

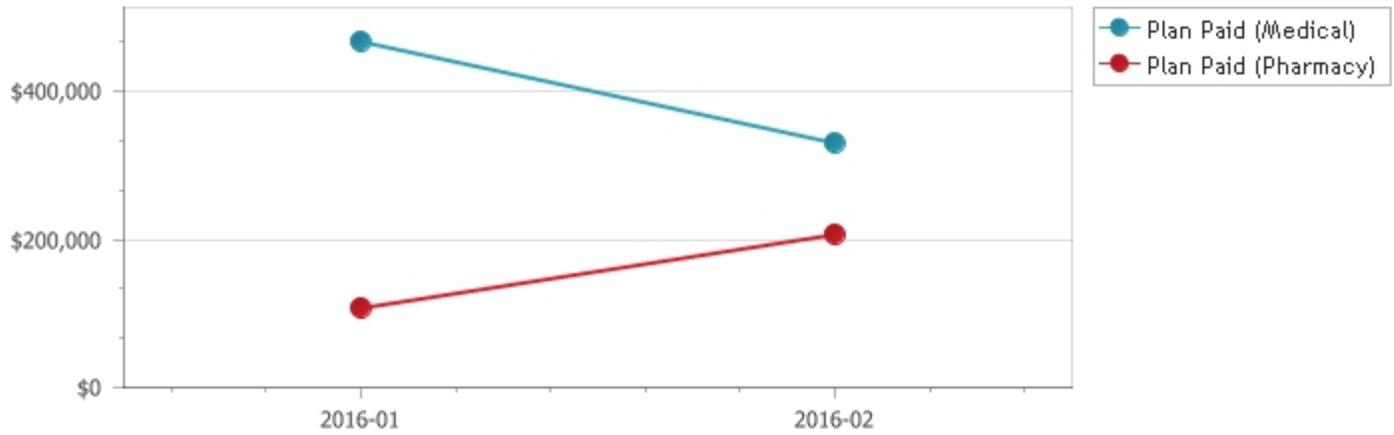


City and County of Broomfield

Strategic Health Plan Report

Paid Date: 01/01/2016 thru 12/31/2016
Created Date: 03/22/2016 at 2:11 PM

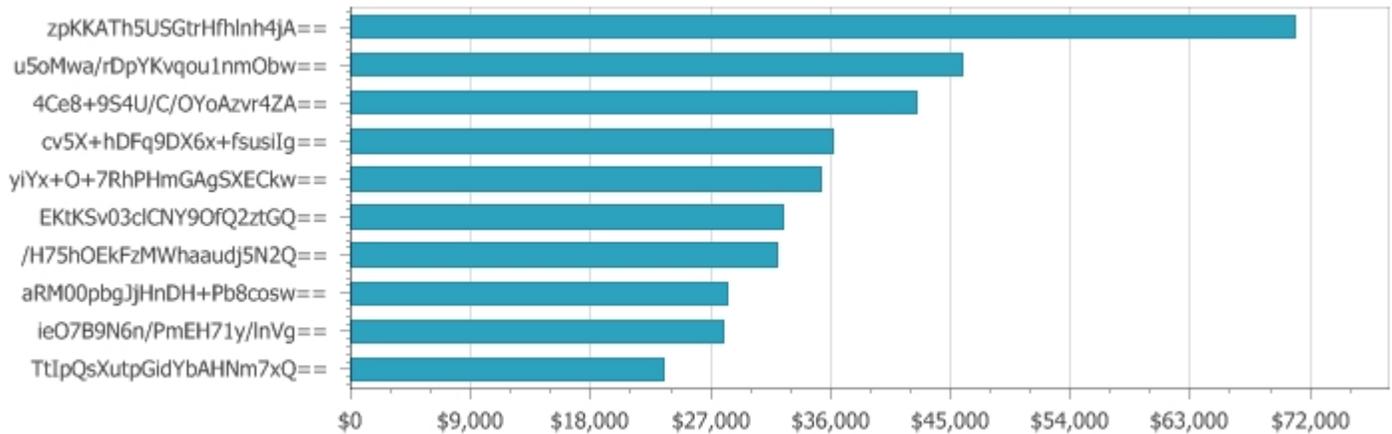
Aggregate Report (Paid)



MONTH PAID	# OF ENROLLED MEMBERS	# OF ENROLLED EMPLOYEES	# OF ENROLLED DEPENDENTS	PLAN PAID (PHARMACY)	PLAN PAID (MEDICAL)	MEMBER PAID (PHARMACY)	MEMBER PAID (MEDICAL)	# OF CLAIM SERVICE LINES
2016-01	1,305	539	766	\$106,139.95	\$466,444.27	\$13,719.13	\$53,122.91	4,588
2016-02	1,305	539	766	\$205,940.07	\$330,529.46	\$14,357.88	\$54,839.82	4,111
	1,305	539	766	\$312,080.02	\$796,973.73	\$28,077.01	\$107,962.73	8,699

Paid: 1/1/2016 to 12/31/2016

Top 10 Claimants



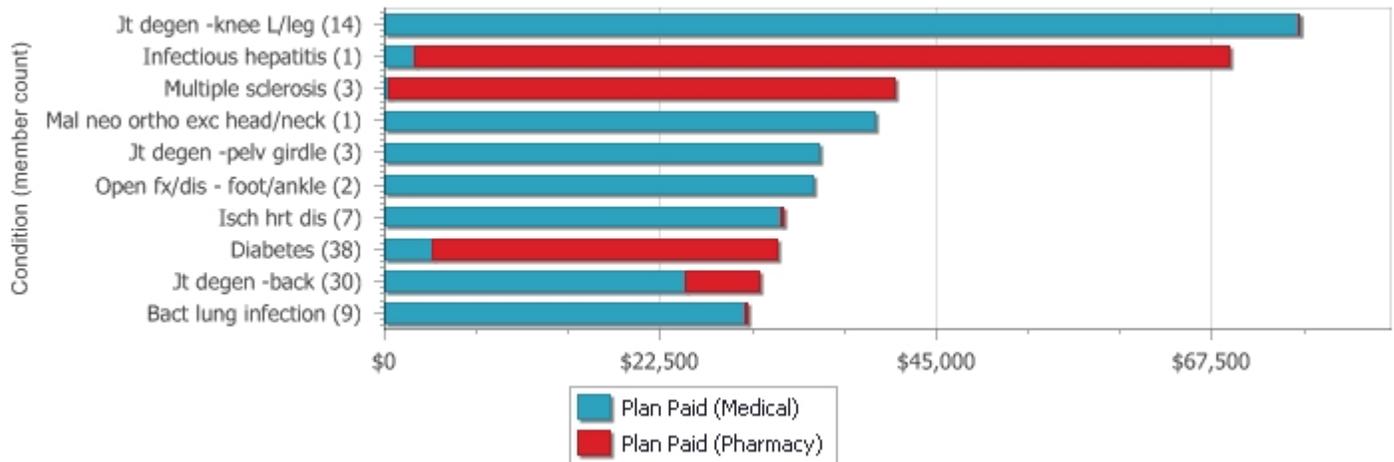
MEMBER ID	PLAN PAID	MEMBER PAID	% PLAN PAID OF TOTAL PLAN PAID	AGE	M/F	REL	TOP CONDITION
zpKKATh5USGtrHfhlnh4jA==	\$70,810.50	\$887.58	6.4 %	56	F	E	Infectious hepatitis, wo comp, wo comorb
u5oMwa/rDpYKvqou1nmObw==	\$45,934.93	\$3,500.00	4.1 %	37	F	S	Open fx/dis - foot/ankle
4Ce8+9S4U/C/OYoAzvr4ZA==	\$42,402.02	\$739.01	3.8 %	59	F	S	Mal neo ortho exc head/neck, wo surg, w a/m
cv5X+hDFq9DX6x+fsusiIg==	\$36,207.64	\$474.68	3.3 %	63	F	E	Jt degen -knee L/leg, wo comp, w comorb, w surg
yiYx+O+7RhPHmGAgSXECkw==	\$35,299.09	\$3,540.00	3.2 %	61	M	E	Jt degen -pelv girdle, wo comp, wo comorb, w surg
EKtKSv03clCNY9OfQ2ztGQ==	\$32,516.21	\$1,138.20	2.9 %	62	M	E	Minor bact skin infection, wo comp, w comorb
/H75hOEKfzMWhaaudj5N2Q==	\$32,055.20	\$2,674.28	2.9 %	56	M	S	Isch hrt dis, w comp, wo comorb, w angio
aRM00pbgJjHnDH+Pb8cosw==	\$28,219.17	\$972.93	2.5 %	42	M	E	Septicemia, wo comp, wo surg
ieO7B9N6n/PmEH71y/lnVg==	\$27,980.39	\$2,917.23	2.5 %	60	M	E	Jt degen -knee L/leg, wo comp, wo comorb, w surg
TtlpQsXutpGidYbAHNm7xQ==	\$23,498.03	\$385.52	2.1 %	46	F	S	Jt degen -neck, w comp, wo comorb, w surg
Remaining Members	\$734,130.57	\$118,810.31	66.2 %				

Paid: 1/1/2016 to 12/31/2016

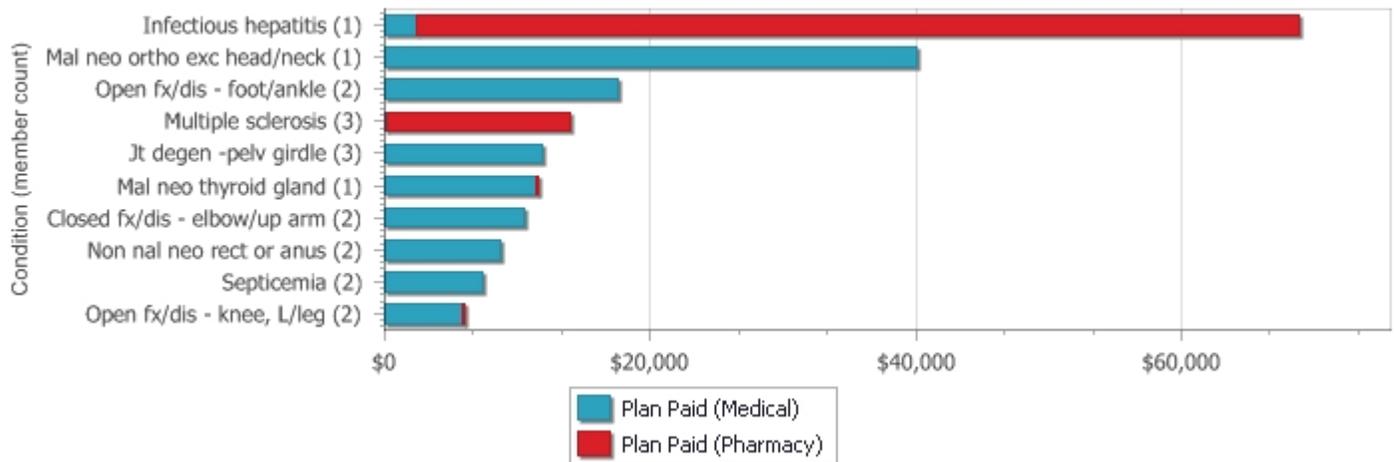
Top 10 Conditions



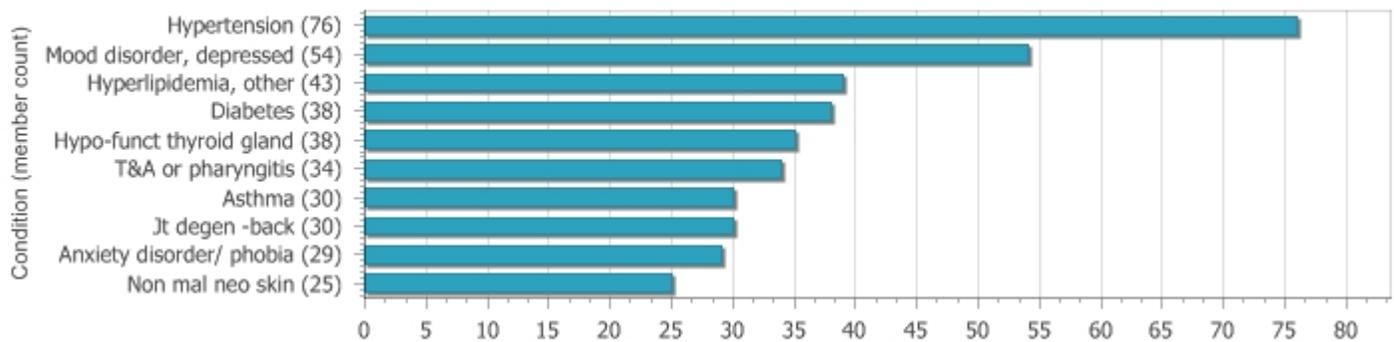
Top 10 Conditions By Total Paid



Top 10 Conditions By Average Plan Paid Per Member



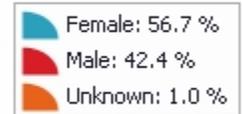
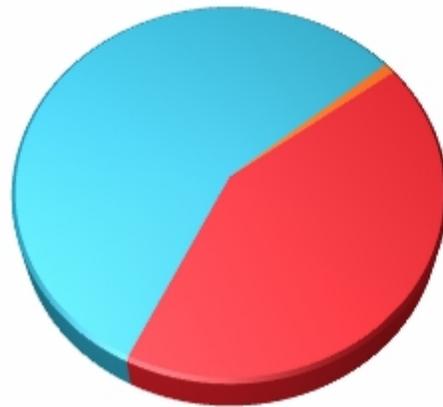
Top 10 Conditions By Prevalence*



*prevalence(n): the total number of episodes of care in a given population.

Paid: 1/1/2016 to 12/31/2016

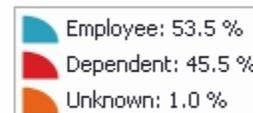
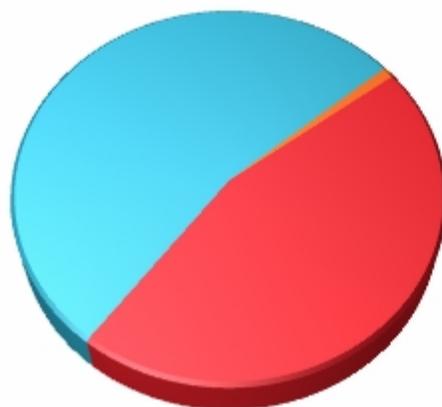
Gender Analysis



GENDER	PLAN PAID	% PLAN PAID OF TOTAL PLAN PAID	# OF CLAIMS	AVG CLAIM SERVICE LINE PLAN PAID	PER MEMBER PER MONTH
Female	\$628,637.74	56.68 %	2,739	\$229.51	\$177.78
Male	\$469,871.81	42.37 %	1,862	\$252.35	\$132.88
Unknown	\$10,544.20	0.95 %	89	\$118.47	\$2.98
	\$1,109,053.75		4,690	\$155.11	\$313.63

Paid: 1/1/2016 to 12/31/2016

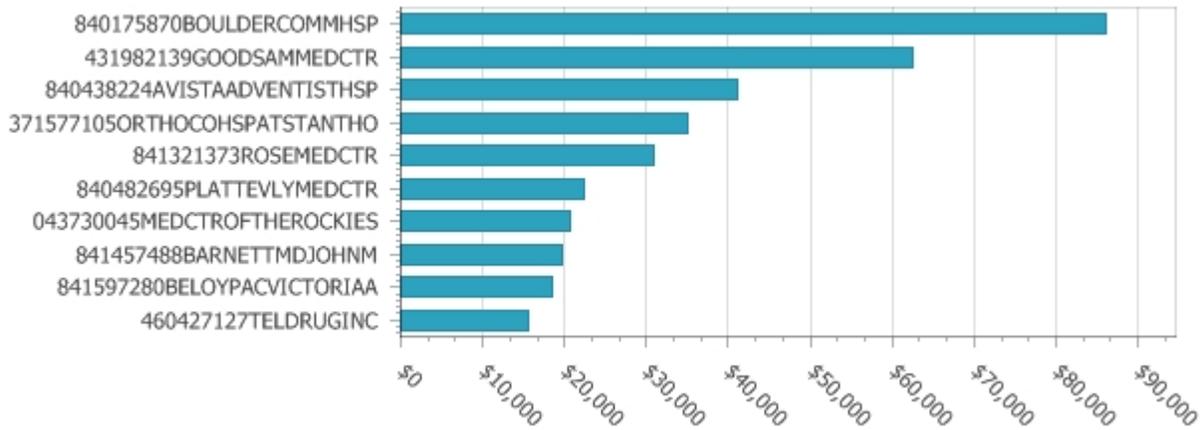
Employee Vs. Dependent



EMPLOYEE OR DEPENDENT	PLAN PAID	% PLAN PAID OF TOTAL PLAN PAID	MEMBER PAID	# OF CLAIMS	PMPM
Employee	\$593,459.29	53.5 %	\$65,537.05	2,347	\$167.83
Dependent	\$505,050.26	45.5 %	\$68,288.19	2,254	\$142.83
Unknown	\$10,544.20	1.0 %	\$2,214.50	89	\$2.98
	\$1,109,053.75		\$136,039.74	4,690	\$313.63

Paid: 1/1/2016 to 12/31/2016

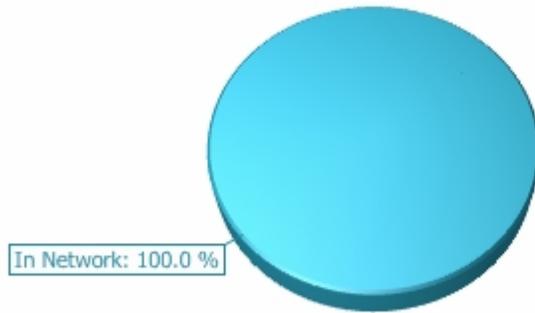
Top 10 Providers



CODE	PROVIDER NAME	NETWORK CATEGORY	PLAN PAID	% PLAN PAID OF TOTAL PLAN PAID	MEMBER PAID	# OF CLAIMS	# OF CLAIMANTS
840175870BOULDERCOMMHSP	BOULDER COMM HSP 840175870	Yes	\$86,013.98	10.8 %	\$5,773.47	42	31
431982139GOODSAMMEDCTR	GOOD SAM MED CTR 431982139	Yes	\$62,503.06	7.8 %	\$5,435.84	17	14
840438224AVIS TAADVENTISTHSP	AVISTA ADVENTIST HSP 840438224	Yes	\$41,192.56	5.2 %	\$6,835.28	31	23
371577105ORTHOHS PATSTANTHO	ORTHO CO HSP AT ST ANTHO 371577105	Yes	\$34,934.39	4.4 %	\$2,507.61	1	1
841321373ROSEMEDCTR	ROSE MED CTR 841321373	Yes	\$30,814.00	3.9 %	\$0.00	1	1
840482695PLATTEVLYMEDCTR	PLATTE VLY MED CTR 840482695	Yes	\$22,365.16	2.8 %	\$1,696.15	6	4
043730045MEDCTROFHEROCKIES	MED CTR OF THE ROCKIES 043730045	Yes	\$20,747.03	2.6 %	\$2,260.95	1	1
841457488BARNETTMDJOHNM	BARNETT MD JOHN M 841457488	Yes	\$19,810.41	2.5 %	\$200.00	8	1
841597280BELOYPACVICTORIAA	BELOY PAC VICTORIA A 841597280	Yes	\$18,504.68	2.3 %	\$0.00	1	1
460427127TELD RUG INC	TEL DRUG INC 460427127	Yes	\$15,445.19	1.9 %	\$0.00	4	4
Remaining Providers			\$444,643.27	55.8 %	\$83,253.43	2,342	1,627

Paid: 1/1/2016 to 12/31/2016

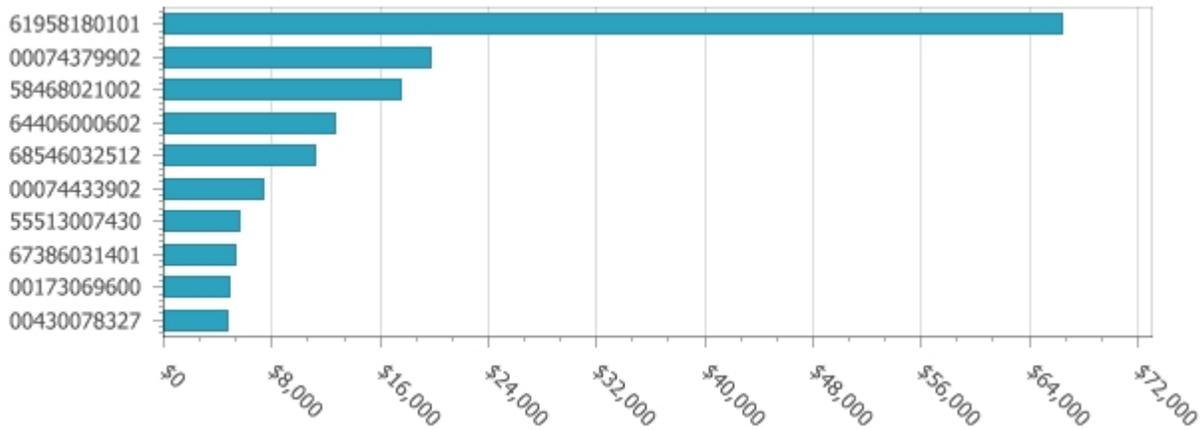
In Vs Out Of Network



NETWORK CATEGORY	PLAN PAID	% PLAN PAID OF TOTAL PLAN PAID	# OF CLAIM SERVICE LINES	AVG CLAIM SERVICE LINE PLAN PAID
In Network	\$797,381.11	100.1 %	6,260	\$127.38
Out of Network	(\$407.38)	-0.1 %	196	(\$2.08)
	\$796,973.73		6,456	\$123.45

Paid: 1/1/2016 to 12/31/2016

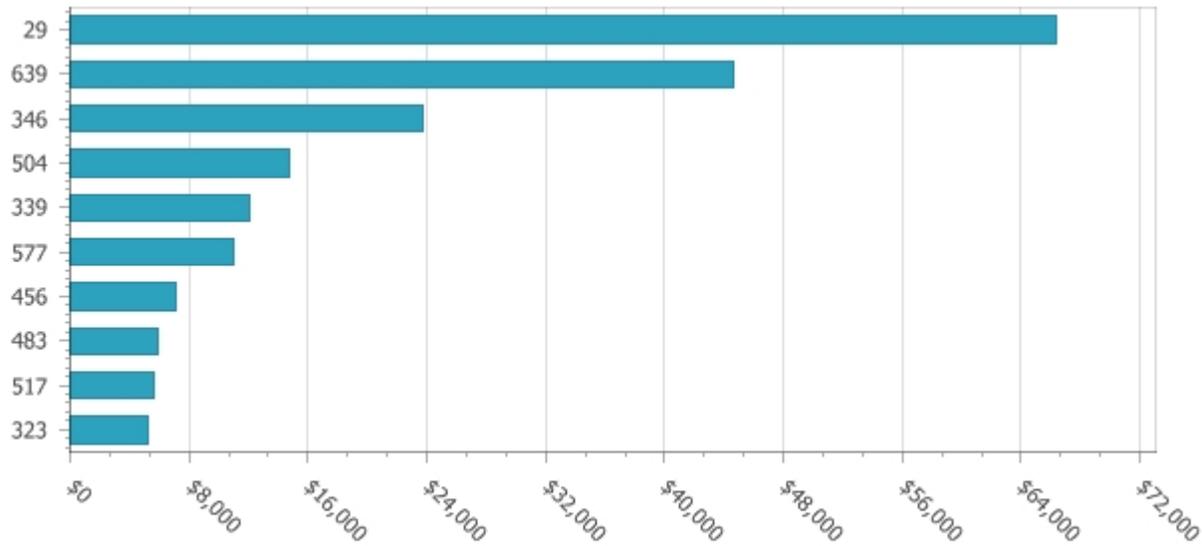
Top 10 NDC by Plan Paid



NDC DESCRIPTION (DRUG NAME)	PLAN PAID	% PLAN PAID OF TOTAL PLAN PAID	MEMBER PAID	# OF CLAIMANTS	TOP CONDITION
Harvoni	\$66,414.28	21.3 %	\$100.00	1	Infectious hepatitis, wo comp, wo comorb
Humira	\$19,724.00	6.3 %	\$450.00	2	Psoriasis, w comp, wo comorb
Aubagio	\$17,510.22	5.6 %	\$225.00	1	Multiple sclerosis, wo surg
Tecfidera	\$12,601.56	4.0 %	\$100.00	1	Multiple sclerosis, wo surg
COPAXONE	\$11,184.58	3.6 %	\$300.00	1	Multiple sclerosis, wo surg
Humira	\$7,406.14	2.4 %	\$300.00	1	Psoriasis, wo comp, wo comorb
Sensipar	\$5,610.37	1.8 %	\$225.00	1	Mal neo parathyroid gland, wo surg wo a/m
Onfi	\$5,317.72	1.7 %	\$300.00	1	Epilepsy, wo comp, wo comorb, wo surg
ADVAIR	\$4,931.49	1.6 %	\$0.00	7	Asthma, wo comp, wo comorb
ASACOL HD	\$4,772.83	1.5 %	\$200.00	2	Inflam bowel disease, w comp, wo comorb, wo surg
Remaining NDC Codes	\$156,606.83	50.2 %	\$25,877.01	1,677	

Paid: 1/1/2016 to 12/31/2016

Top 10 Drug Classes



THERAPEUTIC CLASS	PLAN PAID	MEMBER PAID	TOTAL PAID (MAIL ORDER)	TOTAL PAID (RETAIL)	# OF CLAIMANTS
Hepatitis C antivirals	\$66,414.28	\$100.00	\$32,681.88	\$33,832.40	1
Immunologics, immunomodulator	\$44,640.36	\$975.00	\$45,615.36	\$0.00	4
Neurodegenerative disorders drug therapy	\$23,786.14	\$400.00	\$24,186.14	\$0.00	2
Insulin	\$14,780.05	\$0.00	\$6,601.44	\$8,178.61	14
Anticonvulsants, miscellaneous	\$12,108.46	\$985.18	\$6,007.67	\$7,085.97	27
Inhaled respiratory agent combinations	\$10,939.45	\$0.00	\$7,702.38	\$3,237.07	15
Inflammatory bowel disease drug therapy	\$7,081.26	\$470.00	\$6,173.96	\$1,377.30	5
Contraceptive hormones	\$5,841.26	\$200.00	\$1,107.33	\$4,933.93	79
Parathyroid disease drug therapy	\$5,610.37	\$225.00	\$0.00	\$5,835.37	1
Antipsychotics	\$5,208.67	\$963.94	\$2,800.68	\$3,371.93	9
Remaining Drug Classes	\$113,785.66	\$23,442.09	\$32,015.79	\$105,211.96	1,345

Paid: 1/1/2016 to 12/31/2016

Formulary Vs. Non-Formulary



FORMULARY?	PLAN PAID	% PLAN PAID OF TOTAL PLAN PAID	MEMBER PAID	# OF CLAIMANTS	# OF CLAIM SERVICE LINES	PER EMPLOYEE PER MONTH
Non-Formulary	\$126,650.72	40.6 %	\$22,605.14	571	1,989	\$86.72
Formulary	\$185,429.30	59.4 %	\$5,471.87	130	254	\$126.96
	\$312,080.02		\$28,077.01		2,243	\$213.68

Paid: 1/1/2016 to 12/31/2016