

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

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West Virginia Public Employees Insurance Agency Report of Independent Actuary

Fiscal Year 2020 Detailed Medical & Prescription Drugs Claim Trend Report

OVERVIEW

Continuing Care Actuaries was engaged by the West Virginia Public Employees Insurance Agency ("PEIA") to assist the Finance Board in monitoring the plan experience for fiscal year ending June 30, 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.

West Virginia PEIA Non-Medicare Total 24-Month Trend Analysis-Allowed Claims				
	Utilization	Cost/Service	Total Trend	
2002	4.1%	3.6%	7.8%	
2003	9.8%	-3.0%	6.5%	
2004	11.7%	-6.8%	4.0%	
2005	2.8%	-1.1%	1.7%	
2006	2.9%	1.0%	4.0%	
2007	7.2%	-2.0%	5.1%	
2008	2.9%	3.9%	6.9%	
2009	2.5%	2.6%	5.1%	
2010	2.5%	1.8%	4.4%	
2011	4.2%	3.5%	7.8%	
2012	5.1%	0.1%	5.3%	
2013	2.6%	-1.6%	0.9%	
2014	-0.4%	4.5%	4.1%	
2015	0.7%	5.6%	6.3%	
2016	8.6%	-0.7%	7.9%	
2017	3.9%	-1.1%	2.8%	
2018	4.4%	2.4%	6.9%	
2019	5.5%	3.0%	8.6%	
2020	3.2%	1.6%	4.8%	

• 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:

Fiscal Year 2020 Claim Type	Medical	Drugs
PEIA – Active Local <u>PEIA – State</u> PEIA – Total	-1.4% $\frac{6.1\%}{4.8\%}$	9.9% <u>15.4%</u> 14.4%
RHBT – Non-Medicare	-9.3%	12.3%
Grand Total	3.4%	14.2%

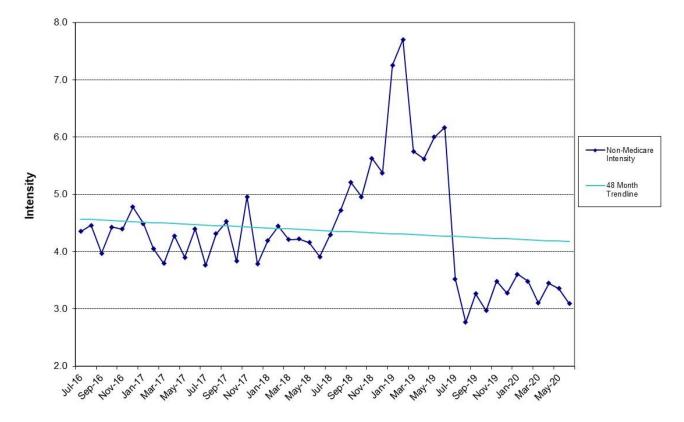
• In the 24-month analysis, OOS BC services have experienced higher trends than In-State and OOS NBC services for Non-Medicare coverages in three out of four categories (HI, HO and O, not PS). A comparison of Non-Medicare medical trends for In-State claims versus OOS NBC claims versus OOS BC claims over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



Hospital Inpatient Intensity

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

West Virginia PEIA Non-Medicare Hospital Inpatient Trend Analysis					
	24-Month	36-Month	48-Month		
Visits	8.1%	1.7%	1.9%		
Intensity	-28.9%	-7.7%	-3.5%		
<u>Cost/Day 23.1% 5.6% 1.0%</u>					
Total	-5.4%	-0.8%	-0.7%		

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%.

West Virginia PEIA Prescription Drugs Total 24-Month Trend Analysis-Allowed Claims				
UtilizationCost/PrescriptionTotal TrendFY 20202.9%11.2%14.4%				

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.

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

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

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

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.

West Virginia PEIA Non-Medicare Medical Total Trend Analysis					
Paid Basis Allowed Basis					
24-Month Trend	4.1%	4.8%			
36-Month Trend	5.2%	5.6%			
48-Month Trend	2.8%	4.5%			

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.

Top 5 Highest Percentage in Utilization Increases				
2019 Average 2020 Average				
Category	Utilization	Utilization	Highest %	
O- Durable Medical Equipment	0.01270	0.01566	23.3%	
HI-Medical / Surgical	0.00534	0.00642	20.2%	
HI- Maternity	0.00229	0.00263	14.8%	
PS-Psychiatric / Substance Abuse	0.07551	0.08544	13.2%	
HO-Psychiatric / Substance Abuse	0.00412	0.00451	9.6%	

Top 5 Highest Percentage in Cost / Service Increases					
2019 Average 2020 Average Top 5					
Category	Cost / Service	Cost / Service	Highest %		
HO-Psychiatric / Substance Abuse	\$153.27	\$205.78	34.3%		
PS-Immunizations/Allergy	84.51	98.45	16.5%		
HO-Medical / Surgical	488.55	564.63	15.6%		
HO-Other Services	255.93	294.45	15.1%		
PS-Anesthesia	297.71	325.68	9.4%		

Top 5 Highest Percentage in Cost / Capita Increases				
	Тор 5			
Category	Cost / Capita	Cost / Capita	Highest %	
HO-Psychiatric / Substance Abuse	\$0.63	\$0.93	47.1%	
HO-Other Services	40.70	48.44	19.0%	
HO-Medical / Surgical	48.80	57.91	18.7%	
O- Durable Medical Equipment	2.03	2.32	14.7%	
PS-Psychiatric / Substance Abuse	7.27	80.2	10.4%	

SUMMARY

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

	Fiscal Year 2021 Trends			
Claim Type	Previous Updated Assumption Assumption Change			
Non-Medicare – Medical	8.5%	5.0%	-3.5%	
Non-Medicare – Gross Prescription Drugs	12.5%	13.0%	0.5%	

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,

Jave Bond

(Revision: December 18, 2020)

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(Revision: December 18, 2020)

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West Virginia PEIA Non-Medicare Total Study Period of July 2016 to June 2020 (Allowed Claims)

Trends Summary - Excludes Drugs

	Utilization	24 Month Tren Cost / Service	•	Weight	Utilization	36 Month Trer Cost / Service	•	Weight	Utilization	48 Month Tre Cost / Service	•	Weight
HOSPITAL INPATIENT			<u>· · · · · · · · · · · · · · · · · · · </u>	<u></u>			<u> </u>	<u></u>		<u></u>	<u></u>	<u></u>
Maternity	14.8%	-10.2%	3.1%	1.2%	9.2%	-11.0%	-2.8%	1.3%	6.6%	-5.2%	1.0%	1.3%
Medical / Surgical	20.2%	-21.5%	-5.6%	15.1%	7.3%	-7.2%	-0.4%	15.8%	5.9%	-6.2%	-0.7%	16.3%
Psychiatric / Substance Abuse	-0.1%	-19.9%	-20.0%	0.5%	-5.1%	-1.0%	-6.1%	0.6%	-3.4%	-2.1%	-5.5%	0.6%
TOTAL	19.2%	-20.6%	-5.4%	16.8%	7.0%	-7.3%	-0.8%	17.6%	5.6%	-6.0%	-0.7%	18.2%
HOSPITAL OUTPATIENT												
Emergency Room	-5.3%	4.5%	-1.1%	6.1%	-1.3%	4.4%	3.1%	6.1%	-2.4%	7.0%	4.5%	6.0%
Medical / Surgical	2.7%	15.6%	18.7%	17.4%	5.7%	7.7%	13.9%	16.9%	4.8%	5.5%	10.6%	16.6%
Other Services	3.4%	15.1%	19.0%	14.3%	5.6%	13.1%	19.4%	13.5%	2.7%	10.3%	13.4%	13.2%
Psychiatric / Substance Abuse	9.6%	34.3%	47.1%	0.3%	12.3%	22.6%	37.7%	0.2%	5.0%	17.0%	22.8%	0.2%
TOTAL	1.7%	13.7%	15.7%	38.1%	4.5%	9.2%	14.2%	36.8%	2.8%	7.6%	10.7%	36.1%
PHYSICIAN SERVICES												
Anesthesia	-3.7%	9.4%	5.3%	2.0%	-1.0%	4.7%	3.7%	2.0%	-0.7%	3.3%	2.5%	2.0%
Chemotherapy / Radiation	-3.3%	2.6%	-0.8%	0.4%	0.8%	-6.3%	-5.6%	0.5%	5.8%	-7.5%	-2.1%	0.5%
Emergency Room	-11.3%	3.6%	-8.1%	1.0%	-4.9%	2.5%	-2.6%	1.0%	-3.4%	2.4%	-1.1%	1.0%
Immunizations / Injections / Allergy	-24.8%	16.5%	-12.4%	1.6%	-7.4%	12.0%	3.8%	1.6%	-1.3%	7.6%	6.3%	1.5%
Inpatient Surgery	1.0%	-9.2%	-8.3%	1.2%	0.2%	-5.8%	-5.7%	1.3%	0.8%	-2.3%	-1.5%	1.3%
Inpatient Visits	-4.7%	1.4%	-3.4%	1.2%	-1.7%	-0.9%	-2.6%	1.2%	-2.1%	1.5%	-0.6%	1.2%
Lab & Pathology	2.6%	-14.7%	-12.5%	2.3%	1.6%	-8.1%	-6.6%	2.4%	-0.6%	-4.3%	-4.8%	2.5%
Maternity	5.1%	1.4%	6.6%	1.2%	1.6%	1.5%	3.1%	1.2%	0.7%	1.0%	1.7%	1.2%
Office Visits	-2.9%	-3.7%	-6.5%	11.2%	-1.2%	-1.5%	-2.7%	11.5%	-1.9%	-0.4%	-2.3%	11.8%
Other Services	-5.2%	7.0%	1.4%	10.2%	-1.4%	5.8%	4.3%	10.1%	-1.6%	6.9%	5.2%	10.0%
Outpatient Surgery	6.6%	-9.7%	-3.7%	4.1%	5.6%	-5.8%	-0.5%	4.2%	4.3%	-3.8%	0.3%	4.2%
Psychiatric / Substance Abuse	13.2%	-2.4%	10.4%	2.6%	10.9%	0.1%	10.9%	2.5%	7.2%	1.7%	9.1%	2.4%
Radiology	-3.8%	1.3%	-2.6%	2.0%	1.5%	-0.8%	0.7%	2.0%	1.1%	2.0%	3.2%	2.0%
Therapies	1.9%	0.1%	2.1%	2.6%	5.5%	0.5%	6.1%	2.5%	4.3%	1.7%	6.1%	2.5%
TOTAL	-1.8%	-0.1%	-1.9%	43.6%	0.6%	0.4%	1.0%	44.0%	0.1%	1.5%	1.6%	44.2%
OTHER												
Ambulance	-6.7%	-9.5%	-15.6%	0.8%	-1.1%	-5.3%	-6.4%	0.8%	-0.5%	-1.8%	-2.2%	0.8%
Appliances (DME)	23.3%	-7.0%	14.7%	0.7%	8.5%	0.1%	8.6%	0.7%	2.5%	3.3%	5.9%	0.7%
TOTAL	7.3%	-8.3%	-1.6%	1.5%	3.3%	-2.8%	0.4%	1.6%	0.9%	0.5%	1.4%	1.6%
GRAND TOTAL	3.2%	1.6%	4.8%	100.0%	3.2%	2.3%	5.6%	100.0%	2.1%	2.3%	4.5%	100.0%

West Virginia PEIA Non-Medicare Total Study Period of July 2018 to June 2020 (Allowed Claims)

24 Month Trends Summary - Excludes Drugs

		In-State	I		OOS NBC	I		OOS BC			Total		In-State	OOS NBC	OOS BC	Total
	Utilization		Total Trend	Utilization		Total Trend	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Weight	Weight	Weight	Weight
HOSPITAL INPATIENT	ounzation	COSt / Service	Total menu	ounzation	COSt / Service	Total Henu	<u>ounzation</u>	COSt / Service	<u>Total Hellu</u>	Ullization	COSt / Service	Total Hellu	weight	weight	weight	weight
noornae in ranem																
Maternity	13.1%	-13.4%	-2.1%	70.9%	-5.1%	62.2%	5.6%	-30.9%	-26.9%	14.8%	-10.2%	3.1%	1.2%	0.7%	2.2%	1.2%
Medical / Surgical	21.2%	-20.2%	-3.2%	14.9%	-21.9%	-10.2%	18.4%	4.8%	24.2%	20.2%	-21.5%	-5.6%	9.9%	32.0%	21.1%	15.1%
Psychiatric / Substance Abuse	-2.6%	-24.9%	-26.9%	1.2%	-15.8%	-14.9%	72.5%	24.3%	114.4%	-0.1%	-19.9%	-20.0%	0.6%	0.4%	0.4%	0.5%
TOTAL	19.1%	-19.7%	-4.4%	15.9%	-21.4%	-9.0%	18.8%	4.3%	23.9%	19.2%	-20.6%	-5.4%	11.7%	33.1%	23.6%	16.8%
HOSPITAL OUTPATIENT																
Emergency Room	-6.0%	4.6%	-1.7%	3.3%	-18.2%	-15.4%	0.3%	12.4%	12.7%	-5.3%	4.5%	-1.1%	6.4%	3.1%	12.3%	6.1%
Medical / Surgical	3.0%	13.6%	17.0%	-5.1%	30.2%	23.5%	5.9%	20.1%	27.1%	2.7%	15.6%	18.7%	19.0%	10.9%	19.2%	17.4%
Other Services	3.3%	14.3%	18.0%	0.0%	18.9%	18.8%	12.8%	13.5%	28.0%	3.4%	15.1%	19.0%	14.8%	12.3%	15.5%	14.3%
Psychiatric / Substance Abuse	18.1%	87.1%	120.9%	-14.6%	-19.6%	-31.3%	-21.0%	13.9%	-10.0%	9.6%	34.3%	47.1%	0.2%	0.3%	0.2%	0.3%
TOTAL	1.8%	12.9%	14.8%	-1.9%	18.6%	16.4%	8.1%	16.0%	25.4%	1.7%	13.7%	15.7%	40.3%	26.6%	47.2%	38.1%
PHYSICIAN SERVICES																
Anesthesia	-5.2%	11.3%	5.5%	11.1%	-8.2%	1.9%	3.0%	1.5%	4.6%	-3.7%	9.4%	5.3%	2.1%	1.8%	1.4%	2.0%
Chemotherapy / Radiation	-3.7%	3.7%	-0.1%	-8.4%	5.8%	-3.2%	12.8%	-14.9%	-4.0%	-3.3%	2.6%	-0.8%	0.5%	0.3%	0.4%	0.4%
Emergency Room	-12.3%	5.4%	-7.6%	4.0%	-9.0%	-5.4%	-8.4%	-9.1%	-16.8%	-11.3%	3.6%	-8.1%	1.0%	0.6%	1.4%	1.0%
Immunizations / Injections / Allergy	-27.1%	18.0%	-14.0%	31.6%	-22.7%	1.7%	-21.3%	12.1%	-11.7%	-24.8%	16.5%	-12.4%	2.0%	0.4%	0.9%	1.6%
Inpatient Surgery	2.8%	-10.4%	-7.9%	-7.5%	-1.7%	-9.1%	-1.6%	-8.6%	-10.1%	1.0%	-9.2%	-8.3%	1.2%	1.4%	0.5%	1.2%
Inpatient Visits	-3.6%	4.4%	0.6%	-11.3%	-2.6%	-13.6%	-0.7%	-1.8%	-2.4%	-4.7%	1.4%	-3.4%	1.2%	1.3%	0.6%	1.2%
Lab & Pathology	5.5%	-9.9%	-4.9%	-4.9%	-13.8%	-18.1%	16.2%	-38.9%	-29.0%	2.6%	-14.7%	-12.5%	1.4%	5.6%	1.3%	2.3%
Maternity	0.1%	4.5%	4.6%	21.6%	-0.2%	21.4%	55.0%	-28.1%	11.4%	5.1%	1.4%	6.6%	1.4%	0.9%	0.5%	1.2%
Office Visits	-3.6%	-3.4%	-6.8%	9.0%	-7.5%	0.8%	0.2%	-8.6%	-8.4%	-2.9%	-3.7%	-6.5%	14.0%	3.1%	6.6%	11.2%
Other Services	-7.1%	-6.0%	-12.6%	9.3%	13.8%	24.4%	3.7%	-20.5%	-17.5%	-5.2%	7.0%	1.4%	8.1%	18.8%	7.6%	10.2%
Outpatient Surgery	6.4%	-9.5%	-3.7%	8.5%	-8.3%	-0.5%	9.1%	-17.0%	-9.5%	6.6%	-9.7%	-3.7%	4.7%	2.0%	3.5%	4.1%
Psychiatric / Substance Abuse	13.4%	-1.6%	11.6%	10.7%	-14.6%	-5.5%	11.4%	-9.1%	1.3%	13.2%	-2.4%	10.4%	3.3%	0.7%	0.6%	2.6%
Radiology	-4.0%	0.7%	-3.3%	-2.5%	9.5%	6.7%	-1.0%	-5.3%	-6.2%	-3.8%	1.3%	-2.6%	2.2%	1.1%	2.3%	2.0%
Therapies	1.6%	0.7%	2.3%	8.3%	-16.2%	-9.2%	6.5%	-2.4%	4.0%	1.9%	0.1%	2.1%	3.4%	0.3%	0.9%	2.6%
·																
TOTAL	-2.4%	-1.9%	-4.2%	5.9%	2.7%	8.8%	6.0%	-18.8%	-13.9%	-1.8%	-0.1%	-1.9%	46.5%	38.2%	28.6%	43.6%
OTHER																
Ambulance	-11.8%	-9.2%	-19.9%	45.6%	-22.6%	12.8%	59.8%	-51.8%	-23.0%	-6.7%	-9.5%	-15.6%	0.9%	0.7%	0.5%	0.8%
Appliances (DME)	44.8%	6.0%	53.5%	-80.3%	0.4%	-80.3%	-10.6%	34.6%	20.4%	23.3%	-7.0%	14.7%	0.6%	1.4%	0.1%	0.7%
TOTAL	11.3%	-3.0%	7.9%	-37.2%	-7.5%	-41.9%	13.5%	5.0%	19.2%	7.3%	-8.3%	-1.6%	1.5%	2.1%	0.6%	1.5%
	0.004	4.001	4.6%	0.00/	4.007	4.6%	44.004		0.000	0.007	4 694	4.6%	400 00/	400 00/	400 00/	400.00
GRAND TOTAL	2.0%	1.9%	4.0%	6.2%	-1.2%	4.9%	11.0%	-1.4%	9.4%	3.2%	1.6%	4.8%	100.0%	100.0%	100.0%	100.0%

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

36 Month Trends Summary - Excludes Drugs

		In-State	I		OOS NBC			OOS BC			Total		In-State	OOS NBC	OOS BC	Total
	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization		Total Trend	Utilization		Total Trend	Weight	Weight	Weight	Weight
HOSPITAL INPATIENT	0.0020000	00317 0017100	<u>. otar menu</u>	<u>o anzation</u>		<u>. otar menu</u>	<u>o anzation</u>	00317 0017100	<u></u>	<u>o (11/2/10/11</u>	00007 0017100	<u></u>	meight	reight	Height	meight
Maternity	8.8%	-3.4%	5.1%	44.0%	-2.2%	40.8%	-3.6%	-40.8%	-42.9%	9.2%	-11.0%	-2.8%	1.2%	1.0%	2.6%	1.3%
Medical / Surgical	8.3%	-2.0%	6.1%	3.4%	-10.3%	-7.2%	0.1%	4.9%	5.0%	7.3%	-7.2%	-0.4%	10.0%	33.8%	22.0%	15.8%
Psychiatric / Substance Abuse	-2.9%	-6.4%	-9.1%	-7.4%	-17.7%	-23.8%	-24.0%	8.9%	-17.3%	-5.1%	-1.0%	-6.1%	0.6%	0.4%	0.5%	0.6%
TOTAL	7.8%	-2.4%	5.2%	4.5%	-10.1%	-6.1%	-0.3%	3.6%	3.3%	7.0%	-7.3%	-0.8%	11.9%	35.1%	25.1%	17.6%
HOSPITAL OUTPATIENT																
Emergency Room	-1.3%	4.4%	3.1%	0.9%	-4.9%	-4.1%	-3.9%	10.9%	6.6%	-1.3%	4.4%	3.1%	6.4%	3.1%	11.4%	6.1%
Medical / Surgical	6.5%	6.9%	13.9%	-3.2%	22.7%	18.8%	-6.0%	7.6%	1.2%	5.7%	7.7%	13.9%	18.7%	10.2%	18.8%	16.9%
Other Services	5.8%	13.4%	20.0%	1.3%	17.7%	19.2%	3.1%	9.8%	13.2%	5.6%	13.1%	19.4%	14.1%	11.4%	14.5%	13.5%
Psychiatric / Substance Abuse	16.8%	57.6%	84.1%	1.5%	-10.5%	-9.2%	-6.1%	14.9%	7.9%	12.3%	22.6%	37.7%	0.2%	0.3%	0.2%	0.2%
TOTAL	5.0%	9.1%	14.6%	-0.6%	16.5%	15.8%	-1.6%	9.1%	7.4%	4.5%	9.2%	14.2%	39.3%	25.1%	45.0%	36.8%
IOTAL	5.0 %	3.1 %	14.0 %	-0.0 %	10.5%	15.0 %	-1.0 %	3.1 %	7.4 /0	4.5 %	9.2 /0	14.2 /0	39.3%	25.1%	45.0 %	30.0 %
PHYSICIAN SERVICES																
Anesthesia	-1.1%	5.2%	4.1%	5.0%	0.2%	5.1%	-8.3%	-0.4%	-8.6%	-1.0%	4.7%	3.7%	2.1%	1.7%	1.5%	2.0%
Chemotherapy / Radiation	1.1%	-4.0%	-3.0%	-7.0%	-8.7%	-15.1%	3.9%	-13.7%	-10.4%	0.8%	-6.3%	-5.6%	0.5%	0.3%	0.4%	0.5%
Emergency Room	-5.1%	3.2%	-2.1%	-0.3%	-0.2%	-0.5%	-7.2%	-0.1%	-7.3%	-4.9%	2.5%	-2.6%	1.1%	0.6%	1.4%	1.0%
Immunizations / Injections / Allergy	-7.4%	13.5%	5.1%	4.6%	-9.6%	-5.4%	-17.2%	12.0%	-7.3%	-7.4%	12.0%	3.8%	2.0%	0.4%	0.9%	1.6%
Inpatient Surgery	2.3%	-7.0%	-4.8%	-6.9%	2.4%	-4.6%	-15.6%	-8.7%	-23.0%	0.2%	-5.8%	-5.7%	1.3%	1.4%	0.6%	1.3%
Inpatient Visits	0.1%	2.3%	2.4%	-9.9%	-5.5%	-14.8%	-4.6%	-2.8%	-7.3%	-1.7%	-0.9%	-2.6%	1.2%	1.4%	0.6%	1.2%
Lab & Pathology	3.8%	-6.9%	-3.4%	-3.1%	-6.1%	-9.0%	4.9%	-21.3%	-17.5%	1.6%	-8.1%	-6.6%	1.5%	5.9%	1.4%	2.4%
Maternity	-0.4%	4.4%	4.0%	8.0%	-4.6%	3.1%	21.6%	-22.1%	-5.3%	1.6%	1.5%	3.1%	1.4%	0.9%	0.6%	1.2%
Office Visits	-1.3%	-1.4%	-2.7%	4.9%	-1.7%	3.1%	-4.3%	-4.4%	-8.5%	-1.2%	-1.5%	-2.7%	14.4%	3.0%	6.7%	11.5%
Other Services	-1.1%	-2.0%	-3.1%	-3.9%	20.8%	16.2%	-1.2%	-10.8%	-11.9%	-1.4%	5.8%	4.3%	8.3%	17.5%	8.0%	10.1%
Outpatient Surgery	5.7%	-4.9%	0.6%	4.5%	-7.0%	-2.9%	3.5%	-12.8%	-9.8%	5.6%	-5.8%	-0.5%	4.9%	2.1%	3.6%	4.2%
Psychiatric / Substance Abuse	11.5%	0.0%	11.5%	8.5%	-0.1%	8.4%	-7.3%	-2.2%	-9.3%	10.9%	0.1%	10.9%	3.2%	0.6%	0.6%	2.5%
Radiology	2.1%	-1.0%	1.1%	-2.2%	9.1%	6.7%	-5.7%	-3.1%	-8.6%	1.5%	-0.8%	0.7%	2.2%	1.1%	2.3%	2.0%
Therapies	5.6%	0.5%	6.1%	7.1%	-2.9%	4.1%	1.7%	4.5%	6.3%	5.5%	0.5%	6.1%	3.3%	0.2%	0.8%	2.5%
•																-
TOTAL	1.0%	-0.7%	0.3%	-1.8%	8.1%	6.2%	-1.1%	-10.6%	-11.6%	0.6%	0.4%	1.0%	47.4%	37.4%	29.3%	44.0%
OTHER																
Ambulance	-3.9%	-6.3%	-10.0%	33.7%	-10.1%	20.3%	39.3%	-10.0%	25.4%	-1.1%	-5.3%	-6.4%	0.9%	0.7%	0.4%	0.8%
Appliances (DME)	53.2%	6.0%	62.4%	-52.5%	32.7%	-37.0%	-11.4%	12.2%	-0.6%	8.5%	0.1%	8.6%	0.5%	1.7%	0.1%	0.7%
TOTAL			10.00			10								• •••		
TOTAL	15.9%	-2.0%	13.6%	-27.5%	20.3%	-12.8%	3.3%	5.8%	9.3%	3.3%	-2.8%	0.4%	1.4%	2.4%	0.5%	1.6%
GRAND TOTAL	3.6%	2.9%	6.6%	0.1%	4.1%	4.2%	-0.8%	-0.3%	-1.1%	3.2%	2.3%	5.6%	100.0%	100.0%	100.0%	100.0%
SIGNE TOTAL	3.0 /0	2.3 /0	0.0 /0	0.1/0	4.1/0	4.2 /0	-0.0 /0	-0.3 /0	-1.1/0	J.2 /0	2.3 /0	3.0 /0	100.0 /6	100.0 /6	100.0 /0	100.0 /0

West Virginia PEIA Non-Medicare Total Study Period of July 2016 to June 2020 (Allowed Claims)

48 Month Trends Summary - Excludes Drugs

		In-State	r		OOS NBC			OOS BC			Total		In-State	OOS NBC	OOS BC	Total
	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization		Total Trend	Utilization		Total Trend	Weight	Weight	Weight	Weight
HOSPITAL INPATIENT	Junzauvil	<u></u>	<u>. otar menu</u>	<u>sunzauon</u>	<u></u>	<u>. otar menu</u>	sunzation	<u></u>	<u>. otar menu</u>	Junzation	COSCI DEIVICE	<u>.otai menu</u>	mergint	mergint	moight	magni
Maternity	7.3%	0.2%	7.5%	19.3%	-1.7%	17.3%	-9.1%	-27.3%	-33.9%	6.6%	-5.2%	1.0%	1.2%	1.0%	2.7%	1.3%
Medical / Surgical	6.8%	-1.6%	5.1%	2.2%	-2.2%	-0.1%	0.0%	4.5%	4.5%	5.9%	-6.2%	-0.7%	10.1%	35.6%	22.1%	16.3%
Psychiatric / Substance Abuse	-3.8%	-2.4%	-6.1%	-2.1%	-25.7%	-27.2%	-6.1%	9.6%	3.0%	-3.4%	-2.1%	-5.5%	0.7%	0.4%	0.5%	0.6%
-																
TOTAL	6.3%	-1.5%	4.7%	2.6%	-2.5%	0.1%	-0.3%	3.7%	3.3%	5.6%	-6.0%	-0.7%	12.0%	37.1%	25.3%	18.2%
HOSPITAL OUTPATIENT																
Emergency Room	-2.2%	7.1%	4.7%	-1.7%	1.6%	-0.1%	-5.5%	9.5%	3.5%	-2.4%	7.0%	4.5%	6.4%	3.1%	10.7%	6.0%
Medical / Surgical	5.6%	5.8%	11.7%	-2.4%	19.8%	17.0%	-7.9%	-4.3%	-11.8%	4.8%	5.5%	10.6%	18.3%	9.8%	19.2%	16.6%
Other Services	3.0%	11.7%	15.1%	0.2%	14.4%	14.6%	-3.4%	0.3%	-3.1%	2.7%	10.3%	13.4%	13.7%	11.0%	14.9%	13.2%
Psychiatric / Substance Abuse	11.7%	47.0%	64.1%	-12.0%	-2.2%	-13.9%	-11.4%	2.1%	-9.5%	5.0%	17.0%	22.8%	0.2%	0.4%	0.2%	0.2%
TOTAL	0.494	0.00/	10.00/	4.00/		10.0%		• • • •			- 00/	10 - 20/				00.494
TOTAL	3.4%	8.3%	12.0%	-1.3%	14.7%	13.3%	-5.6%	-0.4%	-5.9%	2.8%	7.6%	10.7%	38.5%	24.3%	45.0%	36.1%
PHYSICIAN SERVICES																
PHI SICIAN SERVICES																
Anesthesia	-0.1%	2.6%	2.5%	-1.8%	6.5%	4.6%	-11.5%	3.4%	-8.5%	-0.7%	3.3%	2.5%	2.1%	1.7%	1.5%	2.0%
Chemotherapy / Radiation	6.4%	-7.5%	-1.6%	-1.1%	1.0%	-0.2%	0.2%	-11.3%	-11.2%	5.8%	-7.5%	-2.1%	0.5%	0.3%	0.4%	0.5%
Emergency Room	-3.4%	1.2%	-2.3%	-2.6%	5.8%	3.0%	-3.6%	8.2%	4.3%	-3.4%	2.4%	-1.1%	1.1%	0.6%	1.2%	1.0%
Immunizations / Injections / Allergy	-3.4 %	8.6%	7.0%	-2.0%	-3.7%	13.8%	-12.8%	5.8%	-7.7%	-1.3%	7.6%	6.3%	1.1%	0.0%	0.9%	1.5%
Inpatient Surgery	2.4%	-2.8%	-0.5%	-3.6%	5.5%	1.7%	-12.0%	-6.3%	-17.7%	0.8%	-2.3%	-1.5%	1.3%	1.5%	0.6%	1.3%
Inpatient Visits	-1.1%	-2.8%	-0.5 % 2.1%	-6.7%	-0.9%	-7.6%	-12.2%	0.3%	-17.7%	-2.1%	-2.3%	-0.6%	1.3%	1.5%	0.6%	1.3%
Lab & Pathology	-1.1%	-4.2%	-2.6%	-0.7%	-1.6%	-6.3%	-2.8%	-14.8%	-2.5 % -14.4%	-0.6%	-4.3%	-0.8%	1.2%	6.1%	1.5%	2.5%
Maternity	0.7%	-4.2%	-2.8%	-4.8%	0.2%	-6.3 %	-4.8%	-14.8%	-14.4 %	-0.0%	-4.3%	-4.8 % 1.7%	1.4%	0.1%	0.7%	1.2%
Office Visits	-1.8%	-0.4%	-2.2%	2.0%	1.6%	3.6%	-4.0% -7.1%	-12.5%	-16.7%	-1.9%	-0.4%	-2.3%	14.9%	0.9% 3.0%	0.7% 6.7%	1.2%
-																-
Other Services	-1.3%	-0.1%	-1.4%	-1.9%	22.1%	19.7%	-6.2%	-2.2%	-8.2%	-1.6%	6.9%	5.2%	8.5%	16.2%	7.8%	10.0%
Outpatient Surgery	4.7%	-3.4%	1.2%	2.1%	-0.3%	1.8%	-1.6%	-10.2%	-11.6%	4.3%	-3.8%	0.3%	4.9%	2.1%	3.7%	4.2%
Psychiatric / Substance Abuse	8.1%	1.6%	9.8%	1.4%	2.7%	4.2%	-9.4%	-0.4%	-9.8%	7.2%	1.7%	9.1%	3.1%	0.6%	0.6%	2.4%
Radiology	1.7%	2.2%	3.9%	-1.7%	9.6%	7.7%	-8.0%	-0.1%	-8.1%	1.1%	2.0%	3.2%	2.2%	1.0%	2.3%	2.0%
Therapies	4.6%	1.6%	6.3%	2.0%	0.0%	2.1%	-0.8%	4.3%	3.4%	4.3%	1.7%	6.1%	3.3%	0.2%	0.8%	2.5%
TOTAL	0.6%	0.2%	0.8%	-1.7%	10.6%	8.7%	-5.3%	-4.5%	-9.5%	0.1%	1.5%	1.6%	48.1%	36.2%	29.2%	44.2%
IOTAL	0.6%	0.2%	0.0%	-1.7%	10.6%	0.7%	-5.3%	-4.5%	-9.5%	0.1%	1.5%	1.0%	40.1%	30.2%	29.2%	44.2%
OTHER																
OTHER																
Ambulance	-1.8%	-4.0%	-5.7%	23.3%	4.0%	28.2%	-0.1%	3.3%	3.2%	-0.5%	-1.8%	-2.2%	1.0%	0.6%	0.4%	0.8%
Appliances (DME)	38.1%	4.6%	44.4%	-31.6%	36.2%	-6.9%	-1.9%	-3.1%	-5.0%	2.5%	3.3%	5.9%	0.5%	1.8%	0.1%	0.7%
·	00.170			0	00.270	0.0 /0		0	0.0 /0	2.070	0.070	0.0 /0	0.070		0	0
TOTAL	11.0%	-1.2%	9.7%	-17.4%	27.9%	5.6%	-1.5%	-1.5%	-2.9%	0.9%	0.5%	1.4%	1.4%	2.5%	0.5%	1.6%
GRAND TOTAL	2.5%	3.1%	5.7%	-0.4%	7.2%	6.8%	-3.4%	-0.4%	-3.8%	2.1%	2.3%	4.5%	100.0%	100.0%	100.0%	100.0%

West Virginia PEIA Non-Medicare Total Study Period of July 2019 to June 2020 (Allowed Claims) 12 Month Summary - Excludes Drugs

			Num	ber of Visits						Total Allow	wed Cost			
	In-State	OOS NBC	OOS BC	Total	In-State %	OOS NBC %	OOS BC %	In-State	OOS NBC	OOS BC	Total	In-State %	OOS NBC %	OOS BC %
HOSPITAL INPATIENT														
Maternity	4,859	280	274	5,413	89.8%	5.2%	5.1%	5,269,050	1,059,518	1,011,726	7,340,294	71.8%	14.4%	13.8%
Medical / Surgical	10,803	1,612	591	13,006	83.1%	12.4%	4.5%	40,311,041	34,356,781	9,001,729	83,669,551	48.2%	41.1%	10.8%
Psychiatric / Substance Abuse	767	246	33	1,046	73.3%	23.6%	3.1%	2,057,373	458,613	172,826	2,688,812	76.5%	17.1%	6.4%
TOTAL	16,429	2,138	898	19,466	84.4%	11.0%	4.6%	47,637,465	35,874,912	10,186,281	93,698,657	50.8%	38.3%	10.9%
HOSPITAL OUTPATIENT														
Emergency Room	47,722	2,663	2,412	52,797	90.4%	5.0%	4.6%	26,007,713	3,488,203	5,299,197	34,795,113	74.7%	10.0%	15.2%
Medical / Surgical	192,319	8,357	4,915	205,590	93.5%	4.1%	2.4%	83,353,509	13,847,127	8,403,060	105,603,696	78.9%	13.1%	8.0%
Other Services	310,800	9,883	10,013	330,696	94.0%	3.0%	3.0%	65,239,576	15,003,321	7,031,317	87,274,214	74.8%	17.2%	8.1%
Psychiatric / Substance Abuse	7,256	1,733	319	9,308	78.0%	18.6%	3.4%	1,320,677	320,592	72,811	1,714,080	77.0%	18.7%	4.2%
-														
TOTAL	558,096	22,637	17,658	598,392	93.3%	3.8%	3.0%	175,921,475	32,659,243	20,806,385	229,387,103	76.7%	14.2%	9.1%
PHYSICIAN SERVICES														
Anesthesia	31,539	3,067	1,385	35,992	87.6%	8.5%	3.8%	8,556,316	2,021,760	583,998	11,162,074	76.7%	18.1%	5.2%
Chemotherapy / Radiation	35,391	1,465	1,629	38,485	92.0%	3.8%	4.2%	1,936,801	248,907	155,975	2,341,683	82.7%	10.6%	6.7%
Emergency Room	33,882	2,349	1,622	37,852	89.5%	6.2%	4.3%	4,152,630	748,234	491,500	5,392,365	77.0%	13.9%	9.1%
Immunizations / Injections / Allergy	108,444	7,308	3,260	119,012	91.1%	6.1%	2.7%	8,054,486	567,395	341,381	8,963,262	89.9%	6.3%	3.8%
Inpatient Surgery	6,723	1,101	252	8,076	83.2%	13.6%	3.1%	4,715,904	1,470,177	189,124	6,375,206	74.0%	23.1%	3.0%
Inpatient Visits	43,389	7,977	1,867	53,233	81.5%	15.0%	3.5%	4,841,370	1,348,285	227,954	6,417,610	75.4%	21.0%	3.6%
Lab & Pathology	211,847	94,331	12,037	318,215	66.6%	29.6%	3.8%	5,642,623	5,571,429	384,705	11,598,758	48.6%	48.0%	3.3%
Maternity	25,205	6,177	1,398	32,781	76.9%	18.8%	4.3%	5,804,022	1,151,772	230,587	7,186,382	80.8%	16.0%	3.2%
Office Visits	678,617	34,340	27,595	740,551	91.6%	4.6%	3.7%	54,997,214	3,565,022	2,531,069	61,093,305	90.0%	5.8%	4.1%
Other Services	307,045	39,806	14,640	361,491	84.9%	11.0%	4.0%	30,540,271	23,939,608	2,748,197	57,228,076	53.4%	41.8%	4.8%
Outpatient Surgery	128,719	7,620	5,373	141,712	90.8%	5.4%	3.8%	18,613,079	2,281,443	1,309,093	22,203,615	83.8%	10.3%	5.9%
Psychiatric / Substance Abuse	150,935	10,656	3,132	164,723	91.6%	6.5%	1.9%	14,187,728	738,438	222,051	15,148,217	93.7%	4.9%	1.5%
Radiology	188,181	13,205	7,193	208,580	90.2%	6.3%	3.4%	8,953,915	1,295,660	908,593	11,158,168	80.2%	11.6%	8.1%
Therapies	177,162	4,828	6,841	188,831	93.8%	2.6%	3.6%	14,184,579	262,834	357,351	14,804,764	95.8%	1.8%	2.4%
TOTAL	2,127,078	234,230	88,225	2,449,534	86.8%	9.6%	3.6%	495 499 944	45,210,964	40 004 570	241,073,483	76.8%	18.8%	4.4%
IUIAL	2,127,078	234,230	00,225	2,449,534	00.0%	9.0%	3.0%	185,180,941	45,210,964	10,681,579	241,073,463	10.0%	10.0%	4.4%
OTHER														
omen														
Ambulance	6,112	758	267	7,137	85.6%	10.6%	3.7%	3,093,086	1,059,700	173,330	4,326,117	71.5%	24.5%	4.0%
Appliances (DME)	26,679	3,288	558	30,525	87.4%	10.8%	1.8%	2,958,613	1,297,154	45,025	4,300,791	68.8%	30.2%	1.0%
,		·												
TOTAL	32,791	4,046	825	37,663	87.1%	10.7%	2.2%	6,051,699	2,356,854	218,355	8,626,908	70.1%	27.3%	2.5%
GRAND TOTAL	2,762,609	268,904	109,815	3,141,329	87.9%	8.6%	3.5%	414,791,579	116,101,973	41,892,600	572,786,152	72.4%	20.3%	7.3%

West Virginia PEIA Non-Medicare Prescription Drugs Total Study Period of July 2016 to June 2020 (Paid Claims)

<u>24 Month Trends Summary</u>

	Utilization	Cost / Prescription	<u>Total Trend</u>
Non-Medicare	2.9%	11.2%	14.4%

<u>36 Month Trends Summary</u>

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	3.9%	12.8%	17.2%

<u>48 Month Trends Summary</u>

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	-3.8%	18.5%	13.9%

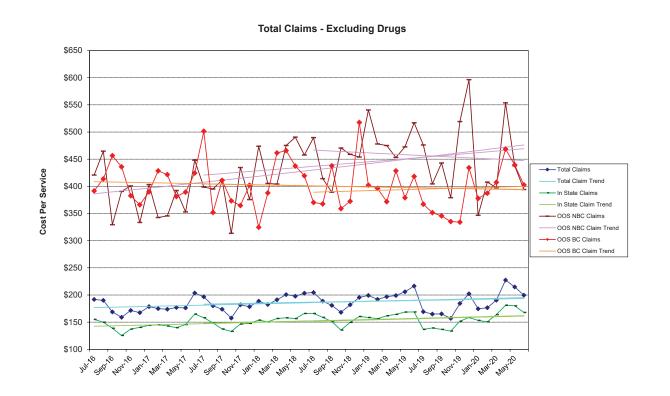
Appendix A

GRAND TOTAL

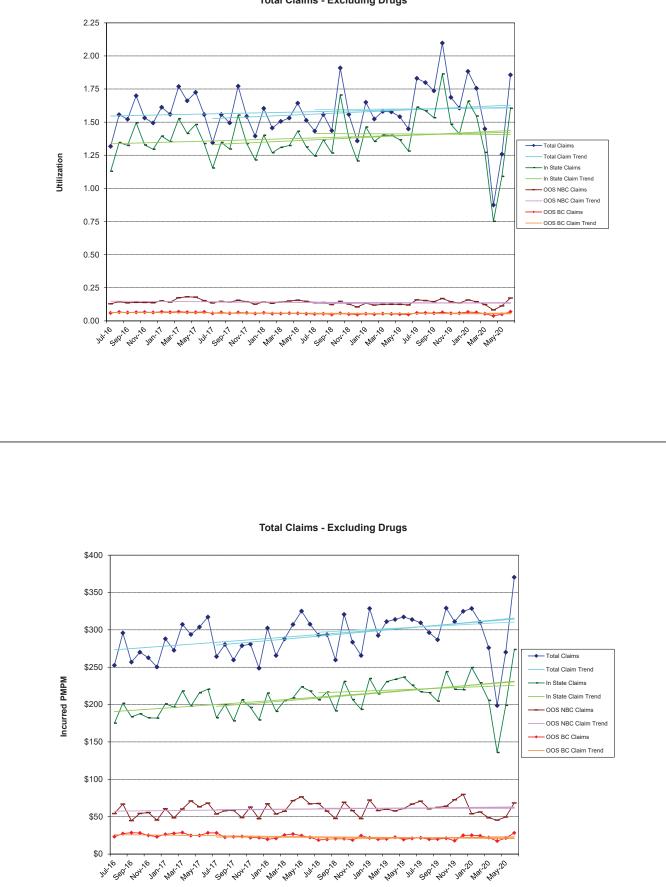
24-Month Trends Summary							
<u>Utilization</u>	Cost / Service	Total Trend					
3.2%	3.2% 1.6% 4.8%						
0.270	1.070	7.070					

36-N	36-Month Trends Summary							
<u>Utilization</u>	Cost / Service	Total Trend						
3.2%	2.3%	5.6%						

48-	48-Month Trends Summary							
<u>Utilization</u>	Utilization Cost / Service Total Trend							
2.1%	2.3%	4.5%						



Total Claims - Excluding Drugs



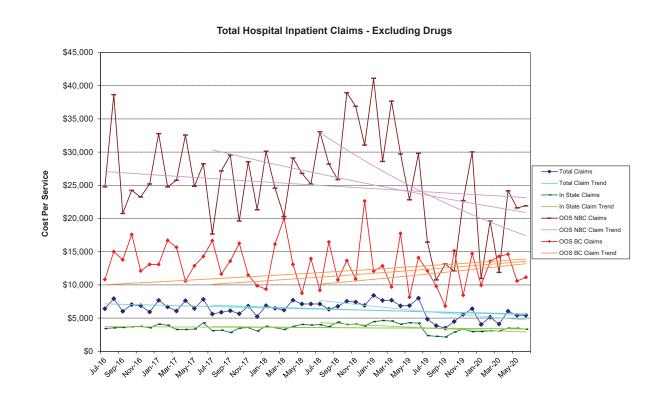
HOSPITAL INPATIENT

TOTAL

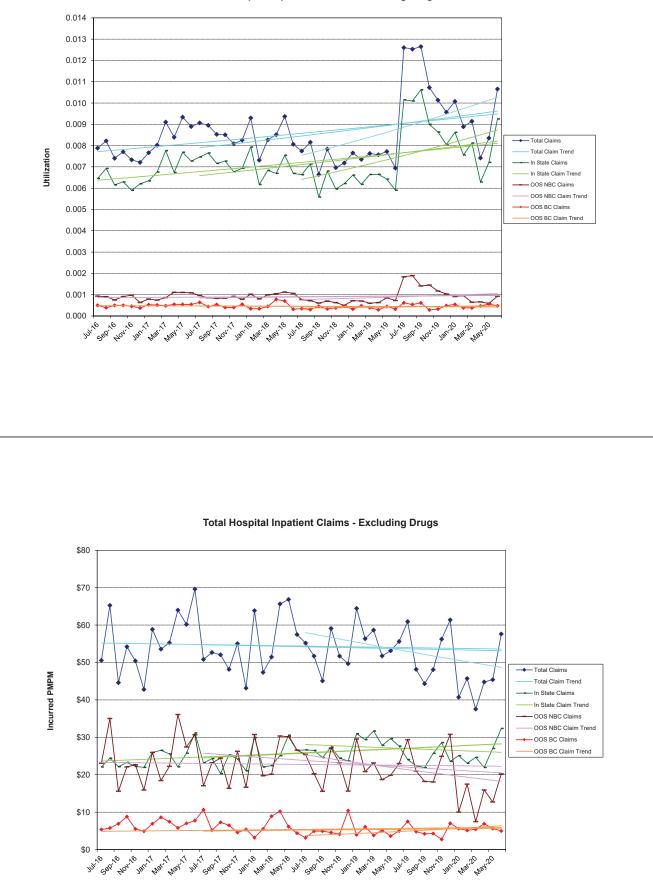
24-Month Trends Summary									
Utilization	Utilization Cost / Service Total Trend								
19.2%	-20.6%	-5.4%							

36-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
7.0%	-7.3%	-0.8%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
5.6%	-6.0%	-0.7%



Total Hospital Inpatient Claims - Excluding Drugs



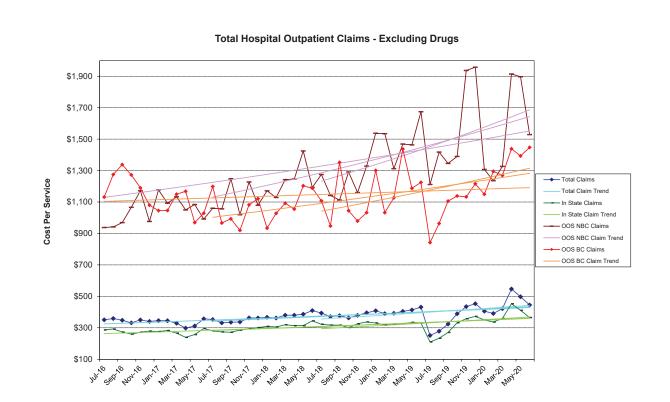
HOSPITAL OUTPATIENT

TOTAL

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
1.7%	13.7%	15.7%

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
4.5%	9.2%	14.2%

48-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
2.8%	7.6%	10.7%



Total Hospital Outpatient Claims - Excluding Drugs 0.50 0.45 0.40 0.35 0.30 Total Claims Utilization Total Claim Trend In State Claims 0.25 In State Claim Trend OOS NBC Claims 0.20 OOS NBC Claim Trend OOS BC Claims OOS BC Claim Tre 0.15 0.10 0.05 0.00 Jan 1 Maril MayII JUL-17 H04-17 . Jan 18 Nar.19 May 19 , Jul 19 H04.19 5001 Mar-18 Mayis Sec. 0 Jan-20 Mar-20 JU1-18 May-20 JU1-16 0 10 2 ~8 <u>م</u> Sali Ser 202 **Total Hospital Outpatient Claims - Excluding Drugs** \$160 \$140 \$120 \$100 Total Claims Incurred PMPM Total Claim Trend In State Claims \$80 In State Claim Trend OOS NBC Claims OOS NBC Claim Trend \$60 OOS BC Claims OOS BC Claim Trend \$40 \$20 \$0 May-20 0 2 20 ŝ Nat

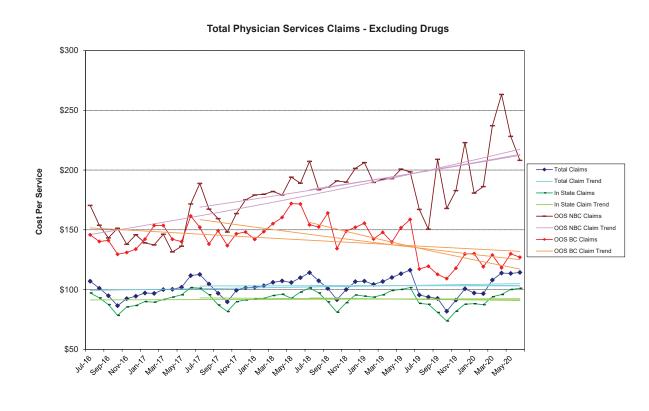
PHYSICIAN SERVICES

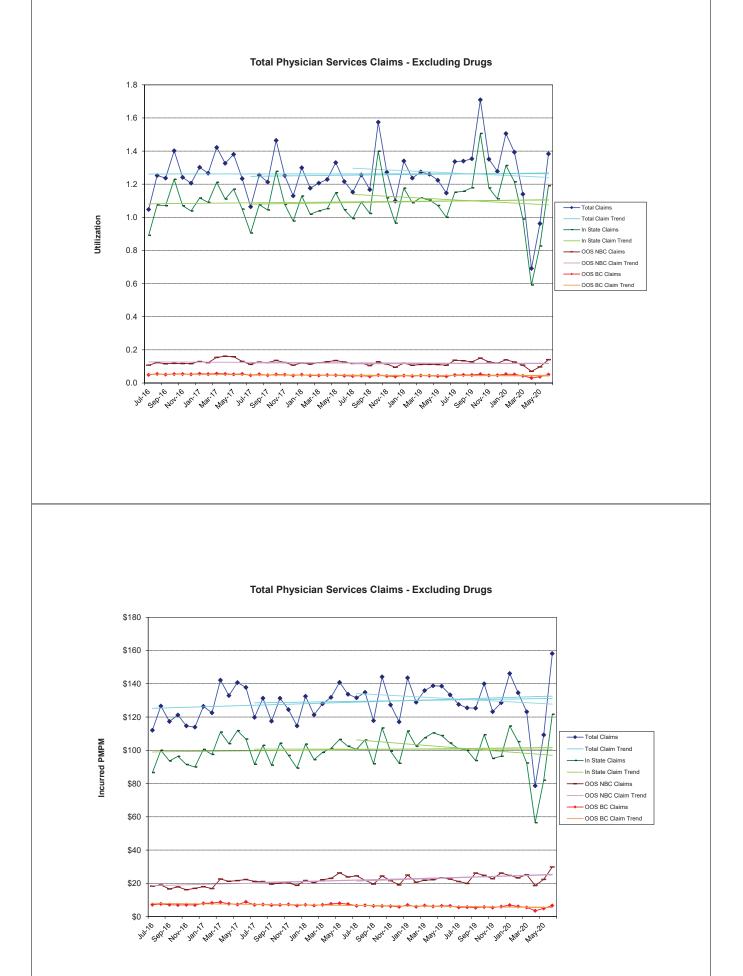
TOTAL

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-1.8%	-0.1%	-1.9%

36-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
0.6%	0.4%	1.0%

48-Month Trends Summary		
<u>Utilization</u>	Cost / Service	<u>Total Trend</u>
0.1%	1.5%	1.6%





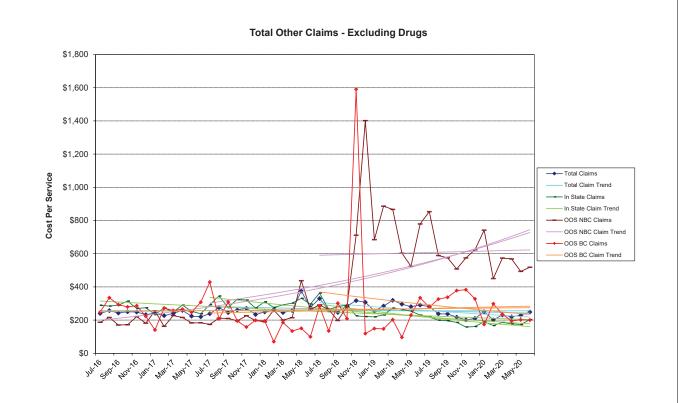
OTHER

TOTAL

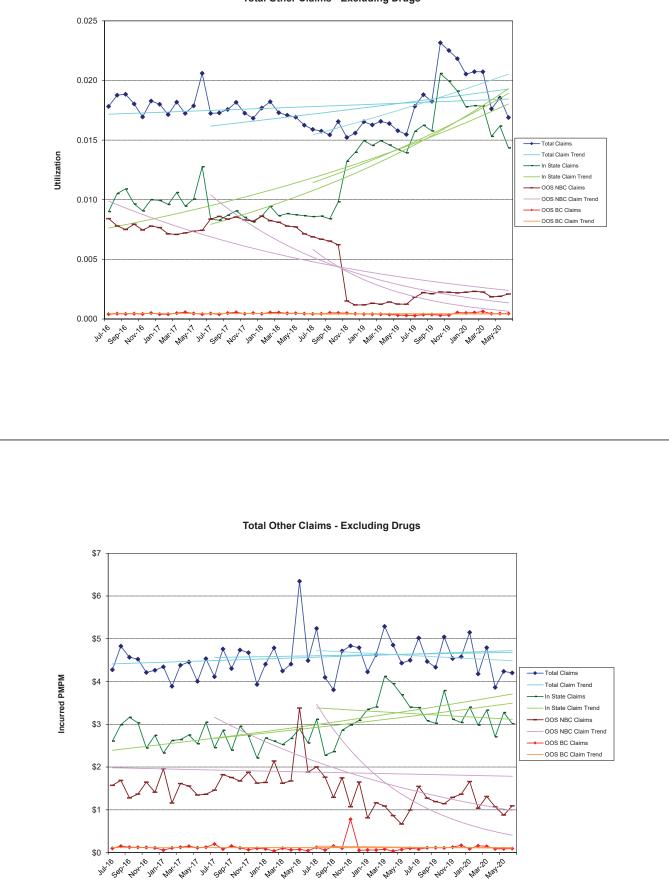
24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
7.3%	-8.3%	-1.6%

36-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
3.3%	-2.8%	0.4%

48-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
0.0%	0.5%	4 40/
0.9%	0.5%	1.4%



Total Other Claims - Excluding Drugs



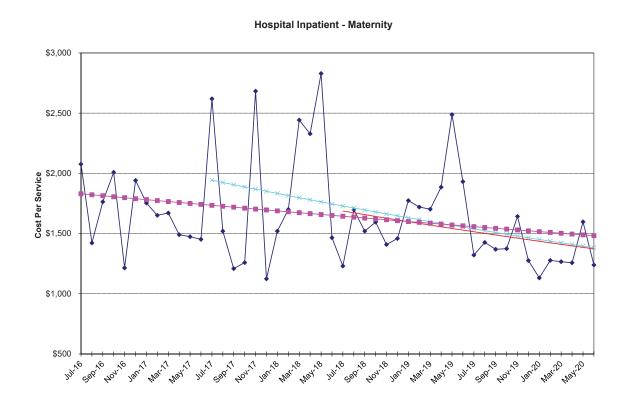
HOSPITAL INPATIENT

Maternity

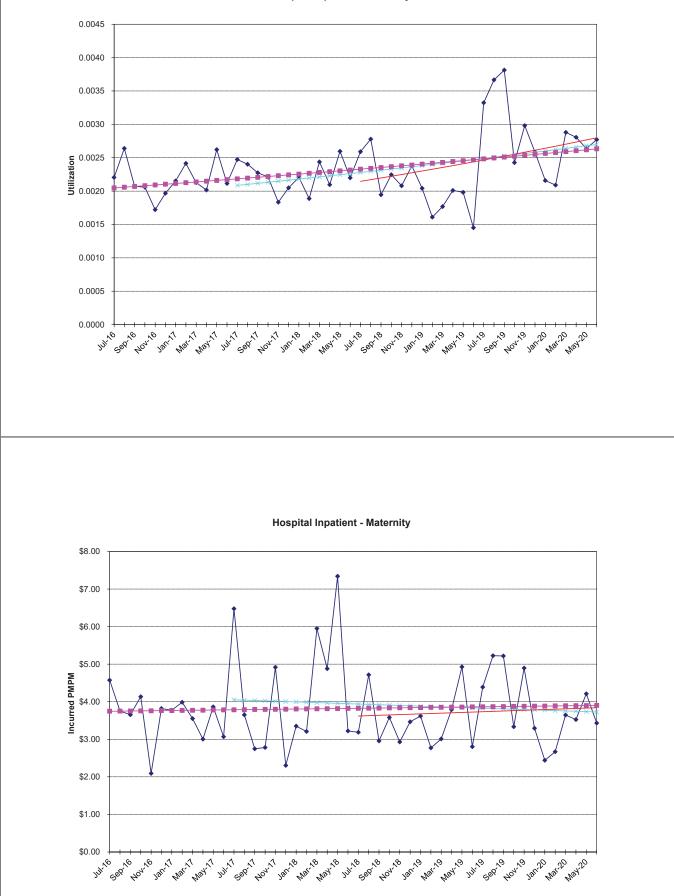
24-Month Trends Summary		
Utilization	Cost / Service	<u>Total Trend</u>
14.8%	-10.2%	3.1%

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
9.2%	-11.0%	-2.8%

48-Month Trends Summary		
Cost / Service	Total Trend	
5 2%	1.0%	



Hospital Inpatient - Maternity



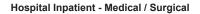
HOSPITAL INPATIENT

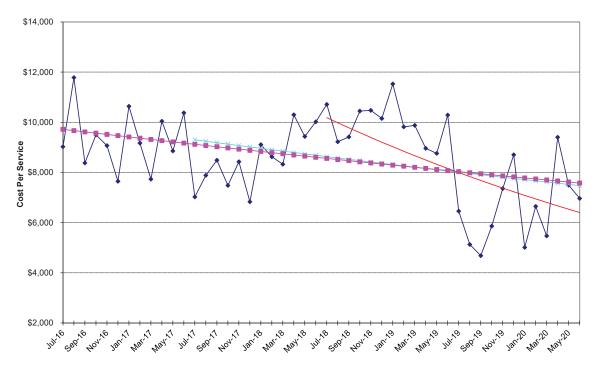
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
20.2%	-21.5%	-5.6%

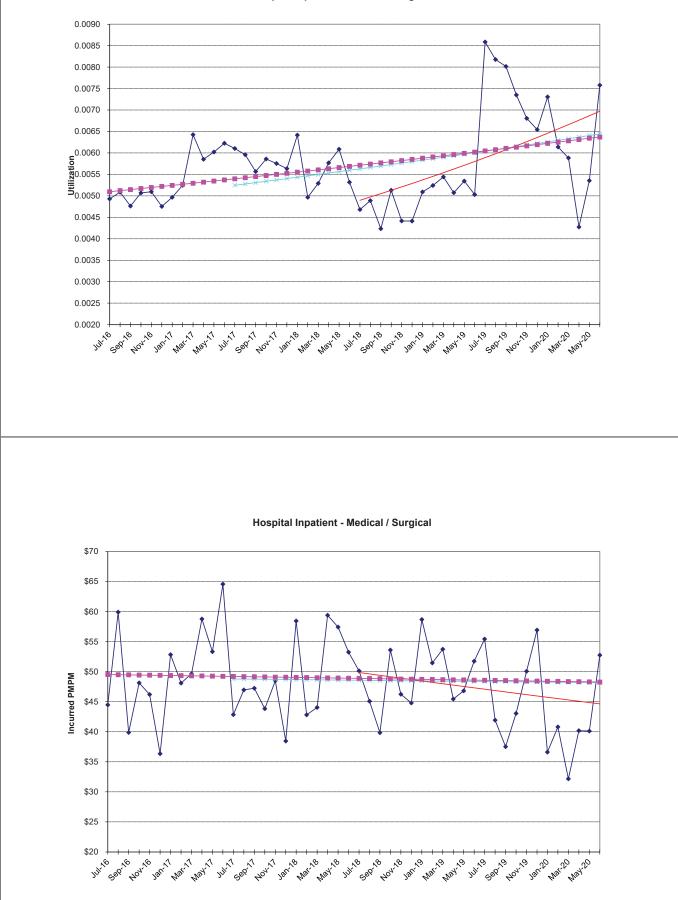
36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
7.3%	-7.2%	-0.4%

48-Month Trends Summary				
<u>Utilization</u>	Cost / Service	Total Trend		
5.9%	5.9% -6.2% -0.7%			





Hospital Inpatient - Medical / Surgical



Continuing Care Actuaries

A - 14

HOSPITAL INPATIENT

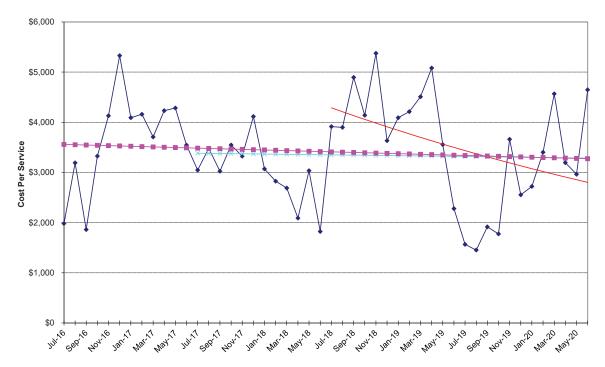
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
-0.1%	-19.9%	-20.0%

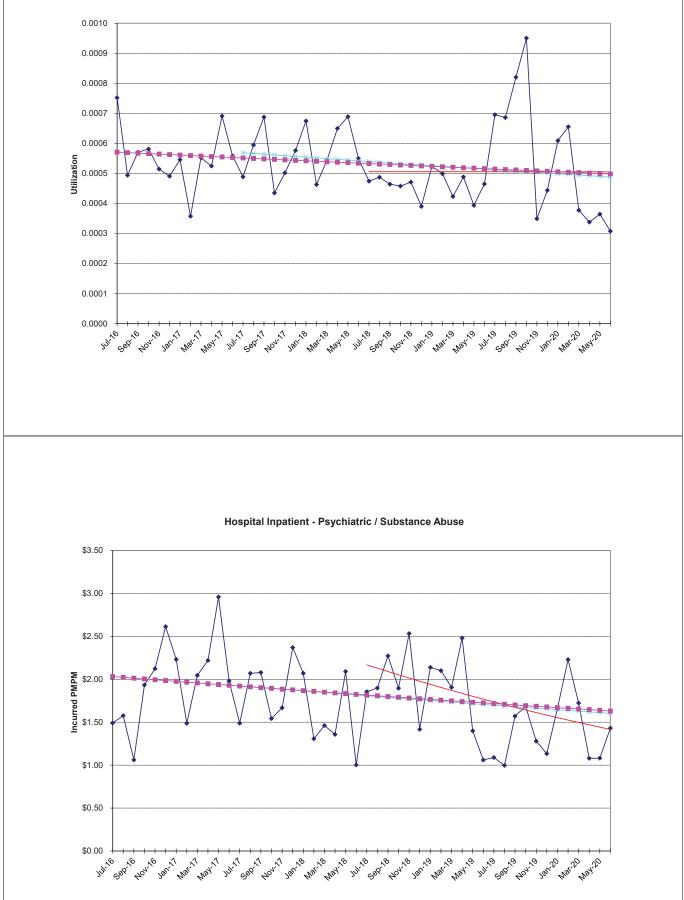
36-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
-5.1%	-1.0%	-6.1%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-3.4%	-2.1%	-5.5%









HOSPITAL OUTPATIENT

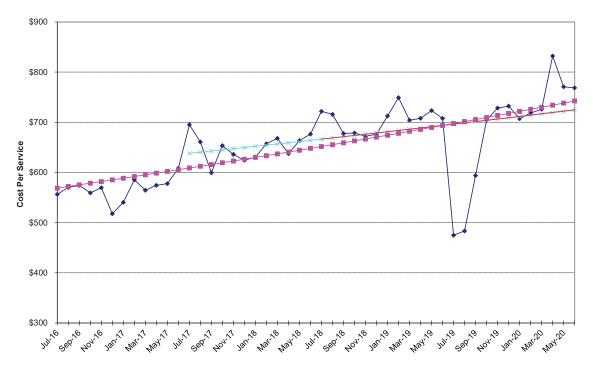
Emergency Room

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-5.3%	4.5%	-1.1%

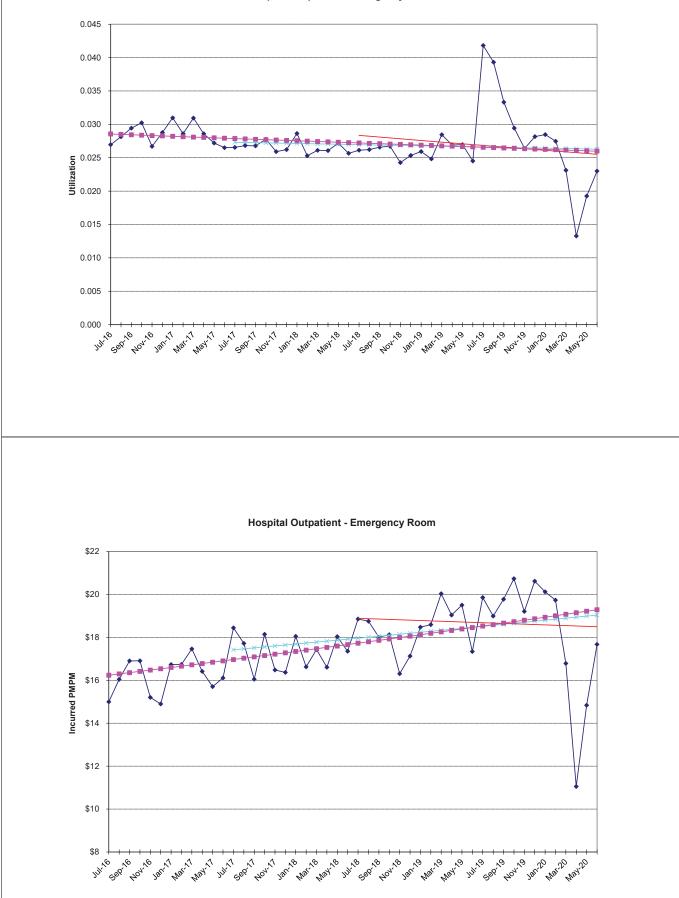
36-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
-1.3%	4.4%	3.1%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-2.4%	7.0%	4.5%





Hospital Outpatient - Emergency Room



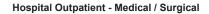
HOSPITAL OUTPATIENT

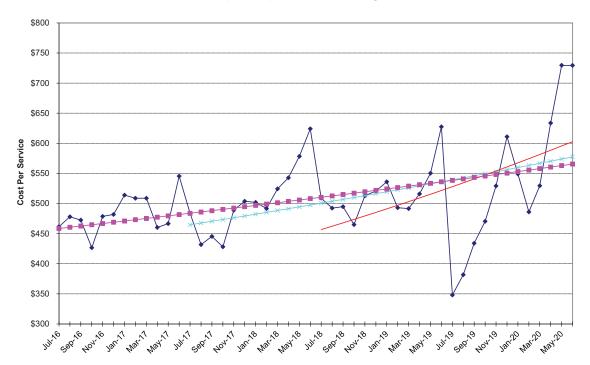
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
2.7%	15.6%	18.7%

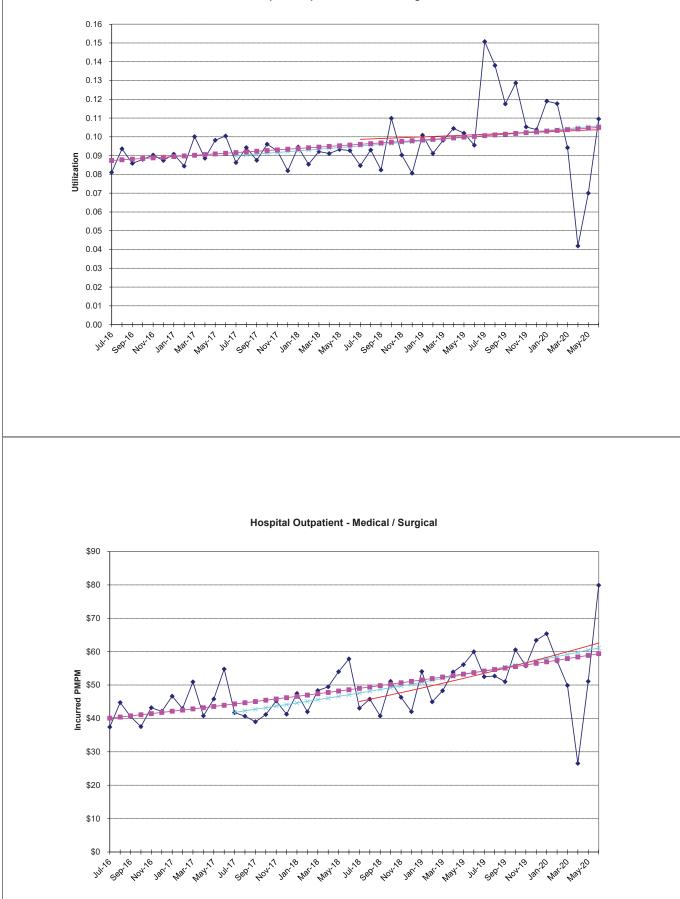
36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
5.7%	7.7%	13.9%

48-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
4.8%	5.5%	10.6%





Hospital Outpatient - Medical / Surgical



HOSPITAL OUTPATIENT

Other Services

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
3.4%	15.1%	19.0%

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
5.6%	13.1%	19.4%

48-Month Trends Summary		
<u>Utilization</u>	Cost / Service	<u>Total Trend</u>
2 7%	10.3%	13.4%



Hospital Outpatient - Other Services



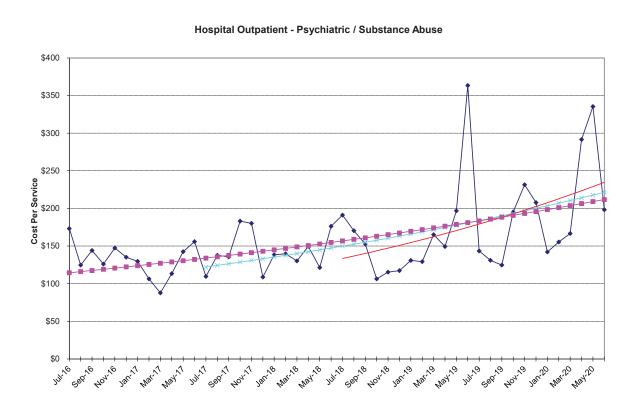
HOSPITAL OUTPATIENT

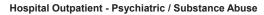
Psychiatric / Substance Abuse

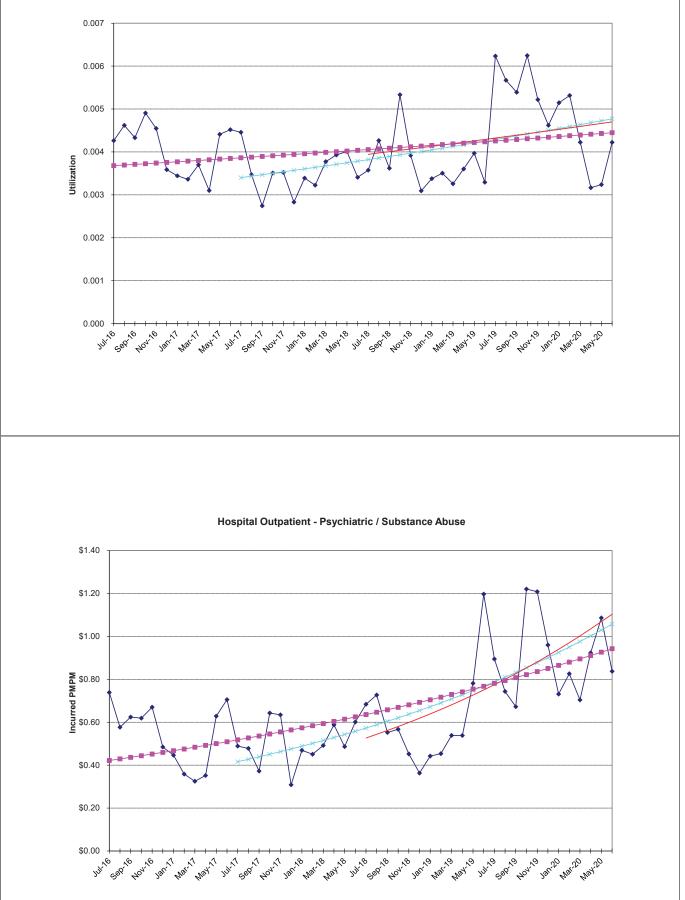
24-Month Trends Summary		
Utilization Cost / Service Total Trend		
9.6%	34.3%	47.1%

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
12.3%	22.6%	37.7%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
5.0%	17.0%	22.8%







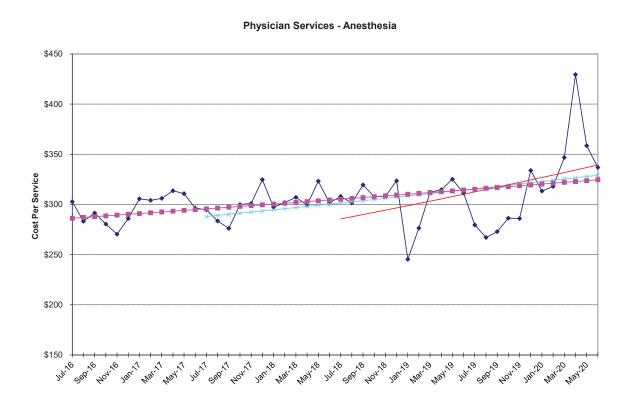
PHYSICIAN SERVICES

Anesthesia

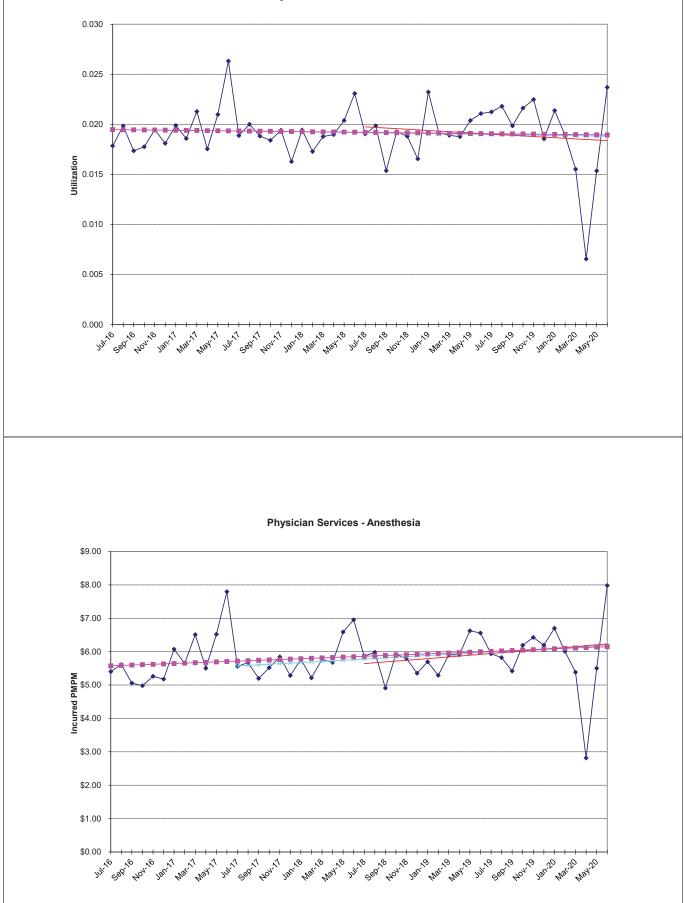
24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-3.7%	9.4%	5.3%

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-1.0%	4.7%	3.7%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-0.7%	3.3%	2.5%



Physician Services - Anesthesia



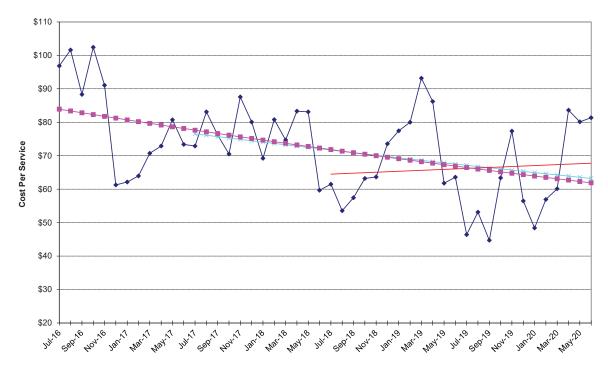
PHYSICIAN SERVICES

24-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
0.00/	0.0%	0.00/
-3.3%	2.6%	-0.8%

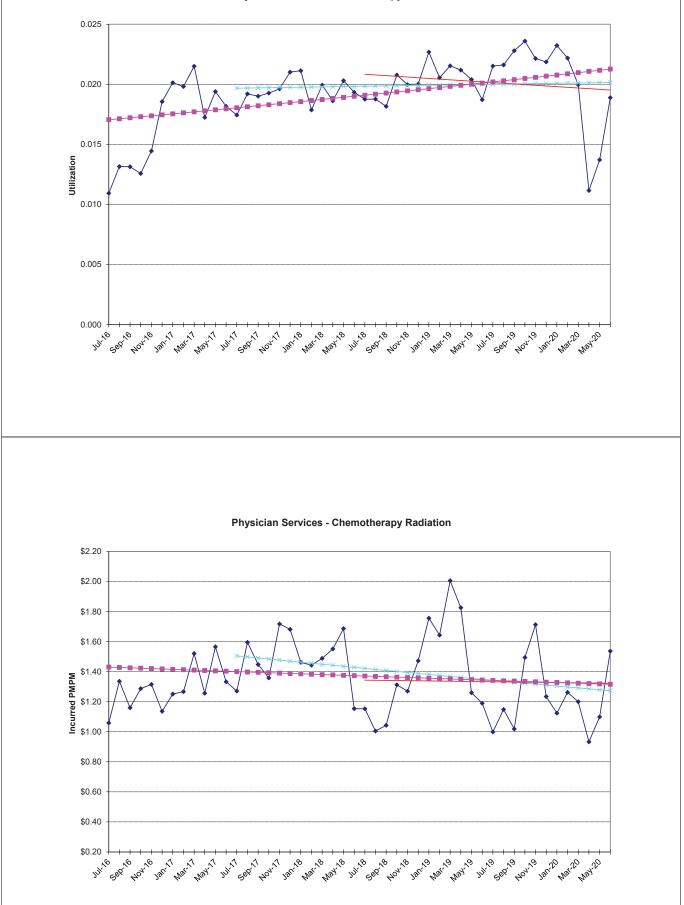
36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
0.8%	-6.3%	-5.6%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
5.8%	-7.5%	-2.1%





Physician Services - Chemotherapy Radiation



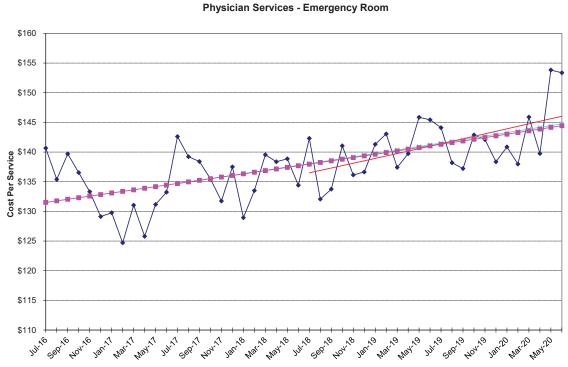
PHYSICIAN SERVICES

Emergency Room

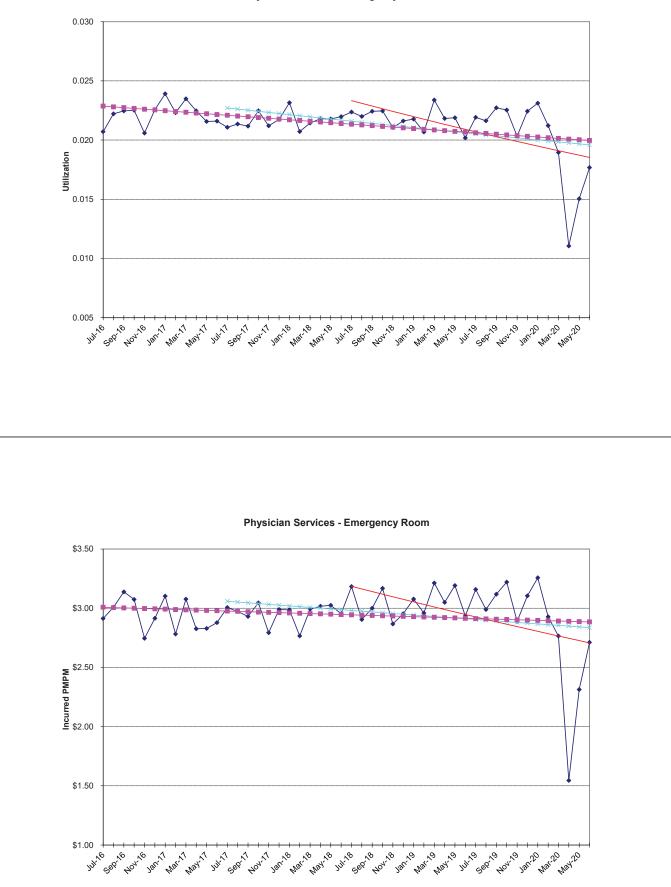
24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-11.3%	3.6%	-8.1%

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-4.9%	2.5%	-2.6%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-3.4%	2.4%	-1.1%



Physician Services - Emergency Room



PHYSICIAN SERVICES

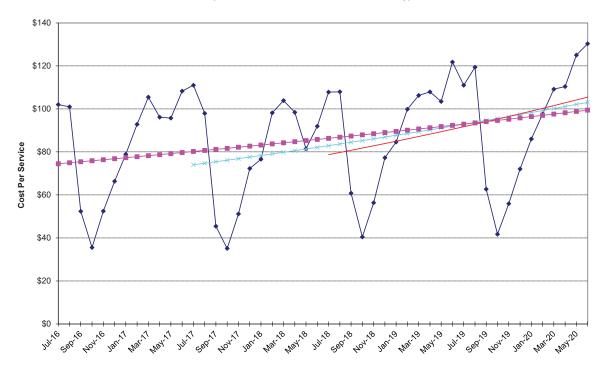
Immunizations / Injections / Allergy

24-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
-24.8%	16.5%	-12.4%
-24.0%	10.3%	-12.4%

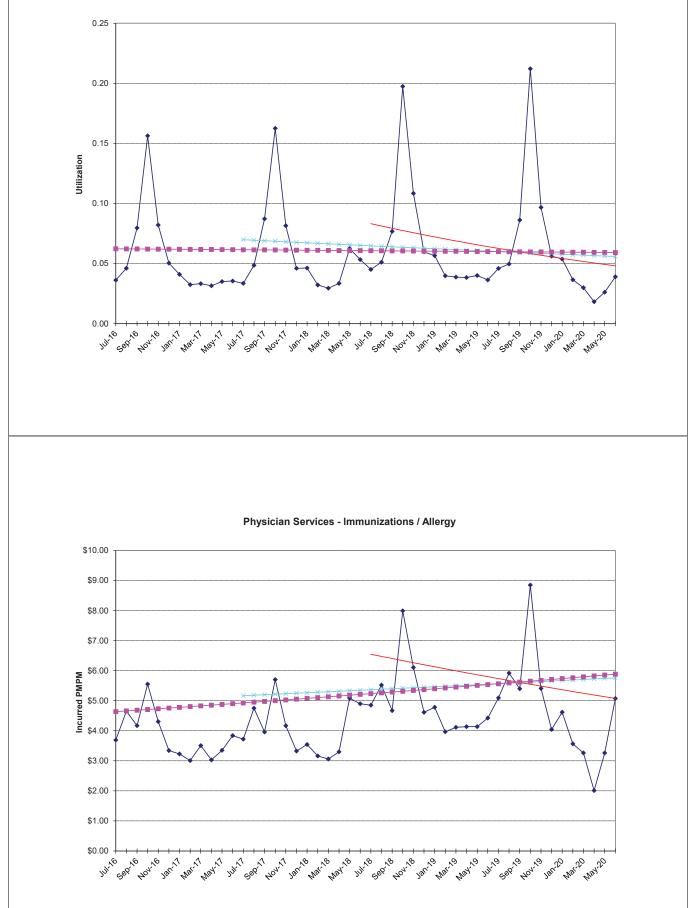
36-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
-7.4%	12.0%	3.8%

48-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
-1.3%	7.6%	6.3%

Physician Services - Immunizations / Allergy



Physician Services - Immunizations / Allergy



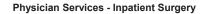
PHYSICIAN SERVICES

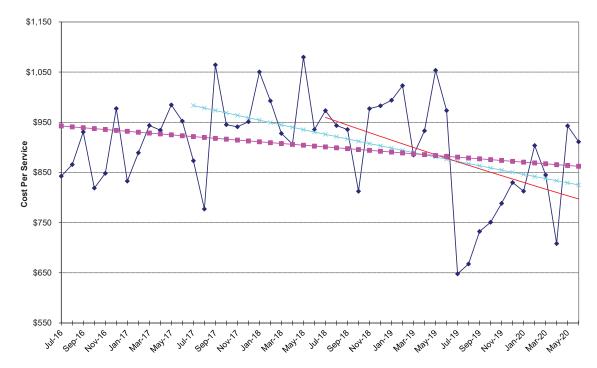
Inpatient Surgery

24-Month Trends Summary		
Cost / Service	Total Trend	
-9.2%	-8.3%	

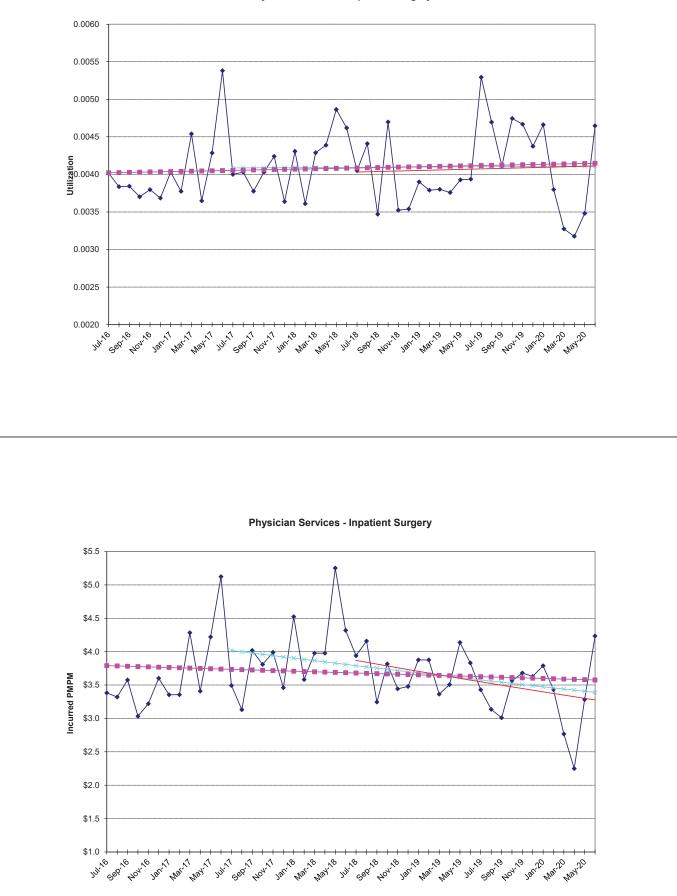
36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
0.2%	-5.8%	-5.7%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
0.8%	-2.3%	-1.5%





Physician Services - Inpatient Surgery



PHYSICIAN SERVICES

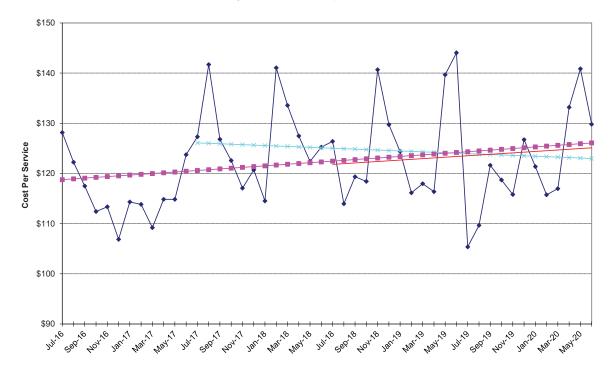
Inpatient Visits

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-4 7%	1.4%	-3.4%
-4.7 /0	1.4 /0	-3.4 /0

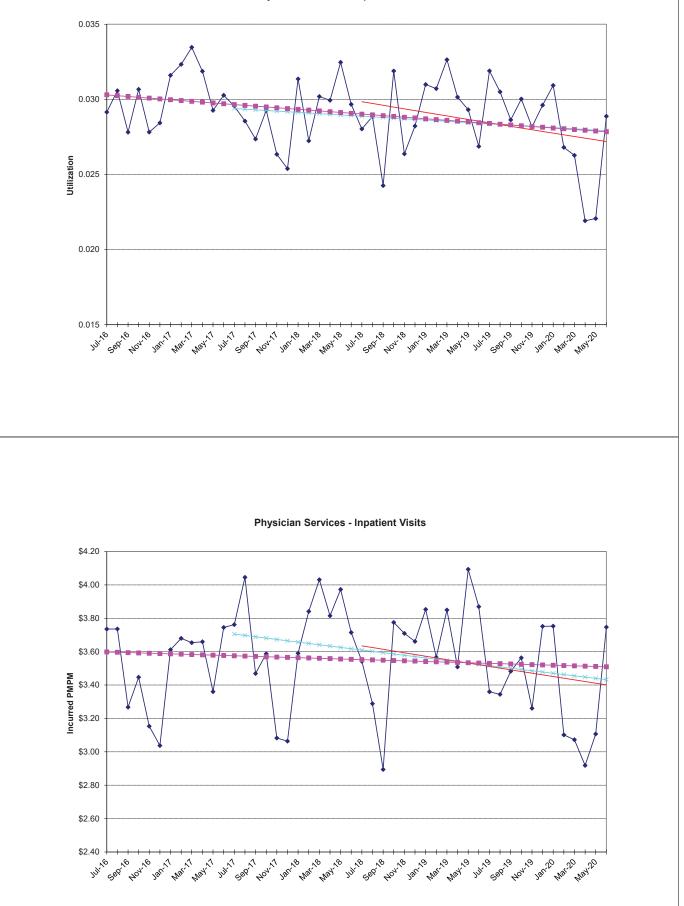
36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-1.7%	-0.9%	-2.6%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-2.1%	1.5%	-0.6%





Physician Services - Inpatient Visits



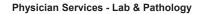
PHYSICIAN SERVICES

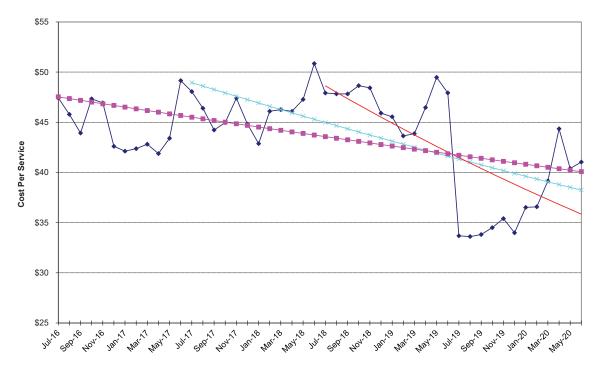
Lab & Pathology

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
0.00/		4.5.5%
2.6%	-14.7%	-12.5%

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
1.6%	-8.1%	-6.6%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-0.6%	-4.3%	-4.8%





Physician Services - Lab & Pathology



PHYSICIAN SERVICES

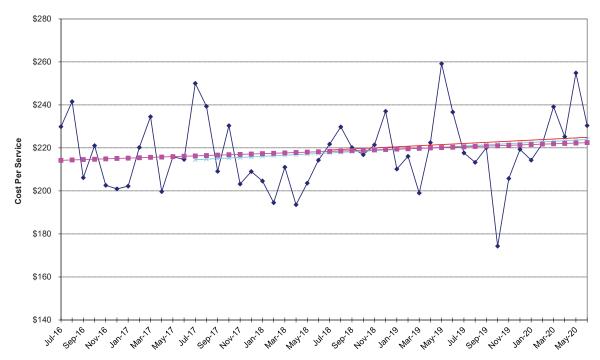
Maternity

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
5.1%	1.4%	6.6%

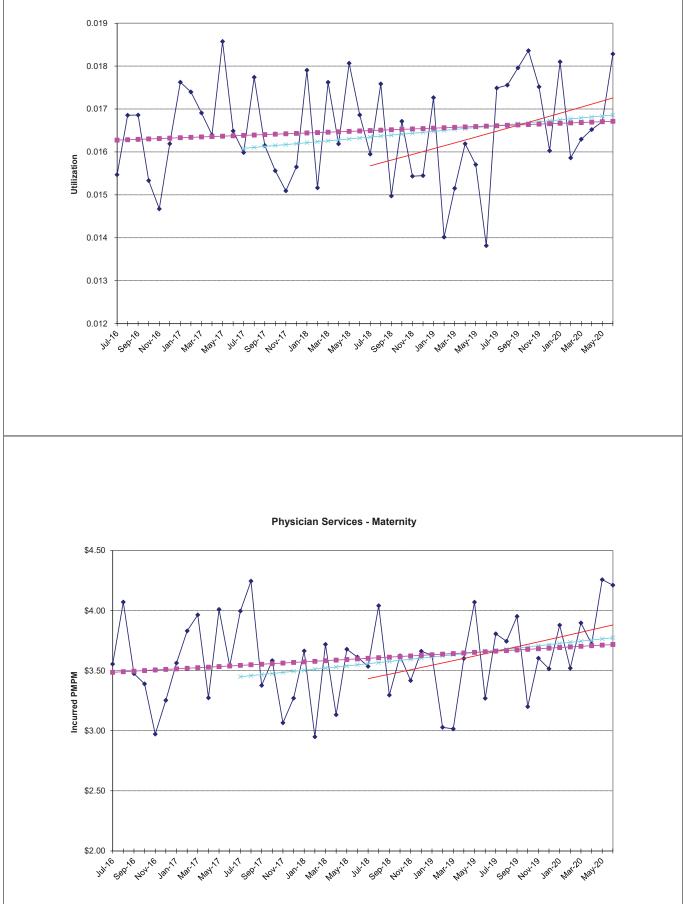
36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
1.6%	1.5%	3.1%

48-Month Trends Summary		
Utilization	Cost / Service	<u>Total Trend</u>
0.7%	1.0%	1.7%





Physician Services - Maternity



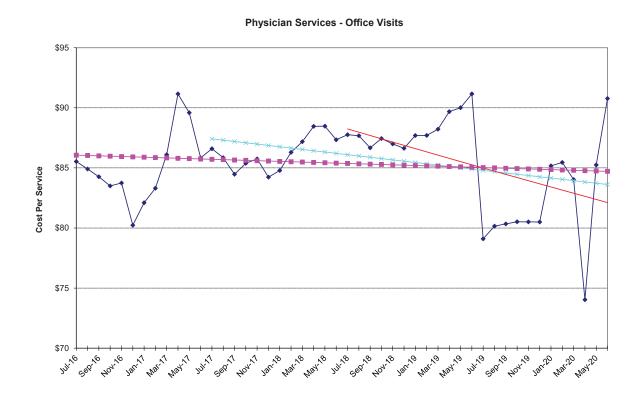
PHYSICIAN SERVICES

Office Visits

24-Month Trends Summary		
Utilization	Cost / Service	<u>Total Trend</u>
-2.9%	-3.7%	-6.5%

36-Month Trends Summary		
Cost / Service	<u>Total Trend</u>	
-1 5%	-2.7%	

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



Physician Services - Office Visits



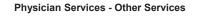
PHYSICIAN SERVICES

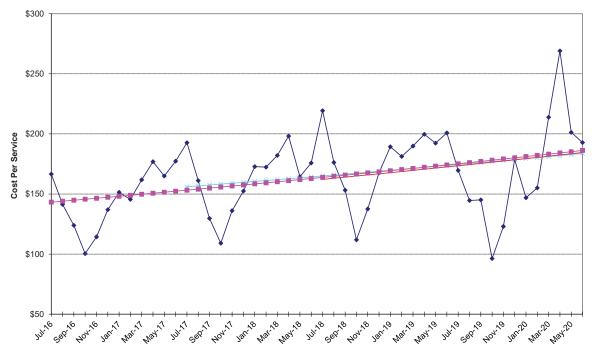
Other Services

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-5.2%	7.0%	1.4%

36-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
-1.4%	5.8%	4.3%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-1.6%	6.9%	5.2%





Physician Services - Other Services



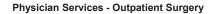
PHYSICIAN SERVICES

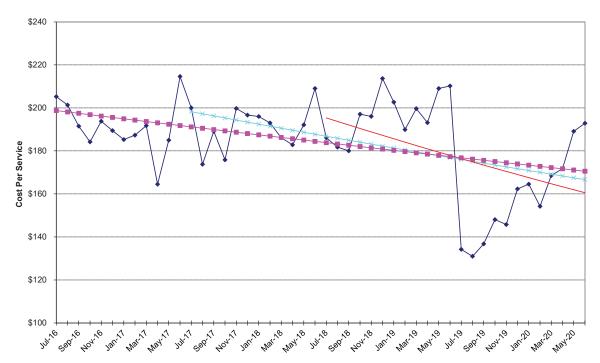
Outpatient Surgery

24-Month Trends Summary		
Cost / Service	<u>Total Trend</u>	
-9.7%	-3.7%	
	Cost / Service	

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
5.6%	-5.8%	-0.5%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
4.00/	0.00/	0.0%
4.3%	-3.8%	0.3%





Physician Services - Outpatient Surgery



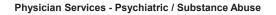
PHYSICIAN SERVICES

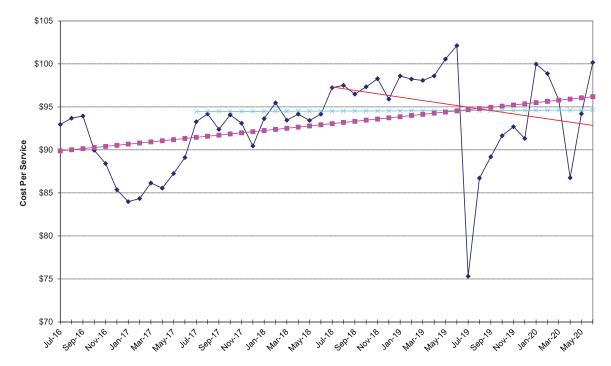
Psychiatric / Substance Abuse

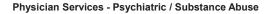
24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
13.2%	-2.4%	10.4%

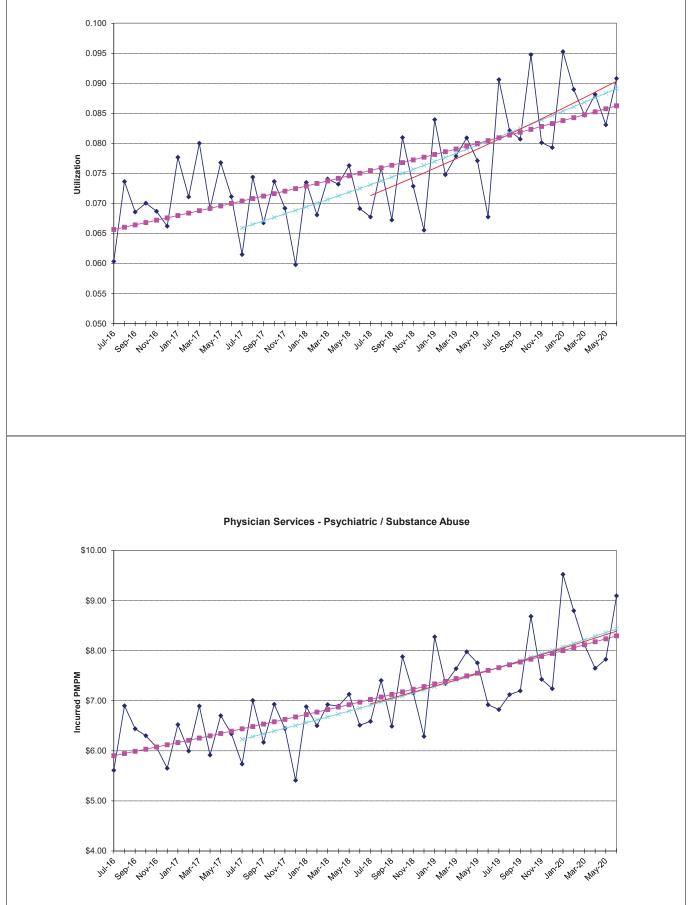
36-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
10.9%	0.1%	10.9%

48-Month Trends Summary		
Utilization Cost / Service Total Trend		
7.2%	1.7%	9.1%









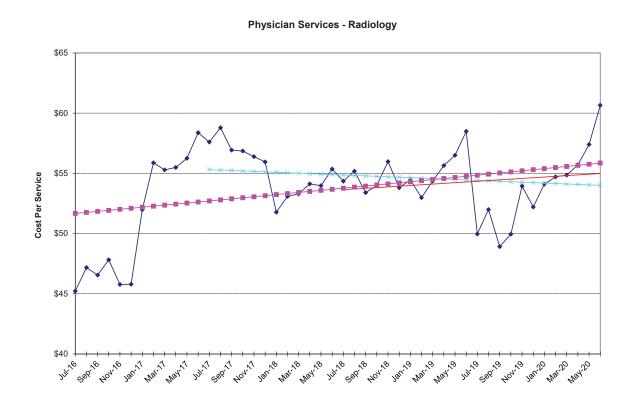
PHYSICIAN SERVICES

Radiology

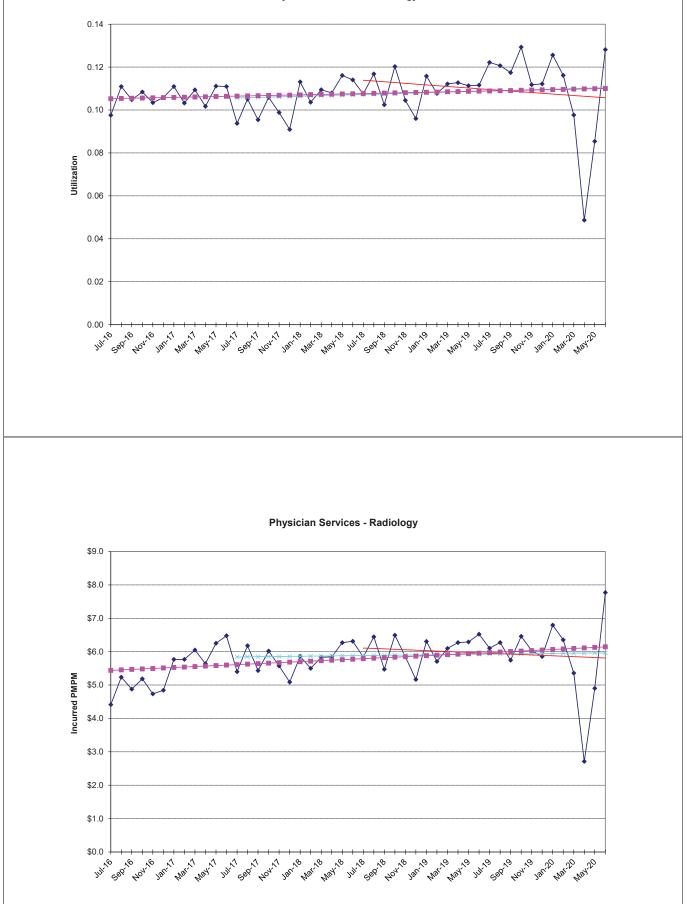
24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-3.8%	1.3%	-2.6%

36-Month Trends Summary		
<u>Utilization</u>	Cost / Service	Total Trend
1.5%	-0.8%	0.7%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
1.1%	2.0%	3.2%



Physician Services - Radiology



PHYSICIAN SERVICES

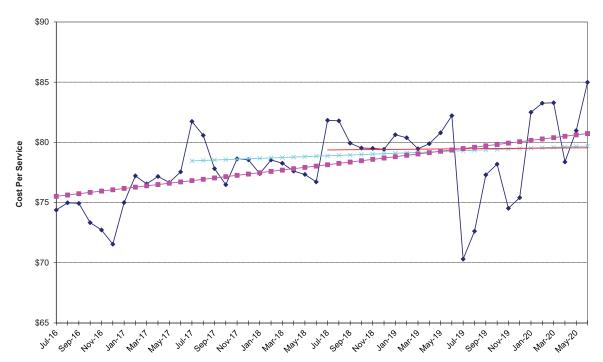
Therapies

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
1.9%	0.1%	2.1%

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
5.5%	0.5%	6.1%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
4.3%	1.7%	6.1%





Physician Services - Therapies



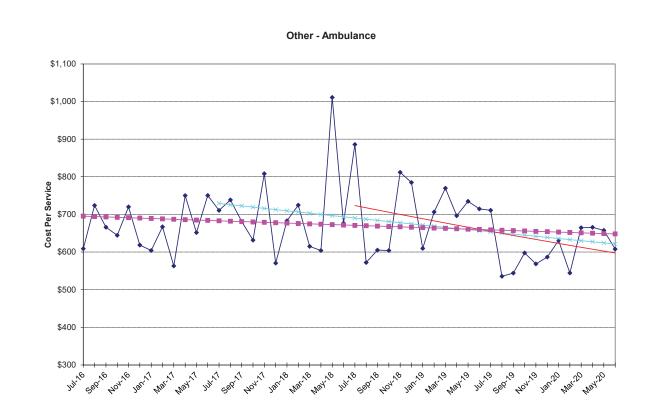
OTHER

Ambulance

24-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-6.7%	-9.5%	-15.6%

36-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-1.1%	-5.3%	-6.4%

48-Month Trends Summary		
Utilization	Cost / Service	Total Trend
-0.5%	-1.8%	-2.2%



Other - Ambulance



NON-MEDICARE CLAIMS Excluding Drugs

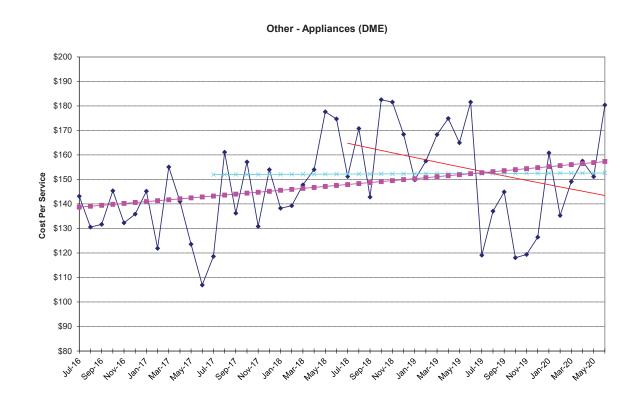
OTHER

Appliances (DME)

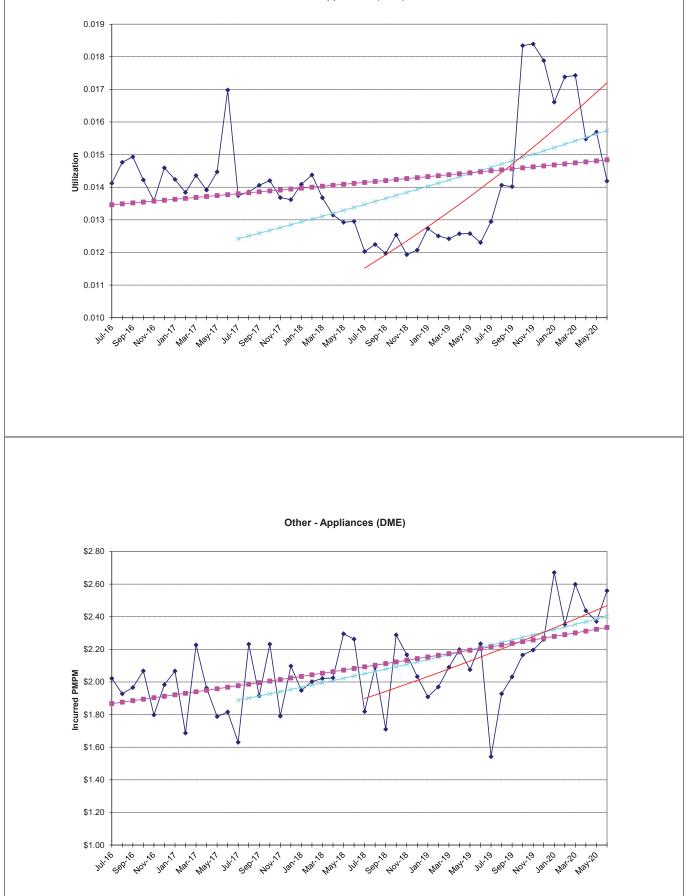
24-Month Trends Summary					
Utilization Cost / Service Total Trend					
23.3% -7.0% 14.7%					

36-Month Trends Summary					
<u>Utilization</u>	Utilization Cost / Service Total Trend				
8.5% 0.1% 8.6%					

48-Month Trends Summary				
Utilization Cost / Service Total Trend				
2.5% 3.3% 5.9%				



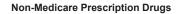
Other - Appliances (DME)

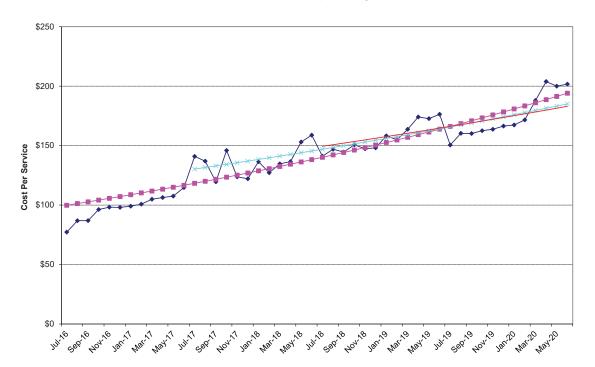


Appendix B

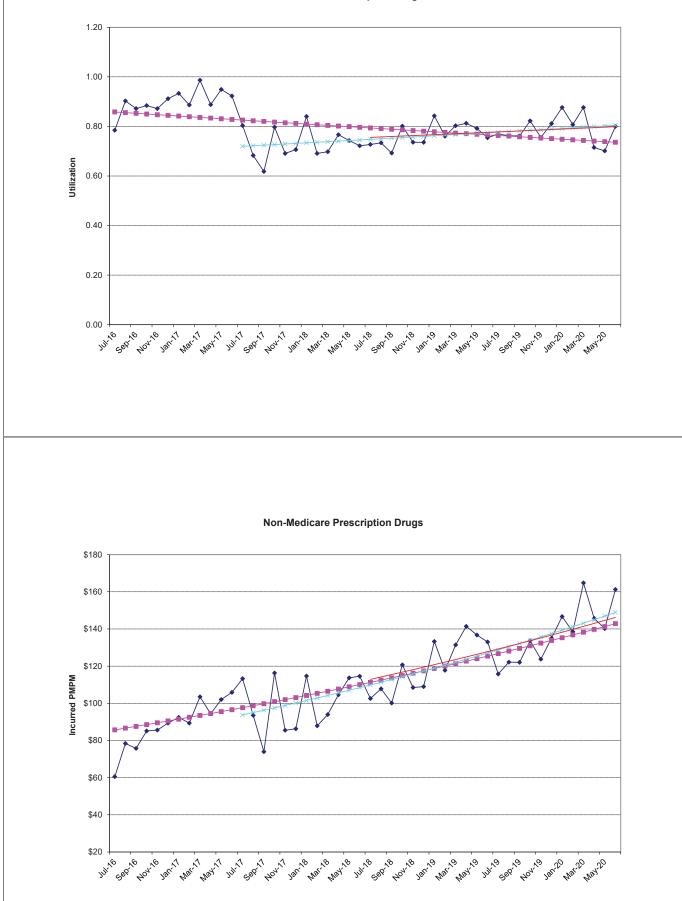
Non-Medicare Prescription Drugs

	Utilization	Cost / Prescription	Total Trend
24-Month Trend	2.9%	11.2%	14.4%
36-Month Trend	3.9%	12.8%	17.2%
48-Month Trend	-3.8%	18.5%	13.9%





Non-Medicare Prescription Drugs



<u>Appendix C – Prescription Drug Trends</u>

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.

Year	Utilization	Unit Cost	Composite Trend
2012	0.50/	7 40/	7 (0)
2012	-0.5%	5.4%	5.6%
2013	0.0%	-5.8%	-5.5%
2014	-1.5%	6.2%	4.5%
2015	3.9%	7.9%	11.5%
2016	-0.7%	8.7%	6.9%
2017	-2.4%	12.2%	7.1%
2018	-29.0%	44.0%	2.3%
2019	-1.1%	13.4%	10.3%
2020	2.2%	7.8%	8.4%

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:

Drug	Patent Expiration	2019 Ingredient Cost		2020 Ingredien	t Cost
_		Amount	%	Amount	%
Atripla	2021	\$222,057	0.1%	\$90,206	0.0%
Amitiza	2021	292,732	0.1%	297,264	0.1%
Bystolic	2021	663,042	0.2%	754,949	0.3%
Zipsor	2022	2,113	0.0%	5,677	0.0%
Janumet	2022	1,622,281	0.6%	1,599,059	0.5%
Toviaz	2022	28,799	0.0%	28,903	0.0%
Total		\$2,831,024	1.0%	\$2,786,058	0.9%

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.

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

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

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

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

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

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

Indicators with the Largest Increase as a Percentage

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

Indicators with the Largest Increase in Claim Numbers

Indication	2019 Prescriptions	2020 Prescriptions	Utilization Increase
ANTIDEPRESSANTS	139,844	147,942	8,098
NONSTEROIDAL AN	61,309	66,479	5,170
B-ADREN AGON	25,160	30,117	4,957
ANXIOLYTICS, SE	37,496	41,353	3,857
INCRETIN MIMETI	9,290	11,689	2,399

Indicators with the Largest Utilization Increase Percentage

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

Indicators with the Largest Increase in Cost per Prescription

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

Indicators with the Largest Percentage Increase in Cost per Prescription

	2019 Ingredient Cost	2020 Ingredient Cost	Ingredient Cost
Indication	Per Prescription	Per Prescription	Per Prescription Increase
AMMONIA DETOXIC	\$34.52	\$372.32	978.7%
WAKEFULNESS	\$86.01	\$194.12	125.7%
SKIN AND MUCOUS	\$968.76	\$2,028.13	109.4%
NERVOUS SYS AGT	\$1,171.11	\$1,651.37	41.0%
ANTITUSSIVES	\$6.49	\$8.90	37.1%

Drug Indicators by Highest Cost

					<u>Formulary</u>	<u>Formulary</u>
		Number of	Cost Per	<u>Program</u>	Percent	Percent
<u>Rank</u>	Indicator	Prescriptions	Prescription	<u>Costs</u>	<u>(cost)</u>	(Scripts)
1	ANTIRHEUMATIC	7,913	\$5,050.79	\$39,966,916	96.2%	95.8%
2	INSULINS	17,648	\$1,642.16	\$28,980,881	99.8%	99.8%
3	INCRETIN MIMETI	11,689	\$1,912.47	\$22,354,917	99.9%	99.9%
4	ANTINEOPLASTIC	7,799	\$2,298.49	\$17,925,942	54.3%	90.9%
5	SKIN AND MUCOUS	8,322	\$2,028.13	\$16,878,122	81.2%	91.8%
6	IMMUNOMOD AGNTS	1,947	\$6,959.10	\$13,549,369	93.4%	93.6%
7	ANTIDIABETIC	9,378	\$1,277.00	\$11,975,723	99.9%	99.8%
8	DDP-4 INHIBITOR	8,617	\$1,191.32	\$10,265,618	99.9%	99.9%
9	ADRENALS	67,159	\$114.93	\$7,718,270	98.3%	99.5%
10	ANTICOAGULANTS	11,887	\$623.17	\$7,407,650	99.6%	99.8%
11	ANTIDEPRESSANTS	147,942	\$34.26	\$5,068,662	95.7%	99.9%
12	NERVOUS SYS AGT	2,925	\$1,651.37	\$4,830,267	25.1%	90.5%
13	ANTIPSYCHOTICS	9,827	\$475.14	\$4,669,164	87.9%	97.6%
14	B-ADREN AGON	30,117	\$151.71	\$4,569,157	99.9%	100.0%
15	MISC ANTICONVUL	46,246	\$97.92	\$4,528,487	84.9%	99.3%
16	AMPHETAMINES	23,390	\$173.72	\$4,063,342	97.8%	98.7%
17	CONTRACEPTIVES	42,688	\$82.63	\$3,527,104	88.5%	97.7%
18	PPI	68,109	\$51.27	\$3,492,023	99.9%	100.0%
19	VASODILAT AGT	281	\$11,233.80	\$3,156,699	79.4%	77.6%
20	HMG-COA RED INH	85,768	\$35.68	\$3,060,557	99.3%	100.0%
-		,		• • • • • •		

Drug Indicators by Highest Cost (continued)

<u>Rank</u>	Indicator	Number of Prescriptions	<u>Cost Per</u> Prescription	Program Costs	Formulary Percent (cost)	Formulary Percent (Scripts)
21	ANTIMUSCARINICS	14,548	\$206.08	\$2,998,031	99.3%	99.8%
22	GI DRUGS, MISCE	2,965	\$1,004.88	\$2,979,474	95.8%	96.8%
	CYSTIC FIBROSIS					
23	TRANSMEMBRANE CONDUCTANCE REGULATO	127	\$23,198.55	\$2,946,216	0.0%	0.0%
	ANTIRETROVIRALS		·	· · ·		0.0% 99.7%
24		1,315	\$2,224.54	\$2,925,272 \$2,467,527	99.8%	
25	ESTROGENS	11,977	\$206.02	\$2,467,537	97.5%	98.1%
26	EENT ANTI-INFL	1,713	\$1,403.97	\$2,405,003	99.9%	99.7%
27	CORTICOSTEROIDS	65,614	\$35.44	\$2,325,256	90.5%	99.2%
28	ANTI-INFLAMMATO	3,215	\$721.23	\$2,318,768	99.4%	99.7%
29	PROTEASE INH	85	\$25,167.69	\$2,139,254	98.8%	97.6%
30	THYROID AGENTS	55,682	\$38.30	\$2,132,890	91.2%	95.8%
31	BETA BLOCKERS	62,311	\$33.52	\$2,088,924	99.6%	99.9%
32	RESP AND CNS	11,714	\$177.13	\$2,074,922	83.0%	91.3%
33	MISC ANTILIPEM	3,883	\$511.64	\$1,986,711	100.0%	99.9%
34	PLATELET-AGG IN	8,441	\$197.27	\$1,665,162	99.6%	99.9%
35	SOMATOTROP AGON	311	\$5,195.55	\$1,615,817	91.5%	92.9%
36	DIABETES MELLIT	8,584	\$180.65	\$1,550,719	99.4%	99.3%
37	ANGIOTEN 2 ANTG	43,210	\$33.16	\$1,433,018	99.0%	99.9%
38	DIGESTANTS	405	\$3,485.39	\$1,411,581	100.0%	100.0%
39	VASOPRSN ANTAGO	99	\$13,943.41	\$1,380,398	0.0%	0.0%
40	OTHER MISC THER	471	\$2,921.00	\$1,375,790	53.7%	41.6%
	All Other Indicators	1,036,928	\$39.29	\$40,744,464	85.5%	<u>98.6%</u>
	Total	1,943,250	\$154.87	300,954,074	89.2%	98.7%

Drug Indicators by Highest Cost Analysis of Formulary Distribution

			Formulary			Non-Formulary			
Rank	Indicator	Scripts	Ingredient Cost	Cost Per Script	Scripts	Ingredient Cost	Cost Per Script		
1	ANTIRHEUMATIC	7,582	\$38,440,265	\$5,069.94	331	\$1,526,651	\$4,612.24		
2	INSULINS	17,611	\$28,922,689	\$1,642.31	37	\$58,192	\$1,572.76		
3	INCRETIN MIMETI	11,678	\$22,343,179	\$1,913.27	11	\$11,738	\$1,067.10		
4	ANTINEOPLASTIC	7,088	\$9,734,224	\$1,373.34	711	\$8,191,717	\$11,521.40		
5	SKIN AND MUCOUS	7,639	\$13,702,436	\$1,793.75	683	\$3,175,686	\$4,649.61		
6	IMMUNOMOD AGNTS	1,822	\$12,658,720	\$6,947.71	125	\$890,649	\$7,125.19		
7	ANTIDIABETIC	9,358	\$11,964,321	\$1,278.51	20	\$11,402	\$570.09		
8	DDP-4 INHIBITOR	8,605	\$10,254,812	\$1,191.73	12	\$10,806	\$900.53		
9	ADRENALS	66,816	\$7,585,586	\$113.53	343	\$132,684	\$386.83		
10	ANTICOAGULANTS	11,861	\$7,380,287	\$622.23	26	\$27,363	\$1,052.41		
11	ANTIDEPRESSANTS	147,745	\$4,848,580	\$32.82	197	\$220,082	\$1,117.17		
12	NERVOUS SYS AGT	2,646	\$1,214,569	\$459.02	279	\$3,615,698	\$12,959.49		
13	ANTIPSYCHOTICS	9,589	\$4,104,212	\$428.01	238	\$564,952	\$2,373.75		
14	B-ADREN AGON	30,108	\$4,566,128	\$151.66	9	\$3,029	\$336.52		
15	MISC ANTICONVUL	45,926	\$3,845,331	\$83.73	320	\$683,155	\$2,134.86		
16	AMPHETAMINES	23,078	\$3,972,720	\$172.14	312	\$90,623	\$290.46		
17	CONTRACEPTIVES	41,688	\$3,121,889	\$74.89	1,000	\$405,214	\$405.21		
18	PPI	68,102	\$3,488,412	\$51.22	7	\$3,611	\$515.85		
19	VASODILAT AGT	218	\$2,506,247	\$11,496.54	63	\$650,453	\$10,324.65		
20	HMG-COA RED INH	85,732	\$3,038,914	\$35.45	36	\$21,643	\$601.18		

			Formulary		Non-Formulary			
Rank	Indicator	Scripts	Ingredient Cost	Cost Per Script	Scripts	Ingredient Cost	Cost Per Script	
21	ANTIMUSCARINICS	14,512	\$2,976,973	\$205.14	36	\$21,058	\$584.95	
22	GI DRUGS, MISCE	2,869	\$2,855,032	\$995.13	96	\$124,442	\$1,296.27	
	CYSTIC FIBROSIS							
23	TRANSMEMBRANE							
	CONDUCTANCE REGULATO	0	\$0	\$0.00	127	\$2,946,216	\$23,198.55	
24	ANTIRETROVIRALS	1,311	\$2,919,072	\$2,226.60	4	\$6,200	\$1,549.98	
25	ESTROGENS	11,747	\$2,405,102	\$204.74	230	\$62,435	\$271.46	
26	EENT ANTI-INFL	1,708	\$2,402,631	\$1,406.69	5	\$2,372	\$474.31	
27	CORTICOSTEROIDS	65,111	\$2,105,107	\$32.33	503	\$220,149	\$437.67	
28	ANTI-INFLAMMATO	3,204	\$2,305,345	\$719.52	11	\$13,423	\$1,220.29	
29	PROTEASE INH	83	\$2,113,989	\$25,469.75	2	\$25,265	\$12,632.40	
30	THYROID AGENTS	53,333	\$1,946,260	\$36.49	2,349	\$186,630	\$79.45	
31	BETA BLOCKERS	62,254	\$2,081,447	\$33.43	57	\$7,477	\$131.17	
32	RESP AND CNS	10,694	\$1,722,614	\$161.08	1,020	\$352,308	\$345.40	
33	MISC ANTILIPEM	3,881	\$1,986,275	\$511.79	2	\$435	\$217.66	
34	PLATELET-AGG IN	8,432	\$1,659,170	\$196.77	9	\$5,992	\$665.75	
35	SOMATOTROP AGON	289	\$1,478,204	\$5,114.89	22	\$137,612	\$6,255.09	
36	DIABETES MELLIT	8,528	\$1,541,019	\$180.70	56	\$9,700	\$173.21	
37	ANGIOTEN 2 ANTG	43,172	\$1,418,814	\$32.86	38	\$14,204	\$373.79	
38	DIGESTANTS	405	\$1,411,581	\$3,485.39	0	\$0	\$0.00	
39	VASOPRSN ANTAGO	0	\$0	\$0.00	99	\$1,380,398	\$13,943.41	
40	OTHER MISC THER	196	\$739,149	\$3,771.17	275	\$636,641	\$2,315.06	
	<u>All other</u>	<u>1,022,159</u>	<u>\$34,838,663</u>	<u>\$34.08</u>	<u>14,769</u>	<u>\$5,905,802</u>	<u>\$399.88</u>	
	Total	1,918,780	\$268,599,968	\$139.98	24,470	\$32,354,106	\$1,322.19	

<u>Drug Indicators by Highest Cost</u> <u>Analysis of Formulary Distribution (continued)</u>

Drug Indicators by Highest Script Increase

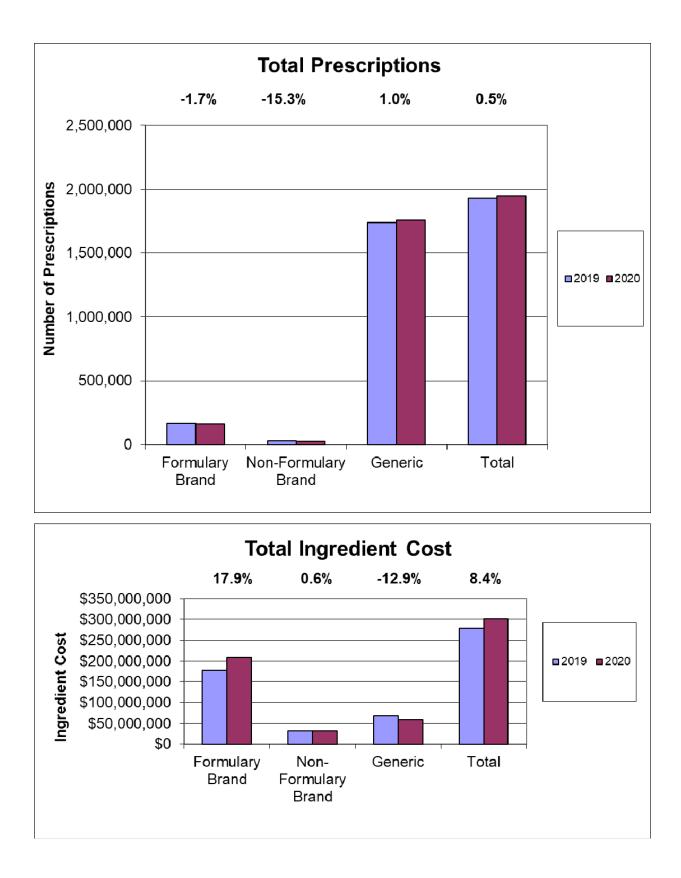
		Formulary Cost	Non-Formulary Cost	Increase/
Rank	Indicator	Per Script	Per Script	Decrease
85	AMMONIA DETOXIC	\$26.68	\$37,701.05	141,191%
44	AZOLES	11.96	4,776.64	39,840%
80	ANTIGOUT AGENTS	85.06	33,340.28	39,095%
66	MUCOLYTIC AGENT	22.03	3,732.23	16,845%
139	BENZODIAZEPINES	5.31	831.44	15,552%
90	DOPAM REC AGON	48.18	4,599.49	9,446%
79	WAKEFULNESS	96.25	8,492.10	8,723%
76	OPIATE AGONISTS	9.16	509.64	5,465%
147	DIHYDROPYRIDINE	15.22	793.35	5,112%
150	A-ADRENRGC BLKR	28.47	1,251.26	4,295%
122	ACEI	7.08	310.72	4,287%
69	PROGESTINS	46.32	2,017.98	4,256%
169	NONSTEROIDAL AN	13.52	576.10	4,160%
19	PENICILLINS	5.76	223.25	3,773%
111	ANTIDEPRESSANTS	32.82	1,117.17	3,304%
55	A/B-ADREN AGON	372.28	10,635.98	2,757%
146	LEUKOTRI MDF	21.41	608.59	2,743%
64	TETRACYCLINES	27.39	778.18	2,741%
10	NERVOUS SYS AGT	459.02	12,959.49	2,723%
175	MISC ANTICONVUL	83.73	2,134.86	2,450%

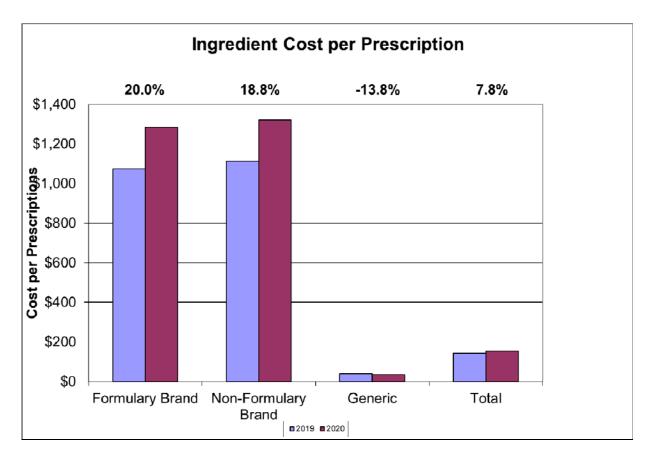
		Formulary Cost	Non-Formulary Cost	Increase/
Rank	Indicator	Per Script	Per Script	Decrease
53	ALDOST REC ANTA	33.14	659.87	1,891%
171	HMG-COA RED INH	35.45	601.18	1,596%
121	CORTICOSTEROIDS	32.33	437.67	1,254%
50	FIBRIC ACID DER	82.14	1,029.10	1,153%
12	SSRI AGONISTS	38.55	475.83	1,134%
34	ANGIOTEN 2 ANTG	32.86	373.79	1,037%
93	MISC AUTONOMIC	40.41	448.85	1,011%
105	PPI	51.22	515.85	907%
136	ANTIFUNGALS	25.61	232.01	806%
84	ANTIBACTERIALS,	156.42	1,336.03	754%
94	ANTINEOPLASTIC	1,373.34	11,521.40	739%
4	MACROLIDES	10.19	82.42	709%
41	ANTIMALARIALS	195.55	1,144.21	485%
96	PROSTAGLAND ANA	84.74	489.86	478%
16	ANTIPSYCHOTICS	428.01	2,373.75	455%
142	CONTRACEPTIVES	74.89	405.21	441%
133	IMMUNOSU AGENT	224.02	1,207.44	439%
131	BILE ACID SEQUE	291.19	1,179.11	305%
63	ANTIALLERGIC AG	60.69	245.44	304%
45	BETA BLOCKERS	33.43	131.17	292%
	All Other Indicators	<u>\$266.75</u>	<u>\$832.30</u>	<u>212%</u>
	Total	\$139.98	\$1,322.19	845%

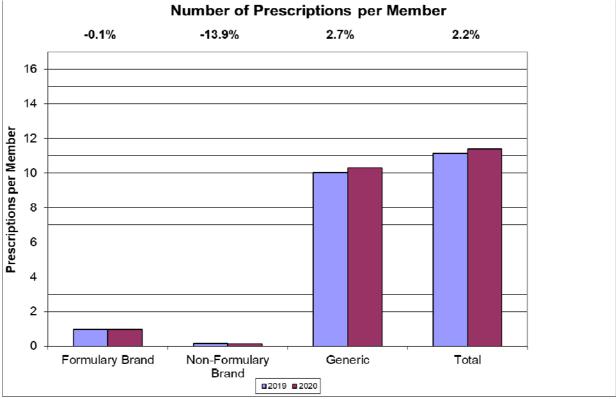
Drug Indicators by Highest Script Increase (continued)

		Formulary Non-Formu					
			Ingredient	Cost Per		Ingredient	Cost Per
Rank	Drug	Scripts	Cost	Script	Scripts	Cost	Script
1	HUMIRA	4,063	\$24,427,220	\$6,012	0	\$0	\$0
2	TRULICITY	6,116	\$11,788,886	\$1,928	0	\$0	\$0
3	TRESIBA FLEXTOUCH	5,028	\$8,798,117	\$1,750	0	\$0	\$0
4	JANUVIA	6,512	\$7,817,385	\$1,200	0	\$0	\$0
5	FARXIGA	5,052	\$6,655,611	\$1,317	0	\$0	\$0
6	ENBREL	1,216	\$6,359,909	\$5,230	0	\$0	\$0
7	NOVOLOG FLEXPEN	3,743	\$6,254,482	\$1,671	0	\$0	\$0
8	OZEMPIC	3,381	\$5,926,955	\$1,753	0	\$0	\$0
9	VICTOZA	2,153	\$4,596,622	\$2,135	0	\$0	\$0
10	COSENTYX	785	\$4,568,986	\$5,820	0	\$0	\$0
11	JARDIANCE	3,581	\$4,380,082	\$1,223	0	\$0	\$0
12	TECFIDERA	553	\$4,259,195	\$7,702	0	\$0	\$0
13	ELIQUIS	4,882	\$4,174,135	\$855	0	\$0	\$0
14	LEVEMIR FLEXTOUCH	2,528	\$3,921,086	\$1,551	0	\$0	\$0
15	NOVOLOG	1,771	\$3,715,777	\$2,098	0	\$0	\$0
16	OTEZLA	1,070	\$3,625,653	\$3,388	0	\$0	\$0
17	REVLIMID	246	\$3,549,281	\$14,428	0	\$0	\$0
18	XYREM	0	\$0	\$0	265	\$3,544,190	\$13,374
19	STELARA	169	\$3,401,820	\$20,129	0	\$0	\$0
20	XARELTO	3,053	\$2,828,656	\$927	0	\$0	\$0
	All Other Indicators	1,862,878	\$147,550,109	\$79	24,205	\$28,809,916	\$1,190
	Total	1,918,780	\$268,599,968	\$139.98	24,470	\$32,354,106	\$1,322.19

<u>Drugs by Highest Cost</u> <u>Analysis of Formulary Distribution</u>







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.

Current Formulary		Current Brand/	Number of Prescriptions		Ingredient Cost Per Prescription			Total Ingredient Cost			
Drug	Status	Generic	2019	2020	Growth	2019	2020	Growth	2019	2020	Growth
HUMIRA	PREF	SSB	3,793	4,063	7.1%	\$5,633.79	\$6,012.11	6.7%	\$21,368,969	\$24,427,220	14.3%
ENBREL	PREF	SSB	1,281	1,216	-5.1%	4,892.68	5,230.19	6.9%	6,267,519	6,359,909	1.5%
OTEZLA	PREF	SSB	851	1,070	25.7%	3,230.25	3,388.46	4.9%	2,748,943	3,625,653	31.9%
XELJANZ	PREF	SSB	212	557	162.7%	4,415.83	4,558.14	3.2%	936,156	2,538,882	171.2%
ENBREL MINI	PREF	SSB	164	125	-23.8%	5,163.96	5,133.99	-0.6%	846,890	641,749	-24.2%
<u>Subtotals</u>											
Generic	Y	GEN	275	312	13.5%	\$330.50	\$247.85	-25.0%	\$90,889	77,330	-14.9%
Formulary Brand	Y	Brand	6,418	7,270	13.3%	5,068.41	5,276.88	4.1%	32,529,041	38,362,935	17.9%
Non-Formulary Brand	<u>N</u>	Brand	<u>480</u>	<u>331</u>	<u>-31.0%</u>	<u>4,261.79</u>	4,612.24	<u>8.2%</u>	<u>2,045,661</u>	<u>1,526,651</u>	-25.4%
Total			7,173	7,913	10.3%	\$4,832.79	\$5,050.79	4.5%	\$34,665,591	\$39,966,916	15.3%
Trends Adjusted for Expo	osure				10.7%			4.5%			15.7%

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.

	Current Formulary	Current Brand/	Numb	er of Prescr	iptions	Ingredient	Cost Per Pres	cription	Tota	l Ingredient Cost	
Drug	Status	Generic	2019	2020	Growth	2019	2020	Growth	2019	2020	Growth
TRESIBA FLEXTOUCH	PREF	SSB	4,809	5,028	4.6%	\$1,701.66	\$1,749.82	2.8%	\$8,183,266	\$8,798,117	7.5%
NOVOLOG FLEXPEN	PREF	SSB	3,796	3,743	-1.4%	1,644.66	1,670.98	1.6%	6,243,138	6,254,482	0.2%
LEVEMIR FLEXTOUCH	PREF	SSB	2,808	2,528	-10.0%	1,505.13	1,551.06	3.1%	4,226,419	3,921,086	-7.2%
NOVOLOG	PREF	SSB	1,854	1,771	-4.5%	2,060.44	2,098.12	1.8%	3,820,053	3,715,777	-2.7%
BASAGLAR KWIKPEN	PREF	SSB	2,593	2,629	1.4%	902.68	915.27	1.4%	2,340,639	2,406,252	2.8%
<u>Subtotals</u>											
Generic	Y	GEN	0	0	NA	NA	NA	NA	\$0	0	NA
Formulary Brand	Y	Brand	17,795	17,611	-1.0%	1,595.35	1,642.31	2.9%	28,389,312	28,922,689	1.9%
Non-Formulary Brand	<u>N</u>	Brand	<u>60</u>	<u>37</u>	-38.3%	1,242.37	1,572.76	<u>26.6%</u>	74,542	<u>58,192</u>	<u>-21.9%</u>
Total			17,855	17,648	-1.2%	\$1,594.17	\$1,642.16	3.0%	\$28,463,854	\$28,980,881	1.8%
Trends Adjusted for Exposu	re				-1.1%			3.0%			1.9%

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.

	Current Formulary	Current Brand/	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
Drug	Status	Generic	2019	2020	Growth	2019	2020	Growth	2019	2020	Growth
TRULICITY	PREF	SSB	5,402	6,116	13.2%	\$1,844.60	\$1,927.55	4.5%	\$9,964,543	\$11,788,886	18.3%
OZEMPIC	PREF	SSB	1,299	3,381	160.3%	1,530.82	1,753.02	14.5%	1,988,541	5,926,955	198.1%
VICTOZA	PREF	SSB	2,580	2,153	-16.6%	1,993.03	2,134.98	7.1%	5,142,016	4,596,622	-10.6%
RYBELSUS	PREF	SSB	0	28	NA	NA	1,097.01	NA	0	30,716	NA
RYBELSUS	N-FORM	SSB	0	6	NA	NA	758.22	NA	0	4,549	NA
Subtotals											
Generic	Y	GEN	0	0	NA	NA	NA	NA	\$0	0	NA
Formulary Brand	Y	Brand	9,281	11,678	25.8%	1,841.95	1,913.27	3.9%	17,095,100	22,343,179	30.7%
Non-Formulary Brand	<u>N</u>	Brand	<u>9</u>	<u>11</u>	<u>22.2%</u>	<u>1,480.83</u>	1,067.10	<u>-27.9%</u>	13,327	<u>11,738</u>	<u>-11.9%</u>
Total			9,290	11,689	25.8%	\$1,841.60	\$1,912.47	3.8%	\$17,108,428	\$22,354,917	30.7%
Trends Adjusted for Exposur	e				26.8%			3.8%			31.6%

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.

	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
Drug			2019	2020	Growth	2019	2020	Growth	2019	2020	Growth
REVLIMID	PREF	SSB	194	246	26.8%	\$14,009.21	\$14,427.97	3.0%	\$2,717,786	\$3,549,281	30.6%
IBRANCE	PREF	SSB	135	178	31.9%	11,013.41	11,991.68	8.9%	1,486,810	2,134,519	43.6%
IMBRUVICA	N-FORM	SSB	97	161	66.0%	13,055.27	11,997.17	-8.1%	1,266,362	1,931,545	52.5%
SPRYCEL	PREF	SSB	99	72	-27.3%	12,003.78	13,133.11	9.4%	1,188,375	945,584	-20.4%
JAKAFI	N-FORM	SSB	62	57	-8.1%	11,391.32	12,594.96	10.6%	706,262	717,913	1.6%
Subtotals											
Generic	Y	GEN	6,550	6,459	-1.4%	\$185.21	\$211.07	14.0%	\$1,213,153	1,363,305	12.4%
Formulary Brand	Y	Brand	343	629	83.4%	11,765.07	13,308.30	13.1%	4,035,419	8,370,919	107.4%
Non-Formulary Brand	<u>N</u>	Brand	<u>831</u>	<u>711</u>	-14.4%	<u>11,766.71</u>	11,521.40	-2.1%	<u>9,778,138</u>	<u>8,191,717</u>	<u>-16.2%</u>
Total			7,724	7,799	1.0%	\$1,945.46	\$2,298.49	18.1%	\$15,026,711	\$17,925,942	19.3%
Trends Adjusted for Exposure					1.0%			18.1%			19.3%

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.

	Current Formulary	Current Brand/	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
Drug	Status	Generic	2019	2020	Growth	2019	2020	Growth	2019	2020	Growth
TALTZ	NFRM-PAOVR	SSB	89	372	318.0%	\$6,073.18	\$6,803.11	12.0%	\$540,513	\$2,530,758	368.2%
TREMFYA	NFRM-NCVRD	SSB	38	25	-34.2%	10,816.43	10,783.44	-0.3%	411,024	269,586	-34.4%
TARGRETIN	N-FORM	SSB	3	4	33.3%	28,408.57	28,692.51	1.0%	85,226	114,770	34.7%
SILIQ	NFRM-NCVRD	SSB	20	12	-40.0%	3,647.16	3,552.68	-2.6%	72,943	42,632	-41.6%
ORACEA	N-FORM	MSB	168	57	-66.1%	709.83	730.66	2.9%	119,251	41,648	-65.1%
Subtotals											
Generic	Y	GEN	4,843	5,065	4.6%	\$270.82	\$274.92	1.5%	\$1,311,590	1,392,446	6.2%
Formulary Brand	Y	Brand	1,882	2,574	36.8%	2,303.71	4,782.44	107.6%	4,335,579	12,309,990	183.9%
Non-Formulary Brand	<u>N</u>	Brand	<u>475</u>	<u>683</u>	<u>43.8%</u>	<u>2,796.28</u>	4,649.61	<u>66.3%</u>	<u>1,328,231</u>	<u>3,175,686</u>	<u>139.1%</u>
Total			7,200	8,322	15.6%	\$968.81	\$2,028.13	109.3%	\$6,975,400	\$16,878,122	142.0%
Trends Adjusted for Exposure					16.2%			109.3%			143.2%