

Annual Review Prepared for City of Manchester



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October 21 , 2014

Data Definitions

Data Ranges	<p><i>Financials</i> <i>Current Period (CP): July 2013- June 2014</i> <i>Prior Period (PP): July 2012- June 2013</i></p> <p><i>Lifestyle and Chronic Conditions</i> <i>Current Incurred Period (CIP): April 2013 - March 2014, Paid Through June 2014</i> <i>Prior Incurred Period (PIP): April 2012 - March 2013, Paid Through June 2013</i></p>
Benchmark	<p>The Benchmark referenced in this analysis is Anthem New Hampshire Book of Business A similar group, in terms of industry and demographics , is also used as a comparison</p>
PMPM	<p>PMPM paid amount is the metric used throughout this analysis to understand paid amount variances/trends by individual plan participants (per member) over the duration of the plan period (per month) <i>Members are defined as all participants in the plan including employees, spouses, and children</i></p>
High Cost Claimants	<p>High Cost Claimants (HCCs) are referenced in this analysis and are defined as those members with a cumulative total paid amount of medical claims in excess of \$75,000 during the two reporting periods.</p>
Settings	<p>Plan expenditures and utilization are broken down into the following settings: <i>Inpatient facility, Outpatient facility, Professional and Pharmacy</i></p>

Health plan costs:

TOTAL ACTIVES MEDICAL and Rx PAID TREND: 8.8%

(Current Total Paid PMPM - \$502.36 vs Prior Period Total PMPM- \$461.91)

Primary driver of trend:

Increase in HCC Trend

Increased Costs and Utilization in Most Settings



Plan Highlights



Plan Performance

- ✓ City of Manchester's Total Costs (medical and pharmacy) **increased** 6.0%
- ✓ Total Medical and Pharmacy PMPM trend **increased** 8.8%
- ✓ High Cost Claimants PMPM trend **increased** 20.8%
 - ✓ Non-High Cost Claimant trend **increased** 6.2%



Demographics

- ✓ Membership **decreased** 2.5%
- ✓ A younger population than the Anthem NH BOB yet comparable to the Like Group
- ✓ Male members outnumber female members at 52.3% of the membership
 - ✓ Average cost of a claim **increased** 7.1% in comparison to the prior period
 - ✓ Males claims are 15.4% higher than their female counterparts

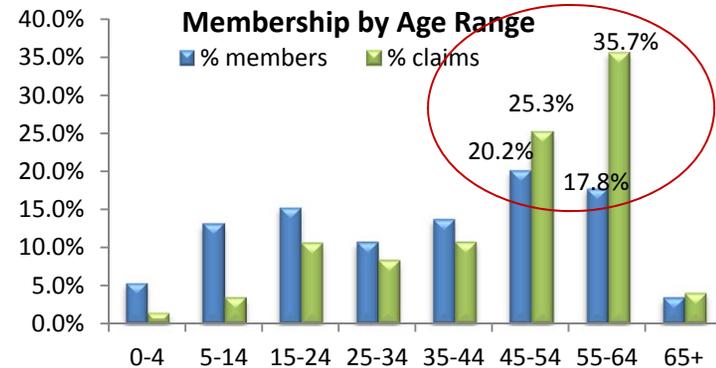


Clinical Cost Drivers

- ✓ Musculoskeletal System, Digestive System, Circulatory System, Neoplasms and Injury and Poisoning were the top five health conditions categories representing 43.7% of total medical paid
- ✓ Inpatient PMPM **increased** 17.4%; Admits/1000 **increased** 24.8%
- ✓ Outpatient PMPM **increased** 8.9%; Outpatient visits/1000 **increased** 16.6%
- ✓ Professional PMPM **increased** 4.8%; Professional visits/1000 **increased** 6.1%
- ✓ Pharmacy PMPM **increased** 10.5%; Utilization *remained essentially flat*
- ✓ Osteoarthritis, Cancer, Diabetes, Hypertension, Asthma and Depression are common threads in the City of Manchester's population

Financial and Demographic Details

	Current Period	Prior Period	Trend/ Variance	Like Group	Variance to Like Group	Anthem NH BOB
Total Medical and Rx Claims	\$18,481,852	\$17,429,636				
Total Medical and Pharmacy PMPM	\$502.36	\$461.91	8.8%	\$513.44	-2.2%	
Total Medical and Pharmacy PEPY	\$15,333.36	\$14,241.84	7.7%	\$15,172.32	1.1%	\$10,065.72
High Cost Claimant Paid	\$3,602,582	\$3,059,986				
HCC Paid as % of Total	19.5%	17.6%	1.9%	21.6%	-2.1%	24.1%
HCC PMPM	\$97.92	\$81.09	20.8%	\$111.24	-12.0%	
Non-HCC PMPM	\$404.44	\$380.82	6.2%	\$402.20	0.6%	
HCC's as % of Members	0.9%/ 26	0.5%/ 17	+9 members	0.9%/41		
Member Cost Share	6.1%	6.4%	-0.3%	5.0%	1.1%	18-20%
Total In Network Utilization	95.3%	99.7%	-4.4%	94.3%	1.0%	
Utilization of Plan	93.9%	93.4%	0.5%	92.7%	1.2%	85.7%
Demographics						
Average Eligible Membership	3,066	3,144	-2.5%	4,538		
Contract Size	2.54	2.57		2.46		1.9
Average Member Age	35.0 yrs	34.7 yrs	0.3 yrs	35.8 yrs	-0.8 yrs	36.7 yrs
Average Employee Age	47.8 yrs	47.7 yrs	0.1 yrs	47.8 yrs	n/c	WLP-48.7 yrs



Comparison of Plan Designs

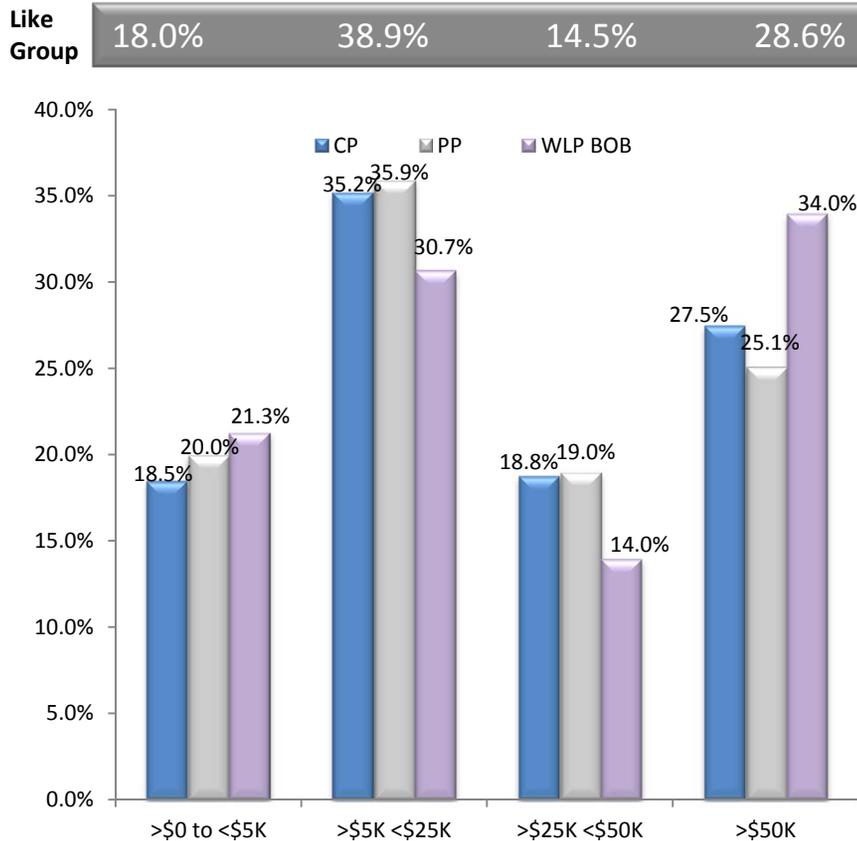
	City of Manchester**	Like Group Comparison**	Client #1	Client # 2	Client #3	Client #4
CLAIM COST SHARE: Plan Cost Member Cost <i>(includes member copays, deductibles and coinsurance)</i>	93.9% 6.1%	95.0% 5.0%	70.1% 29.9%	85.7% 14.3%	81.8% 18.2%	82.6% 17.4%
Emergency Room Visit	\$150 High Deductible Health Plan (HDHP) Subject to Deductible	\$100	Subject to \$1500 or \$1750 deductible + 20% coinsurance	\$75	\$150	\$150 HDHP Subject to Deductible
Prescriptions 30-day retail	\$10/30/50 HDHP Subject to Deductible	\$5/\$15/\$35	\$10/30/50 HDHP Subject to Deductible	\$10/20/50	\$10/30/50	\$10/25/40 HDHP Subject to Deductible
Inpatient Admission	\$100 - \$250 HDHP Subject to Deductible	\$250	Subject to \$1500 or \$1750 deductible + 20% coinsurance	Subject to \$1000 deductible + 10% co- insurance	Subject to \$2000 deductible + 10% coinsurance	Subject to \$1000 or \$2000 Deductible
Office Visits PCP Specialist	\$20 \$20 HDHP Subject to Deductible	\$20 \$20	HDHP Subject to Deductible and Coinsurance	\$15	\$25 \$50	\$20 \$30 HDHP Subject to Deductible

Distribution of Medical Costs

Programs often focus on treatment at the expense of prevention

WLP Benchmark Distribution:

- >\$0 to \$4,999 consumes 21.3% of total spend
- \$5,000 to \$24,999 consumes 30.7% of total spend
- \$25,000 to \$49,999 consumes 14.0% of total spend
- >\$50,000 consumes 34.0% of total spend



Findings:

- 27.5% of claims are driven by members spending >\$50K (Benchmark = 34.0%)
- At 18.8% of total expenses for the >\$25K to <\$50K dollar band, CITY OF MANCHESTER realized a higher % of expenses compared to the WLP Benchmark as well as the Like Group Comparison
- For >\$5K to <\$25K, experience is comparable to the Prior Period, lower than the Like Group, but higher than Benchmark - this is a dollar band for beginning of chronic illness and / or acute events with limited health issues
- For >\$0 to <\$5K, experience is lower than the prior period and WLP Benchmark, yet slightly higher than the Like Group. This is a metric indicating a population seeking preventive, annual, sick and screening visits
- **6.1%** of the CITY OF MANCHESTER members had \$0 medical claims (**200 total members**) in the current period

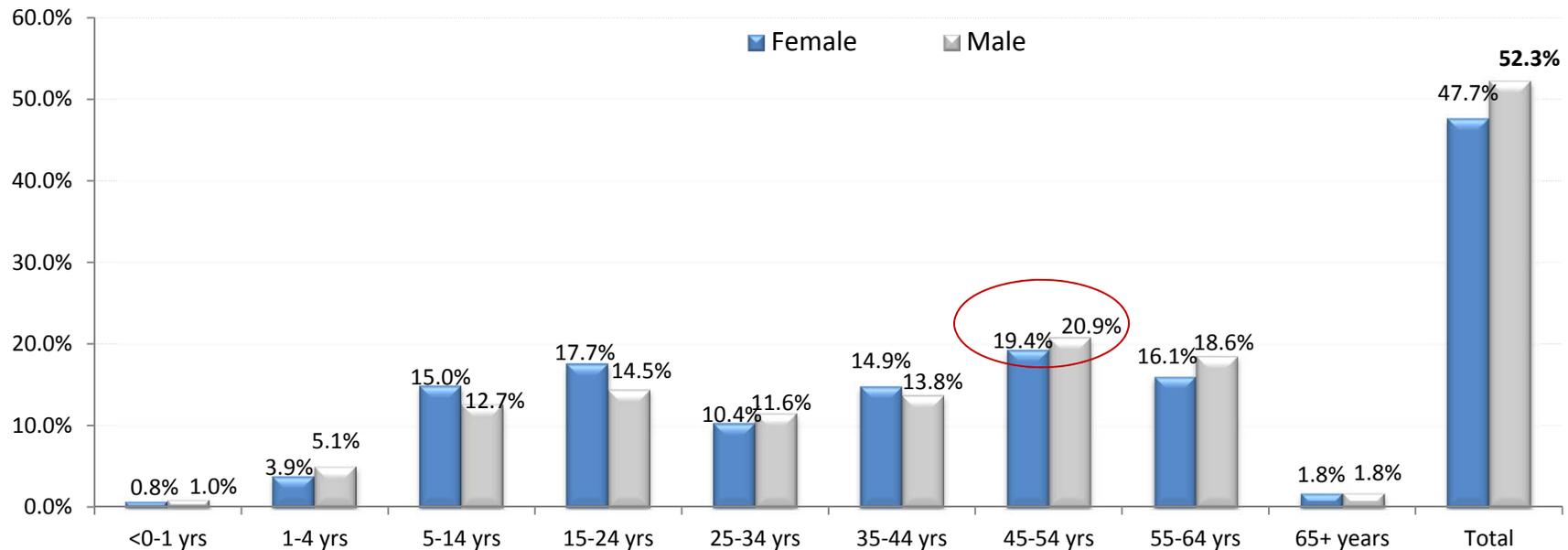
Interpretations:

- It would appear that the CITY OF MANCHESTER had a somewhat favorable distribution of their health care dollars, but with only fair utilization of preventive and low cost medical services *for those members seeking services*
- The \$5K to \$25K dollar range would indicate that once disease is identified, membership appears to be addressing those conditions with medical services to hopefully prevent further development or keep well managed once diagnosed
- For those members in the \$25K to \$50K dollar range, it would appear that there are members with some complicated health issues and chronic conditions and spending more than expected to manage those conditions
- Those members in the >\$50K dollar bands are complex, have co-morbid conditions, have continuing claims and require costly services and interventions
- **Continued focus of attention should be on encouragement of Annual visits, Preventive care visits, Sick visits and Screenings in order to identify health issues early, provide treatment and management while limiting expenditures and maximizing the quality of the outcome**

Awareness, early intervention and condition management decrease overall health care costs

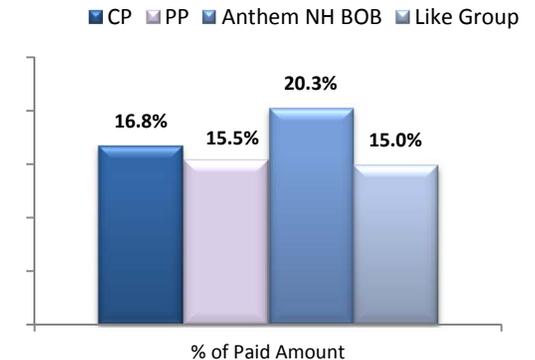
Demographics Highlights

- **3,066 total average members in the current period; compared to 3,144 average members in the prior period**
- Highest concentration of membership for females is located in the 45-54 age band, followed by the 15-24 age band
- Highest concentration of membership for males is also located in the 45-54 age band, followed closely by the 55-64 age band
- Employees accounted for 52.5% of medical expenses, followed by Spouses with 30.1%, and Children with 17.4%
 - Subscriber medical PMPM = \$546.58, up 9.9% Like Group: \$ 493.66
 - Spouse medical PMPM costs = \$516.15, up 18.2% Like Group: \$548.29
 - Children's medical PMPM costs = \$196.93, down 7.0% Like Group: \$206.02
- The average cost of a claim in the current period is \$5,856; compared to \$5,467 in the prior period (+7.1%) **Like Group: \$5,700**
 - The average cost of a claim for females was \$5,437 compared to the prior period of \$5,245 (+3.7%) Like Group: \$5,965
 - The average cost of a claim for males was \$6,276; compared to the prior period of \$5,690 (+10.3%) Like Group \$5,386
- 6.1% of all members, in the current period, did not utilize the Health Plan
 - 5.5% of all members, with continuous enrollment, did not utilize the Health Plan during the current period



Inpatient Costs and Utilization

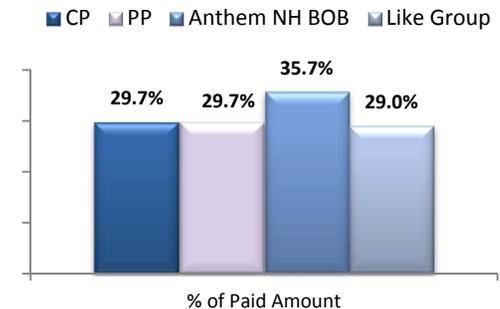
	Current Period	Prior Period	Trend/ Variation	Like Group	Variance To Like Group
Paid Amount	\$3,101,578	\$2,709,505			
Inpatient PMPM	\$84.30	\$71.81	17.4%	\$77.15	9.3%
Total Admits	213	175		257	
Admissions/1,000	69.5	55.7	24.8%	56.6	22.8%
Acute Days/1,000	255.1	203.8	25.1%	234.4	8.8%
Acute ALOS	3.67	3.66	0.2%	4.14	-11.4%
Paid/Admit	\$14,219	\$15,920	-10.7%	\$15,815	-10.1%



- Overall, City of Manchester saw a dramatic increase in PMPM costs as well as in utilization, however the average cost of an admission decreased significantly
- The types of services received (by paid amount)
 - Surgical- 61.3%; 66 admits vs 43 admits
 - Medical- 25.1%; 60 admits vs 68 admits
 - Maternity/Newborn- 11.1%; 76 admits vs 47 admits (PMPM costs **increased** 57.4% and utilization **increased** 76.1%)
 - Psychiatric/Substance Abuse- 2.5%; 11admits vs 17 admits
- Surgical PMPM costs **increased** 51.3%, and utilization **increased** 57.3%
 - Top Surgical Admits for various joint replacements, back and neck surgery, various cardiac surgeries, destruction of pancreatic lesion, cholecystectomies
- Medical PMPM costs **increased** 1.8% and utilization *decreased* 9.4%
 - Top Medical Diagnoses include chemotherapy, acute pancreatitis, septicemia, cellulitis and acute respiratory failure
- Psychiatric/Substance Abuse PMPM costs *decreased* 34.5% and utilization *decreased* 33.5%;
 - Top admissions for depression, mood disorders and alcohol withdrawal

Outpatient Cost and Utilization

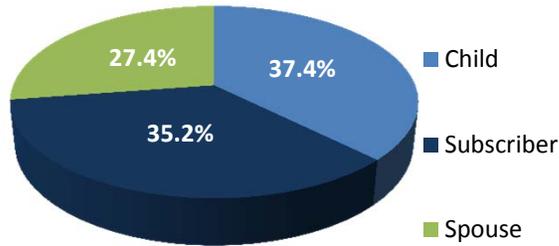
	Current Period	Prior Period	Trend/ Variation	Like Group	Variance To Like Group
Paid Amount	\$5,496,177	\$5,175,798			
Outpatient PMPM	\$149.39	\$137.17	8.9%	\$148.98	0.3%
Visits/1,000	2,729.8	2,341.5	16.6%	2,850.5	-4.2%
Average Expense/Visit	\$657	\$703	-6.6%	\$627	4.8%
Outpatient ER PMPM	\$20.16	\$20.66	-2.4%	\$21.35	-5.6%
Visits	543	516		838	
Visits/1,000	177.1	164.1	7.9%	184.6	-4.1%
Average Expense/Visit	\$1,366	\$1,511	-9.6%	\$1,388	-1.6%



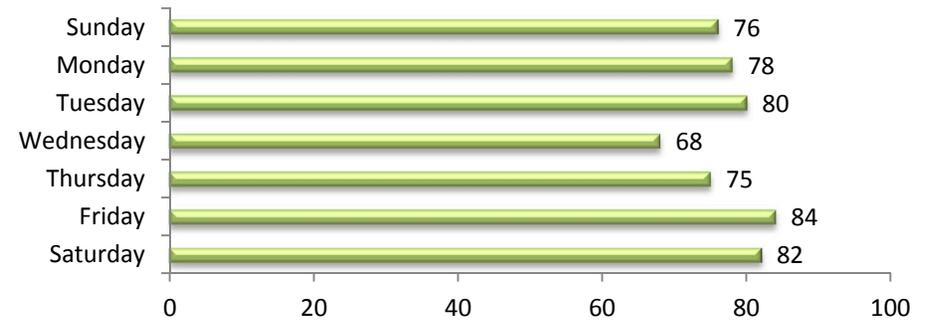
- Overall, City of Manchester had significantly more OP visits but the overall costs of those visits were down
- Top drivers include OP Surgery (\$1,345,978), Laboratory Services (\$767,494), ER (\$741,544) and Diagnostic Radiology (\$588,330)
 - OP Surgical Drivers include colonoscopies (preventive and diagnostic), biopsies, arthroscopic surgeries, lap cholecystectomies, cardiac stent placements
- Top Medical Conditions- Health Status (Chemotherapy/ Radiation Therapy), Ill-Defined Conditions (Radiology, Lab, ER), Musculoskeletal (Radiology, OP Surgery and Specialty Rx), Circulatory (Labs, Op Surgery, ER, Radiology) and Neoplasms (Labs, Specialty Rx and OP Pharmacy, Radiology)
- PMPM trend was greatest for OP Facility Pharmacy (+117.3%) and Therapeutic Radiology (+34.3%)
- Greatest Utilization trend increase : Therapeutic Radiology (+125.9%)

Emergency Room

ER Visits by Relationship



ER Visits by Day of the Week



Top Diagnoses	Visits	Paid	Avg Paid/Visit
Respiratory System/Other Chest Symptoms	93	\$166,317	\$1,788
General Symptoms**	49	\$73,625	\$1,503
Other Abdomen/Pelvis Symptoms**	59	\$51,727	\$877
Symptoms Involving Head/Neck	30	\$34,034	\$1,134
Renal/Ureteral Calculus	11	\$26,204	\$2,382
GI System Symptoms**	24	\$24,779	\$1,032
Cardiac Dysrhythmias	17	\$22,962	\$1,351
Injury NEC/NOS**	47	\$22,503	\$479
Acute Pulmonary Heart Disease	6	\$19,599	\$3,267
Fluid/Electrolyte Disease	12	\$18,663	\$1,555

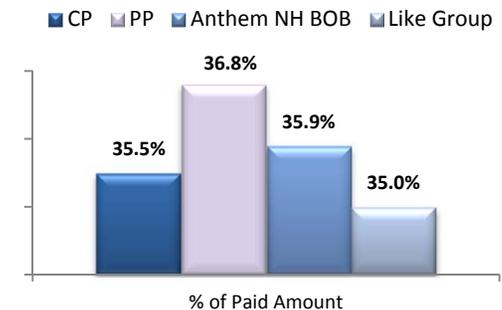
- The total paid amount for the ER was \$741,544 or 13.5% of total outpatient claims ;
 - Anthem NH BOB: 14.2%
 - Like Group: 14.3%
- Total number of ER visits was 543
- Admission rate from ER was 12.3% admissions (cost included in Inpatient claims)
- Children are the top drivers of ER visits
- Cost of care in the ED decreased 9.6%
- 29.1% of all ER visits occurred on the weekend (Saturday and Sunday)

*Potential Low Intensity Visits

There are opportunities to promote Urgent Care utilization, Walk-in Centers, 24/7 NurseLine or a call to the Provider's Office

Professional Costs and Utilization

	Current Period	Prior Period	Trend/ Variation	Like Group	Variance To Like Group
Paid Amount	\$6,554,433	\$6,411,779			
Professional PMPM	\$178.16	\$169.92	4.8%	\$179.73	-0.9%
Visits/1,000	12,277.6	11,570.0	6.1%	11,863.8	3.5%
Average Expense/Visit	\$174	\$176	-1.2%	\$182	-4.4%
Primary Care PMPM	\$34.54	\$39.16	-11.8%	\$33.81	2.2%
Visits/1,000	3,421.3	3,052.0	12.1%	2,836.0	20.6%
Average Expense/Visit	\$121	\$154	-21.3%	\$143	-15.4%
Specialty Care and Other PMPM	\$143.62	\$130.76	9.8%	\$145.91	-1.6%
Visits/1000	8,856.3	8,518.0	4.0%	9,027.9	-1.9%
Average Expense/visit	\$195	\$184	5.6%	\$194	0.5%



- Overall, City of Manchester's PMPM costs and utilization increased, however Primary Care visits increased considerably, compared to the prior period
- Top drivers include Physician Non-Specialty Office Visits (\$1,185,223), Physician Non-Specialty OP Surgery (\$582,512), Physician Specialty Office Visits (\$542,543) and Physician Specialty OP Surgery (\$526,114)
- Top Medical Conditions- Health Status, Musculoskeletal System, Ill-Defined Conditions, Neoplasms and Nervous System/Sense Organs

Pharmacy Summary



Pharmacy Cost and Utilization

- Pharmacy responsible for 18.0% of overall health care spend compared to 18.0% in the prior period
- Pharmacy Plan Costs **increased** by 8.0% to \$3,363,816
- Plan Costs PMPM **increased** 10.5% to \$91.08 PMPM
 - PMPM is 12.1% higher than the NH BOB Norm, but 15% lower than Like Groups (-15.0% and -14.6% respectively)
- Utilization remained flat and continues to be higher than NH BOB Norm but lower than the Like Groups
- Generic Fill Rate (GFR) **increased** 1.6% to 81.1%
 - GFR is higher than the NH BOB Norm and Like Group #2, yet slightly lower than Like Group #1
 - 1.2% of scripts filled as brand when a generic is available
 - 96.1% of scripts filled as Tier 1 or Tier 2 drugs
- Member Cost Share is 14.2%, just below NH BOB Norm and considerably higher than Like Group
- Specialty Percent of Plan Cost has **increased** to 26.3% of all drug spend
 - Lower NH BOB Norm and Like Group #1, but higher than Like Group #2

	7/13 - 6/14	7/12 - 6/13	% Change	NH BOB	Like Group #1	Like Group #2
Number of Unique Utilizers	2,508	2,644	-5.1%			
Pct Mbrs Utilizing Benefit	81.5%	84.0%	-2.5%	68.1%	84.0%	85.2%
Total Pharmacy Plan Costs	\$3,363,816	\$3,115,434	8.0%			
Total Rxs	33,459	34,256	-2.3%			
Plan Costs PMPM	\$91.08	\$82.44	10.5%	\$81.26	\$107.13	\$106.59
Plan Costs per Rx	\$100.54	\$90.95	10.5%	\$95.38	\$96.77	\$106.77
Number of Rxs PMPM	0.91	0.91	-0.1%	0.85	1.11	1.00
Generic Fill Rate	81.1%	79.5%	1.6%	80.9%	81.5%	79.9%
Member Cost Share	14.2%	15.9%	-1.8%	14.9%	7.8%	9.1%
Specialty Percent of Plan Cost	26.3%	24.7%	1.6%	31.5%	26.8%	19.3%

Pharmacy Cost & Utilization – Specialty

- Specialty drugs are medications used to treat rare, chronic and/or progressive conditions
 - Medications often require specialty handling and are usually much more expensive than traditional medications
 - Delivery methods vary – oral, injected, infused, inhaled
 - Members fill medications and participate in care management programs through a participating Specialty Pharmacy
- Specialty Drugs make up nearly 27% of the total pharmacy spend in the current period
 - \$115,000 **more** dollars spent on specialty drugs in the current period vs. prior period
- 6.2% of members filled some kind of specialty drug
- Plan Cost PMPM for Specialty **increased** 17.5% to \$23.92 in the current period
 - PMPM is lower than the NH BOB Norm and Like Group #1 but 16.4% higher than Like Group #2
- Average cost of a specialty drug is \$1,416 for the current period vs. \$1,351 in the prior period, a 4.8% **increase**

	All Drugs	Non-Specialty	Specialty	NH BOB	Like Group #1	Like Group #2
Number of Unique Utilizers	2,508	2,501	190			
Pct Members Utilizing	81.5%	81.3%	6.2%	4.3%	5.6%	6.1%
Total Plan Costs	\$3,363,816	\$2,480,508	\$883,309			
Total Rxs	33,459	32,835	624			
Plan Cost PMPM	\$91.08	\$67.16	\$23.92	\$25.60	\$28.72	\$20.55
Plan Cost per Rx	\$100.54	\$75.54	\$1,415.56	\$1,438.80	\$1,734.06	\$1,314.91
PMPM Trend	10.5%	8.2%	17.5%	19.7%	26.8%	31.0%
Member Cost Share	14.2%	17.5%	3.0%	3.7%	1.3%	1.6%

Top Specialty Indications by Cost

- The largest trend is in Blood Cell Deficiency, at 116.9%
 - Driven by Neulasta - the standard of care treatment for low white blood cell count in patients undergoing chemotherapy
- Negative trend for Inflammatory Conditions, at -9.9%
 - Driven by lower utilization and patients
- Two new Conditions in the Top 10 this period: Blood Modifying and Hereditary Angioedema

Top Specialty Indications by Plan Cost													
7-13 - 6-14							7-12 - 6-13					% Change	
Overall Rank	Overall Peer Rank	Indication	Rxs	Patients	Plan Cost	Plan Cost PMPM	Overall Rank	Rxs	Patients	Plan Cost	Plan Cost PMPM	Plan Cost PMPM	
1	2	INFLAMMATORY CONDITIONS	63	16	\$360,607	\$9.76	1	67	18	\$409,602	\$10.84	-9.9%	
3	4	MULTIPLE SCLEROSIS	26	5	\$273,587	\$7.41	5	16	5	\$201,911	\$5.34	-38.6%	
20	5	CANCER	198	31	\$41,762	\$1.13	26	175	31	\$30,298	\$0.80	41.0%	
16	23	ANTICOAGULANT	31	12	\$40,407	\$1.09	28	18	12	\$22,313	\$0.59	85.3%	
13	15	SKIN CONDITIONS	4	1	\$29,136	\$0.79	13	4	1	\$25,145	\$0.67	18.6%	
21	37	BLOOD MODIFYING	1	1	\$24,659	\$0.67							
30	35	TRANSPLANT	41	6	\$22,931	\$0.62	29	44	7	\$23,964	\$0.63	-2.1%	
35	47	BLOOD CELL DEFICIENCY	4	1	\$17,115	\$0.46	42	2	1	\$8,074	\$0.21	116.9%	
37	54	HEREDITARY ANGIOEDEMA	2	1	\$16,456	\$0.45							
6	9	ASTHMA	8	1	\$12,423	\$0.34	6	11	1	\$15,741	\$0.42	-19.3%	
Total Top 10:			378		\$839,082	\$22.72		338		\$737,048	\$19.50	16.5%	
Differences Between Periods:			40		\$102,034	\$3.21							

Peer = Express Scripts Peer 'Employer' market segment

Top Specialty Drugs by Cost

- Represent 20.9% of your total Plan Cost and comprise 5 indications
- Humira and Enbrel continue to be the Top 2 drugs overall for your population during this period
- Multiple Sclerosis medications dominate the Top 10
 - Compliance is highly desired and infer effective therapy, likely keeping members out of the medical settings

Top Specialty Drugs by Plan Cost														
7-13 - 6-14										7-12 - 6-13				% Change
Overall Rank	Overall Peer Rank	Brand Name	Indication	Rxs	Patients	Plan Cost	Plan Cost / Rx	Plan Cost PMPM	Overall Rank	Rxs	Patients	Plan Cost / Rx	Plan Cost PMPM	Plan Cost PMPM
1	2	HUMIRA	INFLAMMATORY CONDITIONS	26	8	\$190,253	\$7,317	\$5.15	1	37	10	\$6,607	\$6.47	-20.4%
2	4	ENBREL	INFLAMMATORY CONDITIONS	36	8	\$157,735	\$4,382	\$4.27	2	25	8	\$5,987	\$3.96	7.8%
4	6	COPAXONE	MULTIPLE SCLEROSIS	7	2	\$71,304	\$10,186	\$1.93	15	3	2	\$13,125	\$1.04	85.3%
7	29	GILENYA	MULTIPLE SCLEROSIS	4	1	\$58,692	\$14,673	\$1.59	8	4	1	\$14,001	\$1.48	7.2%
10	39	AVONEX PEN	MULTIPLE SCLEROSIS	4	1	\$53,043	\$13,261	\$1.44	6	5	1	\$11,571	\$1.53	-6.2%
15	32	REBIF	MULTIPLE SCLEROSIS	3	1	\$42,102	\$14,034	\$1.14	10	4	1	\$12,170	\$1.29	-11.5%
16	38	ENOXAPARIN SODIUM	ANTICOAGULANT	31	12	\$40,407	\$1,303	\$1.09	34	14	10	\$1,451	\$0.54	103.5%
21	13	TECFIDERA	MULTIPLE SCLEROSIS	5	1	\$34,505	\$6,901	\$0.93						
25	26	STELARA	SKIN CONDITIONS	4	1	\$29,136	\$7,284	\$0.79	25	4	1	\$6,286	\$0.67	18.6%
30	889	KALBITOR	BLOOD MODIFYING	1	1	\$24,659	\$24,659	\$0.67						
Total Top 10:				121		\$701,836	\$5,800	\$19.00		96		\$6,682	\$16.98	11.9%
Difference Between Periods:				25		\$60,338	-\$882	\$2.03						

Peer = Express Scripts Peer 'Employer' market segment

Top 10 Non-Specialty Indications by Cost

- The largest trend is for Contraceptives, at 28.5%
 - Primary driver is the increased cost of medications
- The largest negative trend is in Depression, at -6.4%
 - Increased Generic Fill Rate
- Most prevalent conditions are: Pain, High Blood Pressure/Heart Disease, Depression, High Blood Cholesterol and Ulcer Disease

REPRESENT
65.8%
OF YOUR TOTAL
PLAN COST

Top Non-Specialty Indications by Plan Cost														
7-13 - 6-14									7-12 - 6-13					% Change
Rank	Peer Rank	Indication	Rxs	Patients	Plan Cost	Generic Fill Rate	Plan Cost PMPM	Rank	Rxs	Patients	Generic Fill Rate	Plan Cost PMPM	Plan Cost PMPM	
1	1	DIABETES	1,571	140	\$328,959	38.3%	\$8.91	1	1,527	144	40.1%	\$7.07	26.0%	
2	10	ULCER DISEASE	1,827	389	\$239,023	79.4%	\$6.47	2	1,896	422	76.1%	\$5.99	8.0%	
3	11	ATTENTION DISORDERS	967	126	\$238,622	51.8%	\$6.46	3	921	127	48.0%	\$5.66	14.2%	
4	9	ASTHMA	1,244	384	\$166,970	24.7%	\$4.52	4	1,303	405	25.6%	\$4.15	8.9%	
5	3	HIGH BLOOD CHOLESTEROL	1,893	407	\$141,331	83.7%	\$3.83	6	2,032	443	82.4%	\$3.44	11.3%	
6	12	DEPRESSION	2,888	469	\$138,033	93.9%	\$3.74	5	2,820	477	88.2%	\$3.99	-6.4%	
7	8	HIGH BLOOD PRESS/HEART DISEASE	3,337	498	\$111,834	92.9%	\$3.03	7	3,323	526	92.1%	\$2.76	9.5%	
8	18	CONTRACEPTIVES	1,639	284	\$95,540	87.7%	\$2.59	10	1,695	291	83.4%	\$2.01	28.5%	
9	13	MENTAL/NEURO DISORDERS	263	57	\$93,501	65.0%	\$2.53	8	289	51	62.6%	\$2.25	12.6%	
10	14	PAIN	2,150	627	\$78,816	94.7%	\$2.13	9	2,298	678	92.6%	\$2.14	-0.4%	
Total Top 10:			17,779		\$1,632,629	78.2%	\$44.20		18,104		76.1%	\$39.47	12.0%	
Differences Between Periods:			-325		\$141,163	2.1%	\$4.74							

Peer = Express Scripts Peer 'Employer' market segment



Top 15 Non-Specialty Drugs by Cost

- Represent 44.0% of your total Plan Cost and comprise 12 indications
- Nexium continues to be the Top Non-Specialty Drug for your population
 - 20 mg version available OTC while 40 mg prescription dose should be available as a generic in a few months
- Largest increase is for Lantus Solostar, a brand of insulin, a 57.5%
 - Increase driven by increased utilization and increased drug price
- Largest decrease is for Cymbalta, at -37.1%
 - Large decrease in utilization due to drug became generic last year

Top Drugs by Plan Cost													
7-13 - 6-14								7-12 - 6-13				% Change	
Rank	Peer Rank	Brand Name	Indication	Rxs	Patients	Plan Cost	Plan Cost / PMPM	Rank	Rxs	Patients	Plan Cost / PMPM	Plan Cost / PMPM	Plan Cost / PMPM
3	3	NEXIUM	ULCER DISEASE	310	66	\$125,153	\$3.39	3	364	75	\$3.16	\$3.16	7.3%
5	14	ADVAIR DISKUS	ASTHMA	204	49	\$65,375	\$1.77	5	203	61	\$1.63	\$1.63	8.5%
6	131	LANSOPRAZOLE	ULCER DISEASE	266	59	\$64,796	\$1.75	4	285	68	\$1.63	\$1.63	7.5%
8	7	ABILIFY	MENTAL/NEURO DISORDERS	57	15	\$55,947	\$1.51	11	64	16	\$1.28	\$1.28	18.8%
9	5	CRESTOR	HIGH BLOOD CHOLESTEROL	194	51	\$54,647	\$1.48	9	189	54	\$1.31	\$1.31	13.1%
11	23	VYVANSE	ATTENTION DISORDERS	251	33	\$51,052	\$1.38	16	232	40	\$1.03	\$1.03	34.3%
12	10	HUMALOG	DIABETES	99	17	\$50,331	\$1.36	18	83	20	\$0.91	\$0.91	49.4%
13	9	LANTUS SOLOSTAR	DIABETES	93	26	\$49,749	\$1.35	20	87	19	\$0.86	\$0.86	57.5%
14	28	DEXTROAMPHETAMINE-AMPHETAMI	ATTENTION DISORDERS	208	29	\$43,217	\$1.17	13	183	34	\$1.12	\$1.12	4.2%
17	44	VICTOZA 3-PAK	DIABETES	54	15	\$38,559	\$1.04	19	45	10	\$0.91	\$0.91	14.9%
18	30	SYMBICORT	ASTHMA	122	33	\$38,141	\$1.03	17	124	36	\$0.92	\$0.92	12.1%
19	37	MODAFINIL	ATTENTION DISORDERS	21	5	\$35,651	\$0.97	26	20	5	\$0.65	\$0.65	49.1%
20	12	CYMBALTA	DEPRESSION	105	25	\$34,768	\$0.94	7	228	35	\$1.50	\$1.50	-37.1%
22	15	ANDROGEL	HORMONAL SUPPLEMENTATION	81	14	\$33,645	\$0.91	22	78	17	\$0.74	\$0.74	22.7%
23	35	LANTUS	DIABETES	77	12	\$32,001	\$0.87	31	68	13	\$0.58	\$0.58	50.5%
Total Top 15:				2,142		\$773,032	\$20.93		2,253		\$18.21	\$18.21	20.9%

Peer = Express Scripts Peer 'Employer' market segment

Upcoming Patent Expirations

Every 1% increase in GFR leads to Plan Cost savings of

2%

Increased GFR this period saved you

\$93,884

Improve your GFR to maximum potential of

89.3%

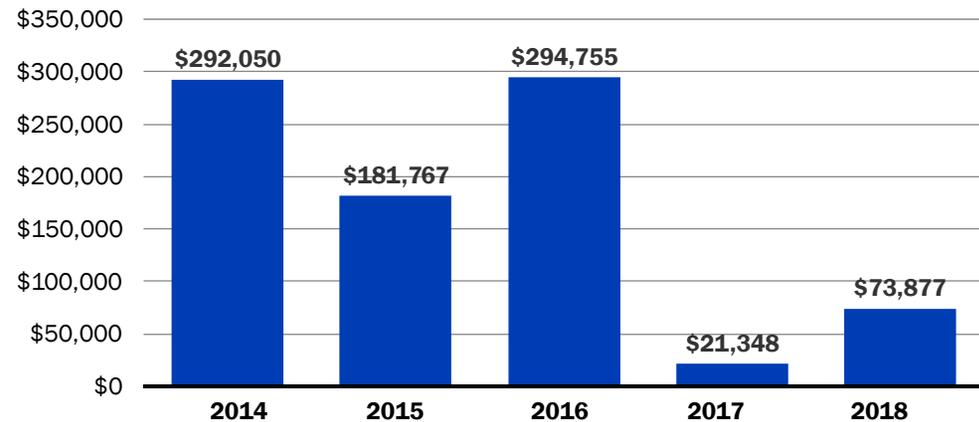
Based on your current utilization
\$863,798
 in brand drugs are losing patent protection by 2018

Savings calculation excludes Specialty drugs

Top Drugs Scheduled to Lose Patent Protection through 2018

Drug Name	Indication	Scheduled Release Year	Plan Cost Rank	Plan Cost PMPM	Plan Cost / Rx
HUMIRA	INFLAMMATORY CONDITIONS	2016	1	\$5.15	\$7,317.44
NEXIUM	ULCER DISEASE	2014	3	\$3.33	\$410.75
COPAXONE	MULTIPLE SCLEROSIS	2014	4	\$1.55	\$9,537.05
ABILIFY	MENTAL/NEURO DISORDERS	2015	8	\$1.51	\$981.52
CRESTOR	HIGH BLOOD CHOLESTEROL	2016	9	\$1.48	\$281.69
DIOVAN	HIGH BLOOD PRESS/HEART DISEAS	2014	29	\$0.70	\$214.86
ANDROGEL	HORMONAL SUPPLEMENTATION	2015	22	\$0.69	\$400.13
CELEBREX	PAIN AND INFLAMMATION	2015	34	\$0.56	\$294.17
CAPECITABINE	CANCER	2014	36	\$0.54	\$2,474.27
NEULASTA	BLOOD CELL DEFICIENCY	2015	42	\$0.46	\$4,278.76

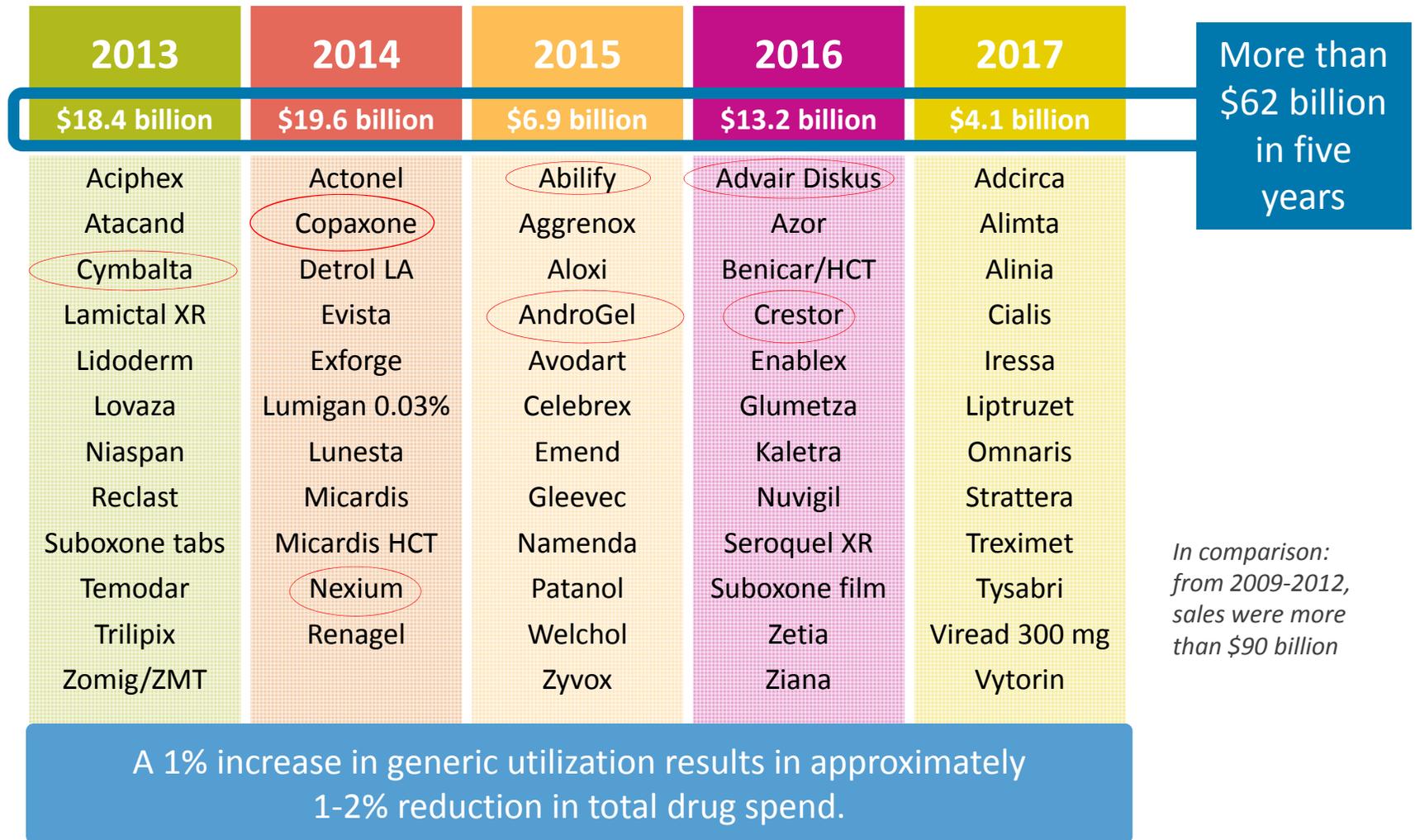
Spend on Brand Drugs Losing Patent Protection



Expiration dates based on current status and may change due to litigation, patent challenges, etc.

Key Brand Name Drugs Losing Patient Protection

Annual U.S. Sales of Key Brand Drugs Expected to Lose Patent Protection



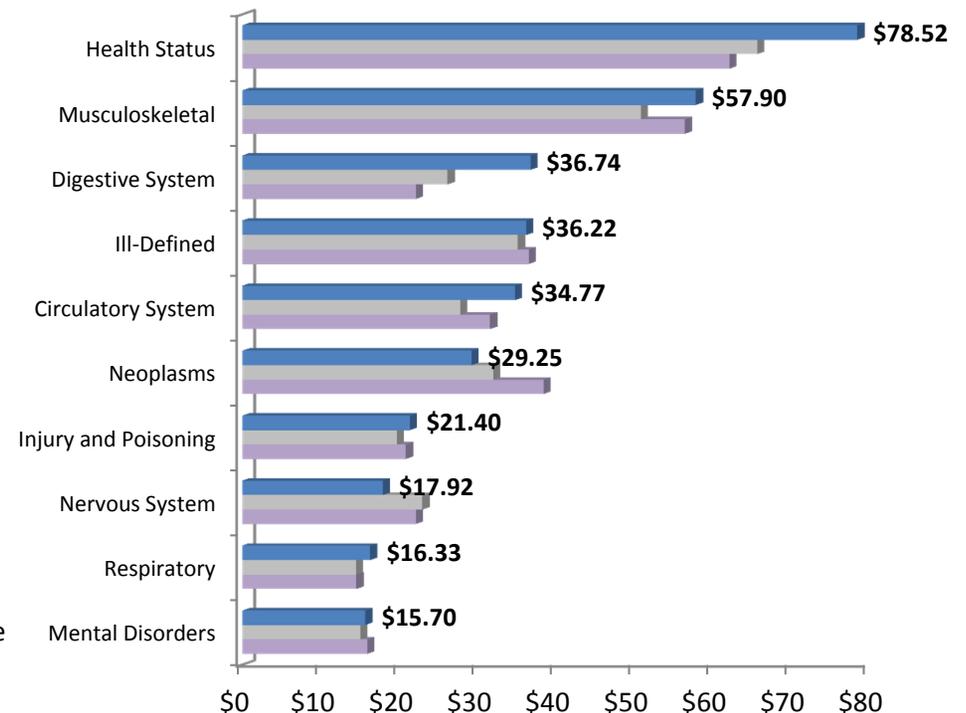
Top Ten Health Condition Categories

Top 10 Health Conditions	Total Paid	Percent of Total	Unique Claimants
Health Status	\$2,888,915	19.1%	2,546
Musculoskeletal System	\$2,129,988	14.1%	1,164
Digestive System	\$1,351,779	8.9%	434
Signs & Symptoms	\$1,332,474	8.8%	1,421
Circulatory System	\$1,279,104	8.4%	517
Neoplasms	\$1,076,220	7.1%	359
Injury & Poisoning	\$787,234	5.2%	792
Nervous System/Sense Organs	\$659,234	4.4%	1,057
Respiratory System	\$600,759	4.0%	953
Mental Disorders	\$577,480	3.8%	587

59.3% of Total Medical Paid

Top Health Condition PMPMs

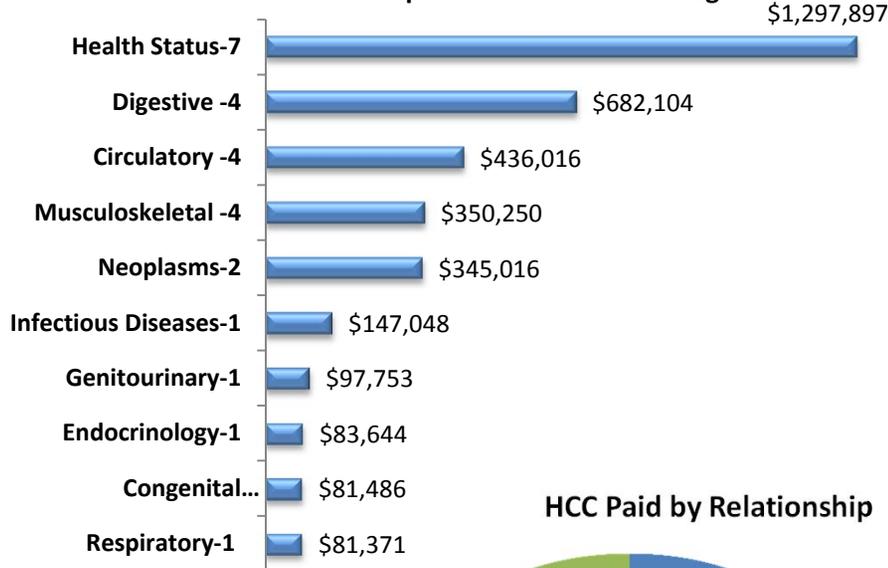
■ Current Period ■ Prior Period ■ Like Group



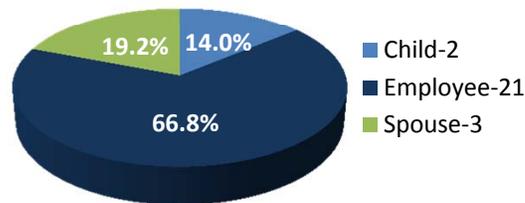
- The Top 10 Health Conditions accounted for **83.8%** of the Total Medical Paid in the Current Period; the same conditions accounted for 81.8% of the Total Medical Paid in the Prior Period
- Overall PMPM for the Top 10 conditions increased 11.2% from the Prior Period
- PMPM costs increased for 8 out the 10 conditions
 - Digestive System up 40.3%
 - Circulatory System up 25.0%
 - Health Status up 19.5%
 - Musculoskeletal System up 13.9%
 - Respiratory system up 12.5%
- Employees are the top drivers of PMPM costs for most health condition categories
- Spouses are the key driver of PMPM costs for the Digestive System and are comparable to the PMPM costs for Employees for the Musculoskeletal System
- PMPM costs for Neoplasms and Nervous System/Sense Organs were lower compared to the Like Group Comparison

High Cost Claimants \geq \$75K

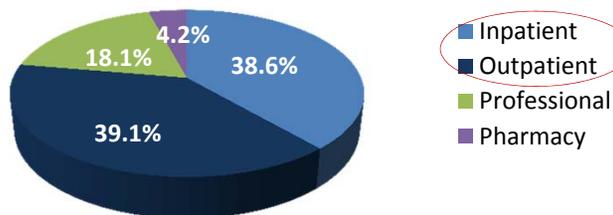
Top Health Conditions Categories



HCC Paid by Relationship

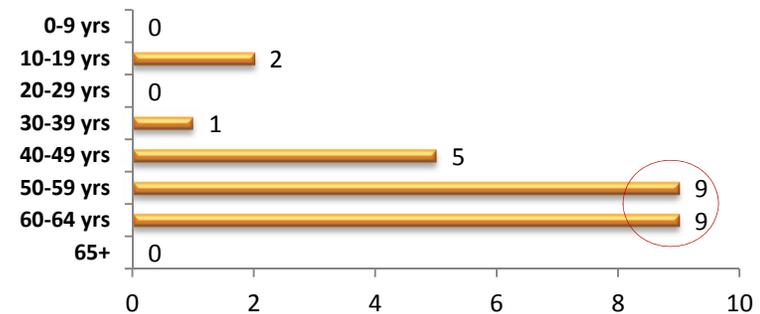


HCC Paid by Setting



- There are 26 members whose claims total \$3,602,582 which represents 19.5% of the total expenditures in the Current Period
 - Prior Period had 17 members whose claims totaled \$3,059,986 representing 17.6% of the total spend
 - HCC trend increased 20.8% (\$97.92 vs \$81.09)
- Health Status Categories includes chemotherapy and/or radiation therapy for various cancers
 - This category accounts for 36.0% of the total HCC spend
 - Neoplasms alone account for an additional 9.6% of the HCC spend
- Digestive System conditions account for 18.9% of the total HCC spend: Diseases of the Pancreas, Regional Enteritis and Intestinal Obstruction
- 3 members were included on the HCC roster for both the current and prior periods
- 2 members have termed as of June 30, 2014

Number of HCCs By Age Bands



Top Five Conditions Diagnoses Drivers

★ Denotes a diagnosis where High Cost activity is having a major cost impact on Health Condition

Health Conditions
Health Status
Musculoskeletal
Digestive System
Signs & Symptoms
Circulatory System

Top Health Status Diagnoses	Paid Amount
★ Encounter Procedure/Aftercare	\$966,766
Screening-Malignant Neoplasm	\$473,537
Special Examination	\$295,381

Top Musculoskeletal Diagnoses	Paid Amount
★ Osteoarthritis	\$532,746
★ Joint Disorders	\$302,108
★ Back Disorder	\$224,910

Top Digestive System Diagnoses	Paid Amount
★ Disease of Pancreas	\$272,708
Cholelithiasis	\$134,509
Disease of Esophagus	\$126,349

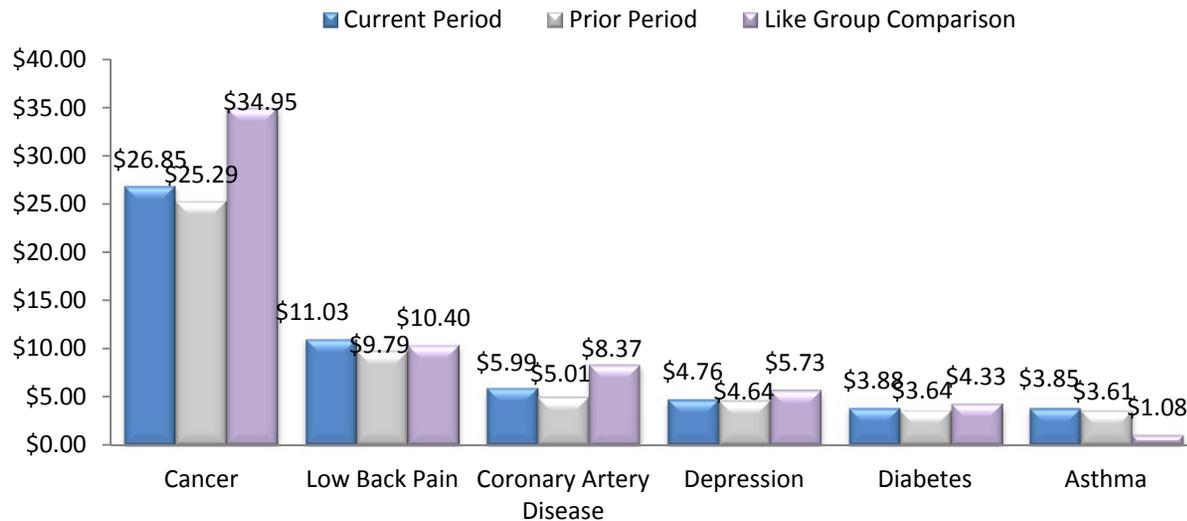
Top Signs & Symptoms Diagnoses	Paid Amount
★ Respiratory System/Chest Symptoms	\$351,055
General Symptoms	\$216,349
★ Abdomen/Pelvis Symptoms	\$207,641

Top Signs & Symptoms Diagnoses	Paid Amount
★ Endocardial Disease	\$250,478
★ Chronic Ischemic Heart Disease	\$208,232
Cardiac Dysrhythmias	\$146,602

Top Chronic Conditions

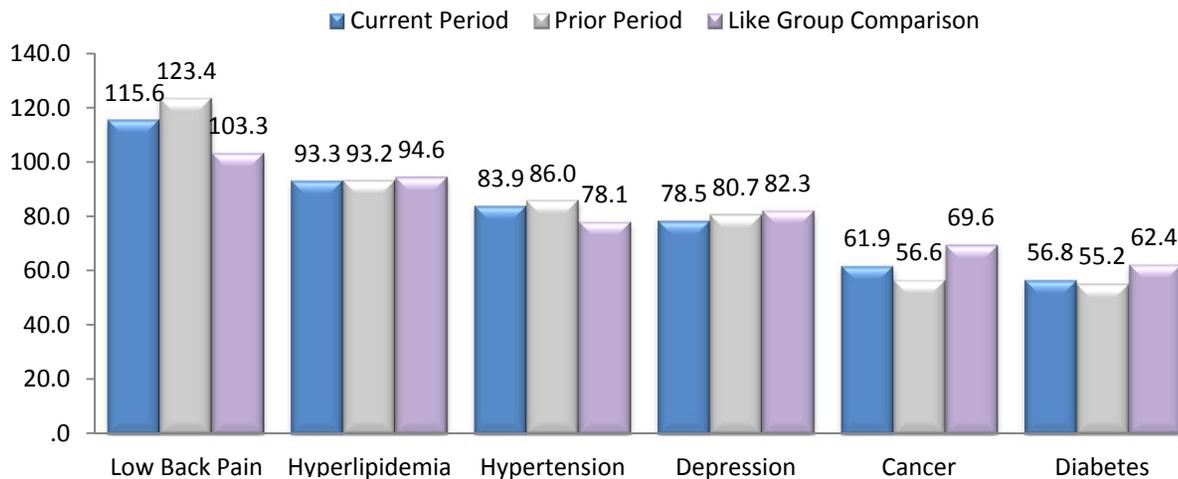
Per Member Per Month

Current Period: April 2013-March 2014, Paid Through June 2014
 Prior Period: April 2012-March 2013, Paid through June 2013



- The Employee is the key PMPM cost driver for the majority of all chronic conditions
- However, for Depression, all groups of membership contribute significantly to the overall PMPM costs
- Overall, PMPM costs increased 9.3% for all chronic conditions
- CITY OF MANCHESTER PMPM costs are higher than the Like Group Comparison for Low Back Pain and Asthma

Prevalence Per 1000



- Cancer, LBP, Diabetes, Hypertension and Depression are common threads for both costs and prevalence
- Prevalence rate for top 6 chronic conditions decreased 1.1% compared to the prior period
- Prevalence rates for the top 6 conditions are lower than the Like Group Comparison for Hyperlipidemia, Depression, Cancer and Diabetes

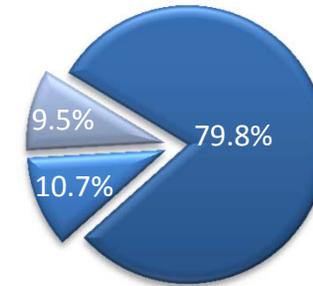
360 Program Summary

For the period ending June 30, 2014, prevalence rates were **higher** than the Anthem Reference Population for **Asthma and COPD**

The prevalence rates for Asthma, COPD and Heart Failure decreased from the prior period; Diabetes and CAD remained constant

- 60 new members were identified during this reporting period
- Of the 599 members under management during the current period, 20.2% (121 members) were targeted for outreach by a nurse case manager, **below** our Anthem reference population rate of 32.9% for moderate and high risk
- Of the 665 outbound calls made to members, 62.2% were for clinical intervention and 36.3% were for enrollment and 1.5% for other reasons
- Eight members were enrolled in the Future Moms Program
 - 7 registered in the 1st trimester; only 3 completed an assessment
- Twenty unique members utilized the 24/7 NurseLine
 - Most frequent nurse recommendation was to consult a Healthcare Professional and Seek Urgent Care

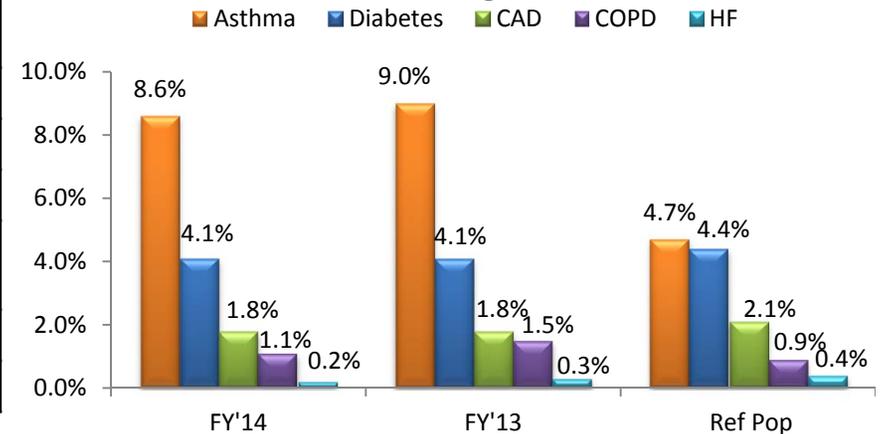
**City of Manchester
Case Risk Stratification
N =599**



■ Low Risk ■ Moderate Risk ■ High Risk

Condition	Total Members Under Management During The Reporting Period
Asthma	315 (298)
Diabetes	145 (145)
Coronary Artery Disease (CAD)	73 (71)
Chronic Obstructive Pulmonary Disease (COPD)	55 (60)
Heart Failure (HF)	11 (10)
Total as of 06.30.14 (as of 06.30.13)	599 (584)

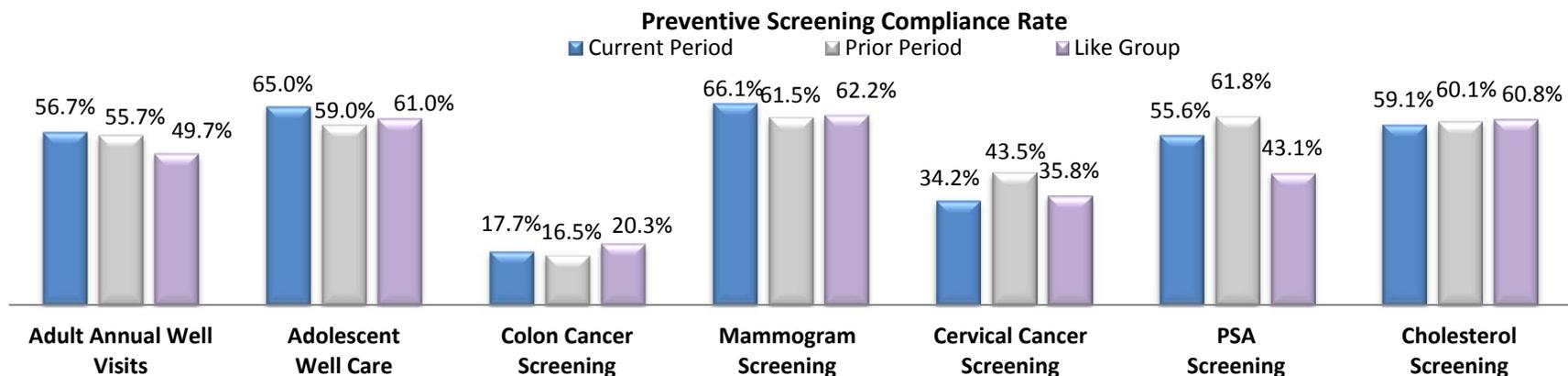
ConditionCare Programs - Prevalence



Preventive Care

Current Period: April 2013-March 2014, Paid Through June 2014
 Prior Period: April 2012-March 2013, Paid through June 2013

Category	Eligible Members	Members Receiving Care	Current Percent Compliance	Prior Percent Compliance	Like Group Comparison	WLP Benchmark % Compliance
Adult Annual Well Visits	2,029	1,151	↑ 56.7%	55.7%	49.7%	22.7%
Adolescent Well Care	457	297	↑ 65.0%	59.0%	61.0%	30.2%
Category	Eligible Members	Members Receiving Care	Current Percent Compliance	Prior Percent Compliance	Like Group Comparison	WLP Benchmark % Compliance
Colon Cancer Screening	891	158	↑ 17.7%	16.5%	20.3%	17.0%
Mammogram Screening	661	437	↑ 66.1%	61.5%	62.2%	42.6%
Cervical Cancer Screening	994	340	↓ 34.2%	43.5%	35.8%	32.0%
PSA Screening	487	271	↓ 55.6%	61.8%	43.1%	32.9%
Cholesterol Screening	1,432	846	↓ 59.1%	60.1%	57.5%	38.0%

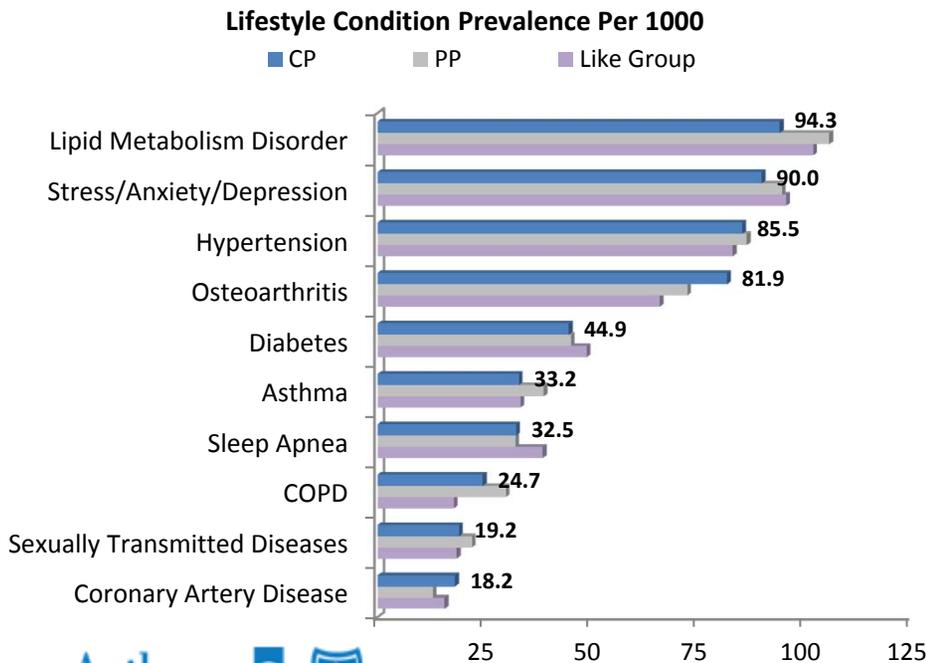


Lifestyle Related Conditions

Current Period: June-2013-May 2014, Paid Through June 2014
 Prior Period: June-2012-May 2013, Paid Through June 2013

Top Lifestyle Conditions	CP PMPM	PP PMPM	Trend	Like Group
Osteoarthritis	\$18.97	\$16.01	18.5%	\$14.21
Coronary Artery Disease	\$11.11	\$5.44	104.2%	\$7.98
Pancreatitis	\$7.07	\$1.31	439.7%	\$0.89
Cholecystitis/Cholelithiasis	\$4.52	\$2.03	122.7%	\$2.15
Asthma	\$3.93	\$3.70	6.2%	\$1.00
Stress/Anxiety/Depression	\$3.73	\$4.36	-14.4%	\$4.19
Sleep Apnea	\$3.54	\$4.37	-19.0%	\$3.33
Cancer - Prostate	\$2.86	\$3.43	-16.6%	\$1.23
Diabetes Mellitus, Non-Insulin Dependent	\$2.51	\$2.05	22.4%	\$3.28
Venous Embolism/Thrombosis	\$2.48	\$0.58	327.6%	\$0.55

- A lifestyle related condition is one that is partially or completely caused by a lifestyle risk factor such as obesity, tobacco use, or lack of physical activity; targeted education programs can reduce the future risk of Lifestyle Conditions
- Common themes for this population revolve around Osteoarthritis, Hypertension, Diabetes, Respiratory Conditions, and Stress/Anxiety/Depression



Lifestyle Condition Description	Obesity	Lack of Physical Activity	Tobacco Use	Alcohol Use	Poor Nutrition Practice	Uncontrolled Lipids	Uncontrolled Hypertension	Stress/Anxiety/Depression
Asthma			X					
Cancer – Breast	X	X	X	X	X			
Coronary Artery Disease	X	X	X		X	X	X	X
Cerebrovascular Disease	X	X	X	X	X	X	X	X
Cholecystitis/ Cholelithiasis	X							
COPD			X					
Diabetes	X	X			X	X		
Hypertension	X	X		X	X		X	X
Lipid Metabolism Disorders	X	X			X	X		
Osteoarthritis	X	X						
Overweight/Obesity	X	X			X	X		X
Sleep Apnea	X							
Stress/Anxiety/Depression	X	X						X

Key Findings and Recommendations

- 1) Primary Care Physician Relationship Building Campaign: Promote and educate about importance of having a PCP for annual exams, preventive exams, sick visits and screenings- 6.1% of total members during FY 2014 did not submit a claim
- 2) **Preventive Care:** Promotion of early identification, diagnosis, treatment and management for improved quality of outcome, cost containment
- 3) Promotion of Routine Exam Schedules for all ages available from Anthem in PDF format and electronically for membership
- 4) Refresher training on utilizing health benefit plans to greatest potential, especially as it relates to annual exams and wellness visits
- 5) **Emergency Room Campaign:** Provide education regarding how / when to use ER and Urgent Care Centers (13.5% of all Outpatient expenses were for ER services)
- 6) Children have the highest utilization of ER visits (37.4%) - Educate Employees on NurseLine availability, Urgent Care Centers, Call to Provider offices/Pediatrician
- 7) **Continue to promote Chronic Health Conditions Campaign** - Know your health care needs, family history, understand ways to stay healthy / proper management with PCP- Evidence of Diabetes, Hypertension, Cancer, COPD and Asthma in CITY of MANCHESTER'S population
- 8) **Advertise Future Moms program** to encourage enrollment and participation- 76 Maternity IP admits and 8 members registered
- 9) Onsite Smoking Cessation and/or Weight Management / Exercise Campaigns to promote healthy lifestyle choices, improve quality of life, and reduce costly, chronic health condition expenditures
- 10) Educate on importance of Sun Screen ,Hats, Eye Wear, Seat Belts, Bike Helmets, Body Mechanics, Ergonomics
- 11) **Promote and share EAP Program** offerings frequently and seasonally – Depression is a common thread found within the claims data; evidence of alcohol use and treatment noted; usually a co-morbid condition with chronic, progressive and catastrophic diagnoses
- 12) Promotion of Dental Health Screenings / Cleanings x2/year- as a routine health maintenance activity
- 13) TWS Campaign on Health Conditions and necessary tests to appropriately manage health status to maximum level - Disease of the Month, Diabetes, Breast Cancer, Heart Health, Diet and Exercise, Osteoporosis
- 14) **Consider inclusion of spouses in any wellness initiatives** due to utilization and possibly decision makers of the family unit and high utilization patterns (30.1% of all claims are incurred by spouses)
- 15) **Musculoskeletal:** Importance of proper diet, good nutrition, daily exercise , particularly for joint health, and weight management- **38.0%** of total membership with claims have Ortho issues (1,164 members)
- 16) **Circulatory:** Dietary changes can impact blood pressure, cholesterol levels, cardiac output, respiratory function, mental health outlook -**16.9%** of total membership with claims have a Cardiology issue (517 members)
- 17) **Neoplasms:** Early detection is the key to better outcomes- Lymphoma, Leukemia and Prostate Cancer are the top types of cancer in this population- 359 members have or have had a benign or malignant tumor treated in the current period. Routine provider visits as well as recommended screenings can impact the members overall health, quality as well as quantity of life
- 18) **Endocrinology:** **22.2%** of total membership had an Endocrinology issue (682 members) - this is the health condition for Diabetes, Obesity, High Cholesterol/Triglycerides

Appendix

Emergency Department: Decision Tree

	Retail health clinic	Walk-in doctor's office	Urgent care center	Emergency room
Animal bites			0	<ul style="list-style-type: none"> o Any life-threatening or disabling condition o Sudden or unexplained loss of consciousness o Chest pain, numbness in face, arm or leg; difficulty speaking o Severe shortness of breath o High fever with stiff neck, mental confusion or difficulty breathing o Coughing up or vomiting blood o Cut or wound that won't stop bleeding o Major injuries o Possible broken bones
Stitches			0	
X-rays			0	
Back pain			0	
Mild asthma		0	0	
Minor headaches		0	0	
Sprains, strains		0	0	
Nausea, vomiting, diarrhea		0	0	
Bumps, cuts, scrapes	0	0	0	
Burning with urination	0	0	0	
Coughs, sore throat	0	0	0	
Ear or sinus pain	0	0	0	
Eye swelling, irritation, redness or pain	0	0	0	
Minor allergic reactions	0	0	0	
Minor fevers, colds	0	0	0	
Rashes, minor bumps	0	0	0	
Vaccinations	0	0	0	
Who usually provides care?	Physician assistant or nurse practitioner	Family practice doctor	Internal medicine, family practice, pediatric and ER doctors	ER doctors and nurses

Top Diagnosis: Health Status

Health Status	# of Members	Total Paid Amount	Average Cost/Member
Encounter Procedure/Aftercare	111	\$966,766	\$8,710
Screening-Malignant Neoplasm	623	\$473,537	\$760
Special Examinations	1,125	\$295,381	\$263
General Medical Exam	1,208	\$258,988	\$214
Health Supervision Child	620	\$176,342	\$284
Rehabilitation Procedure	52	\$102,736	\$1,976
Single Liveborn	46	\$92,357	\$2,008
Hx of Disease NEC**	61	\$89,419	\$1,466
Contraceptive Management	109	\$80,039	\$734
Other Orthopedic Aftercare	48	\$36,428	\$759

**NEC=Not elsewhere Classified

Top Diagnosis: Musculoskeletal System

Musculoskeletal System	# of Members	Total Paid Amount	Average Cost/Member
Osteoarthritis et al	158	\$532,746	\$3,372
Joint Disorder NEC & NOS**	464	\$302,108	\$651
Back Disorder NEC & NOS**	295	\$224,910	\$762
Intervertebral Disc Disease	122	\$181,994	\$1,492
Other Cervical Spine Disease	155	\$159,661	\$1,030
Spondylosis	72	\$115,743	\$1,608
Peripheral Enthesopathies	168	\$108,747	\$647
Other Disease Synova/Tendon/Bursa	89	\$91,017	\$1,023
Other Soft Tissue Disease	290	\$82,759	\$285
Other Joint Derangement	25	\$72,179	\$2,887

**NEC=Not elsewhere Classified

**NOS=Not Otherwise Specified

Top Diagnosis: Digestive System

Digestive System	# of Members	Total Paid Amount	Average Cost/Member
Diseases of Pancreas	8	\$272,708	\$34,088
Cholelithiasis	25	\$134,509	\$5,380
Diseases of Esophagus	117	\$126,349	\$1,080
Regional Enteritis	7	\$108,372	\$15,482
Diverticula of Intestine	21	\$102,220	\$4,868
Gastritis & Duodenitis	39	\$63,855	\$1,637
Intestinal Obstruction	6	\$63,635	\$10,606
Idiopathic Proctocolitis	12	\$55,783	\$4,649
Functional Digestive Disease	68	\$50,049	\$736
Other Abdominal Hernia	16	\$46,968	\$2,936

Top Diagnosis: Signs & Symptoms

Signs & Symptoms	# of Members	Total Paid Amount	Average Cost/Member
Respiratory System/Other Chest Symptoms	431	\$351,055	\$815
Other Abdomen/Pelvis Symptoms	274	\$216,349	\$790
General Symptoms	322	\$207,641	\$645
Symptoms Involving Head/Neck	159	\$110,378	\$694
GI System Symptoms	146	\$101,939	\$698
Cardiovascular System Symptoms	83	\$50,827	\$612
Urinary System Symptoms	170	\$49,816	\$293
Abnormal Blood Findings	147	\$45,759	\$311
Abnormal Findings-Body Structure	91	\$43,768	\$481
Skin/Other Integument Symptoms	162	\$41,906	\$259

Top Diagnosis: Circulatory System

Circulatory System	# of Members	Total Paid Amount	Average Cost/ Member
Other Endocardial Disease	39	\$250,478	\$6,423
Other Chronic Ischemic Heart Disease	47	\$208,232	\$4,430
Cardiac Dysrhythmias	99	\$146,602	\$1,481
Acute Myocardial Infarction	9	\$115,867	\$12,874
Acute Pulmonary Heart Disease	9	\$100,189	\$11,132
Heart Failure	9	\$77,568	\$8,619
Essential Hypertension	299	\$67,119	\$224
Other Venous Thrombosis	20	\$44,778	\$2,239
Aortic Aneurysm	5	\$42,139	\$8,428
Other Circulatory Disease	16	\$30,272	\$1,892

Top Diagnosis: Neoplasms

Neoplasms	# of Members	Total Paid Amount	Average Cost/Member
Other Malignant Neoplasm Lymph/Histology	10	\$155,140	\$15,514
Malignant Neoplasm Prostate	17	\$107,121	\$6,301
Lymphoid Leukemia	2	\$102,434	\$51,217
Other Benign Neoplasm GI	79	\$93,850	\$1,188
Multiple Myeloma	1	\$50,628	\$50,628
Malignant Neoplasm Testis	1	\$50,094	\$50,094
Malignant Neoplasm Rectum/Anus	1	\$42,156	\$42,156
Malignant Neoplasm Trachea/Lung	2	\$39,398	\$19,699
Uncharacteristic Behavior Neoplasm	70	\$38,677	\$553
Malignant Neoplasm Hypopharynx	1	\$35,461	\$35,461

Top Diagnosis: Injury & Poisoning

Injury & Poisoning	# of Members	Total Paid Amount	Average Cost/ Member
Replace & Graft Complication	16	\$121,087	\$7,568
Dislocation of Knee	35	\$65,070	\$1,859
Injury NEC/NOS**	169	\$52,166	\$309
Sprain of Back	100	\$39,620	\$396
Radius & Ulna Fracture	18	\$39,182	\$2,177
Sprain Shoulder & Arm	41	\$35,839	\$874
Other Surgical Complication	10	\$35,374	\$3,537
Sprain of Ankle & Foot	57	\$33,612	\$590
Vertebral Fx wo Cord Injury	7	\$27,923	\$3,989
Tibia & Fibula Fracture	6	\$25,309	\$4,218

**NEC=Not elsewhere Classified

**NOS=Not Otherwise Specified

Top Diagnosis: Nervous System/Sense Organs

Nervous System/Sense Organs	# of Members	Total Paid Amount	Average Cost/Member
Organic Sleep Disorders	99	\$129,895	\$1,312
Hearing Loss	56	\$36,225	\$647
Cataract	54	\$35,405	\$656
Retinal Disorders	39	\$33,686	\$864
Spinal Cord Disease	1	\$30,402	\$30,402
Otitis Media, Suppurative	137	\$27,351	\$200
Disorders of Refraction	256	\$26,902	\$105
Glaucoma	80	\$24,460	\$306
Pain	54	\$23,592	\$437
Mononeuritis Upper Limb	20	\$23,473	\$1,174

Top Diagnosis: Respiratory System

Respiratory System	# of Members	Total Paid Amount	Average Cost/ Member
Asthma	121	\$144,927	\$1,198
Acute Pharyngitis	292	\$46,128	\$158
Pleurisy	15	\$43,770	\$2,918
Other Lung Diseases	23	\$43,007	\$1,870
Chronic Sinusitis	127	\$32,504	\$256
Deviated Nasal Septum	8	\$31,746	\$3,968
Chronic Bronchitis	4	\$29,929	\$7,482
Acute URI Multiple Sites/NOS**	203	\$29,378	\$145
Other Upper Respiratory Disease	36	\$28,877	\$802
Allergic Rhinitis	72	\$27,171	\$377

**NOS=Not Otherwise Specified

Top Diagnosis: Mental Disorders

Mental Disorders	# of Members	Total Paid Amount	Average Cost/Member
Affective Psychoses	123	\$128,066	\$1,041
Neurotic Disorders	224	\$105,856	\$473
Adjustment Reaction	143	\$81,081	\$567
Alcohol Dependence Syndrome	11	\$45,009	\$4,092
Special Symptom NEC	17	\$41,883	\$2,464
Depressive Disorder NEC	99	\$36,347	\$367
Hyperkinetic Syndrome	82	\$32,254	\$393
Drug Dependence	14	\$26,337	\$1,881
Alcoholic Psychoses	3	\$25,828	\$8,609
Nondependent Drug Abuse	31	\$10,958	\$353

Top Diagnosis: Genitourinary System

Genitourinary System	# of Members	Total Paid Amount	Average Cost/Member
Chronic Renal Failure	11	\$76,933	\$6,994
Renal/Ureteral Calculus	27	\$66,827	\$2,475
Female Genital Symptoms	66	\$54,388	\$824
Other Urinary Tract Disorder	132	\$47,010	\$356
Disorder of Menstruation	70	\$46,844	\$669
Other Breast Disorders	74	\$45,500	\$615
Benign Mammary Dysplasia	21	\$20,869	\$994
Other Renal & Ureteral Disease	28	\$19,615	\$701
Genital Prolapse	7	\$18,881	\$2,697
Endometriosis	4	\$18,495	\$4,624

Time Well Spent

The screenshot shows the top of the Time Well Spent website. At the top left is the Anthem BlueCross BlueShield logo. To the right is a search bar with the text "search" and a right-pointing arrow. Below the logo and search bar is a purple navigation bar with three items: "Employer Tools +", "Education and Resources +", and "About +". The main content area features a large background image of a man and a young girl smiling while looking at fresh produce in a grocery store. Overlaid on the left side of this image is the text: "Helping your employees live better. Helping your business control costs. Time Well Spent® is a web toolkit focused on building a healthier, more productive workforce." Below this text is a row of seven colorful buttons, each with an icon and text: "Build a Strategy" (teal, folder icon), "Build a Wellness Strategy" (orange, folder icon), "Articles" (blue, folder icon), "Condition Kits" (green, folder icon), "Promotional Material" (yellow, megaphone icon), "E-Mail Blasts" (red, envelope icon), and "Spanish Material" (pink, folder icon). At the bottom of the page, there are three more buttons: "Wellness Calendar" (light blue, folder icon), "Top Downloads" (white, folder icon), and "What's New" (white, folder icon).

Time Well Spent

[Wellness Calendar](#)
[Plan your wellness program for 2014](#) >>

[Health and Wellness](#)
Keeping your employees at their healthy best >>

Top Downloads

- [Corporate Wellness Survey](#)
- [Food Guide- ChooseMyPlate](#)
- [You Just May be Exercising](#)
- [Selecting a Primary Care Physician](#)

What's New

- [Send us your feedback!](#)
- [New Webinars for Members](#)
- [Screen Savers for your organization](#)
- [What Works? ... at your company](#)
- [Check out Why We Need Time Well Spent](#)



Health & Wellness Webinars

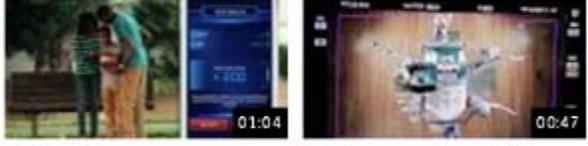
[Sign up for a webinar.](#) You'll learn:

- Ways to engage your employees in wellness
- Making wellness a business strategy
- Effective communication methods

Sign up for monthly wellness messages

[Sign-Up](#) >>

Latest Video Posts



[Habit Heroes](#) [ABCs of Disease: Behind the Scenes](#)

Latest LinkedIn Post

No feed results available.

Time Well Spent Calendar

<p>January</p> <p>Smoking Cessation</p> <p>Related Articles</p> <ul style="list-style-type: none"> Ways to Quit Smoking for Good Smoking Cessation Smash the Habit 	<p>February</p> <p>Healthy Heart</p> <p>Related Articles</p> <ul style="list-style-type: none"> Keep exercise on your to-do list Salt and Sodium Low-fat Cooking 	<p>March</p> <p>Nutrition and Healthy Eating</p> <p>Related Articles</p> <ul style="list-style-type: none"> Good Nutrition Basics Eating Better on a Budget Make Better Beverage Choices
<p>April</p> <p>Cancer</p> <p>Related Articles</p> <ul style="list-style-type: none"> Preventing Prostate Cancer The Facts About Mammograms Protecting Your Skin 	<p>May</p> <p>Asthma and Allergies</p> <p>Related Articles</p> <ul style="list-style-type: none"> Staying Healthy When you Have Asthma When Kids Have Asthma 	<p>June</p> <p>Men's Health</p> <p>Related Articles</p> <ul style="list-style-type: none"> Staying Healthy at Any Age Body Guard In the Yard
<p>July</p> <p>Activity & Weight Management</p> <p>Related Articles</p> <ul style="list-style-type: none"> Finding the Time What is BMI? Giant Leap 	<p>August</p> <p>Cold & Flu and Immunizations</p> <p>Related Articles</p> <ul style="list-style-type: none"> Fight the Flu with Good Habits Is it a Cold or the Flu? Wellness Flyer: Immunizations 	<p>September</p> <p>Bones & Joints</p> <p>Related Articles</p> <ul style="list-style-type: none"> Back Pain Osteoporosis Living Well with Arthritis
<p>October</p> <p>Women's Health</p> <p>Related Articles</p> <ul style="list-style-type: none"> Breast Exams and Mammograms Preventing Cervical Cancer Boffant 	<p>November</p> <p>Diabetes</p> <p>Related Articles</p> <ul style="list-style-type: none"> Are you at Risk for Diabetes? What is Pre-Diabetes? Head to Toe 	<p>December</p> <p>Stress and Emotional Health</p> <p>Related Articles</p> <ul style="list-style-type: none"> Stress Awareness Understanding Depression Wellness Flyer: Sleep

Medical Terminology

Adult Annual Well Visit: is the number of adult patients who received a well visit provided under medical coverage, expressed as a percentage of the average number of members for whom this test is appropriate. Candidates are members aged 21 or older with greater than 12 months of continuous enrollment, and a procedure code, or any diagnosis code equal to Well Visit.

Adolescent Annual Well Visit: is the number of adolescent patients who received a well visit provided under medical coverage, expressed as a percentage of the average number of members for whom this test is appropriate. Candidates are members aged 12 to 20 with greater than 12 months of continuous enrollment, and a procedure code, or any diagnosis code equal to Well Visit.

Admissions Per 1,000 (IP Admits): is the average number of admissions per 1,000 members per year.

Allowed Amount: is the amount of submitted charges eligible for payment.

Average Length of Stay: is the average number of days per inpatient admission.

Baby Routine Well Visits: is the average number of outpatient professional well child visits provided to children aged 0 through 15 months under medical coverage, per 1,000 members aged 0 through 15 months with medical coverage per year. The number of visits is based on the count of unique patient, service date, and provider combinations.

Cervical Cancer Screening Rate: is the number of patients who received facility or professional cervical cancer screening services provided under medical coverage, expressed as a percentage of the average number of members for whom this test is appropriate. Candidates for cervical cancer screening tests are defined as females aged 21 to 64 years.

Child Routine Well Visits: is the average number of outpatient professional well child visits provided to children aged 3 through 6 years under medical coverage, per 1,000 members aged 3 through 6 years with medical coverage per year. The number of visits is based on the count of unique patient, service date, and provider combinations.

Medical Terminology

Cholesterol Screening Rate: is the number of patients who received facility or professional cholesterol screening services provided under medical coverage, expressed as a percentage of the average number of members for whom this test is appropriate. Candidates are defined as males aged 35 years and older , and females aged 45 years and older.

Claimant: A subscriber or dependent who received medical services covered under the health plan.

Colon Cancer Screening Rate: is the number of patients who received facility or professional colon cancer screening services provided under medical coverage, expressed as a percentage of the average number of members for whom this test is appropriate. Candidates for colorectal cancer screening tests and procedures are defined as adults aged 50 to 75 years of age.

Contract Size: is the average number of family members per employee or subscriber.

Cost Share: is the amount paid out-of-pocket by the member for healthcare services. This generally includes coinsurance, copayment, and deductible amounts.

Days Per 1,000: is the average number of days from admissions per 1,000 members per year.

Discount Savings: Savings resulted from discounts for network providers.

High Cost Claimants (HCC): are individuals with \$75,000 or more in claims during the analyzed period.

Mammogram Screening Rate: is the number of patients who received facility or professional mammography services provided under medical coverage, expressed as a percentage of the average number of members for whom this test is appropriate. Candidates for breast cancer screening procedures are defined as females aged 40 to 69 years.

Medical Terminology

Childhood Immunization Services: is the average number of immunization services provided to children aged 0 through 23 months under medical coverage, per 1,000 members aged 0 through 23 months with medical coverage per year.

OP Facility Visits Per 1,000: is the average number of outpatient facility visits, per 1,000 members with medical coverage per year.

Out-of-Pocket (OOP): is the amount paid out-of-pocket by the member healthcare services. This generally includes coinsurance, copayment, and deductible amounts.

Paid Amount: is the amount the plan paid. It represents the amount after all pricing guidelines have been applied, and all third party, copayment, coinsurance, and deductible amounts have been subtracted.

PEPM/PEPY: Per Employee Per Month and Per Employee Per Year.

PMPM/PMPY: Per Member Per Month and Per Member Per Year. Members are defined as all participants in the plan including employees, spouses, and dependents.

PSA Screening Rate: is the number of patients who received facility or professional Prostate Specific Antigen (PSA) screening services provided under medical coverage, expressed as a percentage of the average number of members for whom this test is appropriate. Candidates for prostate cancer screening tests are defined as males aged 50 to 70 years.

Visits Per 1,000 ER: is the average number of emergency room facility visits per 1,000 members with medical coverage.

Visits Per 1,000 OP Facility: is the average number of OP Facility visits, per 1,000 members with medical coverage per year.

Visits Per 1,000 Professional Office: is the average number of Professional Office visits, per 1,000 members with medical coverage per year.

Healthcare Conditions

CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD (760 – 779)

Definition: Infant illness occurring in the period shortly before and after birth which is not due to a congenital abnormality.

Examples: Prolapsed cords, premature birth, birth trauma, respiratory distress syndrome, jaundice, fetal drug or alcohol withdrawal

COMPLICATIONS OF PREGNANCY, CHILDBIRTH, & PUERPERIUM (630 – 676)

Definition: Includes normal pregnancy, labor and delivery, and illness affecting the mother which develops as a result.

Examples: Normal pregnancy/labor/delivery, abortion, miscarriage, excessive vomiting, pregnancy-induced hypertension or diabetes, threatened labor and pelvic disproportion.

CONGENITAL ANOMOLIES (740 – 759)

Definition: Birth Defects.

Examples: Cleft palate and/or lip, Down's syndrome, hydrocephalus, congenital cataracts, abnormal fetal development of the eyes, ears, nose, face, heart, lungs, etc.

DISEASE OF THE BLOOD & BLOOD FORMING ORGANS (280 – 289)

Definition: Illness caused by disorders of red and white blood cells, and platelets.

Examples: Anemia, hemophilia, blood and spleen disorders.

DISEASE OF THE CIRCULATORY SYSTEM (390 – 459)

Definition: Illness caused by heart and blood vessel disorders.

Examples: High or low blood pressure, hemorrhoids, varicose veins, heart attack, heart valve disease, stroke, aneurysm.

DISEASE OF THE DIGESTIVE SYSTEM (520 – 579)

Definition: Illness caused by disorders of the teeth, mouth, jaw, salivary glands, esophagus, stomach, intestine, rectum, gallbladder, and liver.

Examples: Dental cavities, ulcers, appendicitis, hernias, noninfectious colitis, anal fissure, gall stones, cirrhosis of the liver.

DISEASE OF THE GENITOURINARY SYSTEM (580 – 629)

Definition: Illness caused by disorders of the kidney, bladder, prostate, testes, breast, ovaries, and uterus.

Examples: Infertility, cystitis, kidney failure, kidney stones, prostate enlargement, endometriosis, menopausal disorders.

DISEASE OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUES (710 – 739)

Definition: Illness caused by disorders of the joints, muscles, ligaments, and bone (excluding fractures).

Examples: Arthritis, back pain, bursitis, ganglions, bunions.

Healthcare Conditions

DISEASE OF THE NERVOUS SYSTEM & SENSE ORGANS (320 – 389)

Definition: Nervous system - illness caused by brain, spinal cord, and nerve disorders. Sense organs - illness caused by disorders of the eyes and ears.

Examples: Migraine headache, meningitis, encephalitis, Alzheimer's disease, Parkinson's disease, cerebral palsy, muscular dystrophy, quadriplegia, epilepsy, cataract, retinal detachment, glaucoma, color blindness, otitis media, hearing loss.

DISEASE OF THE RESPIRATORY SYSTEM (460 – 519)

Definition: Illness caused by nose, larynx, bronchus, and lung disorders.

Examples: Common cold, laryngitis, tonsillitis, deviated nasal septum, viral pneumonia, emphysema, asthma, lung disease.

DISEASE OF THE SKIN & SUBCUTANEOUS TISSUE (680 – 709)

Definition: Illness caused by disorders of the skin and the fat layer directly underneath the skin.

Examples: Acne, cellulitis, abscess, dermatitis, skin allergies, psoriasis.

ENDOCRINE, NUTRITIONAL, & METABOLIC DISEASES (240 – 279)

Definition: Endocrine - illness caused by increased, decreased, or imbalanced hormones. Nutritional - illness caused by the body's inability to ingest and/or absorb food. Metabolic - illness caused by the body's inability to turn food into energy.

Examples: Thyroid disease, diabetes, parathyroid disease, ovarian and testicular hormonal disease, vitamin and mineral excess or deficiency, obesity.

INFECTIOUS & PARASITIC DISEASE (001 – 139)

Definition: A disease caused by bacteria, germs, virus, or parasites (e.g., worms, ticks). The illness may be contagious.

Examples: Infectious diarrhea, chicken pox, measles, herpes, viral hepatitis, bacterial meningitis, food poisoning, blood poisoning, tuberculosis, AIDS.

INJURY & POISONING (800 – 999)

Definition: Injury is damage inflicted to the body by an external force. Poisoning is illness caused by the ingestion, inhalation or absorption of a toxic substance. Either may be intentional or accidental for purposes of this classification.

Examples: Lacerations, fractured bones, dislocations, burns, internal trauma such as a ruptured spleen, lead poisoning.

MENTAL DISORDERS (290 – 319)

Definition: Illness caused by psychiatric or psychological conditions.

Examples: Drug and alcohol abuse, anorexia nervosa, bulimia, depression, paranoia, schizophrenia.

Healthcare Conditions

NEOPLASMS (140 – 239)

Definition: A tumor or uncontrolled cell growth. The tumor may be benign (non-cancer) or malignant (cancer).

Examples: Breast tumor, intestinal polyp, thyroid tumor, Hodgkin's disease, leukemia.

SUMMARY CLASSIFICATION OF EXTERNAL CAUSES OF INJURY AND POISONING (E800 – E999)

Definition: Environmental events, circumstances, and conditions as the cause of injury, poisoning, and other adverse effects.

Examples: Transport accidents involving aircraft and spacecraft, watercraft, motor vehicle, railway, and other road vehicles.

SUPPLEMENTARY CLASSIFICATION OF FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES (V01 – V83)

Definition: Occasions when circumstances other than a disease or injury exists that are not classifiable to the other ICD-9 categories. This occurs in one of two ways: 1) when a person is not currently sick but encounters health services for some specific purpose, such as organ donation, vaccination, or to discuss a problem which itself is not an injury or disease; 2) some circumstance or problem is present which influences the persons health status but it is not a current illness or injury.

Examples: Personal or family history of diseases (heart disease, cancer, etc.), supervision of high-risk pregnancies, contraceptive management, live born infants, donors.

SYMPTOMS, SIGNS & ILL-DEFINED CONDITIONS (780 – 799)

Definition: This classification will be utilized when 1) cases for which no more specific ICD-9-CM diagnosis code can be made even after all of the facts bearing on a case have been investigated; 2) signs or symptoms existing at the time of the initial visit proved to be short term, and the cause has not or could not be determined; and 3) the symptoms represent important medical problems, and the physician desired to classify the symptom and an additional ICD-9-CM diagnosis code.

Examples: 'Symptoms' include fainting, convulsions, fever, edema, headache, shock, chest pain, nausea, etc. 'Signs' include nonspecific abnormal blood tests, urine tests, x-rays, EEG, EKG, etc. 'Ill-defined conditions' include senility, crib death, nervousness, etc.

WELL CARE EXAMS & TESTS

Definition: Routine examinations with no associated medical condition.

Examples: Well baby care, immunizations, routine physicals.