



STATE OF WEST VIRGINIA



PUBLIC EMPLOYEES INSURANCE AGENCY

Fiscal Year 2022

Detailed Medical and Prescription Drugs Claim Trend Report

Report Date: November 2022

YOUR ACTUARIES FOR THE LONG-TERM!

TABLE OF CONTENTS

OVERVIEW	1
KEY FINDINGS	2
METHODOLOGY	6
TREND COMPARISON USING ALLOWED VERSUS PAID METHODOLOGY	8
TOP 5 CATEGORIES	9
SUMMARY	9
TOTAL NON-MEDICARE TREND.....	11
NON-MEDICARE 24-MONTH TREND.....	12
NON-MEDICARE 36-MONTH TREND.....	13
NON-MEDICARE 48-MONTH TREND.....	14
NON-MEDICARE 12-MONTH IN STATE VERSUS OUT OF STATE CLAIMS	15
NON-MEDICARE PRESCRIPTION DRUGS TREND	16
Appendix A: Non-Medicare Medical Coverages – Cost Per Service, Utilization, Incurred PMPM Trends	
Appendix B Non-Medicare Prescription Drugs Coverages - Cost Per Service, Utilization, Incurred PMPM Trends	
Appendix C: Analysis of Top Forty Drugs Indicators	

West Virginia Public Employees Insurance Agency Report of Independent Actuary

Fiscal Year 2022 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, 2022 on a quarterly basis and the forecasting of Fiscal Years 2023 through 2027. This annual trend report to the Finance Board generally serves as the basis for projecting medical and drugs claims through Fiscal Year 2027 in the development of the Financial Plan to be approved by the PEIA Finance Board in December 2022. 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 2022. 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 UMR as a primary source of claims data for this report and PEIA has separately provided enrollment information. Data was processed and provided to Continuing Care Actuaries by PEIA’s data warehouse manager Mike Madalena.

Trends were developed by category for the 24-month, 36-month and 48-month credible periods ending June 2022. The analysis for medical claims do not include incurred claims for the months after June 2022. The claim experience for the months after June 2022 is largely non-credible as substantial reserves as part of the projected monthly incurred amount. The claim information supplied by 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 UMR used in this analysis was reconciled and balanced to the PEIA general ledger amounts as of June 2022.

KEY FINDINGS - MEDICAL

- The 24-month, 36-month and 48-month methodologies had various utilization and unit cost trends. Long-term methodologies are 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. The overall medical trend decreased from 10.7% in last year’s analysis to 9.0% in Fiscal Year 2022 using a 24-month study period, likely due to the pandemic’s impact in FY 2021 that had higher claims. Using the 24-month analysis, PEIA experienced a 4.5% trend in utilization and a 4.3% trend in unit cost, resulting in an aggregate trend of 9.0%. The 36-month method resulted in a lower trend of 9.8% and the 48-month method resulted in a lower trend of 8.5%.

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			
	<u>Utilization</u>	<u>Cost/Service</u>	<u>Total Trend</u>
2002	4.1%	3.6%	7.8%
2003	9.8%	-3.0%	6.5%
2004	11.7%	-6.8%	4.0%
2005	2.8%	-1.1%	1.7%
2006	2.9%	1.0%	4.0%
2007	7.2%	-2.0%	5.1%
2008	2.9%	3.9%	6.9%
2009	2.5%	2.6%	5.1%
2010	2.5%	1.8%	4.4%
2011	4.2%	3.5%	7.8%
2012	5.1%	0.1%	5.3%
2013	2.6%	-1.6%	0.9%
2014	-0.4%	4.5%	4.1%
2015	0.7%	5.6%	6.3%
2016	8.6%	-0.7%	7.9%
2017	3.9%	-1.1%	2.8%
2018	4.4%	2.4%	6.9%
2019	5.5%	3.0%	8.6%
2020	3.2%	1.6%	4.8%
2021	3.2%	7.3%	10.7%
2022	4.5%	4.3%	9.0%

- 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 2022 24-month detail trends are summarized below. Note that these trends have not been adjusted for any changes in the plan benefit design and drug rebates are not included in this analysis:

Fiscal Year 2022 Claim Type	Medical	Gross Drugs
PEIA – Active Local	3.9%	20.5%
PEIA – State	<u>10.3%</u>	<u>19.1%</u>
PEIA – Total	9.0%	19.4%
RHBT – Non-Medicare	10.4%	17.0%
Grand Total	9.2%	19.1%

- In the 24-month analysis, OOS BC services have experienced higher trends than In-State and OOS NBC services for Non-Medicare coverages in two out of four categories (PS and O, not HI and HO). 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 13.5%, an aggregate OOS NBC trend of -3.2%, and an aggregate OOS BC trend of 16.3%.

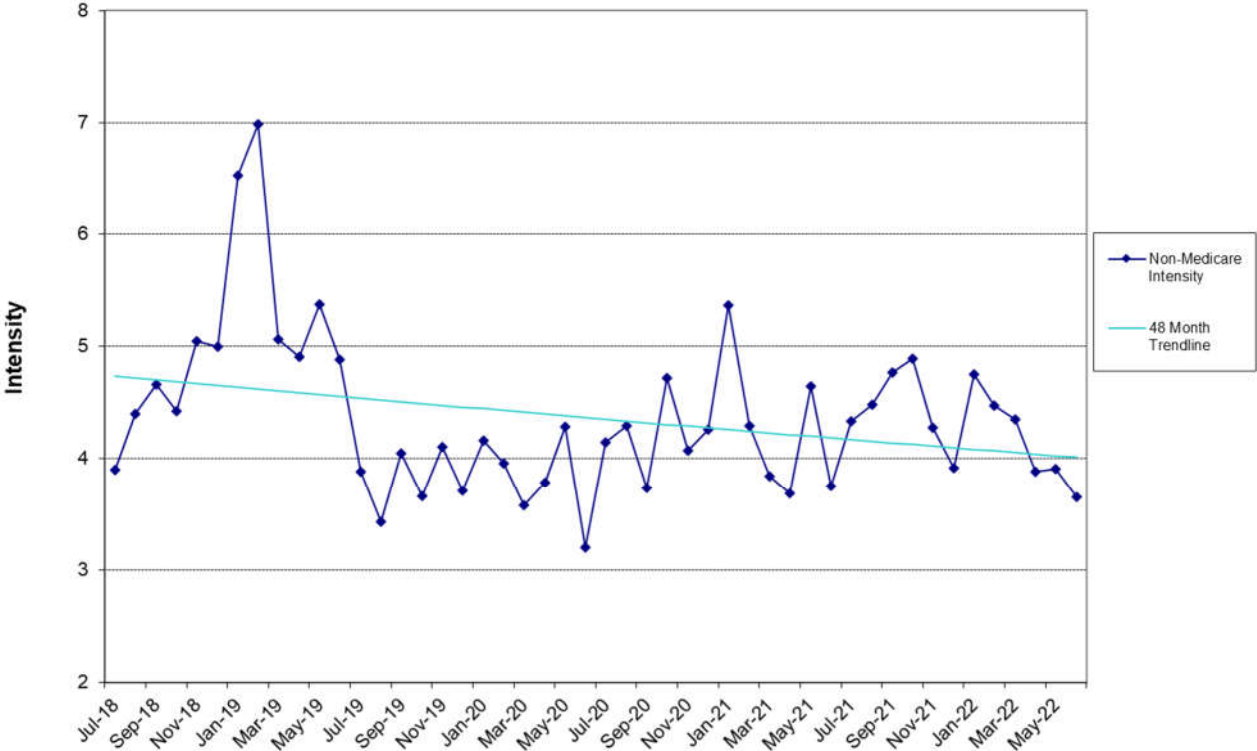
The OOS NBC utilization trend has been lower while the OOS NBC cost per service trend has also been lower compared to In-State and OOS BC trends. The In-State utilization trend for Non-Medicare was 6.2%, while the OOS NBC trend was -6.3% and the OOS BC trend was 3.7%. The In-State cost per service trend for Non-Medicare was 6.9%, while the OOS NBC trend was 3.2%, and the OOS BC trend was 12.2%.

Within the In-State medical categories, the 3 highest trend subcategories were observed for Hospital Inpatient’s Medical / Surgical, Hospital Inpatient’s Psychiatric/Substance Abuse, and Hospital Outpatient’s Psychiatric / Substance Abuse categories. These categories experienced high trends of 25.4%, 27.8% and 35.7%, respectively.

- Using the 24-month analysis, Hospital Inpatient services (“HI”) represent 16.9% of all medical services and experienced a total trend of 3.8%. The overall trend was the product of a -3.4% decrease in utilization and a 7.5% increase in unit cost. In-State HI claims had a 24.6% overall trend, while OOS NBC HI claims experienced a -23.0% overall trend, and OOS BC HI claims experienced a 12.5% overall trend.
- Using the 24-month analysis, Hospital Outpatient services (“HO”) represent 34.3% of all medical services and experienced the least favorable trend of the broader claim categories with a total trend of 12.1%. The overall trend was the product of a 7.0% increase in utilization and a 4.8% increase in unit cost. In-State HO claims had a 12.0% overall trend, while OOS NBC HO claims experienced an 18.4% overall trend, and OOS BC HO claims experienced an 8.3% overall trend.

- Using the 24-month analysis, Physician Services (“PS”) represent 47.4% of all medical services and experienced a total trend of 9.2%. The overall trend was the product of a 5.7% increase in utilization of these services and a 3.3% increase in unit cost. In-State PS claims had a 12.0% overall trend, while OOS NBC PS claims experienced a -0.7% overall trend, and OOS BC PS claims experienced a 22.4% overall trend.
- Using the 24-month analysis, Other services (“O”), which are services that are principally Ambulance and Durable Medical Services, represent 1.4% of all medical services and experienced a total trend of -9.7%. The overall trend was the product of a -0.4% decrease in utilization of these services and a -9.4% decrease in unit cost. In-State O claims showed an -8.1% overall trend, while OOS NBC O claims experienced a -12.7% overall trend, and OOS BC O claims experienced a 40.7% overall trend.
- As noted above, the OOS NBC trends were generally more favorable than the In-State trends and the OOS BC trends. This is similar to last year’s report that the OOS NBC trends were more favorable.
- It is noteworthy that the Hospital Inpatient trends in all locations were substantially lower than the overall medical trend. Conversely, Hospital Outpatient trends were substantially higher than the overall medical trend.
- 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 -4.1%, which is comparable to -1.4% last year. The historical data is illustrated in the chart below. The increases in January through June 2019 are 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			
	<u>24-Month</u>	<u>36-Month</u>	<u>48-Month</u>
Visits	-11.9%	-7.4%	-1.0%
Intensity	-2.0%	3.0%	-4.1%
<u>Cost/Day</u>	<u>20.3%</u>	<u>12.8%</u>	<u>12.4%</u>
Total	3.8%	7.5%	6.7%

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 15 and analyzes the distribution of services based on services provided in West Virginia and services provided elsewhere.

In the 12-month period ending June 2022, 85.4% of medical services were provided in the State of West Virginia, 10.9% of services were provided OOS NBC, and 3.7% of services were provided OOS BC. From a cost perspective, 74.7% of allowed charges were incurred In-State, 17.7% of allowed charges were provided OOS NBC, and 7.6% 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, 83.3% of Hospital Inpatient services were provided in the State of West Virginia representing 59.5% of the total allowed charges for Hospital Inpatient. Conversely, 11.6% of Hospital Inpatient services were provided OOS NBC and those charges represented 30.0% of the total allowed charges for Hospital Inpatient. In addition, 5.2% of Hospital Inpatient services were provided OOS BC and those charges represented 10.5% of the total allowed charges for Hospital Inpatient.

By major medical category, 91.9% of Hospital Outpatient services were provided in the State of West Virginia representing 74.9% of the total allowed charges for Hospital Outpatient. Conversely, 5.0% of Hospital Outpatient services were provided OOS NBC and those charges represented 15.0% of the total allowed charges for Hospital Outpatient. In addition, 3.1% of Hospital Outpatient services were provided OOS BC and those charges represented 10.2% of the total allowed charges for Hospital Outpatient.

By major medical category, 84.6% of Physician Services were provided in the State of West Virginia representing 80.3% of the total allowed charges for Physician Services. Conversely, 11.7% of Physician Services were provided OOS NBC and those charges represented 15.0% of the total allowed charges for Physician Services. In addition, 3.7% of Physician Services were provided OOS BC and those charges represented 4.7% of the total allowed charges for Physician Services.

By major medical category, 81.8% of Other Services were provided in the State of West Virginia representing 69.8% of the total allowed charges for Other Services. Conversely, 14.2% of Other Services were provided OOS NBC and those charges represented 26.4% of the total allowed charges for Other Services. In addition, 4.0% of Other Services were provided OOS BC and those charges represented 3.8% of the total allowed charges for Other Services.

KEY FINDINGS - DRUGS

Overall, gross prescription drugs trends for Non-Medicare coverages have increased compared to 13.1% last year. Using the 24-month analysis, there was a 2.8% utilization increase and a 16.1% prescription cost increase, resulting in an aggregate trend of 19.4% when adjusting for membership exposure. The 24-month overall trend is higher than the 36-month trend of 16.2% and the 48-month trend of 15.4%.

West Virginia PEIA Prescription Drugs Total 24-Month Trend Analysis-Allowed Claims			
	<u>Utilization</u>	<u>Cost/Prescription</u>	<u>Total Trend</u>
FY 2022	2.8%	16.1%	19.4%

METHODOLOGY

UMR provided allowed and paid claim information for Non-Medicare and Medicare eligibility from July 2001 through August 2022. This data set was analyzed for Non-Medicare claims that were incurred from July 2018 through June 2022 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 UMR. 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 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 an increase 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 the 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 UMR by Hospital Inpatient (HI), Hospital Outpatient (HO), Physician Services (PS), and Other Services (O) is detailed below.

<u>Non-Medicare Claims</u>	<u>FY2019</u>	<u>FY2020</u>	<u>FY2021</u>	<u>FY2022</u>
Hospital Inpatient	\$102,723,106	\$92,941,703	\$121,358,553	\$120,124,331
Hospital Outpatient	188,484,711	196,902,909	227,625,778	264,055,942
Physician Services	257,697,427	249,655,145	297,857,528	346,299,288
Other Services	23,068,281	22,935,009	26,789,560	28,070,032
Total	\$571,973,525	\$562,434,766	\$673,631,419	\$758,549,593

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

<u>Non-Medicare Claims</u>	<u>FY2019</u>	<u>FY2020</u>	<u>FY2021</u>	<u>FY2022</u>
HI Maternity	\$6,813,581	\$7,720,685	\$9,322,389	\$12,194,838
HI Medical/Surgical	92,227,057	82,617,438	108,629,785	104,438,477
HI Psychiatric/Substance Abuse	3,682,468	2,603,580	3,406,379	3,491,015
HO Emergency Room	33,022,661	31,224,318	31,444,077	37,741,728
HO Medical/Surgical	87,684,754	87,014,190	105,472,595	122,278,510
HO Other Services	66,680,876	77,135,507	88,645,790	100,696,815
HO Psychiatric/Substance Abuse	1,096,419	1,528,894	2,063,315	3,338,888
PS Anesthesia	11,113,298	10,835,626	14,547,290	15,660,236
PS Chemotherapy/Radiation	2,690,958	2,296,312	2,138,027	2,711,999
PS Emergency Room	5,858,366	5,277,415	5,288,990	6,127,869
PS Immunizations/Allergy	9,436,950	8,712,641	9,024,155	9,676,060
PS Inpatient Surgery	7,111,414	6,354,617	7,347,489	6,499,349
PS Inpatient Visits	6,941,007	6,309,646	7,932,028	9,190,006
PS Lab & Pathology	14,170,627	11,313,733	12,680,415	15,482,904
PS Maternity	7,056,705	7,901,180	9,283,114	9,617,430
PS Office Visits	66,369,261	59,136,525	68,258,365	87,944,081
PS Other Services	58,561,262	56,122,761	60,816,904	66,967,404
PS Outpatient Surgery	42,745,083	49,414,546	68,183,263	77,241,159
PS Psychiatric/Substance Abuse	14,109,798	15,135,427	20,292,310	25,376,151
PS Radiology	11,532,698	10,844,715	12,065,178	13,804,640
PS Therapy/Rehab	14,373,139	14,303,152	16,798,678	18,688,891
O Ambulance	4,835,314	4,378,196	5,012,386	4,747,641
O Durable Medical Equipment	3,859,828	4,253,661	4,978,496	4,633,500

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 2019 through 2022 and on an allowed basis for Non-Medicare medical claims. This exercise is important since interim monthly trend updates provided to PEIA throughout the year are based on paid claims.

West Virginia PEIA Non-Medicare Medical Total Trend Analysis		
	<u>Paid Basis</u>	<u>Allowed Basis</u>
24-Month Trend	12.4%	9.0%
36-Month Trend	14.3%	9.8%
48-Month Trend	10.4%	8.5%

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			
	2021 Average	2022 Average	Top 5
<u>Category</u>	<u>Utilization</u>	<u>Utilization</u>	<u>Highest %</u>
PS-Anesthesia	0.04006	0.05871	46.5%
HO-Psychiatric / Substance Abuse	0.00332	0.00413	24.4%
PS-Chemotherapy / Radiation	0.01652	0.01856	12.4%
PS-Lab & Pathology	0.17500	0.19492	11.4%
PS-Outpatient Surgery	0.12039	0.13409	11.4%

Top 5 Highest Percentage in Cost / Service Increases			
	2021 Average	2022 Average	Top 5
<u>Category</u>	<u>Cost / Service</u>	<u>Cost / Service</u>	<u>Highest %</u>
HI-Psychiatric / Substance Abuse	\$3,403.88	\$4,561.49	34.0%
HI-Maternity	1,843.84	2,380.17	29.1%
PS-Other Services	129.59	150.02	15.8%
PS-Psychiatric / Substance Abuse	102.49	114.86	12.1%
PS-Immunizations / Injections / Allergy	93.19	104.05	11.7%

Top 5 Highest Percentage in Cost / Capita Increases			
	2021 Average	2022 Average	Top 5
<u>Category</u>	<u>Cost / Capita</u>	<u>Cost / Capita</u>	<u>Highest %</u>
HO-Psychiatric / Substance Abuse	\$1.17	\$1.56	33.0%
HI-Maternity	5.03	6.39	27.0%
PS-Psychiatric / Substance Abuse	10.38	12.38	19.2%
PS-Office Visits	35.55	42.36	19.2%
HO-Medical / Surgical	53.34	61.81	15.9%

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 higher than the current trend assumption of 7.0% for FY 2023. Additionally, the 24-Month trend has reflected a higher 9.0% trend for medical, while the 36-month trend is 9.8% and the 48-month trend is 8.5%. CCA believes that it is appropriate to retain the FY 2023 medical claim trend assumption for Non-Medicare medical at 7.0%, given the long-term trend experience after adjustment for the post COVID high trend periods to pre COVID utilization levels.

Additionally, recent experience has shown that Non-Medicare gross drugs claim trends are similar to the current trend assumption of 14.0% for FY 2023. The 24-Month trend has reflected a 19.4% trend for drugs, before rebates. It should be noted that the 36-month trend is 16.2% and the 48-month trend is 15.4%. CCA believes that it is appropriate to retain the FY 2023 prescription drugs claim trend assumption for Non-Medicare prescription drugs at 14.0%. This approximates the 48-month trend experience which matches the time period that the current PBM has been in place.

The update of the trend assumptions for FY 2023 is shown below.

Claim Type	Fiscal Year 2023 Trends		
	Previous Assumption	Updated Assumption	Change
Non-Medicare – Medical	7.0%	7.0%	0.0%
Non-Medicare – Gross Prescription Drugs	14.0%	14.0%	0.0%

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 2024 and in each successive fiscal year. Medical trends are assumed to increase 0.5% in FY 2024 and thereafter. Additionally, drug rebates have been trending at approximately 15% 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 15% 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,

Dave Bond, F.S.A., M.A.A.A.

Managing Partner

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

Principal

**West Virginia PEIA Non-Medicare Total
Study Period of July 2018 to June 2022
(Allowed Claims)**

Trends Summary - Excludes Drugs

	24 Month Trends Summary				36 Month Trends Summary				48 Month Trends Summary			
	<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>	<u>Weight</u>	<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>	<u>Weight</u>	<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>	<u>Weight</u>
HOSPITAL INPATIENT												
Maternity	-1.6%	29.1%	27.0%	1.5%	-2.6%	27.5%	24.1%	1.5%	2.3%	13.7%	16.4%	1.4%
Medical / Surgical	-2.9%	4.4%	1.4%	14.9%	-0.1%	6.1%	5.9%	14.9%	1.9%	4.0%	6.0%	15.2%
Psychiatric / Substance Abuse	-22.4%	34.0%	4.0%	0.5%	1.2%	4.2%	5.5%	0.5%	-1.3%	4.2%	2.9%	0.5%
TOTAL	-3.4%	7.5%	3.8%	16.9%	-0.3%	7.9%	7.5%	16.8%	1.8%	4.8%	6.7%	17.1%
HOSPITAL OUTPATIENT												
Emergency Room	6.6%	6.3%	13.3%	4.8%	-6.8%	8.6%	1.2%	5.0%	-4.3%	5.6%	1.1%	5.2%
Medical / Surgical	10.5%	4.9%	15.9%	15.9%	7.2%	6.4%	14.1%	15.8%	10.2%	0.3%	10.5%	15.7%
Other Services	2.4%	4.1%	6.6%	13.2%	1.9%	2.9%	4.9%	13.4%	5.5%	4.8%	10.6%	13.0%
Psychiatric / Substance Abuse	24.4%	6.9%	33.0%	0.4%	21.3%	11.3%	35.0%	0.3%	20.6%	14.4%	38.0%	0.3%
TOTAL	7.0%	4.8%	12.1%	34.3%	3.3%	5.4%	8.9%	34.5%	6.3%	2.9%	9.4%	34.2%
PHYSICIAN SERVICES												
Anesthesia	46.5%	-29.5%	3.3%	2.1%	51.9%	-24.7%	14.4%	2.1%	36.2%	-15.6%	14.9%	2.0%
Chemotherapy / Radiation	12.4%	-1.7%	10.5%	0.3%	-3.8%	4.6%	0.6%	0.4%	-3.6%	0.9%	-2.7%	0.4%
Emergency Room	4.5%	0.1%	4.6%	0.8%	-1.9%	2.5%	0.5%	0.8%	-4.3%	2.2%	-2.2%	0.9%
Immunizations / Injections / Allergy	-18.7%	11.7%	-9.2%	1.3%	-16.5%	9.8%	-8.3%	1.4%	-11.9%	8.1%	-4.7%	1.4%
Inpatient Surgery	-8.8%	-4.4%	-12.8%	1.0%	-3.3%	0.5%	-2.9%	1.0%	-1.0%	-2.7%	-3.7%	1.1%
Inpatient Visits	1.3%	2.5%	3.8%	1.2%	7.8%	3.7%	11.8%	1.2%	6.2%	1.2%	7.6%	1.2%
Lab & Pathology	11.4%	-1.9%	9.2%	2.0%	10.3%	0.2%	10.5%	2.0%	6.2%	-4.5%	1.4%	2.1%
Maternity	2.9%	-6.5%	-3.9%	1.3%	9.7%	-4.3%	5.0%	1.3%	11.4%	-3.2%	7.8%	1.3%
Office Visits	9.1%	9.2%	19.2%	10.9%	6.7%	8.6%	15.9%	10.8%	3.5%	4.3%	7.9%	11.0%
Other Services	-9.7%	15.8%	4.5%	8.9%	3.2%	-0.5%	2.6%	9.2%	4.4%	-2.6%	1.7%	9.5%
Outpatient Surgery	11.4%	-6.3%	4.3%	10.2%	13.8%	2.1%	16.1%	9.8%	12.5%	5.8%	19.0%	9.2%
Psychiatric / Substance Abuse	6.4%	12.1%	19.2%	3.2%	8.4%	13.9%	23.5%	3.0%	11.4%	7.2%	19.4%	2.9%
Radiology	9.4%	-2.0%	7.1%	1.8%	6.6%	0.5%	7.1%	1.8%	2.3%	1.6%	3.9%	1.9%
Therapies	1.0%	3.1%	4.1%	2.5%	5.6%	2.2%	7.9%	2.5%	5.1%	1.5%	6.7%	2.5%
TOTAL	5.7%	3.3%	9.2%	47.4%	8.6%	2.6%	11.4%	47.3%	7.0%	1.5%	8.6%	47.3%
OTHER												
Ambulance	-6.0%	-7.7%	-13.2%	0.7%	-3.6%	-0.1%	-3.6%	0.7%	-0.5%	-2.8%	-3.2%	0.7%
Appliances (DME)	5.4%	-11.1%	-6.3%	0.7%	-0.8%	3.1%	2.3%	0.7%	4.5%	1.0%	5.5%	0.7%
TOTAL	-0.4%	-9.4%	-9.7%	1.4%	-2.2%	1.5%	-0.7%	1.4%	1.9%	-0.9%	0.9%	1.4%
GRAND TOTAL	4.5%	4.3%	9.0%	100.0%	5.1%	4.4%	9.8%	100.0%	5.8%	2.5%	8.5%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2020 to June 2022
(Allowed Claims)**

24 Month Trends Summary - Excludes Drugs

	In-State			OOS NBC			OOS BC			Total			In-State	OOS NBC	OOS BC	Total
	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Weight	Weight	Weight	Weight
HOSPITAL INPATIENT																
Maternity	0.0%	15.0%	15.0%	-22.1%	162.8%	104.8%	3.1%	17.1%	20.7%	-1.6%	29.1%	27.0%	1.2%	2.2%	2.3%	1.5%
Medical / Surgical	-1.4%	27.2%	25.4%	-9.8%	-27.9%	-35.0%	-7.4%	19.8%	10.9%	-2.9%	4.4%	1.4%	10.7%	29.0%	21.0%	14.9%
Psychiatric / Substance Abuse	-13.6%	47.9%	27.8%	-21.1%	23.5%	-2.6%	38.6%	32.5%	83.6%	-22.4%	34.0%	4.0%	0.5%	0.4%	0.3%	0.5%
TOTAL	-1.8%	26.9%	24.6%	-10.8%	-13.7%	-23.0%	-6.1%	19.7%	12.5%	-3.4%	7.5%	3.8%	12.4%	31.6%	23.5%	16.9%
HOSPITAL OUTPATIENT																
Emergency Room	7.8%	3.5%	11.6%	-16.3%	36.9%	14.6%	19.2%	-2.0%	16.8%	6.6%	6.3%	13.3%	4.5%	3.5%	11.5%	4.8%
Medical / Surgical	11.4%	5.2%	17.2%	-1.2%	26.5%	25.0%	8.0%	-3.2%	4.5%	10.5%	4.9%	15.9%	16.8%	10.5%	20.5%	15.9%
Other Services	2.9%	2.0%	5.0%	-9.0%	24.9%	13.6%	5.1%	3.2%	8.5%	2.4%	4.1%	6.6%	13.5%	11.6%	14.7%	13.2%
Psychiatric / Substance Abuse	26.2%	7.5%	35.7%	4.2%	-13.0%	-9.3%	30.2%	19.4%	55.4%	24.4%	6.9%	33.0%	0.5%	0.1%	0.1%	0.4%
TOTAL	7.9%	3.8%	12.0%	-6.8%	27.0%	18.4%	8.3%	0.0%	8.3%	7.0%	4.8%	12.1%	35.2%	25.7%	46.9%	34.3%
PHYSICIAN SERVICES																
Anesthesia	45.0%	-25.1%	8.6%	101.2%	-50.6%	-0.5%	9.7%	-4.8%	4.4%	46.5%	-29.5%	3.3%	2.2%	2.0%	1.3%	2.1%
Chemotherapy / Radiation	13.5%	1.9%	15.7%	-1.6%	-0.6%	-2.2%	8.2%	-26.6%	-20.6%	12.4%	-1.7%	10.5%	0.4%	0.3%	0.3%	0.3%
Emergency Room	6.8%	1.3%	8.2%	-24.1%	38.8%	5.3%	23.2%	-25.4%	-8.1%	4.5%	0.1%	4.6%	0.8%	0.6%	1.3%	0.8%
Immunizations / Injections / Allergy	-28.0%	10.7%	-20.3%	-31.3%	28.5%	-11.7%	-12.9%	5.8%	-7.8%	-18.7%	11.7%	-9.2%	1.6%	0.4%	0.8%	1.3%
Inpatient Surgery	-7.9%	-2.8%	-10.5%	-15.6%	-3.2%	-18.3%	4.0%	15.9%	20.6%	-8.8%	-4.4%	-12.8%	0.9%	1.5%	0.4%	1.0%
Inpatient Visits	4.3%	-4.4%	-0.2%	-8.2%	37.0%	25.8%	-7.3%	4.2%	-3.4%	1.3%	2.5%	3.8%	1.2%	1.5%	0.5%	1.2%
Lab & Pathology	12.5%	10.5%	24.3%	8.5%	-9.1%	-1.3%	14.8%	-11.4%	1.8%	11.4%	-1.9%	9.2%	1.2%	5.2%	0.8%	2.0%
Maternity	4.5%	4.6%	9.3%	0.7%	-42.6%	-42.2%	-11.7%	8.9%	-3.8%	2.9%	-6.5%	-3.9%	1.4%	1.4%	0.6%	1.3%
Office Visits	9.4%	9.4%	19.7%	6.0%	9.5%	16.0%	6.8%	5.9%	13.0%	9.1%	9.2%	19.2%	13.3%	3.6%	5.8%	10.9%
Other Services	-10.3%	26.6%	13.5%	-13.7%	3.5%	-10.7%	5.0%	33.9%	40.6%	-9.7%	15.8%	4.5%	6.5%	19.2%	7.0%	8.9%
Outpatient Surgery	12.4%	-6.0%	5.6%	-10.0%	11.8%	0.6%	20.7%	-24.1%	-8.4%	11.4%	-6.3%	4.3%	12.5%	2.5%	6.6%	10.2%
Psychiatric / Substance Abuse	9.7%	9.0%	19.5%	-26.5%	53.5%	12.9%	25.1%	9.2%	36.6%	6.4%	12.1%	19.2%	4.0%	1.0%	0.7%	3.2%
Radiology	10.8%	-4.3%	6.1%	-4.4%	23.0%	17.6%	6.8%	-2.6%	4.0%	9.4%	-2.0%	7.1%	1.9%	1.2%	2.1%	1.8%
Therapies	1.3%	2.8%	4.1%	-18.6%	5.2%	-14.3%	8.0%	8.0%	16.6%	1.0%	3.1%	4.1%	3.2%	0.2%	1.0%	2.5%
TOTAL	7.1%	4.6%	12.0%	-2.9%	2.3%	-0.7%	7.2%	14.1%	22.4%	5.7%	3.3%	9.2%	51.1%	40.7%	29.0%	47.4%
OTHER																
Ambulance	-5.3%	-5.6%	-10.6%	-13.8%	-8.9%	-21.5%	4.7%	-9.5%	-5.3%	-6.0%	-7.7%	-13.2%	0.7%	0.9%	0.4%	0.7%
Appliances (DME)	2.1%	-7.3%	-5.4%	18.8%	-21.9%	-7.2%	41.6%	31.8%	86.6%	5.4%	-11.1%	-6.3%	0.6%	1.1%	0.2%	0.7%
TOTAL	-1.7%	-6.4%	-8.1%	3.9%	-15.9%	-12.7%	24.7%	12.9%	40.7%	-0.4%	-9.4%	-9.7%	1.3%	2.0%	0.6%	1.4%
GRAND TOTAL	6.2%	6.9%	13.5%	-6.3%	3.2%	-3.2%	3.7%	12.2%	16.3%	4.5%	4.3%	9.0%	100.0%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2019 to June 2022
(Allowed Claims)**

36 Month Trends Summary - Excludes Drugs

	In-State			OOS NBC			OOS BC			Total			In-State Weight	OOS NBC Weight	OOS BC Weight	Total Weight
	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend				
HOSPITAL INPATIENT																
Maternity	-0.7%	12.2%	11.4%	-25.5%	65.9%	23.5%	9.3%	10.8%	21.1%	-2.6%	27.5%	24.1%	1.3%	1.9%	2.2%	1.5%
Medical / Surgical	-0.1%	25.5%	25.4%	-3.2%	-16.2%	-18.9%	7.0%	10.8%	18.5%	-0.1%	6.1%	5.9%	10.2%	30.1%	20.6%	14.9%
Psychiatric / Substance Abuse	-10.8%	9.6%	-2.3%	-13.3%	-9.4%	-21.5%	31.1%	13.9%	49.3%	1.2%	4.2%	5.5%	0.5%	0.4%	0.3%	0.5%
TOTAL	-0.6%	23.4%	22.7%	-4.7%	-11.3%	-15.5%	7.4%	10.9%	19.1%	-0.3%	7.9%	7.5%	12.0%	32.4%	23.2%	16.8%
HOSPITAL OUTPATIENT																
Emergency Room	-7.5%	6.2%	-1.8%	-16.3%	22.9%	2.8%	16.9%	0.1%	17.0%	-6.8%	8.6%	1.2%	4.8%	3.4%	11.8%	5.0%
Medical / Surgical	7.0%	6.7%	14.1%	8.6%	7.1%	16.2%	12.8%	2.3%	15.4%	7.2%	6.4%	14.1%	16.8%	10.1%	20.6%	15.8%
Other Services	1.6%	3.3%	5.0%	3.9%	-4.1%	-0.4%	9.1%	5.6%	15.2%	1.9%	2.9%	4.9%	13.6%	11.9%	14.6%	13.4%
Psychiatric / Substance Abuse	24.4%	13.1%	40.7%	-2.3%	-15.4%	-17.4%	6.3%	10.5%	17.5%	21.3%	11.3%	35.0%	0.4%	0.2%	0.1%	0.3%
TOTAL	3.2%	5.4%	8.8%	3.0%	3.8%	6.9%	11.6%	3.6%	15.6%	3.3%	5.4%	8.9%	35.6%	25.5%	47.1%	34.5%
PHYSICIAN SERVICES																
Anesthesia	45.8%	-23.7%	11.3%	57.5%	-32.1%	6.9%	21.6%	-10.2%	9.2%	51.9%	-24.7%	14.4%	2.2%	1.9%	1.3%	2.1%
Chemotherapy / Radiation	-4.7%	4.3%	-0.6%	5.0%	6.8%	12.2%	2.9%	-4.6%	-1.9%	-3.8%	4.6%	0.6%	0.4%	0.2%	0.3%	0.4%
Emergency Room	-1.1%	1.5%	0.4%	-19.6%	22.4%	-1.6%	20.0%	-5.8%	13.1%	-1.9%	2.5%	0.5%	0.9%	0.6%	1.3%	0.8%
Immunizations / Injections / Allergy	-16.7%	9.3%	-9.0%	-18.7%	14.8%	-6.7%	-4.6%	10.7%	5.6%	-16.5%	9.8%	-8.3%	1.7%	0.5%	0.8%	1.4%
Inpatient Surgery	-4.9%	-0.1%	-5.0%	1.6%	0.7%	2.3%	8.4%	-6.1%	1.9%	-3.3%	0.5%	-2.9%	1.0%	1.4%	0.4%	1.0%
Inpatient Visits	10.0%	-0.7%	9.3%	-0.1%	24.1%	23.9%	3.3%	7.2%	10.7%	7.8%	3.7%	11.8%	1.2%	1.4%	0.5%	1.2%
Lab & Pathology	11.3%	1.7%	13.2%	7.8%	0.5%	8.4%	12.9%	-6.2%	5.8%	10.3%	0.2%	10.5%	1.3%	5.1%	0.8%	2.0%
Maternity	7.2%	2.6%	10.0%	16.4%	-22.7%	-10.0%	2.1%	11.9%	14.3%	9.7%	-4.3%	5.0%	1.4%	1.4%	0.6%	1.3%
Office Visits	6.6%	8.7%	15.9%	7.7%	9.7%	18.2%	6.9%	5.1%	12.3%	6.7%	8.6%	15.9%	13.2%	3.4%	5.8%	10.8%
Other Services	-1.5%	6.6%	5.0%	22.0%	-24.7%	-8.2%	11.9%	12.8%	26.2%	3.2%	-0.5%	2.6%	6.7%	19.4%	7.0%	9.2%
Outpatient Surgery	14.5%	2.2%	17.1%	-1.8%	10.3%	8.2%	20.9%	-8.1%	11.2%	13.8%	2.1%	16.1%	12.0%	2.5%	6.6%	9.8%
Psychiatric / Substance Abuse	10.0%	12.1%	23.4%	-8.1%	41.4%	29.9%	22.8%	10.0%	35.2%	8.4%	13.9%	23.5%	3.8%	0.9%	0.6%	3.0%
Radiology	6.9%	-0.8%	6.1%	1.2%	11.1%	12.5%	9.6%	0.1%	9.7%	6.6%	0.5%	7.1%	2.0%	1.2%	2.1%	1.8%
Therapies	5.5%	2.0%	7.7%	-3.2%	4.8%	1.5%	14.6%	5.4%	20.8%	5.6%	2.2%	7.9%	3.3%	0.2%	0.9%	2.5%
TOTAL	8.3%	4.1%	12.7%	14.9%	-10.1%	3.3%	11.9%	5.6%	18.2%	8.6%	2.6%	11.4%	51.1%	40.1%	29.1%	47.3%
OTHER																
Ambulance	-3.9%	0.3%	-3.6%	-4.9%	-1.0%	-5.9%	7.3%	-4.9%	2.0%	-3.6%	-0.1%	-3.6%	0.7%	0.9%	0.4%	0.7%
Appliances (DME)	-4.4%	5.7%	1.0%	16.2%	-8.8%	6.0%	41.7%	30.3%	84.6%	-0.8%	3.1%	2.3%	0.7%	1.1%	0.2%	0.7%
TOTAL	-4.1%	2.9%	-1.4%	6.6%	-5.2%	1.0%	26.1%	14.3%	44.2%	-2.2%	1.5%	-0.7%	1.3%	2.0%	0.6%	1.4%
GRAND TOTAL	5.2%	6.9%	12.5%	5.4%	-6.9%	-1.8%	10.6%	7.0%	18.3%	5.1%	4.4%	9.8%	100.0%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2018 to June 2022
(Allowed Claims)**

48 Month Trends Summary - Excludes Drugs

	In-State			OOS NBC			OOS BC			Total			In-State Weight	OOS NBC Weight	OOS BC Weight	Total Weight
	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend	Utilization	Cost / Service	Total Trend				
HOSPITAL INPATIENT																
Maternity	1.7%	7.0%	8.9%	3.8%	30.7%	35.7%	9.8%	7.3%	17.8%	2.3%	13.7%	16.4%	1.3%	1.6%	2.2%	1.4%
Medical / Surgical	1.2%	16.1%	17.5%	4.8%	-6.7%	-2.2%	5.0%	7.0%	12.3%	1.9%	4.0%	6.0%	10.2%	31.3%	20.9%	15.2%
Psychiatric / Substance Abuse	-5.1%	8.2%	2.7%	5.8%	-16.4%	-11.5%	29.2%	18.8%	53.5%	-1.3%	4.2%	2.9%	0.6%	0.4%	0.3%	0.5%
TOTAL	1.0%	14.8%	15.9%	4.7%	-5.0%	-0.5%	5.5%	7.1%	13.1%	1.8%	4.8%	6.7%	12.0%	33.3%	23.4%	17.1%
HOSPITAL OUTPATIENT																
Emergency Room	-5.8%	3.7%	-2.3%	0.8%	1.7%	2.6%	13.6%	6.1%	20.6%	-4.3%	5.6%	1.1%	5.0%	3.3%	11.8%	5.2%
Medical / Surgical	10.1%	-0.3%	9.8%	8.9%	3.3%	12.5%	14.7%	5.3%	20.8%	10.2%	0.3%	10.5%	16.8%	10.0%	20.1%	15.7%
Other Services	5.2%	4.9%	10.4%	10.7%	-5.4%	4.8%	8.7%	15.6%	25.7%	5.5%	4.8%	10.6%	13.2%	11.8%	13.5%	13.0%
Psychiatric / Substance Abuse	25.2%	24.4%	55.6%	-10.5%	-23.1%	-31.1%	0.8%	-5.2%	-4.4%	20.6%	14.4%	38.0%	0.4%	0.2%	0.2%	0.3%
TOTAL	6.2%	2.5%	8.8%	8.5%	-1.2%	7.3%	11.7%	10.1%	23.0%	6.3%	2.9%	9.4%	35.4%	25.3%	45.6%	34.2%
PHYSICIAN SERVICES																
Anesthesia	34.1%	-14.5%	14.6%	58.4%	-25.6%	17.8%	18.2%	-5.5%	11.7%	36.2%	-15.6%	14.9%	2.1%	1.9%	1.3%	2.0%
Chemotherapy / Radiation	-4.5%	0.9%	-3.6%	4.0%	-0.9%	3.1%	7.1%	-7.0%	-0.4%	-3.6%	0.9%	-2.7%	0.4%	0.3%	0.3%	0.4%
Emergency Room	-5.7%	2.4%	-3.4%	1.5%	-6.3%	-4.9%	11.9%	-5.5%	5.8%	-4.3%	2.2%	-2.2%	0.9%	0.6%	1.3%	0.9%
Immunizations / Injections / Allergy	-13.4%	8.4%	-6.2%	8.8%	-12.6%	-4.9%	-5.1%	11.5%	5.8%	-11.9%	8.1%	-4.7%	1.8%	0.4%	0.8%	1.4%
Inpatient Surgery	-1.9%	-4.2%	-6.0%	1.9%	0.7%	2.7%	6.1%	-6.9%	-1.2%	-1.0%	-2.7%	-3.7%	1.0%	1.4%	0.4%	1.1%
Inpatient Visits	8.1%	-1.2%	6.8%	-0.1%	14.2%	14.1%	2.4%	-1.2%	1.2%	6.2%	1.2%	7.6%	1.2%	1.4%	0.6%	1.2%
Lab & Pathology	7.2%	-2.5%	4.6%	3.4%	-3.9%	-0.6%	12.4%	-24.5%	-15.1%	6.2%	-4.5%	1.4%	1.3%	5.4%	1.0%	2.1%
Maternity	6.6%	1.2%	7.9%	23.8%	-11.2%	9.9%	11.9%	-2.0%	9.7%	11.4%	-3.2%	7.8%	1.4%	1.3%	0.6%	1.3%
Office Visits	3.0%	4.5%	7.6%	10.4%	2.2%	12.8%	5.8%	-0.3%	5.5%	3.5%	4.3%	7.9%	13.5%	3.3%	6.1%	11.0%
Other Services	0.0%	-2.0%	-2.1%	26.4%	-15.6%	6.7%	10.9%	-1.8%	8.9%	4.4%	-2.6%	1.7%	7.2%	18.8%	7.3%	9.5%
Outpatient Surgery	12.7%	7.2%	20.7%	7.9%	-4.0%	3.6%	17.5%	-10.0%	5.7%	12.5%	5.8%	19.0%	11.3%	2.4%	7.0%	9.2%
Psychiatric / Substance Abuse	11.8%	6.9%	19.6%	5.8%	14.0%	20.6%	20.0%	1.1%	21.4%	11.4%	7.2%	19.4%	3.7%	0.9%	0.6%	2.9%
Radiology	1.7%	0.9%	2.6%	7.1%	3.5%	10.8%	5.9%	-0.2%	5.7%	2.3%	1.6%	3.9%	2.1%	1.1%	2.2%	1.9%
Therapies	4.8%	1.7%	6.6%	3.4%	-5.8%	-2.6%	14.9%	1.8%	17.0%	5.1%	1.5%	6.7%	3.3%	0.2%	0.9%	2.5%
TOTAL	6.1%	2.7%	9.0%	18.5%	-8.9%	7.9%	10.9%	-5.4%	4.9%	7.0%	1.5%	8.6%	51.2%	39.4%	30.4%	47.3%
OTHER																
Ambulance	-3.2%	-3.9%	-7.0%	14.8%	-5.2%	8.8%	23.4%	-33.4%	-17.8%	-0.5%	-2.8%	-3.2%	0.8%	0.8%	0.4%	0.7%
Appliances (DME)	6.7%	7.1%	14.2%	-16.0%	-10.9%	-25.2%	23.3%	32.1%	62.8%	4.5%	1.0%	5.5%	0.6%	1.2%	0.2%	0.7%
TOTAL	1.2%	1.0%	2.2%	-3.8%	-8.6%	-12.1%	23.3%	6.0%	30.7%	1.9%	-0.9%	0.9%	1.4%	2.0%	0.6%	1.4%
GRAND TOTAL	5.5%	4.1%	9.7%	11.0%	-5.7%	4.7%	9.6%	2.9%	12.7%	5.8%	2.5%	8.5%	100.0%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2021 to June 2022
(Allowed Claims)**

12 Month Summary - Excludes Drugs

	Number of Visits							Total Allowed 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	4,497	337	306	5,140	87.5%	6.6%	6.0%	7,001,909	3,846,456	1,394,627	12,242,992	57.2%	31.4%	11.4%
Medical / Surgical	8,500	1,373	494	10,367	82.0%	13.2%	4.8%	63,261,373	32,333,857	11,252,103	106,847,332	59.2%	30.3%	10.5%
Psychiatric / Substance Abuse	606	177	46	829	73.1%	21.3%	5.6%	2,708,568	592,178	261,954	3,562,700	76.0%	16.6%	7.4%
TOTAL	13,602	1,887	847	16,336	83.3%	11.6%	5.2%	72,971,849	36,772,491	12,908,684	122,653,025	59.5%	30.0%	10.5%
HOSPITAL OUTPATIENT														
Emergency Room	33,563	2,608	2,929	39,101	85.8%	6.7%	7.5%	24,067,995	4,783,176	6,582,804	35,433,976	67.9%	13.5%	18.6%
Medical / Surgical	157,014	9,252	4,776	171,042	91.8%	5.4%	2.8%	89,571,890	15,031,961	10,461,487	115,065,339	77.8%	13.1%	9.1%
Other Services	269,746	12,994	8,008	290,747	92.8%	4.5%	2.8%	69,184,759	17,166,281	8,054,158	94,405,198	73.3%	18.2%	8.5%
Psychiatric / Substance Abuse	6,982	589	158	7,729	90.3%	7.6%	2.0%	2,839,086	172,259	90,121	3,101,465	91.5%	5.6%	2.9%
TOTAL	467,306	25,443	15,870	508,618	91.9%	5.0%	3.1%	185,663,730	37,153,677	25,188,571	248,005,978	74.9%	15.0%	10.2%
PHYSICIAN SERVICES														
Anesthesia	93,448	17,481	2,817	113,746	82.2%	15.4%	2.5%	11,073,978	2,636,275	702,158	14,412,411	76.8%	18.3%	4.9%
Chemotherapy / Radiation	31,997	1,951	1,698	35,646	89.8%	5.5%	4.8%	1,986,453	349,264	156,276	2,491,994	79.7%	14.0%	6.3%
Emergency Room	33,963	3,033	2,436	39,432	86.1%	7.7%	6.2%	4,208,845	782,984	648,567	5,640,396	74.6%	13.9%	11.5%
Immunizations / Injections / Allergy	97,982	7,600	3,496	109,078	89.8%	7.0%	3.2%	7,844,486	599,323	449,416	8,893,225	88.2%	6.7%	5.1%
Inpatient Surgery	6,379	1,255	326	7,959	80.1%	15.8%	4.1%	4,118,733	1,676,139	184,924	5,979,796	68.9%	28.0%	3.1%
Inpatient Visits	32,018	6,899	1,468	40,385	79.3%	17.1%	3.6%	6,065,388	2,114,597	256,106	8,436,092	71.9%	25.1%	3.0%
Lab & Pathology	252,568	114,191	15,280	382,039	66.1%	29.9%	4.0%	7,111,534	6,707,086	423,921	14,242,541	49.9%	47.1%	3.0%
Maternity	30,102	13,519	1,404	45,025	66.9%	30.0%	3.1%	7,292,106	1,250,845	301,180	8,844,131	82.5%	14.1%	3.4%
Office Visits	782,933	44,171	32,820	859,925	91.0%	5.1%	3.8%	72,783,208	5,023,630	3,203,479	81,010,317	89.8%	6.2%	4.0%
Other Services	332,475	87,768	18,717	438,961	75.7%	20.0%	4.3%	34,868,909	22,589,350	4,214,277	61,672,536	56.5%	36.6%	6.8%
Outpatient Surgery	234,466	11,958	9,086	255,510	91.8%	4.7%	3.6%	64,459,546	3,367,471	3,210,526	71,037,543	90.7%	4.7%	4.5%
Psychiatric / Substance Abuse	183,769	14,065	4,610	202,444	90.8%	6.9%	2.3%	21,600,439	1,371,127	400,224	23,371,789	92.4%	5.9%	1.7%
Radiology	209,207	17,945	8,312	235,464	88.8%	7.6%	3.5%	9,984,805	1,646,321	1,096,267	12,727,394	78.5%	12.9%	8.6%
Therapies	183,589	4,728	8,391	196,708	93.3%	2.4%	4.3%	16,411,562	288,995	529,940	17,230,497	95.2%	1.7%	3.1%
TOTAL	2,504,895	346,566	110,862	2,962,323	84.6%	11.7%	3.7%	269,809,993	50,403,406	15,777,262	335,990,661	80.3%	15.0%	4.7%
OTHER														
Ambulance	6,487	790	332	7,609	85.3%	10.4%	4.4%	3,178,202	1,069,973	193,588	4,441,763	71.6%	24.1%	4.4%
Appliances (DME)	26,306	4,890	1,288	32,484	81.0%	15.1%	4.0%	2,967,075	1,258,370	137,137	4,362,583	68.0%	28.8%	3.1%
TOTAL	32,793	5,680	1,620	40,093	81.8%	14.2%	4.0%	6,145,277	2,328,344	330,725	8,804,346	69.8%	26.4%	3.8%
GRAND TOTAL	3,069,364	392,184	133,474	3,595,022	85.4%	10.9%	3.7%	534,590,850	126,657,917	54,205,242	715,454,009	74.7%	17.7%	7.6%

**West Virginia PEIA Non-Medicare Prescription Drugs Total
Study Period of July 2018 to June 2022
(Paid Claims)**

24 Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	2.8%	16.1%	19.4%

36 Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	2.6%	13.3%	16.2%

48 Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	3.0%	12.1%	15.4%

Appendix A

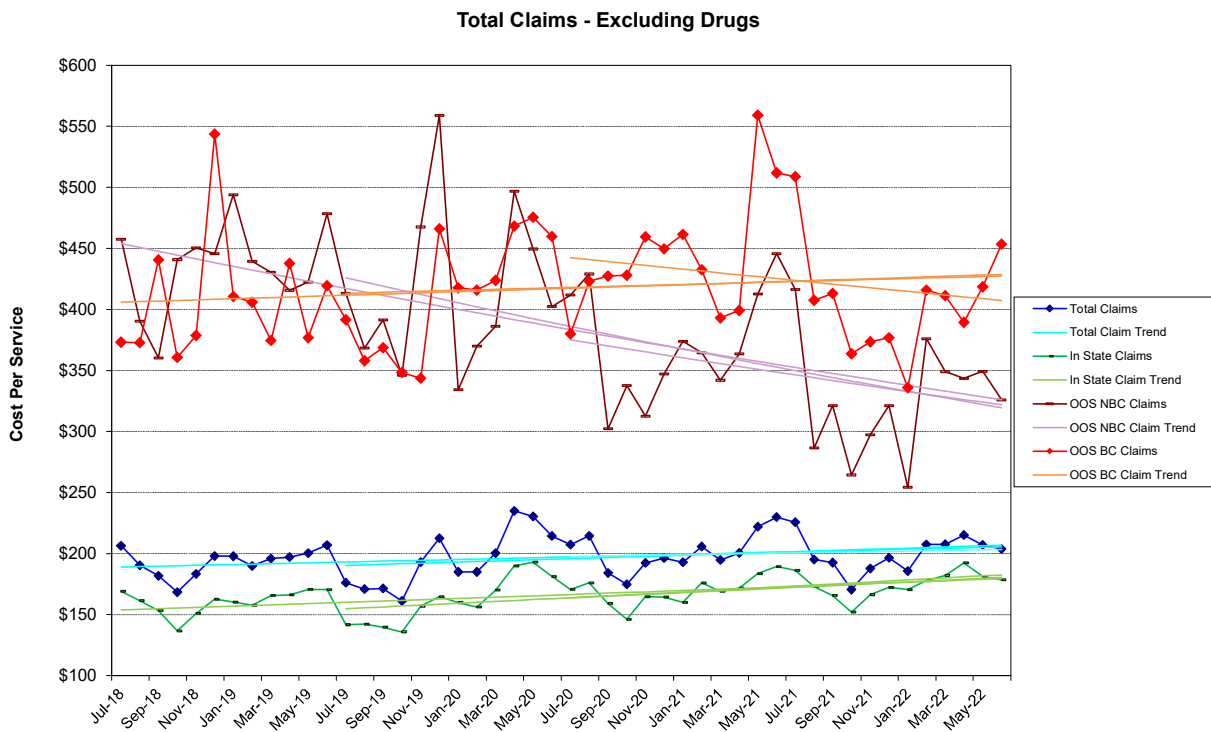
**NON-MEDICARE CLAIMS
Excluding Drugs**

GRAND TOTAL

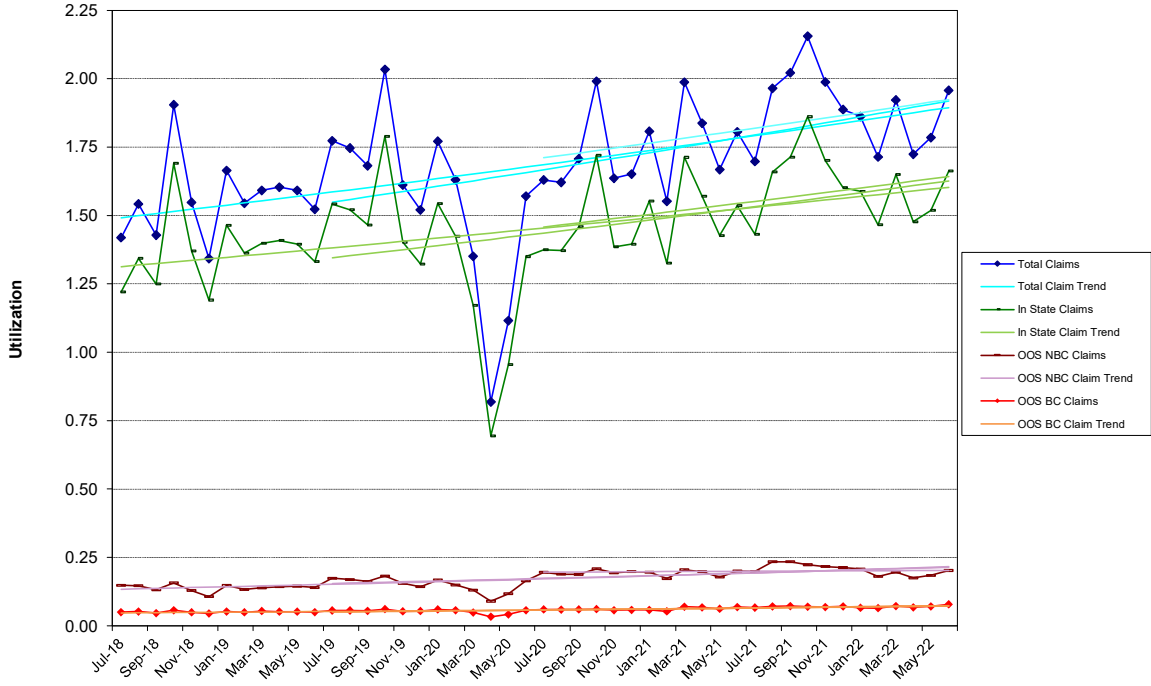
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.5%	4.3%	9.0%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.1%	4.4%	9.8%

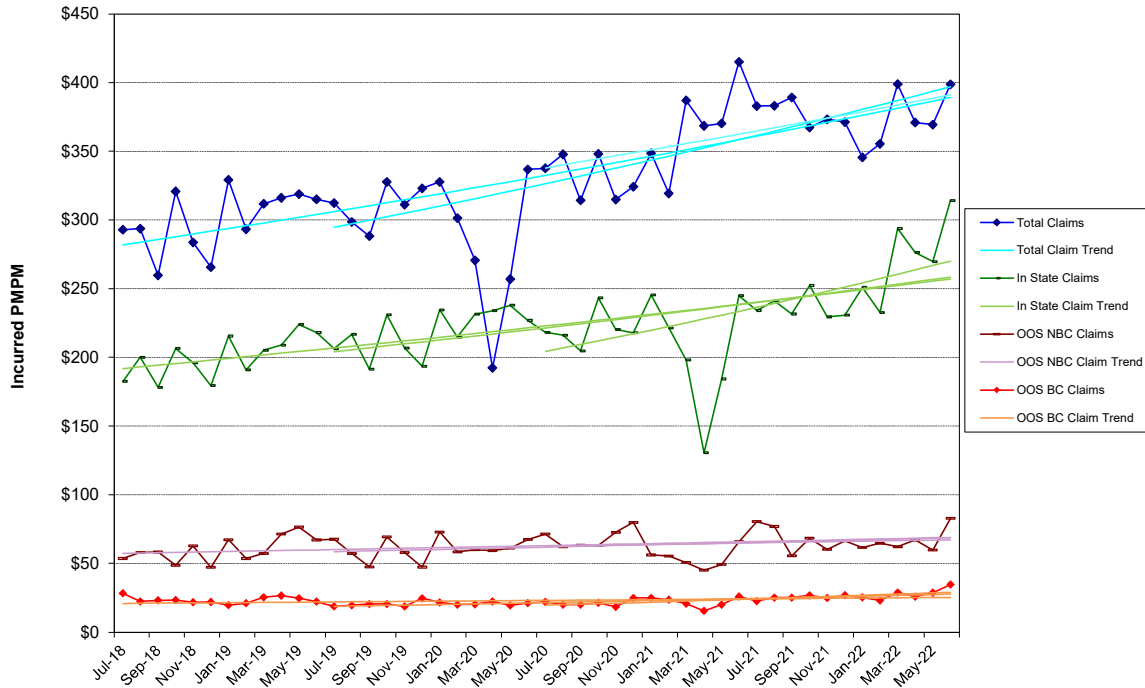
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.8%	2.5%	8.5%



Total Claims - Excluding Drugs



Total Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

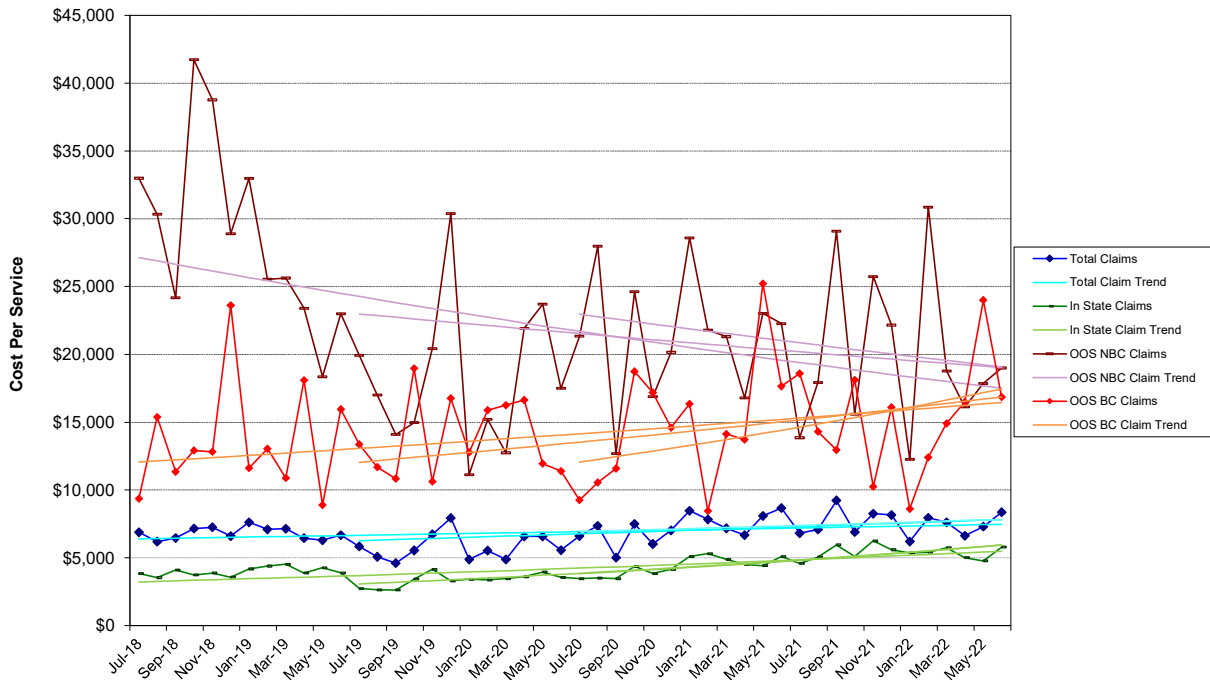
TOTAL

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.4%	7.5%	3.8%

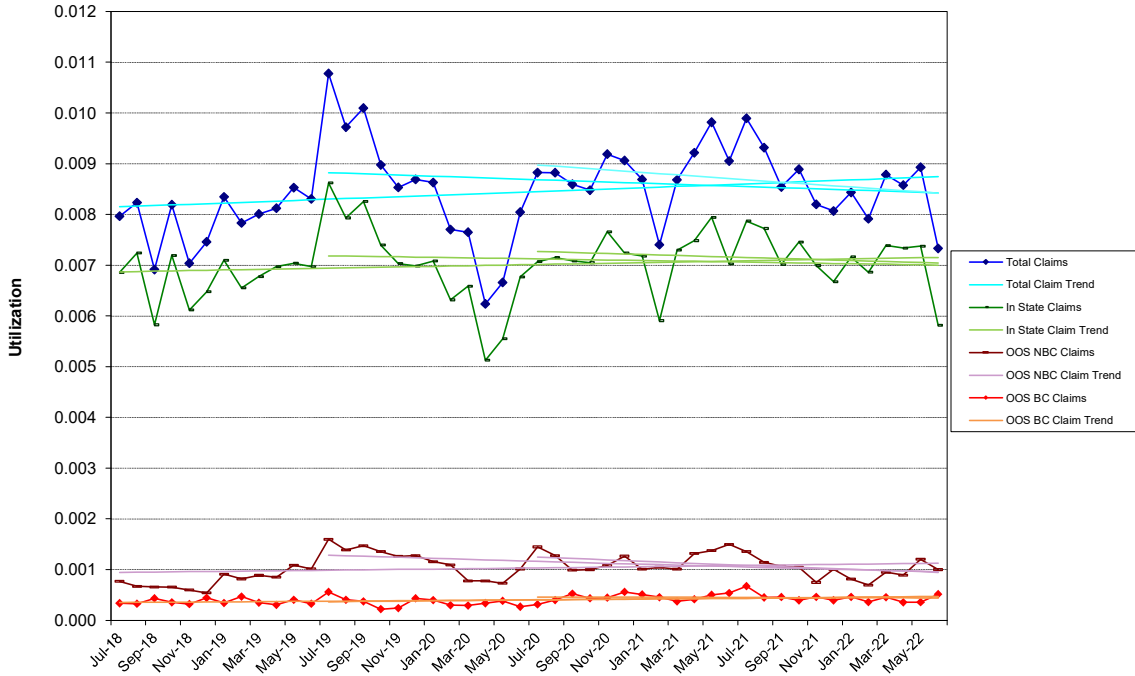
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.3%	7.9%	7.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.8%	4.8%	6.7%

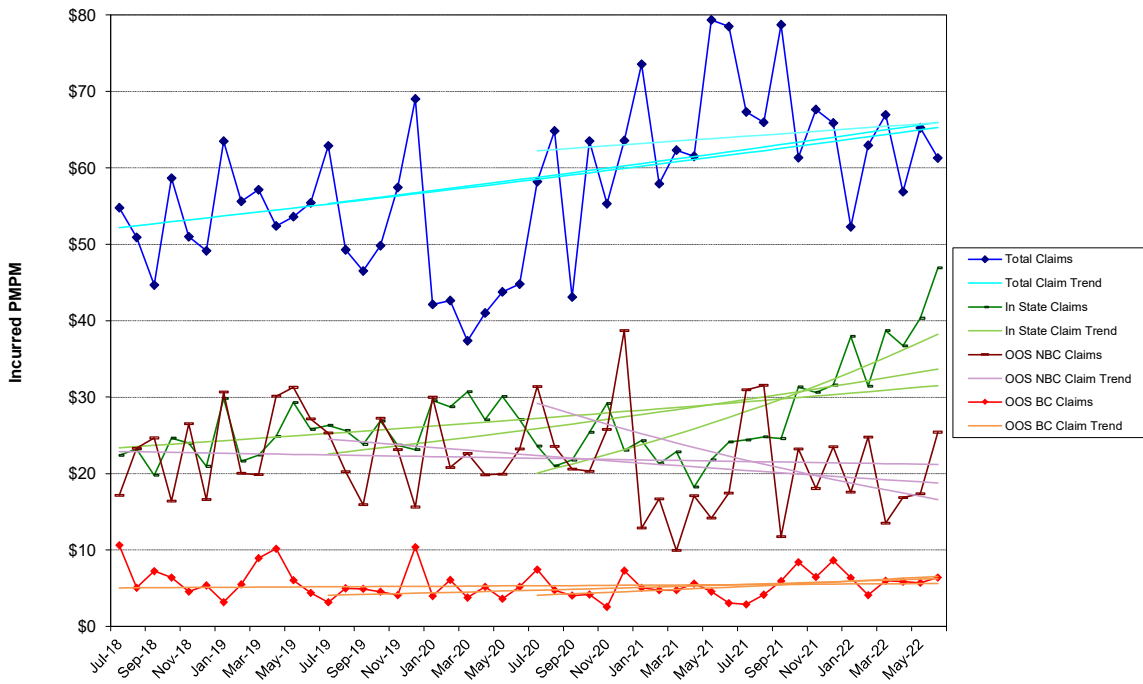
Total Hospital Inpatient Claims - Excluding Drugs



Total Hospital Inpatient Claims - Excluding Drugs



Total Hospital Inpatient Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

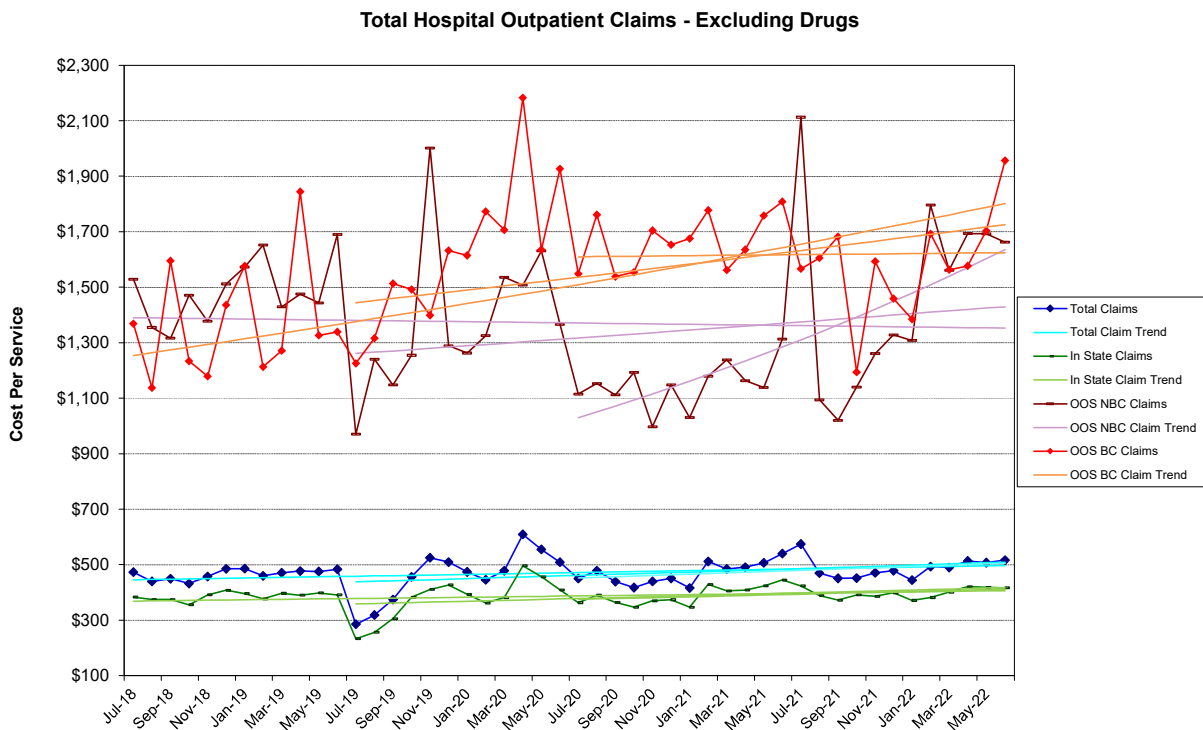
HOSPITAL OUTPATIENT

TOTAL

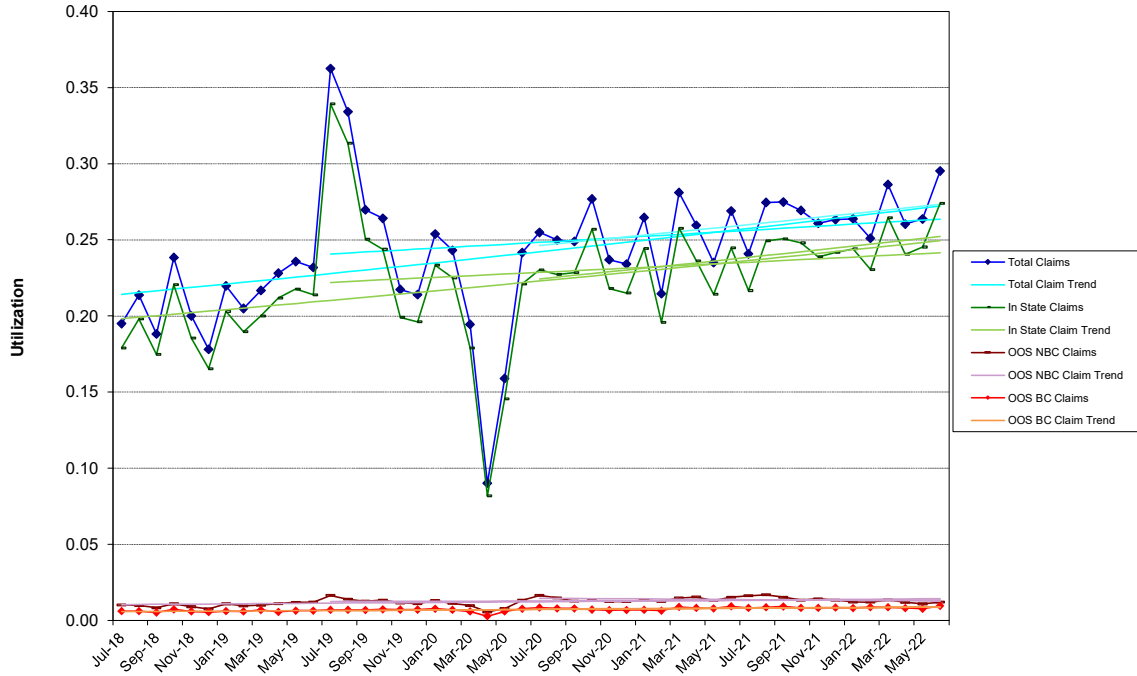
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.0%	4.8%	12.1%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.3%	5.4%	8.9%

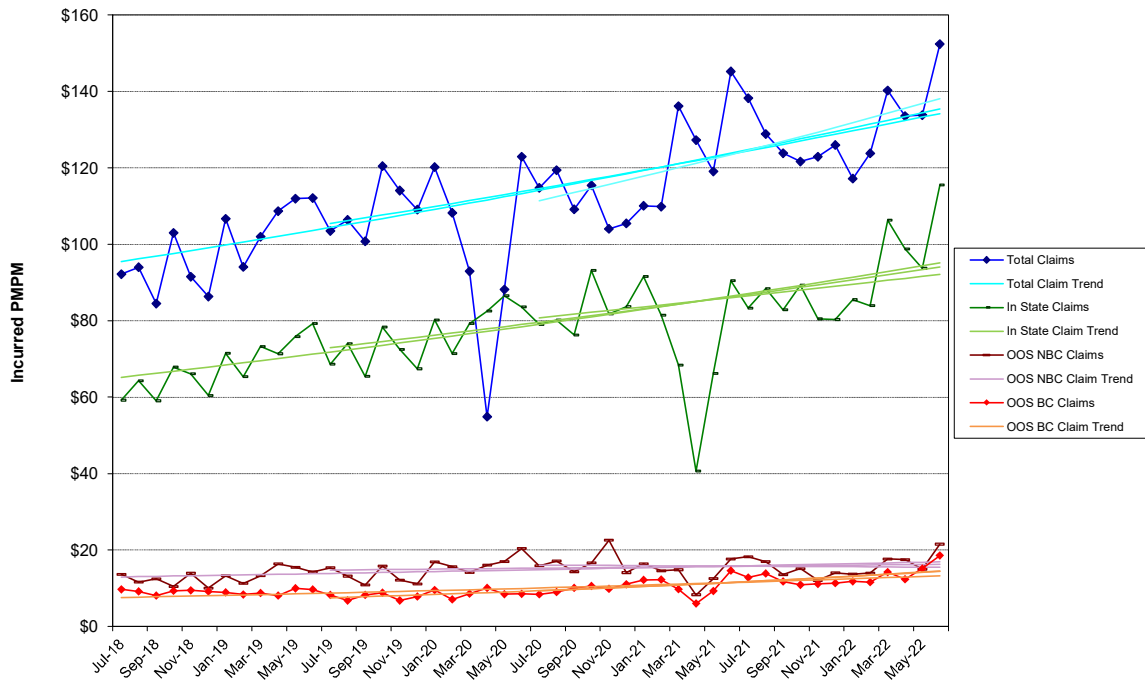
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.3%	2.9%	9.4%



Total Hospital Outpatient Claims - Excluding Drugs



Total Hospital Outpatient Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

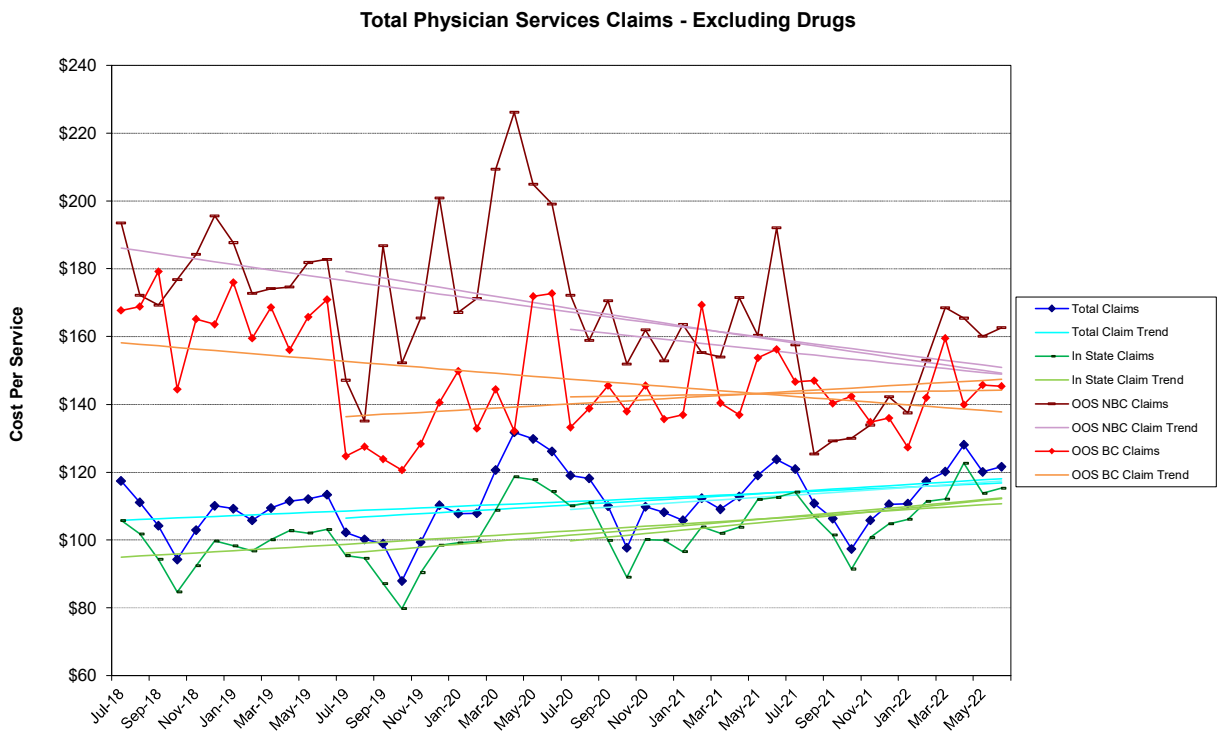
PHYSICIAN SERVICES

TOTAL

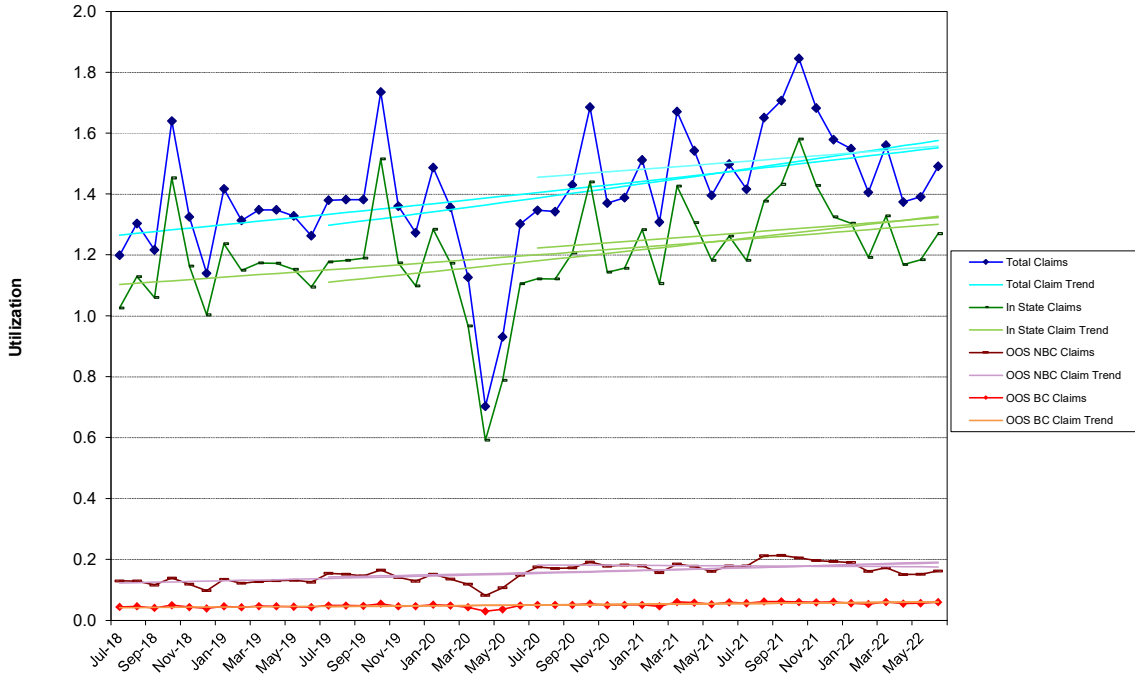
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.7%	3.3%	9.2%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
8.6%	2.6%	11.4%

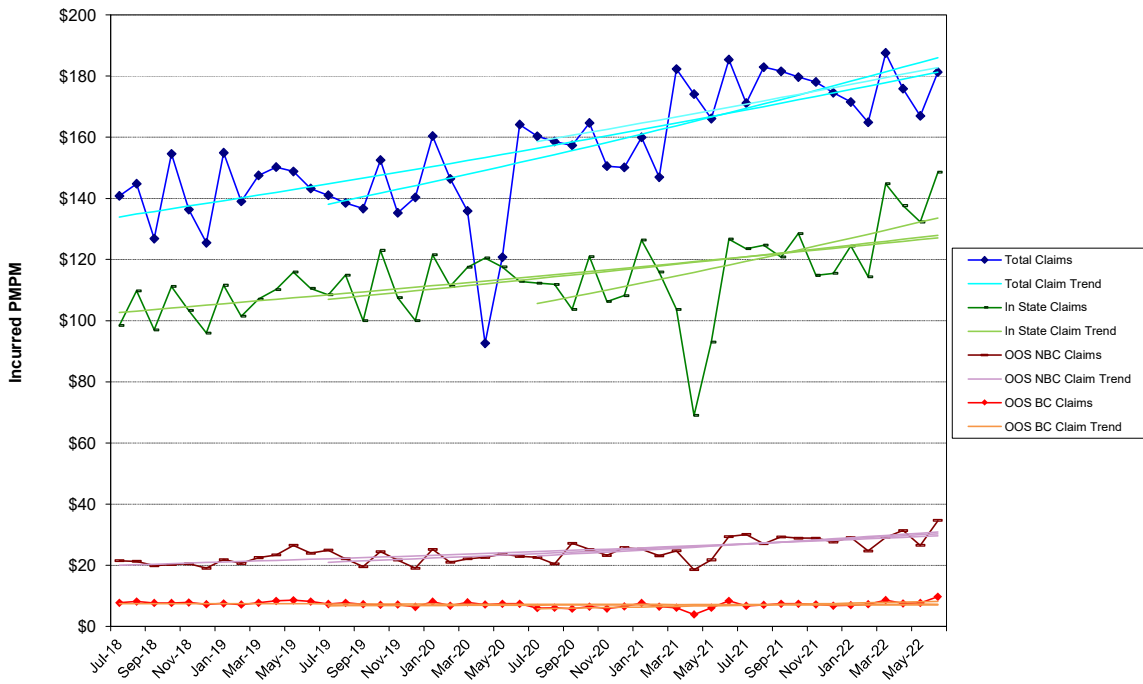
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.0%	1.5%	8.6%



Total Physician Services Claims - Excluding Drugs



Total Physician Services Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

OTHER

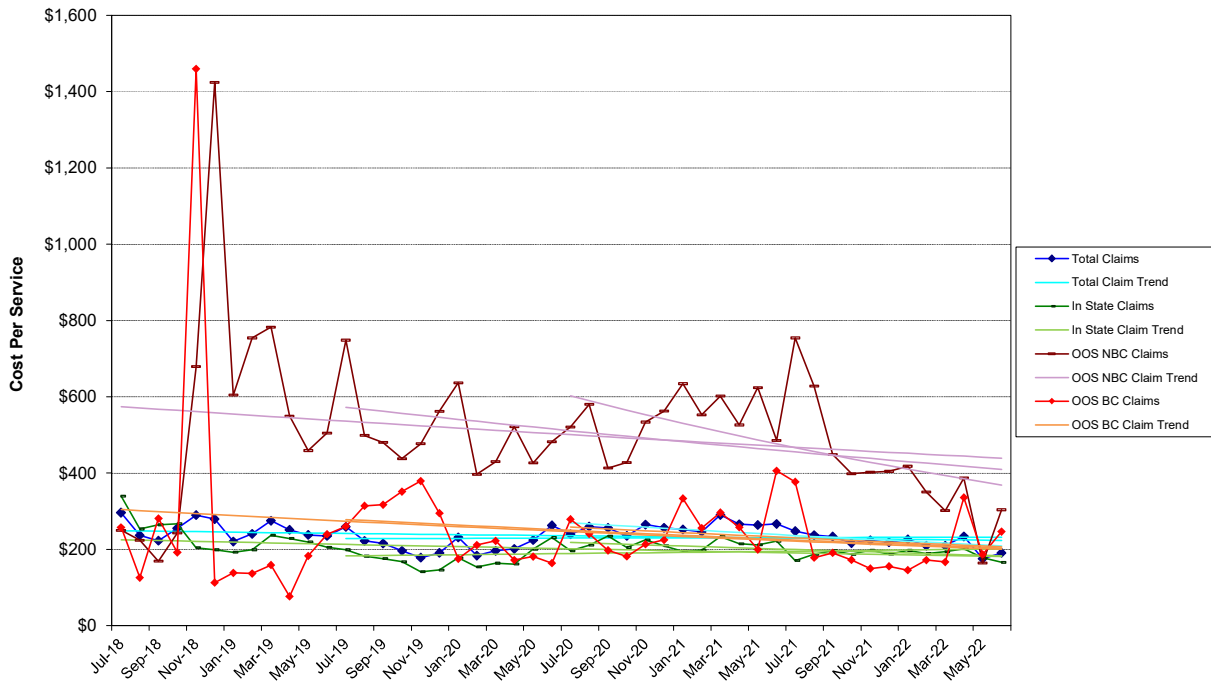
TOTAL

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.4%	-9.4%	-9.7%

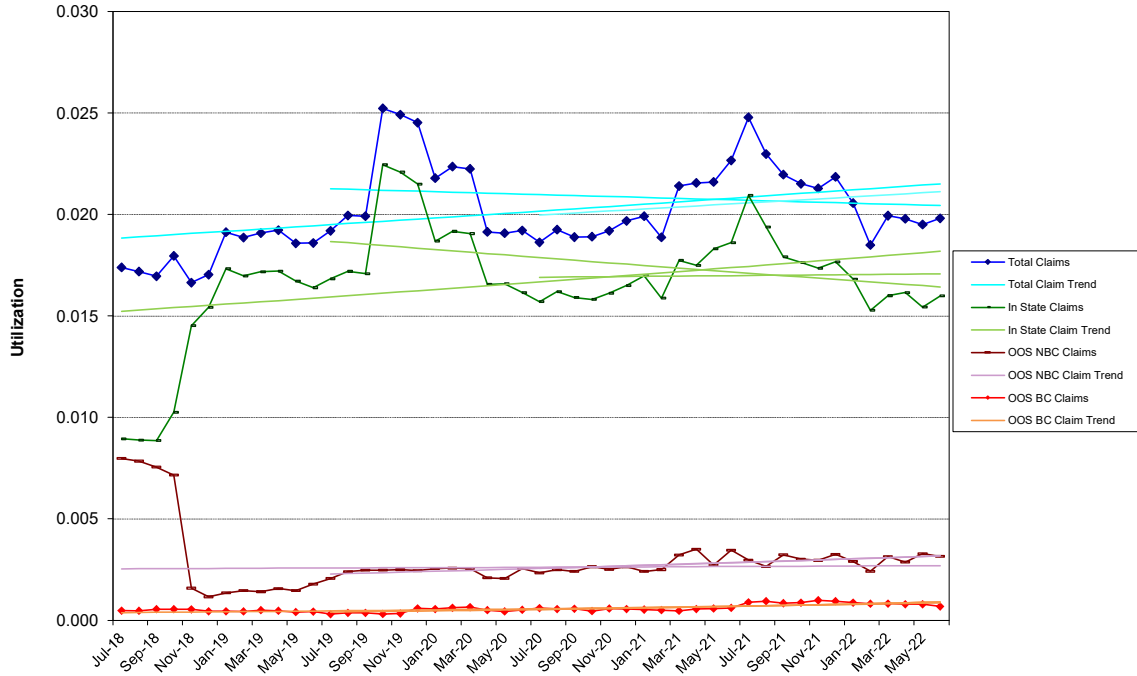
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.2%	1.5%	-0.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.9%	-0.9%	0.9%

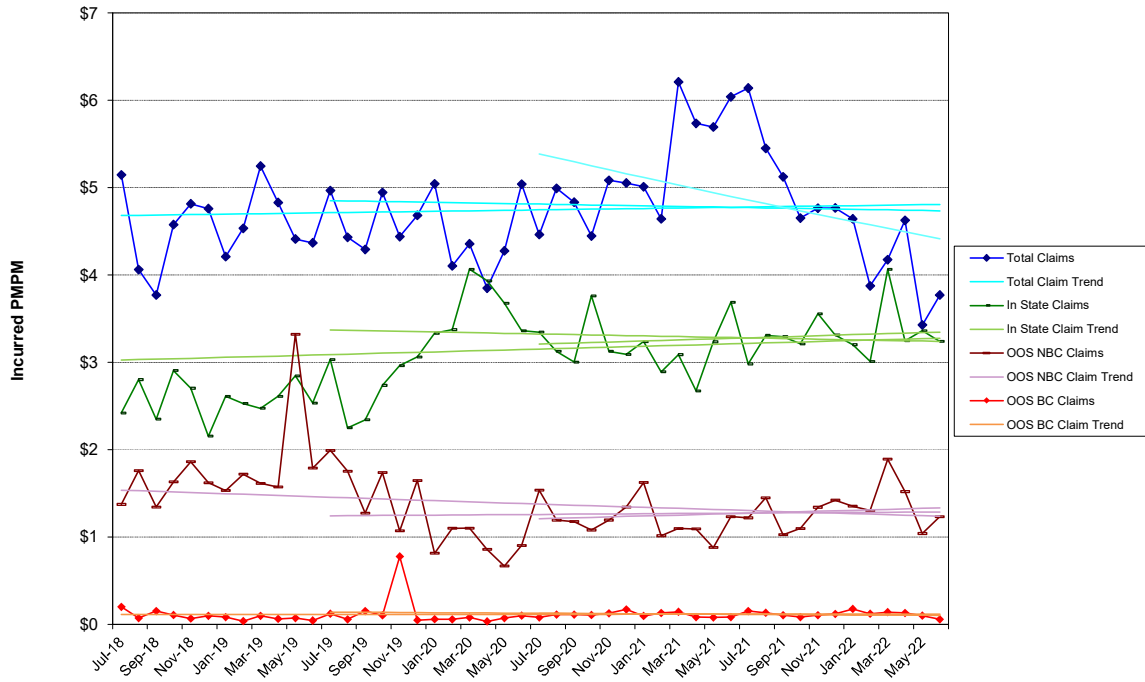
Total Other Claims - Excluding Drugs



Total Other Claims - Excluding Drugs



Total Other Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

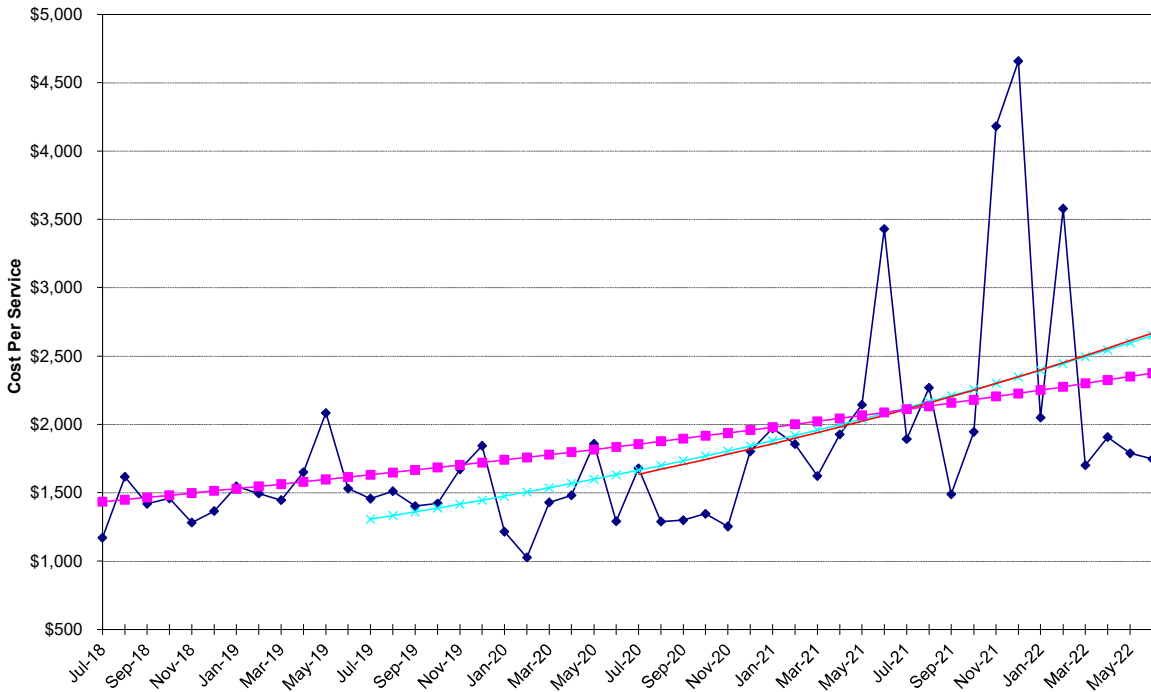
Maternity

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.6%	29.1%	27.0%

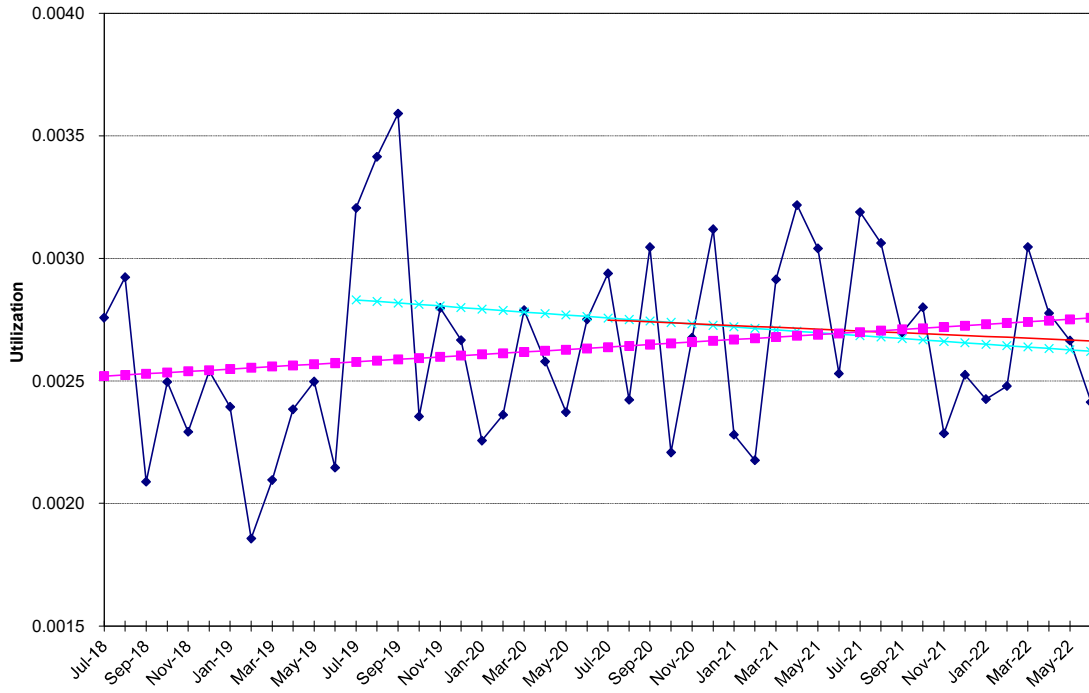
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.6%	27.5%	24.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.3%	13.7%	16.4%

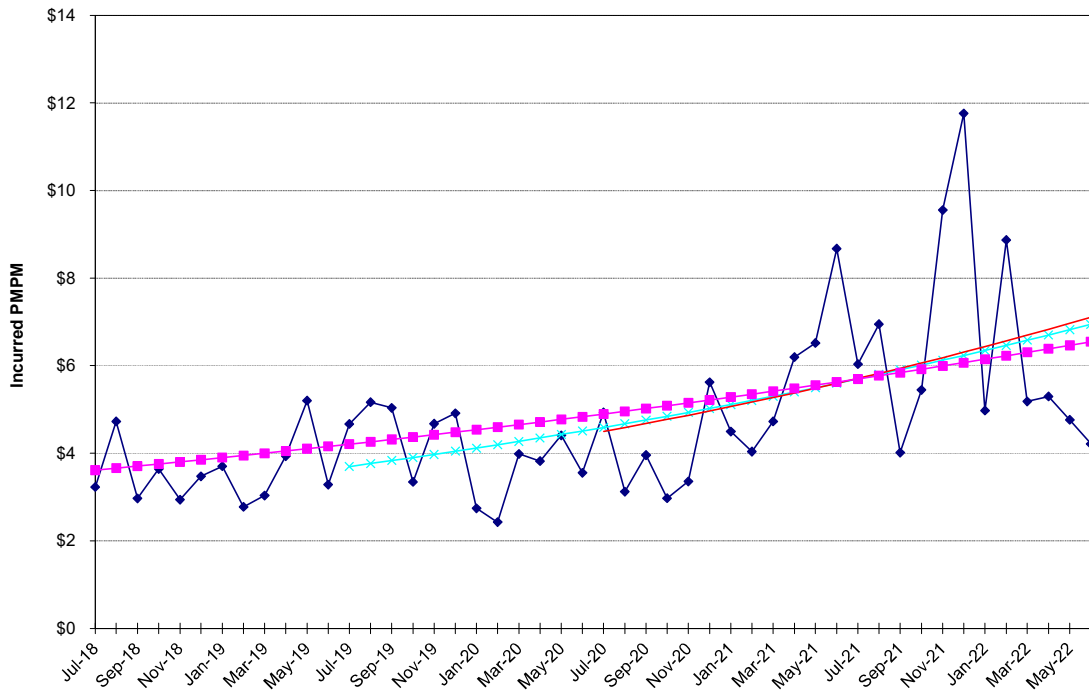
Hospital Inpatient - Maternity



Hospital Inpatient - Maternity



Hospital Inpatient - Maternity



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

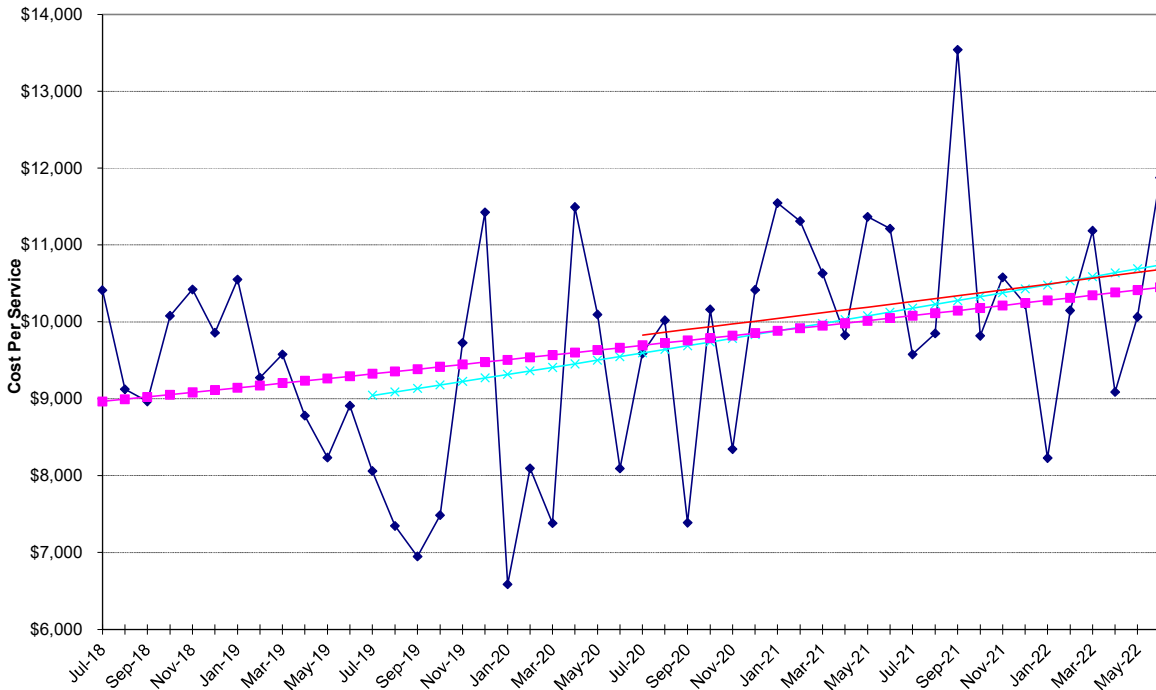
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.9%	4.4%	1.4%

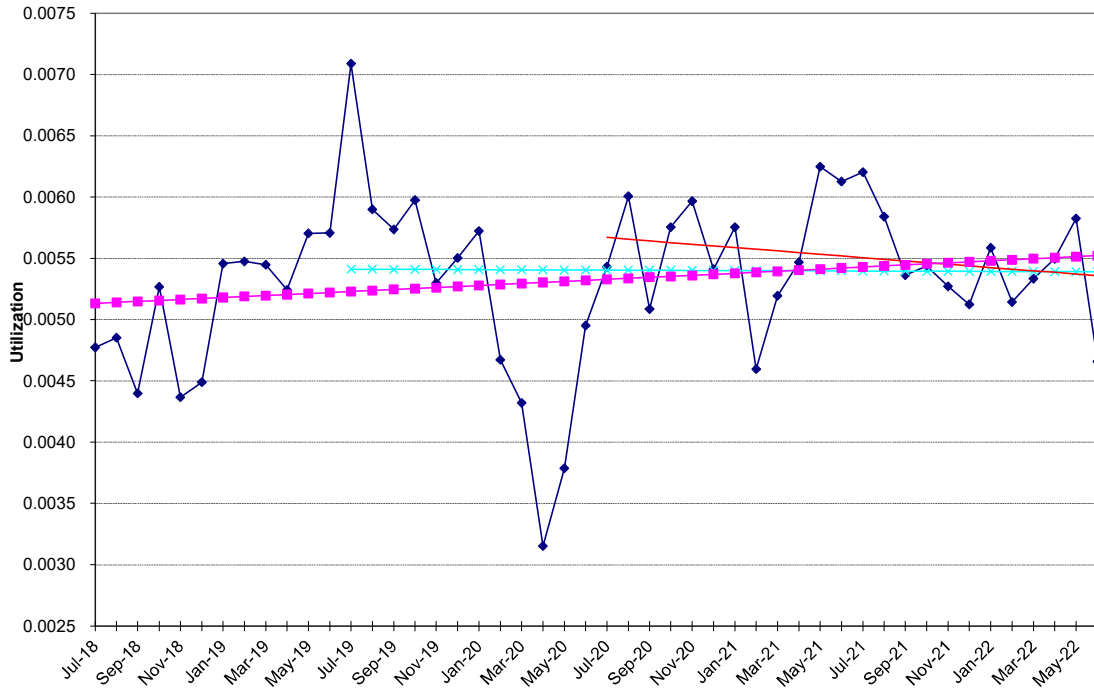
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.1%	6.1%	5.9%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.9%	4.0%	6.0%

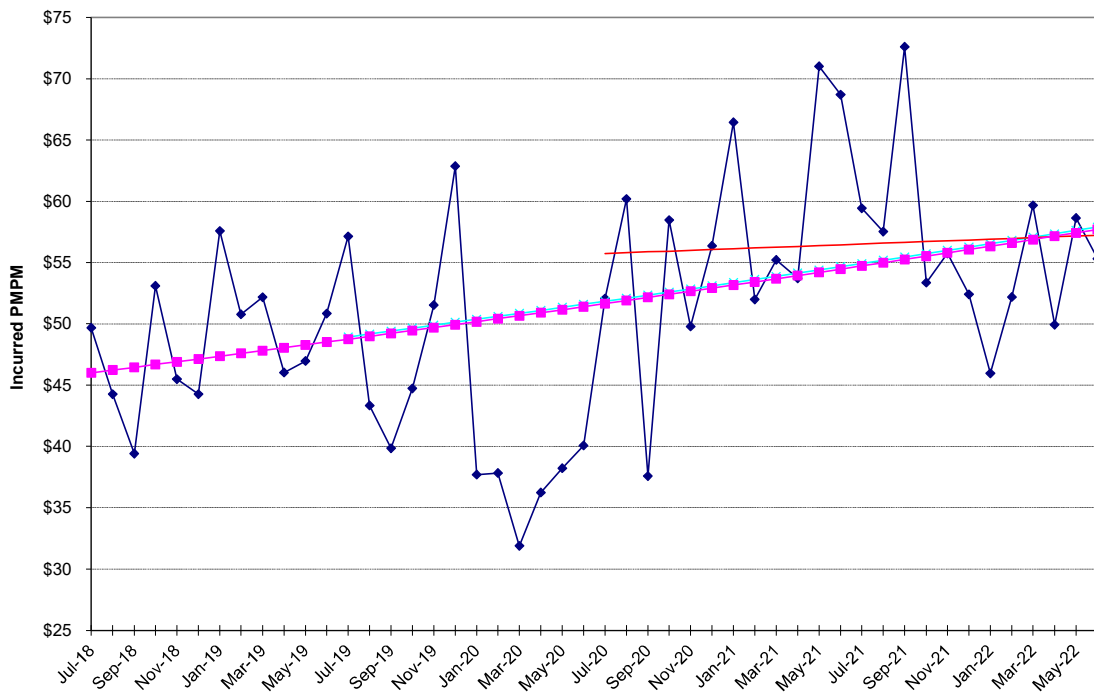
Hospital Inpatient - Medical / Surgical



Hospital Inpatient - Medical / Surgical



Hospital Inpatient - Medical / Surgical



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

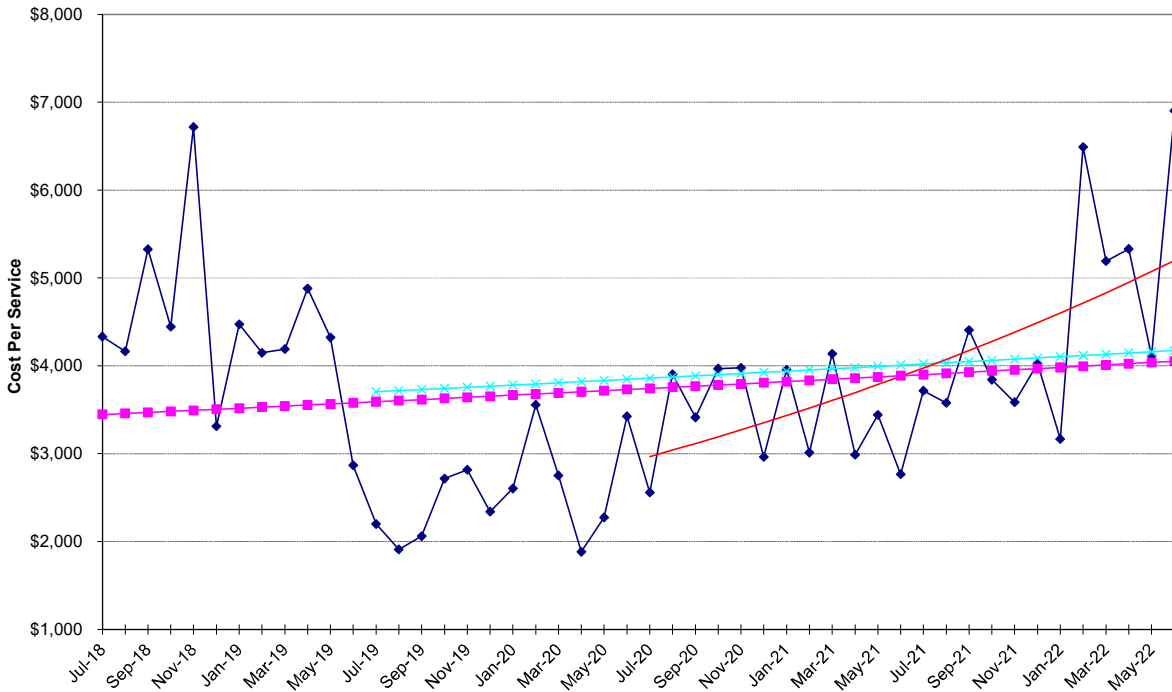
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-22.4%	34.0%	4.0%

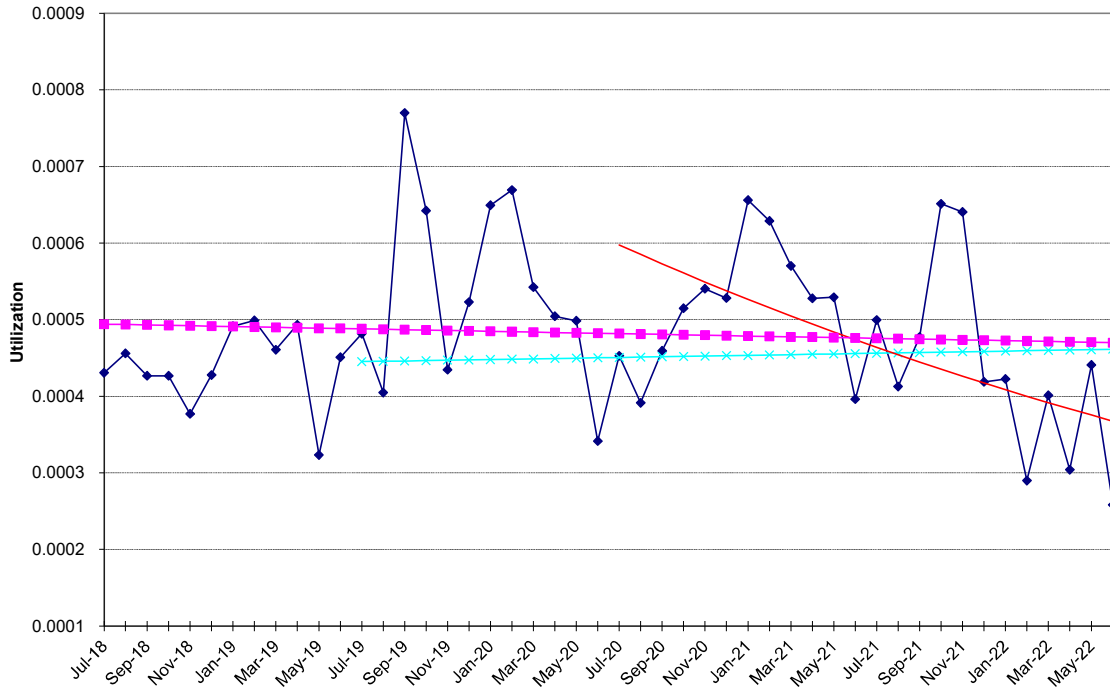
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.2%	4.2%	5.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.3%	4.2%	2.9%

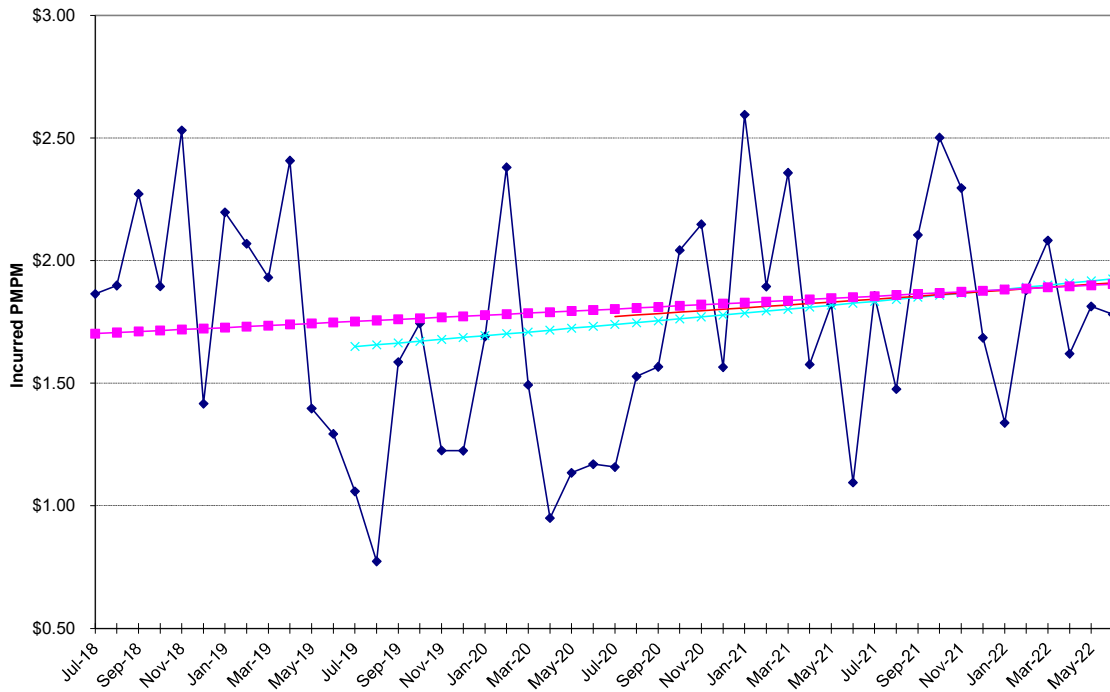
Hospital Inpatient - Psychiatric / Substance Abuse



Hospital Inpatient - Psychiatric / Substance Abuse



Hospital Inpatient - Psychiatric / Substance Abuse



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

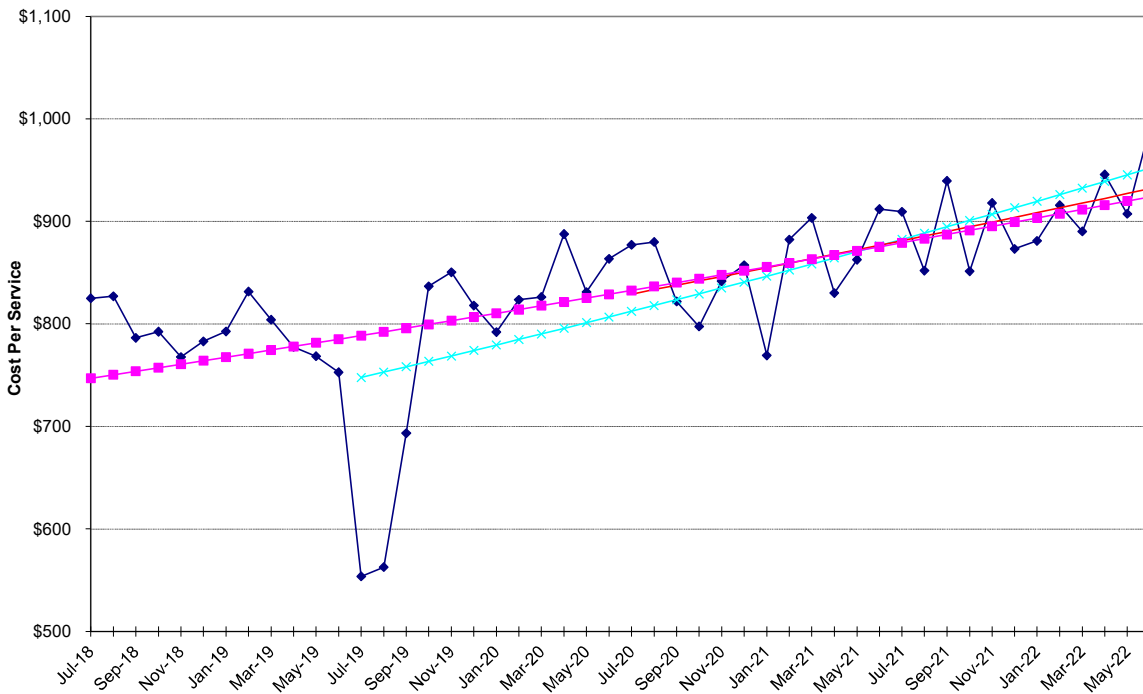
Emergency Room

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.6%	6.3%	13.3%

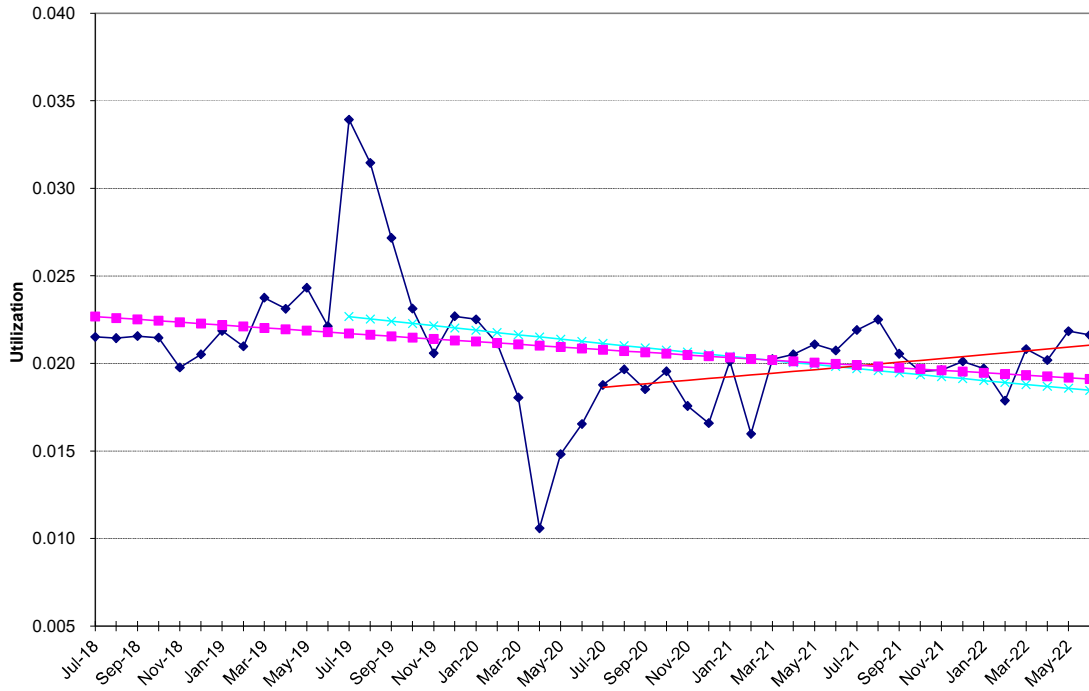
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-6.8%	8.6%	1.2%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-4.3%	5.6%	1.1%

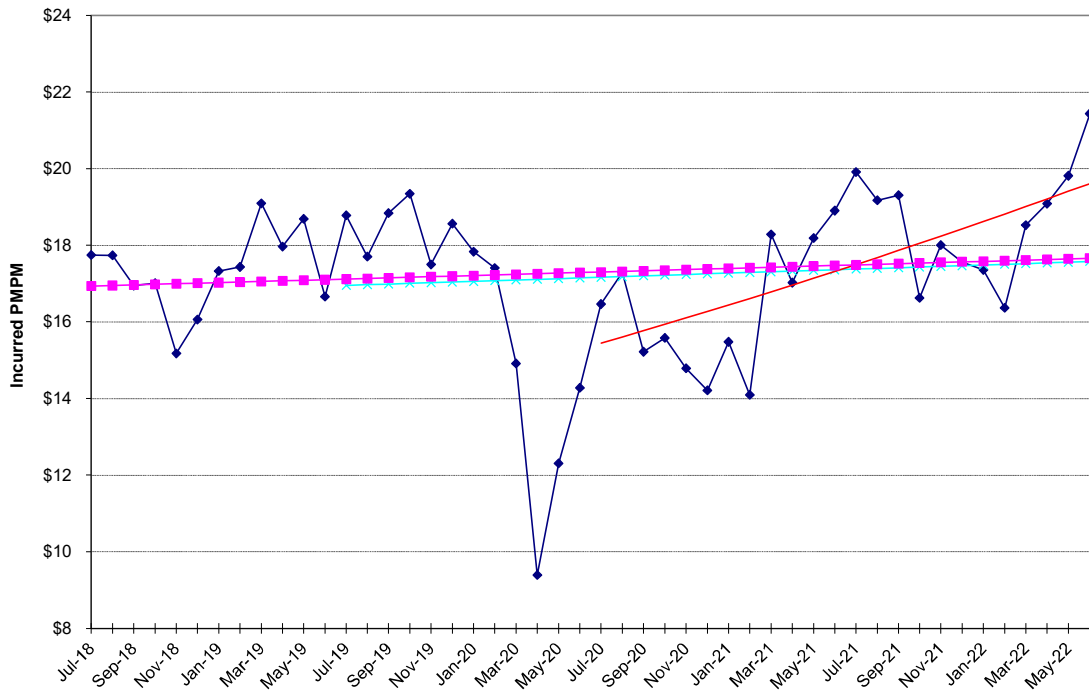
Hospital Outpatient - Emergency Room



Hospital Outpatient - Emergency Room



Hospital Outpatient - Emergency Room



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

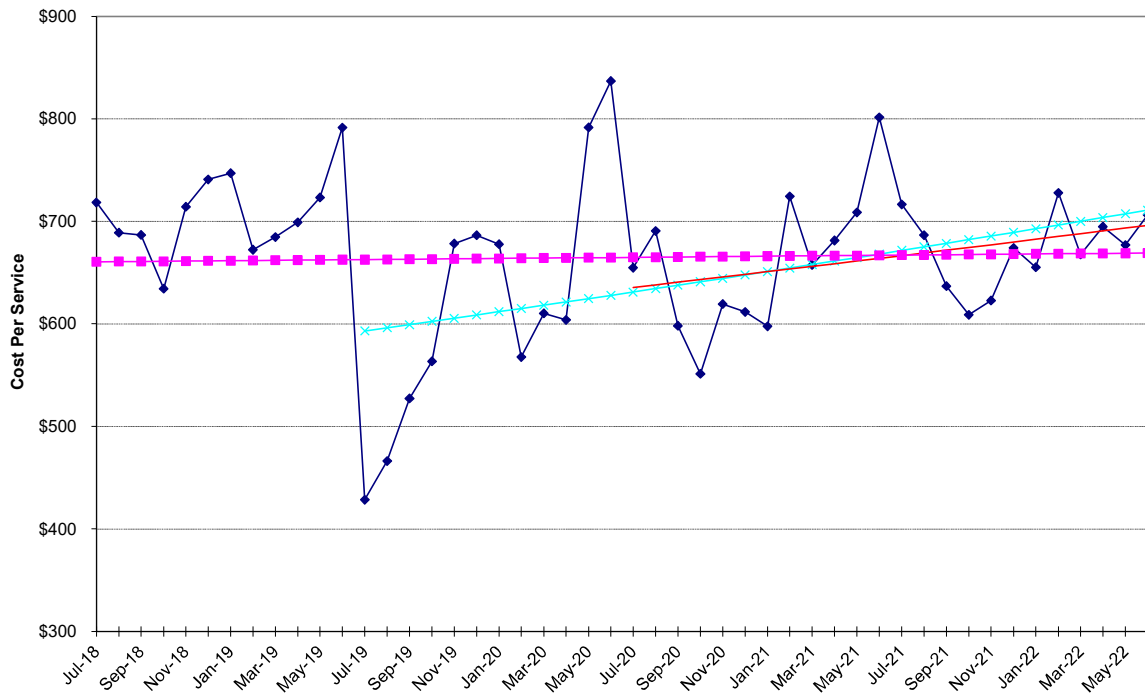
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
10.5%	4.9%	15.9%

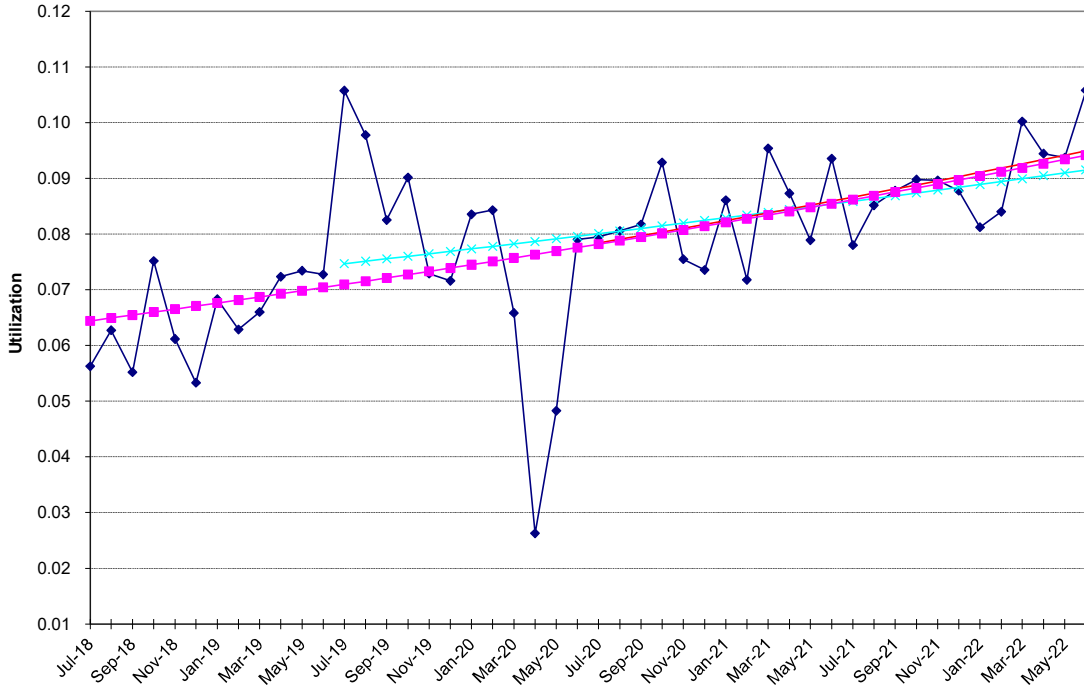
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.2%	6.4%	14.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
10.2%	0.3%	10.5%

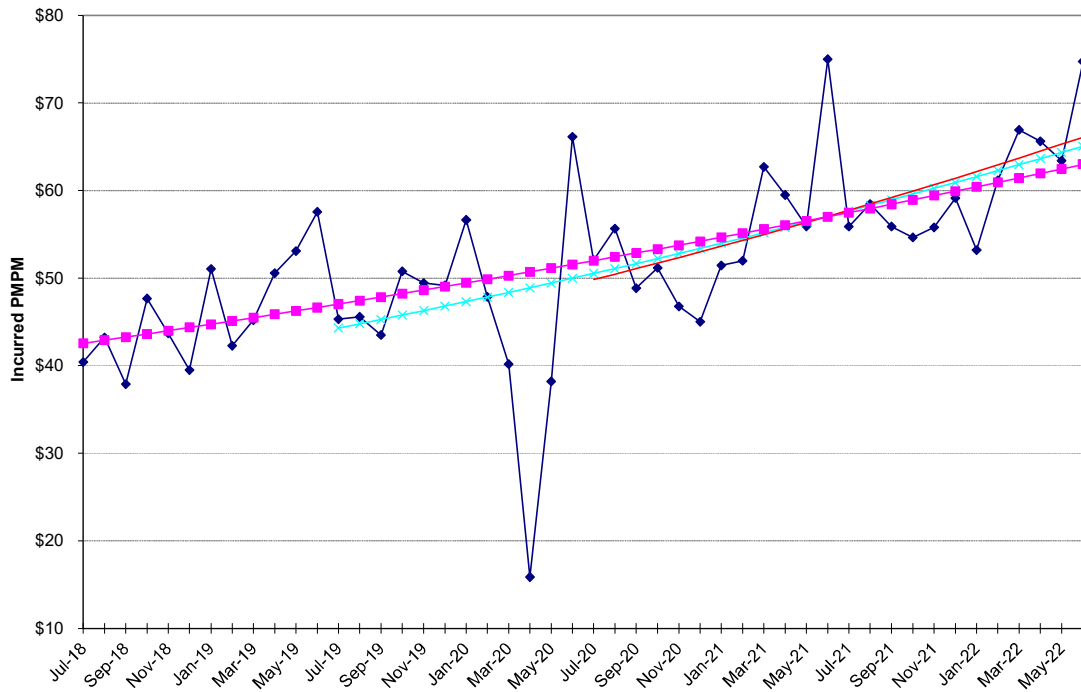
Hospital Outpatient - Medical / Surgical



Hospital Outpatient - Medical / Surgical



Hospital Outpatient - Medical / Surgical



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

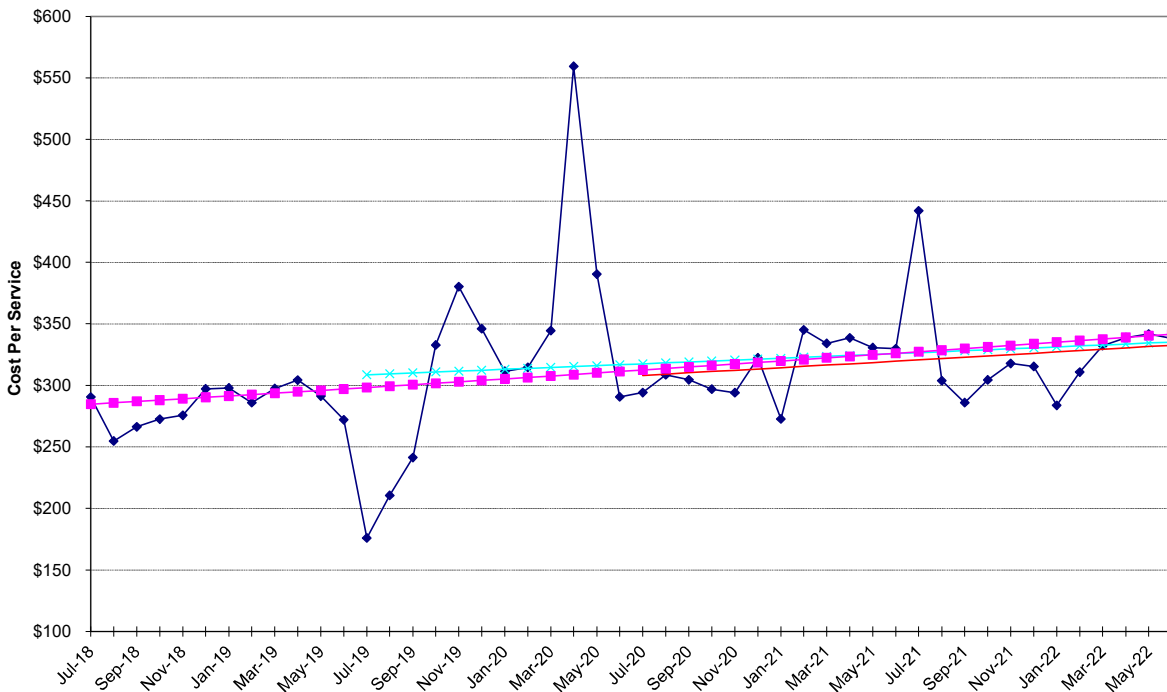
Other Services

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.4%	4.1%	6.6%

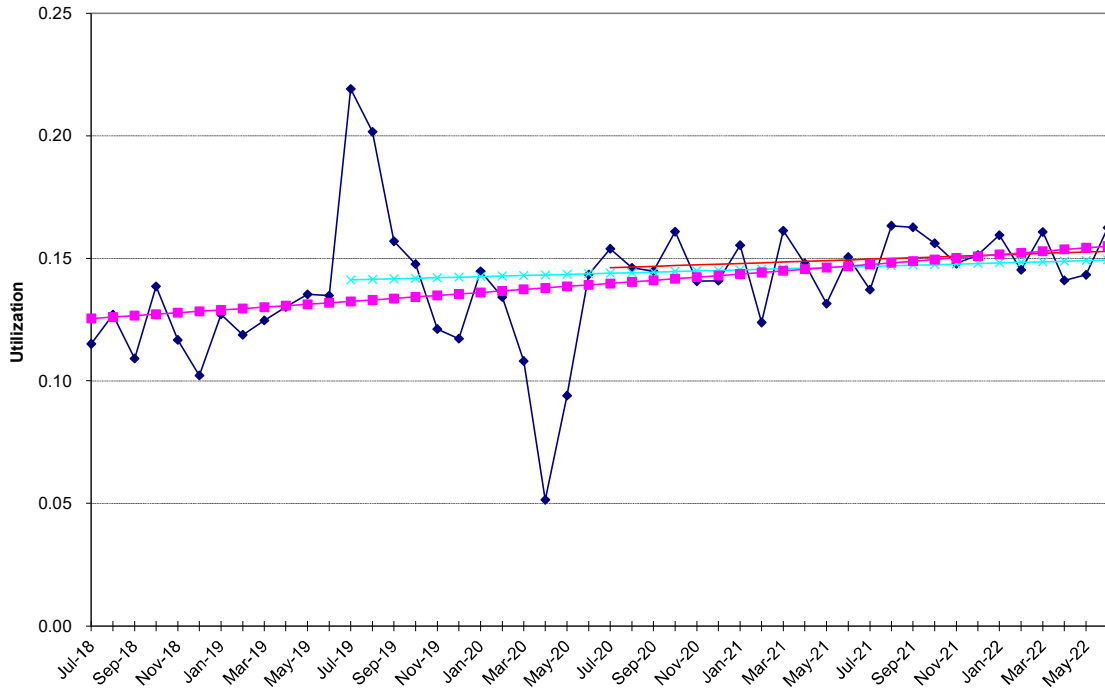
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.9%	2.9%	4.9%

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

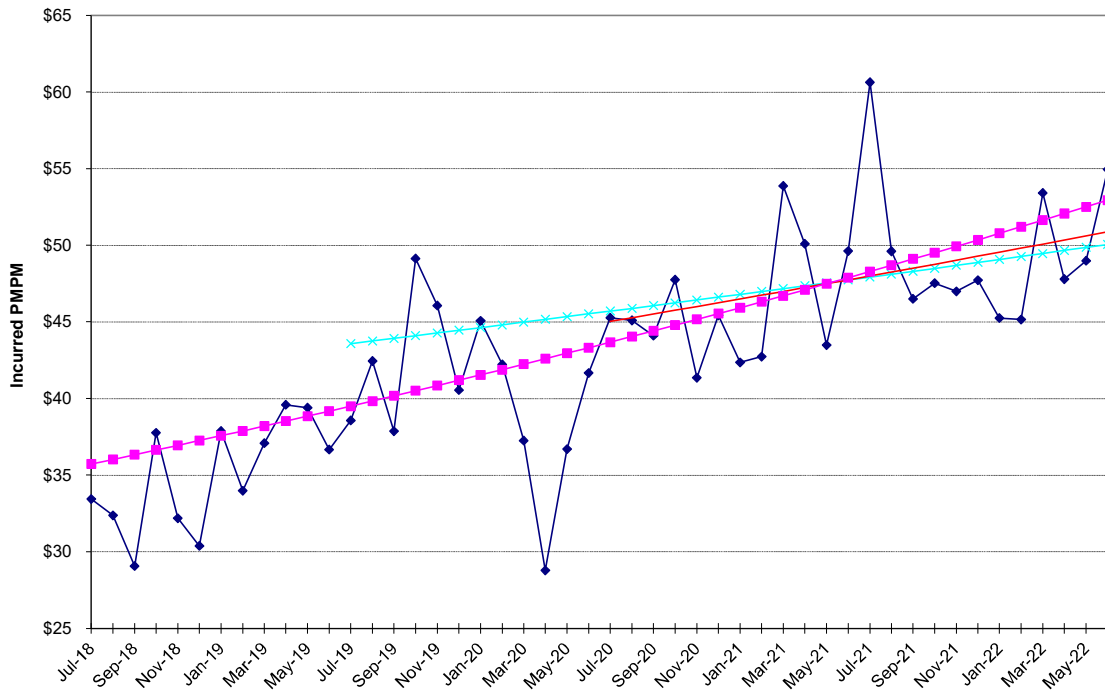
Hospital Outpatient - Other Services



Hospital Outpatient - Other Services



Hospital Outpatient - Other Services



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

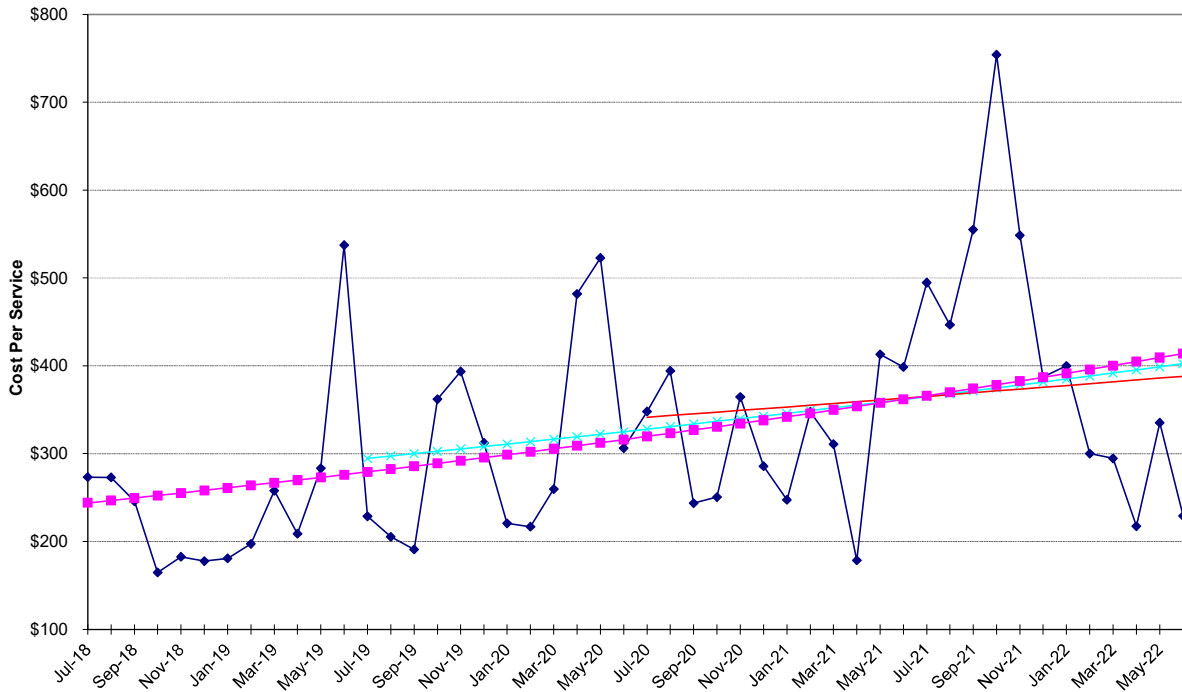
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
24.4%	6.9%	33.0%

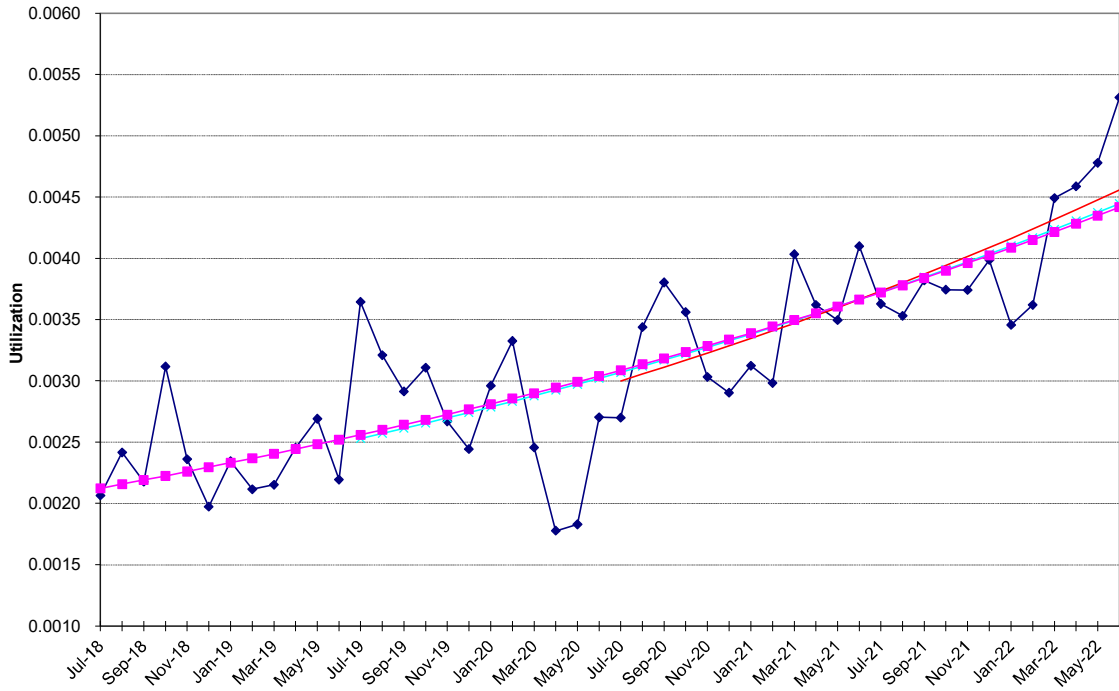
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
21.3%	11.3%	35.0%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
20.6%	14.4%	38.0%

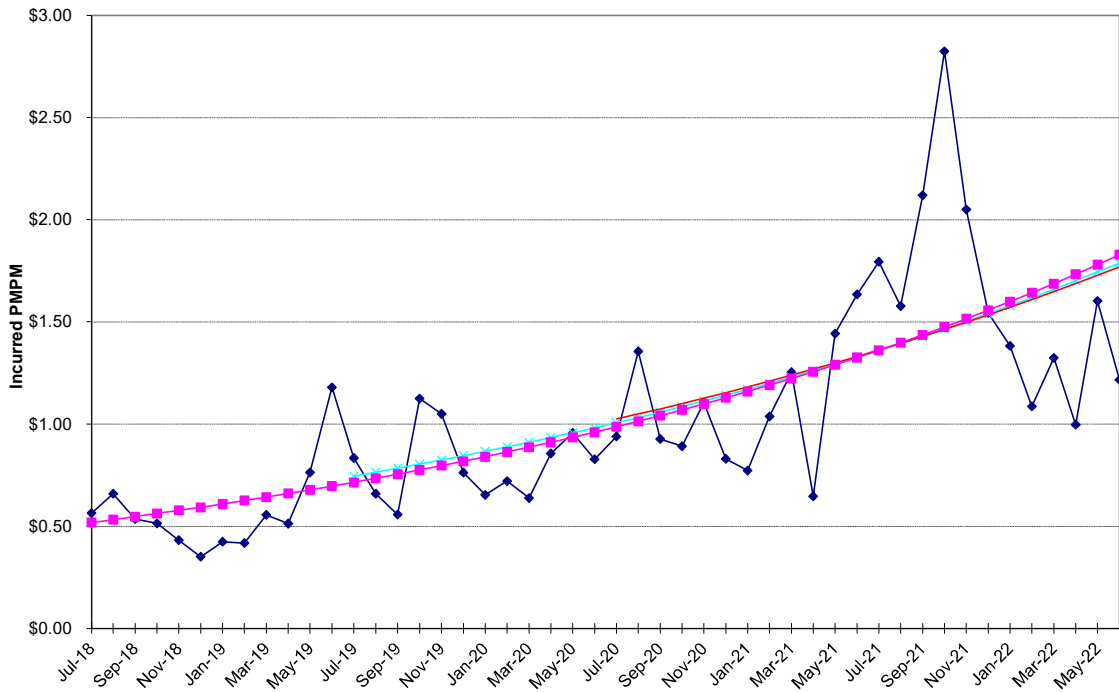
Hospital Outpatient - Psychiatric / Substance Abuse



Hospital Outpatient - Psychiatric / Substance Abuse



Hospital Outpatient - Psychiatric / Substance Abuse



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

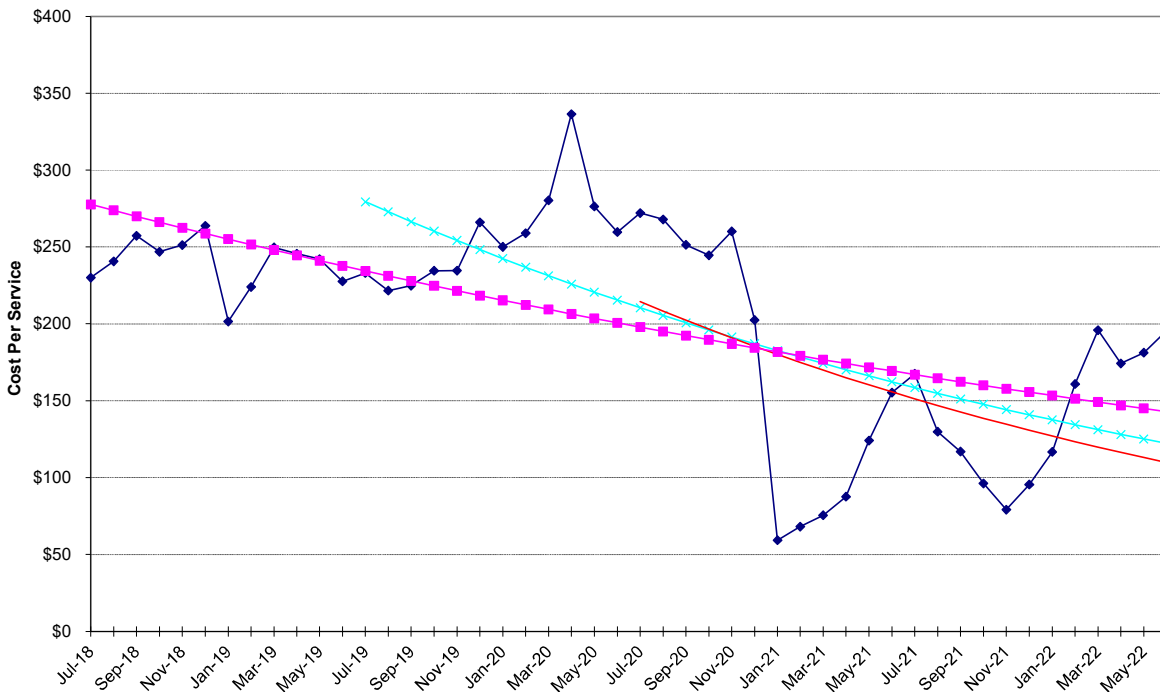
Anesthesia

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
46.5%	-29.5%	3.3%

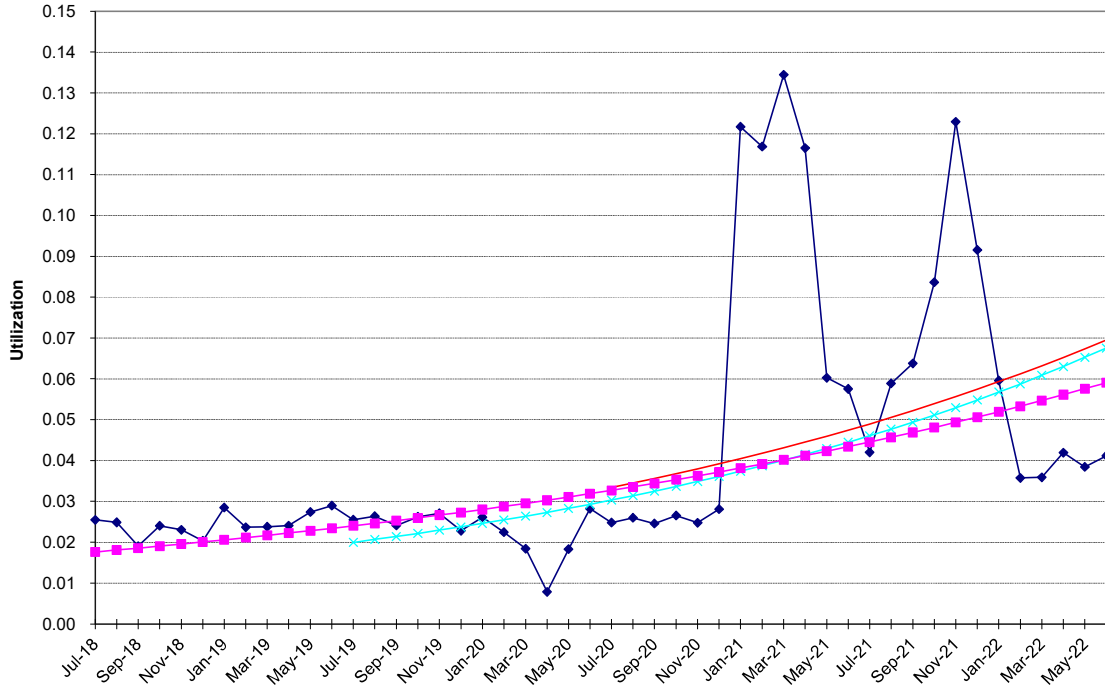
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
51.9%	-24.7%	14.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
36.2%	-15.6%	14.9%

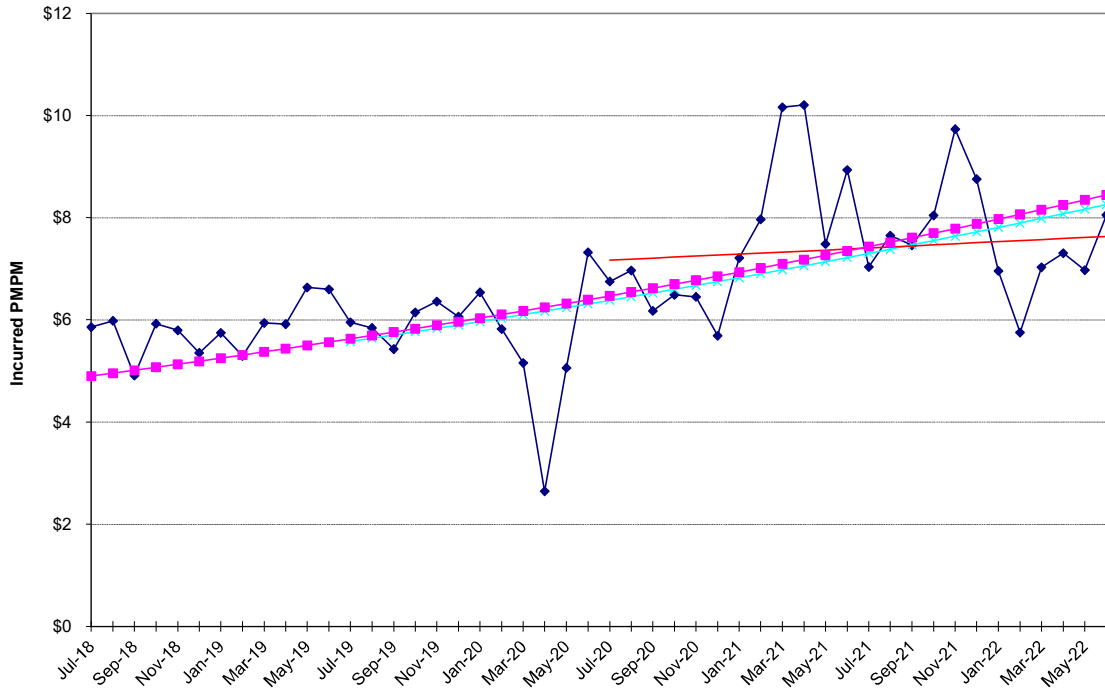
Physician Services - Anesthesia



Physician Services - Anesthesia



Physician Services - Anesthesia



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

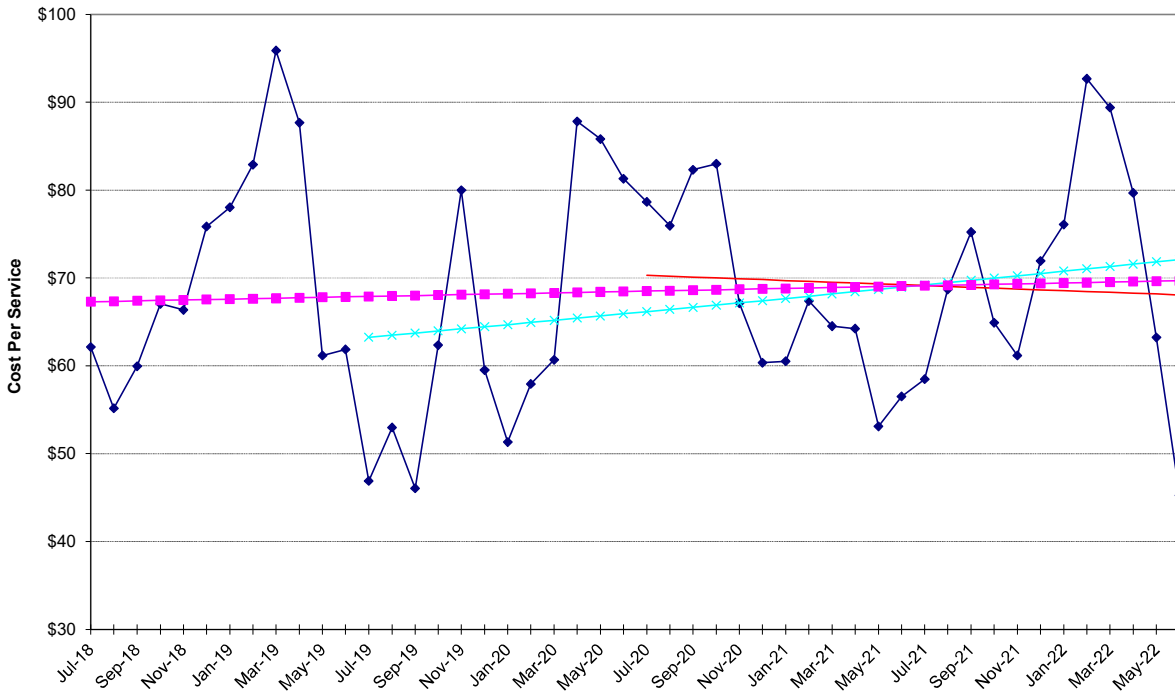
Chemotherapy / Radiation

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
12.4%	-1.7%	10.5%

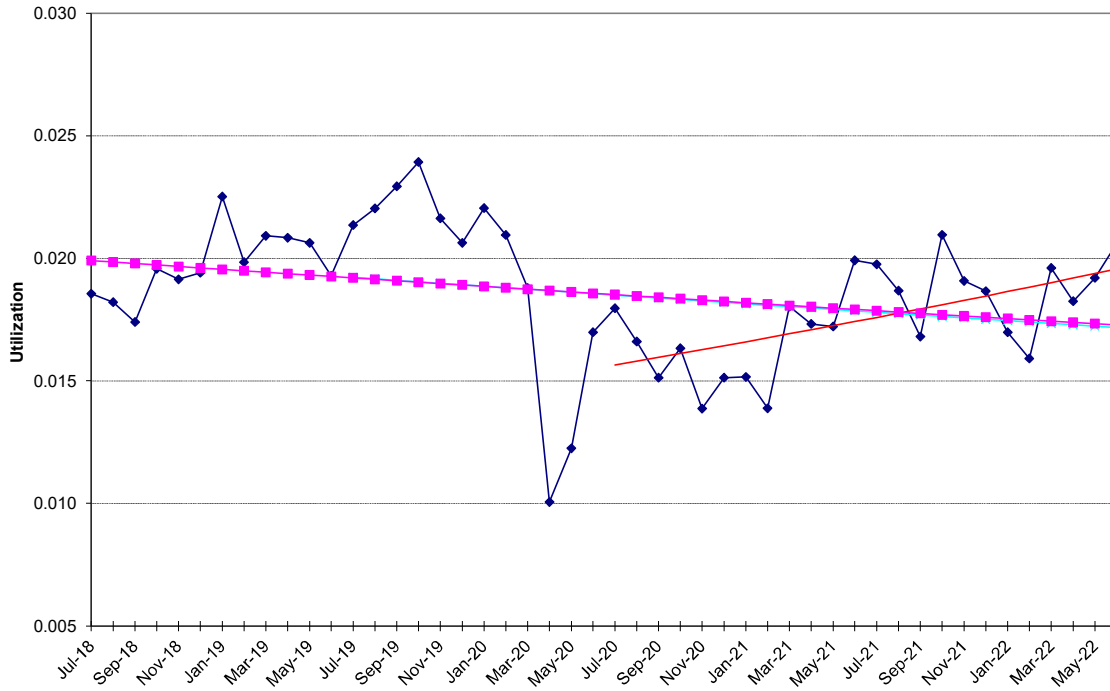
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.8%	4.6%	0.6%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.6%	0.9%	-2.7%

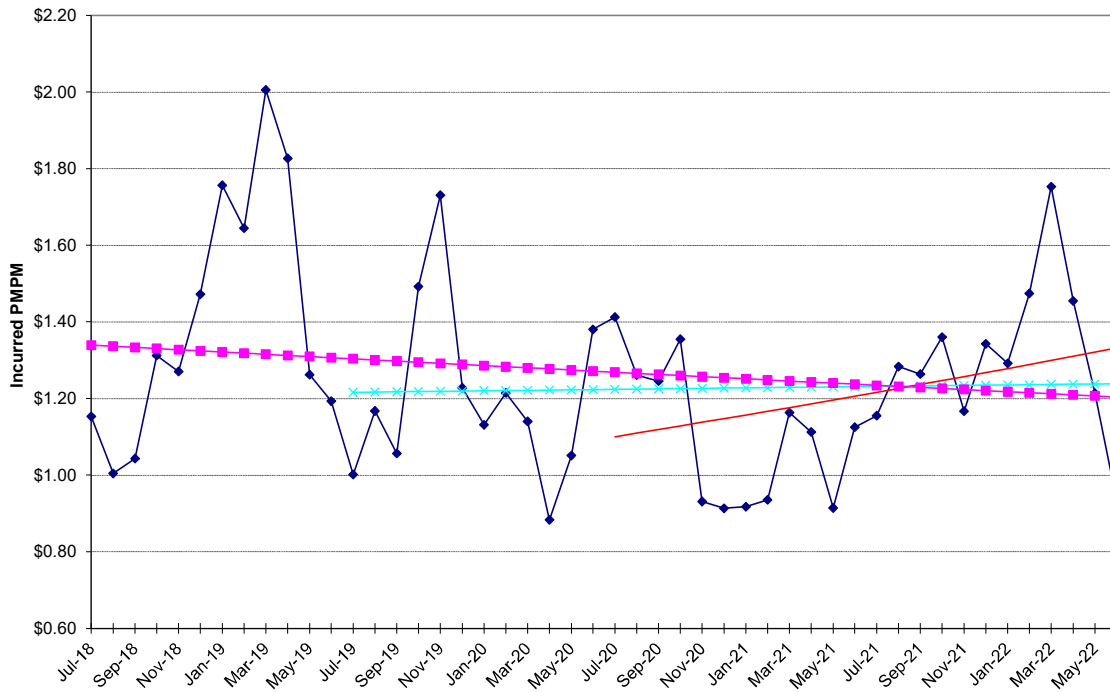
Physician Services - Chemotherapy Radiation



Physician Services - Chemotherapy Radiation



Physician Services - Chemotherapy Radiation



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

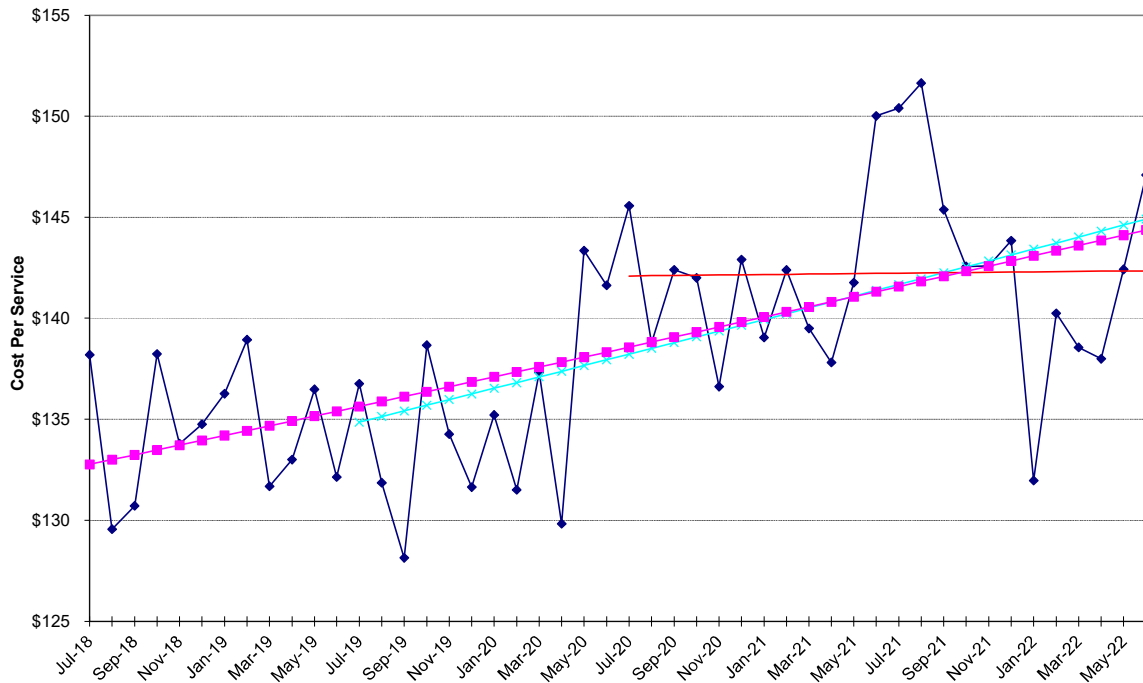
Emergency Room

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.5%	0.1%	4.6%

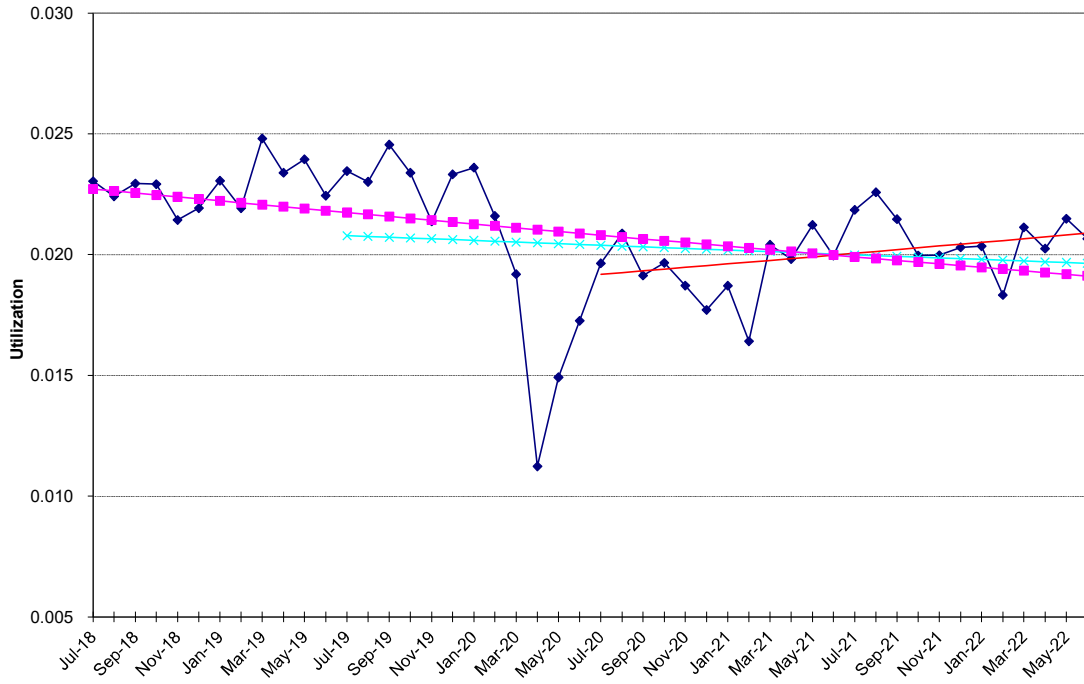
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.9%	2.5%	0.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-4.3%	2.2%	-2.2%

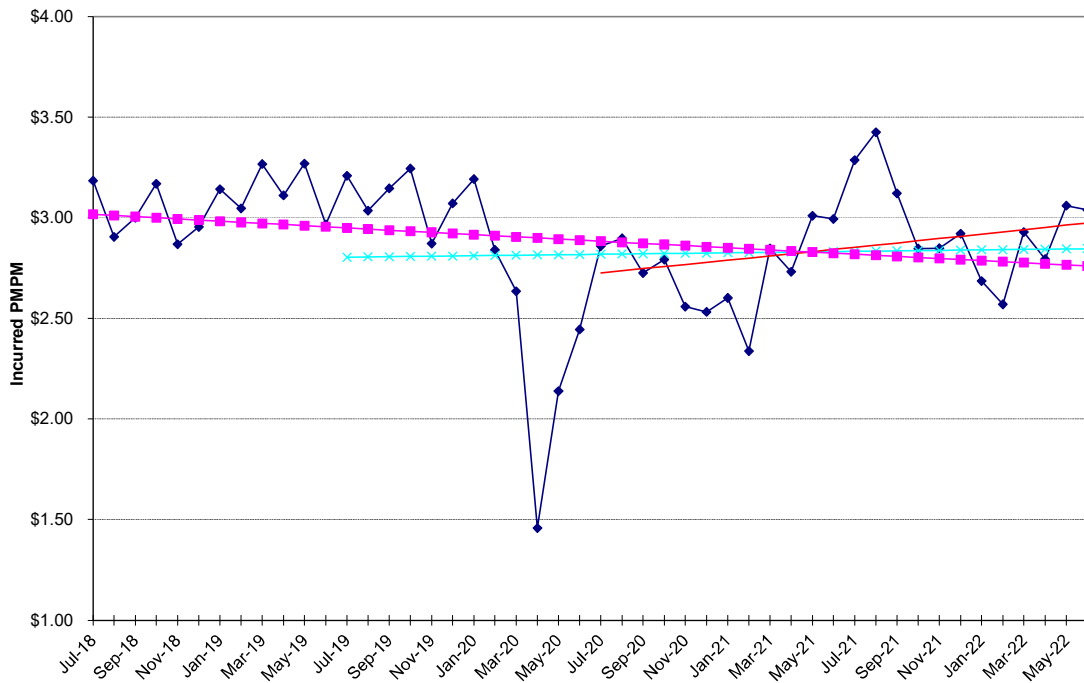
Physician Services - Emergency Room



Physician Services - Emergency Room



Physician Services - Emergency Room



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

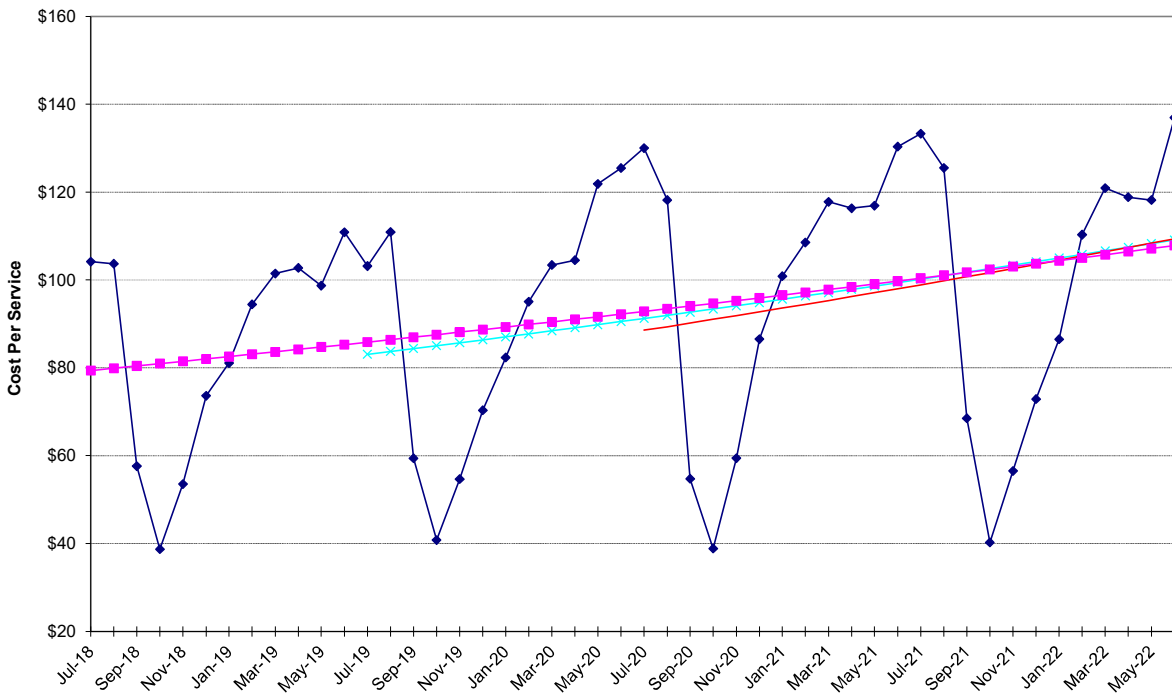
Immunizations / Injections / Allergy

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-18.7%	11.7%	-9.2%

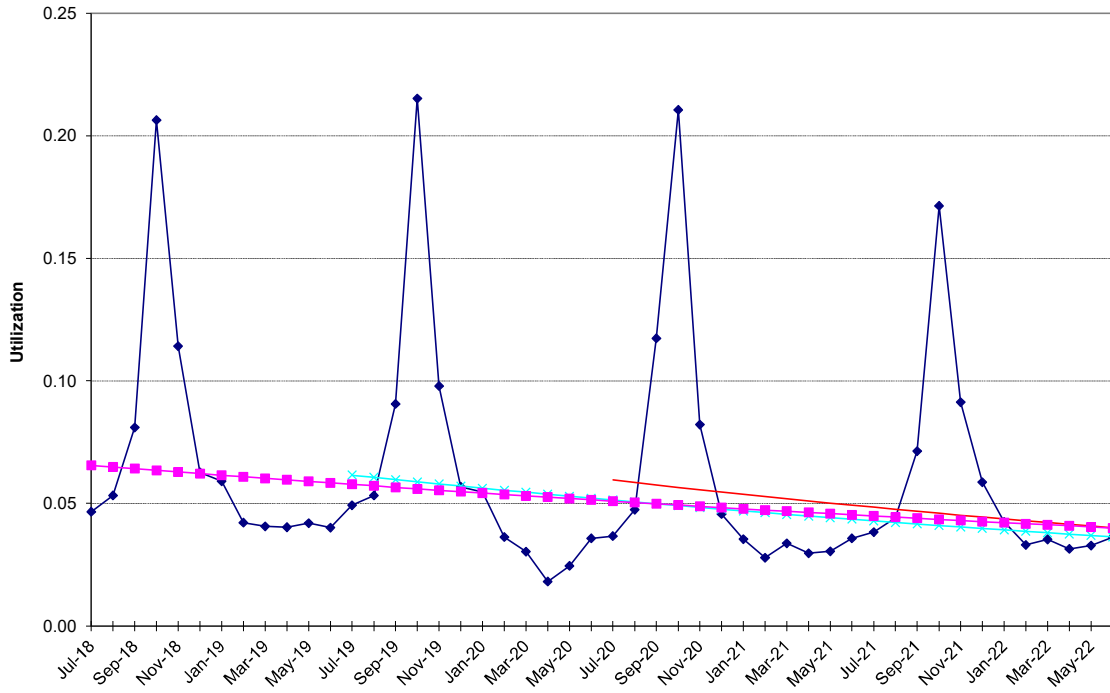
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-16.5%	9.8%	-8.3%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-11.9%	8.1%	-4.7%

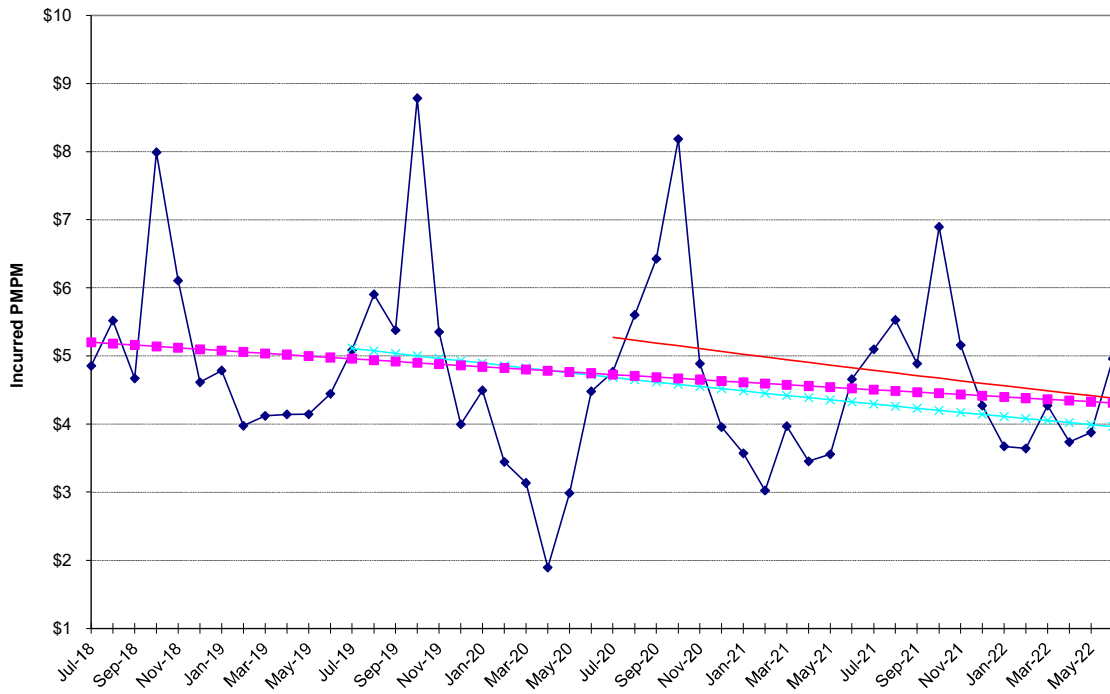
Physician Services - Immunizations / Allergy



Physician Services - Immunizations / Allergy



Physician Services - Immunizations / Allergy



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

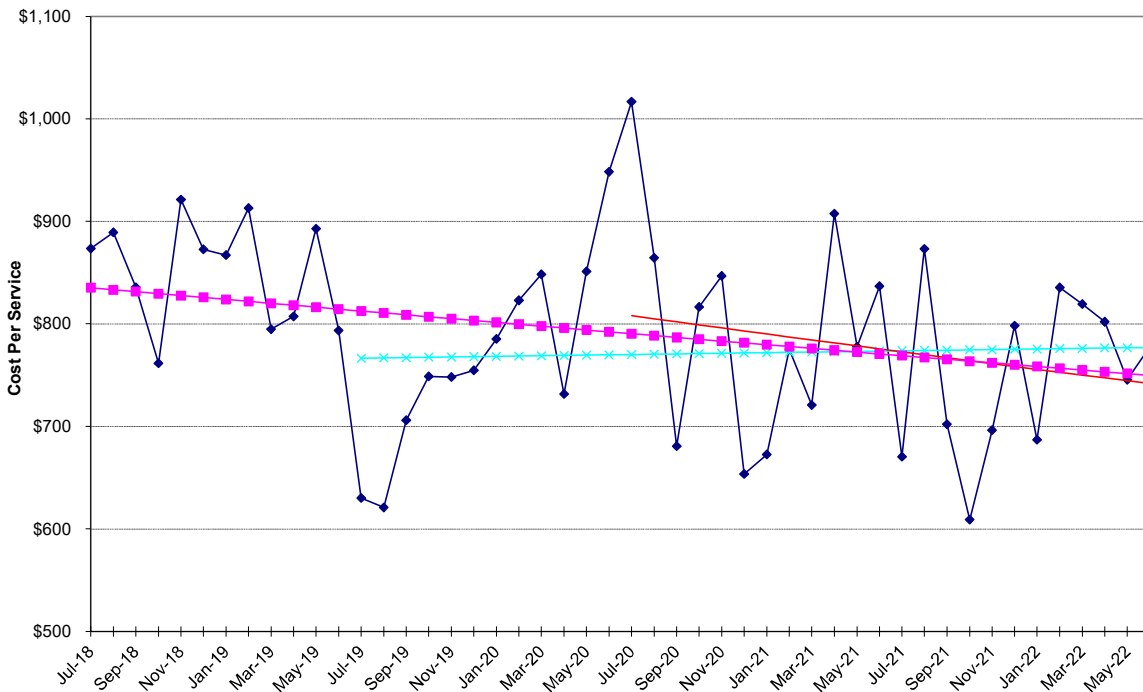
Inpatient Surgery

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-8.8%	-4.4%	-12.8%

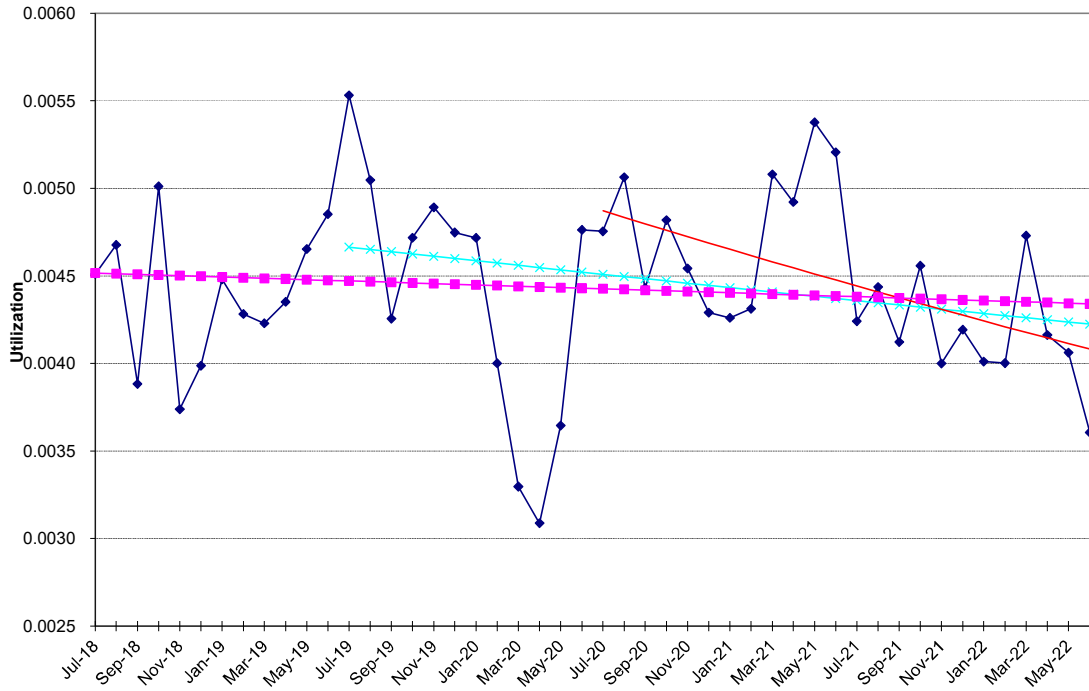
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.3%	0.5%	-2.9%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.0%	-2.7%	-3.7%

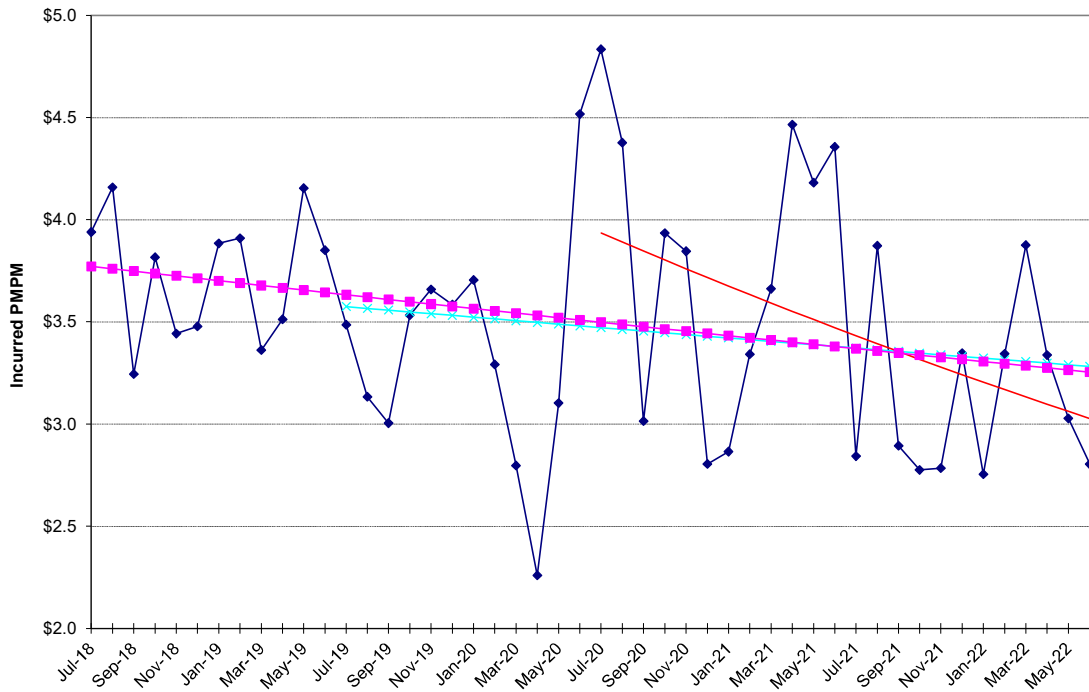
Physician Services - Inpatient Surgery



Physician Services - Inpatient Surgery



Physician Services - Inpatient Surgery



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

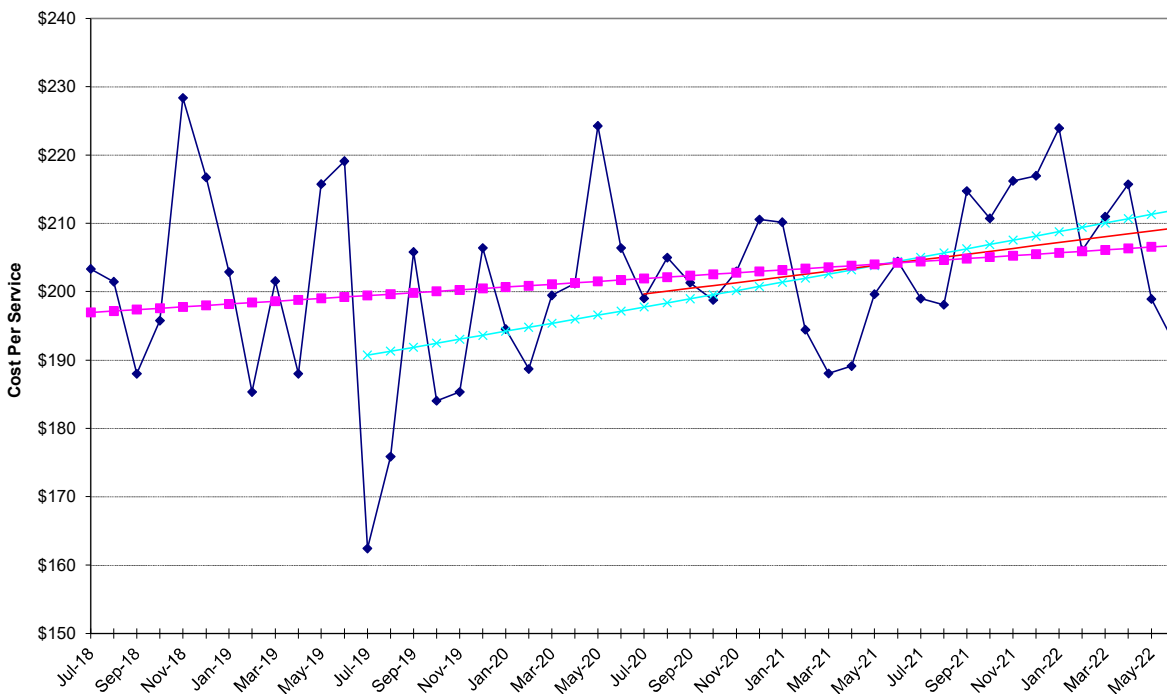
Inpatient Visits

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.3%	2.5%	3.8%

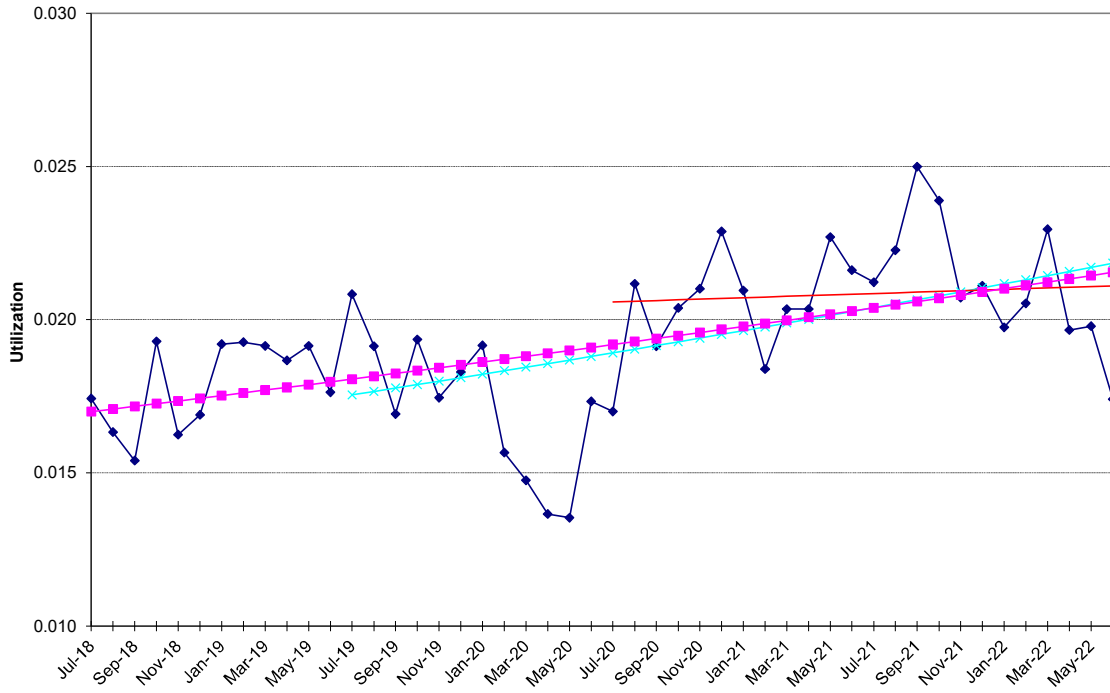
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.8%	3.7%	11.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.2%	1.2%	7.6%

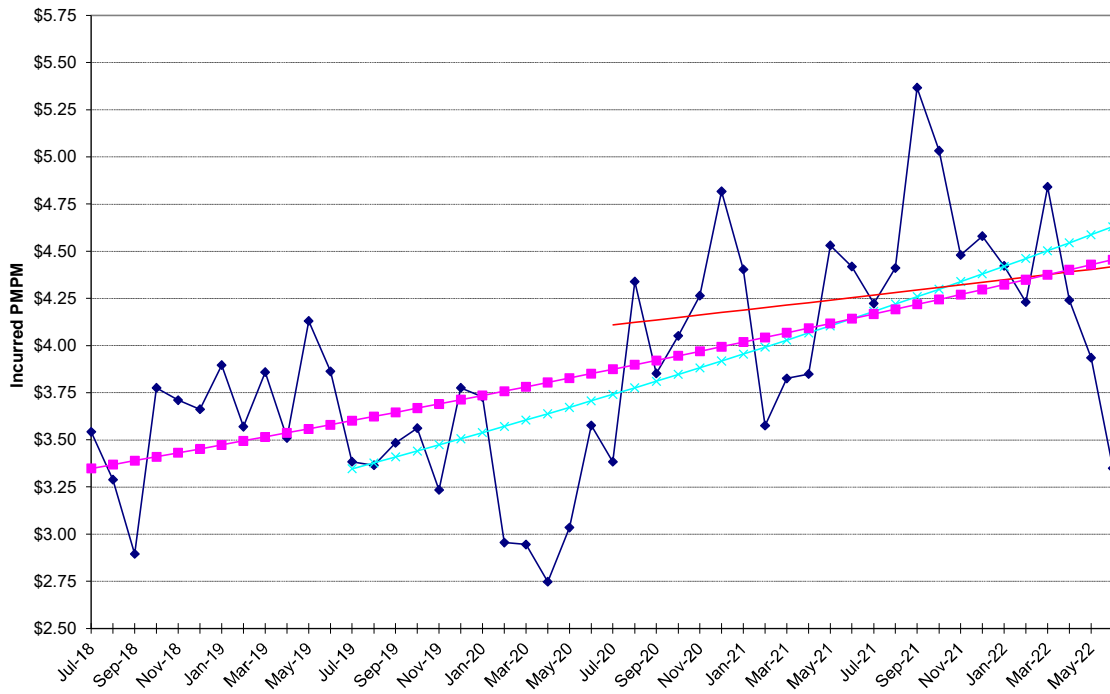
Physician Services - Inpatient Visits



Physician Services - Inpatient Visits



Physician Services - Inpatient Visits



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

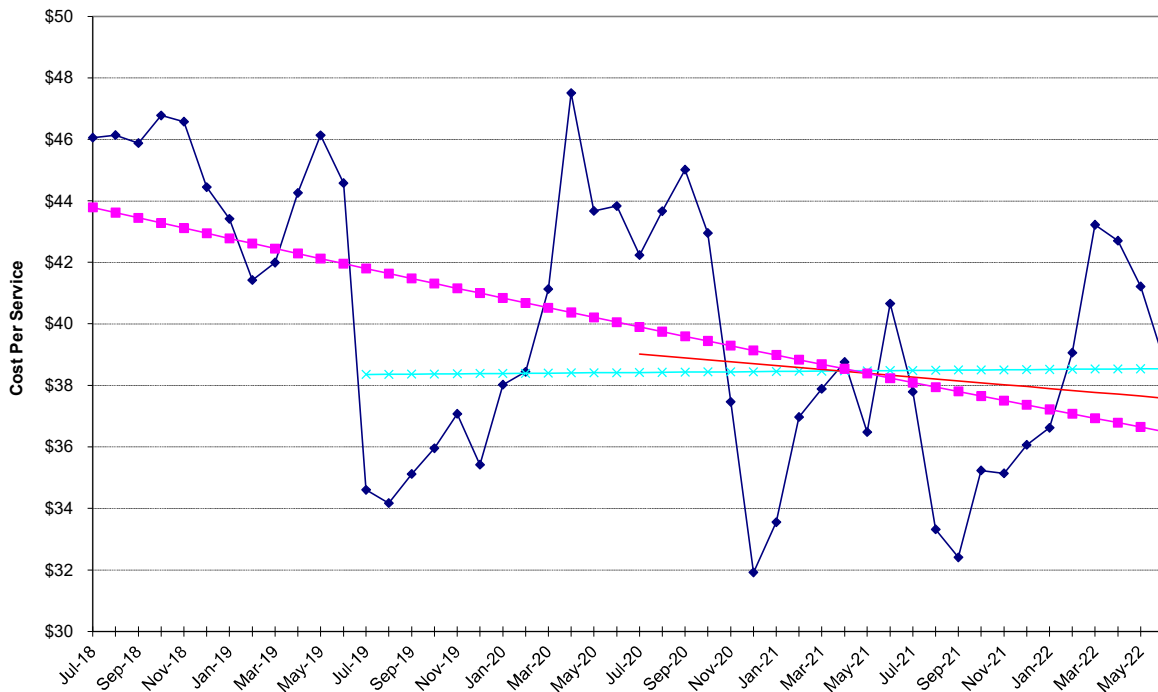
Lab & Pathology

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
11.4%	-1.9%	9.2%

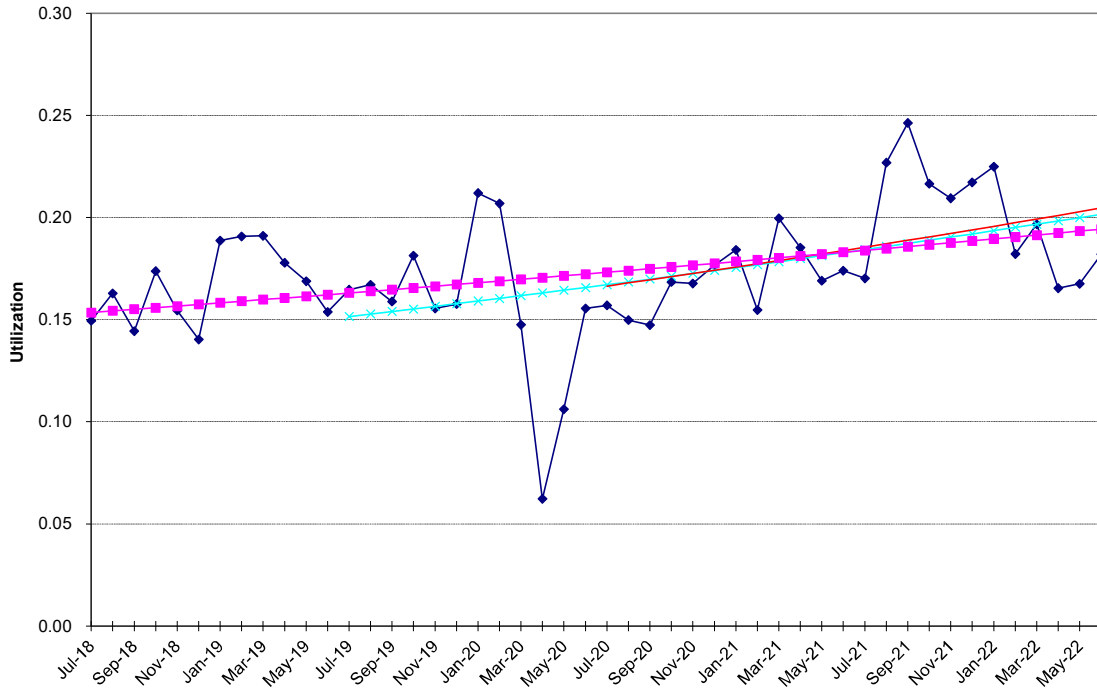
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
10.3%	0.2%	10.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.2%	-4.5%	1.4%

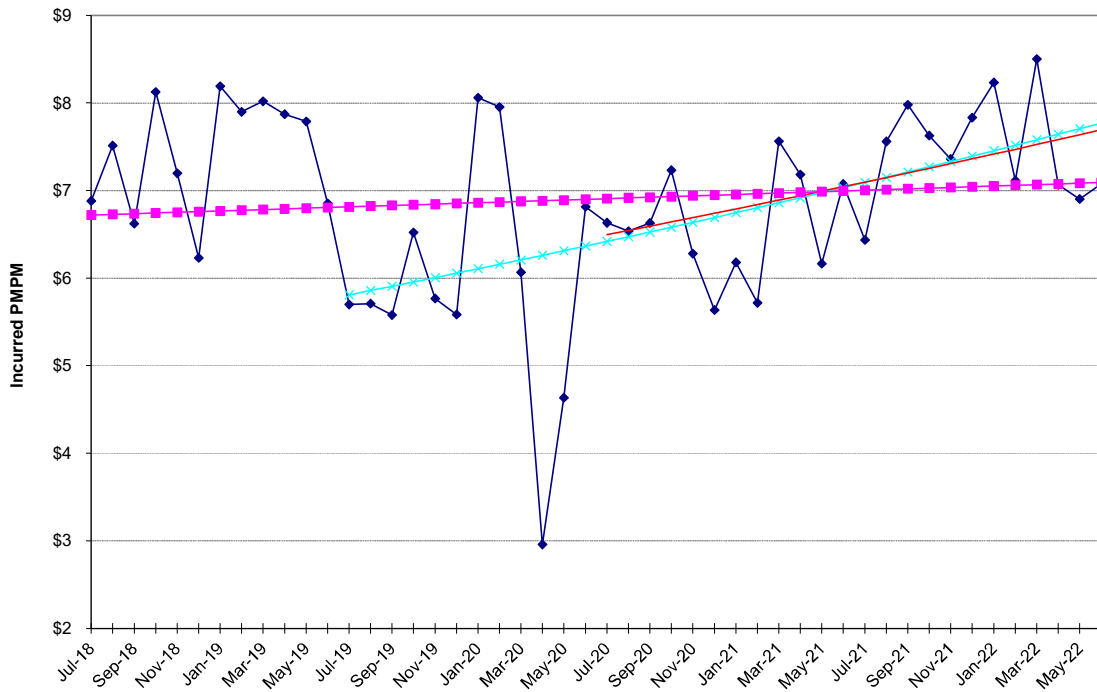
Physician Services - Lab & Pathology



Physician Services - Lab & Pathology



Physician Services - Lab & Pathology



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

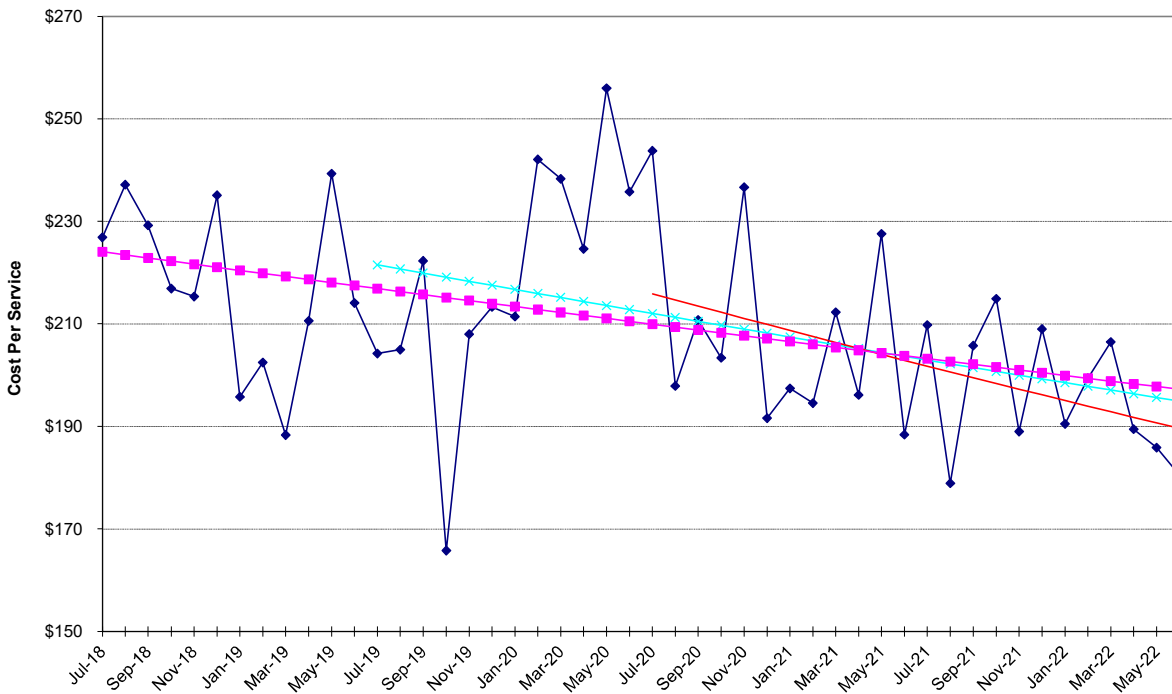
Maternity

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.9%	-6.5%	-3.9%

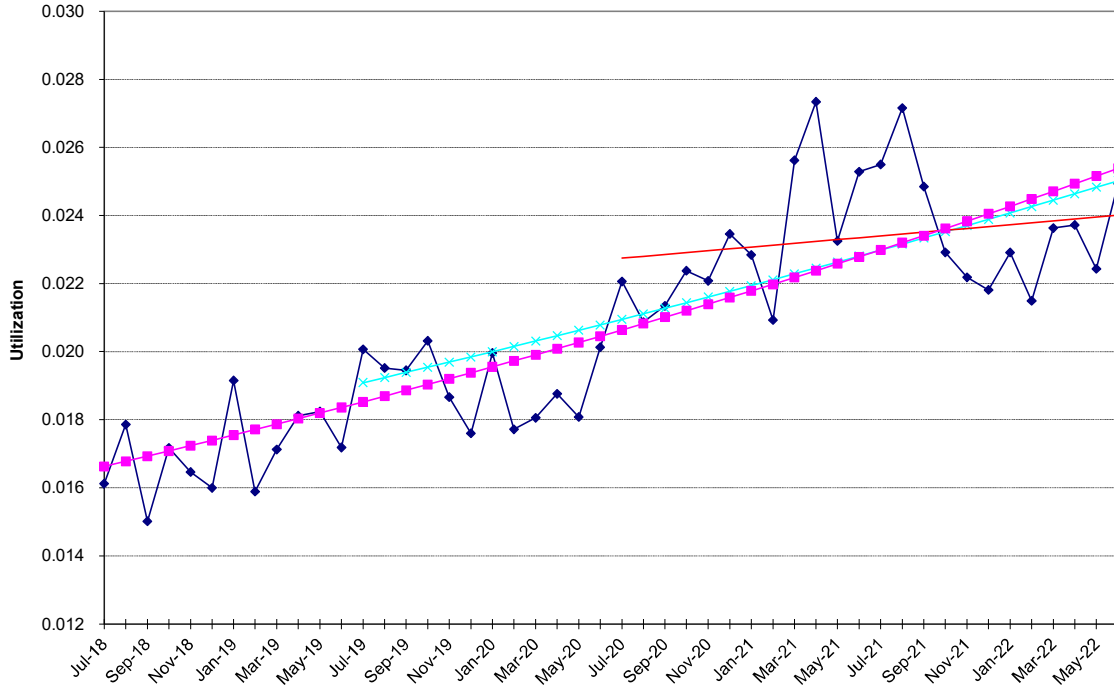
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
9.7%	-4.3%	5.0%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
11.4%	-3.2%	7.8%

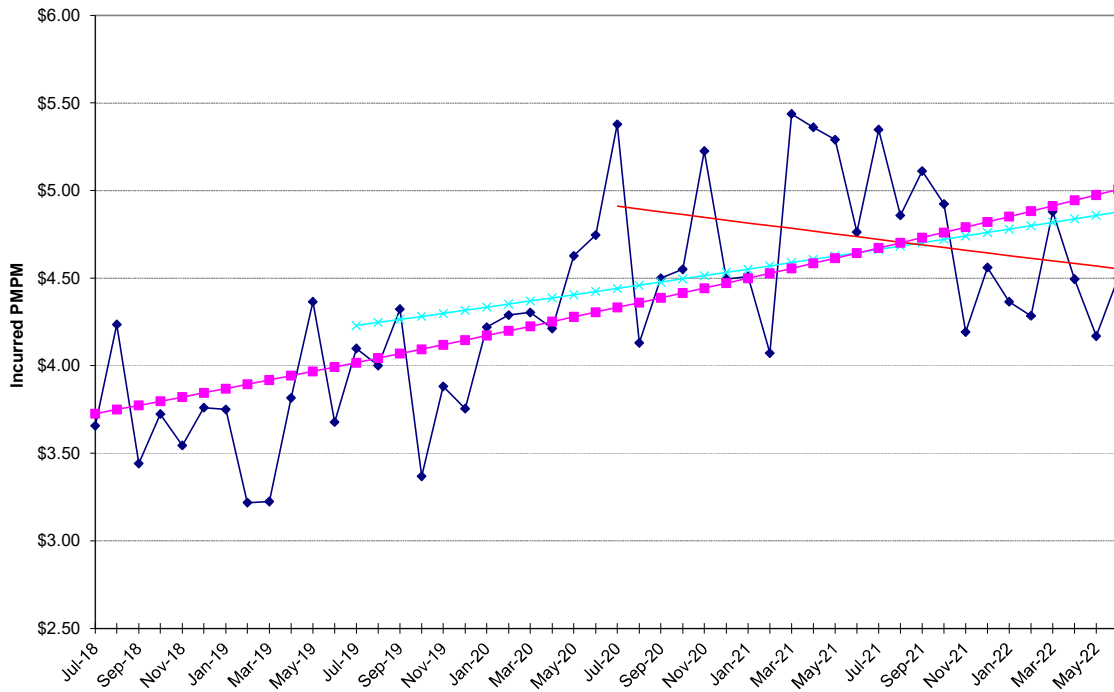
Physician Services - Maternity



Physician Services - Maternity



Physician Services - Maternity



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

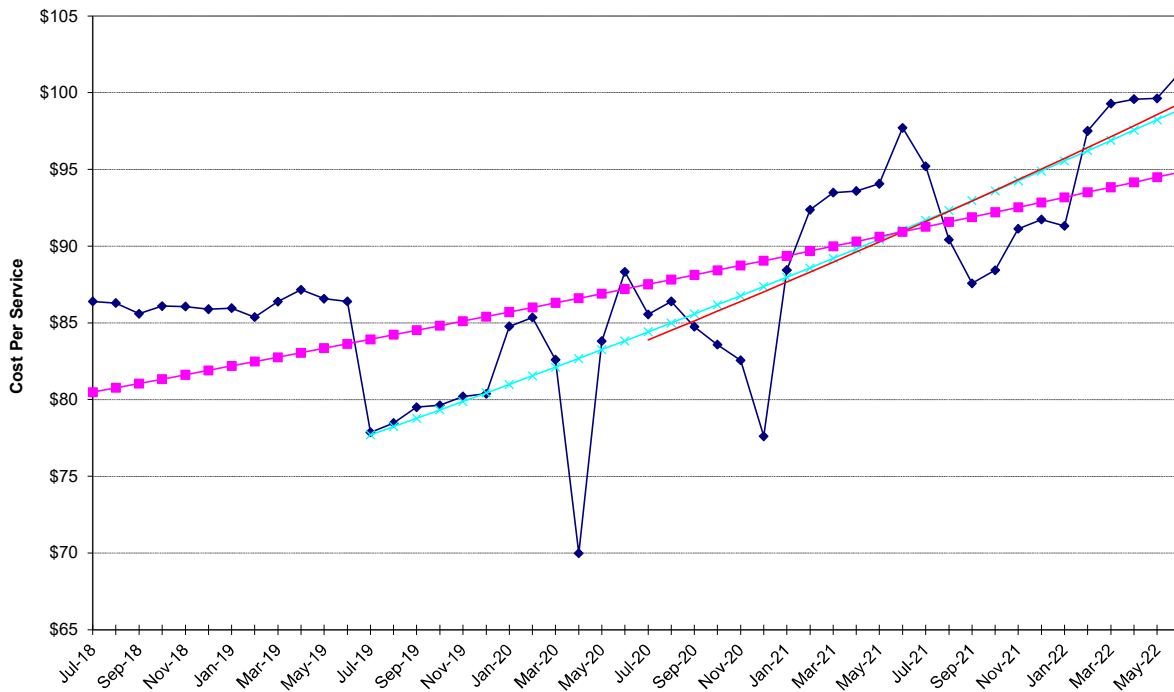
Office Visits

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
9.1%	9.2%	19.2%

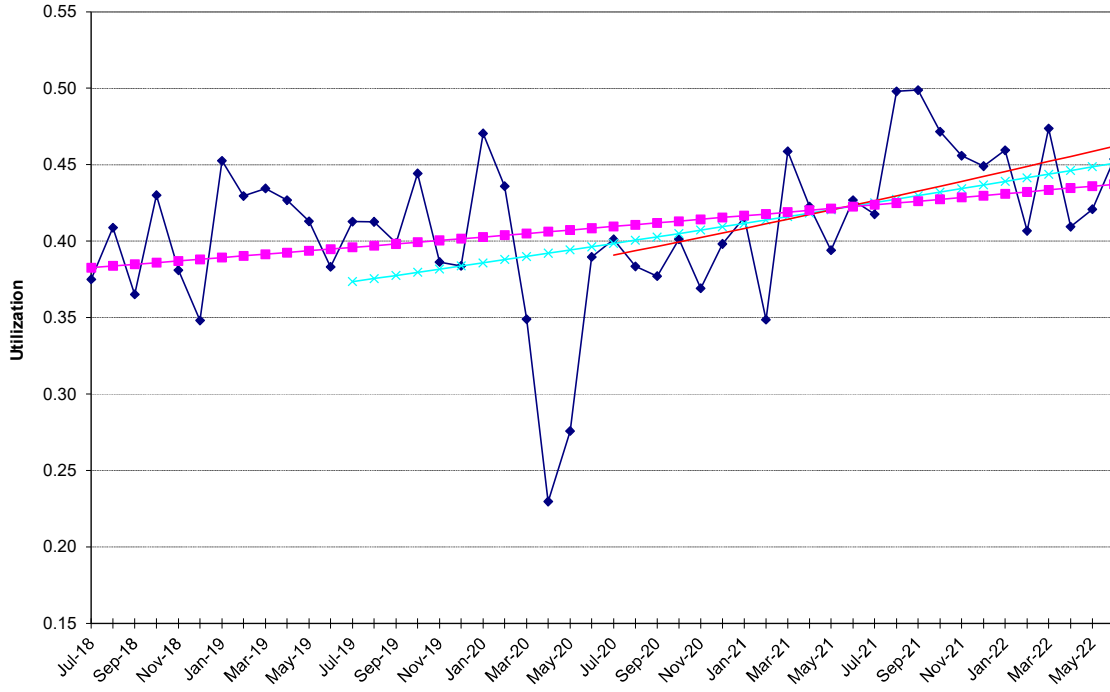
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.7%	8.6%	15.9%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.5%	4.3%	7.9%

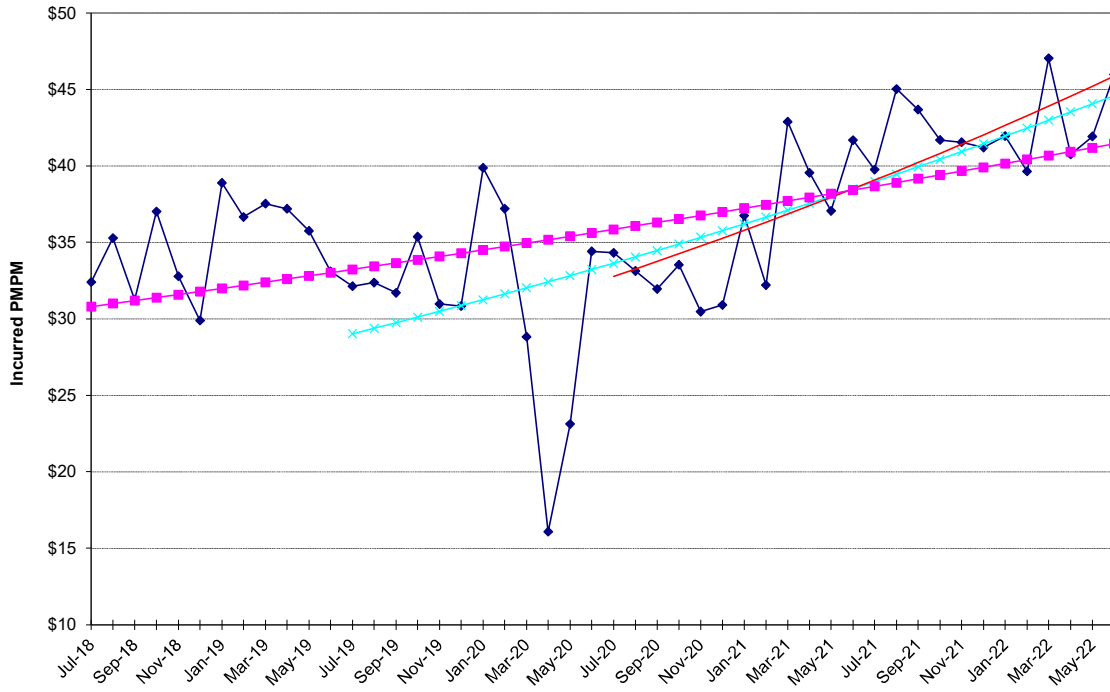
Physician Services - Office Visits



Physician Services - Office Visits



Physician Services - Office Visits



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

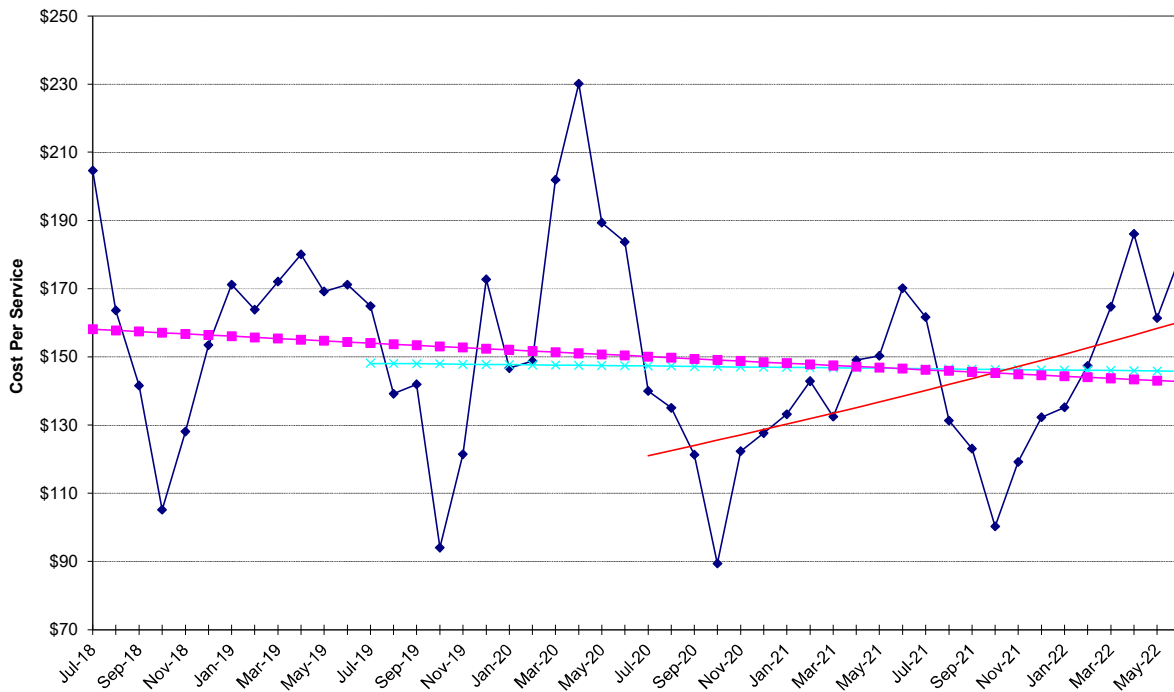
Other Services

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.7%	15.8%	4.5%

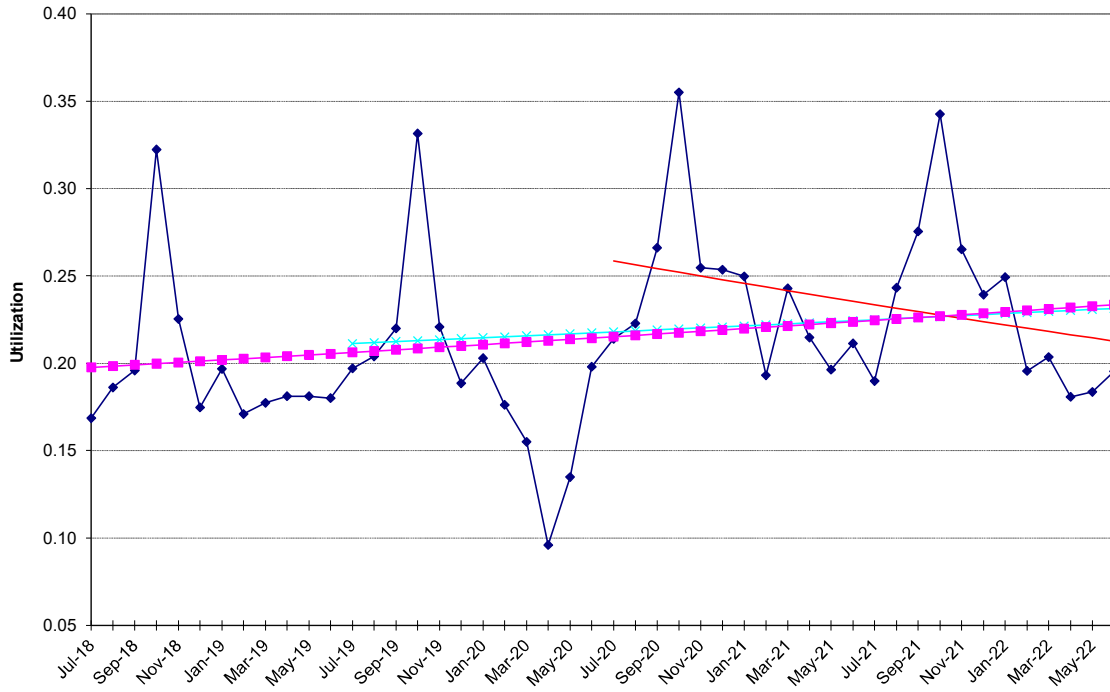
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.2%	-0.5%	2.6%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.4%	-2.6%	1.7%

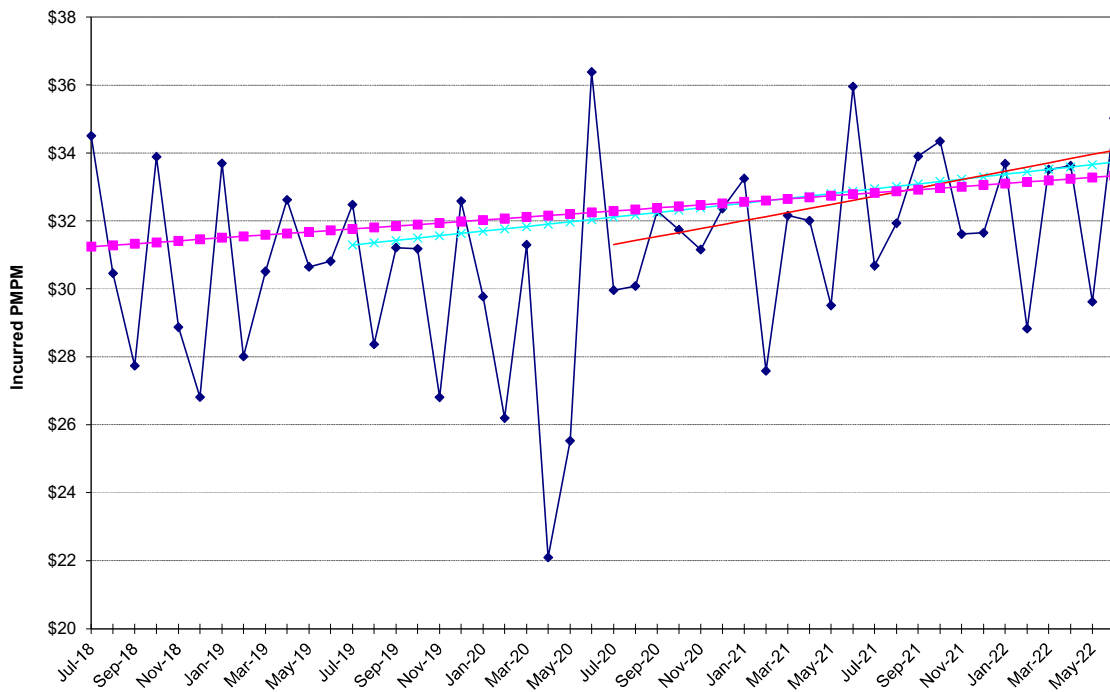
Physician Services - Other Services



Physician Services - Other Services



Physician Services - Other Services



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

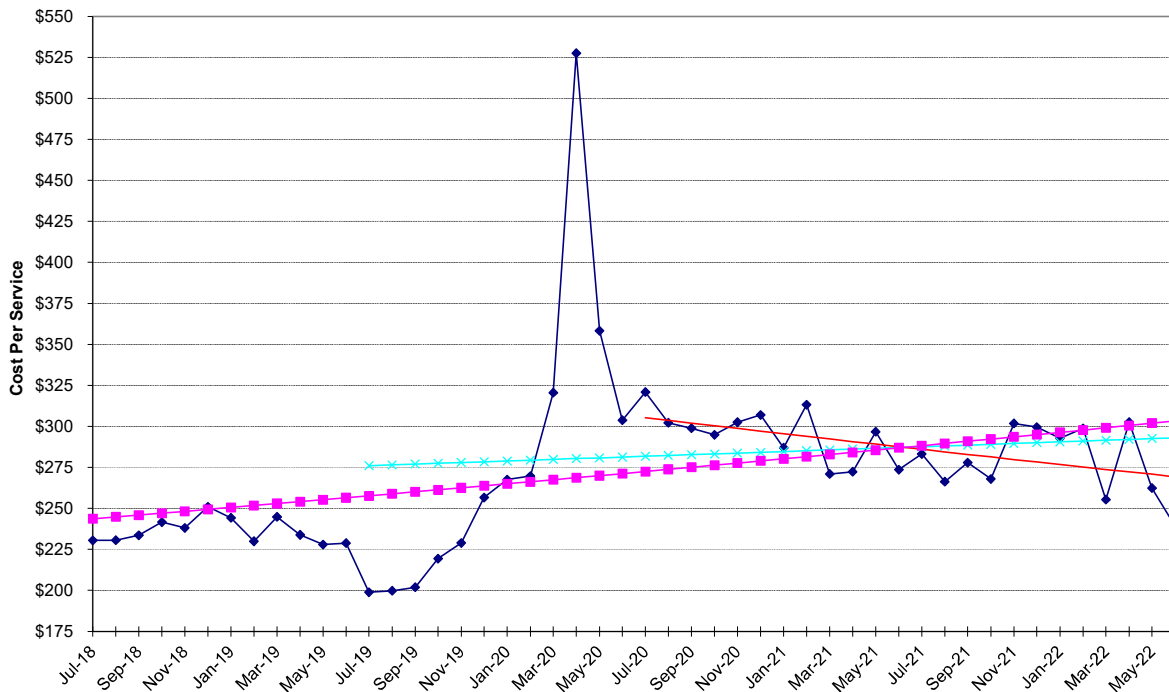
Outpatient Surgery

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
11.4%	-6.3%	4.3%

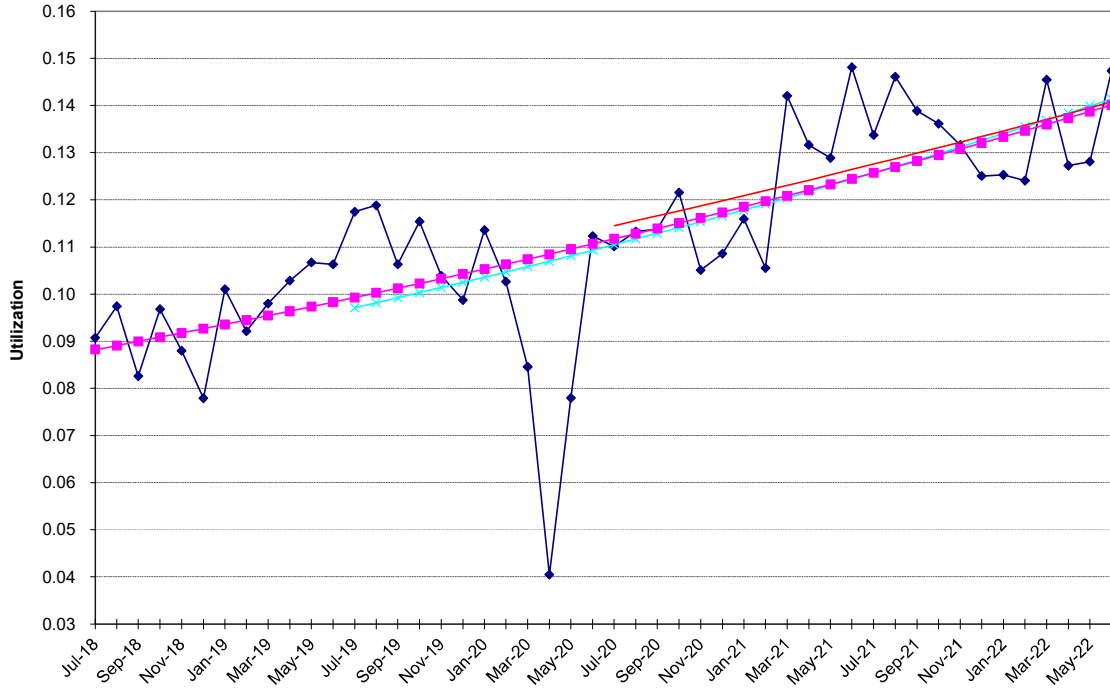
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
13.8%	2.1%	16.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
12.5%	5.8%	19.0%

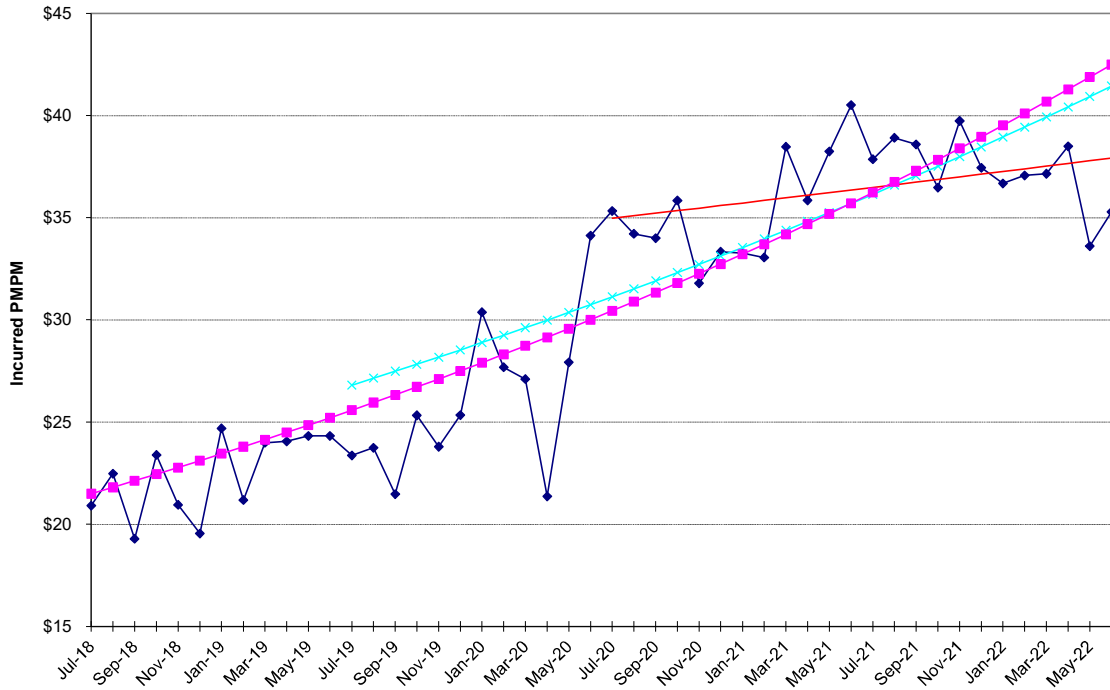
Physician Services - Outpatient Surgery



Physician Services - Outpatient Surgery



Physician Services - Outpatient Surgery



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

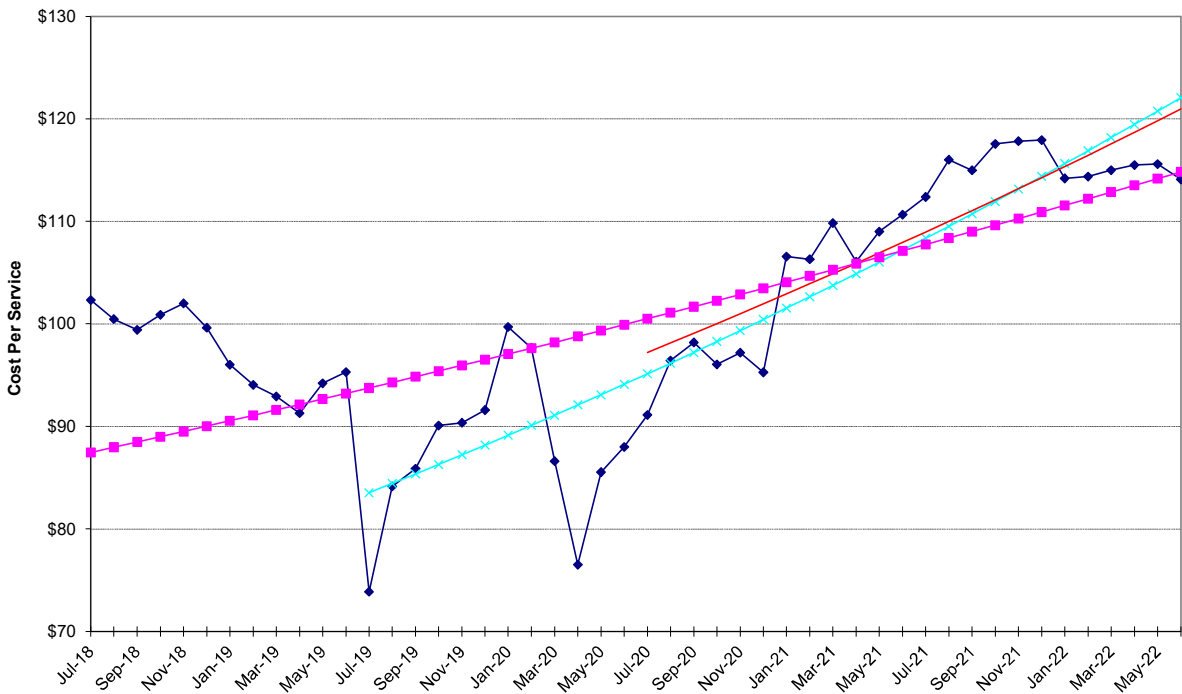
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.4%	12.1%	19.2%

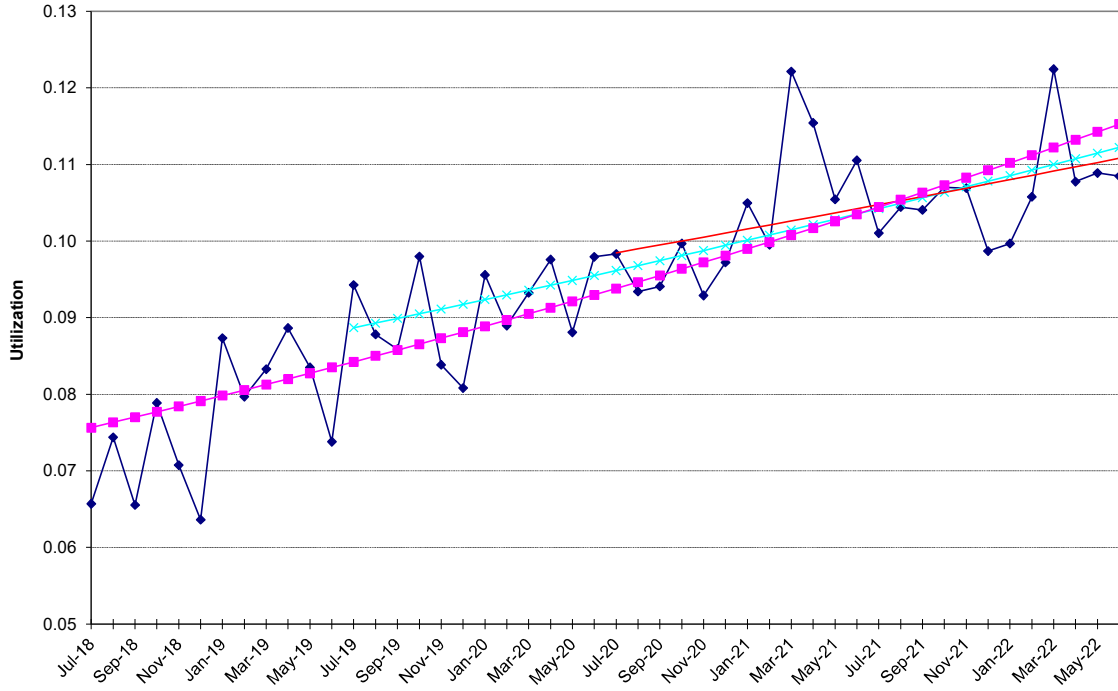
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
8.4%	13.9%	23.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
11.4%	7.2%	19.4%

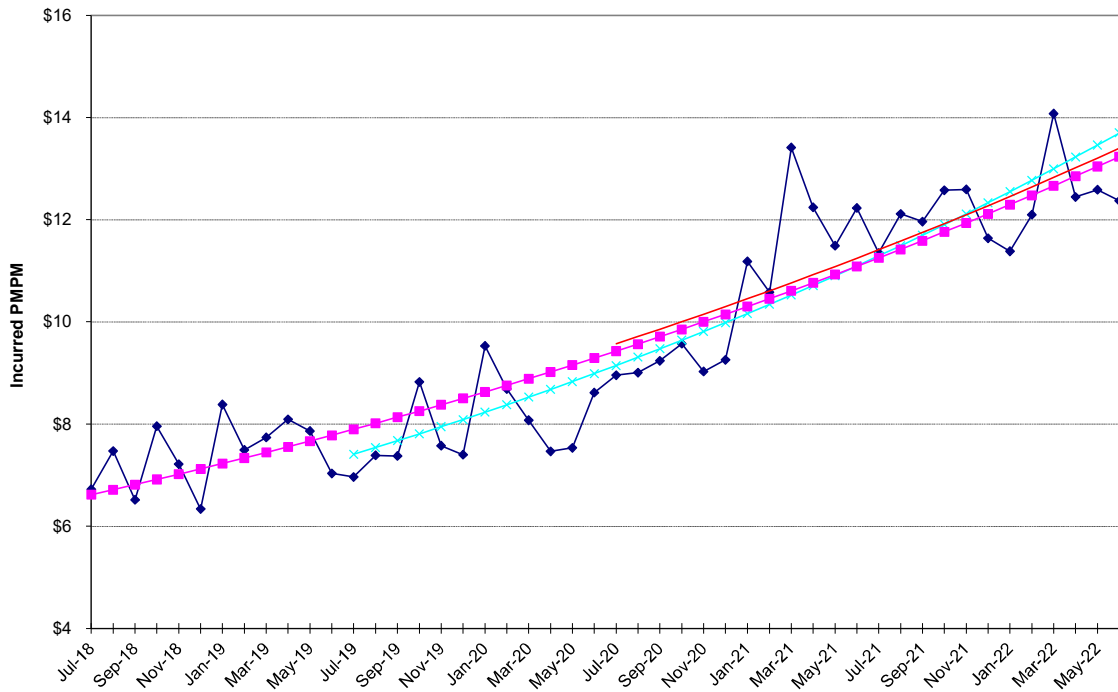
Physician Services - Psychiatric / Substance Abuse



Physician Services - Psychiatric / Substance Abuse



Physician Services - Psychiatric / Substance Abuse



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

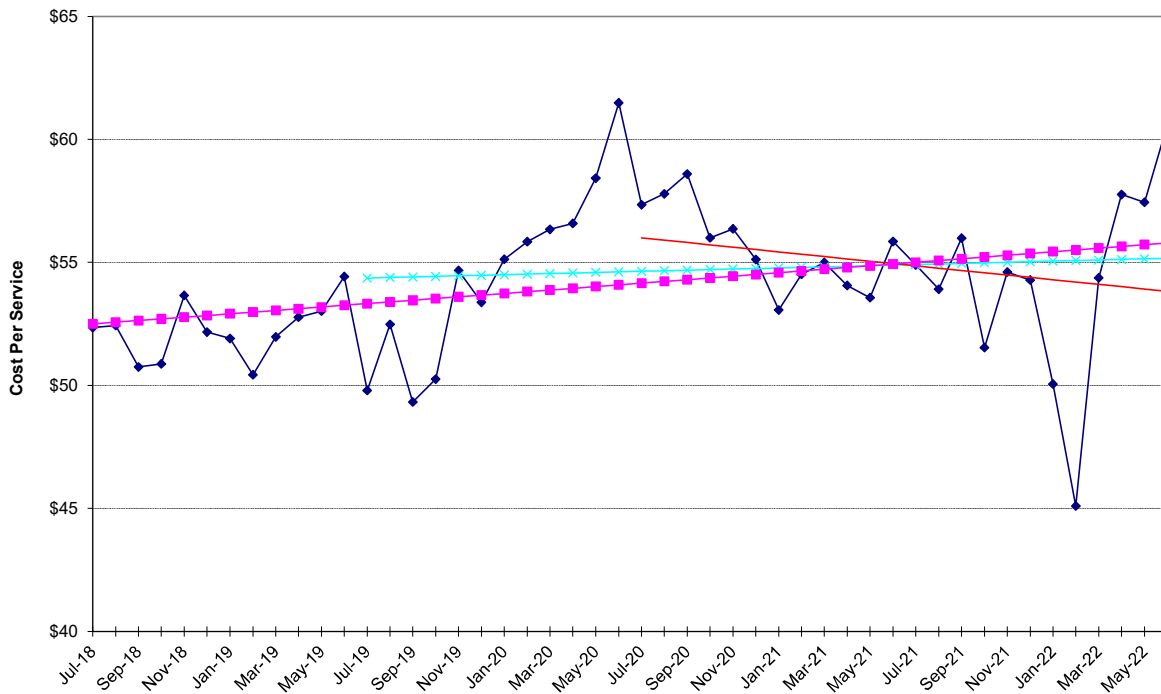
Radiology

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
9.4%	-2.0%	7.1%

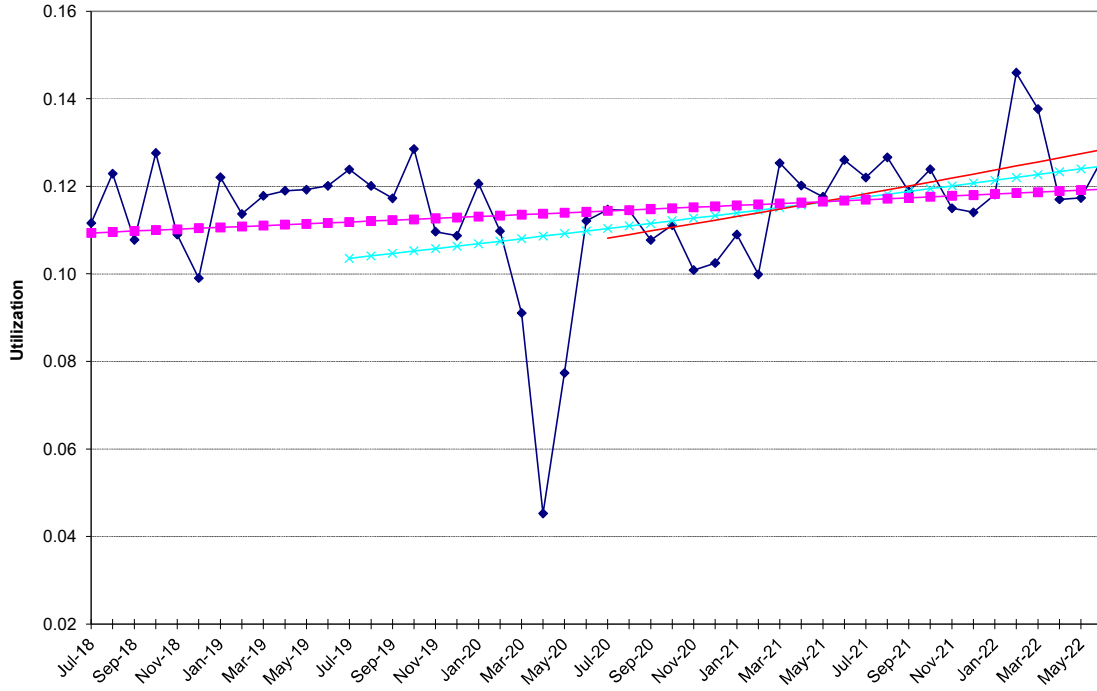
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.6%	0.5%	7.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.3%	1.6%	3.9%

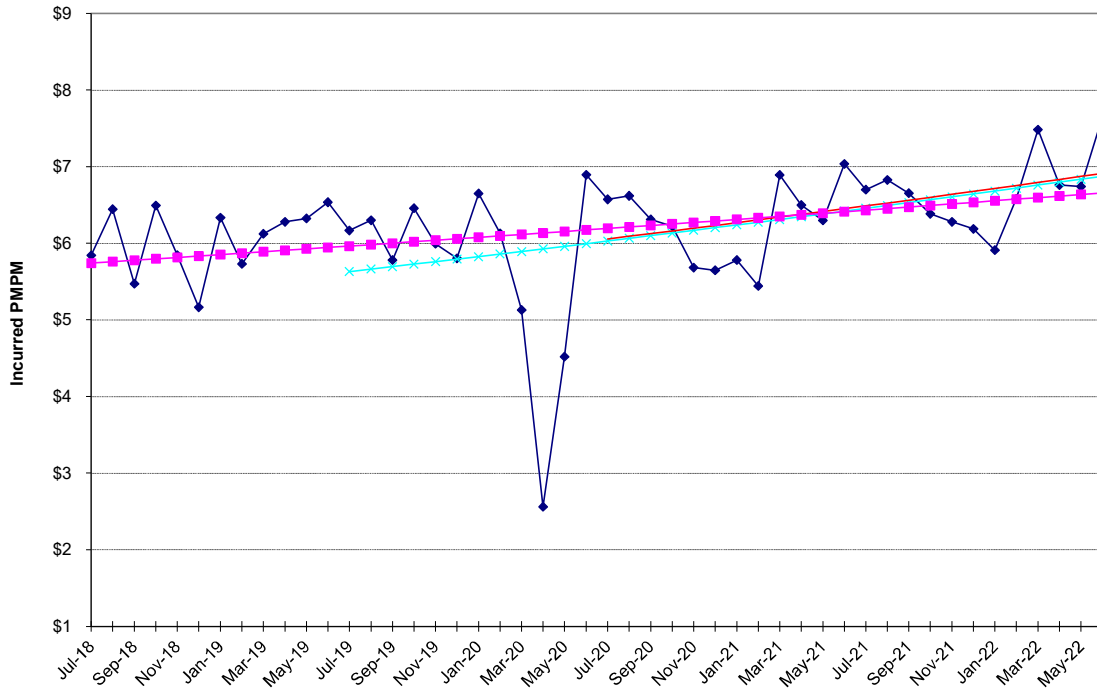
Physician Services - Radiology



Physician Services - Radiology



Physician Services - Radiology



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

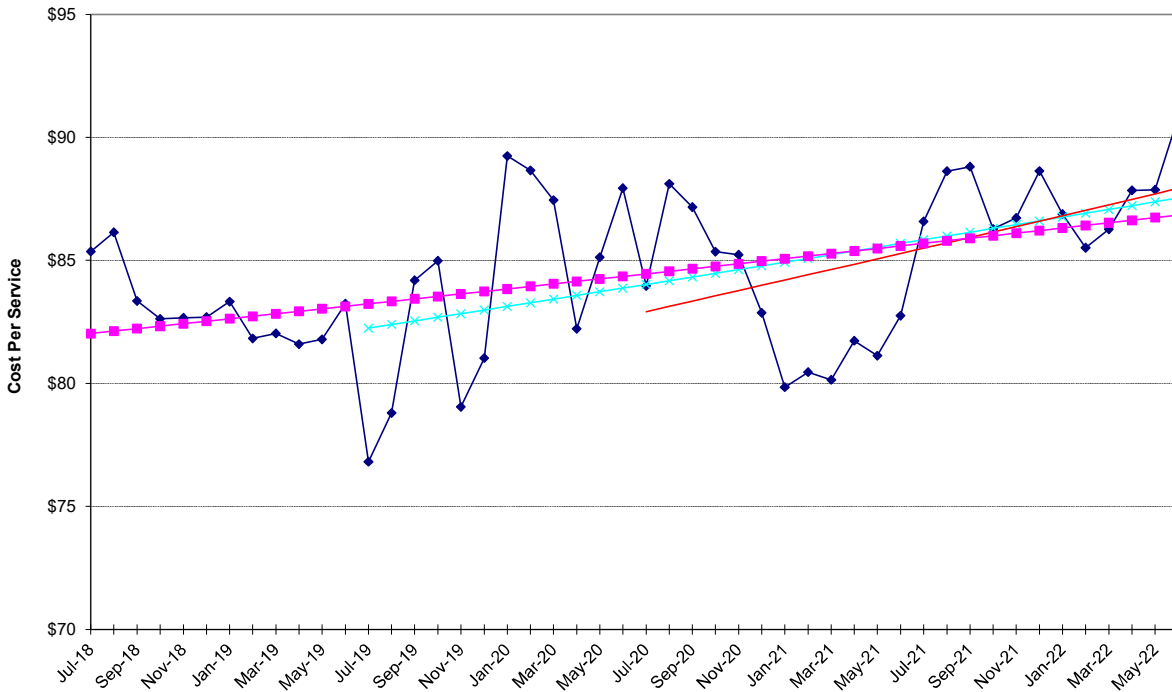
Therapies

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.0%	3.1%	4.1%

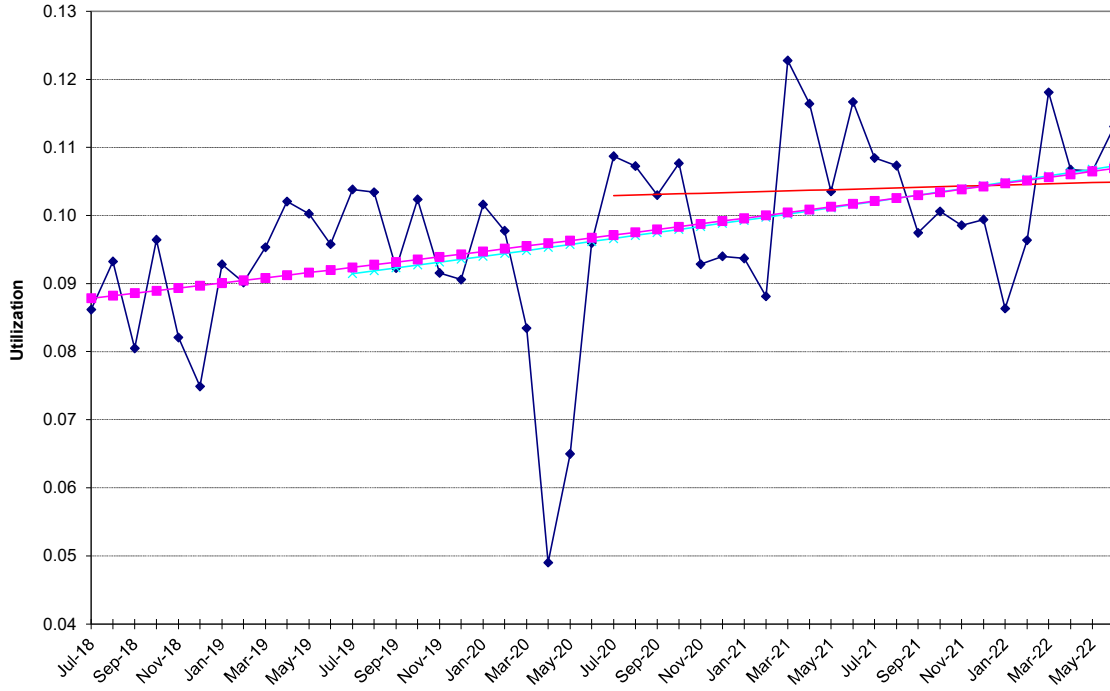
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.6%	2.2%	7.9%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.1%	1.5%	6.7%

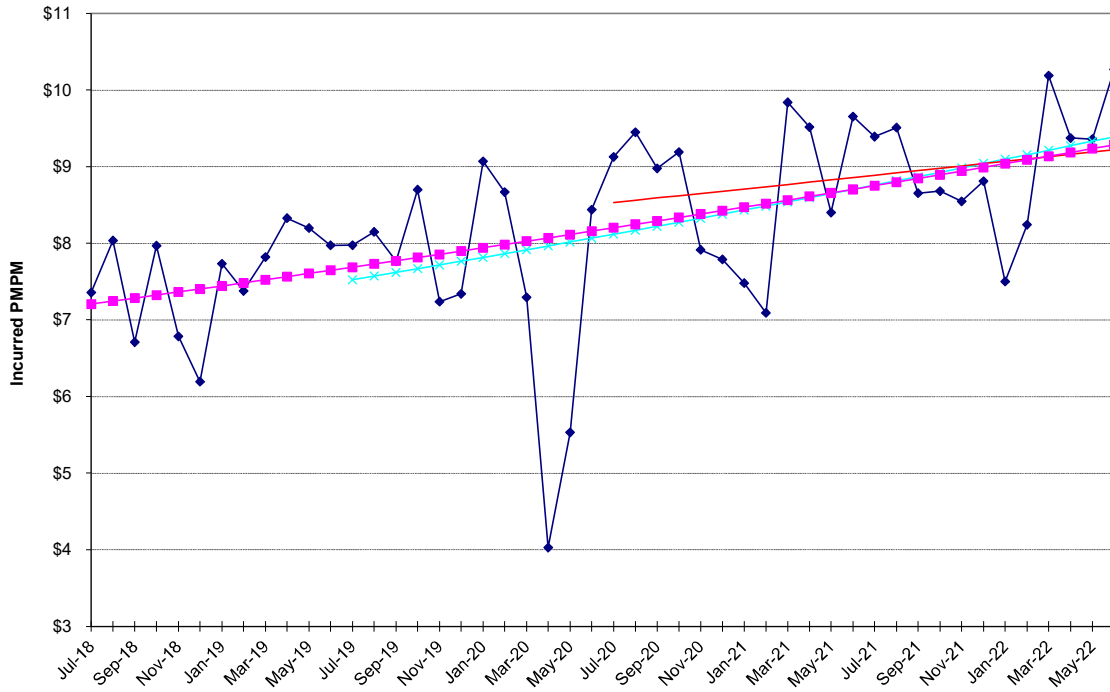
Physician Services - Therapies



Physician Services - Therapies



Physician Services - Therapies



**NON-MEDICARE CLAIMS
Excluding Drugs**

OTHER

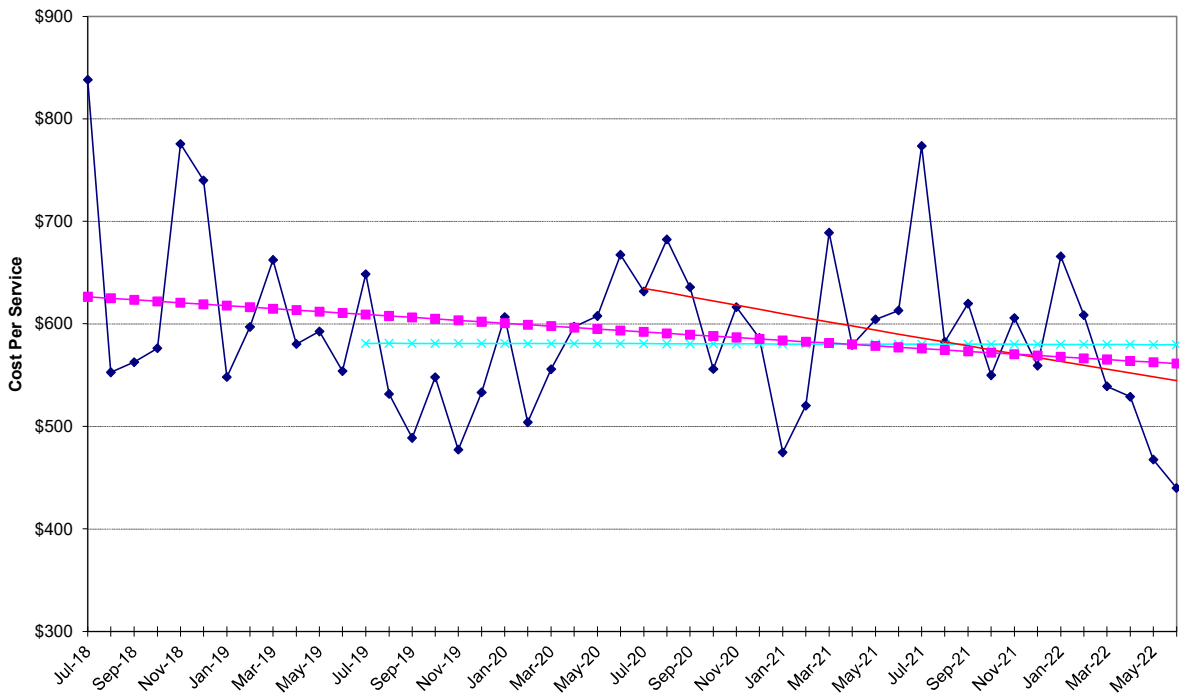
Ambulance

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-6.0%	-7.7%	-13.2%

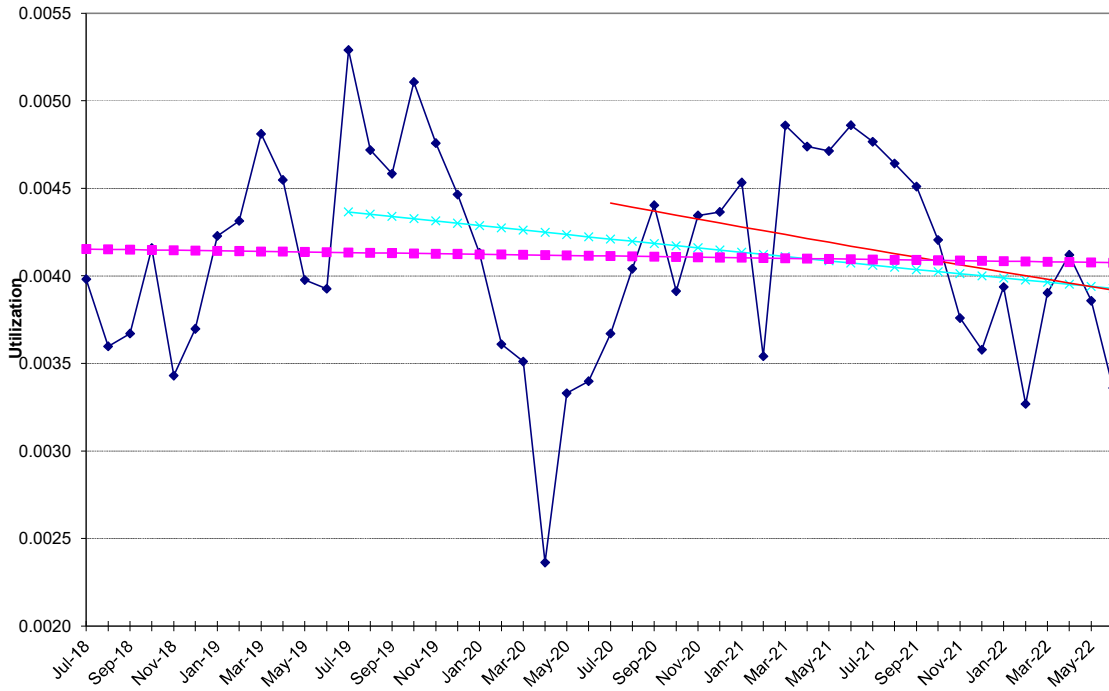
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.6%	-0.1%	-3.6%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.5%	-2.8%	-3.2%

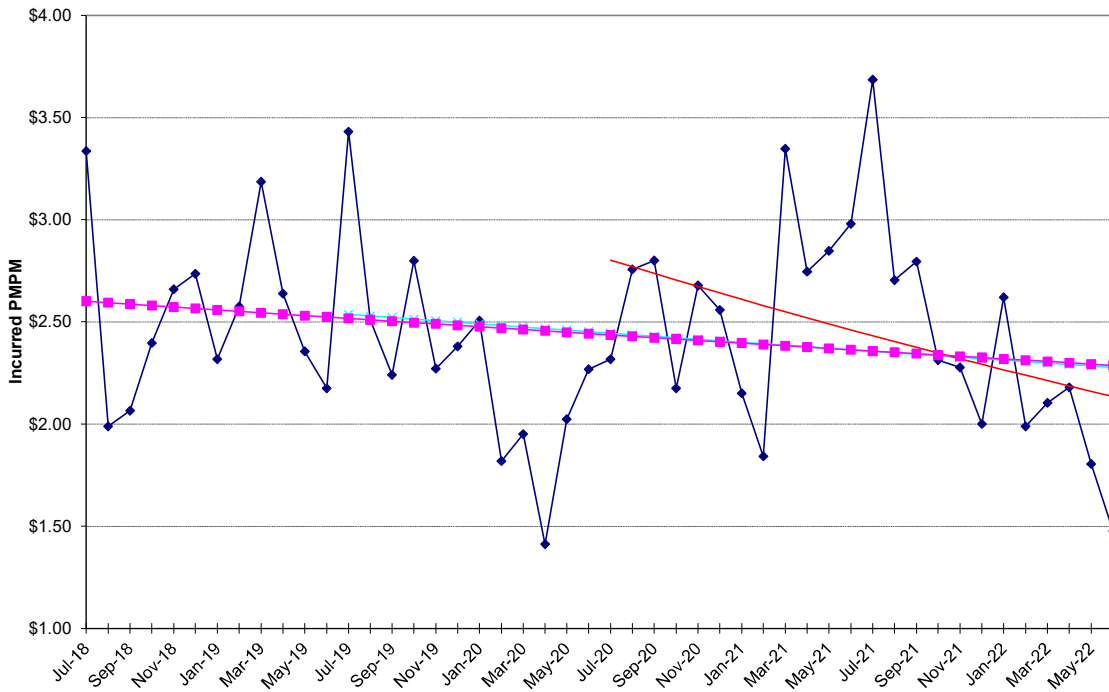
Other - Ambulance



Other - Ambulance



Other - Ambulance



**NON-MEDICARE CLAIMS
Excluding Drugs**

OTHER

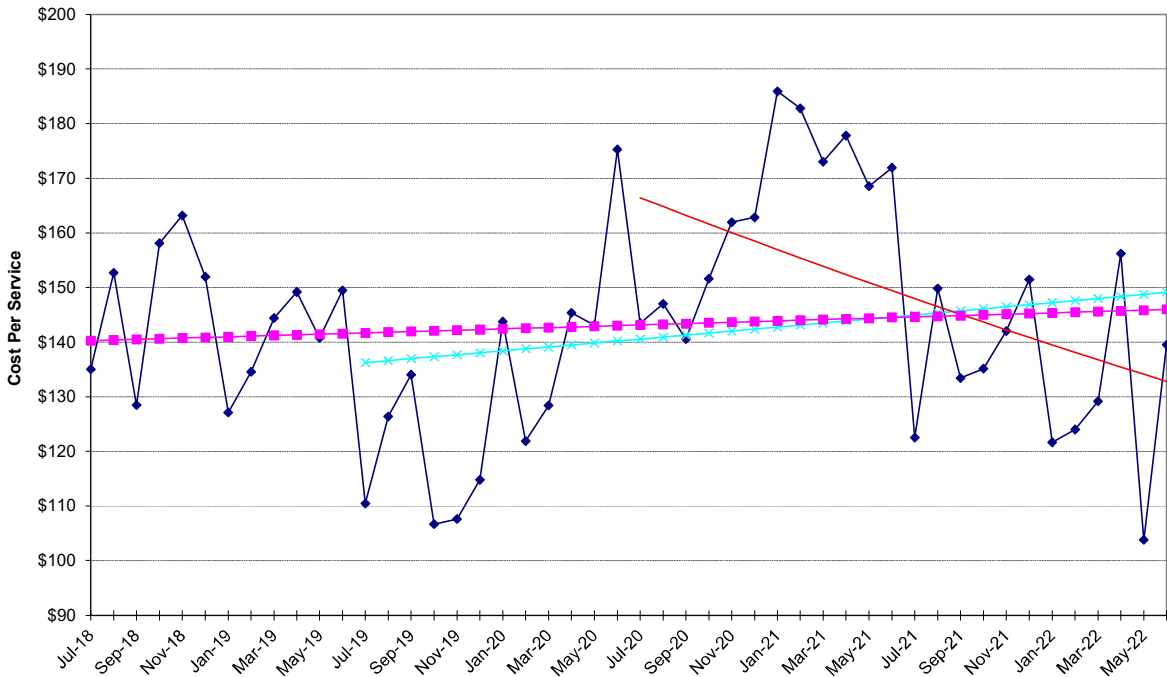
Appliances (DME)

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.4%	-11.1%	-6.3%

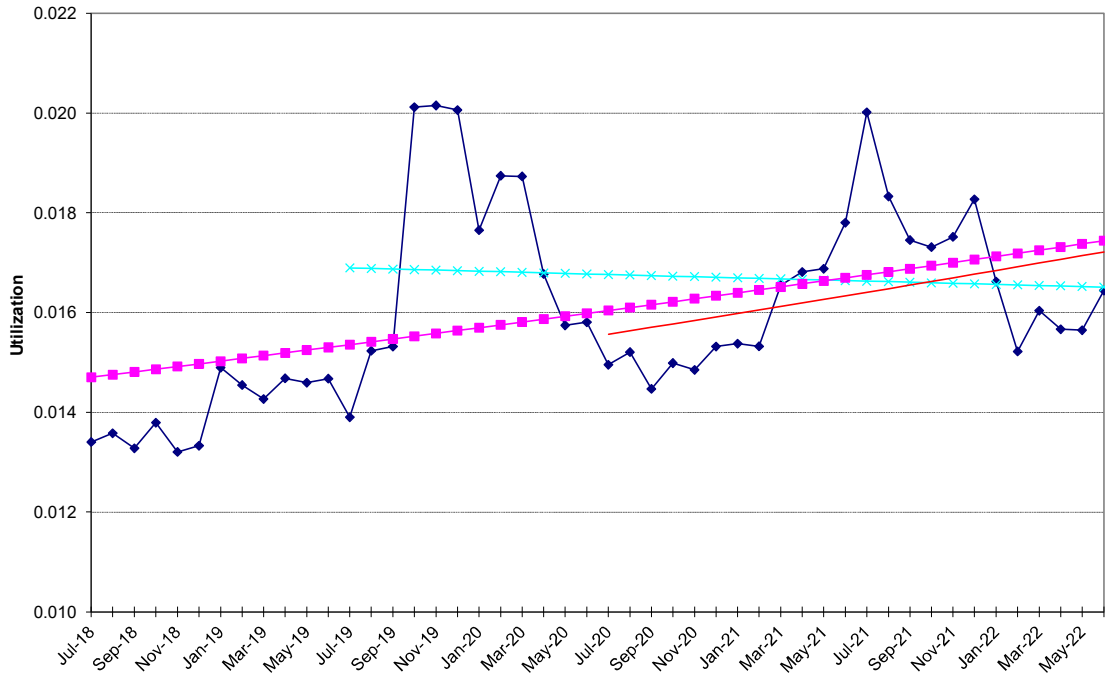
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.8%	3.1%	2.3%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.5%	1.0%	5.5%

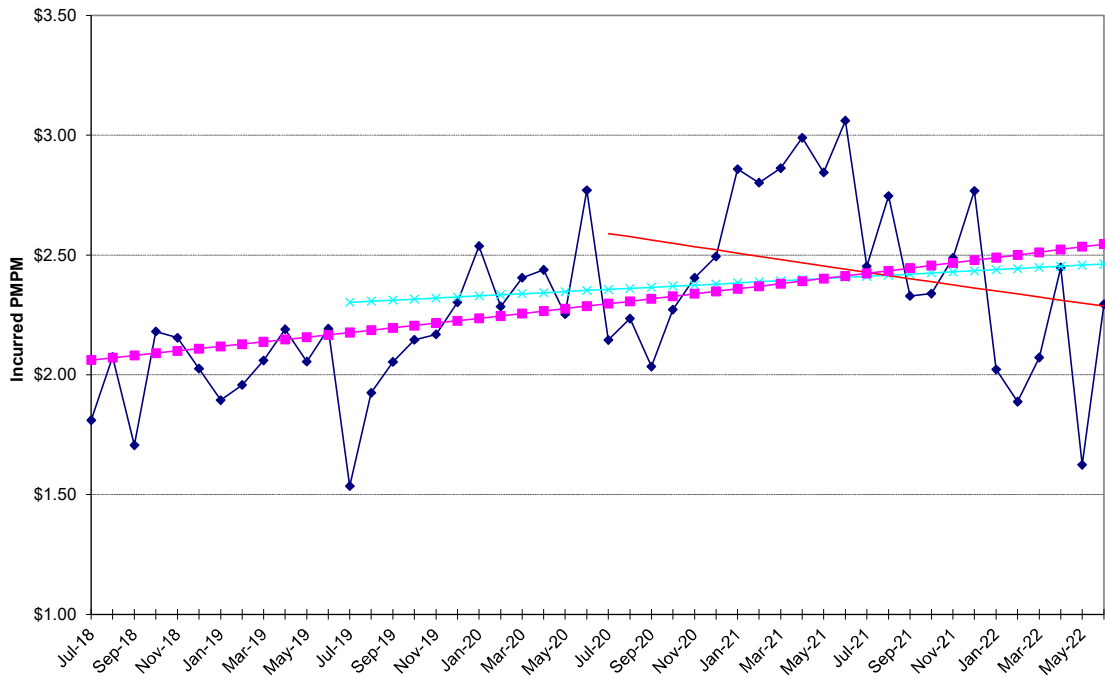
Other - Appliances (DME)



Other - Appliances (DME)



Other - Appliances (DME)

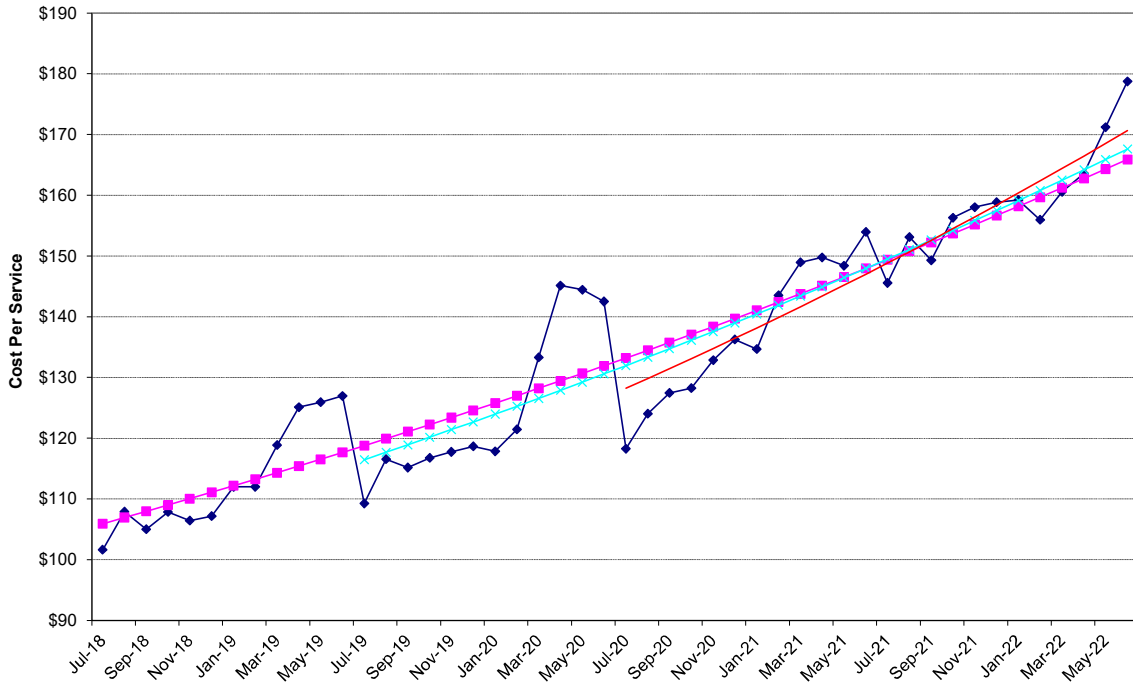


Appendix B

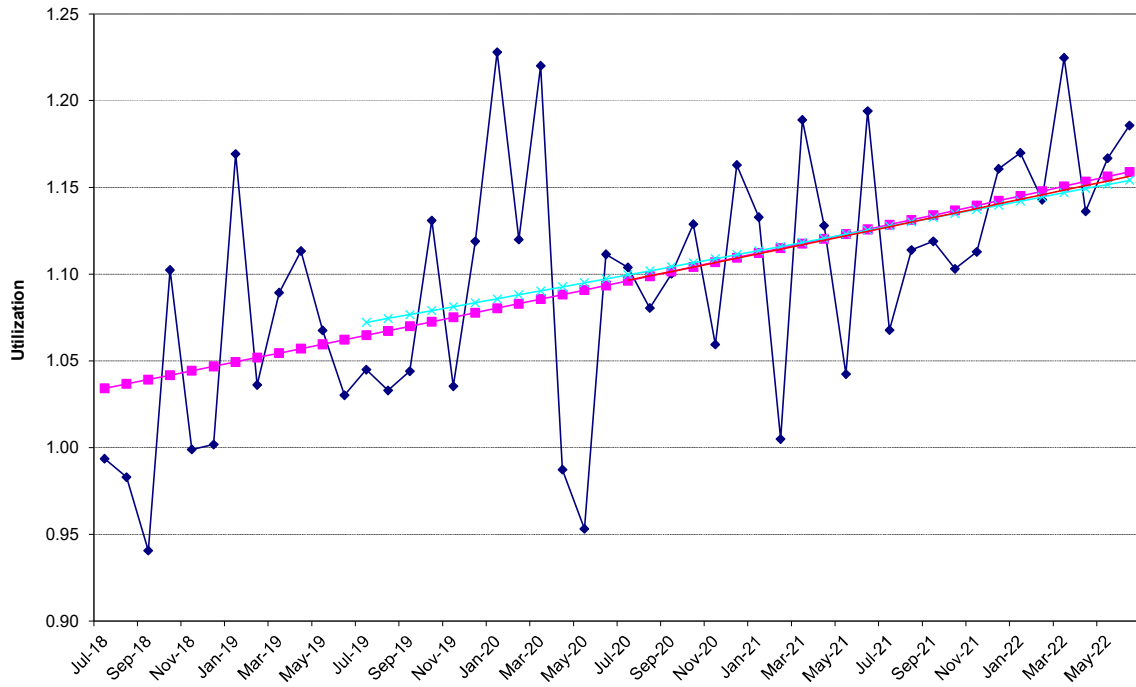
Non-Medicare Prescription Drugs

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
24-Month Trend	2.8%	16.1%	19.4%
36-Month Trend	2.6%	13.3%	16.2%
48-Month Trend	3.0%	12.1%	15.4%

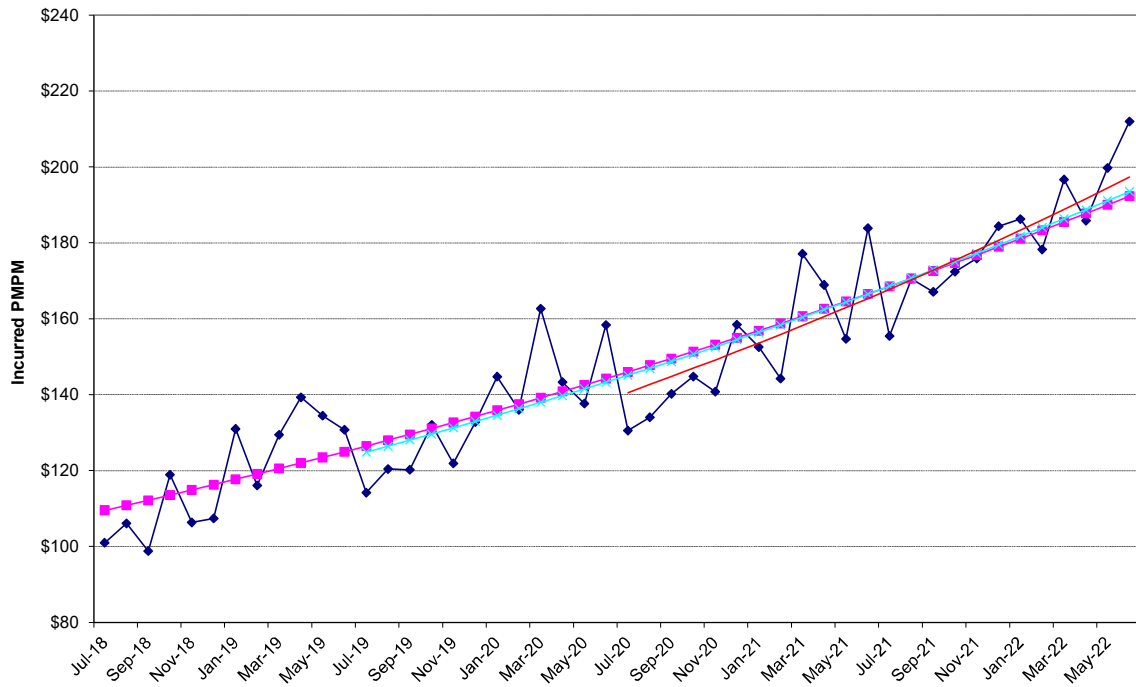
Non-Medicare Prescription Drugs



Non-Medicare Prescription Drugs



Non-Medicare Prescription Drugs



Appendix C – Prescription Drug Trends

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 5.1% trend and unit cost had a 10.1% trend, resulting in a composite trend of 14.8% on an unadjusted basis. The chart below summarizes components of the unadjusted prescription drug trend for the past ten years.

Year	Utilization	Unit Cost	Composite Trend
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%
2021	0.3%	14.2%	12.7%
2022	5.1%	10.1%	14.8%

Prior to this analysis, the financial plan was developed using a 14.0% trend for fiscal year 2023. Based on results and future expectations, Continuing Care Actuaries has chosen to use a gross drug trend assumption of 14.0% and drug rebate trend of 15.0% for fiscal year 2023 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. These drugs include:

Drug	Patent Expiration	2021 Ingredient Cost		2022 Ingredient Cost	
		Amount	%	Amount	%
Entresto	2025	1,372,013	0.41%	1,683,034	0.43%
Vyvanse	2023	3,151,217	0.93%	3,720,797	0.96%
Votrient	2023	242,535	0.07%	414,048	0.11%
Dexilant	2023	462,487	0.14%	299,240	0.08%
Lupron	2023	151,666	0.05%	128,408	0.03%
Banzel	2023	150,876	0.04%	95,425	0.02%
Toviaz	2023	37,866	0.01%	45,792	0.01%
Fotivda	2023	0	0.00%	23,706	0.01%
Coreg	2023	406	0.00%	1,863	0.00%
Lexapro	2023	0	0.00%	777	0.00%
Patanase	2023	285	0.00%	0	0.00%
Total		\$5,569,066	4.0%	\$6,413,090	3.6%

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 55% [[Managed Healthcare Executive](#)] of all drug spend. For PEIA, it is approximately 36% 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 3,764.1% in 2022, which is a better measure of utilization.

Period	Specialty Drugs				
	Total Specialty Cost (\$M)	Percent of Total Cost	Specialty Cost Growth	Number of Specialty Rx	Specialty Rx Growth
FY 2013	\$34.0	18.00%	24.30%	11,167	5.50%
FY 2014	\$35.8	18.60%	5.30%	10,938	-2.10%
FY 2015	\$40.2	18.70%	12.40%	11,028	0.80%
FY 2016	\$48.5	21.10%	20.70%	11,128	0.90%
FY 2017	\$73.6	29.90%	51.50%	17,731	59.30%
FY 2018	\$78.3	31.30%	6.50%	16,153	-8.90%
FY 2019	\$88.8	31.98%	13.35%	17,354	7.44%
FY 2020	\$100.5	33.41%	13.21%	20,210	16.46%
FY 2021	\$118.7	35.00%	18.06%	21,863	8.18%
FY 2022	\$141.4	36.32%	19.11%	23,775	8.75%

The following chart shows the top 10 brand name specialty drugs and their total cost in 2022:

2022 Rank	2022 Brand Name	2021 Cost	2022 Cost	Total Growth
1	HUMIRA PEN	\$0	\$28,491,629	N/A
2	STELARA	\$6,982,719	\$10,447,108	49.61%
3	DUPIXENT	\$3,603,080	\$5,411,393	50.19%
4	OTEZLA	\$4,739,614	\$5,321,802	12.28%
5	TALTZ	\$4,088,435	\$4,936,104	20.73%
6	TREMFYA	\$2,437,926	\$4,891,959	100.66%
7	COSENTYX SENSOREADY PEN	\$4,727,971	\$4,803,869	1.61%
8	ENBREL SURECLICK	\$4,289,008	\$4,666,265	8.80%
9	REVLIMID	\$3,465,272	\$3,282,580	-5.27%
10	<u>HUMIRA</u>	<u>\$24,089,084</u>	<u>\$3,132,537</u>	<u>-87.00%</u>
	Total	\$58,423,110	\$75,385,245	29.03%
	Percent of Specialty Cost	58.11%	63.51%	

Indicator Categories

Continuing Care Actuaries reviewed the individual prescription data items for Fiscal Years 2021 and 2022. A total of 1,998,806 scripts were written for approximately 2,401 different kinds of prescriptions in 2022. The prescriptions were grouped by indicator codes, providing a basis to develop the Fiscal Year 2022 trend by indicator code. The top 40 indicator codes were analyzed, which accounted for 88.6%, up from of PEIA’s prescription drug expenditures, up from 87.6% in 2021.

The top 5 indicators from 2022 were the same as the top 5 in 2021, save swapping antineoplastics for antidiabetics. The top 5 indicators had material increases in cost, except for insulins. PEIA members continue to spend the most on Antirheumatic Drugs. The following chart lists the top 5 and the total drug spend each year.

<u>Rank</u>	<u>2021 Indicator</u>	<u>2021 Cost</u>	<u>2022 Indicator</u>	<u>2022 Cost</u>
1	ANTIRHEUMATIC	\$46,382,858	ANTIRHEUMATIC	\$57,830,008
2	INCRETIN MIMETI	\$29,111,373	INCRETIN MIMETI	\$43,104,464
3	SKIN AND MUCOUS	\$27,429,495	SKIN AND MUCOUS	\$33,196,515
4	ANTIDIABETIC	\$14,614,238	ANTIDIABETIC	\$17,474,203
5	INSULINS	\$29,115,666	INSULINS	\$27,277,233

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 2022.

On pages C-7 and C-8, we list the top 40 indicators and summarize the utilization and cost statistics. These top 40 indicators represent 88.6% of total program costs.

On page C-13, we list the top 20 drugs and summarize the formulary and non-formulary cost statistics. These top 20 drugs represent 42.1% of total program costs.

On pages C-16 to C-20 we show a detailed analysis concerning the top 5 indicators. These analyses include drugs with the highest total ingredient cost, the amount per script, and a breakout of how much was spent on generic, formulary, and non-formulary drugs.

Indicators with the Largest Dollar Increase

Indication	2021 Total Ingredient Cost	2022 Total Ingredient Cost	Total Increase
INCRETIN MIMETI	\$29,111,373	\$43,104,464	\$13,993,092
ANTIRHEUMATIC	\$46,382,858	\$57,830,008	\$11,447,150
SKIN AND MUCOUS	\$27,429,495	\$33,196,515	\$5,767,019
ANTINEOPLASTIC	\$20,259,573	\$24,401,908	\$4,142,334
CALCITONIN GENE-RELATED PEPTIDE (CGRP) ANTAGONISTS	\$2,240,137	\$5,194,982	\$2,954,845

Indicators with the Largest Increase as a Percentage

Indication	2021 Total Ingredient Cost	2022 Total Ingredient Cost	Total Increase
CALCITONIN GENE-RELATED PEPTIDE (CGRP) ANTAGONISTS	\$2,240,137	\$5,194,982	131.9%
WAKEFULNESS	\$698,714	\$1,461,776	109.2%
CEPHALOSPORINS	\$258,898	\$461,791	78.4%
PARATHYROID AGENTS	\$228,298	\$383,512	68.0%
MACROLIDES	\$214,091	\$354,240	65.5%

Indicators with the Largest Increase in Claim Numbers

Indication	2021 Prescriptions	2022 Prescriptions	Utilization Increase
ADRENALS	56,934	78,674	21,740
PENICILLINS	41,331	58,508	17,177
MACROLIDES	16,999	31,270	14,271
CEPHALOSPORINS	22,308	30,142	7,834
B-ADREN AGON	26,696	34,425	7,729

Indicators with the Largest Utilization Increase Percentage

Indication	2021 Prescriptions	2022 Prescriptions	Utilization Increase
CALCITONIN GENE-RELATED PEPTIDE (CGRP) ANTAGONISTS	2,815	5,659	101.0%
MACROLIDES	16,999	31,270	84.0%
PARATHYROID AGENTS	63	108	71.4%
INCRETIN MIMETI	14,869	22,579	51.9%
PENICILLINS	41,331	58,508	41.6%

Indicators with the Largest Increase in Cost per Prescription

Indication	2021 Ingredient Cost Per Prescription	2022 Ingredient Cost Per Prescription	Ingredient Cost Per Prescription Increase
OTHER MISC THER	\$4,157.21	\$6,714.46	\$2,557.25
ANTINEOPLASTIC	\$2,569.06	\$3,920.62	\$1,351.56
VASOPRSN ANTAGO	\$15,291.57	\$16,466.14	\$1,174.57
VASODILAT AGT	\$10,534.57	\$11,539.05	\$1,004.48
ANTIFIBROTIC AGENTS	\$10,180.93	\$11,109.78	\$928.85

Indicators with the Largest Percentage Increase in Cost per Prescription

Indication	2021 Ingredient Cost Per Prescription	2022 Ingredient Cost Per Prescription	Ingredient Cost Per Prescription Increase
WAKEFULNESS	\$390.34	\$753.88	93.1%
OTHER MISC THER	\$4,157.21	\$6,714.46	61.5%
ANTINEOPLASTIC	\$2,569.06	\$3,920.62	52.6%
DEVICES	\$42.04	\$62.87	49.6%
ANXIOLYTICS, SE	\$8.68	\$12.84	48.0%

Drug Indicators by Highest Cost

<u>Rank</u>	<u>Indicator</u>	<u>Number of Prescriptions</u>	<u>Cost Per Prescription</u>	<u>Program Costs</u>	<u>Formulary Percent (cost)</u>	<u>Formulary Percent (Scripts)</u>
1	ANTIRHEUMATIC	9,921	\$5,880.71	\$57,830,008	95.89%	95.05%
2	INCRETIN MIMETI	22,579	\$1,909.10	\$43,104,464	99.99%	99.99%
3	SKIN AND MUCOUS	9,307	\$3,377.52	\$33,196,515	84.62%	89.36%
4	INSULINS	16,886	\$1,615.52	\$27,277,233	99.63%	99.62%
5	ANTINEOPLASTIC	6,224	\$2,928.17	\$24,401,908	68.05%	91.12%
6	ANTIDIABETIC	12,619	\$1,384.96	\$17,474,203	99.90%	99.88%
7	IMMUNOMOD AGNTS	1,745	\$7,299.80	\$12,733,895	98.31%	98.28%
8	DDP-4 INHIBITOR	7,079	\$1,317.41	\$9,325,111	99.98%	99.97%
9	ADRENALS	78,674	\$118.17	\$9,304,812	99.78%	99.87%
10	ANTICOAGULANTS	12,309	\$741.95	\$9,159,927	98.21%	98.51%
11	ANTIPSYCHOTICS	11,622	\$514.14	\$6,728,147	86.14%	96.99%
12	ANTIDEPRESSANTS	164,293	\$32.92	\$5,712,511	94.52%	99.82%
13	AMPHETAMINES	26,396	\$216.47	\$5,579,404	97.59%	95.29%
14	CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATO	214	\$0.00	\$5,297,774	0.00%	0.00%
15	CALCITONIN GENE-RELATED PEPTIDE (CGRP) ANTAGONISTS	5,659	\$912.27	\$5,194,982	96.88%	97.49%
16	NERVOUS SYS AGT	3,379	\$640.83	\$5,150,189	38.97%	92.69%
17	MISC ANTICONVUL	48,777	\$88.32	\$5,067,191	84.39%	99.27%
18	HMG-COA RED INH	88,677	\$52.36	\$4,653,875	99.75%	99.98%
19	B-ADREN AGON	34,425	\$128.25	\$4,435,848	99.41%	99.88%
20	PPI	73,424	\$56.71	\$4,170,711	99.81%	99.97%

Drug Indicators by Highest Cost (continued)

<u>Rank</u>	<u>Indicator</u>	<u>Number of Prescriptions</u>	<u>Cost Per Prescription</u>	<u>Program Costs</u>	<u>Formulary Percent (cost)</u>	<u>Formulary Percent (Scripts)</u>
21	GI DRUGS, MISCE	3,477	\$1,111.25	\$3,902,699	97.12%	93.69%
22	CONTRACEPTIVES	1,379	\$91.14	\$3,728,053	99.72%	98.64%
23	ANTIRETROVIRALS	14,702	\$2,323.00	\$3,591,355	98.06%	97.83%
24	ANTIMUSCARINICS	4,540	\$231.87	\$3,200,032	99.69%	98.86%
25	MISC ANTILIPEM	255	\$665.53	\$3,100,713	99.98%	100.00%
26	EENT ANTI-INFL	1,721	\$1,485.39	\$2,823,727	89.90%	90.72%
27	RESP AND CNS	3,442	\$224.92	\$2,704,029	91.78%	86.65%
28	VASODILAT AGT	11,898	\$11,539.05	\$2,527,052	84.47%	83.03%
29	CORTICOSTEROIDS	12,194	\$36.33	\$2,390,453	99.18%	87.18%
30	ANTI-INFLAMMATO	64,604	\$706.58	\$2,237,023	98.80%	98.37%
31	THYROID AGENTS	2,815	\$39.33	\$2,095,136	95.64%	89.66%
32	BETA BLOCKERS	62,746	\$32.56	\$2,039,108	99.92%	99.44%
33	ESTROGENS	44,533	\$172.66	\$2,031,993	98.77%	97.78%
34	ANGIOTEN 2 ANTG	55,736	\$44.49	\$2,028,644	99.97%	99.65%
35	SOMATOTROP AGON	93	\$5,125.84	\$1,999,077	94.36%	88.57%
36	VASOPRSN ANTAGO	8,436	\$16,466.14	\$1,860,673	0.00%	0.00%
37	PLATELET-AGG IN	400	\$241.72	\$1,852,780	99.95%	99.82%
38	PROTEASE INH	317	\$22,886.20	\$1,739,351	100.00%	100.00%
39	RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS, M	418	\$1,453.40	\$1,683,034	100.00%	100.00%
40	DIGESTANTS	102	\$3,856.49	\$1,631,296	99.76%	99.95%
	<u>All Other Indicators</u>	<u>1,033,980</u>	<u>\$42.80</u>	<u>\$44,251,131</u>	<u>99.09%</u>	<u>85.49%</u>
	Total	1,998,806	\$194.72	\$389,216,066	99.02%	90.44%

**Drug Indicators by Highest Cost
Analysis of Formulary Distribution**

Rank	Indicator	Formulary			Non-Formulary		
		Scripts	Ingredient Cost	Cost Per Script	Scripts	Ingredient Cost	Cost Per Script
1	ANTIRHEUMATIC	9,430	\$55,455,119	\$5,880.71	491	\$2,374,889	\$4,836.84
2	INCRETIN MIMETI	22,577	\$43,101,816	\$1,909.10	2	\$2,648	\$1,324.19
3	SKIN AND MUCOUS	8,317	\$28,090,831	\$3,377.52	990	\$5,105,684	\$5,157.26
4	INSULINS	16,822	\$27,176,200	\$1,615.52	64	\$101,033	\$1,578.63
5	ANTINEOPLASTIC	5,671	\$16,605,644	\$2,928.17	553	\$7,796,264	\$14,098.13
6	ANTIDIABETIC	12,604	\$17,455,993	\$1,384.96	15	\$18,210	\$1,214.01
7	IMMUNOMOD AGNTS	1,715	\$12,519,153	\$7,299.80	30	\$214,742	\$7,158.08
8	DDP-4 INHIBITOR	7,077	\$9,323,302	\$1,317.41	2	\$1,809	\$904.41
9	ADRENALS	78,569	\$9,284,186	\$118.17	105	\$20,626	\$196.44
10	ANTICOAGULANTS	12,125	\$8,996,163	\$741.95	184	\$163,764	\$890.02
11	ANTIPSYCHOTICS	11,272	\$5,795,348	\$514.14	350	\$932,799	\$2,665.14
12	ANTIDEPRESSANTS	164,005	\$5,399,676	\$32.92	288	\$312,835	\$1,086.23
13	AMPHETAMINES	25,154	\$5,445,135	\$216.47	1,242	\$134,269	\$108.11
14	CYSTIC FIBROSIS TRANSMEMBRANE CONDUCTANCE REGULATO	-	\$0	\$0.00	214	\$5,297,774	\$24,755.95
15	CALCITONIN GENE-RELATED PEPTIDE (CGRP) ANTAGONISTS	5,517	\$5,032,997	\$912.27	142	\$161,986	\$1,140.74
16	NERVOUS SYS AGT	3,132	\$2,007,092	\$640.83	247	\$3,143,097	\$12,725.09
17	MISC ANTICONVUL	48,421	\$4,276,352	\$88.32	356	\$790,839	\$2,221.46
18	HMG-COA RED INH	88,661	\$4,642,389	\$52.36	16	\$11,486	\$717.88
19	B-ADREN AGON	34,383	\$4,409,616	\$128.25	42	\$26,232	\$624.58
20	PPI	73,404	\$4,162,758	\$56.71	20	\$7,953	\$397.64

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

Rank	Indicator	Formulary			Non-Formulary		
		Scripts	Ingredient Cost	Cost Per Script	Scripts	Ingredient Cost	Cost Per Script
21	GI DRUGS, MISCE	3,411	\$3,656,560	\$1,071.99	101	\$246,139	\$2,437.02
22	CONTRACEPTIVES	40,792	\$3,677,518	\$90.15	113	\$50,534	\$447.21
23	ANTIRETROVIRALS	1,516	\$3,513,279	\$2,317.47	30	\$78,076	\$2,602.55
24	ANTIMUSCARINICS	13,758	\$3,163,704	\$229.95	43	\$36,328	\$844.84
25	MISC ANTILIPEM	4,658	\$3,100,579	\$665.65	1	\$135	\$134.72
26	EENT ANTI-INFL	1,709	\$2,561,688	\$1,498.94	192	\$262,039	\$1,364.79
27	RESP AND CNS	11,034	\$2,343,164	\$212.36	988	\$360,865	\$365.25
28	VASODILAT AGT	185	\$2,098,263	\$11,341.96	34	\$428,789	\$12,611.45
29	CORTICOSTEROIDS	65,262	\$2,084,045	\$31.93	537	\$306,407	\$570.59
30	ANTI-INFLAMMATO	3,128	\$2,200,553	\$703.50	38	\$36,470	\$959.73
31	THYROID AGENTS	50,951	\$1,878,437	\$36.87	2,324	\$216,700	\$93.24
32	BETA BLOCKERS	62,568	\$2,027,783	\$32.41	51	\$11,325	\$222.07
33	ESTROGENS	11,624	\$1,986,798	\$170.92	145	\$45,194	\$311.68
34	ANGIOTEN 2 ANTG	45,584	\$2,021,551	\$44.35	15	\$7,093	\$472.86
35	SOMATOTROP AGON	368	\$1,770,520	\$4,811.19	22	\$228,557	\$10,388.95
36	VASOPRSN ANTAGO	-	\$0	\$0.00	113	\$1,860,673	\$16,466.14
37	PLATELET-AGG IN	7,661	\$1,849,497	\$241.42	4	\$3,283	\$820.74
38	PROTEASE INH	76	\$1,739,351	\$22,886.20	-	\$0	\$0.00
39	RENIN-ANGIOTENSIN- ALDOSTERONE SYSTEM INHIBITORS, M	1,158	\$1,683,034	\$1,453.40	-	\$0	\$0.00
40	DIGESTANTS	422	\$1,630,470	\$3,863.67	1	\$826	\$825.72
	<u>All other</u>	<u>1,024,582</u>	<u>\$37,828,881</u>	<u>\$36.92</u>	<u>9,398</u>	<u>\$6,422,250</u>	<u>\$683.36</u>
	Total	1,979,303	\$351,995,443	\$177.84	19,503	\$37,220,623	\$1,908.46

Drug Indicators by Highest Script Increase

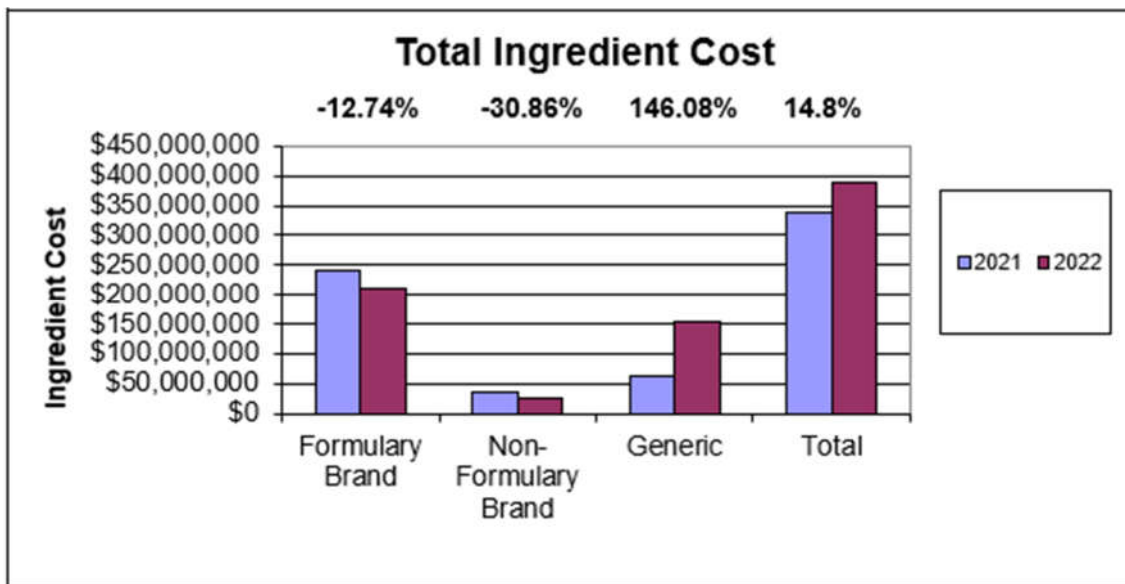
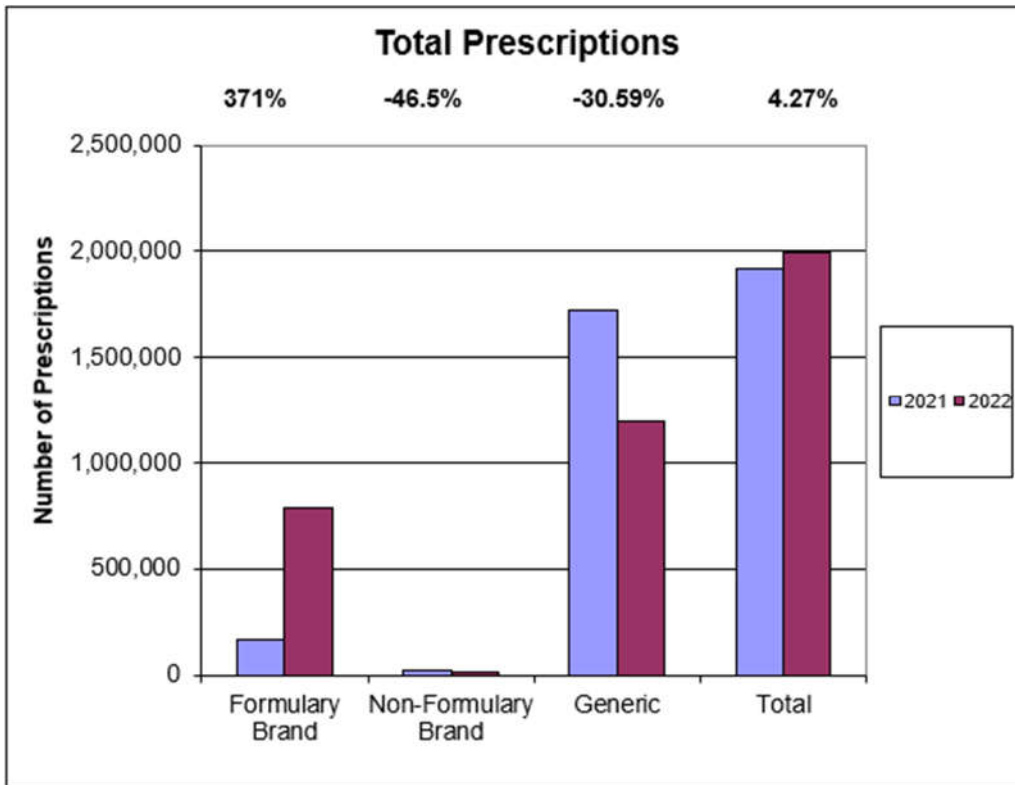
Rank	Indicator	Formulary Cost Per Script	Non-Formulary Cost Per Script	Increase/ Decrease
61	AMMONIA DETOXIC	\$30.15	\$38,713.33	128,417%
121	AZOLES	\$3.68	\$2,526.49	68,718%
75	BIGUANIDES	\$11.76	\$3,210.21	27,309%
123	VITAMIN D	\$4.40	\$1,124.44	25,534%
62	MUCOLYTIC AGENT	\$20.64	\$3,452.19	16,728%
63	TETRACYCLINES	\$23.53	\$3,764.00	15,997%
185	PROKINETIC AGEN	\$9.46	\$866.92	9,161%
91	A-ADRENRC BLKR	\$29.40	\$2,068.84	7,036%
78	PROGESTINS	\$47.53	\$3,121.66	6,568%
83	OPIATE AGONISTS	\$8.31	\$414.16	4,986%
76	BENZODIAZEPINES	\$8.45	\$399.94	4,733%
66	DIHYDROPYRIDINE	\$16.14	\$604.46	3,745%
198	NONSTEROIDAL ANTI-INFLAMMATORY AGENTS	\$65.25	\$2,441.65	3,742%
157	QUINOLONES	\$3.30	\$122.39	3,711%
69	ACEI	\$8.17	\$288.51	3,532%
84	PENICILLINS	\$6.37	\$212.72	3,341%
12	ANTIDEPRESSANTS	\$32.92	\$1,086.23	3,299%
43	IMMUNOSU AGENT	\$210.99	\$6,730.43	3,190%
165	ANTIHISTAMINES	\$11.27	\$325.59	2,890%
105	SULFONYLUREAS	\$19.71	\$530.32	2,691%

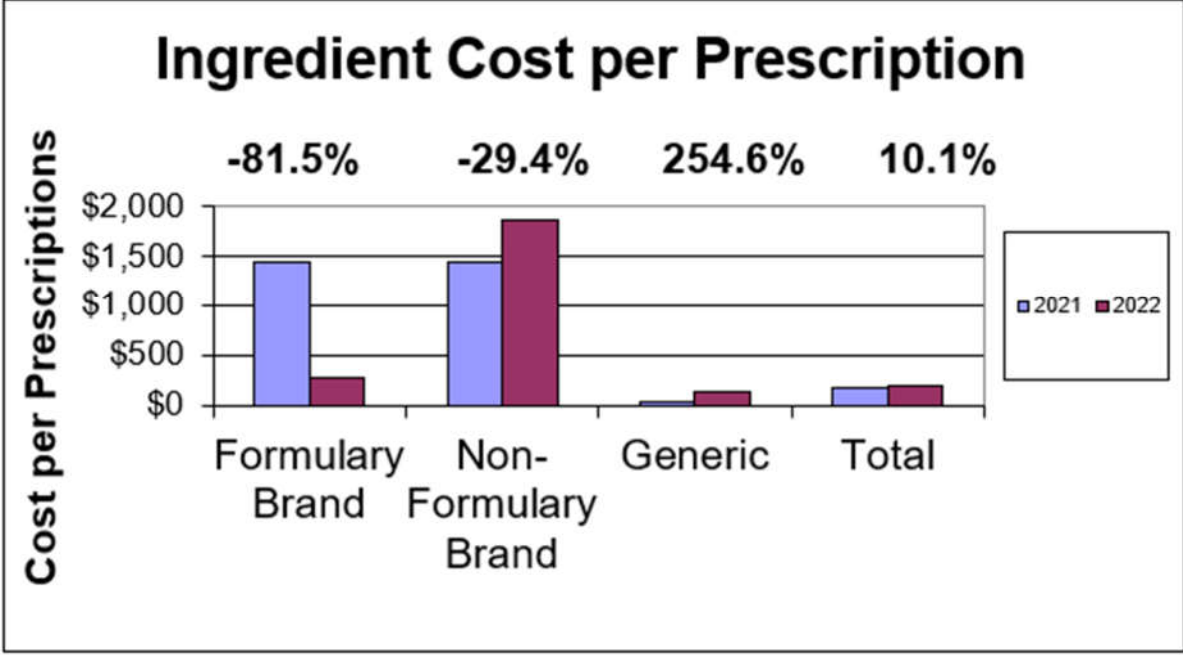
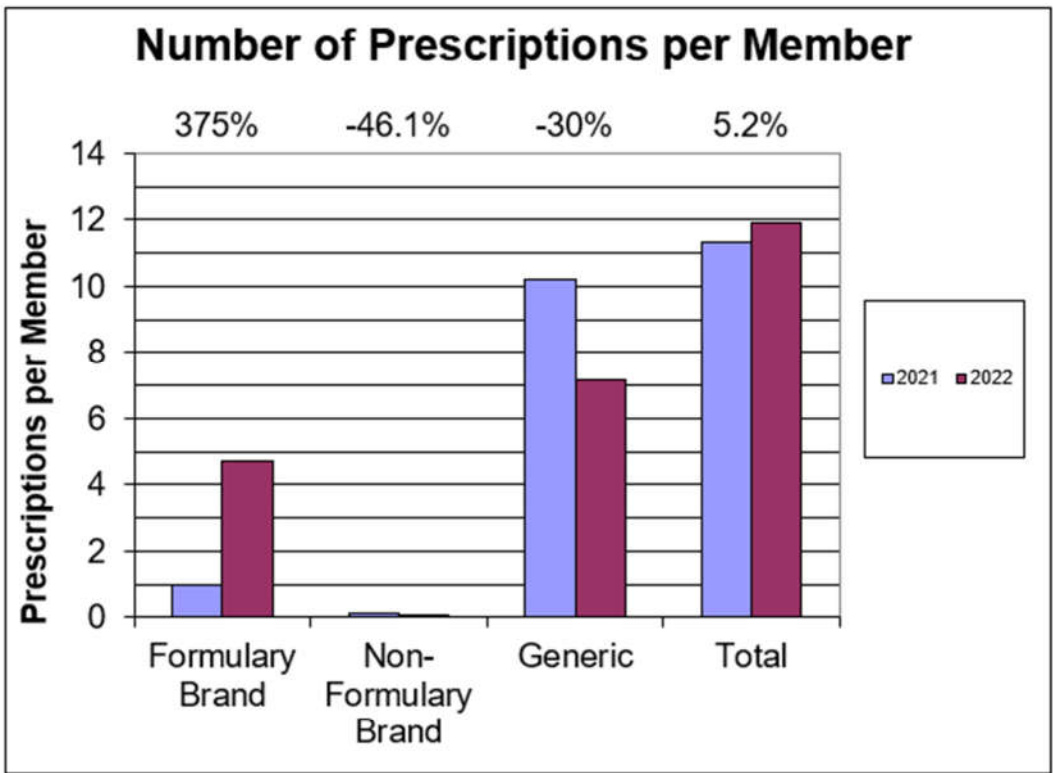
Drug Indicators by Highest Script Increase (continued)

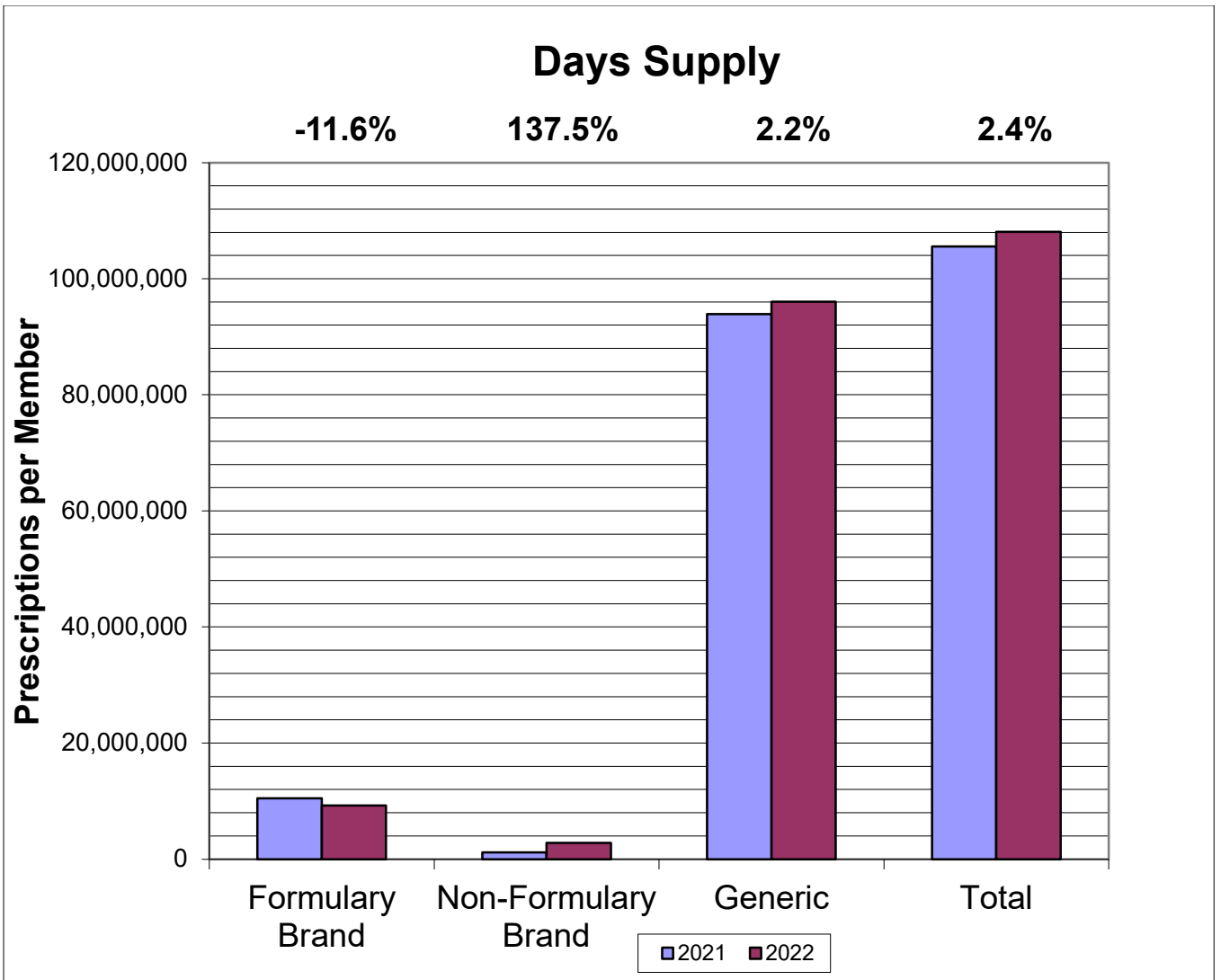
Rank	Indicator	Formulary Cost Per Script	Non-Formulary Cost Per Script	Increase/ Decrease
170	POLYENES	\$15.67	\$402.46	2,569%
17	MISC ANTICONVUL	\$88.32	\$2,221.46	2,515%
138	PROTECTANTS	\$28.00	\$601.32	2,147%
133	ADAMANTANES	\$125.26	\$2,688.31	2,146%
118	MISC BETA-LACTA	\$492.19	\$9,996.77	2,031%
16	NERVOUS SYS AGT	\$640.83	\$12,725.09	1,986%
88	ALDOST REC ANTA	\$41.20	\$810.02	1,966%
67	ANXIOLYTICS, SE	\$12.76	\$242.65	1,901%
90	OPIATE ANTAGONI	\$78.09	\$1,396.48	1,788%
29	CORTICOSTEROIDS	\$31.93	\$570.59	1,787%
53	ANTIBACTERIALS	\$39.62	\$704.51	1,778%
45	WAKEFULNESS	\$520.39	\$8,904.56	1,711%
59	CARDIAC MISC,	\$609.03	\$10,004.04	1,643%
18	HMG-COA RED INH	\$52.36	\$717.88	1,371%
223	ROENTGENOGRAPHIC AND OTHER IMAGING AGENTS	\$0.54	\$7.15	1,325%
64	SSRI AGONISTS	\$40.01	\$515.87	1,289%
208	PHARMACEUTICAL	\$6.15	\$78.49	1,277%
180	ANTIDIARRHEAL	\$14.34	\$170.13	1,187%
132	DOPAMINE PRECUR	\$120.18	\$1,416.10	1,178%
49	A/B-ADREN AGON	\$402.42	\$4,716.34	1,172%
	<u>All Other Indicators</u>	<u>\$335.70</u>	<u>\$1,367.14</u>	<u>307%</u>
	Total	\$182.76	\$1,367.29	648%

Drugs by Highest Cost
Analysis of Formulary Distribution

Rank	Drug	Formulary			Non-Formulary		
		Scripts	Ingredient Cost	Cost Per Script	Scripts	Ingredient Cost	Cost Per Script
1	HUMIRA PEN	4,161	\$28,491,629	\$6,847	0	\$0	N/A
2	OZEMPIC	11,464	\$20,284,756	\$1,769	0	\$0	N/A
3	TRULICITY	7,791	\$16,236,550	\$2,084	0	\$0	N/A
4	STELARA	491	\$10,447,108	\$21,277	0	\$0	N/A
5	JARDIANCE	6,038	\$8,304,008	\$1,375	0	\$0	N/A
6	TRESIBA FLEXTOUCH	4,470	\$7,997,448	\$1,789	0	\$0	N/A
7	FARXIGA	5,603	\$7,860,663	\$1,403	0	\$0	N/A
8	JANUVIA	5,576	\$7,375,633	\$1,323	0	\$0	N/A
9	NOVOLOG FLEXPEN	3,502	\$5,756,966	\$1,644	0	\$0	N/A
10	XARELTO	5,294	\$5,524,705	\$1,044	0	\$0	N/A
11	DUPIXENT	1,653	\$5,411,393	\$3,274	0	\$0	N/A
12	OTEZLA	1,354	\$5,321,802	\$3,930	0	\$0	N/A
13	TALTZ	0	\$0	N/A	720	\$4,936,104	6,856
14	TREMFYA	403	\$4,891,959	\$12,139	0	\$0	N/A
15	COSENTYX SENSOREADY PEN	741	\$4,803,869	\$6,483	0	\$0	N/A
16	ENBREL SURECLICK	807	\$4,666,265	\$5,782	0	\$0	N/A
17	TRIKAFTA	186	\$4,653,702	\$25,020	0	\$0	N/A
18	VYVANSE	11,094	\$3,720,797	\$335	0	\$0	N/A
19	NOVOLOG	1,728	\$3,662,080	\$2,119	0	\$0	N/A
20	LEVEMIR FLEXTOUCH	2,260	\$3,359,313	\$1,486	0	\$0	N/A
	<u>All Other Indicators</u>	<u>1,910,961</u>	<u>205,736,311</u>	<u>\$108</u>	<u>12,509</u>	<u>\$19,773,006</u>	<u>1,581</u>
	Total	1,985,577	\$364,506,956	\$183.58	13,229	\$24,709,110	\$1,867.80







1 – Antirheumatic Drugs

In FY 2022, the Antirheumatic Drugs category was first in cost to PEIA with expenditure of \$57,830,008, which accounted for 14.9% of total expenditures. Formulary expenditures were \$55,538,075 or 96.0% of Antirheumatic Drugs expenditures and total expenditures had a 24.9% trend from 2021 to 2022.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2021	2022	Growth	2021	2022	Growth	2021	2022	Growth
HUMIRA PEN	PREF	SSB	94	4,161	4326.6%	\$14,596.12	\$6,847.30	-53.1%	\$1,372,035	\$28,491,629	1,976.6%
OTEZLA	PREF	SSB	1,316	1,354	2.9%	\$3,601.53	\$3,930.43	9.1%	\$4,739,614	\$5,321,802	12.3%
COSENTYX SENSOREADY PEN	PREF	SSB	760	741	-2.5%	\$6,221.01	\$6,482.95	4.2%	\$4,727,971	\$4,803,869	1.6%
ENBREL SURECLICK	PREF	SSB	761	807	6.0%	\$5,636.02	\$5,782.24	2.6%	\$4,289,008	\$4,666,265	8.8%
HUMIRA	PREF	SSB	4,240	429	-89.9%	\$6,455.76	\$7,301.95	13.1%	\$27,372,401	\$3,132,537	-88.6%
<u>Subtotals</u>											
Generic	Y	GEN	356	299	-16.0%	\$246.50	\$5,315.80	2056.5%	\$87,754	\$1,589,423	1711.2%
Formulary Brand	Y	Brand	7,847	9,149	16.6%	\$5,682.82	\$5,896.74	3.8%	\$44,593,076	\$55,538,075	21.0%
Non-Formulary Brand	N	Brand	370	473	27.8%	\$4,600.08	\$4,844.26	5.3%	\$1,702,028	\$2,291,334	34.6%
<u>Total</u>			<u>8,573</u>	<u>9,921</u>	<u>15.7%</u>	<u>\$5,410.34</u>	<u>\$5,829.05</u>	<u>7.7%</u>	<u>\$46,382,858</u>	<u>\$57,830,008</u>	<u>24.7%</u>
Trends Adjusted for Exposure					16.0%			7.7%			24.9%

2 – Incretin Mimetics

In FY 2022, the Incretin Mimetics category was second in cost to PEIA with expenditure of \$43,104,464, which accounted for 11.1% of total expenditures overall. Formulary expenditures were \$43,101,464 or 100% of Incretin Mimetics expenditures and total ingredient cost had a 48.1% trend from 2021 to 2022.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2021	2022	Growth	2021	2022	Growth	2021	2022	Growth
TRESIBA FLEXTOUCH	PREF	SSB	5,401	11,464	112.3%	\$1,853.48	\$1,769.43	-4.5%	\$10,010,666	\$20,284,756	102.6%
NOVOLOG FLEXPEN	PREF	SSB	6,915	7,791	12.7%	\$2,022.94	\$2,084.01	3.0%	\$13,988,649	\$16,236,550	16.1%
LEVEMIR FLEXTOUCH	PREF	SSB	1,820	1,384	-24.0%	\$2,222.01	\$2,377.99	7.0%	\$4,044,052	\$3,291,135	-18.6%
NOVOLOG	PREF	SSB	633	1,462	131.0%	\$1,493.74	\$1,787.58	19.7%	\$945,538	\$2,613,446	176.4%
BASAGLAR KWIKPEN	PREF	SSB	100	354	254.0%	\$1,224.68	\$1,411.57	15.3%	\$122,468	\$499,697	308.0%
<u>Subtotals</u>											
Generic	Y	GEN	0	22,579	NA	NA	\$1,909.05	NA	\$0	\$43,104,464	NA
Formulary Brand	Y	Brand	14,869	0	-100.0%	\$1,957.86	NA	NA	\$29,111,373	\$0	-100.0%
Non-Formulary Brand	N	Brand	0	0	NA	NA	NA	NA	\$0	\$0	NA
<u>Total</u>			<u>14,869</u>	<u>22,579</u>	<u>51.9%</u>	<u>\$1,957.86</u>	<u>\$1,909.05</u>	<u>-2.5%</u>	<u>\$29,111,373</u>	<u>\$43,104,464</u>	<u>48.1%</u>
Trends Adjusted for Exposure					52.6%			-2.5%			48.8%

3 – Skin & Mucous

In FY 2022, the Skin & Mucous Drugs indicator category was third in cost to PEIA with expenditure of \$33,196,515, which accounted for 8.5% of total expenditures. Formulary expenditures were \$28,159,340 or 80.0% of Skin & Mucous Drugs' expenditures. Total expenditures had a 21.1% trend from 2021 to 2022.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2021	2022	Growth	2021	2022	Growth	2021	2022	Growth
STELARA	PREF	SSB	341	491	44.0%	\$20,477.18	\$21,277.21	3.9%	\$6,982,719	\$10,447,108	49.6%
DUPIXENT	PREF	SSB	1,142	1,653	44.7%	\$3,155.06	\$3,273.68	3.8%	\$3,603,080	\$5,411,393	50.2%
TALTZ	NFRM - PAOVR	SSB	612	720	17.6%	\$6,680.45	\$6,855.70	2.6%	\$4,088,435	\$4,936,104	20.7%
TREMFYA	PREF	SSB	209	403	92.8%	\$11,664.72	\$12,138.86	4.1%	\$2,437,926	\$4,891,959	100.7%
SKYRIZI PEN	PREF	SSB	0	177	NA	NA	\$17,553.47	NA	\$0	\$3,106,964	NA
<u>Subtotals</u>											
Generic	Y	GEN	4,743	4,455	-6.1%	\$256.79	\$358.16	39.5%	\$1,217,951	\$1,595,607	31.0%
Formulary Brand	Y	Brand	3,861	4,008	3.8%	\$5,675.70	\$6,627.68	16.8%	\$21,913,861	\$26,563,733	21.2%
Non-Formulary Brand	N	Brand	882	844	-4.3%	\$4,872.66	\$5,968.22	22.5%	\$4,297,684	\$5,037,175	17.2%
<u>Total</u>			<u>9,486</u>	<u>9,307</u>	<u>-1.9%</u>	<u>\$2,891.58</u>	<u>\$3,566.83</u>	<u>23.4%</u>	<u>\$27,429,495</u>	<u>\$33,196,515</u>	<u>21.0%</u>
Trends Adjusted for Exposure					-1.9%			23.4%			21.1%

4 – Insulins

In FY 2022, the Insulins indicator category was fourth in cost to PEIA with expenditure of \$27,277,233, which accounted for 7% of total expenditures. Formulary expenditures were \$27,275,762 or 40.7% of Insulins expenditures and total expenditures had a -6.3% trend from 2021 to 2022.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2021	2022	Growth	2021	2022	Growth	2021	2022	Growth
TRESIBA FLEXTOUCH	PREF	SSB	4,938	4,470	-9.5%	\$1,808.44	\$1,789.14	-1.1%	\$8,930,072	\$7,997,448	-10.4%
NOVOLOG FLEXPEN	PREF	SSB	3,766	3,502	-7.0%	\$1,697.13	\$1,643.91	-3.1%	\$6,391,377	\$5,756,966	-9.9%
NOVOLOG	PREF	SSB	1,671	1,728	3.4%	\$2,161.43	\$2,119.26	-2.0%	\$3,611,751	\$3,662,080	1.4%
LEVEMIR FLEXTOUCH	PREF	SSB	2,527	2,260	-10.6%	\$1,498.95	\$1,486.42	-0.8%	\$3,787,854	\$3,359,313	-11.3%
BASAGLAR KWIKPEN	PREF	SSB	2,826	2,740	-3.0%	\$883.26	\$881.89	-0.2%	\$2,496,099	\$2,416,367	-3.2%
<u>Subtotals</u>											
Generic	Y	GEN	0	10,047	NA	NA	\$1,609.31	NA	\$0	\$16,168,765	NA
Formulary Brand	Y	Brand	17,624	6,832	-61.2%	\$1,650.22	\$1,625.73	-1.5%	\$29,083,486	\$11,106,997	-61.8%
Non-Formulary Brand	N	Brand	19	7	-63.2%	\$1,693.68	\$210.08	-87.6%	\$32,180	\$1,471	-95.4%
<u>Total</u>			<u>17,643</u>	<u>16,886</u>	<u>-4.3%</u>	<u>\$1,650.27</u>	<u>\$1,615.38</u>	<u>-2.1%</u>	<u>\$29,115,666</u>	<u>\$27,277,233</u>	<u>-6.3%</u>
Trends Adjusted for Exposure					-4.2%			-2.1%			-6.3%

5 – Antineoplastic

In FY 2022, the Antineoplastic indicator category was fifth in cost to PEIA with expenditure of \$24,401,908, which accounted for 6.3% of total expenditures. Formulary expenditures were \$18,710,859 or 58.1% of Antineoplastic expenditures and total expenditures had a 20.9% trend from 2021 to 2022.

Drug	Current Formulary Status	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2021	2022	Growth	2021	2022	Growth	2021	2022	Growth
REVLIMID	PREF	SSB	232	209	-9.9%	\$14,936.52	\$15,706.12	5.2%	\$3,465,272	\$3,282,580	-5.3%
IBRANCE	PREF	SSB	183	175	-4.4%	\$12,596.39	\$13,098.62	4.0%	\$2,305,140	\$2,292,259	-0.6%
SPRYCEL	PREF	SSB	101	144	42.6%	\$12,711.30	\$13,902.48	9.4%	\$1,283,841	\$2,001,958	55.9%
IMBRUVICA	PREF	SSB	164	144	-12.2%	\$13,257.43	\$13,902.48	4.9%	\$2,174,219	\$2,001,958	-7.9%
IMBRUVICA	N-FORM	SSB	0	96	NA	NA	\$13,729.41	NA	\$0	\$1,318,024	NA
REVLIMID	PREF	SSB	232	209	-9.9%	\$14,936.52	\$15,706.12	5.2%	\$3,465,272	\$3,282,580	-5.3%
Generic	Y	GEN	6,409	4,313	-32.7%	\$228.70	\$1,051.83	359.9%	\$1,465,767	\$4,536,558	209.5%
Formulary Brand	Y	Brand	798	1,506	88.7%	\$13,515.35	\$9,411.89	-30.4%	\$10,785,248	\$14,174,300	31.4%
Non-Formulary Brand	N	Brand	679	405	-40.4%	\$11,794.64	\$14,051.97	19.1%	\$8,008,558	\$5,691,049	-28.9%
<u>Total</u>			<u>7,886</u>	<u>6,224</u>	<u>-21.1%</u>	<u>\$2,569.06</u>	<u>\$3,920.62</u>	<u>52.6%</u>	<u>\$20,259,573</u>	<u>\$24,401,908</u>	<u>20.4%</u>
Trends Adjusted for Exposure					-20.8%			52.6%			20.9%