatient Facility	\$2,792,819	38.1%	\$3,699,850	47.1%
Outpatient Facility	\$2,406,312	32.9%	\$1,991,998	25.4%
Professional Pharmacy	\$2,124,630	29.0%	\$2,158,427	27.5%
Total	\$7,323,562	100%	\$7,850,275	100%

In Network Claims Percent Utilization



Network Utilization by Setting

Setting	In-Network				Out-of-Network				Network Utilization		
	Current		Prior		Current		Prior		In-Network - Percent Total Admits/Visits		
	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	119	\$2,749,029	145	\$3,662,704	1	\$4,370			99.2%	100.0%	93.8%
Inpatient Facility		\$2,788,249		\$3,699,850		\$4,370					
Outpatient Facility	1,809	\$2,406,312	1,823	\$1,872,464	4	\$0	55	\$119,534	99.8%	97.1%	92.3%
Professional - Primary Care	4,046	\$430,143	4,326	\$475,137	24	\$3,401	69	\$5,883	99.4%	98.4%	91.5%
Professional - Specialty Care	9,640	\$1,680,898	10,015	\$1,658,924	68	\$10,188	112	\$18,483	99.3%	98.9%	87.9%
Professional Totals	13,686	\$2,111,041	14,341	\$2,134,061	92	\$13,560	181	\$24,366	99.3%	98.8%	88.8%
Total	15,495	\$7,305,602	16,164	\$7,706,376	96	\$17,960	236	\$143,900	99.4%	98.6%	89.2%

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.

MEDICAL PAID AMOUNTS AND PLAN SAVINGS

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

							Reductions From Allowed Amount					Paid 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	
Inpatient Facility	In-Network	\$7,087,559	\$8,733	\$7,078,826	\$4,141,754	\$2,937,073	\$4,372	\$136,677	\$1,988	\$27,029	(\$21,242)	\$2,788,249
	Out-of-Network	\$5,488	\$0	\$5,488	\$0	\$5,488	\$0	\$1,118	\$0	\$0	\$0	\$4,370
Total Inpatient Facility		\$7,093,047	\$8,733	\$7,084,314	\$4,141,754	\$2,942,560	\$4,372	\$137,794	\$1,988	\$27,029	(\$21,242)	\$2,792,619
Outpatient Facility	In-Network	\$11,649,927	\$457,993	\$11,191,934	\$7,215,305	\$3,976,629	\$117,256	\$324,426	\$3,157	\$1,124,809	\$669	\$2,408,312
	Out-of-Network	\$261	\$0	\$261	\$0	\$261	\$186	\$76	\$0	\$0	\$0	\$0
Total Outpatient Facility		\$11,650,188	\$457,993	\$11,192,195	\$7,215,305	\$3,976,891	\$117,442	\$324,501	\$3,157	\$1,124,809	\$669	\$2,406,312
Professional	In-Network	\$5,746,822	\$44,414	\$5,702,208	\$3,167,957	\$2,534,251	\$139,714	\$261,826	\$4,912	\$19,643	(\$2,885)	\$2,111,041
	Out-of-Network	\$26,061	\$5,502	\$20,559	\$383	\$20,176	\$6,806	(\$113)	\$0	\$0	(\$106)	\$13,590
Total Professional		\$5,772,683	\$49,916	\$5,722,767	\$3,168,340	\$2,554,427	\$146,520	\$261,713	\$4,912	\$19,643	(\$2,991)	\$2,124,630

							Reductions From Allowed Amount					Paid 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	
Total In-Network		\$24,484,109	\$511,141	\$23,972,968	\$14,525,015	\$9,447,953	\$261,342	\$722,929	\$10,057	\$1,171,481	(\$23,457)	\$7,305,602
	Percent of Total	99.9%	98.9%	99.9%	100.0%	99.7%	97.4%	99.9%	100.0%	100.0%	99.6%	99.8%
Total Out-of-Network		\$31,810	\$5,502	\$26,308	\$383	\$25,925	\$6,992	\$1,080	\$0	\$0	(\$106)	\$17,960
	Percent of Total	0.1%	1.1%	0.1%	0.0%	0.3%	2.6%	0.1%	0.0%	0.0%	0.4%	0.2%
Total Medical		\$24,515,919	\$516,642	\$23,999,277	\$14,525,399	\$9,473,878	\$268,334	\$724,008	\$10,057	\$1,171,481	(\$23,563)	\$7,323,562

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	\$7,050,613	\$4,121,354	58.5%	\$10,039,120	\$7,217,206	71.9%	\$5,667,547	\$3,157,646	55.7%	\$22,757,280	\$14,496,207	63.7%
Out-of-Network	\$5,488	\$0	0.0%	\$261	\$0	0.0%	\$20,559	\$383	1.9%	\$26,308	\$383	1.5%
Total Where WellPoint is Primary	\$7,056,101	\$4,121,354	58.4%	\$10,039,382	\$7,217,206	71.9%	\$5,688,106	\$3,158,029	55.5%	\$22,783,589	\$14,496,590	63.6%

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.



PLAN COST BY PRODUCT AND COST SHARE

Cost Share Summary of Allowed Amount

Member Share		Current			Prior			
	Member OOP	Percent of Allowed Amount	PEPM	PMPM	Member OOP	Percent of Allowed Amount	PEPM	PMPM
Product								
Medical	\$992,342	10.5%	\$77.48	\$50.65	\$1,001,444	10.8%	\$75.12	\$49.17
Plan/Employer Share		Current			Prior			
	Paid Amount	Percent of Allowed Amount	PEPM	PMPM	Paid Amount	Percent of Allowed Amount	PEPM	PMPM
Product								
Medical	\$7,323,562	77.3%	\$571.80	\$373.78	\$7,850,275	84.8%	\$588.83	\$385.44
Other Share		Current			Prior			
	Other	Percent of Allowed Amount	PEPM	PMPM	Other	Percent of Allowed Amount	PEPM	PMPM
Product								
Medical	\$1,157,975	12.2%	\$90.41	\$59.10	\$400,590	4.3%	\$30.05	\$19.67

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

