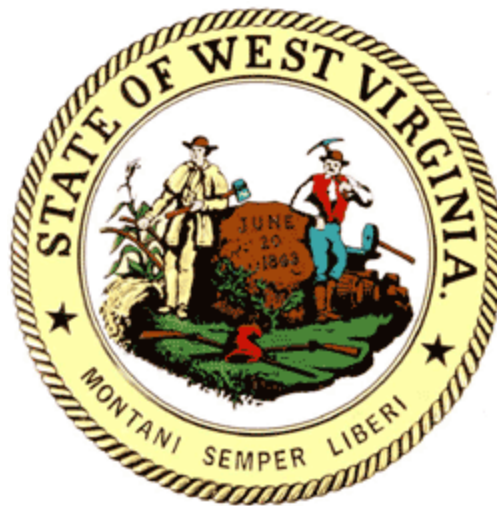




STATE OF WEST VIRGINIA



PUBLIC EMPLOYEES INSURANCE AGENCY

Fiscal Year 2023

Detailed Medical and Prescription Drugs Claim Trend Report

Report Date: December 2023

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 2023 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, 2023 on a quarterly basis and the forecasting of Fiscal Years 2024 through 2028. This annual trend report to the Finance Board generally serves as the basis for projecting medical and drugs claims through Fiscal Year 2028 in the development of the Financial Plan to be approved by the PEIA Finance Board in December 2023. 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 2023. 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 the 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 2023. The analysis for medical claims do not include incurred claims for the months after June 2023. The claim experience for the months after June 2023 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 2023.

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 9.0% in last year’s analysis to 5.5% in Fiscal Year 2023 using a 24-month study period, likely due to the pandemic’s impact in FY 2022 that had higher claims. Using the 24-month analysis, PEIA experienced a -1.9% trend in utilization and a 7.5% trend in unit cost, resulting in an aggregate trend of 5.5%. The 36-month method resulted in a higher trend of 6.9% and the 48-month method resulted in a higher trend of 8.6%.

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%
2023	-1.9%	7.5%	5.5%

- 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 2023 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 2023 Claim Type	Medical	Gross Drugs
PEIA – Active Local	2.2%	0.8%
PEIA – State	6.3%	6.3%
PEIA – Total	5.5%	5.3%
RHBT – Non-Medicare	3.8%	2.5%
Grand Total	5.4%	5.0%

- In the 24-month analysis, In-State services have experienced higher trends than OOS NBC and OOS BC services for Non-Medicare coverages in three out of four categories (HI, PS and O, not 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 9.2%, an aggregate OOS NBC trend of -5.3%, and an aggregate OOS BC trend of 6.8%.

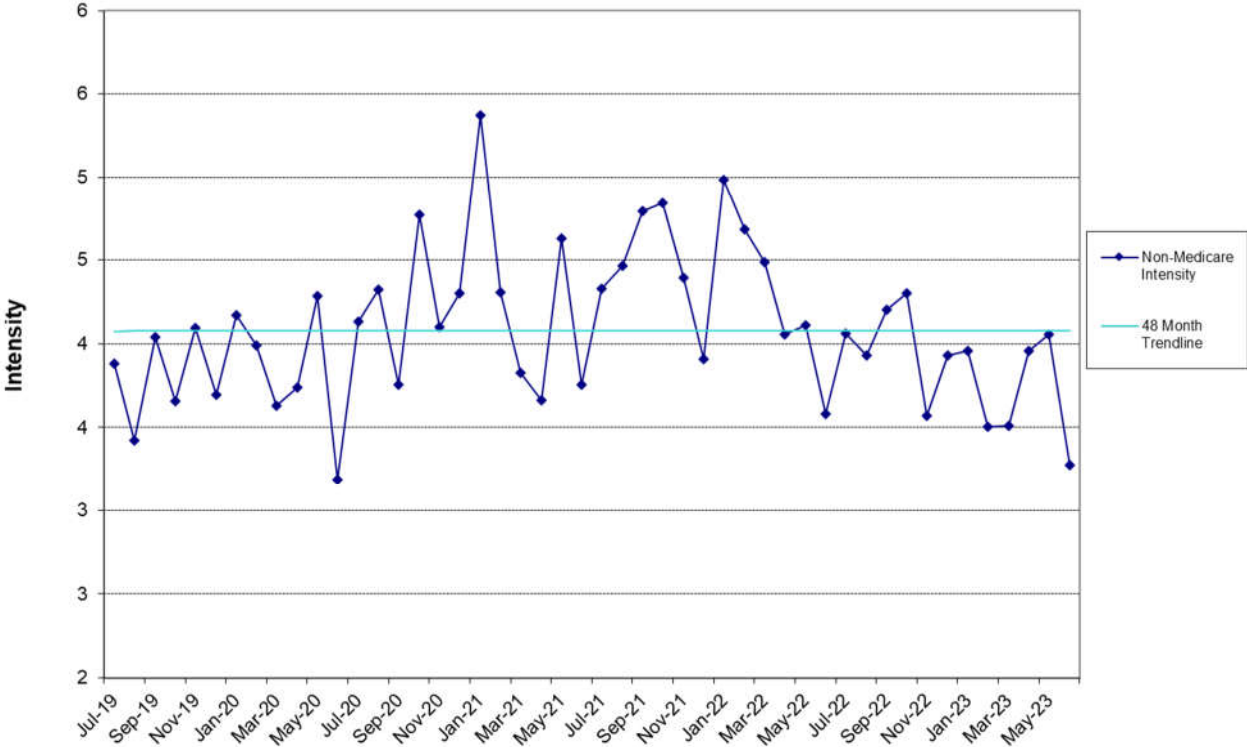
The OOS NBC utilization trend has been lower compared to In-State and OOS BC trends, while the OOS NBC cost per service trend has been higher compared to In-State and OOS BC trends. The In-State utilization trend for Non-Medicare was 0.8%, while the OOS NBC trend was -21.3% and the OOS BC trend was -4.0%. The In-State cost per service trend for Non-Medicare was 8.3%, while the OOS NBC trend was 20.3%, and the OOS BC trend was 11.3%.

Within the In-State medical categories, the 3 highest trend subcategories were observed for Hospital Outpatient’s Medical / Surgical, Physician Services’ Inpatient Surgery, and Physician Services’ Psychiatric / Substance Abuse categories. These categories experienced high trends of 19.7%, 13.3% and 15.1%, respectively.

- Using the 24-month analysis, Hospital Inpatient services (“HI”) represent 16.1% of all medical services and experienced a total trend of -5.9%. The overall trend was the product of a -5.4% decrease in utilization and a -0.6% decrease in unit cost. In-State HI claims had a 1.0% overall trend, while OOS NBC HI claims experienced a -18.3% overall trend, and OOS BC HI claims experienced a -6.8% overall trend.
- Using the 24-month analysis, Hospital Outpatient services (“HO”) represent 35.4% 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 1.2% increase in utilization and a 10.7% increase in unit cost. In-State HO claims had a 14.8% overall trend, while OOS NBC HO claims experienced an 2.4% overall trend, and OOS BC HO claims experienced an 16.5% overall trend.

- Using the 24-month analysis, Physician Services (“PS”) represent 47.3% of all medical services and experienced a total trend of 5.1%. The overall trend was the product of a -3.0% decrease in utilization of these services and an 8.3% increase in unit cost. In-State PS claims had a 7.6% overall trend, while OOS NBC PS claims experienced a -3.3% overall trend, and OOS BC PS claims experienced a 0.4% overall trend.
- Using the 24-month analysis, Other services (“O”), which are services that are principally Ambulance and Durable Medical Services, represent 1.2% of all medical services and experienced a total trend of -9.9%. The overall trend was the product of a -3.2% decrease in utilization of these services and a -6.9% decrease in unit cost. In-State O claims showed a – 1.5% overall trend, while OOS NBC O claims experienced a -33.4% overall trend, and OOS BC O claims experienced a -14.4% 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.
- In the 24 and 36-month analysis, 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 -1.1%, which is comparable to -4.1% last year. The historical data is illustrated in the chart below.

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	-11.8%	-7.7%	-4.8%
Intensity	-14.2%	-6.6%	-1.1%
<u>Cost/Day</u>	<u>24.4%</u>	<u>15.1%</u>	<u>12.0%</u>
Total	-5.9%	-0.8%	5.4%

Continuing Care Actuaries has included an additional analysis of utilization and cost on an incurred basis over the last 12 months. This analysis can be found on Page 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 2023, 86.4% of medical services were provided in the State of West Virginia, 9.9% of services were provided OOS NBC, and 3.7% of services were provided OOS BC. From a cost perspective, 76.1% of allowed charges were incurred In-State, 16.5% of allowed charges were provided OOS NBC, and 7.4% 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, 83.7% of Hospital Inpatient services were provided in the State of West Virginia representing 59.6% of the total allowed charges for Hospital Inpatient. Conversely, 11.7% of Hospital Inpatient services were provided OOS NBC and those charges represented 31.8% of the total allowed charges for Hospital Inpatient. In addition, 4.6% of Hospital Inpatient services were provided OOS BC and those charges represented 8.6% of the total allowed charges for Hospital Inpatient.

By major medical category, 92.2% of Hospital Outpatient services were provided in the State of West Virginia representing 75.8% of the total allowed charges for Hospital Outpatient. Conversely, 4.7% of Hospital Outpatient services were provided OOS NBC and those charges represented 13.3% of the total allowed charges for Hospital Outpatient. In addition, 3.1% of Hospital Outpatient services were provided OOS BC and those charges represented 10.9% of the total allowed charges for Hospital Outpatient.

By major medical category, 85.5% of Physician Services were provided in the State of West Virginia representing 81.9% of the total allowed charges for Physician Services. Conversely, 10.7% of Physician Services were provided OOS NBC and those charges represented 13.8% of the total allowed charges for Physician Services. In addition, 3.7% of Physician Services were provided OOS BC and those charges represented 4.4% of the total allowed charges for Physician Services.

By major medical category, 78.0% of Other Services were provided in the State of West Virginia representing 76.4% of the total allowed charges for Other Services. Conversely, 18.2% of Other Services were provided OOS NBC and those charges represented 20.2% of the total allowed charges for Other Services. In addition, 3.8% of Other Services were provided OOS BC and those charges represented 3.4% of the total allowed charges for Other Services.

KEY FINDINGS - DRUGS

Overall, gross prescription drugs trends for Non-Medicare coverages have decreased compared to 19.4% last year. Using the 24-month analysis, there was a 1.3% utilization increase and a 4.0% prescription cost increase, resulting in an aggregate trend of 5.3% when adjusting for membership exposure. The 24-month overall trend is lower than the 36-month trend of 7.7% and the 48-month trend of 10.0%.

West Virginia PEIA Prescription Drugs Total 24-Month Trend Analysis-Allowed Claims			
	<u>Utilization</u>	<u>Cost/Prescription</u>	<u>Total Trend</u>
FY 2023	1.3%	4.0%	5.3%

The large one year drop in the allowed drug trend is likely due to the change in the plan's PBM. CCA expects the trends to return to double digits, since significant additional savings are not anticipated with this PBM in the near future.

METHODOLOGY

UMR provided allowed and paid claim information for Non-Medicare and Medicare eligibility from July 2001 through August 2023. This data set was analyzed for Non-Medicare claims that were incurred from July 2019 through June 2023 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>FY2020</u>	<u>FY2021</u>	<u>FY2022</u>	<u>FY2023</u>
Hospital Inpatient	\$92,957,673	\$121,363,732	\$122,284,848	\$112,865,608
Hospital Outpatient	197,040,023	228,221,191	247,029,994	271,965,868
Physician Services	249,656,960	298,120,152	319,290,492	337,231,227
Other Services	<u>22,935,779</u>	<u>26,845,966</u>	<u>26,355,523</u>	<u>27,910,505</u>
Total	\$562,590,434	\$674,551,041	\$714,960,857	\$749,973,208

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>FY2020</u>	<u>FY2021</u>	<u>FY2022</u>	<u>FY2023</u>
HI Maternity	\$7,720,685	\$9,340,786	\$13,138,838	\$10,120,076
HI Medical/Surgical	82,633,408	108,608,580	105,477,747	98,981,880
HI Psychiatric/Substance Abuse	2,603,580	3,414,367	3,668,264	3,763,652
HO Emergency Room	31,236,354	31,505,728	35,432,468	40,503,081
HO Medical/Surgical	87,091,853	105,676,016	114,527,538	132,280,920
HO Other Services	77,182,922	88,973,326	93,940,987	95,162,819
HO Psychiatric/Substance Abuse	1,528,894	2,066,120	3,129,001	4,019,047
PS Anesthesia	10,836,258	14,554,996	14,296,002	14,865,249
PS Chemotherapy/Radiation	2,296,151	2,144,649	2,491,022	2,112,467
PS Emergency Room	5,277,814	5,293,355	5,639,303	6,065,076
PS Immunizations/Allergy	8,712,453	9,027,519	8,757,867	9,470,400
PS Inpatient Surgery	6,354,617	7,341,250	6,158,736	6,901,928
PS Inpatient Visits	6,309,786	7,930,964	8,380,499	7,568,934
PS Lab & Pathology	11,314,317	12,727,167	14,717,845	15,484,074
PS Maternity	7,902,430	9,231,676	9,202,409	9,174,651
PS Office Visits	59,138,037	68,310,366	79,426,828	87,203,966
PS Other Services	56,110,012	60,920,866	61,225,049	62,020,110
PS Outpatient Surgery	49,420,647	68,238,487	73,170,186	75,932,247
PS Psychiatric/Substance Abuse	15,138,157	20,325,203	23,341,211	26,932,145
PS Radiology	10,846,280	12,073,655	12,483,535	13,499,981
PS Therapy/Rehab	14,303,544	16,802,392	16,899,887	19,341,395
O Ambulance	4,378,554	5,037,682	4,996,071	4,163,908
O Durable Medical Equipment	4,253,681	5,005,892	4,459,564	4,405,202

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 2020 through 2023 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	8.9%	5.5%
36-Month Trend	8.4%	6.9%
48-Month Trend	10.6%	8.6%

It is noteworthy that the paid trends are greater than the allowed trends in each of the time periods analyzed above. This is a common phenomenon that occurs when there are little to no benefit changes during a given time period.

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			
	2022 Average	2023 Average	Top 5
<u>Category</u>	<u>Utilization</u>	<u>Utilization</u>	<u>Highest %</u>
HO-Psychiatric / Substance Abuse	0.00443	0.00520	17.6%
PS-Outpatient Surgery	0.13755	0.15079	9.6%
PS-Therapies	0.10243	0.11167	9.0%
PS-Psychiatric / Substance Abuse	0.11107	0.11973	7.8%
HO-Medical / Surgical	0.09313	0.09972	7.1%

Top 5 Highest Percentage in Cost / Service Increases			
	2022 Average	2023 Average	Top 5
<u>Category</u>	<u>Cost / Service</u>	<u>Cost / Service</u>	<u>Highest %</u>
PS-Anesthesia	\$135.57	\$208.17	53.6%
PS-Inpatient Surgery	730.81	877.78	20.1%
PS-Other Services	138.16	164.86	19.3%
HI-Psychiatric / Substance Abuse	4,287.47	5,088.74	18.7%
PS-Immunizations / Injections / Allergy	92.58	107.79	16.4%

Top 5 Highest Percentage in Cost / Capita Increases			
	2022 Average	2023 Average	Top 5
<u>Category</u>	<u>Cost / Capita</u>	<u>Cost / Capita</u>	<u>Highest %</u>
HO-Medical / Surgical	\$59.30	\$71.35	20.3%
PS-Psychiatric / Substance Abuse	12.19	13.96	14.5%
PS-Inpatient Surgery	3.19	3.63	13.8%
HO-Psychiatric / Substance Abuse	1.79	2.03	13.6%
PS-Therapies	8.90	9.96	12.0%

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 Allowed Non-Medicare medical claim trends are slightly lower than the current trend assumption of 7.5% for FY 2024. Additionally, the 24-Month trend has reflected a lower 5.5% trend for medical, while the 36-month trend is 6.9% and the 48-month trend is 8.6%. CCA believes that it is appropriate to retain the FY 2024 medical claim trend assumption for Non-Medicare medical at 7.5%, given the long-term trend experience and the difference in the Allowed trend calculated in this report and the Paid trends applied in the Financial Plan projections.

Additionally, recent experience has shown that Non-Medicare gross drugs claim trends are lower than the current trend assumption of 14.5% for FY 2024. The 24-Month trend has reflected a 5.3% trend for drugs, before rebates. It should be noted that the 36-month trend is 7.7% and the 48-month trend is 10.0%. CCA believes that it is appropriate to retain the FY 2024 prescription drugs claim trend assumption for Non-Medicare prescription drugs at 14.5%. This approximates the 48-month trend experience and factors in the difference in the level of Paid trend versus Allowed trends. Additionally, favorable drug trends in FY2023 were largely due to savings with a new PBM contract in place. Significant additional savings are not anticipated with this PBM in the near future.

The update of the trend assumptions for FY 2024 is shown below.

Claim Type	Fiscal Year 2024 Trends		
	Previous Assumption	Updated Assumption	Change
Non-Medicare – Medical	7.5%	7.5%	0.0%
Non-Medicare – Gross Prescription Drugs	14.5%	14.5%	0.0%

In the past, claim trends for the financial plan included a 0.5% margin in future years. CCA has assumed the medical claim trends for the financial projection will increase by 0.5% in FY 2025 and in each successive fiscal year. Gross prescription drugs claim trends are assumed to increase 0.5% in FY 2025 and thereafter. Additionally, drug rebates have been trending at approximately 9% 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 5% 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 2019 to June 2023
(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	-7.2%	-13.0%	-19.3%	1.6%	-2.7%	8.5%	5.6%	1.5%	-2.2%	13.5%	11.0%	1.5%
Medical / Surgical	-5.0%	0.1%	-4.9%	14.0%	-4.7%	3.0%	-1.8%	14.7%	-2.2%	6.8%	4.5%	14.7%
Psychiatric / Substance Abuse	-8.9%	18.7%	8.2%	0.5%	-9.4%	21.2%	9.8%	0.5%	-8.7%	24.6%	13.8%	0.5%
TOTAL	-5.4%	-0.6%	-5.9%	16.1%	-4.7%	4.1%	-0.8%	16.7%	-2.4%	8.0%	5.4%	16.7%
HOSPITAL OUTPATIENT												
Emergency Room	-2.3%	14.3%	11.6%	5.2%	3.4%	10.1%	13.8%	5.0%	-1.5%	9.1%	7.5%	5.1%
Medical / Surgical	7.1%	12.4%	20.3%	16.8%	7.9%	6.9%	15.4%	16.4%	8.5%	5.6%	14.5%	16.2%
Other Services	-5.5%	7.7%	1.8%	12.9%	-1.6%	6.4%	4.7%	13.0%	0.6%	3.8%	4.4%	13.2%
Psychiatric / Substance Abuse	17.6%	-3.4%	13.6%	0.5%	20.8%	10.6%	33.7%	0.4%	22.1%	10.4%	34.9%	0.4%
TOTAL	1.2%	10.7%	12.1%	35.4%	3.9%	7.2%	11.4%	34.9%	4.2%	5.5%	9.9%	34.9%
PHYSICIAN SERVICES												
Anesthesia	-32.3%	53.6%	3.9%	2.0%	-9.2%	10.7%	0.5%	2.0%	22.4%	-10.0%	10.2%	2.0%
Chemotherapy / Radiation	2.1%	-14.6%	-12.8%	0.3%	7.8%	-8.9%	-1.7%	0.3%	0.5%	-2.7%	-2.2%	0.3%
Emergency Room	0.8%	2.7%	3.6%	0.8%	4.8%	1.0%	5.9%	0.8%	2.5%	1.1%	3.5%	0.8%
Immunizations / Injections / Allergy	-21.0%	16.4%	-8.0%	1.2%	-14.5%	7.6%	-8.1%	1.3%	-10.7%	7.0%	-4.4%	1.3%
Inpatient Surgery	-5.3%	20.1%	13.8%	0.9%	-6.3%	6.3%	-0.3%	1.0%	-3.0%	4.4%	1.2%	1.0%
Inpatient Visits	-7.9%	-4.1%	-11.7%	1.1%	-1.0%	-1.8%	-2.8%	1.1%	4.3%	0.0%	4.2%	1.1%
Lab & Pathology	-10.9%	13.3%	0.9%	2.1%	2.3%	6.3%	8.7%	2.0%	5.2%	4.3%	9.6%	2.0%
Maternity	0.0%	-5.2%	-5.2%	1.3%	2.7%	-3.7%	-1.2%	1.3%	7.4%	-3.9%	3.2%	1.3%
Office Visits	-1.7%	8.7%	6.8%	11.4%	4.7%	7.5%	12.6%	11.0%	5.1%	7.6%	13.0%	10.9%
Other Services	-16.7%	19.3%	-0.6%	8.4%	-9.9%	12.8%	1.6%	8.6%	-1.2%	3.0%	1.7%	8.9%
Outpatient Surgery	9.6%	-6.7%	2.2%	10.2%	11.2%	-5.4%	5.2%	10.2%	13.3%	-1.1%	12.1%	9.9%
Psychiatric / Substance Abuse	7.8%	6.2%	14.5%	3.4%	5.7%	9.8%	16.1%	3.3%	8.0%	10.7%	19.6%	3.2%
Radiology	-1.0%	7.0%	5.9%	1.8%	3.6%	1.8%	5.5%	1.8%	4.6%	1.3%	5.9%	1.8%
Therapies	9.0%	2.7%	12.0%	2.5%	3.9%	3.2%	7.2%	2.5%	5.9%	2.4%	8.4%	2.5%
TOTAL	-3.0%	8.3%	5.1%	47.3%	1.8%	4.7%	6.6%	47.1%	5.9%	2.9%	9.0%	47.1%
OTHER												
Ambulance	2.5%	-22.2%	-20.2%	0.6%	3.1%	-11.4%	-8.6%	0.7%	3.0%	-5.2%	-2.3%	0.7%
Appliances (DME)	-9.1%	8.8%	-1.1%	0.6%	1.1%	-5.2%	-4.2%	0.6%	-0.8%	1.4%	0.6%	0.7%
TOTAL	-3.2%	-6.9%	-9.9%	1.2%	2.1%	-8.3%	-6.4%	1.3%	1.1%	-2.0%	-0.8%	1.4%
GRAND TOTAL	-1.9%	7.5%	5.5%	100.0%	1.4%	5.3%	6.9%	100.0%	3.9%	4.6%	8.6%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2021 to June 2023
(Allowed Claims)**

24 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	-3.1%	3.2%	0.0%	-39.2%	-4.9%	-42.2%	-22.1%	10.7%	-13.8%	-7.2%	-13.0%	-19.3%	1.4%	2.3%	2.1%	1.6%
Medical / Surgical	-3.0%	3.9%	0.7%	-12.0%	-6.2%	-17.5%	-15.9%	12.1%	-5.7%	-5.0%	0.1%	-4.9%	10.5%	27.2%	18.1%	14.0%
Psychiatric / Substance Abuse	-18.5%	30.0%	6.0%	33.9%	6.8%	43.0%	-22.2%	6.0%	-17.5%	-8.9%	18.7%	8.2%	0.5%	0.6%	0.4%	0.5%
TOTAL	-3.7%	4.8%	1.0%	-13.2%	-5.9%	-18.3%	-16.6%	11.8%	-6.8%	-5.4%	-0.6%	-5.9%	12.4%	30.0%	20.6%	16.1%
HOSPITAL OUTPATIENT																
Emergency Room	1.2%	10.5%	11.8%	-32.4%	57.3%	6.3%	-4.8%	20.8%	15.0%	-2.3%	14.3%	11.6%	4.7%	3.8%	13.3%	5.2%
Medical / Surgical	8.9%	10.0%	19.7%	-17.7%	56.1%	28.4%	3.5%	21.0%	25.3%	7.1%	12.4%	20.3%	17.2%	13.3%	20.9%	16.8%
Other Services	-4.0%	13.6%	9.0%	-32.6%	10.6%	-25.5%	-0.1%	5.9%	5.8%	-5.5%	7.7%	1.8%	12.9%	11.8%	15.6%	12.9%
Psychiatric / Substance Abuse	21.1%	-7.9%	11.5%	-13.0%	62.9%	41.7%	0.1%	44.6%	44.8%	17.6%	-3.4%	13.6%	0.6%	0.2%	0.2%	0.5%
TOTAL	3.4%	11.0%	14.8%	-25.7%	37.8%	2.4%	0.1%	16.3%	16.5%	1.2%	10.7%	12.1%	35.4%	29.0%	50.0%	35.4%
PHYSICIAN SERVICES																
Anesthesia	-33.8%	60.1%	6.0%	-52.7%	116.0%	2.3%	-14.4%	42.0%	21.6%	-32.3%	53.6%	3.9%	2.0%	2.1%	1.4%	2.0%
Chemotherapy / Radiation	3.4%	-16.1%	-13.2%	-17.7%	-12.6%	-28.1%	1.6%	26.0%	27.9%	2.1%	-14.6%	-12.8%	0.3%	0.2%	0.3%	0.3%
Emergency Room	6.3%	4.4%	11.1%	-37.8%	54.7%	-3.8%	-3.9%	-37.9%	-40.3%	0.8%	2.7%	3.6%	0.8%	0.6%	1.0%	0.8%
Immunizations / Injections / Allergy	-20.8%	15.4%	-8.6%	-29.4%	51.6%	7.0%	-4.3%	2.5%	-1.9%	-21.0%	16.4%	-8.0%	1.5%	0.5%	0.9%	1.2%
Inpatient Surgery	-3.8%	17.7%	13.3%	-9.2%	27.0%	15.3%	-20.4%	26.9%	1.0%	-5.3%	20.1%	13.8%	0.8%	1.5%	0.4%	0.9%
Inpatient Visits	-8.1%	-0.8%	-8.8%	-6.8%	-13.5%	-19.4%	-9.7%	-14.3%	-22.6%	-7.9%	-4.1%	-11.7%	1.1%	1.5%	0.4%	1.1%
Lab & Pathology	-16.6%	13.4%	-5.5%	1.6%	6.8%	8.5%	-10.9%	7.8%	-3.9%	-10.9%	13.3%	0.9%	1.3%	5.9%	0.8%	2.1%
Maternity	4.6%	-7.5%	-3.2%	-9.5%	-5.5%	-14.4%	-4.3%	-1.4%	-5.7%	0.0%	-5.2%	-5.2%	1.4%	1.1%	0.5%	1.3%
Office Visits	-1.4%	8.5%	6.9%	-5.5%	13.7%	7.4%	-4.2%	9.1%	4.5%	-1.7%	8.7%	6.8%	13.6%	4.1%	6.0%	11.4%
Other Services	-10.0%	21.7%	9.5%	-43.1%	38.7%	-21.1%	-8.6%	23.7%	13.1%	-16.7%	19.3%	-0.6%	6.6%	16.2%	7.9%	8.4%
Outpatient Surgery	11.5%	-6.4%	4.4%	-22.7%	24.6%	-3.7%	12.4%	-41.7%	-34.5%	9.6%	-6.7%	2.2%	12.4%	2.8%	5.3%	10.2%
Psychiatric / Substance Abuse	11.2%	3.5%	15.1%	-25.2%	31.3%	-1.8%	11.2%	-3.8%	7.0%	7.8%	6.2%	14.5%	4.2%	1.2%	0.8%	3.4%
Radiology	0.2%	4.7%	4.9%	-14.1%	25.2%	7.5%	2.1%	4.9%	7.1%	-1.0%	7.0%	5.9%	1.8%	1.4%	2.1%	1.8%
Therapies	9.2%	2.3%	11.7%	9.7%	19.4%	31.0%	5.3%	2.7%	8.1%	9.0%	2.7%	12.0%	3.1%	0.3%	1.0%	2.5%
TOTAL	0.3%	7.3%	7.6%	-25.7%	30.1%	-3.3%	-2.1%	2.5%	0.4%	-3.0%	8.3%	5.1%	51.0%	39.3%	28.9%	47.3%
OTHER																
Ambulance	1.2%	-11.2%	-10.1%	12.3%	-51.2%	-45.3%	-1.0%	-14.9%	-15.8%	2.5%	-22.2%	-20.2%	0.6%	0.8%	0.4%	0.6%
Appliances (DME)	-13.5%	21.8%	5.4%	13.2%	-32.4%	-23.5%	-10.9%	-2.3%	-12.9%	-9.1%	8.8%	-1.1%	0.6%	0.9%	0.2%	0.6%
TOTAL	-5.8%	4.6%	-1.5%	12.8%	-40.9%	-33.4%	-4.7%	-10.2%	-14.4%	-3.2%	-6.9%	-9.9%	1.2%	1.7%	0.6%	1.2%
GRAND TOTAL	0.8%	8.3%	9.2%	-21.3%	20.3%	-5.3%	-4.0%	11.3%	6.8%	-1.9%	7.5%	5.5%	100.0%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2020 to June 2023
(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	-0.1%	12.9%	12.8%	-23.3%	28.7%	-1.2%	-10.9%	13.2%	0.9%	-2.7%	8.5%	5.6%	1.3%	2.0%	2.1%	1.5%
Medical / Surgical	-3.5%	11.7%	7.8%	-9.2%	-4.3%	-13.1%	-10.3%	8.5%	-2.6%	-4.7%	3.0%	-1.8%	10.5%	29.4%	19.6%	14.7%
Psychiatric / Substance Abuse	-14.1%	23.2%	5.8%	1.5%	19.3%	21.1%	10.2%	12.3%	23.7%	-9.4%	21.2%	9.8%	0.5%	0.5%	0.3%	0.5%
TOTAL	-3.6%	12.3%	8.3%	-10.0%	-1.8%	-11.6%	-10.0%	9.1%	-1.9%	-4.7%	4.1%	-0.8%	12.3%	32.0%	22.0%	16.7%
HOSPITAL OUTPATIENT																
Emergency Room	5.3%	7.7%	13.4%	-15.9%	37.2%	15.4%	8.6%	7.2%	16.4%	3.4%	10.1%	13.8%	4.6%	3.6%	12.4%	5.0%
Medical / Surgical	8.8%	5.7%	15.1%	-4.8%	37.1%	30.5%	5.4%	4.0%	9.6%	7.9%	6.9%	15.4%	17.1%	11.8%	21.0%	16.4%
Other Services	-0.9%	7.3%	6.2%	-14.7%	15.1%	-1.8%	2.9%	5.3%	8.3%	-1.6%	6.4%	4.7%	13.3%	11.1%	15.3%	13.0%
Psychiatric / Substance Abuse	23.0%	9.4%	34.6%	2.0%	15.9%	18.2%	8.6%	37.4%	49.2%	20.8%	10.6%	33.7%	0.5%	0.2%	0.2%	0.4%
TOTAL	4.9%	6.6%	11.9%	-10.4%	27.8%	14.6%	5.4%	5.3%	11.0%	3.9%	7.2%	11.4%	35.5%	26.6%	48.9%	34.9%
PHYSICIAN SERVICES																
Anesthesia	-14.7%	19.6%	2.0%	-6.0%	12.9%	6.1%	-0.5%	15.9%	15.4%	-9.2%	10.7%	0.5%	2.1%	2.0%	1.4%	2.0%
Chemotherapy / Radiation	8.8%	-8.4%	-0.4%	-8.8%	-5.1%	-13.4%	8.6%	-2.9%	5.5%	7.8%	-8.9%	-1.7%	0.3%	0.2%	0.3%	0.3%
Emergency Room	8.2%	2.4%	10.8%	-21.1%	36.2%	7.4%	9.9%	-27.2%	-20.0%	4.8%	1.0%	5.9%	0.8%	0.6%	1.1%	0.8%
Immunizations / Injections / Allergy	-14.6%	12.0%	-4.4%	-18.7%	27.9%	4.0%	-1.1%	1.9%	0.8%	-14.5%	7.6%	-8.1%	1.5%	0.5%	0.8%	1.3%
Inpatient Surgery	-5.2%	5.0%	-0.5%	-11.3%	13.0%	0.2%	-7.5%	19.8%	10.7%	-6.3%	6.3%	-0.3%	0.9%	1.5%	0.4%	1.0%
Inpatient Visits	-0.1%	-2.1%	-2.2%	-2.7%	0.3%	-2.5%	-9.5%	-4.9%	-13.9%	-1.0%	-1.8%	-2.8%	1.1%	1.4%	0.5%	1.1%
Lab & Pathology	0.9%	11.2%	12.2%	5.4%	0.8%	6.2%	3.2%	-3.2%	-0.2%	2.3%	6.3%	8.7%	1.2%	5.6%	0.8%	2.0%
Maternity	5.1%	-0.1%	5.0%	-1.6%	-23.7%	-24.9%	-6.6%	4.7%	-2.3%	2.7%	-3.7%	-1.2%	1.4%	1.3%	0.5%	1.3%
Office Visits	5.0%	7.4%	12.8%	1.5%	10.4%	12.1%	2.4%	6.5%	9.1%	4.7%	7.5%	12.6%	13.3%	3.7%	5.8%	11.0%
Other Services	-7.2%	20.4%	11.8%	-21.8%	13.8%	-11.0%	-0.2%	21.6%	21.3%	-9.9%	12.8%	1.6%	6.5%	17.5%	7.3%	8.6%
Outpatient Surgery	12.7%	-5.4%	6.6%	-12.6%	21.5%	6.2%	16.4%	-27.6%	-15.7%	11.2%	-5.4%	5.2%	12.5%	2.6%	5.9%	10.2%
Psychiatric / Substance Abuse	8.7%	7.2%	16.5%	-19.9%	36.0%	8.9%	13.6%	5.3%	19.6%	5.7%	9.8%	16.1%	4.1%	1.1%	0.7%	3.3%
Radiology	4.6%	-0.3%	4.3%	-5.3%	19.4%	13.0%	3.7%	1.1%	4.8%	3.6%	1.8%	5.5%	1.9%	1.3%	2.1%	1.8%
Therapies	4.2%	2.8%	7.1%	-3.8%	14.7%	10.3%	3.4%	5.5%	9.1%	3.9%	3.2%	7.2%	3.2%	0.3%	1.0%	2.5%
TOTAL	3.8%	5.5%	9.5%	-11.8%	11.6%	-1.6%	4.7%	1.5%	6.2%	1.8%	4.7%	6.6%	50.9%	39.6%	28.5%	47.1%
OTHER																
Ambulance	2.0%	-6.0%	-4.1%	9.8%	-27.5%	-20.4%	4.2%	-9.1%	-5.2%	3.1%	-11.4%	-8.6%	0.7%	0.8%	0.4%	0.7%
Appliances (DME)	-2.5%	2.8%	0.3%	16.9%	-24.7%	-12.0%	17.8%	-3.3%	13.9%	1.1%	-5.2%	-4.2%	0.6%	1.0%	0.2%	0.6%
TOTAL	-0.1%	-1.8%	-1.9%	13.7%	-26.0%	-15.8%	8.8%	-7.1%	1.0%	2.1%	-8.3%	-6.4%	1.3%	1.8%	0.5%	1.3%
GRAND TOTAL	3.3%	6.6%	10.1%	-10.4%	10.9%	-0.6%	1.8%	5.0%	6.9%	1.4%	5.3%	6.9%	100.0%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2019 to June 2023
(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	0.0%	12.7%	12.7%	-22.8%	23.2%	-4.8%	-2.0%	9.1%	6.9%	-2.2%	13.5%	11.0%	1.3%	1.8%	2.2%	1.5%
Medical / Surgical	-2.0%	16.2%	13.8%	-4.1%	-2.7%	-6.6%	0.0%	6.2%	6.2%	-2.2%	6.8%	4.5%	10.2%	30.2%	19.6%	14.7%
Psychiatric / Substance Abuse	-11.4%	25.9%	11.5%	-4.5%	16.2%	10.9%	13.4%	7.9%	22.3%	-8.7%	24.6%	13.8%	0.5%	0.5%	0.3%	0.5%
TOTAL	-2.2%	16.2%	13.7%	-5.1%	-0.9%	-6.0%	0.0%	6.5%	6.5%	-2.4%	8.0%	5.4%	12.0%	32.5%	22.1%	16.7%
HOSPITAL OUTPATIENT																
Emergency Room	-1.6%	7.2%	5.5%	-9.2%	27.2%	15.5%	11.6%	5.7%	18.0%	-1.5%	9.1%	7.5%	4.8%	3.5%	12.4%	5.1%
Medical / Surgical	8.7%	5.0%	14.1%	4.0%	19.8%	24.6%	9.3%	2.9%	12.5%	8.5%	5.6%	14.5%	17.1%	11.2%	21.0%	16.2%
Other Services	0.6%	5.1%	5.7%	-0.9%	-4.1%	-4.9%	6.4%	5.9%	12.7%	0.6%	3.8%	4.4%	13.4%	11.4%	15.1%	13.2%
Psychiatric / Substance Abuse	24.6%	10.8%	38.0%	3.7%	-3.2%	0.4%	4.0%	25.8%	30.8%	22.1%	10.4%	34.9%	0.5%	0.2%	0.2%	0.4%
TOTAL	4.5%	5.4%	10.1%	0.1%	10.3%	10.4%	9.0%	4.6%	14.0%	4.2%	5.5%	9.9%	35.8%	26.3%	48.7%	34.9%
PHYSICIAN SERVICES																
Anesthesia	7.2%	1.2%	8.4%	13.7%	-4.7%	8.4%	9.4%	2.7%	12.4%	22.4%	-10.0%	10.2%	2.1%	1.9%	1.4%	2.0%
Chemotherapy / Radiation	0.3%	-3.4%	-3.1%	-1.6%	0.5%	-1.2%	5.6%	1.5%	7.2%	0.5%	-2.7%	-2.2%	0.4%	0.2%	0.3%	0.3%
Emergency Room	4.0%	1.4%	5.5%	-12.1%	21.6%	6.9%	12.9%	-13.1%	-1.9%	2.5%	1.1%	3.5%	0.9%	0.6%	1.1%	0.8%
Immunizations / Injections / Allergy	-10.9%	11.4%	-0.8%	-12.5%	17.6%	2.8%	0.7%	5.9%	6.6%	-10.7%	7.0%	-4.4%	1.6%	0.5%	0.8%	1.3%
Inpatient Surgery	-3.6%	2.9%	-0.8%	-1.0%	6.9%	5.8%	-0.6%	6.1%	5.5%	-3.0%	4.4%	1.2%	0.9%	1.5%	0.4%	1.0%
Inpatient Visits	5.2%	-1.0%	4.1%	2.1%	3.7%	5.9%	-1.9%	-0.1%	-2.0%	4.3%	0.0%	4.2%	1.1%	1.3%	0.5%	1.1%
Lab & Pathology	4.3%	5.5%	10.0%	6.9%	3.0%	10.1%	6.0%	-4.3%	1.5%	5.2%	4.3%	9.6%	1.3%	5.4%	0.8%	2.0%
Maternity	7.0%	0.3%	7.3%	8.9%	-19.3%	-12.0%	0.1%	7.7%	7.9%	7.4%	-3.9%	3.2%	1.4%	1.3%	0.6%	1.3%
Office Visits	5.1%	7.5%	13.1%	4.9%	9.5%	14.9%	4.2%	5.7%	10.1%	5.1%	7.6%	13.0%	13.3%	3.6%	5.8%	10.9%
Other Services	-2.1%	10.4%	8.1%	0.9%	-14.3%	-13.5%	6.1%	13.0%	19.8%	-1.2%	3.0%	1.7%	6.7%	18.1%	7.2%	8.9%
Outpatient Surgery	14.4%	-1.0%	13.2%	-3.2%	14.7%	11.0%	18.2%	-15.3%	0.1%	13.3%	-1.1%	12.1%	12.1%	2.6%	6.1%	9.9%
Psychiatric / Substance Abuse	9.9%	8.9%	19.7%	-7.4%	32.0%	22.2%	15.8%	7.2%	24.2%	8.0%	10.7%	19.6%	4.0%	1.0%	0.7%	3.2%
Radiology	4.8%	0.0%	4.8%	2.0%	10.5%	12.7%	6.7%	1.1%	7.9%	4.6%	1.3%	5.9%	1.9%	1.2%	2.1%	1.8%
Therapies	5.9%	2.2%	8.2%	2.2%	9.3%	11.7%	8.7%	4.9%	14.1%	5.9%	2.4%	8.4%	3.2%	0.3%	0.9%	2.5%
TOTAL	6.2%	4.5%	11.0%	2.1%	-3.1%	-1.0%	8.5%	1.5%	10.2%	5.9%	2.9%	9.0%	50.9%	39.4%	28.7%	47.1%
OTHER																
Ambulance	1.7%	-2.3%	-0.6%	10.6%	-15.2%	-6.1%	6.3%	-6.2%	-0.3%	3.0%	-5.2%	-2.3%	0.7%	0.8%	0.4%	0.7%
Appliances (DME)	-4.6%	6.9%	2.0%	16.8%	-14.9%	-0.6%	24.2%	5.7%	31.3%	-0.8%	1.4%	0.6%	0.6%	1.0%	0.2%	0.7%
TOTAL	-1.3%	2.1%	0.8%	14.0%	-15.0%	-3.1%	11.9%	-2.5%	9.1%	1.1%	-2.0%	-0.8%	1.3%	1.9%	0.5%	1.4%
GRAND TOTAL	4.5%	6.2%	11.0%	-0.5%	0.9%	0.4%	6.9%	4.1%	11.3%	3.9%	4.6%	8.6%	100.0%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Total
Study Period of July 2022 to June 2023
(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	4,467	244	221	4,932	90.6%	4.9%	4.5%	7,765,121	1,411,447	1,029,169	10,205,736	76.1%	13.8%	10.1%
Medical / Surgical	7,824	1,306	441	9,570	81.8%	13.6%	4.6%	57,277,063	34,052,123	8,565,862	99,895,049	57.3%	34.1%	8.6%
Psychiatric / Substance Abuse	499	236	37	772	64.7%	30.6%	4.8%	2,819,590	822,498	206,755	3,848,843	73.3%	21.4%	5.4%
TOTAL	12,790	1,786	698	15,274	83.7%	11.7%	4.6%	67,861,774	36,286,068	9,801,786	113,949,628	59.6%	31.8%	8.6%
HOSPITAL OUTPATIENT														
Emergency Room	34,621	2,723	2,897	40,240	86.0%	6.8%	7.2%	27,201,298	4,873,291	7,793,059	39,867,648	68.2%	12.2%	19.5%
Medical / Surgical	170,362	8,587	4,880	183,829	92.7%	4.7%	2.7%	100,176,530	18,079,468	12,552,397	130,808,396	76.6%	13.8%	9.6%
Other Services	251,475	11,532	7,871	270,878	92.8%	4.3%	2.9%	72,539,033	12,407,669	8,882,761	93,829,462	77.3%	13.2%	9.5%
Psychiatric / Substance Abuse	8,616	682	151	9,449	91.2%	7.2%	1.6%	3,592,070	245,457	110,784	3,948,312	91.0%	6.2%	2.8%
TOTAL	465,074	23,523	15,799	504,396	92.2%	4.7%	3.1%	203,508,931	35,605,885	29,339,002	268,453,818	75.8%	13.3%	10.9%
PHYSICIAN SERVICES														
Anesthesia	62,112	8,396	2,443	72,951	85.1%	11.5%	3.3%	10,856,605	2,556,732	872,933	14,286,269	76.0%	17.9%	6.1%
Chemotherapy / Radiation	33,090	1,581	1,769	36,440	90.8%	4.3%	4.9%	1,596,165	229,849	202,236	2,028,249	78.7%	11.3%	10.0%
Emergency Room	37,387	3,248	2,363	42,998	86.9%	7.6%	5.5%	4,652,318	739,426	432,576	5,824,321	79.9%	12.7%	7.4%
Immunizations / Injections / Allergy	95,048	7,339	3,723	106,110	89.6%	6.9%	3.5%	7,913,815	675,748	483,095	9,072,658	87.2%	7.4%	5.3%
Inpatient Surgery	6,186	1,191	277	7,653	80.8%	15.6%	3.6%	4,493,929	1,921,576	223,673	6,639,179	67.7%	28.9%	3.4%
Inpatient Visits	29,576	7,117	1,444	38,138	77.6%	18.7%	3.8%	5,504,330	1,551,615	208,147	7,264,092	75.8%	21.4%	2.9%
Lab & Pathology	212,052	117,719	13,366	343,137	61.8%	34.3%	3.9%	6,896,787	7,562,752	391,403	14,850,942	46.4%	50.9%	2.6%
Maternity	31,924	13,230	1,295	46,448	68.7%	28.5%	2.8%	7,238,416	1,285,303	274,297	8,798,016	82.3%	14.6%	3.1%
Office Visits	759,470	43,118	31,237	833,825	91.1%	5.2%	3.7%	75,232,088	5,267,403	3,272,643	83,772,133	89.8%	6.3%	3.9%
Other Services	312,426	50,367	17,397	380,191	82.2%	13.2%	4.6%	37,139,968	18,034,564	4,400,893	59,575,424	62.3%	30.3%	7.4%
Outpatient Surgery	259,765	11,594	10,054	281,413	92.3%	4.1%	3.6%	67,137,123	3,597,262	2,141,099	72,875,485	92.1%	4.9%	2.9%
Psychiatric / Substance Abuse	200,973	15,590	4,836	221,400	90.8%	7.0%	2.2%	23,937,035	1,537,163	419,066	25,893,264	92.4%	5.9%	1.6%
Radiology	201,916	19,782	8,328	230,026	87.8%	8.6%	3.6%	10,044,851	1,797,833	1,128,484	12,971,167	77.4%	13.9%	8.7%
Therapies	193,239	5,582	8,153	206,974	93.4%	2.7%	3.9%	17,658,034	403,035	530,007	18,591,076	95.0%	2.2%	2.9%
TOTAL	2,435,163	305,856	106,684	2,847,703	85.5%	10.7%	3.7%	280,301,463	47,160,259	14,980,553	342,442,275	81.9%	13.8%	4.4%
OTHER														
Ambulance	7,226	1,299	335	8,860	81.6%	14.7%	3.8%	3,178,233	619,642	186,124	3,983,999	79.8%	15.6%	4.7%
Appliances (DME)	23,439	5,870	1,155	30,464	76.9%	19.3%	3.8%	3,103,949	1,045,261	92,148	4,241,358	73.2%	24.6%	2.2%
TOTAL	30,665	7,169	1,489	39,323	78.0%	18.2%	3.8%	6,282,182	1,664,903	278,272	8,225,357	76.4%	20.2%	3.4%
GRAND TOTAL	2,943,692	338,334	124,670	3,406,696	86.4%	9.9%	3.7%	557,954,350	120,717,116	54,399,613	733,071,078	76.1%	16.5%	7.4%

**West Virginia PEIA Non-Medicare Prescription Drugs Total
Study Period of July 2019 to June 2023
(Paid Claims)**

24-Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	1.3%	4.0%	5.3%

36-Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	1.9%	5.7%	7.7%

48-Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	2.1%	7.8%	10.0%

Appendix A

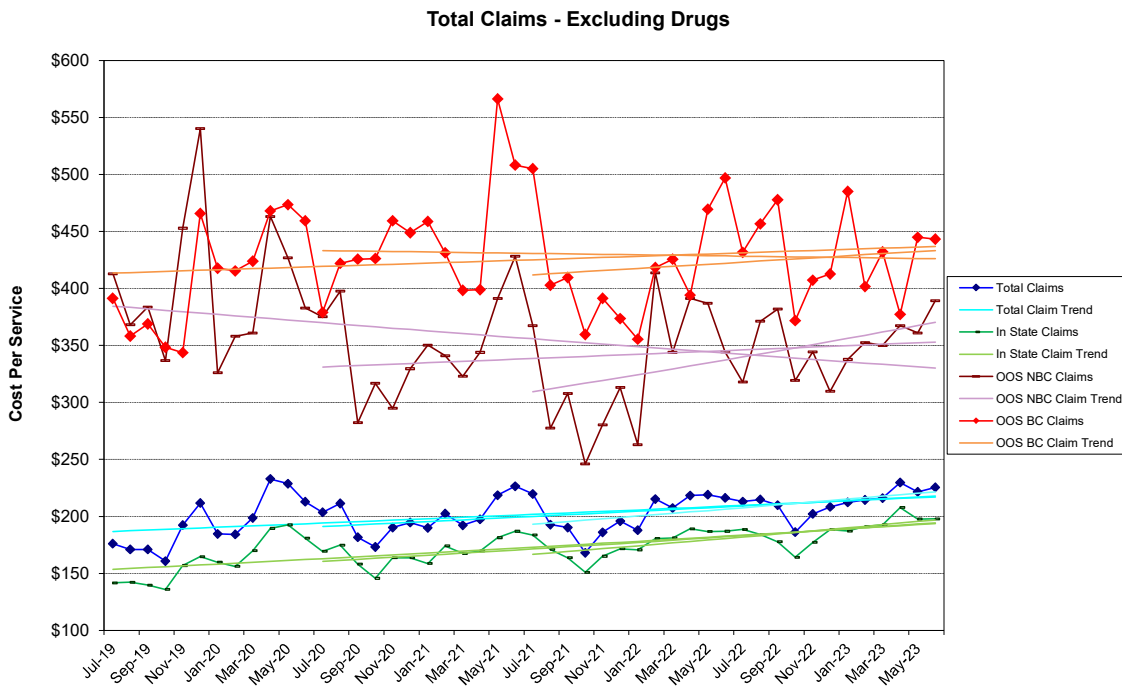
**NON-MEDICARE CLAIMS
Excluding Drugs**

GRAND TOTAL

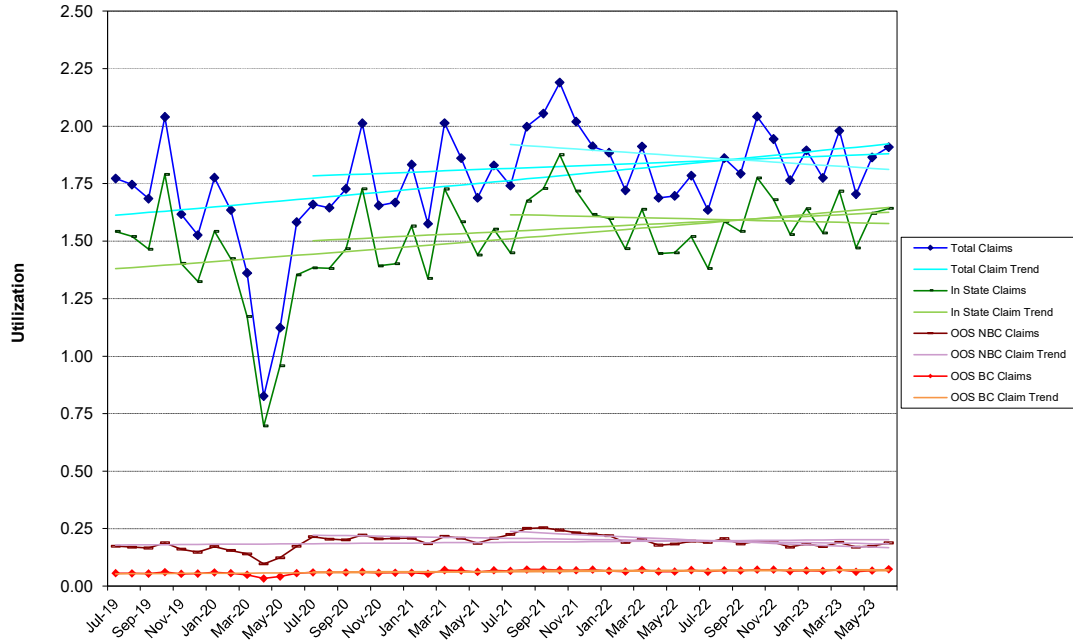
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.9%	7.5%	5.5%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.4%	5.3%	6.9%

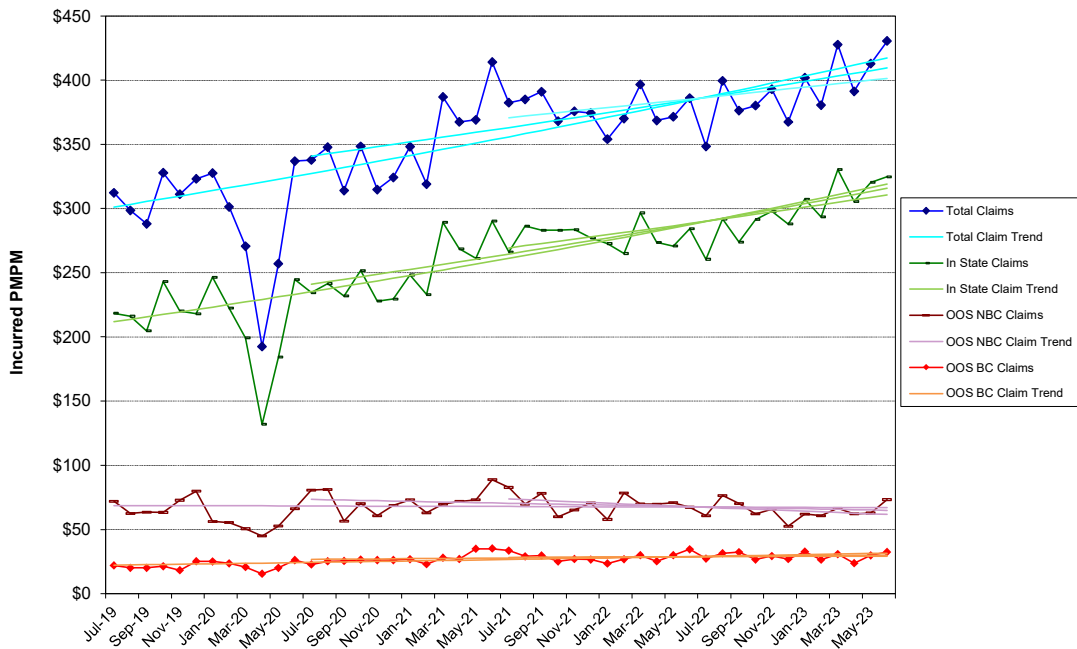
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.9%	4.6%	8.6%



Total Claims - Excluding Drugs



Total Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

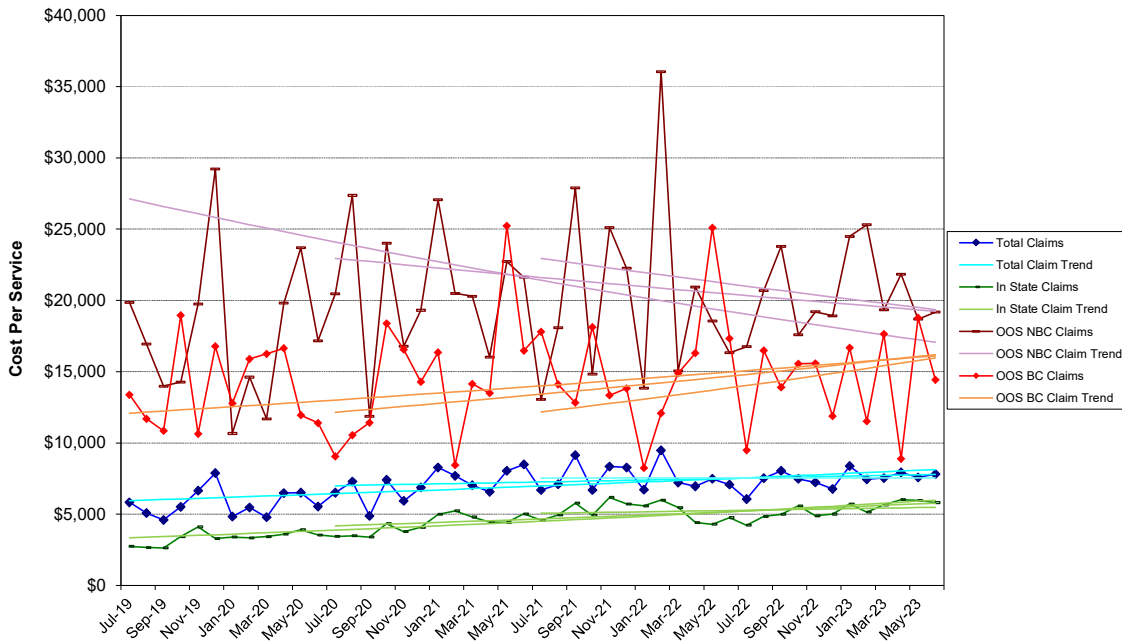
TOTAL

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-5.4%	-0.6%	-5.9%

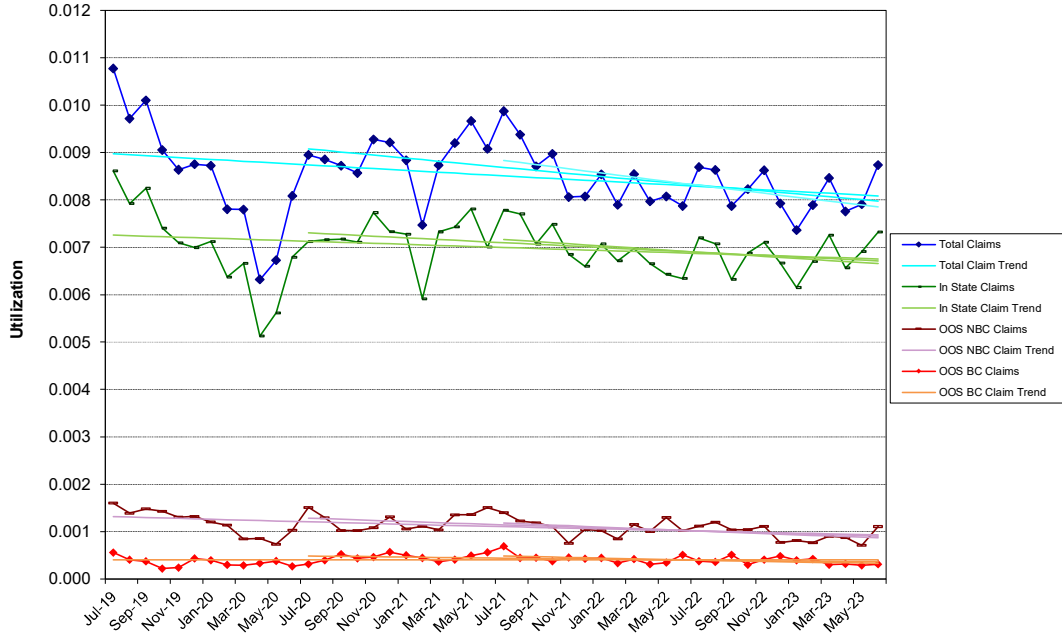
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-4.7%	4.1%	-0.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.4%	8.0%	5.4%

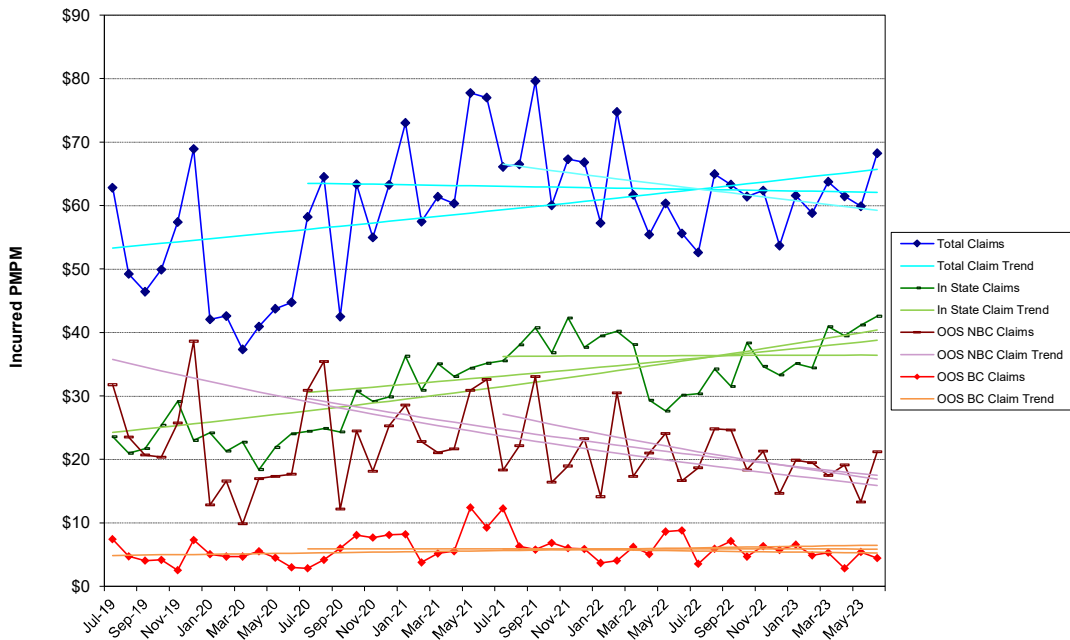
Total Hospital Inpatient Claims - Excluding Drugs



Total Hospital Inpatient Claims - Excluding Drugs



Total Hospital Inpatient Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

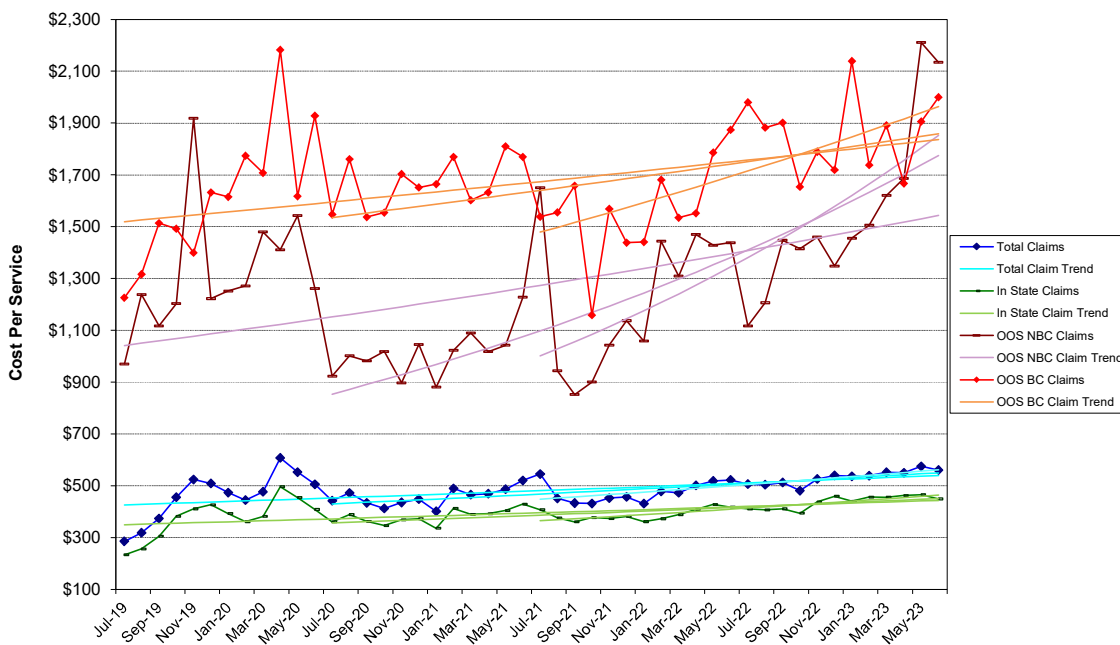
TOTAL

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.2%	10.7%	12.1%

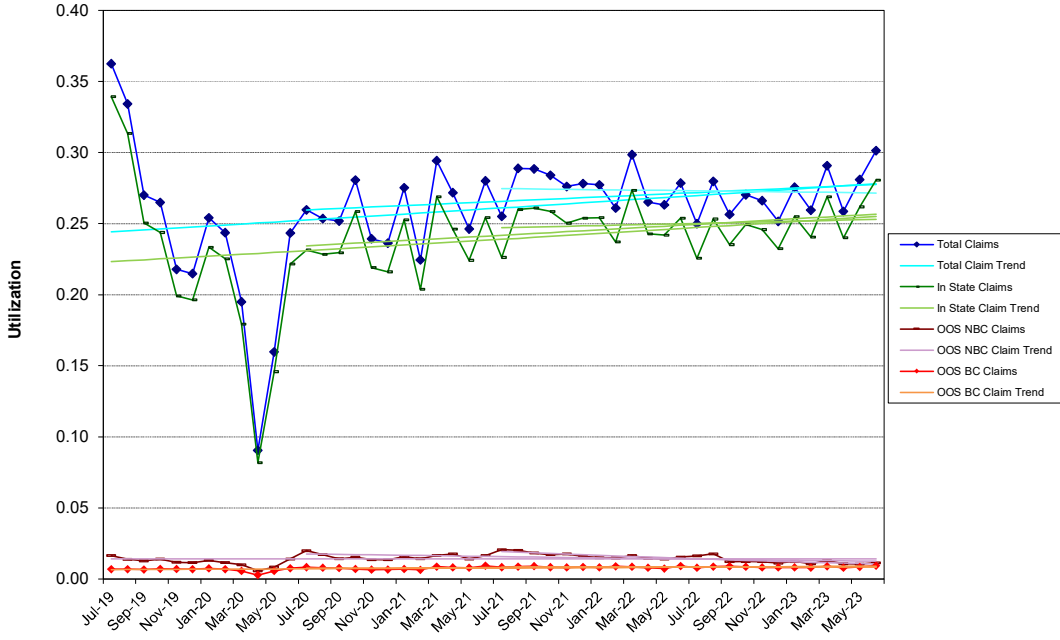
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.9%	7.2%	11.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.2%	5.5%	9.9%

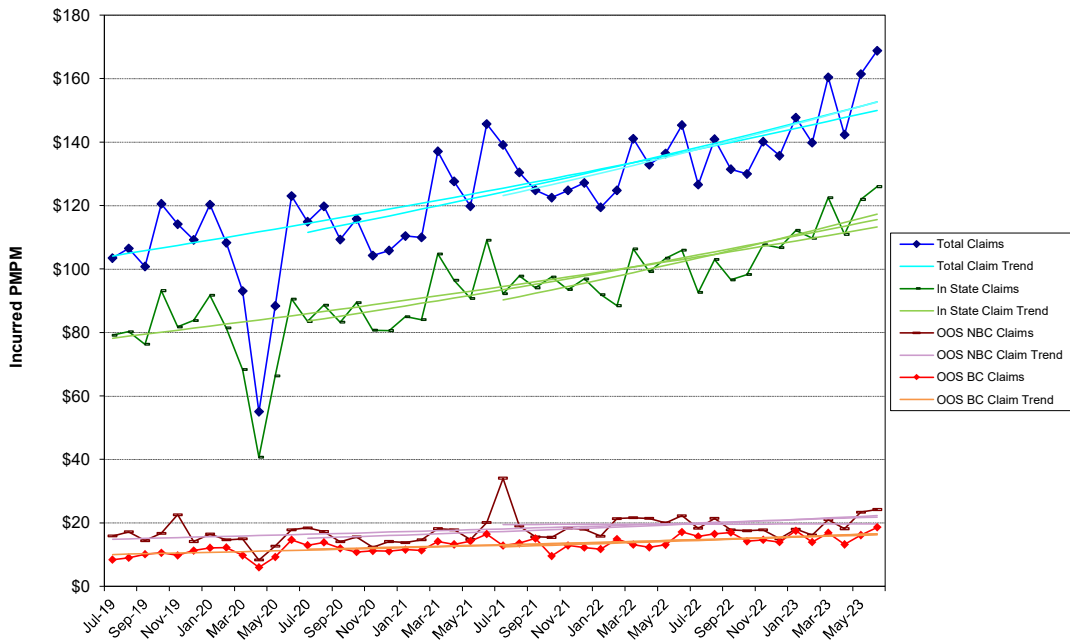
Total Hospital Outpatient Claims - Excluding Drugs



Total Hospital Outpatient Claims - Excluding Drugs



Total Hospital Outpatient Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

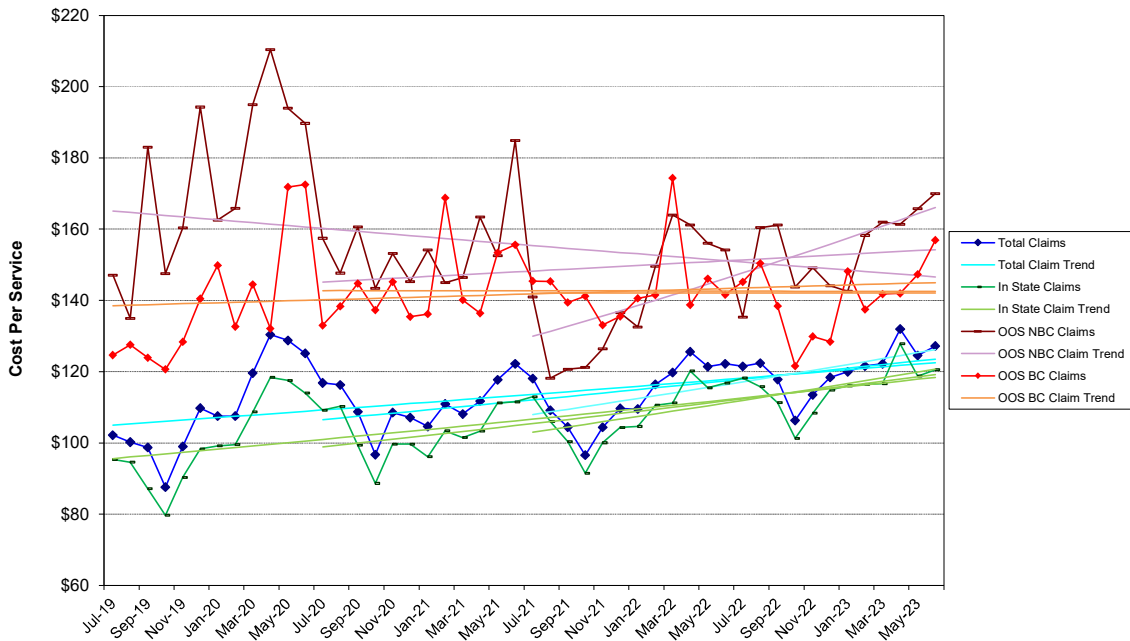
TOTAL

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.0%	8.3%	5.1%

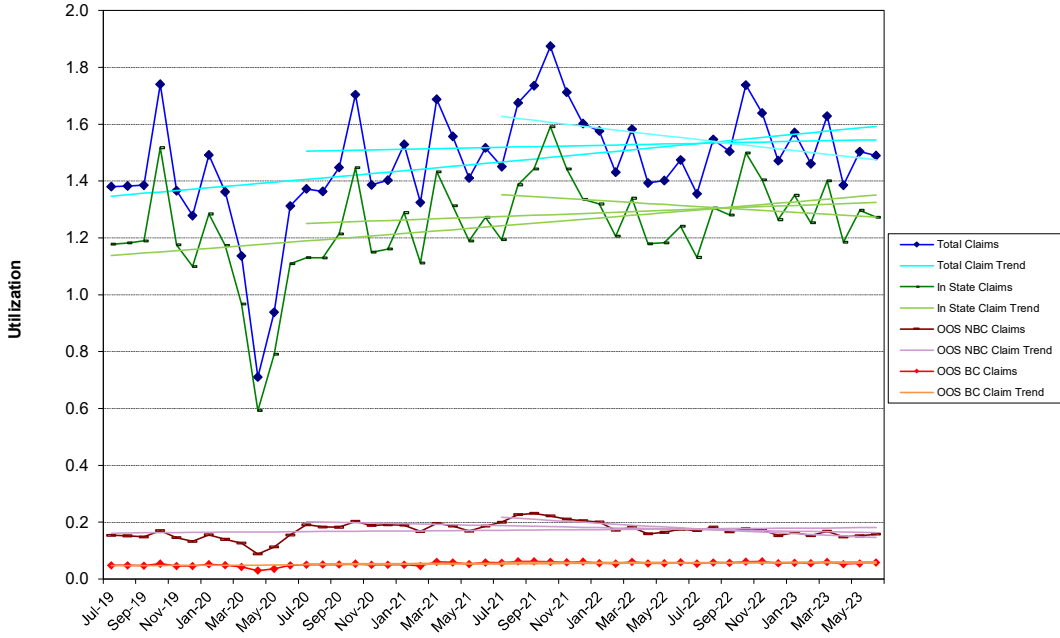
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.8%	4.7%	6.6%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.9%	2.9%	9.0%

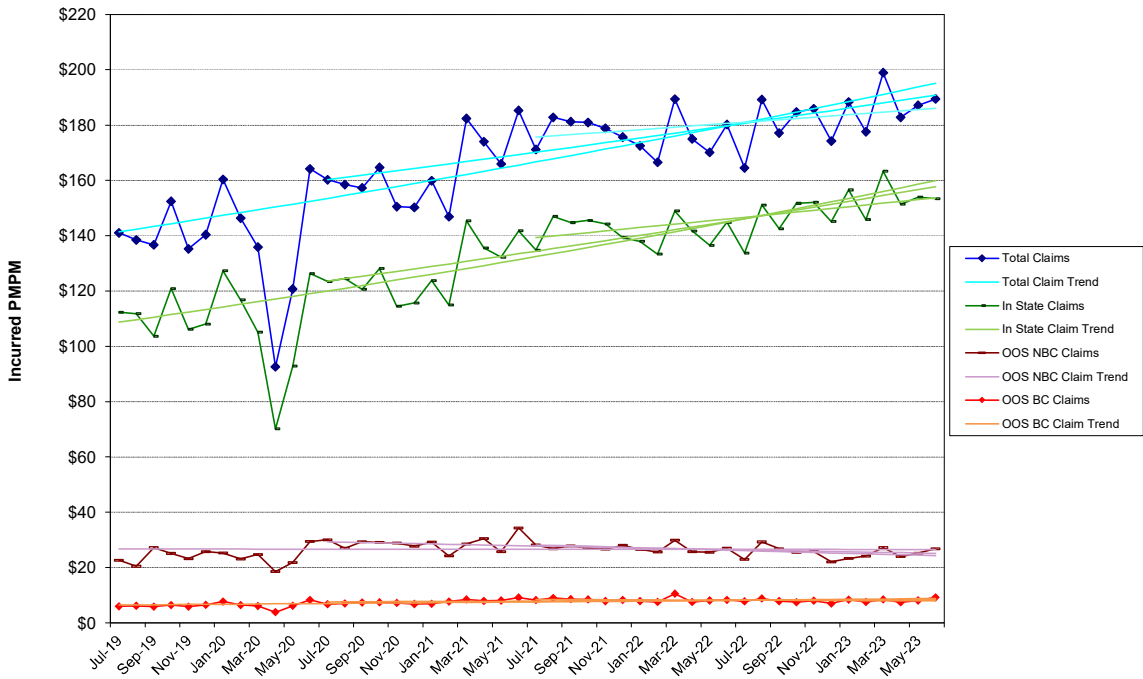
Total Physician Services Claims - Excluding Drugs



Total Physician Services Claims - Excluding Drugs



Total Physician Services Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

OTHER

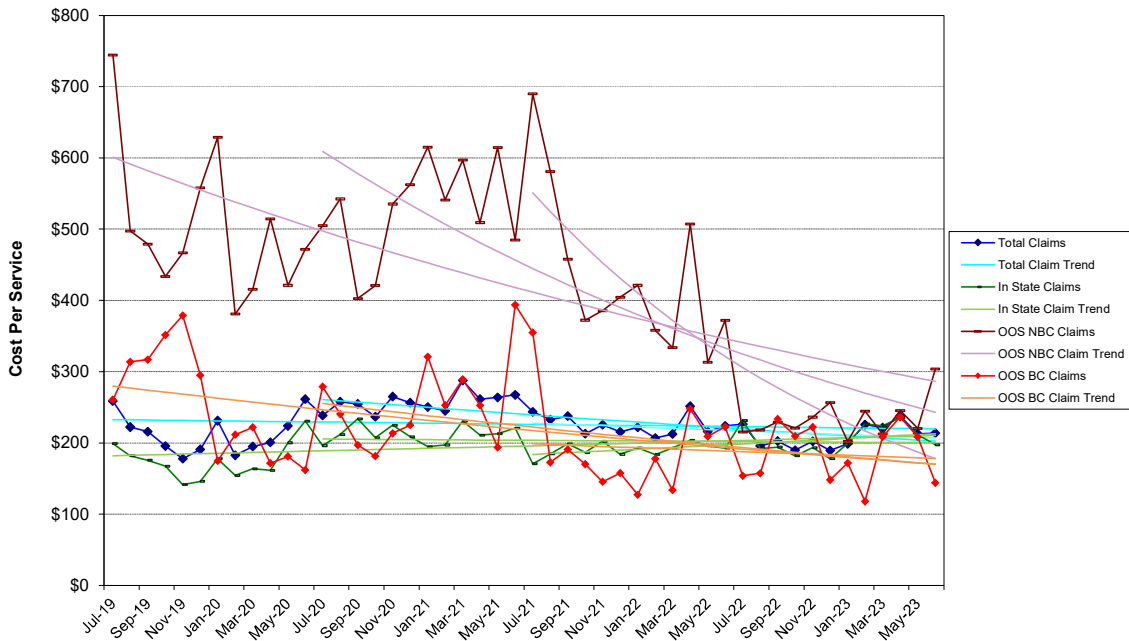
TOTAL

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.2%	-6.9%	-9.9%

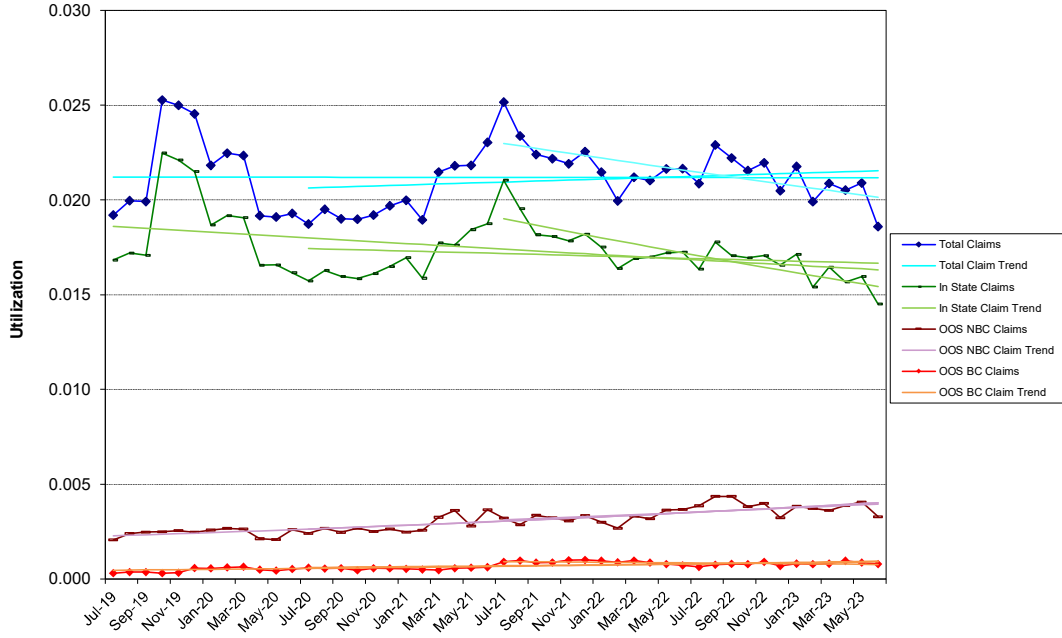
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.1%	-8.3%	-6.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.1%	-2.0%	-0.8%

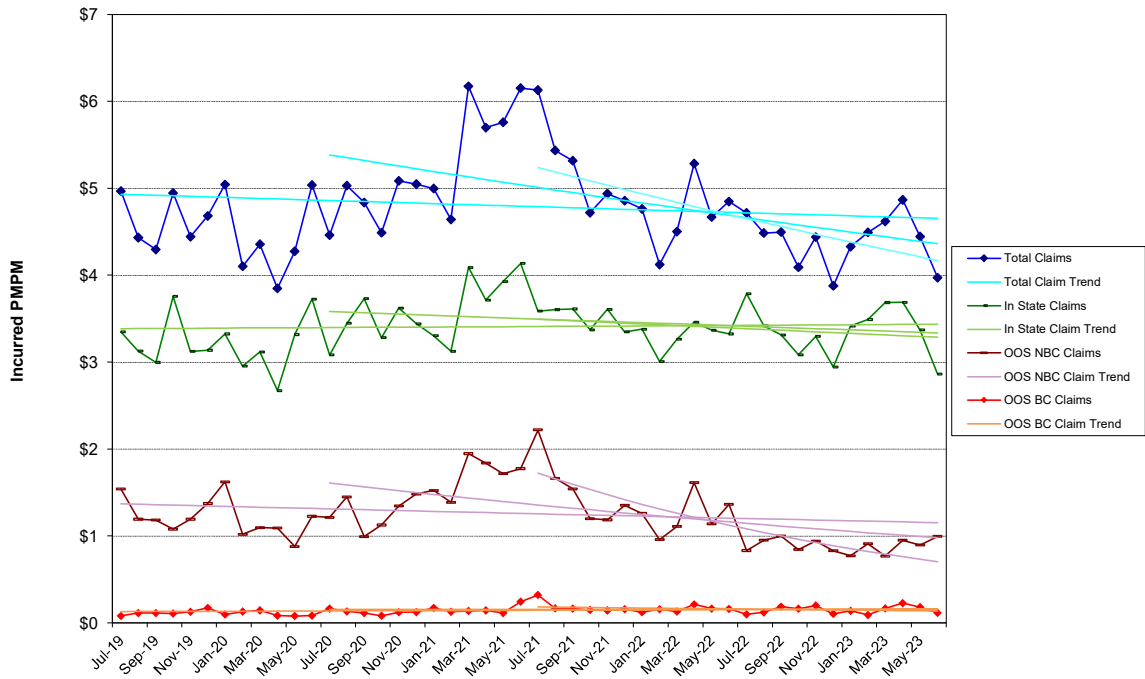
Total Other Claims - Excluding Drugs



Total Other Claims - Excluding Drugs



Total Other Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

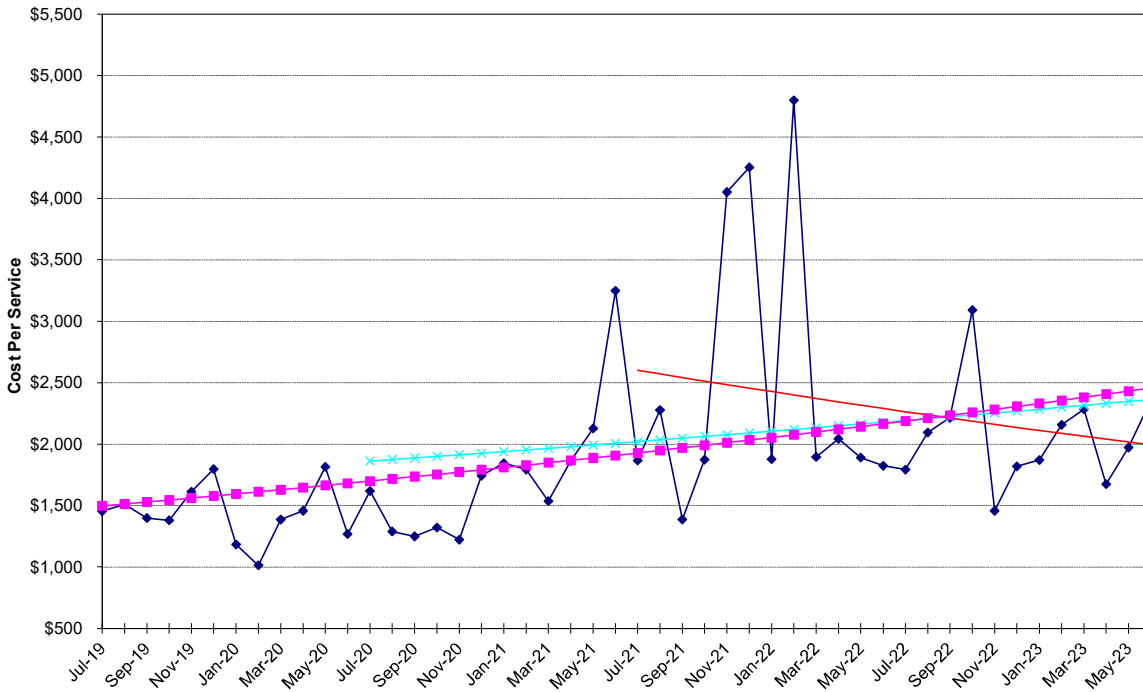
Maternity

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-7.2%	-13.0%	-19.3%

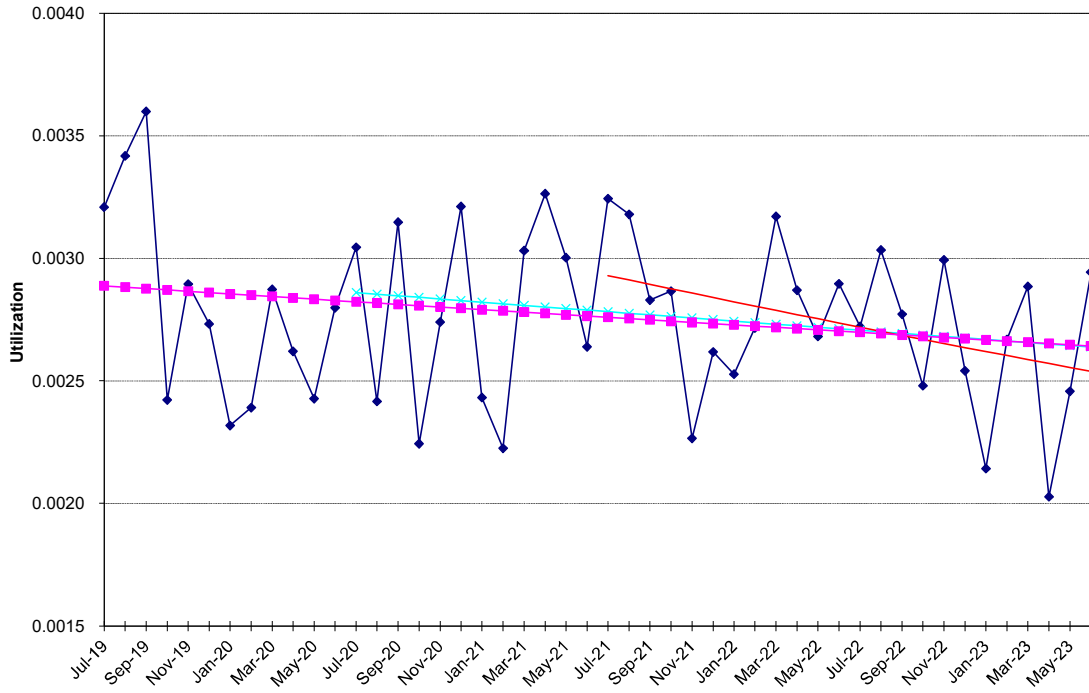
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.7%	8.5%	5.6%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.2%	13.5%	11.0%

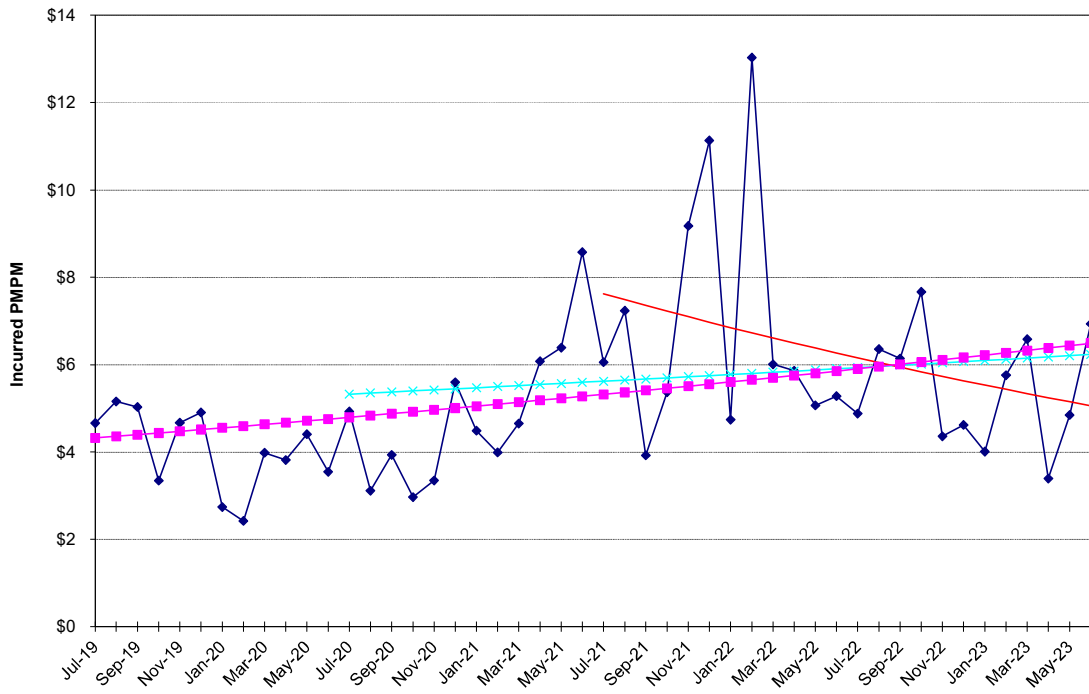
Hospital Inpatient - Maternity



Hospital Inpatient - Maternity



Hospital Inpatient - Maternity



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

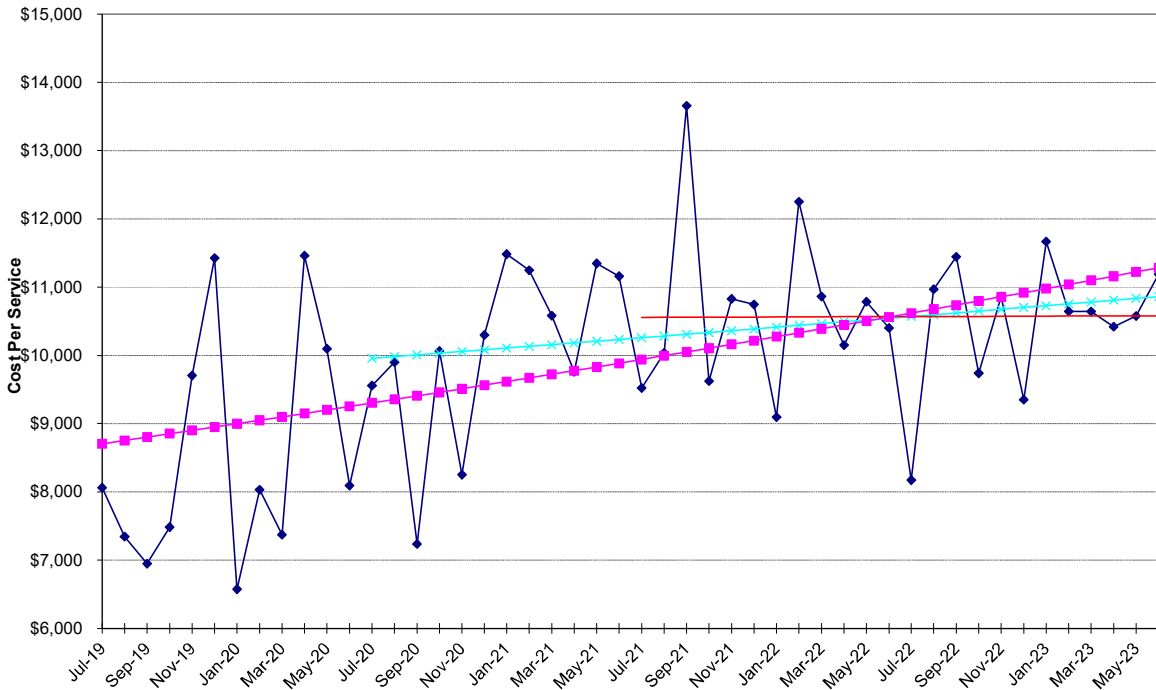
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-5.0%	0.1%	-4.9%

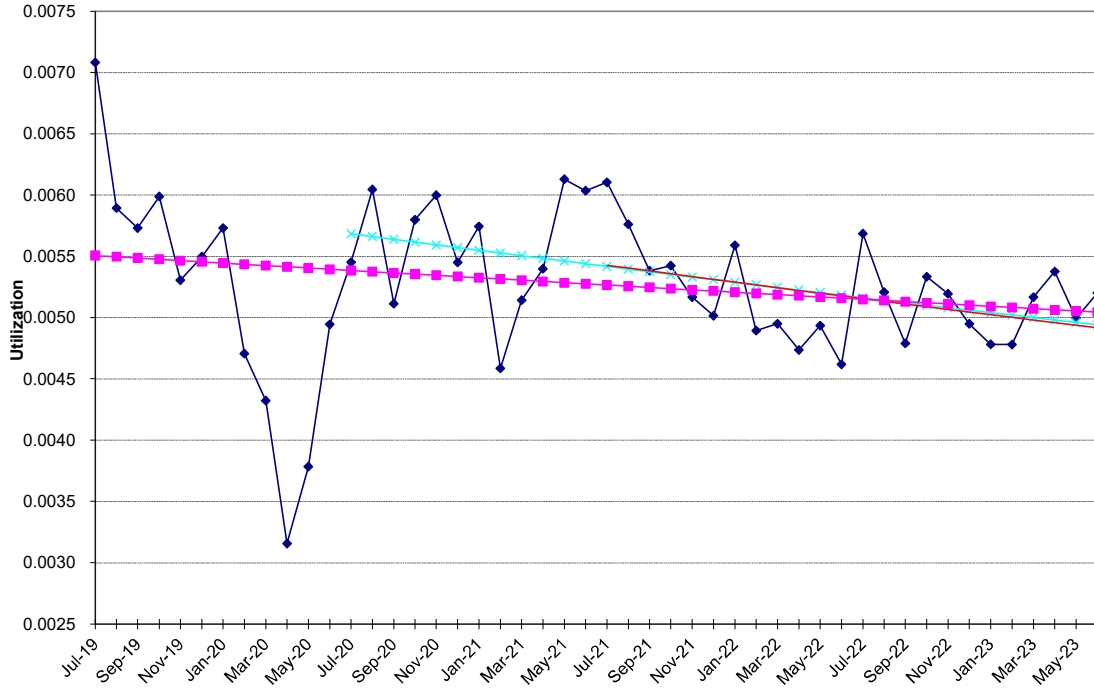
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-4.7%	3.0%	-1.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.2%	6.8%	4.5%

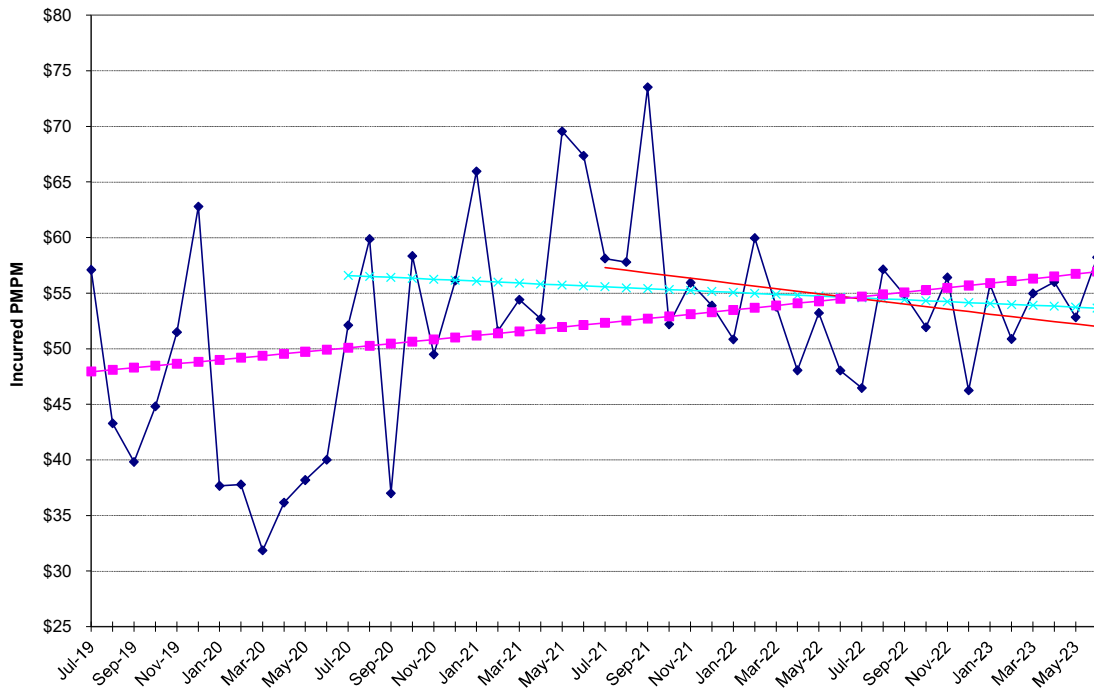
Hospital Inpatient - Medical / Surgical



Hospital Inpatient - Medical / Surgical



Hospital Inpatient - Medical / Surgical



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

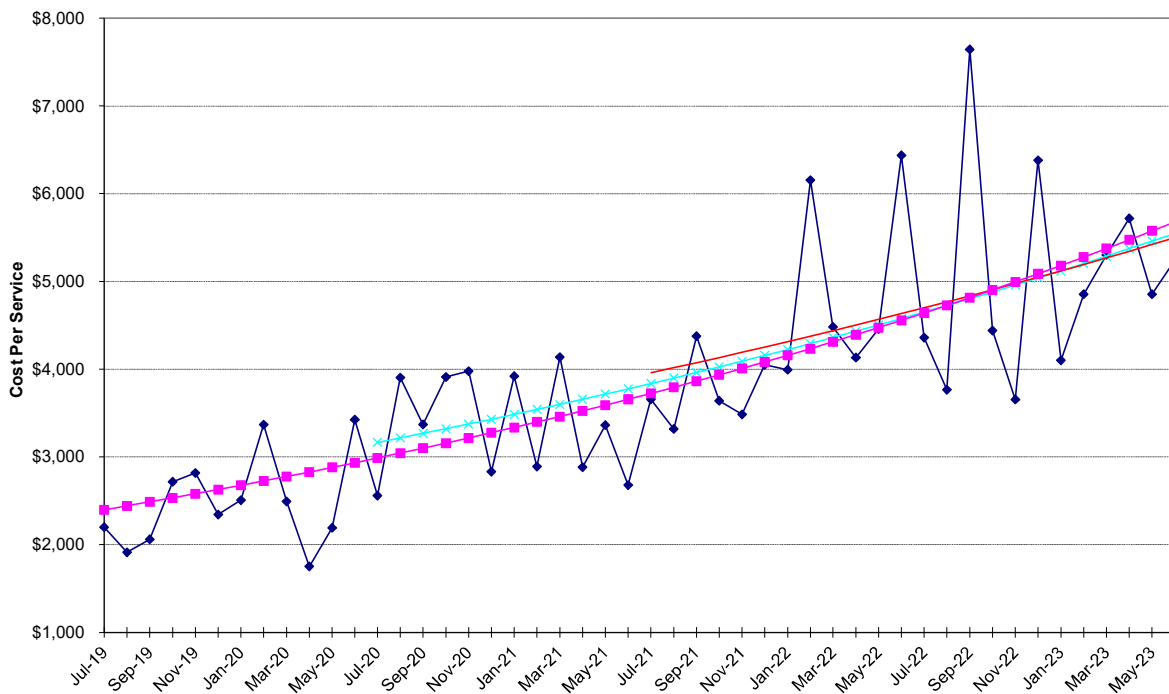
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-8.9%	18.7%	8.2%

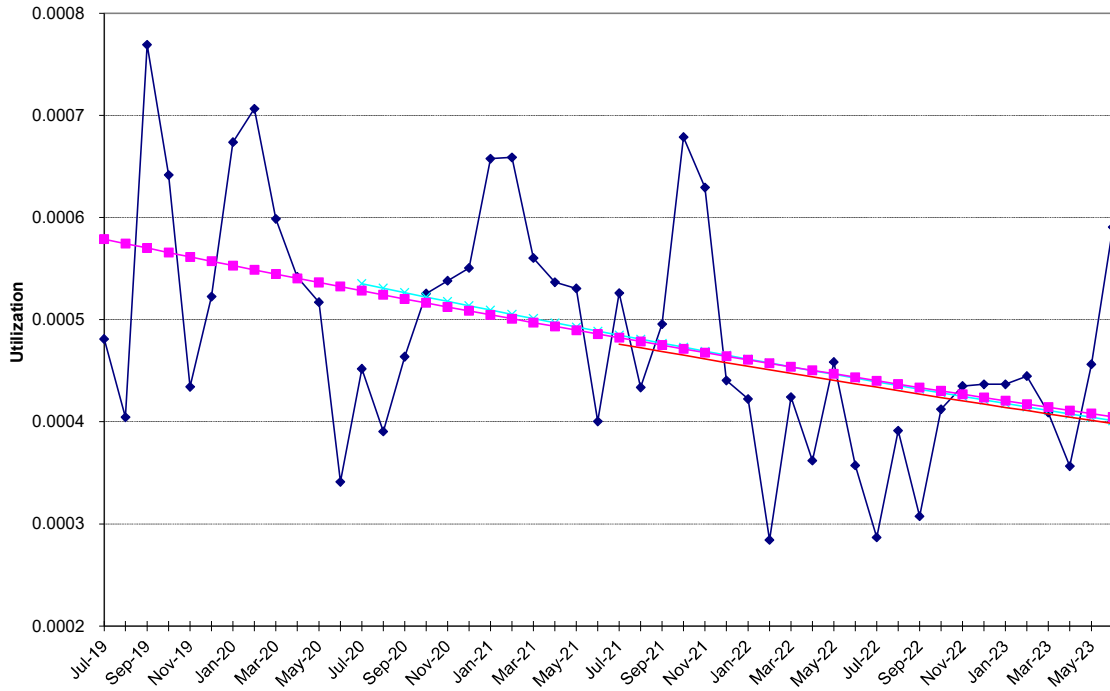
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.4%	21.2%	9.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-8.7%	24.6%	13.8%

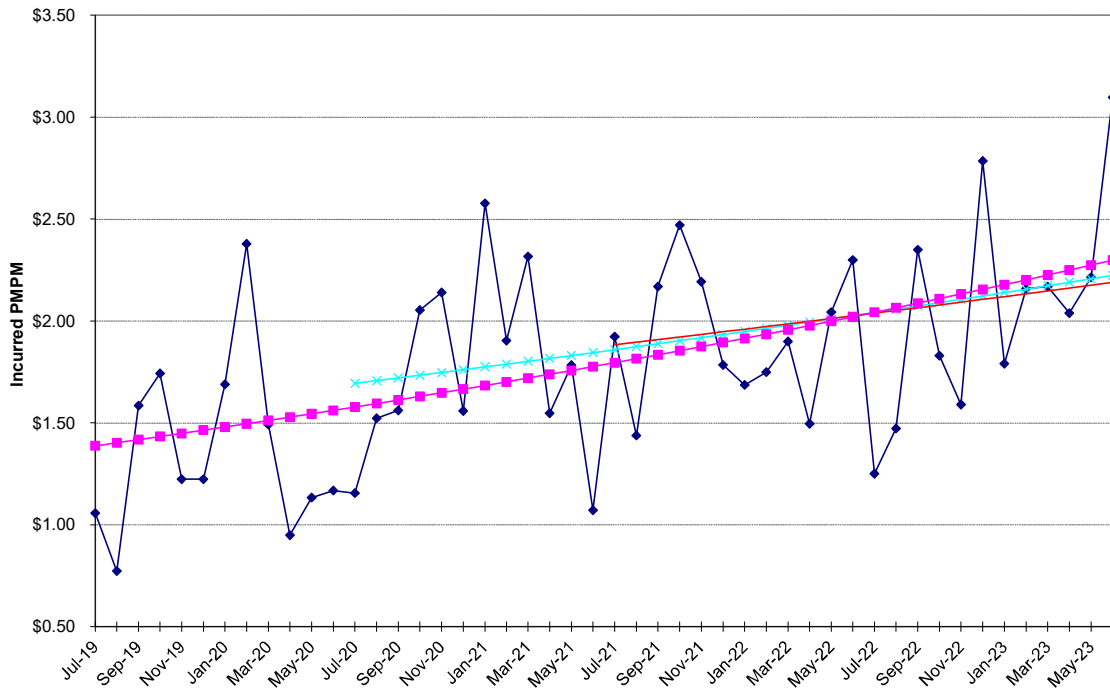
Hospital Inpatient - Psychiatric / Substance Abuse



Hospital Inpatient - Psychiatric / Substance Abuse



Hospital Inpatient - Psychiatric / Substance Abuse



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

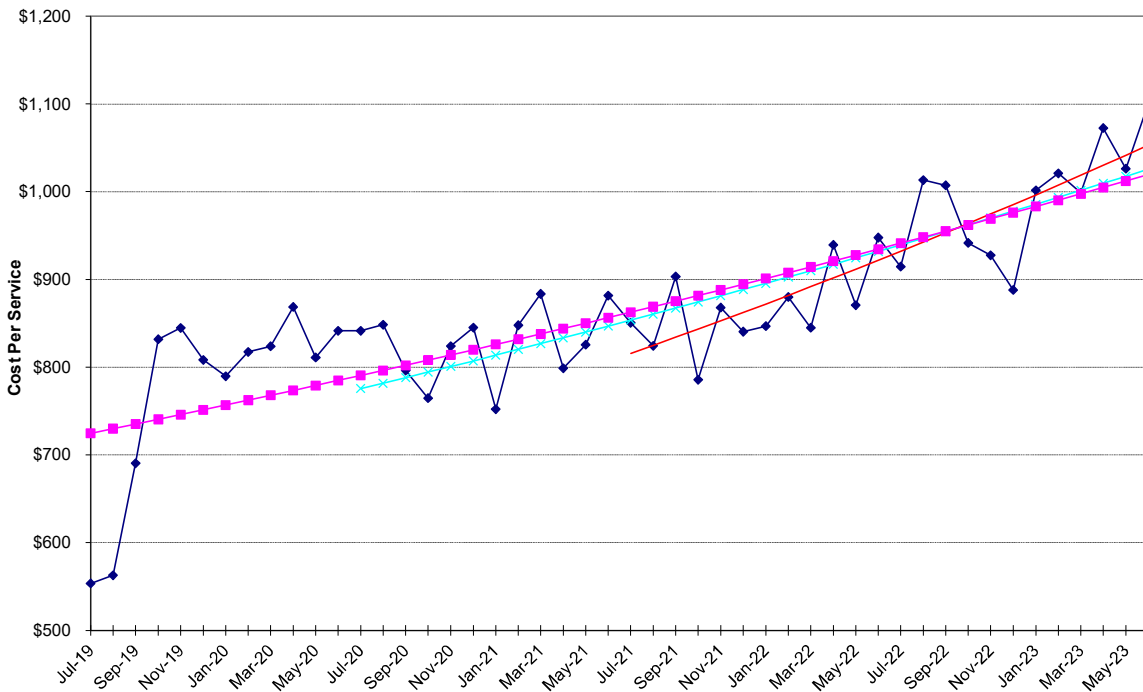
Emergency Room

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.3%	14.3%	11.6%

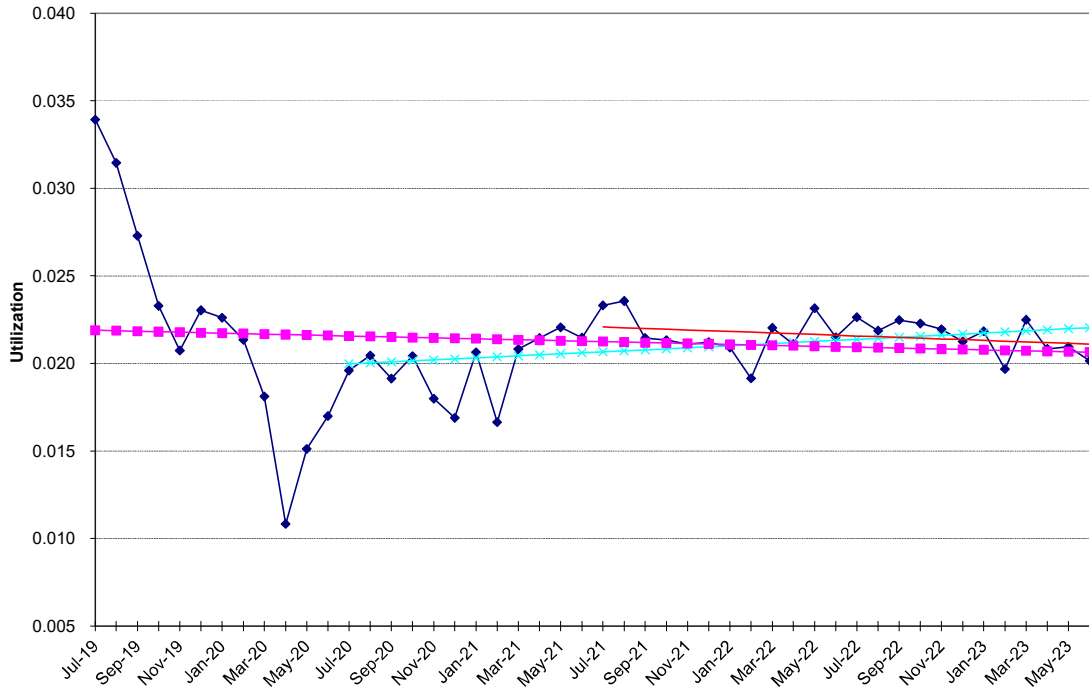
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.4%	10.1%	13.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.5%	9.1%	7.5%

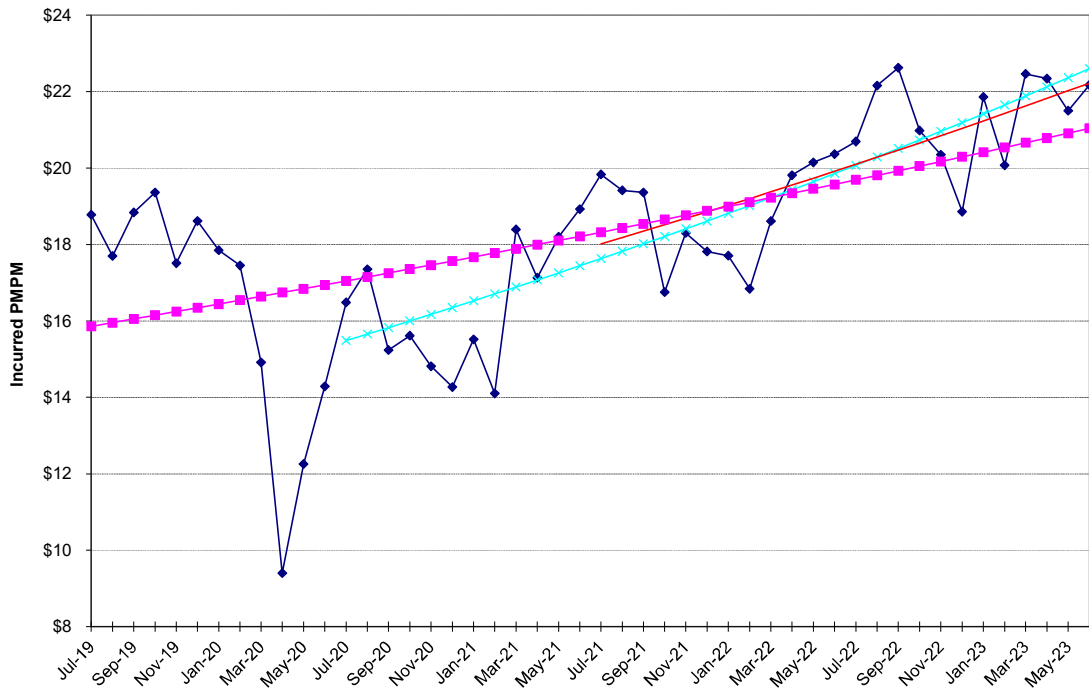
Hospital Outpatient - Emergency Room



Hospital Outpatient - Emergency Room



Hospital Outpatient - Emergency Room



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

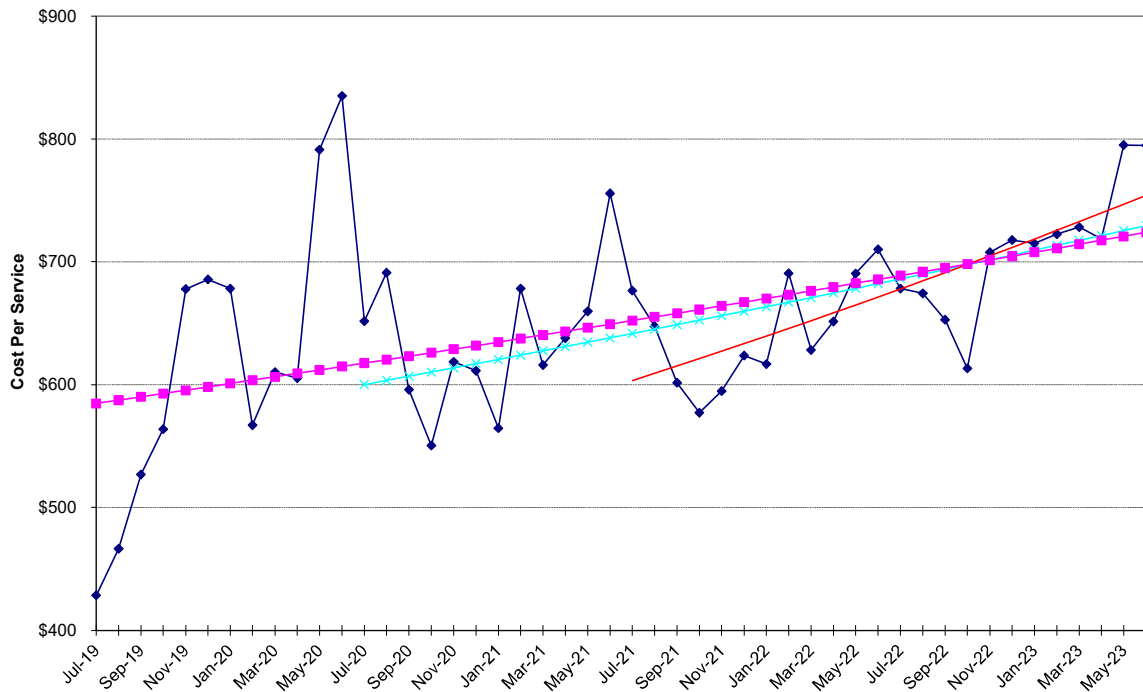
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.1%	12.4%	20.3%

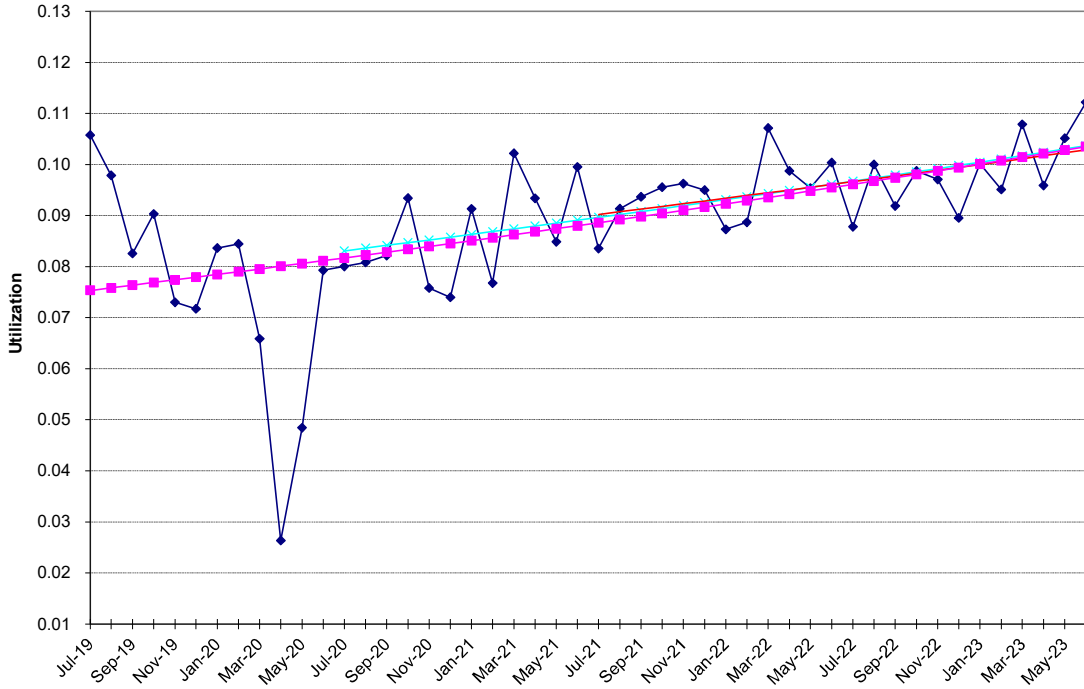
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.9%	6.9%	15.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
8.5%	5.6%	14.5%

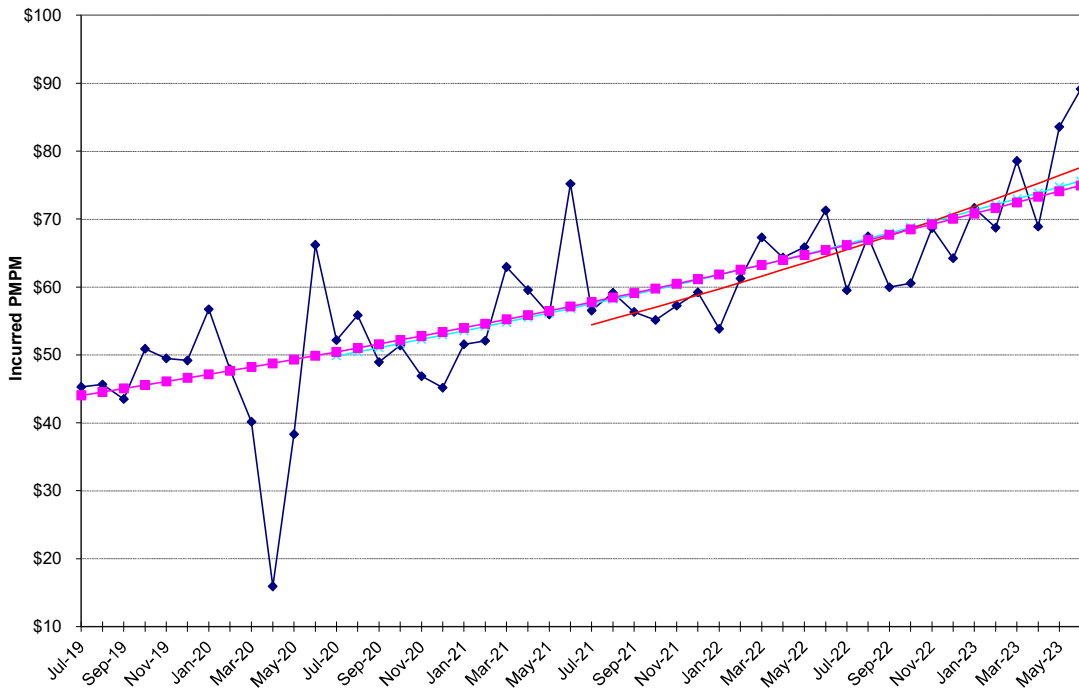
Hospital Outpatient - Medical / Surgical



Hospital Outpatient - Medical / Surgical



Hospital Outpatient - Medical / Surgical



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

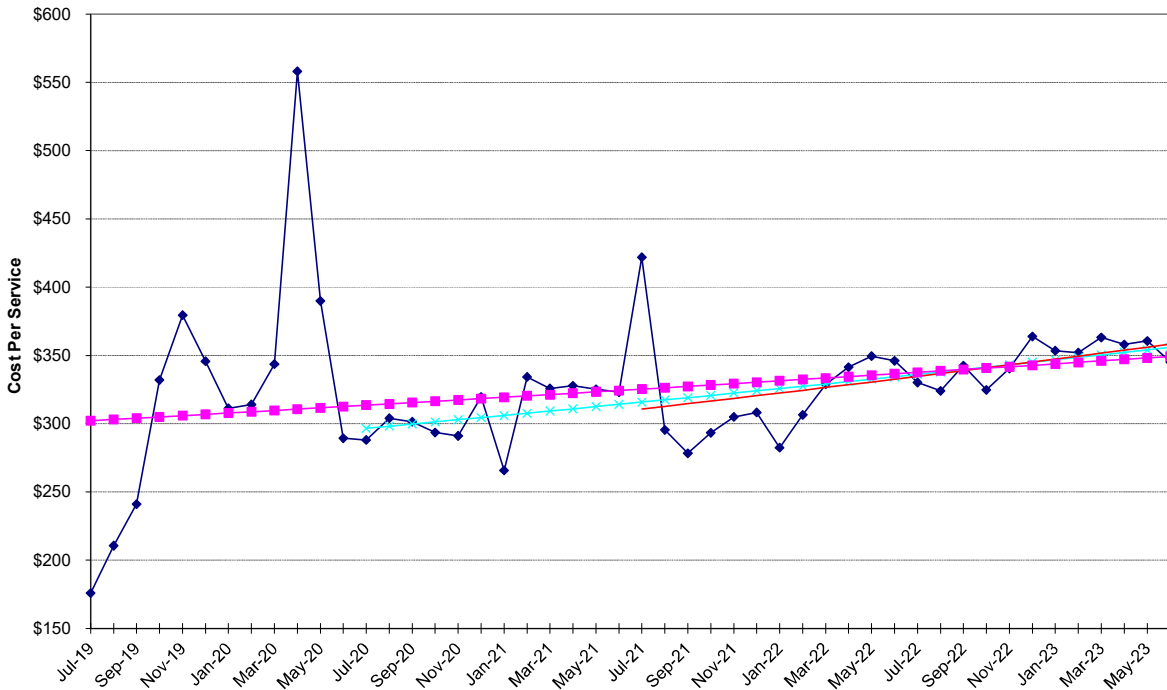
Other Services

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-5.5%	7.7%	1.8%

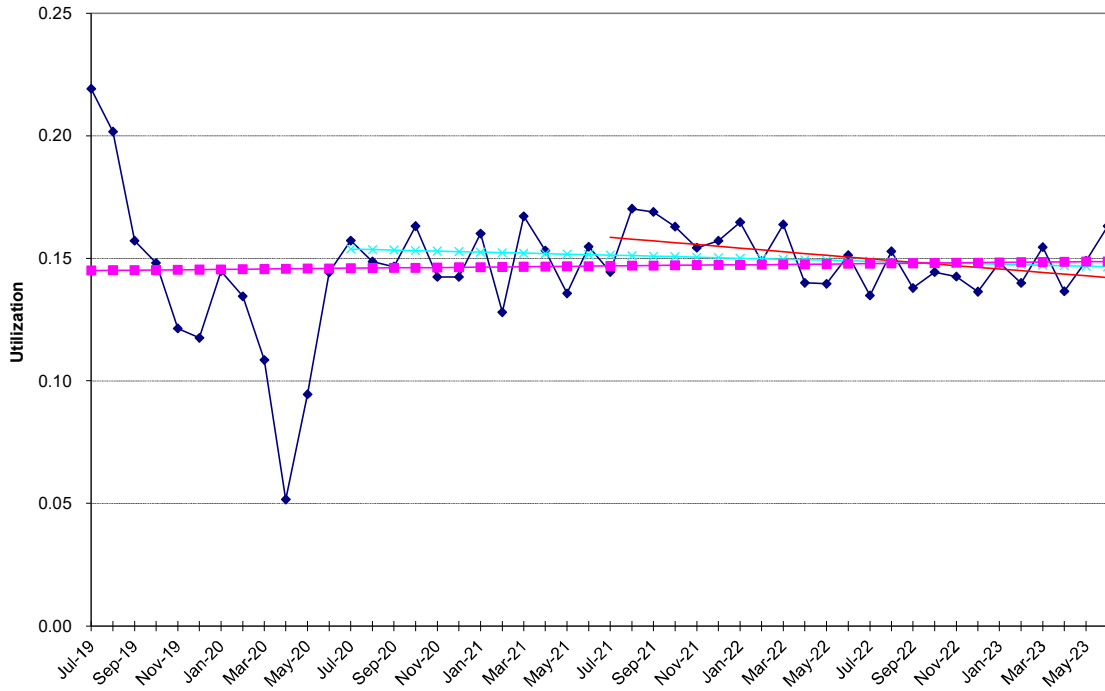
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.6%	6.4%	4.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.6%	3.8%	4.4%

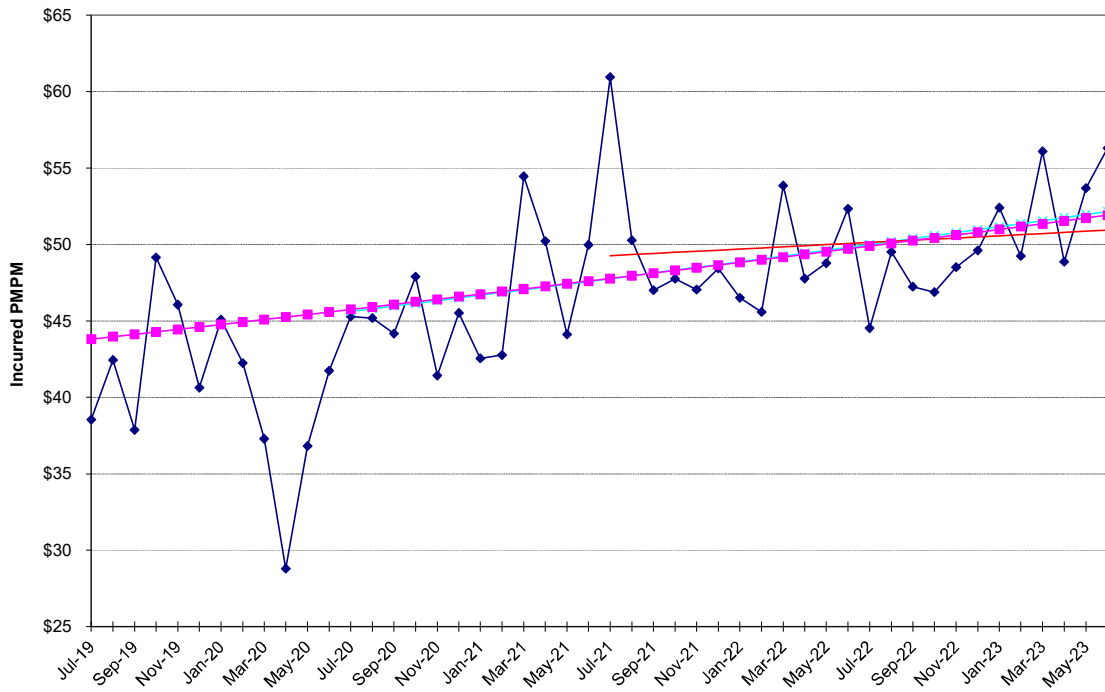
Hospital Outpatient - Other Services



Hospital Outpatient - Other Services



Hospital Outpatient - Other Services



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

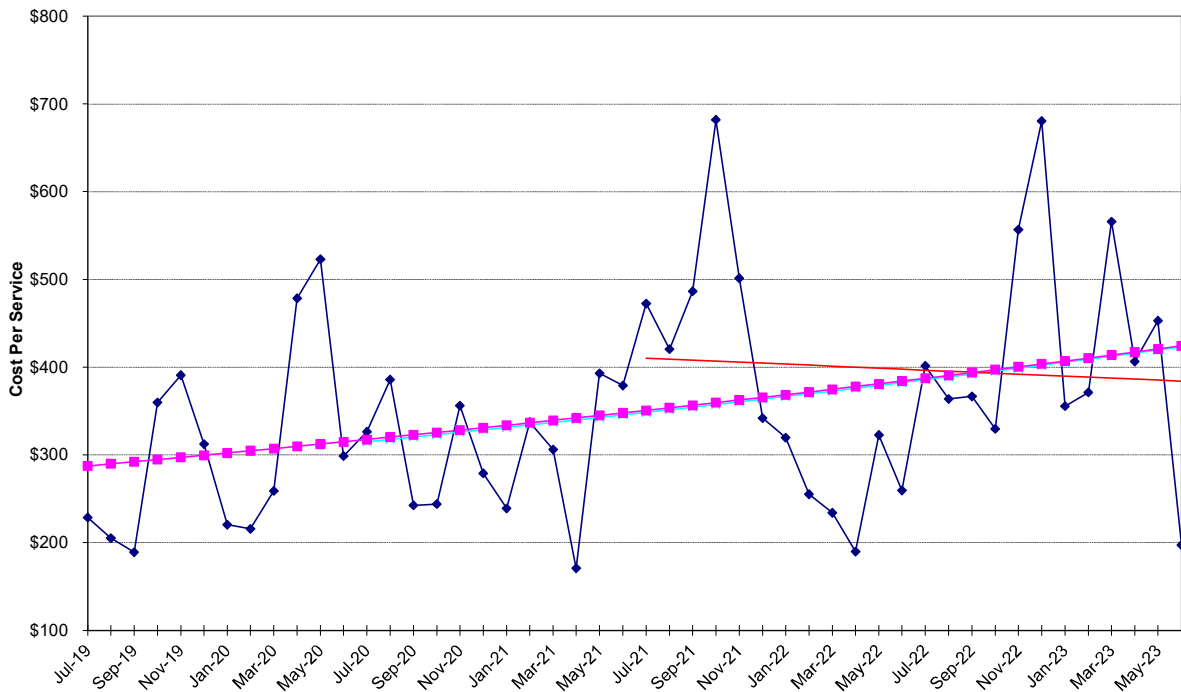
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
17.6%	-3.4%	13.6%

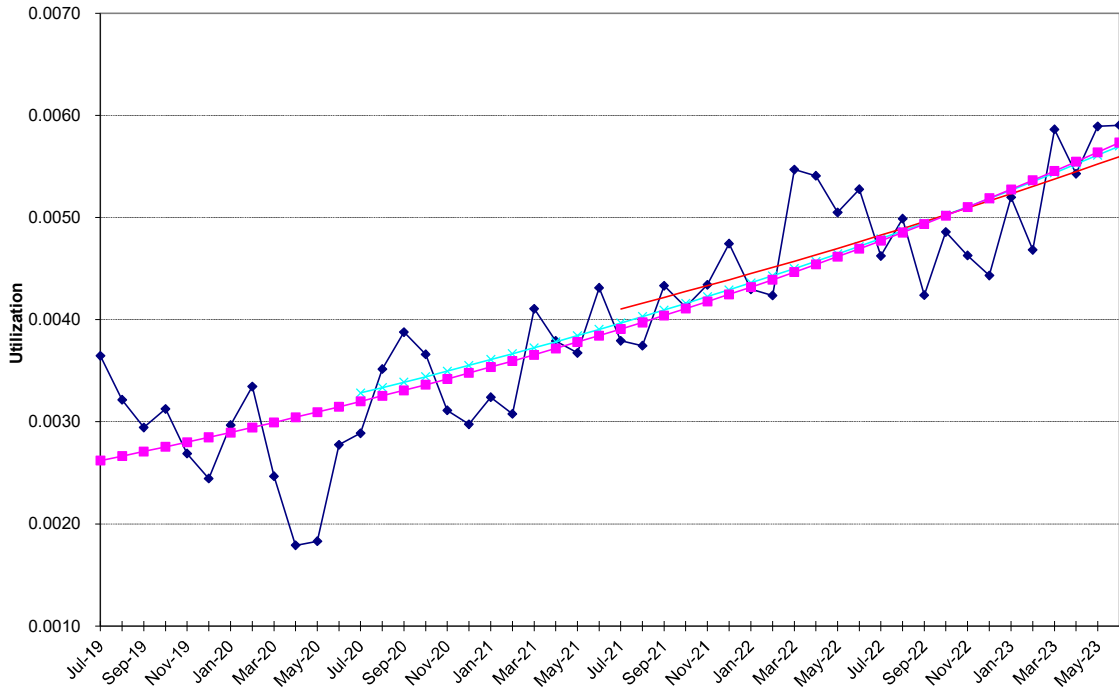
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
20.8%	10.6%	33.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
22.1%	10.4%	34.9%

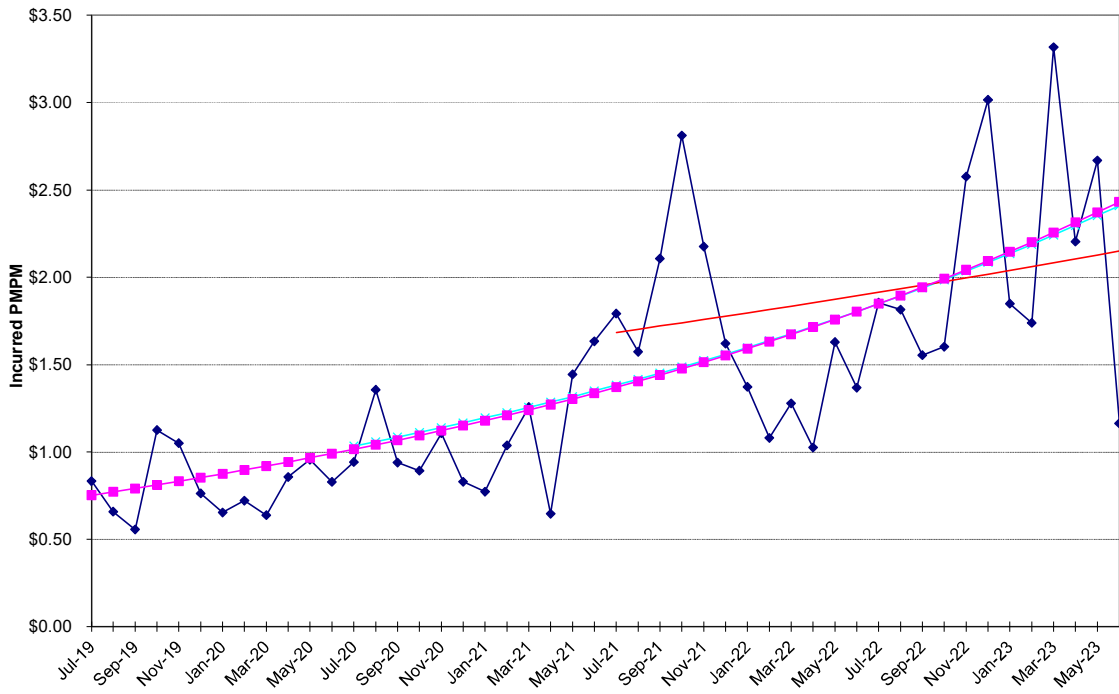
Hospital Outpatient - Psychiatric / Substance Abuse



Hospital Outpatient - Psychiatric / Substance Abuse



Hospital Outpatient - Psychiatric / Substance Abuse



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

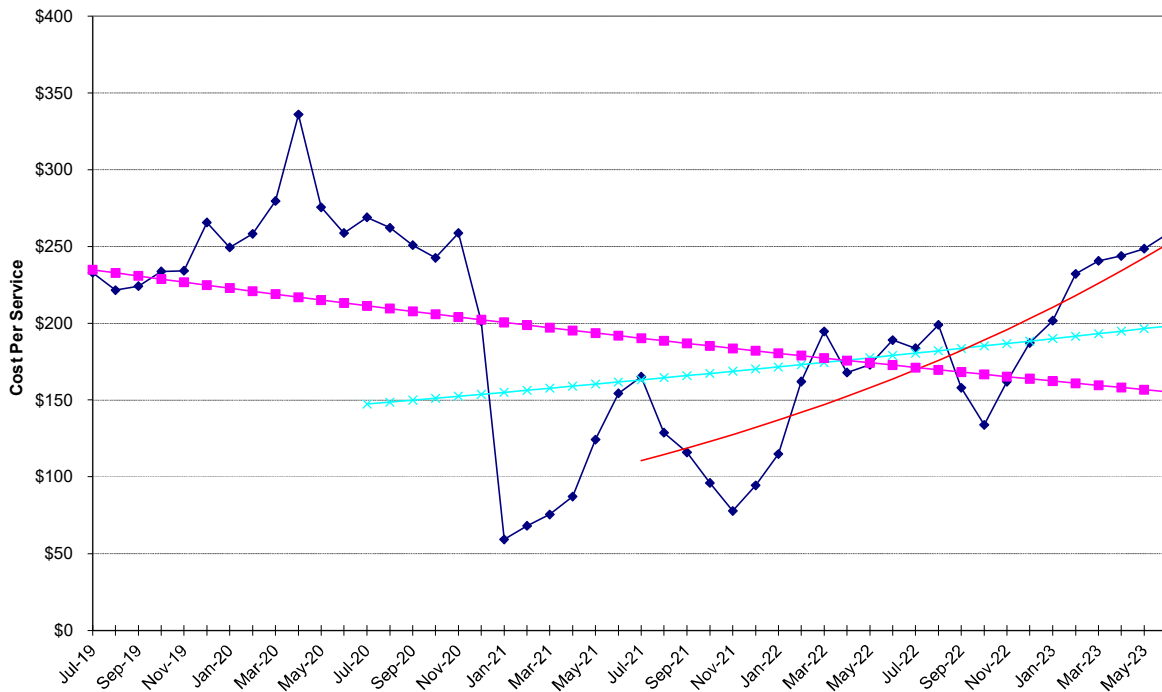
Anesthesia

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-32.3%	53.6%	3.9%

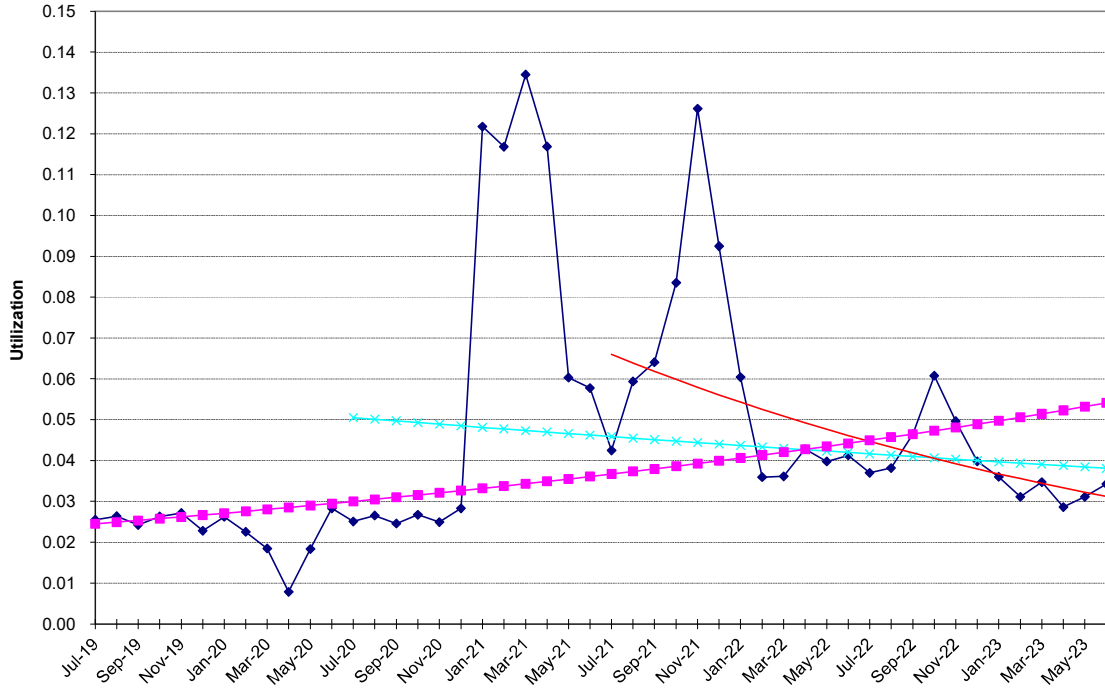
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.2%	10.7%	0.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
22.4%	-10.0%	10.2%

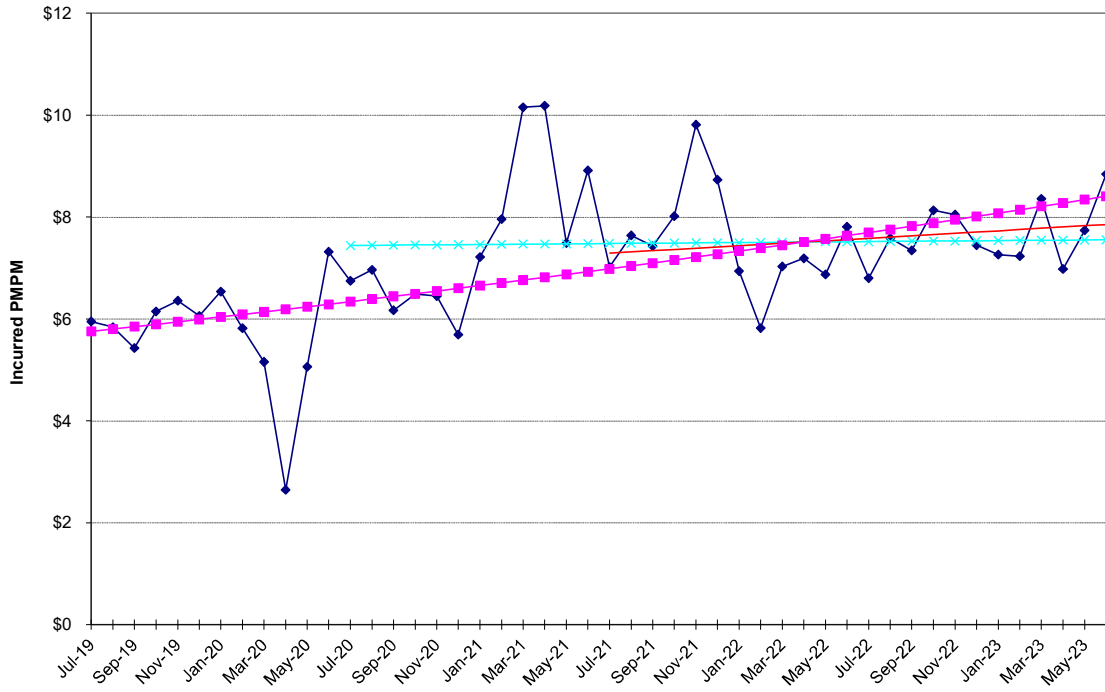
Physician Services - Anesthesia



Physician Services - Anesthesia



Physician Services - Anesthesia



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

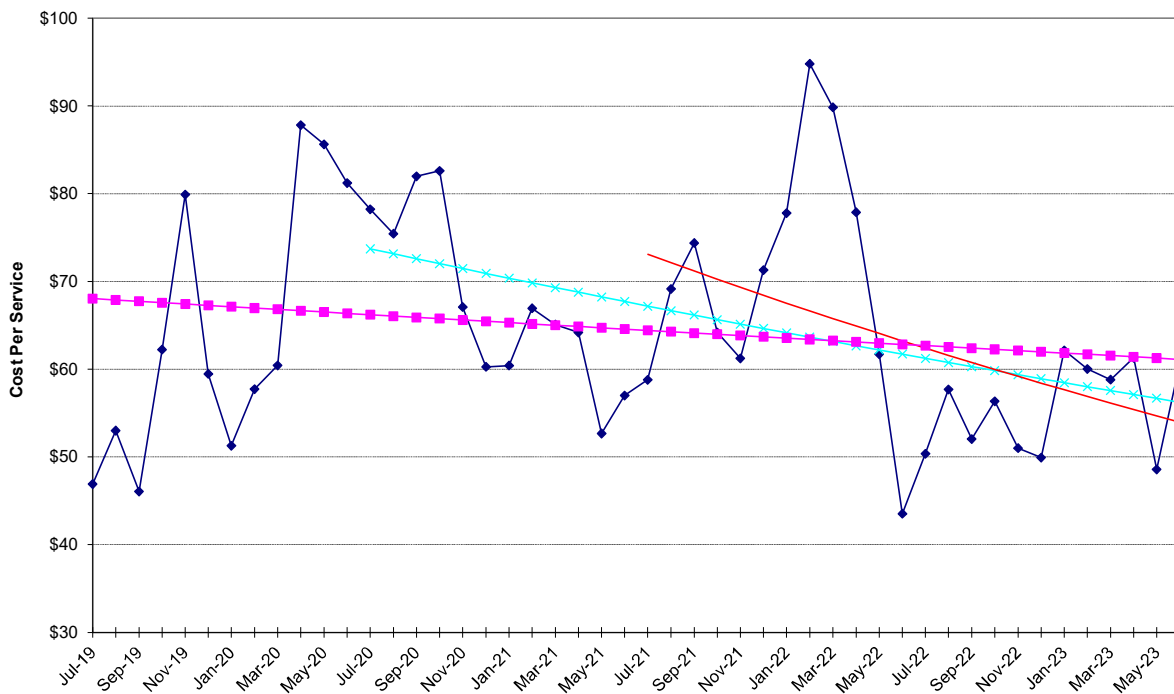
Chemotherapy / Radiation

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.1%	-14.6%	-12.8%

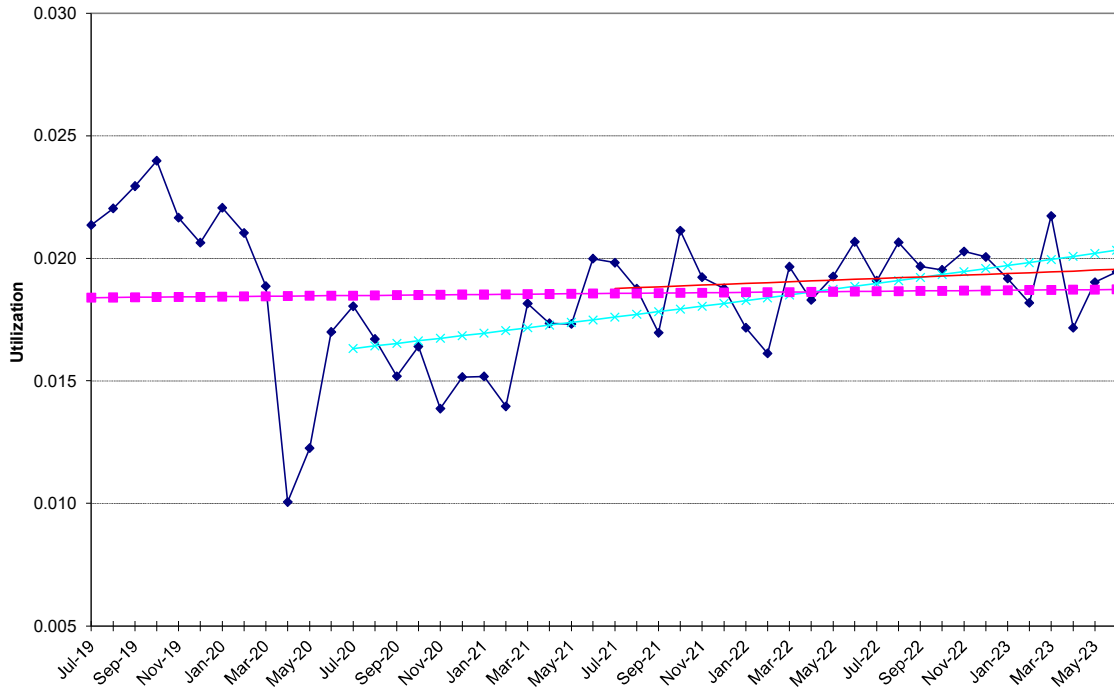
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.8%	-8.9%	-1.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.5%	-2.7%	-2.2%

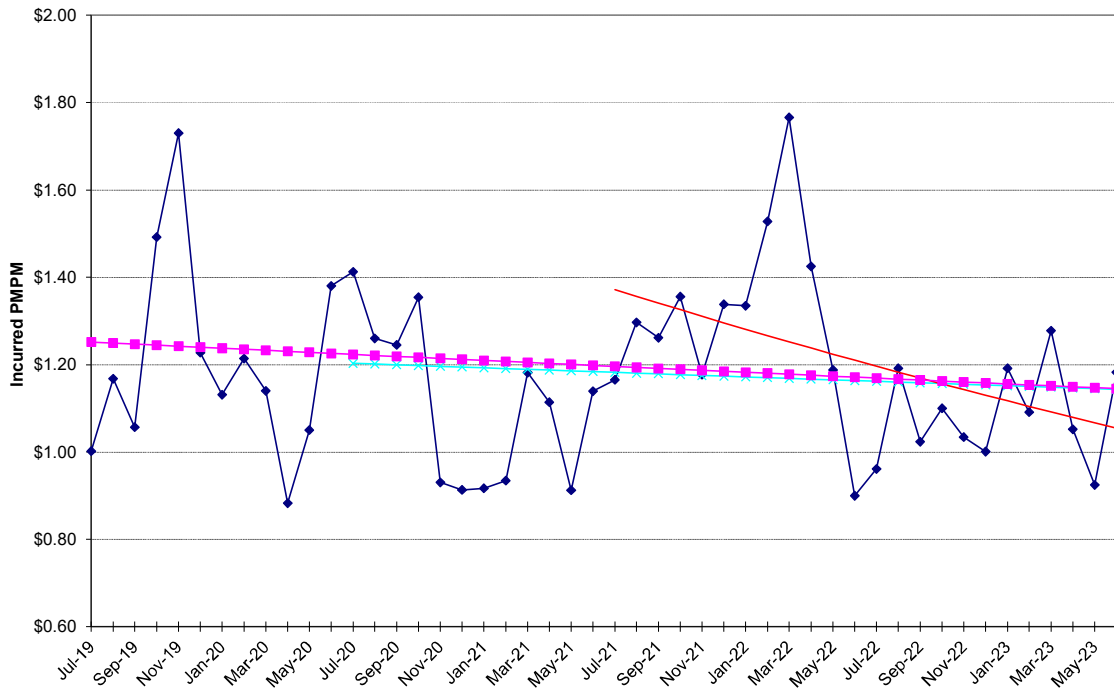
Physician Services - Chemotherapy Radiation



Physician Services - Chemotherapy Radiation



Physician Services - Chemotherapy Radiation



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

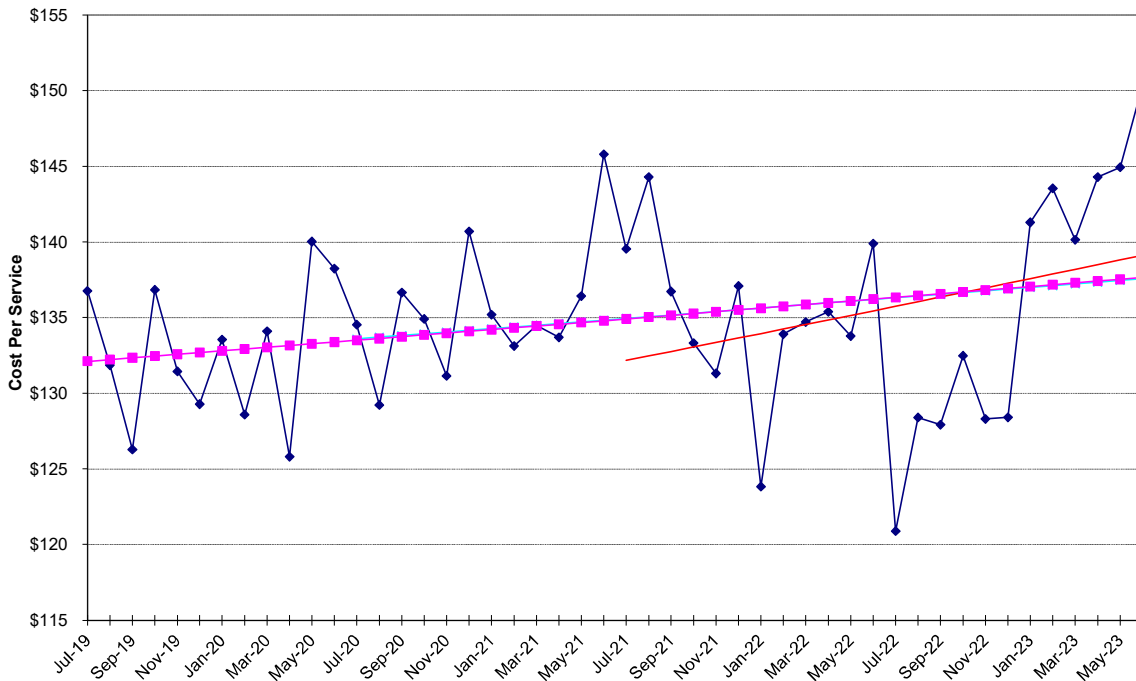
Emergency Room

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

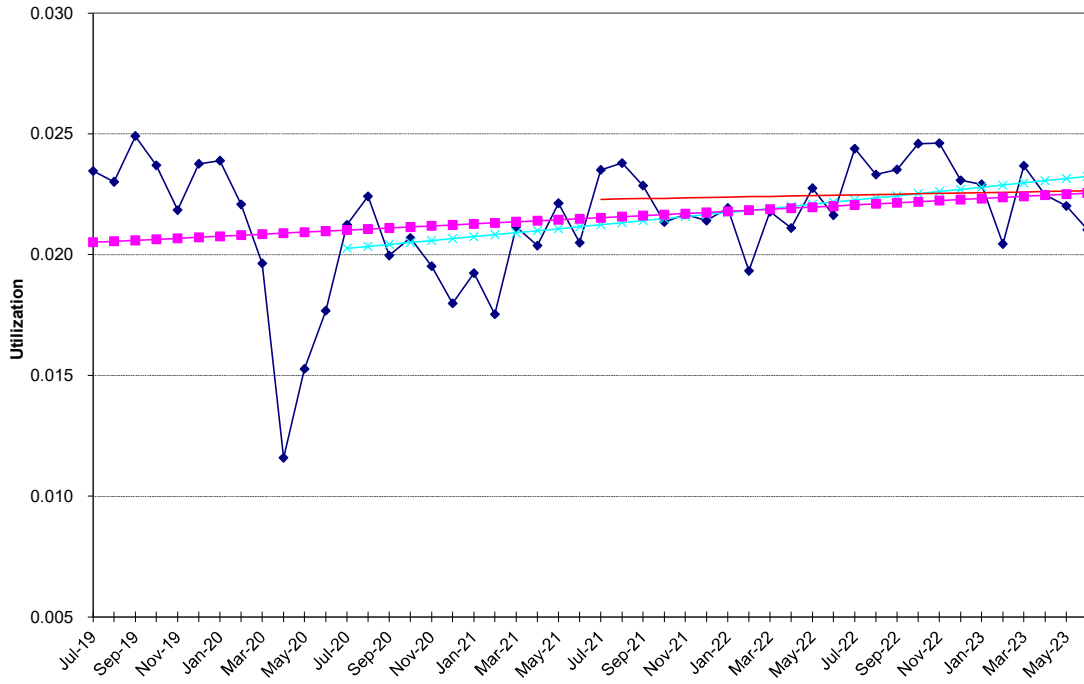
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.8%	1.0%	5.9%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.5%	1.1%	3.5%

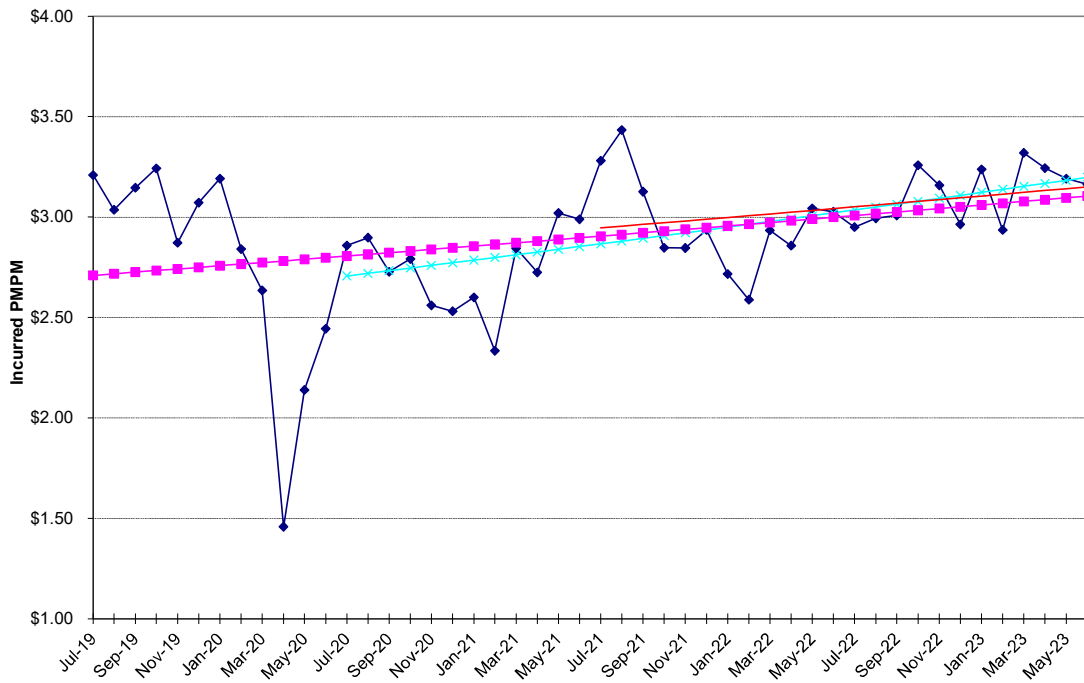
Physician Services - Emergency Room



Physician Services - Emergency Room



Physician Services - Emergency Room



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

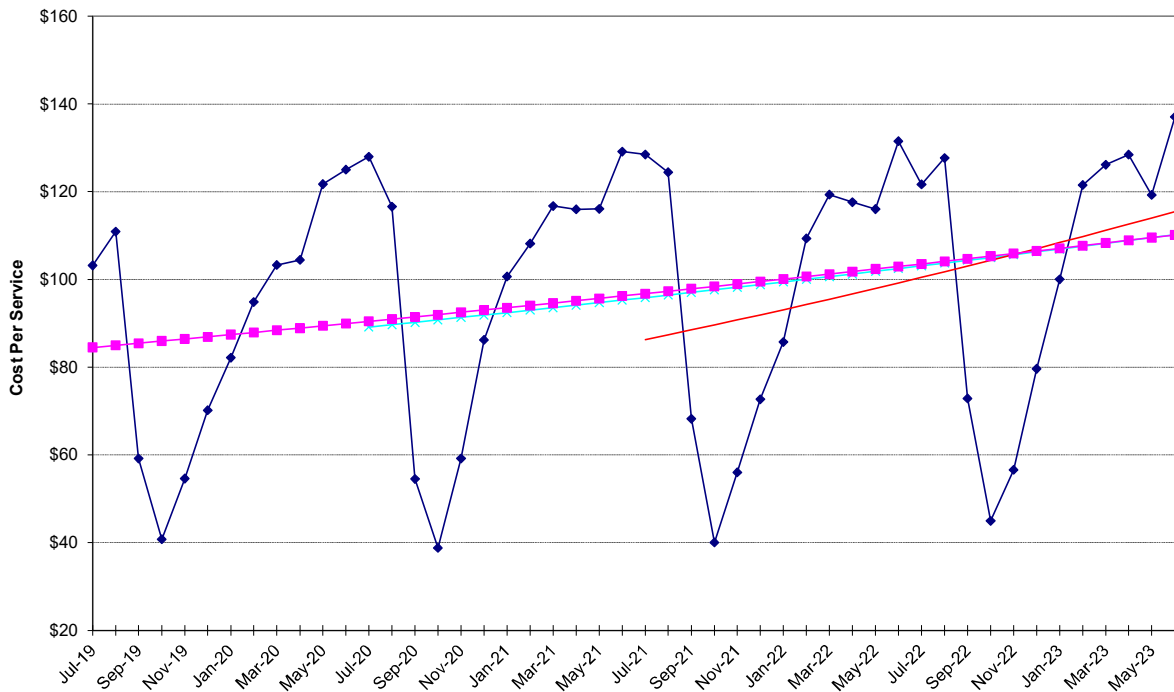
Immunizations / Injections / Allergy

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-21.0%	16.4%	-8.0%

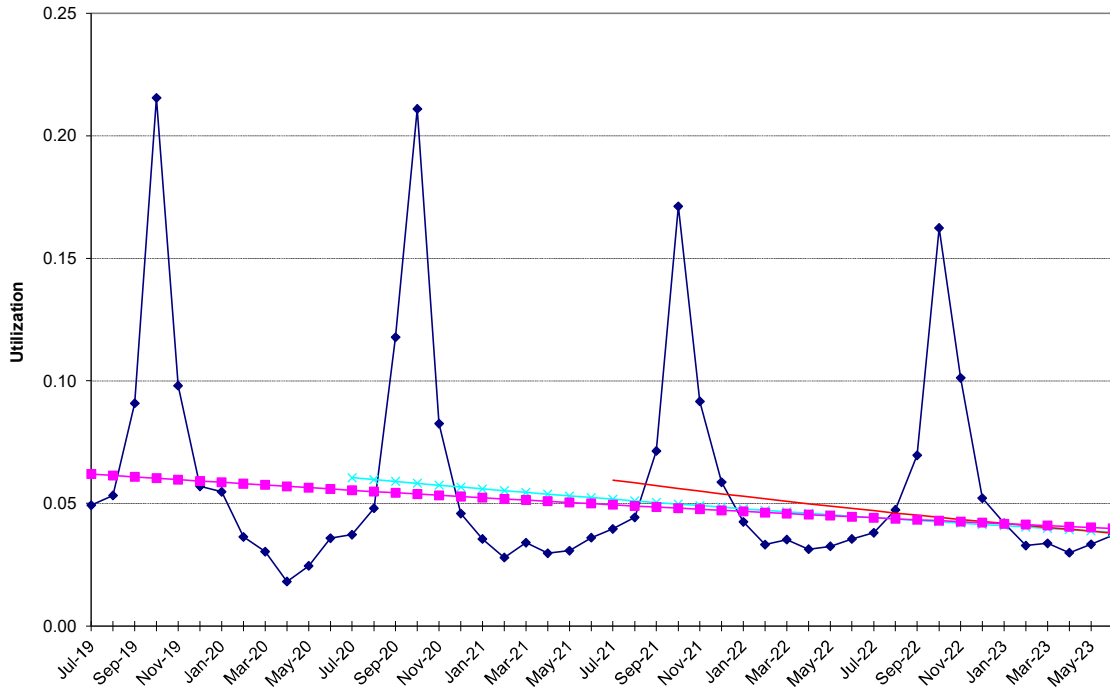
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-14.5%	7.6%	-8.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-10.7%	7.0%	-4.4%

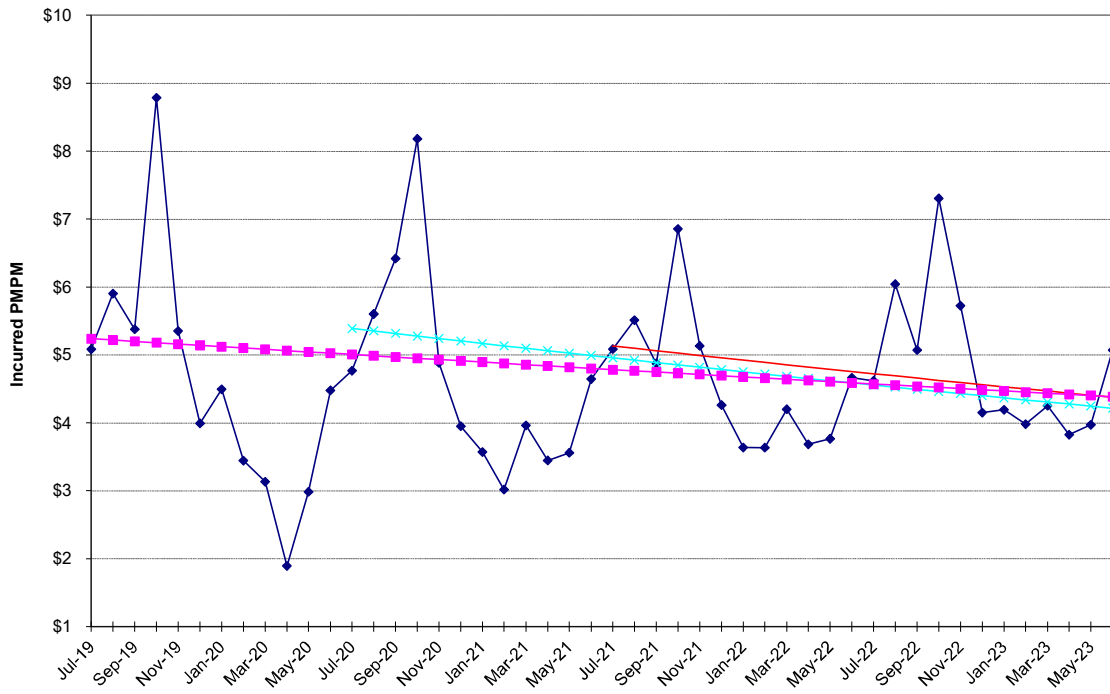
Physician Services - Immunizations / Allergy



Physician Services - Immunizations / Allergy



Physician Services - Immunizations / Allergy



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

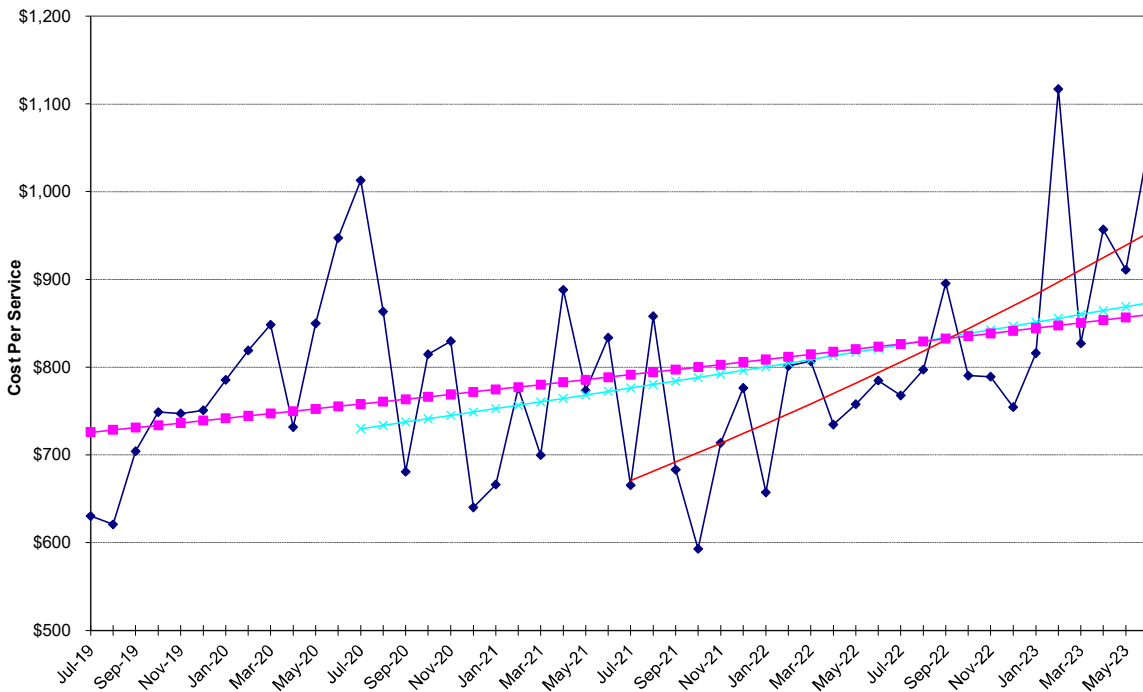
Inpatient Surgery

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-5.3%	20.1%	13.8%

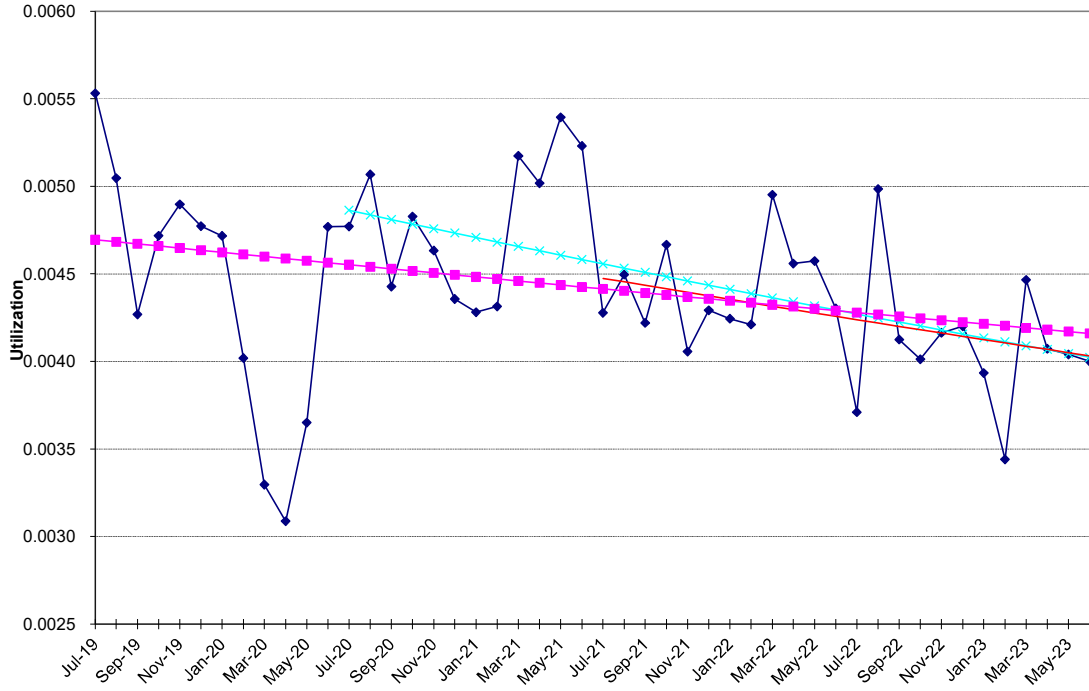
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-6.3%	6.3%	-0.3%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.0%	4.4%	1.2%

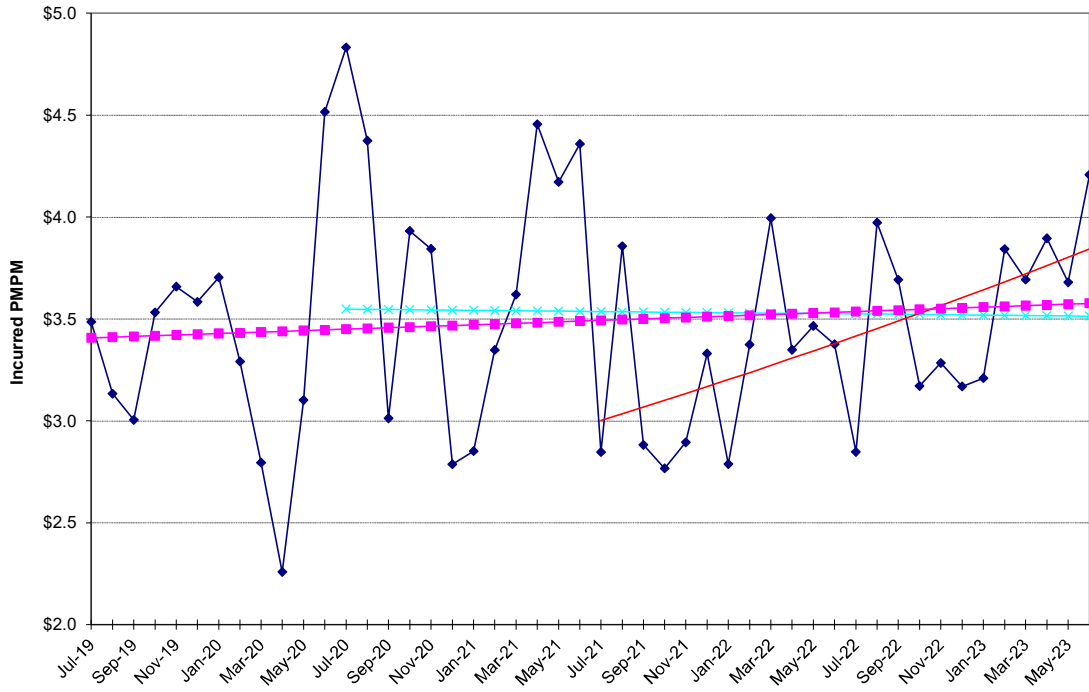
Physician Services - Inpatient Surgery



Physician Services - Inpatient Surgery



Physician Services - Inpatient Surgery



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

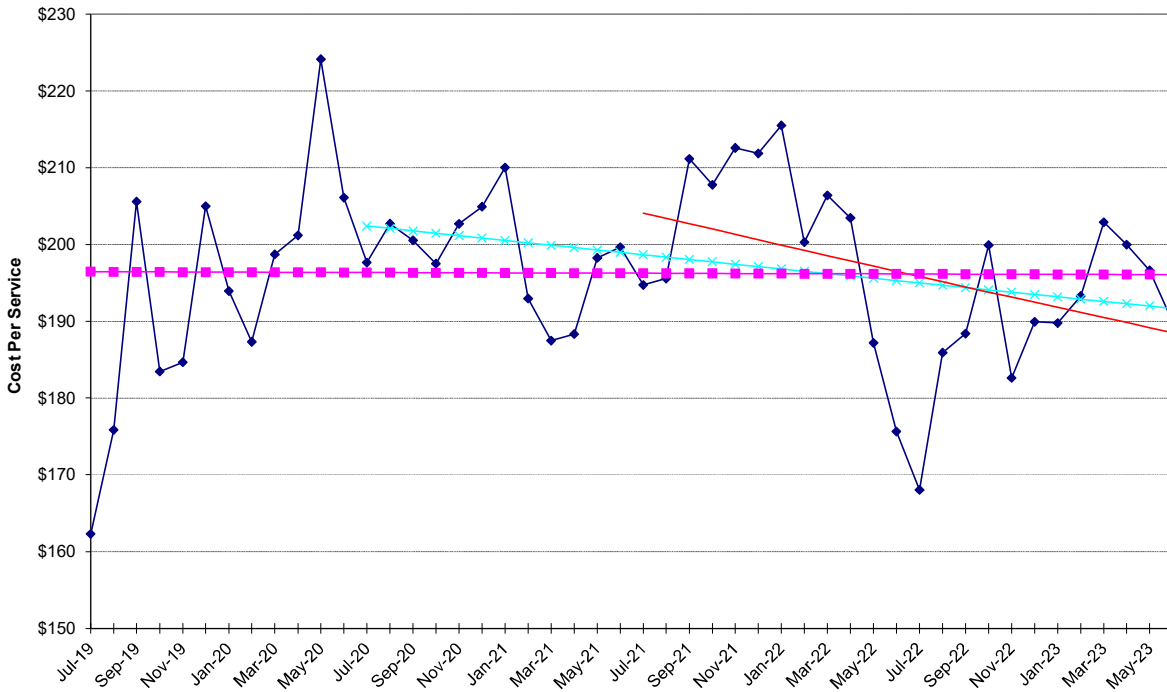
Inpatient Visits

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-7.9%	-4.1%	-11.7%

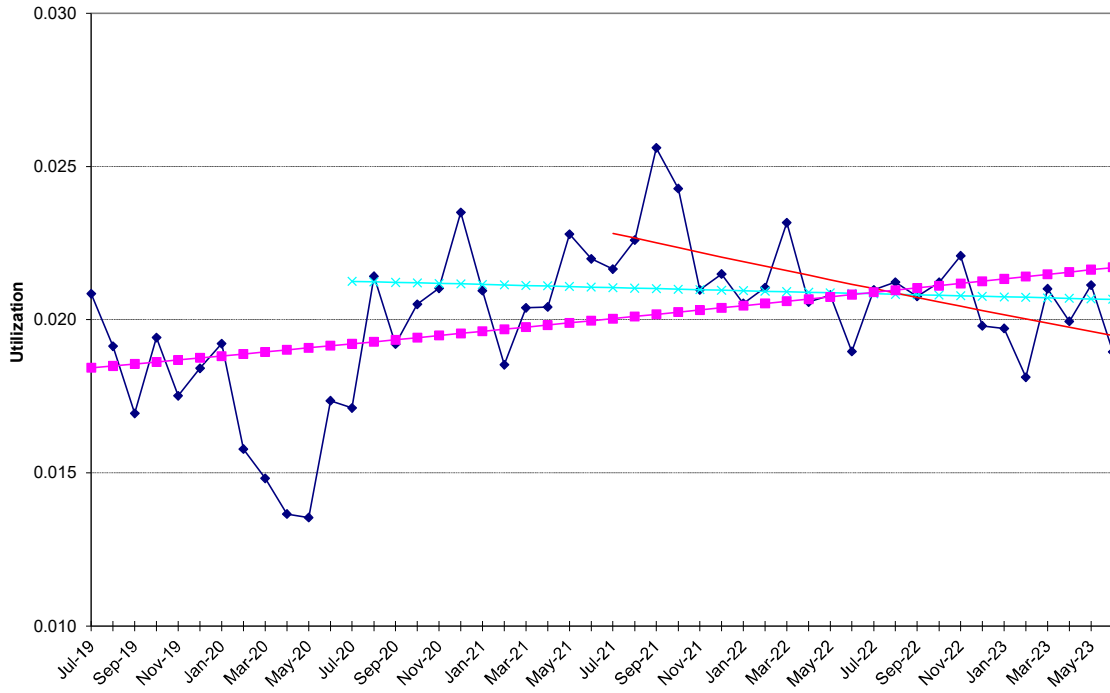
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.0%	-1.8%	-2.8%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.3%	0.0%	4.2%

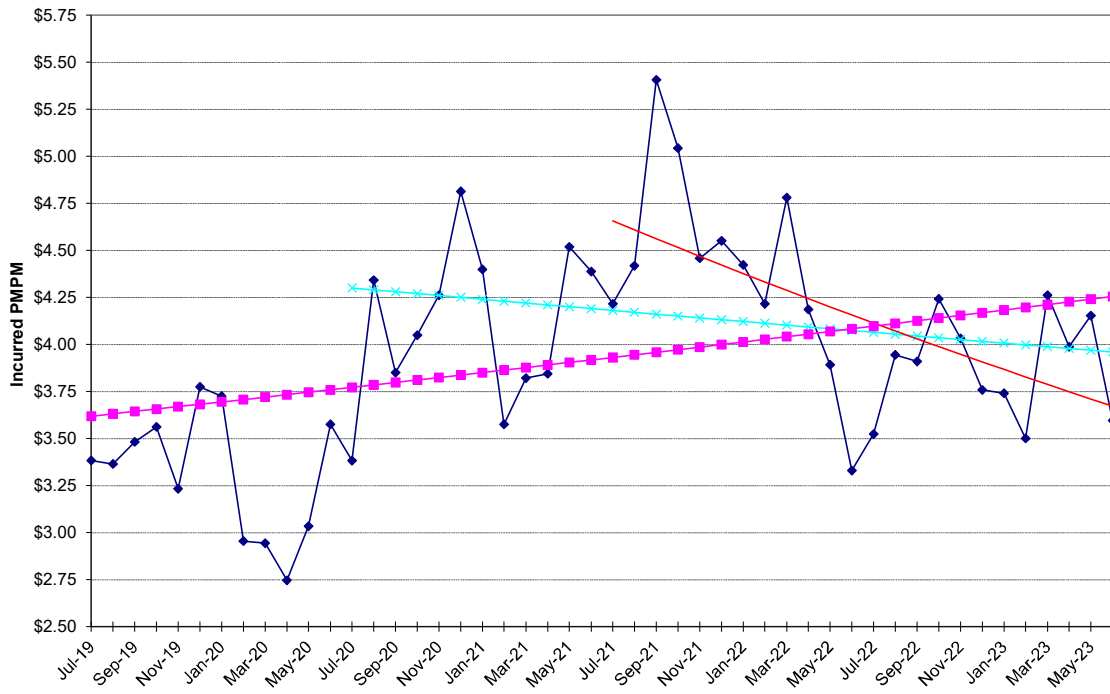
Physician Services - Inpatient Visits



Physician Services - Inpatient Visits



Physician Services - Inpatient Visits



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

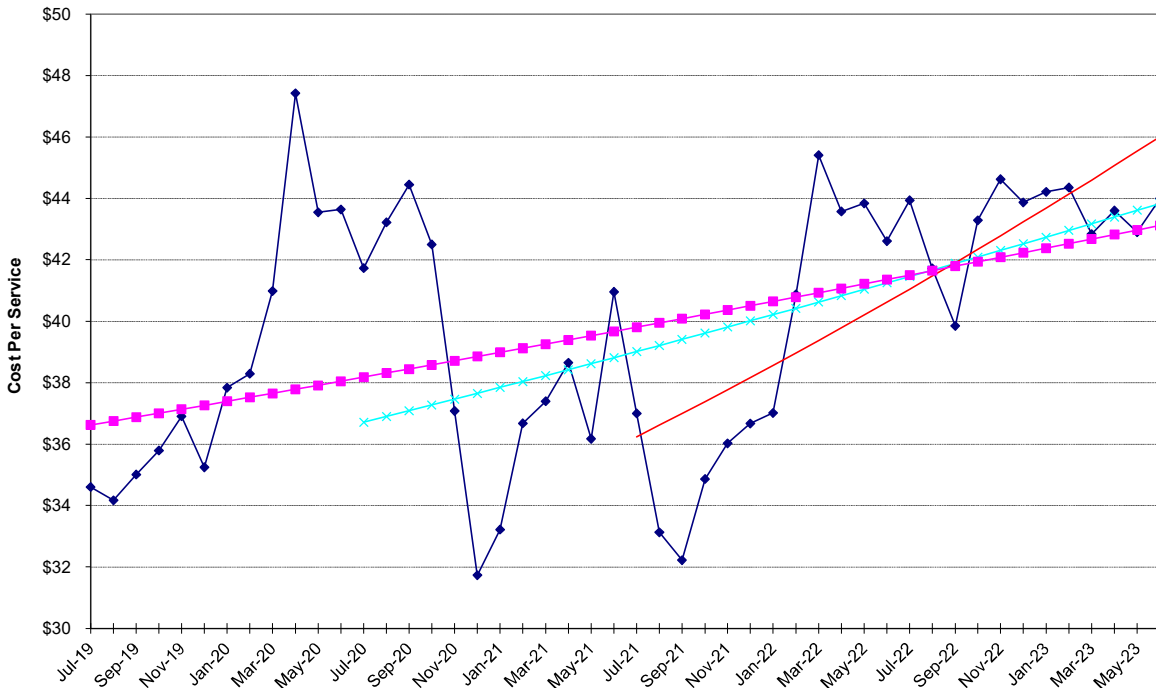
Lab & Pathology

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-10.9%	13.3%	0.9%

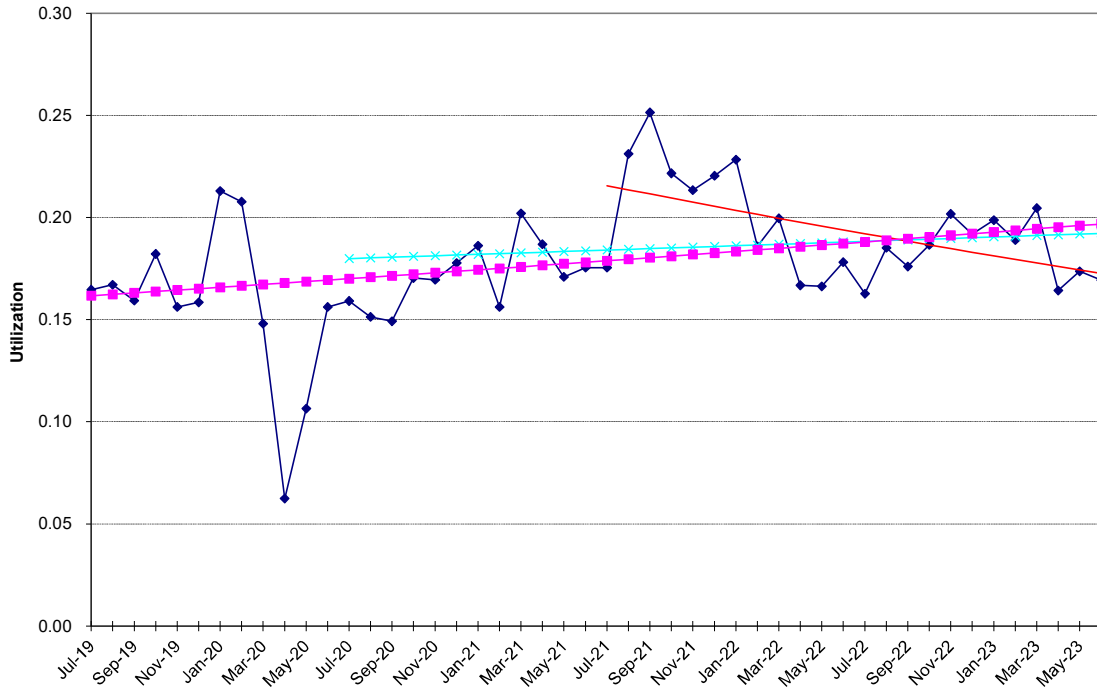
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.3%	6.3%	8.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.2%	4.3%	9.6%

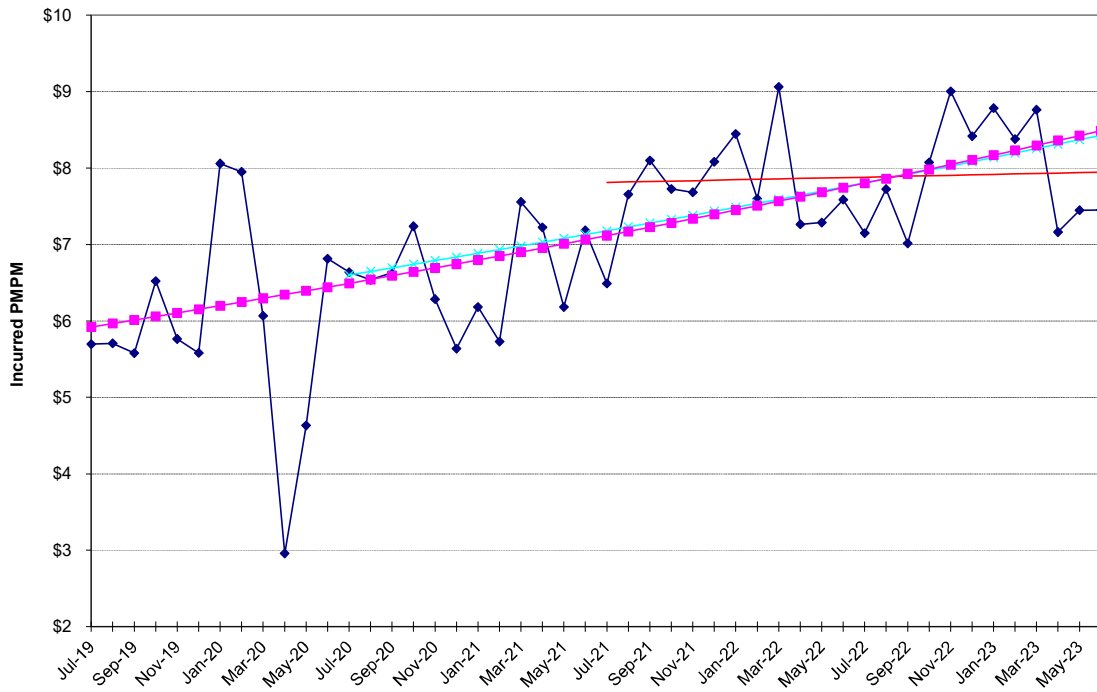
Physician Services - Lab & Pathology



Physician Services - Lab & Pathology



Physician Services - Lab & Pathology



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

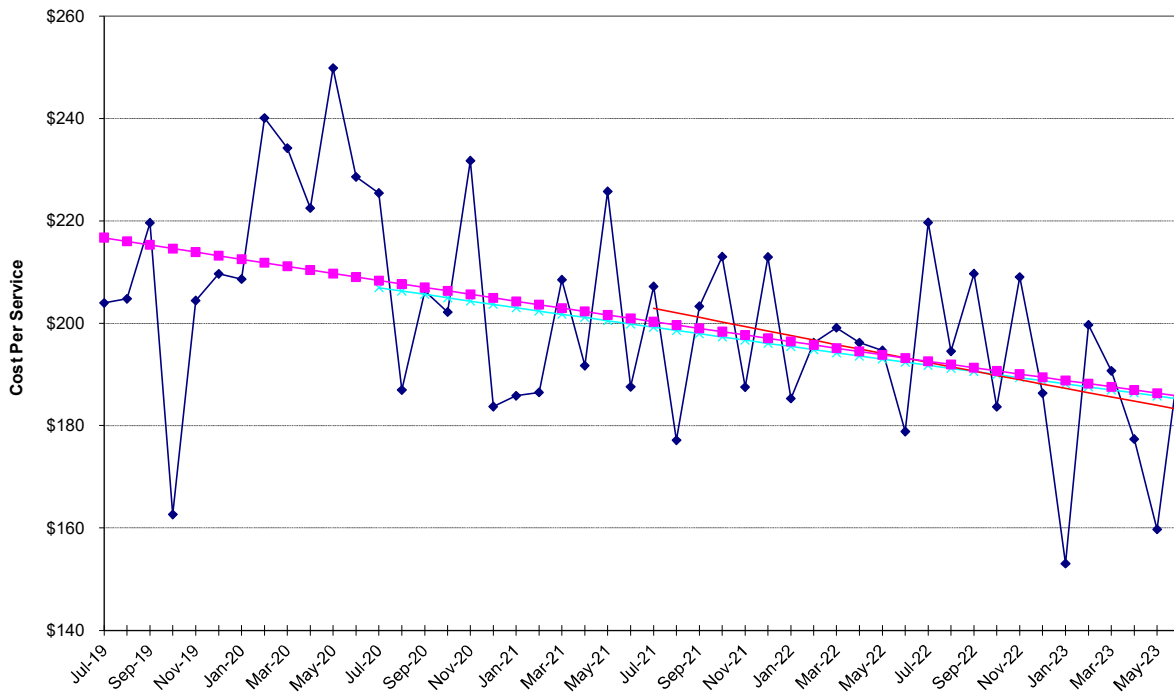
Maternity

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.0%	-5.2%	-5.2%

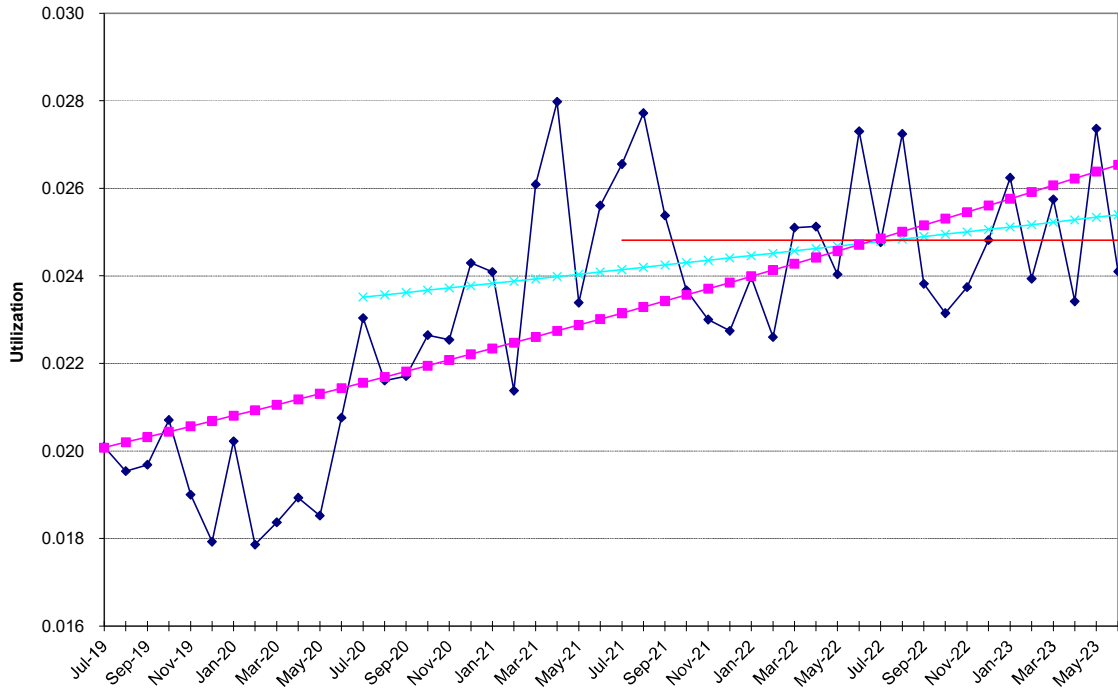
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.7%	-3.7%	-1.2%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.4%	-3.9%	3.2%

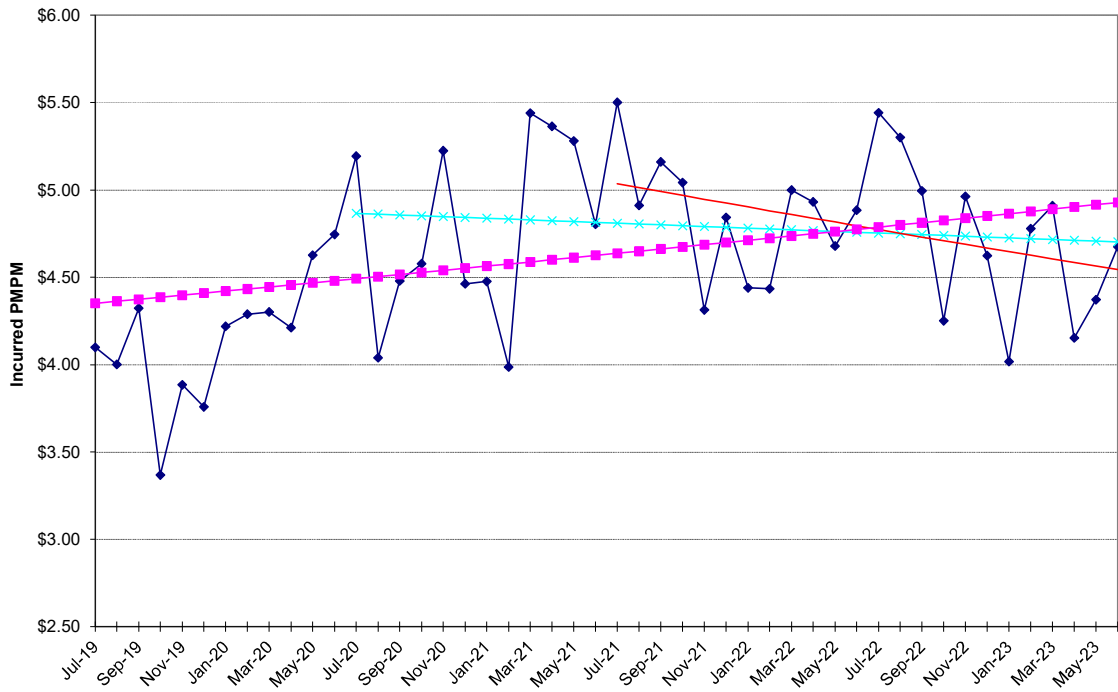
Physician Services - Maternity



Physician Services - Maternity



Physician Services - Maternity



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

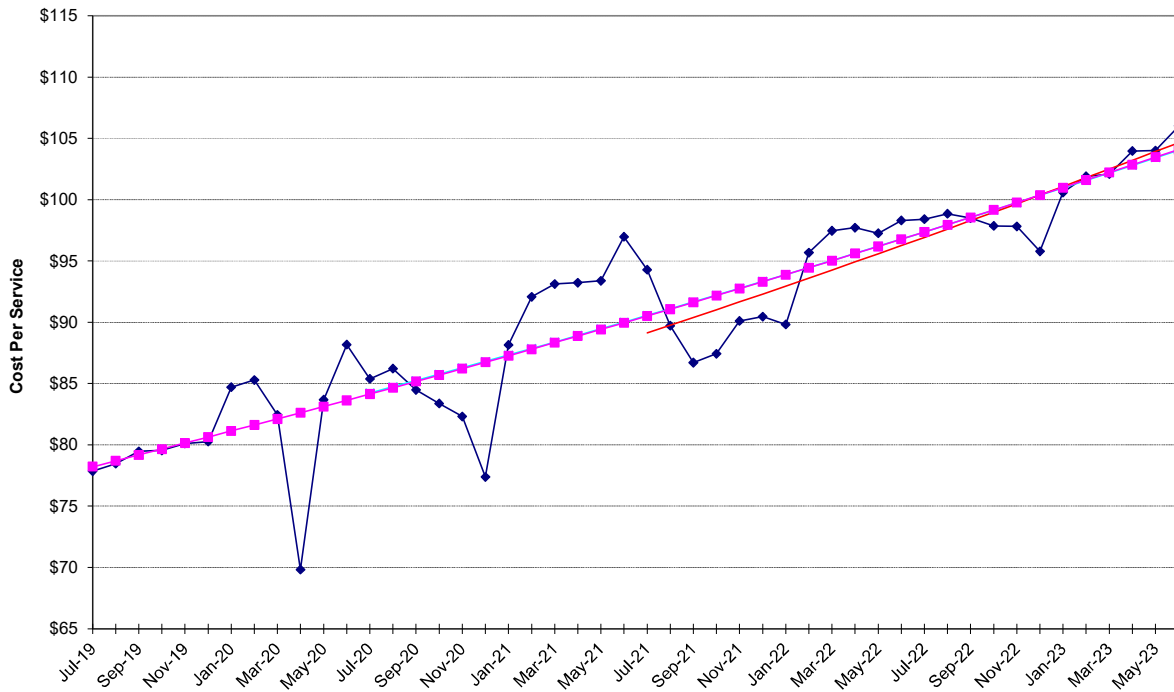
Office Visits

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.7%	8.7%	6.8%

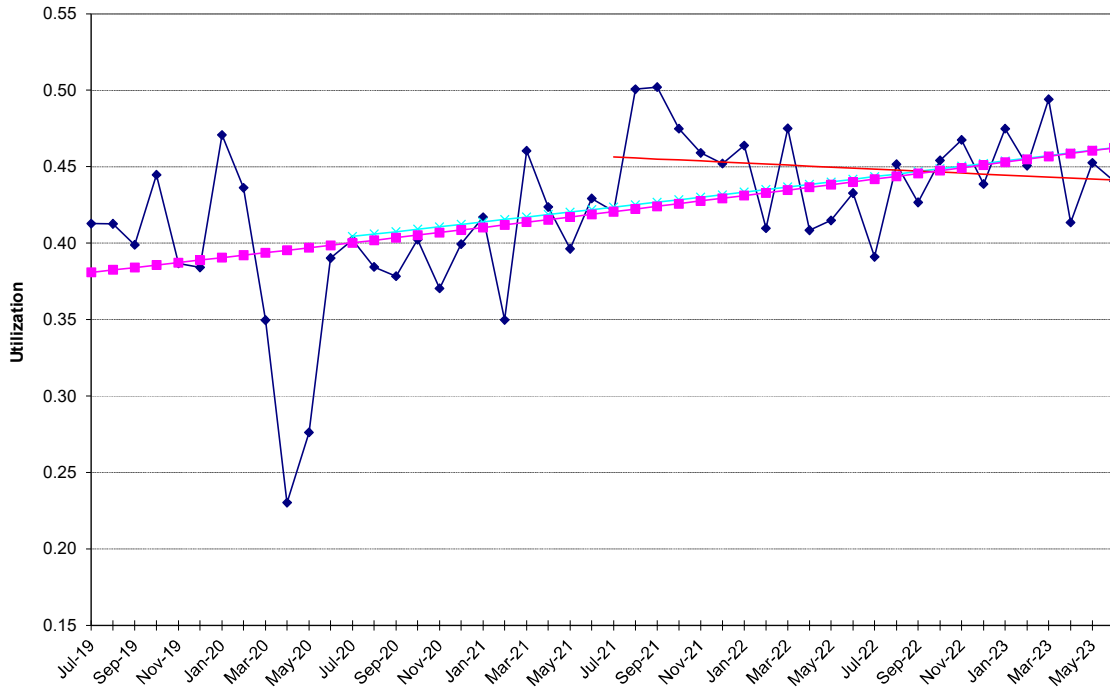
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.7%	7.5%	12.6%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.1%	7.6%	13.0%

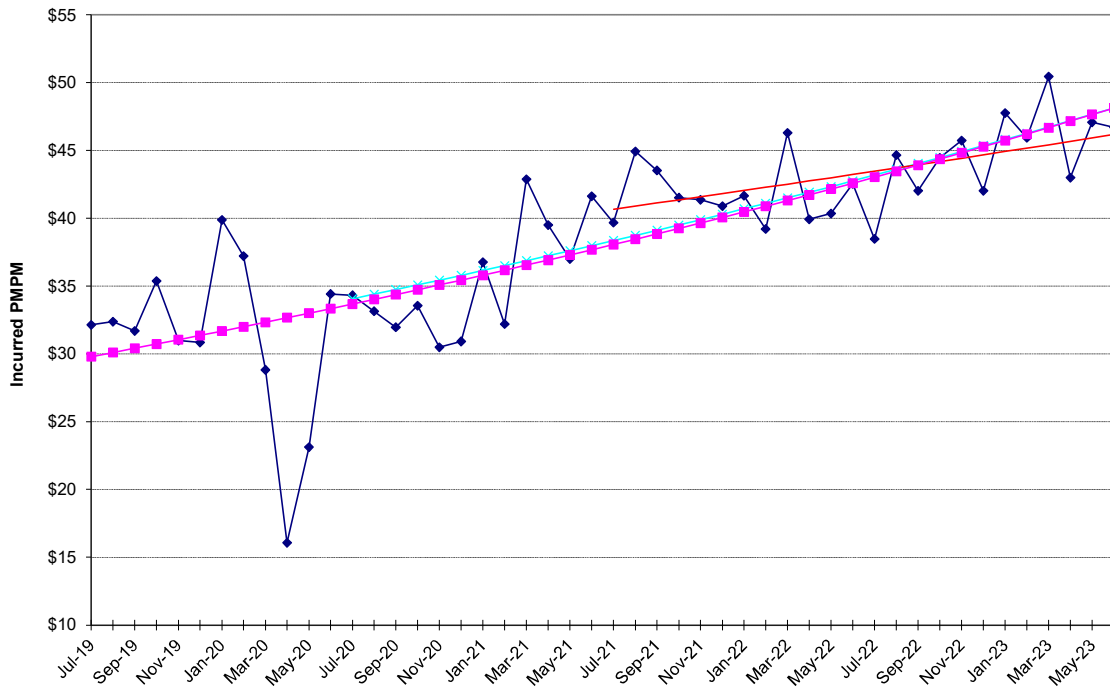
Physician Services - Office Visits



Physician Services - Office Visits



Physician Services - Office Visits



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

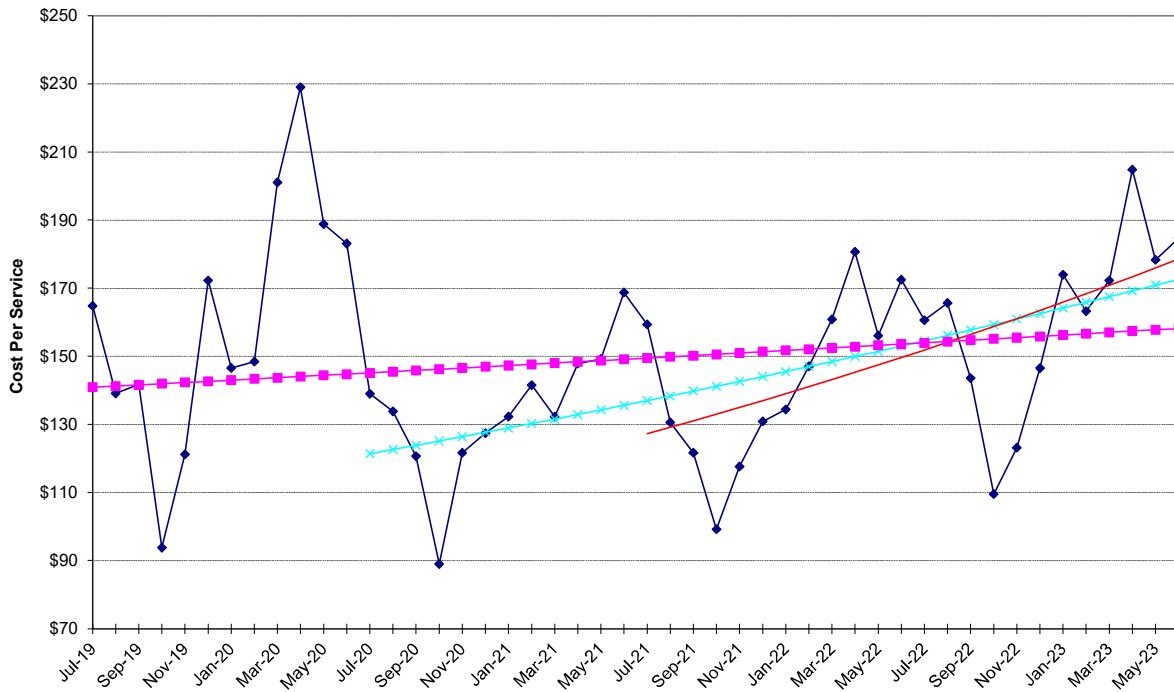
Other Services

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-16.7%	19.3%	-0.6%

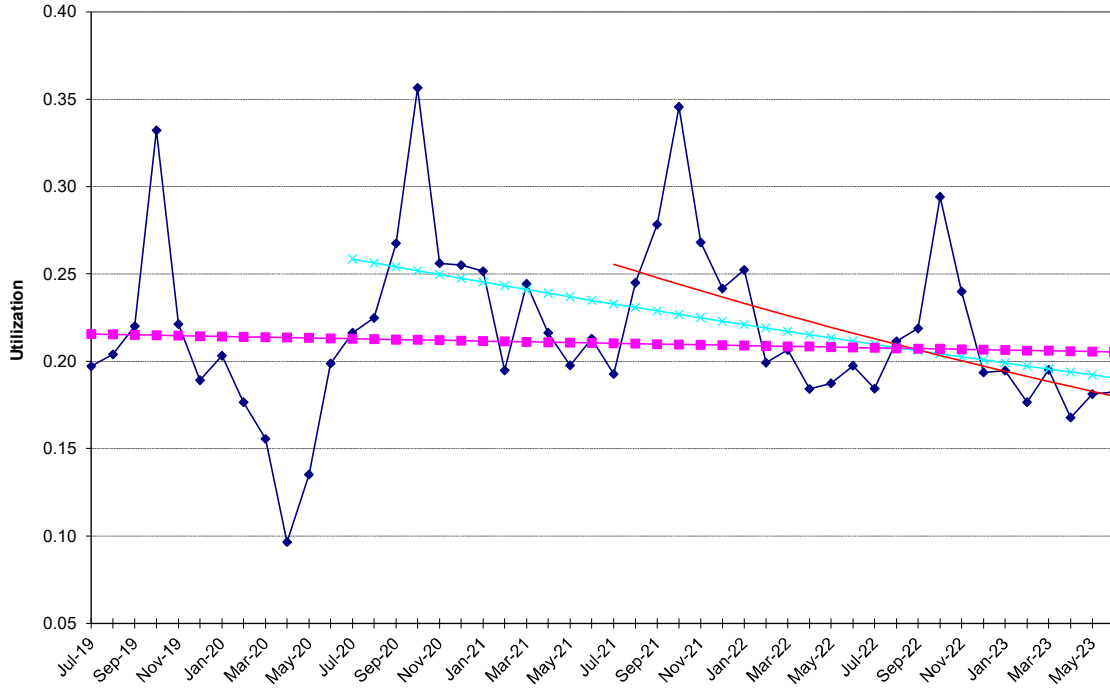
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.9%	12.8%	1.6%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.2%	3.0%	1.7%

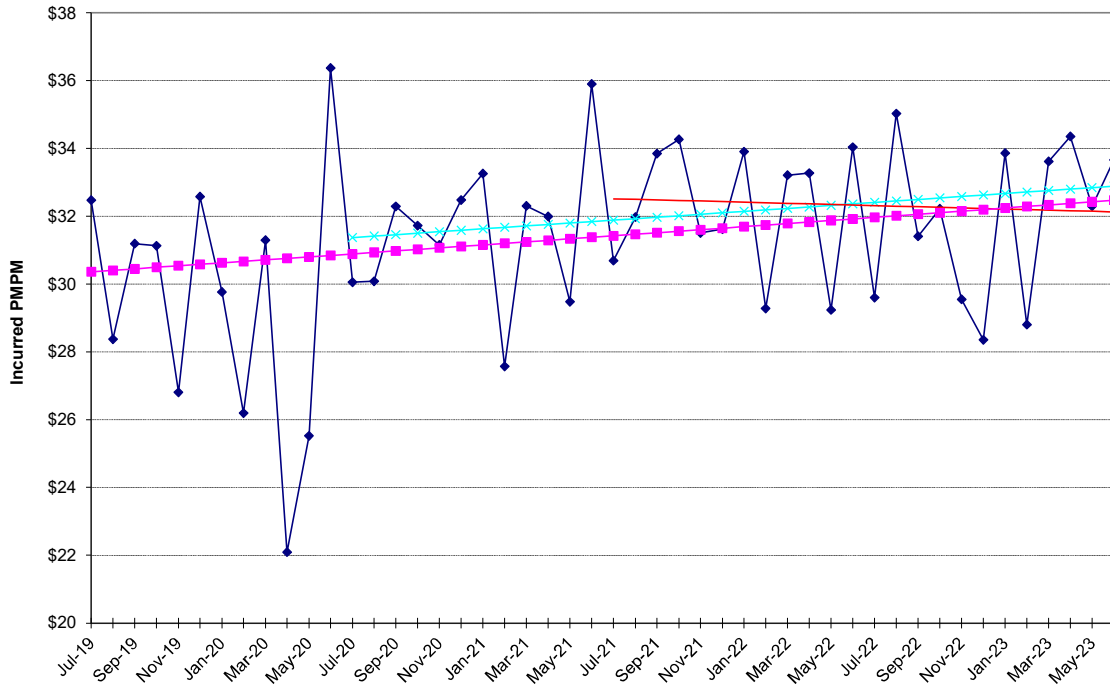
Physician Services - Other Services



Physician Services - Other Services



Physician Services - Other Services



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

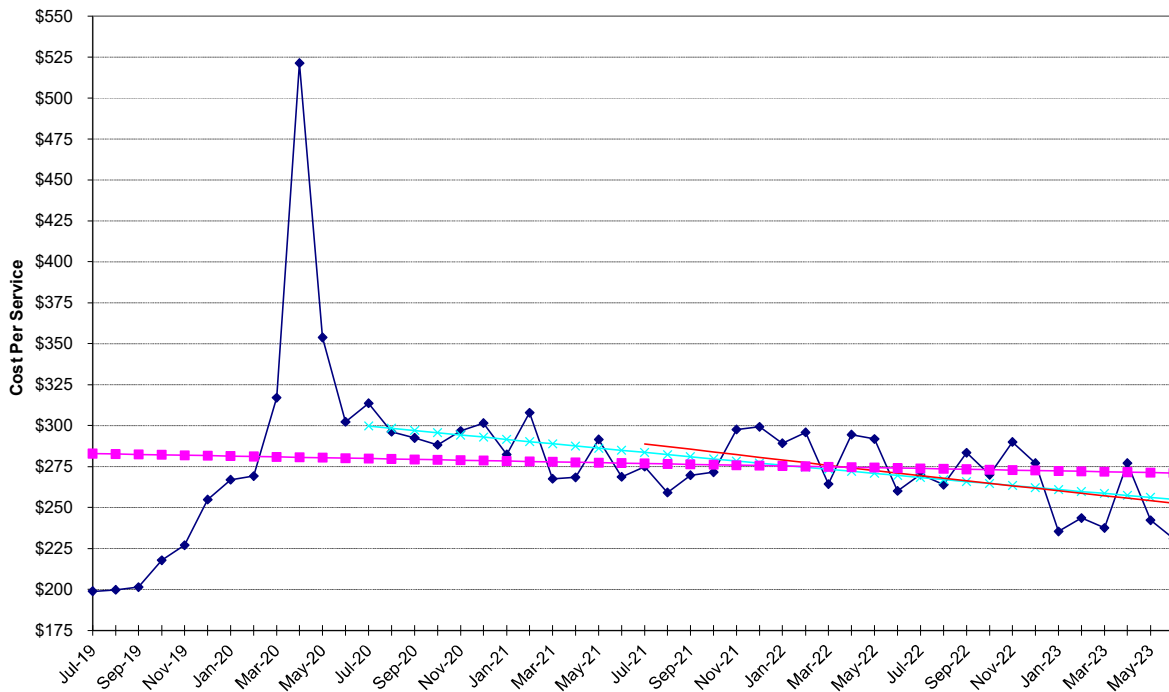
Outpatient Surgery

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
9.6%	-6.7%	2.2%

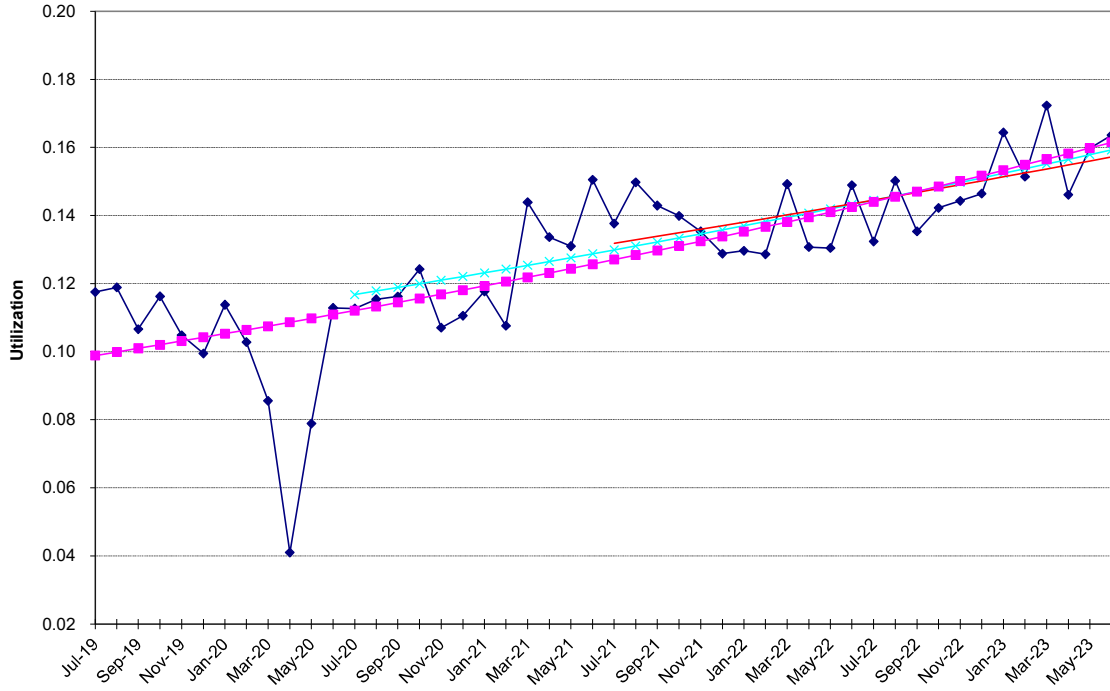
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
11.2%	-5.4%	5.2%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
13.3%	-1.1%	12.1%

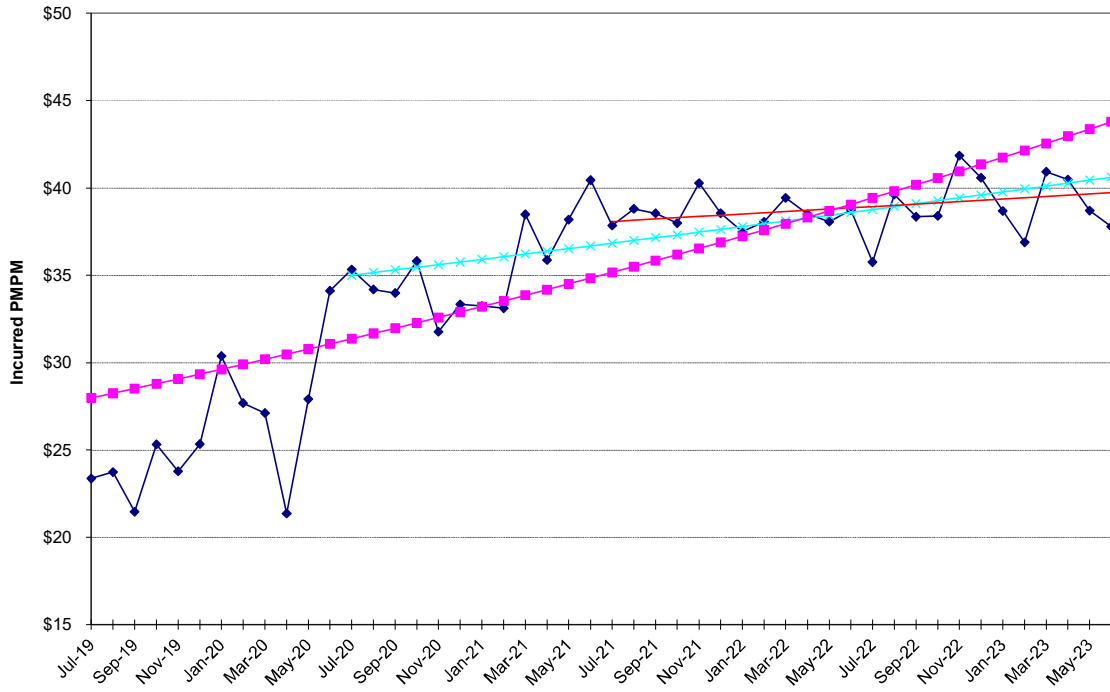
Physician Services - Outpatient Surgery



Physician Services - Outpatient Surgery



Physician Services - Outpatient Surgery



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

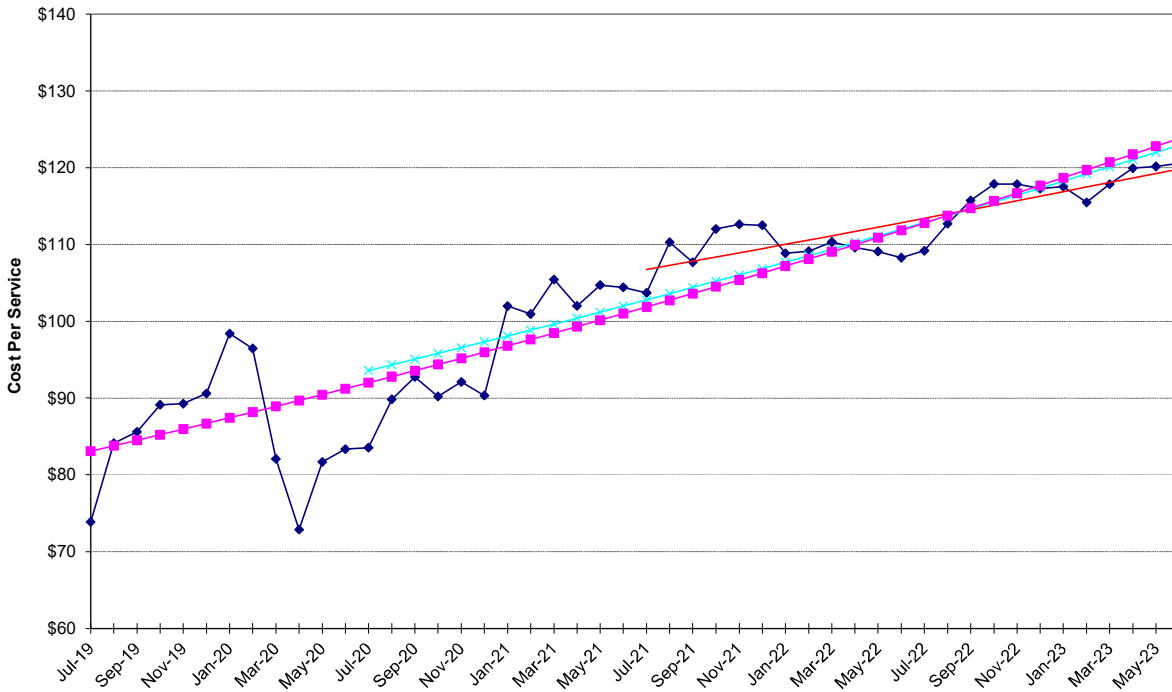
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.8%	6.2%	14.5%

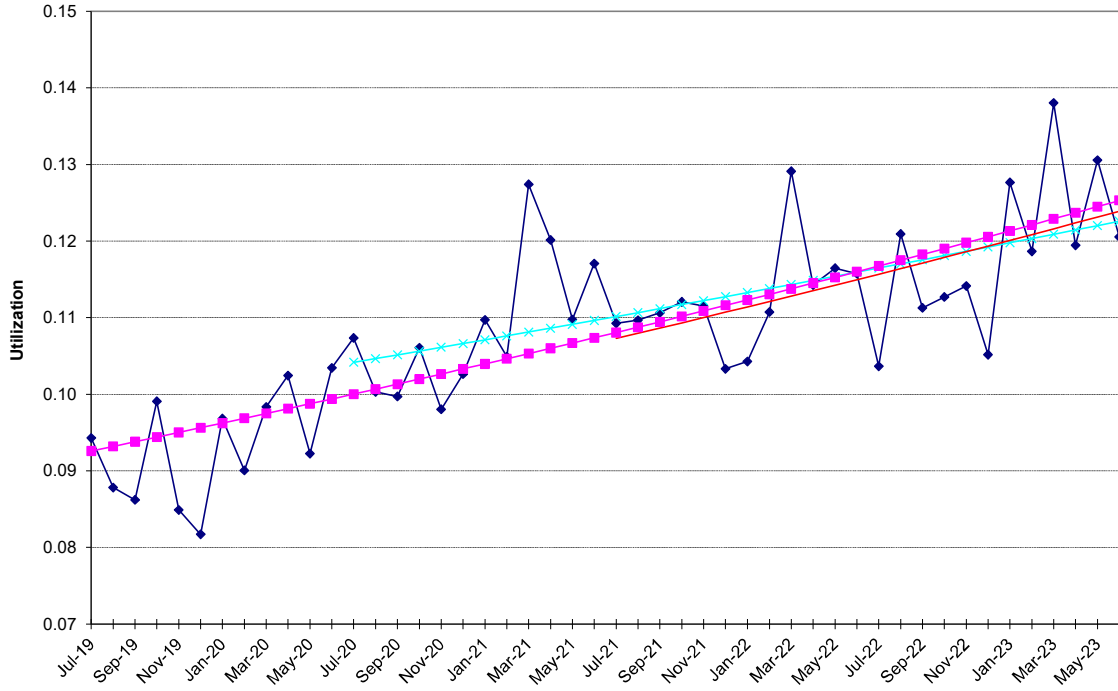
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.7%	9.8%	16.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
8.0%	10.7%	19.6%

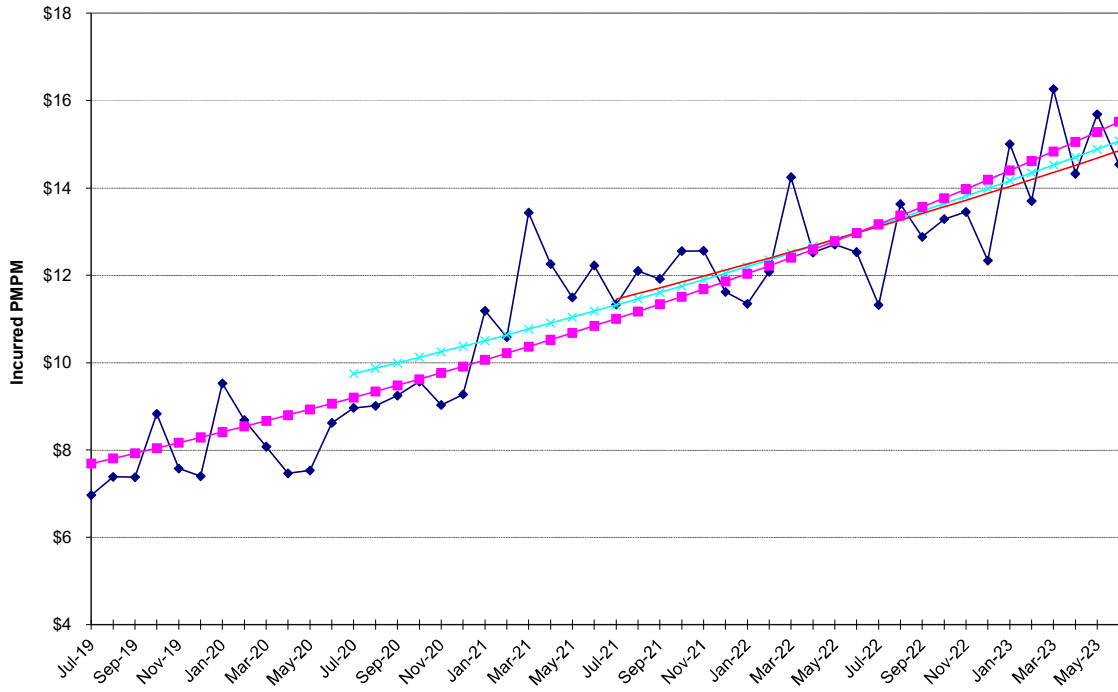
Physician Services - Psychiatric / Substance Abuse



Physician Services - Psychiatric / Substance Abuse



Physician Services - Psychiatric / Substance Abuse



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

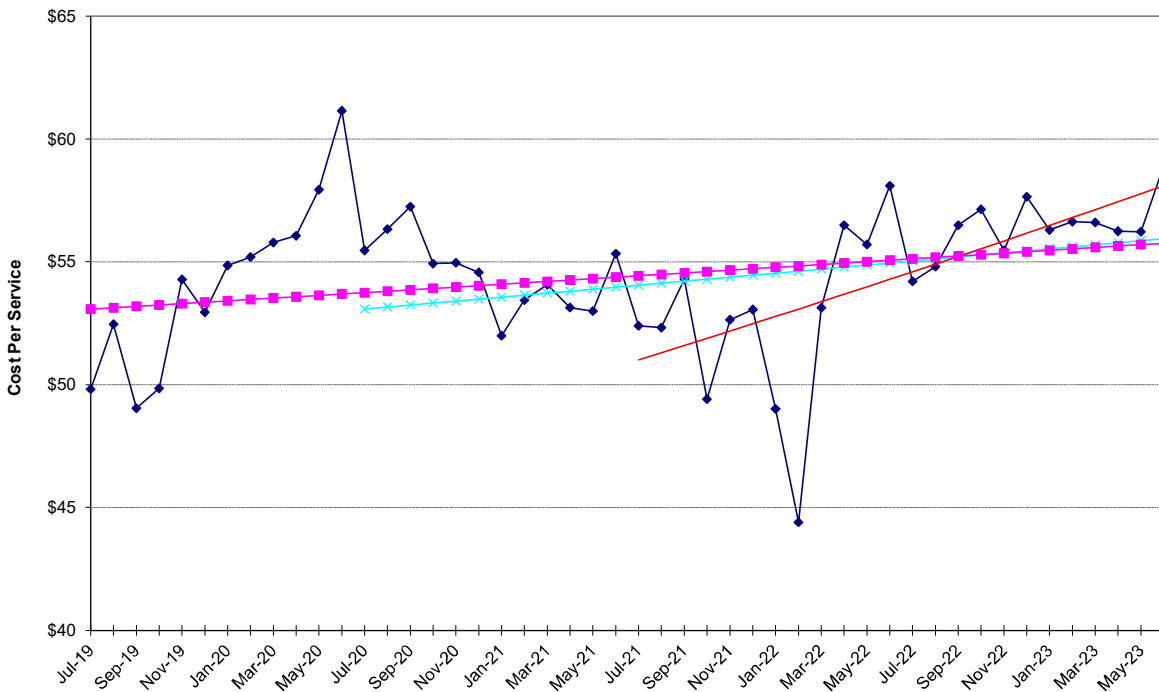
Radiology

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.0%	7.0%	5.9%

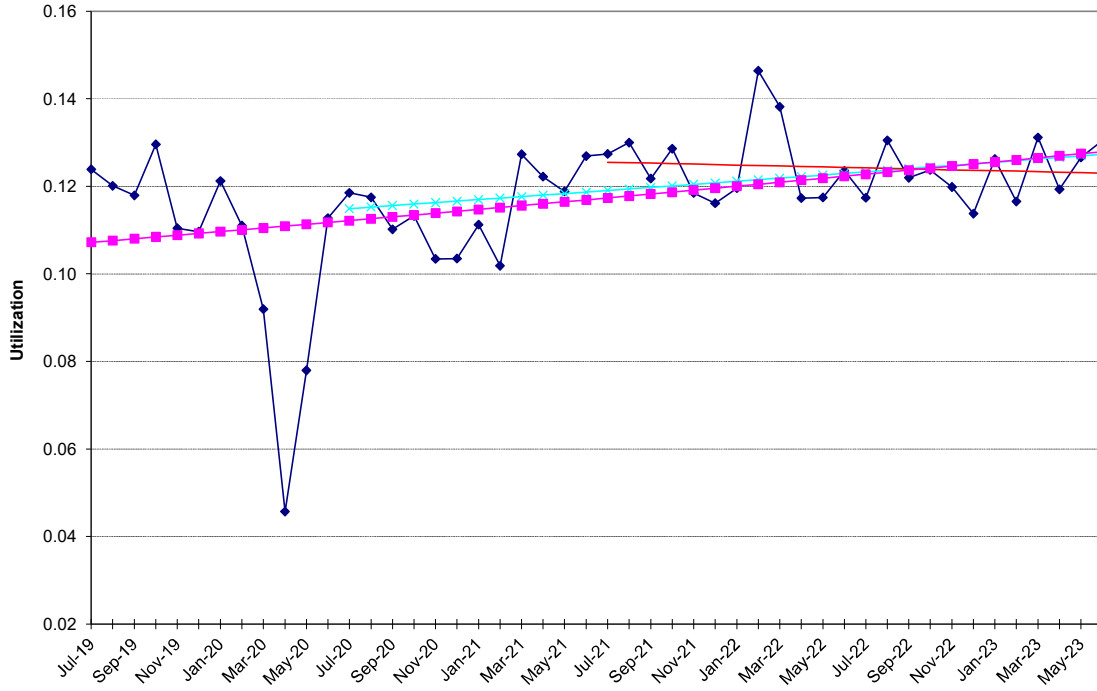
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.6%	1.8%	5.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.6%	1.3%	5.9%

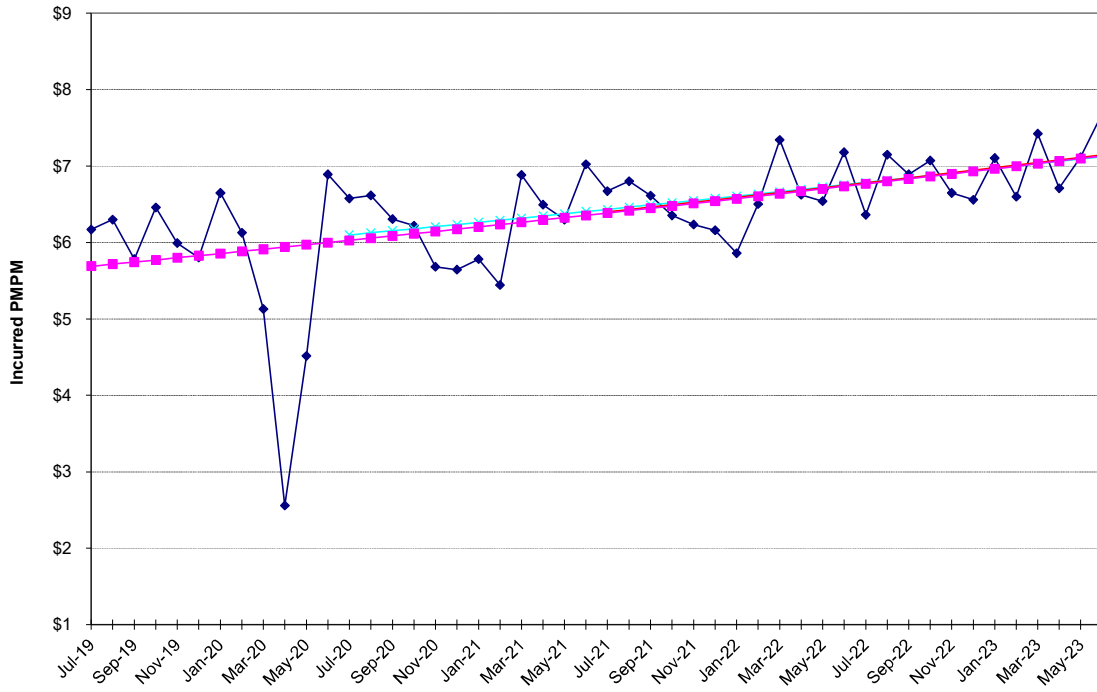
Physician Services - Radiology



Physician Services - Radiology



Physician Services - Radiology



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

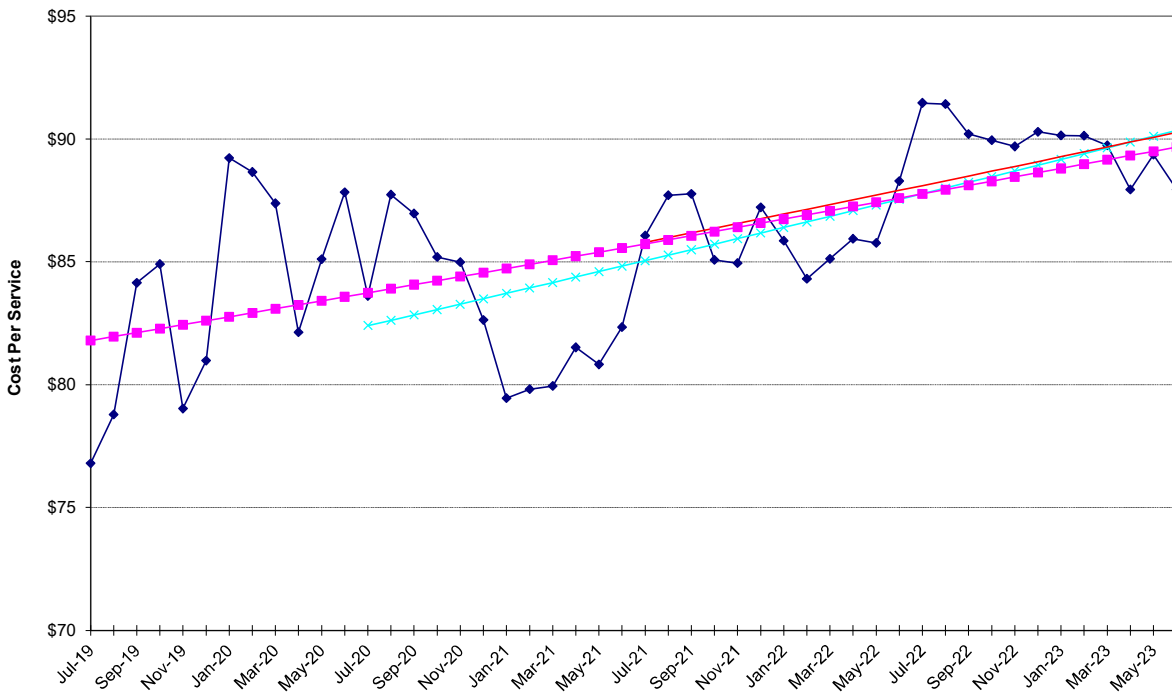
Therapies

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
9.0%	2.7%	12.0%

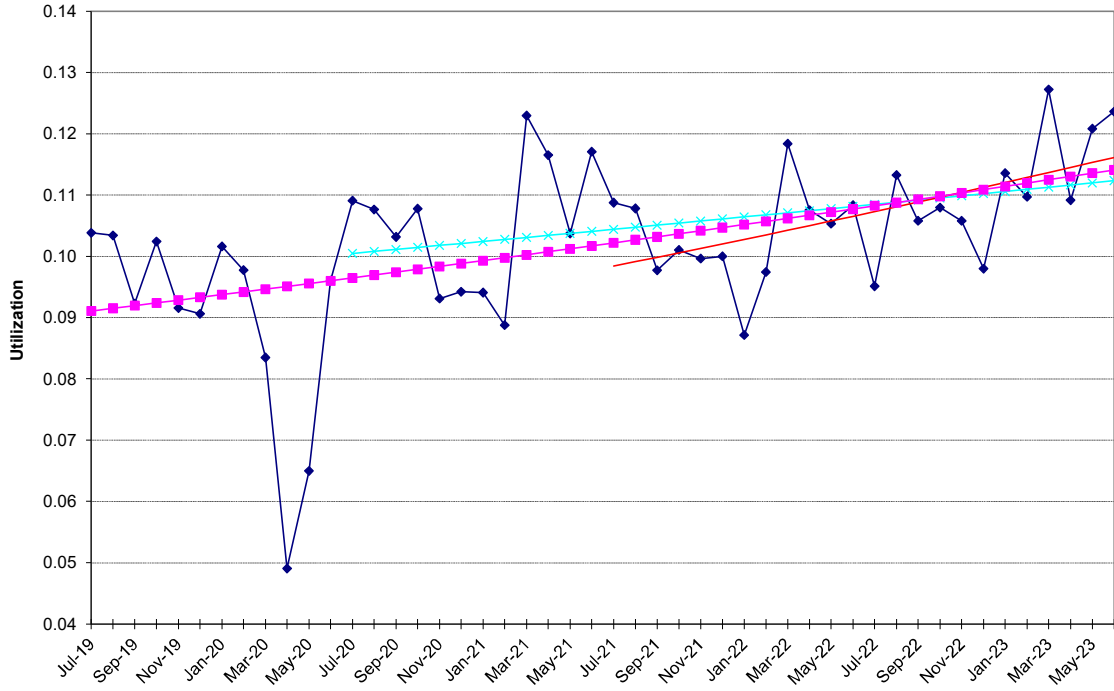
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.9%	3.2%	7.2%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.9%	2.4%	8.4%

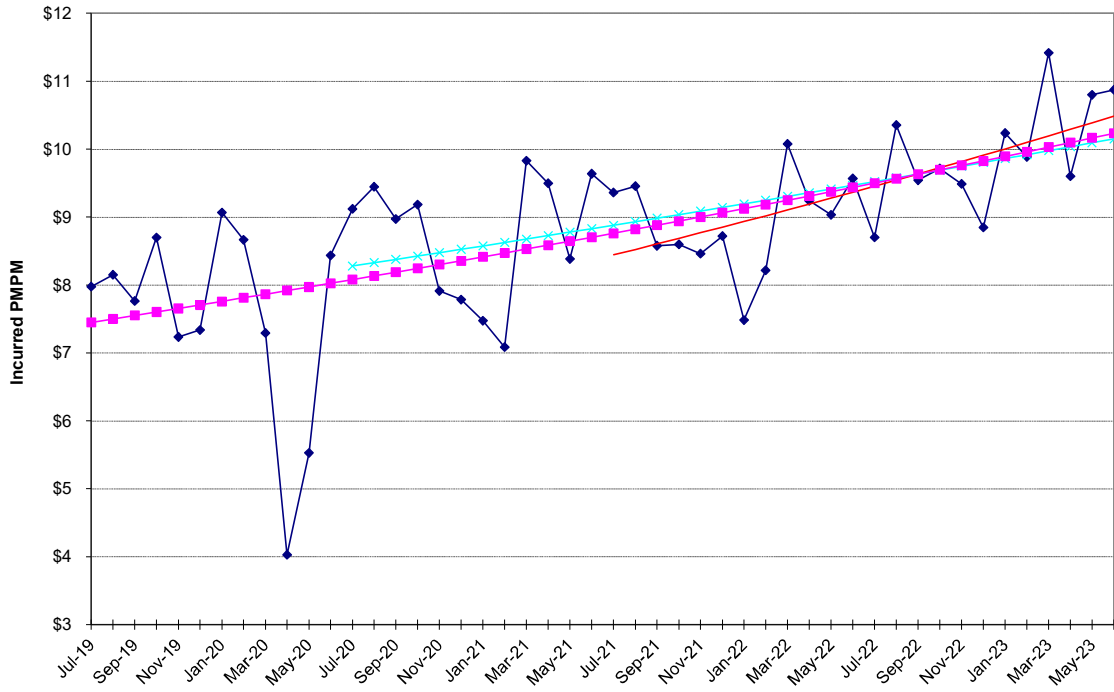
Physician Services - Therapies



Physician Services - Therapies



Physician Services - Therapies



**NON-MEDICARE CLAIMS
Excluding Drugs**

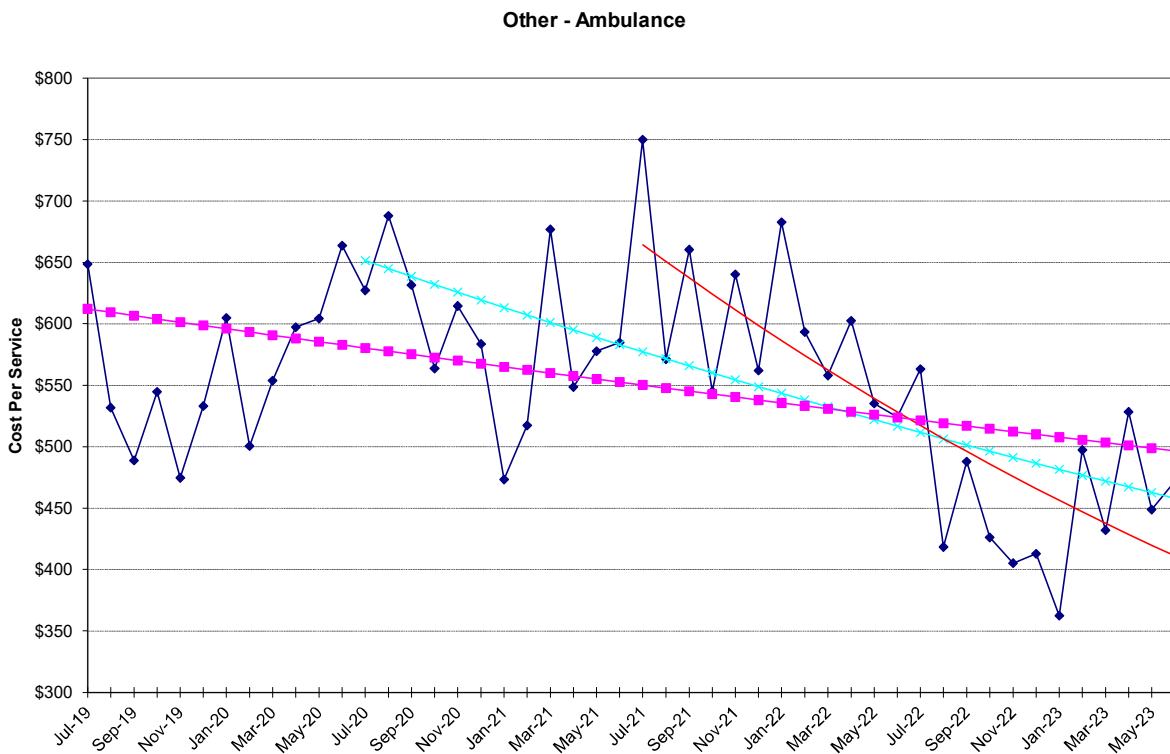
OTHER

Ambulance

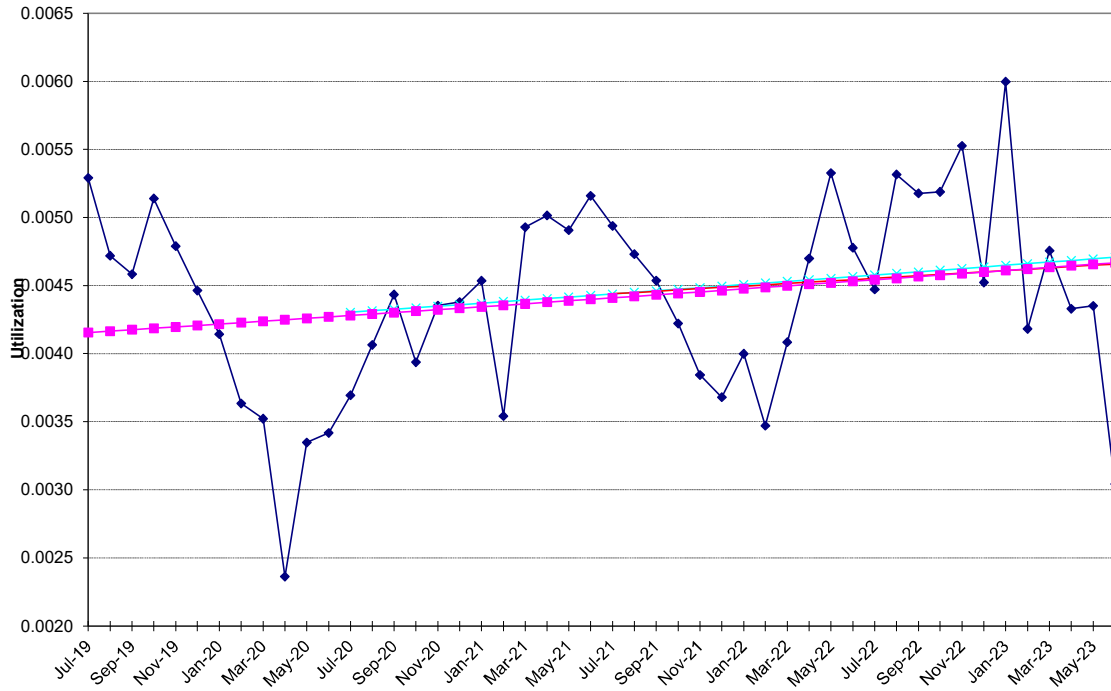
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.5%	-22.2%	-20.2%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.1%	-11.4%	-8.6%

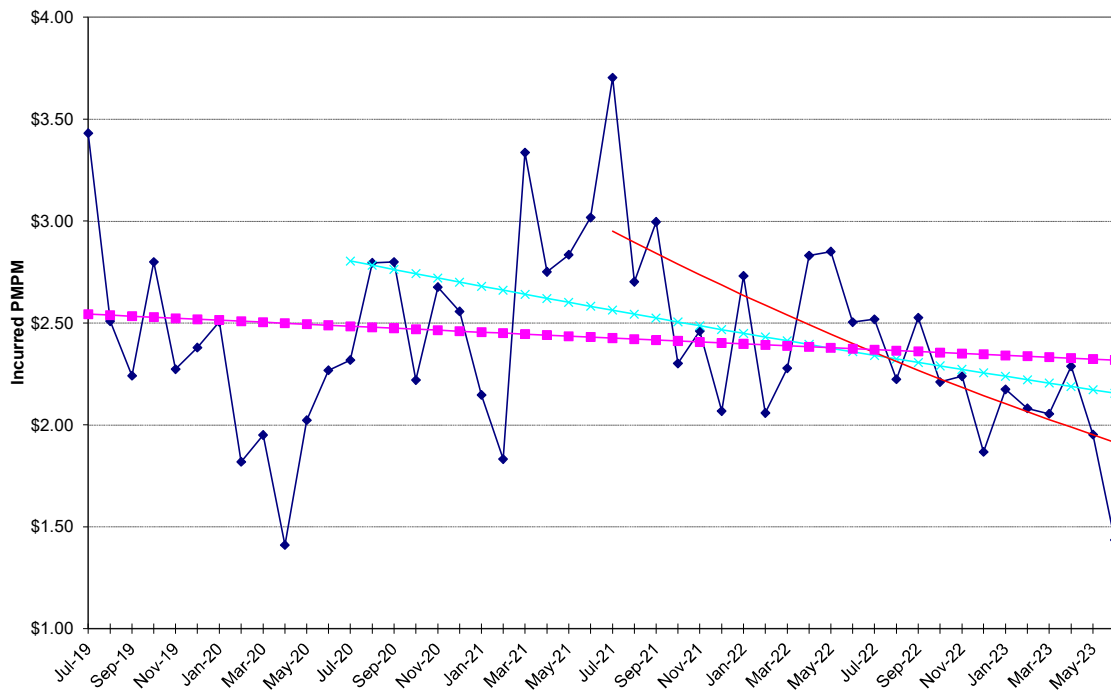
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.0%	-5.2%	-2.3%



Other - Ambulance



Other - Ambulance



**NON-MEDICARE CLAIMS
Excluding Drugs**

OTHER

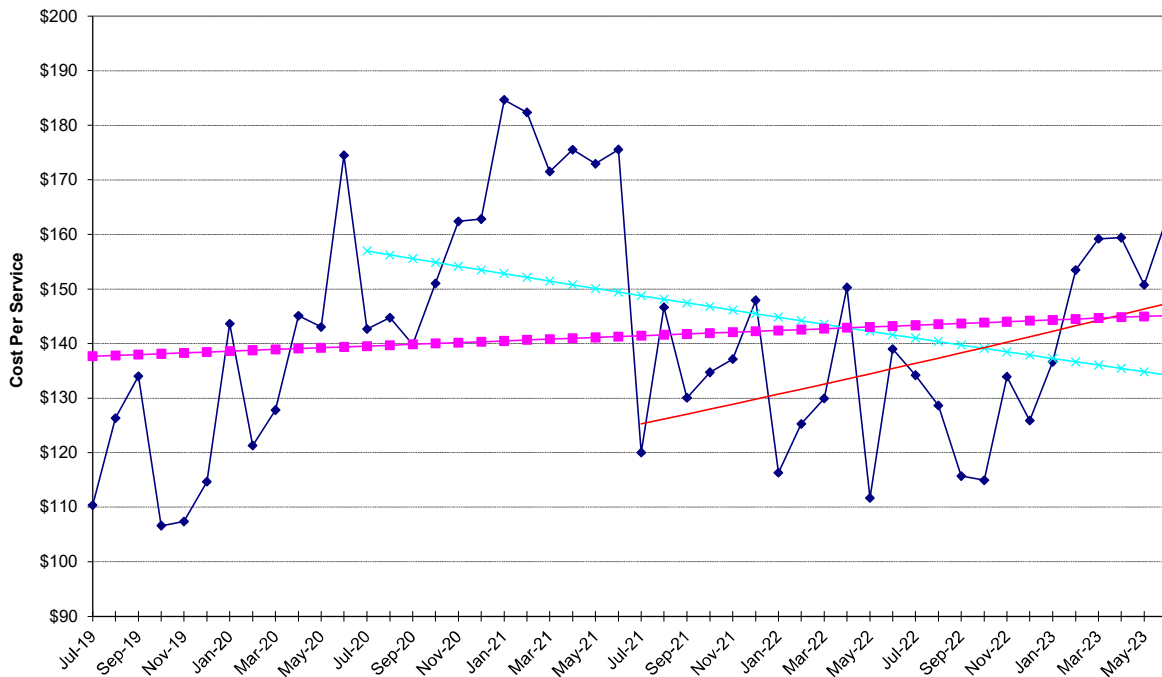
Appliances (DME)

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.1%	8.8%	-1.1%

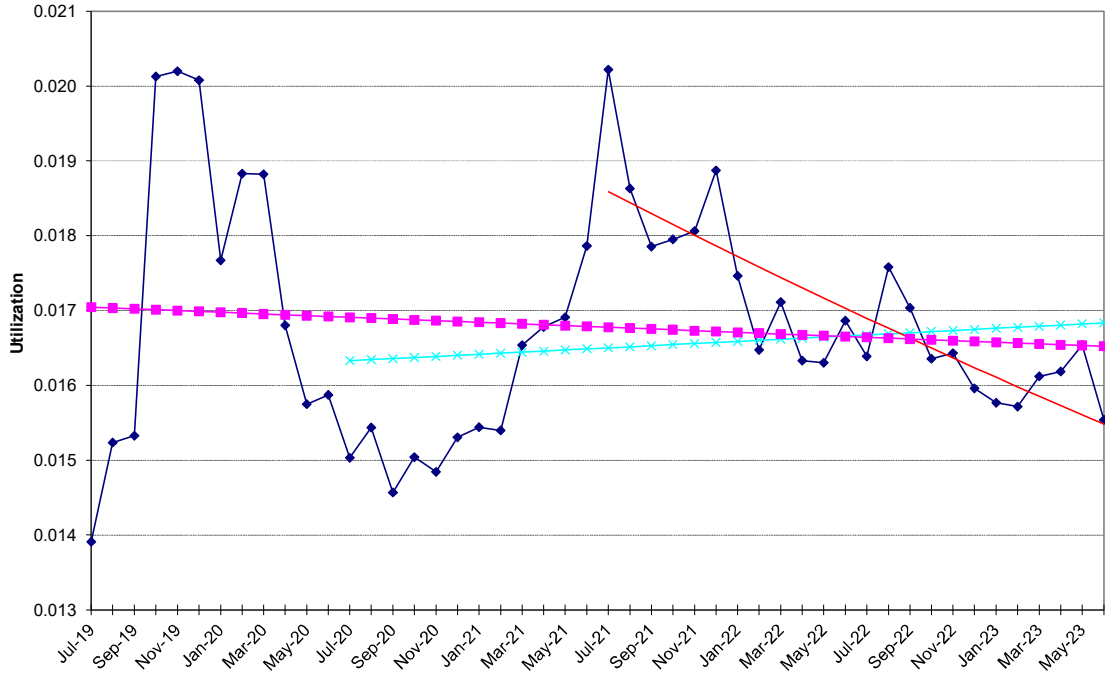
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.1%	-5.2%	-4.2%

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

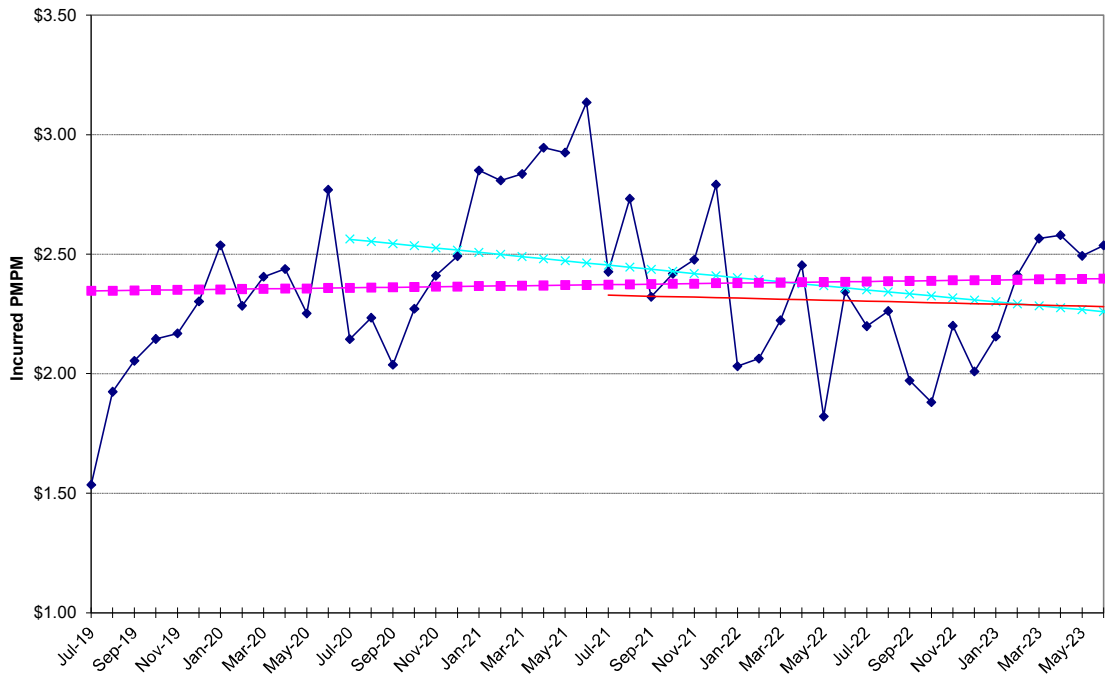
Other - Appliances (DME)



Other - Appliances (DME)



Other - Appliances (DME)



Appendix B

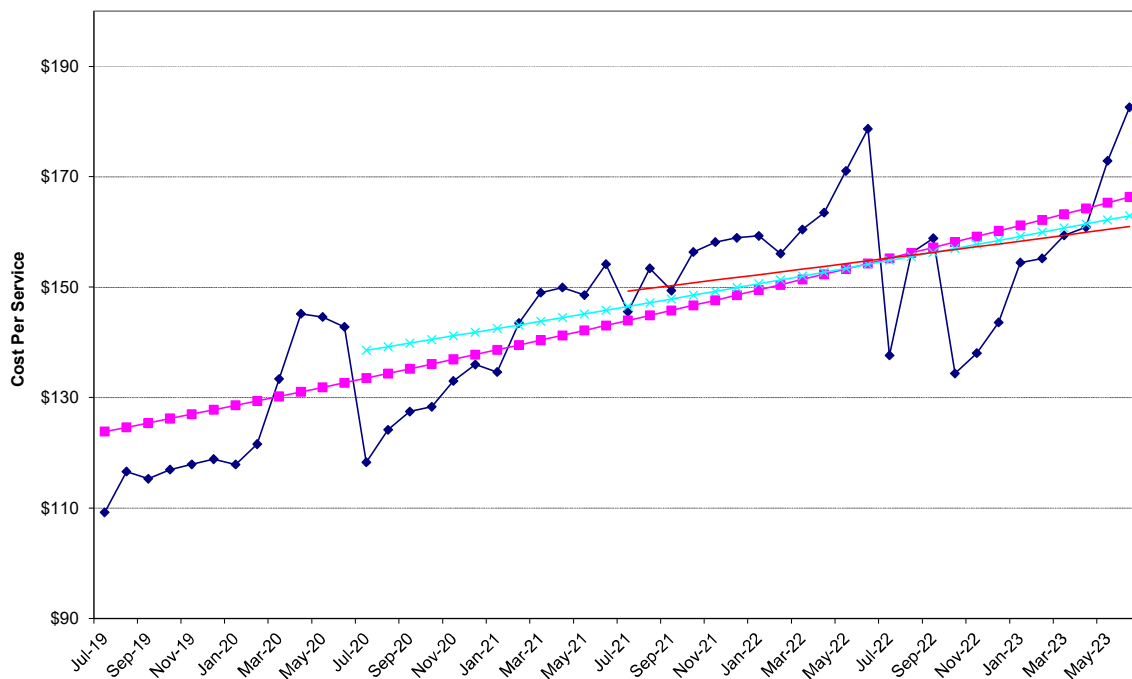
NON-MEDICARE PRESCRIPTION DRUGS

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

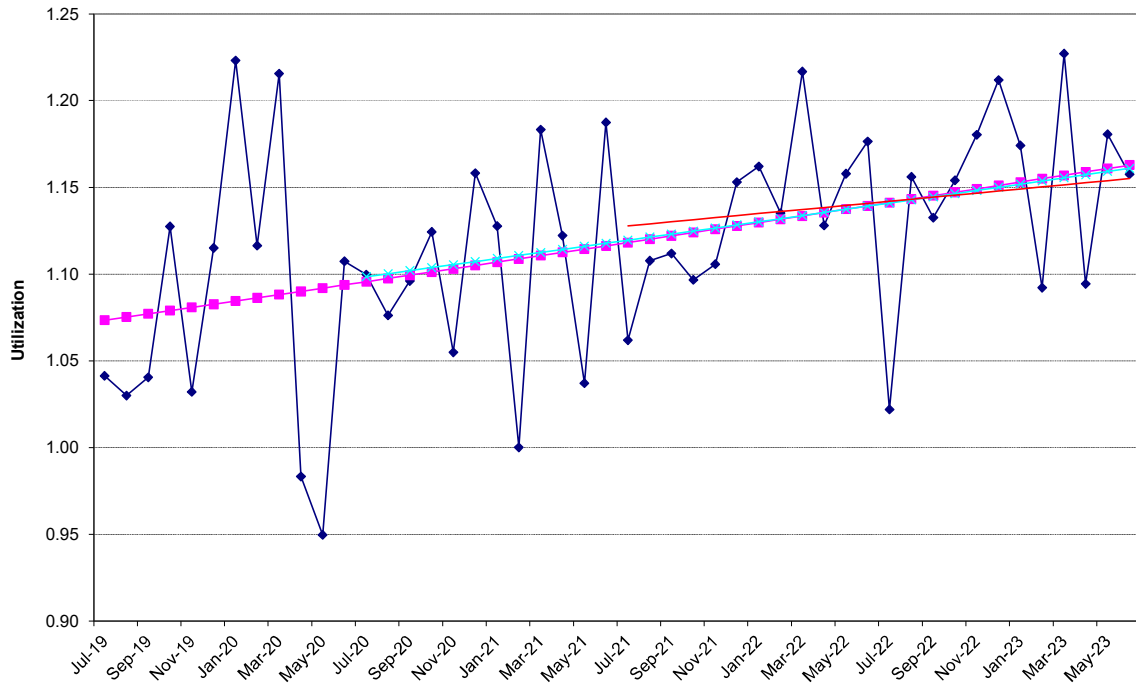
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
1.9%	5.7%	7.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
2.1%	7.8%	10.0%

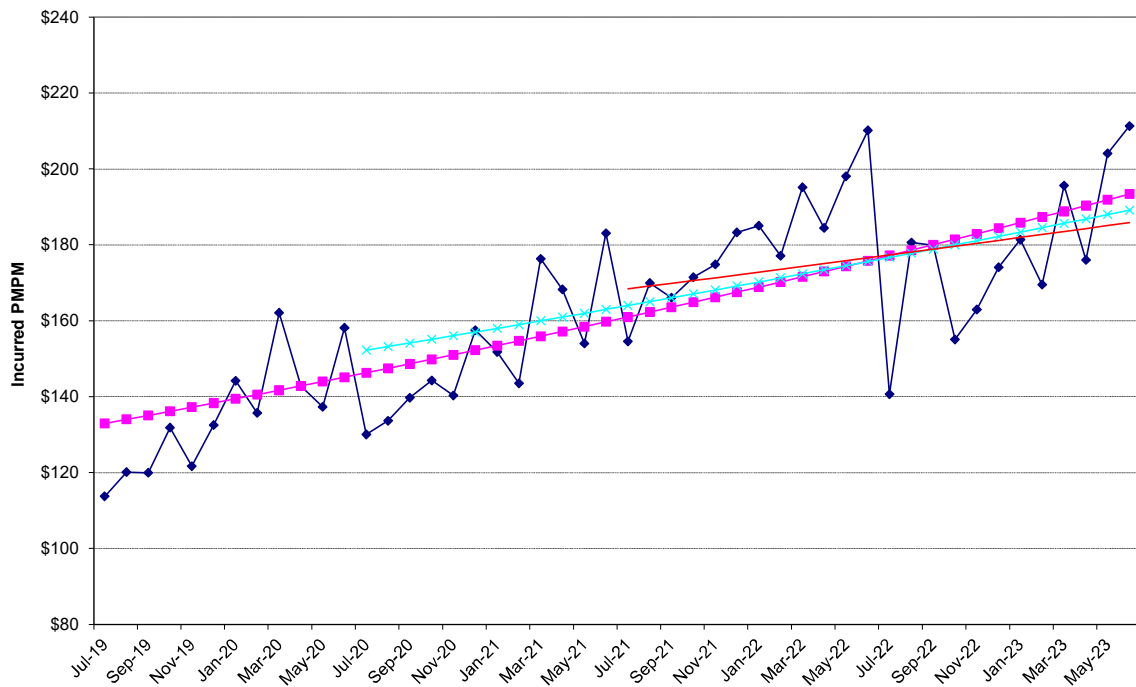
Non-Medicare Prescription Drugs



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 4.0% trend and unit cost had a 1.4% trend, resulting in a composite trend of 3.9% 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%
2023	4.0%	1.4%	3.9%

Prior to this analysis, the financial plan was developed using a 14.5% trend for fiscal year 2024. Based on results and future expectations, Continuing Care Actuaries has chosen to use a gross drug trend assumption of 14.5% and drug rebate trend of 5.0% for fiscal year 2024 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	2022 Ingredient Cost		2023 Ingredient Cost	
		Amount	%	Amount	%
Revlimid	2026	\$3,282,580	0.84%	\$3,239,015	0.80%
Entresto	2025	1,683,034	0.43%	2,373,829	0.59%
Vyvanse	2023	3,720,797	0.96%	3,875,657	0.96%
Votrient	2023	414,048	0.11%	460,001	0.11%
Dexilant	2023	299,240	0.08%	10,072	0.00%
Lupron	2023	128,408	0.03%	274,793	0.07%
Banzel	2023	95,425	0.02%	33,542	0.01%
Toviaz	2023	45,792	0.01%	2,361	0.00%
Fotivda	2023	23,706	0.01%	0	0.00%
Total		\$6,413,090	3.6%	\$7,030,255	1.7%

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 50% [[Managed Healthcare Executive](#)] of all drug spend. For PEIA, it is approximately 42% 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 decreased by 97.34% in 2023, 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%
FY 2023	\$169.9	42.02%	20.14%	21,922	-7.79%

The following chart shows the top 10 brand name specialty drugs and their total cost in 2023:

2023 Rank	2023 Brand Name	2022 Cost	2023 Cost	Total Growth
1	HUMIRA	32,931,903	36,301,357	10.23%
2	STELARA	10,447,108	12,564,255	20.27%
3	DUPIXENT	5,751,653	8,539,748	48.47%
4	TREMFYA	4,891,959	6,230,043	27.35%
5	SKYRIZI PEN	2,193,076	5,761,522	162.71%
6	OTEZLA	5,321,802	5,397,886	1.43%
7	TALTZ AUTOINJECTOR	4,936,104	5,203,546	5.42%
8	ENBREL SURECLICK	4,666,265	4,970,276	6.52%
9	TRIKAFTA	4,653,702	4,153,749	-10.74%
10	<u>REVLIMID</u>	<u>3,282,580</u>	<u>3,239,015</u>	<u>-1.33%</u>
	Total	\$79,076,153	\$92,361,396	16.80%
	Percent of Specialty Cost	55.93%	77.81%	

Indicator Categories

Continuing Care Actuaries reviewed the individual prescription data items for Fiscal Years 2022 and 2023. A total of 2,047,913 scripts were written for approximately 2,135 different kinds of prescriptions in 2023. The prescriptions were grouped by indicator codes, providing a basis to develop the Fiscal Year 2023 trend by indicator code. The top 40 indicator codes were analyzed, which accounted for 90.4%, up from 88.6% in 2022.

The top 5 indicators had material increases in cost. PEIA members spend the most on Incretin Mimetics. The following chart lists the top 5 and the total drug spend each year.

<u>Rank</u>	<u>Indicator</u>	<u>2022 Cost</u>	<u>Indicator</u>	<u>2023 Cost</u>
1	INCRETIN MIMETICS	\$43,104,464	INCRETIN MIMETICS	\$64,778,750
2	DISEASE-MODIFYING ANTIRHEUMATIC AGENTS	57,830,008	DISEASE-MODIFYING ANTIRHEUMATIC AGENTS	59,223,947
3	SKIN AND MUCOUS MEMBRANE AGENTS MISC	33,196,515	SKIN AND MUCOUS MEMBRANE AGENTS MISC	42,842,236
4	ANTINEOPLASTIC AGENTS	24,401,908	ANTINEOPLASTIC AGENTS	27,606,507
5	INSULINS	27,277,233	INSULINS	24,727,602

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 2023.

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 90.4% 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 45.2% 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	2022 Total Ingredient Cost	2023 Total Ingredient Cost	Total Increase
INCRETIN MIMETICS	\$43,104,464	\$64,778,750	\$21,674,285
SKIN AND MUCOUS MEMBRANE AGENTS MISC	33,196,515	42,842,236	9,645,721
DEVICES	1,045,403	5,554,051	4,508,648
ANTINEOPLASTIC AGENTS	24,401,908	27,606,507	3,204,599
CALCITONIN GENE-RELATED PEPTIDE ANTAG	5,194,982	7,816,149	2,621,167

Indicators with the Largest Increase as a Percentage

Indication	2022 Total Ingredient Cost	2023 Total Ingredient Cost	Total Increase
RESPIRATORY TRACT AGENTS MISCELLANEOUS	\$16,986	\$768,110	4,421.9%
EENT DRUGS MISCELLANEOUS	43,727	285,292	552.4%
DEVICES	1,045,403	5,554,051	431.3%
PROTECTANTS	72,337	310,534	329.3%
ANTIPROTOZOALS MISCELLANEOUS	60,196	216,726	260.0%

Indicators with the Largest Increase in Claim Numbers

Indication	2022 Prescriptions	2023 Prescriptions	Utilization Increase
NONSTEROIDAL ANTI- INFLAMMATORY AGENTS	108	67,519	67,411
DEVICES	16,628	45,357	28,729
ANTIFUNGALS	11,568	33,513	21,945
INCRETIN MIMETICS	22,579	40,839	18,260
PENICILLIN ANTIBIOTICS	58,508	68,427	9,919

Indicators with the Largest Utilization Increase Percentage

Indication	2022 Prescriptions	2023 Prescriptions	Utilization Increase
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS	108	67,519	62,417.6%
EENT DRUGS MISCELLANEOUS	2	1,158	57,800.0%
RESPIRATORY TRACT AGENTS MISCELLANEOUS	7	340	4,757.1%
EENT ANTI-INFLAMMATORY AGENTS MISC	126	1,860	1,376.2%
ALPHA-ADRENERGIC BLOCKING AGENT SYMPATH	748	9,471	1,166.2%

Indicators with the Largest Increase in Cost per Prescription

Indication	2022 Ingredient Cost Per Prescription	2023 Ingredient Cost Per Prescription	Ingredient Cost Per Prescription Increase
VESICULAR MONOAMINE TRANSPORT2 INHIBITOR	\$4,589	\$6,857	\$2,268
OTHER MISCELLANEOUS THERAPEUTIC AGENTS	6,714	8,733	2,019
MUCOLYTIC AGENTS	1,173	2,791	1,617
VASOPRESSIN ANTAGONISTS	16,466	17,646	1,180
GONADOTROPINS	4,527	5,537	1,010

Indicators with the Largest Percentage Increase in Cost per Prescription

Indication	2022 Ingredient Cost Per Prescription	2023 Ingredient Cost Per Prescription	Ingredient Cost Per Prescription Increase
PROTECTANTS	\$30	\$126	325.3%
MUCOLYTIC AGENTS	1,173	2,791	137.8%
DEVICES	63	122	94.8%
ANGIOTENSIN-CONVERTING ENZYME INHIBITORS	8	15	84.2%
BIGUANIDES	12	21	70.8%

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	INCRETIN MIMETICS	40,839	\$1,586.20	\$64,778,750	99.65%	99.67%
2	DISEASE-MODIFYING ANTIRHEUMATIC AGENTS	9,777	6,057.48	59,223,947	93.41%	93.86%
3	SKIN AND MUCOUS MEMBRANE AGENTS MISC	9,690	4,421.28	42,842,236	98.04%	99.29%
4	ANTINEOPLASTIC AGENTS	9,006	3,065.35	27,606,507	97.60%	89.73%
5	INSULINS	17,671	1,399.33	24,727,602	99.17%	99.41%
6	SODIUM-GLUC COTRANSPORT 2 SGLT2 INHIB	13,457	1,394.43	18,764,817	99.96%	99.98%
7	ANTICOAGULANTS	11,120	913.36	10,156,562	99.84%	99.78%
8	IMMUNOMODULATORY AGENTS	1,455	6,974.33	10,147,643	90.65%	92.16%
9	CORTICOSTEROIDS RESPIRATORY TRACT	14,123	643.87	9,093,313	97.33%	97.93%
10	CALCITONIN GENE-RELATED PEPTIDE ANTAG	7,680	1,017.73	7,816,149	99.99%	99.98%
11	DIPEPTIDYL PEPTIDASE-4 DPP-4 INHIBITORS	5,691	1,320.40	7,514,422	99.93%	99.97%
12	DEVICES	45,357	122.45	5,554,051	98.05%	99.11%
13	CENTRAL NERVOUS SYSTEM AGENTS MISC	4,691	1,104.10	5,179,336	98.10%	97.34%
14	ANTIPSYCHOTIC AGENTS	13,714	362.58	4,972,361	89.59%	39.28%
15	ANTIDEPRESSANTS	168,364	29.19	4,914,145	99.78%	93.24%
16	AMPHETAMINES	30,685	142.36	4,368,443	99.19%	98.49%
17	GI DRUGS MISCELLANEOUS	3,573	1,221.72	4,365,216	98.88%	97.69%
18	CYSTIC FIBROSIS CFTR CORRECTORS	164	25,327.74	4,153,749	100.00%	100.00%
19	ANGIOTENSIN II RECEPTOR ANTAGONISTS	49,035	80.22	3,933,591	99.97%	99.83%
20	VASODILATING AGENTS RESPIRATORY TRACT	250	13,500.10	3,375,025	79.20%	76.70%

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	ANTICONVULSANTS MISCELLANEOUS	51,772	\$63.29	\$3,276,655	98.98%	67.20%
22	ANTIRETROVIRALS	1,636	1,945.58	3,182,964	98.41%	98.07%
23	HMG-COA REDUCTASE INHIBITORS	87,778	28.91	2,537,943	99.99%	99.83%
24	CONTRACEPTIVES	38,553	64.55	2,488,515	99.41%	95.05%
25	EENT ANTI-INFLAMMATORY AGENTS MISC	1,860	1,220.08	2,269,345	98.23%	98.38%
26	OTHER MISCELLANEOUS THERAPEUTIC AGENTS	253	8,733.48	2,209,569	55.73%	30.65%
27	ANTIMUSCARINICS/ANTISPASMODICS	8,150	269.02	2,192,543	99.17%	98.22%
28	THYROID AGENTS	52,290	41.79	2,185,183	87.06%	67.68%
29	ANTILIPEMIC AGENTS MISCELLANEOUS	4,163	524.39	2,183,029	100.00%	100.00%
30	VASOPRESSIN ANTAGONISTS	123	17,646.44	2,170,512	0.00%	0.00%
31	PITUITARY	757	2,790.93	2,112,732	98.94%	98.80%
32	DIGESTANTS	617	3,076.40	1,898,136	100.00%	100.00%
33	HEMATOPOIETIC AGENTS	220	8,607.14	1,893,570	100.00%	100.00%
34	PROTON-PUMP INHIBITORS	72,857	25.79	1,879,246	99.93%	98.40%
35	BETA-ADRENERGIC BLOCKING AGENTS	61,836	29.75	1,839,415	99.98%	99.79%
36	ANTIBACTERIALS MISCELLANEOUS	7,335	246.79	1,810,197	99.95%	99.60%
37	ANTI-INFLAMMATORY AGENTS GI DRUGS	1,508	1,075.78	1,622,272	98.41%	97.66%
38	IMMUNOSUPPRESSIVE AGENTS	4,278	362.42	1,550,447	97.05%	49.72%
39	ESTROGENS	11,792	118.81	1,400,986	99.27%	97.41%
40	PLATELET-AGGREGATION INHIBITORS	7,473	175.93	1,314,756	99.99%	99.99%
	<u>All Other Indicators</u>	<u>1,176,320</u>	<u>32.91</u>	<u>38,712,431</u>	<u>99.56%</u>	<u>91.02%</u>
	Total	2,047,913	\$197.38	\$404,218,311	99.10%	94.36%

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

<u>Rank</u>	<u>Indicator</u>	Formulary			Non-Formulary		
		<u>Number of Scripts</u>	<u>Ingredient Costs</u>	<u>Cost Per Script</u>	<u>Number of Scripts</u>	<u>Ingredient Costs</u>	<u>Cost Per Script</u>
1	INCRETIN MIMETICS	40,698	\$64,562,375	\$1,586.38	141	\$216,375	\$1,534.57
2	DISEASE-MODIFYING ANTIRHEUMATIC AGENTS	9,133	55,587,080	6,086.40	644	3,636,868	5,647.31
3	SKIN AND MUCOUS MEMBRANE AGENTS MISC	9,500	42,538,177	4,477.70	190	304,059	1,600.31
4	ANTINEOPLASTIC AGENTS	8,790	24,772,426	2,818.25	216	2,834,081	13,120.75
5	INSULINS	17,524	24,580,943	1,402.70	147	146,658	997.68
6	SODIUM-GLUC COTRANSPORT 2 SGLT2 INHIB	13,452	18,761,030	1,394.66	5	3,786	757.27
7	ANTICOAGULANTS	11,102	10,134,432	912.85	18	22,131	1,229.48
8	IMMUNOMODULATORY AGENTS	1,319	9,352,478	7,090.58	136	795,165	5,846.80
9	CORTICOSTEROIDS RESPIRATORY TRACT	13,746	8,905,312	647.85	377	188,001	498.68
10	CALCITONIN GENE-RELATED PEPTIDE ANTAG	7,679	7,814,546	1,017.65	1	1,604	1,603.51
11	DIPEPTIDYL PEPTIDASE-4 DPP-4 INHIBITORS	5,687	7,512,469	1,320.99	4	1,952	488.12
12	DEVICES	44,473	5,504,576	123.77	884	49,474	55.97
13	CENTRAL NERVOUS SYSTEM AGENTS MISC	4,602	5,041,380	1,095.48	89	137,957	1,550.07
14	ANTIPSYCHOTIC AGENTS	12,287	1,953,123	158.96	1,427	3,019,238	2,115.79
15	ANTIDEPRESSANTS	168,000	4,581,942	27.27	364	332,203	912.64
16	AMPHETAMINES	30,435	4,302,585	141.37	250	65,858	263.43
17	GI DRUGS MISCELLANEOUS	3,533	4,264,176	1,206.96	40	101,040	2,525.99
18	CYSTIC FIBROSIS CFTR CORRECTORS	164	4,153,749	25,327.74	-	-	-
19	ANGIOTENSIN II RECEPTOR ANTAGONISTS	49,022	3,926,960	80.11	13	6,631	510.05
20	VASODILATING AGENTS RESPIRATORY TRACT	198	2,588,658	13,074.03	52	786,367	15,122.45

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

<u>Rank</u>	<u>Indicator</u>	Formulary			Non-Formulary		
		<u>Number of Scripts</u>	<u>Ingredient Costs</u>	<u>Cost Per Script</u>	<u>Number of Scripts</u>	<u>Ingredient Costs</u>	<u>Cost Per Script</u>
21	ANTICONVULSANTS MISCELLANEOUS	51,246	\$2,201,842	\$42.97	526	\$1,074,813	\$2,043.37
22	ANTIRETROVIRALS	1,610	3,121,468	1,938.80	26	61,496	2,365.21
23	HMG-COA REDUCTASE INHIBITORS	87,772	2,533,572	28.87	6	4,372	728.59
24	CONTRACEPTIVES	38,326	2,365,213	61.71	227	123,302	543.18
25	EENT ANTI-INFLAMMATORY AGENTS MISC	1,827	2,232,541	1,221.97	33	36,805	1,115.30
26	OTHER MISCELLANEOUS THERAPEUTIC AGENTS	141	677,302	4,803.56	112	1,532,268	13,680.96
27	ANTIMUSCARINICS/ANTISPASMODICS	8,082	2,153,610	266.47	68	38,933	572.54
28	THYROID AGENTS	45,524	1,478,854	32.49	6,766	706,328	104.39
29	ANTILIPEMIC AGENTS MISCELLANEOUS	4,163	2,183,029	524.39	-	-	-
30	VASOPRESSIN ANTAGONISTS	-	-	-	123	2,170,512	17,646.44
31	PITUITARY	749	2,087,337	2,786.83	8	25,395	3,174.42
32	DIGESTANTS	617	1,898,136	3,076.40	-	-	-
33	HEMATOPOIETIC AGENTS	220	1,893,570	8,607.14	-	-	-
34	PROTON-PUMP INHIBITORS	72,806	1,849,272	25.40	51	29,974	587.73
35	BETA-ADRENERGIC BLOCKING AGENTS	61,826	1,835,575	29.69	10	3,840	383.98
36	ANTIBACTERIALS MISCELLANEOUS	7,331	1,802,912	245.93	4	7,285	1,821.25
37	ANTI-INFLAMMATORY AGENTS GI DRUGS	1,484	1,584,258	1,067.56	24	38,014	1,583.91
38	IMMUNOSUPPRESSIVE AGENTS	4,152	770,888	185.67	126	779,559	6,186.97
39	ESTROGENS	11,706	1,364,702	116.58	86	36,284	421.91
40	PLATELET-AGGREGATION INHIBITORS	7,472	1,314,596	175.94	1	160	159.78
	<u>All Other</u>	<u>1,171,147</u>	<u>35,236,489</u>	<u>30.09</u>	<u>5,173</u>	<u>3,475,942</u>	<u>671.94</u>
	Total	2,029,545	\$381,423,585	\$187.94	18,368	\$22,794,727	\$1,241.00

Drug Indicators by Highest Number of Scripts Increase

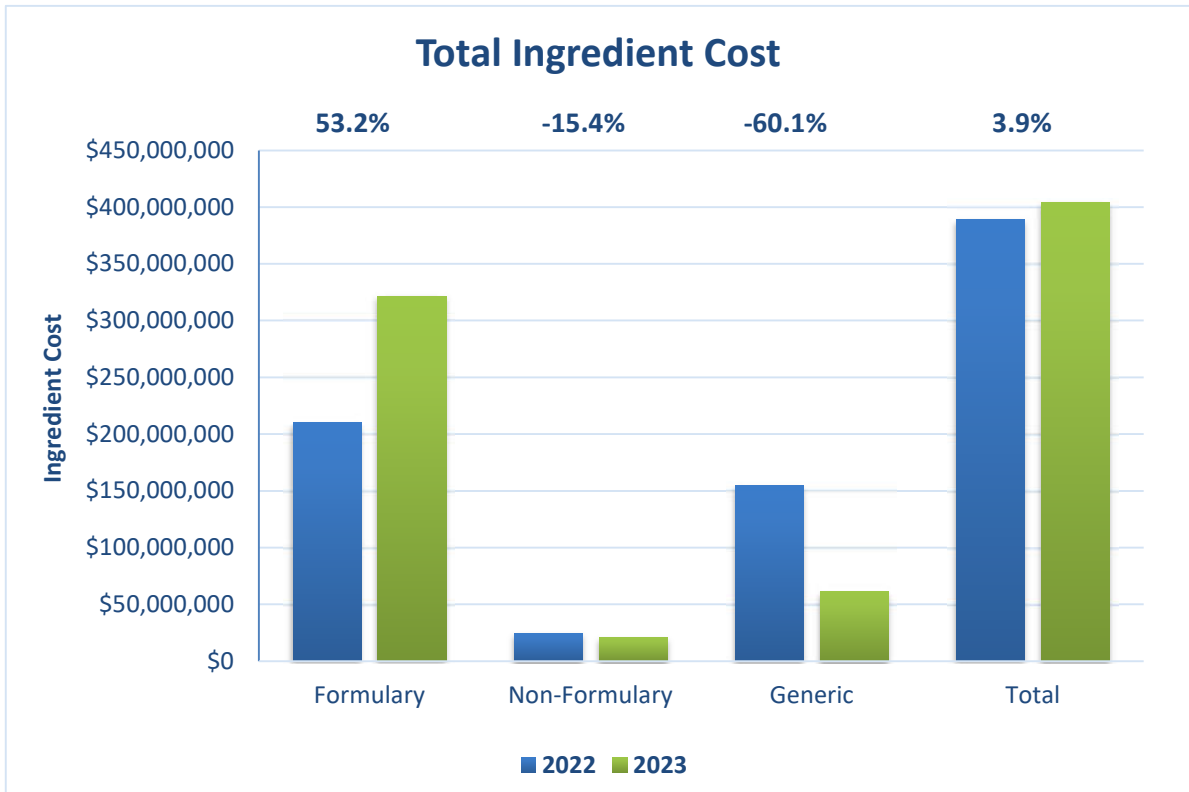
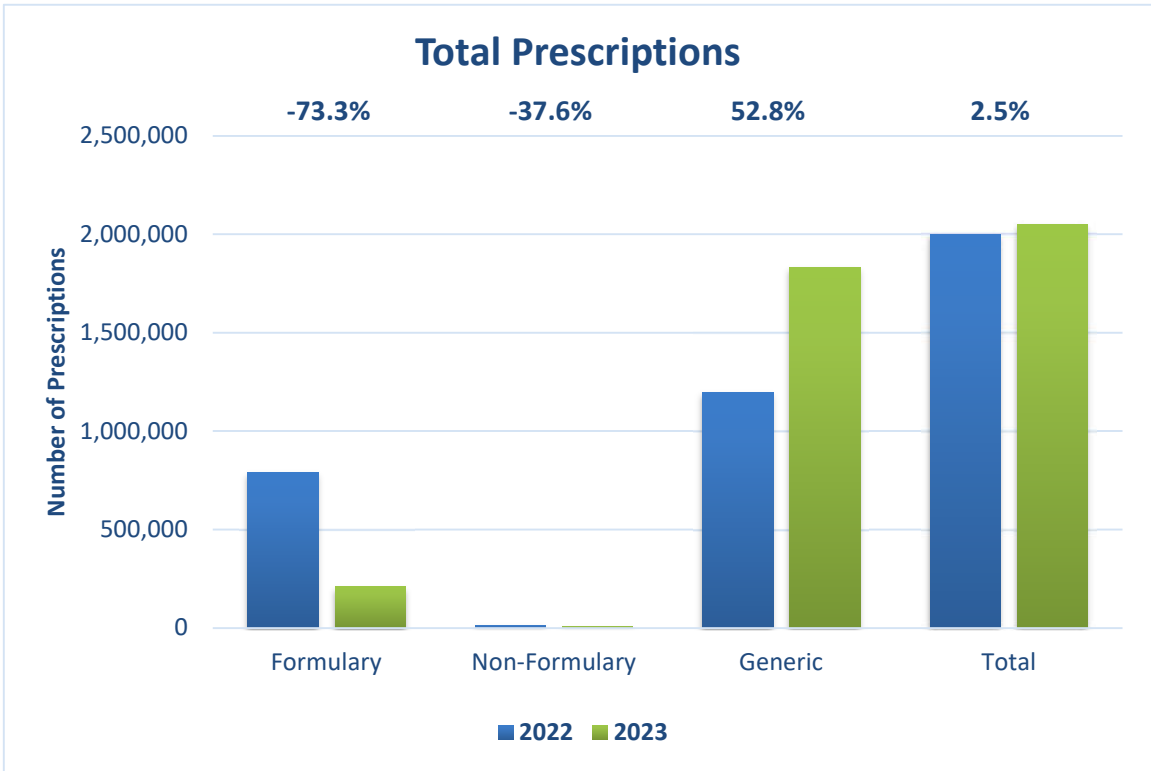
Rank	Indicator	Formulary Cost Per Script	Non-Formulary Cost Per Script	Increase/ Decrease
50	NONSTEROIDAL ANTI-INFLAMMATORY AGENTS	\$14.26	\$170.68	62,423%
85	EENT DRUGS MISCELLANEOUS	246.37	-	57,800%
175	ANOREXIGENIC AGENTS	40.10	-	10,900%
109	POTASSIUM-SPARING DIURETICS	21.65	796.35	6,332%
53	RESPIRATORY TRACT AGENTS MISCELLANEOUS	2,259.15	-	4,757%
29	EENT ANTI-INFLAMMATORY AGENTS MISC	1,200.29	1,115.30	1,402%
98	ALPHA-ADRENERGIC BLOCKING AGENT SYMPATH	23.52	-	1,166%
150	MAST-CELL STABILIZERS	367.13	-	460%
133	EENT ANTI-INFECTIVES MISCELLANEOUS	5.15	-	459%
102	ANTIVIRALS MISCELLANEOUS	24.84	5,099.28	430%
169	MULTIVITAMIN PREPARATIONS	7.45	294.81	343%
132	SOMATOSTATIN AGONISTS	17,134.16	-	300%
172	CARIOSTATIC AGENTS	9.67	18.31	278%
64	VESICULAR MONOAMINE TRANSPORT2 INHIBITOR	1,422.50	7,375.87	267%
77	ANTIPROTOZOALS MISCELLANEOUS	22.94	-	235%
44	A/B ADRENAL AGONISTS	120.78	7,010.18	227%
138	ANTIPRURITICS AND LOCAL ANESTHETICS	12.63	-	200%
91	ANTIFUNGALS	7.46	327.19	190%
118	ALPHA-ADRENERGIC AGONISTS EENT	143.64	298.38	181%
12	DEVICES	121.36	55.97	178%

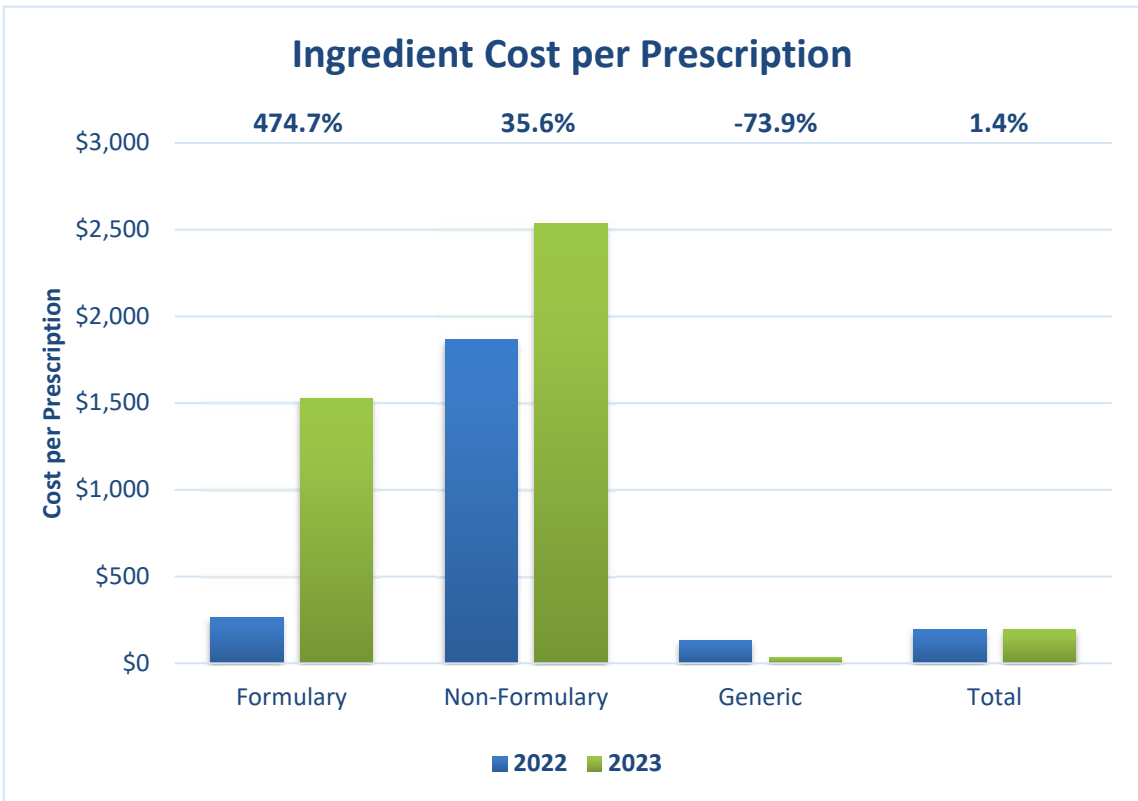
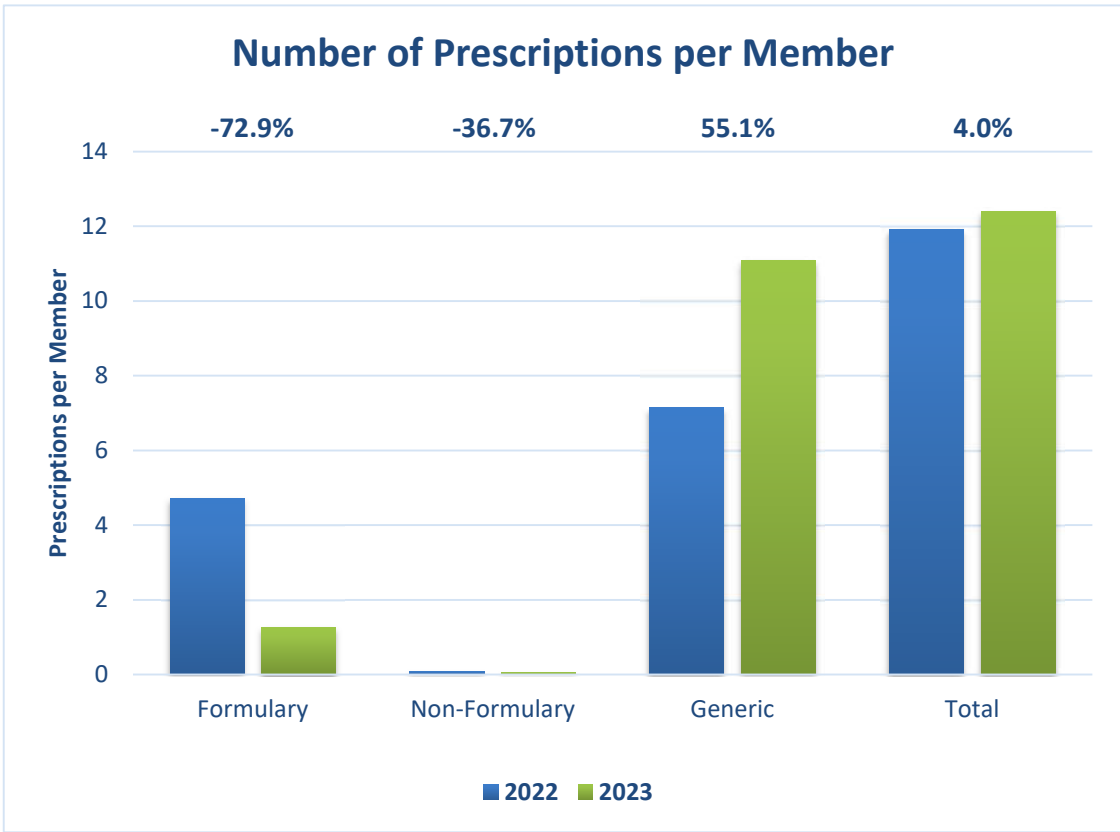
Drug Indicators by Highest Number of Scripts Increase
(continued)

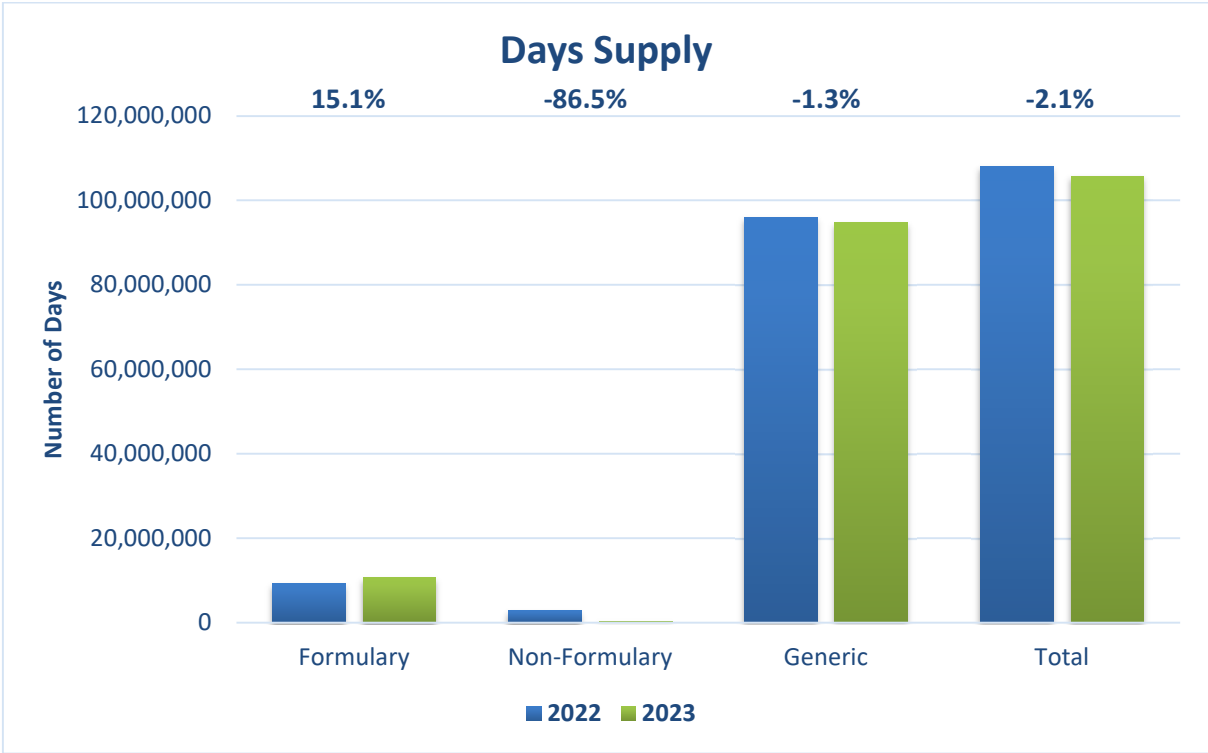
Rank	Indicator	Formulary Cost Per Script	Non-Formulary Cost Per Script	Increase/ Decrease
111	NEURAMINIDASE INHIBITOR ANTIVIRALS	\$20.36	\$66.19	168%
184	VITAMIN K ACTIVITY	262.25	-	156%
108	ELECTROLYTIC CALORIC WATER BALANCE MISC	16,016.25	-	150%
66	GONADOTROPINS	5,537.24	-	136%
55	BETA-3-ADRENERGIC AGONISTS	850.01	896.20	133%
33	VASOPRESSIN ANTAGONISTS	-	17,646.44	118%
19	PITUITARY	2,796.57	3,174.42	113%
41	ANXIOLYTICS SEDATIVES AND HYPNOTICS MISC	14.42	344.43	110%
107	DOPAMINE PRECURSORS	72.42	1,570.45	106%
62	PROTECTANTS	111.11	72.00	100%
21	BETA-ADRENERGIC BLOCKING AGENTS	29.69	383.98	99%
1	INCRETIN MIMETICS	1,580.90	1,534.57	81%
57	ANTIMALARIAL AGENTS	77.23	145.81	81%
96	PHOSPHATE-REMOVING AGENTS	690.22	2,457.66	80%
56	REPLACEMENT PREPARATIONS	39.16	29.26	79%
58	PARATHYROID AGENTS	3,196.31	2,500.74	74%
123	CATHARTICS AND LAXATIVES	28.64	47.98	72%
140	ANTIVIRALS	526.32	281.04	70%
178	RHO KINASE INHIBITORS	-	470.28	70%
191	MIOTICS	74.11	-	63%

Drugs by Highest Cost
Analysis of Formulary Distribution

<u>Rank</u>	<u>Drug</u>	Formulary			Non-Formulary		
		<u>Number of Scripts</u>	<u>Ingredient Costs</u>	<u>Cost Per Script</u>	<u>Number of Scripts</u>	<u>Ingredient Costs</u>	<u>Cost Per Script</u>
1	OZEMPIC	20,647	\$32,421,457	\$1,570.27	-	\$ -	\$ -
2	HUMIRA(CF) PEN	3,836	28,928,173	7,541.23	-	-	-
3	TRULICITY	7,904	14,903,105	1,885.51	-	-	-
4	STELARA	559	12,564,255	22,476.31	-	-	-
5	MOUNJARO	8,171	10,431,423	1,276.64	-	-	-
6	JARDIANCE	6,712	9,479,695	1,412.35	-	-	-
7	FARXIGA	5,850	8,091,566	1,383.17	-	-	-
8	XARELTO	5,242	6,647,412	1,268.11	-	-	-
9	TREMFYA	494	6,230,043	12,611.42	-	-	-
10	JANUVIA	4,505	6,005,329	1,333.04	-	-	-
11	SKYRIZI PEN	307	5,761,522	18,767.17	-	-	-
12	OTEZLA	1,263	5,397,886	4,273.86	-	-	-
13	TALTZ AUTOINJECTOR	817	5,203,546	6,369.09	-	-	-
14	TRESIBA FLEXTOUCH U-200	2,652	5,085,944	1,917.78	-	-	-
15	ENBREL SURECLICK	791	4,970,276	6,283.53	-	-	-
16	DUPIXENT SYRINGE	1,353	4,555,192	3,366.73	-	-	-
17	TRIKAFTA	164	4,153,749	25,327.74	-	-	-
18	HUMALOG KWIKPEN U-100	3,198	4,082,448	1,276.56	-	-	-
19	DUPIXENT PEN	1,174	3,984,556	3,394.00	-	-	-
20	VYVANSE	11,128	3,874,346	348.16	-	-	-
	<u>All Other</u>	<u>1,942,778</u>	<u>198,651,661</u>	<u>102.25</u>	<u>18,368</u>	<u>22,794,727</u>	<u>1,241.00</u>
	Total	2,029,545	\$381,423,585	\$187.94	18,368	\$22,794,727	\$1,241.00







1 – Incretin Mimetics

In FY 2023, the Incretin Mimetics Drugs category was first in cost to PEIA with expenditure of \$64,778,750, which accounted for 16.0% of total expenditures. Formulary expenditures were \$64,562,375 or 99.7% of Incretin Mimetics expenditures and total expenditures had a 51.6% trend from 2022 to 2023.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2022	2023	Growth	2022	2023	Growth	2022	2023	Growth
OZEMPIC	Yes	SSB	11,464	20,647	80.1%	\$1,769	\$1,570	-11.3%	\$20,284,756	\$32,421,457	59.8%
TRULICITY	Yes	SSB	7,791	7,904	1.5%	2,084	1,886	-9.5%	16,236,550	14,903,105	-8.2%
MOUNJARO	Yes	SSB	0	8,171	NA	NA	1,277	NA	NA	10,431,423	NA
RYBELSUS	Yes	SSB	1,462	1,993	36.3%	1,788	1,763	-1.4%	2,613,446	3,513,931	34.5%
WEGOVY	Yes	SSB	122	1,910	1,465.6%	1,445	1,660	14.9%	176,233	3,171,084	1,699.4%
<u>Subtotals</u>											
Generic	Y	GEN	22,579	0	-100.0%	\$1,909	NA	NA	\$43,104,464	\$0	-100.0%
Formulary Brand	Y	Brand	0	40,698	NA	NA	1,586	NA	NA	64,562,375	NA
Non-Formulary Brand	N	Brand	0	141	NA	NA	1,535	NA	NA	216,375	NA
<u>Total</u>			<u>22,579</u>	<u>40,839</u>	<u>80.9%</u>	<u>\$1,909</u>	<u>\$1,586</u>	<u>-16.9%</u>	<u>\$43,104,464</u>	<u>\$64,778,750</u>	<u>50.3%</u>
Trends Adjusted for Exposure					82.5%			-16.9%			51.6%

2 – Disease-Modifying Antirheumatic Drugs

In FY 2023, the Disease-Modifying Antirheumatic category was second in cost to PEIA with expenditure of \$59,223,947, which accounted for 14.7% of total expenditures overall. Formulary expenditures were \$55,587,252 or 93.9% of Antirheumatic expenditures and total ingredient cost had a 2.4% trend from 2022 to 2023.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2022	2023	Growth	2022	2023	Growth	2022	2023	Growth
HUMIRA(CF) PEN	Yes	SSB	4,161	3,836	-7.8%	\$6,847	\$7,541	10.1%	\$28,491,629	\$28,928,173	1.5%
OTEZLA	Yes	SSB	1,354	1,263	-6.7%	3,930	4,274	8.7%	5,321,802	5,397,886	1.4%
ENBREL SURECLICK	Yes	SSB	807	791	-2.0%	5,782	6,284	8.7%	4,666,265	4,970,276	6.5%
HUMIRA PEN	Yes	SSB	57	486	752.6%	17,355	7,061	-59.3%	989,232	3,431,530	246.9%
RINVOQ	Yes	SSB	263	437	66.2%	5,286	5,999	13.5%	1,390,240	2,621,675	88.6%
<u>Subtotals</u>											
Generic	Y	GEN	299	732	144.8%	\$5,316	\$96	-98.2%	\$1,589,423	\$70,056	-95.6%
Formulary Brand	Y	Brand	9,149	8,404	-8.1%	5,897	6,606	12.0%	53,949,251	55,517,196	2.9%
Non-Formulary Brand	N	Brand	473	641	35.5%	4,844	5,673	17.1%	2,291,334	3,636,695	58.7%
<u>Total</u>			<u>9,921</u>	<u>9,777</u>	<u>-1.5%</u>	<u>\$5,829</u>	<u>\$6,057</u>	<u>3.9%</u>	<u>\$57,830,008</u>	<u>\$59,223,947</u>	<u>2.4%</u>
Trends Adjusted for Exposure											2.4%

3 – Skin & Mucous Membrane Agents

In FY 2023, the Skin & Mucous Drugs indicator category was third in cost to PEIA with expenditure of \$42,842,236, which accounted for 10.6% of total expenditures. Formulary expenditures were \$45,539,940 or 99.3% of Skin & Mucous Drugs' expenditures. Total expenditures had a 29.2% trend from 2022 to 2023.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2022	2023	Growth	2022	2023	Growth	2022	2023	Growth
STELARA	Yes	SSB	491	559	13.8%	\$21,277	\$22,476	5.6%	\$10,447,108	\$12,564,255	20.3%
TREMFYA	Yes	SSB	403	494	22.6%	12,139	12,611	3.9%	4,891,959	6,230,043	27.4%
SKYRIZI PEN	Yes	SSB	177	307	73.4%	17,553	18,767	6.9%	3,106,964	5,761,522	85.4%
TALTZ AUTOINJECTOR	Yes	SSB	720	817	13.5%	6,856	6,369	-7.1%	4,936,104	5,203,546	5.4%
DUPIXENT SYRINGE	Yes	SSB	1,653	1,353	-18.1%	3,274	3,366	2.8%	5,411,393	4,555,192	-15.8%
Subtotals											
Generic	Y	GEN	4,455	4,398	-1.3%	\$358	\$213	-40.4%	\$1,595,607	\$938,696	-41.2%
Formulary Brand	Y	Brand	4,008	5,105	27.4%	6,628	8,149	23.0%	26,563,733	41,601,244	56.6%
Non-Formulary Brand	N	Brand	844	187	-77.8%	5,968	1,617	-72.9%	5,037,175	302,295	-94.0%
Total			9,307	9,690	4.1%	\$3,567	\$4,421	24.0%	\$33,196,515	\$42,842,236	29.1%
Trends Adjusted for Exposure					4.2%			24.0%			29.2%

4 – Antineoplastic Agents

In FY 2023, the Antineoplastic Agents indicator category was fourth in cost to PEIA with expenditure of \$27,606,507, which accounted for 6.8% of total expenditures. Formulary expenditures were \$24,772,800 or 89.7% of Antineoplastic Agents. Total expenditures had a 13.8% trend from 2022 to 2023.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2022	2023	Growth	2022	2023	Growth	2022	2023	Growth
REVLIMID	Yes	SSB	209	199	-4.8%	\$15,706	\$16,276	3.6%	\$3,282,580	\$3,239,015	-1.3%
SPRYCEL	Yes	SSB	144	203	41.0%	13,902	14,212	2.2%	2,001,958	2,885,105	44.1%
IBRANCE	Yes	SSB	175	166	-5.1%	13,099	13,675	4.4%	2,292,259	2,270,089	-1.0%
IMBRUVICA	Yes	SSB	180	147	-18.3%	14,172	13,612	-4.0%	2,550,988	2,000,983	-21.6%
VERZENIO	Yes	SSB	44	122	177.3%	12,135	12,534	3.3%	533,948	1,529,137	186.4%
<u>Subtotals</u>											
Generic	Y	GEN	4,313	7,317	69.6%	\$1,052	\$464	-55.9%	\$4,536,558	\$3,395,917	-25.1%
Formulary Brand	Y	Brand	1,506	1,481	-1.7%	9,412	14,434	53.4%	14,174,300	21,376,883	50.8%
Non-Formulary Brand	N	Brand	405	208	-48.6%	14,052	13,624	-3.0%	5,691,049	2,833,707	-50.2%
<u>Total</u>			<u>6,224</u>	<u>9,006</u>	<u>44.7%</u>	<u>\$3,921</u>	<u>\$3,065</u>	<u>-21.8%</u>	<u>\$24,401,908</u>	<u>\$27,606,507</u>	<u>13.1%</u>
Trends Adjusted for Exposure					45.6%			-21.8%			13.8%

5 – Insulins

In FY 2023, the Insulins indicator category was fifth in cost to PEIA with expenditure of \$24,727,602, which accounted for 6.1% of total expenditures. Formulary expenditures were \$24,580,943 or 99.4% of Insulin expenditures. Total expenditures had a -9.3% trend from 2022 to 2023.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2022	2023	Growth	2022	2023	Growth	2022	2023	Growth
TRESIBA FLEXTOUCH	Yes	SSB	4,470	5,119	14.5%	\$1,789	\$1,496	-16.4%	\$7,997,448	\$7,660,221	-4.2%
HUMALOG KWIKPEN	Yes	SSB	11	4,004	36,300.0%	3,030	1,393	-54.0%	33,325	5,576,297	16,633.1%
HUMALOG	Yes	SSB	13	1,860	14,207.7%	2,014	1,812	-10.0%	26,183	3,370,733	12,773.6%
LEVEMIR FLEXTOUCH	Yes	SSB	2,260	1,860	-17.7%	1,486	1,812	21.9%	3,359,313	3,370,733	0.3%
LEVEMIR FLEXPEN	Yes	SSB	0	1,901	NA	NA	1,127	NA	NA	2,142,615	NA
Subtotals											
Generic	Y	GEN	10,047	0	-100.0%	\$1,609	NA	NA	\$16,168,765	\$0	-100.0%
Formulary Brand	Y	Brand	6,832	17,524	156.5%	1,626	1,403	-13.7%	11,106,997	24,580,943	121.3%
Non-Formulary Brand	N	Brand	7	147	2000.0%	210	998	374.9%	1,471	146,658	9872.8%
Total			16,886	17,671	4.6%	\$1,615	\$1,399	-13.4%	\$27,277,233	\$24,727,602	-9.3%
Trends Adjusted for Exposure											-9.3%