

STATE OF WEST VIRGINIA



PUBLIC EMPLOYEES INSURANCE AGENCY

Fiscal Year 2019

Detailed Medical and Prescription Drugs Claim Trend Report

November 2019

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West Virginia Public Employees Insurance Agency Report of Independent Actuary

Fiscal Year 2019 Detailed Medical & Prescription Drugs Claim Trend Report

OVERVIEW

Continuing Care Actuaries was engaged by the West Virginia Public Employees Insurance Agency (“PEIA”) to assist the Finance Board in monitoring the plan experience for fiscal year ending June 30, 2019 on a quarterly basis and the forecasting of Fiscal Years 2020 through 2024. This annual trend report to the Finance Board generally serves as the basis for projecting medical and drugs claims through Fiscal Year 2024 in the development of the Financial Plan to be approved the PEIA Finance Board in December 2019. This report is intended for the sole use of the Finance Board and management team. Any other use requires written approval by Continuing Care Actuaries.

Continuing Care Actuaries has collected and reviewed the medical and drugs claims experience using Allowed Non-Medicare claims incurred and paid through June 2019. Effective July 1, 2012, West Virginia Retiree Health Benefit Trust Fund (“Trust Fund” or “RHBT”) had contracted with Humana to provide a Medicare Advantage Plan (“Humana MAPD”) benefit to Medicare-eligible retired employees and their Medicare-eligible dependents. Under this arrangement, Humana has assumed the financial risk of providing comprehensive medical and drugs coverage with limited copayments. Non-Medicare retirees will continue enrollment in PEIA's Preferred Provider Benefit or the Managed Care Option.

While the majority of Medicare coverages are transferred to Humana, all newly eligible Medicare enrollees are initially covered by the RHBT on a secondary self-insured basis with Medicare being the primary coverage. These Medicare coverages are transferred on the following January from a self-insured secondary basis by RHBT to the Humana MAPD plan. While Continuing Care Actuaries monitors the cost trends of these Medicare coverages, for the purposes of this report we have not reviewed the Medicare claims experience in this report due to relatively small number of these coverages and the resulting lack of credibility of Medicare claims where RHBT is secondary.

Since July 1, 2000, HealthSmart Holding Inc. (“HealthSmart”), has been the administrator of the plan’s medical claims and has provided reports for both medical and prescription drugs claims. Effective July 1, 2019, administration was assumed by United Medical Resources Inc. (“UMR”). The analysis utilized claim data supplied from HealthSmart and UMR as a primary source of claims data for this report and PEIA has separately provided enrollment information.

Trends were developed by category for the 24-month, 36-month and 48-month credible periods ending June 2019. Our analysis for medical claims do not include incurred claims for the months after June 2019, since the claim experience for these months is largely non-credible with substantial reserves as part of the projected monthly incurred amount. The claim information supplied by HealthSmart and UMR for the purposes of this analysis was compared to PEIA’s general ledger system to ensure accuracy of aggregate reporting. In an effort to assure accuracy,

the claim information provided by HealthSmart and UMR used in this analysis was reconciled and balanced to the PEIA general ledger amounts as of June 2019.

KEY FINDINGS - MEDICAL

- The 24-month, 36-month and 48-month methodologies had comparable utilization and unit cost trends. CCA chose the 24-month results as the methodology that is most likely to produce accurate future trends that will allow PEIA to develop a financially solvent Financial Plan over the required five-year projection period. It is noteworthy that the overall medical trend increased from 6.9% in last year's analysis to 8.6% in Fiscal Year 2019 using a 24-month study period. Using the 24-month analysis, PEIA experienced a 5.5% utilization increase and a 3.0% unit cost increase, resulting in an aggregate trend of 8.6%. The 36-month method resulted in a lower trend of 4.8% and the 48-month method resulted in a lower trend of 2.7%.

The results below illustrate the 24-month trend calculated since Fiscal Year 2002.

West Virginia PEIA Non-Medicare Total 24-Month Trend Analysis-Allowed Claims			
	<u>Utilization</u>	<u>Cost/Service</u>	<u>Total Trend</u>
2002	4.1%	3.6%	7.8%
2003	9.8%	-3.0%	6.5%
2004	11.7%	-6.8%	4.0%
2005	2.8%	-1.1%	1.7%
2006	2.9%	1.0%	4.0%
2007	7.2%	-2.0%	5.1%
2008	2.9%	3.9%	6.9%
2009	2.5%	2.6%	5.1%
2010	2.5%	1.8%	4.4%
2011	4.2%	3.5%	7.8%
2012	5.1%	0.1%	5.3%
2013	2.6%	-1.6%	0.9%
2014	-0.4%	4.5%	4.1%
2015	0.7%	5.6%	6.3%
2016	8.6%	-0.7%	7.9%
2017	3.9%	-1.1%	2.8%
2018	4.4%	2.4%	6.9%
2019	5.5%	3.0%	8.6%

- Overall PEIA and RHBT Fiscal Year 2019 24-month detail trends are summarized below. Note that these trend have not been adjusted for any changes in the plan benefit design:

Fiscal Year 2019 Claim Type	Medical	Drugs
PEIA – Active Local	9.0%	14.0%
PEIA – State	8.6%	15.8%
PEIA – Total	8.6%	15.5%
RHBT – Non-Medicare	2.2%	19.0%
Grand Total	7.9%	16.0%

- In-State services have experienced higher trends than Out-of-State services for Non-Medicare coverages in the 24-month analysis for all four categories: HI, HO, PS and O. A comparison of Non-Medicare medical trends for In-State claims versus Out-of-State claims over the 24-month period analysis reveals an aggregate In-State trend of 12.3% and an Out-of-State trend of 3.7%.

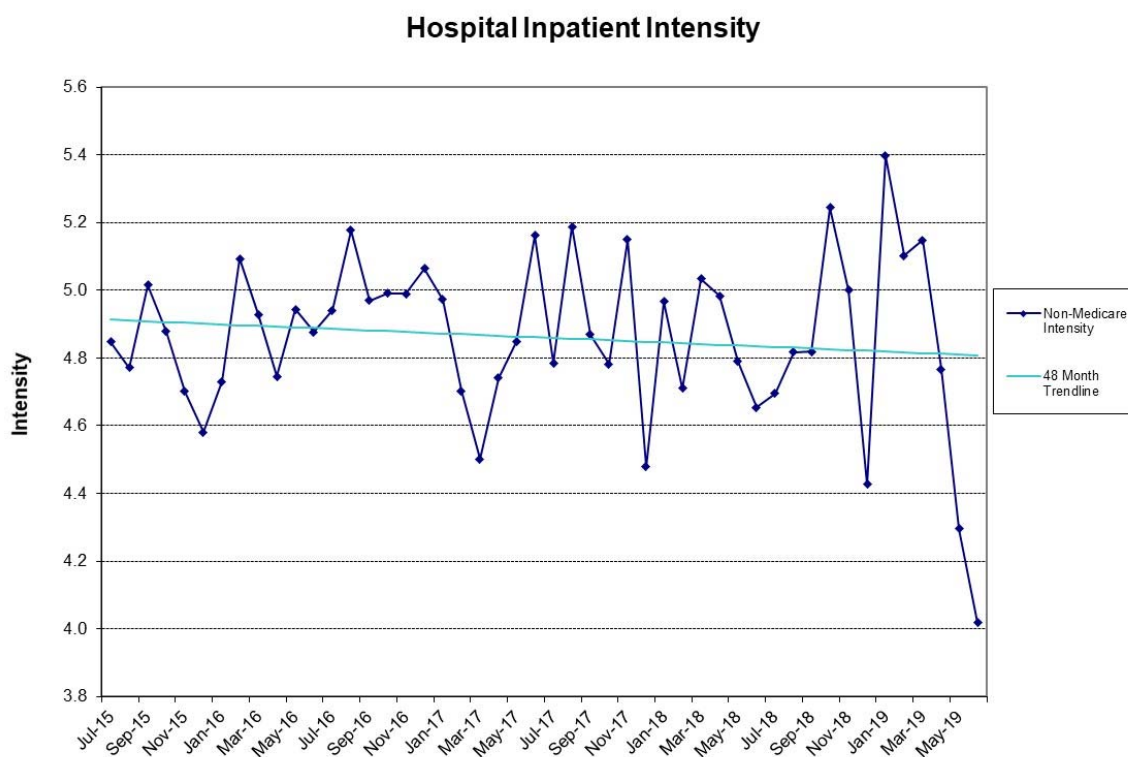
The reader may interpret this as good financial news for PEIA, due to the lower risk adjusted cost per service provided in state. The conclusion is based on the apparent transfer of services from out-of-state to in-state providers.

The In-State utilization trend has been higher while the In-State cost per service trend has been lower compared to Out-of-State trends. The In-State utilization trend for Non-Medicare was 7.9%, while the Out-of-State trend was -6.7%. The In-State cost per service trend for Non-Medicare was 4.1%, while the Out-of-State trend was 11.2%.

Within the In-State medical categories, the 3 highest trend subcategories were observed for Hospital Outpatient's Medical/Surgical, Hospital Outpatient's Psychiatric / Substance Abuse, and Other's Appliances (DME) categories. These categories experienced unfavorable trends of 17.6%, 22.6% and 138.0%, respectively.

- Using the 24-month analysis, Hospital Inpatient services ("HI") represent approximately 19% of all medical services and experienced a total trend of 4.6%. The overall trend was the product of a 4.1% increase in utilization and a 0.4% increase in unit cost. It is noteworthy that In-State HI claims had a 14.3% overall trend, while Out-of-State HI claims experienced a -4.9% overall trend.
- Using the 24-month analysis, Hospital Outpatient services ("HO") represent approximately 35% of all medical services and experienced a total trend of 13.8%. The overall trend was the product of an 8.2% increase in utilization and a 5.2% increase in unit cost. It is noteworthy that In-State HO claims had a 15.7% overall trend, while Out-of-State HO claims experienced a 7.6% overall trend.
- Using the 24-month analysis, Physician Services ("PS") represent approximately 41% of all medical services and experienced a total trend of 5.0%. The overall trend was the product of a 5.3% increase in utilization of these services and a -0.3% decrease in unit cost. It is noteworthy that In-State PS claims had a 6.5% overall trend, while Out-of-State PS claims experienced a -0.9% overall trend.

- Using the 24-month analysis, Other services (“O”), which are services that are principally Durable Medical Services and Ambulance, represent only 5% of all medical services and experienced the least favorable trend of the broader claim categories with a total trend of 15.5%. The overall trend was the product of a -6.6% decrease in utilization of these services and a 23.6% increase in unit cost. It is noteworthy that In-State O claims showed a 50.2% overall trend, while Out-of-State O claims experienced a 39.6% overall trend.
- As noted above, the Out-of-State trends were generally more favorable than the In-State trends. This is similar to last year’s report, but contrary to the trend reports produced in the past several years prior.
- A component of the cost per service trend for hospital inpatient is the length of stay, or intensity. The chart below shows the average length of stay by number of days over the last four years. Over the 48-month analysis, the intensity for Non-Medicare hospital stays has an annual trend of -1.7%, which is comparable to -2.1% last year. The historical data is illustrated in the chart below.



The table below presents the overall Non-Medicare Hospital Inpatient trend showing the three components of visits, days per visit, and cost per day.

West Virginia PEIA Non-Medicare Hospital Inpatient Trend Analysis			
	<u>24-Month</u>	<u>36-Month</u>	<u>48-Month</u>
Visits	-0.5%	-1.6%	-2.0%
Intensity	-3.2%	-3.4%	-1.7%
<u>Cost/Day</u>	<u>8.5%</u>	<u>4.6%</u>	<u>5.3%</u>
Total	4.6%	-0.6%	1.4%

Continuing Care Actuaries has included an additional analysis of utilization and cost on an incurred basis over the last 12 months. This analysis can be found on Page 14 and analyzes the distribution of services based on services provided in West Virginia and services provided elsewhere.

In the 12-month period ending June 2019, approximately 84.1% of medical services were provided in the State of West Virginia and 15.9% of services were provided outside the State. From a cost perspective 73.1% of allowed charges were incurred in the State of West Virginia and 26.9% of allowed charges were provided outside the State, illustrating the higher cost and intensity of out-of-state services.

By major medical category, approximately 88.4% of Hospital Inpatient services were provided in the State of West Virginia representing approximately 50.8% of the total allowed charges for Hospital Inpatient. Conversely, approximately 11.6% of Hospital Inpatient services were provided out of the State of West Virginia and those charges represented 49.2% of the total allowed charges for Hospital Inpatient.

By major medical category, approximately 94.0% of Hospital Outpatient services were provided in the State of West Virginia representing approximately 77.8% of the total allowed charges for Hospital Outpatient. Conversely, approximately 6.0% of Hospital Outpatient services were provided out of the State of West Virginia and those charges represented 22.2% of the total allowed charges for Hospital Outpatient.

By major medical category, approximately 83.1% of Physician Services were provided in the State of West Virginia representing approximately 81.3% of the total allowed charges for Physician Services. Conversely, approximately 16.9% of Physician Services were provided out of the State of West Virginia and those charges represented 18.7% of the total allowed charges for Physician Services.

By major medical category, approximately 72.5% of Other Services were provided in the State of West Virginia representing approximately 54.6% of the total allowed charges for Other Services. Conversely, approximately 27.5% of Other Services were provided out of the State of West Virginia and those charges represented 45.4% of the total allowed charges for Other Services.

KEY FINDINGS - DRUGS

Overall, prescription drugs trends for Non-Medicare coverages have increased significantly compared to 8.6% last year. Using the 24-month analysis, we observed a 1.7% utilization increase and a 13.6% prescription cost increase, resulting in an aggregate trend of 15.5%. The 24-month overall trend is higher than both the 36-month and 48-month analysis.

West Virginia PEIA Prescription Drugs Total 24-Month Trend Analysis-Allowed Claims			
	<u>Utilization</u>	<u>Cost/Prescription</u>	<u>Total Trend</u>
FY 2019	1.7%	13.6%	15.5%

METHODOLOGY

HealthSmart and UMR provided allowed and paid claim information for Non-Medicare and Medicare eligibility from July 2001 through August 2019. This data set was analyzed on Non-Medicare claims that were incurred from July 2015 through June 2019 for the 48-month credible period. This claim data was consolidated into 24 categories for Hospital Inpatient, Hospital Outpatient, Physician Services and Other. In addition, claim experience was analyzed based on the state of service as defined by HealthSmart and UMR. HealthSmart and UMR provides the information based on the location that the service was performed, rather than the billing location of the provider. Continuing Care Actuaries verified that the HealthSmart and UMR information balanced in total to previously produced claim lag reports that PEIA personnel have balanced to the PEIA ledger accounts.

The trend analysis includes assumptions with respect to the completeness of the claim information to reflect and adjust for unreported claims. There was no adjustment to reflect the various reductions and changes in benefit design as affected by the Finance Board over the analysis period, such as the reduction in hospital inpatient reimbursement rates. In developing aggregate claim trends, individual claim categories were weighted by claims paid for each category over the last 24, 36 and 48 months, respectively depending on the analysis. The following chart summarizes the amount of allowed dollars by category for each paid fiscal year.

The calculated trends for utilization, unit cost and in aggregate were based on a least squares methodology in defining the regression trend line. We manually adjusted these trend lines where the results appeared to be less credible.

Consistent with prior reports, the trends published in this report for Non-Medicare medical claims are based on the allowed amount in order to neutralize the impact of deductibles and copayments that have a varying impact on paid amounts depending on the month of the year. Paid claim trends are higher over the study period, since cost-sharing provisions of the plan did not increase in Plan Year 2019.

A summary of the annual Non-Medicare data provided by HealthSmart and UMR by Hospital Inpatient (HI), Hospital Outpatient (HO), Physician Services (PS), and Other Services (O) is detailed below.

<u>Non-Medicare Claims</u>	<u>FY 2016</u>	<u>FY 2017</u>	<u>FY 2018</u>	<u>FY 2019</u>
Hospital Inpatient	\$114,560,439	\$114,976,037	\$108,499,092	\$103,497,928
Hospital Outpatient	211,134,284	194,577,242	192,084,884	203,825,448
Physician Services	258,973,466	243,213,338	232,531,151	232,801,995
<u>Other Services</u>	<u>22,036,263</u>	<u>23,321,811</u>	<u>27,843,829</u>	<u>29,443,030</u>
Total	\$606,704,453	\$576,088,428	\$560,958,956	\$569,568,401

Certain categories in the data provided by HealthSmart and UMR were consolidated to produce the following summary table for Non-Medicare claims.

<u>Non-Medicare Claims</u>	<u>FY 2016</u>	<u>FY 2017</u>	<u>FY 2018</u>	<u>FY 2019</u>
HI Maternity	\$3,426,311	\$2,884,477	\$2,697,861	\$2,760,218
HI Medical/Surgical	107,858,296	109,357,498	103,393,151	98,125,000
HI Psychiatric/Substance Abuse	3,275,833	2,734,063	2,408,080	2,612,710
HO Emergency Room	31,307,032	29,882,728	30,692,899	30,919,835
HO Medical/Surgical	106,682,014	97,874,181	96,555,677	103,020,558
HO Other Services	70,107,860	65,099,620	63,229,060	68,085,630
HO Psychiatric/Substance Abuse	3,037,378	1,720,714	1,607,248	1,799,425
PS Anesthesia	12,544,187	11,899,061	11,368,340	10,961,005
PS Chemotherapy/Radiation	3,900,335	3,410,173	3,875,335	3,508,217
PS Emergency Room	6,532,770	6,133,952	5,926,672	5,824,901
PS Immunizations/Allergy	8,479,994	8,651,045	8,734,424	10,437,174
PS Inpatient Surgery	8,261,728	7,981,552	8,125,764	7,370,417
PS Inpatient Visits	6,775,359	7,021,764	7,150,233	6,666,125
PS Lab & Pathology	18,918,224	16,942,370	15,781,590	15,103,370
PS Maternity	5,093,217	4,857,722	4,691,699	4,351,384
PS Office Visits	68,084,959	66,650,433	60,621,265	59,624,447
PS Other Services	65,982,251	57,549,821	54,852,816	57,675,547
PS Outpatient Surgery	18,306,261	17,607,074	17,403,743	17,114,670
PS Psychiatric/Substance Abuse	13,435,468	12,753,236	12,821,823	13,812,759
PS Radiology	13,629,038	12,886,056	12,236,222	11,153,250
PS Therapy/Rehab	9,029,675	8,869,079	8,941,225	9,198,731
O Ambulance	4,612,013	4,571,688	4,627,437	4,709,897
O Durable Medical Equipment	9,064,079	8,512,412	9,595,696	9,628,500
O Other Services	8,360,171	10,237,711	13,620,696	15,104,634

TREND COMPARISON USING ALLOWED VERSUS PAID METHODOLOGY

The trend analysis has been developed throughout the report on an allowed basis for Non-Medicare claims to neutralize the impact of deductibles and co-payments that have a varying impact on paid amounts depending on the month of the year.

We have examined the trends utilizing paid claims as opposed to allowed claims. The following table summarizes the trends on a paid basis for the Fiscal Years 2016 through 2019 and on an allowed basis for Non-Medicare medical claims. This exercise is important since interim monthly trend updates provided to PEIA throughout the year are based on paid claims.

West Virginia PEIA Non-Medicare Medical Total Trend Analysis		
	<u>Paid Basis</u>	<u>Allowed Basis</u>
24-Month Trend	14.4%	8.6%
36-Month Trend	4.6%	4.8%
48-Month Trend	1.3%	2.7%

TOP 5 CATEGORIES

The following tables give detail on the top 5 increases by utilization, cost per service, and cost per capita using the 24-month analysis. Notably, O-Appliances (DME) experienced the highest increase in utilization. O-Other Services experienced the highest increase in cost per service and in cost per capita.

Top 5 Highest Percentage in Utilization Increases			
	2018 Average	2019 Average	Top 5
Category	Utilization	Utilization	Highest %
PS-Other Services	0.31308	0.35137	12.2%
HO-Medical / Surgical	0.05585	0.06193	10.9%
PS-Psychiatric / Substance Abuse	0.06759	0.07370	9.0%
PS-Therapies	0.09326	0.10090	8.2%
PS-Anesthesia	0.02145	0.02312	7.7%

Top 5 Highest Percentage in Cost / Service Increases			
	2018 Average	2019 Average	Top 5
Category	Cost / Service	Cost / Service	Highest %
O-Other Services	\$507.73	\$738.06	45.4%
PS-Immunizations / Injections / Allergy	43.39	50.42	16.2%
HI-Psychiatric / Substance Abuse	6,857.32	7,423.23	8.3%
HO-Other Services	234.13	250.34	6.9%
HO-Psychiatric / Substance Abuse	229.17	244.16	6.5%

Top 5 Highest Percentage in Cost / Capita Increases			
	2018 Average	2019 Average	Top 5
Category	Cost / Capita	Cost / Capita	Highest %
O-Other Services	\$6.95	\$8.19	17.8%
HO-Medical / Surgical	47.73	55.45	16.2%
HO-Other Services	31.50	36.25	15.1%
HO-Psychiatric / Substance Abuse	0.82	0.94	13.9%
PS-Psychiatric / Substance Abuse	6.50	7.24	11.4%

SUMMARY

The following tables and sections summarize the information and findings of the trend analysis. The tables and charts on the next several pages include separate analysis of utilization and unit cost trends for Non-Medicare coverages. The charts show the breakdown between the different study periods and for In-State and Out-of-State charges.

Recent experience has shown that the Non-Medicare medical claim trends are higher than the current trend assumption of 8.0% for FY 2020. Additionally, the 24-Month trend has reflected a slightly higher 8.6% trend for medical, note that the 36-month trend is 4.8% and the 48-month trend is 2.7%. CCA believes that it is appropriate to maintain the FY 2020 medical claim trend assumption for Non-Medicare medical of 8.0%.

Similarly, recent experience has shown that Non-Medicare drugs claim trends are higher than the current trend assumption of 12.0% for FY 2020. Additionally, the 24-Month trend has reflected a materially higher 15.5% trend for drugs, before rebates. It should be noted that the 36-month trend is 8.7% and the 48-month trend is 12.1%. Our trend assumptions for prescription drugs must reflect the positive impact of higher rebates. As such, we are maintaining the current 12.0% trend for prescription drugs.

The update of the trend assumptions for FY 2020 is shown below.

	Fiscal Year 2020 Trends		
Claim Type	Previous Assumption	Updated Assumption	Change
Non-Medicare – Medical	8.0%	8.0%	0.0%
Non-Medicare – Prescription Drugs	12.0%	12.0%	0.0%

In the past, claim trends for the financial plan included a 0.5% margin in future years. CCA has assumed the medical and drugs claim trends for the financial projection will increase by 0.5% in FY 2021 and in each successive fiscal year. We will continue to monitor the claim trend experience and incorporate changes as necessary throughout the fiscal year based on the relatively volatile nature of recent trend experience at PEIA.

Respectfully,



Dave Bond, F.S.A., F.C.A., M.A.A.A.
Managing Partner



Chris Borcik, F.S.A., F.C.A., M.A.A.A.
Principal

**West Virginia PEIA Non-Medicare Total
Study Period of July 2015 to June 2019
(Allowed Claims)**

Trends Summary - Excludes Drugs

	24 Month Trends Summary				36 Month Trends Summary				48 Month Trends Summary			
	<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>	<u>Weight</u>	<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>	<u>Weight</u>	<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>	<u>Weight</u>
HOSPITAL INPATIENT												
Maternity	3.4%	-1.6%	1.7%	0.5%	3.8%	-1.4%	2.3%	0.5%	-5.3%	0.1%	-5.2%	0.5%
Medical / Surgical	4.5%	0.3%	4.8%	17.7%	1.9%	-2.6%	-0.8%	18.1%	1.0%	0.8%	1.8%	18.0%
Psychiatric / Substance Abuse	-9.1%	8.3%	-1.6%	0.4%	-5.1%	5.8%	0.4%	0.5%	-9.0%	3.6%	-5.8%	0.5%
TOTAL	4.1%	0.4%	4.6%	18.6%	1.8%	-2.4%	-0.7%	19.0%	0.6%	0.8%	1.4%	19.0%
HOSPITAL OUTPATIENT												
Emergency Room	0.5%	3.2%	3.7%	5.5%	-1.5%	6.6%	4.9%	5.4%	-2.2%	5.5%	3.1%	5.3%
Medical / Surgical	10.9%	4.8%	16.2%	17.7%	6.8%	2.2%	9.2%	17.4%	4.4%	-0.3%	4.2%	17.5%
Other Services	7.7%	6.9%	15.1%	11.6%	2.8%	4.5%	7.4%	11.5%	2.8%	0.5%	3.3%	11.5%
Psychiatric / Substance Abuse	6.9%	6.5%	13.9%	0.3%	0.4%	4.9%	5.3%	0.3%	-7.4%	-5.3%	-12.3%	0.4%
TOTAL	8.2%	5.2%	13.8%	35.1%	4.1%	3.6%	7.9%	34.6%	2.7%	0.8%	3.6%	34.7%
PHYSICIAN SERVICES												
Anesthesia	7.7%	-3.0%	4.5%	2.0%	3.2%	-0.8%	2.3%	2.0%	0.6%	0.1%	0.6%	2.0%
Chemotherapy / Radiation	2.0%	-1.6%	0.3%	0.7%	3.1%	2.5%	5.7%	0.6%	-1.2%	2.9%	1.6%	0.6%
Emergency Room	1.7%	-0.6%	1.1%	1.0%	0.8%	-0.2%	0.7%	1.1%	-0.7%	0.2%	-0.5%	1.1%
Immunizations / Injections / Allergy	-7.3%	16.2%	7.6%	1.7%	0.2%	6.3%	6.5%	1.6%	1.3%	5.0%	6.4%	1.6%
Inpatient Surgery	1.6%	-3.1%	-1.6%	1.4%	2.3%	-0.3%	2.1%	1.4%	1.7%	0.1%	1.7%	1.4%
Inpatient Visits	1.0%	-2.3%	-1.3%	1.2%	0.5%	0.9%	1.4%	1.2%	0.7%	2.6%	3.4%	1.2%
Lab & Pathology	5.6%	-2.6%	2.8%	2.7%	0.7%	-0.2%	0.5%	2.8%	-1.9%	-0.4%	-2.3%	2.9%
Maternity	-3.9%	-3.6%	-7.4%	0.8%	-4.6%	1.9%	-2.8%	0.8%	-2.8%	0.8%	-2.0%	0.8%
Office Visits	4.0%	1.3%	5.3%	10.7%	0.3%	0.4%	0.6%	11.0%	-0.5%	0.6%	0.1%	11.0%
Other Services	12.2%	-4.8%	6.9%	10.0%	9.3%	-4.8%	4.1%	10.0%	6.9%	-6.8%	-0.4%	10.2%
Outpatient Surgery	5.4%	2.3%	7.8%	3.1%	3.1%	2.1%	5.2%	3.1%	1.9%	1.3%	3.2%	3.1%
Psychiatric / Substance Abuse	9.0%	2.1%	11.4%	2.4%	6.6%	1.4%	8.1%	2.3%	2.5%	2.3%	4.9%	2.3%
Radiology	-9.4%	4.3%	-5.6%	2.1%	-12.6%	10.0%	-3.8%	2.1%	-11.5%	10.0%	-2.6%	2.2%
Therapies	8.2%	-0.5%	7.7%	1.6%	7.7%	-0.8%	6.9%	1.6%	5.2%	0.1%	5.2%	1.6%
TOTAL	5.3%	-0.3%	5.0%	41.3%	2.8%	0.0%	2.8%	41.6%	1.3%	-0.5%	0.9%	41.9%
OTHER												
Ambulance	4.7%	0.9%	5.6%	0.8%	3.9%	1.1%	5.0%	0.8%	0.7%	3.4%	4.1%	0.8%
Appliances (DME)	6.5%	2.1%	8.7%	1.7%	6.2%	4.6%	11.1%	1.6%	6.8%	0.4%	7.2%	1.6%
Other Services	-19.0%	45.4%	17.8%	2.5%	-10.6%	45.0%	29.7%	2.3%	-9.1%	44.1%	30.9%	2.0%
TOTAL	-6.6%	23.6%	15.5%	5.0%	-2.3%	23.5%	20.7%	4.7%	-1.7%	21.1%	19.1%	4.4%
GRAND TOTAL	5.5%	3.0%	8.6%	100.0%	2.8%	1.9%	4.8%	100.0%	1.6%	1.2%	2.7%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2017 to June 2019
(Allowed Claims)**

24 Month Trends Summary - Excludes Drugs

	In State			Out of State			Total			In State	Out of State	Total
	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Weight	Weight	Weight
HOSPITAL INPATIENT												
Maternity	6.0%	6.7%	13.1%	-21.4%	-5.1%	-25.4%	3.4%	-1.6%	1.7%	0.5%	0.5%	0.5%
Medical / Surgical	7.3%	6.5%	14.3%	-12.2%	8.7%	-4.5%	4.5%	0.3%	4.8%	11.4%	33.8%	17.7%
Psychiatric / Substance Abuse	5.4%	7.5%	13.4%	-28.3%	24.3%	-10.9%	-9.1%	8.3%	-1.6%	0.5%	0.3%	0.4%
TOTAL	7.2%	6.6%	14.3%	-12.5%	8.7%	-4.9%	4.1%	0.4%	4.6%	12.4%	34.5%	18.6%
HOSPITAL OUTPATIENT												
Emergency Room	1.5%	5.2%	6.7%	-10.4%	4.9%	-6.1%	0.5%	3.2%	3.7%	5.7%	4.6%	5.5%
Medical / Surgical	12.1%	4.9%	17.6%	-3.1%	14.7%	11.2%	10.9%	4.8%	16.2%	18.6%	14.5%	17.7%
Other Services	8.4%	7.7%	16.8%	-5.7%	16.1%	9.5%	7.7%	6.9%	15.1%	12.5%	8.8%	11.6%
Psychiatric / Substance Abuse	7.0%	14.5%	22.6%	6.2%	-2.4%	3.6%	6.9%	6.5%	13.9%	0.2%	0.5%	0.3%
TOTAL	9.2%	5.9%	15.7%	-5.0%	13.3%	7.6%	8.2%	5.2%	13.8%	37.0%	28.5%	35.1%
PHYSICIAN SERVICES												
Anesthesia	9.0%	-2.8%	5.9%	-1.8%	1.6%	-0.3%	7.7%	-3.0%	4.5%	2.2%	1.7%	2.0%
Chemotherapy / Radiation	3.8%	5.3%	9.3%	-5.0%	-4.0%	-8.9%	2.0%	-1.6%	0.3%	0.5%	1.0%	0.7%
Emergency Room	2.4%	0.1%	2.5%	-6.9%	3.6%	-3.5%	1.7%	-0.6%	1.1%	1.2%	0.9%	1.0%
Immunizations / Injections / Allergy	-5.3%	16.3%	10.1%	-38.0%	21.3%	-24.8%	-7.3%	16.2%	7.6%	2.1%	0.4%	1.7%
Inpatient Surgery	3.0%	-0.9%	2.0%	-4.2%	-4.8%	-8.7%	1.6%	-3.1%	-1.6%	1.4%	1.4%	1.4%
Inpatient Visits	4.0%	0.3%	4.3%	-12.9%	-4.8%	-17.0%	1.0%	-2.3%	-1.3%	1.3%	1.1%	1.2%
Lab & Pathology	7.6%	-3.5%	3.9%	3.6%	-1.5%	2.0%	5.6%	-2.6%	2.8%	1.7%	5.6%	2.7%
Maternity	-2.4%	0.1%	-2.3%	-10.9%	-34.4%	-41.5%	-3.9%	-3.6%	-7.4%	1.0%	0.3%	0.8%
Office Visits	4.6%	1.4%	6.0%	-3.4%	2.9%	-0.6%	4.0%	1.3%	5.3%	13.8%	4.0%	10.7%
Other Services	13.1%	-5.1%	7.3%	3.1%	2.6%	5.7%	12.2%	-4.8%	6.9%	10.9%	7.8%	10.0%
Outpatient Surgery	6.7%	3.7%	10.6%	-4.1%	1.0%	-3.2%	5.4%	2.3%	7.8%	3.5%	2.0%	3.1%
Psychiatric / Substance Abuse	9.0%	2.6%	11.9%	9.0%	-4.0%	4.6%	9.0%	2.1%	11.4%	3.0%	0.6%	2.4%
Radiology	-8.8%	4.6%	-4.6%	-15.2%	6.7%	-9.5%	-9.4%	4.3%	-5.6%	2.4%	1.5%	2.1%
Therapies	8.1%	-0.7%	7.4%	9.3%	4.5%	14.2%	8.2%	-0.5%	7.7%	2.1%	0.3%	1.6%
TOTAL	6.1%	0.4%	6.5%	-1.7%	0.8%	-0.9%	5.3%	-0.3%	5.0%	46.9%	28.4%	41.3%
OTHER												
Ambulance	7.4%	-1.9%	5.3%	-33.1%	28.3%	-14.1%	4.7%	0.9%	5.6%	1.0%	0.5%	0.8%
Appliances (DME)	172.8%	-12.7%	138.0%	-39.1%	94.4%	18.3%	6.5%	2.1%	8.7%	0.7%	4.0%	1.7%
Other Services	-28.6%	51.1%	7.9%	29.1%	6.4%	37.4%	-19.0%	45.4%	17.8%	1.9%	4.1%	2.5%
TOTAL	20.9%	24.3%	50.2%	-6.4%	49.0%	39.6%	-6.6%	23.6%	15.5%	3.6%	8.6%	5.0%
GRAND TOTAL	7.9%	4.1%	12.3%	-6.7%	11.2%	3.7%	5.5%	3.0%	8.6%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2016 to June 2019
(Allowed Claims)**

36 Month Trends Summary - Excludes Drugs

	In State			Out of State			Total			In State	Out of State	Total
	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Weight	Weight	Weight
HOSPITAL INPATIENT												
Maternity	6.0%	6.0%	12.4%	-15.7%	-2.2%	-17.6%	3.8%	-1.4%	2.3%	0.5%	0.5%	0.5%
Medical / Surgical	3.7%	3.8%	7.6%	-7.7%	5.6%	-2.6%	1.9%	-2.6%	-0.8%	11.4%	34.7%	18.1%
Psychiatric / Substance Abuse	-0.8%	10.1%	9.3%	-10.6%	8.9%	-2.6%	-5.1%	5.8%	0.4%	0.5%	0.4%	0.5%
TOTAL	3.6%	4.2%	7.9%	-7.9%	5.5%	-2.8%	1.8%	-2.4%	-0.7%	12.4%	35.6%	19.0%
HOSPITAL OUTPATIENT												
Emergency Room	-1.0%	8.2%	7.2%	-7.6%	7.4%	-0.8%	-1.5%	6.6%	4.9%	5.7%	4.6%	5.4%
Medical / Surgical	7.7%	3.5%	11.5%	-2.4%	3.8%	1.3%	6.8%	2.2%	9.2%	18.6%	14.6%	17.4%
Other Services	3.1%	6.6%	9.9%	-3.8%	3.7%	-0.2%	2.8%	4.5%	7.4%	12.5%	9.0%	11.5%
Psychiatric / Substance Abuse	3.9%	13.5%	18.0%	-10.1%	2.9%	-7.5%	0.4%	4.9%	5.3%	0.2%	0.5%	0.3%
TOTAL	4.8%	5.3%	10.4%	-3.8%	4.3%	0.4%	4.1%	3.6%	7.9%	37.0%	28.6%	34.6%
PHYSICIAN SERVICES												
Anesthesia	4.0%	-1.3%	2.6%	-2.6%	4.1%	1.3%	3.2%	-0.8%	2.3%	2.2%	1.6%	2.0%
Chemotherapy / Radiation	4.6%	5.2%	10.1%	-3.3%	4.4%	1.0%	3.1%	2.5%	5.7%	0.5%	1.0%	0.6%
Emergency Room	1.0%	-2.3%	-1.3%	-1.3%	9.6%	8.1%	0.8%	-0.2%	0.7%	1.2%	0.8%	1.1%
Immunizations / Injections / Allergy	1.1%	6.8%	7.9%	-12.4%	5.3%	-7.8%	0.2%	6.3%	6.5%	2.1%	0.5%	1.6%
Inpatient Surgery	3.3%	0.1%	3.4%	-1.6%	0.8%	-0.8%	2.3%	-0.3%	2.1%	1.4%	1.4%	1.4%
Inpatient Visits	1.7%	1.3%	3.1%	-5.4%	1.9%	-3.6%	0.5%	0.9%	1.4%	1.3%	1.1%	1.2%
Lab & Pathology	2.2%	-1.0%	1.1%	-0.8%	0.8%	0.0%	0.7%	-0.2%	0.5%	1.7%	5.6%	2.8%
Maternity	-2.7%	3.1%	0.3%	-12.6%	-11.7%	-22.9%	-4.6%	1.9%	-2.8%	1.0%	0.4%	0.8%
Office Visits	0.7%	0.4%	1.0%	-4.1%	1.8%	-2.4%	0.3%	0.4%	0.6%	13.8%	4.0%	11.0%
Other Services	10.0%	-4.3%	5.3%	2.2%	-1.7%	0.4%	9.3%	-4.8%	4.1%	10.9%	7.8%	10.0%
Outpatient Surgery	4.3%	2.5%	6.9%	-5.6%	4.5%	-1.3%	3.1%	2.1%	5.2%	3.5%	2.1%	3.1%
Psychiatric / Substance Abuse	6.8%	2.0%	8.9%	4.7%	-6.2%	-1.8%	6.6%	1.4%	8.1%	3.0%	0.6%	2.3%
Radiology	-12.4%	10.0%	-3.6%	-14.5%	12.1%	-4.1%	-12.6%	10.0%	-3.8%	2.4%	1.5%	2.1%
Therapies	8.1%	-1.0%	7.0%	1.5%	2.4%	3.9%	7.7%	-0.8%	6.9%	2.1%	0.3%	1.6%
TOTAL	3.5%	0.2%	3.7%	-2.1%	1.5%	-0.7%	2.8%	0.0%	2.8%	46.9%	28.5%	41.6%
OTHER												
Ambulance	5.8%	-2.8%	2.8%	-20.0%	38.0%	10.4%	3.9%	1.1%	5.0%	1.0%	0.4%	0.8%
Appliances (DME)	99.1%	-9.8%	79.6%	-16.4%	58.1%	32.2%	6.2%	4.6%	11.1%	0.7%	3.8%	1.6%
Other Services	-17.6%	35.4%	11.6%	30.4%	32.6%	72.8%	-10.6%	45.0%	29.7%	1.9%	3.1%	2.3%
TOTAL	11.7%	16.2%	29.9%	3.0%	46.3%	50.7%	-2.3%	23.5%	20.7%	3.6%	7.3%	4.7%
GRAND TOTAL	4.3%	3.2%	7.6%	-4.3%	7.0%	2.4%	2.8%	1.9%	4.8%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2015 to June 2019
(Allowed Claims)**

48 Month Trends Summary - Excludes Drugs

	In State			Out of State			Total			In State	Out of State	Total
	<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>	<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>	<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>	<u>Weight</u>	<u>Weight</u>	<u>Weight</u>
HOSPITAL INPATIENT												
Maternity	-3.6%	5.2%	1.4%	-18.4%	-1.7%	-19.8%	-5.3%	0.1%	-5.2%	0.5%	0.6%	0.5%
Medical / Surgical	2.4%	3.3%	5.8%	-6.5%	8.6%	1.5%	1.0%	0.8%	1.8%	11.4%	33.8%	18.0%
Psychiatric / Substance Abuse	-0.8%	6.5%	5.7%	-39.6%	9.6%	-33.9%	-9.0%	3.6%	-5.8%	0.5%	0.5%	0.5%
TOTAL	2.0%	3.5%	5.6%	-7.2%	8.4%	0.7%	0.6%	0.8%	1.4%	12.3%	34.9%	19.0%
HOSPITAL OUTPATIENT												
Emergency Room	-1.6%	5.9%	4.2%	-8.5%	11.1%	1.6%	-2.2%	5.5%	3.1%	5.7%	4.4%	5.3%
Medical / Surgical	5.5%	2.6%	8.2%	-6.1%	-2.3%	-8.2%	4.4%	-0.3%	4.2%	18.4%	15.3%	17.5%
Other Services	3.4%	2.9%	6.4%	-6.9%	1.4%	-5.6%	2.8%	0.5%	3.3%	12.5%	9.2%	11.5%
Psychiatric / Substance Abuse	6.0%	7.6%	14.0%	-34.2%	1.7%	-33.0%	-7.4%	-5.3%	-12.3%	0.2%	0.7%	0.4%
TOTAL	3.7%	3.2%	7.0%	-7.3%	0.9%	-6.4%	2.7%	0.8%	3.6%	36.8%	29.6%	34.7%
PHYSICIAN SERVICES												
Anesthesia	1.5%	-0.6%	0.9%	-6.4%	6.3%	-0.6%	0.6%	0.1%	0.6%	2.2%	1.6%	2.0%
Chemotherapy / Radiation	2.5%	2.5%	5.1%	-15.5%	10.4%	-6.7%	-1.2%	2.9%	1.6%	0.5%	1.0%	0.6%
Emergency Room	-0.2%	-2.3%	-2.5%	-5.9%	13.2%	6.6%	-0.7%	0.2%	-0.5%	1.2%	0.7%	1.1%
Immunizations / Injections / Allergy	1.9%	5.4%	7.4%	-6.1%	3.2%	-3.1%	1.3%	5.0%	6.4%	2.0%	0.4%	1.6%
Inpatient Surgery	2.7%	-1.0%	1.7%	-2.3%	4.2%	1.8%	1.7%	0.1%	1.7%	1.4%	1.3%	1.4%
Inpatient Visits	1.5%	2.2%	3.8%	-2.9%	5.3%	2.2%	0.7%	2.6%	3.4%	1.3%	1.0%	1.2%
Lab & Pathology	0.3%	0.1%	0.5%	-4.1%	-0.3%	-4.4%	-1.9%	-0.4%	-2.3%	1.7%	5.7%	2.9%
Maternity	-4.1%	3.9%	-0.3%	2.7%	-21.2%	-19.1%	-2.8%	0.8%	-2.0%	1.0%	0.4%	0.8%
Office Visits	0.0%	0.6%	0.6%	-6.0%	1.9%	-4.3%	-0.5%	0.6%	0.1%	14.0%	4.0%	11.0%
Other Services	7.7%	-5.6%	1.6%	-1.2%	-5.6%	-6.8%	6.9%	-6.8%	-0.4%	11.1%	8.1%	10.2%
Outpatient Surgery	3.3%	1.9%	5.3%	-7.5%	3.4%	-4.4%	1.9%	1.3%	3.2%	3.5%	2.1%	3.1%
Psychiatric / Substance Abuse	6.1%	1.2%	7.4%	-27.8%	2.5%	-26.0%	2.5%	2.3%	4.9%	3.0%	0.7%	2.3%
Radiology	-11.0%	10.3%	-1.8%	-15.5%	11.8%	-5.5%	-11.5%	10.0%	-2.6%	2.4%	1.6%	2.2%
Therapies	5.6%	-0.1%	5.5%	-1.4%	1.6%	0.1%	5.2%	0.1%	5.2%	2.1%	0.3%	1.6%
TOTAL	2.3%	-0.1%	2.2%	-5.4%	0.8%	-4.6%	1.3%	-0.5%	0.9%	47.4%	28.9%	41.9%
OTHER												
Ambulance	2.3%	2.3%	4.6%	-18.0%	26.8%	3.9%	0.7%	3.4%	4.1%	1.0%	0.4%	0.8%
Appliances (DME)	30.3%	-6.7%	21.6%	-10.1%	41.4%	27.2%	6.8%	0.4%	7.2%	0.8%	3.5%	1.6%
Other Services	-13.3%	40.7%	22.0%	17.7%	24.5%	46.6%	-9.1%	44.1%	30.9%	1.8%	2.7%	2.0%
TOTAL	0.7%	19.6%	20.4%	0.7%	33.6%	34.6%	-1.7%	21.1%	19.1%	3.5%	6.6%	4.4%
GRAND TOTAL	2.7%	2.3%	5.0%	-6.2%	5.7%	-0.8%	1.6%	1.2%	2.7%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2018 to June 2019
(Allowed Claims)**

12 Month Summary - Excludes Drugs

	Number of Visits					Total Allowed Cost				
	<u>In State</u>	<u>Out of State</u>	<u>Total</u>	<u>In State %</u>	<u>Out of State %</u>	<u>In State</u>	<u>Out of State</u>	<u>Total</u>	<u>In State %</u>	<u>Out of State %</u>
HOSPITAL INPATIENT										
Maternity	1,007	69	1,076	93.6%	6.4%	2,152,498	609,008	2,761,507	77.9%	22.1%
Medical / Surgical	8,724	1,201	9,925	87.9%	12.1%	48,500,823	50,133,681	98,634,504	49.2%	50.8%
Psychiatric / Substance Abuse	291	49	340	85.7%	14.3%	2,127,703	463,951	2,591,654	82.1%	17.9%
TOTAL	10,022	1,319	11,341	88.4%	11.6%	52,781,024	51,206,640	103,987,664	50.8%	49.2%
HOSPITAL OUTPATIENT										
Emergency Room	35,488	2,943	38,431	92.3%	7.7%	23,797,678	7,104,170	30,901,848	77.0%	23.0%
Medical / Surgical	108,865	8,431	117,296	92.8%	7.2%	79,590,487	23,617,161	103,207,649	77.1%	22.9%
Other Services	258,983	13,091	272,074	95.2%	4.8%	54,305,889	13,809,325	68,115,214	79.7%	20.3%
Psychiatric / Substance Abuse	5,684	1,801	7,486	75.9%	24.1%	1,039,667	765,945	1,805,612	57.6%	42.4%
TOTAL	409,020	26,267	435,287	94.0%	6.0%	158,733,720	45,296,602	204,030,322	77.8%	22.2%
PHYSICIAN SERVICES										
Anesthesia	38,717	4,447	43,165	89.7%	10.3%	8,453,227	2,521,142	10,974,369	77.0%	23.0%
Chemotherapy / Radiation	8,631	1,680	10,311	83.7%	16.3%	2,161,551	1,345,607	3,507,159	61.6%	38.4%
Emergency Room	34,794	2,729	37,523	92.7%	7.3%	4,516,716	1,307,726	5,824,442	77.5%	22.5%
Immunizations / Injections / Allergy	238,618	11,456	250,074	95.4%	4.6%	9,753,197	665,319	10,418,516	93.6%	6.4%
Inpatient Surgery	8,814	1,950	10,764	81.9%	18.1%	5,411,376	1,960,579	7,371,955	73.4%	26.6%
Inpatient Visits	47,372	7,822	55,195	85.8%	14.2%	5,187,173	1,476,783	6,663,956	77.8%	22.2%
Lab & Pathology	316,084	310,941	627,024	50.4%	49.6%	6,497,528	8,606,261	15,103,790	43.0%	57.0%
Maternity	3,518	674	4,192	83.9%	16.1%	3,972,710	376,183	4,348,893	91.3%	8.7%
Office Visits	564,604	44,970	609,574	92.6%	7.4%	53,611,244	6,044,291	59,655,535	89.9%	10.1%
Other Services	614,658	53,420	668,078	92.0%	8.0%	45,167,823	12,527,387	57,695,210	78.3%	21.7%
Outpatient Surgery	45,059	5,334	50,392	89.4%	10.6%	14,112,522	3,035,186	17,147,708	82.3%	17.7%
Psychiatric / Substance Abuse	129,083	12,345	141,429	91.3%	8.7%	12,849,603	966,621	13,816,224	93.0%	7.0%
Radiology	157,503	16,261	173,764	90.6%	9.4%	8,935,979	2,225,603	11,161,582	80.1%	19.9%
Therapies	180,627	10,926	191,553	94.3%	5.7%	8,772,752	434,854	9,207,606	95.3%	4.7%
TOTAL	2,388,083	484,954	2,873,037	83.1%	16.9%	189,403,401	43,493,543	232,896,944	81.3%	18.7%
OTHER										
Ambulance	10,912	531	11,443	95.4%	4.6%	3,982,992	720,358	4,703,350	84.7%	15.3%
Appliances (DME)	53,609	23,246	76,854	69.8%	30.2%	4,308,092	5,341,657	9,649,749	44.6%	55.4%
Other Services	14,065	5,967	20,032	70.2%	29.8%	7,808,865	7,327,150	15,136,015	51.6%	48.4%
TOTAL	78,586	29,743	108,329	72.5%	27.5%	16,099,949	13,389,165	29,489,114	54.6%	45.4%
GRAND TOTAL	2,903,270	549,890	3,453,160	84.1%	15.9%	417,018,094	153,385,950	570,404,045	73.1%	26.9%

**West Virginia PEIA Non-Medicare Prescription Drugs Total
Study Period of July 2015 to June 2019
(Paid Claims)**

24 Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	1.7%	13.6%	15.5%

36 Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	-12.9%	24.9%	8.7%

48 Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	-10.2%	24.9%	12.1%

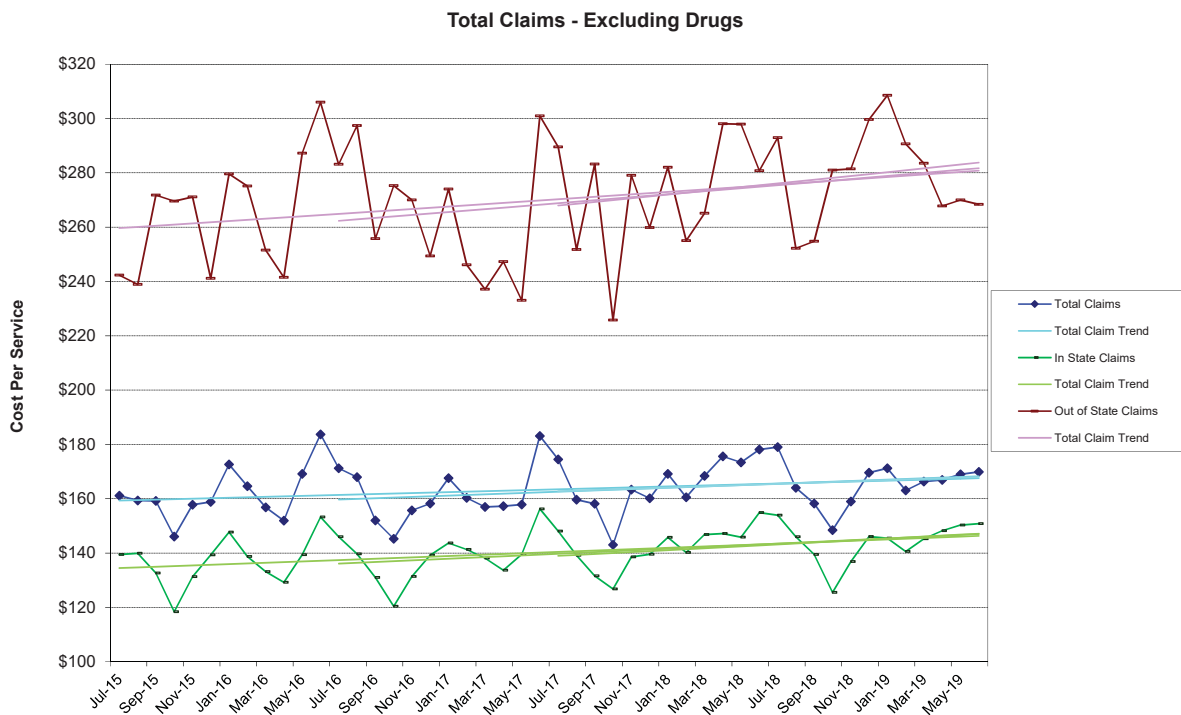
Appendix A

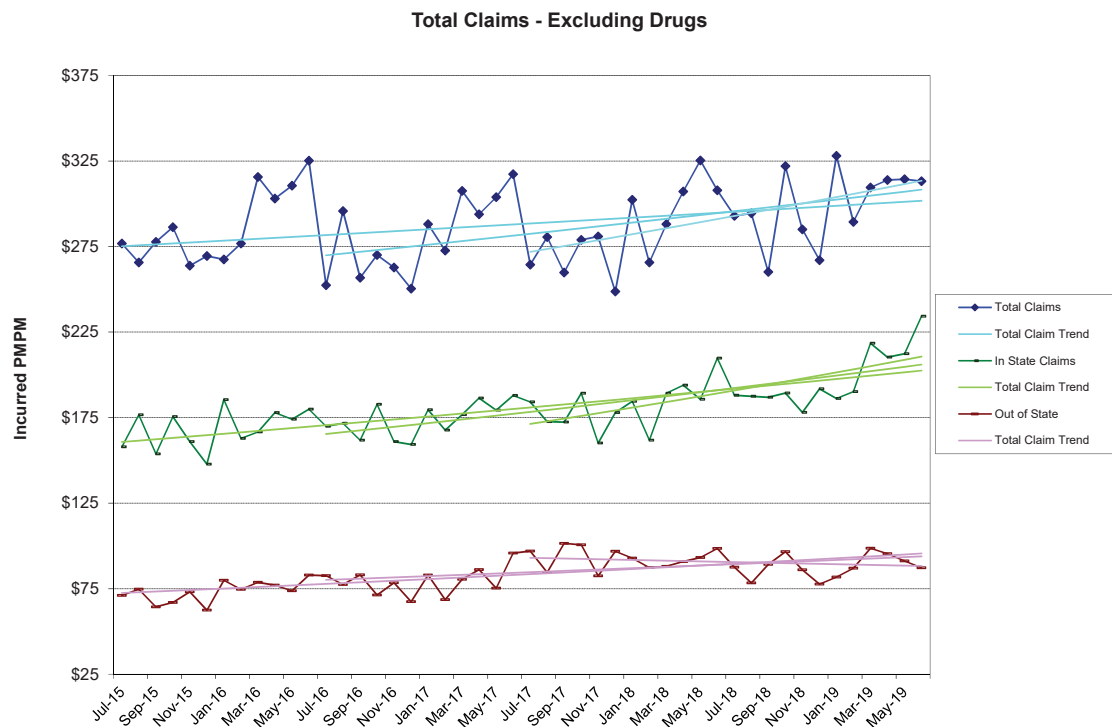
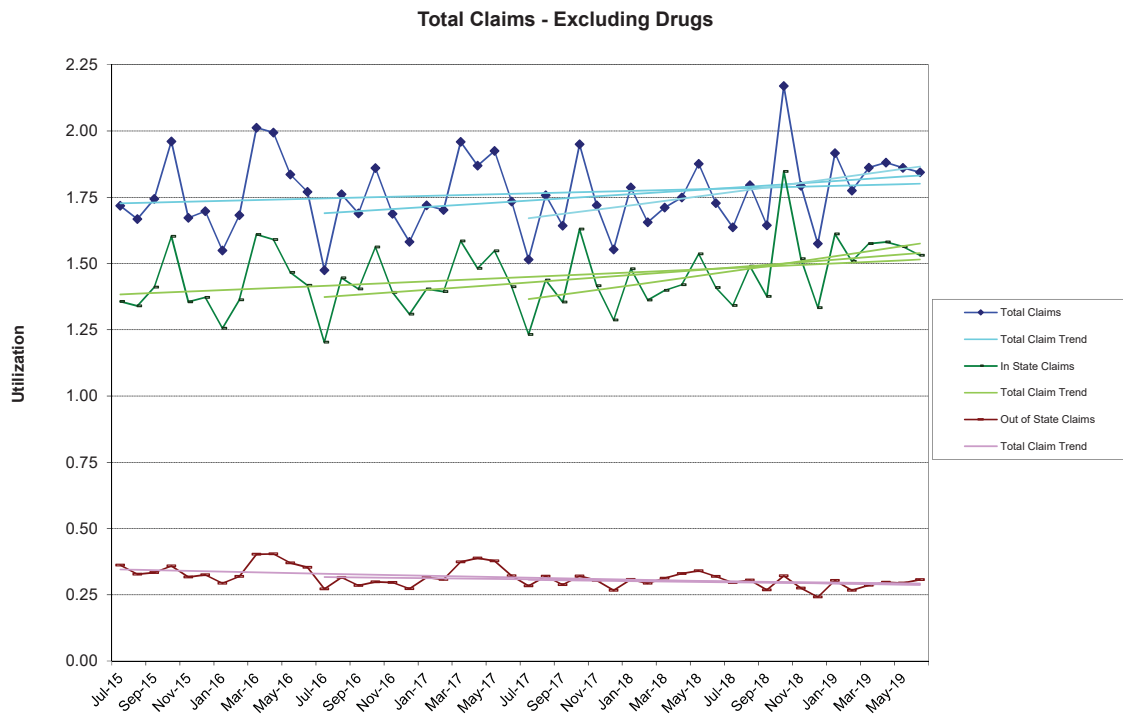
NON-MEDICARE CLAIMS
Excluding Drugs
GRAND TOTAL

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.5%	3.0%	8.6%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.8%	1.9%	4.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.6%	1.2%	2.7%





NON-MEDICARE CLAIMS
Excluding Drugs

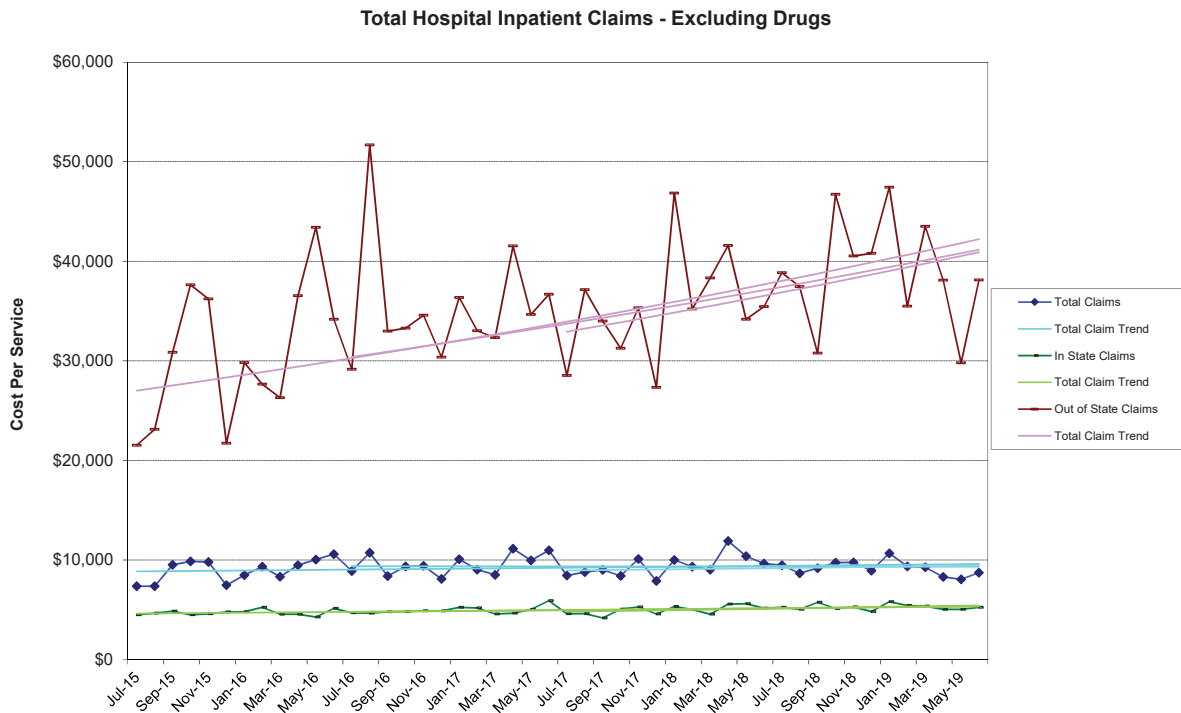
HOSPITAL INPATIENT

TOTAL

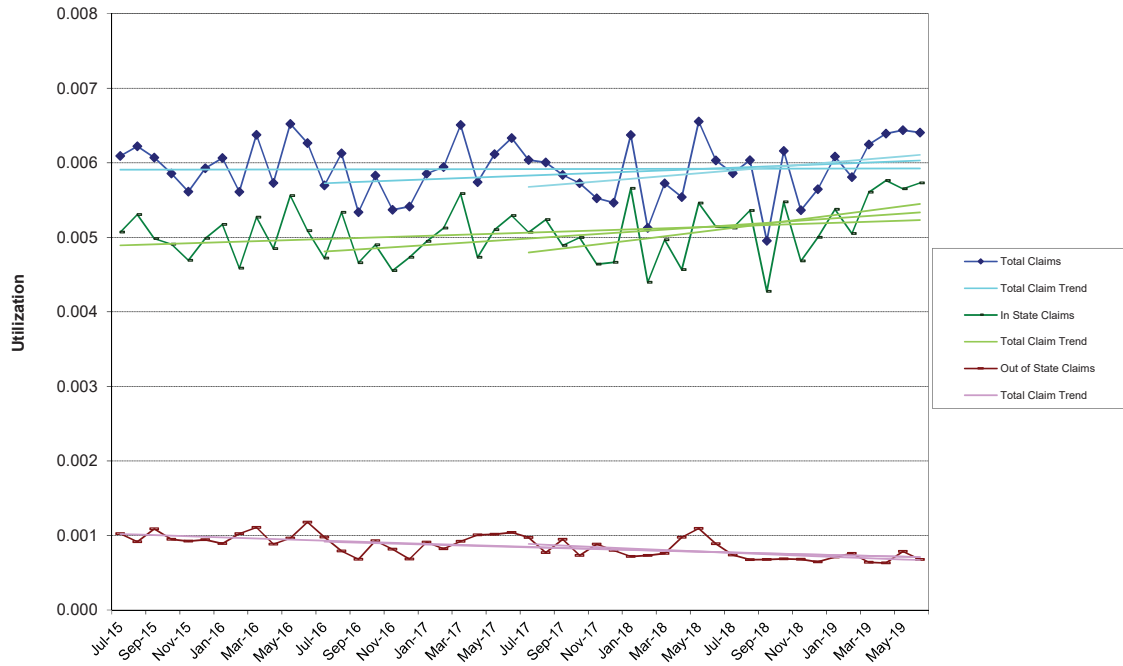
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.1%	0.4%	4.6%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.8%	-2.4%	-0.7%

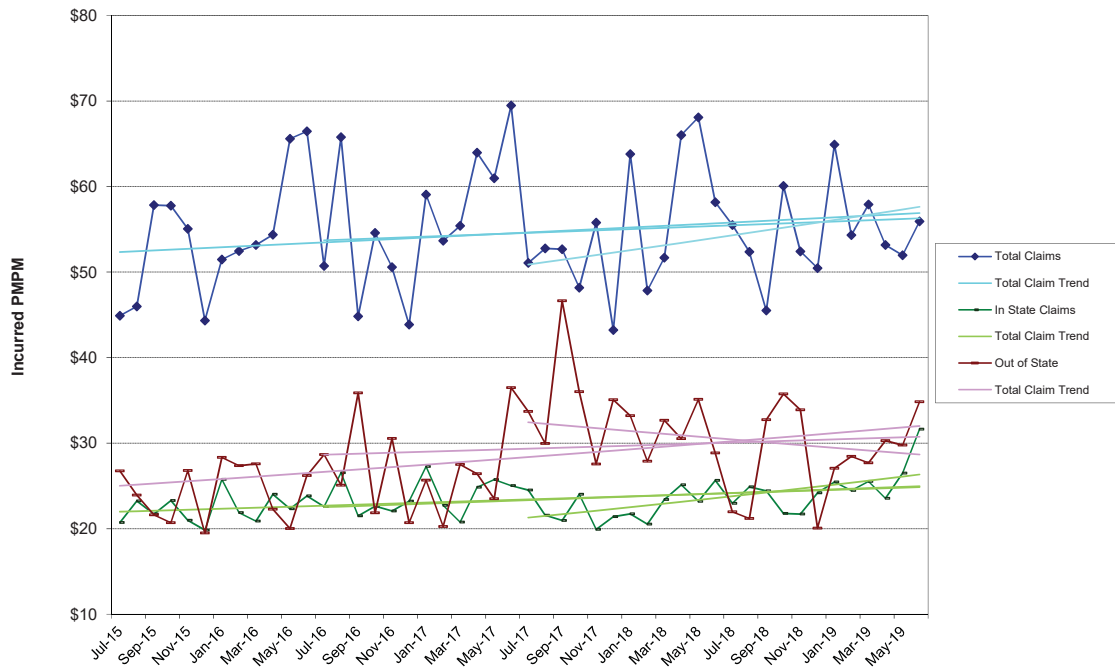
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.6%	0.8%	1.4%



Total Hospital Inpatient Claims - Excluding Drugs



Total Hospital Inpatient Claims - Excluding Drugs



NON-MEDICARE CLAIMS
Excluding Drugs

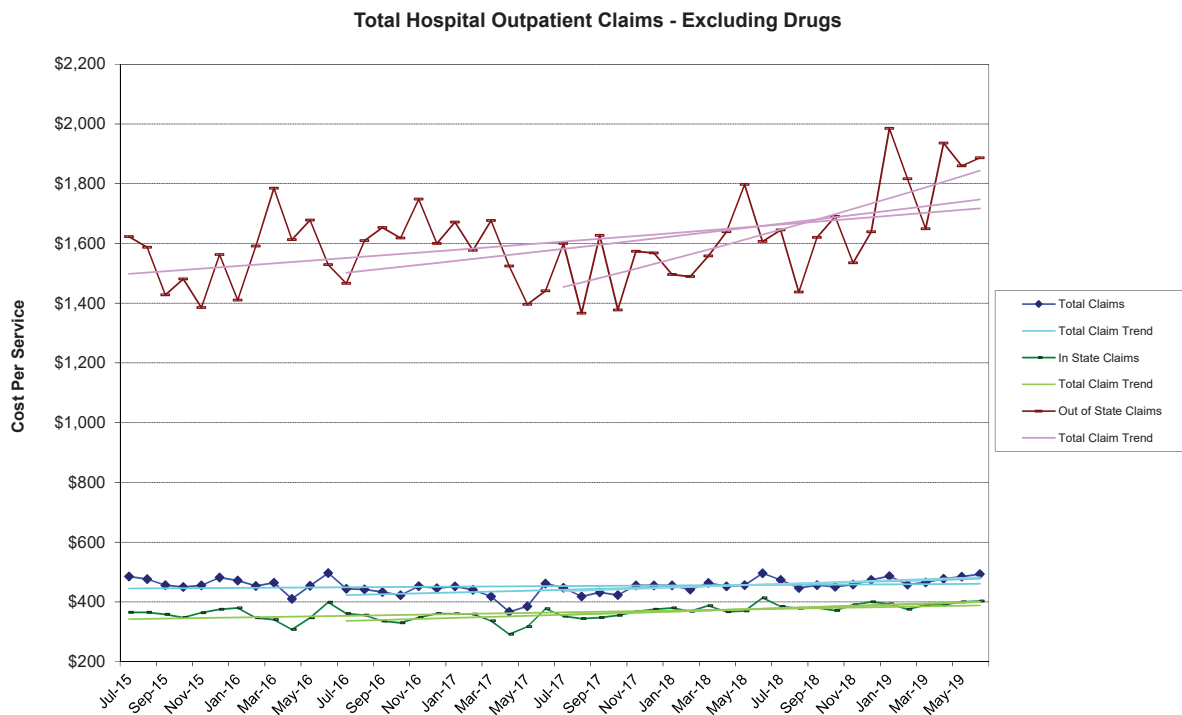
HOSPITAL OUTPATIENT

TOTAL

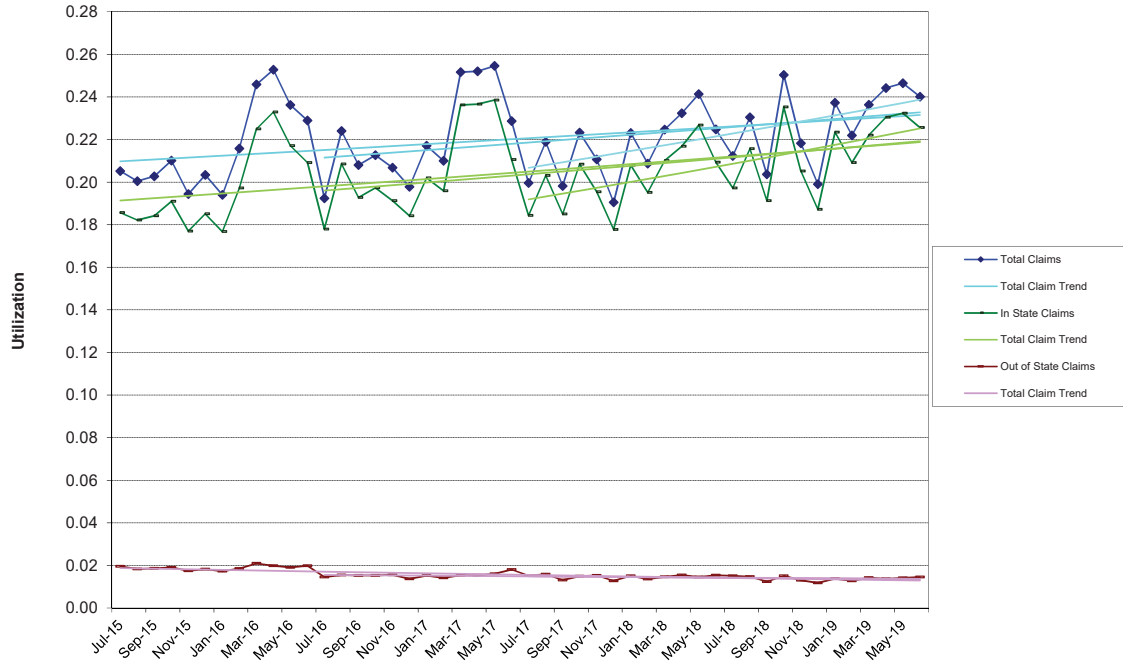
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
8.2%	5.2%	13.8%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.1%	3.6%	7.9%

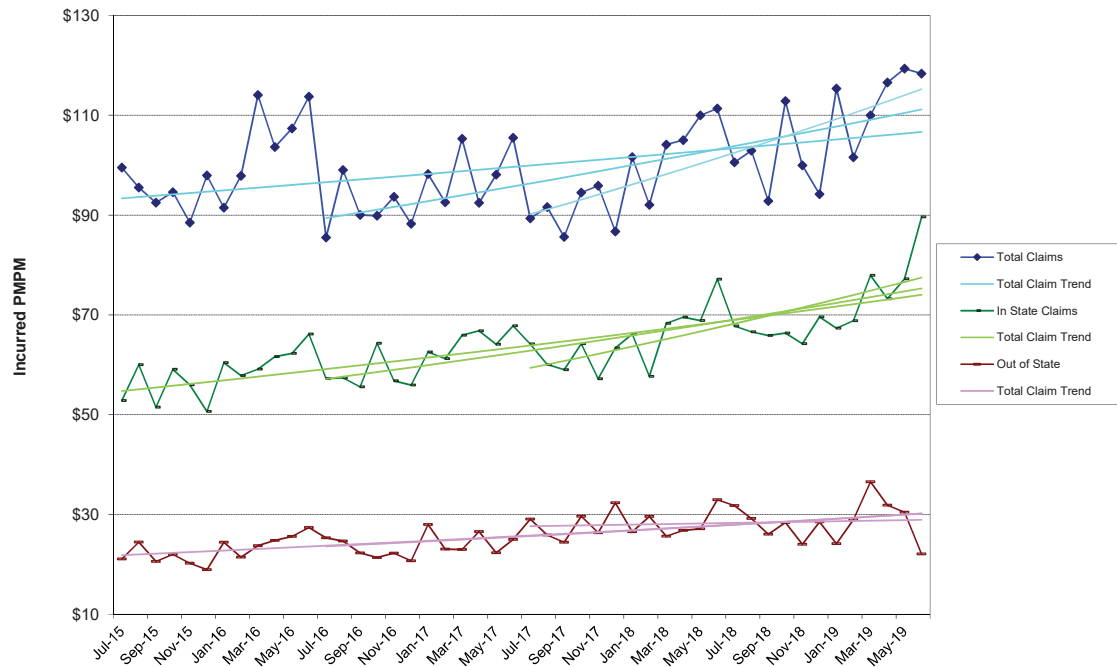
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.7%	0.8%	3.6%



Total Hospital Outpatient Claims - Excluding Drugs



Total Hospital Outpatient Claims - Excluding Drugs



NON-MEDICARE CLAIMS
Excluding Drugs

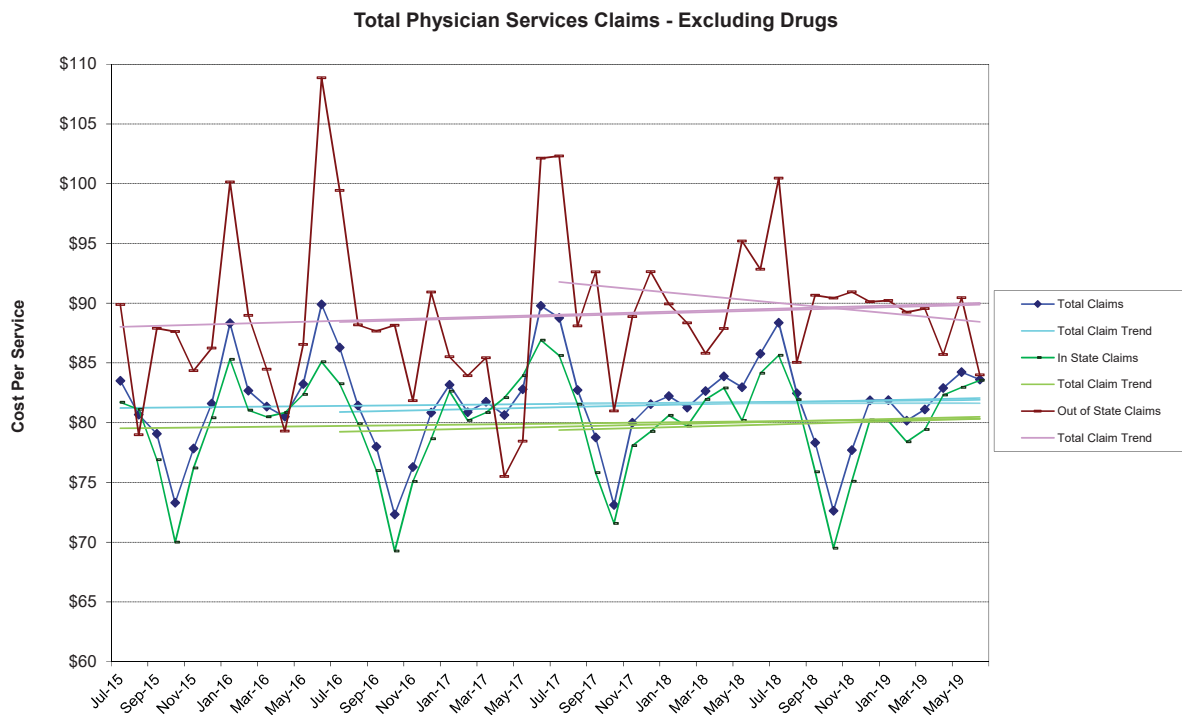
PHYSICIAN SERVICES

TOTAL

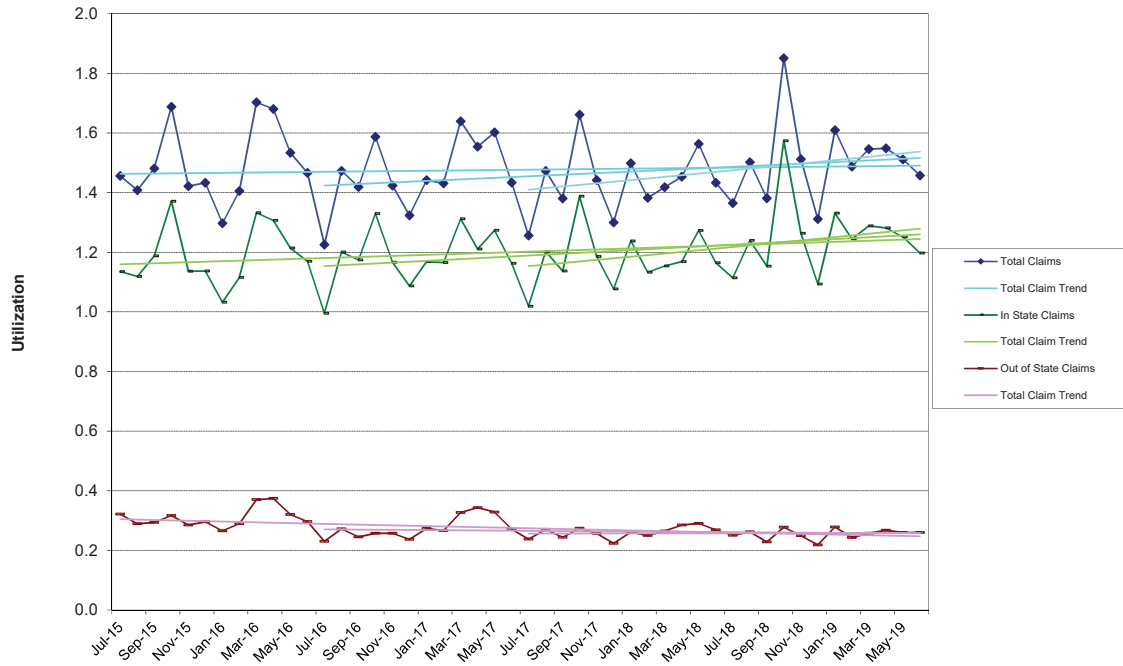
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.3%	-0.3%	5.0%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.8%	0.0%	2.8%

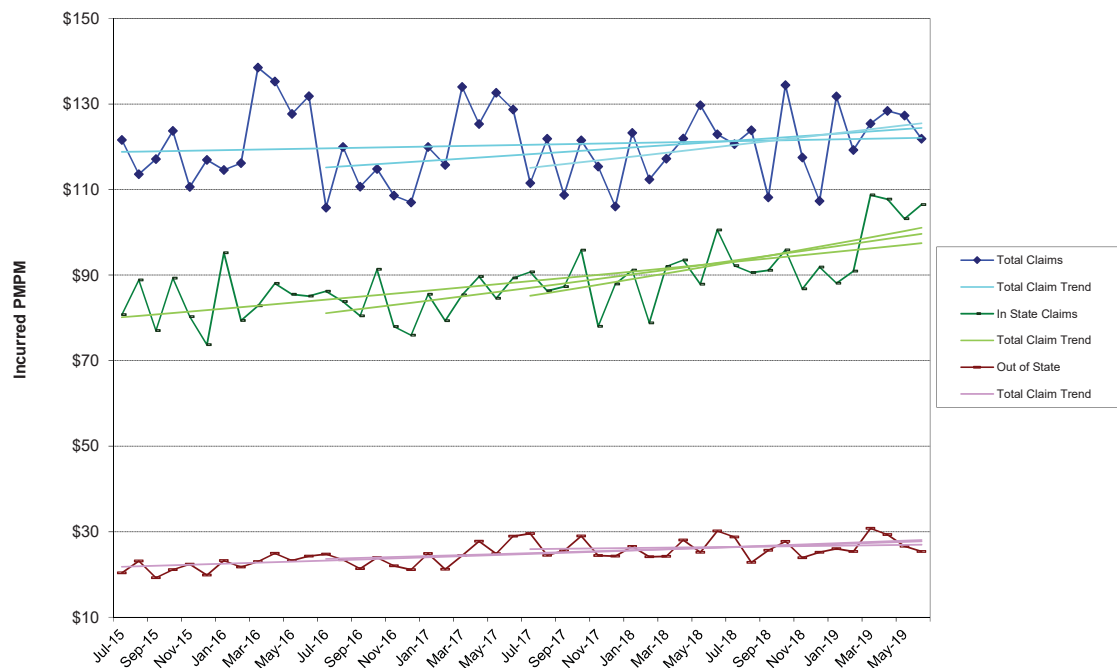
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.3%	-0.5%	0.9%



Total Physician Services Claims - Excluding Drugs



Total Physician Services Claims - Excluding Drugs



NON-MEDICARE CLAIMS
Excluding Drugs

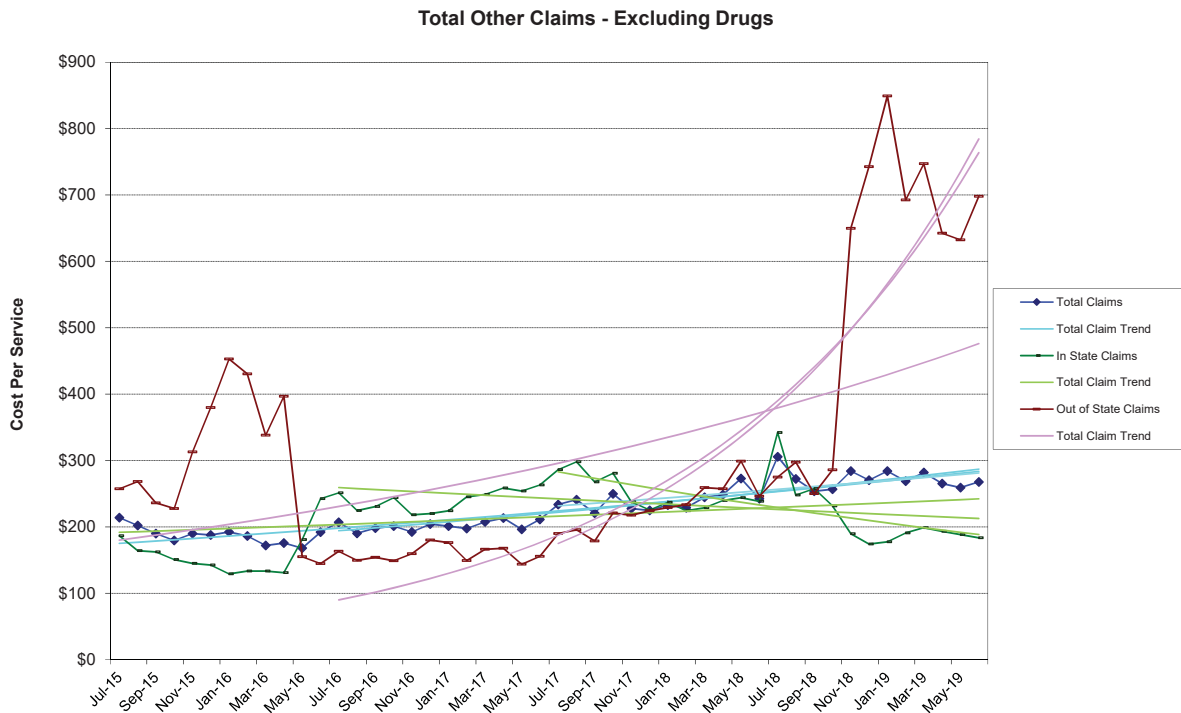
OTHER

TOTAL

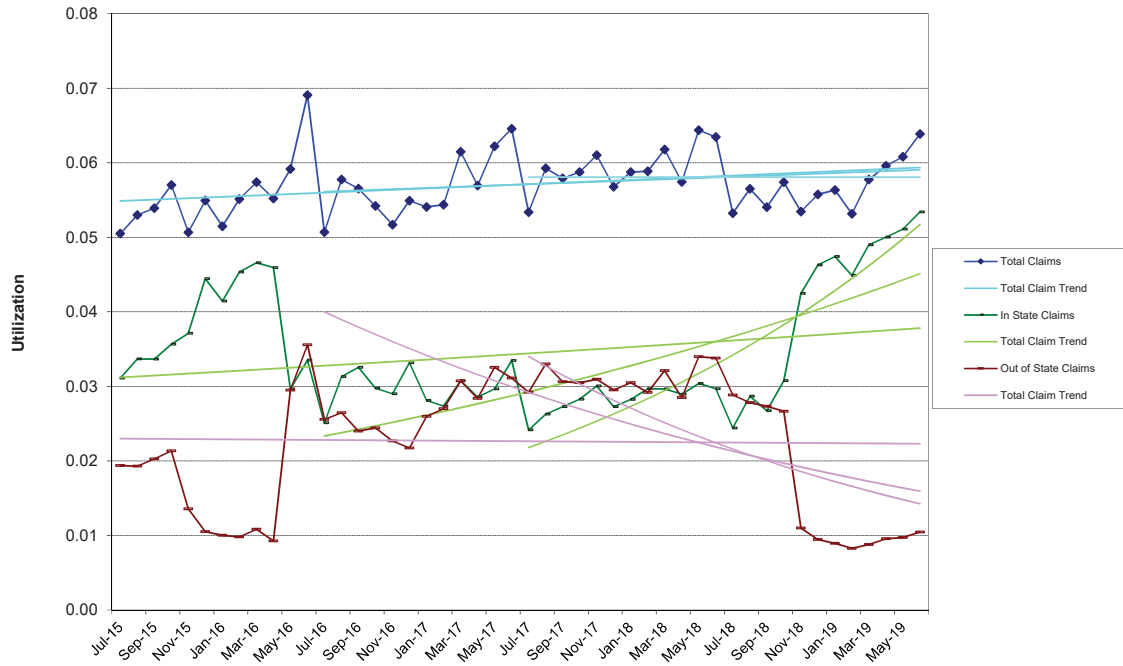
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-6.6%	23.6%	15.5%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.3%	23.5%	20.7%

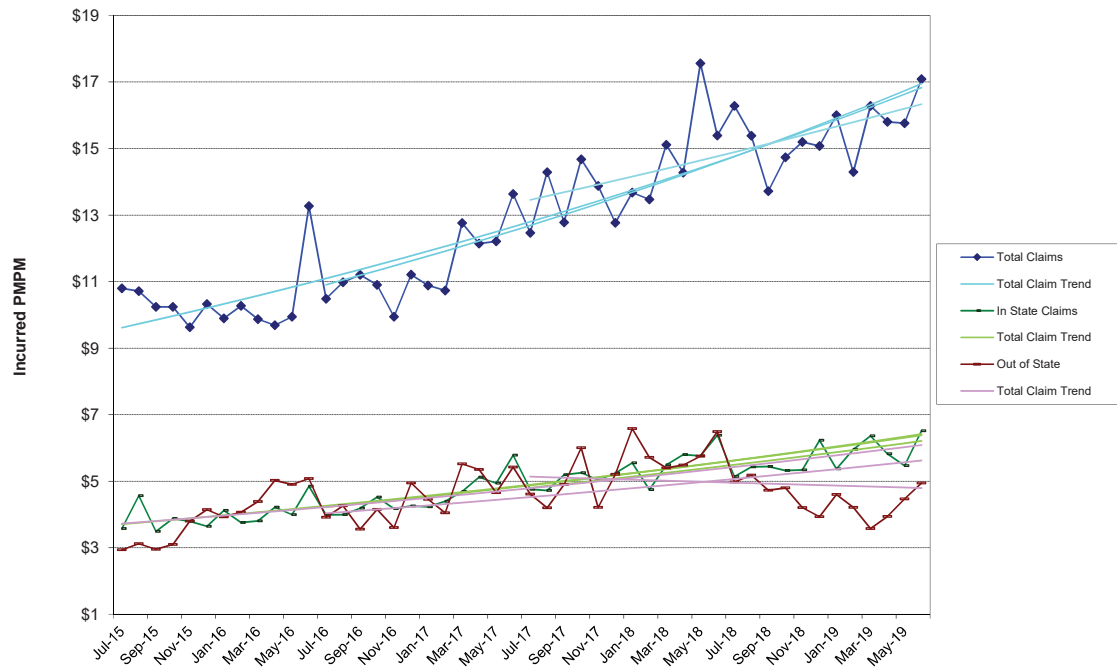
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.7%	21.1%	19.1%



Total Other Claims - Excluding Drugs



Total Other Claims - Excluding Drugs



NON-MEDICARE CLAIMS
Excluding Drugs

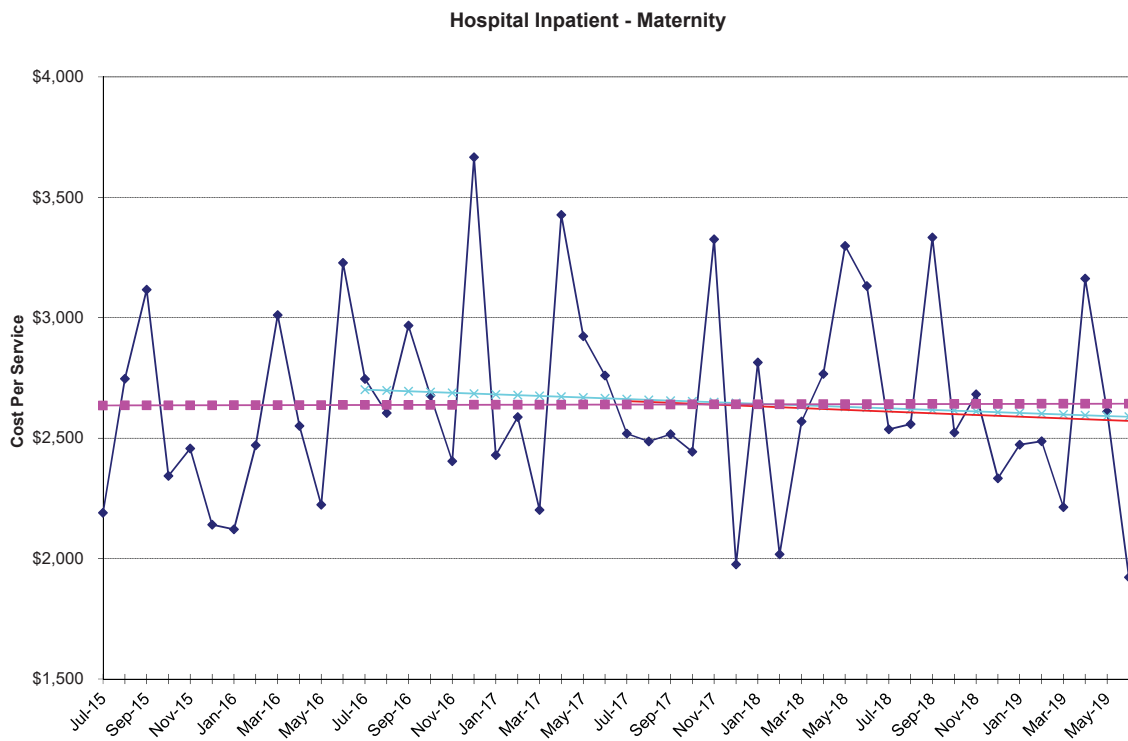
HOSPITAL INPATIENT

Maternity

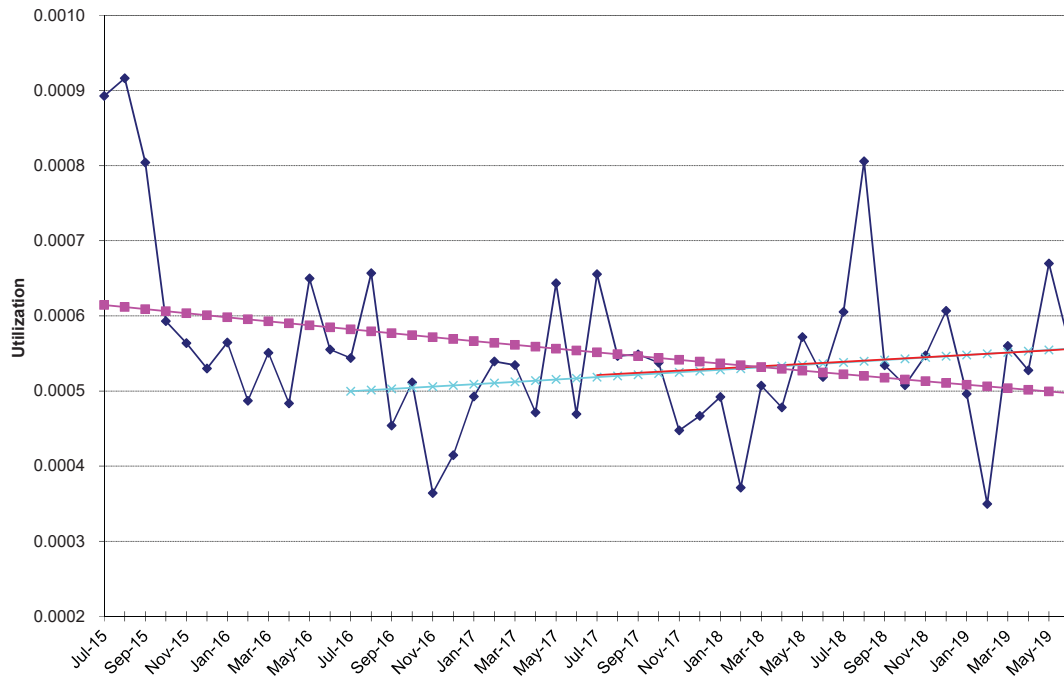
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.4%	-1.6%	1.7%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.8%	-1.4%	2.3%

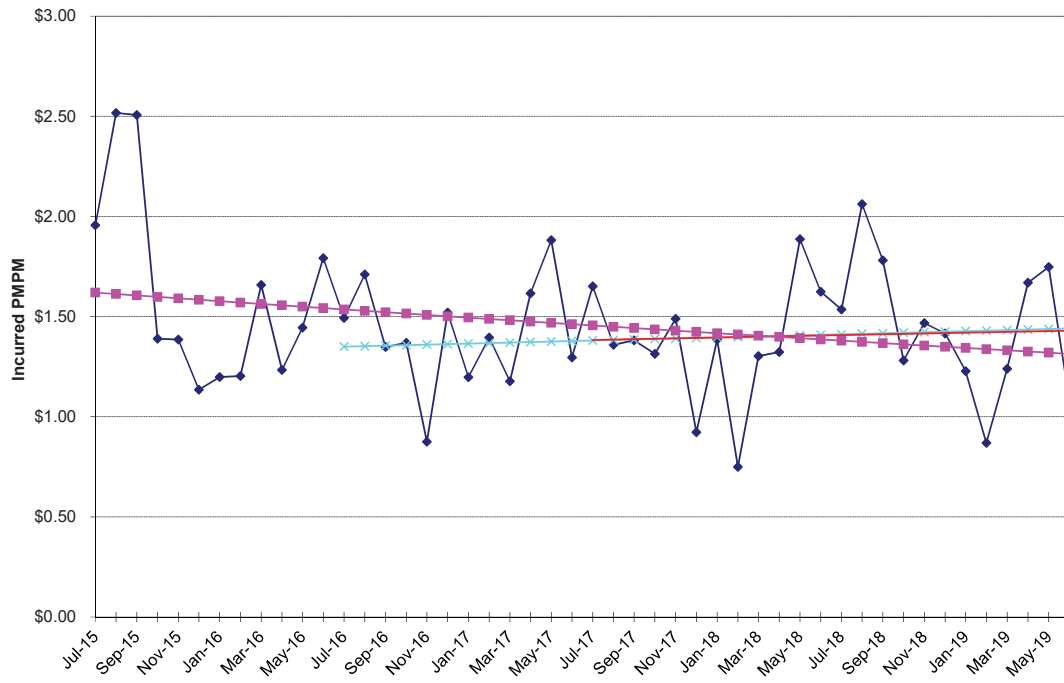
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-5.3%	0.1%	-5.2%



Hospital Inpatient - Maternity



Hospital Inpatient - Maternity



NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL INPATIENT

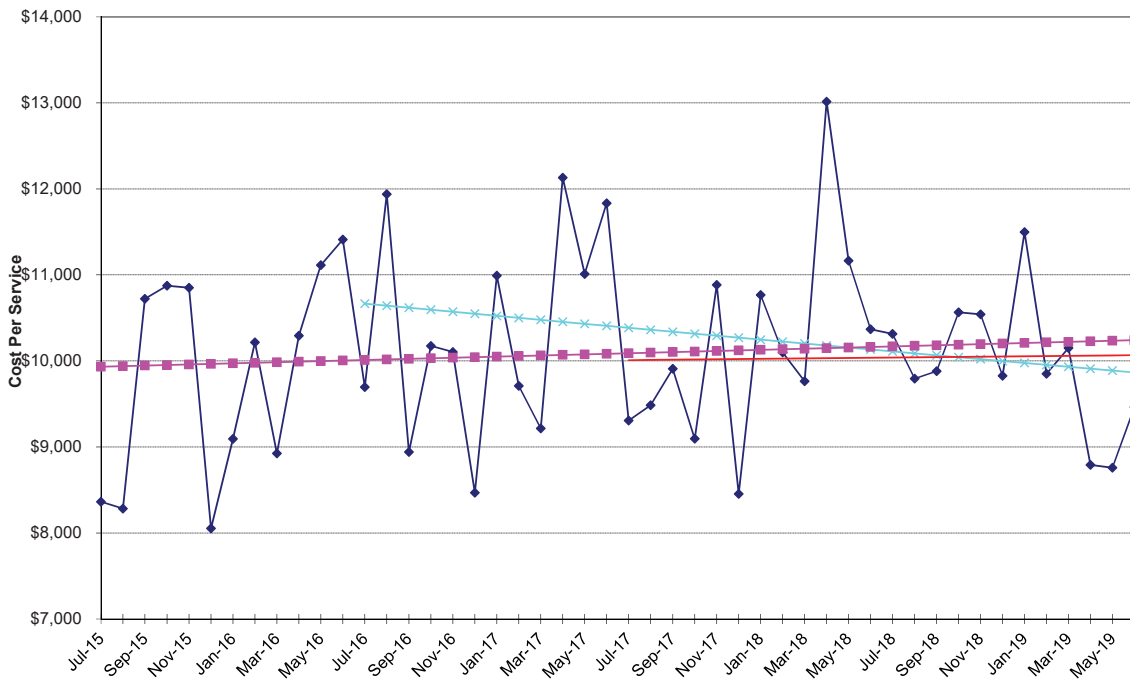
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.5%	0.3%	4.8%

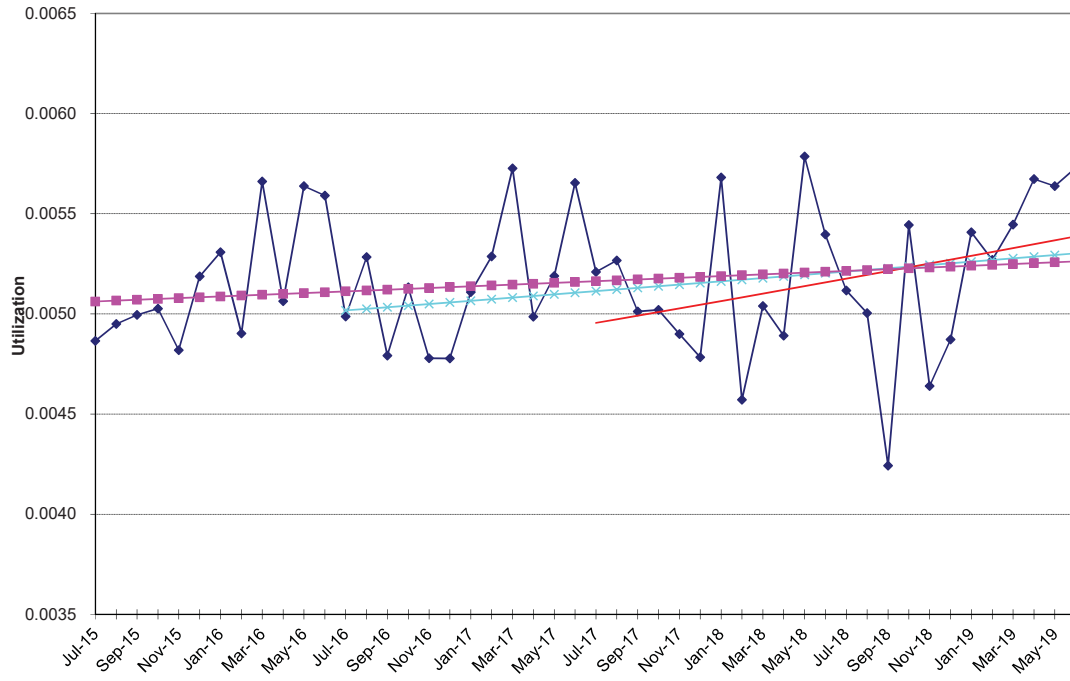
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.9%	-2.6%	-0.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.0%	0.8%	1.8%

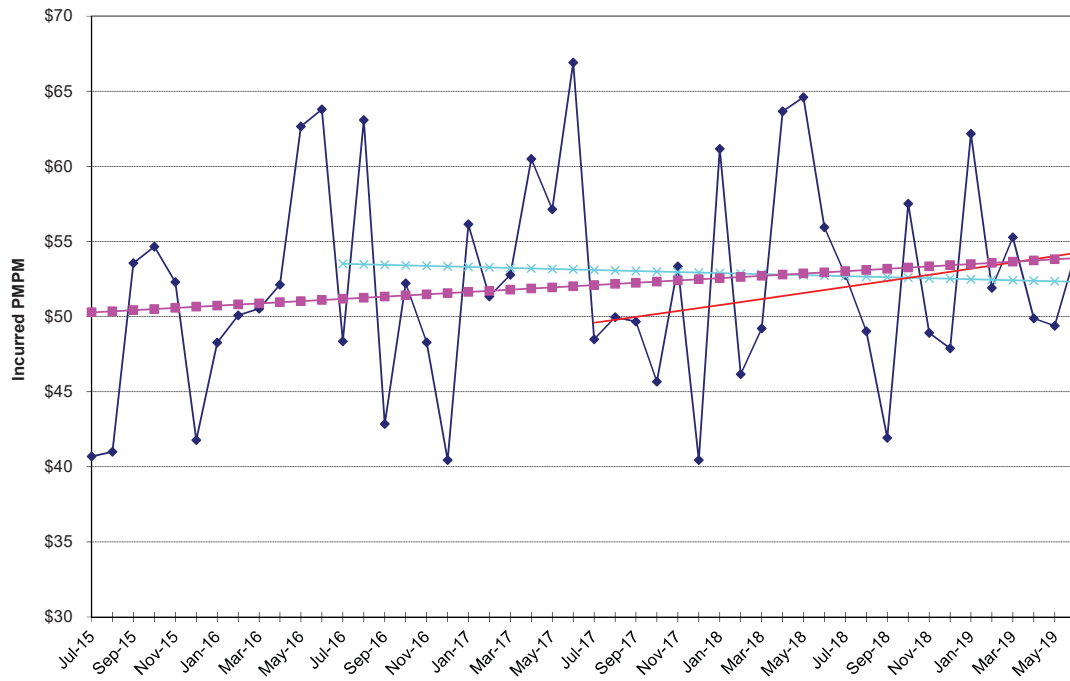
Hospital Inpatient - Medical / Surgical



Hospital Inpatient - Medical / Surgical



Hospital Inpatient - Medical / Surgical



NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL INPATIENT

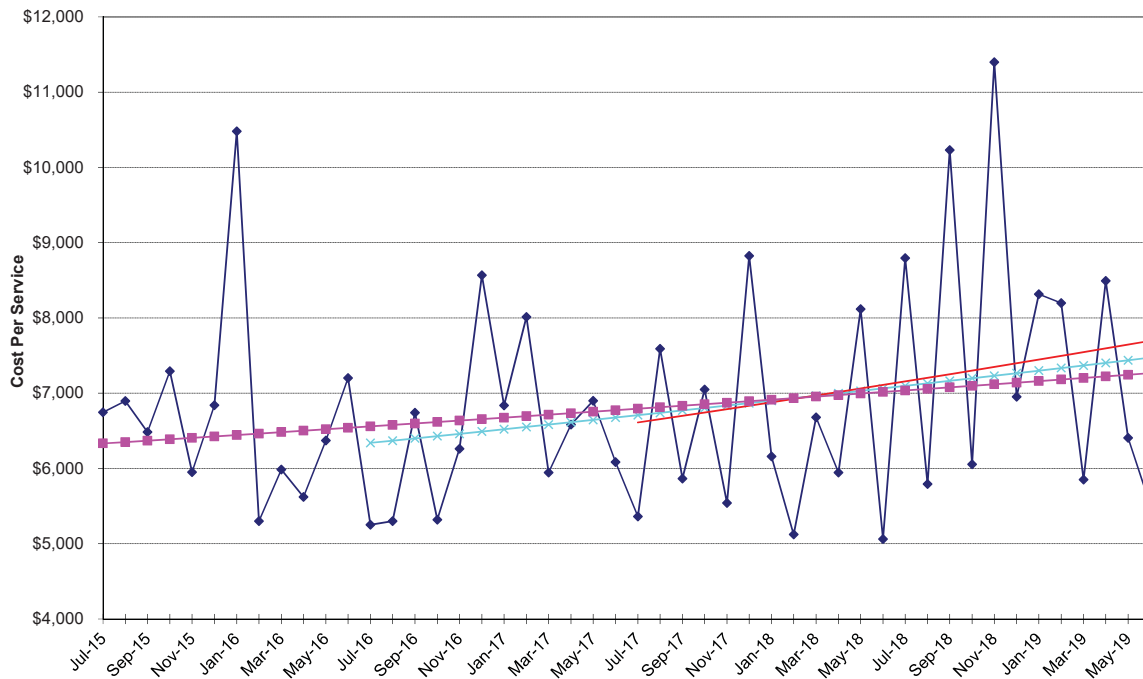
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.1%	8.3%	-1.6%

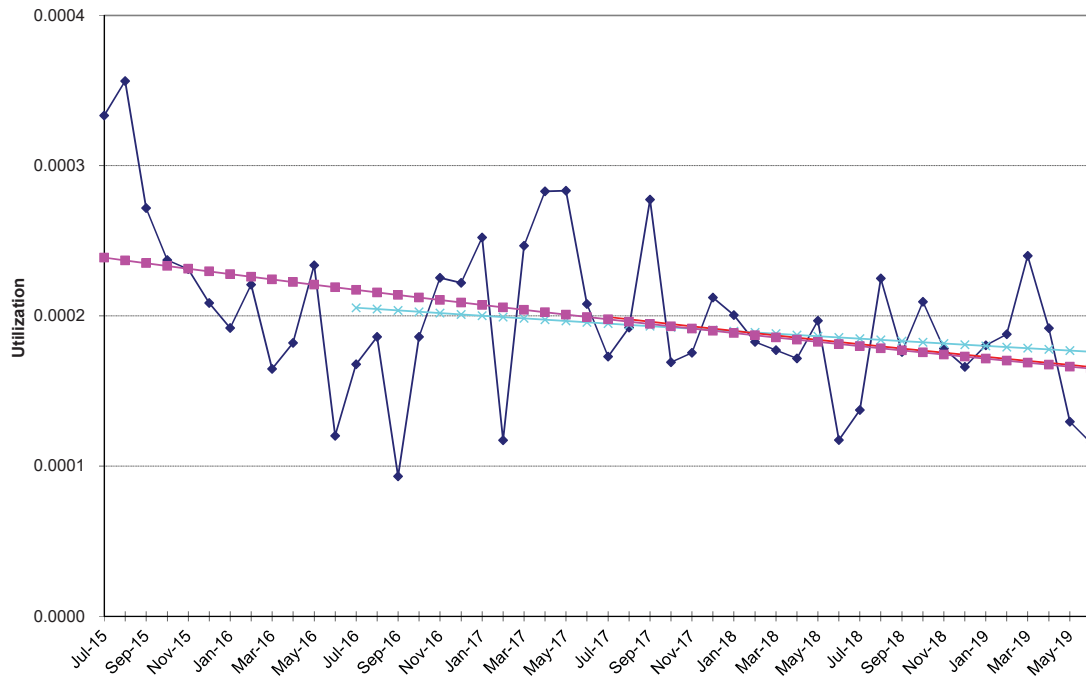
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-5.1%	5.8%	0.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.0%	3.6%	-5.8%

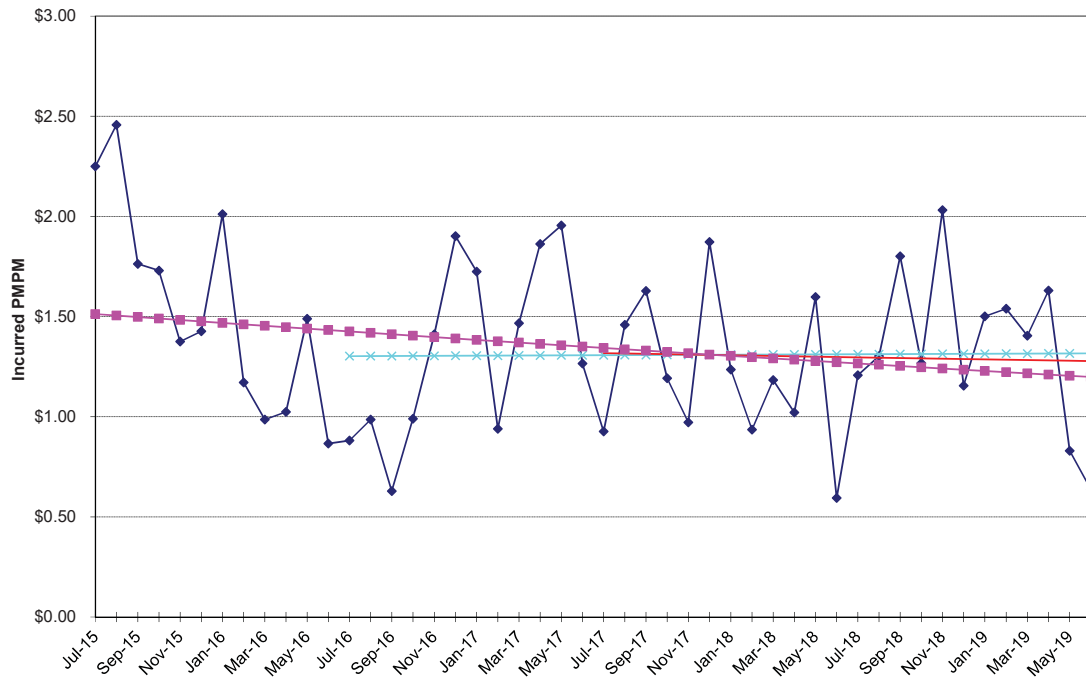
Hospital Inpatient - Psychiatric / Substance Abuse



Hospital Inpatient - Psychiatric / Substance Abuse



Hospital Inpatient - Psychiatric / Substance Abuse



NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL OUTPATIENT

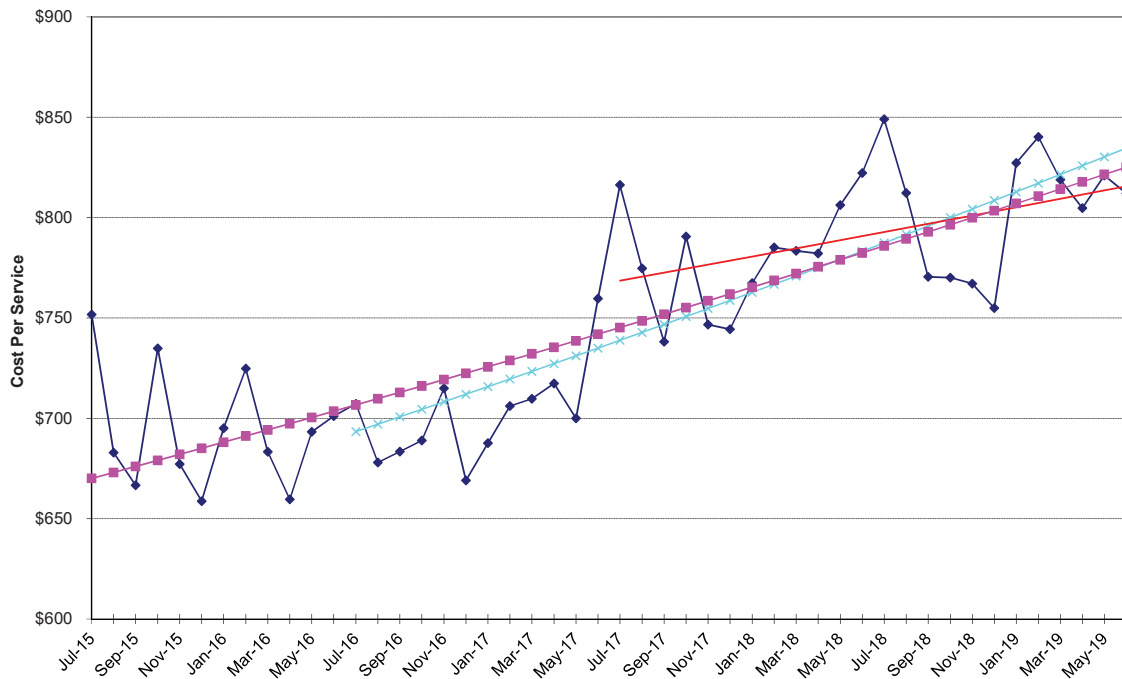
Emergency Room

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.5%	3.2%	3.7%

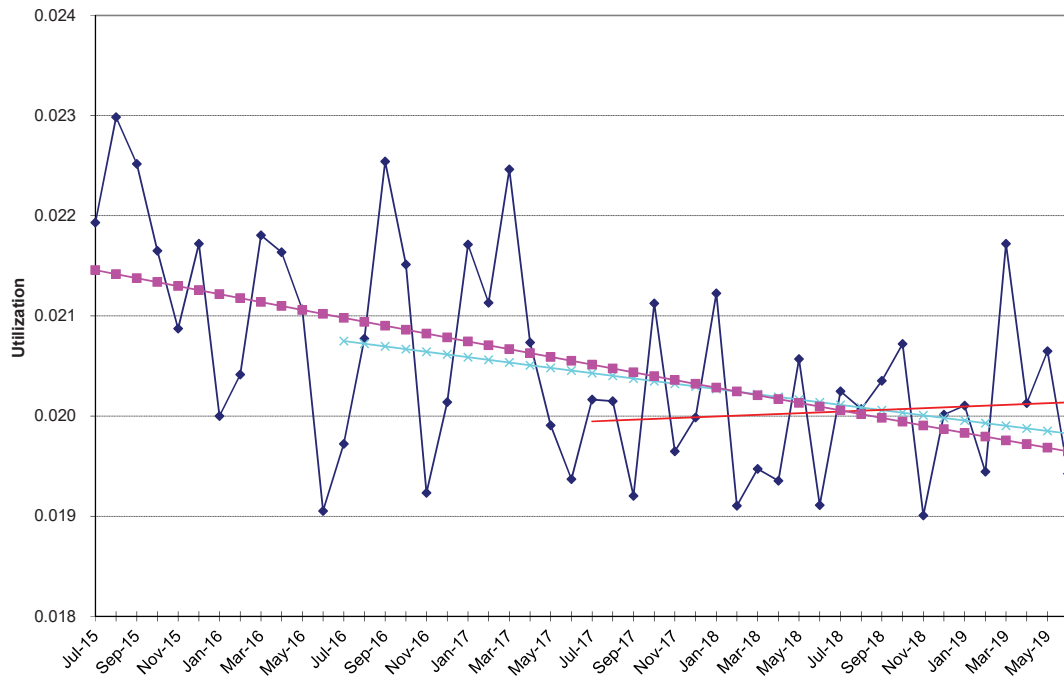
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.5%	6.6%	4.9%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.2%	5.5%	3.1%

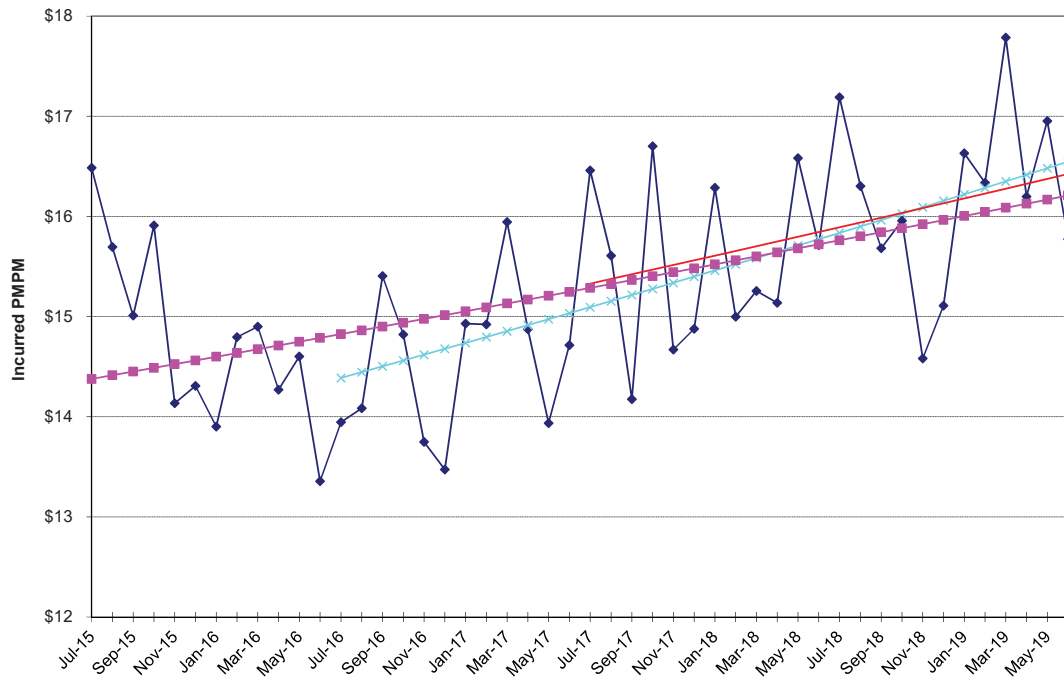
Hospital Outpatient - Emergency Room



Hospital Outpatient - Emergency Room



Hospital Outpatient - Emergency Room



NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL OUTPATIENT

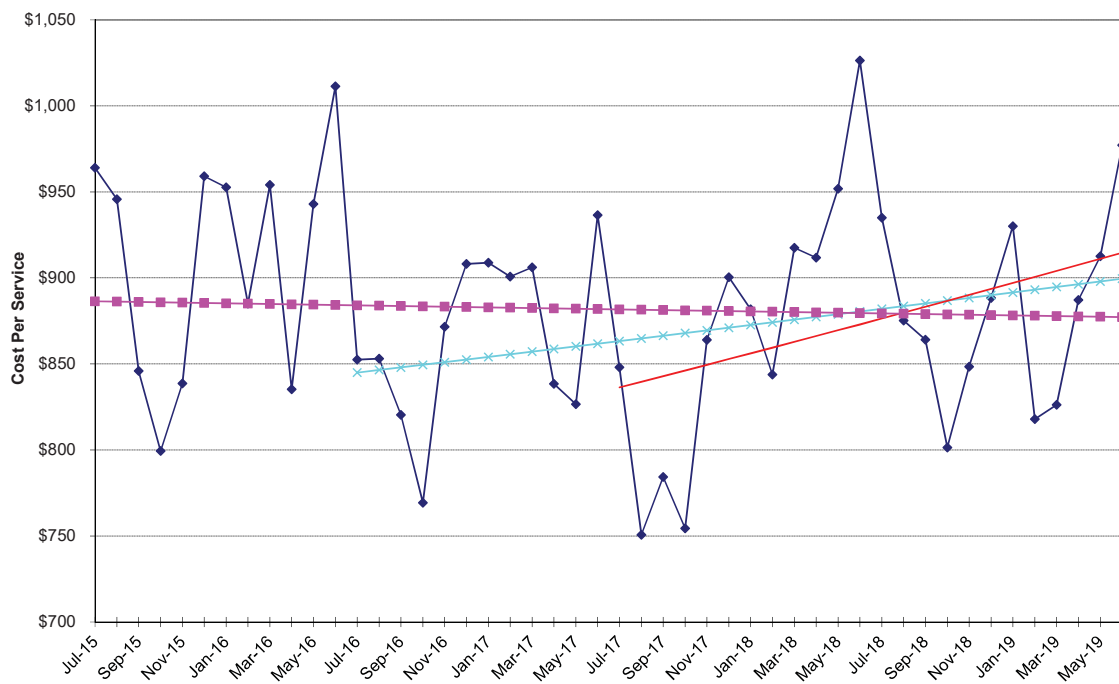
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
10.9%	4.8%	16.2%

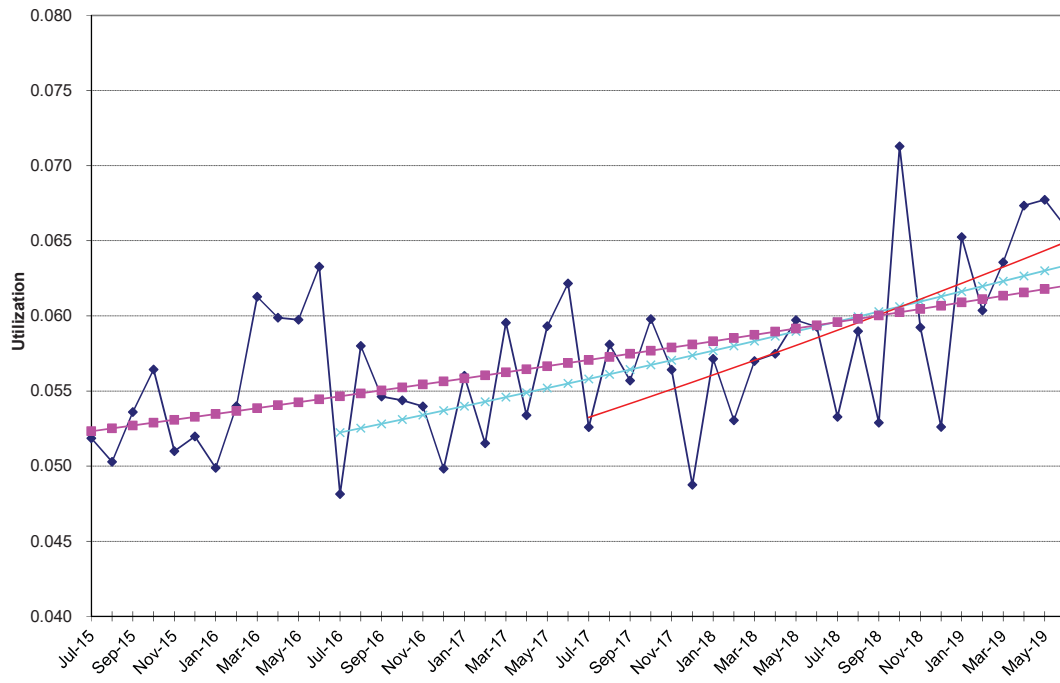
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.8%	2.2%	9.2%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.4%	-0.3%	4.2%

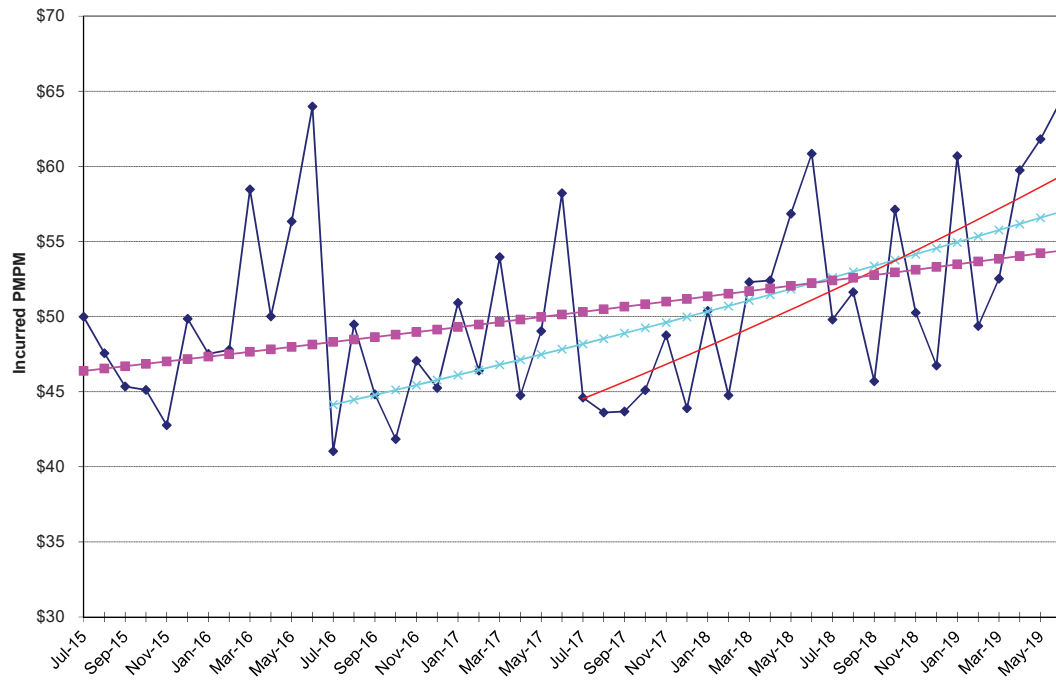
Hospital Outpatient - Medical / Surgical



Hospital Outpatient - Medical / Surgical



Hospital Outpatient - Medical / Surgical



NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL OUTPATIENT

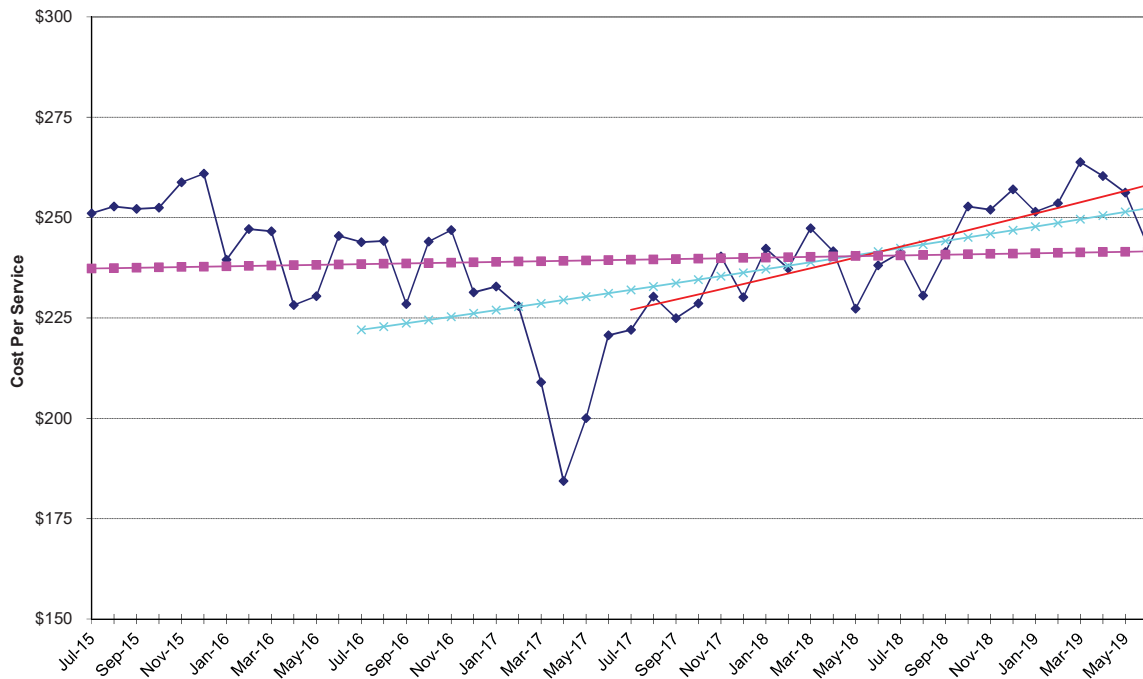
Other Services

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.7%	6.9%	15.1%

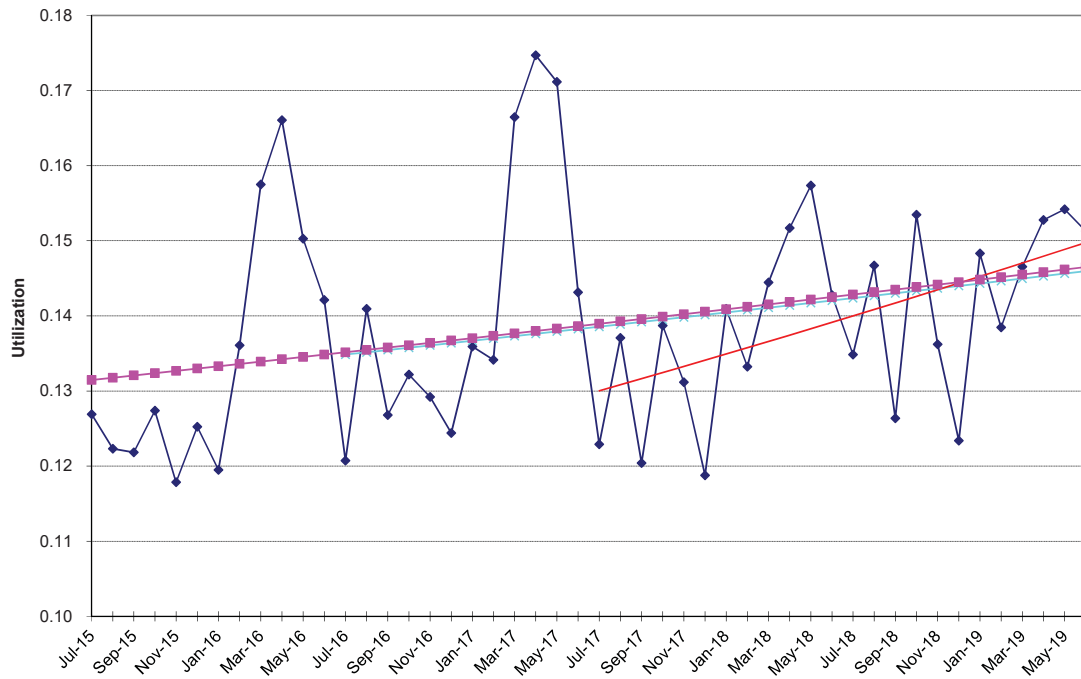
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.8%	4.5%	7.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.8%	0.5%	3.3%

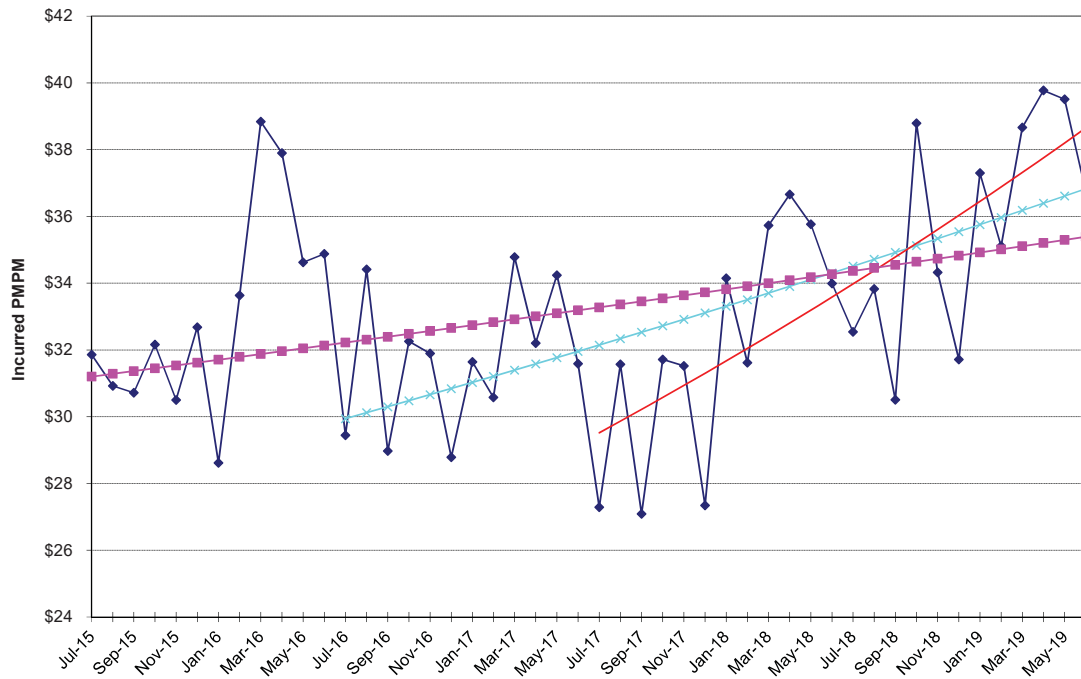
Hospital Outpatient - Other Services



Hospital Outpatient - Other Services



Hospital Outpatient - Other Services



NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL OUTPATIENT

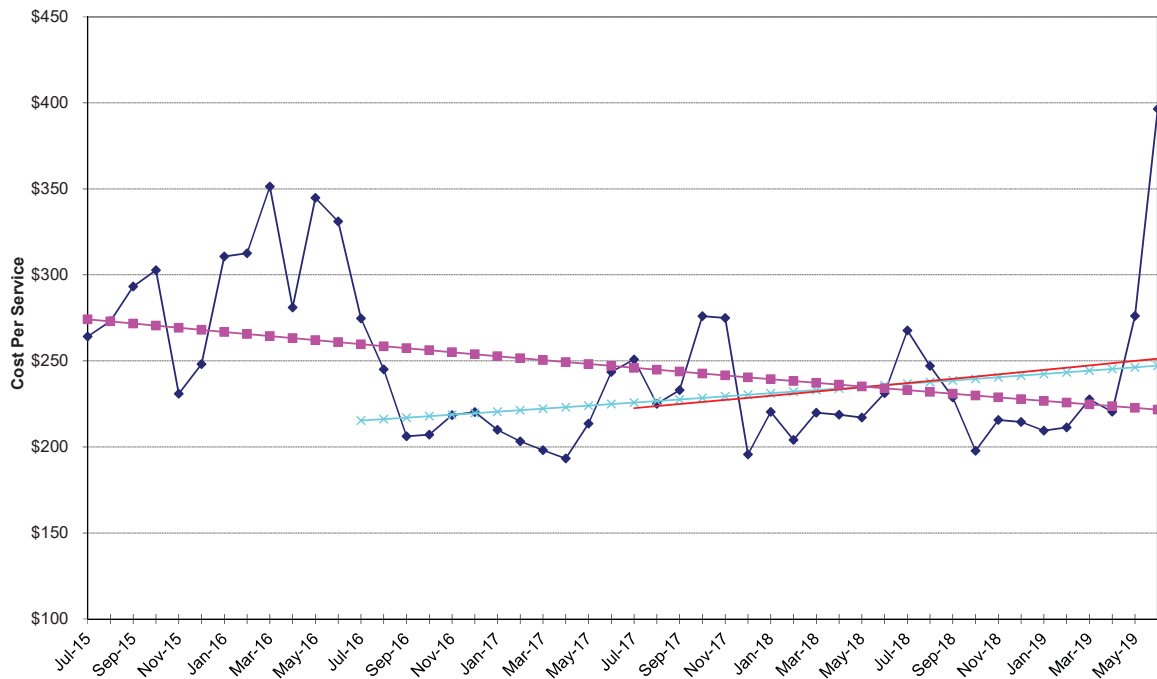
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.9%	6.5%	13.9%

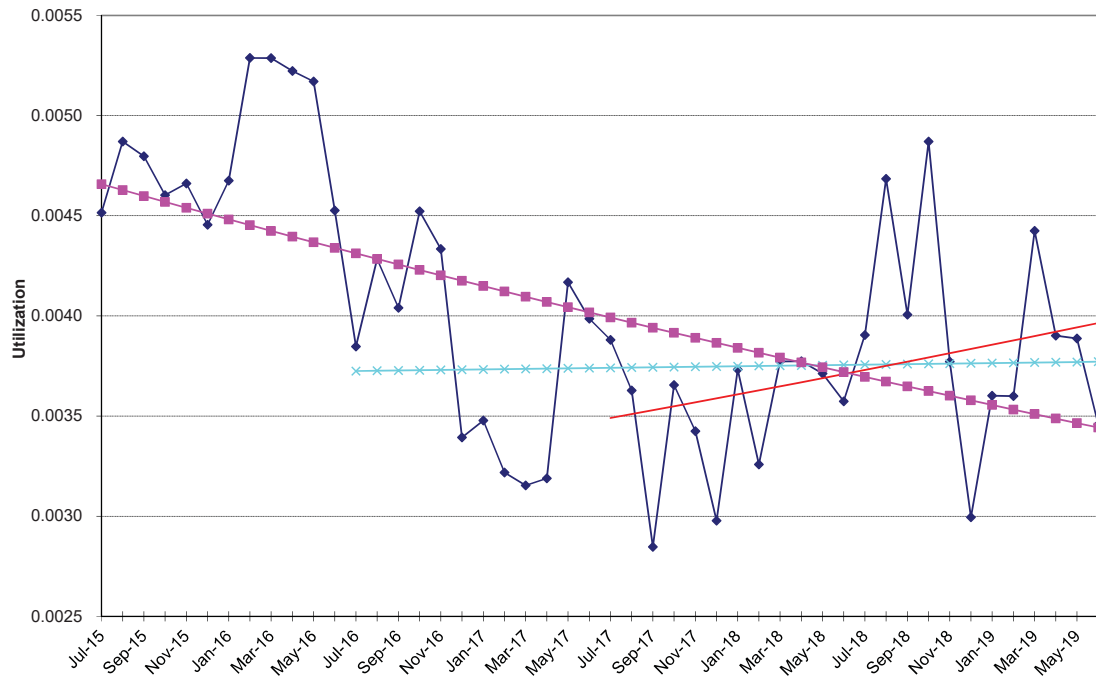
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.4%	4.9%	5.3%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-7.4%	-5.3%	-12.3%

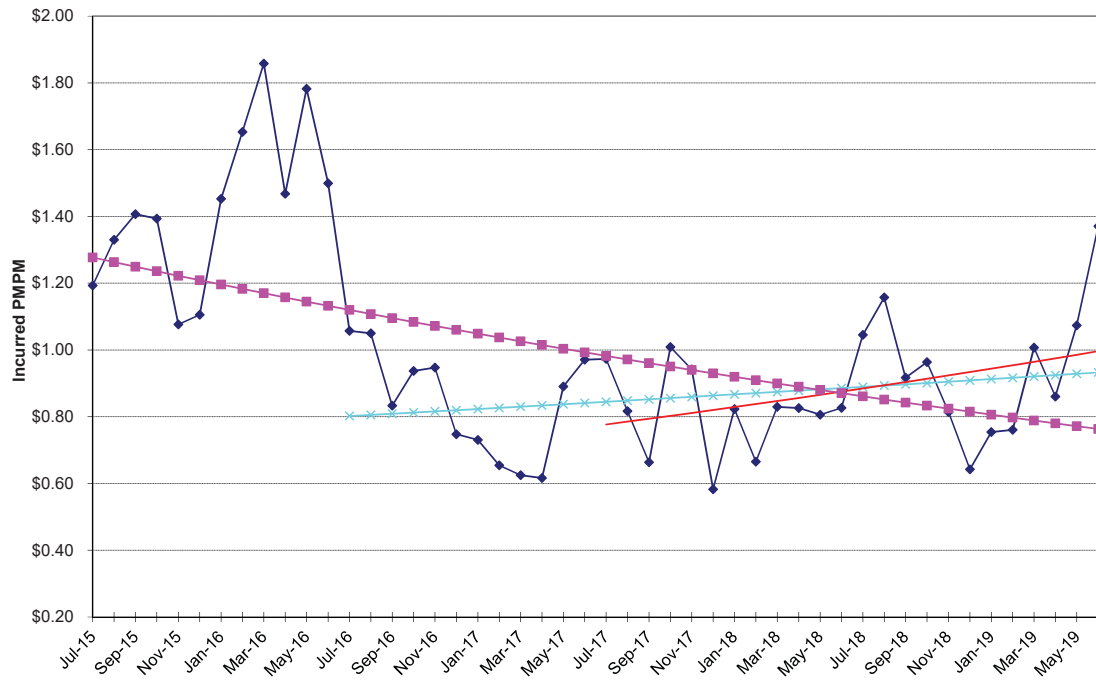
Hospital Outpatient - Psychiatric / Substance Abuse



Hospital Outpatient - Psychiatric / Substance Abuse



Hospital Outpatient - Psychiatric / Substance Abuse



NON-MEDICARE CLAIMS
Excluding Drugs

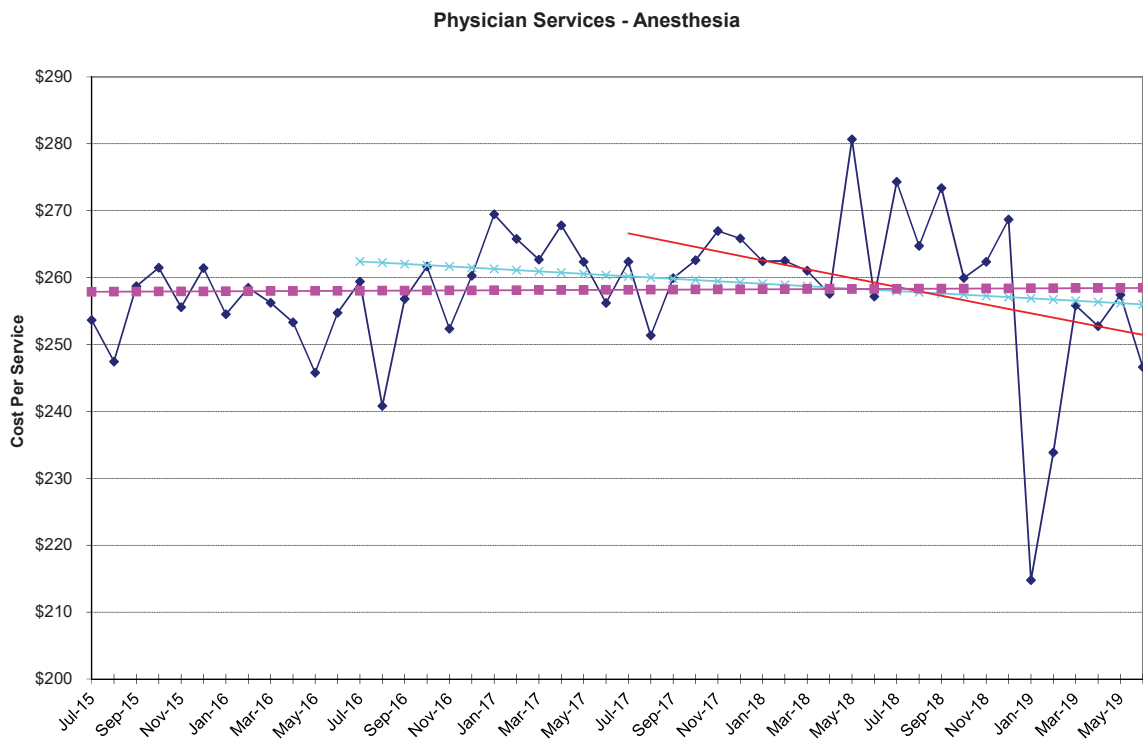
PHYSICIAN SERVICES

Anesthesia

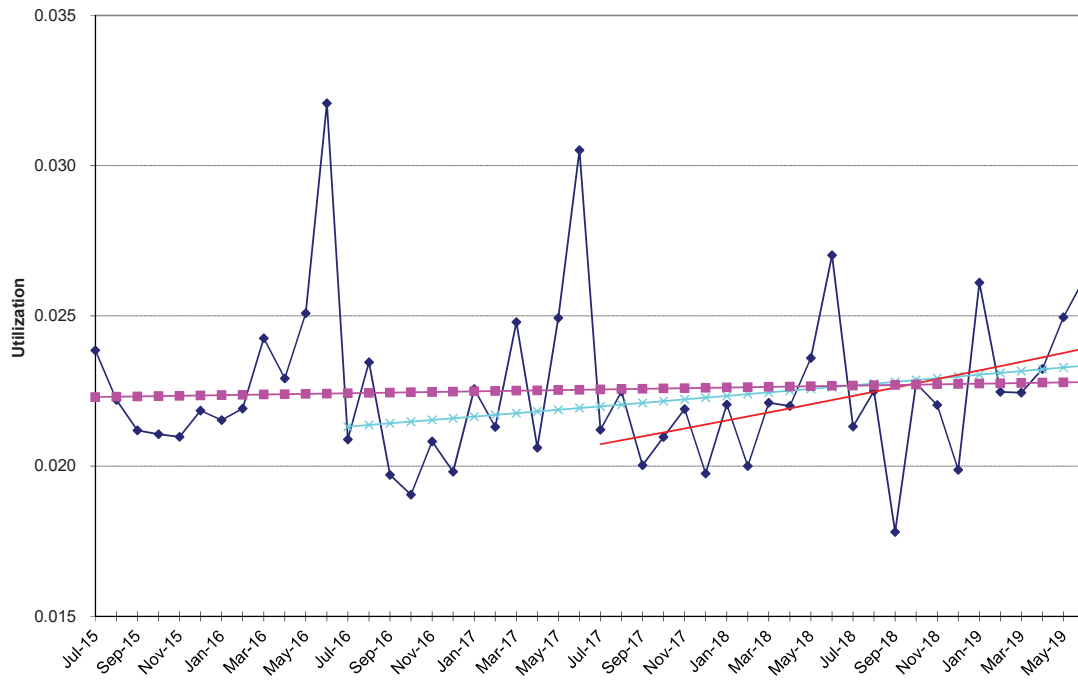
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.7%	-3.0%	4.5%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.2%	-0.8%	2.3%

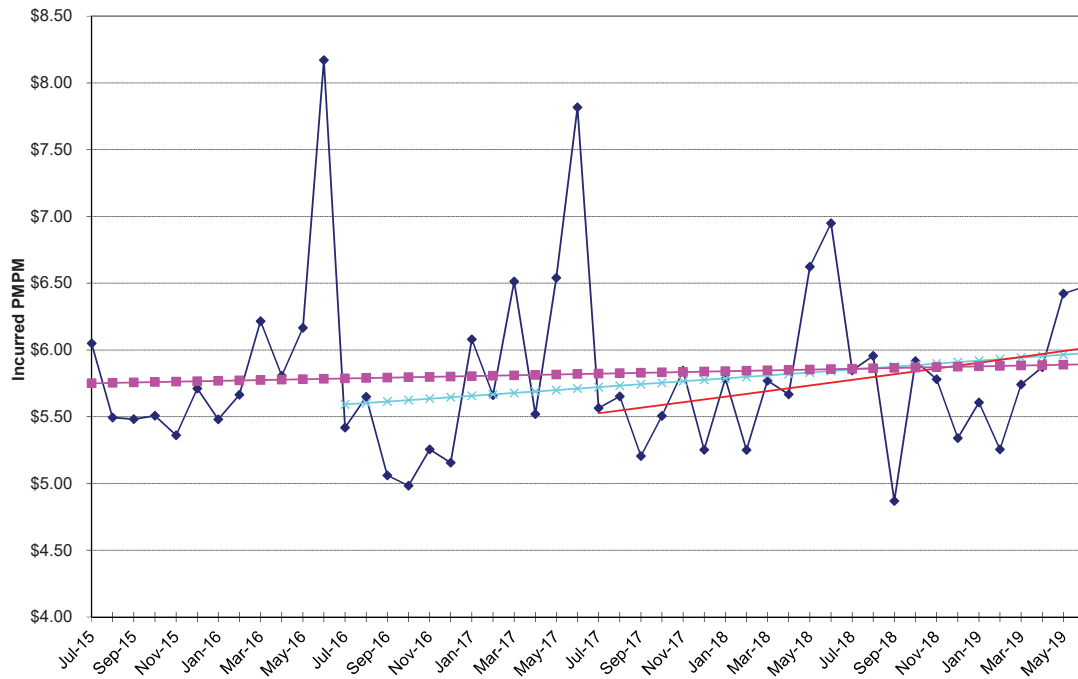
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.6%	0.1%	0.6%



Physician Services - Anesthesia



Physician Services - Anesthesia



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

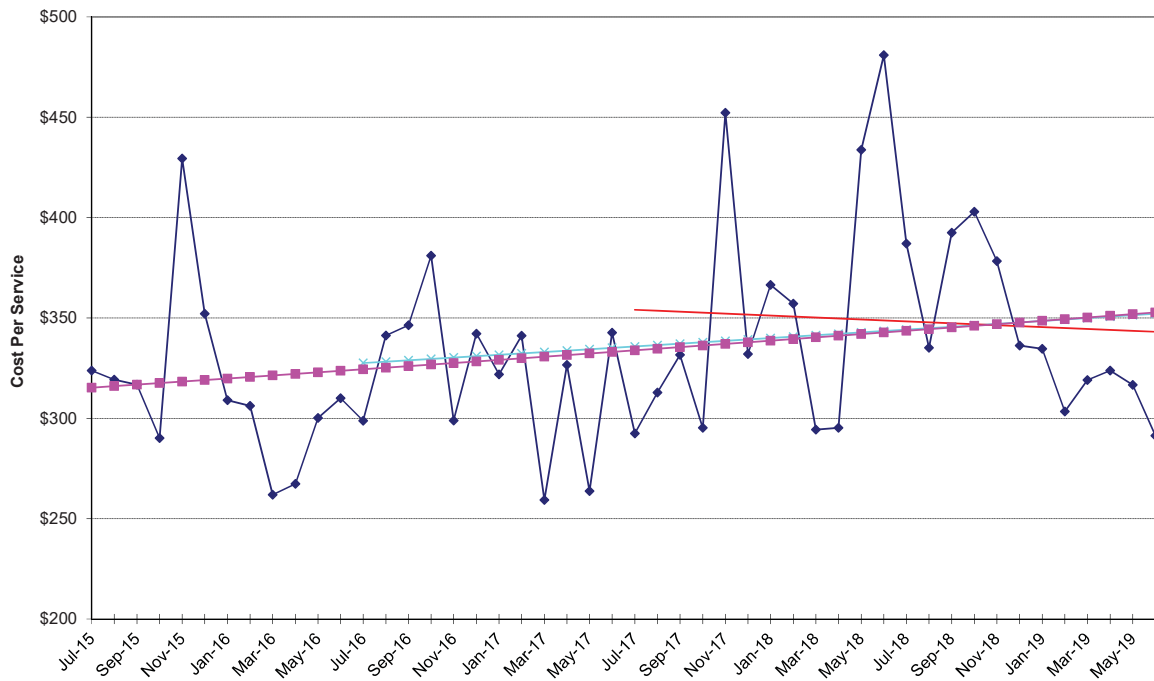
Chemotherapy / Radiation

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.0%	-1.6%	0.3%

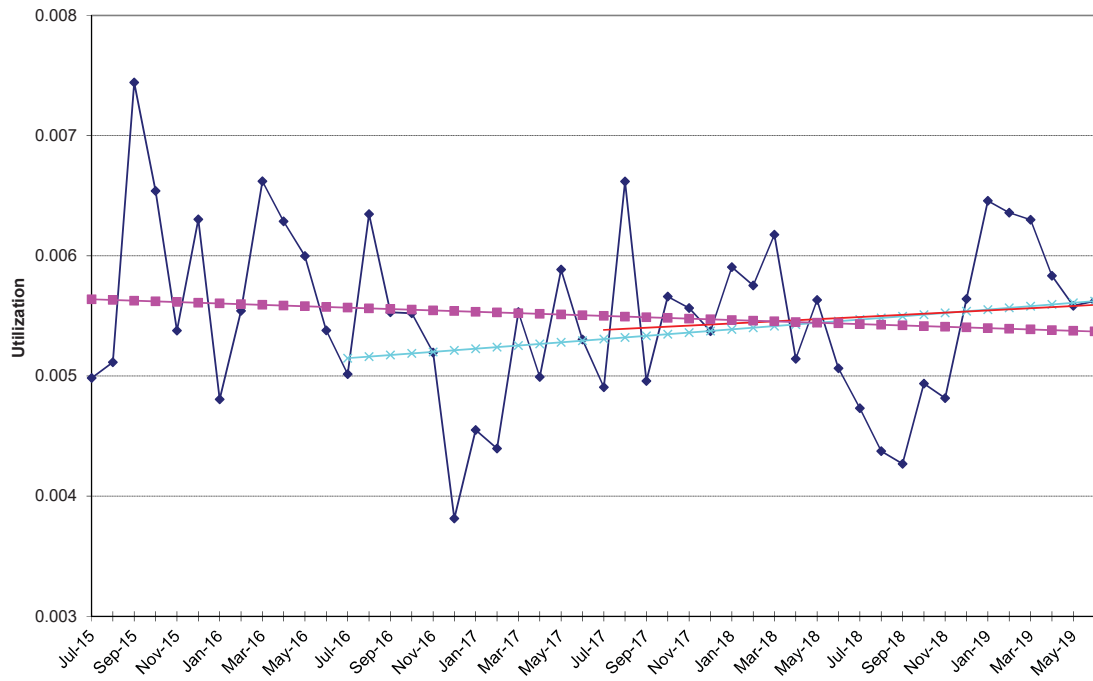
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.1%	2.5%	5.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.2%	2.9%	1.6%

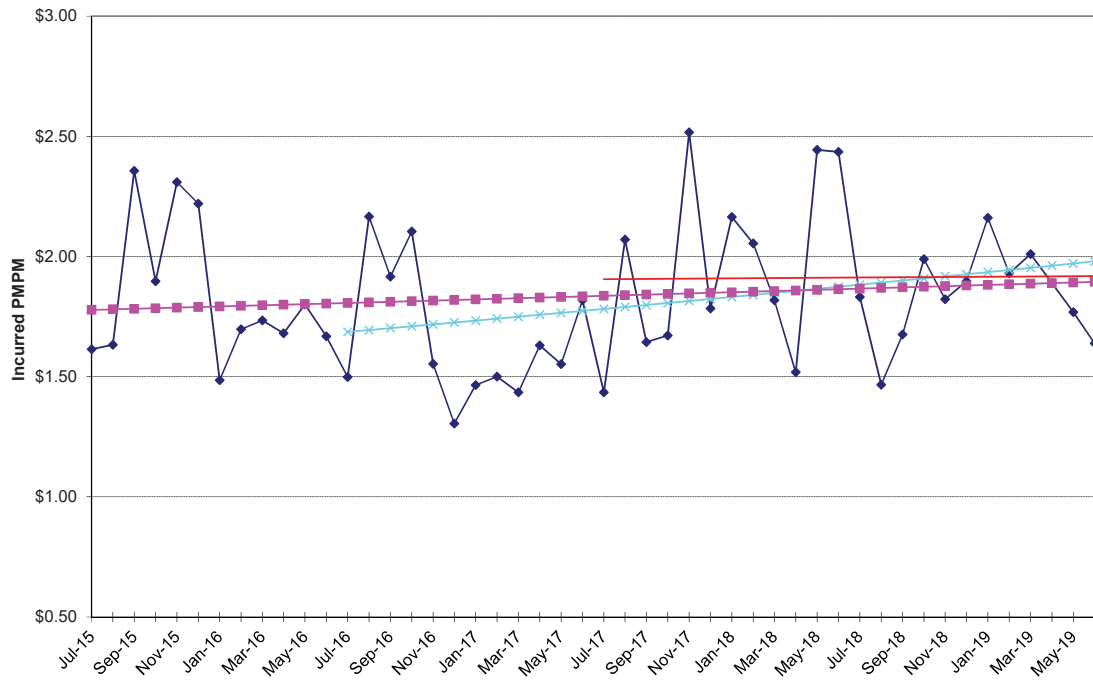
Physician Services - Chemotherapy Radiation



Physician Services - Chemotherapy Radiation



Physician Services - Chemotherapy Radiation



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

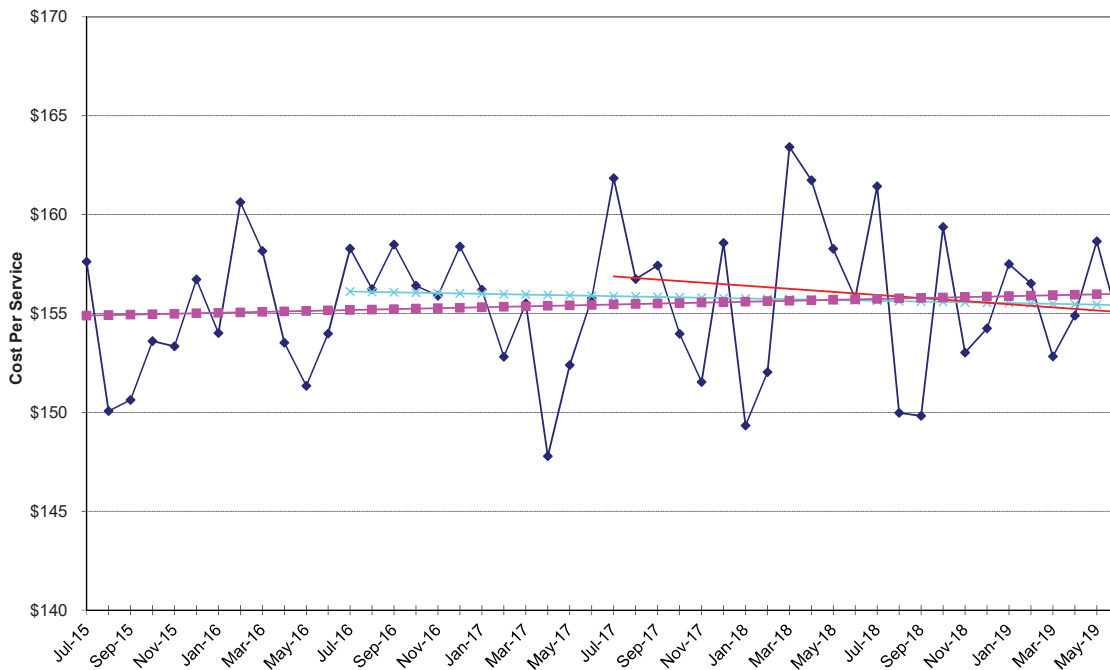
Emergency Room

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.7%	-0.6%	1.1%

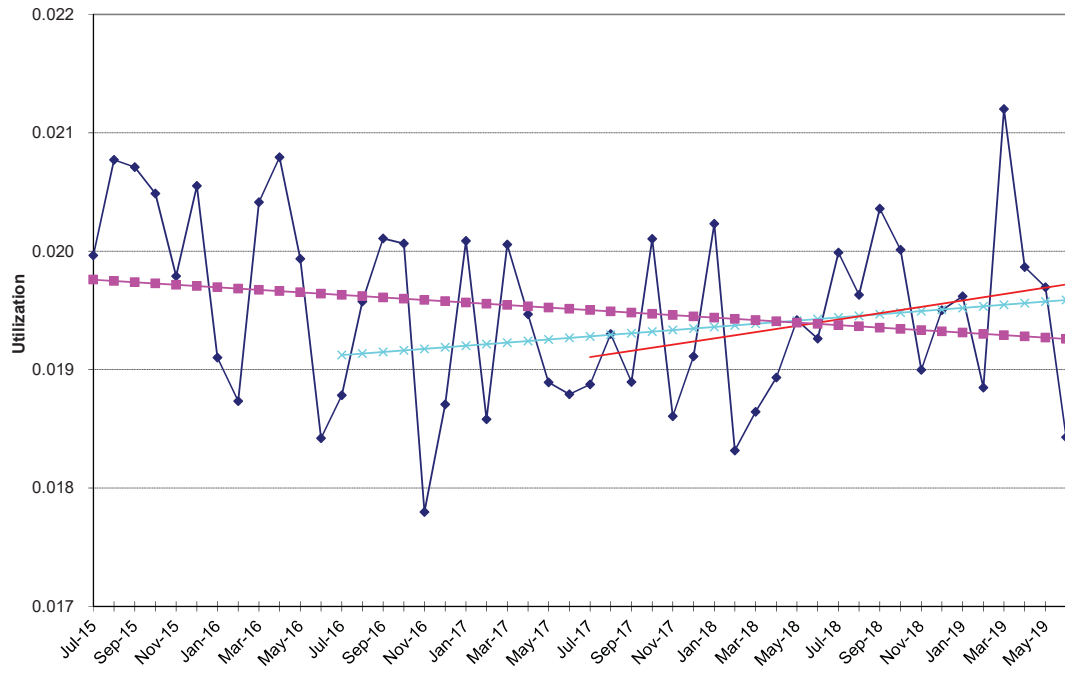
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.8%	-0.2%	0.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.7%	0.2%	-0.5%

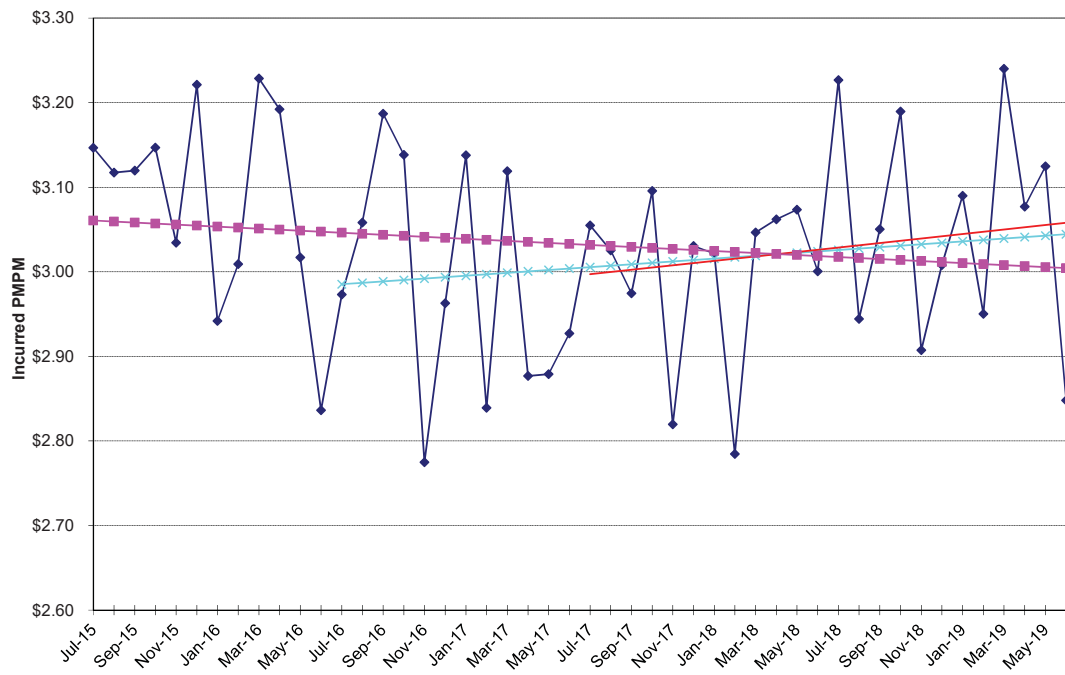
Physician Services - Emergency Room



Physician Services - Emergency Room



Physician Services - Emergency Room



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

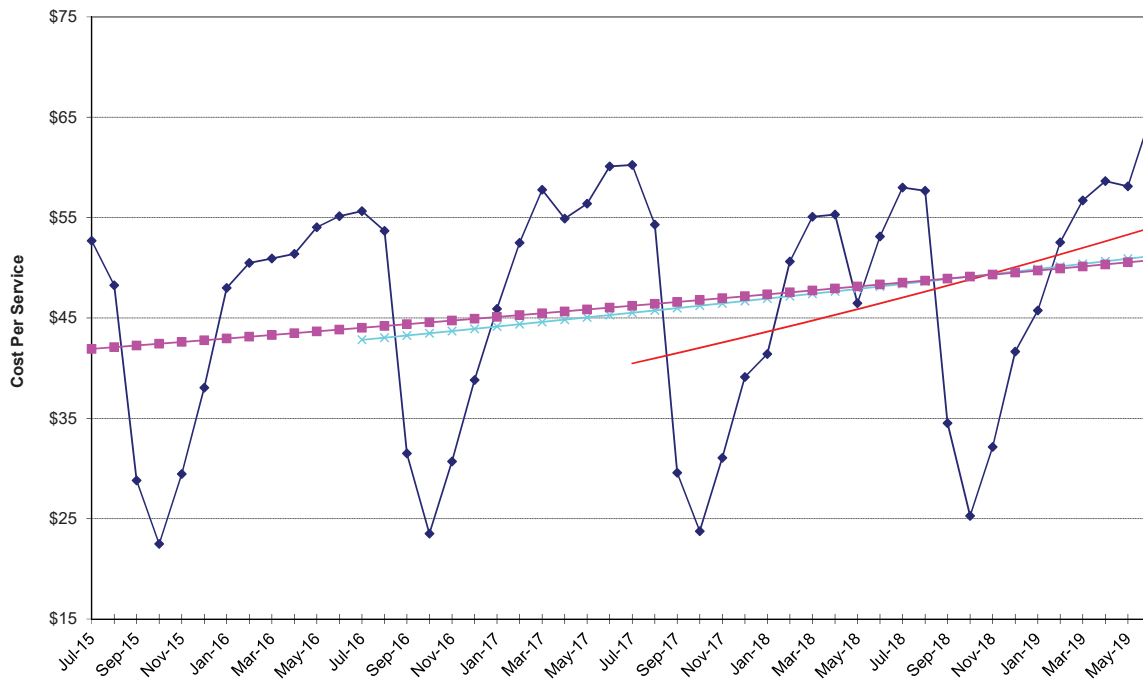
Immunizations / Injections / Allergy

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-7.3%	16.2%	7.6%

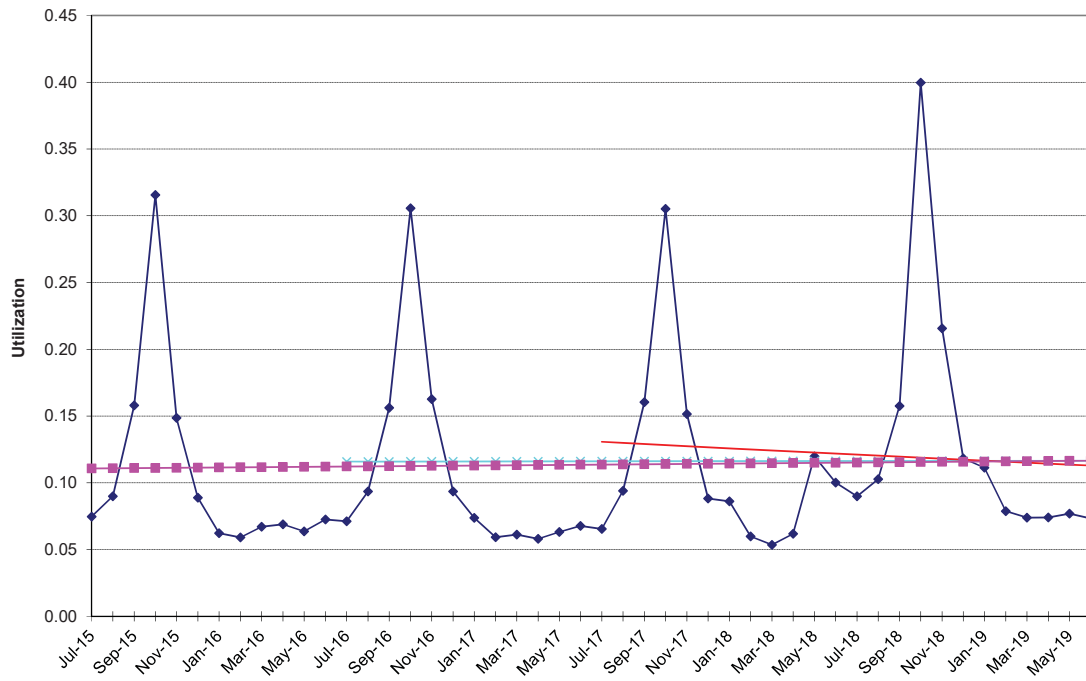
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.2%	6.3%	6.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.3%	5.0%	6.4%

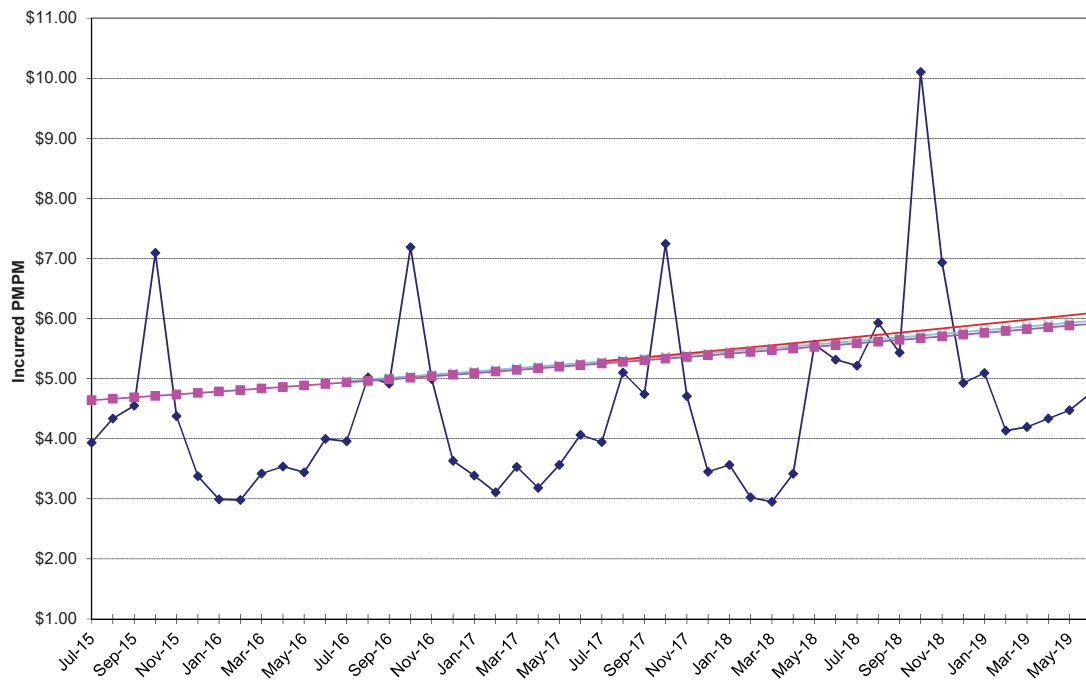
Physician Services - Immunizations / Allergy



Physician Services - Immunizations / Allergy



Physician Services - Immunizations / Allergy



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

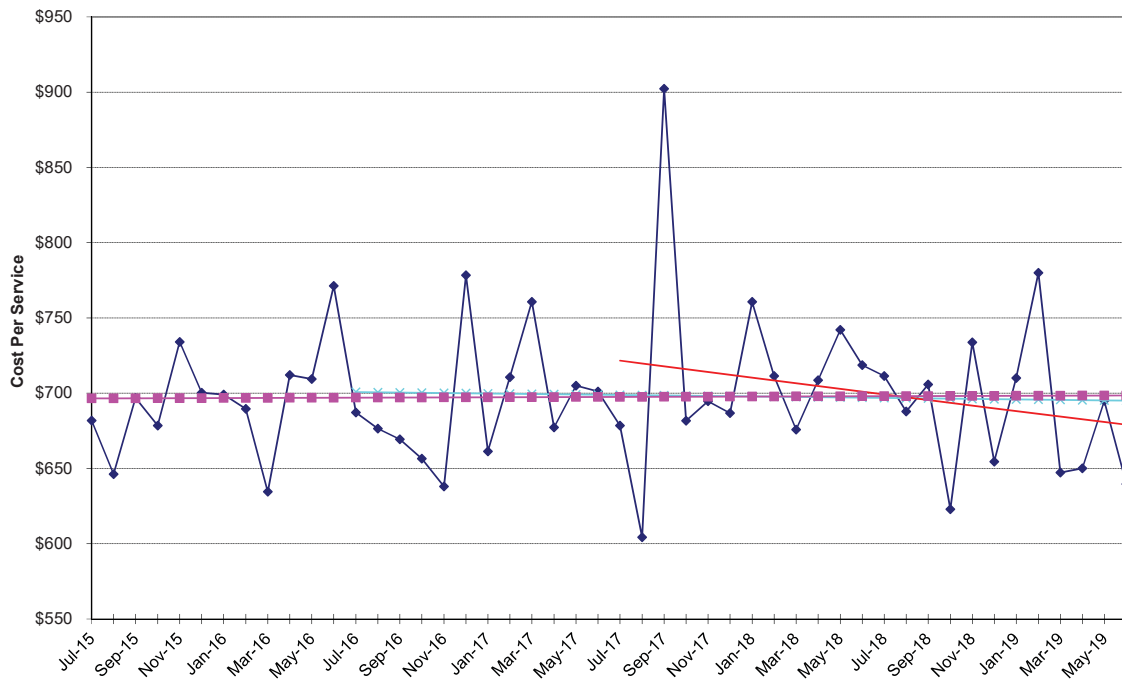
Inpatient Surgery

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.6%	-3.1%	-1.6%

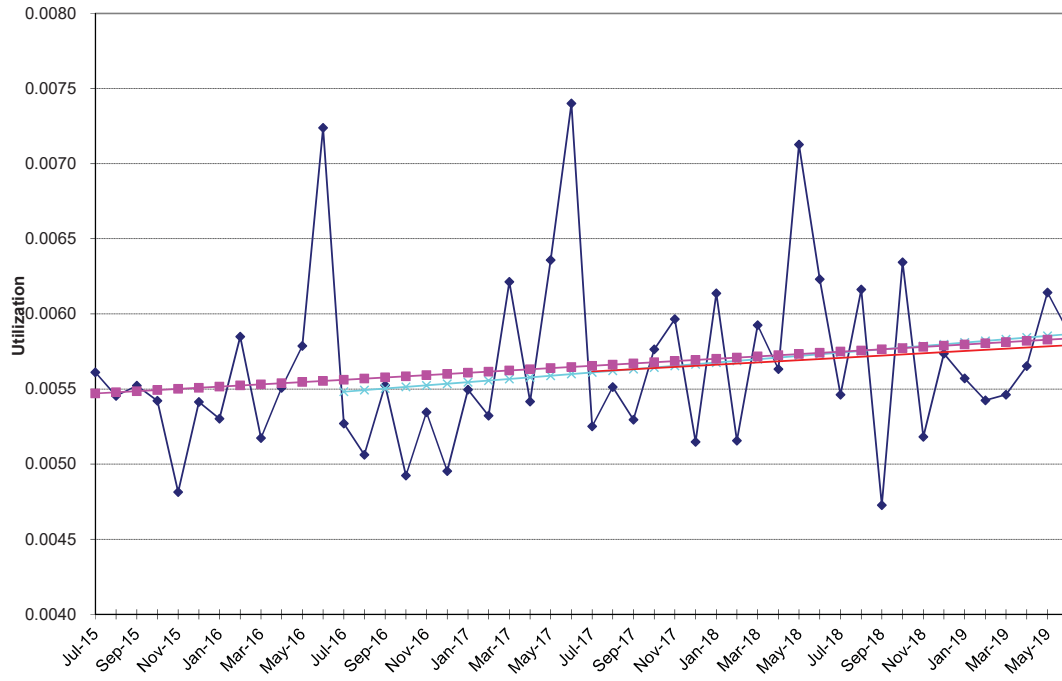
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.3%	-0.3%	2.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.7%	0.1%	1.7%

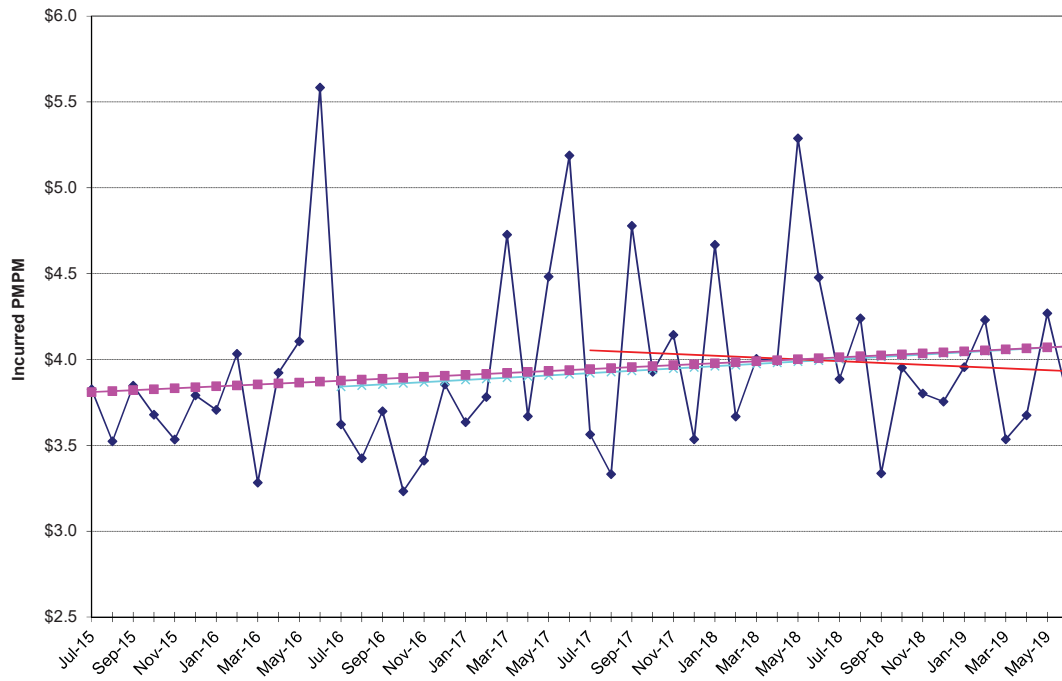
Physician Services - Inpatient Surgery



Physician Services - Inpatient Surgery



Physician Services - Inpatient Surgery



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

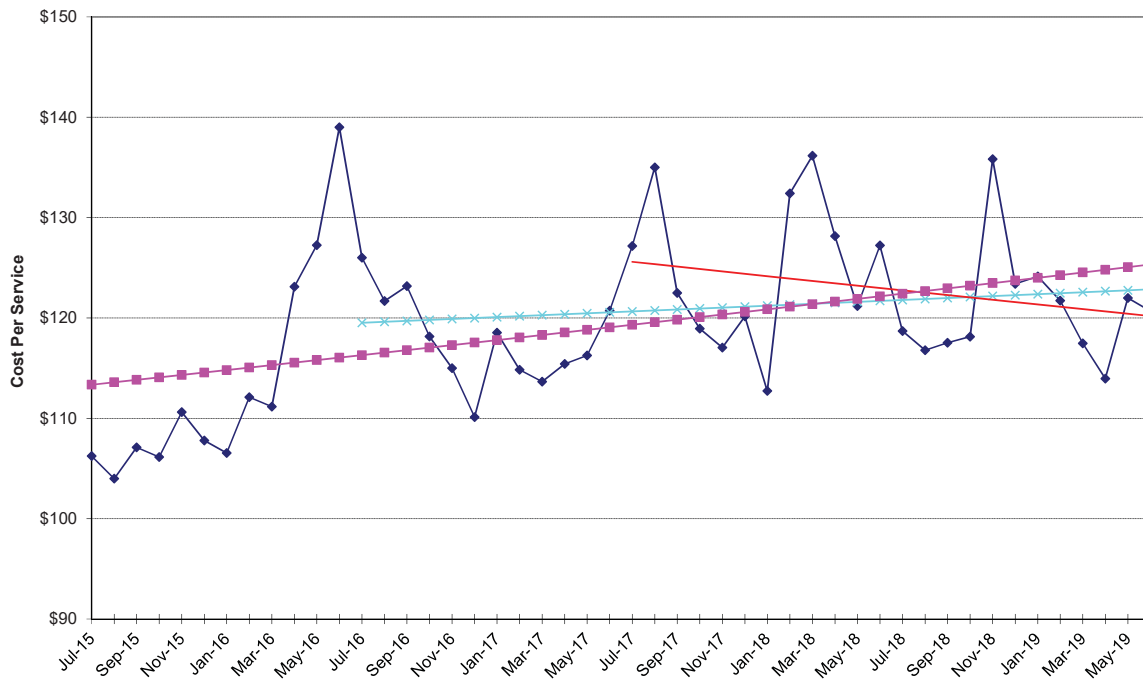
Inpatient Visits

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.0%	-2.3%	-1.3%

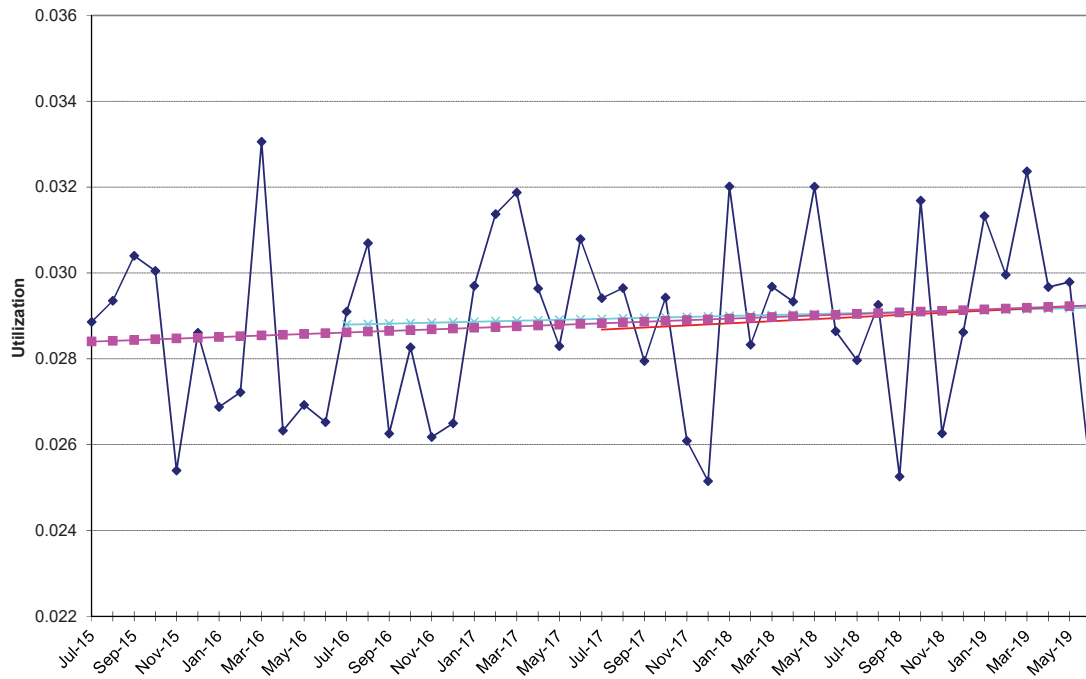
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.5%	0.9%	1.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.7%	2.6%	3.4%

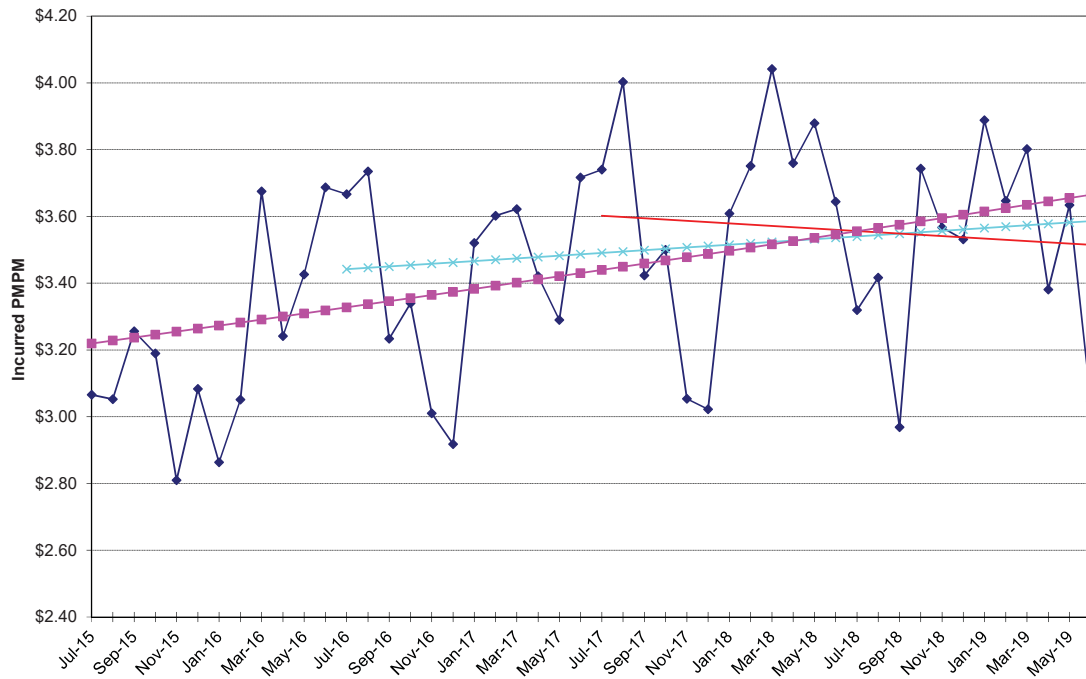
Physician Services - Inpatient Visits



Physician Services - Inpatient Visits



Physician Services - Inpatient Visits



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

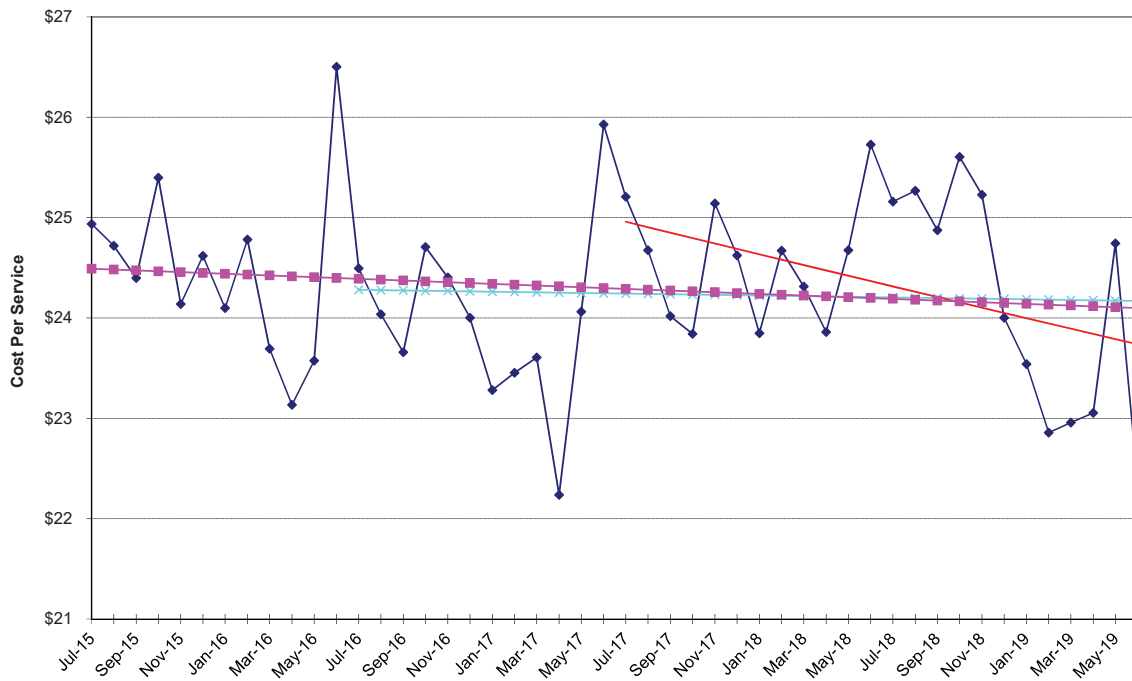
Lab & Pathology

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.6%	-2.6%	2.8%

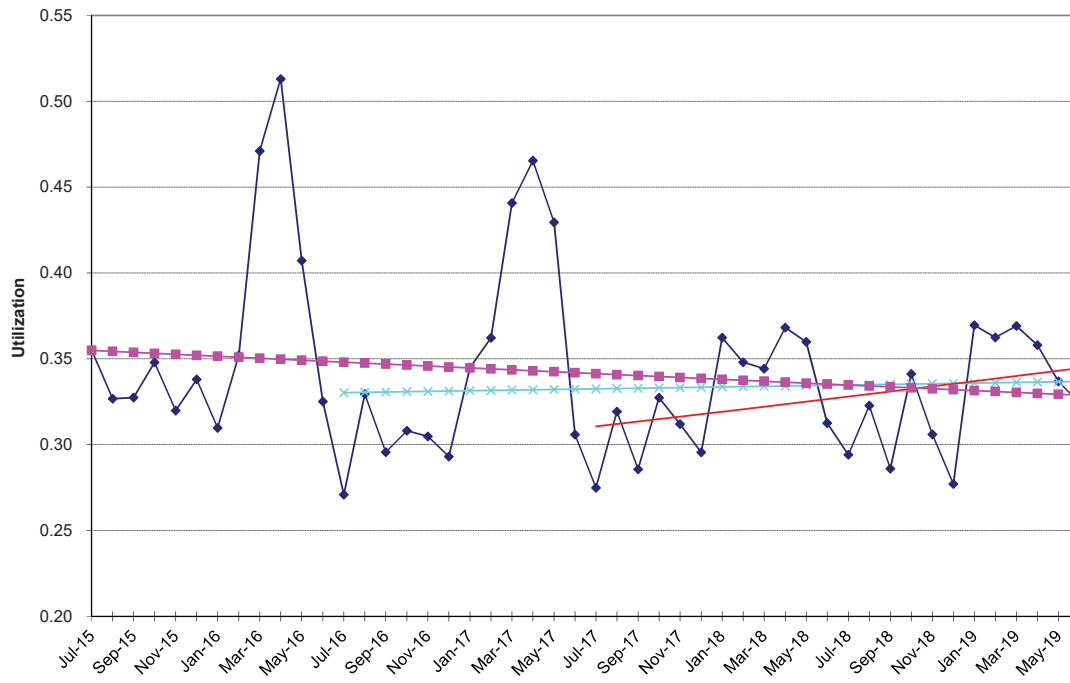
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.7%	-0.2%	0.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.9%	-0.4%	-2.3%

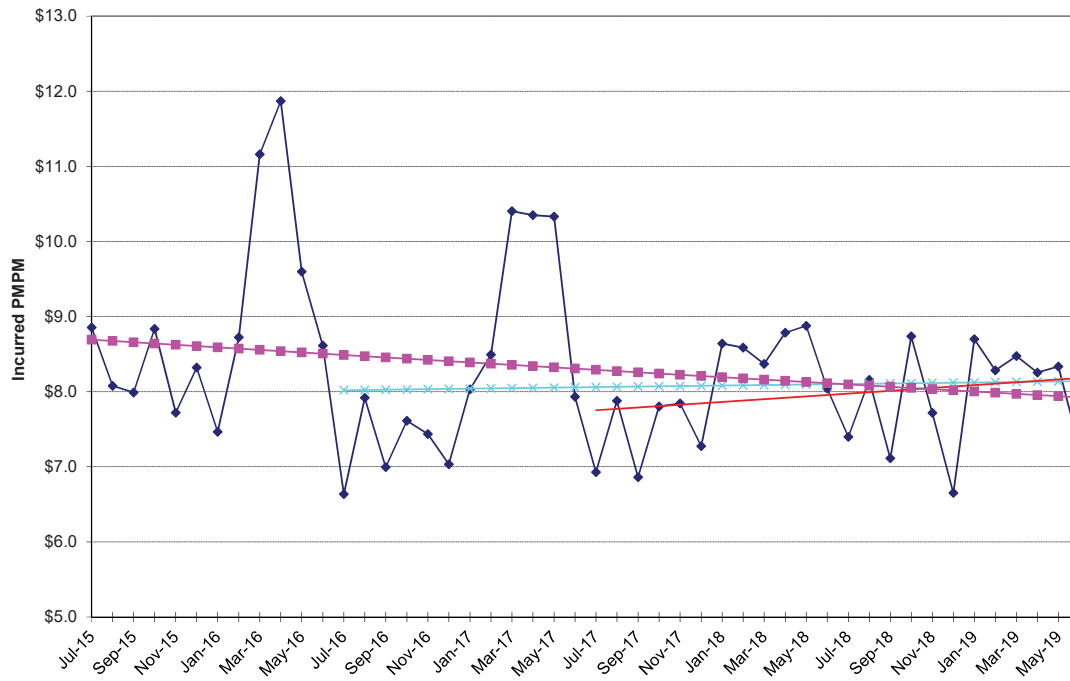
Physician Services - Lab & Pathology



Physician Services - Lab & Pathology



Physician Services - Lab & Pathology



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

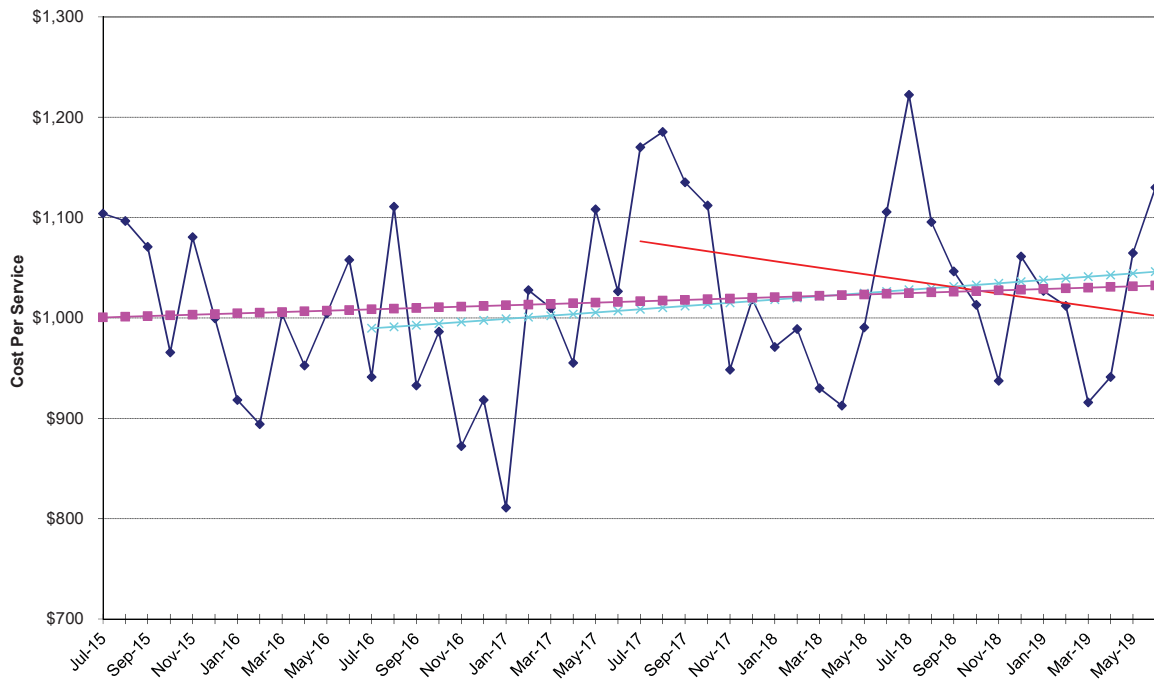
Maternity

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.9%	-3.6%	-7.4%

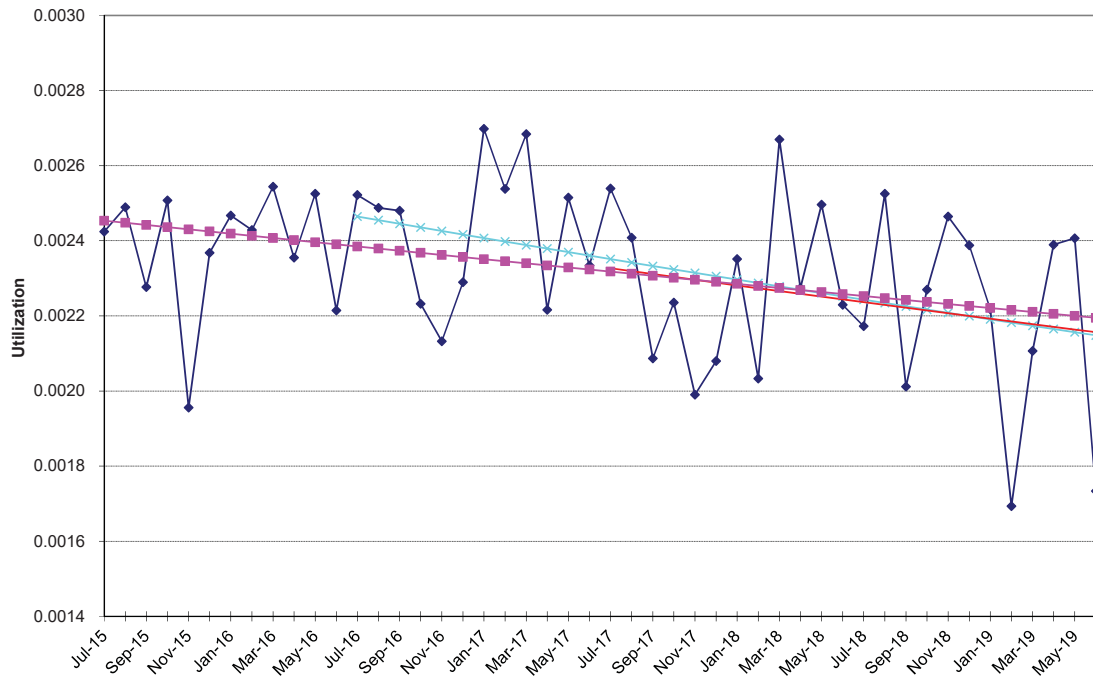
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-4.6%	1.9%	-2.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.8%	0.8%	-2.0%

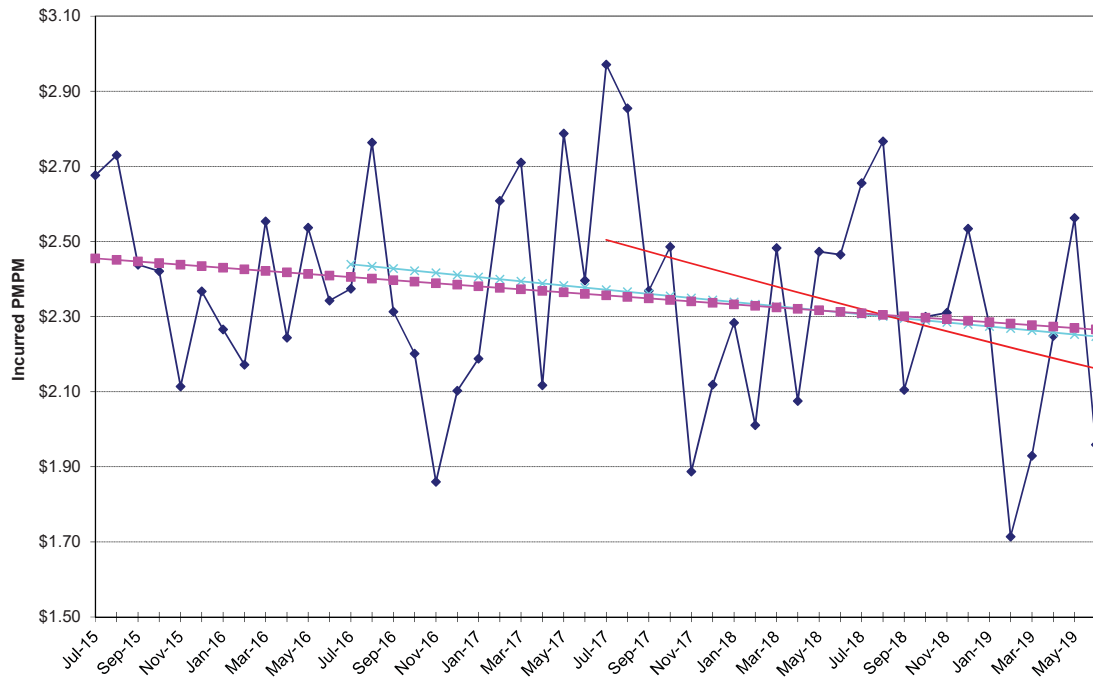
Physician Services - Maternity



Physician Services - Maternity



Physician Services - Maternity



NON-MEDICARE CLAIMS
Excluding Drugs

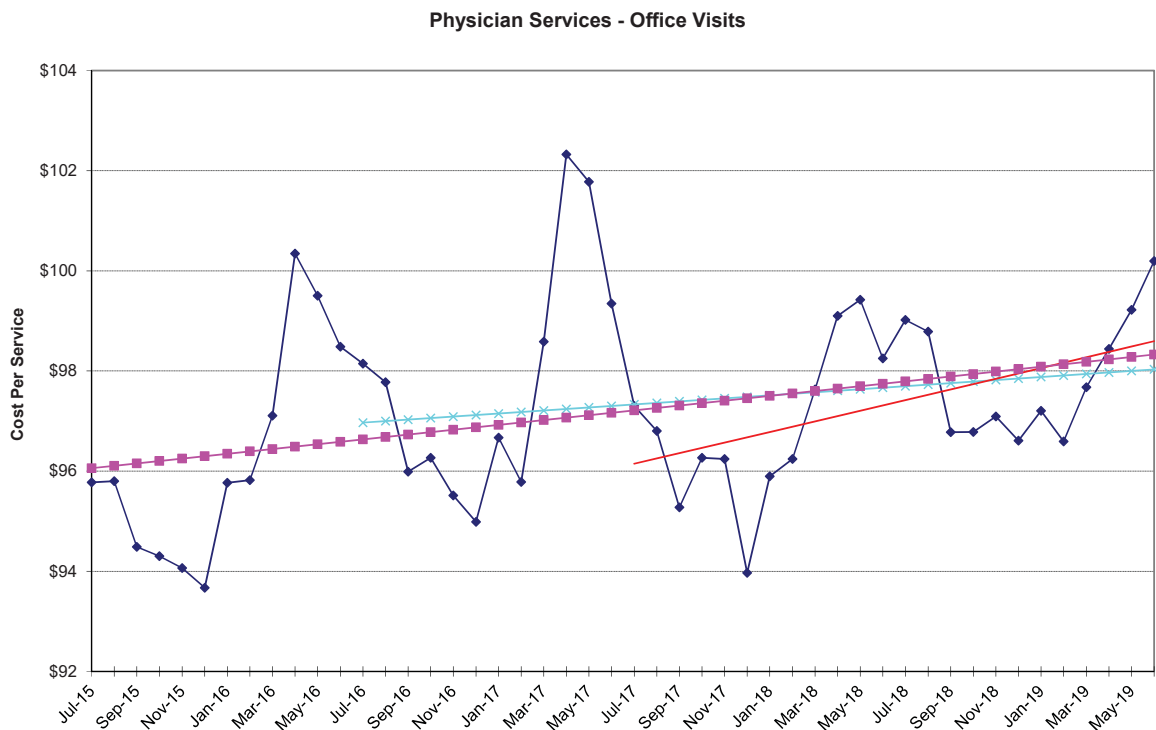
PHYSICIAN SERVICES

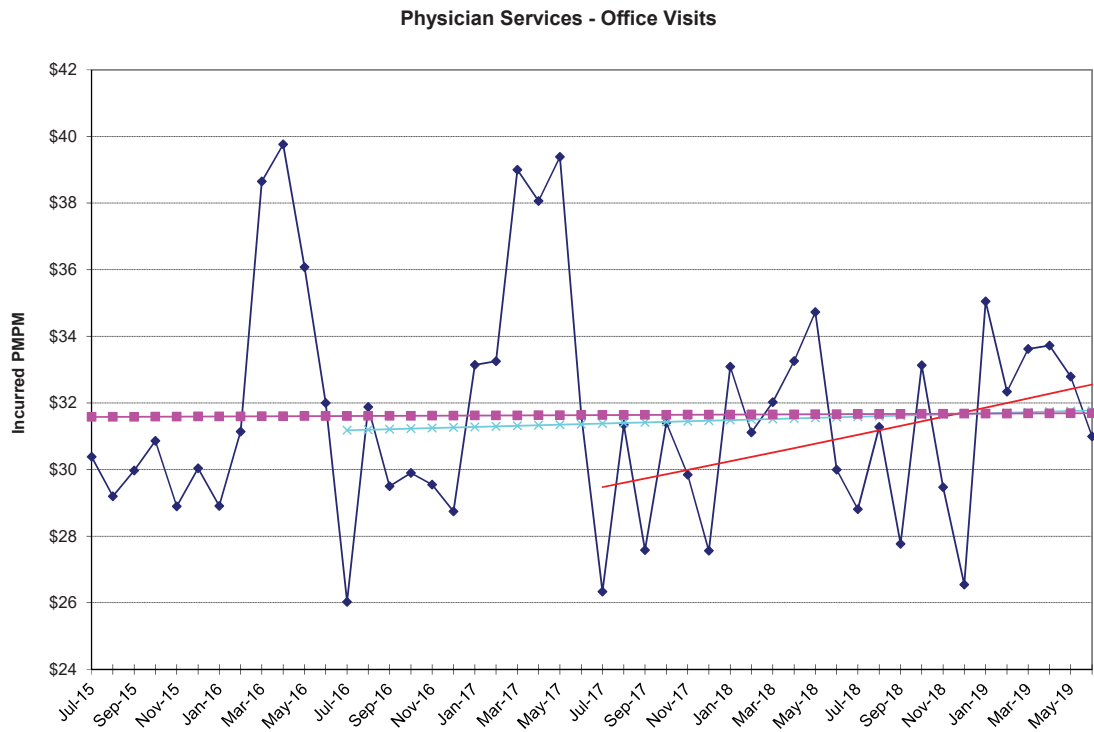
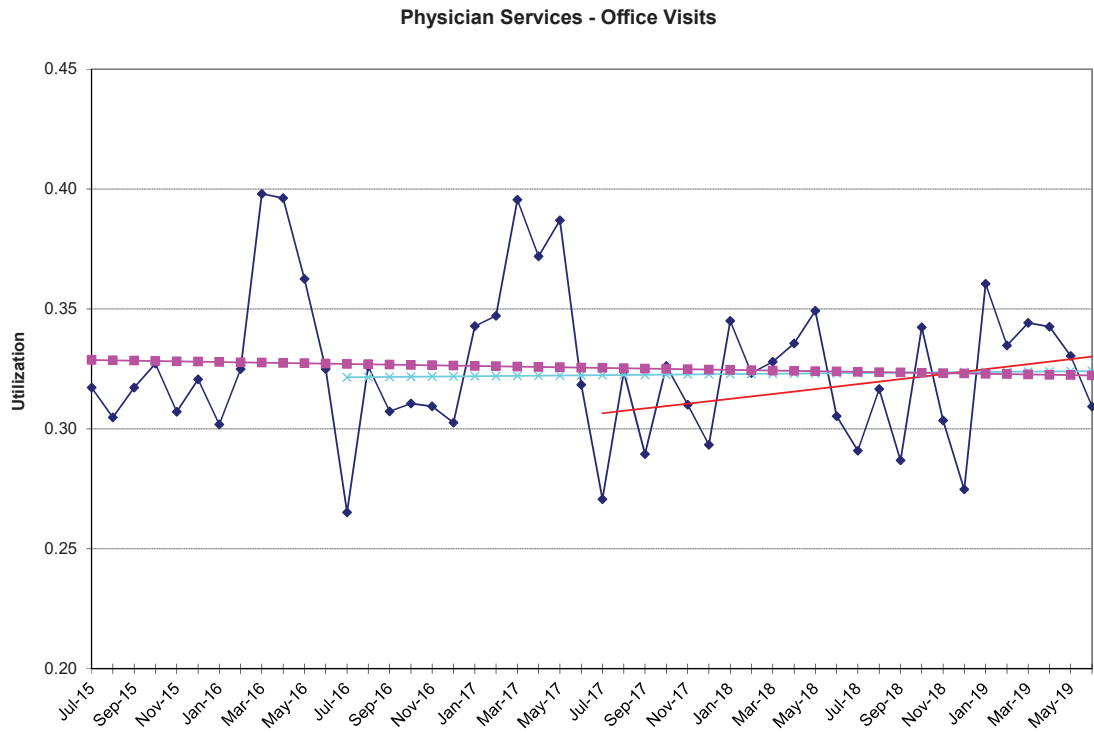
Office Visits

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.0%	1.3%	5.3%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.3%	0.4%	0.6%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.5%	0.6%	0.1%





NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

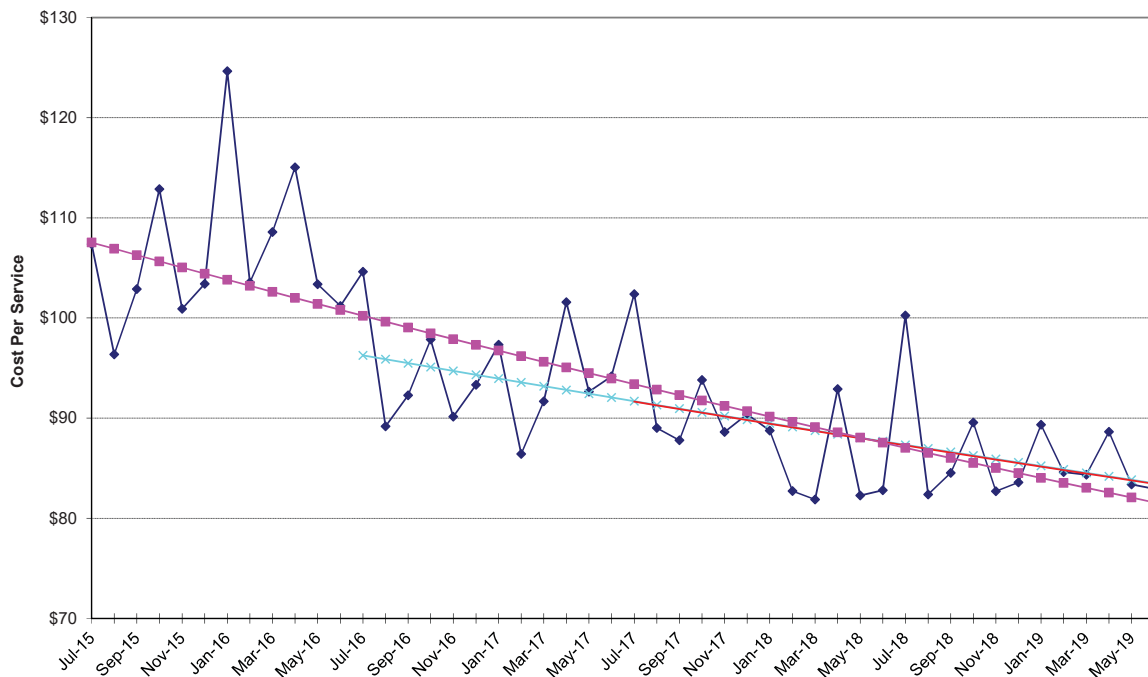
Other Services

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
12.2%	-4.8%	6.9%

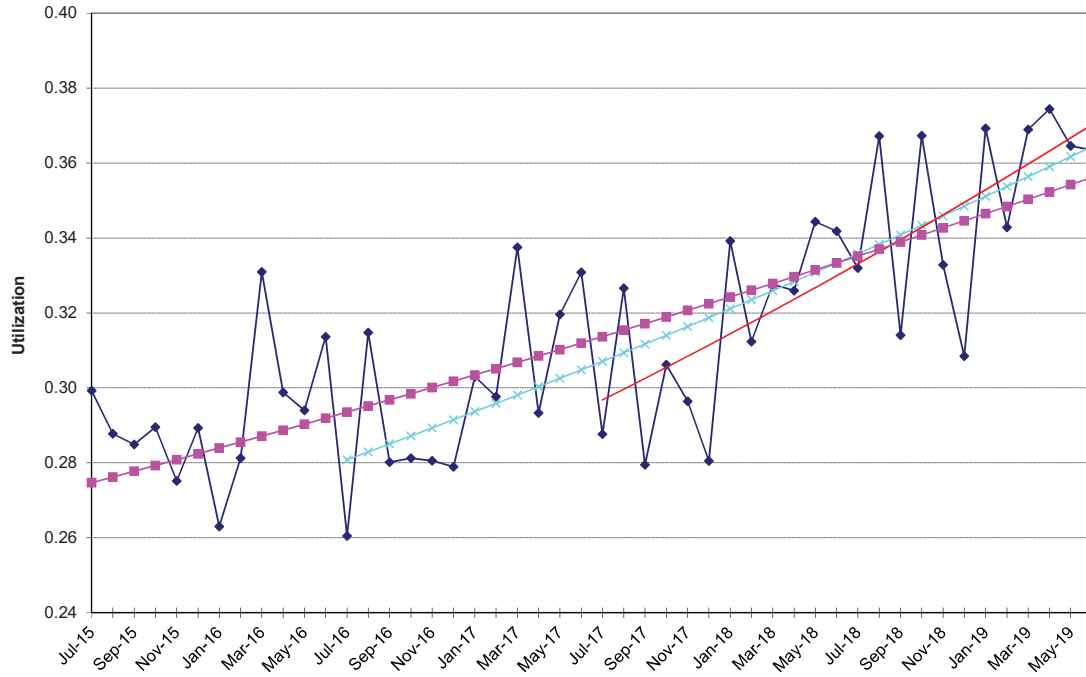
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
9.3%	-4.8%	4.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.9%	-6.8%	-0.4%

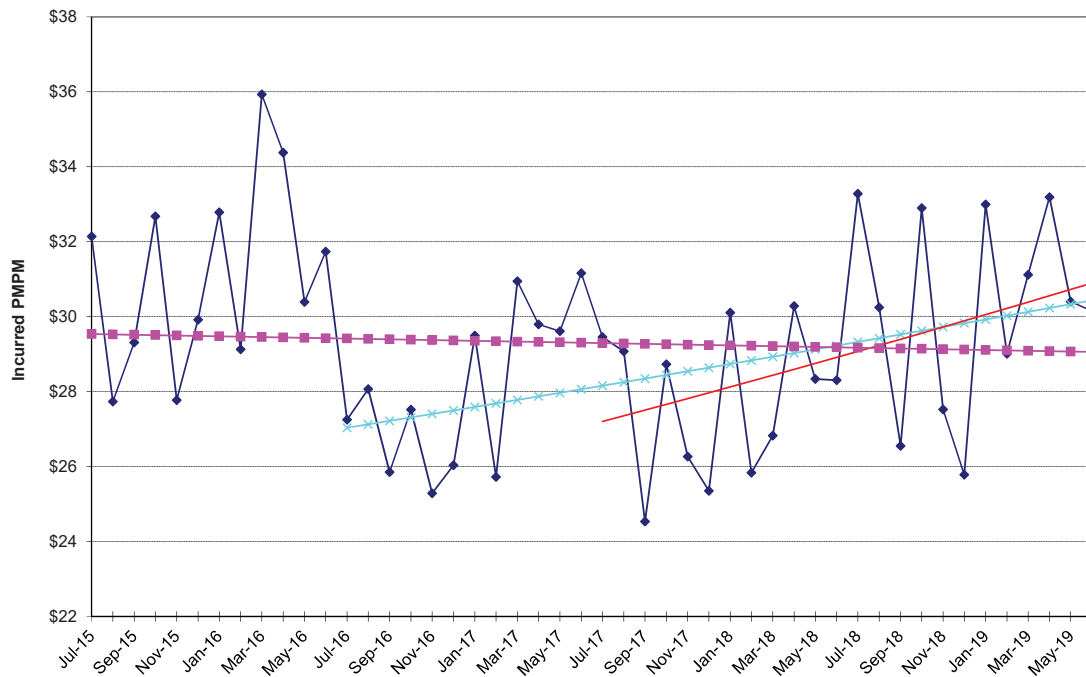
Physician Services - Other Services



Physician Services - Other Services



Physician Services - Other Services



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

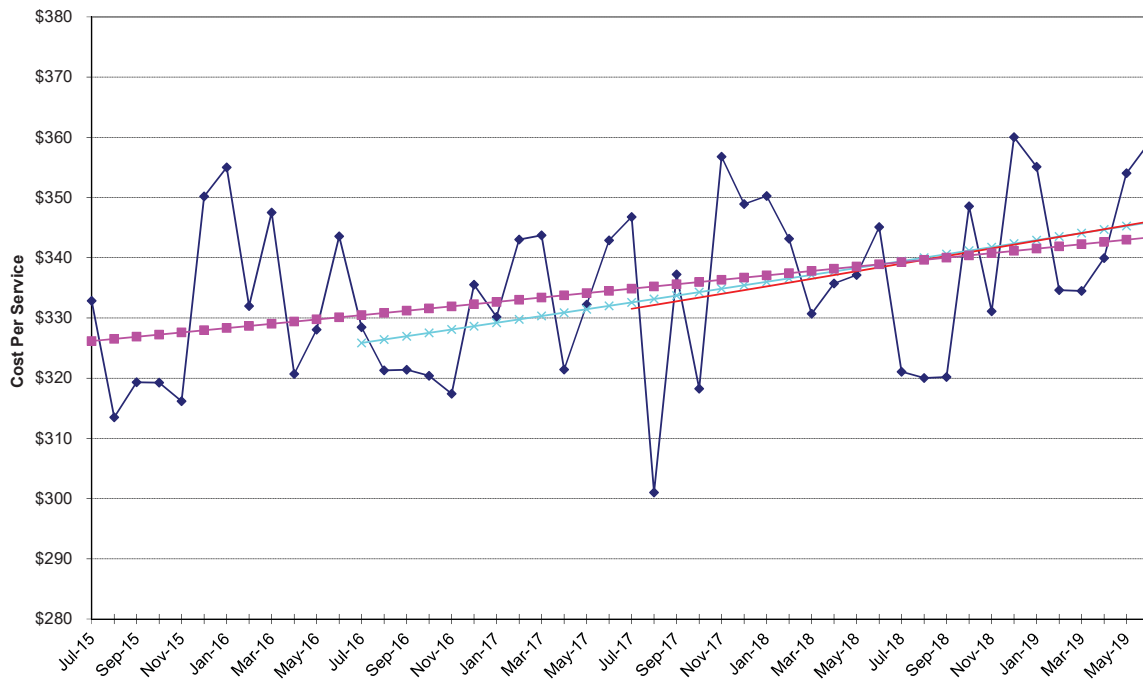
Outpatient Surgery

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.4%	2.3%	7.8%

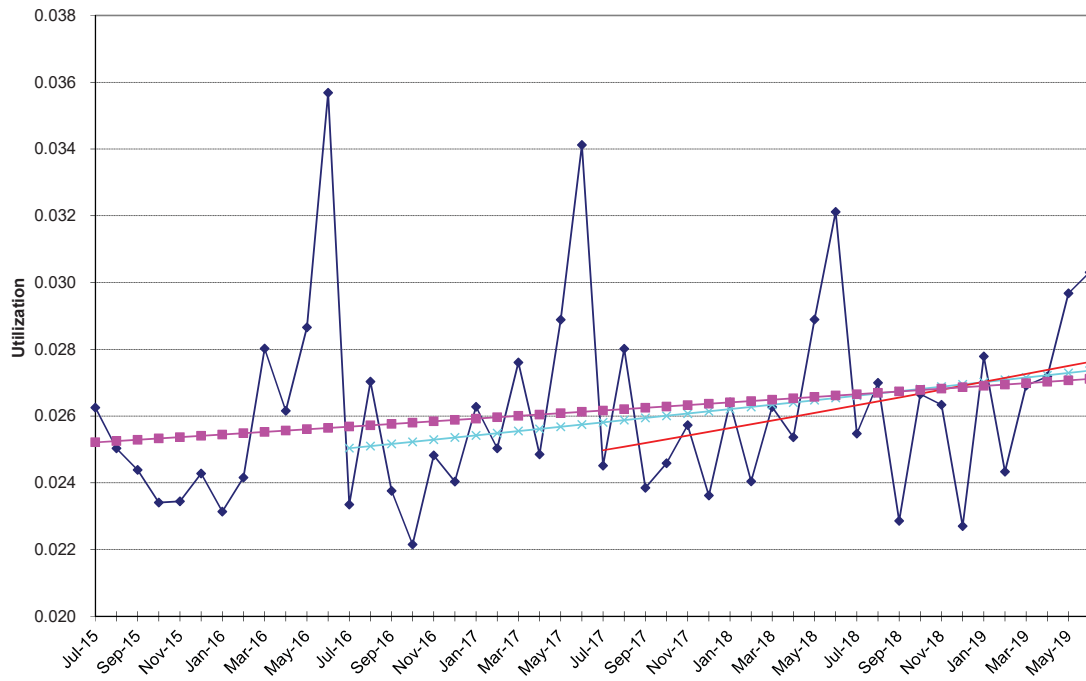
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.1%	2.1%	5.2%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.9%	1.3%	3.2%

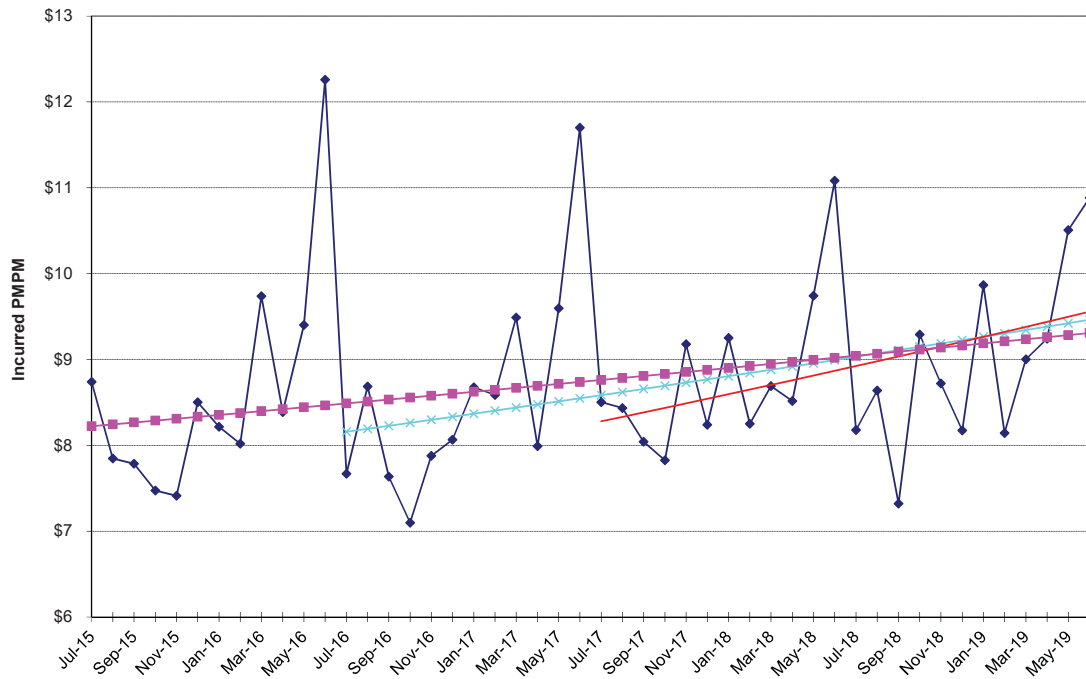
Physician Services - Outpatient Surgery



Physician Services - Outpatient Surgery



Physician Services - Outpatient Surgery



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

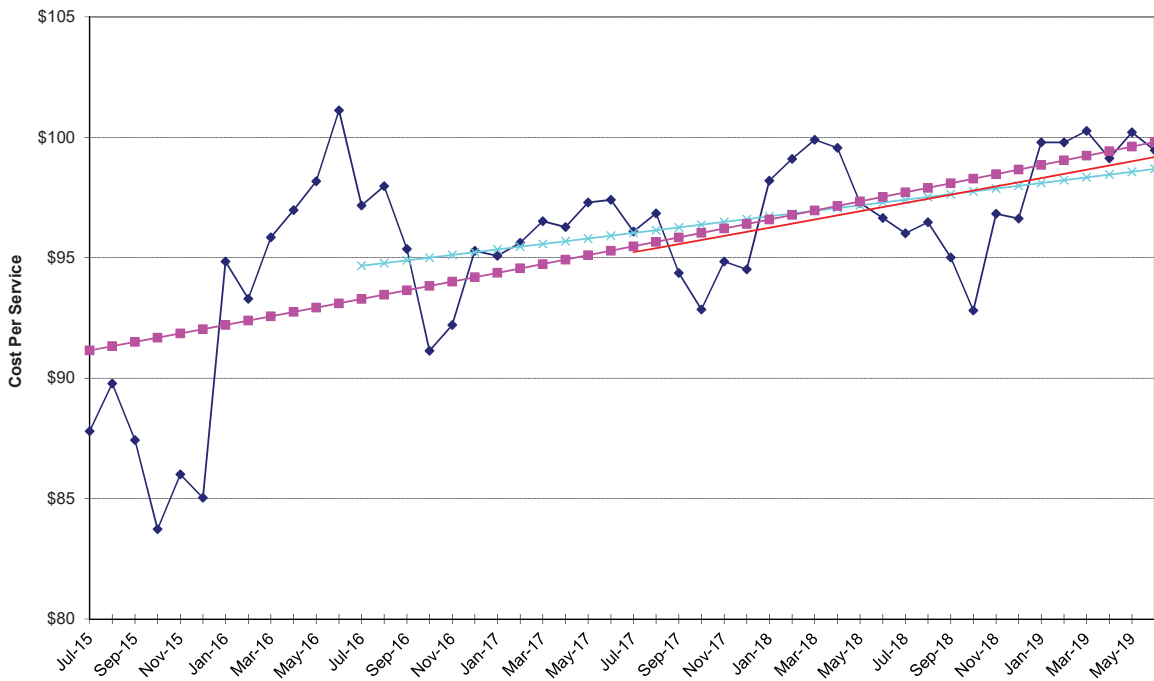
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
9.0%	2.1%	11.4%

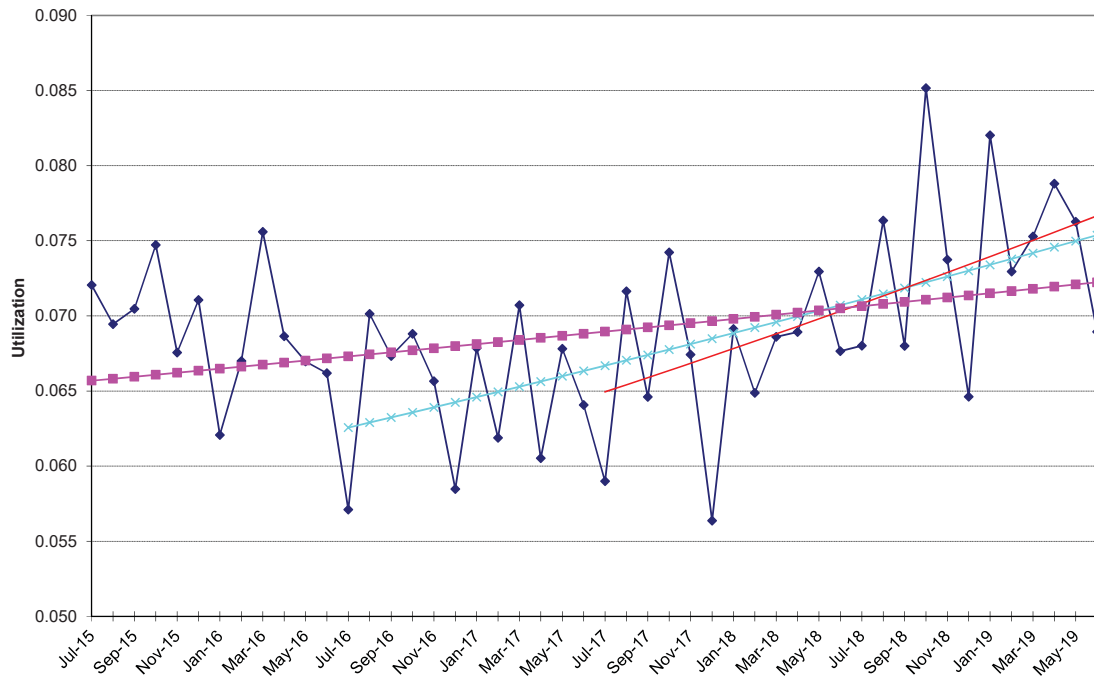
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.6%	1.4%	8.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.5%	2.3%	4.9%

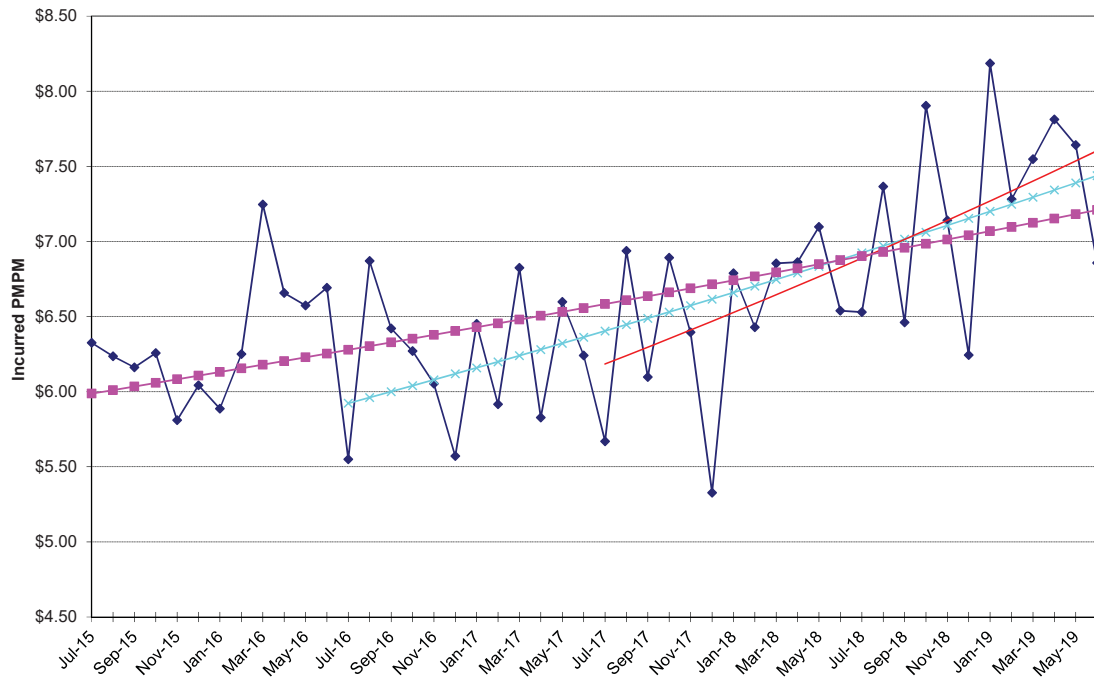
Physician Services - Psychiatric / Substance Abuse



Physician Services - Psychiatric / Substance Abuse



Physician Services - Psychiatric / Substance Abuse



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

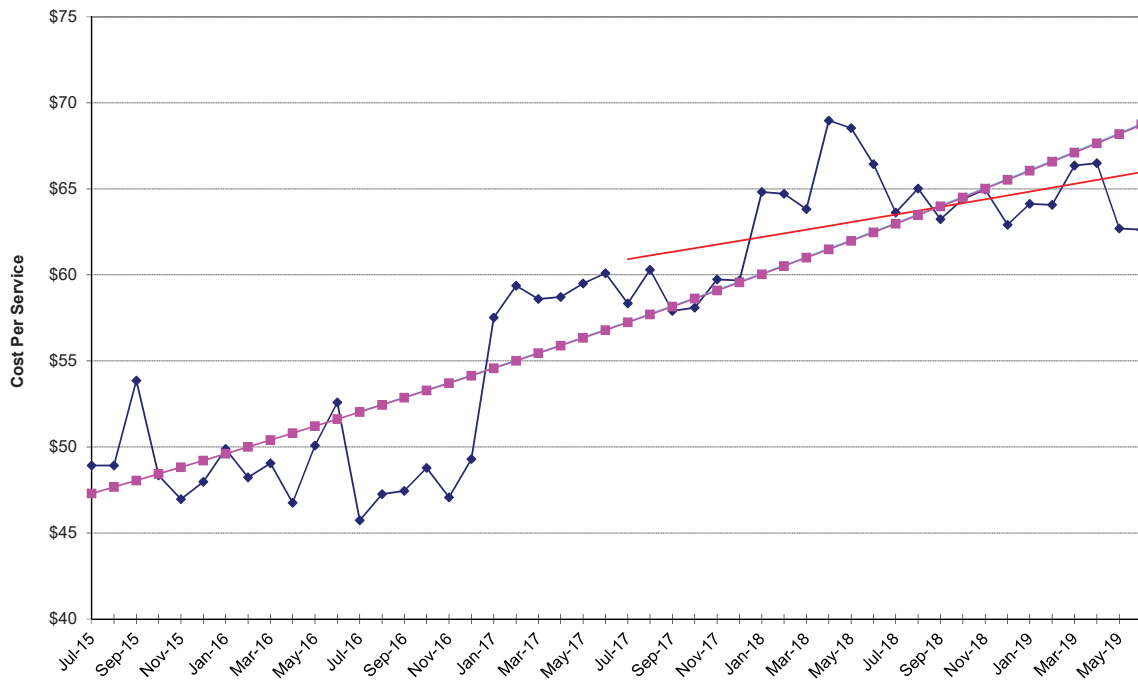
Radiology

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.4%	4.3%	-5.6%

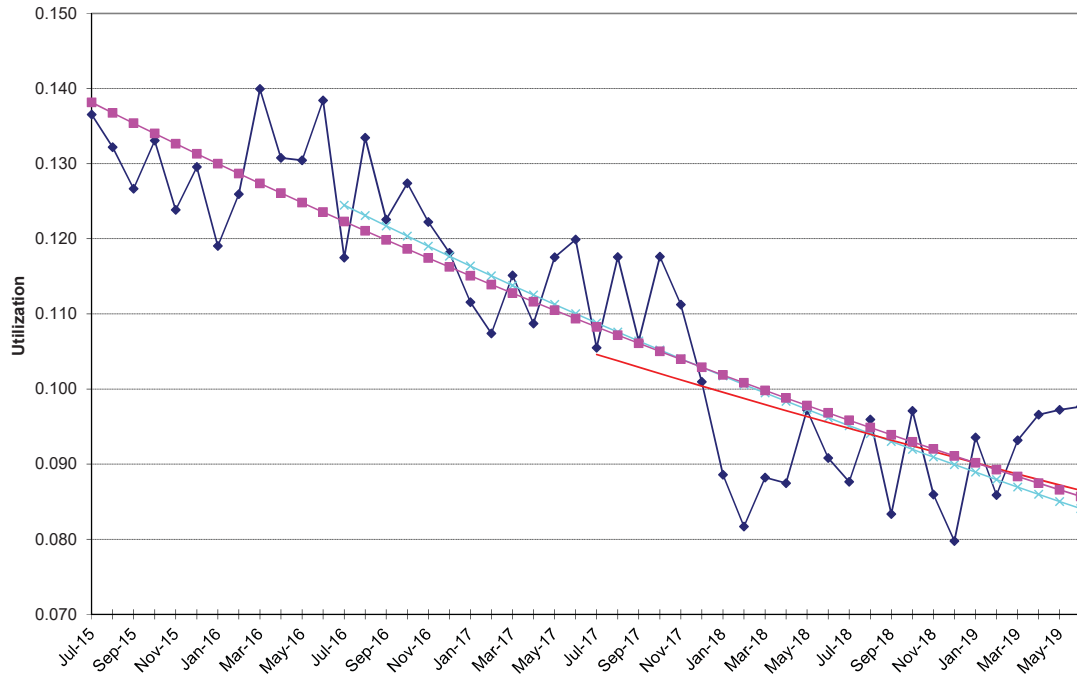
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-12.6%	10.0%	-3.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-11.5%	10.0%	-2.6%

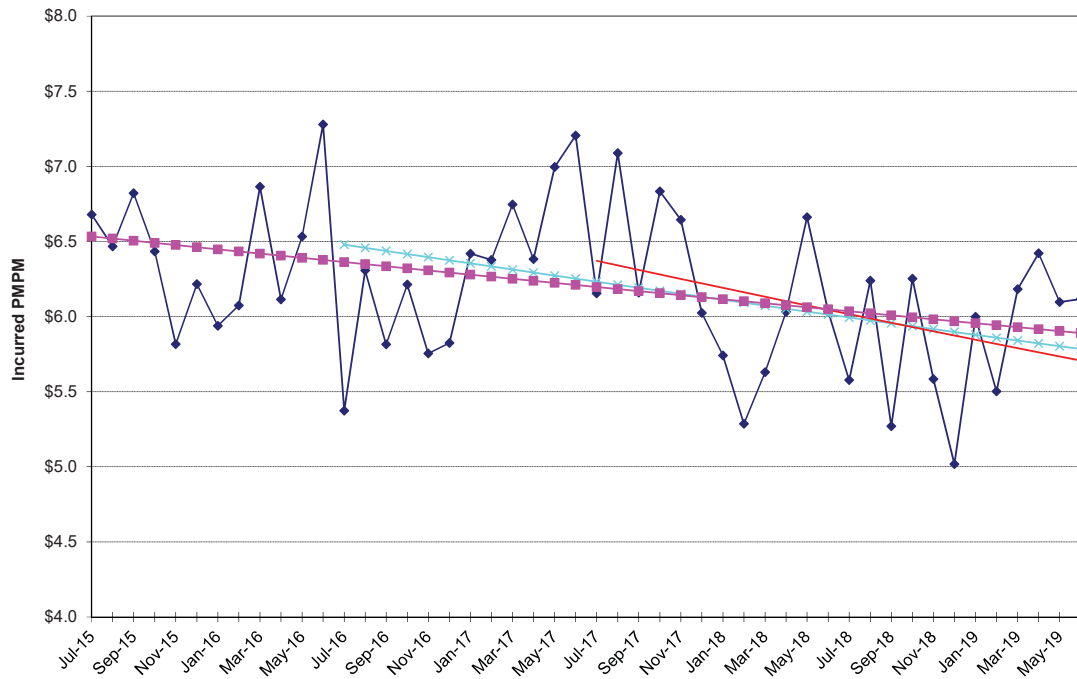
Physician Services - Radiology



Physician Services - Radiology



Physician Services - Radiology



NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

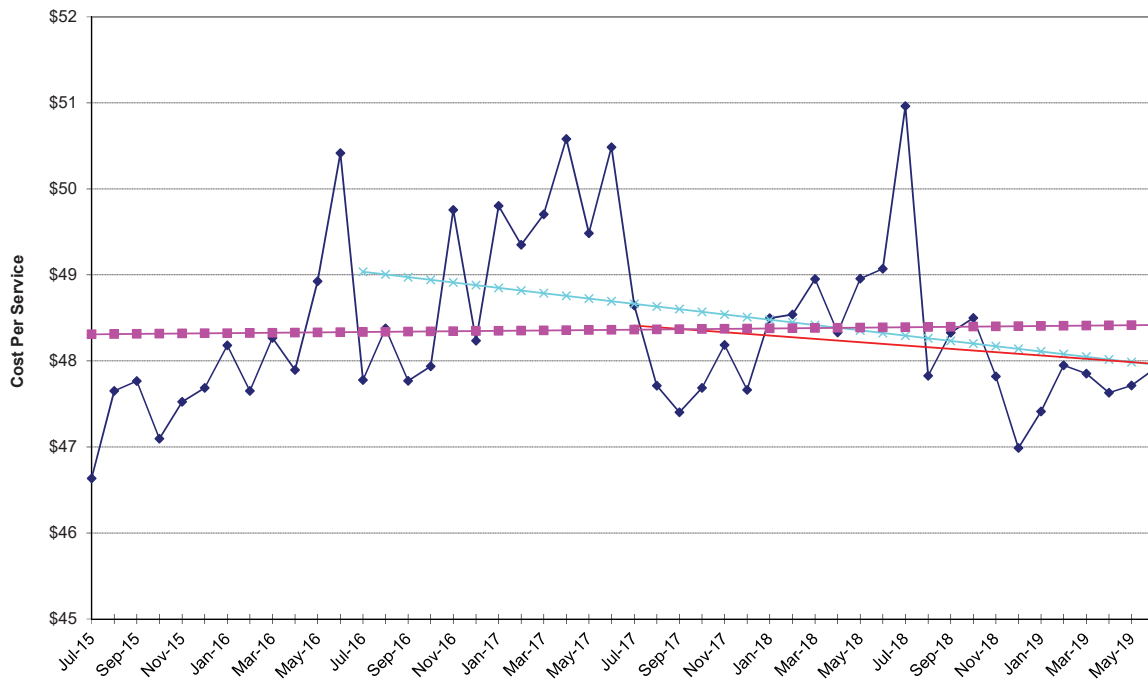
Therapies

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
8.2%	-0.5%	7.7%

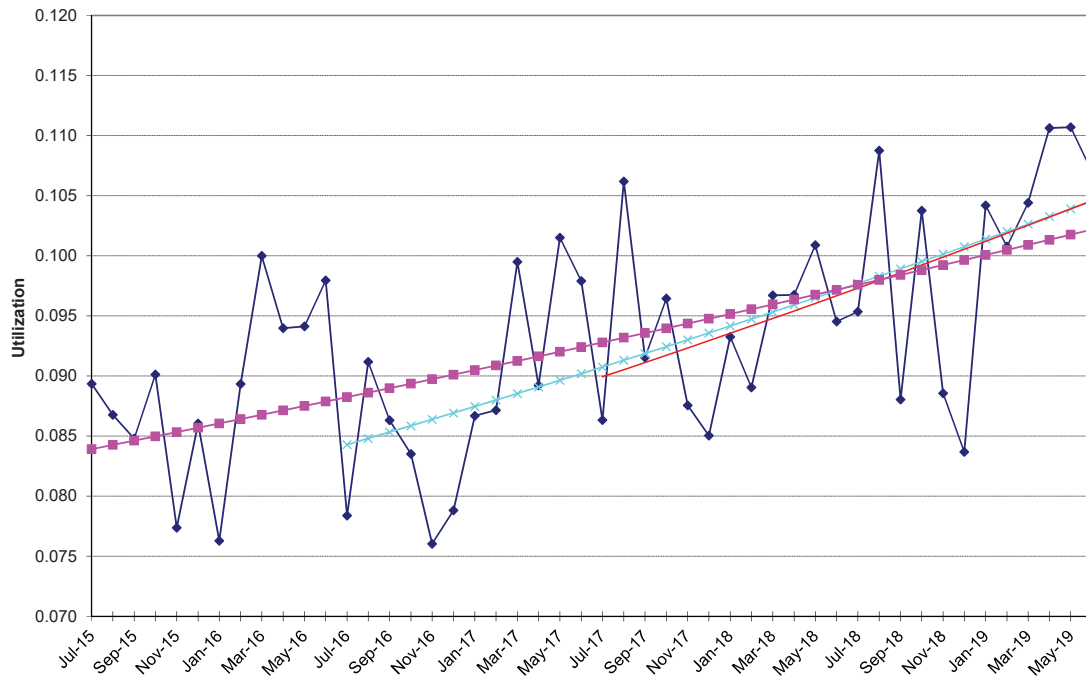
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.7%	-0.8%	6.9%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.2%	0.1%	5.2%

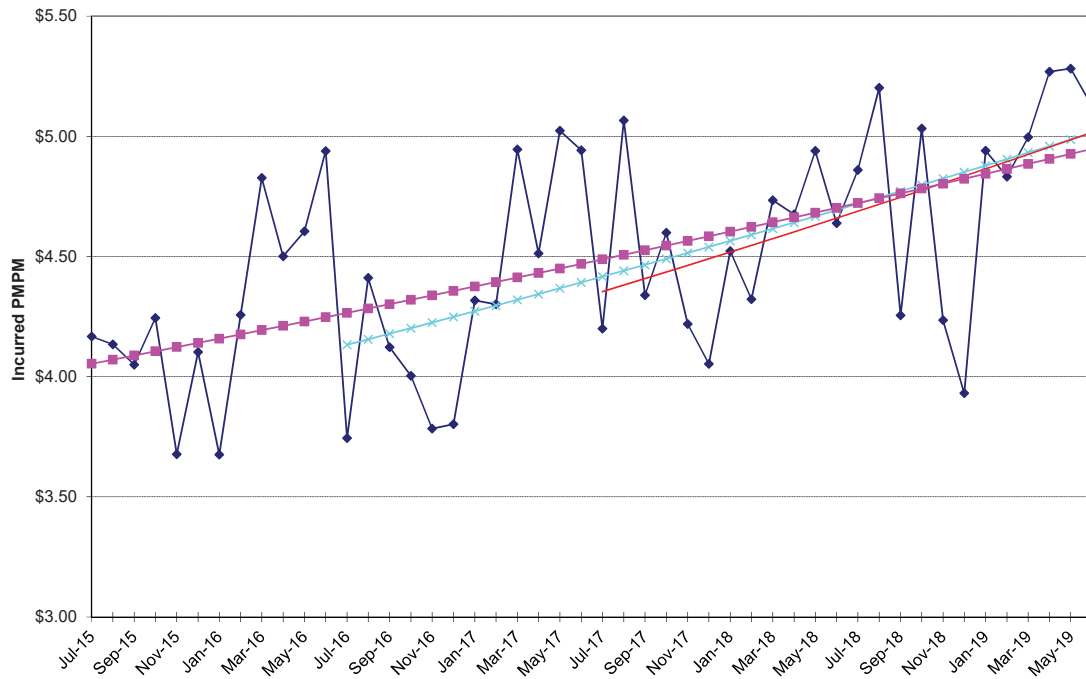
Physician Services - Therapies



Physician Services - Therapies



Physician Services - Therapies



NON-MEDICARE CLAIMS
Excluding Drugs

OTHER

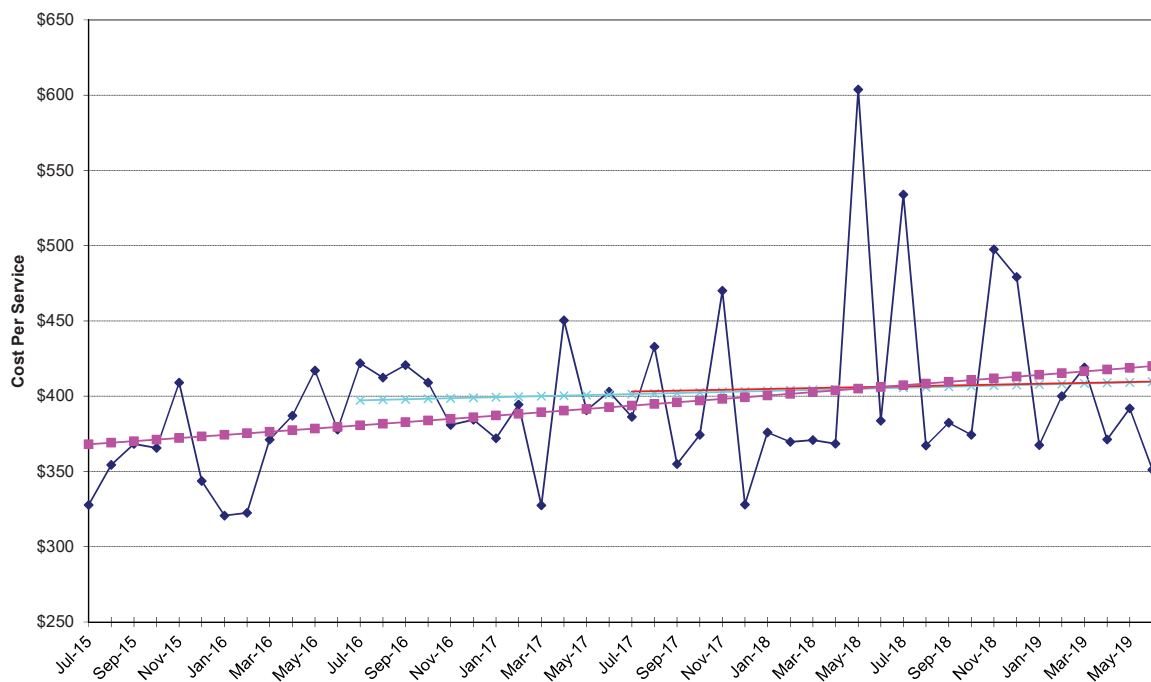
Ambulance

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.7%	0.9%	5.6%

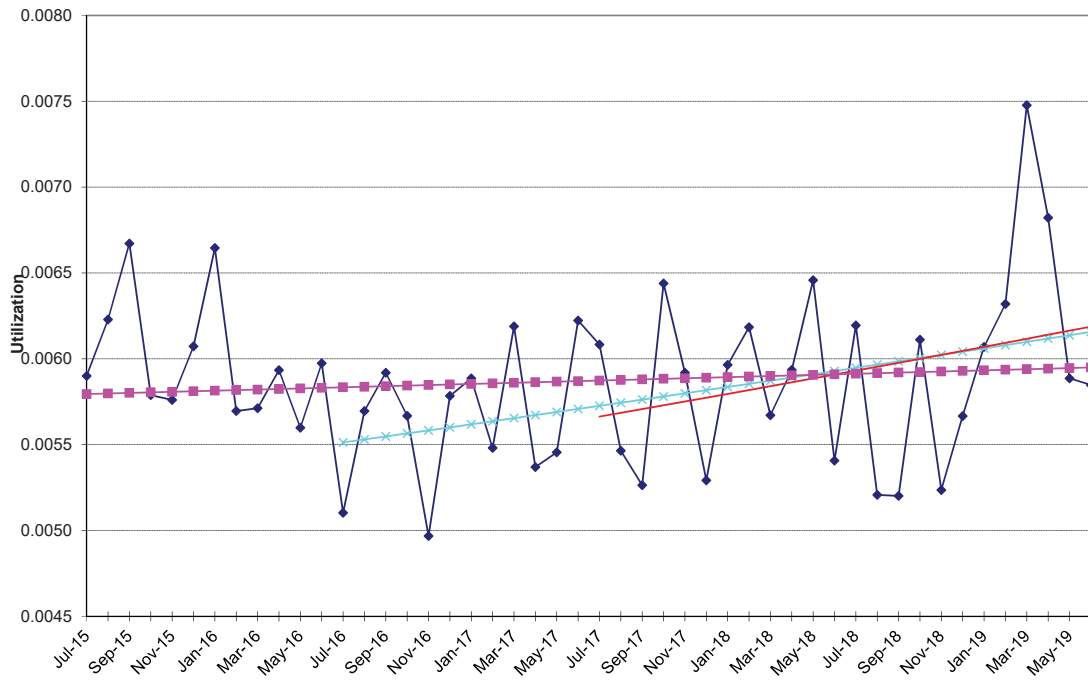
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.9%	1.1%	5.0%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.7%	3.4%	4.1%

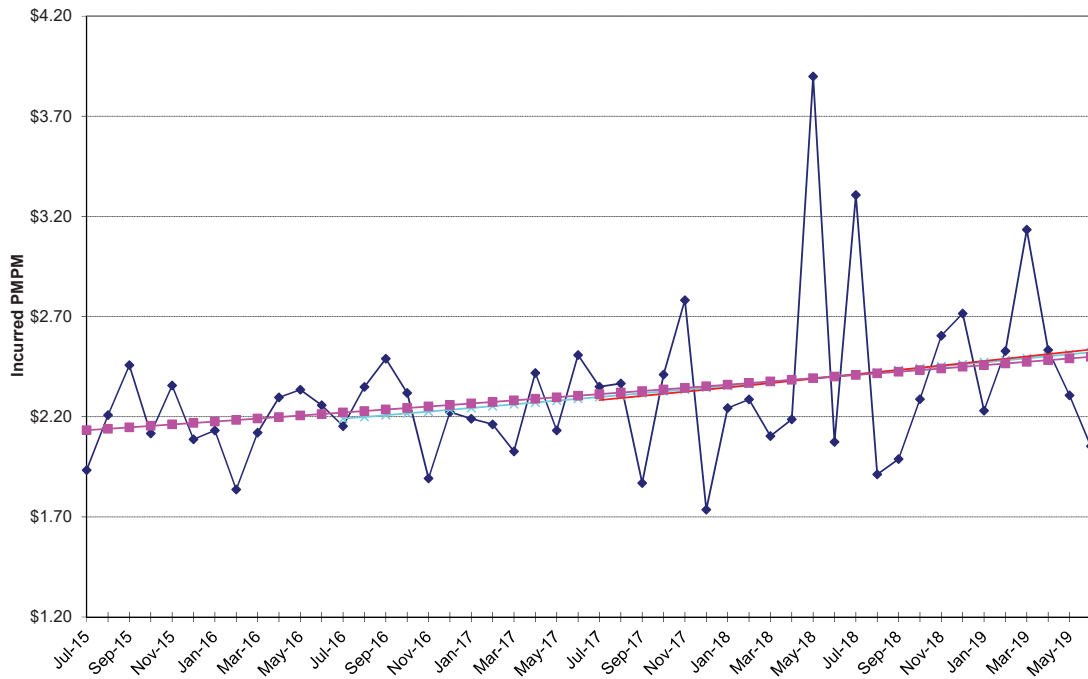
Other - Ambulance



Other - Ambulance



Other - Ambulance



NON-MEDICARE CLAIMS
Excluding Drugs

OTHER

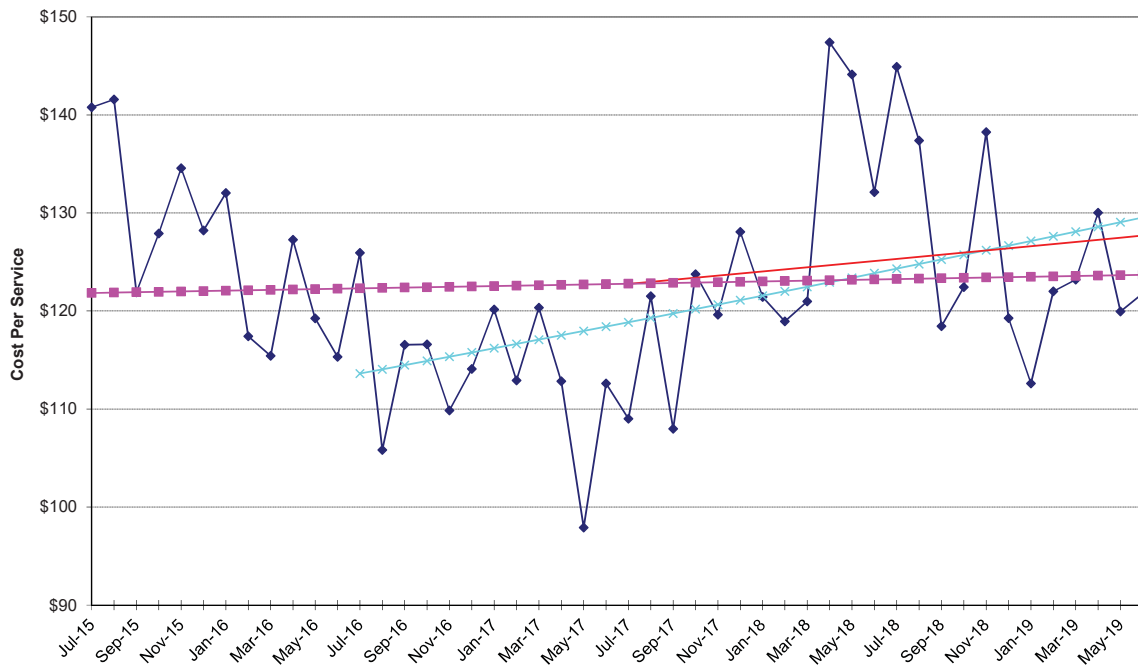
Appliances (DME)

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.5%	2.1%	8.7%

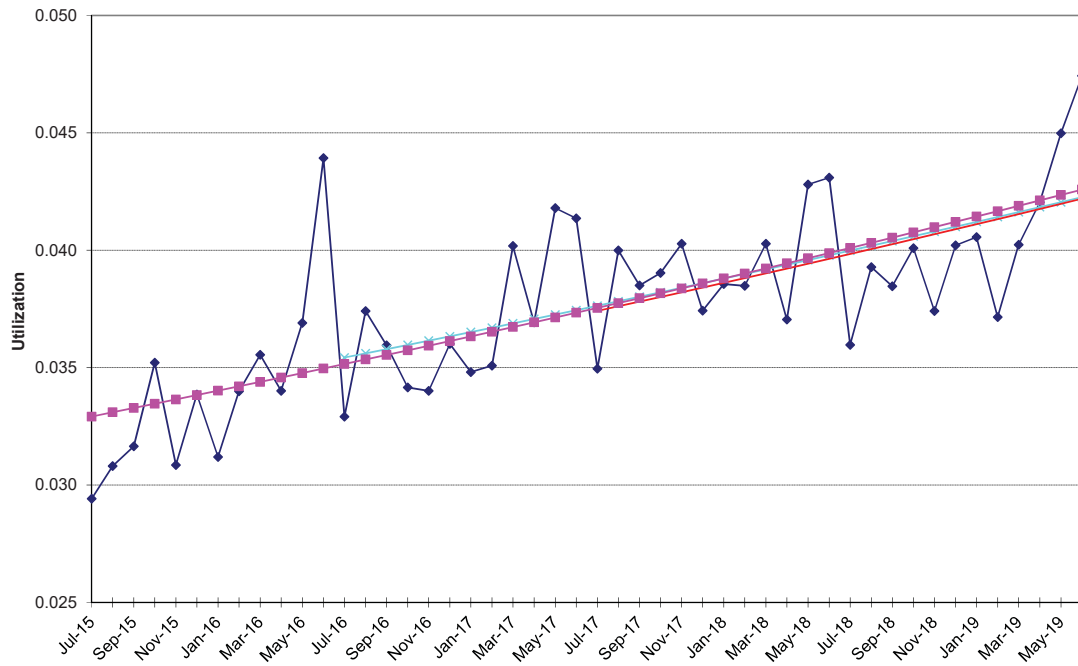
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.2%	4.6%	11.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.8%	0.4%	7.2%

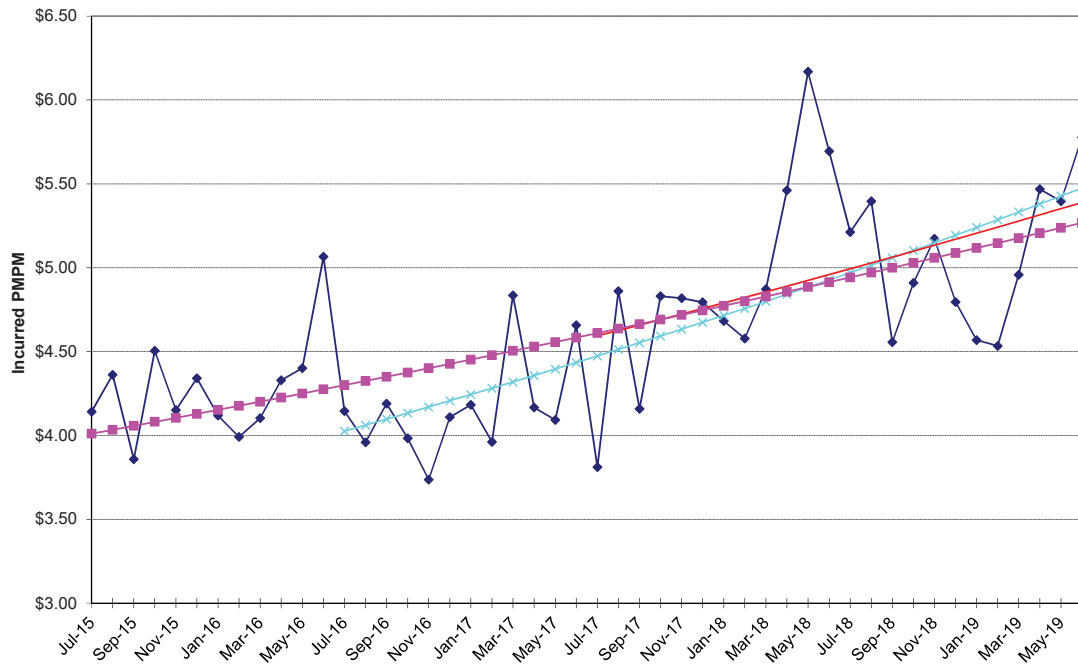
Other - Appliances (DME)



Other - Appliances (DME)



Other - Appliances (DME)



NON-MEDICARE CLAIMS
Excluding Drugs

OTHER

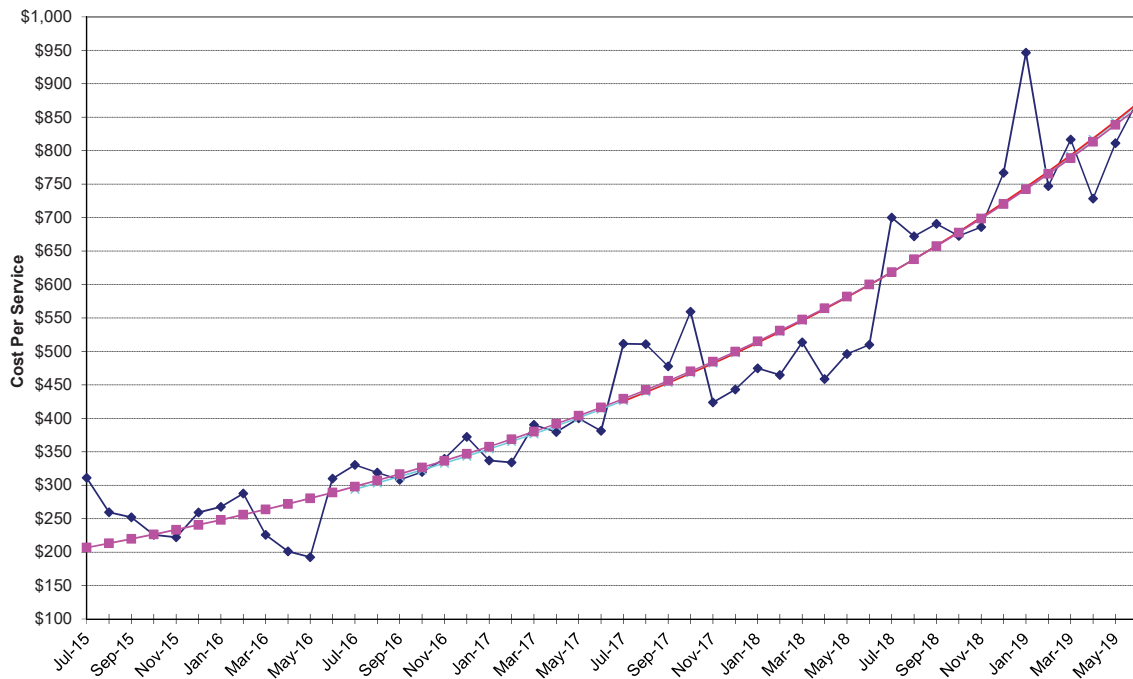
Other Services

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-19.0%	45.4%	17.8%

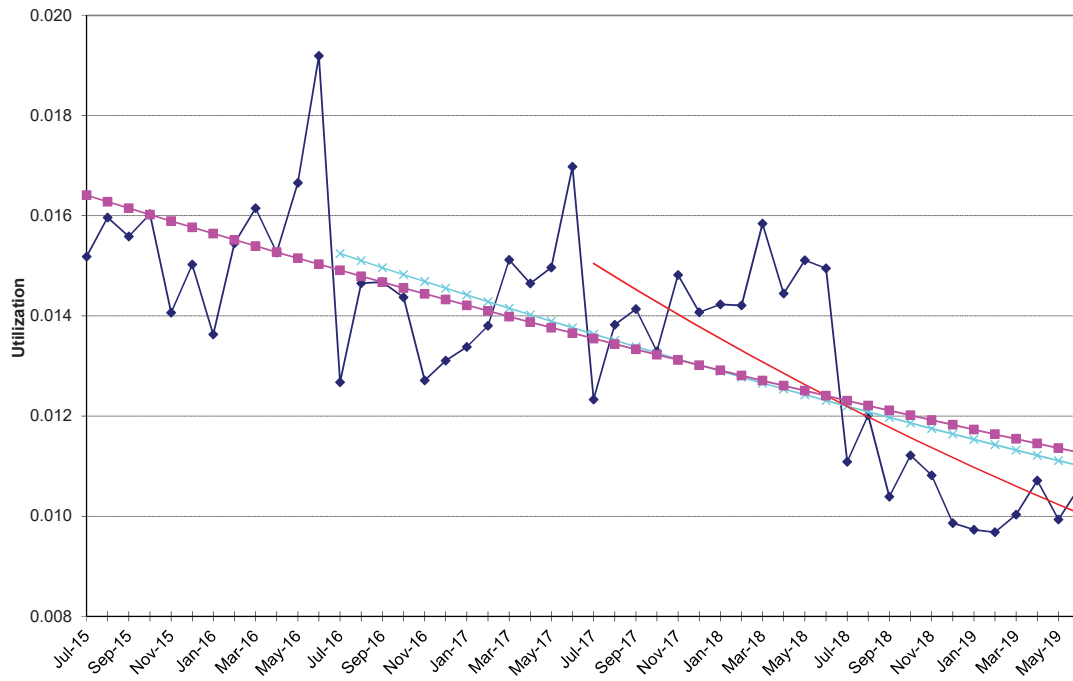
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-10.6%	45.0%	29.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.1%	44.1%	30.9%

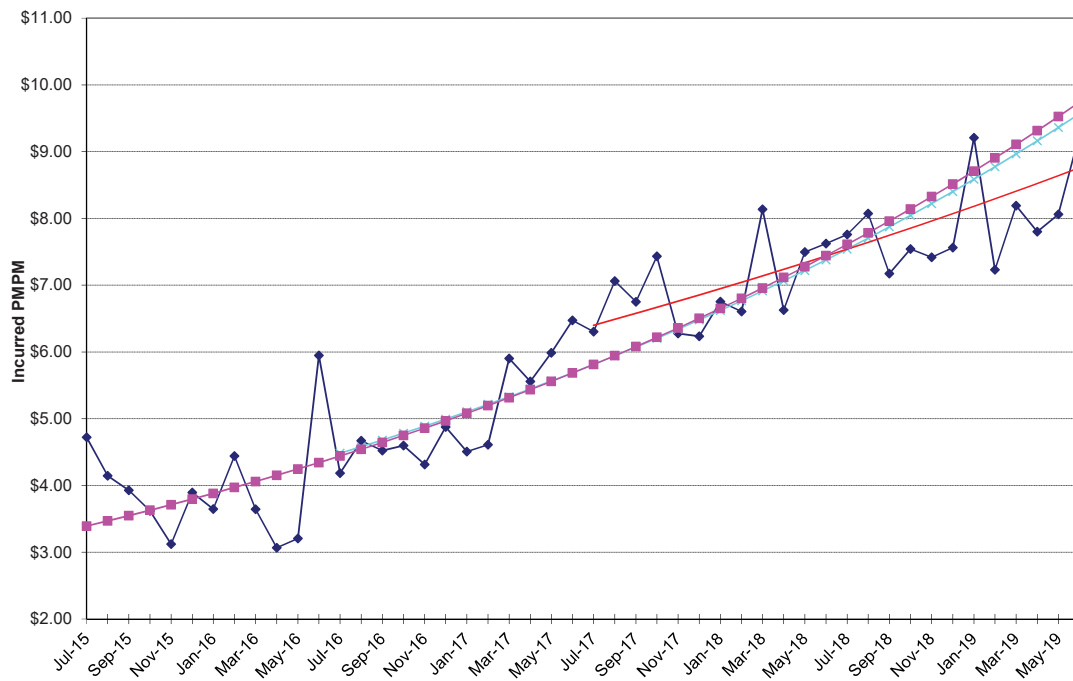
Other - Other Services



Other - Other Services



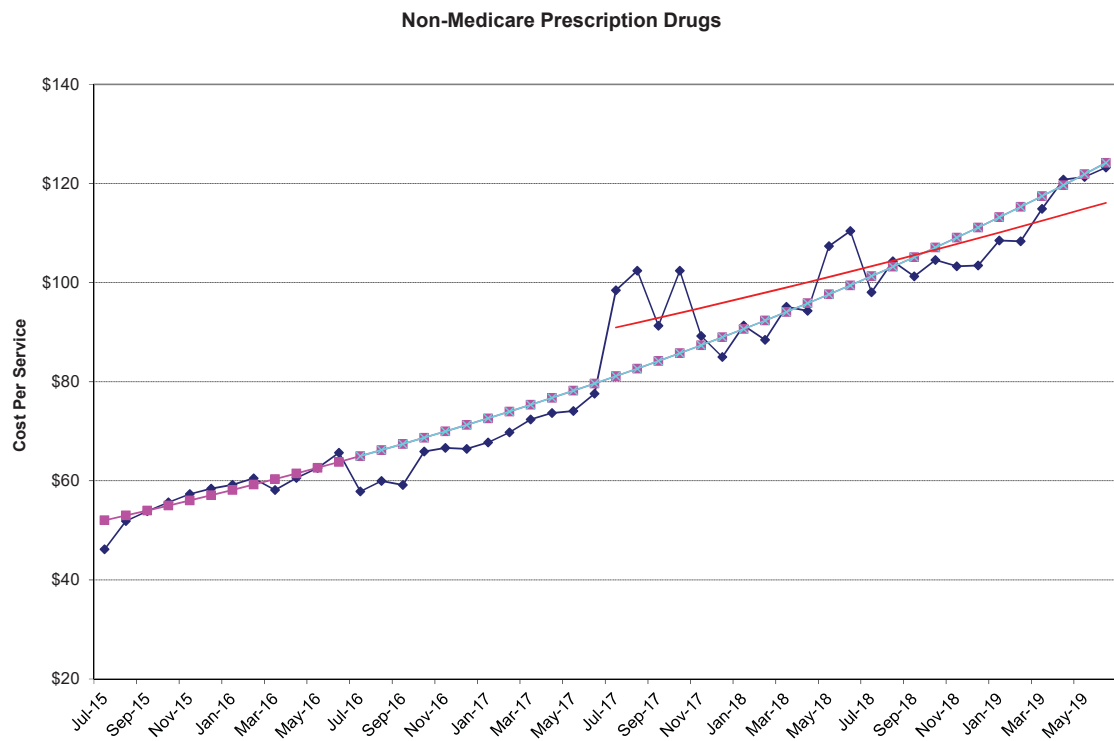
Other - Other Services



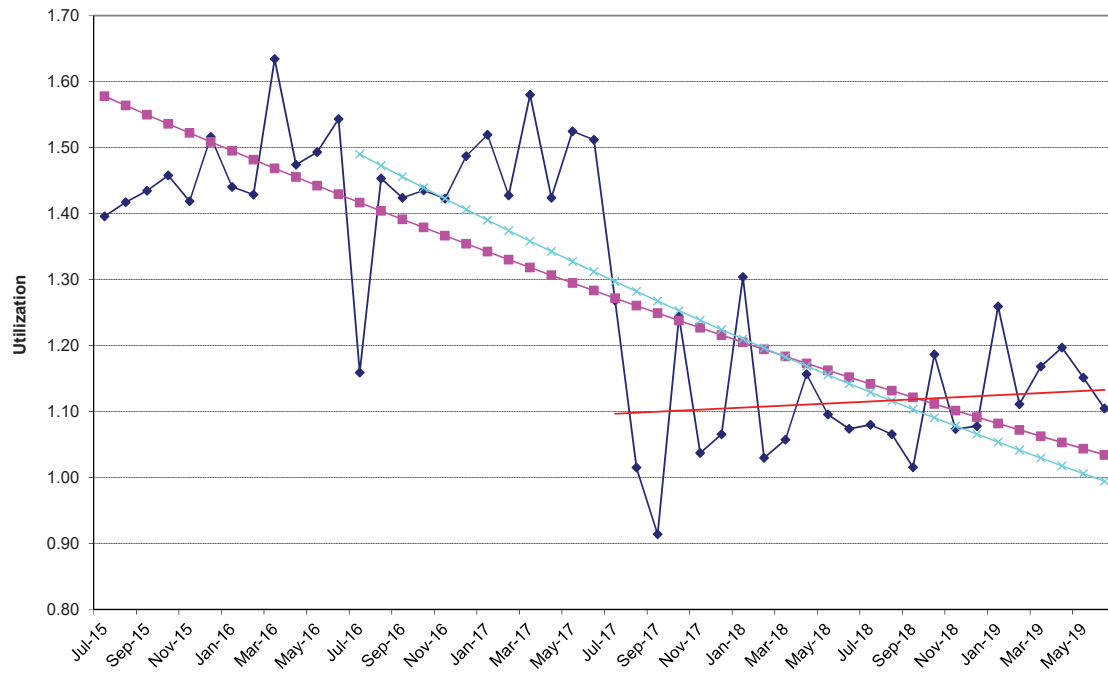
Appendix B

Non-Medicare Prescription Drugs

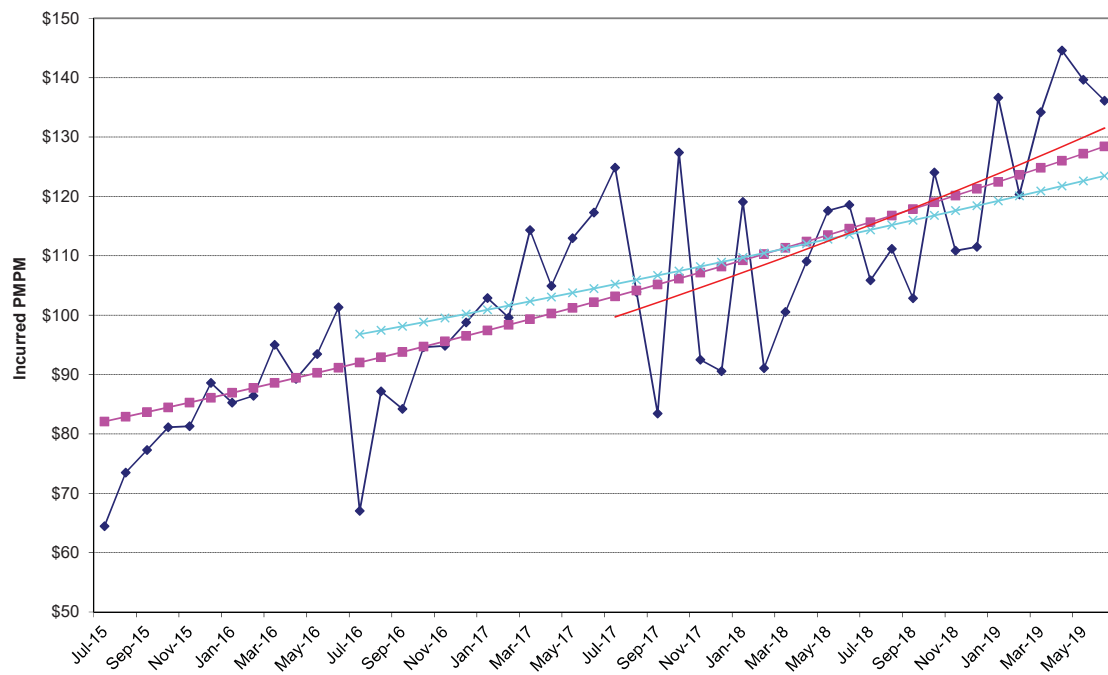
	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
24-Month Trend	1.7%	13.6%	15.5%
36-Month Trend	-12.9%	24.9%	8.7%
48-Month Trend	-10.2%	24.9%	12.1%



Non-Medicare Prescription Drugs



Non-Medicare Prescription Drugs



Appendix C – Prescription Drug Trends

Overview

Continuing Care Actuaries analyzed prescription drug experience provided by CVS in aggregate, by major indicator and in particular, specialty drugs. We analyzed the prescription drug trends using a 24, 36, and 48 month actuarial basis. We found the 24 month basis as the methodology that is most likely to produce accurate future trends. Under this methodology, utilization had a -1.1% trend and unit cost had a 13.4% trend, resulting in a composite trend of 10.3% on an unadjusted basis. The chart below summarizes components of the unadjusted prescription drug trend for the past 8 years

Year	Utilization	Unit Cost	Composite Trend
2012	-0.5%	5.4%	5.6%
2013	0.0%	-5.8%	-5.5%
2014	-1.5%	6.2%	4.5%
2015	3.9%	7.9%	11.5%
2016	-0.7%	8.7%	6.9%
2017	-2.4%	12.2%	7.1%
2018	-29.0%	44.0%	2.3%
2019	-1.1%	13.4%	10.3%

Prior to this analysis, the financial plan was developed using a 12.0% trend for fiscal year 2020. Based on results and future expectations, Continuing Care Actuaries has chosen to use a drug trend assumption of 12.0% for fiscal year 2020 in the financial plan.

Brand Patent Expirations

This drug trend assumption has been made in consideration of recent drug experience, as well as future blockbuster drugs that are expected to lose their patent in the upcoming years. Overall, we can expect fewer expirations than PEIA has experienced in the past. Examples of these drugs include:

Drug	Patent Expiration	2018 Ingredient Cost		2019 Ingredient Cost	
		Amount	%	Amount	%
Chantix	2020	\$105,268	0.0%	\$103,478	0.0%
Dexilant	2020	375,956	0.1%	448,304	0.2%
Sprycel	2020	805,680	0.3%	1,188,374	0.4%
Sutent	2021	350,158	0.1%	237,233	0.1%
Amitiza	2021	238,509	0.1%	292,732	0.1%
Tarceva	2021	217,445	0.1%	24,199	0.0%
Total		\$2,093,016	0.8%	\$2,294,320	0.8%

Specialty Drugs

Specialty drugs have continued to be a concern for PEIA due to the relatively rapid growth in utilization and unit cost. Nationally, specialty drug spend is approximately 40% of all drug spend. For PEIA, it is approximately 32% of all drug spend. The following chart shows the percent of plan drug expenditures in specialty drugs in the past few years. The days supply increased by 4.5% in 2019, which is a better measure of utilization.

Period	Specialty Drugs				
	Total Specialty Cost (\$M)	Percent of Total Cost	Specialty Cost Growth	Number of Specialty Rx	Specialty Rx Growth
FY 2013	\$34.0	18.00%	24.30%	11,167	5.50%
FY 2014	\$35.8	18.60%	5.30%	10,938	-2.10%
FY 2015	\$40.2	18.70%	12.40%	11,028	0.80%
FY 2016	\$48.5	21.10%	20.70%	11,128	0.90%
FY 2017	\$73.6	29.90%	51.50%	17,731	59.30%
FY 2018	\$78.3	31.30%	6.50%	16,153	-8.90%
FY 2019	\$88.8	31.98%	13.35%	17,354	7.44%

The following chart shows the top 10 brand name specialty drugs and their total cost in 2019:

2019 Rank	2019 Brand Name	2018 Cost	2019 Cost	Total Growth
1	HUMIRA	\$19,222,735	\$21,368,969	11.17%
2	ENBREL	\$7,237,742	\$6,267,519	-13.41%
3	TECFIDERA	\$2,933,218	\$3,758,704	28.14%
4	COSENTYX	\$611,149	\$2,927,642	379.04%
5	OTEZLA	\$1,037,187	\$2,748,943	165.04%
6	REVLIMID	\$1,865,012	\$2,717,786	45.72%
7	COPAXONE	\$2,336,778	\$2,613,119	11.83%
8	XYREM	\$2,281,496	\$2,586,946	13.39%
9	GILENYA	\$1,962,644	\$1,941,154	-1.09%
<u>10</u>	<u>AUBAGIO</u>	<u>\$1,470,629</u>	<u>\$1,886,083</u>	<u>28.25%</u>
	Total	\$40,958,590	\$48,816,863	19.19%
	Percent of Specialty Cost	52.28%	54.97%	

Indicator Categories

Continuing Care Actuaries reviewed the individual prescription data items for Fiscal Years 2018 and 2019. A total of 1,933,044 scripts were written for approximately 2,704 different kinds of prescriptions in 2019. The prescriptions were grouped by indicator codes, providing a basis to develop the Fiscal Year 2019 trend by indicator code. The top 40 indicator codes were analyzed, which accounted for 84.0% of PEIA's prescription drug expenditures.

The top 5 indicators from 2019 were the same as the top 5 in 2018. With the except of Insulins, the other top 5 indicators had material increases in cost. PEIA members continue to spend the most on Antirheumatic Drugs. The following chart lists the top 5 and the total drug spend each year.

Rank	2018 Indicator	2018 Cost	2019 Indicator	2019 Cost
1	ANTIRHEUMATIC	\$31,208,503	ANTIRHEUMATIC	\$34,655,591
2	INSULINS	30,007,844	INSULINS	28,463,832
3	INCRETIN MIMETI	13,803,603	INCRETIN MIMETI	17,108,412
4	IMMUNOMOD AGNTS	12,888,745	ANTINEOPLASTIC	15,026,608
5	ANTINEOPLASTIC	11,621,670	IMMUNOMOD AGNTS	12,851,399

The charts on the next few pages summarize the utilization and cost per service for formulary and non-formulary drugs for each indicator code. The "Top Five Increases in Drug Trends" chart is calculated with indicators which grossed at least \$200,000 in ingredient cost in 2019.

On pages C-6 and C-7, we list the top 40 indicators and summarize the utilization and cost statistics. These top 40 indicators represent 84% of total program costs.

On page C-12, we list the top 20 drugs and summarize the formulary and non-formulary cost statistics. These top 20 drugs represent 41% of total program costs.

On pages C-15 to C-19 we show a detailed analysis concerning the top 5 indicators. These analyses include drugs with the highest total ingredient cost, the amount per script, and a breakout of how much was spent on generic, formulary, and non-formulary drugs.

Indicators with the Largest Dollar Increase

Indication	2018 Total Ingredient Cost	2019 Total Ingredient Cost	Total Increase
ANTIRHEUMATIC	\$31,208,503	\$34,665,591	\$3,457,088
ANTINEOPLASTIC	\$11,621,670	\$15,026,608	\$3,404,938
INCRETIN MIMETI	\$13,803,603	\$17,108,412	\$3,304,808
SKIN AND MUCOUS	\$4,010,679	\$6,975,067	\$2,964,388
HMG-COA RED INH	\$2,135,520	\$4,040,225	\$1,904,705

Indicators with the Largest Increase as a Percentage

Indication	2018 Total Ingredient Cost	2019 Total Ingredient Cost	Total Increase
VESICULAR MONOAMINE TRANSPORTER 2 (VMAT2) INHIBITO	\$70,610	\$246,811	249.5%
HMG-COA RED INH	\$2,135,520	\$4,040,225	89.2%
SKIN AND MUCOUS	\$4,010,679	\$6,975,067	73.9%
RENIN-ANGIOTENSIN- ALDOSTERONE SYSTEM INHIBITORS, M	\$446,365	\$733,544	64.3%
HEMATOPOIETIC	\$874,722	\$1,433,488	63.9%

Indicators with the Largest Increase in Claim Numbers

Indication	2018 Prescriptions	2019 Prescriptions	Utilization Increase
ANXIOLYTICS, SE	32,377	37,496	5,119
ADRENALS	66,695	69,593	2,898
TETRACYCLINES	19,202	21,120	1,918
NONSTEROIDAL AN	59,565	61,309	1,744
CA SKE MUS RELA	29,346	30,774	1,428

Indicators with the Largest Utilization Increase Percentage

Indication	2018 Prescriptions	2019 Prescriptions	Utilization Increase
VESICULAR MONOAMINE TRANSPORTER 2 (VMAT2) INHIBITO	14	47	235.7%
PROPROTEIN CONVERTASE SUBTILISIN KEXIN TYPE 9 (PCS	505	742	46.9%
RENIN-ANGIOTENSIN- ALDOSTERONE SYSTEM INHIBITORS, M	485	691	42.5%
PROTEASE INH	58	80	37.9%
HEMATOPOIETIC	142	188	32.4%

Indicators with the Largest Increase in Cost per Prescription

Indication	2018 Ingredient Cost Per Prescription	2019 Ingredient Cost Per Prescription	Ingredient Cost Per Prescription Increase
VASODILAT AGT	\$9,315.35	\$11,152.68	\$1,837.33
CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATO	\$21,773.52	\$23,413.82	\$1,640.30
HEMATOPOIETIC	\$6,160.01	\$7,624.94	\$1,464.92
ANTIFIBROTIC AGENTS	\$8,260.02	\$9,524.19	\$1,264.18
GONADOTROPINS	\$3,326.59	\$3,960.69	\$634.10

Indicators with the Largest Percentage Increase in Cost per Prescription

Indication	2018 Ingredient Cost Per Prescription	2019 Ingredient Cost Per Prescription	Ingredient Cost Per Prescription Increase
HMG-COA RED INH	\$24.05	\$47.34	96.8%
SKIN AND MUCOUS	\$535.83	\$968.76	80.8%
CHOL ABSO INHIB	\$159.94	\$242.98	51.9%
A-ADRENRCG BLKR	\$36.56	\$51.04	39.6%
LEUKOTRI MDF	\$25.51	\$35.24	38.2%

Drug Indicators by Highest Cost

<u>Rank</u>	<u>Indicator</u>	<u>Number of Prescriptions</u>	<u>Cost Per Prescription</u>	<u>Program Costs</u>	<u>Formulary Percent (cost)</u>	<u>Formulary Percent (Scripts)</u>
1	ANTIRHEUMATIC	7,173	\$4,832.79	\$34,665,591	94.1%	93.3%
2	INSULINS	17,855	\$1,594.17	\$28,463,832	99.7%	99.7%
3	INCRETIN MIMETI	9,290	\$1,841.59	\$17,108,412	99.9%	99.9%
4	ANTINEOPLASTIC	7,724	\$1,945.44	\$15,026,608	34.9%	89.2%
5	IMMUNOMOD AGNTS	2,008	\$6,400.10	\$12,851,399	91.2%	91.5%
6	DDP-4 INHIBITOR	9,216	\$1,116.03	\$10,285,344	100.0%	99.9%
7	ANTIDIABETIC	7,870	\$1,218.50	\$9,589,589	99.1%	99.1%
8	SKIN AND MUCOUS	7,200	\$968.76	\$6,975,067	81.0%	93.4%
9	ADRENALS	69,593	\$96.35	\$6,705,547	98.1%	99.5%
10	ANTIDEPRESSANTS	139,844	\$46.81	\$6,546,762	96.3%	99.9%
11	ANTICOAGULANTS	10,135	\$607.19	\$6,153,859	99.6%	99.6%
12	MISC ANTICONVUL	44,788	\$123.35	\$5,524,718	89.3%	99.5%
13	B-ADREN AGON	25,160	\$184.23	\$4,635,215	100.0%	100.0%
14	PPI	65,832	\$65.51	\$4,312,360	99.9%	100.0%
15	CONTRACEPTIVES	42,035	\$97.68	\$4,106,077	94.3%	98.5%
16	HMG-COA RED INH	85,336	\$47.34	\$4,040,225	99.3%	99.9%
17	ANTIPSYCHOTICS	9,212	\$437.93	\$4,034,207	91.8%	98.0%
18	AMPHETAMINES	23,244	\$157.16	\$3,653,075	96.4%	98.0%
19	NERVOUS SYS AGT	2,852	\$1,171.11	\$3,340,009	22.5%	92.4%
20	CORTICOSTEROIDS	66,026	\$45.79	\$3,023,405	95.6%	99.2%

Drug Indicators by Highest Cost (continued)

<u>Rank</u>	<u>Indicator</u>	<u>Number of Prescriptions</u>	<u>Cost Per Prescription</u>	<u>Program Costs</u>	<u>Formulary Percent (cost)</u>	<u>Formulary Percent (Scripts)</u>
21	BETA BLOCKERS	62,561	\$45.61	\$2,853,398	99.0%	99.7%
22	ANTIRETROVIRALS	705	\$3,927.05	\$2,768,570	98.1%	97.3%
23	ANTIMUSCARINICS	14,322	\$189.82	\$2,718,627	99.2%	99.8%
	CYSTIC FIBROSIS					
	TRANSMEMBRANE					
24	CONDUCTANCE REGULATO	116	\$23,413.82	\$2,716,003	0.0%	0.0%
25	ANTI-INFLAMMATO	3,720	\$728.12	\$2,708,592	99.4%	99.6%
26	GI DRUGS, MISCE	2,673	\$924.36	\$2,470,815	96.9%	96.7%
27	ESTROGENS	12,121	\$199.48	\$2,417,882	98.1%	98.6%
28	VASODILAT AGT	216	\$11,152.68	\$2,408,978	100.0%	100.0%
29	THYROID AGENTS	1,826	\$1,250.77	\$2,283,907	100.0%	100.0%
30	EENT ANTI-INFL	55,959	\$40.79	\$2,282,378	92.1%	95.5%
31	PROTEASE INH	80	\$25,660.67	\$2,052,853	97.5%	93.8%
32	SOMATOTROP AGON	368	\$4,873.14	\$1,793,316	87.2%	86.7%
33	NONSTEROIDAL AN	10,527	\$167.79	\$1,766,326	89.2%	87.7%
34	DIABETES MELLIT	61,309	\$28.70	\$1,759,525	97.8%	99.9%
35	RESP AND CNS	11,093	\$156.31	\$1,733,958	84.8%	92.7%
36	OTHER MISC THER	484	\$3,355.13	\$1,623,884	25.6%	20.7%
37	FIBRIC ACID DER	9,519	\$156.69	\$1,491,524	99.4%	99.9%
38	MISC ANTILIPEM	3,004	\$489.00	\$1,468,970	100.0%	100.0%
39	PLATELET-AGG IN	8,722	\$165.38	\$1,442,451	99.6%	99.9%
40	HEMATOPOIETIC	188	\$7,624.94	\$1,433,488	11.9%	42.0%
	<u>All Other Indicators</u>	<u>1,021,138</u>	<u>\$43.51</u>	<u>\$44,430,768</u>	<u>84.6%</u>	<u>98.2%</u>
	Total	1,933,044	\$143.64	277,667,517	88.4%	98.5%

Drug Indicators by Highest Cost
Analysis of Formulary Distribution

Rank	Indicator	Formulary			Non-Formulary		
		Scripts	Ingredient Cost	Cost Per Script	Scripts	Ingredient Cost	Cost Per Script
1	ANTIRHEUMATIC	6,693	\$32,619,930	\$4,873.74	480	\$2,045,661	\$4,261.79
2	INSULINS	17,795	\$28,389,300	\$1,595.35	60	\$74,531	\$1,242.19
3	INCRETIN MIMETI	9,281	\$17,095,100	\$1,841.95	9	\$13,311	\$1,479.02
4	ANTINEOPLASTIC	6,893	\$5,248,522	\$761.43	831	\$9,778,086	\$11,766.65
5	IMMUNOMOD AGNTS	1,837	\$11,718,394	\$6,379.09	171	\$1,133,005	\$6,625.76
6	DDP-4 INHIBITOR	9,209	\$10,281,741	\$1,116.49	7	\$3,604	\$514.79
7	ANTIDIABETIC	7,799	\$9,505,154	\$1,218.77	71	\$84,436	\$1,189.23
8	SKIN AND MUCOUS	6,725	\$5,647,115	\$839.72	475	\$1,327,952	\$2,795.69
9	ADRENALS	69,258	\$6,577,669	\$94.97	335	\$127,878	\$381.73
10	ANTIDEPRESSANTS	139,671	\$6,307,166	\$45.16	173	\$239,596	\$1,384.95
11	ANTICOAGULANTS	10,098	\$6,127,479	\$606.80	37	\$26,380	\$712.98
12	MISC ANTICONVUL	44,555	\$4,934,430	\$110.75	233	\$590,288	\$2,533.43
13	B-ADREN AGON	25,154	\$4,634,361	\$184.24	6	\$854	\$142.31
14	PPI	65,818	\$4,306,464	\$65.43	14	\$5,896	\$421.12
15	CONTRACEPTIVES	41,401	\$3,870,355	\$93.48	634	\$235,722	\$371.80
16	HMG-COA RED INH	85,293	\$4,012,830	\$47.05	43	\$27,396	\$637.11
17	ANTIPSYCHOTICS	9,024	\$3,704,883	\$410.56	188	\$329,323	\$1,751.72
18	AMPHETAMINES	22,780	\$3,520,947	\$154.56	464	\$132,128	\$284.76
19	NERVOUS SYS AGT	2,634	\$752,930	\$285.85	218	\$2,587,079	\$11,867.33
20	CORTICOSTEROIDS	65,524	\$2,891,861	\$44.13	502	\$131,544	\$262.04

Drug Indicators by Highest Cost
Analysis of Formulary Distribution (continued)

Rank	Indicator	Formulary			Non-Formulary		
		Scripts	Ingredient Cost	Cost Per Script	Scripts	Ingredient Cost	Cost Per Script
21	BETA BLOCKERS	62,403	\$2,825,989	\$45.29	158	\$27,409	\$173.47
22	ANTIRETROVIRALS	686	\$2,715,128	\$3,957.91	19	\$53,442	\$2,812.72
23	ANTIMUSCARINICS	14,289	\$2,695,717	\$188.66	33	\$22,911	\$694.26
	CYSTIC FIBROSIS						
24	TRANSMEMBRANE CONDUCTANCE REGULATO	0	\$0	\$0	116	\$2,716,003	\$23,413.82
25	ANTI-INFLAMMATO	3,705	\$2,693,382	\$726.96	15	\$15,210	\$1,014.02
26	GI DRUGS, MISCE	2,585	\$2,393,252	\$925.82	88	\$77,563	\$881.40
27	ESTROGENS	11,946	\$2,371,217	\$198.49	175	\$46,666	\$266.66
28	VASODILAT AGT	216	\$2,408,978	\$11,152.68	0	\$0	\$0.00
29	THYROID AGENTS	1,826	\$2,283,907	\$1,250.77	0	\$0	\$0.00
30	EENT ANTI-INFL	53,433	\$2,101,673	\$39.33	2,526	\$180,705	\$71.54
31	PROTEASE INH	75	\$2,001,516	\$26,686.88	5	\$51,337	\$10,267.49
32	SOMATOTROP AGON	319	\$1,562,954	\$4,899.54	49	\$230,362	\$4,701.27
33	NONSTEROIDAL AN	9,234	\$1,576,301	\$170.71	1,293	\$190,025	\$146.96
34	DIABETES MELLIT	61,241	\$1,721,537	\$28.11	68	\$37,988	\$558.65
35	RESP AND CNS	10,278	\$1,470,003	\$143.02	815	\$263,956	\$323.87
36	OTHER MISC THER	100	\$415,672	\$4,156.72	384	\$1,208,212	\$3,146.38
37	FIBRIC ACID DER	9,510	\$1,482,810	\$155.92	9	\$8,714	\$968.24
38	MISC ANTILIPEM	3,003	\$1,468,408	\$488.98	1	\$562	\$561.75
39	PLATELET-AGG IN	8,711	\$1,436,549	\$164.91	11	\$5,902	\$536.55
40	HEMATOPOIETIC	79	\$171,033	\$2,164.97	109	\$1,262,455	\$11,582.16
	<u>All Other Indicators</u>	<u>1,003,079</u>	<u>\$37,576,961</u>	<u>\$37.46</u>	<u>18,059</u>	<u>\$6,853,807</u>	<u>\$379.52</u>
	Total	1,904,160	\$245,519,616	\$128.94	28,884	\$32,147,901	\$1,113.00

Drug Indicators by Highest Script Increase

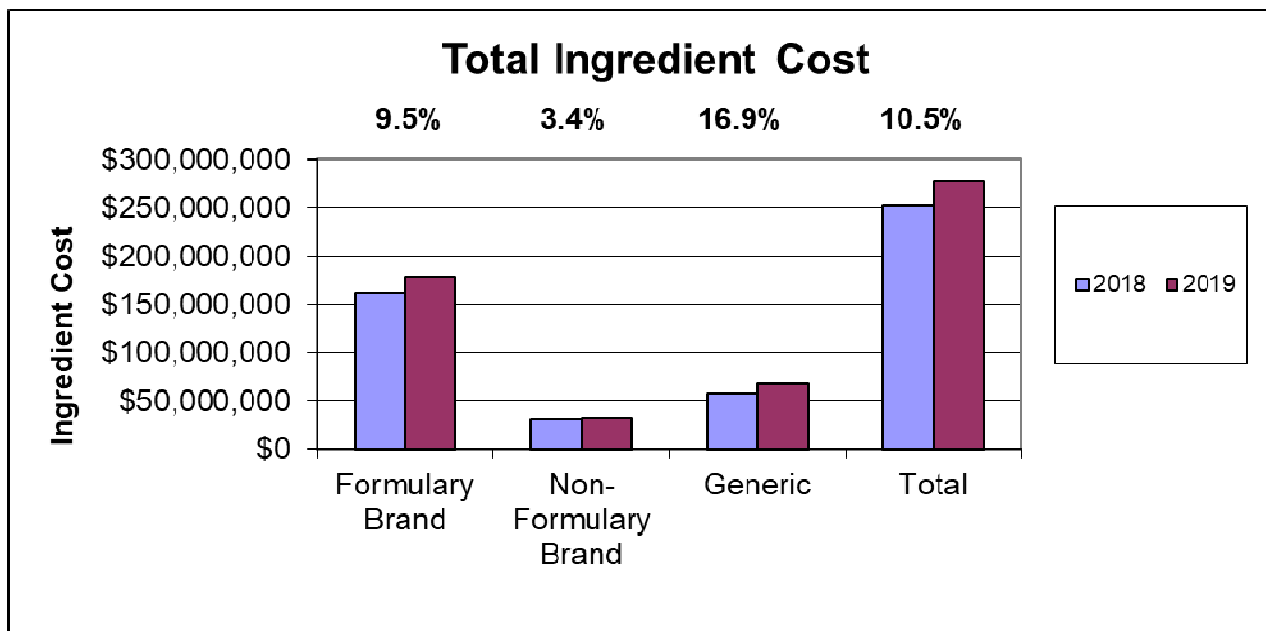
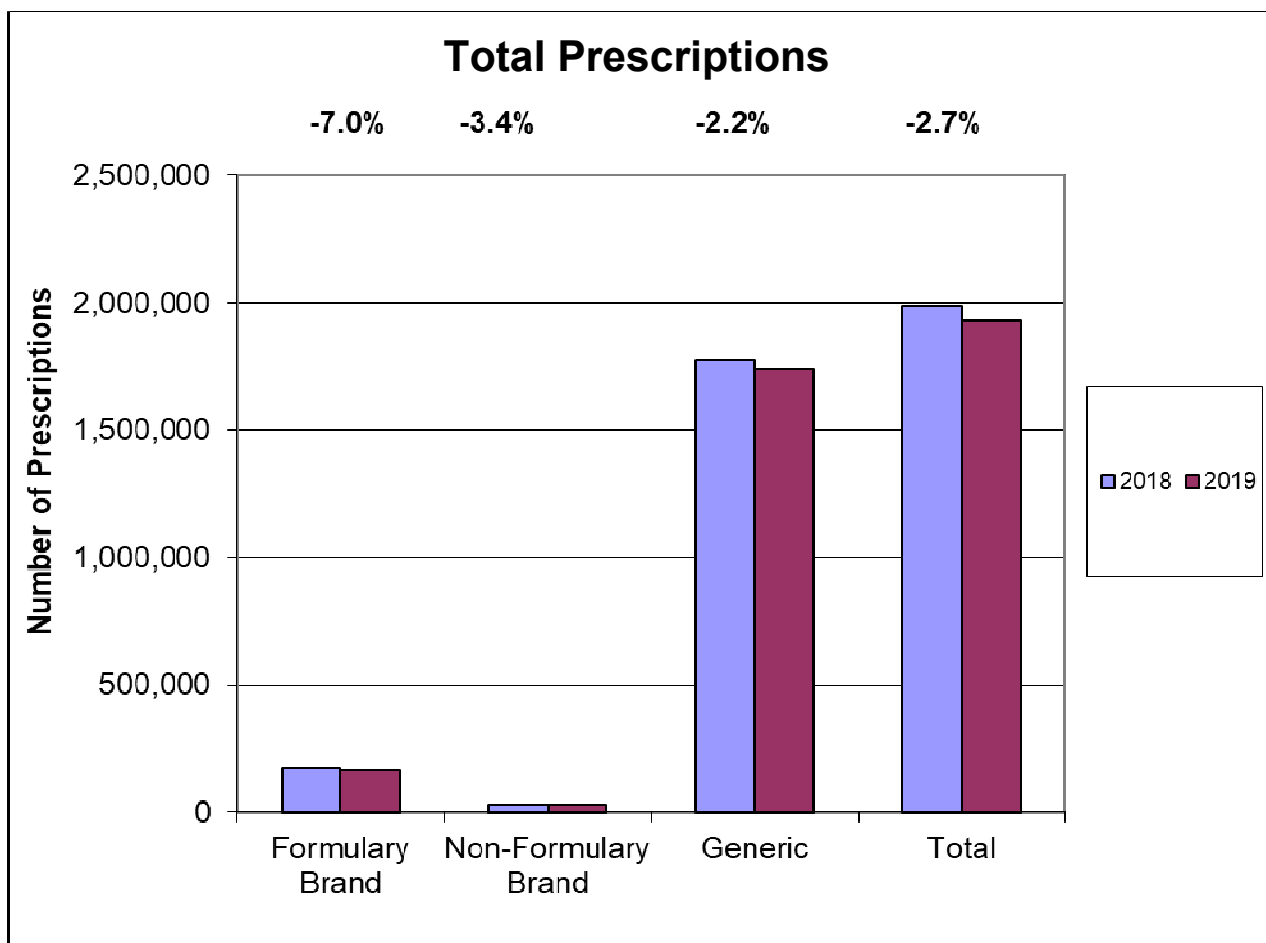
Rank	Indicator	Formulary Cost Per Script	Non-Formulary Cost Per Script	Increase/ Decrease
85	AZOLES	\$8.02	\$6,045.68	75,298%
44	PITUITARY	\$182.40	\$57,620.64	31,491%
80	BENZODIAZEPINES	\$3.84	\$1,115.71	28,976%
66	MUCOLYTIC AGENT	\$21.31	\$4,045.23	18,884%
139	ANTIDIARRHEAL	\$24.30	\$4,287.71	17,543%
90	DOPAM REC AGON	\$53.61	\$5,085.64	9,386%
79	PENICILLINS	\$6.61	\$541.12	8,089%
76	A-ADRENRC BLKR	\$49.82	\$3,701.69	7,330%
147	MISC ANTIPROTOZ	\$11.53	\$847.67	7,251%
150	QUINOLONES	\$3.53	\$257.20	7,181%
122	MISC BETA-LACTA	\$137.22	\$7,768.33	5,561%
69	ACEI	\$8.29	\$443.54	5,250%
169	AMMONIA DETOXIC	\$28.84	\$1,263.44	4,281%
19	NERVOUS SYS AGT	\$285.85	\$11,867.33	4,052%
111	ANTIESTROGENS	\$73.83	\$2,977.34	3,933%
55	OPIATE AGONISTS	\$12.56	\$457.28	3,541%
146	2ND GEN ANTIHIS	\$8.03	\$285.62	3,458%
64	DIHYDROPYRIDINE	\$20.23	\$718.56	3,453%
10	ANTIDEPRESSANTS	\$45.16	\$1,384.95	2,967%
175	POLYENES	\$13.20	\$385.81	2,823%

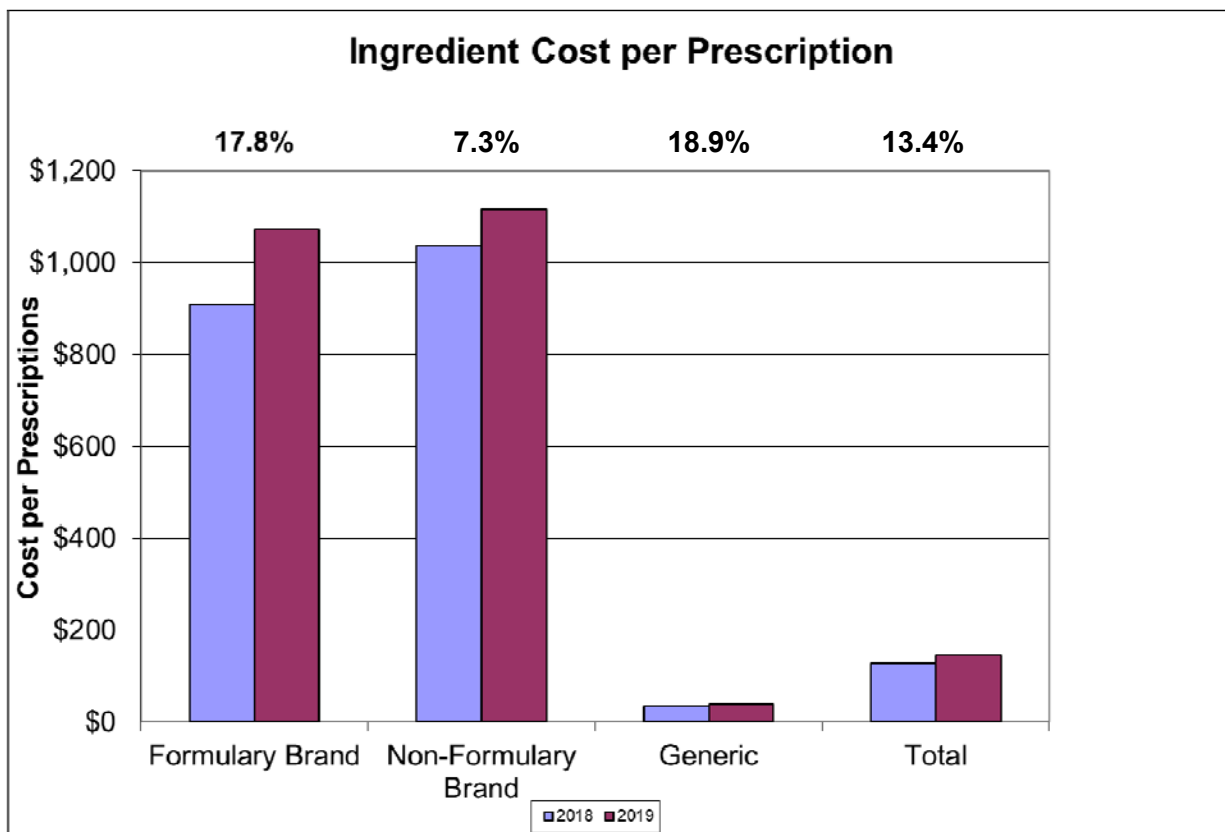
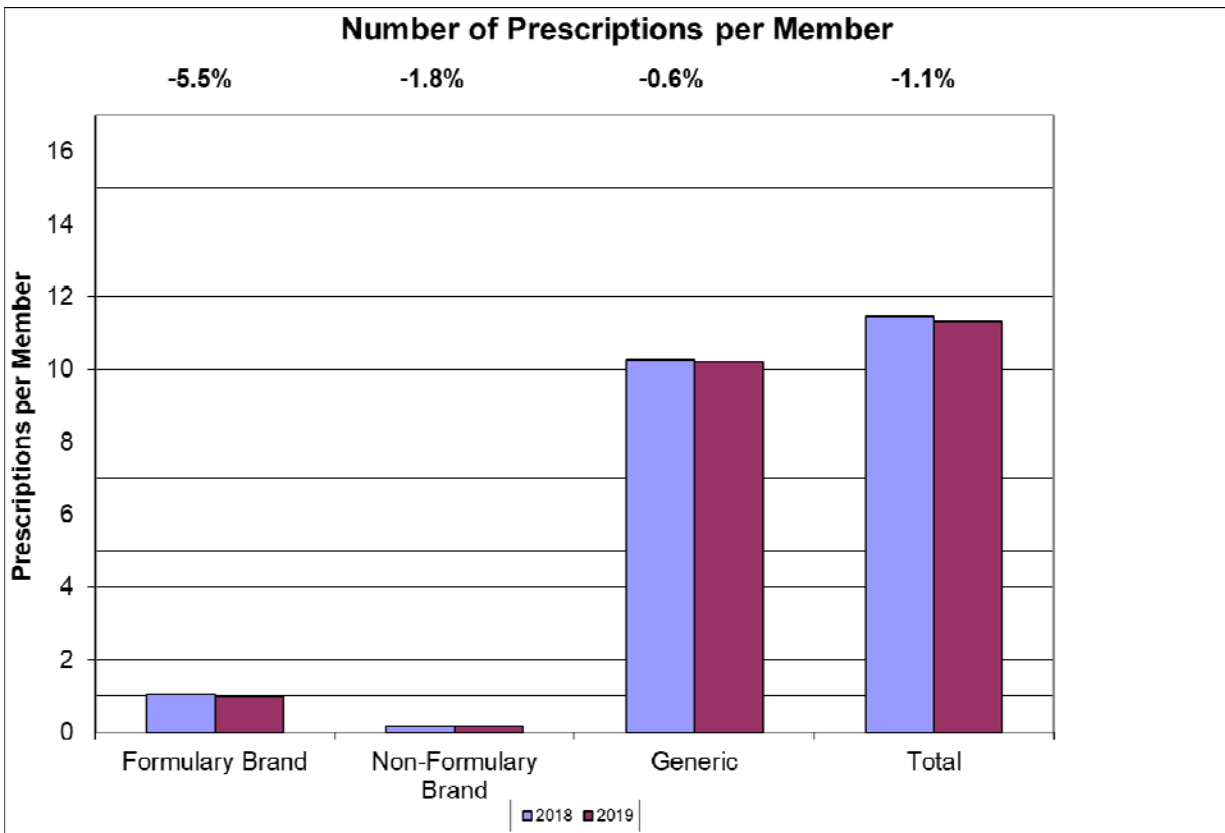
Drug Indicators by Highest Script Increase (continued)

Rank	Indicator	Formulary Cost Per Script	Non-Formulary Cost Per Script	Increase/ Decrease
49	A/B-ADREN AGON	\$354.78	\$10,327.14	2,811%
72	HEMOSTATICS	\$81.82	\$2,379.17	2,808%
4	OPIATE ANTAGONI	\$44.25	\$1,286.32	2,807%
20	LEUKOTRI MDF	\$34.81	\$798.34	2,193%
21	MISC ANTICONVUL	\$110.75	\$2,533.43	2,188%
37	NONSTEROIDAL AN	\$28.11	\$558.65	1,887%
73	ALDOST REC ANTA	\$39.19	\$768.90	1,862%
47	ANTITUSSIVES	\$8.73	\$160.51	1,739%
24	ADAMANTANES	\$173.72	\$3,156.35	1,717%
39	ANXIOLYTICS, SE	\$9.97	\$172.04	1,626%
42	SULFONYLUREAS	\$21.51	\$346.12	1,509%
67	ANTINEOPLASTIC	\$761.43	\$11,766.65	1,445%
55	ANGIOTEN 2 ANTG	\$30.46	\$444.96	1,361%
29	PROTECTANTS	\$37.21	\$509.56	1,269%
71	HMG-COA RED INH	\$47.05	\$637.11	1,254%
89	5-ALPHA-REDUCT	\$26.93	\$345.83	1,184%
15	LOOP DIURETICS	\$7.49	\$83.57	1,015%
57	DOPAMINE PRECUR	\$123.29	\$1,357.54	1,001%
101	MISC AUTONOMIC	\$37.62	\$412.24	996%
17	ANTIBACTERIALS,	\$153.98	\$1,543.32	902%
	<u>All Other Indicators</u>	<u>\$37.46</u>	<u>\$379.52</u>	<u>913%</u>
	Total	\$128.94	\$1,113.00	763%

Drugs by Highest Cost
Analysis of Formulary Distribution

Rank	Drug	Formulary			Non-Formulary		
		Scripts	Ingredient Cost	Cost Per Script	Scripts	Ingredient Cost	Cost Per Script
1	HUMIRA	3,804	\$21,463,516	\$5,642	0	\$0	\$0
2	NOVOLOG	6,075	\$11,162,519	\$1,837	0	\$0	\$0
3	TRULICITY	5,402	\$9,964,543	\$1,845	0	\$0	\$0
4	TRESIBA FLEXTOUCH	4,809	\$8,183,266	\$1,702	0	\$0	\$0
5	ENBREL	1,445	\$7,114,409	\$4,923	0	\$0	\$0
6	FARXIGA	5,408	\$6,774,945	\$1,253	0	\$0	\$0
7	JANUVIA	5,961	\$6,758,547	\$1,134	0	\$0	\$0
8	NOVOLOG FLEXPEN	3,796	\$6,243,138	\$1,645	0	\$0	\$0
9	VICTOZA	2,580	\$5,142,016	\$1,993	0	\$0	\$0
10	LEVEMIR FLEXTOUCH	2,808	\$4,226,419	\$1,505	0	\$0	\$0
11	TECFIDERA	517	\$3,758,704	\$7,270	0	\$0	\$0
12	ELIQUIS	3,532	\$3,181,114	\$901	0	\$0	\$0
13	COSENTYX	462	\$2,927,642	\$6,337	0	\$0	\$0
14	OTEZLA	851	\$2,748,943	\$3,230	0	\$0	\$0
15	REVLIMID	0	\$0	\$0	194	\$2,717,786	\$14,009
16	COPAXONE	472	\$2,613,119	\$5,536	8	\$53,053	\$6,632
17	VYVANSE	8,784	\$2,611,628	\$297	0	\$0	\$0
18	XYREM	0	\$0	\$0	216	\$2,586,946	\$11,977
19	XARELTO	2,783	\$2,565,849	\$922	0	\$0	\$0
20	ROSUVASTATIN CALCIUM	11,766	\$2,400,679	\$204	0	\$0	\$0
	<u>All Other Indicators</u>	<u>94,797</u>	<u>\$135,678,619</u>	<u>\$1,431</u>	<u>28,466</u>	<u>\$26,790,116</u>	<u>\$941</u>
	Total	1,904,160	\$245,519,616	\$128.94	28884	\$32,147,901	\$1,113.00





1 – Antirheumatic Drugs

In FY 2019, the Antirheumatic Drugs category was first in cost to PEIA with expenditure of \$34,655,591, which accounted for 12.5% of total expenditures. Formulary expenditures were \$32,619,930 or 94.1% of Antirheumatic Drugs expenditures and total expenditures had a 11.3% trend from 2018 to 2019.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2018	2019	Growth	2018	2019	Growth	2018	2019	Growth
HUMIRA	PREF	SSB	3,689	3,793	2.8%	\$5,210.83	\$5,633.79	8.1%	\$19,222,735	\$21,368,969	11.2%
ENBREL	PREF	SSB	1,546	1,281	-17.1%	4,681.59	4,892.68	4.5%	7,237,742	6,267,519	-13.4%
OTEZLA	PREF	SSB	334	851	154.8%	3,105.35	3,230.25	4.0%	1,037,187	2,748,943	165.0%
XELJANZ	PREF	SSB	181	212	17.1%	3,949.36	4,415.83	11.8%	714,834	936,156	31.0%
ENBREL MINI	PREF	SSB	0	164	NA	NA	5,163.96	NA	0	846,890	NA
<u>Subtotals</u>											
Generic	Y	GEN	262	275	5.0%	\$259.66	\$330.50	27.3%	\$68,032	90,889	33.6%
Formulary Brand	Y	Brand	5,627	6,418	14.1%	4,909.30	5,068.41	3.2%	27,624,642	32,529,041	17.8%
<u>Non-Formulary Brand</u>	<u>N</u>	<u>Brand</u>	<u>940</u>	<u>480</u>	<u>-48.9%</u>	<u>3,740.24</u>	<u>4,261.79</u>	<u>13.9%</u>	<u>3,515,828</u>	<u>2,045,661</u>	<u>-41.8%</u>
Total			6,829	7,173	5.0%	\$4,570.00	\$4,832.79	5.8%	\$31,208,503	\$34,665,591	11.1%
Trends Adjusted for Exposure					5.2%			5.8%			11.3%

2 - Insulins

In FY 2019, the Insulins category was second in cost to PEIA with expenditure of \$28,463,854, which accounted for 10.3% of total expenditures overall. Formulary expenditures were \$28,389,312 or 99.7% of Insulins expenditures and total ingredient cost had a negative -4.8% trend.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2018	2019	Growth	2018	2019	Growth	2018	2019	Growth
TRESIBA FLEXTOUCH	PREF	SSB	4,516	4,809	6.5%	\$1,644.11	\$1,701.66	3.5%	\$7,424,792	\$8,183,266	10.2%
NOVOLOG FLEXPEN	PREF	SSB	4,684	3,796	-19.0%	1,539.76	1,644.66	6.8%	7,212,239	6,243,138	-13.4%
LEVEMIR FLEXTOUCH	PREF	SSB	3,619	2,808	-22.4%	1,364.55	1,505.13	10.3%	4,938,299	4,226,419	-14.4%
NOVOLOG	PREF	SSB	2,224	1,854	-16.6%	1,927.22	2,060.44	6.9%	4,286,127	3,820,053	-10.9%
BASAGLAR KWIKPEN	PREF	SSB	2,500	2,593	3.7%	935.93	902.68	-3.6%	2,339,819	2,340,639	0.0%
<u>Subtotals</u>											
Generic	Y	GEN	0	0	NA	NA	NA	NA	\$0	0	NA
Formulary Brand	Y	Brand	19,622	17,795	-9.3%	1,523.67	1,595.35	4.7%	29,897,461	28,389,312	-5.0%
<u>Non-Formulary Brand</u>	<u>N</u>	<u>Brand</u>	<u>95</u>	<u>60</u>	<u>-36.8%</u>	<u>1,161.93</u>	<u>1,242.37</u>	<u>6.9%</u>	<u>110,383</u>	<u>74,542</u>	<u>-32.5%</u>
Total			19,717	17,855	-9.4%	\$1,521.93	\$1,594.17	4.7%	\$30,007,844	\$28,463,854	-5.1%
Trends Adjusted for Exposure					-9.1%			4.7%			-4.8%

3 - Incretin Mimetic Drugs

In FY 2019, the Incretin Mimetic Drugs indicator category was third in cost to PEIA with expenditure of \$17,108,428, which accounted for 6.2% of total expenditures. Formulary expenditures were \$17,095,100 or 99.9% of Incretin Mimetic Drugs' expenditures. Total expenditures had a 24.5% trend.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2018	2019	Growth	2018	2019	Growth	2018	2019	Growth
TRULICITY	PREF	SSB	5,188	5,402	4.1%	\$1,678.48	\$1,844.60	9.9%	\$8,707,971	\$9,964,543	14.4%
VICTOZA	PREF	SSB	2,942	2,580	-12.3%	1,702.56	1,993.03	17.1%	5,008,934	5,142,016	2.7%
OZEMPIC	PREF	SSB	55	1,299	2261.8%	1,128.67	1,530.82	35.6%	62,077	1,988,541	3103.3%
BYDUREON PEN	NFRM- NCVRD	SSB	7	4	-42.9%	1,747.77	1,849.75	5.8%	12,234	7,399	-39.5%
BYDUREON PEN	N-FORM	SSB	0	4	NA	NA	1,003.48	NA	0	4,014	NA
<u>Subtotals</u>											
Generic	Y	GEN	0	0	NA	NA	NA	NA	\$0	0	NA
Formulary Brand	Y	Brand	8,188	9,281	13.3%	1,683.27	1,841.95	9.4%	13,782,600	17,095,100	24.0%
<u>Non-Formulary Brand</u>	<u>N</u>	<u>Brand</u>	<u>16</u>	<u>9</u>	<u>-43.8%</u>	<u>1,312.72</u>	<u>1,480.83</u>	<u>12.8%</u>	<u>21,004</u>	<u>13,327</u>	<u>-36.5%</u>
Total			8,204	9,290	13.2%	\$1,682.55	\$1,841.60	9.5%	\$13,803,603	\$17,108,428	23.9%
Trends Adjusted for Exposure					13.7%			9.5%			24.5%

4 – Antineoplastic Drugs

In FY 2019, the Antineoplastic Drugs indicator category was fourth in cost to PEIA with expenditure of \$15,026,711, which accounted for 5.4% of total expenditures. Formulary expenditures were \$5,248,572 or 34.9% of Antineoplastic Drugs expenditures and total expenditures had a 30.1% trend.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2018	2019	Growth	2018	2019	Growth	2018	2019	Growth
REVLIMID	NEUT	SSB	145	194	33.8%	\$12,862.15	\$14,009.21	8.9%	\$1,865,012	\$2,717,786	45.7%
IBRANCE	PREF	SSB	73	135	84.9%	10,821.71	11,013.41	1.8%	789,985	1,486,810	88.2%
IMBRUVICA	N-FORM	SSB	0	97	NA	NA	13,055.27	NA	NA	1,266,362	NA
SPRYCEL	PREF	SSB	66	99	50.0%	12,207.27	12,003.78	-1.7%	805,680	1,188,375	47.5%
JAKAFI	N-FORM	SSB	52	62	19.2%	10,659.60	11,391.32	6.9%	554,299	706,262	27.4%
<u>Subtotals</u>											
Generic	Y	GEN	5,469	6,550	19.8%	\$223.00	\$185.21	-16.9%	\$1,219,595	1,213,153	-0.5%
Formulary Brand	Y	Brand	232	343	47.8%	11,205.13	11,765.07	5.0%	2,599,590	4,035,419	55.2%
<u>Non-Formulary Brand</u>	<u>N</u>	<u>Brand</u>	<u>739</u>	<u>831</u>	<u>12.4%</u>	<u>10,558.17</u>	<u>11,766.71</u>	<u>11.4%</u>	<u>7,802,485</u>	<u>9,778,138</u>	<u>25.3%</u>
Total			6,440	7,724	19.9%	\$1,804.61	\$1,945.46	7.8%	\$11,621,670	\$15,026,711	29.3%
Trends Adjusted for Exposure					20.7%			7.8%			30.1%

5 – ImmunoMod Agents

In FY 2019, the ImmunoMod Agents indicator category was fifth in cost to PEIA with expenditure of \$12,851,399, which accounted for 4.6% of total expenditures. Formulary expenditures were \$11,718,394 or 91.2% of Antineoplastic expenditures and total expenditures had a -0.2% trend.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2018	2019	Growth	2018	2019	Growth	2018	2019	Growth
TECFIDERA	PREF	SSB	423	517	22.2%	\$6,934.32	\$7,270.22	4.8%	\$2,933,218	\$3,758,704	28.1%
COPAXONE	PREF	MSB	423	472	11.6%	5,524.30	5,536.27	0.2%	2,336,778	2,613,119	11.8%
GILENYA	PREF	SSB	279	260	-6.8%	7,034.57	7,465.98	6.1%	1,962,644	1,941,154	-1.1%
AUBAGIO	PREF	SSB	237	290	22.4%	6,205.19	6,503.73	4.8%	1,470,629	1,886,083	28.3%
AVONEX	N-FORM	SSB	0	144	NA	NA	6,605.02	NA	0	951,123	NA
<u>Subtotals</u>											
Generic	Y	GEN	116	212	82.8%	\$4,307.12	\$4,293.08	-0.3%	\$499,625	910,132	82.2%
Formulary Brand	Y	Brand	1,717	1,625	-5.4%	6,309.11	6,651.24	5.4%	10,832,734	10,808,261	-0.2%
<u>Non-Formulary Brand</u>	<u>N</u>	<u>Brand</u>	<u>241</u>	<u>171</u>	<u>-29.0%</u>	<u>6,458.03</u>	<u>6,625.76</u>	<u>2.6%</u>	<u>1,556,385</u>	<u>1,133,005</u>	<u>-27.2%</u>
Total			2,074	2,008	-3.2%	\$6,214.44	\$6,400.10	3.0%	\$12,888,745	\$12,851,399	-0.3%
Trends Adjusted for Exposure					-3.1%			3.0%			-0.2%