



JIM GIBBONS
Governor

LESLIE A. JOHNSTONE
Executive Officer

STATE OF NEVADA
PUBLIC EMPLOYEES' BENEFITS PROGRAM

901 S. Stewart Street, Suite 1001

Carson City, Nevada 89701

Telephone (775) 684-7000 · (800) 326-5496

Fax (775) 684-7028

www.pebp.state.nv.us



RON SWIRCZEK
Board Chairman

AGENDA ITEM

Action Item

Information Only

Date: September 6, 2007

Item Number: VIIb

Title: Self-Funded Plan Utilization Report for the plan year ending
June 30, 2007

Summary

This report addresses the following topics:

1. Notes Regarding the Data
2. Demographics
3. Claims Summary
4. Surplus and Loss Summary
5. Costs by Tier and Age
6. Network Utilization and Cost Sharing
7. Claim Distribution by Paid Claim Amount
8. High Utilization
9. Chronic Conditions and Wellness

Report

Notes Regarding the Data

This utilization report was prepared using Medstat, a secure on-line data mining engine. Fiserv Health Benefit Planners (FHBP) populates the database with PEBP claim data and provides PEBP access to the Medstat reporting tool. The cost for this service is included in FHBP's administration fee. PEBP staff has instituted a monthly procedure to reconcile the Medstat data to PEBP financial records.

PEBP staff intends to use the Medstat reporting tool, from this point forward, for reporting self-funded claim activity to the Board and to the public. Readers should note the following:

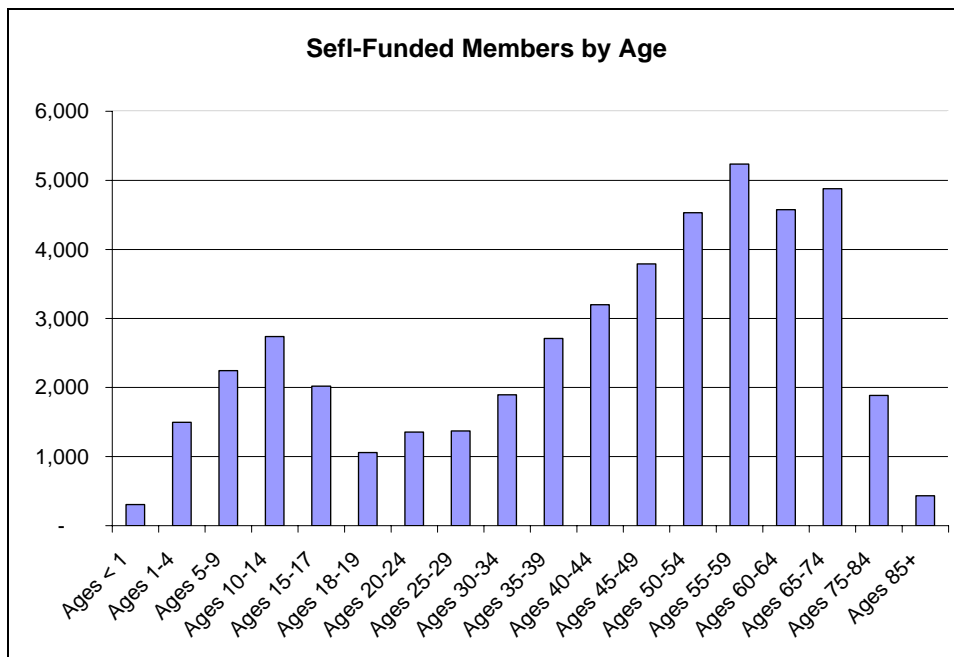
1. This report reflects only self-funded plan activity and does not include any fully insured benefit costs (e.g. health maintenance organizations) information.
2. Fisphere Health and Catalyst Rx are working on secure data transfer to allow the addition of prescription costs in Medstat. This initial report shows total prescription claims paid by the plan but does not break those claims down in the various categories. This information was obtained directly from Catalyst Rx paid reports. Prescription utilization detail has been provided in a separate report by Catalyst Rx. The process for updating Medstat is expected to be completed in the near future and will enable all claim detail to be provided from Medstat in future utilization reports.
3. Dollar amounts categorized into various demographic groups (tiers, age, division, etc.) are reported on a paid basis from July 2006 to June 2007 and the previous 12 month period. The clinical reports for costs by chronic disease, major diagnostic category, hospital, clinical condition, wellness, etc., are reported on an incurred basis from April 2006 to March 2007 and the previous 12 month period. The lag time of three months allows for claim submission and payment to occur. All periods, unless otherwise indicated, are reported in annual periods for consistency.
4. Enrollment figures will vary slightly (less than 1%) from other financial reports due to the fact that Medstat reports include retroactive enrollment transactions. Other reports provided by PEBP staff use “snap-shots” of enrollment on the first of each month. Because preferred provider dental enrollment figures are not yet loaded into Medstat, dental enrollment in this report is based on these “snap-shots.”
5. A “Participant” is defined as the primary insured. “Member” includes both the primary insured and all dependents.
6. Certain tables show categories labeled “~Missing.” These categories indicate where data is missing for certain records, but the costs are included for completeness of reporting.
7. Unless otherwise noted, PY 2006 and PY 2007 medical claims include the cost of Medicare Part B premium reimbursements.
8. Unless otherwise noted, state and non-state participants are reported in aggregate.

Demographics

The average self-funded medical plan enrollment grew 7.6% from FY 2006 to FY 2007 while the dental plan enrollment grew by 8.3% due to slightly higher growth in the health maintenance organization options.

Self-Funded Average Monthly Participant Counts			
	Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	% Change
Medical and Prescription			
Employees Avg	25,665	27,624	7.6%
Family Size Avg	1.66	1.65	-0.6%
Members Avg	42,703	45,698	7.0%
Member Age Avg	43.1	43.4	0.7%
Dental Employees Avg ¹	35,049	37,970	8.3%

The following chart displays the age distribution of all members in the self-funded plan. Of most significance is that more than half of the self-funded population is over age 45 and that 25% of self-funded members are aged 24 and younger.



¹ Dental counts are based on enrollment counts taken on the first of each month and do not include changes due to retro-activity

Claims Summary

Total self-funded paid claim dollars grew 14.5% from FY 2006 to FY 2007. Most of this growth was due to increases in enrollment. Inflation and utilization increases account for 5.9% of the growth. Prescription costs, on a per participant per month basis, had the greatest percent increase. However the prescription costs reported here do not include rebates from Catalyst Rx. Due to the new prescription contract in effect in January 2007, prescription rebates to the plan are expected to increase dramatically. Prescription rebates are received by PEBP approximately nine to twelve months after they are incurred.

Self-Funded Net Paid Claims - Total (Paid Basis)					
	Jul 2005 - Jun 2006		Jul 2006 - Jun 2007		% Change
Medical					
Inpatient	\$	42,478,139	\$	45,576,826	7.3%
Outpatient	\$	63,885,805	\$	75,464,853	18.1%
Medical - Other	\$	5,282,962	\$	6,237,908	18.1%
Total Medical	\$	111,646,906	\$	127,279,587	14.0%
Dental	\$	17,606,418	\$	20,038,572	13.8%
Prescription	\$	25,977,316	\$	30,359,785	16.9%
Total	\$	155,230,640	\$	177,677,944	14.5%

Self-Funded Net Paid Claims - Per Participant Per Month (Paid Basis)					
	Jul 2005 - Jun 2006		Jul 2006 - Jun 2007		% Change
Medical	\$	362.51	\$	383.96	5.9%
Dental	\$	41.86	\$	43.98	5.1%
Prescription	\$	84.35	\$	91.59	8.6%
Total	\$	488.72	\$	519.53	6.3%

Self-funded cost increases can easily be divided into those attributable to inflation and utilization and increases due to enrollment. Approximately 50-60% of the cost increases are due to increases in enrollment.

Self-funded Cost Increase Factors (Paid Basis)					
	Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	Change	% Change	Cost Increase
Med & Rx Enrollment	25,665	27,624	1,959	7.6%	
Dental Enrollment	35,049	37,970	2,921	8.3%	
Net Pay Medical	\$ 111,646,906	\$ 127,279,587	\$ 15,632,681	14.0%	
Net Pay Dental	\$ 17,606,418	\$ 20,038,572	\$ 2,432,154	13.8%	
Net Pay Prescription	\$ 25,977,316	\$ 30,359,785	\$ 4,382,469	16.9%	
Net Pay	\$ 155,230,640	\$ 177,677,944	\$ 22,447,304	14.5%	
Cost Increase Attributable to Inflation & Utilization					
Net Pay Medical PPM	\$ 362.51	\$ 383.96	\$ 21.45	5.9%	\$ 6,606,446
Net Pay Dental PPM	\$ 41.86	\$ 43.98	\$ 2.12	5.1%	\$ 890,604
Net Pay Prescription PPM	\$ 84.35	\$ 91.59	\$ 7.24	8.6%	\$ 2,229,456
Net PPM	\$ 488.72	\$ 519.53	\$ 30.81	6.3%	\$ 9,726,506
Cost Increase Attributable to Enrollment					
Net Pay Medical PPM					\$ 9,026,235
Net Pay Dental PPM					\$ 1,541,550
Net Pay Prescription PPM					\$ 2,153,013
Net PPM					\$ 12,720,798

Inpatient medical costs have remained steady on a per participant basis while admits per acute days per admit and length of stay have decreased slightly. Outpatient claims have increased due to utilization, inflation and enrollment.

Self-Funded Medical Utilization (Paid Basis)					
		Jul 2005 - Jun 2006		Jul 2006 - Jun 2007	% Change
Inpatient					
Net Pay	\$	42,478,139	\$	45,576,826	7.3%
Net Pay PPPM	\$	137.93	\$	137.49	-0.3%
Net Pay IP Acute Per Admit	\$	11,524.18	\$	11,853.53	2.9%
Net Pay IP Acute Per Day	\$	2,400.17	\$	2,523.77	5.1%
Admits Per 1000 Acute		86.3		84.1	-2.5%
Days Per 1000 Admit Acute		414.5		395.2	-4.6%
Days LOS Admit Acute		4.8		4.7	-2.1%
Outpatient					
Net Pay	\$	63,885,805	\$	75,464,853	18.1%
Net Pay PPPM	\$	207.44	\$	227.65	9.7%
Net Pay PPPM - Facility	\$	78.61	\$	88.61	12.7%
Net Pay PPPM - Office	\$	81.03	\$	86.36	6.6%
Net Pay PPPM - Other	\$	47.80	\$	52.68	10.2%
Visits Per 1000 ER		154.4		161.1	4.4%
Services Per 1000 OP Lab		6,118.2		6,506.6	6.3%
Services Per 1000 OP Rad		2,366.5		2,407.5	1.7%

Surplus and Loss Summary

The following four tables show the revenues, expenses and surplus or loss associated with active participants, non-Medicare retirees and Medicare retirees (except prescription). The tables are split into state and non-state participants. In the first two tables, total expenses are provided for plan year 2007. However, because of the transition of enrollment and eligibility software that occurred in February 2007, the revenue breakdown and Medicare part A & B enrollment figures are not readily available prior to that date.

The second two tables reflect the fourth quarter financial activity. This information is complete with the exception of the detailed breakdown of prescription drug expenses. This information will be available on future reports.

It is staff's intent to provide these reports in the future that include all of the year-to-date data, shown by state, non-state, and total self-funded population. The expenses will be on a "paid claims" basis. The objective is to show a close approximation of the net surplus/loss generated by each major participant group. Development of the projected claims cost during the rate setting process each year will be based upon "incurred date" and will be weighted between PEBP plan experience and large payor experience as deemed appropriate by PEBP's actuary.

Costs by Tier and Age

Of the \$15.6 million increase in paid medical claims from FY 2006 and FY 2007, 50% is attributed to the Family tier which grew 29.6% on a per participant basis. Medical claims in the Participant plus Spouse tier declined slightly on a per participant basis.

Paid dental claims grew at relatively low rates across all tiers.

Self-Funded Paid Medical Claims By Coverage Tier (Paid Basis)			
	Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	% Change
Participant Only	\$ 51,756,463	\$ 57,577,676	11.2%
Participant + Spouse	\$ 30,349,833	\$ 30,866,263	1.7%
Participant + Child(ren)	\$ 10,772,405	\$ 12,185,793	13.1%
Participant + Family	\$ 18,759,935	\$ 26,625,744	41.9%
-Missing	\$ 8,270	\$ 24,111	
	<u>\$ 111,646,906</u>	<u>\$ 127,279,587</u>	<u>14.0%</u>

Self-Funded Paid Dental Claims By Coverage Tier (Paid Basis)			
	Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	% Change
Participant Only	\$ 5,468,440	\$ 6,219,758	13.7%
Participant + Spouse	\$ 2,737,943	\$ 3,048,228	11.3%
Participant + Child(ren)	\$ 2,030,726	\$ 2,212,246	8.9%
Participant + Family	\$ 3,150,640	\$ 3,500,041	11.1%
-Missing	\$ 4,218,669	\$ 5,058,299	
	<u>\$ 17,606,418</u>	<u>\$ 20,038,572</u>	<u>13.8%</u>

Self-Funded Paid Medical Claims Per Participant Per Month By Coverage Tier (Paid Basis)			
	Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	% Change
Participant Only	\$268.39	\$274.29	2.2%
Participant + Spouse	\$640.78	\$630.75	-1.6%
Participant + Child(ren)	\$331.74	\$358.83	8.2%
Participant + Family	\$531.38	\$688.43	29.6%
	<u>\$362.51</u>	<u>\$383.96</u>	<u>5.9%</u>

Self-Funded Paid Dental Claims Per Participant Per Month By Coverage Tier (Paid Basis)			
	Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	% Change
Participant Only	\$21.03	\$21.95	4.4%
Participant + Spouse	\$43.60	\$45.71	4.8%
Participant + Child(ren)	\$41.25	\$42.63	3.3%
Participant + Family	\$64.89	\$65.16	0.4%
	<u>\$41.86</u>	<u>\$43.98</u>	<u>5.1%</u>

These tables show the change in medical and dental claims by age group from FY 2006 to FY 2007. Significant increases in medical claims for the under 1 and 15-17 age groups are due to several large claims. This large percent increase illustrates the significant impact a few large claims have on smaller populations.

Self-Funded Paid Medical Claims - By Age Group (Paid Basis)				Self-Funded Paid Dental Claims - By Age Group (Paid Basis)			
	Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	% Change		Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	% Change
Ages < 1	\$ 2,554,028	\$ 4,310,757	68.8%	Ages < 1	\$ 982	\$ 1,074	9.4%
Ages 1-4	\$ 1,057,360	\$ 1,214,059	14.8%	Ages 1-4	\$ 236,058	\$ 285,984	21.1%
Ages 5-9	\$ 997,910	\$ 941,691	-5.6%	Ages 5-9	\$ 847,851	\$ 945,659	11.5%
Ages 10-14	\$ 1,615,838	\$ 1,878,277	16.2%	Ages 10-14	\$ 882,438	\$ 956,455	8.4%
Ages 15-17	\$ 2,501,528	\$ 4,162,441	66.4%	Ages 15-17	\$ 770,411	\$ 807,767	4.8%
Ages 18-19	\$ 1,236,585	\$ 1,194,553	-3.4%	Ages 18-19	\$ 332,297	\$ 405,073	21.9%
Ages 20-24	\$ 1,439,435	\$ 1,775,543	23.3%	Ages 20-24	\$ 464,561	\$ 531,289	14.4%
Ages 25-29	\$ 1,852,351	\$ 2,307,677	24.6%	Ages 25-29	\$ 501,895	\$ 629,892	25.5%
Ages 30-34	\$ 3,417,370	\$ 3,927,940	14.9%	Ages 30-34	\$ 802,213	\$ 862,198	7.5%
Ages 35-39	\$ 5,271,406	\$ 6,337,650	20.2%	Ages 35-39	\$ 1,061,277	\$ 1,196,281	12.7%
Ages 40-44	\$ 7,907,923	\$ 7,127,687	-9.9%	Ages 40-44	\$ 1,436,476	\$ 1,462,388	1.8%
Ages 45-49	\$ 9,212,318	\$ 11,125,490	20.8%	Ages 45-49	\$ 1,693,248	\$ 1,803,942	6.5%
Ages 50-54	\$ 14,625,451	\$ 16,396,874	12.1%	Ages 50-54	\$ 2,061,646	\$ 2,274,833	10.3%
Ages 55-59	\$ 20,766,328	\$ 20,276,490	-2.4%	Ages 55-59	\$ 2,232,523	\$ 2,663,854	19.3%
Ages 60-64	\$ 22,620,087	\$ 27,713,126	22.5%	Ages 60-64	\$ 1,786,961	\$ 2,274,265	27.3%
Ages 65+	\$ 14,570,988	\$ 16,589,332	13.9%	Ages 65+	\$ 2,495,581	\$ 2,937,617	17.7%
	\$ 111,646,906	\$ 127,279,587	14.0%		\$ 17,606,418	\$ 20,038,571	13.8%

The following table displays the medical and dental costs for each age tier during PY 2007. This information does not include prescription expenses. The costs are shown in total for each age group and on a per participant basis. As with most claims data, the larger the participant size, the less volatile the expense data will be. Other than the anomalous age groups noted above, this table shows the relatively low cost of children to the plan and the higher costs of members age 50 to 64. Due to Medicare, members 65 and older have lower medical costs than younger retiree-age groups.

Self-Funded Paid Claims - By Age Group - Jul 2006 - Jun 2007 (Paid Basis)							
	Total Members	Medical		Dental		Total	
		Cost	PMPM	Cost	PMPM	Cost	PMPM
Ages < 1	305	\$ 4,310,757	\$ 1,177.80	\$ 1,074	\$ 0.29	\$ 4,311,831	\$ 1,178.10
Ages 1-4	1,495	\$ 1,214,059	\$ 67.67	\$ 285,984	\$ 15.94	\$ 1,500,043	\$ 83.61
Ages 5-9	2,244	\$ 941,691	\$ 34.97	\$ 945,659	\$ 35.12	\$ 1,887,350	\$ 70.09
Ages 10-14	2,740	\$ 1,878,277	\$ 57.13	\$ 956,455	\$ 29.09	\$ 2,834,732	\$ 86.21
Ages 15-17	2,020	\$ 4,162,441	\$ 171.72	\$ 807,767	\$ 33.32	\$ 4,970,208	\$ 205.04
Ages 18-19	1,058	\$ 1,194,553	\$ 94.09	\$ 405,073	\$ 31.91	\$ 1,599,626	\$ 125.99
Ages 20-24	1,356	\$ 1,775,543	\$ 109.12	\$ 531,289	\$ 32.65	\$ 2,306,832	\$ 141.77
Ages 25-29	1,372	\$ 2,307,677	\$ 140.17	\$ 629,892	\$ 38.26	\$ 2,937,569	\$ 178.42
Ages 30-34	1,893	\$ 3,927,940	\$ 172.92	\$ 862,198	\$ 37.96	\$ 4,790,138	\$ 210.87
Ages 35-39	2,710	\$ 6,337,650	\$ 194.88	\$ 1,196,281	\$ 36.79	\$ 7,533,931	\$ 231.67
Ages 40-44	3,197	\$ 7,127,687	\$ 185.79	\$ 1,462,388	\$ 38.12	\$ 8,590,075	\$ 223.91
Ages 45-49	3,791	\$ 11,125,490	\$ 244.56	\$ 1,803,942	\$ 39.65	\$ 12,929,432	\$ 284.21
Ages 50-54	4,532	\$ 16,396,874	\$ 301.50	\$ 2,274,833	\$ 41.83	\$ 18,671,707	\$ 343.33
Ages 55-59	5,234	\$ 20,276,490	\$ 322.83	\$ 2,663,854	\$ 42.41	\$ 22,940,344	\$ 365.25
Ages 60-64	4,575	\$ 27,713,126	\$ 504.79	\$ 2,274,265	\$ 41.43	\$ 29,987,391	\$ 546.22
Ages 65+	7,196	\$ 16,589,332	\$ 192.11	\$ 2,937,617	\$ 34.02	\$ 19,526,949	\$ 226.13
	45,718	\$ 127,279,587	\$ 232.00	\$ 20,038,571	\$ 36.53	\$ 147,318,158	\$ 268.53

Network Utilization and Cost Sharing

The percent of claims paid In Network have increased slightly from 88.63% in FY 2006 to 89.27% in FY 2007.

Self-funded Network Utilization (Paid Basis)			
	Jul 2005 - Jun 2006	Jul 2006 - Jun 2007	Change
Total			
Net Pay IP Acute	\$42,478,139	\$45,576,826	7.29%
Net Pay OP Fac Med	\$24,208,668	\$29,373,705	21.34%
Net Pay Office Med	\$24,954,822	\$28,629,094	14.72%
Net Pay Other	\$20,005,277	\$23,699,962	18.47%
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	\$111,646,906	\$127,279,587	14.00%
Paid in Network			
Net Pay IP Acute	\$41,087,434	\$45,067,463	9.69%
Net Pay OP Fac Med	\$21,190,958	\$25,252,630	19.17%
Net Pay Office Med	\$22,715,977	\$26,436,178	16.38%
Net Pay Other	\$13,957,910	\$16,862,403	20.81%
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	\$98,952,279	\$113,618,674	14.82%
Percent of Total Paid In Network			
Net Pay IP Acute	96.73%	98.88%	2.23%
Net Pay OP Fac Med	87.53%	85.97%	-1.79%
Net Pay Office Med	91.03%	92.34%	1.44%
Net Pay Other	69.77%	71.15%	1.98%
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	88.63%	89.27%	0.72%

The table on the following page shows participants paid approximately 9% of submitted charges in FY 2007 through co-pays, deductibles and coinsurance. The plan paid 28% of the \$525 million submitted charges. Thirty-six percent of submitted charges were ineligible for payment and network discounts subtracted another 25%.

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Submitted Charges and Paid Amounts (State Divisions)										
(Paid Basis)										
Jul 2006 - Jun 2007										
Division	Coverage Tiers	Charge Submitted	Ineligible	Discount	Third Party Amount	Net Payment	Copayment	Deductible	Coinsurance	Total Out Of Pocket
Active	Employee Only	\$ 97,883,092	\$ 19,444,733	\$ 36,855,708	\$ 35,522	\$ 31,326,602	\$ 1,209,736	\$ 2,831,019	\$ 6,179,772	\$ 10,220,527
	Employee & Spouse	\$ 62,403,459	\$ 12,974,161	\$ 22,638,893	\$ 162,258	\$ 20,758,019	\$ 579,507	\$ 1,745,128	\$ 3,545,492	\$ 5,870,128
	Employee & Children	\$ 36,412,754	\$ 6,424,799	\$ 12,206,395	\$ 488,104	\$ 13,102,359	\$ 601,823	\$ 1,281,729	\$ 2,307,546	\$ 4,191,097
	Employee & Family	\$ 73,548,116	\$ 13,642,749	\$ 24,949,738	\$ 386,993	\$ 27,108,632	\$ 947,722	\$ 2,226,498	\$ 4,285,784	\$ 7,460,004
	-Missing	\$ 7,756,991	\$ 1,036,834	\$ 669,821	\$ 10,945	\$ 4,208,905	\$ 458	\$ 317,163	\$ 1,512,865	\$ 1,830,486
	Total	\$ 278,004,412	\$ 53,523,276	\$ 97,320,555	\$ 1,083,822	\$ 96,504,517	\$ 3,339,246	\$ 8,401,537	\$ 17,831,459	\$ 29,572,242
Retiree	Employee Only	\$ 92,187,933	\$ 55,955,072	\$ 11,072,620	\$ 2,106,520	\$ 17,538,393	\$ 607,715	\$ 1,502,463	\$ 3,405,149	\$ 5,515,328
	Employee & Spouse	\$ 55,648,063	\$ 35,063,291	\$ 5,776,860	\$ 1,293,171	\$ 9,786,704	\$ 332,242	\$ 1,186,450	\$ 2,209,345	\$ 3,728,037
	Employee & Children	\$ 1,686,603	\$ 267,384	\$ 629,159	\$ 458	\$ 596,582	\$ 25,286	\$ 53,168	\$ 114,566	\$ 193,020
	Employee & Family	\$ 3,579,376	\$ 1,102,504	\$ 855,947	\$ 15,285	\$ 1,281,991	\$ 33,889	\$ 94,143	\$ 195,617	\$ 323,649
	-Missing	\$ 578,885	\$ 91,693	\$ 51,421	\$ 994	\$ 278,826	\$ 40	\$ 19,761	\$ 136,151	\$ 155,951
	Total	\$ 153,680,860	\$ 92,479,944	\$ 18,386,007	\$ 3,416,428	\$ 29,482,496	\$ 999,172	\$ 2,855,985	\$ 6,060,828	\$ 9,915,985
Cobra Active	Employee Only	\$ 2,137,344	\$ 813,747	\$ 556,886	\$ 933	\$ 577,042	\$ 18,329	\$ 57,535	\$ 112,872	\$ 188,736
	Employee & Spouse	\$ 2,376,795	\$ 389,394	\$ 873,946	\$ -	\$ 1,012,071	\$ 6,379	\$ 22,212	\$ 72,793	\$ 101,384
	Employee & Children	\$ 423,947	\$ 151,699	\$ 85,950	\$ -	\$ 146,583	\$ 4,063	\$ 12,975	\$ 22,677	\$ 39,715
	Employee & Family	\$ 1,594,188	\$ 384,472	\$ 680,835	\$ 623	\$ 463,858	\$ 8,519	\$ 18,640	\$ 37,242	\$ 64,400
	-Missing	\$ 32,397	\$ 6,203	\$ 3,455	\$ -	\$ 14,434	\$ 20	\$ 1,217	\$ 7,068	\$ 8,305
	Total	\$ 6,564,671	\$ 1,745,515	\$ 2,201,072	\$ 1,556	\$ 2,213,988	\$ 37,310	\$ 112,579	\$ 252,652	\$ 402,540
Cobra Retiree	Employee Only	\$ 45,857	\$ 6,295	\$ 15,258	\$ -	\$ 17,177	\$ 700	\$ 1,704	\$ 4,723	\$ 7,127
	Employee & Spouse	\$ 222,941	\$ 186,700	\$ 3,706	\$ -	\$ 32,126	\$ 60	\$ -	\$ 349	\$ 409
	Employee & Children	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	Employee & Family	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	-Missing	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
	Total	\$ 268,798	\$ 192,995	\$ 18,964	\$ -	\$ 49,303	\$ 760	\$ 1,704	\$ 5,072	\$ 7,536
Total State		\$ 438,518,741	\$ 147,941,730	\$ 117,926,598	\$ 4,501,806	\$ 128,250,304	\$ 4,376,488	\$ 11,371,805	\$ 24,150,011	\$ 39,898,303
Percent of Submitted Charge		100.0%	33.7%	26.9%	1.0%	29.2%	1.0%	2.6%	5.5%	9.1%

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Submitted Charges and Paid Amounts (Non-State Divisions)										
(Paid Basis)										
Jul 2006 - Jun 2007										
Division	Coverage Tiers	Charge Submitted	Ineligible	Discount	Third Party Amount	Net Payment	Copayment	Deductible	Coinsurance	Total Out Of Pocket
Active	Employee Only	\$ 4,068,672	\$ 636,682	\$ 1,556,200	\$ 20	\$ 1,472,078	\$ 39,508	\$ 99,826	\$ 264,358	\$ 403,692
	Employee & Spouse	\$ 422,658	\$ 71,343	\$ 174,447	\$ 476	\$ 120,757	\$ 5,971	\$ 17,749	\$ 31,915	\$ 55,635
	Employee & Children	\$ 516,725	\$ 54,700	\$ 157,470	\$ -	\$ 211,753	\$ 15,008	\$ 30,128	\$ 47,667	\$ 92,802
	Employee & Family	\$ 1,279,350	\$ 143,447	\$ 598,054	\$ 9,279	\$ 386,462	\$ 15,096	\$ 39,595	\$ 87,418	\$ 142,108
	~Missing	\$ 261,023	\$ 28,513	\$ 22,752	\$ 199	\$ 139,095	\$ 80	\$ 11,281	\$ 59,103	\$ 70,464
	Total	\$ 6,548,428	\$ 934,685	\$ 2,508,923	\$ 9,974	\$ 2,330,145	\$ 75,663	\$ 198,579	\$ 490,461	\$ 764,701
Retiree	Employee Only	\$ 58,823,483	\$ 29,817,761	\$ 10,825,152	\$ 875,136	\$ 12,855,359	\$ 449,299	\$ 1,279,793	\$ 2,720,984	\$ 4,450,075
	Employee & Spouse	\$ 16,772,784	\$ 11,549,912	\$ 1,634,177	\$ 365,014	\$ 2,204,886	\$ 95,678	\$ 350,001	\$ 573,116	\$ 1,018,795
	Employee & Children	\$ 1,050,642	\$ 207,029	\$ 354,468	\$ 4,926	\$ 322,988	\$ 19,049	\$ 52,105	\$ 90,077	\$ 161,231
	Employee & Family	\$ 2,595,772	\$ 767,198	\$ 655,111	\$ 9,674	\$ 881,559	\$ 27,602	\$ 76,538	\$ 178,090	\$ 282,230
	~Missing	\$ 955,964	\$ 176,630	\$ 88,505	\$ 1,735	\$ 440,981	\$ 287	\$ 32,889	\$ 214,938	\$ 248,113
	Total	\$ 80,198,645	\$ 42,518,530	\$ 13,557,413	\$ 1,256,485	\$ 16,705,773	\$ 591,915	\$ 1,791,326	\$ 3,777,205	\$ 6,160,444
Cobra Active	Employee Only	\$ 1,198	\$ 166	\$ -	\$ -	\$ 715	\$ -	\$ 300	\$ 17	\$ 317
	Employee & Spouse	\$ 647	\$ -	\$ -	\$ -	\$ 504	\$ -	\$ 81	\$ 62	\$ 143
	Employee & Children	\$ 37,495	\$ 4,591	\$ 3,010	\$ -	\$ 18,523	\$ 40	\$ 1,824	\$ 9,507	\$ 11,371
	Employee & Family	\$ 13,261	\$ 128	\$ 6,869	\$ 562	\$ 3,294	\$ 150	\$ 800	\$ 1,458	\$ 2,408
	~Missing	\$ 1,201	\$ -	\$ 306	\$ -	\$ 529	\$ -	\$ 50	\$ 316	\$ 366
	Total	\$ 53,802	\$ 4,885	\$ 10,185	\$ 562	\$ 23,565	\$ 190	\$ 3,055	\$ 11,360	\$ 14,605
~Missing	Employee Only	\$ 2,053	\$ 789	\$ 481	\$ -	\$ 563	\$ 158	\$ -	\$ 62	\$ 220
	Employee & Family	\$ 835	\$ 467	\$ 149	\$ -	\$ 137	\$ 20	\$ 62	\$ -	\$ 82
	~Missing	\$ 20,545	\$ 603	\$ 8,354	\$ -	\$ 11,322	\$ 60	\$ 50	\$ 156	\$ 266
	Total	\$ 23,433	\$ 1,859	\$ 8,984	\$ -	\$ 12,022	\$ 238	\$ 112	\$ 218	\$ 568
Total Non-State		\$ 86,824,308	\$ 43,459,959	\$ 16,085,505	\$ 1,267,021	\$ 19,071,505	\$ 668,006	\$ 1,993,072	\$ 4,279,244	\$ 6,940,318
Percent of Submitted Charge		100.0%	50.1%	18.5%	1.5%	22.0%	0.8%	2.3%	4.9%	8.0%
Total All Divisions		\$ 525,343,049	\$ 191,401,689	\$ 134,012,103	\$ 5,768,827	\$ 147,321,809	\$ 5,044,494	\$ 13,364,877	\$ 28,429,255	\$ 46,838,621
Percent of Submitted Charge		100.0%	36.4%	25.5%	1.1%	28.0%	1.0%	2.5%	5.4%	8.9%

Claim Distribution by Paid Claim Amount

Claim distribution by paid claim amount was compiled directly from the daily check register sent to PEBP by FHBP rather than from the Medstat reporting tool. This information has been reconciled with the Medstat data.

Seventy percent of the claim dollars were paid out in 9.7% of the claims. Forty-three claims in excess of \$100,000 were paid out in FY 07 for a total of \$7.5 million. The claim category with the largest total was consistently the \$400 to \$1000 claim while the \$0 to \$100 claim category had a significantly larger number of claims.

Claim Distribution - Medical and Dental Claims by Paid Claim Amount					
Jul 2006 - Jun 2007					
(Paid Basis)					
Claim Amount			Number of		Total
Greater Than or	Equal	Less Than	Claims		Cost
\$	100,000.00		43	\$	7,468,220.29
\$	40,000.00	\$ 100,000.00	146	\$	8,746,315.14
\$	20,000.00	\$ 40,000.00	365	\$	9,796,400.16
\$	10,000.00	\$ 20,000.00	726	\$	10,099,237.21
\$	4,000.00	\$ 10,000.00	2,673	\$	16,017,236.84
\$	2,000.00	\$ 4,000.00	4,990	\$	13,830,675.16
\$	1,000.00	\$ 2,000.00	10,068	\$	13,752,553.28
\$	400.00	\$ 1,000.00	34,180	\$	21,117,255.86
\$	200.00	\$ 400.00	44,847	\$	12,581,739.14
\$	100.00	\$ 200.00	108,919	\$	15,076,969.84
\$	-	\$ 100.00	339,192	\$	15,343,834.84
			546,149	\$	143,830,437.76
Average Claim				\$	263.35
Medicare B Reimbursement			73,561	\$	5,357,730.80
Average Med B				\$	72.83
Total Checks			619,710	\$	149,188,168.56
Less Voids and Refunds				\$	1,870,009.56
Total Medical and Dental Claims Paid				\$	147,318,159.00

High Utilization

The following four tables show:

- √ the most expensive Major Diagnostic Category
- √ the most expensive Clinical Condition,
- √ the high Net Pay Claims, and
- √ the hospitals paid the most by the Program.

All data for this report is on an incurred basis for the year ending March 2007.

Musculoskeletal, circulatory and digestive diagnostic categories remain the most expensive three categories accounting for 40% of total costs. Newborns, kidney and health status had the highest net increase. The newborn and child birth categories have cost the plan significantly more than any other category on a per patient basis. The largest percent increases on a per patient basis were in the newborn and HIV categories.

The top 25 clinical conditions account for over 57% of all costs and cost 14% more on a per patient basis than the average of all 266 clinical conditions. The largest increases from the previous period were in the newborn, respiratory infection and chemotherapy categories.

The top 25 hospitals that receive more money from PEBP for acute visits than any other hospital make up 82.2% of all acute costs. The top two, Washoe Med and Carson Tahoe account for over a third of all acute costs. Stanford Hospital and the University of California Davis Medical Center were paid the most on a per day-acute basis. This data should be used only to demonstrate to which hospitals large dollar amounts are going. Determining which hospitals cost more can only be found on an in-depth study of costs per diagnosis code.

The top 25 claims account for 9% of all medical claims but only 0.05% of the total self funded population. The highest claim, for sarcoidosis, exceeded \$1.7 million. Five claims exceeded half a million dollars.

Self-funded Medical Claims Net Pay by Major Diagnostic Category (Incurred Basis)						
	Net Pay			Net Pay Per Patient		
	Apr 2005 - Mar 2006	Apr 2006 - Mar 2007	% Change	Apr 2005 - Mar 2006	Apr 2006 - Mar 2007	% Change
Musculoskeletal	\$ 20,683,872	\$ 22,021,477	6.5%	\$ 1,294.12	\$ 1,309.79	1.2%
Circulatory	\$ 13,995,428	\$ 14,334,850	2.4%	\$ 1,167.36	\$ 1,123.42	-3.8%
Digestive	\$ 10,032,165	\$ 10,364,144	3.3%	\$ 1,254.33	\$ 1,189.23	-5.2%
Health Status	\$ 6,869,905	\$ 8,344,029	21.5%	\$ 271.04	\$ 301.57	11.3%
Respiratory	\$ 7,520,881	\$ 7,514,741	-0.1%	\$ 852.71	\$ 847.78	-0.6%
Nervous	\$ 6,662,195	\$ 7,131,106	7.0%	\$ 1,096.84	\$ 1,109.38	1.1%
Kidney	\$ 4,837,524	\$ 6,286,469	30.0%	\$ 1,028.17	\$ 1,225.67	19.2%
Skin, Breast	\$ 6,209,149	\$ 5,641,799	-9.1%	\$ 446.28	\$ 379.13	-15.0%
Ear, Nose, Mouth & Throat	\$ 3,423,205	\$ 4,208,170	22.9%	\$ 234.74	\$ 281.26	19.8%
Metabolic	\$ 2,915,737	\$ 3,788,039	29.9%	\$ 247.96	\$ 297.54	20.0%
Eye	\$ 3,606,726	\$ 3,583,310	-0.6%	\$ 238.15	\$ 218.47	-8.3%
Newborns	\$ 1,606,812	\$ 3,179,084	97.9%	\$ 3,947.94	\$ 8,733.75	121.2%
Myeloproliferative Diseases	\$ 2,200,302	\$ 2,996,104	36.2%	\$ 1,815.43	\$ 2,245.95	23.7%
Female Reproductive	\$ 2,711,679	\$ 2,955,392	9.0%	\$ 584.79	\$ 619.45	5.9%
Liver, Pancreas	\$ 2,852,252	\$ 2,763,066	-3.1%	\$ 2,347.53	\$ 2,180.79	-7.1%
Mental	\$ 2,310,458	\$ 2,571,518	11.3%	\$ 529.80	\$ 566.29	6.9%
Pregnancy, Childbirth	\$ 2,122,832	\$ 2,373,785	11.8%	\$ 4,114.02	\$ 4,315.97	4.9%
Infections	\$ 1,123,452	\$ 1,791,274	59.4%	\$ 647.52	\$ 965.65	49.1%
Blood	\$ 1,498,473	\$ 1,650,228	10.1%	\$ 891.42	\$ 887.70	-0.4%
Male Reproductive	\$ 765,127	\$ 1,334,401	74.4%	\$ 380.47	\$ 603.53	58.6%
Injuries, Poisonings	\$ 1,137,279	\$ 1,132,242	-0.4%	\$ 459.69	\$ 460.45	0.2%
Alcohol/Drug Use	\$ 282,067	\$ 353,872	25.5%	\$ 1,649.52	\$ 1,833.53	11.2%
Burns	\$ 104,855	\$ 108,033	3.0%	\$ 1,497.92	\$ 1,565.69	4.5%
HIV Infections	\$ 8,137	\$ 80,787	892.8%	\$ 325.49	\$ 3,366.13	934.2%
~Missing	\$ 3,842,211	\$ 4,964,023	29.2%	\$ 570.91	\$ 693.78	21.5%
All MDCs	\$ 109,322,723	\$ 121,471,943	11.1%	\$ 668.39	\$ 698.09	4.4%

Self-funded Medical Claims Net Pay by Clinical Condition (Incurred Basis)						
	Net Pay			Net Pay Per Patient		
	Apr 2005 - Mar 2006	Apr 2006 - Mar 2007	% Change	Apr 2005 - Mar 2006	Apr 2006 - Mar 2007	% Change
Signs/Symptoms/Oth Cond, NEC	\$ 6,320,526	\$ 6,652,651	5.3%	\$ 508.33	\$ 532.68	4.8%
Prevent/Admin Hlth Encounters	\$ 4,190,127	\$ 5,648,981	34.8%	\$ 183.20	\$ 220.41	20.3%
Osteoarthritis	\$ 5,319,564	\$ 5,586,559	5.0%	\$ 1,570.58	\$ 1,515.20	-3.5%
Spinal/Back Disorders, NEC	\$ 4,748,939	\$ 5,144,361	8.3%	\$ 989.16	\$ 996.58	0.8%
Respiratory Disord, NEC	\$ 5,199,822	\$ 4,895,178	-5.9%	\$ 1,010.46	\$ 889.71	-12.0%
Coronary Artery Disease	\$ 4,516,692	\$ 4,242,845	-6.1%	\$ 2,306.79	\$ 2,159.21	-6.4%
Renal Function Failure	\$ 2,339,410	\$ 3,564,074	52.3%	\$ 6,761.30	\$ 7,973.32	17.9%
Arthropathies/Joint Disord NEC	\$ 3,160,692	\$ 3,533,617	11.8%	\$ 311.98	\$ 330.31	5.9%
Gastroint Disord, NEC	\$ 3,280,229	\$ 3,373,224	2.8%	\$ 612.55	\$ 594.92	-2.9%
Newborns, w/wo Complication	\$ 1,580,250	\$ 3,255,963	106.0%	\$ 3,960.53	\$ 9,120.34	130.3%
Condition Rel to Tx - Med/Surg	\$ 2,810,133	\$ 2,590,645	-7.8%	\$ 5,414.51	\$ 4,585.21	-15.3%
Cancer - Breast	\$ 1,931,698	\$ 2,008,770	4.0%	\$ 3,825.14	\$ 3,619.41	-5.4%
Cardiac Arrhythmias	\$ 1,464,522	\$ 2,006,112	37.0%	\$ 1,037.20	\$ 1,360.08	31.1%
Eye Disorders, NEC	\$ 1,783,958	\$ 1,858,730	4.2%	\$ 153.31	\$ 147.62	-3.7%
Neurological Disorders, NEC	\$ 905,662	\$ 1,702,919	88.0%	\$ 525.33	\$ 929.54	76.9%
ENT Disorders, NEC	\$ 1,144,108	\$ 1,558,452	36.2%	\$ 191.55	\$ 243.43	27.1%
Infections - Respiratory, NEC	\$ 568,144	\$ 1,547,438	172.4%	\$ 114.80	\$ 328.26	185.9%
Pregnancy w Vaginal Delivery	\$ 1,380,887	\$ 1,536,386	11.3%	\$ 4,729.06	\$ 4,892.95	3.5%
Mental Hlth - Depression	\$ 1,109,997	\$ 1,346,141	21.3%	\$ 483.24	\$ 578.49	19.7%
Injury - Knee	\$ 1,316,571	\$ 1,289,540	-2.1%	\$ 1,637.53	\$ 1,592.02	-2.8%
Chemotherapy Encounters	\$ 605,185	\$ 1,257,633	107.8%	\$ 10,617.29	\$ 21,315.81	100.8%
Infections, NEC	\$ 805,554	\$ 1,226,949	52.3%	\$ 334.53	\$ 482.67	44.3%
Cerebrovascular Disease	\$ 1,635,636	\$ 1,180,596	-27.8%	\$ 1,880.04	\$ 1,209.63	-35.7%
Cancer - Colon	\$ 1,384,793	\$ 1,179,856	-14.8%	\$ 8,876.88	\$ 7,762.21	-12.6%
Infections - ENT Ex Otitis Med	\$ 1,122,248	\$ 1,179,274	5.1%	\$ 129.83	\$ 139.41	7.4%
Top 25 Clinical Conditions	\$ 60,625,347	\$ 69,366,894	14.4%	\$ 555.81	\$ 601.20	8.2%
All Clinical Conditions (266)	\$ 109,322,728	\$ 121,471,940	11.1%	\$ 503.14	\$ 526.29	4.6%
Top Conditions as Pct of All	55.5%	57.1%		110.5%	114.2%	

Self-funded Top Hospitals by Net Pay Acute Apr 2006 - Mar 2007 (Incurred Basis)							
	Apr 2005 - Mar 2006	Apr 2006 - Mar 2007	As a % of All Hospitals	Admits - Acute	Length of Stay per Admit - Acute	Net Pay per Admit - Acute	Net Pay per Day - Acute
Washoe Med Ctr	\$ 8,675,742	\$ 9,103,758	21.8%	722	4.7	\$ 12,609	\$ 2,682
Carson Tahoe Hosp	\$ 4,660,694	\$ 5,200,905	12.5%	572	3.9	\$ 9,092	\$ 2,353
Sunrise Hosp & Med Ctr	\$ 2,254,131	\$ 2,135,621	5.1%	202	5.0	\$ 10,572	\$ 2,125
Stanford Hosp & Clinics	\$ 906,098	\$ 1,901,310	4.6%	14	6.4	\$ 135,808	\$ 21,126
Valley Hlth Ctr	\$ 1,408,669	\$ 1,726,515	4.1%	115	5.4	\$ 15,013	\$ 2,780
St Rose Dominican-Siena Campus	\$ 1,584,612	\$ 1,288,778	3.1%	172	3.7	\$ 7,493	\$ 2,046
Valley Hosp Med Ctr-Las Vegas	\$ 1,739,435	\$ 1,191,595	2.9%	93	5.4	\$ 12,813	\$ 2,364
Sierra Surgery And Imaging	\$ 940,451	\$ 1,161,910	2.8%	71	2.5	\$ 16,365	\$ 6,455
Elko General Hosp	\$ 741,282	\$ 1,080,424	2.6%	115	3.1	\$ 9,395	\$ 3,026
Hq Intermountain Hlth Care Inc	\$ 986,565	\$ 1,007,078	2.4%	95	3.6	\$ 10,601	\$ 2,980
Mountainview Hosp	\$ 1,210,016	\$ 979,377	2.4%	156	4.2	\$ 6,278	\$ 1,493
Univ Of California Davis Med Ctr	\$ 533,306	\$ 946,009	2.3%	18	7.2	\$ 52,556	\$ 7,333
Wmc-South Meadows	\$ 749,725	\$ 916,882	2.2%	95	5.5	\$ 9,651	\$ 1,743
Tahoe Pacific Hospital	\$ 318,377	\$ 720,194	1.7%	4	40.3	\$ 180,048	\$ 4,473
Desert Springs Hosp	\$ 972,525	\$ 710,522	1.7%	76	5.3	\$ 9,349	\$ 1,781
Univ Med Ctr-Las Vegas	\$ 1,144,091	\$ 504,857	1.2%	64	5.3	\$ 7,888	\$ 1,503
Univ Of Utah Hosps & Clinics	\$ 487,241	\$ 478,107	1.2%	22	6.1	\$ 21,732	\$ 3,542
Spring Valley Hospital Medical	\$ 492,768	\$ 461,606	1.1%	53	3.6	\$ 8,710	\$ 2,417
Santa Clara Valley Med Ctr *	\$ 279,783	\$ 460,594	1.1%	1	113.0	\$ 460,594	\$ 4,076
Churchill Community Hospital	\$ 343,424	\$ 446,342	1.1%	28	4.6	\$ 15,941	\$ 3,433
Northern Nevada Med Ctr	\$ 419,114	\$ 426,228	1.0%	35	5.9	\$ 12,178	\$ 2,069
St Marys Reg Med Ctr-Reno	\$ 505,170	\$ 414,749	1.0%	56	4.8	\$ 7,406	\$ 1,542
St Rose Dominican-Delima Campus	\$ 469,850	\$ 351,367	0.8%	63	3.3	\$ 5,577	\$ 1,681
Nasir Uddin Md *	\$ 336,305	\$ 337,309	0.8%	55	2.1	\$ 6,133	\$ 2,908
Dean Yarbro *	\$ 155,534	\$ 317,684	0.8%	36	5.0	\$ 8,825	\$ 1,765
Top 25 Hospitals		\$ 34,269,721	82.2%	2,933	** 13,084	\$ 11,684	\$ 2,619
All Other Hospitals		\$ 7,431,166	17.8%	737	3,796	\$ 10,083	\$ 1,958
All Hospitals		\$ 41,700,887	100.0%	3,670	16,880	\$ 11,363	\$ 2,470
Top Hospitals as Pct of All Hospitals			82.2%	79.9%	77.5%		

* These hospitals were ranked lower than 25 in the period Apr 2005 -Mar 2006

** Total Days Admit Acute

**Self-funded Medical - Highest 25 Net Pay Claims
Apr 2006 - Mar 2007
(Incurred Basis)**

Person Relationship	Person Gender	Person Age Group	High Cost Diagnosis	Paid
Spouse/Partner	Female	Ages 40-44	Sarcoidosis	\$ 1,728,869
Child/Other Dependent	Male	Ages 15-17	Antineoplastic Chemo Enc	\$ 750,754
Child/Other Dependent	Male	Ages 18-19	Rehabilitation Proc NEC	\$ 721,586
Spouse/Partner	Female	Ages 65-74	Acute Respiratry Failure	\$ 620,121
Employee/Self	Female	Ages 50-54	End Stage Renal Disease	\$ 593,468
Employee/Self	Male	Ages 50-54	Acute Respiratry Failure	\$ 477,614
Employee/Self	Female	Ages 45-49	End Stage Renal Disease	\$ 445,039
Employee/Self	Male	Ages 60-64	Parox Ventric Tachycard	\$ 442,538
Employee/Self	Male	Ages 60-64	Metabolic Encephalopathy	\$ 419,252
Employee/Self	Female	Ages 55-59	End Stage Renal Disease	\$ 409,939
Child/Other Dependent	Male	Ages 1-4	Tetralogy of Fallot	\$ 408,259
Child/Other Dependent	Female	Ages < 1	Twin-Mate LB-Hosp wo Cs	\$ 399,839
Child/Other Dependent	Female	Ages < 1	Twin-Mate LB-In Hos w Cs	\$ 398,125
Spouse/Partner	Female	Ages 60-64	End Stage Renal Disease	\$ 375,597
Child/Other Dependent	Female	Ages < 1	Preterm NEC 1000-1249g	\$ 365,984
Employee/Self	Male	Ages 60-64	Malfunc Card Dev/Grf NEC	\$ 333,119
Employee/Self	Male	Ages 65-74	Acute Respiratry Failure	\$ 311,844
Child/Other Dependent	Male	Ages < 1	Oth Mult LB-In Hosp w Cs	\$ 310,429
Spouse/Partner	Female	Ages 55-59	AMI Lateral NEC, Initial	\$ 299,912
Employee/Self	Male	Ages 45-49	Ac Duodenal Ulcer w Perf	\$ 297,077
Employee/Self	Male	Ages 35-39	End Stage Renal Disease	\$ 293,870
Employee/Self	Male	Ages 50-54	End Stage Renal Disease	\$ 280,764
Employee/Self	Male	Ages 50-54	Malignant Neo Colon NOS	\$ 264,925
Child/Other Dependent	Female	Ages 18-19	Septicemia NOS	\$ 260,595
Spouse/Partner	Female	Ages 60-64	Subarachnoid Hemorrhage	\$ 260,139
Top 25 Patients		25		\$ 11,469,659
All Members		45,698		\$ 127,279,587
Top Patients as Pct of All Members		0.05%		9.01%

Chronic Conditions and Wellness

Chronic conditions account for 12.6% of all clinical conditions and 18.5% of all admits acute. The largest increases were in depression, diabetes and arthritis.

Self-Funded Net Pay Medical by Top Chronic Conditions (Incurred Basis)				
	Apr 2005 - Mar 2006	Apr 2006 - Mar 2007	% Change	
Osteoarthritis	\$5,319,564	\$5,586,559	5.0%	
Coronary Artery Disease	\$4,516,692	\$4,242,845	-6.1%	
Mental Hlth - Depression	\$1,109,997	\$1,346,141	21.3%	
Diabetes	\$889,534	\$1,080,677	21.5%	
Hypertension, Essential	\$765,838	\$797,928	4.2%	
Rheumatoid Arthritis	\$359,662	\$434,712	20.9%	
Chronic Obstruc Pulm Dis(COPD)	\$509,351	\$423,006	-17.0%	
Asthma	\$384,545	\$409,470	6.5%	
Congestive Heart Failure	\$573,116	\$378,286	-34.0%	
Mental Hlth - Bipolar Disorder	\$299,982	\$354,009	18.0%	
Mental Hlth - Anxiety Disorder	\$130,109	\$147,445	13.3%	
HIV Infection	\$8,514	\$81,302	854.9%	
	\$ 14,866,904	\$ 15,282,380	2.8%	
Summary (Apr 2006 - Mar 2007)	Net Pay Med	Admits Acute	Visits OP Fac Med	Visits Office Med
Chronic Conditions	\$15,282,381	677	4,390	52,307
All Clinical Conditions	\$121,471,944	3,670	40,497	334,848
Chronic Conditions as Percent of All Clinical Conditions	12.58%	18.45%	10.84%	15.62%

Of the five wellness screenings listed below, the number screenings has increased 9.1%. However, the rate of screenings for eligible members has remained fairly steady. The number of well baby and well child visits has remained fairly steady while the rate per eligible member has decreased.

Self-funded Wellness Utilization (Incurred Basis)						
Measures	Apr 2005 - Mar 2006		Apr 2006 - Mar 2007		% Change	
	Screenings Completed	Rates	Screenings Completed	Rates	Screenings Completed	Rates
Cervical Cancer	6,636	47.2%	6,986	45.6%	5.3%	-1.6%
Cholesterol	10,492	31.3%	11,591	31.9%	10.5%	0.6%
Colon Cancer	3,478	20.1%	3,787	19.5%	8.9%	-0.6%
Mammogram	3,929	54.9%	4,359	52.7%	10.9%	-2.2%
PSA	2,567	29.1%	2,835	29.2%	10.4%	0.1%
	27,102	33.5%	29,558	33.2%	9.1%	-0.3%
	Visits	Visits per 1000	Visits	Visits per 1000	Visits	Visits per 1000
Visits Well Baby	1,920	4,807	1,931	4,754	0.6%	-1.1%
Visits Well Child	873	574	876	546	0.3%	-4.9%

Recommendations

None.