



STATE OF WEST VIRGINIA



PUBLIC EMPLOYEES INSURANCE AGENCY

Fiscal Year 2025

Detailed Medical and Gross Prescription Drug Claim Trend Report

Report Date: October 2025

YOUR ACTUARIES FOR THE LONG-TERM!

TABLE OF CONTENTS

OVERVIEW	1
KEY FINDINGS	2
METHODOLOGY	8
TREND COMPARISON USING ALLOWED VERSUS PAID METHODOLOGY	10
TOP 5 CATEGORIES	10
SUMMARY	11
TOTAL NON-MEDICARE TREND	13
NON-MEDICARE 24-MONTH TREND	14
NON-MEDICARE 36-MONTH TREND	15
NON-MEDICARE 48-MONTH TREND	16
NON-MEDICARE 12-MONTH IN-STATE VERSUS OUT OF STATE CLAIMS	17
NON-MEDICARE GROSS PRESCRIPTION DRUG TREND	18
Appendix A:	
Non-Medicare Medical Coverages – Cost Per Service, Utilization, Incurred PMPM Trends	
Appendix B	
Non-Medicare Gross Prescription Drug 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 2025 Detailed Medical and Gross Prescription Drug 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, 2025 on a quarterly basis and the forecasting of Fiscal Years 2026 through 2030. This annual trend report to the Finance Board generally serves as the basis for projecting medical and gross prescription drug claims through Fiscal Year 2030 in the development of the Financial Plan to be approved by the PEIA Finance Board in December 2025. 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 gross prescription drug claims experience using Allowed Non-Medicare claims incurred and paid through June 2025. 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 prescription drug. 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 drug claims. Effective July 1, 2019, administration was assumed by United Medical Resources Inc. (“UMR”). The analysis utilized claims 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 2025. The analysis for medical claims do not include incurred claims for the months after June 2025. The claims experience for the months after June 2025 is largely non-credible as substantial reserves as part of the projected monthly incurred amount. The claims 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 claims information provided by UMR used in this analysis was reconciled and balanced to the PEIA general ledger amounts as of June 2025.

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 20.0% in last year’s analysis to 6.4% in Fiscal Year 2025 using a 24-month study period, due to stabilization in the West Virginia hospital reimbursements fee schedules and lesser large claims payment made in FY 2025. Using the 24-month analysis, PEIA experienced a 6.1% trend in utilization and a 0.3% trend in unit cost, resulting in an aggregate trend of 6.4%. The 36-month method resulted in a higher trend of 12.3% and the 48-month method resulted in a higher trend of 10.4%.

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%
2024	7.5%	11.6%	20.0%
2025	6.1%	0.3%	6.4%

- 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 2025 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 2025 Claims Type	Medical	Gross Prescription Drug
PEIA – Active Local	10.6%	12.0%
PEIA – State	<u>5.4%</u>	<u>12.6%</u>
PEIA – Total	6.4%	12.5%
RHBT – Non-Medicare	3.7%	18.7%
Grand Total	6.2%	13.1%

- In the 12-month analysis, the following 3 tables show the comparison of this year’s weight and last year’s weight by the number of visits and the total allowed cost, between In-State, OOS NBC and OOS BC, and by the four categories (HI, HO, PS and O). There was a noticeable shift of weight for the total allowed cost from OOS NBC and OOS BC to In-State under Hospital Inpatient, a 2.6% increase from last year to this year.

	12 Month Summary (FY 2025 Weight)					
	<u>Number of Visits</u>			<u>Total Allowed Cost</u>		
	<u>In-State %</u>	<u>OOS NBC %</u>	<u>OOS BC %</u>	<u>In-State %</u>	<u>OOS NBC %</u>	<u>OOS BC %</u>
Hospital Inpatient	83.1%	11.2%	5.7%	73.1%	21.0%	6.0%
Hospital Outpatient	93.4%	3.3%	3.3%	76.3%	12.4%	11.3%
Physician Services	85.3%	10.5%	4.2%	81.5%	13.6%	4.9%
<u>Other Services</u>	<u>80.8%</u>	<u>16.6%</u>	<u>2.5%</u>	<u>80.6%</u>	<u>17.6%</u>	<u>1.8%</u>
Total	86.7%	9.3%	4.0%	77.6%	14.9%	7.5%

	12 Month Summary (FY 2024 Weight)					
	<u>Number of Visits</u>			<u>Total Allowed Cost</u>		
	<u>In-State %</u>	<u>OOS NBC %</u>	<u>OOS BC %</u>	<u>In-State %</u>	<u>OOS NBC %</u>	<u>OOS BC %</u>
Hospital Inpatient	82.8%	11.9%	5.3%	70.5%	24.3%	5.2%
Hospital Outpatient	93.1%	3.7%	3.2%	75.9%	12.9%	11.2%
Physician Services	85.3%	10.8%	3.8%	81.1%	14.3%	4.6%
<u>Other Services</u>	<u>77.1%</u>	<u>19.4%</u>	<u>3.6%</u>	<u>78.2%</u>	<u>19.4%</u>	<u>2.4%</u>
Total	86.5%	9.8%	3.7%	76.7%	16.3%	7.0%

	12 Month Summary (FY 2025 vs FY 2024 Difference)					
	Number of Visits			Total Allowed Cost		
	In-State %	OOS NBC %	OOS BC %	In-State %	OOS NBC %	OOS BC %
Hospital Inpatient	0.2%	-0.6%	0.4%	2.6%	-3.4%	0.8%
Hospital Outpatient	0.3%	-0.4%	0.1%	0.4%	-0.5%	0.1%
Physician Services	0.0%	-0.4%	0.4%	0.3%	-0.7%	0.3%
<u>Other Services</u>	<u>3.8%</u>	<u>-2.7%</u>	<u>-1.0%</u>	<u>2.4%</u>	<u>-1.8%</u>	<u>-0.6%</u>
Total	0.2%	-0.5%	0.3%	0.8%	-1.4%	0.5%

- In the 24-month analysis, OOS BC services have experienced higher trends than In-State and OOS NBC services for Non-Medicare coverages in three out of four categories (HI, HO and PS, not O). 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 7.4%, an aggregate OOS NBC trend of -4.5%, and an aggregate OOS BC trend of 13.6%.

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 5.5%, while the OOS NBC trend was -9.5% and the OOS BC trend was 10.4%. The In-State cost per service trend for Non-Medicare was 1.8%, while the OOS NBC trend was 5.6%, and the OOS BC trend was 2.9%.

Within the In-State medical categories, the 3 highest trend subcategories were observed for Hospital Inpatient’s Psychiatric / Substance Abuse, Hospital Outpatient’s Medical / Surgical and Hospital Outpatient’s Emergency Room categories. These categories experienced high trends of 21.6%, 18.5% and 14.8%, respectively.

- Using the 24-month analysis, Hospital Inpatient services (“HI”) represent 23.2% of all medical services and experienced a total trend of 4.4%. The overall trend was the product of a -0.8% decrease in utilization and a 5.2% increase in unit cost. In-State HI claims had a 12.4% overall trend, while OOS NBC HI claims experienced a -14.9% overall trend, and OOS BC HI claims experienced a 16.7% overall trend.
- Using the 24-month analysis, Hospital Outpatient services (“HO”) represent 35.5% of all medical services and experienced the least favorable trend of the broader claims categories with a total trend of 18.0%. The overall trend was the product of a 16.3% increase in utilization and a 1.4% increase in unit cost. In-State HO claims had a 16.4% overall trend, while OOS NBC HO claims experienced a 10.1% overall trend, and OOS BC HO claims experienced an 18.3% overall trend.
- Using the 24-month analysis, Physician Services (“PS”) represent 40.0% of all medical services and experienced a total trend of -2.2%. The overall trend was the product of a 1.3% increase in utilization of these services and a -3.4% decrease in unit cost. In-State PS claims had a -2.4% overall trend, while OOS NBC PS claims experienced a -4.7% overall trend, and OOS BC PS claims experienced a 1.9% overall trend.

- Using the 24-month analysis, Other services (“O”), which are services that are principally Ambulance and Durable Medical Services, represent 1.3% of all medical services and experienced a total trend of -4.2%. The overall trend was the product of a -4.1% decrease in utilization of these services and a -0.1% decrease in unit cost. In-State O claims showed a -1.1% overall trend, while OOS NBC O claims experienced a -25.4% overall trend, and OOS BC O claims experienced a -29.0% 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.
- The table below summarizes the 24-month, 36-month and 48-month trends for Non-Medicare Hospital Inpatient, Hospital Outpatient, Physician Services, Other Services and Total trend.

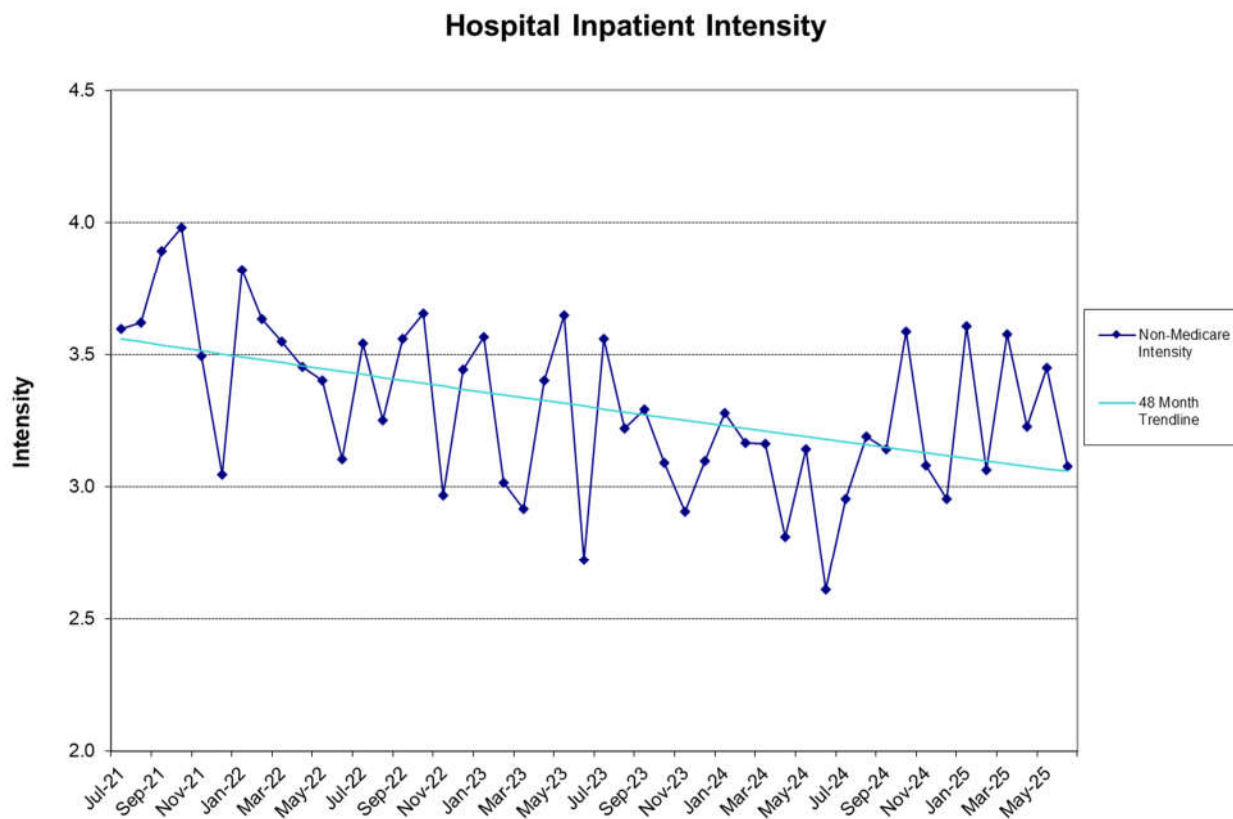
West Virginia PEIA Non-Medicare Medical Total Allowed Claim trend Summary			
	<u>24-Month</u>	<u>36-Month</u>	<u>48-Month</u>
Hospital Inpatient	4.4%	29.2%	23.3%
Hospital Outpatient	18.0%	15.2%	13.1%
Physician Services	-2.2%	0.8%	1.8%
<u>Other Services</u>	<u>-4.2%</u>	<u>4.3%</u>	<u>5.5%</u>
Total	6.4%	12.3%	10.4%

- The Hospital Outpatient exhibited one of the highest trends out of the four major medical categories. Particularly, Emergency Room, Medical / Surgical, and Other Services have experienced higher trends as shown in the table below. The PEIA management team should consider both reimbursement methods and benefit redesign to address these extraordinary claim trend in Hospital Outpatient.

West Virginia PEIA Non-Medicare Hospital Outpatient Trend Analysis			
	<u>24-Month</u>	<u>36-Month</u>	<u>48-Month</u>
Emergency Room	14.7%	9.9%	10.2%
Medical / Surgical	19.6%	17.0%	16.5%
Other Services	16.3%	14.6%	9.6%
<u>Psychiatric / Substance Abuse</u>	<u>-14.9%</u>	<u>-27.7%</u>	<u>-15.1%</u>
Total	18.0%	15.2%	13.1%

- In the 24-month analysis, Hospital Inpatient trends were lower than the overall medical trend in this year’s report. Conversely, Hospital Inpatient trends were substantially higher than the overall medical trend in last year’s report.

- A component of the cost per service trend for hospital inpatient is the length of stay, or intensity. The chart below shows the average length of stay by number of days over the last four years. Over the 48-month analysis, the intensity for Non-Medicare hospital stays has an annual trend of -4.2%, which is comparable to -4.3% last year. The historical data is illustrated in the chart below.



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

West Virginia PEIA Non-Medicare Hospital Inpatient Trend Analysis			
	<u>24-Month</u>	<u>36-Month</u>	<u>48-Month</u>
Visits	-8.4%	-1.1%	-1.9%
Intensity	1.5%	-1.0%	-4.2%
<u>Cost/Day</u>	<u>12.2%</u>	<u>32.0%</u>	<u>31.1%</u>
Total	4.4%	29.2%	23.3%

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

In the 12-month period ending June 2025, 86.7% of medical services were provided in the State of West Virginia, 9.3% of services were provided OOS NBC, and 4.0% of services were provided OOS BC. From a cost perspective, 77.6% of allowed charges were incurred In-State, 14.9% of allowed charges were provided OOS NBC, and 7.5% 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, 83.1% of Hospital Inpatient services were provided in the State of West Virginia representing 73.1% of the total allowed charges for Hospital Inpatient. Conversely, 11.2% of Hospital Inpatient services were provided OOS NBC and those charges represented 21.0% of the total allowed charges for Hospital Inpatient. In addition, 5.7% of Hospital Inpatient services were provided OOS BC and those charges represented 6.0% of the total allowed charges for Hospital Inpatient.

By major medical category, 93.4% of Hospital Outpatient services were provided in the State of West Virginia representing 76.3% of the total allowed charges for Hospital Outpatient. Conversely, 3.3% of Hospital Outpatient services were provided OOS NBC and those charges represented 12.4% of the total allowed charges for Hospital Outpatient. In addition, 3.3% of Hospital Outpatient services were provided OOS BC and those charges represented 11.3% of the total allowed charges for Hospital Outpatient.

By major medical category, 85.3% of Physician Services were provided in the State of West Virginia representing 81.5% of the total allowed charges for Physician Services. Conversely, 10.5% of Physician Services were provided OOS NBC and those charges represented 13.6% of the total allowed charges for Physician Services. In addition, 4.2% of Physician Services were provided OOS BC and those charges represented 4.9% of the total allowed charges for Physician Services.

By major medical category, 80.8% of Other Services were provided in the State of West Virginia representing 80.6% of the total allowed charges for Other Services. Conversely, 16.6% of Other Services were provided OOS NBC and those charges represented 17.6% of the total allowed charges for Other Services. In addition, 2.5% of Other Services were provided OOS BC and those charges represented 1.8% of the total allowed charges for Other Services.

KEY FINDINGS – GROSS PRESCRIPTION DRUG

Overall, gross prescription drug trends for Non-Medicare coverages have decreased significantly compared to 48.2% last year. Using the 24-month analysis, there was a 3.3% utilization increase and an 8.9% prescription cost increase, resulting in an aggregate trend of 12.5% when adjusting for membership exposure. The 24-month overall trend is lower than the 36-month trend of 26.7% and the 48-month trend of 15.2%.

West Virginia PEIA Gross Prescription Drug Total 24-Month Trend Analysis-Allowed Claims			
	<u>Utilization</u>	<u>Cost/Prescription</u>	<u>Total Trend</u>
FY 2025	3.3%	8.9%	12.5%

The large one year rise (FY 2024) in the allowed gross prescription drug trend is likely due to the increased utilization of high cost GLP-1 drugs. PEIA has put new policies in place to limit GLP-1 drugs that are prescribed for weight loss alone.

METHODOLOGY

UMR provided allowed and paid claims information for Non-Medicare and Medicare eligibility from July 2001 through August 2025. This data set was analyzed for Non-Medicare claims that were incurred from July 2021 through June 2025 in the 48-month credible period. The claims data was consolidated into 23 categories for Hospital Inpatient, Hospital Outpatient, Physician Services, and Other. In addition, claims 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 claims lag reports that PEIA personnel have balanced to the PEIA ledger accounts.

The trend analysis includes assumptions with respect to the completeness of the claims 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 trend, individual claims 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 trend 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>FY2022</u>	<u>FY2023</u>	<u>FY2024</u>	<u>FY2025</u>
Hospital Inpatient	\$123,538,829	\$122,995,536	\$198,574,220	\$198,329,505
Hospital Outpatient	248,687,328	265,337,912	286,659,920	316,556,316
Physician Services	320,842,603	325,190,559	326,017,728	310,301,918
Other Services	26,417,184	28,208,438	28,806,451	28,101,830
Total	\$719,485,944	\$741,732,444	\$840,058,319	\$853,289,569

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>FY2022</u>	<u>FY2023</u>	<u>FY2024</u>	<u>FY2025</u>
HI Maternity	\$13,183,367	\$9,927,213	\$20,735,636	\$17,985,114
HI Medical/Surgical	106,707,605	109,064,913	169,469,180	171,288,936
HI Psychiatric/Substance Abuse	3,647,857	4,003,410	8,369,403	9,055,455
HO Emergency Room	35,726,483	39,924,532	40,884,305	44,670,123
HO Medical/Surgical	115,334,969	128,407,454	141,559,728	157,203,119
HO Other Services	94,491,383	93,131,337	101,950,864	112,750,773
HO Psychiatric/Substance Abuse	3,134,493	3,874,589	2,265,023	1,932,301
PS Anesthesia	14,323,689	14,038,057	13,634,983	12,745,221
PS Chemotherapy/Radiation	2,491,248	2,000,933	1,935,041	1,706,028
PS Emergency Room	5,653,129	5,896,243	5,980,627	5,844,648
PS Immunizations/Allergy	8,758,913	8,885,422	8,119,092	6,923,494
PS Inpatient Surgery	6,168,504	6,709,152	5,840,927	5,977,972
PS Inpatient Visits	8,386,776	7,265,030	8,035,702	7,667,840
PS Lab & Pathology	14,797,185	15,161,708	16,483,511	16,331,769
PS Maternity	9,237,080	9,070,186	8,592,642	8,067,886
PS Office Visits	79,466,753	81,750,075	78,550,964	74,917,496
PS Other Services	61,942,848	60,381,110	64,689,645	57,116,484
PS Outpatient Surgery	73,722,655	75,347,299	74,009,477	70,747,591
PS Psychiatric/Substance Abuse	23,392,736	26,020,760	28,150,822	30,762,238
PS Radiology	12,501,086	12,664,583	11,994,296	11,493,251
PS Therapy/Rehab	16,860,854	18,196,680	17,457,619	17,670,827
O Ambulance	5,078,019	5,633,087	6,273,121	5,382,719
O Durable Medical Equipment	4,478,311	4,378,671	5,075,711	5,048,284

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 2022 through 2025 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	8.5%	6.4%
36-Month Trend	13.6%	12.3%
48-Month Trend	12.0%	10.4%

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, HO-Medical / Surgical experienced the highest increase in utilization; HI-Psychiatric / Substance Abuse experienced the highest increase in cost per service; and HO-Medical / Surgical experienced the highest increase in cost per capita.

Top 5 Highest Percentage in Utilization Increases			
	2024 Average	2025 Average	Top 5
<u>Category</u>	<u>Utilization</u>	<u>Utilization</u>	<u>Highest %</u>
HO-Medical / Surgical	0.11774	0.14609	24.1%
HO-Other Services	0.15009	0.16706	11.3%
PS-Therapies	0.10901	0.11943	9.6%
HO-Psychiatric / Substance Abuse	0.00586	0.00636	8.6%
PS-Psychiatric / Substance Abuse	0.13065	0.14186	8.6%

Top 5 Highest Percentage in Cost / Service Increases			
	2024 Average	2025 Average	Top 5
<u>Category</u>	<u>Cost / Service</u>	<u>Cost / Service</u>	<u>Highest %</u>
HI-Psychiatric / Substance Abuse	\$5,559.56	\$6,376.46	14.7%
HO-Emergency Room	987.88	1,107.13	12.1%
PS-Immunizations / Injections / Allergy	99.02	109.90	11.0%
PS-Lab & Pathology	52.53	55.60	5.8%
HI-Medical / Surgical	18,071.74	19,011.42	5.2%

Top 5 Highest Percentage in Cost / Capita Increases			
	2024 Average	2025 Average	Top 5
<u>Category</u>	<u>Cost / Capita</u>	<u>Cost / Capita</u>	<u>Highest %</u>
HO-Medical / Surgical	\$75.22	\$90.00	19.6%
HO-Other Services	54.83	63.77	16.3%
HO-Emergency Room	22.00	25.25	14.7%
HI-Psychiatric / Substance Abuse	4.51	5.13	13.7%
PS-Psychiatric / Substance Abuse	15.21	17.09	12.4%

SUMMARY

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

Recent experience has shown that the Allowed Non-Medicare medical claim trend are lower than the current trend assumption of 8.5% for FY 2026. Additionally, the 24-month trend has reflected a lower 6.4% trend for medical, while the 36-month trend is 12.3% and the 48-month trend is 10.4%. CCA believes that it is appropriate to reduce the FY 2026 medical claim trend assumption for Non-Medicare medical to 5.5%, 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 prescription drug claim trend are lower than the current trend assumption of 15.5% for FY 2026. The 24-month trend has reflected a 12.5% trend for gross prescription drug, before rebates. Additionally, the pharmacy only drugs reflect a 24-month trend of 7.9% (Appendix C-1). CCA believes that it is appropriate to reduce the FY 2026 gross prescription drug claim trend assumption for Non-Medicare gross prescription drug to 12.0%. This approximates the 24-month trend experience and factors in the difference in the level of Paid trend versus Allowed trends.

The update of the trend assumptions for FY 2026 is shown below.

Claims Type	Fiscal Year 2026 Trends		
	Previous Assumption	Updated Assumption	Change
Non-Medicare – Medical	8.5%	5.5%	-3.0%
Non-Medicare – Gross Prescription Drug	15.5%	12.0%	-3.5%

In the past, claim trend for the financial plan included a 0.5% margin in future years. CCA has assumed the medical claim trend for the financial projection will increase by 1.0% in FY 2027 and in each successive fiscal year. Gross prescription drug claim trend are assumed to increase 0.5% in FY 2027 and thereafter. Additionally, CCA has separated net prescription drug in the financial plan into gross prescription drug and drug rebates 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 Medical Total
Study Period of July 2021 to June 2025
(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	-9.6%	0.5%	-9.1%	2.3%	-6.2%	30.1%	22.0%	2.0%	-5.1%	24.6%	18.2%	1.9%
Medical / Surgical	0.3%	5.2%	5.5%	19.9%	-0.3%	29.5%	29.1%	18.3%	-1.2%	24.4%	22.9%	17.5%
Psychiatric / Substance Abuse	-0.9%	14.7%	13.7%	1.0%	23.5%	16.9%	44.4%	0.9%	22.1%	16.3%	41.9%	0.8%
TOTAL	-0.8%	5.2%	4.4%	23.2%	0.1%	29.1%	29.2%	21.1%	-0.7%	24.1%	23.3%	20.2%
HOSPITAL OUTPATIENT												
Emergency Room	2.4%	12.1%	14.7%	5.0%	1.8%	7.9%	9.9%	5.1%	1.6%	8.5%	10.2%	5.1%
Medical / Surgical	24.1%	-3.6%	19.6%	17.6%	23.5%	-5.3%	17.0%	17.5%	18.5%	-1.7%	16.5%	17.2%
Other Services	11.3%	4.5%	16.3%	12.7%	9.4%	4.8%	14.6%	12.6%	3.7%	5.7%	9.6%	12.7%
Psychiatric / Substance Abuse	8.6%	-21.6%	-14.9%	0.2%	11.4%	-35.1%	-27.7%	0.3%	12.3%	-24.4%	-15.1%	0.4%
TOTAL	16.3%	1.4%	18.0%	35.5%	15.3%	-0.1%	15.2%	35.6%	10.7%	2.2%	13.1%	35.4%
PHYSICIAN SERVICES												
Anesthesia	-2.0%	1.7%	-0.4%	1.6%	-10.3%	11.4%	-0.1%	1.7%	-15.6%	18.2%	-0.2%	1.7%
Chemotherapy / Radiation	-1.2%	1.1%	-0.1%	0.2%	-4.7%	1.3%	-3.5%	0.2%	-2.4%	-6.7%	-8.9%	0.3%
Emergency Room	-1.8%	1.6%	-0.2%	0.7%	-1.2%	3.9%	2.7%	0.7%	1.2%	2.7%	3.9%	0.7%
Immunizations / Injections / Allergy	-29.3%	11.0%	-21.5%	0.9%	-20.3%	6.5%	-15.1%	1.0%	-13.7%	5.0%	-9.3%	1.0%
Inpatient Surgery	-2.4%	4.2%	1.7%	0.7%	-1.0%	-1.3%	-2.3%	0.8%	-1.6%	2.1%	0.4%	0.8%
Inpatient Visits	6.7%	-7.3%	-1.1%	0.9%	8.3%	-2.6%	5.5%	0.9%	4.5%	-3.5%	0.8%	1.0%
Lab & Pathology	-1.5%	5.8%	4.3%	2.0%	-4.1%	11.0%	6.4%	2.0%	-6.9%	12.8%	5.0%	2.0%
Maternity	-5.3%	3.2%	-2.3%	1.0%	0.8%	-3.4%	-2.5%	1.1%	1.6%	-3.6%	-2.1%	1.1%
Office Visits	-1.8%	-2.3%	-4.1%	9.1%	-0.1%	-1.6%	-1.7%	9.7%	-0.6%	0.7%	0.1%	10.0%
Other Services	0.4%	-10.2%	-9.9%	7.3%	-0.1%	-0.6%	-0.7%	7.5%	-3.0%	3.8%	0.8%	7.8%
Outpatient Surgery	5.4%	-7.2%	-2.2%	8.6%	4.2%	-3.6%	0.4%	9.1%	5.1%	-3.7%	1.2%	9.4%
Psychiatric / Substance Abuse	8.6%	3.5%	12.4%	3.5%	7.6%	4.4%	12.4%	3.5%	7.7%	4.3%	12.3%	3.4%
Radiology	3.0%	-5.1%	-2.3%	1.4%	2.2%	-3.6%	-1.5%	1.5%	0.8%	-0.8%	0.0%	1.6%
Therapies	9.6%	-4.7%	4.4%	2.1%	6.1%	-3.8%	2.0%	2.2%	5.4%	-1.6%	3.7%	2.2%
TOTAL	1.3%	-3.4%	-2.2%	40.0%	0.9%	-0.2%	0.8%	41.9%	0.2%	1.6%	1.8%	43.1%
OTHER												
Ambulance	-14.3%	1.6%	-12.9%	0.7%	-4.9%	4.6%	-0.5%	0.7%	2.9%	0.9%	3.8%	0.7%
Appliances (DME)	7.6%	-2.2%	5.3%	0.6%	-0.3%	10.4%	10.0%	0.6%	-2.8%	10.4%	7.3%	0.6%
TOTAL	-4.1%	-0.1%	-4.2%	1.3%	-2.8%	7.2%	4.3%	1.3%	0.3%	5.3%	5.5%	1.3%
GRAND TOTAL	6.1%	0.3%	6.4%	100.0%	5.8%	6.1%	12.3%	100.0%	3.7%	6.4%	10.4%	100.0%

**West Virginia PEIA Non-Medicare Medical Total
Study Period of July 2023 to June 2025
(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	-11.3%	22.5%	8.6%	-20.3%	7.2%	-14.5%	-6.2%	-0.6%	-6.7%	-9.6%	0.5%	-9.1%	2.2%	2.2%	2.6%	2.3%
Medical / Surgical	0.7%	11.4%	12.1%	-18.9%	5.1%	-14.7%	5.6%	14.9%	21.3%	0.3%	5.2%	5.5%	17.7%	32.2%	15.3%	19.9%
Psychiatric / Substance Abuse	0.6%	20.9%	21.6%	-16.1%	-10.6%	-25.0%	3.3%	-4.2%	-1.0%	-0.9%	14.7%	13.7%	1.1%	0.8%	0.2%	1.0%
TOTAL	-0.6%	13.1%	12.4%	-18.9%	4.9%	-14.9%	3.8%	12.4%	16.7%	-0.8%	5.2%	4.4%	21.1%	35.1%	18.2%	23.2%
HOSPITAL OUTPATIENT																
Emergency Room	1.0%	13.6%	14.8%	-9.8%	21.8%	9.9%	0.6%	3.6%	4.2%	2.4%	12.1%	14.7%	4.6%	3.6%	13.1%	5.0%
Medical / Surgical	23.0%	-3.6%	18.5%	-1.0%	12.1%	11.0%	16.3%	3.4%	20.3%	24.1%	-3.6%	19.6%	17.3%	14.6%	27.1%	17.6%
Other Services	9.4%	3.8%	13.6%	-4.3%	14.2%	9.3%	20.0%	6.5%	27.7%	11.3%	4.5%	16.3%	13.0%	10.0%	14.8%	12.7%
Psychiatric / Substance Abuse	7.5%	-20.7%	-14.7%	-4.6%	-26.0%	-29.3%	-18.4%	7.0%	-12.7%	8.6%	-21.6%	-14.9%	0.3%	0.2%	0.2%	0.2%
TOTAL	15.0%	1.2%	16.4%	-3.3%	13.8%	10.1%	13.4%	4.3%	18.3%	16.3%	1.4%	18.0%	35.2%	28.4%	55.3%	35.5%
PHYSICIAN SERVICES																
Anesthesia	-1.6%	6.7%	5.0%	-6.8%	-4.5%	-11.0%	-0.2%	-19.9%	-20.0%	-2.0%	1.7%	-0.4%	1.5%	2.2%	1.3%	1.6%
Chemotherapy / Radiation	-1.0%	-16.0%	-16.8%	2.5%	151.3%	157.5%	2.5%	-15.9%	-13.9%	-1.2%	1.1%	-0.1%	0.2%	0.3%	0.3%	0.2%
Emergency Room	-1.5%	-0.1%	-1.6%	-8.1%	18.4%	8.8%	-3.7%	-1.7%	-5.4%	-1.8%	1.6%	-0.2%	0.7%	0.6%	0.9%	0.7%
Immunizations / Injections / Allergy	-28.9%	10.9%	-21.1%	-39.6%	14.4%	-30.9%	-7.2%	6.7%	-1.0%	-29.3%	11.0%	-21.5%	1.0%	0.3%	0.7%	0.9%
Inpatient Surgery	-4.1%	-1.2%	-5.2%	-12.9%	16.2%	1.2%	27.0%	5.2%	33.6%	-2.4%	4.2%	1.7%	0.6%	1.4%	0.4%	0.7%
Inpatient Visits	13.9%	-11.5%	0.8%	-25.9%	13.1%	-16.3%	5.1%	-12.0%	-7.5%	6.7%	-7.3%	-1.1%	0.8%	1.6%	0.5%	0.9%
Lab & Pathology	-4.6%	4.4%	-0.4%	-3.3%	7.2%	3.7%	11.4%	-1.1%	10.2%	-1.5%	5.8%	4.3%	1.1%	6.4%	0.7%	2.0%
Maternity	-6.9%	4.3%	-2.9%	-2.2%	0.4%	-1.8%	-2.0%	3.0%	0.9%	-5.3%	3.2%	-2.3%	1.0%	1.4%	0.5%	1.0%
Office Visits	-1.0%	-3.5%	-4.5%	-5.0%	12.2%	6.6%	7.9%	1.9%	9.9%	-1.8%	-2.3%	-4.1%	10.6%	4.0%	5.3%	9.1%
Other Services	-1.4%	-5.7%	-7.0%	-6.1%	-21.0%	-25.8%	4.5%	-6.8%	-2.6%	0.4%	-10.2%	-9.9%	6.6%	11.0%	6.2%	7.3%
Outpatient Surgery	4.9%	-6.8%	-2.3%	8.7%	-6.7%	1.4%	17.2%	-15.8%	-1.3%	5.4%	-7.2%	-2.2%	10.1%	2.6%	5.9%	8.6%
Psychiatric / Substance Abuse	6.2%	2.1%	8.5%	1.1%	25.3%	26.7%	39.5%	9.0%	52.1%	8.6%	3.5%	12.4%	4.2%	1.4%	0.9%	3.5%
Radiology	3.7%	-6.2%	-2.7%	-16.0%	13.2%	-4.9%	6.5%	-12.2%	-6.5%	3.0%	-5.1%	-2.3%	1.4%	1.4%	1.7%	1.4%
Therapies	5.4%	-4.5%	0.6%	97.5%	-2.3%	93.0%	3.9%	0.6%	4.5%	9.6%	-4.7%	4.4%	2.6%	0.4%	0.8%	2.1%
TOTAL	0.9%	-3.3%	-2.4%	-4.6%	-0.1%	-4.7%	9.0%	-6.4%	1.9%	1.3%	-3.4%	-2.2%	42.4%	34.9%	26.2%	40.0%
OTHER																
Ambulance	-12.4%	-0.9%	-13.2%	-34.7%	10.3%	-28.0%	-17.1%	-8.7%	-24.4%	-14.3%	1.6%	-12.9%	0.7%	0.9%	0.2%	0.7%
Appliances (DME)	10.6%	1.8%	12.6%	-5.5%	-23.3%	-27.5%	-41.5%	4.5%	-38.9%	7.6%	-2.2%	5.3%	0.6%	0.7%	0.1%	0.6%
TOTAL	-1.5%	0.4%	-1.1%	-22.1%	-4.3%	-25.4%	-26.2%	-3.8%	-29.0%	-4.1%	-0.1%	-4.2%	1.3%	1.6%	0.4%	1.3%
GRAND TOTAL	5.5%	1.8%	7.4%	-9.5%	5.6%	-4.5%	10.4%	2.9%	13.6%	6.1%	0.3%	6.4%	100.0%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Medical Total
Study Period of July 2022 to June 2025
(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	-7.7%	36.1%	25.6%	-9.8%	29.6%	16.9%	16.7%	-0.5%	16.1%	-6.2%	30.1%	22.0%	2.0%	1.8%	2.4%	2.0%
Medical / Surgical	1.4%	37.7%	39.6%	-10.5%	9.4%	-2.1%	1.7%	8.2%	10.0%	-0.3%	29.5%	29.1%	15.4%	32.7%	15.5%	18.3%
Psychiatric / Substance Abuse	30.4%	17.4%	53.1%	3.0%	10.0%	13.4%	4.9%	-0.8%	4.0%	23.5%	16.9%	44.4%	1.0%	0.7%	0.3%	0.9%
TOTAL	1.9%	36.4%	39.1%	-10.2%	10.5%	-0.8%	3.7%	6.9%	10.9%	0.1%	29.1%	29.2%	18.3%	35.3%	18.2%	21.1%
HOSPITAL OUTPATIENT																
Emergency Room	2.9%	9.0%	12.2%	-15.8%	20.2%	1.2%	2.6%	4.7%	7.4%	1.8%	7.9%	9.9%	4.7%	3.6%	13.6%	5.1%
Medical / Surgical	24.6%	-6.7%	16.2%	-5.0%	18.3%	12.4%	17.0%	9.9%	28.5%	23.5%	-5.3%	17.0%	17.5%	14.2%	25.7%	17.5%
Other Services	9.7%	5.6%	15.8%	-8.7%	15.7%	5.5%	19.2%	-7.0%	10.9%	9.4%	4.8%	14.6%	13.0%	10.0%	15.2%	12.6%
Psychiatric / Substance Abuse	13.5%	-39.8%	-31.6%	-25.4%	10.2%	-17.7%	4.5%	-3.8%	0.6%	11.4%	-35.1%	-27.7%	0.4%	0.2%	0.2%	0.3%
TOTAL	16.1%	-0.5%	15.6%	-7.9%	17.6%	8.3%	14.0%	3.8%	18.4%	15.3%	-0.1%	15.2%	35.5%	28.0%	54.6%	35.6%
PHYSICIAN SERVICES																
Anesthesia	-13.0%	11.9%	-2.6%	-11.4%	13.1%	0.3%	2.0%	-8.0%	-6.1%	-10.3%	11.4%	-0.1%	1.6%	2.1%	1.4%	1.7%
Chemotherapy / Radiation	-3.4%	-9.2%	-12.4%	6.7%	70.2%	81.7%	-1.6%	-6.8%	-8.3%	-4.7%	1.3%	-3.5%	0.2%	0.3%	0.3%	0.2%
Emergency Room	-0.2%	1.4%	1.2%	-11.4%	23.8%	9.7%	-0.6%	5.7%	5.0%	-1.2%	3.9%	2.7%	0.7%	0.6%	0.9%	0.7%
Immunizations / Injections / Allergy	-17.6%	6.8%	-12.0%	-33.0%	7.9%	-27.6%	-2.2%	-2.6%	-4.7%	-20.3%	6.5%	-15.1%	1.1%	0.4%	0.8%	1.0%
Inpatient Surgery	-1.6%	-4.2%	-5.8%	-1.0%	6.0%	4.9%	12.3%	-0.5%	11.7%	-1.0%	-1.3%	-2.3%	0.7%	1.4%	0.4%	0.8%
Inpatient Visits	10.7%	-7.0%	2.9%	2.1%	13.5%	15.8%	-7.7%	5.9%	-2.3%	8.3%	-2.6%	5.5%	0.9%	1.4%	0.5%	0.9%
Lab & Pathology	-6.4%	11.7%	4.5%	-1.7%	9.4%	7.6%	8.9%	0.8%	9.8%	-4.1%	11.0%	6.4%	1.2%	6.2%	0.7%	2.0%
Maternity	-4.8%	-0.7%	-5.5%	10.0%	-1.4%	8.5%	13.8%	-14.2%	-2.4%	0.8%	-3.4%	-2.5%	1.1%	1.3%	0.5%	1.1%
Office Visits	0.5%	-2.4%	-2.0%	-1.9%	9.0%	6.9%	3.6%	1.9%	5.6%	-0.1%	-1.6%	-1.7%	11.4%	4.0%	5.5%	9.7%
Other Services	0.3%	4.0%	4.3%	-9.2%	-5.6%	-14.3%	0.8%	-4.4%	-3.6%	-0.1%	-0.6%	-0.7%	6.7%	11.8%	6.7%	7.5%
Outpatient Surgery	3.1%	-3.5%	-0.6%	7.3%	-7.7%	-1.0%	21.8%	-0.8%	20.7%	4.2%	-3.6%	0.4%	10.9%	2.6%	5.5%	9.1%
Psychiatric / Substance Abuse	7.6%	3.7%	11.6%	-0.1%	14.5%	14.3%	25.9%	8.0%	35.9%	7.6%	4.4%	12.4%	4.2%	1.3%	0.9%	3.5%
Radiology	2.3%	-4.7%	-2.6%	-3.2%	5.0%	1.7%	4.8%	-5.5%	-0.9%	2.2%	-3.6%	-1.5%	1.5%	1.3%	1.8%	1.5%
Therapies	4.9%	-3.8%	0.9%	57.4%	-1.7%	54.7%	-1.1%	2.1%	1.0%	6.1%	-3.8%	2.0%	2.7%	0.4%	0.9%	2.2%
TOTAL	1.0%	-0.3%	0.7%	-3.4%	3.5%	0.0%	7.1%	-1.4%	5.6%	0.9%	-0.2%	0.8%	44.9%	35.2%	26.8%	41.9%
OTHER																
Ambulance	-3.4%	4.3%	0.7%	-11.1%	10.7%	-1.5%	-11.6%	-10.0%	-20.4%	-4.9%	4.6%	-0.5%	0.7%	0.9%	0.3%	0.7%
Appliances (DME)	1.9%	14.5%	16.7%	-5.1%	-6.6%	-11.4%	-18.5%	8.3%	-11.7%	-0.3%	10.4%	10.0%	0.6%	0.7%	0.1%	0.6%
TOTAL	-0.9%	9.0%	8.0%	-8.4%	2.9%	-5.7%	-14.0%	-3.7%	-17.2%	-2.8%	7.2%	4.3%	1.3%	1.6%	0.4%	1.3%
GRAND TOTAL	6.5%	6.5%	13.4%	-7.1%	9.9%	2.1%	10.1%	3.0%	13.4%	5.8%	6.1%	12.3%	100.0%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Medical Total
Study Period of July 2021 to June 2025
(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	-4.7%	35.6%	29.1%	-20.7%	18.3%	-6.2%	10.8%	7.8%	19.4%	-5.1%	24.6%	18.2%	1.9%	2.2%	2.4%	1.9%
Medical / Surgical	0.0%	33.7%	33.6%	-5.1%	6.2%	0.8%	0.0%	6.1%	6.0%	-1.2%	24.4%	22.9%	14.4%	31.3%	16.9%	17.5%
Psychiatric / Substance Abuse	27.4%	18.0%	50.4%	10.0%	13.5%	24.8%	-4.5%	1.7%	-2.9%	22.1%	16.3%	41.9%	0.9%	0.7%	0.3%	0.8%
TOTAL	0.8%	33.1%	34.2%	-5.8%	7.1%	0.9%	1.2%	6.2%	7.5%	-0.7%	24.1%	23.3%	17.1%	34.1%	19.6%	20.2%
HOSPITAL OUTPATIENT																
Emergency Room	3.5%	8.4%	12.2%	-17.4%	21.7%	0.5%	2.2%	7.8%	10.2%	1.6%	8.5%	10.2%	4.7%	3.6%	13.2%	5.1%
Medical / Surgical	20.2%	-3.4%	16.0%	-8.1%	22.6%	12.7%	13.7%	8.8%	23.7%	18.5%	-1.7%	16.5%	17.3%	13.7%	24.0%	17.2%
Other Services	4.7%	7.7%	12.7%	-16.1%	12.9%	-5.2%	13.8%	-3.2%	10.2%	3.7%	5.7%	9.6%	13.0%	10.7%	15.1%	12.7%
Psychiatric / Substance Abuse	14.6%	-27.9%	-17.3%	-15.2%	18.6%	0.5%	7.3%	2.4%	9.8%	12.3%	-24.4%	-15.1%	0.4%	0.2%	0.2%	0.4%
TOTAL	12.2%	1.9%	14.4%	-12.4%	18.8%	4.1%	10.8%	5.1%	16.4%	10.7%	2.2%	13.1%	35.3%	28.2%	52.5%	35.4%
PHYSICIAN SERVICES																
Anesthesia	-16.6%	17.2%	-2.3%	-17.6%	24.4%	2.5%	-3.0%	3.9%	0.8%	-15.6%	18.2%	-0.2%	1.7%	2.1%	1.4%	1.7%
Chemotherapy / Radiation	-1.1%	-13.4%	-14.4%	-1.2%	32.9%	31.3%	-0.5%	0.1%	-0.3%	-2.4%	-6.7%	-8.9%	0.3%	0.3%	0.3%	0.3%
Emergency Room	3.0%	1.3%	4.4%	-15.6%	25.2%	5.7%	1.9%	-6.0%	-4.1%	1.2%	2.7%	3.9%	0.8%	0.6%	1.0%	0.7%
Immunizations / Injections / Allergy	-10.3%	4.9%	-5.9%	-23.0%	11.1%	-14.5%	1.1%	-2.3%	-1.3%	-13.7%	5.0%	-9.3%	1.2%	0.4%	0.8%	1.0%
Inpatient Surgery	-1.5%	-0.2%	-1.8%	-1.0%	7.5%	6.4%	3.0%	5.3%	8.5%	-1.6%	2.1%	0.4%	0.7%	1.4%	0.4%	0.8%
Inpatient Visits	5.1%	-5.1%	-0.2%	5.5%	1.8%	7.3%	-6.1%	-2.2%	-8.2%	4.5%	-3.5%	0.8%	0.9%	1.4%	0.6%	1.0%
Lab & Pathology	-10.0%	13.3%	1.9%	-1.0%	10.2%	9.2%	2.2%	2.4%	4.7%	-6.9%	12.8%	5.0%	1.2%	6.0%	0.7%	2.0%
Maternity	-1.7%	-2.8%	-4.4%	8.3%	1.2%	9.6%	11.4%	-10.7%	-0.5%	1.6%	-3.6%	-2.1%	1.1%	1.2%	0.5%	1.1%
Office Visits	-0.2%	0.1%	0.0%	-1.4%	8.3%	6.8%	0.7%	3.5%	4.1%	-0.6%	0.7%	0.1%	11.9%	3.9%	5.5%	10.0%
Other Services	-0.9%	8.1%	7.1%	-17.6%	4.1%	-14.2%	-2.1%	0.8%	-1.3%	-3.0%	3.8%	0.8%	6.6%	13.2%	6.9%	7.8%
Outpatient Surgery	5.0%	-3.7%	1.1%	-0.8%	1.4%	0.5%	20.4%	-13.2%	4.5%	5.1%	-3.7%	1.2%	11.2%	2.6%	5.8%	9.4%
Psychiatric / Substance Abuse	8.7%	3.2%	12.1%	-4.1%	16.9%	12.1%	19.8%	3.9%	24.4%	7.7%	4.3%	12.3%	4.2%	1.3%	0.9%	3.4%
Radiology	0.7%	-2.0%	-1.3%	-2.5%	7.2%	4.5%	3.9%	-2.7%	1.1%	0.8%	-0.8%	0.0%	1.6%	1.3%	1.9%	1.6%
Therapies	5.1%	-1.7%	3.3%	40.6%	3.7%	45.8%	-1.2%	2.5%	1.3%	5.4%	-1.6%	3.7%	2.8%	0.3%	0.9%	2.2%
TOTAL	1.1%	1.3%	2.4%	-7.7%	7.7%	-0.7%	4.9%	-2.1%	2.7%	0.2%	1.6%	1.8%	46.2%	36.0%	27.4%	43.1%
OTHER																
Ambulance	3.2%	4.5%	7.9%	4.3%	-14.0%	-10.3%	-4.5%	-9.9%	-13.9%	2.9%	0.9%	3.8%	0.7%	0.9%	0.3%	0.7%
Appliances (DME)	-2.9%	17.2%	13.8%	2.1%	-17.1%	-15.4%	-15.2%	1.3%	-14.1%	-2.8%	10.4%	7.3%	0.6%	0.8%	0.2%	0.6%
TOTAL	0.4%	10.4%	10.8%	3.3%	-15.4%	-12.7%	-8.3%	-5.9%	-13.7%	0.3%	5.3%	5.5%	1.3%	1.7%	0.5%	1.3%
GRAND TOTAL	5.0%	7.1%	12.4%	-8.2%	10.2%	1.2%	7.2%	3.3%	10.7%	3.7%	6.4%	10.4%	100.0%	100.0%	100.0%	100.0%

**West Virginia PEIA Non-Medicare Medical Total
Study Period of July 2024 to June 2025
(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	3,686	193	344	4,223	87.3%	4.6%	8.2%	14,705,216	1,693,011	1,557,519	17,955,745	81.9%	9.4%	8.7%
Medical / Surgical	7,484	1,177	459	9,120	82.1%	12.9%	5.0%	122,870,068	39,253,551	10,206,685	172,330,304	71.3%	22.8%	5.9%
Psychiatric / Substance Abuse	1,115	292	40	1,447	77.0%	20.2%	2.8%	8,077,804	856,585	116,610	9,050,999	89.2%	9.5%	1.3%
TOTAL	12,285	1,662	843	14,791	83.1%	11.2%	5.7%	145,653,088	41,803,147	11,880,814	199,337,048	73.1%	21.0%	6.0%
HOSPITAL OUTPATIENT														
Emergency Room	35,787	2,164	2,988	40,938	87.4%	5.3%	7.3%	31,518,737	5,059,070	8,085,884	44,663,692	70.6%	11.3%	18.1%
Medical / Surgical	247,836	7,826	6,345	262,008	94.6%	3.0%	2.4%	120,025,063	20,162,160	17,329,968	157,517,190	76.2%	12.8%	11.0%
Other Services	278,702	9,752	10,538	298,992	93.2%	3.3%	3.5%	88,610,497	13,998,534	10,223,007	112,832,037	78.5%	12.4%	9.1%
Psychiatric / Substance Abuse	10,599	489	181	11,269	94.1%	4.3%	1.6%	1,647,658	170,018	109,385	1,927,061	85.5%	8.8%	5.7%
TOTAL	572,924	20,230	20,052	613,206	93.4%	3.3%	3.3%	241,801,955	39,389,782	35,748,244	316,939,980	76.3%	12.4%	11.3%
PHYSICIAN SERVICES														
Anesthesia	43,233	6,377	2,404	52,015	83.1%	12.3%	4.6%	9,317,133	2,728,477	719,436	12,765,046	73.0%	21.4%	5.6%
Chemotherapy / Radiation	28,975	1,737	1,570	32,282	89.8%	5.4%	4.9%	1,092,920	475,623	145,313	1,713,857	63.8%	27.8%	8.5%
Emergency Room	36,400	2,356	2,485	41,241	88.3%	5.7%	6.0%	4,465,530	838,981	542,829	5,847,340	76.4%	14.3%	9.3%
Immunizations / Injections / Allergy	66,821	3,877	3,650	74,348	89.9%	5.2%	4.9%	6,101,187	369,809	450,054	6,921,049	88.2%	5.3%	6.5%
Inpatient Surgery	5,797	1,131	347	7,274	79.7%	15.5%	4.8%	3,669,277	2,052,090	256,055	5,977,422	61.4%	34.3%	4.3%
Inpatient Visits	34,866	7,380	1,260	43,507	80.1%	17.0%	2.9%	5,450,800	1,914,627	304,139	7,669,566	71.1%	25.0%	4.0%
Lab & Pathology	173,944	105,696	14,907	294,546	59.1%	35.9%	5.1%	7,257,320	8,637,574	441,421	16,336,315	44.4%	52.9%	2.7%
Maternity	27,506	16,782	1,747	46,035	59.8%	36.5%	3.8%	6,009,291	1,781,398	280,744	8,071,434	74.5%	22.1%	3.5%
Office Visits	714,962	40,700	31,405	787,067	90.8%	5.2%	4.0%	66,004,499	5,579,076	3,355,849	74,939,424	88.1%	7.4%	4.5%
Other Services	309,266	40,574	16,901	366,741	84.3%	11.1%	4.6%	41,028,677	12,369,197	3,729,008	57,126,882	71.8%	21.7%	6.5%
Outpatient Surgery	262,504	13,484	14,555	290,543	90.3%	4.6%	5.0%	63,628,027	3,531,042	3,609,748	70,768,816	89.9%	5.0%	5.1%
Psychiatric / Substance Abuse	229,758	16,989	7,201	253,948	90.5%	6.7%	2.8%	28,019,322	2,065,031	696,383	30,780,737	91.0%	6.7%	2.3%
Radiology	196,216	18,509	8,552	223,278	87.9%	8.3%	3.8%	8,714,479	1,748,347	1,038,681	11,501,507	75.8%	15.2%	9.0%
Therapies	195,980	10,027	7,493	213,500	91.8%	4.7%	3.5%	16,471,913	645,766	506,728	17,624,408	93.5%	3.7%	2.9%
TOTAL	2,326,228	285,620	114,478	2,726,326	85.3%	10.5%	4.2%	267,230,376	44,737,038	16,076,389	328,043,804	81.5%	13.6%	4.9%
OTHER														
Ambulance	7,415	1,153	282	8,850	83.8%	13.0%	3.2%	4,172,203	1,079,908	126,371	5,378,482	77.6%	20.1%	2.3%
Appliances (DME)	23,582	5,219	689	29,490	80.0%	17.7%	2.3%	4,241,103	757,184	65,084	5,063,371	83.8%	15.0%	1.3%
TOTAL	30,998	6,371	971	38,341	80.8%	16.6%	2.5%	8,413,306	1,837,092	191,455	10,441,853	80.6%	17.6%	1.8%
GRAND TOTAL	2,942,435	313,884	136,345	3,392,663	86.7%	9.3%	4.0%	663,098,725	127,767,059	63,896,901	854,762,684	77.6%	14.9%	7.5%

**West Virginia PEIA Non-Medicare Gross Prescription Drug Total
Study Period of July 2021 to June 2025
(Allowed Claims)**

24-Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	3.3%	8.9%	12.5%

36-Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	3.9%	21.9%	26.7%

48-Month Trends Summary

	<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
Non-Medicare	3.4%	11.5%	15.2%

Appendix A

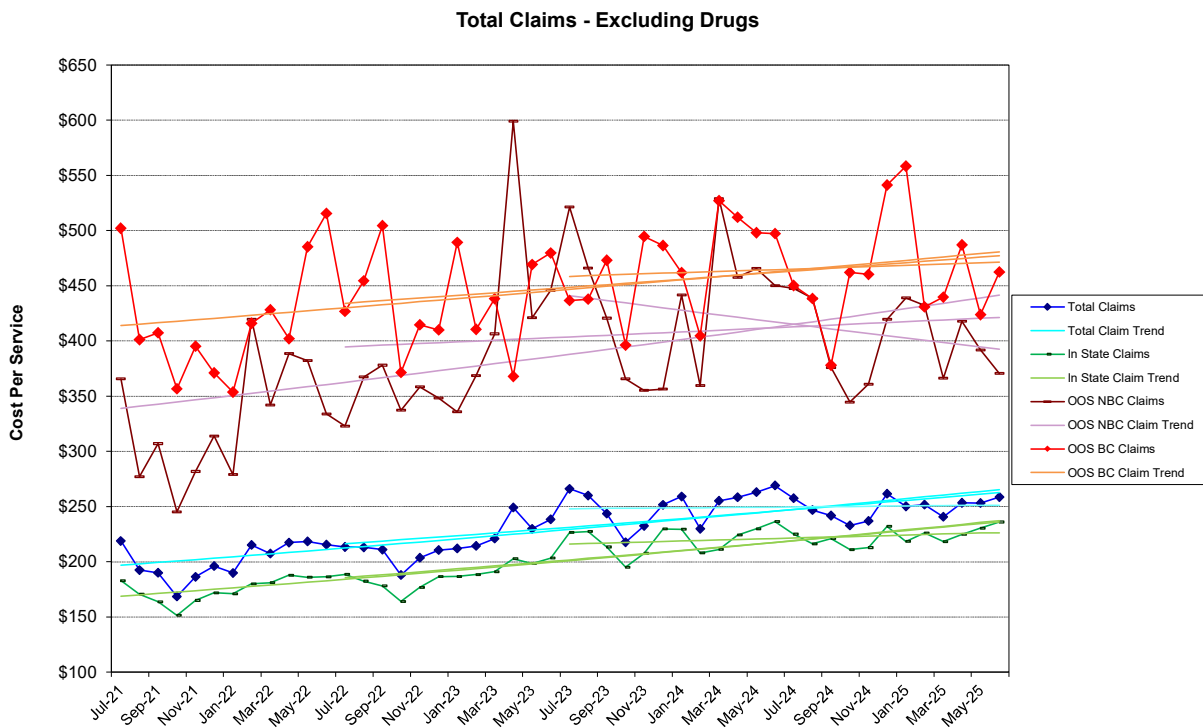
**NON-MEDICARE CLAIMS
Excluding Drugs**

GRAND TOTAL

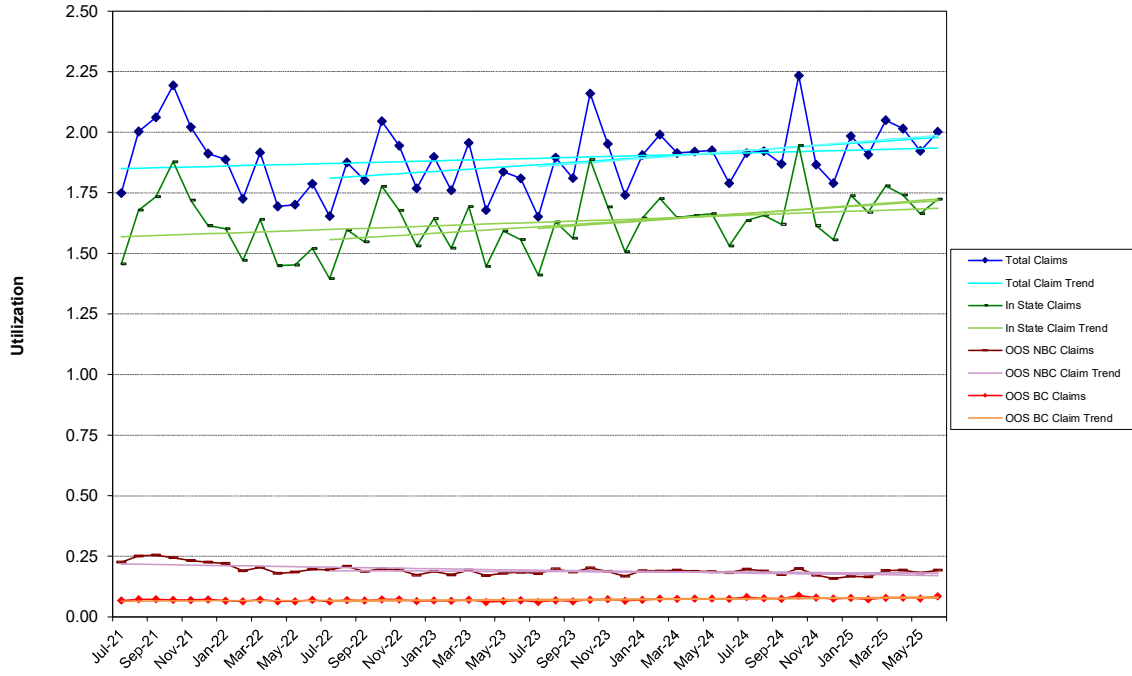
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.1%	0.3%	6.4%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.8%	6.1%	12.3%

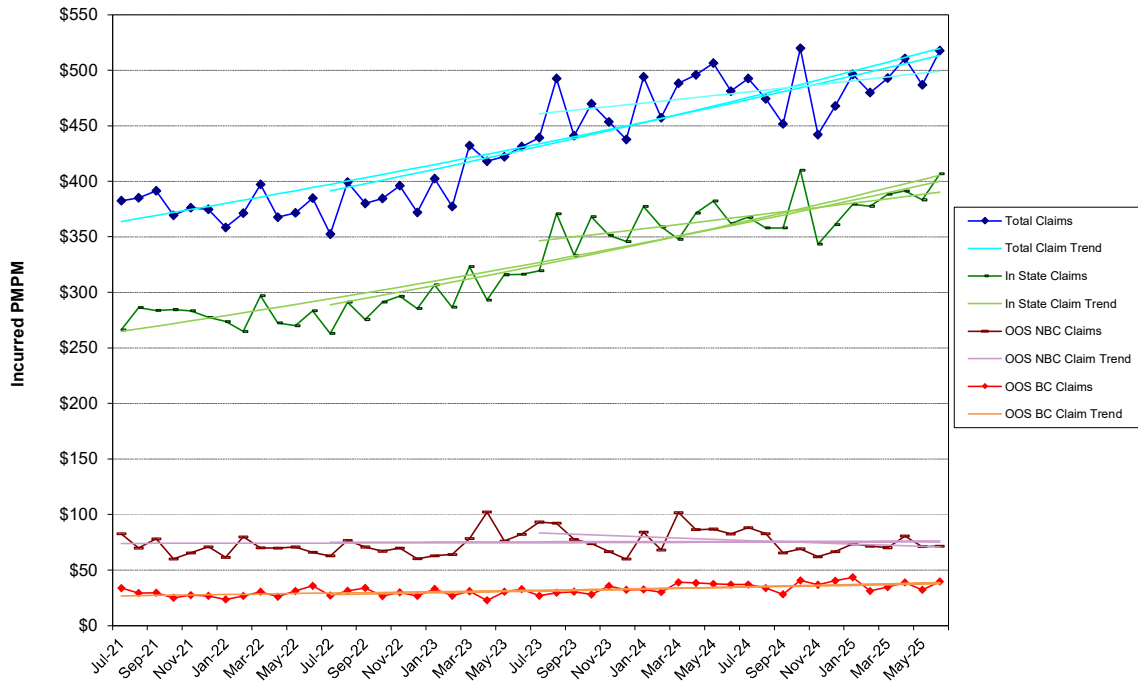
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.7%	6.4%	10.4%



Total Claims - Excluding Drugs



Total Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

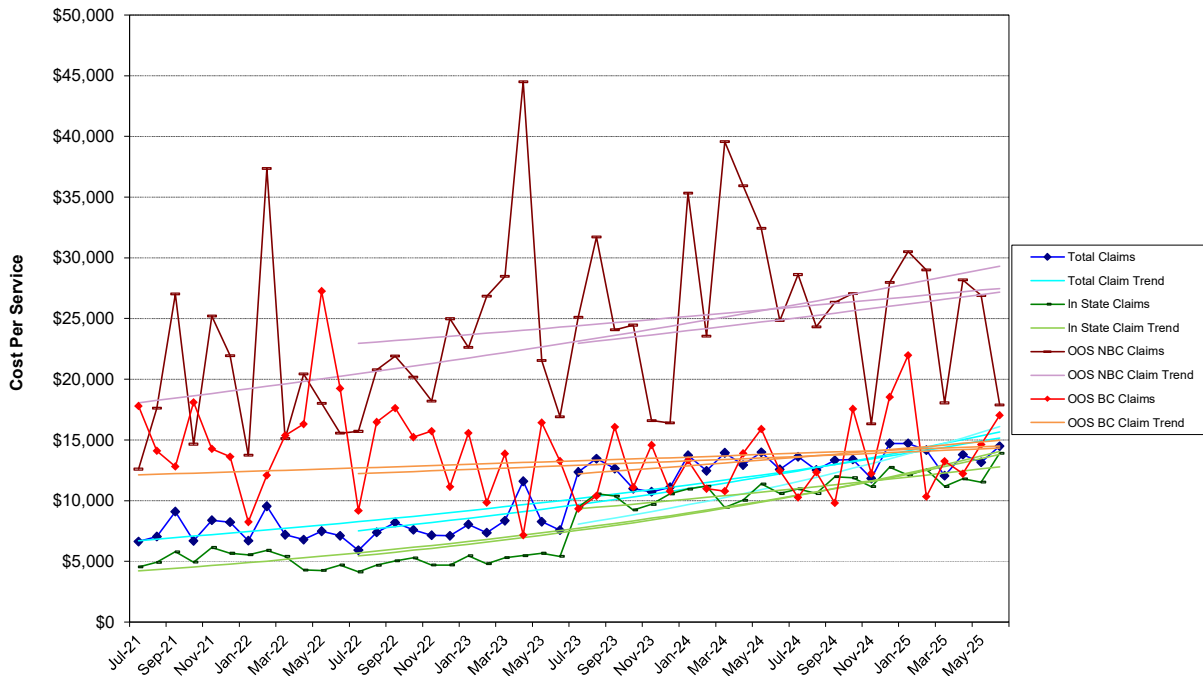
TOTAL

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.8%	5.2%	4.4%

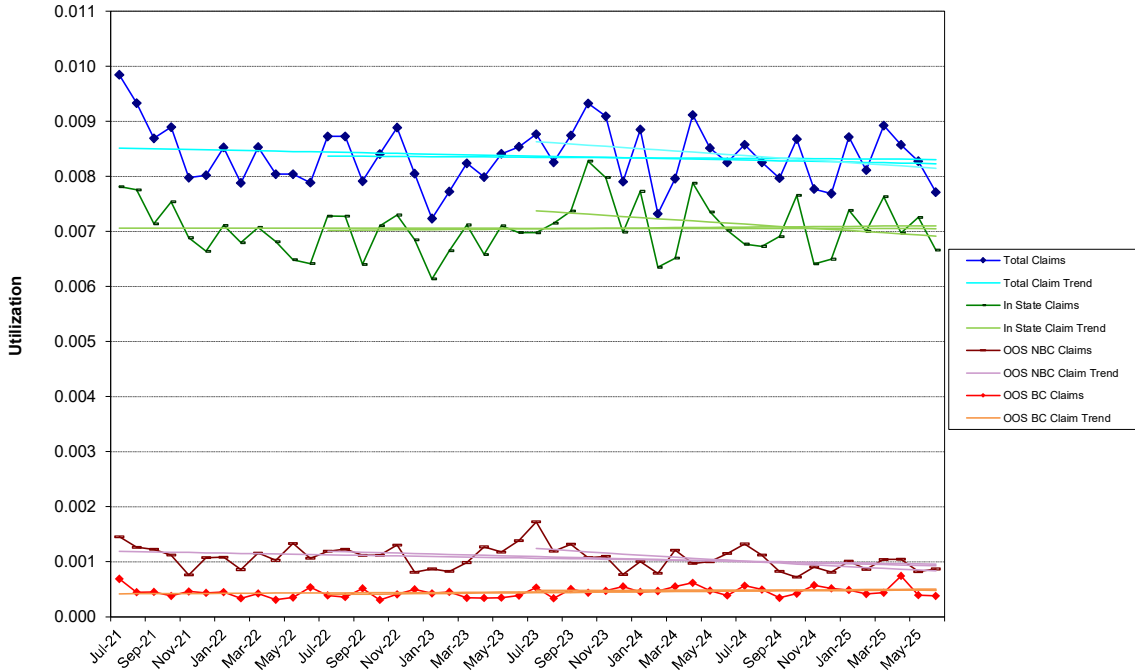
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.1%	29.1%	29.2%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.7%	24.1%	23.3%

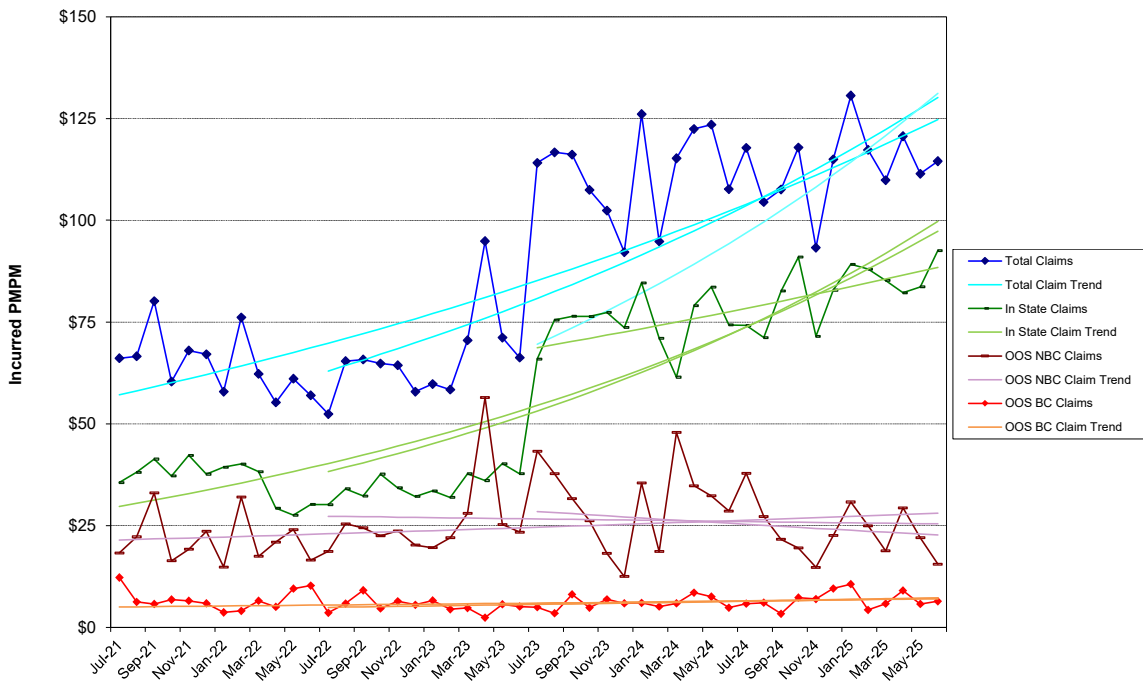
Total Hospital Inpatient Claims - Excluding Drugs



Total Hospital Inpatient Claims - Excluding Drugs



Total Hospital Inpatient Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

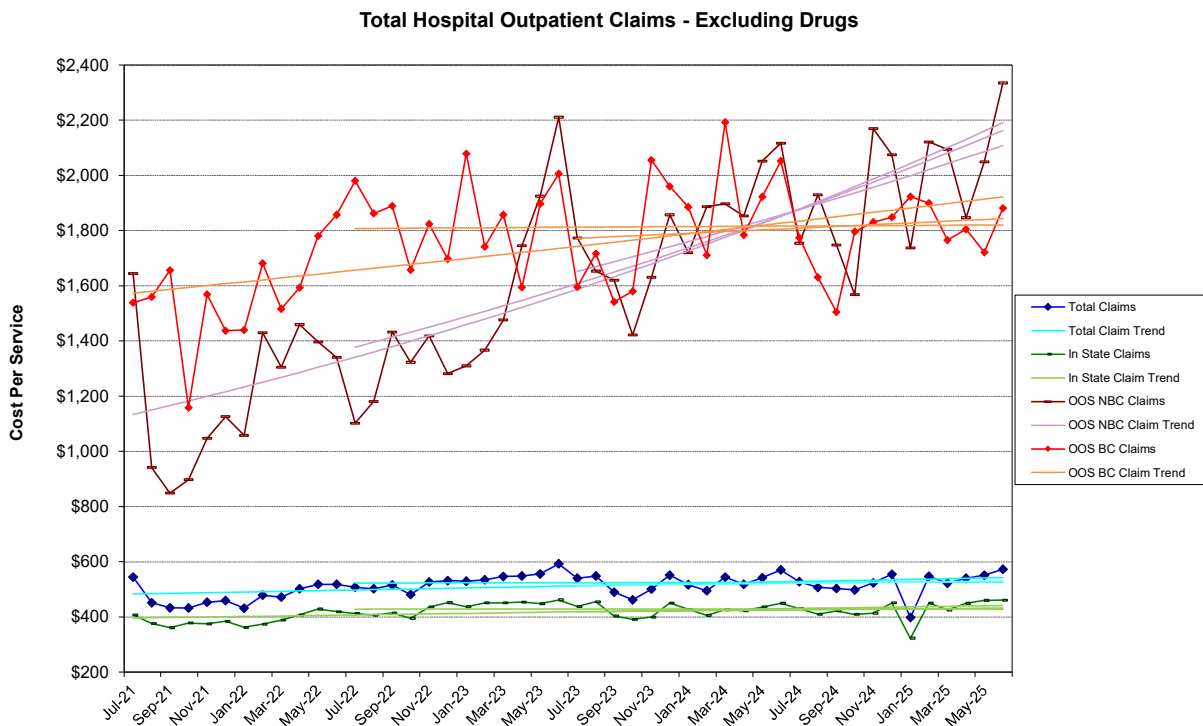
HOSPITAL OUTPATIENT

TOTAL

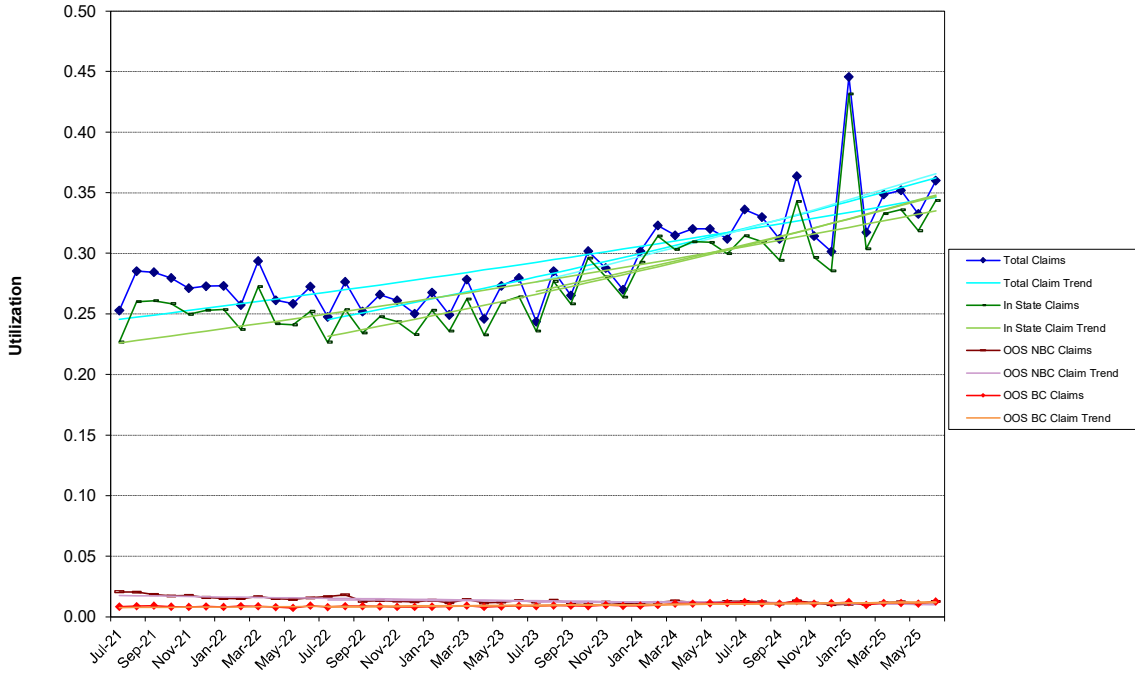
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
16.3%	1.4%	18.0%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
15.3%	-0.1%	15.2%

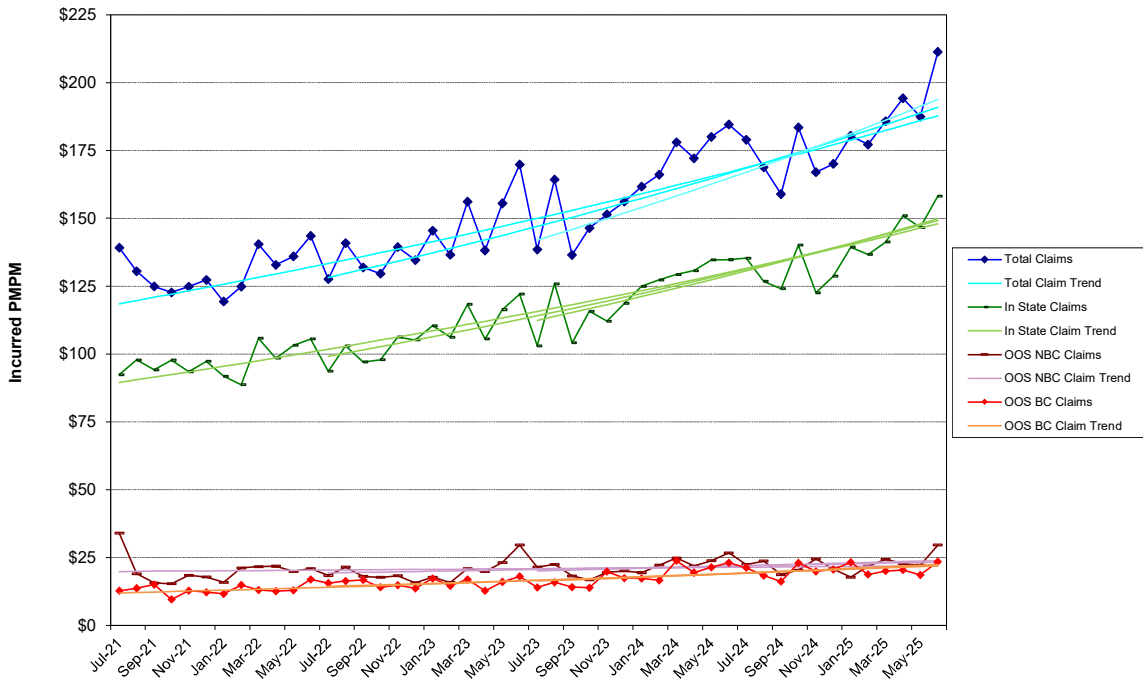
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
10.7%	2.2%	13.1%



Total Hospital Outpatient Claims - Excluding Drugs



Total Hospital Outpatient Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

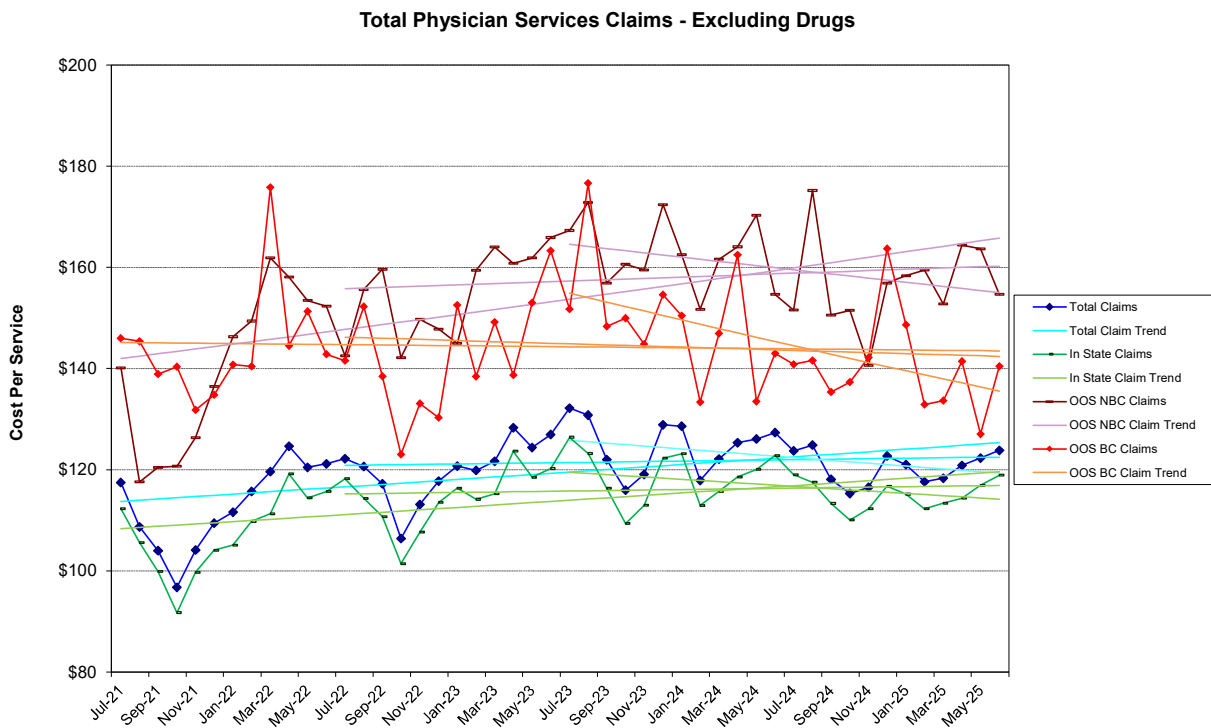
PHYSICIAN SERVICES

TOTAL

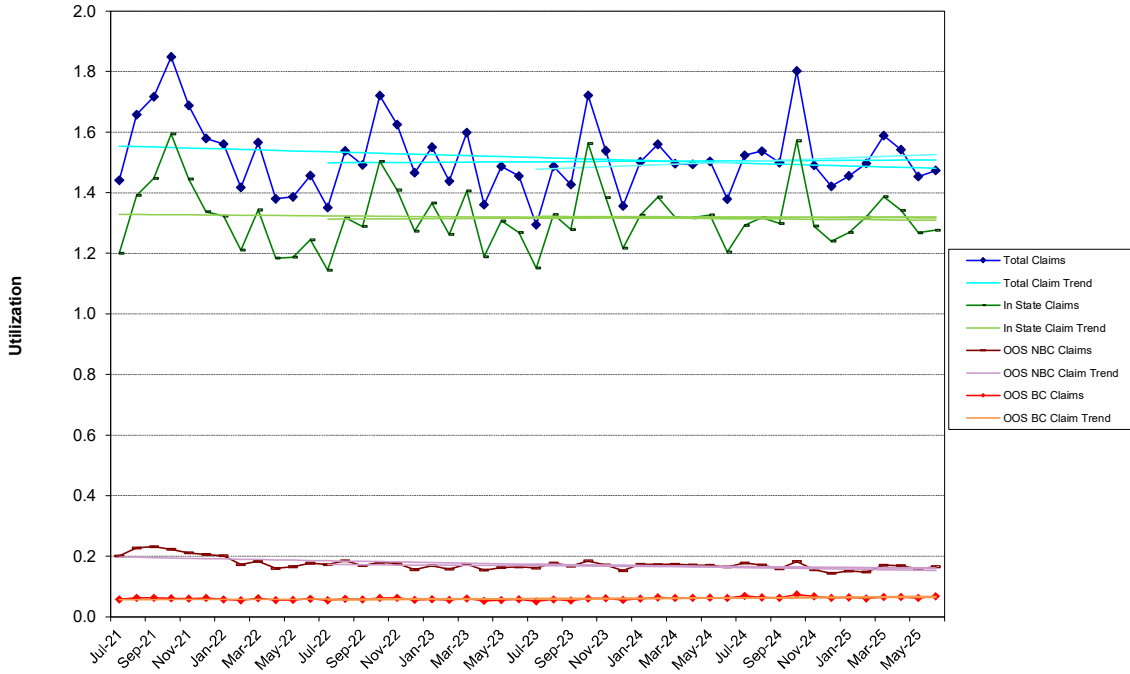
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.3%	-3.4%	-2.2%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.9%	-0.2%	0.8%

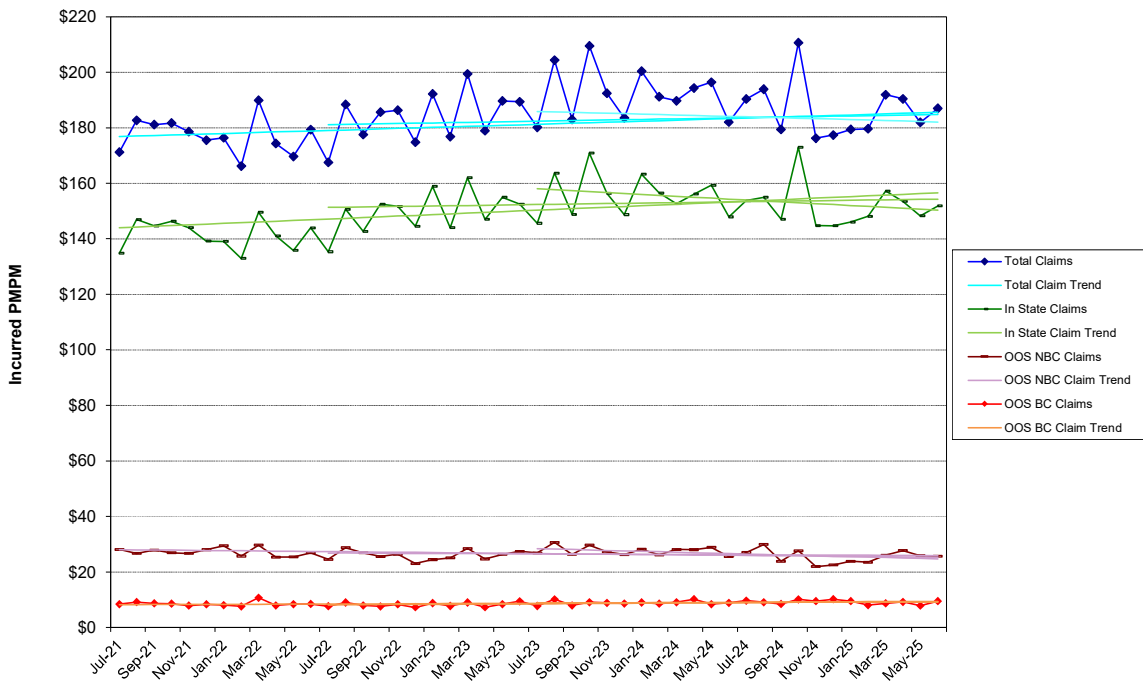
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.2%	1.6%	1.8%



Total Physician Services Claims - Excluding Drugs



Total Physician Services Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

OTHER

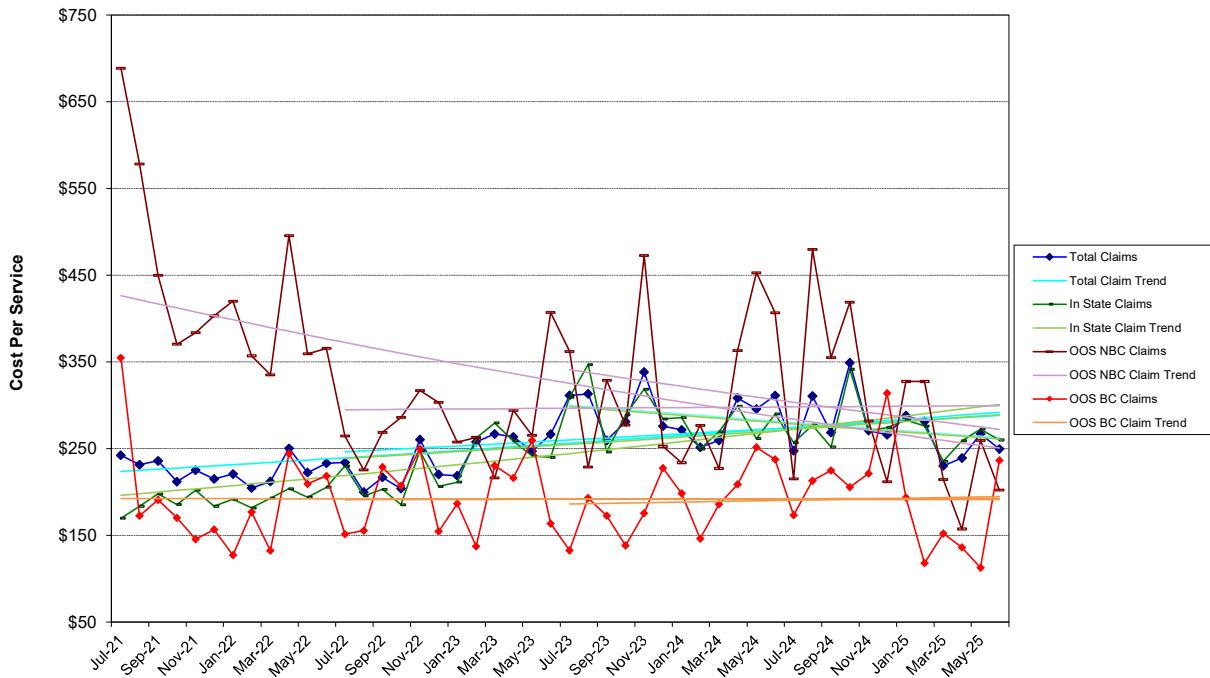
TOTAL

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-4.1%	-0.1%	-4.2%

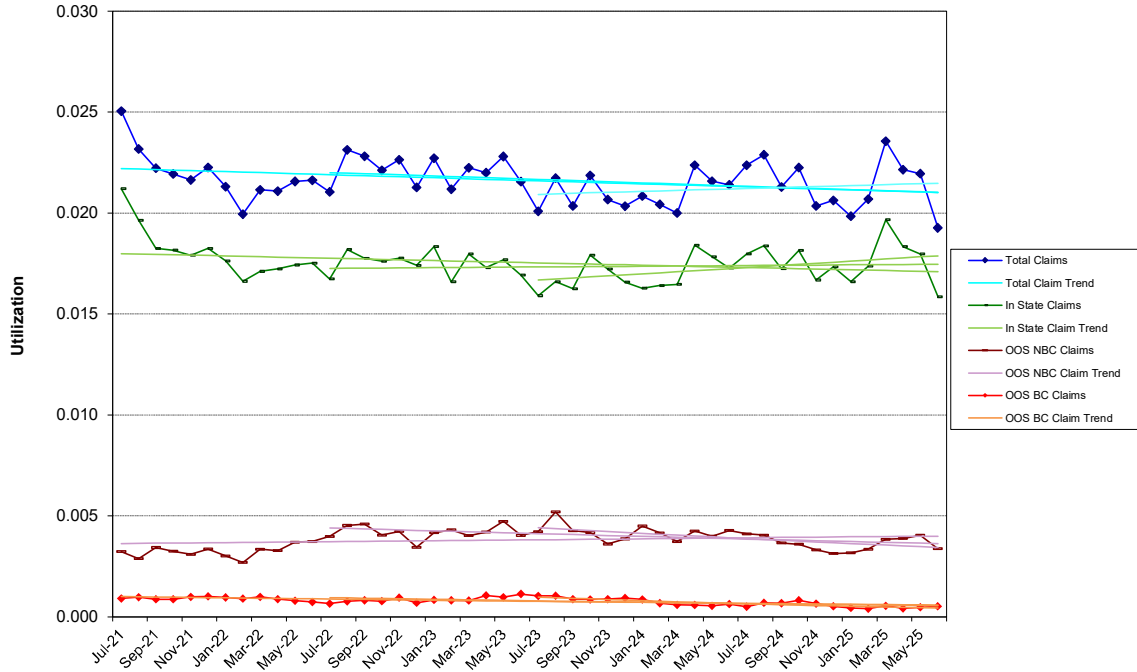
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.8%	7.2%	4.3%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.3%	5.3%	5.5%

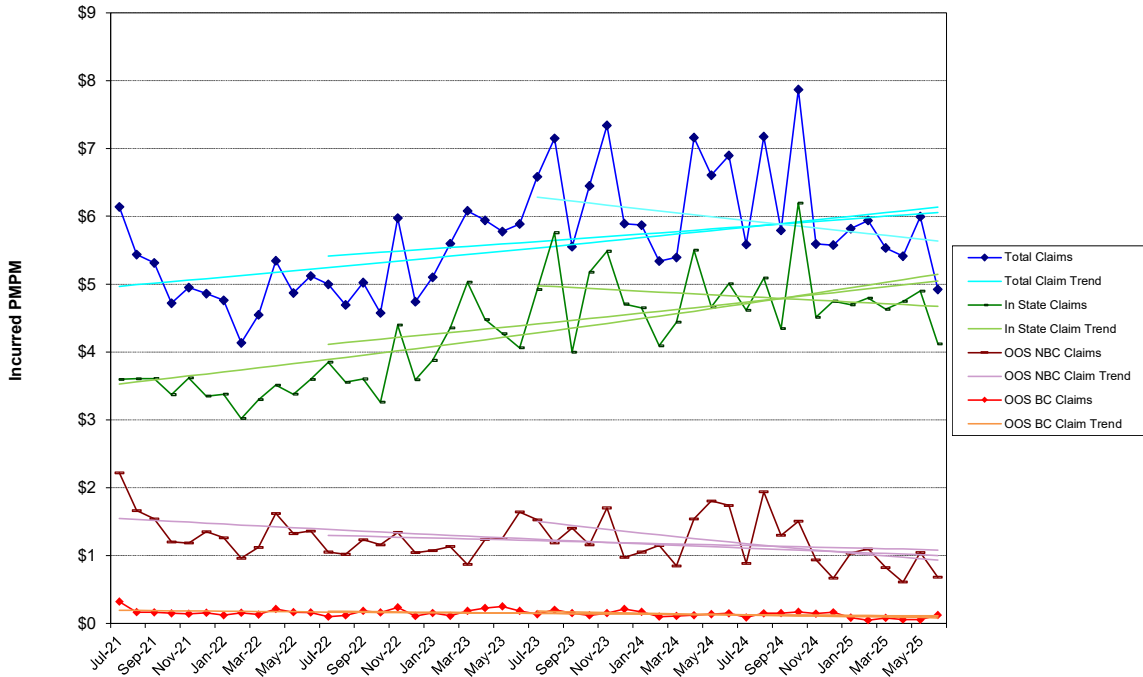
Total Other Claims - Excluding Drugs



Total Other Claims - Excluding Drugs



Total Other Claims - Excluding Drugs



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

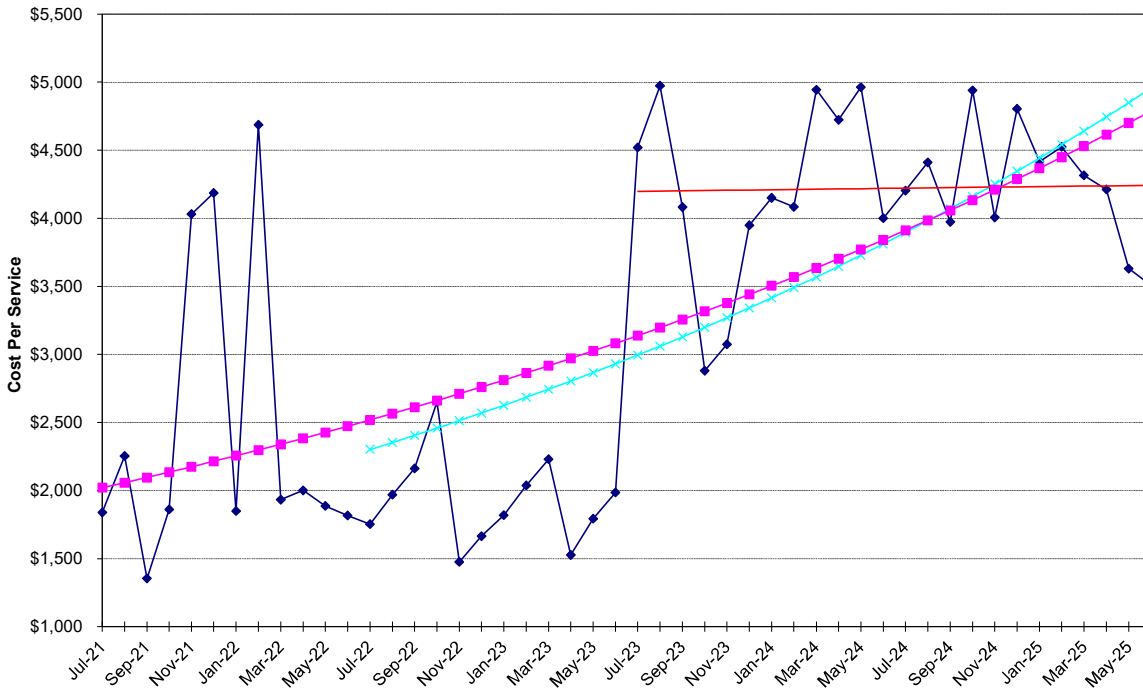
Maternity

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-9.6%	0.5%	-9.1%

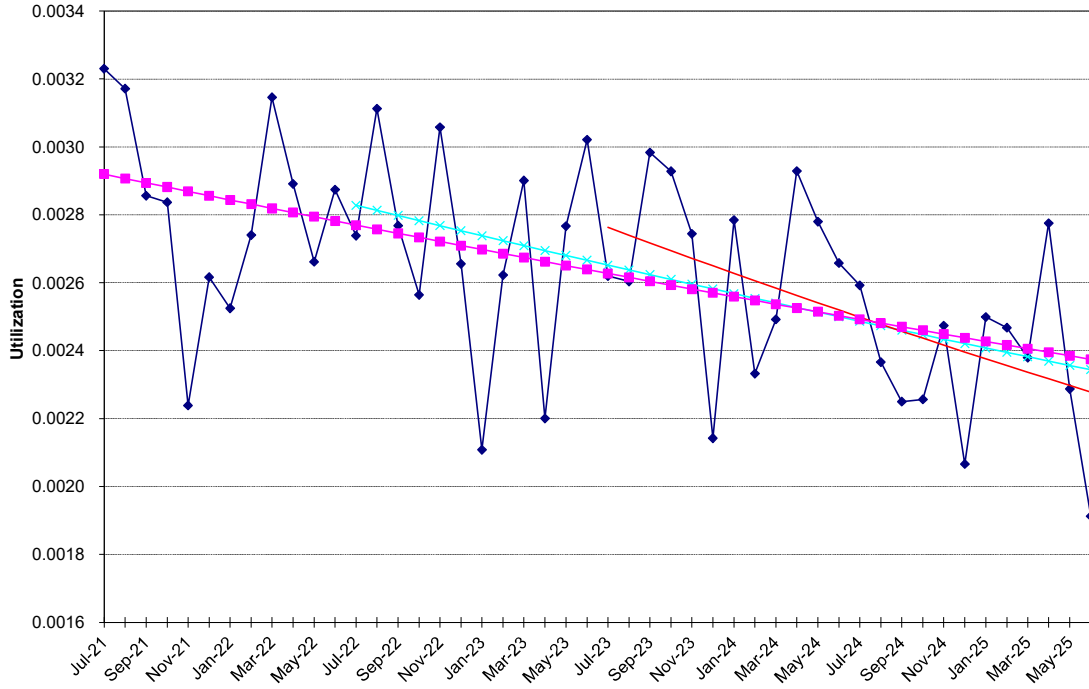
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-6.2%	30.1%	22.0%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-5.1%	24.6%	18.2%

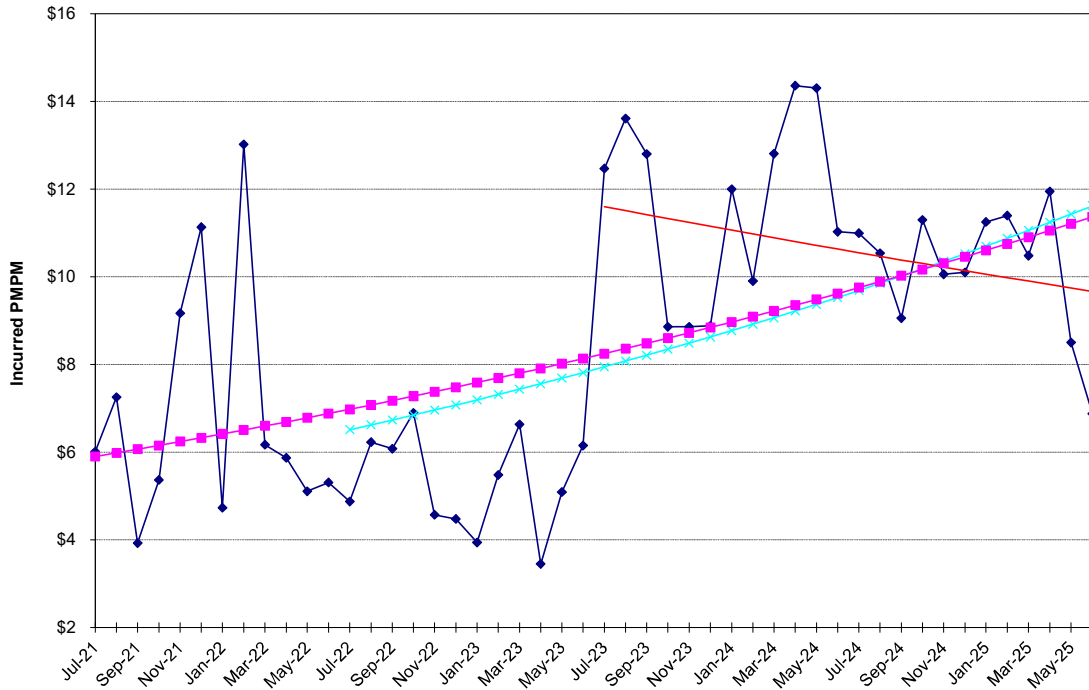
Hospital Inpatient - Maternity



Hospital Inpatient - Maternity



Hospital Inpatient - Maternity



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

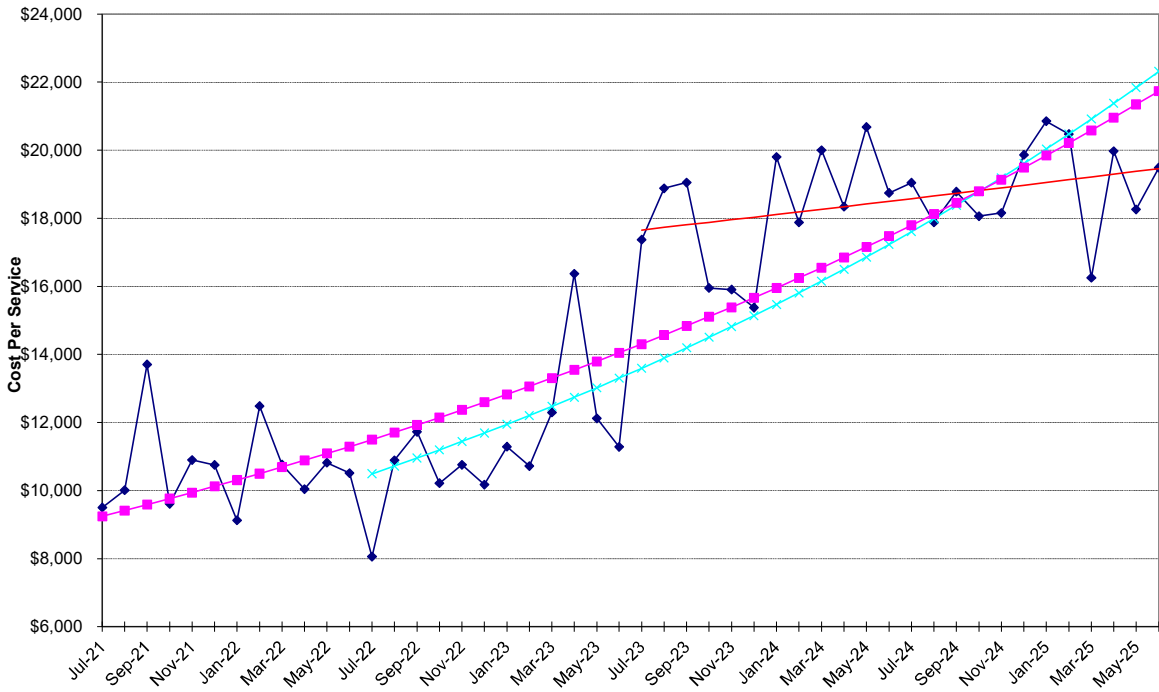
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.3%	5.2%	5.5%

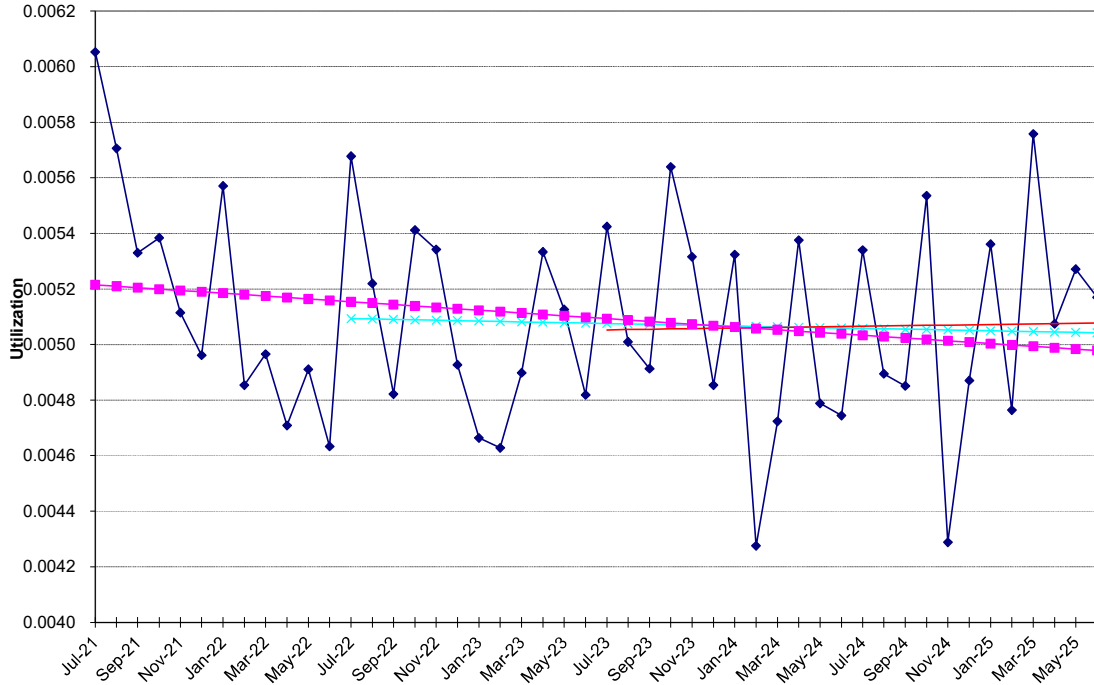
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.3%	29.5%	29.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.2%	24.4%	22.9%

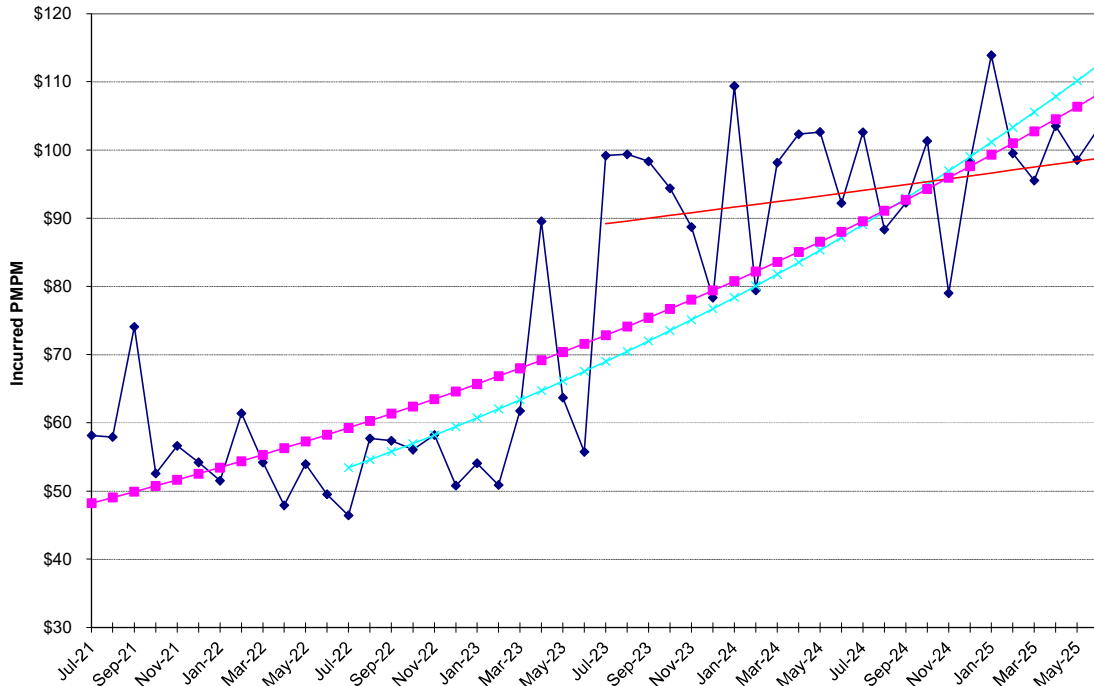
Hospital Inpatient - Medical / Surgical



Hospital Inpatient - Medical / Surgical



Hospital Inpatient - Medical / Surgical



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL INPATIENT

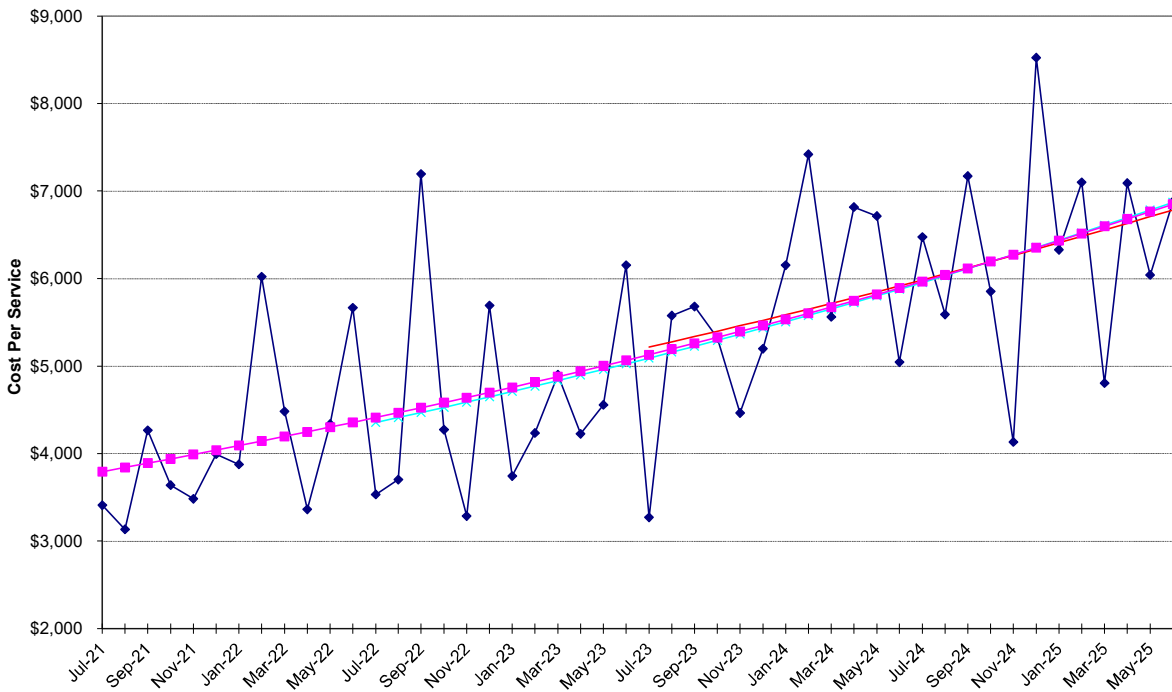
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.9%	14.7%	13.7%

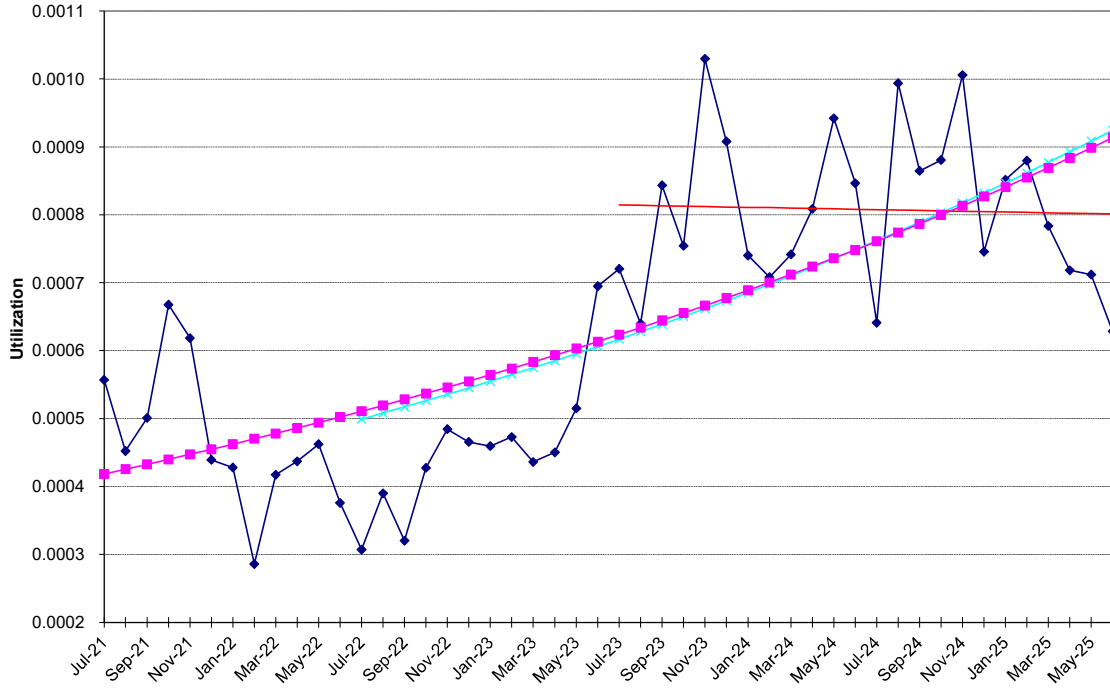
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
23.5%	16.9%	44.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
22.1%	16.3%	41.9%

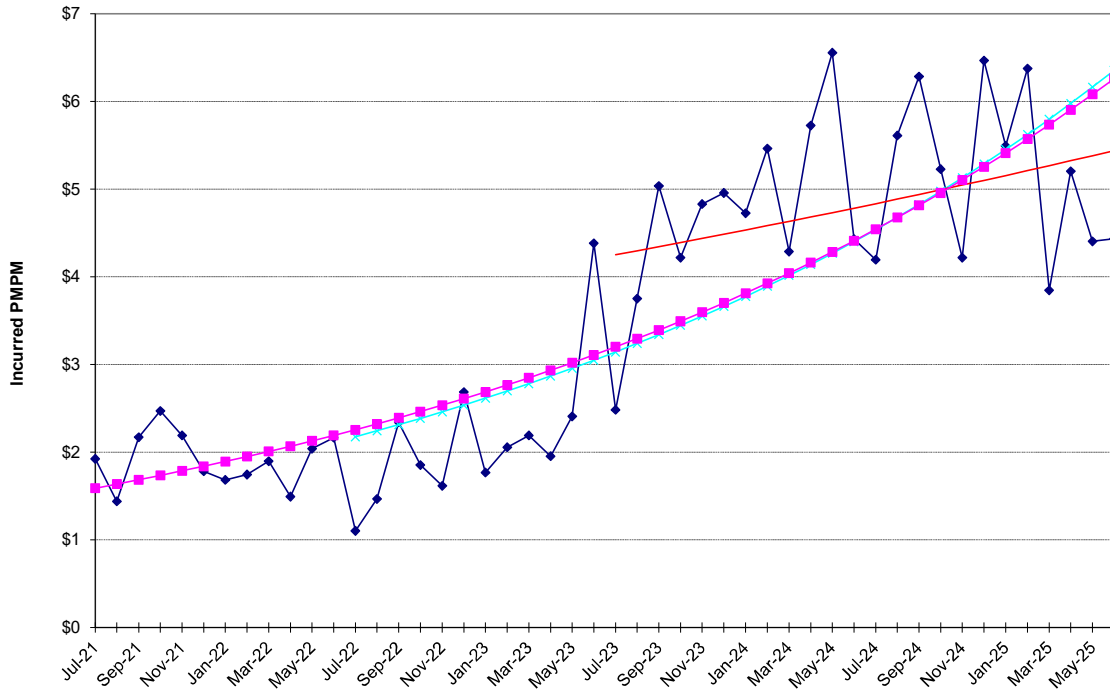
Hospital Inpatient - Psychiatric / Substance Abuse



Hospital Inpatient - Psychiatric / Substance Abuse



Hospital Inpatient - Psychiatric / Substance Abuse



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

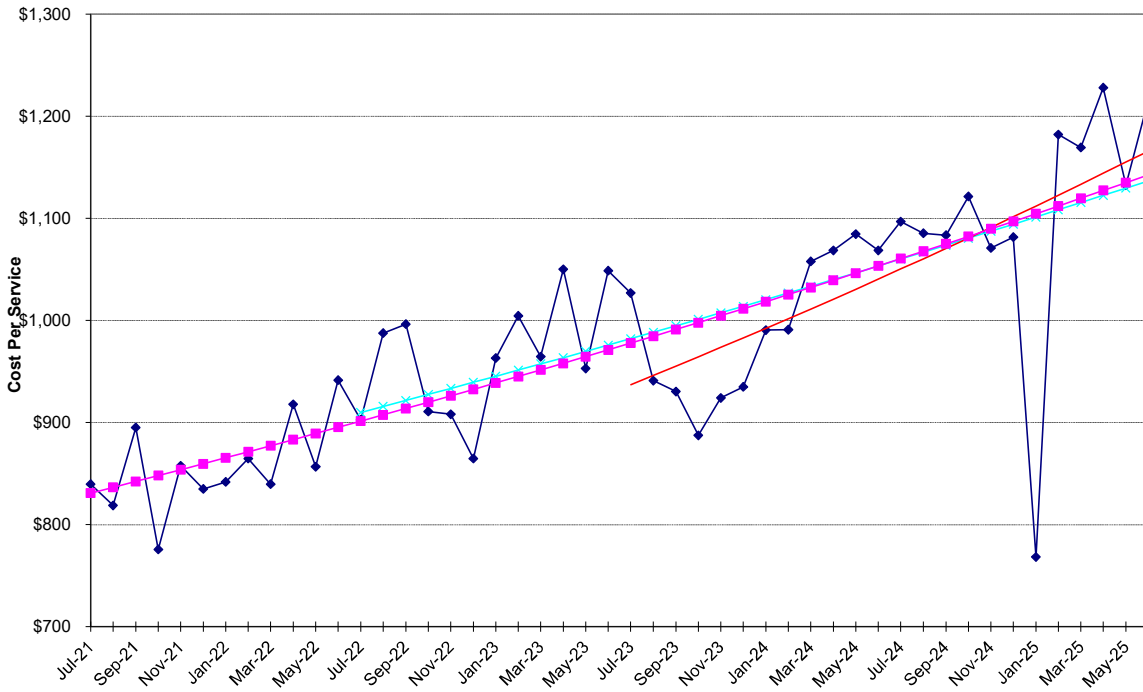
Emergency Room

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.4%	12.1%	14.7%

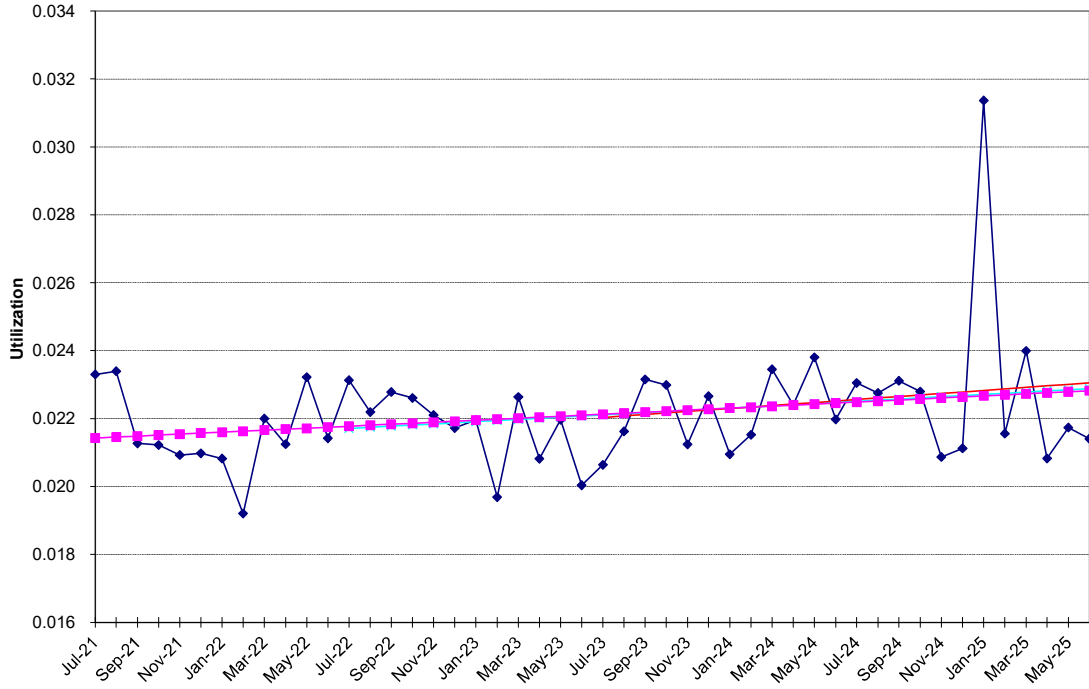
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.8%	7.9%	9.9%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.6%	8.5%	10.2%

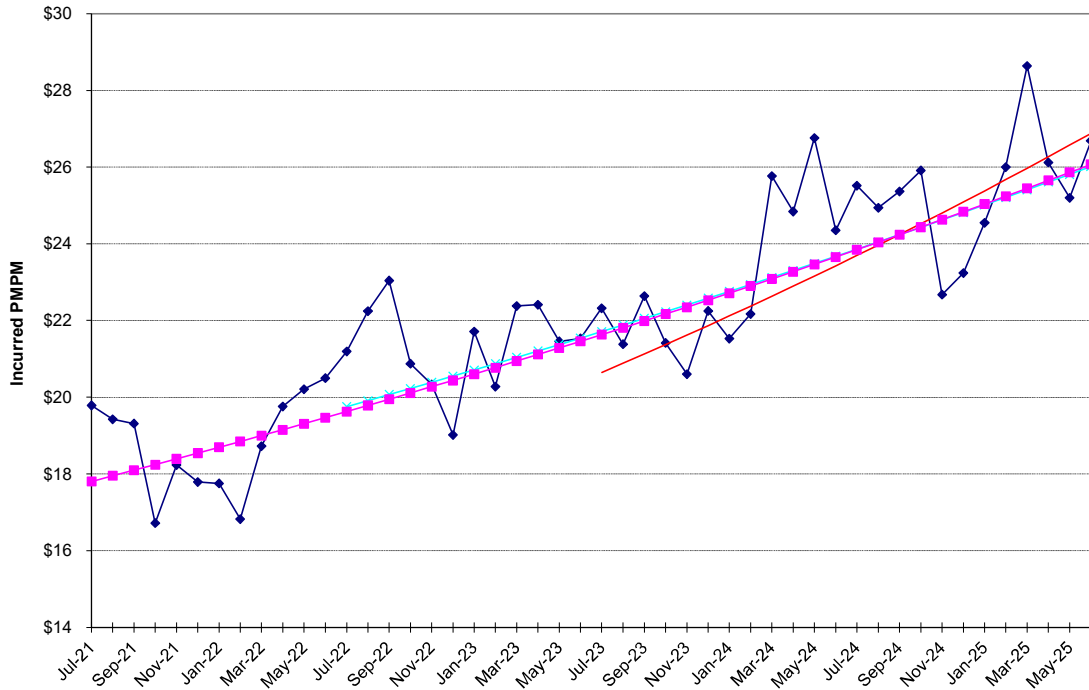
Hospital Outpatient - Emergency Room



Hospital Outpatient - Emergency Room



Hospital Outpatient - Emergency Room



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

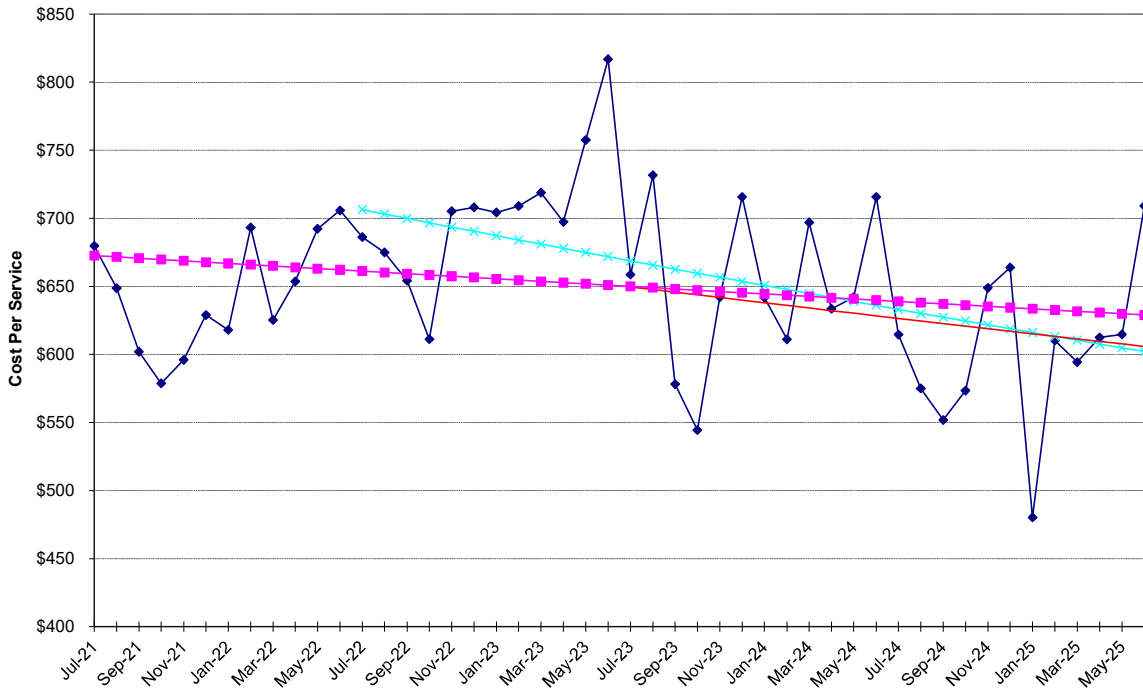
Medical / Surgical

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
24.1%	-3.6%	19.6%

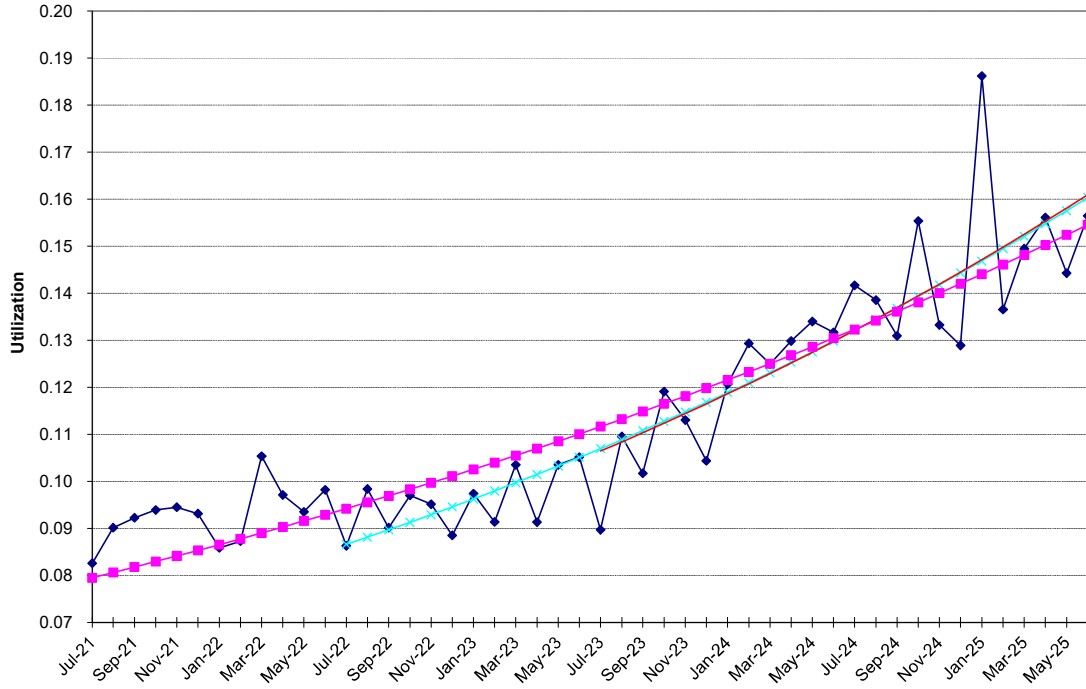
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
23.5%	-5.3%	17.0%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
18.5%	-1.7%	16.5%

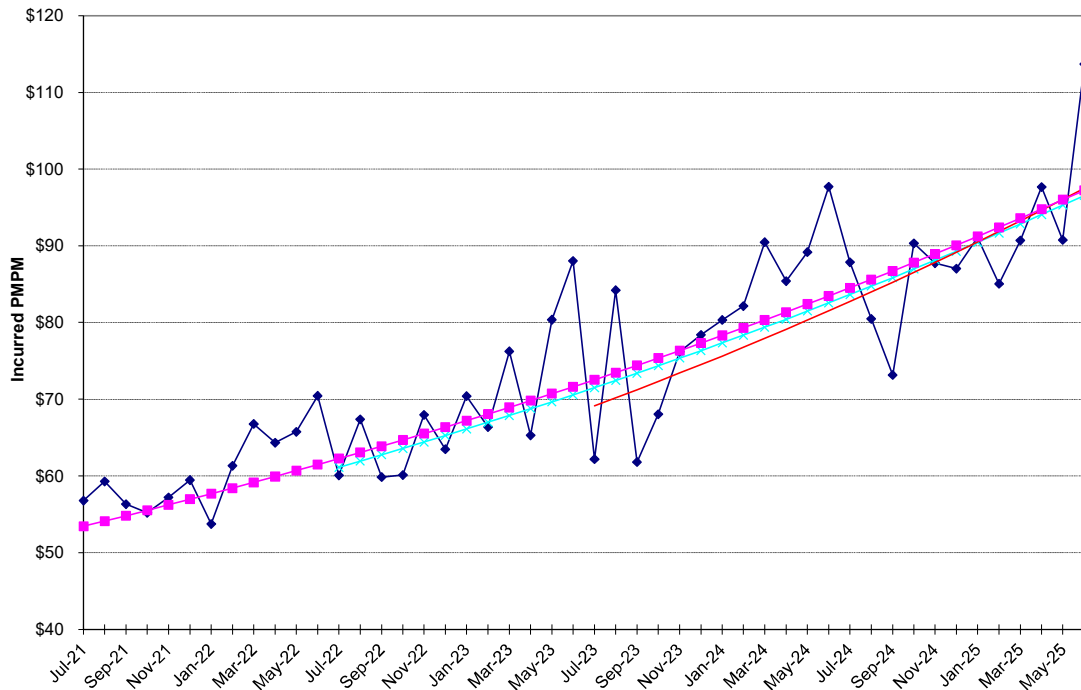
Hospital Outpatient - Medical / Surgical



Hospital Outpatient - Medical / Surgical



Hospital Outpatient - Medical / Surgical



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

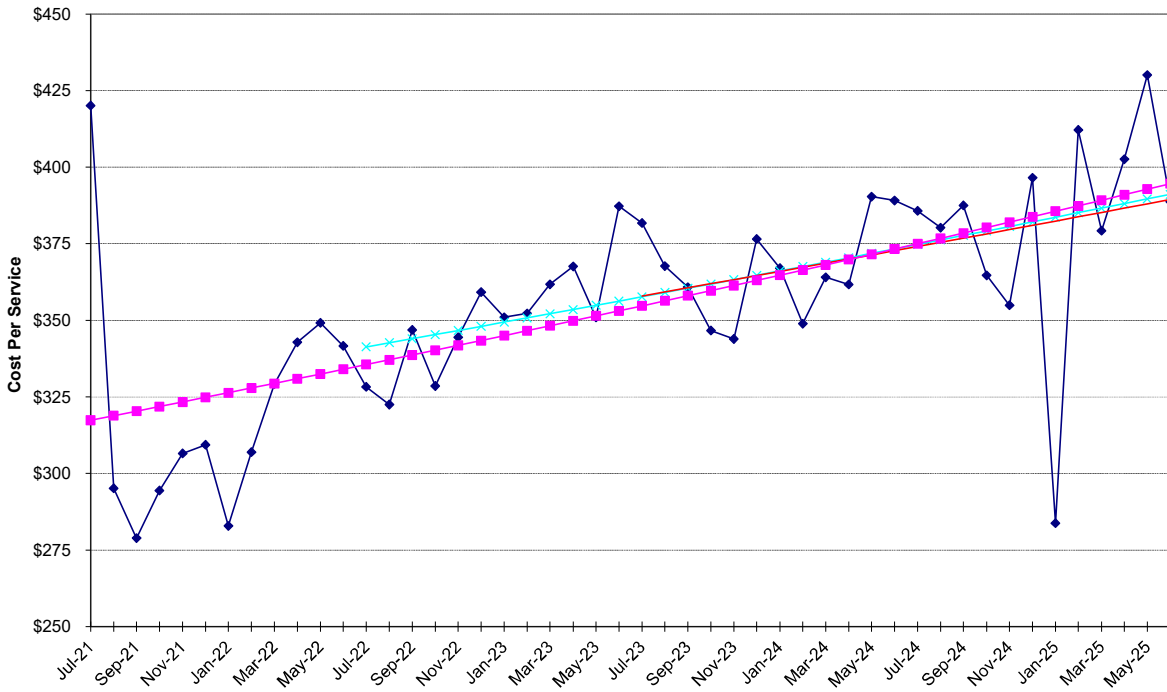
Other Services

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
11.3%	4.5%	16.3%

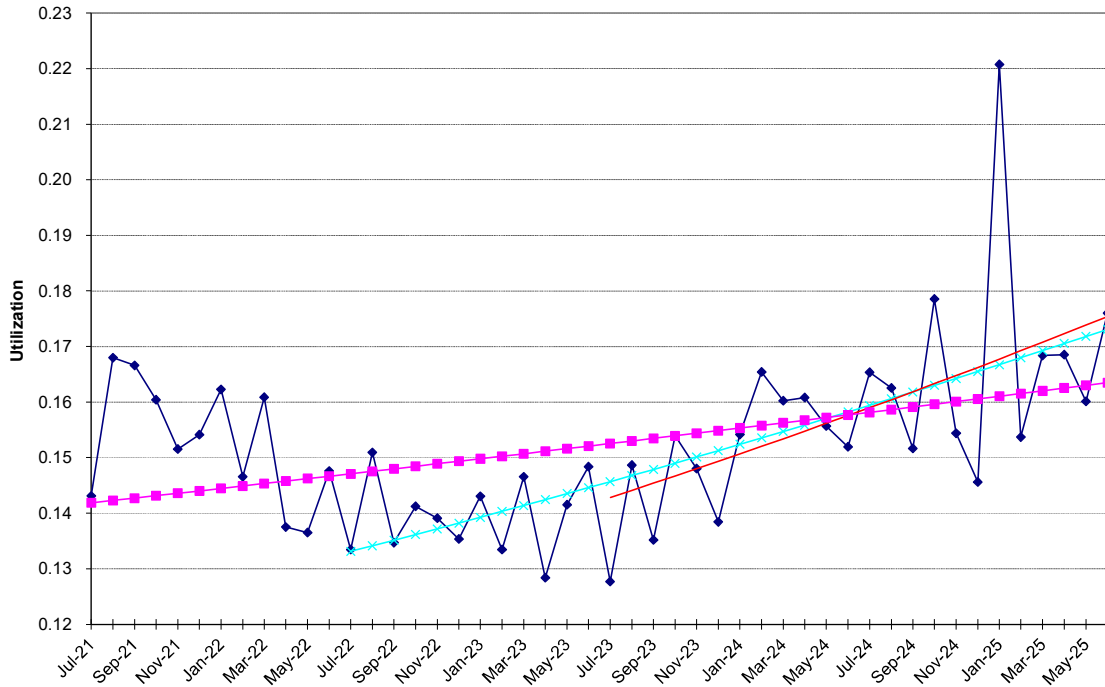
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
9.4%	4.8%	14.6%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.7%	5.7%	9.6%

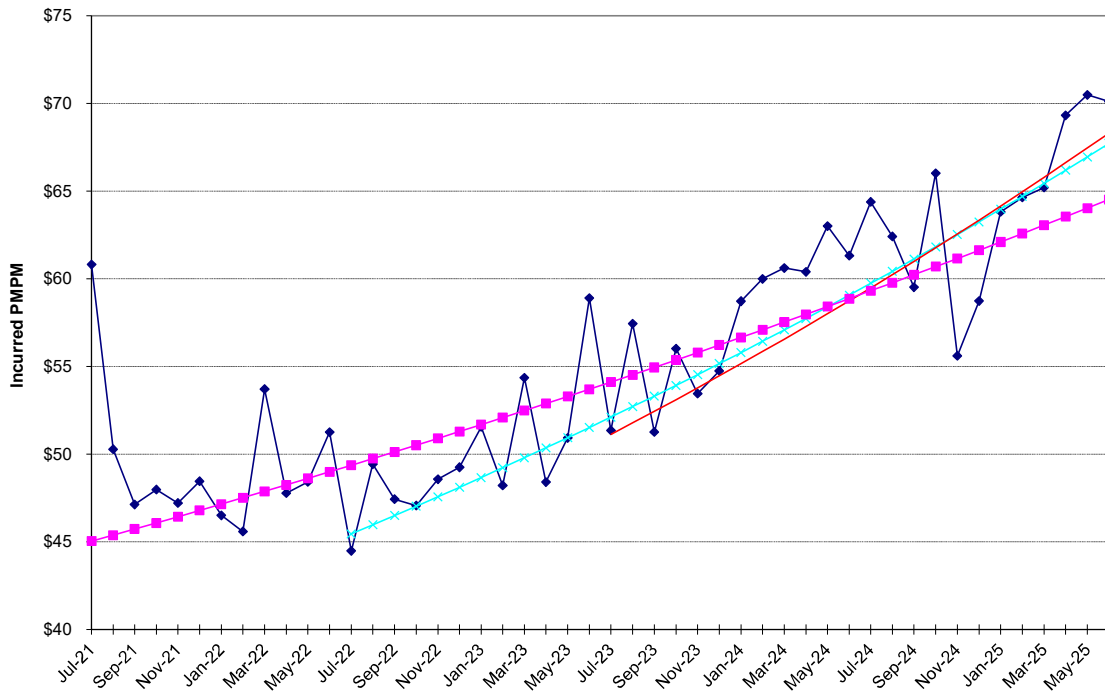
Hospital Outpatient - Other Services



Hospital Outpatient - Other Services



Hospital Outpatient - Other Services



**NON-MEDICARE CLAIMS
Excluding Drugs**

HOSPITAL OUTPATIENT

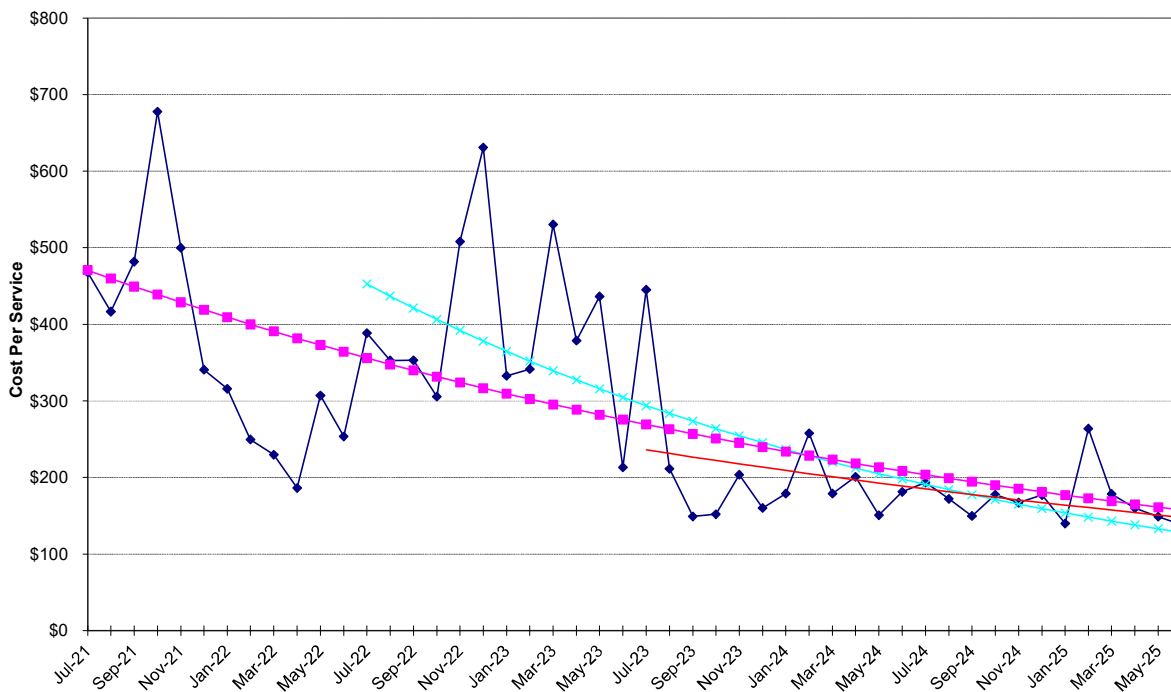
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
8.6%	-21.6%	-14.9%

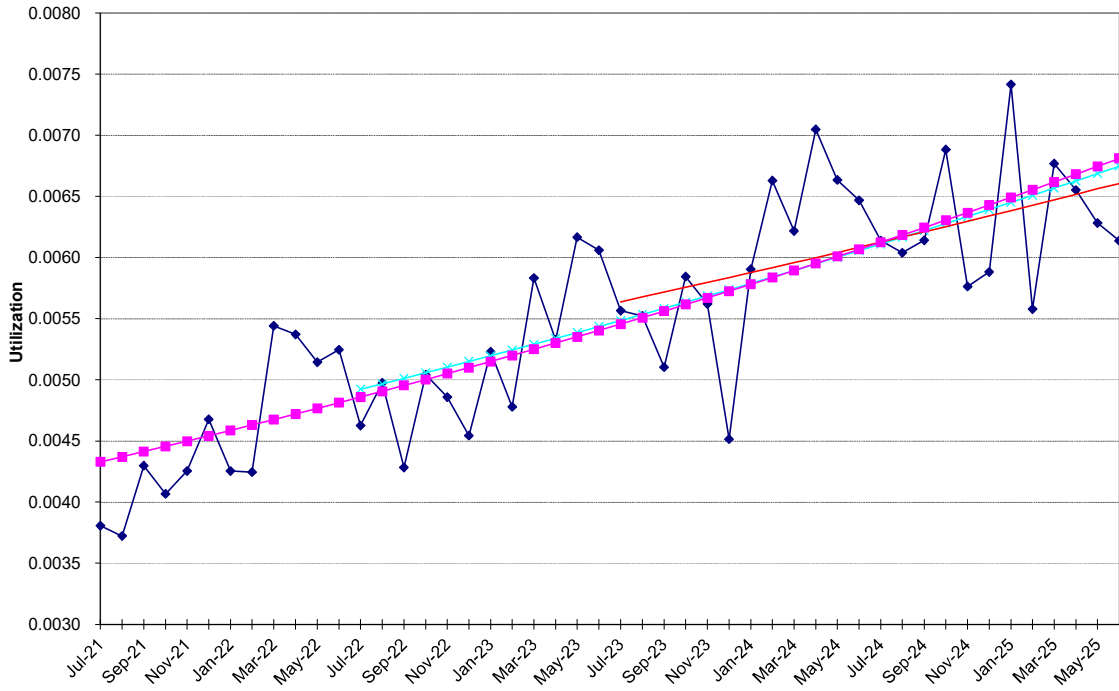
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
11.4%	-35.1%	-27.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
12.3%	-24.4%	-15.1%

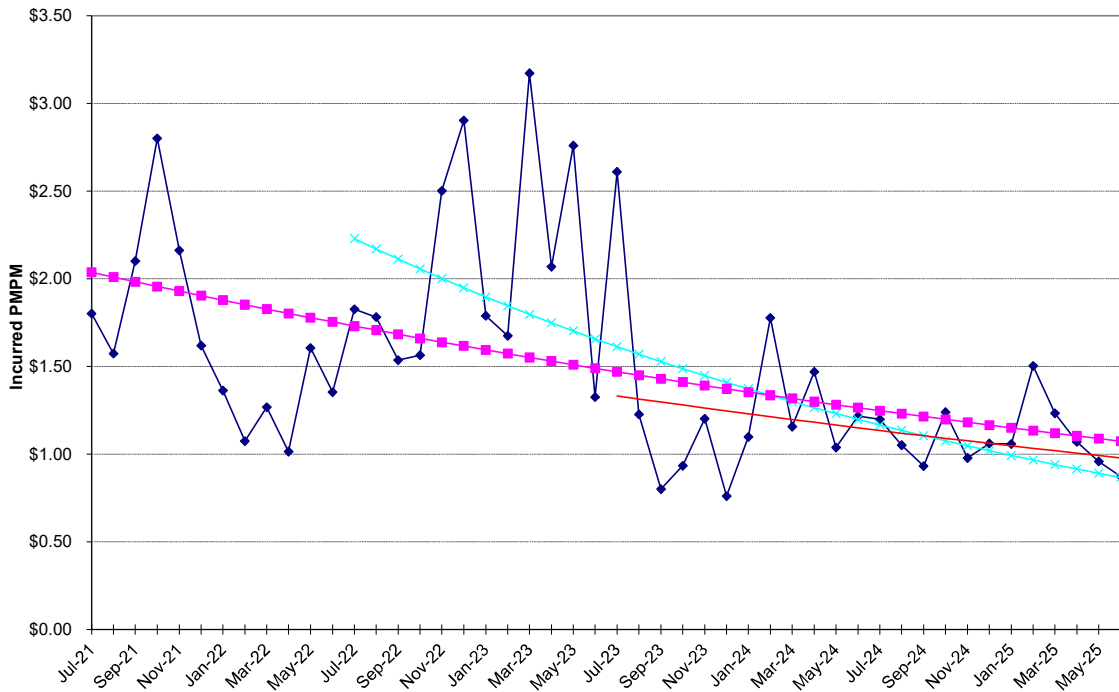
Hospital Outpatient - Psychiatric / Substance Abuse



Hospital Outpatient - Psychiatric / Substance Abuse



Hospital Outpatient - Psychiatric / Substance Abuse



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

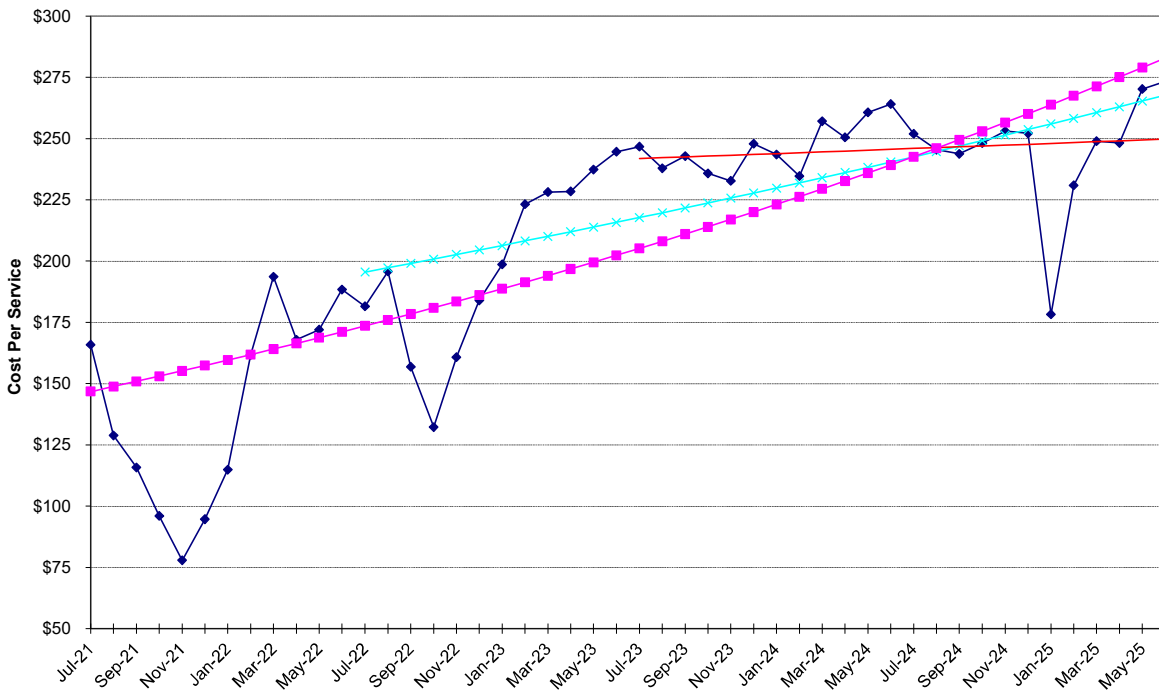
Anesthesia

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.0%	1.7%	-0.4%

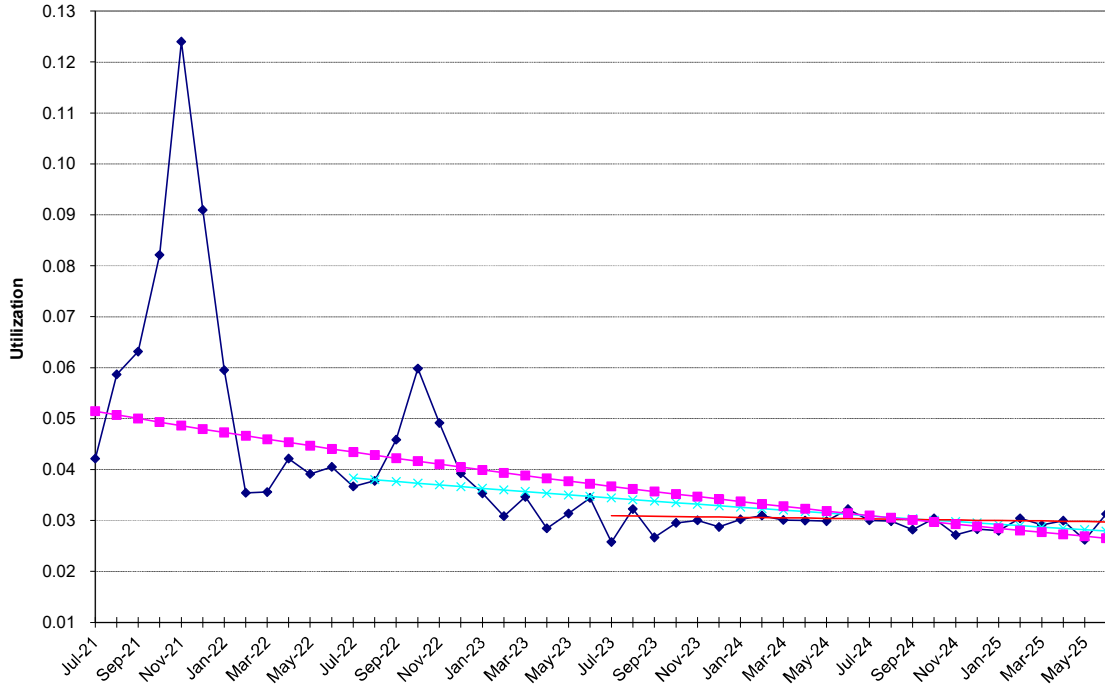
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-10.3%	11.4%	-0.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-15.6%	18.2%	-0.2%

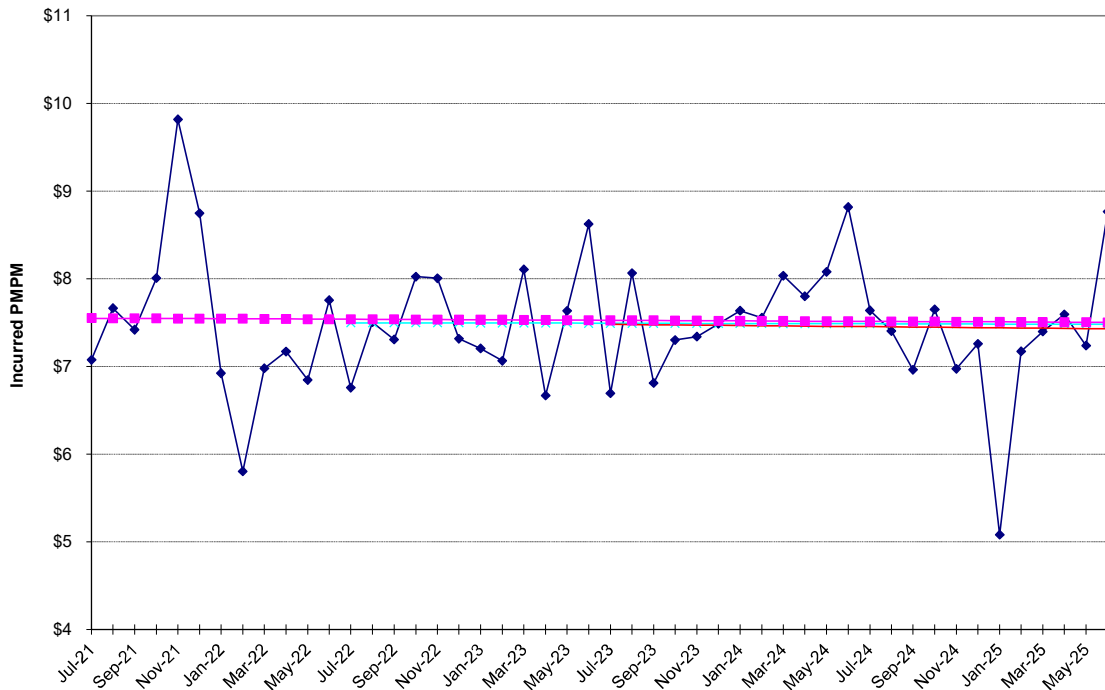
Physician Services - Anesthesia



Physician Services - Anesthesia



Physician Services - Anesthesia



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

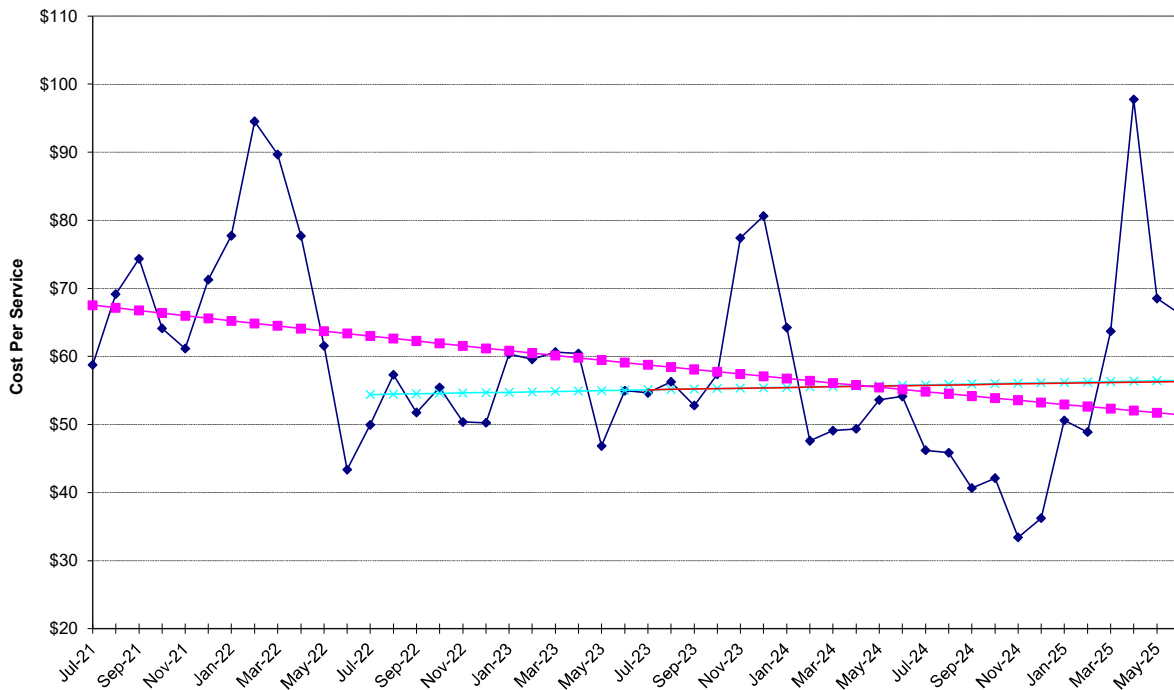
Chemotherapy / Radiation

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.2%	1.1%	-0.1%

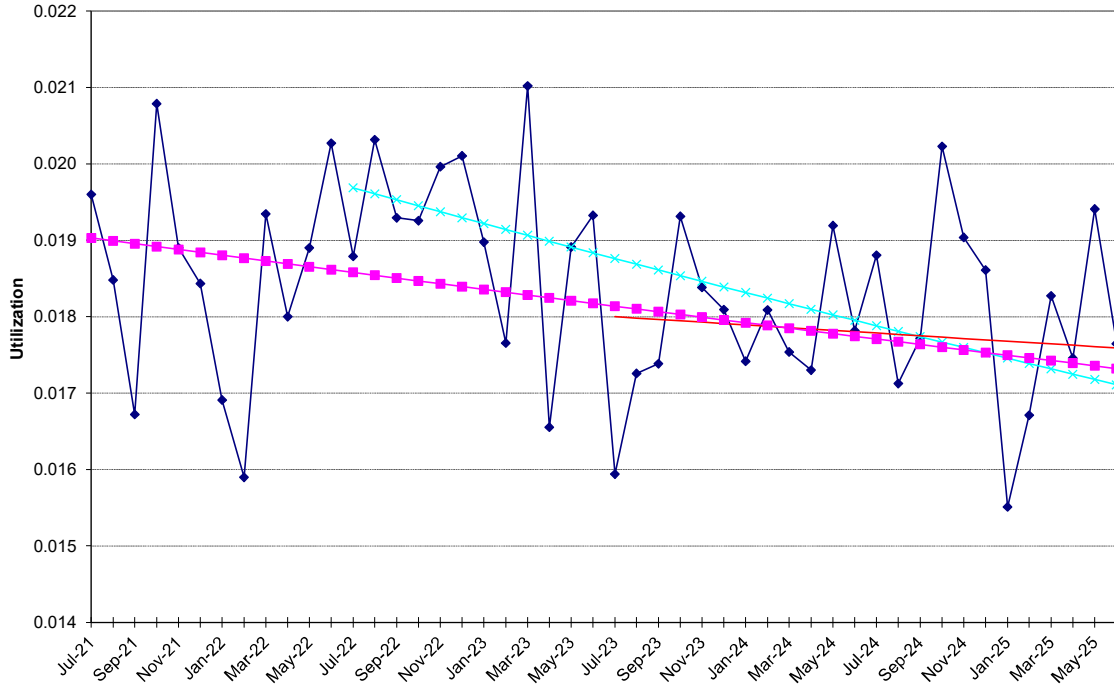
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-4.7%	1.3%	-3.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.4%	-6.7%	-8.9%

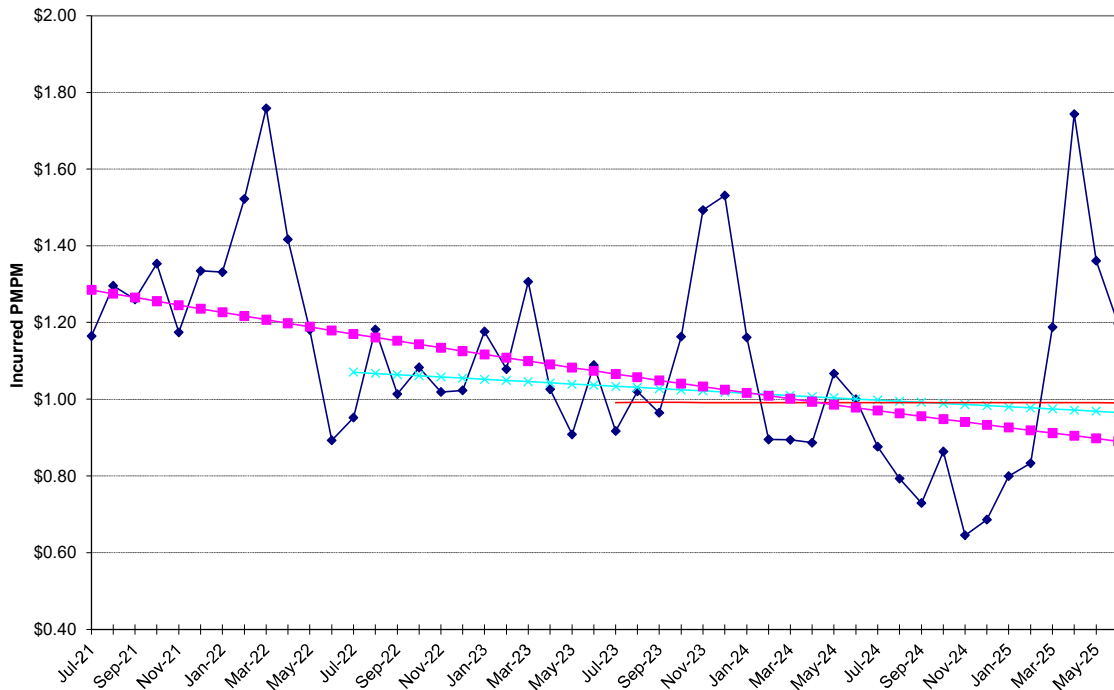
Physician Services - Chemotherapy Radiation



Physician Services - Chemotherapy Radiation



Physician Services - Chemotherapy Radiation



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

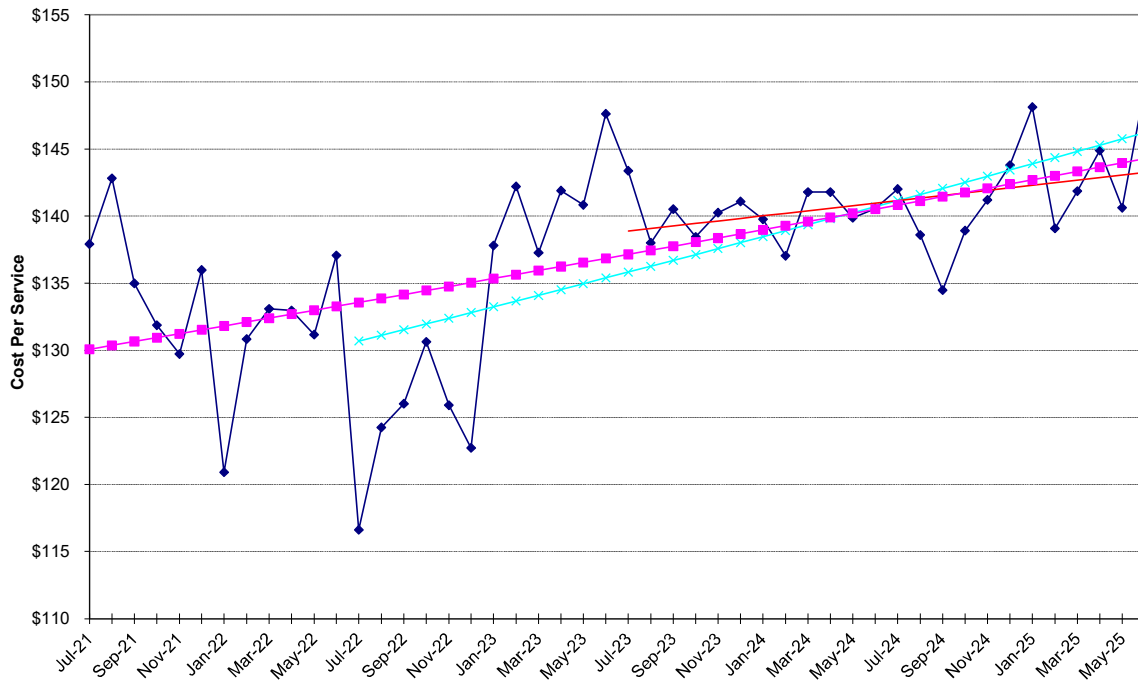
Emergency Room

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.8%	1.6%	-0.2%

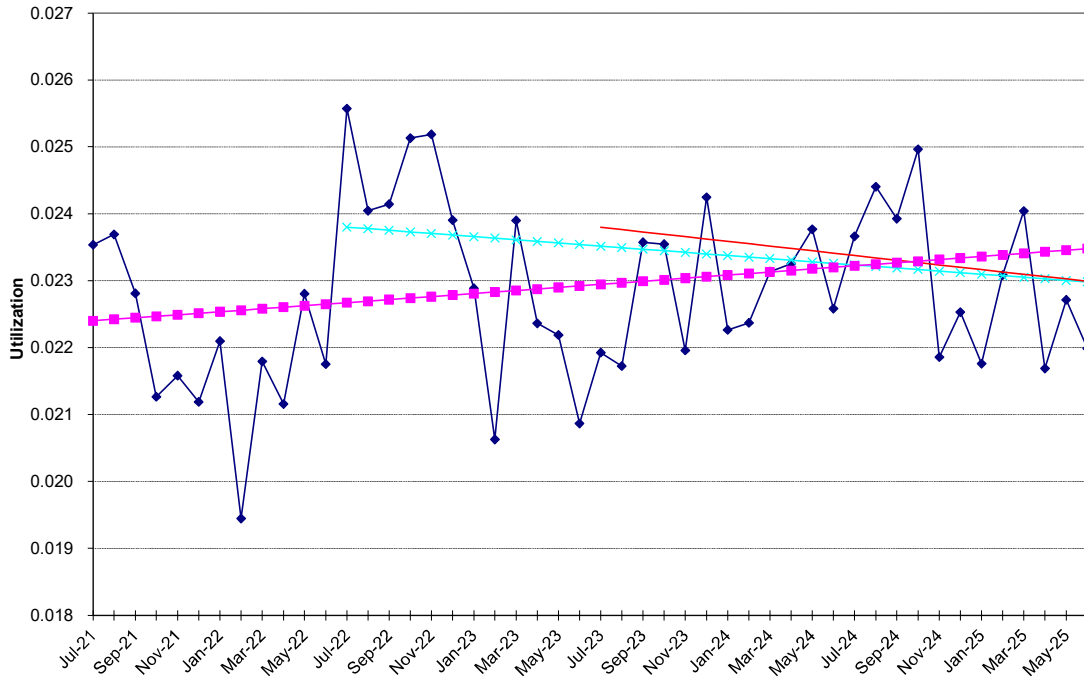
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.2%	3.9%	2.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.2%	2.7%	3.9%

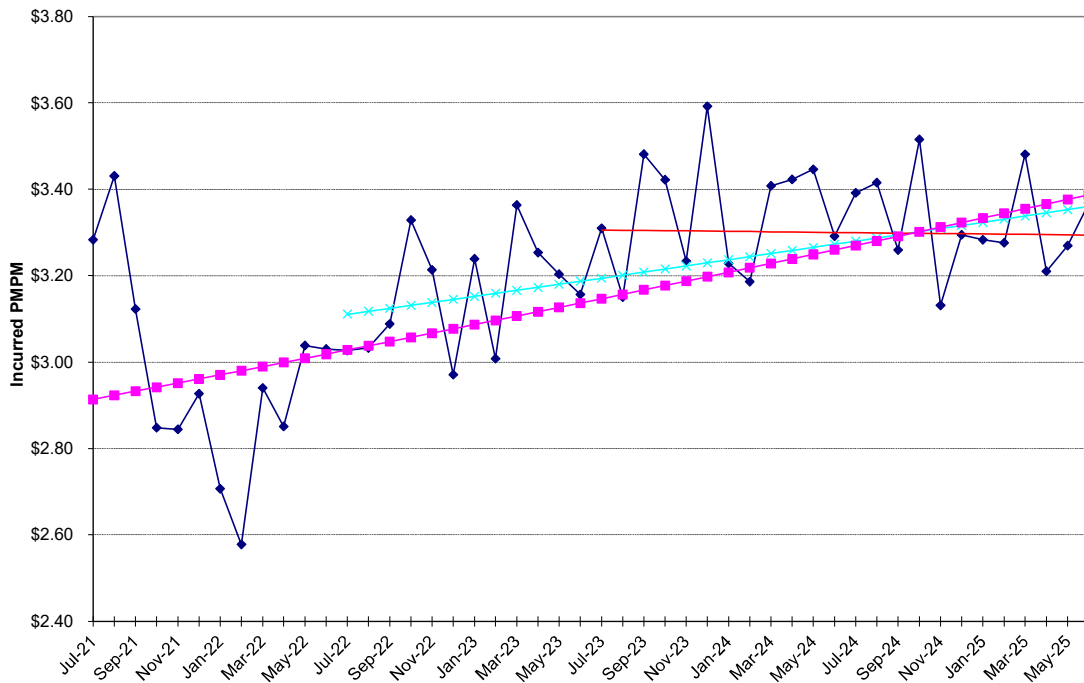
Physician Services - Emergency Room



Physician Services - Emergency Room



Physician Services - Emergency Room



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

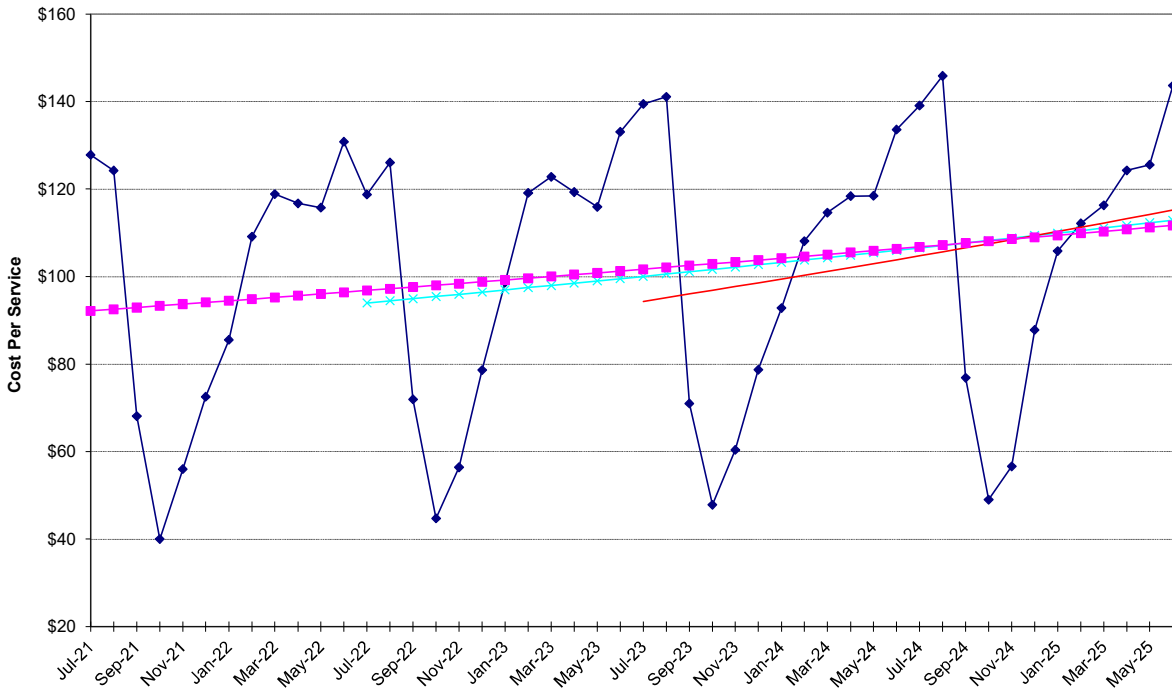
Immunizations / Injections / Allergy

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-29.3%	11.0%	-21.5%

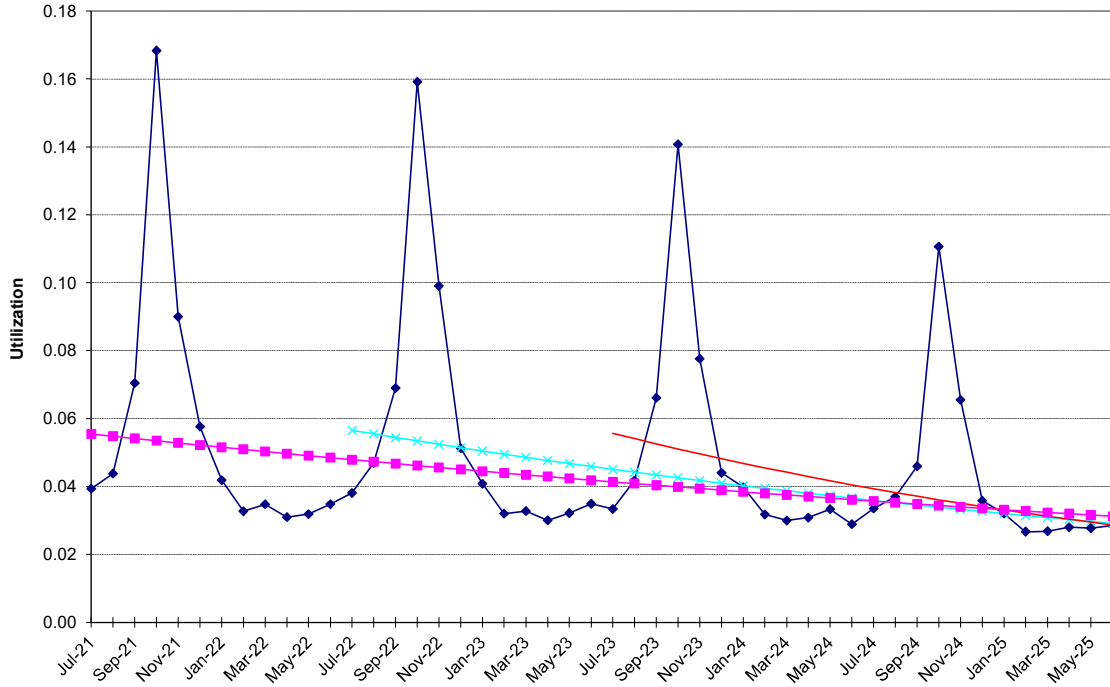
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-20.3%	6.5%	-15.1%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-13.7%	5.0%	-9.3%

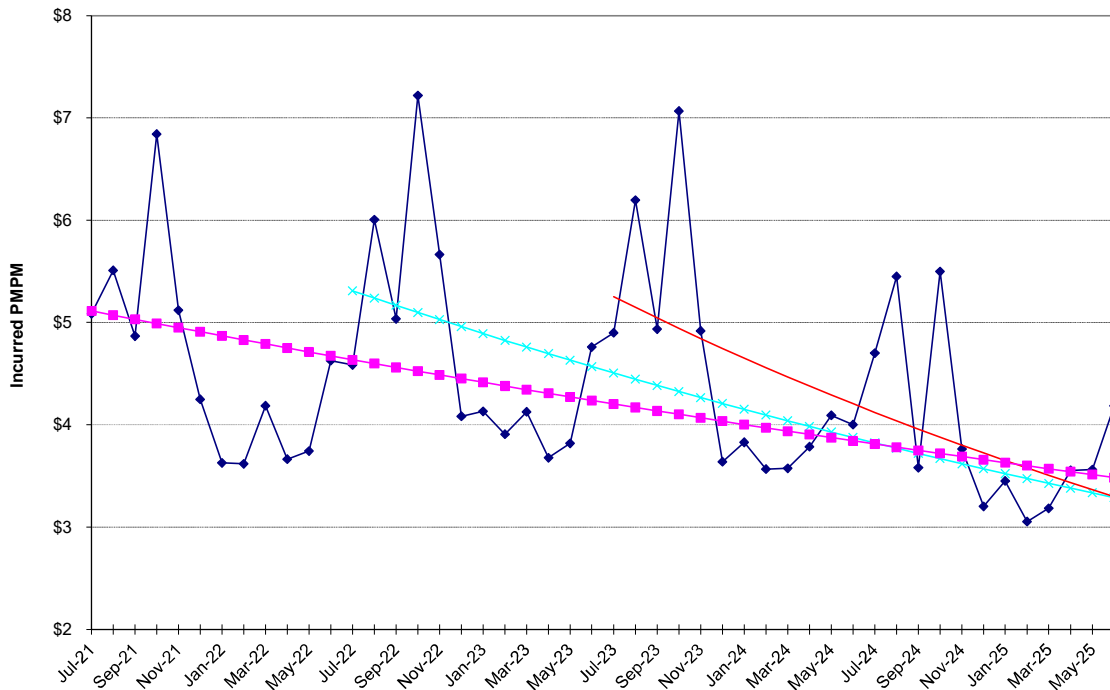
Physician Services - Immunizations / Allergy



Physician Services - Immunizations / Allergy



Physician Services - Immunizations / Allergy



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

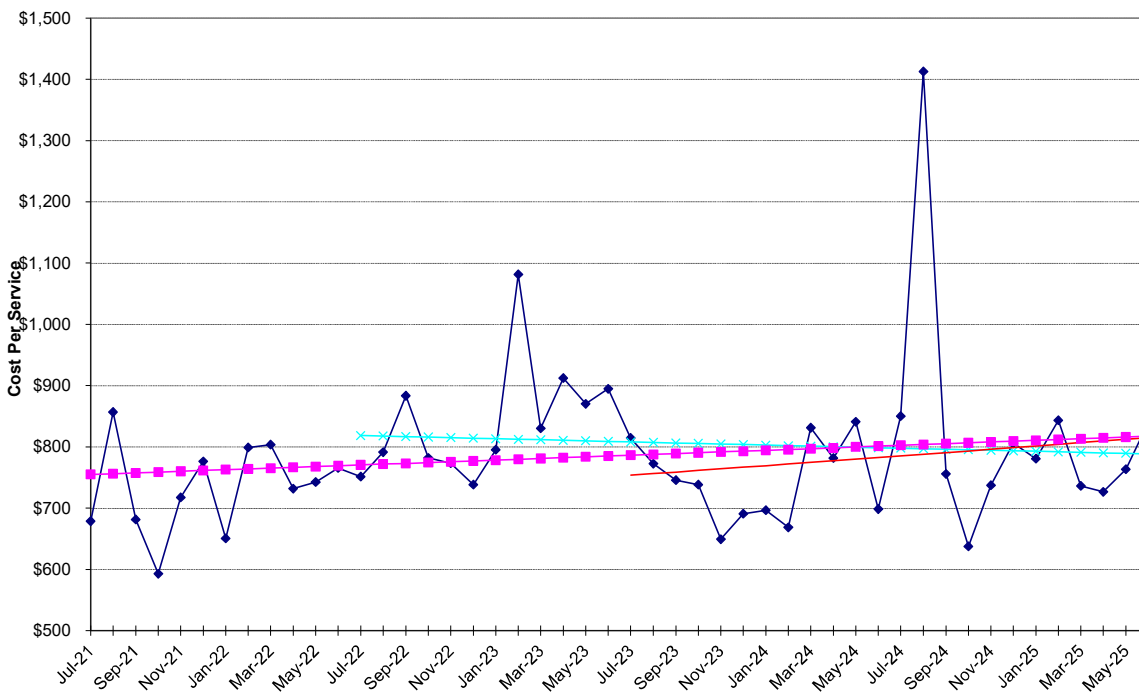
Inpatient Surgery

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.4%	4.2%	1.7%

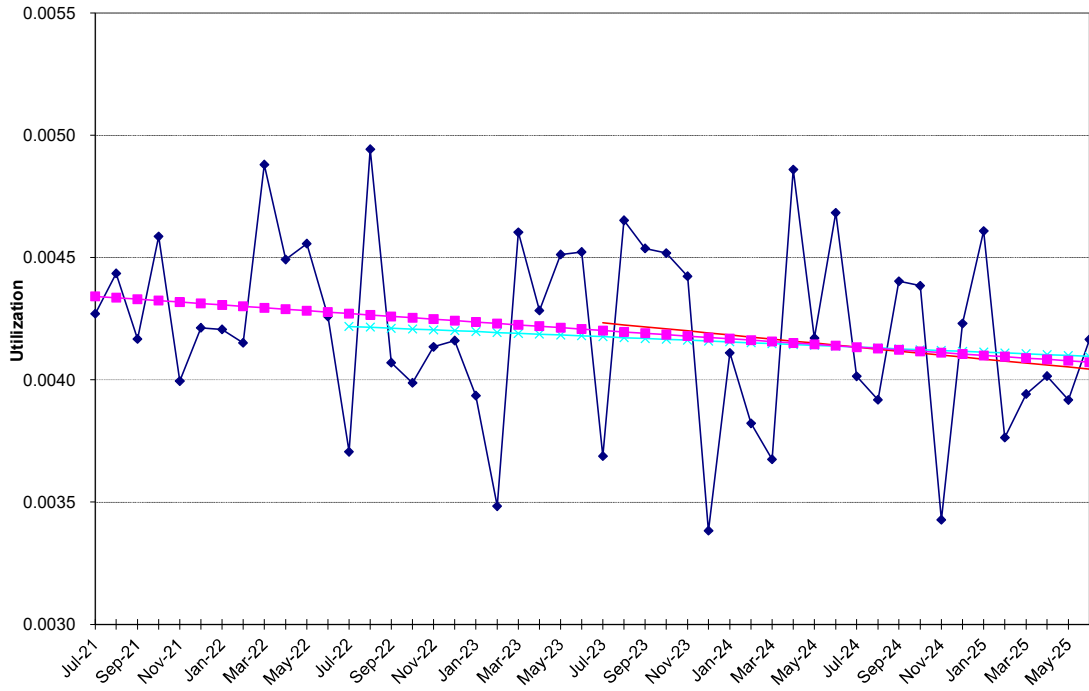
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.0%	-1.3%	-2.3%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.6%	2.1%	0.4%

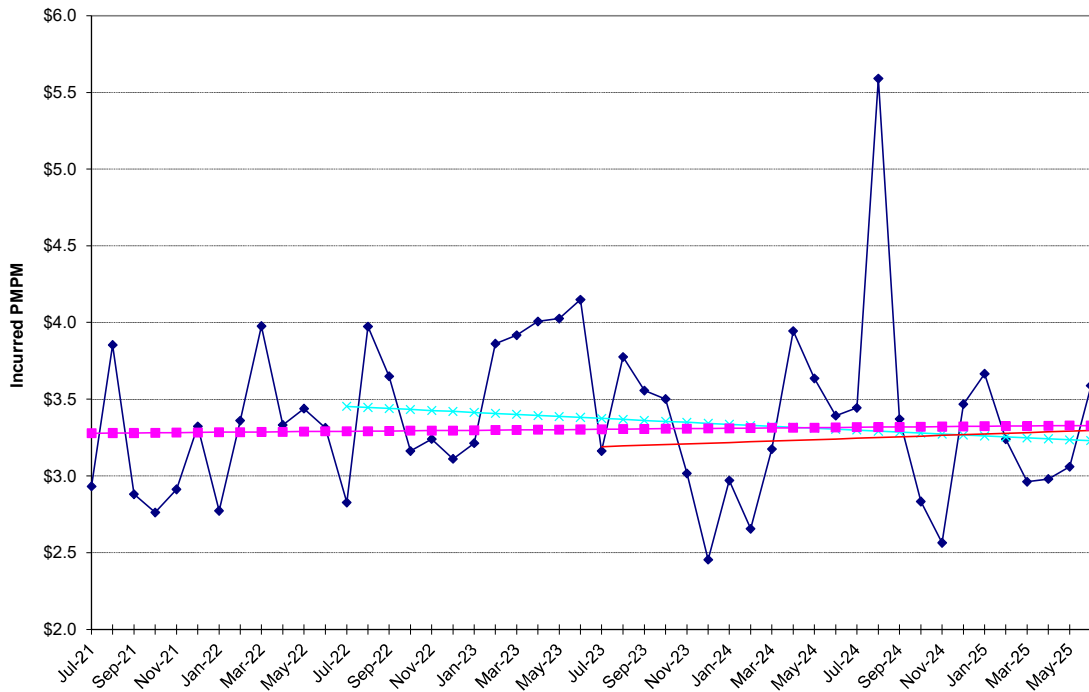
Physician Services - Inpatient Surgery



Physician Services - Inpatient Surgery



Physician Services - Inpatient Surgery



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

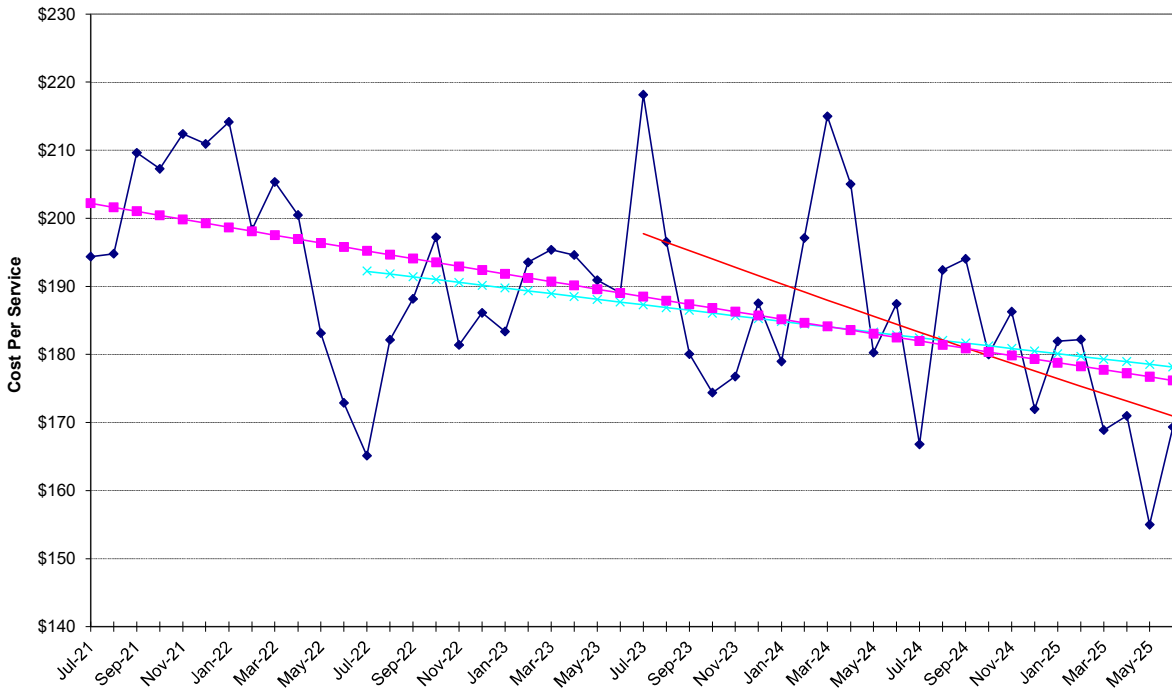
Inpatient Visits

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.7%	-7.3%	-1.1%

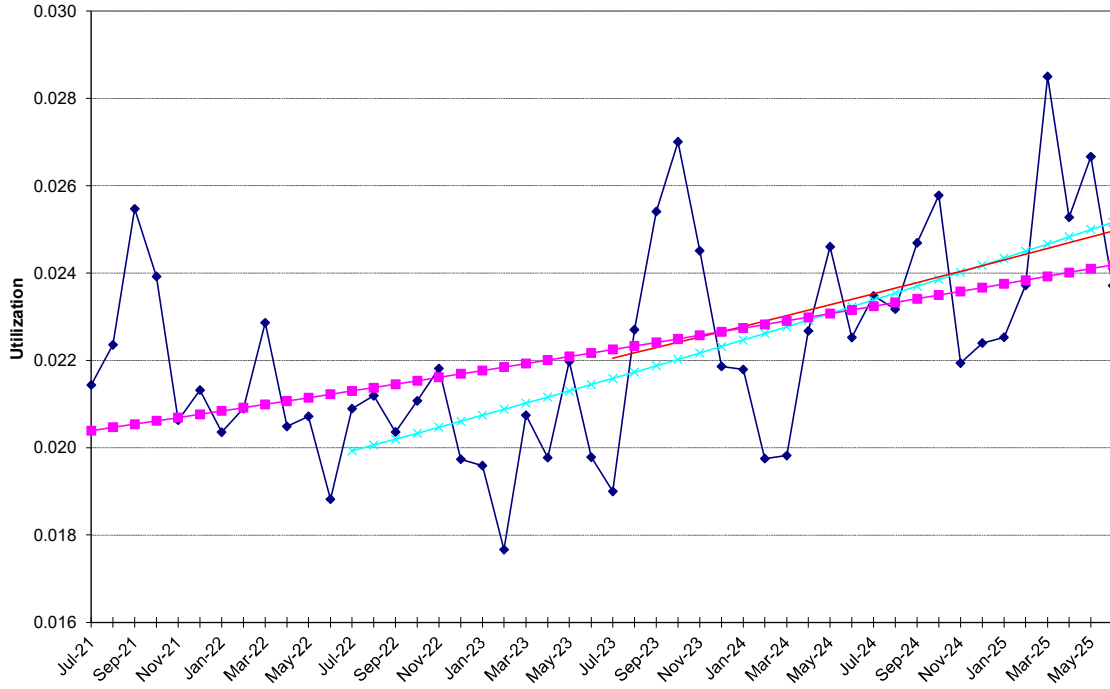
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
8.3%	-2.6%	5.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.5%	-3.5%	0.8%

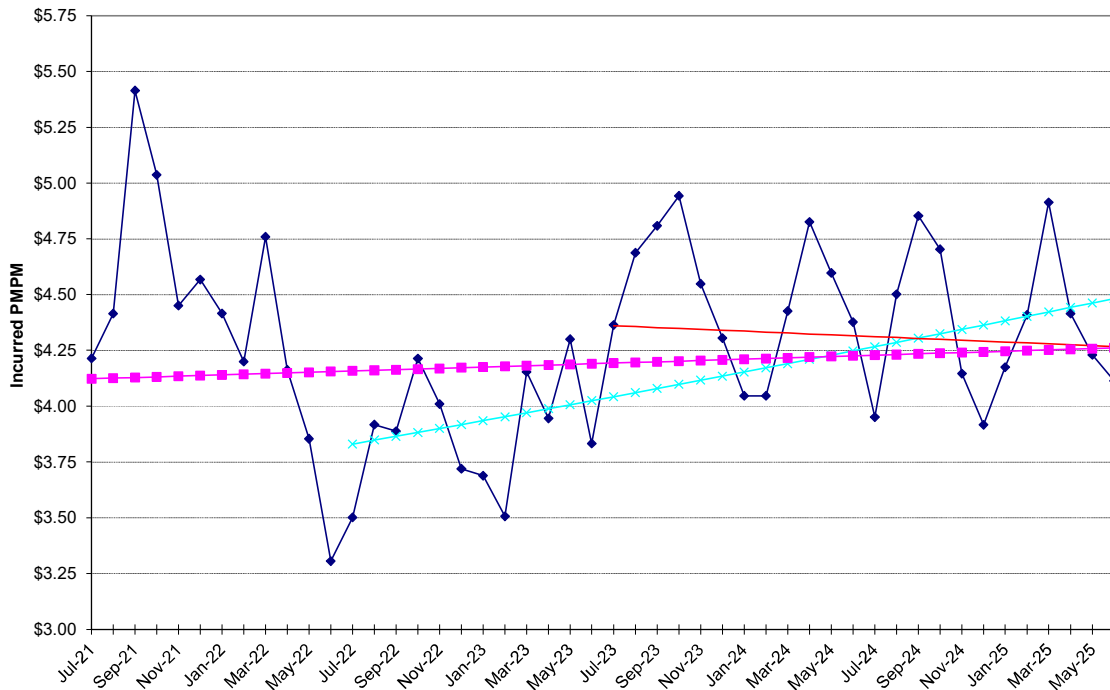
Physician Services - Inpatient Visits



Physician Services - Inpatient Visits



Physician Services - Inpatient Visits



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

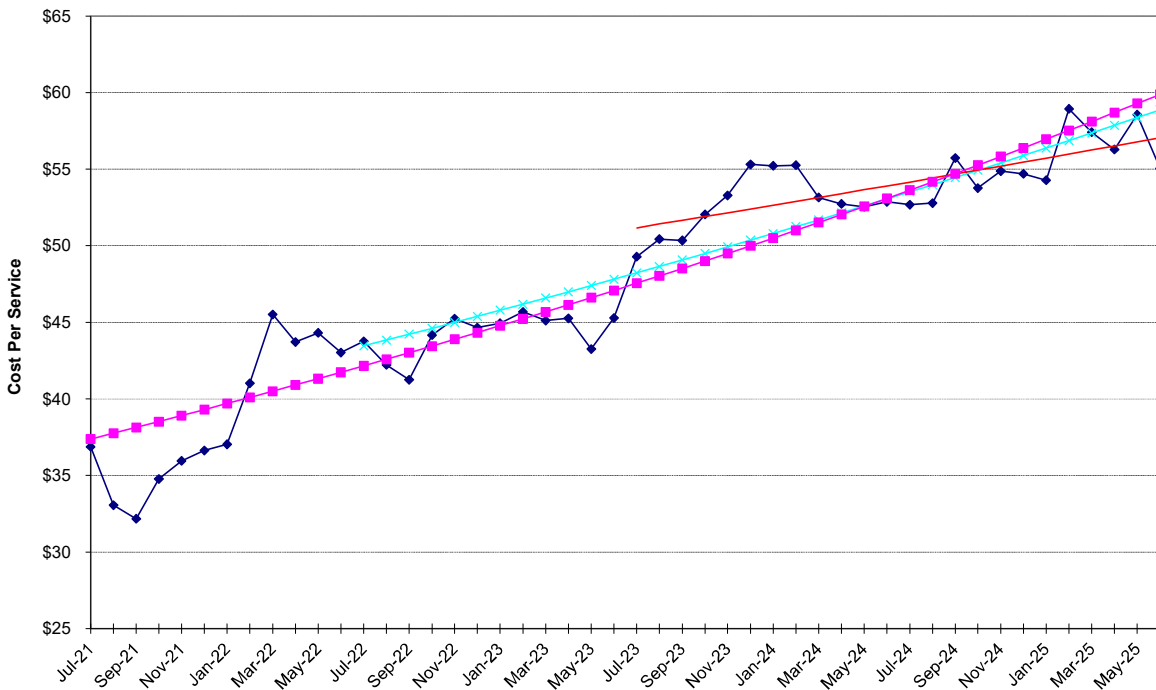
Lab & Pathology

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.5%	5.8%	4.3%

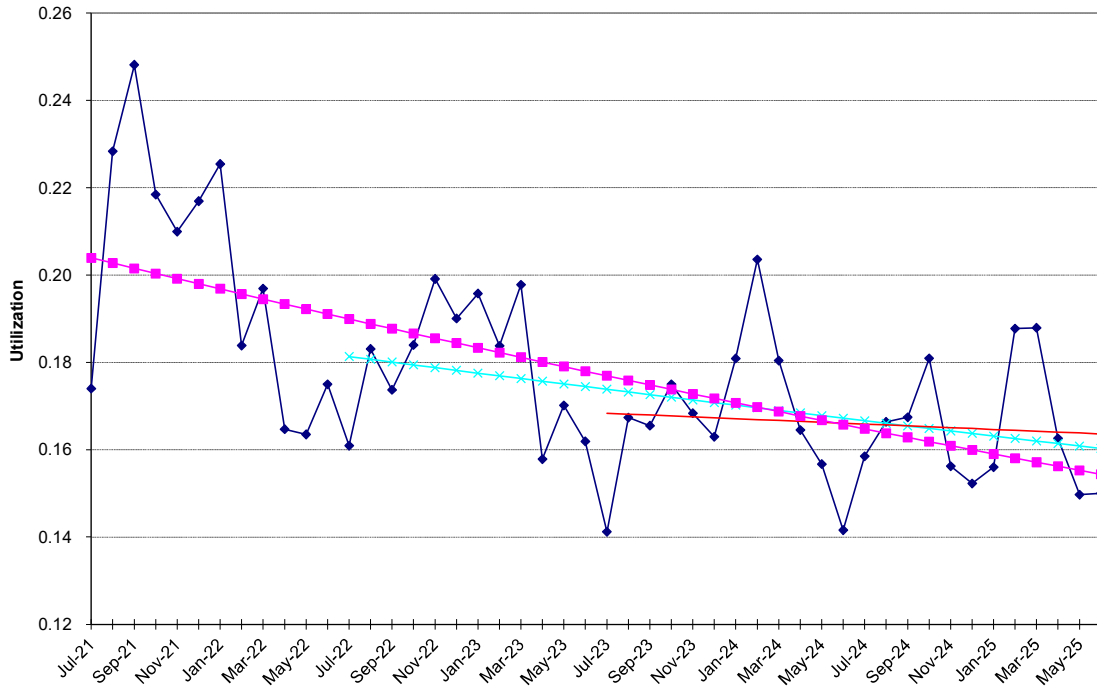
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-4.1%	11.0%	6.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-6.9%	12.8%	5.0%

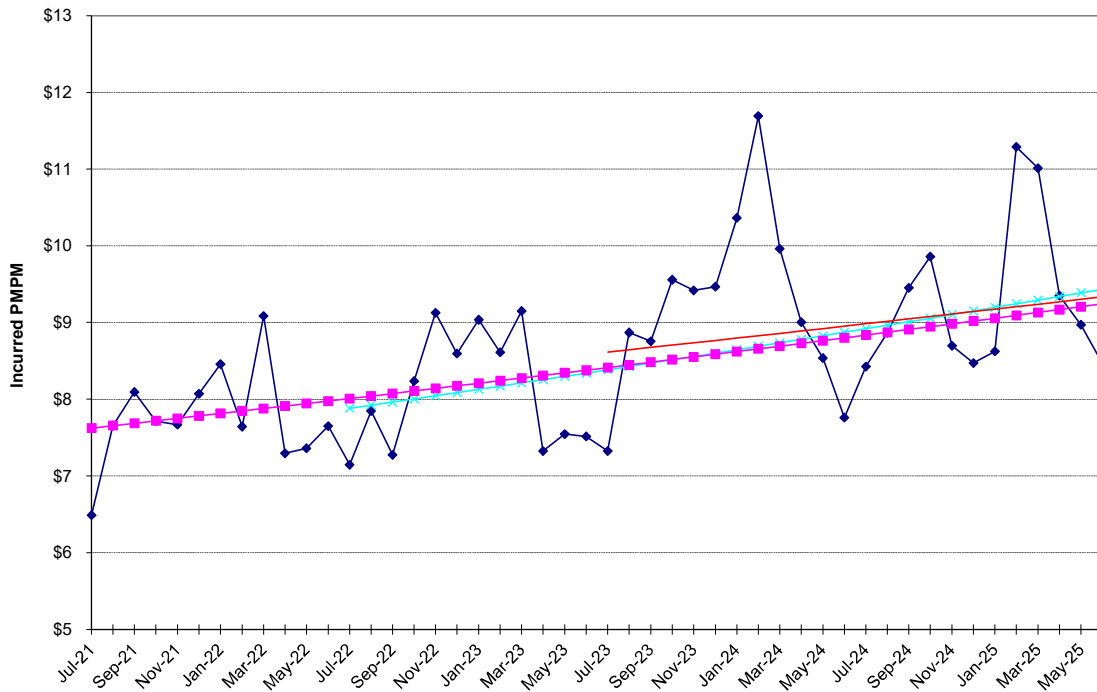
Physician Services - Lab & Pathology



Physician Services - Lab & Pathology



Physician Services - Lab & Pathology



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

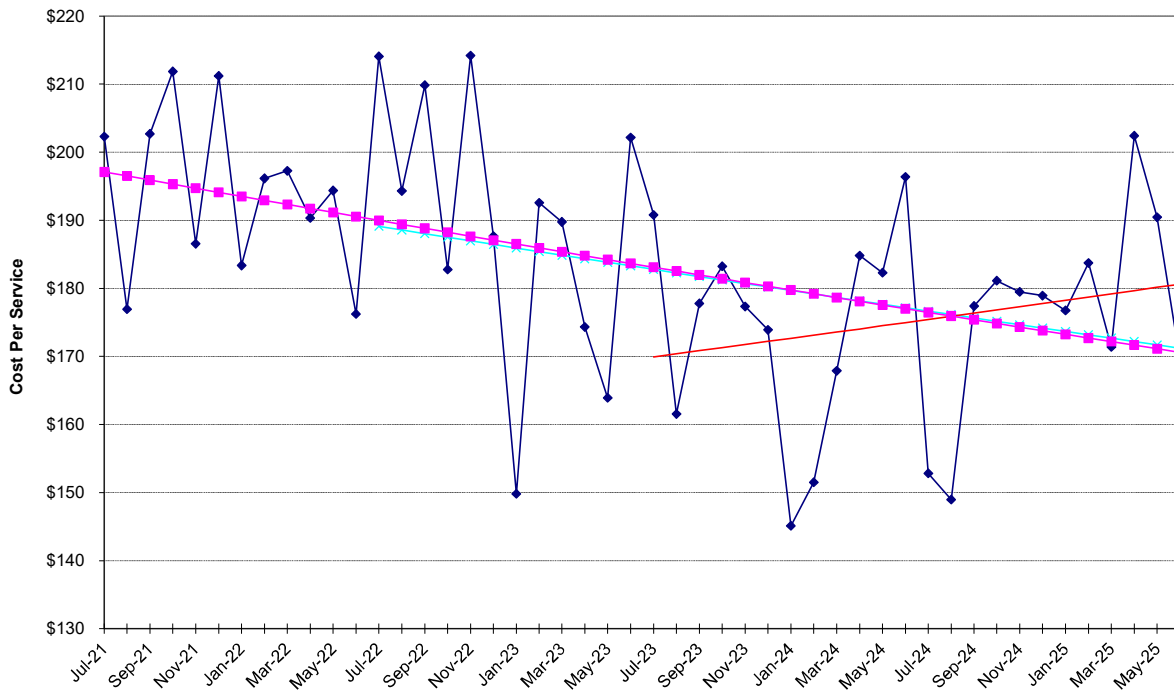
Maternity

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-5.3%	3.2%	-2.3%

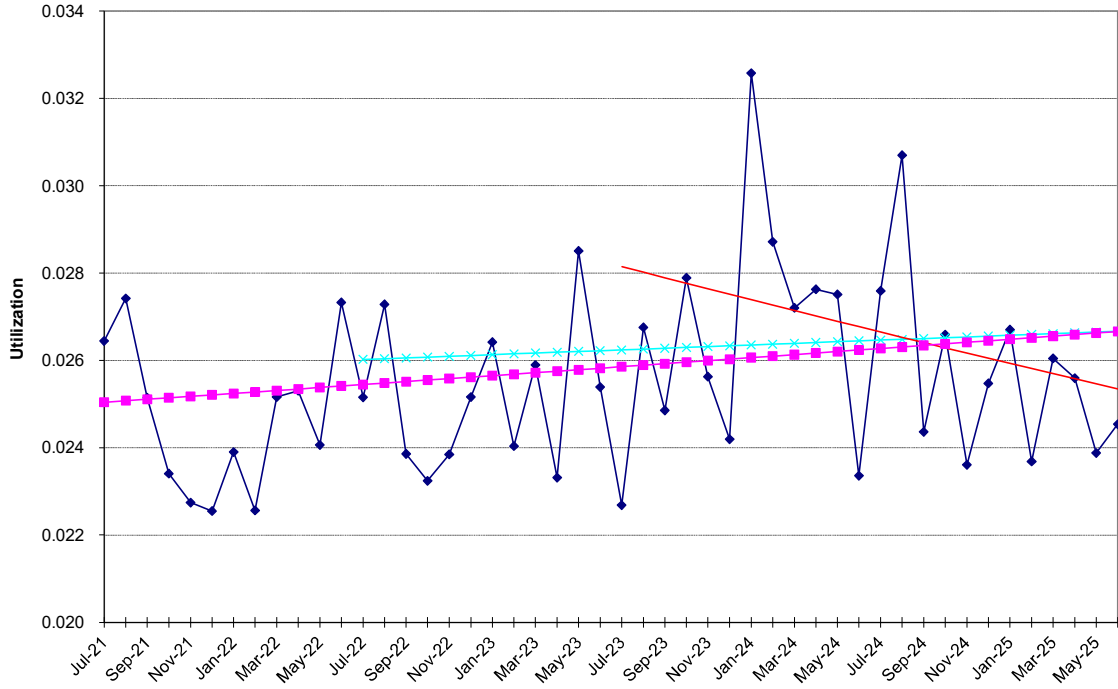
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.8%	-3.4%	-2.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
1.6%	-3.6%	-2.1%

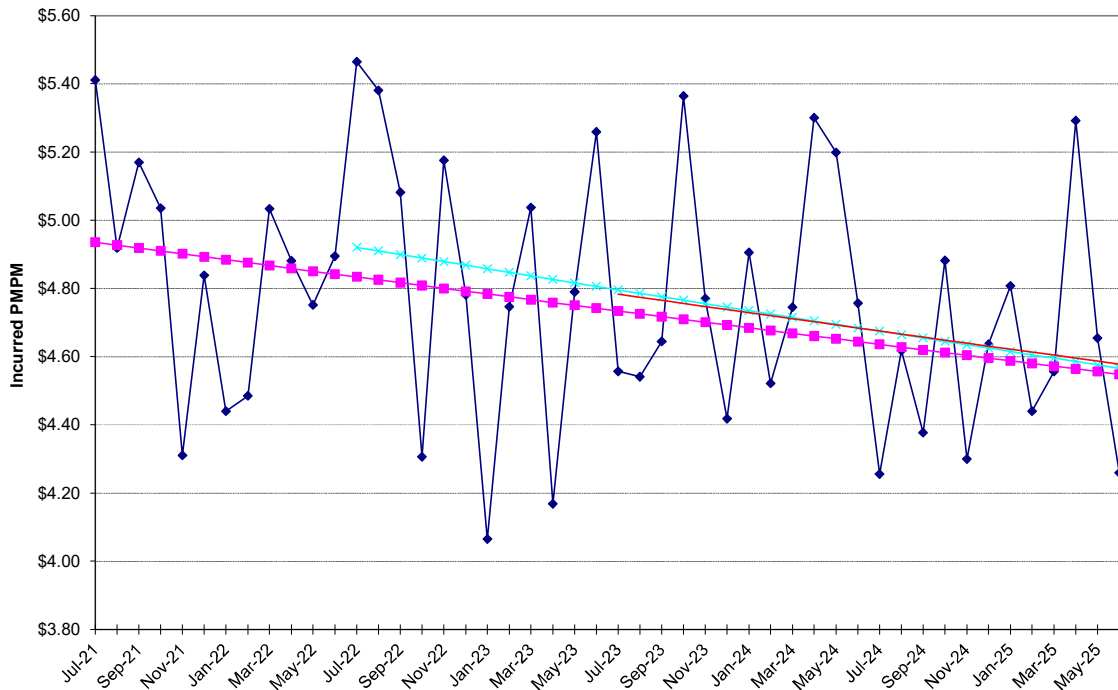
Physician Services - Maternity



Physician Services - Maternity



Physician Services - Maternity



**NON-MEDICARE CLAIMS
Excluding Drugs**

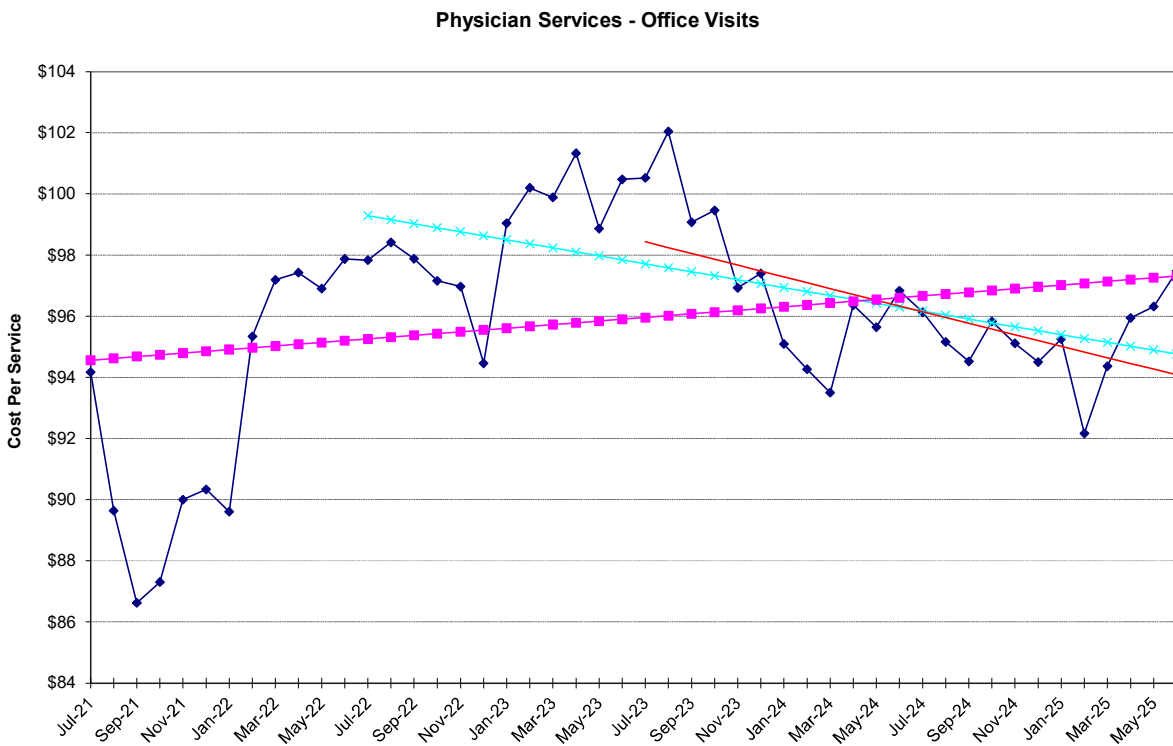
PHYSICIAN SERVICES

Office Visits

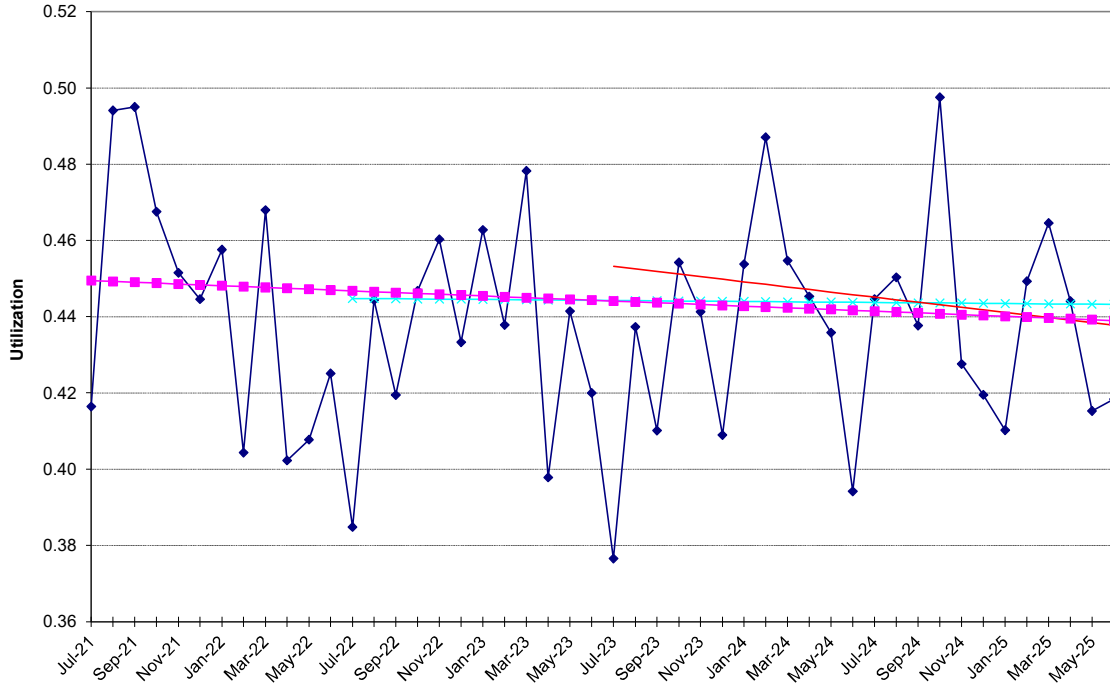
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-1.8%	-2.3%	-4.1%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.1%	-1.6%	-1.7%

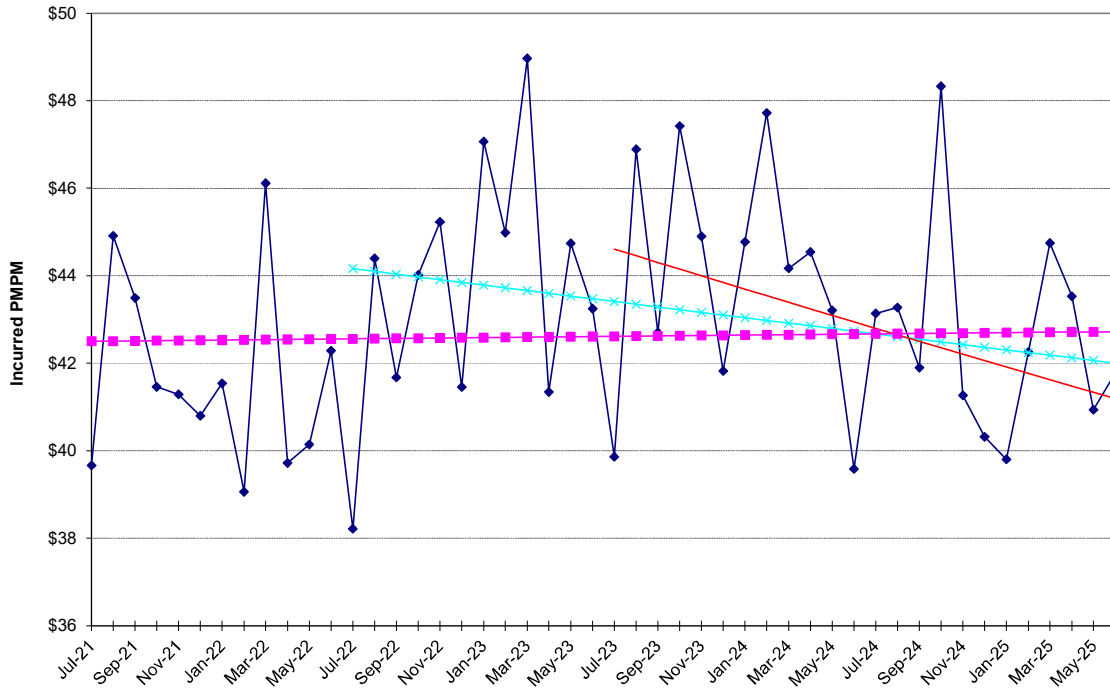
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.6%	0.7%	0.1%



Physician Services - Office Visits



Physician Services - Office Visits



**NON-MEDICARE CLAIMS
Excluding Drugs**

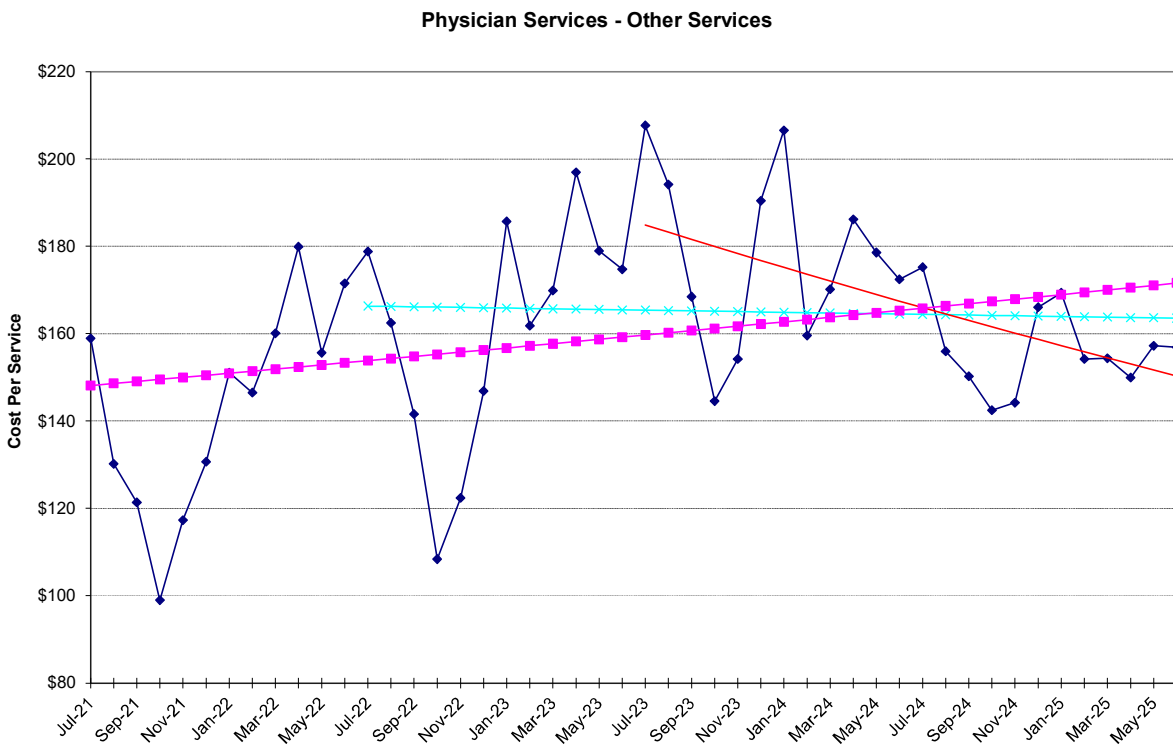
PHYSICIAN SERVICES

Other Services

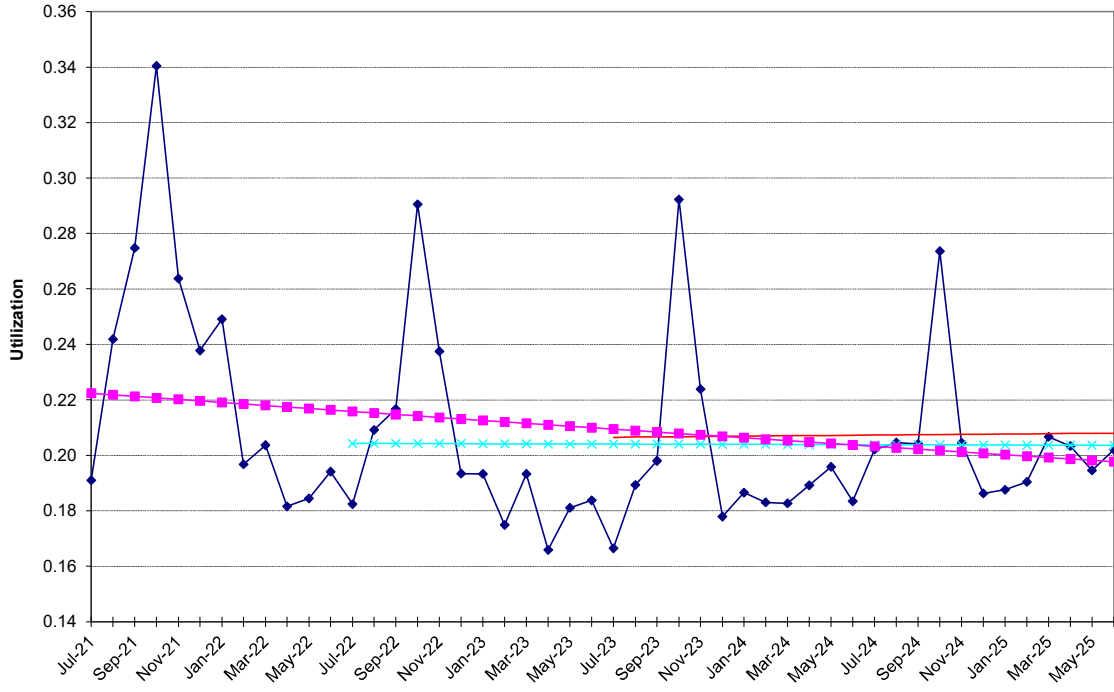
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.4%	-10.2%	-9.9%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.1%	-0.6%	-0.7%

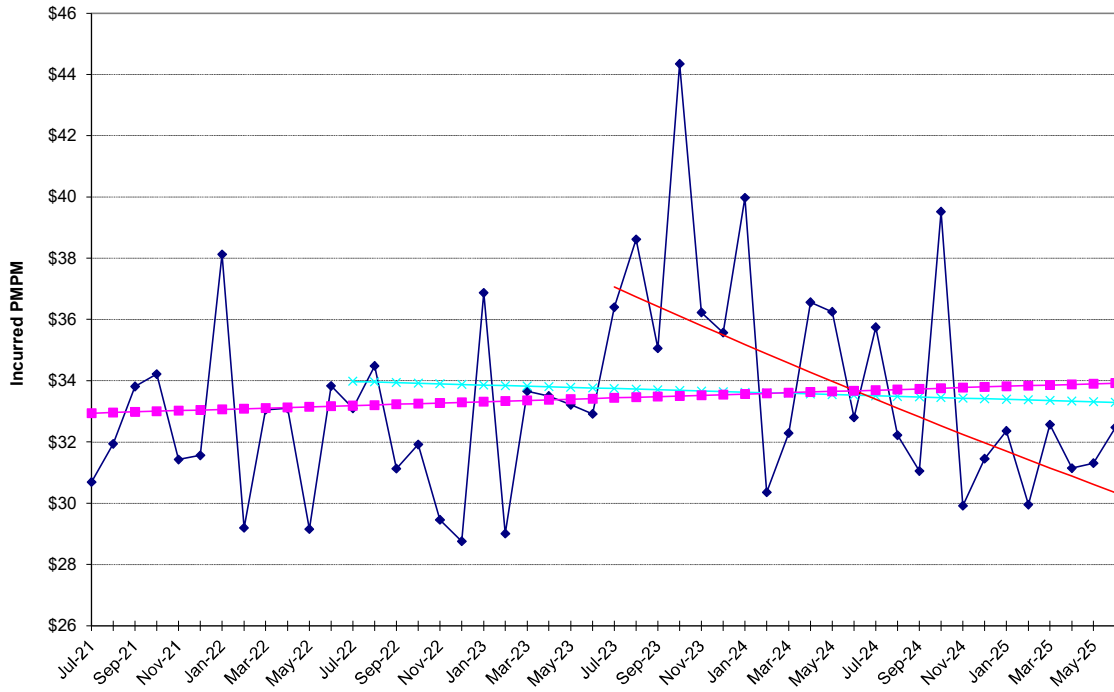
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-3.0%	3.8%	0.8%



Physician Services - Other Services



Physician Services - Other Services



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

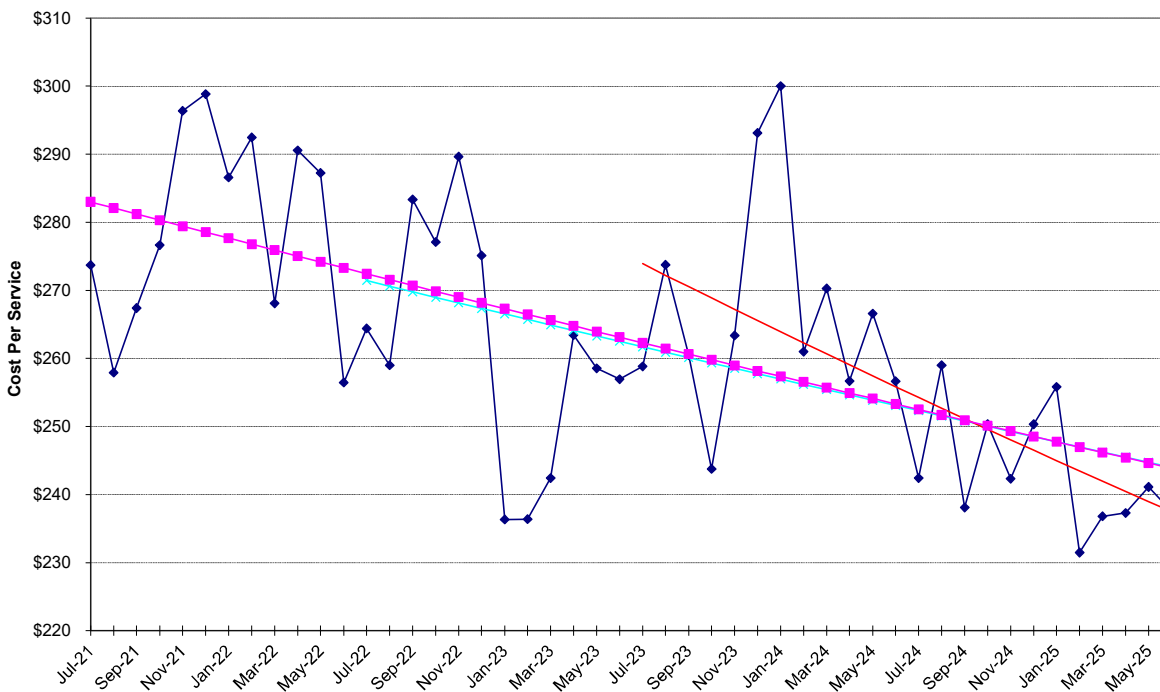
Outpatient Surgery

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.4%	-7.2%	-2.2%

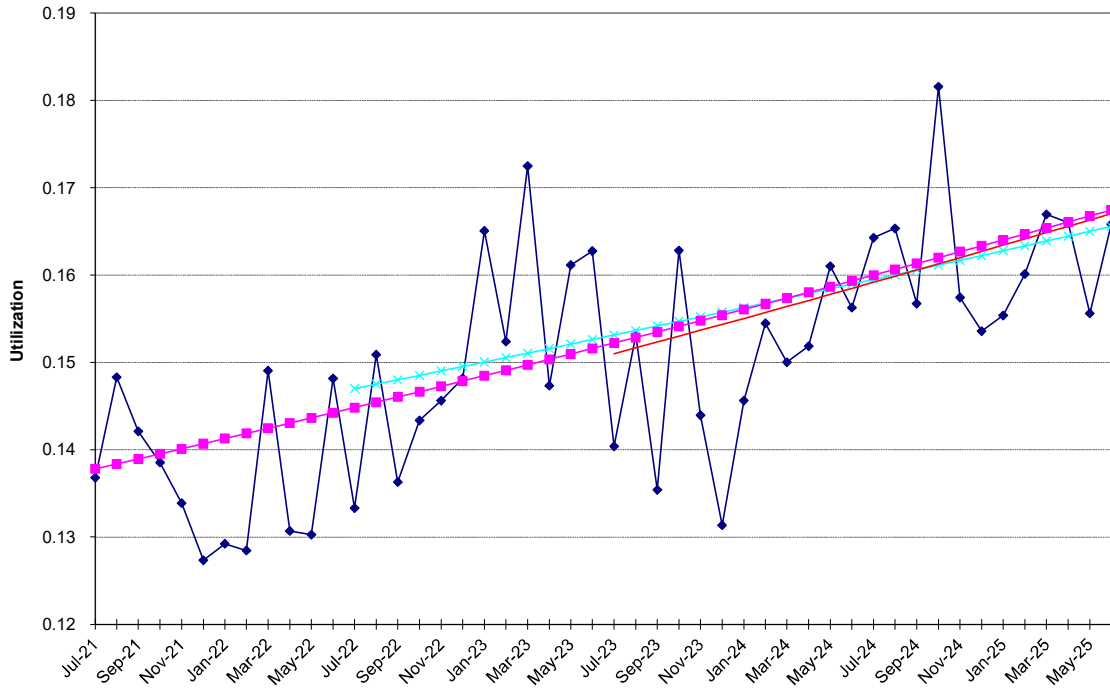
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
4.2%	-3.6%	0.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.1%	-3.7%	1.2%

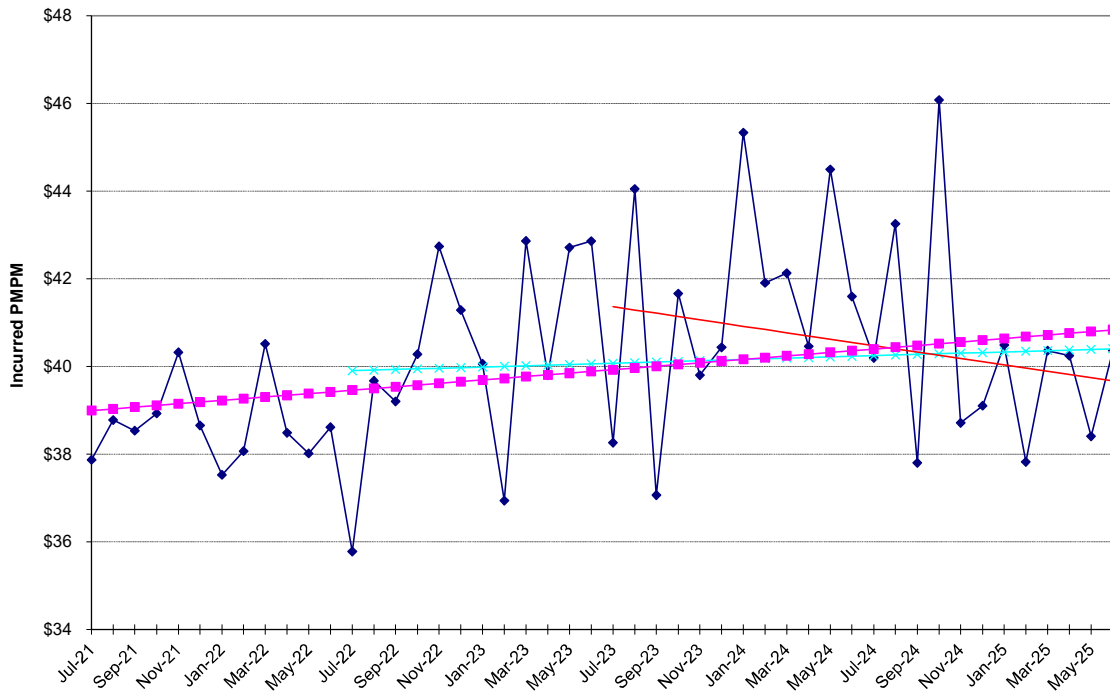
Physician Services - Outpatient Surgery



Physician Services - Outpatient Surgery



Physician Services - Outpatient Surgery



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

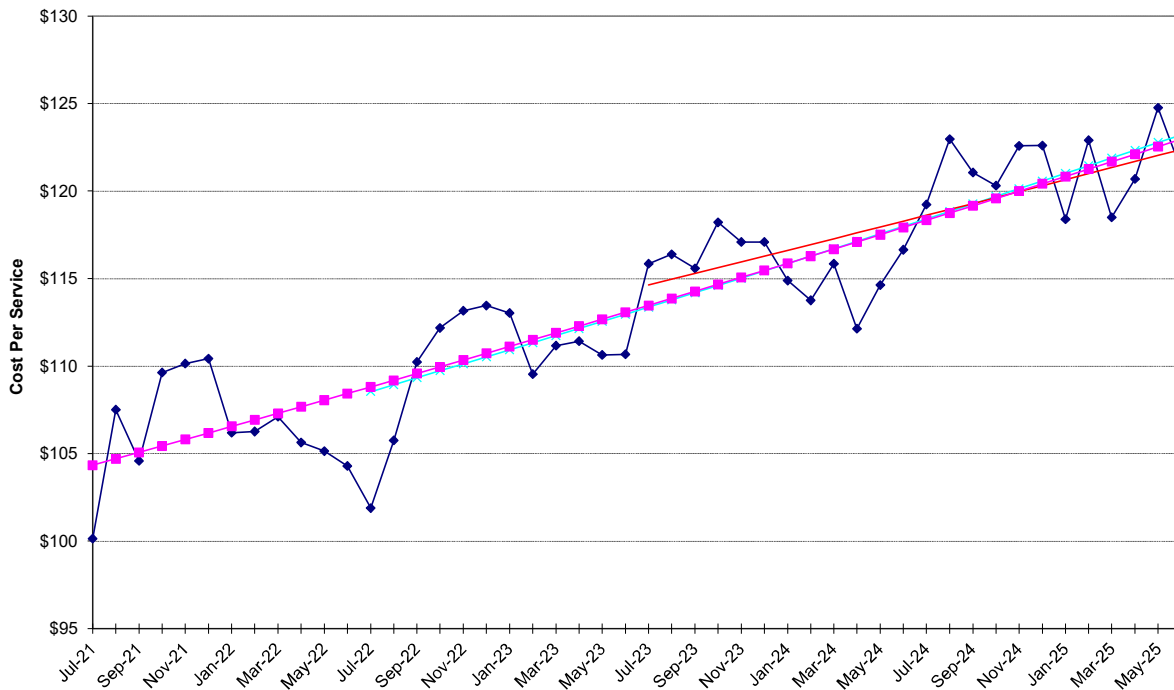
Psychiatric / Substance Abuse

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
8.6%	3.5%	12.4%

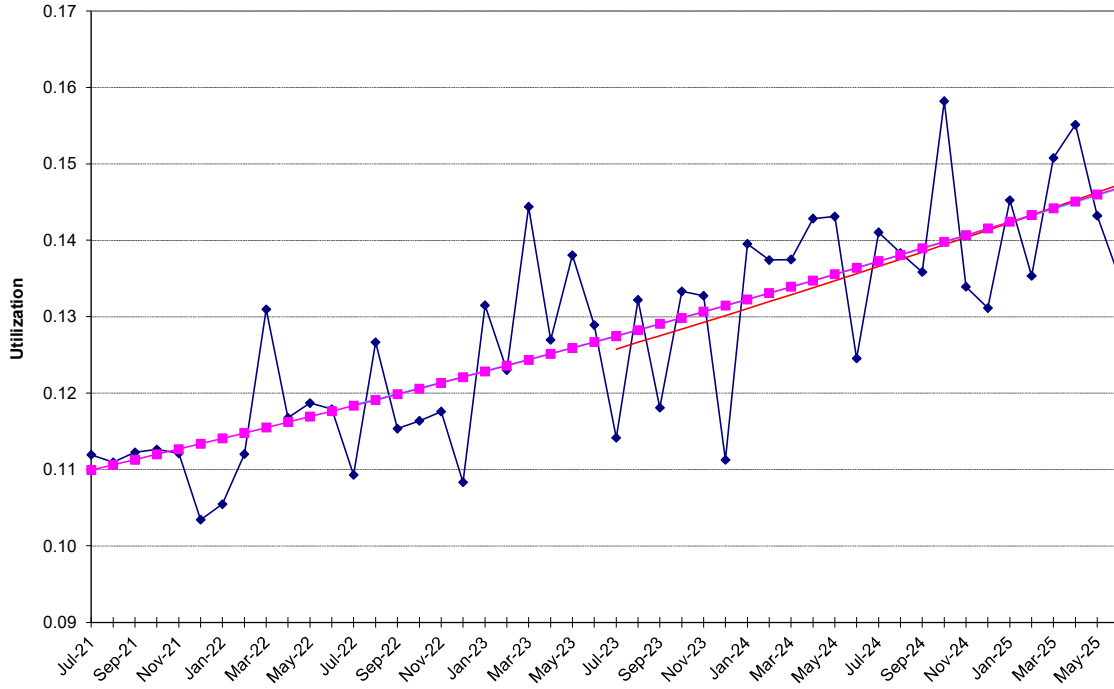
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.6%	4.4%	12.4%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.7%	4.3%	12.3%

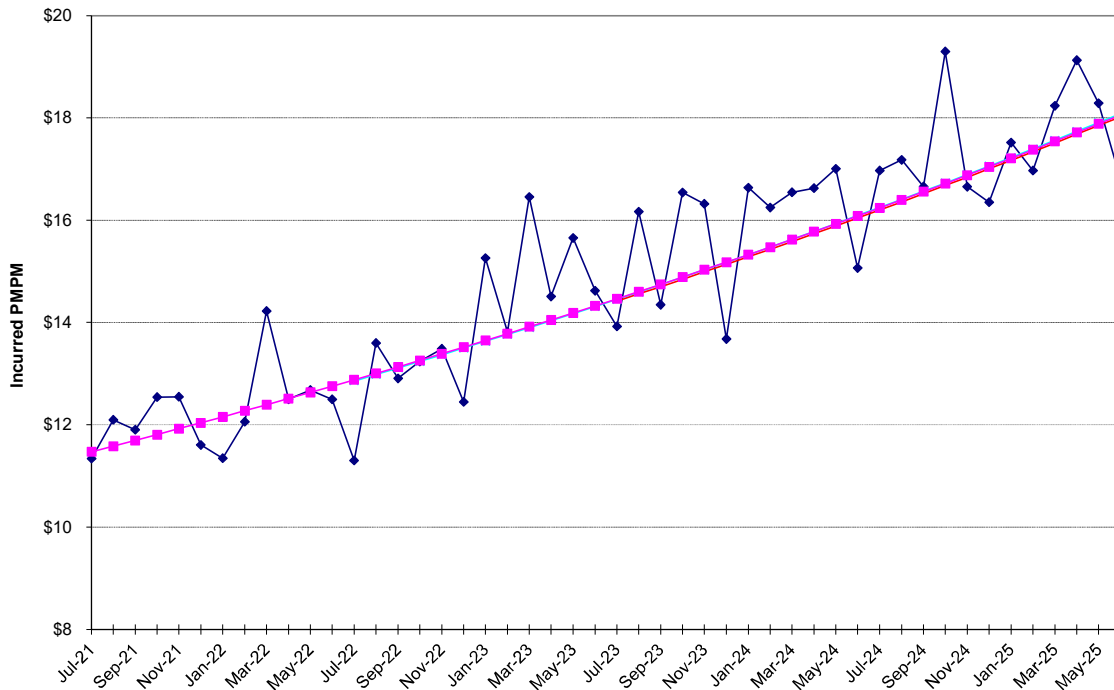
Physician Services - Psychiatric / Substance Abuse



Physician Services - Psychiatric / Substance Abuse



Physician Services - Psychiatric / Substance Abuse



**NON-MEDICARE CLAIMS
Excluding Drugs**

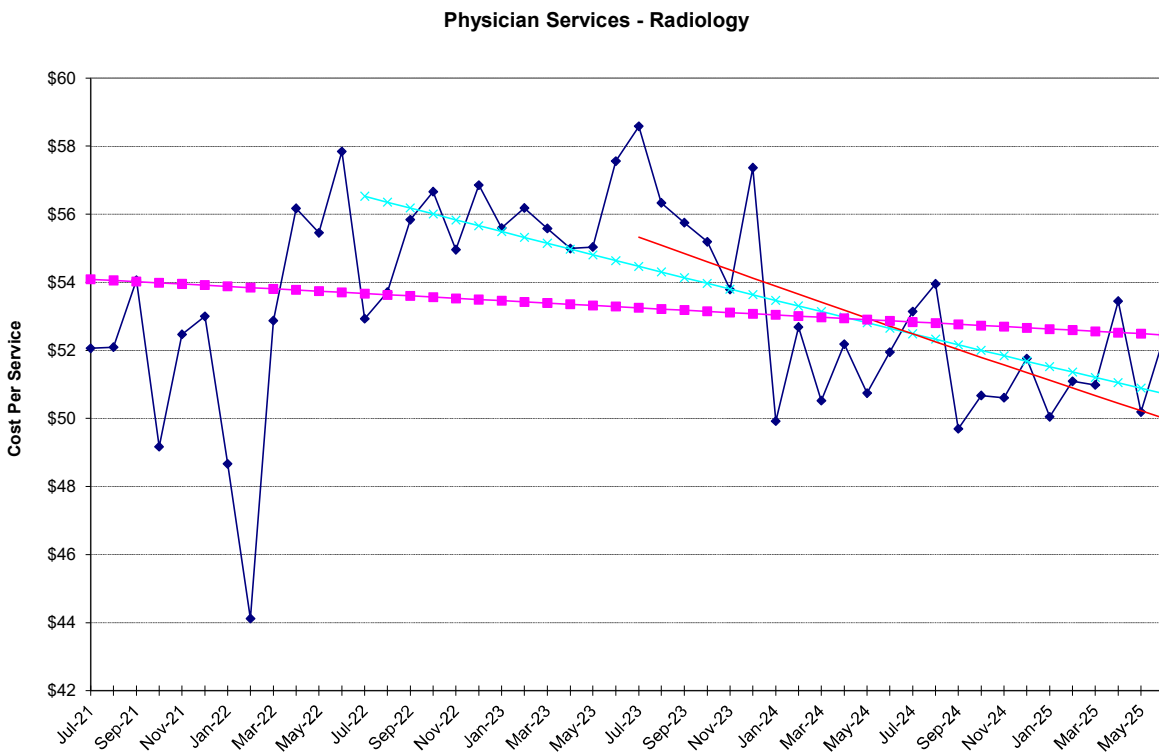
PHYSICIAN SERVICES

Radiology

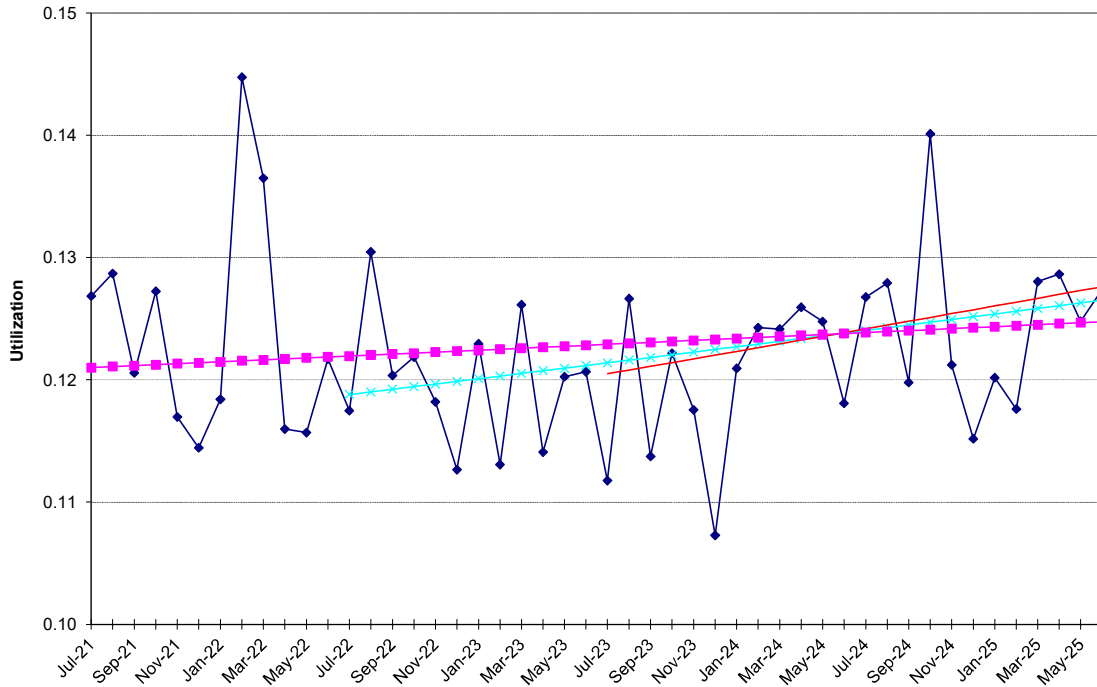
24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
3.0%	-5.1%	-2.3%

36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.2%	-3.6%	-1.5%

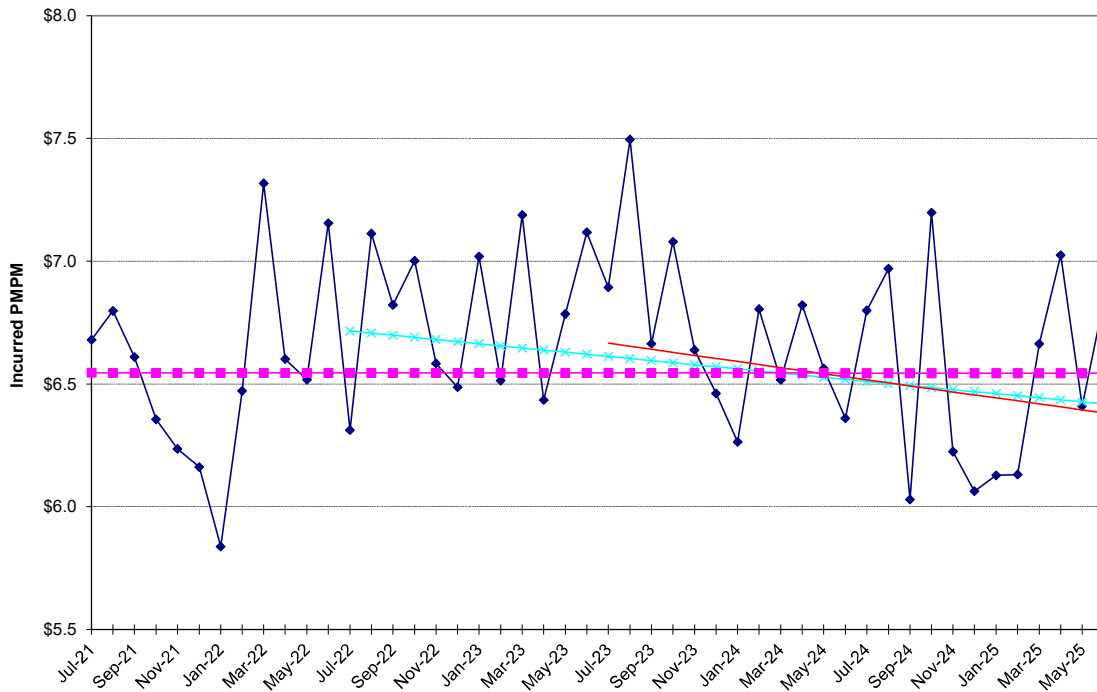
48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
0.8%	-0.8%	0.0%



Physician Services - Radiology



Physician Services - Radiology



**NON-MEDICARE CLAIMS
Excluding Drugs**

PHYSICIAN SERVICES

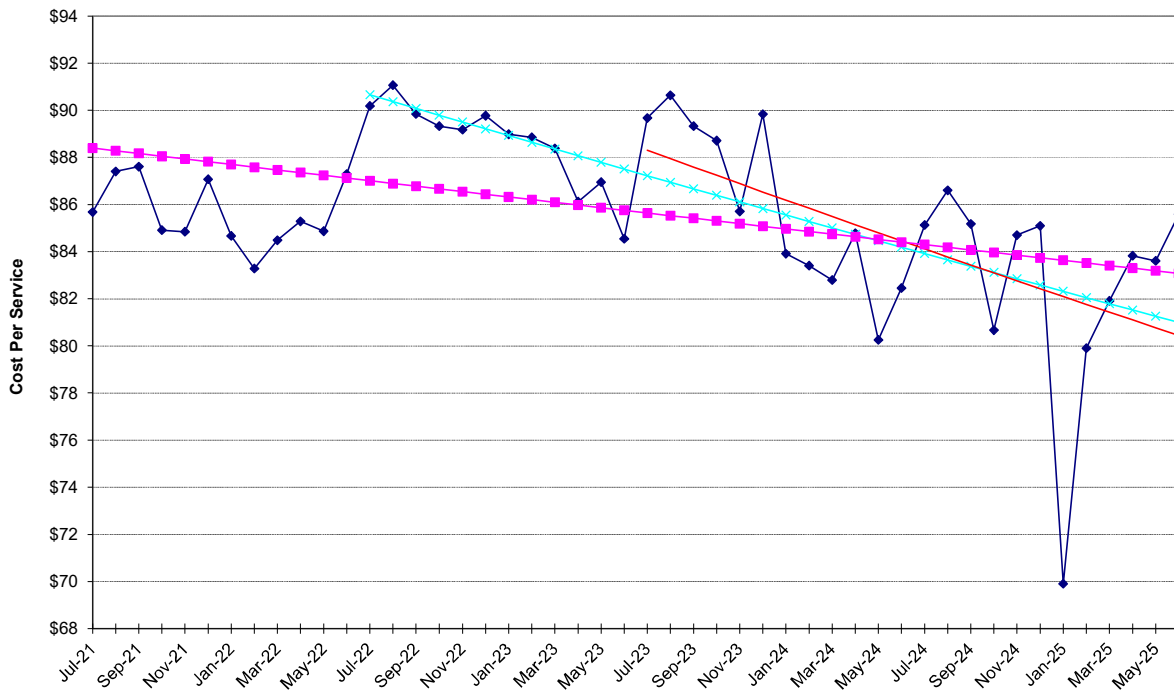
Therapies

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
9.6%	-4.7%	4.4%

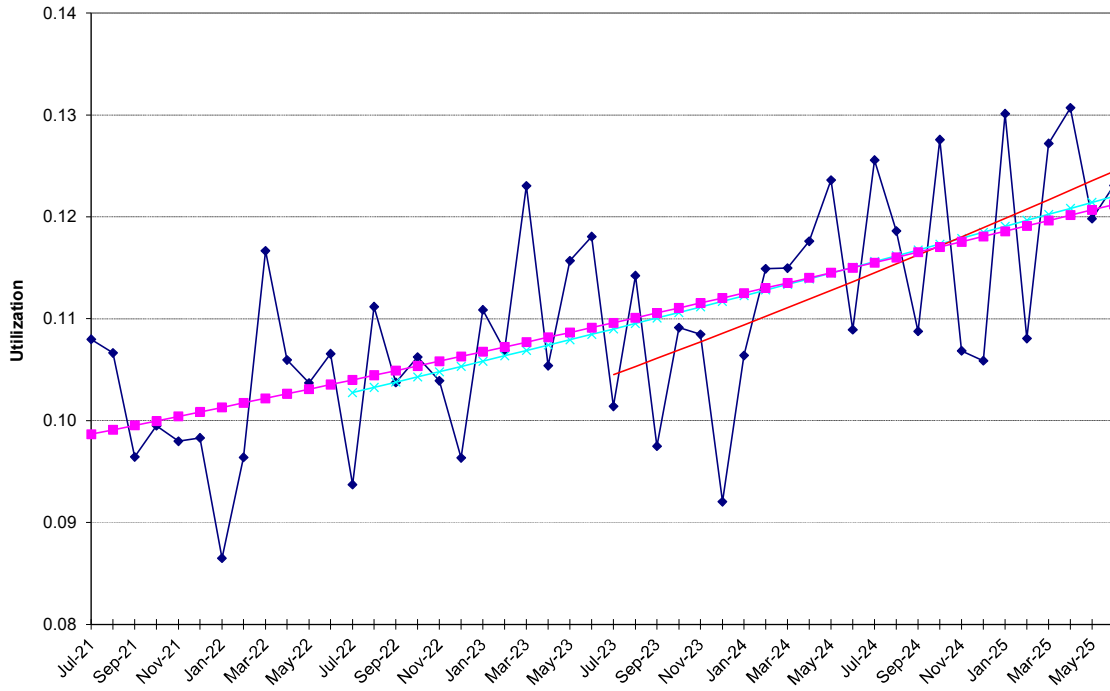
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
6.1%	-3.8%	2.0%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
5.4%	-1.6%	3.7%

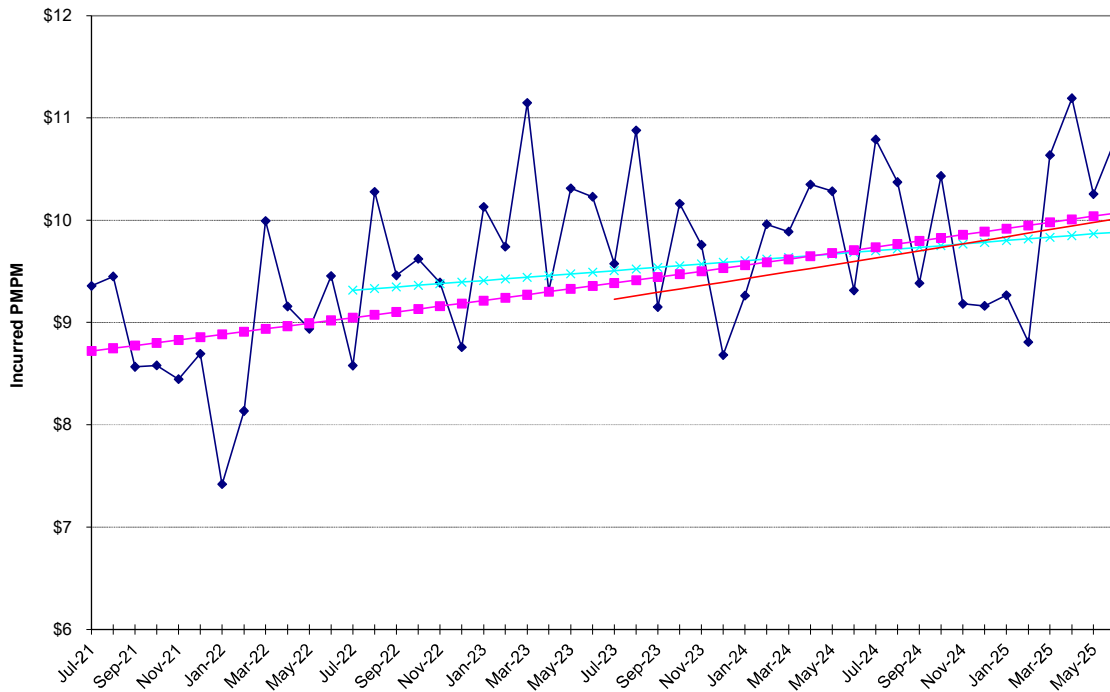
Physician Services - Therapies



Physician Services - Therapies



Physician Services - Therapies



**NON-MEDICARE CLAIMS
Excluding Drugs**

OTHER

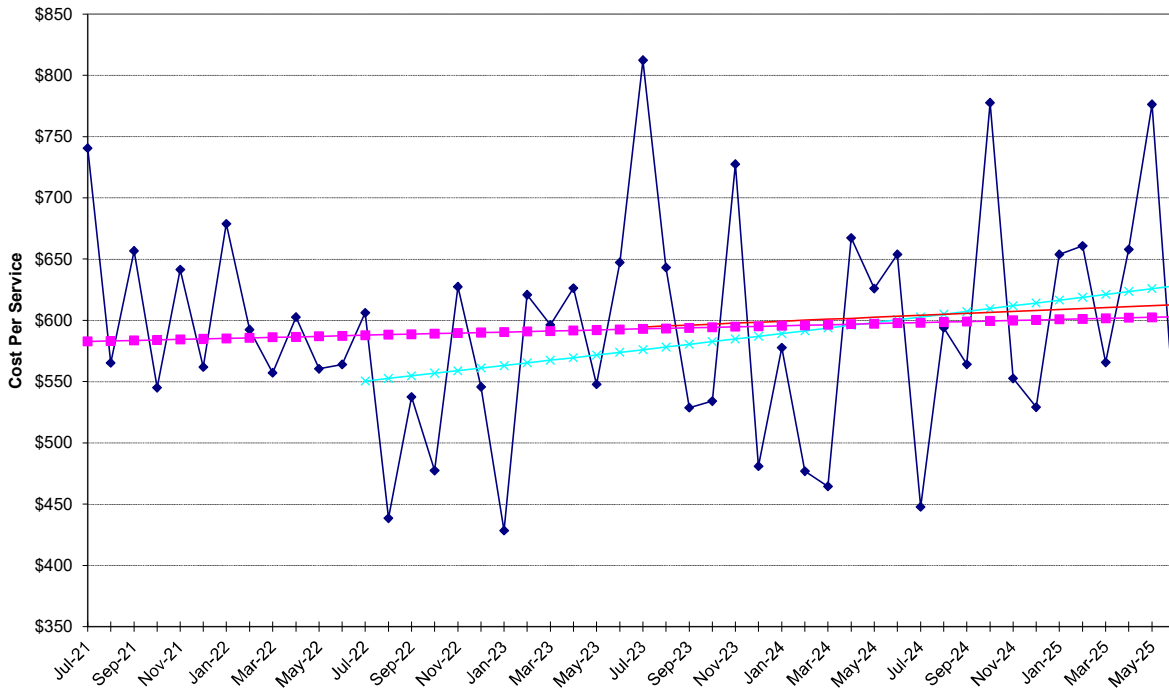
Ambulance

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-14.3%	1.6%	-12.9%

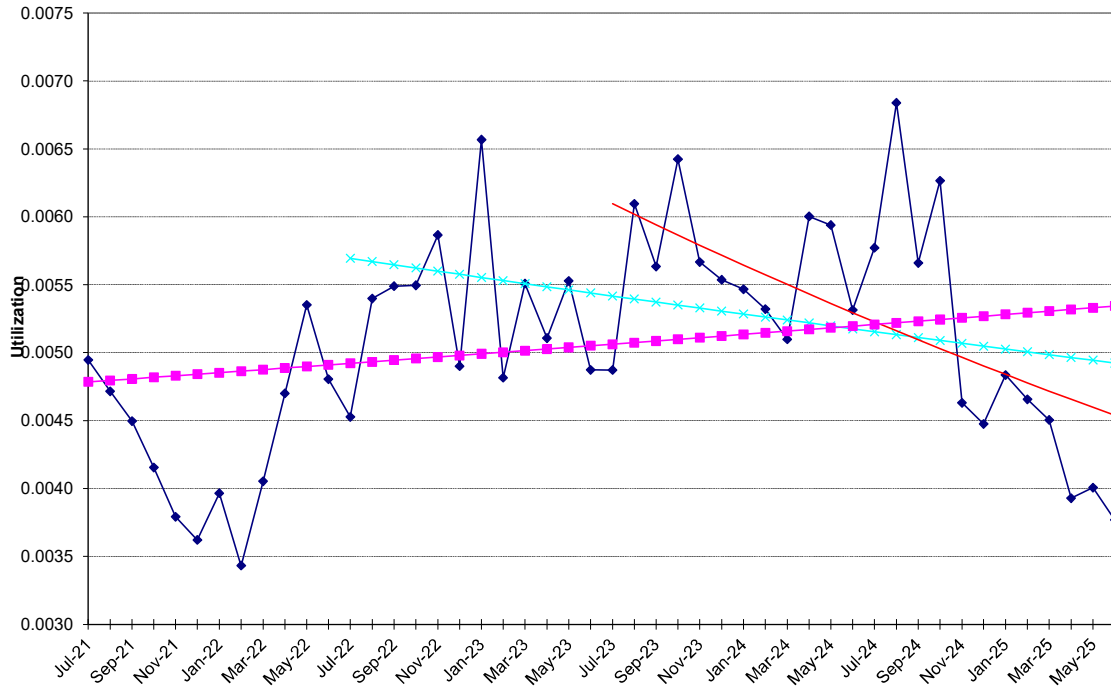
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-4.9%	4.6%	-0.5%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
2.9%	0.9%	3.8%

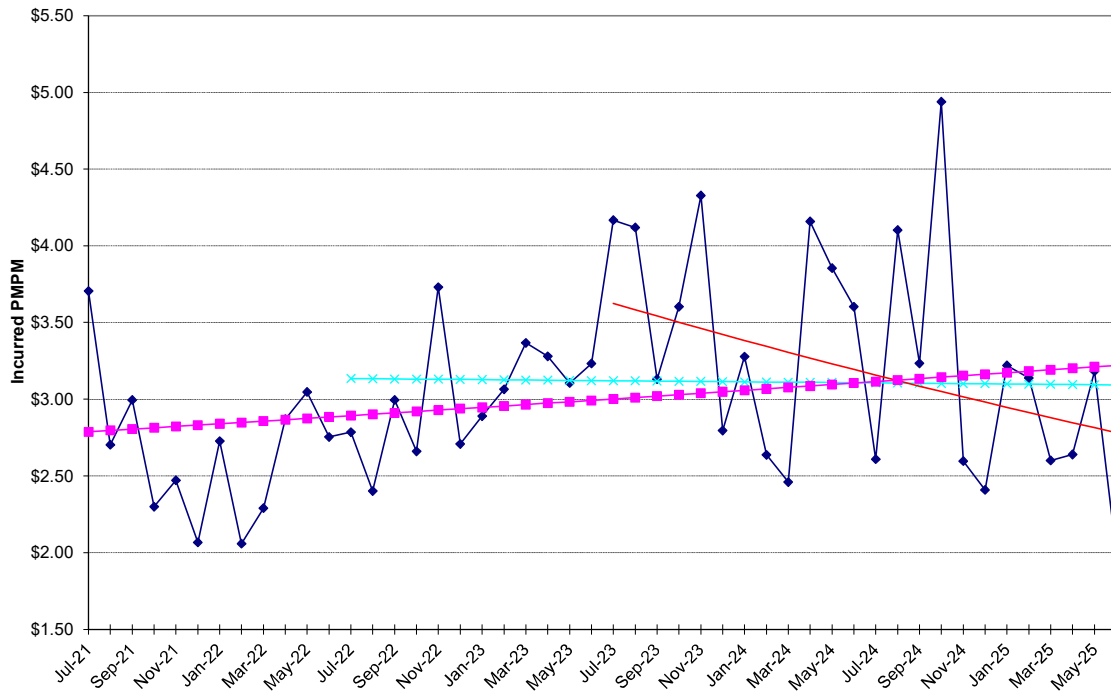
Other - Ambulance



Other - Ambulance



Other - Ambulance



**NON-MEDICARE CLAIMS
Excluding Drugs**

OTHER

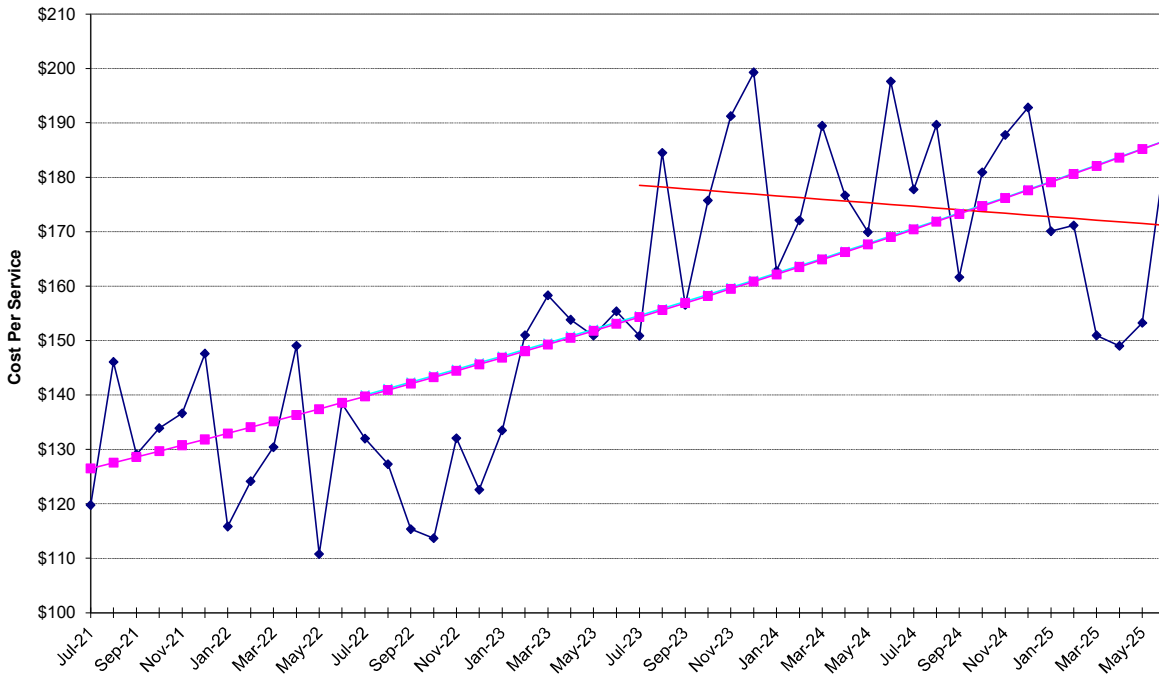
Appliances (DME)

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
7.6%	-2.2%	5.3%

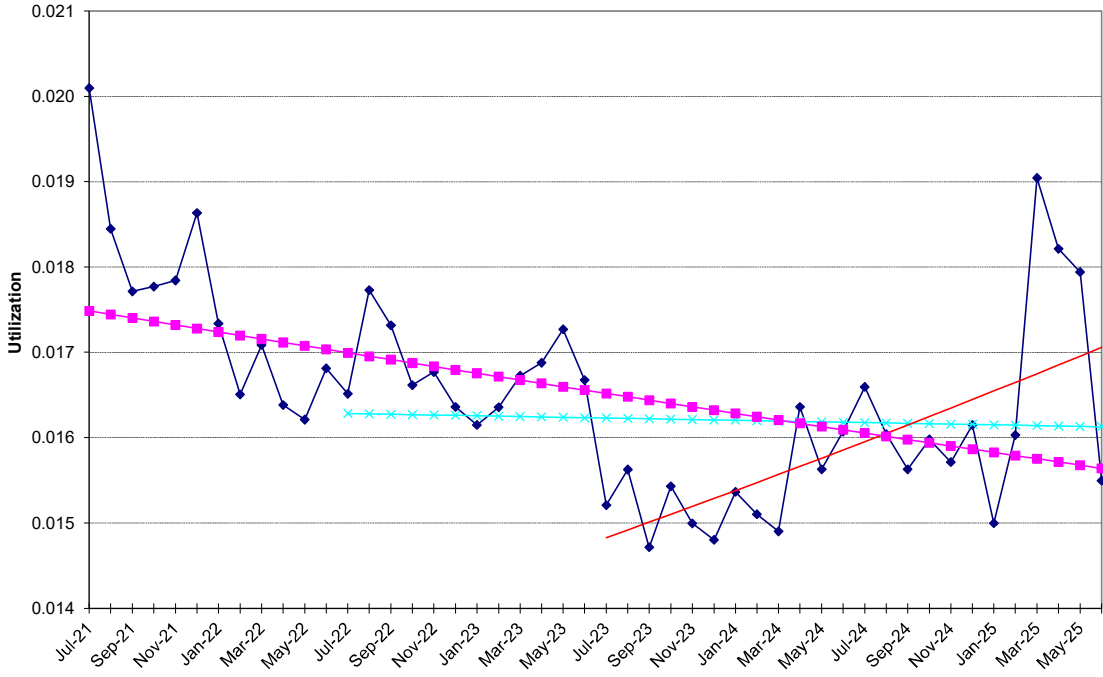
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-0.3%	10.4%	10.0%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Service</u>	<u>Total Trend</u>
-2.8%	10.4%	7.3%

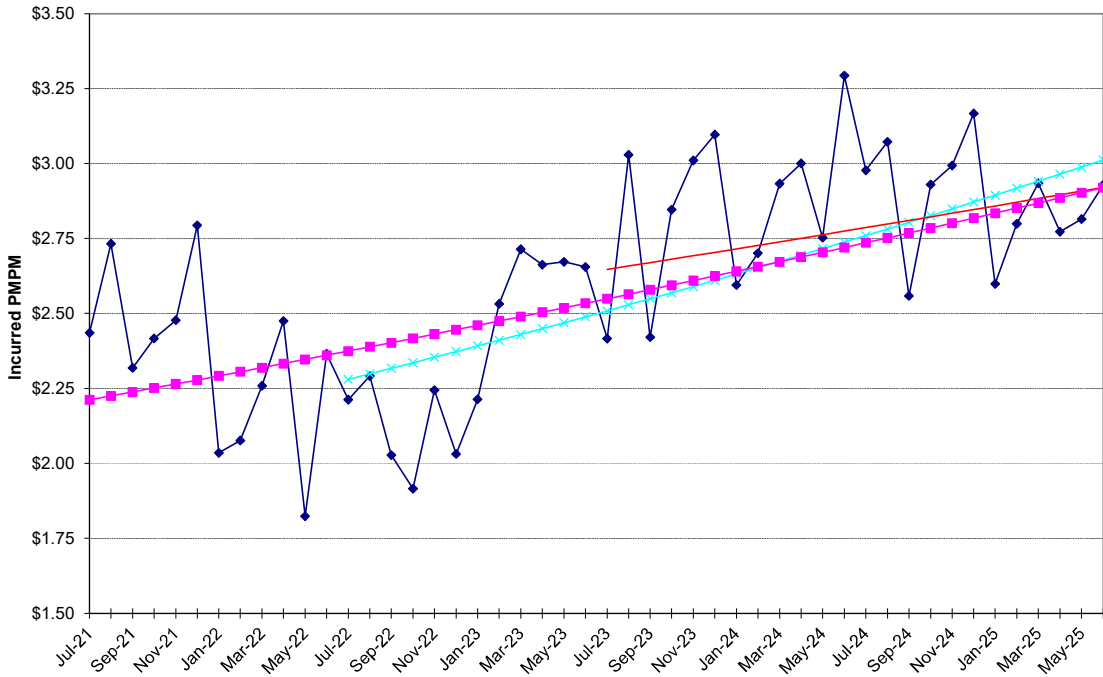
Other - Appliances (DME)



Other - Appliances (DME)



Other - Appliances (DME)



Appendix B

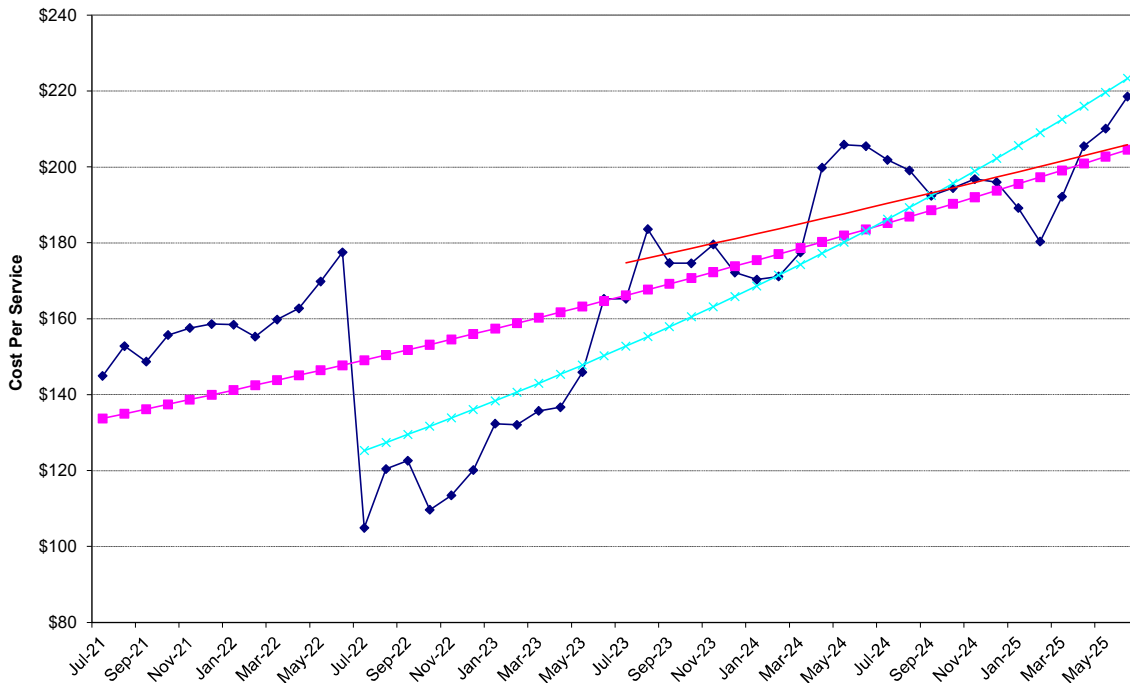
NON-MEDICARE GROSS PRESCRIPTION DRUG

24-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
3.3%	8.9%	12.5%

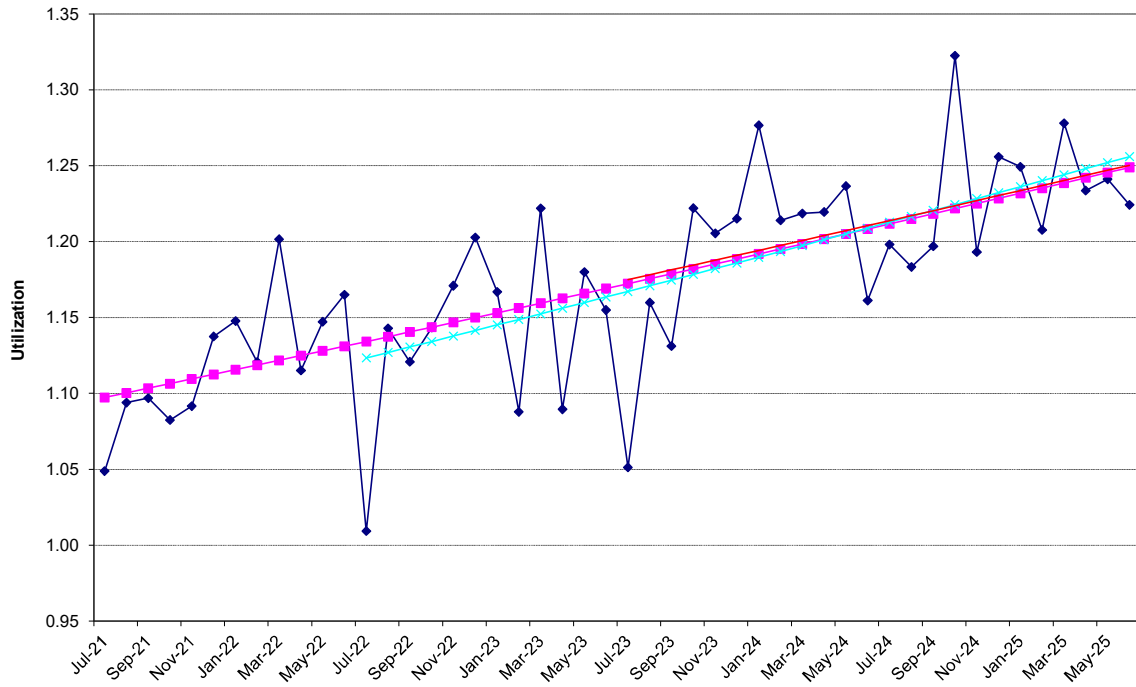
36-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
3.9%	21.9%	26.7%

48-Month Trends Summary		
<u>Utilization</u>	<u>Cost / Prescription</u>	<u>Total Trend</u>
3.4%	11.5%	15.2%

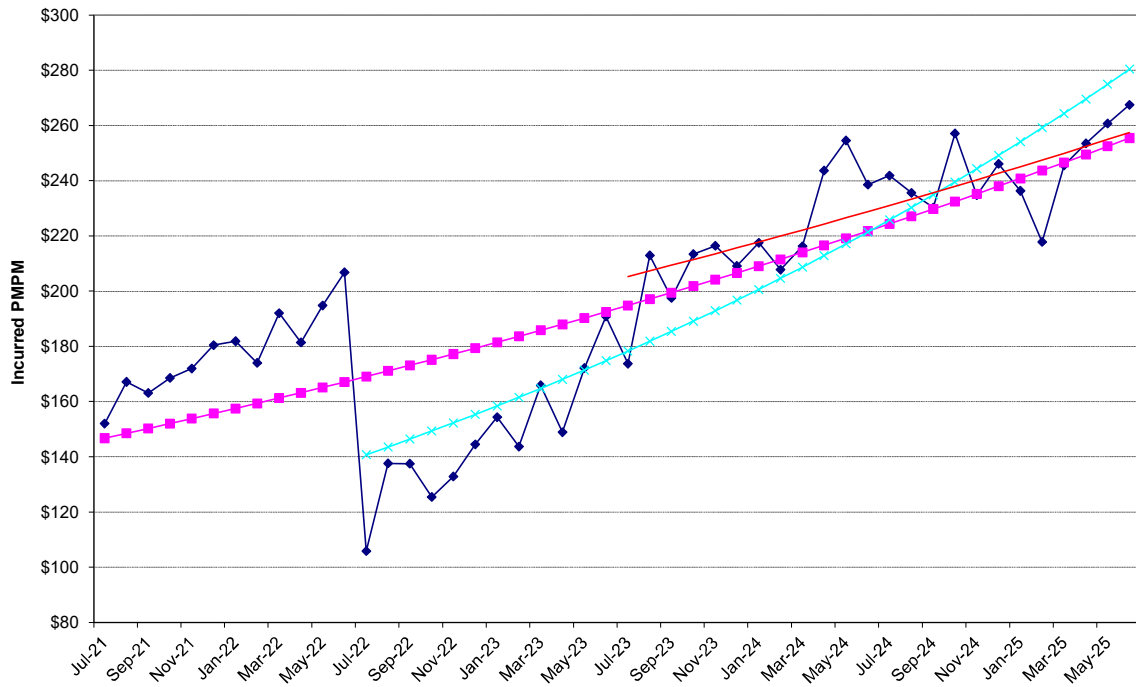
Non-Medicare Gross Prescription Drug



Non-Medicare Gross Prescription Drug



Non-Medicare Gross Prescription Drug



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 4.4% trend and unit cost had an 8.1% trend, resulting in a composite trend of 7.9% 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%
2024	0.4%	16.9%	14.4%
2025	4.4%	8.1%	7.9%

Prior to this analysis, the financial plan was developed using a 15.5% trend for fiscal year 2026. Based on results and future expectations, Continuing Care Actuaries has chosen to use a gross drug trend assumption of 12.0% and drug rebate trend of 5.0% for fiscal year 2026 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	2024 Ingredient Cost		2025 Ingredient Cost	
		Amount	%	Amount	%
Eliquis	2028	\$4,282,218	0.92%	\$5,589,990	1.11%
Trulicity	2027	9,670,268	2.09%	6,596,067	1.31%
Ibrance	2027	1,515,397	0.33%	1,046,065	0.21%
Revlimid	2026	2,837,692	0.61%	2,521,673	0.50%
Xarelto	2026	5,243,710	1.13%	4,894,113	0.97%
Total		\$23,549,284	5.09%	\$20,647,908	4.11%

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 52% [\[Pharmacy Times\]](#) of all drug spend. For PEIA, it is approximately 44% 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 16.80% in 2025, 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%
FY 2024	\$194.31	41.97%	14.39%	23,131	5.51%
FY 2025	\$220.13	44.07%	13.29%	27,040	16.90%

The following chart shows the top 10 brand name specialty drugs and their total cost in 2025:

2025 Rank	2025 Brand Name	2024 Cost	2025 Cost	Total Growth
1	STELARA	\$15,450,862	\$17,610,102	13.97%
2	HUMIRA(CF) PEN	27,689,012	15,905,370	-42.56%
3	SKYRIZI PEN	9,265,149	12,558,931	35.55%
4	DUPIXENT PEN	5,273,378	10,128,714	92.07%
5	TREMFYA ONE-PRESS	-	7,790,285	N/A
6	RINVOQ	5,064,404	7,524,681	48.58%
7	TALTZ AUTOINJECTOR	6,120,159	7,351,829	20.12%
8	OTEZLA	5,466,523	6,440,567	17.82%
9	TRIKAFTA	5,295,448	6,402,507	20.91%
10	<u>ENBREL SURECLICK</u>	<u>4,790,719</u>	<u>5,554,655</u>	<u>15.95%</u>
	Total	\$84,415,654	\$97,267,642	15.22%
	Percent of Specialty Cost	43.44%	44.19%	

Indicator Categories

Continuing Care Actuaries reviewed the individual prescription data items for Fiscal Years 2024 and 2025. A total of 2,018,184 scripts were written for approximately 2,137 different kinds of prescriptions in 2025. The prescriptions were grouped by indicator codes, providing a basis to develop the Fiscal Year 2025 trend by indicator code. The top 40 indicator codes were analyzed, which accounted for 85.9%, down from 90.4% in 2024.

Four of the top five 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>2024 Cost</u>	<u>Indicator</u>	<u>2025 Cost</u>
1	INCRETIN MIMETICS	\$95,309,184	INCRETIN MIMETICS	\$102,452,327
2	ANTINEOPLASTIC AGENTS	32,190,194	ANTINEOPLASTIC AGENTS	36,502,310
3	INTERLEUKIN-MEDIATED AGENTS	26,030,827	INTERLEUKIN-MEDIATED AGENTS	32,069,803
4	IMMUNOMODULATORY AGENTS - 84:06	19,754,825	IMMUNOMODULATORY AGENTS - 84:06	29,430,879
5	SODIUM-GLUC COTRANSPORT 2 SGLT2 INHIB	20,634,558	SODIUM-GLUC COTRANSPORT 2 SGLT2 INHIB	22,424,651

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 2025.

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 85.6% of total program costs.

On page C-13, we list the top 20 drugs and summarize the formulary and non-formulary cost statistics. These top 20 drugs represent 51.4% 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	2024 Total Ingredient Cost	2025 Total Ingredient Cost	Total Increase
IMMUNOMODULATORY AGENTS - 84:06	\$19,754,825	\$29,430,879	\$9,676,053
INCRETIN MIMETICS	95,309,184	102,452,327	7,143,143
INTERLEUKIN-MEDIATED AGENTS	26,030,827	32,069,803	6,038,976
ANTINEOPLASTIC AGENTS	32,190,194	36,502,310	4,312,116
SKIN AND MUCOUS MEMBRANE AGENTS MISC	11,609,781	14,828,689	3,218,908

Indicators with the Largest Increase as a Percentage

Indication	2024 Total Ingredient Cost	2025 Total Ingredient Cost	Total Increase
RESPIRATORY TRACT AGENTS MISCELLANEOUS	\$14,364	\$432,050	2907.9%
CENTRAL ALPHA-AGONISTS	44,707	300,426	572.0%
BETA-ADRENERGIC AGONISTS	1,178,648	3,936,817	234.0%
CORONAVIRUS - COVID-19	1,031,398	3,421,971	231.8%
ANTIFUNGALS SKIN AND MUCOUS MEMBRANE	95,954	284,685	196.7%

Indicators with the Largest Increase in Claim Numbers

Indication	2024 Prescriptions	2025 Prescriptions	Utilization Increase
CENTRAL ALPHA-AGONISTS	2,334	10,438	8,104
BETA-ADRENERGIC AGONISTS	26,297	34,344	8,047
ANTIFUNGALS SKIN AND MUCOUS MEMBRANE	7,972	14,915	6,943
AMPHETAMINES	33,150	39,868	6,718
MACROLIDE ANTIBIOTICS	26,827	30,756	3,929

Indicators with the Largest Utilization Increase Percentage

Indication	2024 Prescriptions	2025 Prescriptions	Utilization Increase
CENTRAL ALPHA-AGONISTS	2,334	10,438	347.2%
DISEASE-MODIFYING ANTIRHEUMAT DRUGS MISC	168	362	115.5%
ANTIFUNGALS SKIN AND MUCOUS MEMBRANE	7,972	14,915	87.1%
JANUS KINASE INHIBITORS - 84:06	213	353	65.7%
ANTIGONADTROPINS	124	189	52.4%

Indicators with the Largest Increase in Cost per Prescription

Indication	2024 Ingredient Cost Per Prescription	2025 Ingredient Cost Per Prescription	Ingredient Cost Per Prescription Increase
ADRENOCORTICAL INSUFFICIENCY	\$0	\$109,636	\$109,636
NEONATAL FC RECEPTOR BLOCKERS	0	64,618	64,618
AZOLE ANTIFUNGALS	40	4,759	4,719
ANTIMETABOLITES	6,168	9,449	3,281
HEMATOPOIETIC AGENTS	8,983	11,350	2,367

Indicators with the Largest Percentage Increase in Cost per Prescription

Indication	2024 Ingredient Cost Per Prescription	2025 Ingredient Cost Per Prescription	Ingredient Cost Per Prescription Increase
AZOLE ANTIFUNGALS	\$40	\$4,759	11818.7%
CORONAVIRUS - COVID-19	292	1,375	371.3%
BETA-ADRENERGIC AGONISTS	45	115	155.8%
ANTIMUSCARINICS/ANTISPASMODICS	234	470	100.7%
CEPHALOSPORIN ANTIBIOTICS	5	11	94.5%

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	52,932	\$1,935.55	\$102,452,327	100.00%	100.00%
2	ANTINEOPLASTIC AGENTS	9,368	3,896.49	36,502,310	97.66%	88.76%
3	INTERLEUKIN-MEDIATED AGENTS	2,691	11,917.43	32,069,803	76.25%	84.56%
4	IMMUNOMODULATORY AGENTS - 84:06	2,724	10,804.29	29,430,879	96.11%	94.47%
5	SODIUM-GLUC COTRANSPORT 2 SGLT2 INHIB	14,502	1,546.31	22,424,651	99.79%	99.84%
6	DISEASE-MODIFYING ANTIRHEUMATIC AGENTS	2,535	6,987.25	17,712,669	100.00%	100.00%
7	TUMOR NECROSIS FACTOR INHIBITORS	3,240	5,134.48	16,635,723	98.80%	98.58%
8	INSULINS	15,187	1,005.59	15,271,921	99.19%	99.36%
9	SKIN AND MUCOUS MEMBRANE AGENTS MISC	4,293	3,454.16	14,828,689	99.86%	99.98%
10	CALCITONIN GENE-RELATED PEPTIDE ANTAG	6,600	1,636.12	10,798,400	100.00%	100.00%
11	ANTICOAGULANTS	10,159	1,056.36	10,731,587	99.93%	99.98%
12	JANUS KINASE INHIBITORS - 90:24	1,614	6,388.07	10,310,347	94.73%	96.31%
13	DEVICES	32,889	312.86	10,289,663	97.92%	97.20%
14	ANTIPSYCHOTIC AGENTS	16,423	408.19	6,703,757	84.12%	7.25%
15	CYSTIC FIBROSIS CFTR CORRECTORS	253	26,486.96	6,701,201	100.00%	100.00%
16	PHOSPHODIESTERASE-4 INHIBITORS - 90:24	1,288	5,000.44	6,440,567	100.00%	100.00%
17	ANTIDEPRESSANTS	167,492	36.02	6,033,498	99.66%	86.15%
18	WAKEFULNESS-PROMOTING AGENTS	2,437	2,266.89	5,524,405	94.99%	70.79%
19	ANTIMUSCARINICS/ANTISPASMODICS	10,469	469.81	4,918,445	99.19%	99.14%
20	GUANYLATE CYCLASE C - GCC RECEPT AGONIST	3,448	1,288.40	4,442,388	100.00%	100.00%

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	DIPEPTIDYL PEPTIDASE-4 DPP-4 INHIBITORS	3,589	\$1,179.02	\$4,231,493	99.92%	99.93%
22	BETA-ADRENERGIC AGONISTS	34,344	114.63	3,936,817	99.37%	99.06%
23	ANTIRETROVIRALS	1,973	1,885.77	3,720,620	99.59%	99.06%
24	CORONAVIRUS - COVID-19	2,489	1,374.84	3,421,971	100.00%	100.00%
25	VASODILATING AGENTS RESPIRATORY TRACT	256	13,324.19	3,410,993	84.77%	77.51%
26	ANGIOTENSIN II RECEPTOR ANTAGONIST/NEPRILYSIN	2,003	1,623.78	3,252,438	100.00%	100.00%
27	MONOCLONAL ANTIBODIES - 90:04	336	9,586.69	3,221,128	100.00%	100.00%
28	PITUITARY	840	3,832.05	3,218,920	98.81%	98.60%
29	INTERLEUKIN ANTAGONISTS	619	5,075.71	3,141,867	98.55%	92.96%
30	PCSK9 INHIBITORS	3,314	934.10	3,095,616	96.53%	97.63%
31	HEMATOPOIETIC AGENTS	267	11,349.77	3,030,388	100.00%	100.00%
32	ANTI-INFLAMMATORY AGENTS CENTRAL NERVOUS SYSTEM	2,171	1,362.87	2,958,786	94.61%	95.53%
33	AMPHETAMINES	39,868	72.32	2,883,376	97.60%	87.57%
34	THYROID AGENTS	49,161	54.35	2,671,881	89.33%	75.81%
35	VACCINES	23,761	108.99	2,589,599	99.99%	99.98%
36	DISEASE-MODIFYING ANTIRHEUMATOID DRUGS MISCELLANEOUS	362	6,884.44	2,492,166	0.00%	0.00%
37	DIGESTANTS	737	3,056.72	2,252,804	100.00%	100.00%
38	VASOPRESSIN ANTAGONISTS	106	20,486.17	2,171,534	0.00%	0.00%
39	CONTRACEPTIVES	34,648	61.72	2,138,348	99.15%	93.11%
40	ANTICONVULSANTS MISCELLANEOUS	22,508	89.75	2,020,036	98.84%	62.47%
	<u>All Other Indicators</u>	<u>1,433,642</u>	<u>50.62</u>	<u>72,570,554</u>	<u>99.59%</u>	<u>87.18%</u>
	Total	2,017,538	\$249.14	\$502,654,565	99.06%	92.51%

**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	52,931	\$102,451,792	\$1,935.57	1	\$535	\$535.08
2	ANTINEOPLASTIC AGENTS	9,149	32,398,422	3,541.20	219	4,103,888	18,739.21
3	INTERLEUKIN-MEDIATED AGENTS	2,052	27,118,896	13,215.84	639	4,950,906	7,747.90
4	IMMUNOMODULATORY AGENTS - 84:06	2,618	27,802,353	10,619.69	106	1,628,526	15,363.45
5	SODIUM-GLUC COTRANSPORT 2 SGLT2 INHIB	14,472	22,389,333	1,547.08	30	35,318	1,177.25
6	DISEASE-MODIFYING ANTIRHEUMATIC AGENTS	2,535	17,712,669	6,987.25	-	-	-
7	TUMOR NECROSIS FACTOR INHIBITORS	3,201	16,398,905	5,123.06	39	236,818	6,072.25
8	INSULINS	15,064	15,174,317	1,007.32	123	97,604	793.53
9	SKIN AND MUCOUS MEMBRANE AGENTS MISC	4,287	14,825,506	3,458.25	6	3,183	530.45
10	CALCITONIN GENE-RELATED PEPTIDE ANTAG	6,600	10,798,400	1,636.12	-	-	-
11	ANTICOAGULANTS	10,152	10,729,763	1,056.91	7	1,824	260.56
12	JANUS KINASE INHIBITORS - 90:24	1,529	9,929,624	6,494.19	85	380,723	4,479.10
13	DEVICES	32,204	10,001,192	310.56	685	288,471	421.13
14	ANTIPSYCHOTIC AGENTS	13,815	485,967	35.18	2,608	6,217,790	2,384.12
15	CYSTIC FIBROSIS CFTR CORRECTORS	253	6,701,201	26,486.96	-	-	-
16	PHOSPHODIESTERASE-4 INHIBITORS - 90:24	1,288	6,440,567	5,000.44	-	-	-
17	ANTIDEPRESSANTS	166,917	5,197,567	31.14	575	835,931	1,453.79
18	WAKEFULNESS-PROMOTING AGENTS	2,315	3,910,619	1,689.25	122	1,613,786	13,227.75
19	ANTIMUSCARINICS/ANTISPASMODICS	10,384	4,876,086	469.58	85	42,358	498.33
20	GUANYLATE CYCLASE C - GCC RECEPT AGONIST	3,448	4,442,388	1,288.40	-	-	-

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	DIPEPTIDYL PEPTIDASE-4 DPP-4 INHIBITORS	3,586	\$4,228,580	\$1,179.19	3	\$2,913	\$971.12
22	BETA-ADRENERGIC AGONISTS	34,129	3,899,624	114.26	215	37,193	172.99
23	ANTIRETROVIRALS	1,965	3,685,753	1,875.70	8	34,867	4,358.37
24	CORONAVIRUS - COVID-19	2,489	3,421,971	1,374.84	-	-	-
25	VASODILATING AGENTS RESPIRATORY TRACT	217	2,643,793	12,183.38	39	767,200	19,671.80
26	ANGIOTENSIN II RECEP ANTAGONIST/NEPROLYS	2,003	3,252,438	1,623.78	-	-	-
27	MONOCLONAL ANTIBODIES - 90:04	336	3,221,128	9,586.69	-	-	-
28	PITUITARY	830	3,173,761	3,823.81	10	45,160	4,515.97
29	INTERLEUKIN ANTAGONISTS	610	2,920,649	4,787.95	9	221,218	24,579.75
30	PCSK9 INHIBITORS	3,199	3,022,241	944.75	115	73,375	638.04
31	HEMATOPOIETIC AGENTS	267	3,030,388	11,349.77	-	-	-
32	ANTI-INFLAMMATORY AGENTS EENT	2,054	2,826,662	1,376.17	117	132,124	1,129.26
33	AMPHETAMINES	38,911	2,524,997	64.89	957	358,380	374.48
34	THYROID AGENTS	43,915	2,025,435	46.12	5,246	646,445	123.23
35	VACCINES	23,758	2,589,128	108.98	3	470	156.75
36	DISEASE-MODIFYING ANTIRHEUMAT DRUGS MISC	-	-	-	362	2,492,166	6,884.44
37	DIGESTANTS	737	2,252,804	3,056.72	-	-	-
38	VASOPRESSIN ANTAGONISTS	-	-	-	106	2,171,534	20,486.17
39	CONTRACEPTIVES	34,353	1,991,017	57.96	295	147,331	499.43
40	ANTICONVULSANTS MISCELLANEOUS	22,248	1,261,943	56.72	260	758,093	2,915.74
	All Other Indicators	<u>1,427,811</u>	<u>63,263,585</u>	<u>262,626</u>	<u>5,831</u>	<u>9,306,969</u>	<u>550,335</u>
		1,998,632	\$465,021,465	\$232.67	18,906	\$37,633,099	\$1,990.54

Drug Indicators by Highest Number of Scripts Increase

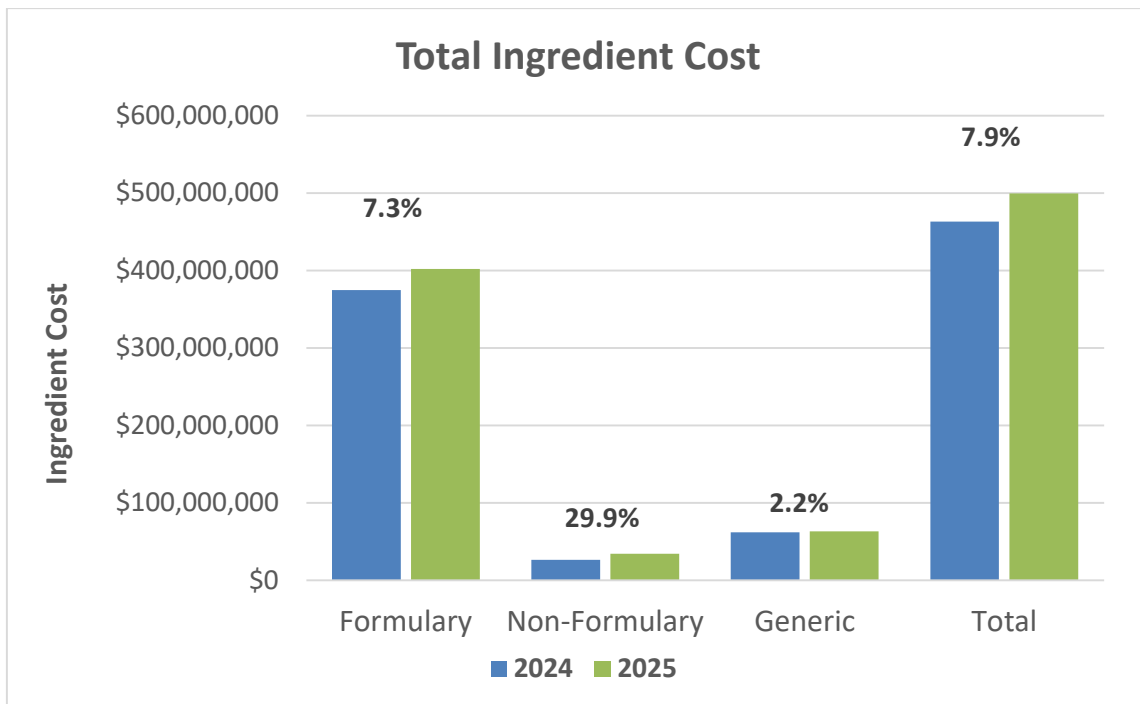
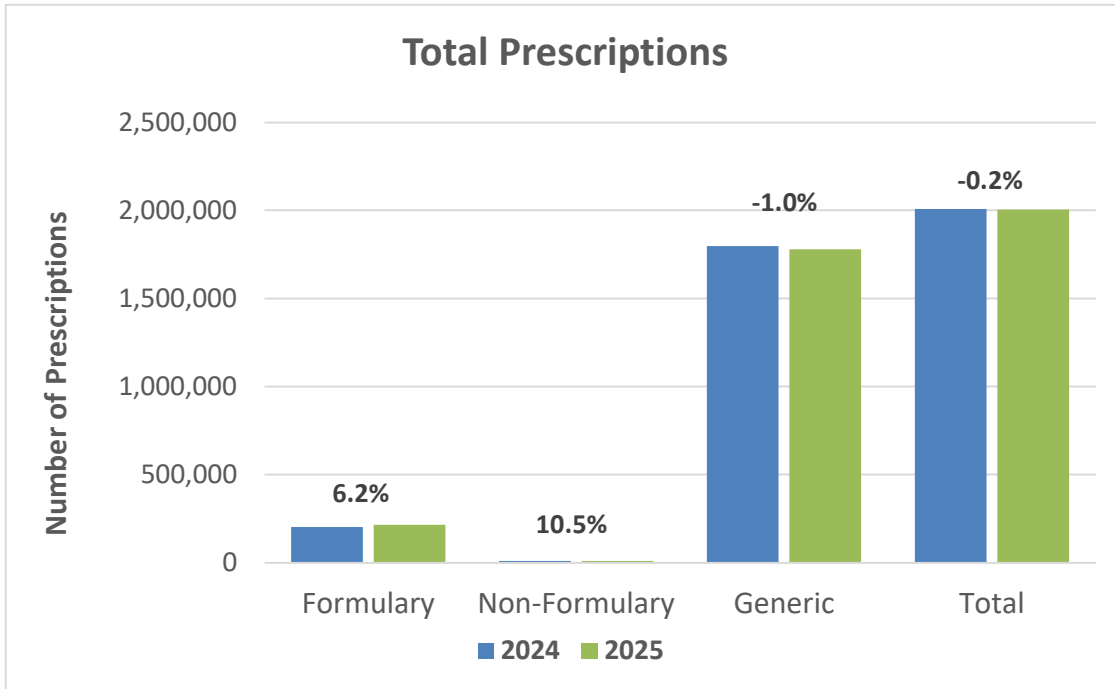
Rank	Indicator	Formulary Cost Per Script	Non-Formulary Cost Per Script	Increase/ Decrease
35	VACCINES	\$108.98	\$156.75	44%
112	CENTRAL ALPHA-AGONISTS	28.60	651.88	2179%
22	BETA-ADRENERGIC AGONISTS	114.26	172.99	51%
114	ANTIFUNGALS SKIN AND MUCOUS MEMBRANE	19.07	118.87	523%
33	AMPHETAMINES	64.89	374.48	477%
89	MACROLIDE ANTIBIOTICS	10.77	4,121.87	38178%
113	ANTIBACTERIALS SKIN MUCOUS MEMBRANE	29.46	477.73	1522%
41	RESPIRATORY AND CNS STIMULANTS	61.55	554.54	801%
17	ANTIDEPRESSANTS	31.14	1,453.79	4569%
91	ANDROGENS	67.52	593.83	780%
19	ANTIMUSCARINICS/ANTISPASMODICS	469.58	498.33	6%
50	ESTROGENS	114.53	512.89	348%
51	ANGIOTENSIN II RECEPTOR ANTAGONISTS	30.70	641.85	1990%
86	NON-BENZODIAZEPINE ANXIOLYTICS	27.44	434.99	1485%
176	TOXOIDS	46.60	0.00	-100%
7	TUMOR NECROSIS FACTOR INHIBITORS	5,123.06	6,072.25	19%
82	TETRACYCLINE ANTIBIOTICS	16.00	5,459.40	34032%
141	NEURAMINIDASE INHIBITOR ANTIVIRALS	22.74	293.85	1192%
30	PCSK9 INHIBITORS	944.75	638.04	-32%
103	ANTITUSSIVES	\$13.40	\$19.10	42%

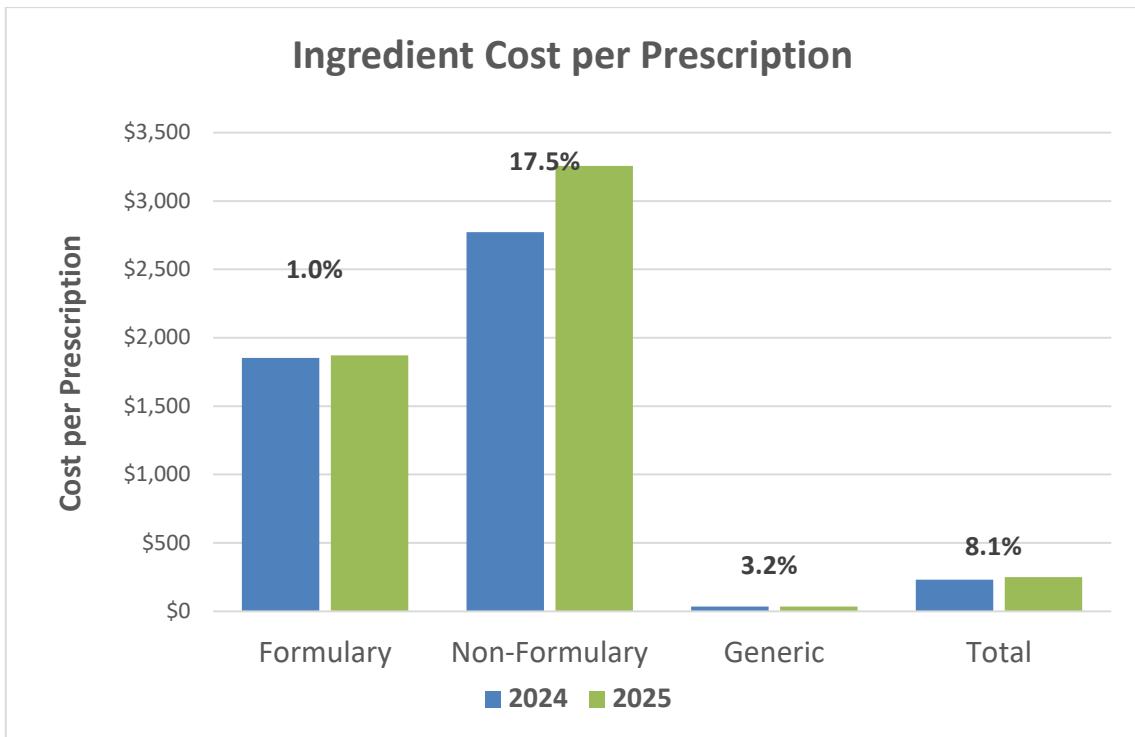
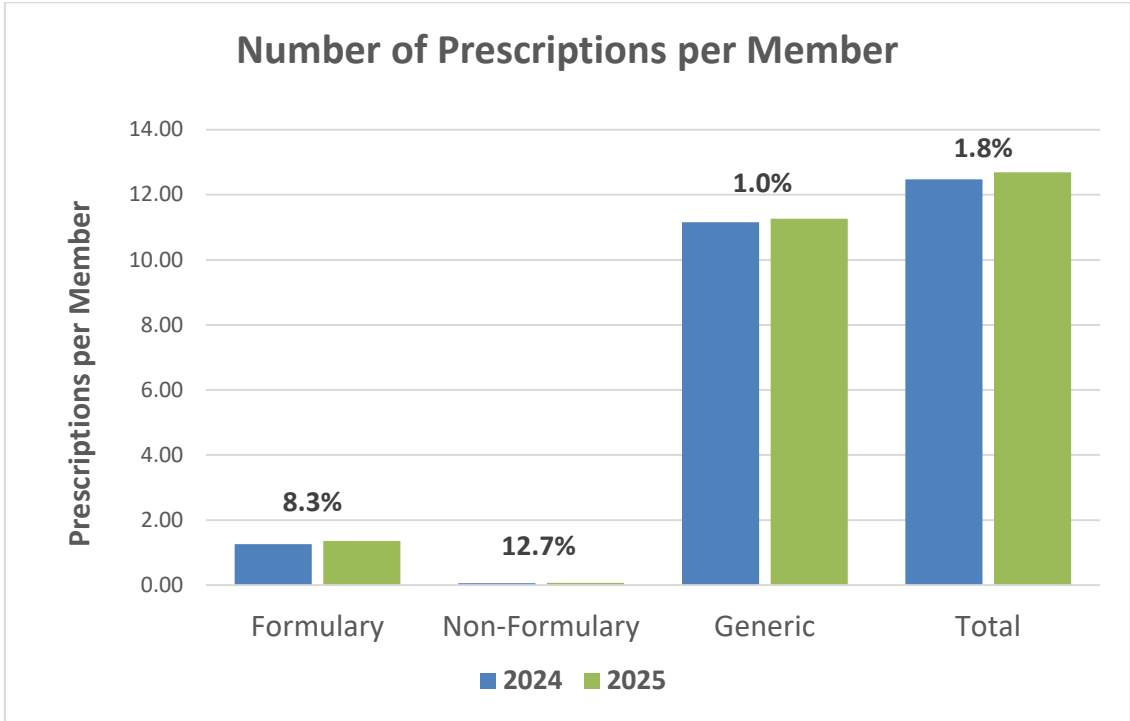
Drug Indicators by Highest Number of Scripts Increase (continued)

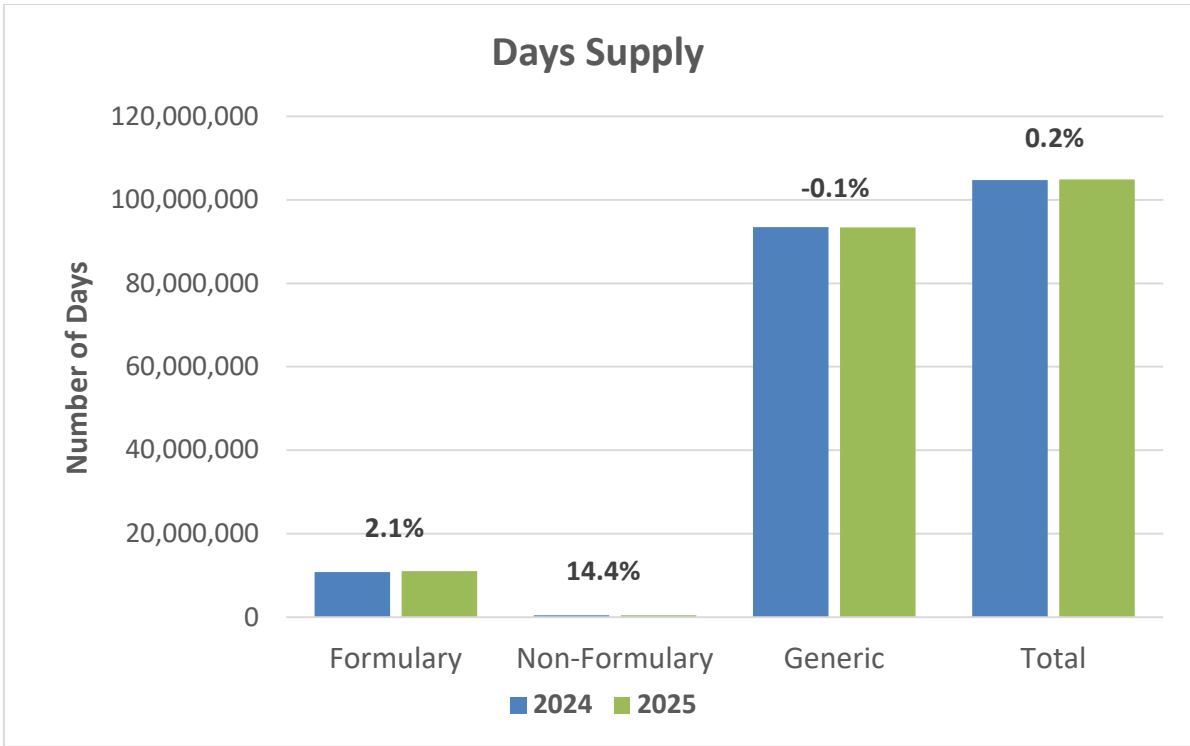
Rank	Indicator	Formulary Cost Per Script	Non-Formulary Cost Per Script	Increase/ Decrease
93	ANTIBACTERIALS EENT	\$30.49	\$968.49	3076%
40	ANTICONVULSANTS MISCELLANEOUS	\$56.72	\$2,915.74	5040%
101	PROGESTINS	\$49.56	\$46.55	-6%
127	CHOLESTEROL ABSORPTION INHIBITORS	\$32.30	\$0.00	-100%
14	ANTIPSYCHOTIC AGENTS	\$35.18	\$2,384.12	6678%
4	IMMUNOMODULATORY AGENTS - 84:06	\$10,619.69	\$15,363.45	45%
177	BETA-ADRENERGIC BLOCKING AGENTS EENT	\$47.14	\$0.00	-100%
253	NUTRITIONAL SUPPLEMENTS	\$10.95	\$26.87	145%
78	MINERALOCORTICOID ALDOSTERONE ANTAGNTS	\$59.37	\$427.14	619%
3	INTERLEUKIN-MEDIATED AGENTS	\$13,215.84	\$7,747.90	-41%
62	GABA-MEDIATED ANTICONVULSANTS	\$31.52	\$960.83	2948%
13	DEVICES	\$310.56	\$421.13	36%
100	CENTRALLY ACTING SKELETAL MUSCLE RELAXNT	\$13.90	\$14.97	8%
5	SODIUM-GLUC COTRANSPORT 2 SGLT2 INHIB	\$1,547.08	\$1,177.25	-24%
117	ALPHA-ADRENERGIC BLOCKING AGENT SYMPATH	\$27.22	\$0.00	-100%
92	OPIOID PARTIAL AGONISTS	\$67.20	\$139.46	108%
32	ANTI-INFLAMMATORY AGENTS EENT	\$1,376.17	\$1,129.26	-18%
104	HISTAMINE H2-ANTAGONISTS	\$31.58	\$0.00	-100%
118	CELL STIMULANTS AND PROLIFERANTS	\$65.26	\$39.94	-39%
61	SYMPATHOMIMETIC ADRENERGIC AGENTS	\$130.99	\$0.00	-100%

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	MOUNJARO	26,001	\$51,195,018	\$1,969	-	-	-
2	OZEMPIC	21,249	39,364,793	1,853	-	-	-
3	STELARA	675	17,610,102	26,089	-	-	-
4	HUMIRA(CF) PEN	1,976	15,905,370	8,049	-	-	-
5	JARDIANCE	8,261	12,956,261	1,568	-	-	-
6	SKYRIZI PEN	595	12,558,931	21,107	-	-	-
7	DUPIXENT PEN	2,493	10,128,714	4,063	-	-	-
8	FARXIGA	5,540	8,406,345	1,517	-	-	-
9	TREMFYA ONE-PRESS	565	7,790,285	13,788	-	-	-
10	RINVOQ	1,109	7,524,681	6,785	-	-	-
11	TALTZ AUTOINJECTOR	1,059	7,351,829	6,942	-	-	-
12	TRULICITY	3,102	6,596,067	2,126	-	-	-
13	OTEZLA	1,288	6,440,567	5,000	-	-	-
14	TRIKAFTA	240	6,402,507	26,677	-	-	-
15	ELIQUIS	4,155	5,589,990	1,345	-	-	-
16	ENBREL SURECLICK	731	5,554,655	7,599	-	-	-
17	XARELTO	3,359	4,894,113	1,457	-	-	-
18	DUPIXENT SYRINGE	1,194	4,625,629	3,874	-	-	-
19	TRESIBA FLEXTOUCH U-200	2,199	\$4,221,597	1,920	-	-	-
20	LINZESS	2,917	\$3,771,111	1,293	-	-	-
	<u>All Other</u>	1,910,563	226,162,448	118.37	18,913	37,757,216	\$1,996.36
	Total	1,999,271	\$465,051,014	\$232.61	18,913	\$37,757,216	\$1,996.36







1 – Incretin Mimetics

In FY 2025, the Incretin Mimetics Drugs category was first in cost to PEIA with expenditure of \$101,155,607, which accounted for 20.1% of total expenditures. Formulary expenditures were \$101,155,072 or 100.0% of Incretin Mimetics expenditures and total expenditures had a 6.5% trend from 2024 to 2025.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2024	2025	Growth	2024	2025	Growth	2024	2025	Growth
MOUNJARO	Yes	SSB	23,462	26,001	10.8%	\$1,419	\$1,969	38.7%	\$33,294,931	\$51,195,018	53.8%
OZEMPIC	Yes	SSB	25,361	21,249	-16.2%	1,489	1,853	24.4%	37,762,247	39,364,793	4.2%
TRULICITY	Yes	SSB	7,908	3,102	-60.8%	1,885	2,126	12.8%	14,906,653	6,596,067	-55.8%
RYBELSUS	Yes	SSB	2,100	1,634	-22.2%	1,846	2,065	11.9%	3,877,089	3,374,323	-13.0%
ZEPBOUND	Yes	0	2,936	688	-76.6%	1,419	1,885	32.8%	4,167,250	1,296,720	-68.9%
<u>Subtotals</u>											
Generic	Y	GEN	0	19	NA	NA	\$590.35	NA	\$0	\$11,217	NA
Formulary Brand	Y	Brand	61,406	52,224	-15.0%	\$1,549	\$1,936.73	25.0%	95,133,442	101,143,855	6.3%
<u>Non-Formulary Brand</u>	<u>N</u>	<u>Brand</u>	<u>142</u>	<u>1</u>	<u>-99.3%</u>	<u>1,238</u>	<u>535</u>	<u>-56.8%</u>	<u>175,742</u>	<u>535</u>	<u>-99.7%</u>
Total			61,548	52,244	-15.1%	\$1,549	\$1,936	25.0%	\$95,309,184	\$101,155,607	6.1%
Trends Adjusted for Exposure											6.5%

2 – Antineoplastic Agents

In FY 2025, the Antineoplastic Agents category was second in cost to PEIA with expenditure of \$36,417,078, which accounted for 7.9% of total expenditures overall. Formulary expenditures were \$32,313,190 or 88.7% of Antineoplastic Agent expenditures and total ingredient cost had a 13.2% trend from 2024 to 2025.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2024	2025	Growth	2024	2025	Growth	2024	2025	Growth
VERZENIO	Yes	GEN	188	194	3.2%	\$13,774.24	\$15,616.32	13.4%	\$2,589,556	\$3,029,566	17.0%
KISQALI	Yes	SSB	83	181	118.1%	15,148.21	16,348.87	7.9%	1,257,301	2,959,146	135.4%
XTANDI	Yes	SSB	127	178	40.2%	13,581.18	14,501.83	6.8%	1,724,810	2,581,325	49.7%
REVLIMID	Yes	GEN	162	128	-21.0%	17,516.62	19,700.57	12.5%	2,837,692	2,521,673	-11.1%
LENALIDOMIDE	Yes	GEN	118	109	-7.6%	15,328.82	15,436.83	0.7%	1,808,801	1,682,614	-7.0%
<u>Subtotals</u>											
Generic	Y	GEN	7,213	7,397	2.6%	\$612	\$510	-16.8%	\$4,417,418	\$3,769,445	-14.7%
Formulary Brand	Y	Brand	1,629	1,735	6.5%	15,127	16,452	8.8%	24,642,603	28,543,745	15.8%
Non-Formulary Brand	N	Brand	217	219	0.9%	14,425	18,739	29.9%	3,130,172	4,103,888	31.1%
Total			9,059	9,351	3.2%	\$3,553	\$3,894	9.6%	\$32,190,194	\$36,417,078	13.1%
Trends Adjusted for Exposure								9.6%			13.2%

3 – Interleukin-Mediated Agents

In FY 2025, the Interleukin-Mediated Agents indicator category was third in cost to PEIA with expenditure of \$32,069,803, which accounted for 6.9% of total expenditures. Formulary expenditures were \$27,118,896 or 84.6% of Interleukin-Mediated Agent expenditures. Total expenditures had a 23.6% trend from 2024 to 2025.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2024	2025	Growth	2024	2025	Growth	2024	2025	Growth
STELARA	Yes	SSB	638	675	5.8%	\$24,218	\$26,089	7.7%	\$15,450,862	\$17,610,102	14.0%
TALTZ AUTOINJECTOR	Yes	GEN	916	1,059	15.6%	6,681	6,942	3.9%	6,120,159	7,351,829	20.1%
COSENTYX UNOREADY PEN	No	SSB	22	223	913.6%	13,160.72	9,533.23	-27.6%	289,536	2,125,909	634.2%
COSENTYX SENSOREADY (2 PENS)	No	GEN	167	188	12.6%	\$7,633	\$8,033	5.2%	\$1,274,719	\$1,510,197	18.5%
TALTZ AUTOINJECTOR (2 PACK)	Yes	GEN	60	62	3.3%	13,172	13,786	4.7%	790,349	854,711	8.1%
Subtotals											
Generic	Y	GEN	0	0	NA	NA	NA	NA	\$0	\$0	NA
Formulary Brand	Y	Brand	1,798	2,052	14.1%	13,006	13,216	1.6%	23,385,244	27,118,896	16.0%
<u>Non-Formulary Brand</u>	<u>N</u>	<u>Brand</u>	<u>384</u>	<u>639</u>	<u>66.4%</u>	<u>6,889.54</u>	<u>7,747.90</u>	<u>12.5%</u>	<u>2,645,582</u>	<u>4,950,906</u>	<u>87.1%</u>
Total			2,182	2,691	23.3%	\$11,930	\$11,917	-0.1%	\$26,030,827	\$32,069,803	23.2%
Trends Adjusted for Exposure					23.7%			-0.1%			23.6%

4 - Immunomodulatory Agents - 84:06

In FY 2025, the Immunomodulatory Agents - 84:06 indicator category was fourth in cost to PEIA with expenditure of \$29,294,957, which accounted for 6.3% of total expenditures. Formulary expenditures were \$27,666,432 or 94.4% of Immunomodulatory Agents - 84:06 expenditures. Total expenditures had a 50.1% trend from 2024 to 2025.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2024	2025	Growth	2024	2025	Growth	2024	2025	Growth
SKYRIZI PEN	Yes	GEN	462	595	28.8%	\$20,054	\$21,107	5.3%	\$9,265,149	\$12,558,931	35.6%
TREMFYA ONE-PRESS	Yes	SSB	0	565	NA	NA	13,788	NA	0	7,790,285	NA
SKYRIZI ON-BODY	Yes	GEN	61	150	145.9%	19,966	21,489	7.6%	1,217,932	3,223,323	164.7%
TREMFYA	Yes	SSB	572	159	-72.2%	13,224	13,804	4.4%	7,563,887	2,194,861	-71.0%
BIMZELX AUTOINJECTOR	No	SSB	8	102	1175.0%	12,474	15,362	23.2%	99,792	1,566,904	1470.2%
<u>Subtotals</u>											
Generic	Y	GEN	812	970	19.5%	\$119.84	\$77.10	-35.7%	97,306	74,786	-23.1%
Formulary Brand	Y	Brand	0	1,625	NA	NA	16,979	NA	19,557,727	27,591,646	41.1%
<u>Non-Formulary Brand</u>	<u>N</u>	<u>Brand</u>	8	106	<u>1225.0%</u>	<u>12,474</u>	<u>15,363</u>	<u>23.2%</u>	<u>99,792</u>	<u>1,628,526</u>	<u>1531.9%</u>
Total			820	2,701	229.4%	\$24,091	\$10,846	-55.0%	\$19,754,825	\$29,294,957	48.3%
Trends Adjusted for Exposure					233.3%			-55.0%			50.1%

5 –Sodium Glucose Cotransporters

In FY 2025, the Sodium Glucose Cotransport indicator category was fifth in cost to PEIA with expenditure of \$22,424,651, which accounted for 4.8% of total expenditures. Formulary expenditures were \$22,389,333 or 99.8% of Sodium Glucose Cotransport expenditures. Total expenditures had an 8.7% trend from 2024 to 2025.

Drug	Formulary Indicator	Current Brand/ Generic	Number of Prescriptions			Ingredient Cost Per Prescription			Total Ingredient Cost		
			2024	2025	Growth	2024	2025	Growth	2024	2025	Growth
JARDIANCE	Yes	GEN	6,715	8,261	23.0%	\$1,412	\$1,568	11.1%	\$9,482,767	\$12,956,261	36.6%
FARXIGA	Yes	GEN	5,849	5,540	-5.3%	1,383	1,517	9.7%	8,090,212	8,406,345	3.9%
XIGDUO XR	Yes	GEN	384	266	-30.7%	1,296	1,485	14.6%	497,630	394,946	-20.6%
SYNJARDY XR	Yes	GEN	181	266	47.0%	1,373	1,485	8.1%	248,563	394,946	58.9%
GLYXAMBI	Yes	SSB	109	198	81.7%	1,507	1,539	2.1%	164,261	304,625	85.5%
<u>Subtotals</u>											
Generic	Y	GEN	0	0	NA	NA	NA	NA	\$0	\$0	NA
Formulary Brand	Y	Brand	13,975	14,472	3.6%	1,469	1,547	5.3%	20,527,315	22,389,333	9.1%
<u>Non-Formulary Brand</u>	<u>N</u>	<u>Brand</u>	82	30	<u>-63.4%</u>	<u>1,308</u>	<u>1,177</u>	<u>-10.0%</u>	<u>107,243</u>	<u>35,318</u>	<u>-67.1%</u>
Total			14,057	14,502	3.2%	\$1,468	\$1,546	5.3%	\$20,634,558	\$22,424,651	8.7%
Trends Adjusted for Exposure					3.2%			5.3%			8.7%