STATE OF WEST VIRGINIA

PUBLIC EMPLOYEES
INSURANCE AGENCY

Fiscal Year 2020

Detailed Medical and Prescription Drugs
Claim Trend Report

Original Version: November 2020
Revised Version: December 2020

YOUR ACTUARIES FOR THE LONG-TERM!
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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, 2020 on a quarterly basis and the forecasting of Fiscal Years 2021 through 2025. This annual trend report to the Finance Board generally serves as the basis for projecting medical and drugs claims through Fiscal Year 2025 in the development of the Financial Plan to be approved by the PEIA Finance Board in December 2020. 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 2020. 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. 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 in 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, we have not reviewed the Medicare claims experience in this report. This is due to relatively small number of these Medicare coverages and the resulting lack of credibility of Medicare claims with RHBT as the secondary payor.

From July 1, 2000 to June 30, 2019, HealthSmart Holding Inc. ("HealthSmart"), was 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 2020. The analysis for medical claims do not include incurred claims for the months after June 2020. The claim experience for the months after June 2020 is largely non-credible as 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. Additionally, 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 2020.

**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 decreased from 8.6% in last year’s analysis to 4.8% in Fiscal Year 2020 using a 24-month study period. Using the 24-month analysis, PEIA experienced a 3.2% trend in utilization and a 1.6% trend in unit cost, resulting in an aggregate trend of 4.8%. The 36-month method resulted in a higher trend of 5.6% and the 48-month method resulted in a lower trend of 4.5%.

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

<table>
<thead>
<tr>
<th></th>
<th>Utilization</th>
<th>Cost/Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>4.1%</td>
<td>3.6%</td>
<td>7.8%</td>
</tr>
<tr>
<td>2003</td>
<td>9.8%</td>
<td>-3.0%</td>
<td>6.5%</td>
</tr>
<tr>
<td>2004</td>
<td>11.7%</td>
<td>-6.8%</td>
<td>4.0%</td>
</tr>
<tr>
<td>2005</td>
<td>2.8%</td>
<td>-1.1%</td>
<td>1.7%</td>
</tr>
<tr>
<td>2006</td>
<td>2.9%</td>
<td>1.0%</td>
<td>4.0%</td>
</tr>
<tr>
<td>2007</td>
<td>7.2%</td>
<td>-2.0%</td>
<td>5.1%</td>
</tr>
<tr>
<td>2008</td>
<td>2.9%</td>
<td>3.9%</td>
<td>6.9%</td>
</tr>
<tr>
<td>2009</td>
<td>2.5%</td>
<td>2.6%</td>
<td>5.1%</td>
</tr>
<tr>
<td>2010</td>
<td>2.5%</td>
<td>1.8%</td>
<td>4.4%</td>
</tr>
<tr>
<td>2011</td>
<td>4.2%</td>
<td>3.5%</td>
<td>7.8%</td>
</tr>
<tr>
<td>2012</td>
<td>5.1%</td>
<td>0.1%</td>
<td>5.3%</td>
</tr>
<tr>
<td>2013</td>
<td>2.6%</td>
<td>-1.6%</td>
<td>0.9%</td>
</tr>
<tr>
<td>2014</td>
<td>-0.4%</td>
<td>4.5%</td>
<td>4.1%</td>
</tr>
<tr>
<td>2015</td>
<td>0.7%</td>
<td>5.6%</td>
<td>6.3%</td>
</tr>
<tr>
<td>2016</td>
<td>8.6%</td>
<td>-0.7%</td>
<td>7.9%</td>
</tr>
<tr>
<td>2017</td>
<td>3.9%</td>
<td>-1.1%</td>
<td>2.8%</td>
</tr>
<tr>
<td>2018</td>
<td>4.4%</td>
<td>2.4%</td>
<td>6.9%</td>
</tr>
<tr>
<td>2019</td>
<td>5.5%</td>
<td>3.0%</td>
<td>8.6%</td>
</tr>
<tr>
<td>2020</td>
<td>3.2%</td>
<td>1.6%</td>
<td>4.8%</td>
</tr>
</tbody>
</table>

- In addition to studying trends on a 24, 36, and 48-month basis, CCA also looked at the trends for claims In-State and Out-of-State. Out-of-State claims were further divided into Border Counties (“OOS BC”) and Non-Border Counties (“OOS NBC”) as there are different cost sharing provisions in the PPB plans for services provided in Out-of-State Border Counties and Non-Border Counties.
• Overall PEIA and RHBT Fiscal Year 2020 24-month detail trends are summarized below. Note that these trend have not been adjusted for any changes in the plan benefit design:

<table>
<thead>
<tr>
<th>Fiscal Year 2020</th>
<th>Medical</th>
<th>Drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Claim Type</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PEIA – Active Local</td>
<td>-1.4%</td>
<td>9.9%</td>
</tr>
<tr>
<td>PEIA – State</td>
<td>6.1%</td>
<td>15.4%</td>
</tr>
<tr>
<td>PEIA – Total</td>
<td>4.8%</td>
<td>14.4%</td>
</tr>
<tr>
<td>RHBT – Non-Medicare</td>
<td>-9.3%</td>
<td>12.3%</td>
</tr>
<tr>
<td>Grand Total</td>
<td>3.4%</td>
<td>14.2%</td>
</tr>
</tbody>
</table>

- In the 24-month analysis, OOS BC services have experienced higher trends than In-State and OOS NBC services for Non-Medicare coverages in three out of four categories (HI, HO and O, not PS). A comparison of Non-Medicare medical trends for In-State claims versus OOS NBC claims versus OOS BC claims over the 24-month period analysis reveals an aggregate In-State trend of 4.0%, an aggregate OOS NBC trend of 4.9%, and an aggregate OOS BC trend of 9.4%.

The In-State utilization trend has been lower while the In-State cost per service trend has been higher compared to OOS NBC and OOS BC trends. The In-State utilization trend for Non-Medicare was 2.0%, while the OOS NBC trend was 6.2% and the OOS BC trend was 11.0%. The In-State cost per service trend for Non-Medicare was 1.9%, while the OOS NBC trend was -1.2%, and the OOS BC trend was -1.4%.

Within the In-State medical categories, the 3 highest trend subcategories were observed for Hospital Outpatient’s Other Services, Hospital Outpatient’s Psychiatric / Substance Abuse, and Other’s Appliances Durable Medical Equipment (DME) categories. These categories experienced high trends of 18.0%, 120.9% and 53.5%, respectively.

- Using the 24-month analysis, Hospital Inpatient services (“HI”) represent 16.8% of all medical services and experienced a total trend of -5.4%. The overall trend was the product of a 19.2% increase in utilization and a -20.6% decrease in unit cost. In-State HI claims had a -4.4% overall trend, while OOS NBC HI claims experienced a -9.0% overall trend, and OOS BC HI claims experienced a 23.9% overall trend.

- Using the 24-month analysis, Hospital Outpatient services (“HO”) represent 38.1% of all medical services and experienced the least favorable trend of the broader claim categories with a total trend of 15.7%. The overall trend was the product of an 1.7% increase in utilization and a 13.7% increase in unit cost. In-State HO claims had a 14.8% overall trend, while OOS NBC HO claims experienced a 16.4% overall trend, and OOS BC HO claims experienced a 25.4% overall trend.
• Using the 24-month analysis, Physician Services ("PS") represent 43.6% of all medical services and experienced a total trend of -1.9%. The overall trend was the product of a -1.8% decrease in utilization of these services and a -0.1% decrease in unit cost. In-State PS claims had a -4.2% overall trend, while OOS NBC PS claims experienced an 8.8% overall trend, and OOS BC PS claims experienced a -13.9% overall trend.

• Using the 24-month analysis, Other services ("O"), which are services that are principally Ambulance and Durable Medical Services, represent 1.5% of all medical services and experienced a total trend of -1.6%. The overall trend was the product of a 7.3% increase in utilization of these services and a -8.3% decrease in unit cost. In-State O claims showed a 7.9% overall trend, while OOS NBC O claims experienced a -41.9% overall trend, and OOS BC O claims experienced a 19.2% overall trend.

• As noted above, the In-State trends were generally more favorable than the OOS NBC trends and the OOS BC trends. This is contrary to last year’s report, but similar 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 -3.5%, which is comparable to -1.7% last year. The historical data is illustrated in the chart below. The bump in January and February 2020 is likely due to delayed claims processing from the change in TPAs.
The table below presents the overall Non-Medicare Hospital Inpatient trend showing the three components of visits, days per visit, and cost per day.

<table>
<thead>
<tr>
<th>West Virginia PEIA Non-Medicare Hospital Inpatient Trend Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Visits</td>
</tr>
<tr>
<td>--------</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Intensity</td>
</tr>
<tr>
<td>Cost/Day</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

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 2020, 87.9% of medical services were provided in the State of West Virginia, 8.6% of services were provided OOS NBC, and 3.5% of services were provided OOS BC. From a cost perspective, 72.4% of allowed charges were incurred In-State, 20.3% of allowed charges were provided OOS NBC, and 7.3% of allowed charges were provided OOS BC, illustrating the higher cost and intensity of the out-of-state and border county services.

By major medical category, 84.4% of Hospital Inpatient services were provided in the State of West Virginia representing 50.8% of the total allowed charges for Hospital Inpatient. Conversely, 11.0% of Hospital Inpatient services were provided OOS NBC and those charges represented 38.3% of the total allowed charges for Hospital Inpatient. In addition, 4.6% of Hospital Inpatient services were provided OOS BC and those charges represented 10.9% of the total allowed charges for Hospital Inpatient.

By major medical category, 93.3% of Hospital Outpatient services were provided in the State of West Virginia representing 76.7% of the total allowed charges for Hospital Outpatient. Conversely, 3.8% of Hospital Outpatient services were provided OOS NBC and those charges represented 14.2% of the total allowed charges for Hospital Outpatient. In addition, 3.0% of Hospital Outpatient services were provided OOS BC and those charges represented 9.1% of the total allowed charges for Hospital Outpatient.

By major medical category, 86.8% of Physician Services were provided in the State of West Virginia representing 76.8% of the total allowed charges for Physician Services. Conversely, 9.6% of Physician Services were provided OOS NBC and those charges represented 18.8% of the total allowed charges for Physician Services. In addition, 3.6% of Physician Services were provided OOS BC and those charges represented 4.4% of the total allowed charges for Physician Services.

By major medical category, 87.1% of Other Services were provided in the State of West Virginia representing 70.1% of the total allowed charges for Other Services. Conversely, 10.7% of Other Services were provided OOS NBC and those charges represented 27.3% of the total allowed charges for Other Services. In addition, 2.2% of Other Services were provided OOS BC and those charges represented 2.5% of the total allowed charges for Other Services.
KEY FINDINGS - DRUGS

Overall, gross prescription drugs trends for Non-Medicare coverages have decreased slightly compared to 15.5% last year. Using the 24-month analysis, there was a 2.9% utilization increase and a 11.2% prescription cost increase, resulting in an aggregate trend of 14.4%. The 24-month overall trend is lower than the 36-month trend of 17.2%, but higher than the 48-month trend of 14.0%.

<table>
<thead>
<tr>
<th>West Virginia PEIA Prescription Drugs Total</th>
<th>24-Month Trend Analysis-Allowed Claims</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2020</td>
<td>Utilization 2.9%</td>
</tr>
<tr>
<td></td>
<td>Cost/Prescription 11.2%</td>
</tr>
<tr>
<td></td>
<td>Total Trend 14.4%</td>
</tr>
</tbody>
</table>

METHODOLOGY

HealthSmart and UMR provided allowed and paid claim information for Non-Medicare and Medicare eligibility from July 2001 through August 2020. This data set was analyzed for Non-Medicare claims that were incurred from July 2016 through June 2020 in the 48-month credible period. The claim data was consolidated into 23 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 a 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. The following charts summarize 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. These trend lines were manually adjusted when 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 in various months of the year. Paid claim trends are typically higher over the study period when cost-sharing provisions of the plan do not increase in the most recent Plan Year.
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.

<table>
<thead>
<tr>
<th>Non-Medicare Claims</th>
<th>FY2017</th>
<th>FY2018</th>
<th>FY2019</th>
<th>FY2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Inpatient</td>
<td>$114,347,037</td>
<td>$107,717,304</td>
<td>$103,555,003</td>
<td>$91,933,857</td>
</tr>
<tr>
<td>Hospital Outpatient</td>
<td>195,100,639</td>
<td>192,848,392</td>
<td>205,422,609</td>
<td>239,085,773</td>
</tr>
<tr>
<td>Physician Services</td>
<td>244,150,258</td>
<td>237,975,661</td>
<td>238,483,662</td>
<td>238,424,439</td>
</tr>
<tr>
<td>Other Services</td>
<td>22,524,710</td>
<td>22,506,504</td>
<td>23,154,967</td>
<td>24,747,704</td>
</tr>
<tr>
<td>Total</td>
<td><strong>$576,122,644</strong></td>
<td><strong>$561,047,862</strong></td>
<td><strong>$570,616,241</strong></td>
<td><strong>$594,191,773</strong></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Non-Medicare Claims</th>
<th>FY2017</th>
<th>FY2018</th>
<th>FY2019</th>
<th>FY2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>HI Maternity</td>
<td>$7,400,691</td>
<td>$8,367,851</td>
<td>$6,629,384</td>
<td>$7,255,717</td>
</tr>
<tr>
<td>HI Medical/Surgical</td>
<td>102,894,540</td>
<td>95,970,101</td>
<td>93,279,740</td>
<td>82,032,827</td>
</tr>
<tr>
<td>HI Psychiatric/Substance Abuse</td>
<td>4,051,807</td>
<td>3,379,352</td>
<td>3,645,879</td>
<td>2,645,313</td>
</tr>
<tr>
<td>HO Emergency Room</td>
<td>33,183,820</td>
<td>34,139,883</td>
<td>34,962,603</td>
<td>36,473,841</td>
</tr>
<tr>
<td>HO Medical/Surgical</td>
<td>90,141,389</td>
<td>90,180,329</td>
<td>93,070,902</td>
<td>109,801,129</td>
</tr>
<tr>
<td>HO Other Services</td>
<td>70,658,838</td>
<td>67,538,877</td>
<td>76,231,501</td>
<td>91,022,400</td>
</tr>
<tr>
<td>HO Psychiatric/Substance Abuse</td>
<td>1,116,591</td>
<td>989,303</td>
<td>1,157,603</td>
<td>1,788,403</td>
</tr>
<tr>
<td>PS Anesthesia</td>
<td>11,881,133</td>
<td>11,364,877</td>
<td>11,086,885</td>
<td>11,752,000</td>
</tr>
<tr>
<td>PS Chemotherapy/Radiation</td>
<td>2,647,020</td>
<td>2,940,911</td>
<td>2,689,062</td>
<td>2,465,470</td>
</tr>
<tr>
<td>PS Emergency Room</td>
<td>6,033,917</td>
<td>5,841,649</td>
<td>5,798,241</td>
<td>5,707,993</td>
</tr>
<tr>
<td>PS Immunizations/Allergy</td>
<td>7,816,140</td>
<td>8,015,981</td>
<td>9,428,617</td>
<td>9,516,284</td>
</tr>
<tr>
<td>PS Inpatient Surgery</td>
<td>7,495,538</td>
<td>7,821,150</td>
<td>7,096,953</td>
<td>6,712,550</td>
</tr>
<tr>
<td>PS Inpatient Visits</td>
<td>7,194,600</td>
<td>7,240,613</td>
<td>6,926,249</td>
<td>6,765,865</td>
</tr>
<tr>
<td>PS Lab &amp; Pathology</td>
<td>15,869,881</td>
<td>14,778,867</td>
<td>14,119,992</td>
<td>12,220,929</td>
</tr>
<tr>
<td>PS Maternity</td>
<td>7,333,515</td>
<td>6,968,109</td>
<td>6,703,470</td>
<td>7,556,414</td>
</tr>
<tr>
<td>PS Office Visits</td>
<td>73,171,261</td>
<td>67,773,052</td>
<td>66,272,387</td>
<td>64,449,348</td>
</tr>
<tr>
<td>PS Other Services</td>
<td>55,280,978</td>
<td>56,324,729</td>
<td>58,581,871</td>
<td>60,244,412</td>
</tr>
<tr>
<td>PS Outpatient Surgery</td>
<td>25,399,555</td>
<td>24,568,702</td>
<td>24,336,315</td>
<td>23,342,012</td>
</tr>
<tr>
<td>PS Psychiatric/Substance Abuse</td>
<td>12,880,970</td>
<td>12,927,495</td>
<td>13,933,996</td>
<td>15,927,558</td>
</tr>
<tr>
<td>PS Radiology</td>
<td>11,145,751</td>
<td>11,409,525</td>
<td>11,509,623</td>
<td>11,763,605</td>
</tr>
<tr>
<td>PS Therapy/Rehab</td>
<td>13,587,238</td>
<td>13,422,093</td>
<td>14,353,565</td>
<td>15,614,707</td>
</tr>
<tr>
<td>O Ambulance</td>
<td>4,951,313</td>
<td>5,059,840</td>
<td>4,895,972</td>
<td>4,605,049</td>
</tr>
<tr>
<td>O Durable Medical Equipment</td>
<td>3,986,159</td>
<td>4,024,572</td>
<td>3,905,430</td>
<td>4,527,948</td>
</tr>
</tbody>
</table>
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 2017 through 2020 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.

<table>
<thead>
<tr>
<th>West Virginia PEIA Non-Medicare Medical Total Trend Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>24-Month Trend</td>
</tr>
<tr>
<td>36-Month Trend</td>
</tr>
<tr>
<td>48-Month Trend</td>
</tr>
</tbody>
</table>
**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. HO-Psychiatric / Substance Abuse experienced the highest increase in cost per service and in cost per capita.

<table>
<thead>
<tr>
<th>Category</th>
<th>2019 Average Utilization</th>
<th>2020 Average Utilization</th>
<th>Highest %</th>
</tr>
</thead>
<tbody>
<tr>
<td>O- Durable Medical Equipment</td>
<td>0.01270</td>
<td>0.01566</td>
<td>23.3%</td>
</tr>
<tr>
<td>HI-Medical / Surgical</td>
<td>0.00534</td>
<td>0.00642</td>
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</tr>
<tr>
<td>HI- Maternity</td>
<td>0.00229</td>
<td>0.00263</td>
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</tr>
<tr>
<td>PS-Psychiatric / Substance Abuse</td>
<td>0.07551</td>
<td>0.08544</td>
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</tr>
<tr>
<td>HO-Psychiatric / Substance Abuse</td>
<td>0.00412</td>
<td>0.00451</td>
<td>9.6%</td>
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</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>2019 Average Cost / Service</th>
<th>2020 Average Cost / Service</th>
<th>Highest %</th>
</tr>
</thead>
<tbody>
<tr>
<td>HO-Psychiatric / Substance Abuse</td>
<td>$153.27</td>
<td>$205.78</td>
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</tr>
<tr>
<td>PS-Immunizations/Allergy</td>
<td>84.51</td>
<td>98.45</td>
<td>16.5%</td>
</tr>
<tr>
<td>HO-Medical / Surgical</td>
<td>488.55</td>
<td>564.63</td>
<td>15.6%</td>
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<tr>
<td>HO-Other Services</td>
<td>255.93</td>
<td>294.45</td>
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</tr>
<tr>
<td>PS-Anesthesia</td>
<td>297.71</td>
<td>325.68</td>
<td>9.4%</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>2019 Average Cost / Capita</th>
<th>2020 Average Cost / Capita</th>
<th>Highest %</th>
</tr>
</thead>
<tbody>
<tr>
<td>HO-Psychiatric / Substance Abuse</td>
<td>$0.63</td>
<td>$0.93</td>
<td>47.1%</td>
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<tr>
<td>HO-Other Services</td>
<td>40.70</td>
<td>48.44</td>
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</tr>
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<td>HO-Medical / Surgical</td>
<td>48.80</td>
<td>57.91</td>
<td>18.7%</td>
</tr>
<tr>
<td>O- Durable Medical Equipment</td>
<td>2.03</td>
<td>2.32</td>
<td>14.7%</td>
</tr>
<tr>
<td>PS-Psychiatric / Substance Abuse</td>
<td>7.27</td>
<td>80.2</td>
<td>10.4%</td>
</tr>
</tbody>
</table>

**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, OOS NBC, and OOS BC.
Recent experience has shown that the Non-Medicare medical claim trends are lower than the current trend assumption of 8.5% for FY 2021. Additionally, the 24-Month trend has reflected a lower 4.8% trend for medical, while the 36-month trend is 5.6% and the 48-month trend is 4.5%. CCA believes that it is appropriate to reduce the FY 2021 medical claim trend assumption for Non-Medicare medical to 5.0%.

Similarly, recent experience has shown that Non-Medicare gross drugs claim trends are higher than the current trend assumption of 12.5% for FY 2021. Additionally, the 24-Month trend has reflected a materially higher 14.4% trend for drugs, before rebates. It should be noted that the 36-month trend is 17.2% and the 48-month trend is 13.9%. As such, CCA believes that it is appropriate to raise the FY 2021 prescription drugs claim trend assumption for Non-Medicare prescription drugs to 13.0%.

The update of the trend assumptions for FY 2021 is shown below.

<table>
<thead>
<tr>
<th>Claim Type</th>
<th>Fiscal Year 2021 Trends</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Previous Assumption</td>
</tr>
<tr>
<td>Non-Medicare – Medical</td>
<td>8.5%</td>
</tr>
<tr>
<td>Non-Medicare – Gross Prescription Drugs</td>
<td>12.5%</td>
</tr>
</tbody>
</table>

In the past, claim trends for the financial plan included a 0.5% margin in future years. CCA has assumed the drugs claim trends for the financial projection will increase by 0.5% in FY 2022 and in each successive fiscal year. Medical trends are assumed to increase 1.0% in FY 2022 and 2023, and then 0.5% thereafter. Additionally, drug rebates have been trending at approximately 30% over the last two years. As a result, CCA has separated net drugs in the financial plan into gross drugs and drug rebate amounts. Drug rebates trends are set at 20% in the Financial Plan.

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,

(Revision: December 18, 2020)

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

(Revision: December 18, 2020)

Chris Borcik, F.S.A., F.C.A., M.A.A.A.
Principal
### West Virginia PEIA Non-Medicare Total Study Period of July 2016 to June 2020 (Allowed Claims)

#### Trends Summary - Excludes Drugs

<table>
<thead>
<tr>
<th></th>
<th>24 Month Trends Summary</th>
<th>36 Month Trends Summary</th>
<th>48 Month Trends Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Utilization</td>
<td>Cost / Service</td>
<td>Total Trend</td>
</tr>
<tr>
<td><strong>HOSPITAL INPATIENT</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternity</td>
<td>14.8%</td>
<td>-10.2%</td>
<td>3.1%</td>
</tr>
<tr>
<td>Medical / Surgical</td>
<td>20.2%</td>
<td>-21.5%</td>
<td>-5.6%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
<td>-0.1%</td>
<td>-19.9%</td>
<td>-20.0%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>19.2%</strong></td>
<td><strong>-20.6%</strong></td>
<td><strong>-5.4%</strong></td>
</tr>
<tr>
<td><strong>HOSPITAL OUTPATIENT</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency Room</td>
<td>-5.3%</td>
<td>4.5%</td>
<td>-1.1%</td>
</tr>
<tr>
<td>Medical / Surgical</td>
<td>2.7%</td>
<td>15.6%</td>
<td>18.7%</td>
</tr>
<tr>
<td>Other Services</td>
<td>3.4%</td>
<td>15.1%</td>
<td>19.0%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
<td>9.6%</td>
<td>34.3%</td>
<td>47.1%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1.7%</strong></td>
<td><strong>13.7%</strong></td>
<td><strong>15.7%</strong></td>
</tr>
<tr>
<td><strong>PHYSICIAN SERVICES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anesthesia</td>
<td>-3.7%</td>
<td>9.4%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Chemotherapy / Radiation</td>
<td>-3.3%</td>
<td>2.6%</td>
<td>-0.8%</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>-11.3%</td>
<td>3.6%</td>
<td>-8.1%</td>
</tr>
<tr>
<td>Immunizations / Injections / Allergy</td>
<td>-24.8%</td>
<td>16.5%</td>
<td>-12.4%</td>
</tr>
<tr>
<td>Inpatient Surgery</td>
<td>1.0%</td>
<td>-9.2%</td>
<td>-8.3%</td>
</tr>
<tr>
<td>Inpatient Visits</td>
<td>-4.7%</td>
<td>1.4%</td>
<td>-3.4%</td>
</tr>
<tr>
<td>Lab &amp; Pathology</td>
<td>2.6%</td>
<td>-14.7%</td>
<td>-12.5%</td>
</tr>
<tr>
<td>Maternity</td>
<td>5.1%</td>
<td>1.4%</td>
<td>6.6%</td>
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<tr>
<td>Office Visits</td>
<td>-2.9%</td>
<td>-3.7%</td>
<td>-6.5%</td>
</tr>
<tr>
<td>Other Services</td>
<td>-5.2%</td>
<td>7.0%</td>
<td>1.4%</td>
</tr>
<tr>
<td>Outpatient Surgery</td>
<td>6.6%</td>
<td>-9.7%</td>
<td>-3.7%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
<td>13.2%</td>
<td>-2.4%</td>
<td>10.4%</td>
</tr>
<tr>
<td>Radiology</td>
<td>-3.8%</td>
<td>1.3%</td>
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<td>Therapies</td>
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<td>0.1%</td>
<td>2.1%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>-1.8%</strong></td>
<td><strong>-0.1%</strong></td>
<td><strong>-1.9%</strong></td>
</tr>
<tr>
<td><strong>OTHER</strong></td>
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<td></td>
</tr>
<tr>
<td>Ambulance</td>
<td>-6.7%</td>
<td>-9.5%</td>
<td>-15.6%</td>
</tr>
<tr>
<td>Appliances (DME)</td>
<td>23.3%</td>
<td>-7.0%</td>
<td>14.7%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>7.3%</strong></td>
<td><strong>-8.3%</strong></td>
<td><strong>-1.6%</strong></td>
</tr>
<tr>
<td><strong>GRAND TOTAL</strong></td>
<td><strong>3.2%</strong></td>
<td><strong>1.6%</strong></td>
<td><strong>4.8%</strong></td>
</tr>
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</table>
### West Virginia PEIA Non-Medicare Total Study Period of July 2018 to June 2020 (Allowed Claims)

#### 24 Month Trends Summary - Excludes Drugs

<table>
<thead>
<tr>
<th>HOSPITAL INPATIENT</th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternity</td>
<td>13.1%</td>
<td>-13.4%</td>
<td>-2.1%</td>
<td>70.9%</td>
<td>5.6%</td>
<td>-30.9%</td>
<td>-26.9%</td>
<td>14.8%</td>
</tr>
<tr>
<td>Medical / Surgical</td>
<td>21.2%</td>
<td>-20.2%</td>
<td>-3.2%</td>
<td>14.9%</td>
<td>18.4%</td>
<td>4.8%</td>
<td>24.2%</td>
<td>20.2%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
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<td>72.5%</td>
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</table>

<table>
<thead>
<tr>
<th>HOSPITAL OUTPATIENT</th>
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<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
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<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
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</thead>
<tbody>
<tr>
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<td>Medical / Surgical</td>
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<td>5.9%</td>
<td>20.1%</td>
<td>27.1%</td>
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<tr>
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<td>12.8%</td>
<td>13.5%</td>
<td>28.0%</td>
<td>3.4%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
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<td>120.9%</td>
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<td>9.6%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1.8%</td>
<td>12.9%</td>
<td>14.8%</td>
<td>-1.9%</td>
<td>8.1%</td>
<td>16.0%</td>
<td>25.4%</td>
<td>1.7%</td>
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</table>

<table>
<thead>
<tr>
<th>PHYSICIAN SERVICES</th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
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</thead>
<tbody>
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<td>3.0%</td>
<td>1.5%</td>
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<td>-3.7%</td>
</tr>
<tr>
<td>Chemotherapy / Radiation</td>
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<td>-0.1%</td>
<td>-8.4%</td>
<td>12.8%</td>
<td>-14.9%</td>
<td>-4.0%</td>
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<tr>
<td>Emergency Room</td>
<td>-12.3%</td>
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<td>4.0%</td>
<td>-8.4%</td>
<td>-9.1%</td>
<td>-16.5%</td>
<td>-11.3%</td>
</tr>
<tr>
<td>Immunizations / Injections / Allergy</td>
<td>-27.1%</td>
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<td>-24.8%</td>
</tr>
<tr>
<td>Inpatient Surgery</td>
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<td>-7.9%</td>
<td>-7.5%</td>
<td>-1.6%</td>
<td>-8.6%</td>
<td>-10.1%</td>
<td>1.0%</td>
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<tr>
<td>Inpatient Visits</td>
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<td>-0.7%</td>
<td>-1.8%</td>
<td>-2.4%</td>
<td>-4.7%</td>
</tr>
<tr>
<td>Lab &amp; Pathology</td>
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<td>-4.9%</td>
<td>-4.9%</td>
<td>16.2%</td>
<td>-38.9%</td>
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<td>4.6%</td>
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<td>5.1%</td>
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<tr>
<td>Office Visits</td>
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<td>0.2%</td>
<td>-8.6%</td>
<td>12.6%</td>
<td>2.9%</td>
</tr>
<tr>
<td>Other Services</td>
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<td>-12.6%</td>
<td>9.3%</td>
<td>3.7%</td>
<td>-20.5%</td>
<td>-17.5%</td>
<td>-5.2%</td>
</tr>
<tr>
<td>Outpatient Surgery</td>
<td>6.4%</td>
<td>-9.5%</td>
<td>-3.7%</td>
<td>8.5%</td>
<td>9.1%</td>
<td>-17.0%</td>
<td>-9.5%</td>
<td>6.6%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
<td>13.4%</td>
<td>-1.6%</td>
<td>11.6%</td>
<td>10.7%</td>
<td>11.4%</td>
<td>-9.1%</td>
<td>1.3%</td>
<td>13.2%</td>
</tr>
<tr>
<td>Radiology</td>
<td>-4.0%</td>
<td>0.7%</td>
<td>-3.3%</td>
<td>2.5%</td>
<td>-1.0%</td>
<td>-5.3%</td>
<td>-6.2%</td>
<td>3.8%</td>
</tr>
<tr>
<td>Therapies</td>
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<td>0.7%</td>
<td>2.3%</td>
<td>8.3%</td>
<td>6.5%</td>
<td>-2.4%</td>
<td>4.0%</td>
<td>1.9%</td>
</tr>
<tr>
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<td>-1.9%</td>
<td>-4.2%</td>
<td>5.9%</td>
<td>6.0%</td>
<td>-18.8%</td>
<td>-13.9%</td>
<td>-1.8%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OTHER</th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
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<td>-9.2%</td>
<td>-19.9%</td>
<td>45.6%</td>
<td>59.8%</td>
<td>51.8%</td>
<td>-23.0%</td>
<td>-6.7%</td>
</tr>
<tr>
<td>Appliances (DME)</td>
<td>44.8%</td>
<td>6.0%</td>
<td>53.5%</td>
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<td>-10.6%</td>
<td>34.6%</td>
<td>20.4%</td>
<td>23.3%</td>
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<tr>
<td>TOTAL</td>
<td>11.3%</td>
<td>-3.0%</td>
<td>7.9%</td>
<td>-37.2%</td>
<td>13.5%</td>
<td>5.0%</td>
<td>19.2%</td>
<td>7.3%</td>
</tr>
</tbody>
</table>

| GRAND TOTAL         | 2.0%     | 1.9%    | 4.0%   | 6.2%  | 11.0%    | -1.4%   | 9.4%   | 3.2%  | 100.0% |

Continuing Care Actuaries
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<th>Weight</th>
<th>Weight</th>
<th>Weight</th>
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</thead>
<tbody>
<tr>
<td><strong>HOSPITAL INPATIENT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternity</td>
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<tr>
<td>Medical / Surgical</td>
<td>8.3%</td>
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<td>6.1%</td>
<td>3.4%</td>
<td>-10.3%</td>
<td>7.2%</td>
<td>0.1%</td>
<td>4.9%</td>
<td>5.0%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
<td>-2.9%</td>
<td>-6.4%</td>
<td>-9.1%</td>
<td>-7.4%</td>
<td>-17.7%</td>
<td>-23.8%</td>
<td>-24.0%</td>
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<td>-17.3%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
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<td>-6.1%</td>
<td>-0.3%</td>
<td>3.6%</td>
<td>3.3%</td>
</tr>
<tr>
<td></td>
<td><strong>Utilization</strong></td>
<td><strong>Cost / Service</strong></td>
<td><strong>Total Trend</strong></td>
<td><strong>Utilization</strong></td>
<td><strong>Cost / Service</strong></td>
<td><strong>Total Trend</strong></td>
<td><strong>Utilization</strong></td>
<td><strong>Cost / Service</strong></td>
<td><strong>Total Trend</strong></td>
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<td>Weight</td>
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<tr>
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<td>32.7%</td>
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<tr>
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<tr>
<td><strong>GRAND TOTAL</strong></td>
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<td>0.1%</td>
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<td>-0.8%</td>
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<td>-1.1%</td>
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</table>

**West Virginia PEIA Non-Medicare Total Study Period of July 2017 to June 2020 (Allowed Claims)**

36 Month Trends Summary - Excludes Drugs
West Virginia PEIA Non-Medicare Total Study Period of July 2016 to June 2020 (Allowed Claims)

### 48 Month Trends Summary - Excludes Drugs

<table>
<thead>
<tr>
<th>In-State OOS</th>
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<th>OOS</th>
<th>BC Total</th>
<th>Total Utilization</th>
<th>Cost/Service</th>
<th>Total Trend</th>
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<td><strong>HOSPITAL INPATIENT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternity</td>
<td>7.3%</td>
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<td>7.5%</td>
<td>19.3%</td>
<td>-1.7%</td>
<td>17.3%</td>
</tr>
<tr>
<td>Medical / Surgical</td>
<td>6.8%</td>
<td>-1.6%</td>
<td>5.1%</td>
<td>2.2%</td>
<td>-2.2%</td>
<td>-0.1%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
<td>-3.8%</td>
<td>-2.4%</td>
<td>-6.1%</td>
<td>-2.1%</td>
<td>-25.7%</td>
<td>-27.2%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>6.3%</td>
<td>-1.5%</td>
<td>4.7%</td>
<td>2.6%</td>
<td>-2.5%</td>
<td>0.1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cost/Service</th>
<th>Total Trend</th>
<th>In-State Weight</th>
<th>OOS NBC Weight</th>
<th>OOS BC Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>-19.3%</td>
<td>-1.7%</td>
<td>17.3%</td>
<td>6.6%</td>
<td>-5.2%</td>
</tr>
<tr>
<td>-2.2%</td>
<td>-0.1%</td>
<td>-0.0%</td>
<td>0.0%</td>
<td>4.5%</td>
</tr>
<tr>
<td>-25.7%</td>
<td>-27.2%</td>
<td>-6.1%</td>
<td>9.6%</td>
<td>3.0%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>6.3%</td>
<td>-1.5%</td>
<td>4.7%</td>
<td>2.6%</td>
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</table>

<table>
<thead>
<tr>
<th>Cost/Service</th>
<th>Total Trend</th>
<th>In-State Weight</th>
<th>OOS NBC Weight</th>
<th>OOS BC Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>-19.3%</td>
<td>-1.7%</td>
<td>17.3%</td>
<td>6.6%</td>
<td>-5.2%</td>
</tr>
<tr>
<td>-2.2%</td>
<td>-0.1%</td>
<td>-0.0%</td>
<td>0.0%</td>
<td>4.5%</td>
</tr>
<tr>
<td>-25.7%</td>
<td>-27.2%</td>
<td>-6.1%</td>
<td>9.6%</td>
<td>3.0%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>6.3%</td>
<td>-1.5%</td>
<td>4.7%</td>
<td>2.6%</td>
</tr>
</tbody>
</table>

| **HOSPITAL OUTPATIENT** | | | | | | |
| Emergency Room | -2.2% | 7.1% | 4.7% | -1.7% | 1.6% | -0.1% |
| Medical / Surgical | 5.6% | 5.6% | 11.7% | -2.4% | 19.6% | 17.0% |
| Other Services | 3.0% | 11.7% | 15.1% | 0.2% | 14.4% | 14.6% |
| Psychiatric / Substance Abuse | 11.7% | 47.0% | 64.1% | -12.0% | -2.2% | -13.9% |
| **TOTAL** | 3.4% | 8.3% | 12.0% | -1.3% | 14.7% | 13.3% |

<table>
<thead>
<tr>
<th>Cost/Service</th>
<th>Total Trend</th>
<th>In-State Weight</th>
<th>OOS NBC Weight</th>
<th>OOS BC Weight</th>
</tr>
</thead>
<tbody>
<tr>
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<td>1.6%</td>
<td>-0.1%</td>
<td>-5.5%</td>
<td>9.5%</td>
</tr>
<tr>
<td>-2.4%</td>
<td>19.6%</td>
<td>17.0%</td>
<td>-7.9%</td>
<td>-4.3%</td>
</tr>
<tr>
<td>0.2%</td>
<td>14.4%</td>
<td>14.6%</td>
<td>-3.4%</td>
<td>0.3%</td>
</tr>
<tr>
<td>-12.0%</td>
<td>-2.2%</td>
<td>-13.9%</td>
<td>-11.4%</td>
<td>2.1%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>3.4%</td>
<td>8.3%</td>
<td>12.0%</td>
<td>-1.3%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cost/Service</th>
<th>Total Trend</th>
<th>In-State Weight</th>
<th>OOS NBC Weight</th>
<th>OOS BC Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>-1.7%</td>
<td>1.6%</td>
<td>-0.1%</td>
<td>-5.5%</td>
<td>9.5%</td>
</tr>
<tr>
<td>-2.4%</td>
<td>19.6%</td>
<td>17.0%</td>
<td>-7.9%</td>
<td>-4.3%</td>
</tr>
<tr>
<td>0.2%</td>
<td>14.4%</td>
<td>14.6%</td>
<td>-3.4%</td>
<td>0.3%</td>
</tr>
<tr>
<td>-12.0%</td>
<td>-2.2%</td>
<td>-13.9%</td>
<td>-11.4%</td>
<td>2.1%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>3.4%</td>
<td>8.3%</td>
<td>12.0%</td>
<td>-1.3%</td>
</tr>
</tbody>
</table>

| **PHYSICIAN SERVICES** | | | | | | |
| Anesthesia | -0.1% | 2.6% | 2.5% | -1.8% | 6.5% | 4.6% |
| Chemotherapy / Radiation | 6.4% | -7.5% | -1.6% | -1.1% | 1.0% | -0.2% |
| Emergency Room | -3.4% | 1.2% | -2.3% | -2.6% | 5.8% | 3.0% |
| Immunizations / Injections / Allergy | -1.5% | 8.6% | 7.0% | 18.1% | -3.7% | 13.8% |
| Inpatient Surgery | 2.4% | -2.8% | -0.5% | -3.6% | 5.5% | 1.7% |
| Inpatient Visits | -1.1% | 3.3% | 2.1% | -6.7% | -0.9% | -7.6% |
| Lab & Pathology | 1.6% | -4.2% | -2.6% | -4.8% | -1.6% | -6.3% |
| Maternity | 0.7% | 2.2% | 3.0% | 1.5% | 0.2% | 1.7% |
| Office Visits | -1.8% | 3.0% | -2.2% | 2.0% | 1.6% | 3.6% |
| Other Services | -1.3% | -0.1% | -1.4% | -1.9% | 22.1% | 19.7% |
| Outpatient Surgery | 4.7% | -3.4% | 1.2% | 2.1% | -0.3% | 1.8% |
| Psychiatric / Substance Abuse | 8.1% | 1.6% | 9.8% | 1.4% | 2.7% | 4.2% |
| Radiology | 1.7% | 2.2% | 3.9% | -1.7% | 9.6% | 7.7% |
| Therapies | 4.6% | 1.6% | 6.3% | 2.0% | 0.0% | 2.1% |
| **TOTAL** | 0.6% | 0.2% | 0.8% | -1.7% | 10.6% | 8.7% |

<table>
<thead>
<tr>
<th>Cost/Service</th>
<th>Total Trend</th>
<th>In-State Weight</th>
<th>OOS NBC Weight</th>
<th>OOS BC Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>-1.8%</td>
<td>4.0%</td>
<td>28.2%</td>
<td>-0.1%</td>
<td>3.3%</td>
</tr>
<tr>
<td>38.1%</td>
<td>4.6%</td>
<td>44.4%</td>
<td>-31.6%</td>
<td>36.2%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>11.0%</td>
<td>-1.2%</td>
<td>9.7%</td>
<td>-17.4%</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Cost/Service</th>
<th>Total Trend</th>
<th>In-State Weight</th>
<th>OOS NBC Weight</th>
<th>OOS BC Weight</th>
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<td>-1.8%</td>
<td>4.0%</td>
<td>28.2%</td>
<td>-0.1%</td>
<td>3.3%</td>
</tr>
<tr>
<td>38.1%</td>
<td>4.6%</td>
<td>44.4%</td>
<td>-31.6%</td>
<td>36.2%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>11.0%</td>
<td>-1.2%</td>
<td>9.7%</td>
<td>-17.4%</td>
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</table>
### West Virginia PEIA Non-Medicare Total
**Study Period of July 2019 to June 2020**
*(Allowed Claims)*

**12 Month Summary - Excludes Drugs**

#### Number of Visits

<table>
<thead>
<tr>
<th></th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
<th>In-State %</th>
<th>OOS NBC %</th>
<th>OOS BC %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HOSPITAL INPATIENT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternity</td>
<td>4,659</td>
<td>280</td>
<td>274</td>
<td>5,143</td>
<td>89.8%</td>
<td>5.2%</td>
<td>5.1%</td>
</tr>
<tr>
<td>Medical / Surgical</td>
<td>10,803</td>
<td>1,612</td>
<td>591</td>
<td>13,006</td>
<td>83.1%</td>
<td>12.4%</td>
<td>4.5%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
<td>767</td>
<td>246</td>
<td>33</td>
<td>1,046</td>
<td>73.3%</td>
<td>23.6%</td>
<td>3.1%</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>16,429</td>
<td>2,138</td>
<td>898</td>
<td>19,466</td>
<td>84.4%</td>
<td>11.0%</td>
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</table>

#### Total Allowed Cost

<table>
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<tr>
<th></th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
<th>In-State %</th>
<th>OOS NBC %</th>
<th>OOS BC %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HOSPITAL INPATIENT</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternity</td>
<td>5,269,050</td>
<td>1,069,518</td>
<td>1,011,726</td>
<td>7,340,294</td>
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</tr>
<tr>
<td>Medical / Surgical</td>
<td>40,311,041</td>
<td>34,356,781</td>
<td>9,001,729</td>
<td>83,669,551</td>
<td>48.2%</td>
<td>41.1%</td>
<td>10.8%</td>
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<tr>
<td>Psychiatric / Substance Abuse</td>
<td>2,057,373</td>
<td>458,613</td>
<td>172,826</td>
<td>2,688,812</td>
<td>76.5%</td>
<td>17.1%</td>
<td>6.4%</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>47,637,465</td>
<td>35,874,912</td>
<td>10,186,281</td>
<td>93,698,657</td>
<td>71.8%</td>
<td>14.4%</td>
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#### HOSPITAL OUTPATIENT

<table>
<thead>
<tr>
<th></th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
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<th>In-State %</th>
<th>OOS NBC %</th>
<th>OOS BC %</th>
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<tbody>
<tr>
<td>Emergency Room</td>
<td>47,722</td>
<td>2,663</td>
<td>2,412</td>
<td>52,797</td>
<td>90.4%</td>
<td>5.0%</td>
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<tr>
<td>Medical / Surgical</td>
<td>192,319</td>
<td>8,357</td>
<td>4,915</td>
<td>205,590</td>
<td>93.5%</td>
<td>4.1%</td>
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<tr>
<td>Other Services</td>
<td>310,800</td>
<td>9,883</td>
<td>10,013</td>
<td>330,696</td>
<td>94.0%</td>
<td>3.0%</td>
<td>3.0%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
<td>7,256</td>
<td>1,733</td>
<td>319</td>
<td>1,046</td>
<td>73.3%</td>
<td>23.6%</td>
<td>3.1%</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td>558,096</td>
<td>22,637</td>
<td>17,658</td>
<td>598,392</td>
<td>93.3%</td>
<td>3.8%</td>
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#### PHYSICIAN SERVICES

<table>
<thead>
<tr>
<th></th>
<th>In-State</th>
<th>OOS NBC</th>
<th>OOS BC</th>
<th>Total</th>
<th>In-State %</th>
<th>OOS NBC %</th>
<th>OOS BC %</th>
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<tbody>
<tr>
<td>Anesthesia</td>
<td>31,539</td>
<td>3,067</td>
<td>1,385</td>
<td>35,992</td>
<td>87.6%</td>
<td>8.5%</td>
<td>3.8%</td>
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<td>Chemotherapy / Radiation</td>
<td>35,391</td>
<td>1,465</td>
<td>1,629</td>
<td>38,485</td>
<td>92.0%</td>
<td>3.8%</td>
<td>4.2%</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>33,882</td>
<td>2,349</td>
<td>1,622</td>
<td>37,852</td>
<td>93.5%</td>
<td>6.2%</td>
<td>4.3%</td>
</tr>
<tr>
<td>Immunizations / Injections / Allergy</td>
<td>108,444</td>
<td>32,781</td>
<td>119,012</td>
<td>210,493</td>
<td>91.1%</td>
<td>6.1%</td>
<td>2.7%</td>
</tr>
<tr>
<td>Inpatient Surgery</td>
<td>6,723</td>
<td>1,101</td>
<td>252</td>
<td>8,076</td>
<td>83.2%</td>
<td>15.0%</td>
<td>3.5%</td>
</tr>
<tr>
<td>Inpatient Visits</td>
<td>43,389</td>
<td>7,977</td>
<td>1,867</td>
<td>53,233</td>
<td>81.5%</td>
<td>15.0%</td>
<td>3.5%</td>
</tr>
<tr>
<td>Lab &amp; Pathology</td>
<td>211,847</td>
<td>94,331</td>
<td>12,037</td>
<td>318,215</td>
<td>66.6%</td>
<td>29.6%</td>
<td>3.8%</td>
</tr>
<tr>
<td>Maternity</td>
<td>25,205</td>
<td>6,177</td>
<td>1,398</td>
<td>32,781</td>
<td>76.9%</td>
<td>18.8%</td>
<td>4.3%</td>
</tr>
<tr>
<td>Office Visits</td>
<td>678,617</td>
<td>34,386</td>
<td>27,595</td>
<td>740,591</td>
<td>91.6%</td>
<td>4.6%</td>
<td>3.7%</td>
</tr>
<tr>
<td>Other Services</td>
<td>307,045</td>
<td>39,806</td>
<td>14,640</td>
<td>361,491</td>
<td>84.9%</td>
<td>11.0%</td>
<td>4.0%</td>
</tr>
<tr>
<td>Outpatient Surgery</td>
<td>128,719</td>
<td>7,620</td>
<td>5,373</td>
<td>141,712</td>
<td>90.8%</td>
<td>5.4%</td>
<td>3.8%</td>
</tr>
<tr>
<td>Psychiatric / Substance Abuse</td>
<td>150,935</td>
<td>10,656</td>
<td>3,132</td>
<td>164,723</td>
<td>91.6%</td>
<td>6.5%</td>
<td>1.9%</td>
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<tr>
<td>Radiology</td>
<td>188,181</td>
<td>13,205</td>
<td>7,193</td>
<td>208,580</td>
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<td>2,127,078</td>
<td>234,230</td>
<td>88,225</td>
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#### Other

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#### Grand Total

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Continuing Care Actuaries
### 24 Month Trends Summary

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<th>Utilization</th>
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<tr>
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### 36 Month Trends Summary

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### 48 Month Trends Summary

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Appendix A
NON-MEDICARE CLAIMS
Excluding Drugs

GRAND TOTAL

24-Month Trends Summary
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<th>Cost / Service</th>
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36-Month Trends Summary
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48-Month Trends Summary
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### NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL INPATIENT

#### TOTAL

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Total Hospital Inpatient Claims - Excluding Drugs

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Continuing Care Actuaries
NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL OUTPATIENT

TOTAL

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NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

TOTAL

24-Month Trends Summary

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<th>Total Trend</th>
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36-Month Trends Summary

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48-Month Trends Summary

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NON-MEDICARE CLAIMS
Excluding Drugs

OTHER

TOTAL

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<th>Total Trend</th>
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<tr>
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Total Other Claims - Excluding Drugs

Continuing Care Actuaries
NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL INPATIENT

Maternity

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<th>Total Trend</th>
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Hospital Inpatient - Maternity
NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL INPATIENT
Medical / Surgical

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Hospital Inpatient - Medical / Surgical

Continuing Care Actuaries
NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL INPATIENT
Psychiatric / Substance Abuse

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<th>Total Trend</th>
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Hospital Inpatient - Psychiatric / Substance Abuse

Continuing Care Actuaries
NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL OUTPATIENT

Emergency Room

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<th>Cost / Service</th>
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<table>
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<table>
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<tr>
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<td>-2.4%</td>
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NON-MEDICARE CLAIMS
Excluding Drugs

HOSPITAL OUTPATIENT

Medical / Surgical

24-Month Trends Summary

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36-Month Trends Summary

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48-Month Trends Summary

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<tbody>
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Hospital Outpatient - Medical / Surgical

Cost Per Service

Continuing Care Actuaries
### NON-MEDICARE CLAIMS
Excluding Drugs

**HOSPITAL OUTPATIENT**

Other Services

#### 24-Month Trends Summary

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<tr>
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<th>Cost / Service</th>
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#### 36-Month Trends Summary

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#### 48-Month Trends Summary

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<tr>
<td>2.7%</td>
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**Hospital Outpatient - Other Services**

[Graph showing trends over time with cost per service on the y-axis and dates from Jul 16 to May 20 on the x-axis.]

Continuing Care Actuaries
NON-MEDICARE CLAIMS  
Excluding Drugs  

HOSPITAL OUTPATIENT  
Psychiatric / Substance Abuse  

<table>
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Hospital Outpatient - Psychiatric / Substance Abuse
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES
Anesthesia

<table>
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<th>48-Month Trends Summary</th>
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Physician Services - Anesthesia

Continuing Care Actuaries
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

Chemotherapy / Radiation

**24-Month Trends Summary**

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**36-Month Trends Summary**

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**48-Month Trends Summary**

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Physician Services - Chemotherapy Radiation

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Continuing Care Actuaries
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

Emergency Room

<table>
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<th>36-Month Trends Summary</th>
<th>48-Month Trends Summary</th>
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Physician Services - Emergency Room
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES
Immunizations / Injections / Allergy

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NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

Inpatient Surgery

24-Month Trends Summary

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36-Month Trends Summary

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<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.2%</td>
<td>-5.8%</td>
<td>-5.7%</td>
</tr>
</tbody>
</table>

48-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.8%</td>
<td>-2.3%</td>
<td>-1.5%</td>
</tr>
</tbody>
</table>

Physician Services - Inpatient Surgery
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

Inpatient Visits

<table>
<thead>
<tr>
<th>24-Month Trends Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Utilization</strong></td>
</tr>
<tr>
<td>-4.7%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>36-Month Trends Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Utilization</strong></td>
</tr>
<tr>
<td>-1.7%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>48-Month Trends Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Utilization</strong></td>
</tr>
<tr>
<td>-2.1%</td>
</tr>
</tbody>
</table>
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES
Lab & Pathology

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.6%</td>
<td>-14.7%</td>
<td>-12.5%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.6%</td>
<td>-8.1%</td>
<td>-6.6%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>-0.6%</td>
<td>-4.3%</td>
<td>-4.8%</td>
</tr>
</tbody>
</table>

Physician Services - Lab & Pathology
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

Maternity

<table>
<thead>
<tr>
<th>24-Month Trends Summary</th>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5.1%</td>
<td>1.4%</td>
<td>6.6%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>36-Month Trends Summary</th>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>1.5%</td>
<td>3.1%</td>
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<table>
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<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
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<td>1.0%</td>
<td>1.7%</td>
</tr>
</tbody>
</table>

Physician Services - Maternity

Cost Per Service

Continuing Care Actuaries
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

Office Visits

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>-2.9%</td>
<td>-3.7%</td>
<td>-6.5%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>-1.2%</td>
<td>-1.5%</td>
<td>-2.7%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>-1.9%</td>
<td>-0.4%</td>
<td>-2.3%</td>
</tr>
</tbody>
</table>

Physician Services - Office Visits
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES
Other Services

24-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
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<td>7.0%</td>
<td>1.4%</td>
</tr>
</tbody>
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36-Month Trends Summary

<table>
<thead>
<tr>
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<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
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<tr>
<td>-1.4%</td>
<td>5.8%</td>
<td>4.3%</td>
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48-Month Trends Summary

<table>
<thead>
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<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>-1.6%</td>
<td>6.9%</td>
<td>5.2%</td>
</tr>
</tbody>
</table>
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES
Outpatient Surgery

24-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.6%</td>
<td>-9.7%</td>
<td>-3.7%</td>
</tr>
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36-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.6%</td>
<td>-5.8%</td>
<td>-0.5%</td>
</tr>
</tbody>
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48-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.3%</td>
<td>-3.8%</td>
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</table>

Physician Services - Outpatient Surgery
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES
Psychiatric / Substance Abuse

<table>
<thead>
<tr>
<th>24-Month Trends Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilization</td>
</tr>
<tr>
<td>13.2%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>36-Month Trends Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilization</td>
</tr>
<tr>
<td>10.9%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>48-Month Trends Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilization</td>
</tr>
<tr>
<td>7.2%</td>
</tr>
</tbody>
</table>

Physician Services - Psychiatric / Substance Abuse
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

Radiology

24-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>-3.8%</td>
<td>1.3%</td>
<td>-2.6%</td>
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36-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.5%</td>
<td>-0.8%</td>
<td>0.7%</td>
</tr>
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48-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1%</td>
<td>2.0%</td>
<td>3.2%</td>
</tr>
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</table>

Physician Services - Radiology
Physician Services - Radiology

Utilization

Physician Services - Radiology

Incurred PMPM

Continuing Care Actuaries
NON-MEDICARE CLAIMS
Excluding Drugs

PHYSICIAN SERVICES

Therapies

<table>
<thead>
<tr>
<th>24-Month Trends Summary</th>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1.9%</td>
<td>0.1%</td>
<td>2.1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>36-Month Trends Summary</th>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5.5%</td>
<td>0.5%</td>
<td>6.1%</td>
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</tbody>
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<table>
<thead>
<tr>
<th>48-Month Trends Summary</th>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>1.7%</td>
<td>6.1%</td>
</tr>
</tbody>
</table>

Physician Services - Therapies
NON-MEDICARE CLAIMS
Excluding Drugs

OTHER

Ambulance

### 24-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
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<tr>
<td>-6.7%</td>
<td>-9.5%</td>
<td>-15.6%</td>
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</table>

### 36-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
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</tr>
</thead>
<tbody>
<tr>
<td>-1.1%</td>
<td>-5.3%</td>
<td>-6.4%</td>
</tr>
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</table>

### 48-Month Trends Summary

<table>
<thead>
<tr>
<th>Utilization</th>
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<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>-0.5%</td>
<td>-1.8%</td>
<td>-2.2%</td>
</tr>
</tbody>
</table>
NON-MEDICARE CLAIMS
Excluding Drugs

OTHER

Appliances (DME)

<table>
<thead>
<tr>
<th>24-Month Trends Summary</th>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>23.3%</td>
<td>-7.0%</td>
<td>14.7%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>36-Month Trends Summary</th>
<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
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<tbody>
<tr>
<td></td>
<td>8.5%</td>
<td>0.1%</td>
<td>8.6%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<th>Utilization</th>
<th>Cost / Service</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2.5%</td>
<td>3.3%</td>
<td>5.9%</td>
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</table>

Other - Appliances (DME)

Continuing Care Actuaries

A - 55
Appendix B
Non-Medicare Prescription Drugs

<table>
<thead>
<tr>
<th></th>
<th>Utilization</th>
<th>Cost / Prescription</th>
<th>Total Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>24-Month Trend</td>
<td>2.9%</td>
<td>11.2%</td>
<td>14.4%</td>
</tr>
<tr>
<td>36-Month Trend</td>
<td>3.9%</td>
<td>12.8%</td>
<td>17.2%</td>
</tr>
<tr>
<td>48-Month Trend</td>
<td>-3.8%</td>
<td>18.5%</td>
<td>13.9%</td>
</tr>
</tbody>
</table>
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 2.2% trend and unit cost had a 7.8% trend, resulting in a composite trend of 8.4% on an unadjusted basis. The chart below summarizes components of the unadjusted prescription drug trend for the past 9 years.

<table>
<thead>
<tr>
<th>Year</th>
<th>Utilization</th>
<th>Unit Cost</th>
<th>Composite Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>-0.5%</td>
<td>5.4%</td>
<td>5.6%</td>
</tr>
<tr>
<td>2013</td>
<td>0.0%</td>
<td>-5.8%</td>
<td>-5.5%</td>
</tr>
<tr>
<td>2014</td>
<td>-1.5%</td>
<td>6.2%</td>
<td>4.5%</td>
</tr>
<tr>
<td>2015</td>
<td>3.9%</td>
<td>7.9%</td>
<td>11.5%</td>
</tr>
<tr>
<td>2016</td>
<td>-0.7%</td>
<td>8.7%</td>
<td>6.9%</td>
</tr>
<tr>
<td>2017</td>
<td>-2.4%</td>
<td>12.2%</td>
<td>7.1%</td>
</tr>
<tr>
<td>2018</td>
<td>-29.0%</td>
<td>44.0%</td>
<td>2.3%</td>
</tr>
<tr>
<td>2019</td>
<td>-1.1%</td>
<td>13.4%</td>
<td>10.3%</td>
</tr>
<tr>
<td>2020</td>
<td>2.2%</td>
<td>7.8%</td>
<td>8.4%</td>
</tr>
</tbody>
</table>

Prior to this analysis, the financial plan was developed using a 12.5% trend for fiscal year 2021. Based on results and future expectations, Continuing Care Actuaries has chosen to use a gross drug trend assumption of 13.0% and drug rebate trend of 20.0% for fiscal year 2021 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:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Amount</td>
<td>%</td>
<td>Amount</td>
</tr>
<tr>
<td>Atripla</td>
<td>2021</td>
<td>$222,057</td>
<td>0.1%</td>
</tr>
<tr>
<td>Amitiza</td>
<td>2021</td>
<td>292,732</td>
<td>0.1%</td>
</tr>
<tr>
<td>Bystolic</td>
<td>2021</td>
<td>663,042</td>
<td>0.2%</td>
</tr>
<tr>
<td>Zipsor</td>
<td>2022</td>
<td>2,113</td>
<td>0.0%</td>
</tr>
<tr>
<td>Janumet</td>
<td>2022</td>
<td>1,622,281</td>
<td>0.6%</td>
</tr>
<tr>
<td>Toviaz</td>
<td>2022</td>
<td>28,799</td>
<td>0.0%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>$2,831,024</td>
<td>1.0%</td>
</tr>
</tbody>
</table>
**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 33% 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 1.7% in 2020, which is a better measure of utilization.

<table>
<thead>
<tr>
<th>Period</th>
<th>Total Specialty Cost ($M)</th>
<th>Percent of Total Cost</th>
<th>Specialty Cost Growth</th>
<th>Number of Specialty Rx</th>
<th>Specialty Rx Growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 2013</td>
<td>$34.0</td>
<td>18.00%</td>
<td>24.30%</td>
<td>11,167</td>
<td>5.50%</td>
</tr>
<tr>
<td>FY 2014</td>
<td>$35.8</td>
<td>18.60%</td>
<td>5.30%</td>
<td>10,938</td>
<td>-2.10%</td>
</tr>
<tr>
<td>FY 2015</td>
<td>$40.2</td>
<td>18.70%</td>
<td>12.40%</td>
<td>11,028</td>
<td>0.80%</td>
</tr>
<tr>
<td>FY 2016</td>
<td>$48.5</td>
<td>21.10%</td>
<td>20.70%</td>
<td>11,128</td>
<td>0.90%</td>
</tr>
<tr>
<td>FY 2017</td>
<td>$73.6</td>
<td>29.90%</td>
<td>51.50%</td>
<td>17,731</td>
<td>59.30%</td>
</tr>
<tr>
<td>FY 2018</td>
<td>$78.3</td>
<td>31.30%</td>
<td>6.50%</td>
<td>16,153</td>
<td>-8.90%</td>
</tr>
<tr>
<td>FY 2019</td>
<td>$88.8</td>
<td>31.98%</td>
<td>13.35%</td>
<td>17,354</td>
<td>7.44%</td>
</tr>
<tr>
<td>FY 2020</td>
<td>$100.5</td>
<td>33.41%</td>
<td>13.21%</td>
<td>20,210</td>
<td>16.46%</td>
</tr>
</tbody>
</table>

The following chart shows the top 10 brand name specialty drugs and their total cost in 2020:

<table>
<thead>
<tr>
<th>2020 Rank</th>
<th>2020 Brand Name</th>
<th>2019 Cost</th>
<th>2020 Cost</th>
<th>Total Growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>HUMIRA</td>
<td>$21,368,969</td>
<td>$24,427,220</td>
<td>14.31%</td>
</tr>
<tr>
<td>2</td>
<td>ENBREL</td>
<td>$6,267,519</td>
<td>$6,359,909</td>
<td>1.47%</td>
</tr>
<tr>
<td>3</td>
<td>COSENTYX</td>
<td>$2,927,642</td>
<td>$4,568,986</td>
<td>56.06%</td>
</tr>
<tr>
<td>4</td>
<td>TECFIDERA</td>
<td>$3,758,704</td>
<td>$4,259,195</td>
<td>13.32%</td>
</tr>
<tr>
<td>5</td>
<td>OTEZLA</td>
<td>$2,748,943</td>
<td>$3,625,653</td>
<td>31.89%</td>
</tr>
<tr>
<td>6</td>
<td>REVLIMID</td>
<td>$2,717,786</td>
<td>$3,549,281</td>
<td>30.59%</td>
</tr>
<tr>
<td>7</td>
<td>STELARA</td>
<td>N/A</td>
<td>$3,401,820</td>
<td>N/A</td>
</tr>
<tr>
<td>8</td>
<td>XELJANZ</td>
<td>$936,156</td>
<td>$2,538,882</td>
<td>171.20%</td>
</tr>
<tr>
<td>9</td>
<td>TALTZ</td>
<td>$540,513</td>
<td>$2,530,758</td>
<td>368.21%</td>
</tr>
<tr>
<td>10</td>
<td>AUBAGIO</td>
<td>$1,886,083</td>
<td>$2,275,544</td>
<td>20.65%</td>
</tr>
</tbody>
</table>

Total $43,152,314  $57,537,250  33.33%

Percent of Specialty Cost  48.59%  57.23%
Indicator Categories

Continuing Care Actuaries reviewed the individual prescription data items for Fiscal Years 2019 and 2020. A total of 1,943,250 scripts were written for approximately 2,638 different kinds of prescriptions in 2020. The prescriptions were grouped by indicator codes, providing a basis to develop the Fiscal Year 2020 trend by indicator code. The top 40 indicator codes were analyzed, which accounted for 86.5% of PEIA’s prescription drug expenditures.

The top 4 indicators from 2020 were the same as the top 4 in 2019. The top 5 indicators all 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.

<table>
<thead>
<tr>
<th>Rank</th>
<th>2019 Indicator</th>
<th>2019 Cost</th>
<th>2020 Indicator</th>
<th>2020 Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ANTIRHEUMATIC</td>
<td>$34,655,591</td>
<td>ANTIRHEUMATIC</td>
<td>$39,966,916</td>
</tr>
<tr>
<td>2</td>
<td>INSULINS</td>
<td>28,463,832</td>
<td>INSULINS</td>
<td>28,980,881</td>
</tr>
<tr>
<td>3</td>
<td>INCRETIN MIMETI</td>
<td>17,108,412</td>
<td>INCRETIN MIMETI</td>
<td>22,354,917</td>
</tr>
<tr>
<td>4</td>
<td>ANTINEOPLASTIC</td>
<td>15,026,608</td>
<td>ANTINEOPLASTIC</td>
<td>17,925,942</td>
</tr>
<tr>
<td>5</td>
<td>IMMUNOMOD AGNTS</td>
<td>12,851,399</td>
<td>SKIN AND MUCOUS</td>
<td>16,878,122</td>
</tr>
</tbody>
</table>

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 2020.

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 86.5% 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

<table>
<thead>
<tr>
<th>Indication</th>
<th>2019 Total Ingredient Cost</th>
<th>2020 Total Ingredient Cost</th>
<th>Total Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>SKIN AND MUCOUS</td>
<td>$6,975,067</td>
<td>$16,878,122</td>
<td>$9,903,056</td>
</tr>
<tr>
<td>ANTIRHEUMATIC</td>
<td>$34,665,591</td>
<td>$39,966,916</td>
<td>$5,301,325</td>
</tr>
<tr>
<td>INCRETIN MIMETI</td>
<td>$17,108,412</td>
<td>$22,354,917</td>
<td>$5,246,505</td>
</tr>
<tr>
<td>ANTINEOPLASTIC</td>
<td>$15,026,608</td>
<td>$17,925,942</td>
<td>$2,899,333</td>
</tr>
<tr>
<td>ANTIDIABETIC</td>
<td>$9,589,589</td>
<td>$11,975,723</td>
<td>$2,386,133</td>
</tr>
</tbody>
</table>

### Indicators with the Largest Increase as a Percentage

<table>
<thead>
<tr>
<th>Indication</th>
<th>2019 Total Ingredient Cost</th>
<th>2020 Total Ingredient Cost</th>
<th>Total Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMMONIA DETOXIC</td>
<td>$22,505</td>
<td>$243,497</td>
<td>982.0%</td>
</tr>
<tr>
<td>CALCITONIN GENE-RELATED PEPTIDE (CGRP) ANTAGONISTS</td>
<td>$173,085</td>
<td>$1,229,250</td>
<td>610.2%</td>
</tr>
<tr>
<td>ANTIMIGRAINE</td>
<td>$171,764</td>
<td>$574,035</td>
<td>234.2%</td>
</tr>
<tr>
<td>SKIN AND MUCOUS</td>
<td>$6,975,067</td>
<td>$16,878,122</td>
<td>142.0%</td>
</tr>
<tr>
<td>WAKEFULNESS</td>
<td>$143,029</td>
<td>$316,412</td>
<td>121.2%</td>
</tr>
</tbody>
</table>

### Indicators with the Largest Increase in Claim Numbers

<table>
<thead>
<tr>
<th>Indication</th>
<th>2019 Prescriptions</th>
<th>2020 Prescriptions</th>
<th>Utilization Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANTIDEPRESSANTS</td>
<td>139,844</td>
<td>147,942</td>
<td>8,098</td>
</tr>
<tr>
<td>NONSTEROIDAL AN</td>
<td>61,309</td>
<td>66,479</td>
<td>5,170</td>
</tr>
<tr>
<td>B-ADREN AGON</td>
<td>25,160</td>
<td>30,117</td>
<td>4,957</td>
</tr>
<tr>
<td>ANXIOLYTICS, SE</td>
<td>37,496</td>
<td>41,353</td>
<td>3,857</td>
</tr>
<tr>
<td>INCRETIN MIMETI</td>
<td>9,290</td>
<td>11,689</td>
<td>2,399</td>
</tr>
</tbody>
</table>
### Indicators with the Largest Utilization Increase Percentage

<table>
<thead>
<tr>
<th>Indication</th>
<th>2019 Prescriptions</th>
<th>2020 Prescriptions</th>
<th>Utilization Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>CALCITONIN GENE-RELATED PEPTIDE (CGRP) ANTAGONISTS</td>
<td>259</td>
<td>1,745</td>
<td>573.7%</td>
</tr>
<tr>
<td>ANTIMIGRAINE</td>
<td>253</td>
<td>829</td>
<td>227.7%</td>
</tr>
<tr>
<td>VASODILAT AGT</td>
<td>52</td>
<td>99</td>
<td>90.4%</td>
</tr>
<tr>
<td>RESP AND CNS</td>
<td>705</td>
<td>1,315</td>
<td>86.5%</td>
</tr>
<tr>
<td>PROPROTEIN CONVERTASE SUBTILISIN KEXIN TYPE 9 (PCS)</td>
<td>2,280</td>
<td>3,502</td>
<td>53.6%</td>
</tr>
</tbody>
</table>

### Indicators with the Largest Increase in Cost per Prescription

<table>
<thead>
<tr>
<th>Indication</th>
<th>2019 Ingredient Cost Per Prescription</th>
<th>2020 Ingredient Cost Per Prescription</th>
<th>Ingredient Cost Per Prescription Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>SKIN AND MUCOUS</td>
<td>$968.76</td>
<td>$2,028.13</td>
<td>$1,059.37</td>
</tr>
<tr>
<td>PARATHYROID AGENTS</td>
<td>$2,980.00</td>
<td>$3,578.00</td>
<td>$598.00</td>
</tr>
<tr>
<td>IMMUNOMOD AGNTS</td>
<td>$6,400.10</td>
<td>$6,959.10</td>
<td>$559.00</td>
</tr>
<tr>
<td>NERVOUS SYS AGT</td>
<td>$1,171.11</td>
<td>$1,651.37</td>
<td>$480.26</td>
</tr>
<tr>
<td>ANTINEOPLASTIC</td>
<td>$1,945.44</td>
<td>$2,298.49</td>
<td>$353.05</td>
</tr>
</tbody>
</table>

### Indicators with the Largest Percentage Increase in Cost per Prescription

<table>
<thead>
<tr>
<th>Indication</th>
<th>2019 Ingredient Cost Per Prescription</th>
<th>2020 Ingredient Cost Per Prescription</th>
<th>Ingredient Cost Per Prescription Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMMONIA DETOXIC</td>
<td>$34.52</td>
<td>$372.32</td>
<td>978.7%</td>
</tr>
<tr>
<td>WAKEFULNESS</td>
<td>$86.01</td>
<td>$194.12</td>
<td>125.7%</td>
</tr>
<tr>
<td>SKIN AND MUCOUS</td>
<td>$968.76</td>
<td>$2,028.13</td>
<td>109.4%</td>
</tr>
<tr>
<td>NERVOUS SYS AGT</td>
<td>$1,171.11</td>
<td>$1,651.37</td>
<td>41.0%</td>
</tr>
<tr>
<td>ANTITUSSIVES</td>
<td>$6.49</td>
<td>$8.90</td>
<td>37.1%</td>
</tr>
</tbody>
</table>
## Drug Indicators by Highest Cost

<table>
<thead>
<tr>
<th>Rank</th>
<th>Indicator</th>
<th>Number of Prescriptions</th>
<th>Cost Per Prescription</th>
<th>Program Costs</th>
<th>Formulary Percent (cost)</th>
<th>Formulary Percent (Scripts)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ANTIRHEUMATIC</td>
<td>7,913</td>
<td>$5,050.79</td>
<td>$39,966,916</td>
<td>96.2%</td>
<td>95.8%</td>
</tr>
<tr>
<td>2</td>
<td>INSULINS</td>
<td>17,648</td>
<td>$1,642.16</td>
<td>$28,980,881</td>
<td>99.8%</td>
<td>99.8%</td>
</tr>
<tr>
<td>3</td>
<td>INCRETIN MIMETI</td>
<td>11,689</td>
<td>$1,912.47</td>
<td>$22,354,917</td>
<td>99.9%</td>
<td>99.9%</td>
</tr>
<tr>
<td>4</td>
<td>ANTINEOPLASTIC</td>
<td>7,799</td>
<td>$2,298.49</td>
<td>$17,925,942</td>
<td>54.3%</td>
<td>90.9%</td>
</tr>
<tr>
<td>5</td>
<td>SKIN AND MUCOUS</td>
<td>8,322</td>
<td>$2,028.13</td>
<td>$16,878,122</td>
<td>81.2%</td>
<td>91.8%</td>
</tr>
<tr>
<td>6</td>
<td>IMMUNOMOD AGNTS</td>
<td>1,947</td>
<td>$6,959.10</td>
<td>$13,549,369</td>
<td>93.4%</td>
<td>93.6%</td>
</tr>
<tr>
<td>7</td>
<td>ANTIDIABETIC</td>
<td>9,378</td>
<td>$1,277.00</td>
<td>$11,975,723</td>
<td>99.9%</td>
<td>99.8%</td>
</tr>
<tr>
<td>8</td>
<td>DDP-4 INHIBITOR</td>
<td>8,617</td>
<td>$1,191.32</td>
<td>$10,265,618</td>
<td>99.9%</td>
<td>99.9%</td>
</tr>
<tr>
<td>9</td>
<td>ADRENALS</td>
<td>67,159</td>
<td>$144.93</td>
<td>$7,718,270</td>
<td>98.3%</td>
<td>99.5%</td>
</tr>
<tr>
<td>10</td>
<td>ANTICOAGULANTS</td>
<td>11,887</td>
<td>$623.17</td>
<td>$7,407,650</td>
<td>99.6%</td>
<td>99.8%</td>
</tr>
<tr>
<td>11</td>
<td>ANTIDEPRESSANTS</td>
<td>147,942</td>
<td>$34.26</td>
<td>$5,068,662</td>
<td>95.7%</td>
<td>99.9%</td>
</tr>
<tr>
<td>12</td>
<td>NERVOUS SYS AGT</td>
<td>2,925</td>
<td>$1,651.37</td>
<td>$4,830,267</td>
<td>25.1%</td>
<td>90.5%</td>
</tr>
<tr>
<td>13</td>
<td>ANTIPSYCHOTICS</td>
<td>9,827</td>
<td>$475.14</td>
<td>$4,669,164</td>
<td>87.9%</td>
<td>97.6%</td>
</tr>
<tr>
<td>14</td>
<td>B-ADREN AGON</td>
<td>30,117</td>
<td>$151.71</td>
<td>$4,569,157</td>
<td>99.9%</td>
<td>100.0%</td>
</tr>
<tr>
<td>15</td>
<td>MISC ANTICONVUL</td>
<td>46,246</td>
<td>$97.92</td>
<td>$4,528,487</td>
<td>84.9%</td>
<td>99.3%</td>
</tr>
<tr>
<td>16</td>
<td>AMPHETAMINES</td>
<td>23,390</td>
<td>$173.72</td>
<td>$4,063,342</td>
<td>97.8%</td>
<td>98.7%</td>
</tr>
<tr>
<td>17</td>
<td>CONTRACEPTIVES</td>
<td>42,688</td>
<td>$82.63</td>
<td>$3,527,104</td>
<td>88.5%</td>
<td>97.7%</td>
</tr>
<tr>
<td>18</td>
<td>PPI</td>
<td>68,109</td>
<td>$51.27</td>
<td>$3,492,023</td>
<td>99.9%</td>
<td>100.0%</td>
</tr>
<tr>
<td>19</td>
<td>VASODILAT AGT</td>
<td>281</td>
<td>$11,233.80</td>
<td>$3,156,699</td>
<td>79.4%</td>
<td>77.6%</td>
</tr>
<tr>
<td>20</td>
<td>HMG-COA RED INH</td>
<td>85,768</td>
<td>$35.68</td>
<td>$3,060,557</td>
<td>99.3%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>
### Drug Indicators by Highest Cost (continued)

<table>
<thead>
<tr>
<th>Rank</th>
<th>Indicator</th>
<th>Number of Prescriptions</th>
<th>Cost Per Prescription</th>
<th>Program Costs</th>
<th>Formulary Percent (cost)</th>
<th>Formulary Percent (Scripts)</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>ANTIMUSCARINICS</td>
<td>14,548</td>
<td>$206.08</td>
<td>$2,998,031</td>
<td>99.3%</td>
<td>99.8%</td>
</tr>
<tr>
<td>22</td>
<td>GI DRUGS, MISCE CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE</td>
<td>2,965</td>
<td>$1,004.88</td>
<td>$2,979,474</td>
<td>95.8%</td>
<td>96.8%</td>
</tr>
<tr>
<td></td>
<td>CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATO</td>
<td>127</td>
<td>$23,198.55</td>
<td>$2,946,216</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>24</td>
<td>ANTIRETROVIRALS</td>
<td>1,315</td>
<td>$2,224.54</td>
<td>$2,925,272</td>
<td>99.8%</td>
<td>99.7%</td>
</tr>
<tr>
<td>25</td>
<td>ESTROGENS</td>
<td>11,977</td>
<td>$206.02</td>
<td>$2,467,537</td>
<td>97.5%</td>
<td>98.1%</td>
</tr>
<tr>
<td>26</td>
<td>EENT ANTI-INFL</td>
<td>1,713</td>
<td>$1,403.97</td>
<td>$2,405,003</td>
<td>99.9%</td>
<td>99.7%</td>
</tr>
<tr>
<td>27</td>
<td>CORTICOSTEROIDS</td>
<td>65,614</td>
<td>$35.44</td>
<td>$2,325,256</td>
<td>90.5%</td>
<td>99.2%</td>
</tr>
<tr>
<td>28</td>
<td>ANTI-INFLAMMATO</td>
<td>3,215</td>
<td>$721.23</td>
<td>$2,318,768</td>
<td>99.4%</td>
<td>99.7%</td>
</tr>
<tr>
<td>29</td>
<td>PROTEASE INH</td>
<td>85</td>
<td>$25,167.69</td>
<td>$2,139,254</td>
<td>98.8%</td>
<td>97.6%</td>
</tr>
<tr>
<td>30</td>
<td>THYROID AGENTS</td>
<td>55,682</td>
<td>$38.30</td>
<td>$2,132,890</td>
<td>91.2%</td>
<td>95.8%</td>
</tr>
<tr>
<td>31</td>
<td>BETA BLOCKERS</td>
<td>62,311</td>
<td>$33.52</td>
<td>$2,088,924</td>
<td>99.6%</td>
<td>99.9%</td>
</tr>
<tr>
<td>32</td>
<td>RESP AND CNS</td>
<td>11,714</td>
<td>$177.13</td>
<td>$2,074,922</td>
<td>83.0%</td>
<td>91.3%</td>
</tr>
<tr>
<td>33</td>
<td>MISC ANTILIPEM</td>
<td>3,883</td>
<td>$511.64</td>
<td>$1,986,711</td>
<td>100.0%</td>
<td>99.9%</td>
</tr>
<tr>
<td>34</td>
<td>PLATELET-AGG IN</td>
<td>8,441</td>
<td>$197.27</td>
<td>$1,665,162</td>
<td>99.6%</td>
<td>99.9%</td>
</tr>
<tr>
<td>35</td>
<td>SOMATOTROP AGON</td>
<td>311</td>
<td>$5,195.55</td>
<td>$1,615,817</td>
<td>91.5%</td>
<td>92.9%</td>
</tr>
<tr>
<td>36</td>
<td>DIABETES MELLIT</td>
<td>8,584</td>
<td>$180.65</td>
<td>$1,550,719</td>
<td>99.4%</td>
<td>99.3%</td>
</tr>
<tr>
<td>37</td>
<td>ANGIOTEN 2 ANTG</td>
<td>43,210</td>
<td>$33.16</td>
<td>$1,433,018</td>
<td>99.0%</td>
<td>99.9%</td>
</tr>
<tr>
<td>38</td>
<td>DIGESTANTS</td>
<td>405</td>
<td>$3,485.39</td>
<td>$1,411,581</td>
<td>100.0%</td>
<td>100.0%</td>
</tr>
<tr>
<td>39</td>
<td>VASOPRSN ANTAGO</td>
<td>99</td>
<td>$13,943.41</td>
<td>$1,380,398</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>40</td>
<td>OTHER MISC THER</td>
<td>471</td>
<td>$2,921.00</td>
<td>$1,375,790</td>
<td>53.7%</td>
<td>41.6%</td>
</tr>
<tr>
<td></td>
<td>All Other Indicators</td>
<td>1,036,928</td>
<td>$39.29</td>
<td>$40,744,464</td>
<td>85.5%</td>
<td>98.6%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>1,943,250</strong></td>
<td><strong>$154.87</strong></td>
<td><strong>300,954,074</strong></td>
<td><strong>89.2%</strong></td>
<td><strong>98.7%</strong></td>
</tr>
</tbody>
</table>
## Drug Indicators by Highest Cost
### Analysis of Formulary Distribution

<table>
<thead>
<tr>
<th>Rank</th>
<th>Indicator</th>
<th>Formulary</th>
<th>Non-Formulary</th>
<th>Cost Per Script</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Scripts</td>
<td>Ingredient Cost</td>
<td>Scripts</td>
<td>Ingredient Cost</td>
</tr>
<tr>
<td>1</td>
<td>ANTIRHEUMATIC</td>
<td>7,582</td>
<td>$38,440,265</td>
<td>331</td>
</tr>
<tr>
<td>2</td>
<td>INSULINS</td>
<td>17,611</td>
<td>$28,922,689</td>
<td>37</td>
</tr>
<tr>
<td>3</td>
<td>INCRETIN MIMETI</td>
<td>11,678</td>
<td>$22,343,179</td>
<td>11</td>
</tr>
<tr>
<td>4</td>
<td>ANTINEOPLASTIC</td>
<td>7,088</td>
<td>$9,734,224</td>
<td>71</td>
</tr>
<tr>
<td>5</td>
<td>SKIN AND MUCOUS</td>
<td>7,639</td>
<td>$13,702,436</td>
<td>683</td>
</tr>
<tr>
<td>6</td>
<td>IMMUNOMOD AGENTS</td>
<td>1,822</td>
<td>$12,658,720</td>
<td>125</td>
</tr>
<tr>
<td>7</td>
<td>ANTIDIABETIC</td>
<td>9,358</td>
<td>$11,964,321</td>
<td>20</td>
</tr>
<tr>
<td>8</td>
<td>DDP-4 INHIBITOR</td>
<td>8,605</td>
<td>$10,254,812</td>
<td>12</td>
</tr>
<tr>
<td>9</td>
<td>ADRENALS</td>
<td>66,816</td>
<td>$7,585,586</td>
<td>343</td>
</tr>
<tr>
<td>10</td>
<td>ANTICOAGULANTS</td>
<td>11,861</td>
<td>$7,380,287</td>
<td>26</td>
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</table>
### Drug Indicators by Highest Cost

#### Analysis of Formulary Distribution (continued)

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<tr>
<th>Rank</th>
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<td>37</td>
<td>DIABETES MELLIT</td>
<td>8,528</td>
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<td>38</td>
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<td>$0</td>
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<td>----------------------------</td>
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<td>WAKEFULNESS</td>
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<td>OPIATE AGONISTS</td>
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<td>509.64</td>
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<td>793.35</td>
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<td>NONSTEROIDAL AN</td>
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### Drug Indicators by Highest Script Increase (continued)

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<th>Rank</th>
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<th>Non-Formulary Cost</th>
<th>Increase/Decrease</th>
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<tbody>
<tr>
<td>53</td>
<td>ALDOST REC ANTA</td>
<td>33.14</td>
<td>659.87</td>
<td>1,891%</td>
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<tr>
<td>171</td>
<td>HMG-COA RED INH</td>
<td>35.45</td>
<td>601.18</td>
<td>1,596%</td>
</tr>
<tr>
<td>121</td>
<td>CORTICOSTEROIDS</td>
<td>32.33</td>
<td>437.67</td>
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<tr>
<td>50</td>
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<td>1,029.10</td>
<td>1,153%</td>
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<tr>
<td>12</td>
<td>SSRI AGONISTS</td>
<td>38.55</td>
<td>475.83</td>
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<tr>
<td>34</td>
<td>ANGIOTEN 2 ANTG</td>
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<td>373.79</td>
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<tr>
<td>93</td>
<td>MISC AUTONOMIC</td>
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<td>448.85</td>
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<tr>
<td>105</td>
<td>PPI</td>
<td>51.22</td>
<td>515.85</td>
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<tr>
<td>136</td>
<td>ANTIFUNGALS</td>
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<tr>
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<td>ANTIBACTERIALS,</td>
<td>156.42</td>
<td>1,336.03</td>
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<tr>
<td>94</td>
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<tr>
<td>4</td>
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</tr>
<tr>
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<td>ANTIMALARIALS</td>
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</tr>
<tr>
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<tr>
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<tr>
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<td>BILE ACID SEQUE</td>
<td>291.19</td>
<td>1,179.11</td>
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<tr>
<td>63</td>
<td>ANTIALLERGIC AG</td>
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<td>245.44</td>
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<tr>
<td>45</td>
<td>BETA BLOCKERS</td>
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<td>131.17</td>
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<td>All Other Indicators</td>
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<tr>
<td></td>
<td><strong>Total</strong></td>
<td><strong>$139.98</strong></td>
<td><strong>$1,322.19</strong></td>
<td><strong>845%</strong></td>
</tr>
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</table>
# Drugs by Highest Cost

## Analysis of Formulary Distribution

<table>
<thead>
<tr>
<th>Rank</th>
<th>Drug</th>
<th>Formulary Scripts</th>
<th>Formulary Ingredient Cost</th>
<th>Formulary Cost Per Script</th>
<th>Non-Formulary Ingredient Cost</th>
<th>Non-Formulary Cost Per Script</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>HUMIRA</td>
<td>4,063</td>
<td>$24,427,220</td>
<td>$6,012</td>
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<tr>
<td>2</td>
<td>TRULICITY</td>
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<td>0</td>
</tr>
<tr>
<td>3</td>
<td>TRESIBA FLEXTOUCH</td>
<td>5,028</td>
<td>$8,798,117</td>
<td>$1,750</td>
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<td>0</td>
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<tr>
<td>4</td>
<td>JANUVIA</td>
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<td>$7,817,385</td>
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<td>FARXIGA</td>
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<tr>
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<tr>
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<td>NOVOLOG FLEXPEN</td>
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<tr>
<td>8</td>
<td>OZEMPIC</td>
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<td>$5,926,955</td>
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<td>VICTOZA</td>
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<td>$147,550,109</td>
<td>$79</td>
<td>24,205</td>
<td>$28,809,916</td>
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</tbody>
</table>

**Total** | **1,918,780** | **$268,599,968** | **$139.98** | **24,470** | **$32,354,106** | **$1,322.19**
1 – Antirheumatic Drugs

In FY 2020, the Antirheumatic Drugs category was first in cost to PEIA with expenditure of $39,966,916, which accounted for 13.3% of total expenditures. Formulary expenditures were $38,440,265 or 96.2% of Antirheumatic Drugs expenditures and total expenditures had a 15.7% trend from 2019 to 2020.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Current Formulary Status</th>
<th>Current Brand/ Generic</th>
<th>Number of Prescriptions</th>
<th>Ingredient Cost Per Prescription</th>
<th>Total Ingredient Cost</th>
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<tr>
<td>HUMIRA</td>
<td>PREF</td>
<td>SSB</td>
<td>3,793</td>
<td>4,063</td>
<td>7.1%</td>
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<td>ENBREL</td>
<td>PREF</td>
<td>SSB</td>
<td>1,281</td>
<td>1,216</td>
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<tr>
<td>OTEZLA</td>
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<td>SSB</td>
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<td>1,070</td>
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<tr>
<td>XELJANZ</td>
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<td>212</td>
<td>557</td>
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<tr>
<td>ENBREL MINI</td>
<td>PREF</td>
<td>SSB</td>
<td>164</td>
<td>125</td>
<td>-23.8%</td>
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<tr>
<td>Subtotals</td>
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<td>7,173</td>
<td>7,913</td>
<td>10.3%</td>
</tr>
<tr>
<td>Generic</td>
<td>Y</td>
<td>GEN</td>
<td>275</td>
<td>312</td>
<td>13.5%</td>
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<tr>
<td>Formulary Brand</td>
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<td>Brand</td>
<td>6,418</td>
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<td>Non-Formulary Brand</td>
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<td>Brand</td>
<td>480</td>
<td>331</td>
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<tr>
<td>Total</td>
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<td>7,173</td>
<td>7,913</td>
<td>10.3%</td>
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<tr>
<td>Trends Adjusted for Exposure</td>
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<td></td>
<td>7,173</td>
<td>7,913</td>
<td>10.3%</td>
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</tbody>
</table>
### 2 - Insulins

In FY 2020, the Insulins category was second in cost to PEIA with expenditure of $28,980,881, which accounted for 9.6% of total expenditures overall. Formulary expenditures were $28,992,689 or 99.8% of Insulins expenditures and total ingredient cost had a 1.9% trend.

<table>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>TRESIBA FLEXTOUCH</td>
<td>PREF</td>
<td>SSB</td>
<td>4,809</td>
<td>5,028</td>
<td>4.6%</td>
<td>$1,701.66</td>
<td>$1,749.82</td>
<td>2.8%</td>
<td>$8,183,266</td>
<td>$8,798,117</td>
<td>7.5%</td>
</tr>
<tr>
<td>NOVOLOG FLEXPEN</td>
<td>PREF</td>
<td>SSB</td>
<td>3,796</td>
<td>3,743</td>
<td>-1.4%</td>
<td>1,644.66</td>
<td>1,670.98</td>
<td>1.6%</td>
<td>6,243,138</td>
<td>6,254,482</td>
<td>0.2%</td>
</tr>
<tr>
<td>LEVEMIR FLEXTOUCH</td>
<td>PREF</td>
<td>SSB</td>
<td>2,808</td>
<td>2,528</td>
<td>-10.0%</td>
<td>1,505.13</td>
<td>1,551.06</td>
<td>3.1%</td>
<td>4,226,419</td>
<td>3,921,086</td>
<td>-7.2%</td>
</tr>
<tr>
<td>NOVOLOG</td>
<td>PREF</td>
<td>SSB</td>
<td>1,854</td>
<td>1,771</td>
<td>-4.5%</td>
<td>2,060.44</td>
<td>2,098.12</td>
<td>1.8%</td>
<td>3,820,053</td>
<td>3,715,777</td>
<td>-2.7%</td>
</tr>
<tr>
<td>BASAGLAR KWIKPEN</td>
<td>PREF</td>
<td>SSB</td>
<td>2,593</td>
<td>2,629</td>
<td>1.4%</td>
<td>902.68</td>
<td>915.27</td>
<td>1.4%</td>
<td>2,340,639</td>
<td>2,406,252</td>
<td>2.8%</td>
</tr>
<tr>
<td><strong>Subtotals</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Generic</td>
<td>Y</td>
<td>GEN</td>
<td>0</td>
<td>0</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>$0</td>
<td>0</td>
<td>NA</td>
</tr>
<tr>
<td>Formulary Brand</td>
<td>Y</td>
<td>Brand</td>
<td>17,795</td>
<td>17,611</td>
<td>-1.0%</td>
<td>1,595.35</td>
<td>1,642.31</td>
<td>2.9%</td>
<td>28,389,312</td>
<td>28,922,689</td>
<td>1.9%</td>
</tr>
<tr>
<td>Non-Formulary Brand</td>
<td>N</td>
<td>Brand</td>
<td>60</td>
<td>37</td>
<td>-38.3%</td>
<td>1,242.37</td>
<td>1,572.76</td>
<td>26.6%</td>
<td>74,542</td>
<td>58,192</td>
<td>-21.9%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td>17,855</td>
<td>17,648</td>
<td>-1.2%</td>
<td>$1,594.17</td>
<td>$1,642.16</td>
<td>3.0%</td>
<td>$28,463,854</td>
<td>$28,980,881</td>
<td>1.8%</td>
</tr>
<tr>
<td><strong>Trends Adjusted for Exposure</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>-1.1%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1.9%</td>
</tr>
</tbody>
</table>
3 - Incretin Mimetic Drugs

In FY 2020, the Incretin Mimetic Drugs indicator category was third in cost to PEIA with expenditure of $22,354,917, which accounted for 7.4% of total expenditures. Formulary expenditures were $22,343,179 or 99.9% of Incretin Mimetic Drugs’ expenditures. Total expenditures had a 31.6% trend.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Current Formulary Status</th>
<th>Current Brand/Generic</th>
<th>Number of Prescriptions</th>
<th>Ingredient Cost Per Prescription</th>
<th>Total Ingredient Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>TRULICITY</td>
<td>PREF</td>
<td>SSB</td>
<td>5,402</td>
<td>6,116</td>
<td>13.2%</td>
</tr>
<tr>
<td>OZEMPIC</td>
<td>PREF</td>
<td>SSB</td>
<td>1,299</td>
<td>3,381</td>
<td>160.3%</td>
</tr>
<tr>
<td>VICTOZA</td>
<td>PREF</td>
<td>SSB</td>
<td>2,580</td>
<td>2,153</td>
<td>-16.6%</td>
</tr>
<tr>
<td>RYBELSUS</td>
<td>N-FORM</td>
<td>SSB</td>
<td>0</td>
<td>28</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>0</td>
<td>6</td>
<td>NA</td>
</tr>
</tbody>
</table>

Subtotals

<p>| | | | | | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic</td>
<td>Y GEN</td>
<td></td>
<td>0</td>
<td>0</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>$0</td>
<td>0</td>
<td>NA</td>
</tr>
<tr>
<td>Formulary Brand</td>
<td>Y Brand</td>
<td></td>
<td>9,281</td>
<td>11,678</td>
<td>25.8%</td>
<td>1,841.95</td>
<td>1,913.27</td>
<td>3.9%</td>
<td>17,095,100</td>
<td>22,343,179</td>
<td>30.7%</td>
</tr>
<tr>
<td>Non-Formulary Brand</td>
<td>N Brand</td>
<td></td>
<td>9</td>
<td>11</td>
<td>22.2%</td>
<td>1,480.83</td>
<td>1,067.10</td>
<td>-27.9%</td>
<td>13,327</td>
<td>11,738</td>
<td>-11.9%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td>9,290</td>
<td>11,689</td>
<td>25.8%</td>
<td>$1,841.60</td>
<td>$1,912.47</td>
<td>3.8%</td>
<td>$17,108,428</td>
<td>$22,354,917</td>
<td>30.7%</td>
</tr>
<tr>
<td>Trends Adjusted for Exposure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>26.8%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3.8%</td>
<td></td>
</tr>
</tbody>
</table>
4 – Antineoplastic Drugs

In FY 2020, the Antineoplastic Drugs indicator category was fourth in cost to PEIA with expenditure of $17,925,942, which accounted for 6.0% of total expenditures. Formulary expenditures were $9,734,224 or 54.3% of Antineoplastic Drugs expenditures and total expenditures had a 19.3% trend.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Current Formulary Status</th>
<th>Current Brand/ Generic</th>
<th>Number of Prescriptions</th>
<th>Ingredient Cost Per Prescription</th>
<th>Total Ingredient Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>REVLIMID</td>
<td>PREF</td>
<td>SSB</td>
<td>194</td>
<td>246</td>
<td>26.8%</td>
</tr>
<tr>
<td>IBRANCE</td>
<td>PREF</td>
<td>SSB</td>
<td>135</td>
<td>178</td>
<td>31.9%</td>
</tr>
<tr>
<td>IMBRUVICA</td>
<td>N-FORM</td>
<td>SSB</td>
<td>97</td>
<td>161</td>
<td>66.0%</td>
</tr>
<tr>
<td>SPRYCEL</td>
<td>PREF</td>
<td>SSB</td>
<td>99</td>
<td>72</td>
<td>-27.3%</td>
</tr>
<tr>
<td>JAKAFI</td>
<td>N-FORM</td>
<td>SSB</td>
<td>62</td>
<td>57</td>
<td>-8.1%</td>
</tr>
<tr>
<td>Subtotals</td>
<td></td>
<td></td>
<td>6,550</td>
<td>6,459</td>
<td>-1.4%</td>
</tr>
<tr>
<td>Generic</td>
<td>Y</td>
<td>GEN</td>
<td>343</td>
<td>629</td>
<td>83.4%</td>
</tr>
<tr>
<td>Formulary Brand</td>
<td></td>
<td>Brand</td>
<td>831</td>
<td>711</td>
<td>-14.4%</td>
</tr>
<tr>
<td>Non-Formulary Brand</td>
<td></td>
<td>Brand</td>
<td>7,724</td>
<td>7,799</td>
<td>1.0%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trends Adjusted for Exposure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1.0%</td>
</tr>
</tbody>
</table>

Continuing Care Actuaries
## 5 – Skin And Mucous

In FY 2020, the Skin And Mucous indicator category was fifth in cost to PEIA with expenditure of $16,878,122, which accounted for 5.6% of total expenditures. Formulary expenditures were $13,702,436 or 81.2% of Antineoplastic expenditures and total expenditures had a 143.2% trend.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Current Formulary Status</th>
<th>Current Brand/ Generic</th>
<th>Number of Prescriptions</th>
<th>Ingredient Cost Per Prescription</th>
<th>Total Ingredient Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>TALTZ</td>
<td>NFRM-PAOVR</td>
<td>SSB</td>
<td>89</td>
<td>372</td>
<td>318.0%</td>
</tr>
<tr>
<td>TREMFYA</td>
<td>NFRM-NCCVRD</td>
<td>SSB</td>
<td>38</td>
<td>25</td>
<td>-34.2%</td>
</tr>
<tr>
<td>TARGRETIN</td>
<td>N-FORM</td>
<td>SSB</td>
<td>3</td>
<td>4</td>
<td>33.3%</td>
</tr>
<tr>
<td>SILIQ</td>
<td>NFRM-NCCVRD</td>
<td>SSB</td>
<td>20</td>
<td>12</td>
<td>-40.0%</td>
</tr>
<tr>
<td>ORACEA</td>
<td>N-FORM</td>
<td>MSB</td>
<td>168</td>
<td>57</td>
<td>-66.1%</td>
</tr>
<tr>
<td><strong>Subtotals</strong></td>
<td></td>
<td></td>
<td>4,843</td>
<td>5,065</td>
<td>4.6%</td>
</tr>
<tr>
<td>Generic</td>
<td>Y</td>
<td>GEN</td>
<td>1,882</td>
<td>2,574</td>
<td>36.8%</td>
</tr>
<tr>
<td>Formulary Brand</td>
<td>Y</td>
<td>Brand</td>
<td>475</td>
<td>683</td>
<td>43.8%</td>
</tr>
<tr>
<td>Non-Formulary Brand</td>
<td>N</td>
<td>Brand</td>
<td>7,200</td>
<td>8,322</td>
<td>15.6%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td>7,200</td>
<td>8,322</td>
<td>15.6%</td>
</tr>
<tr>
<td>Trends Adjusted for Exposure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>