Attachment A

Financial

Previous Period: Jan 2023 - Dec 2023 (Incurred)
Current Period: Jan 2024 - Dec 2024 (Incurred)

	Net Payment		Net Payment PMPM		
	Previous	Current	Previous	Current	% Change
Dental	$62M	$66M	$21.5	$22.2	3.6% ▲
Drug (RX)	$396M	$415M	$136.7	$140.0	2.4% ▲
Medical	$1.56B	$1.72B	$538.1	$580.8	7.9% ▲
Total	**$2.02B**	**$2.2B**	**$696.3**	**$743.1**	**6.7%** ▲

Actives

	Net Payment		Net Payment PMPM		
	Previous	Current	Previous	Current	% Change
Dental	$49M	$52M	$20.9	$21.7	3.4% ▲
Drug (RX)	$333M	$353M	$141.9	$146.5	3.2% ▲
Medical	$1.24B	$1.38B	$529.1	$571.5	8.0% ▲
Total	**$1.62B**	**$1.78B**	**$692.0**	**$739.7**	**6.9%** ▲

Early Retirees

	Net Payment		Net Payment PMPM		
	Previous	Current	Previous	Current	% Change
Dental	$2M	$2M	$21.4	$22.5	5.0% ▲
Drug (RX)	$26M	$27M	$240.9	$273.9	13.7% ▲
Medical	$0.1B	$0.1B	$926.6	$970.4	4.7% ▲
Total	**$0.13B**	**$0.12B**	**$1,188.9**	**$1,266.8**	**6.5%** ▲

Medicare Retirees

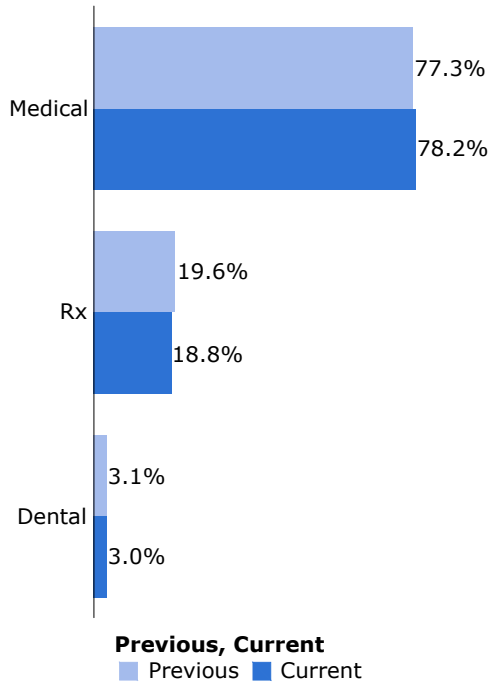
	Net Payment		Net Payment PMPM		
	Previous	Current	Previous	Current	% Change
Dental	$11M	$11M	$24.3	$25.4	4.5% ▲
Drug (RX)	$35M	$33M	$80.6	$74.1	-8.0% ▼
Medical	$0.21B	$0.24B	$487.4	$543.1	11.4% ▲
Total	**$0.26B**	**$0.29B**	**$592.3**	**$642.6**	**8.5%** ▲

© Copyright Merative 2025

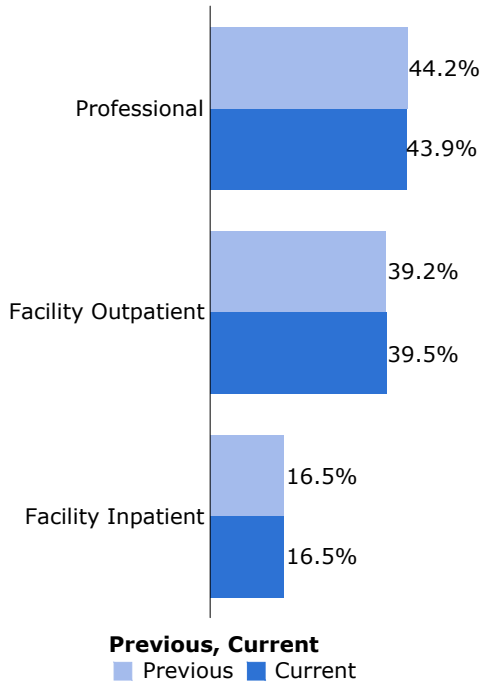
Financial

Previous Period: Jan 2023 - Dec 2023 (Incurred)
Current Period: Jan 2024 - Dec 2024 (Incurred)

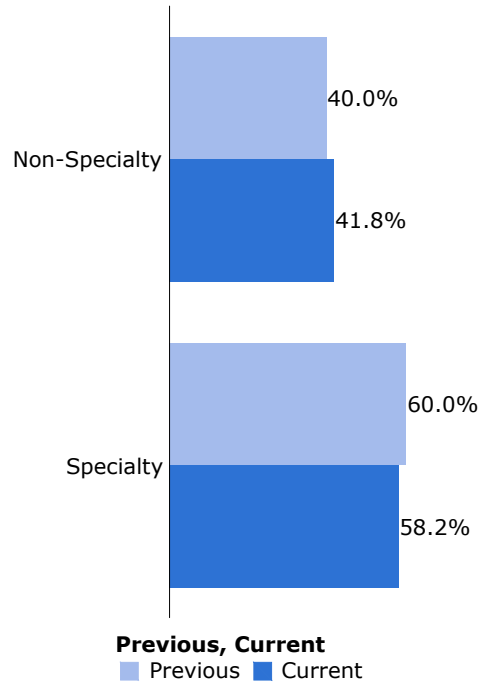
Net Payment by Summary Categories



Net Payment by Medical Service Categories



Net Payment by Non-Specialty vs Specialty Drugs



© Copyright Merative 2025

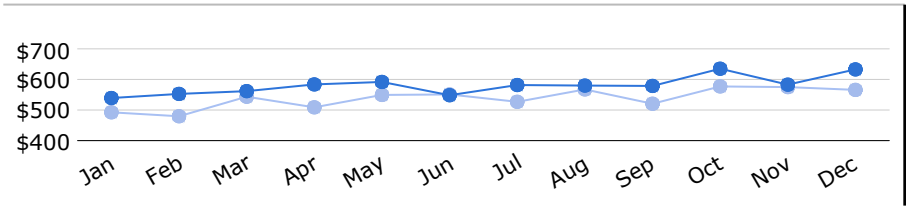
Financial

Previous Period: Jan 2023 - Dec 2023 (Incurred)
Current Period: Jan 2024 - Dec 2024 (Incurred)

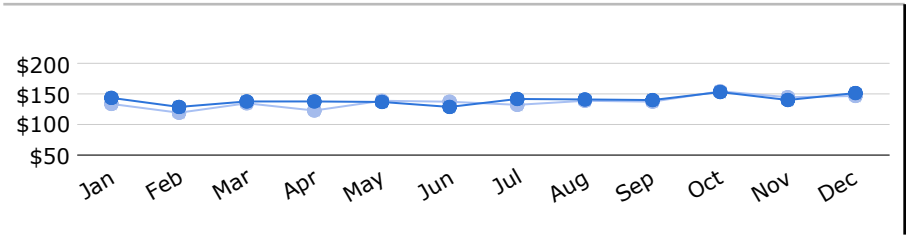
Net Payment Per Member Trends by Benefit Categories

Previous Current

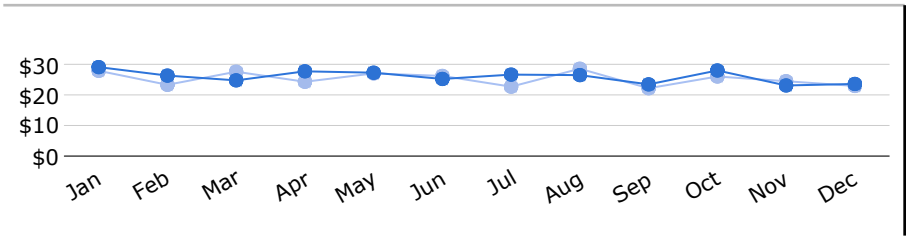
Net Pay PMPM Med



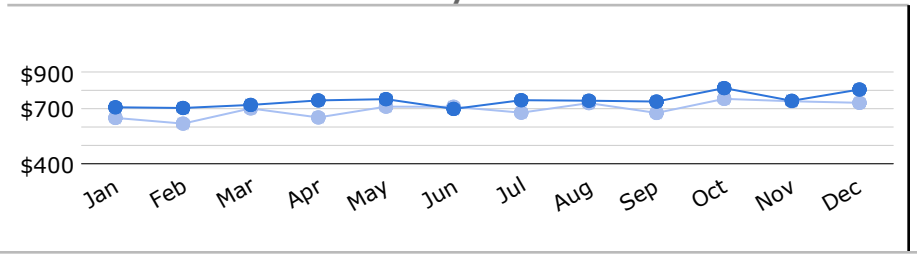
Net Pay PMPM Rx



Net Pay PMPM Dental



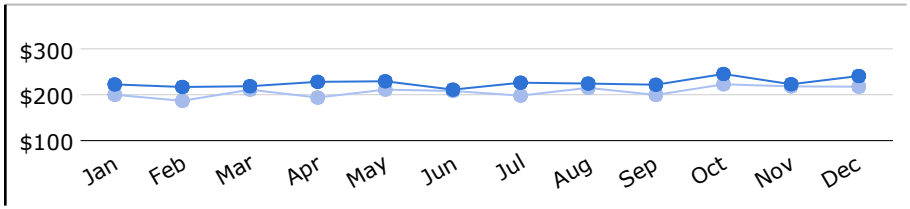
Net Pay PMPM



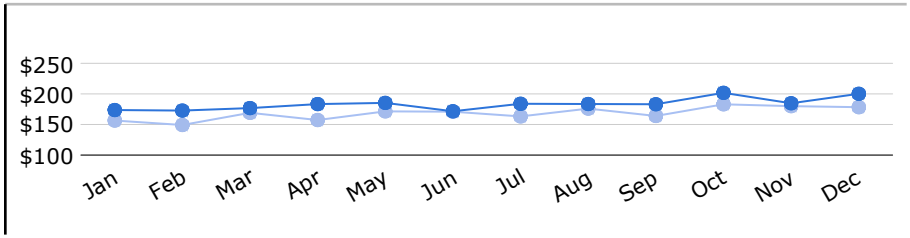
Cost Share Monthly Trends

Previous Current

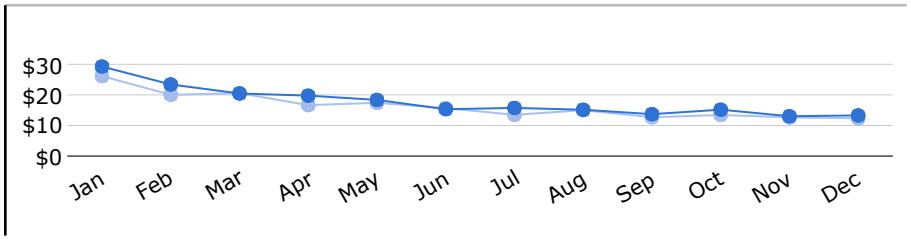
Allowed Amount (in Millions)



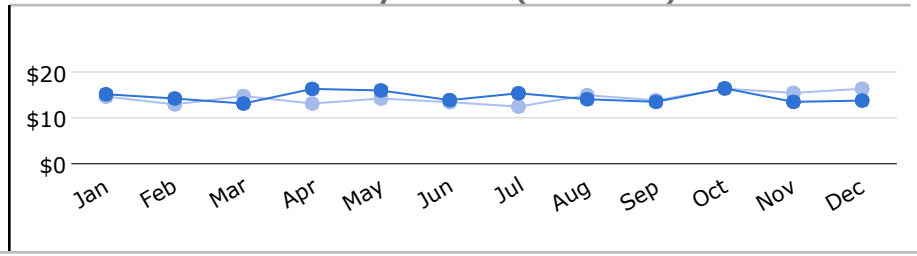
Net Payment (in Millions)



Out of Pocket (in Millions)



Third Party Amount (in Millions)



© Copyright Merative 2025

Financial

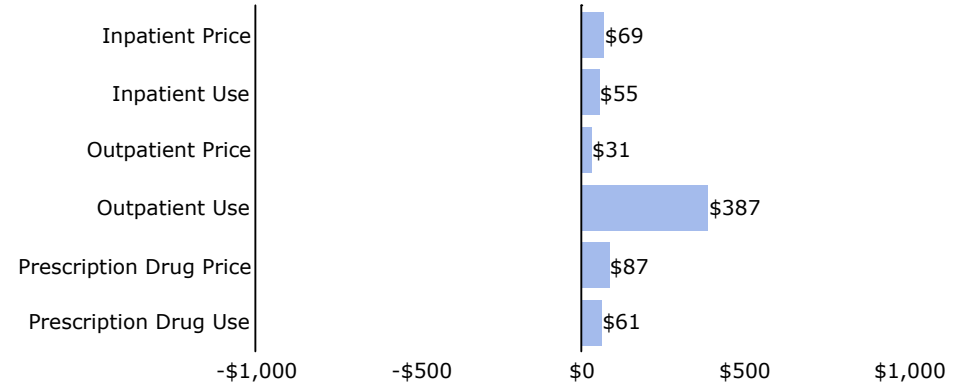
Previous Period: Jan 2023 - Dec 2023 (Incurred)
Current Period: Jan 2024 - Dec 2024 (Incurred)

Cost Per Member/Patient

	Previous	Current	% Change		Norm	% Difference from Norm	
Allow Amt PMPY Med and Rx	$9,984	$10,674	6.9%	▲	$8,682	22.9%	▲
Allow Amt Per Adm Acute	$24,772	$25,593	3.3%	▲	$37,434	-31.6%	▼
Allow Amt Per Pat OP Med	$6,405	$6,762	5.6%	▲	$6,046	11.8%	▲
Allow Amt Per Script Rx	$198	$205	3.2%	▲	$212	-3.6%	▼
Admits Per 1000 Acute	61	63	2.6%	▲	49	29.2%	▲
OP Events Per 1000	363	389	7.1%	▲			
Scripts Per 1000 Rx	12,243	12,385	1.2%	▲	8,046	53.9%	▲

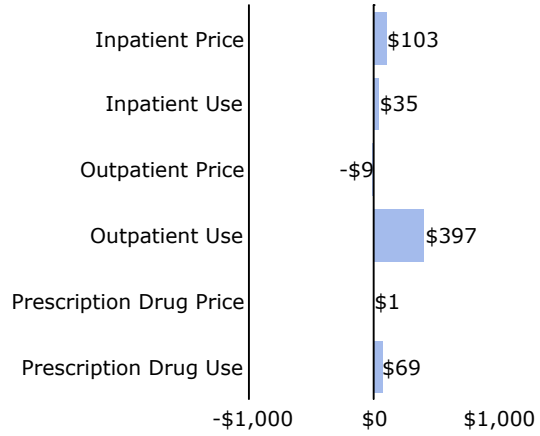
Cost Drivers

Allowed Amount PMPY increased $689 in the current period.
The factors driving this change include:



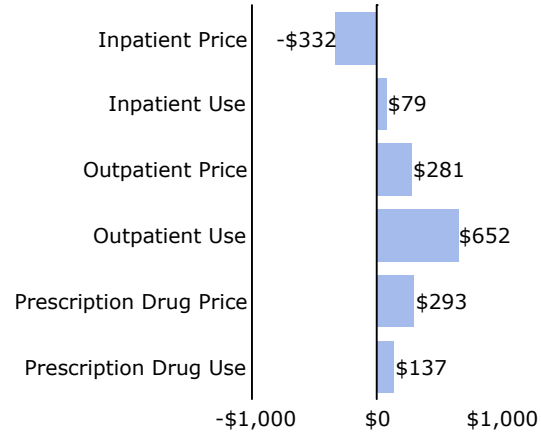
Actives
(81% of GHIP)

Allowed Amount PMPY increased $596 in the current period.
The factors driving this change include:



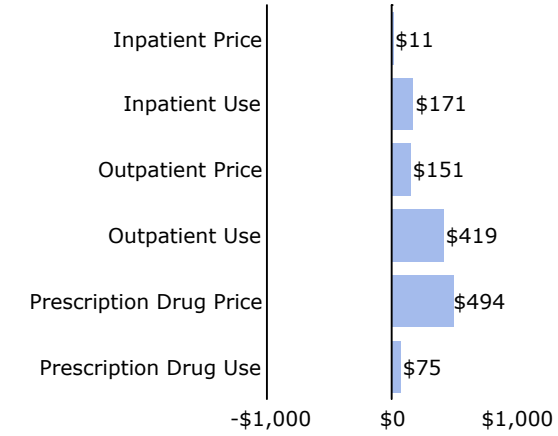
Early Retirees
(3% of GHIP)

Allowed Amount PMPY increased $1,111 in the current period.
The factors driving this change include:



Medicare Retirees
(15% of GHIP)

Allowed Amount PMPY increased $1,320 in the current period.
The factors driving this change include:



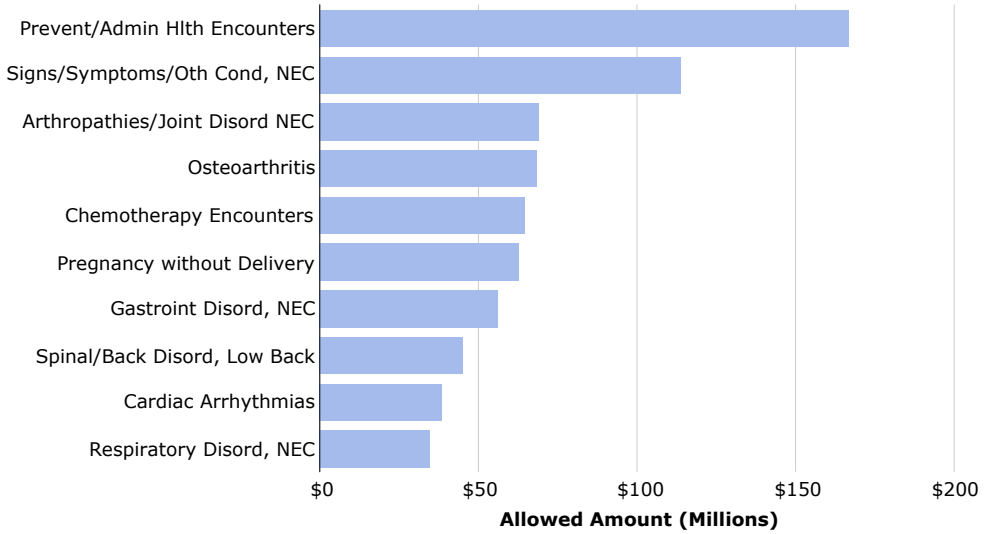
Note: Employee Status of 'Other' is excluded.

© Copyright Merative 2025

Clinical

Previous Period: Jan 2023 - Dec 2023 (Incurred)
Current Period: Jan 2024 - Dec 2024 (Incurred)

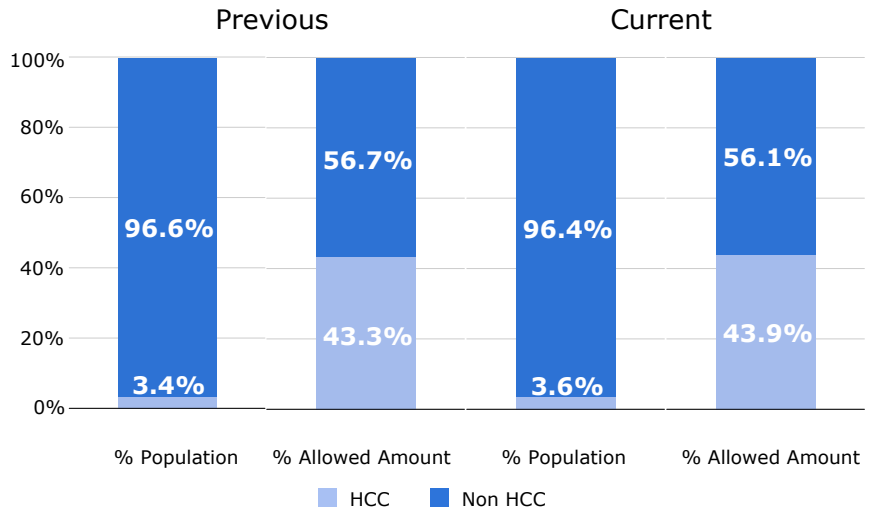
10 Most Expensive Clinical Conditions



	Allow Amt Med	% of Total	+Patients	**Allow Amt Per Patient Med
Prevent/Admin Hlth Encounters	$166,599,617	8.3%	174,789	$953
Signs/Symptoms/Oth Cond, NEC	$113,621,917	5.7%	78,041	$1,456
Arthropathies/Joint Disord NEC	$68,992,612	3.5%	51,518	$1,339
Osteoarthritis	$68,397,828	3.4%	18,468	$3,704
Chemotherapy Encounters	$64,487,378	3.2%	1,228	$52,514
Pregnancy without Delivery	$62,599,507	3.1%	4,956	$12,631
Gastroint Disord, NEC	$55,933,069	2.8%	26,761	$2,090
Spinal/Back Disord, Low Back	$45,016,946	2.3%	26,283	$1,713
Cardiac Arrhythmias	$38,436,675	1.9%	14,395	$2,670
Respiratory Disord, NEC	$34,711,856	1.7%	22,664	$1,532
Top 10 Subtotal	**$718,797,405**	**36.0%**	**204,648**	**$3,512**
All Clinical Conditions	**$1,998,196,641**	**100.0%**	**249,866**	**$7,997**

+Patient counts may not be unique since some patients have multiple conditions.

High Cost Claimants (HCC) Trends



Top 10 Conditions for *Consistent HCC

	Allow Amt Med	Patients	**Allow Amt Per Patient Med
Chemotherapy Encounters	$38,216,717	473	$80,796
Renal Function Failure	$20,867,614	467	$44,684
Signs/Symptoms/Oth Cond, NEC	$15,542,118	3,074	$5,056
Condition Rel to Tx - Med/Surg	$9,475,949	569	$16,654
Multiple Sclerosis	$8,928,817	208	$42,927
Cancer - Leukemia	$8,028,798	214	$37,518
Osteoarthritis	$7,267,293	993	$7,319
Infections, NEC	$7,250,231	767	$9,453
Neurological Disorders, NEC	$7,170,590	920	$7,794
Crohns Disease	$6,793,326	304	$22,346

HCC: defined as member with allowed amount >= $50K.
*Consistent HCC: in addition, member must meet the HCC requirement for each of the last 2 Incurred Rolling years.

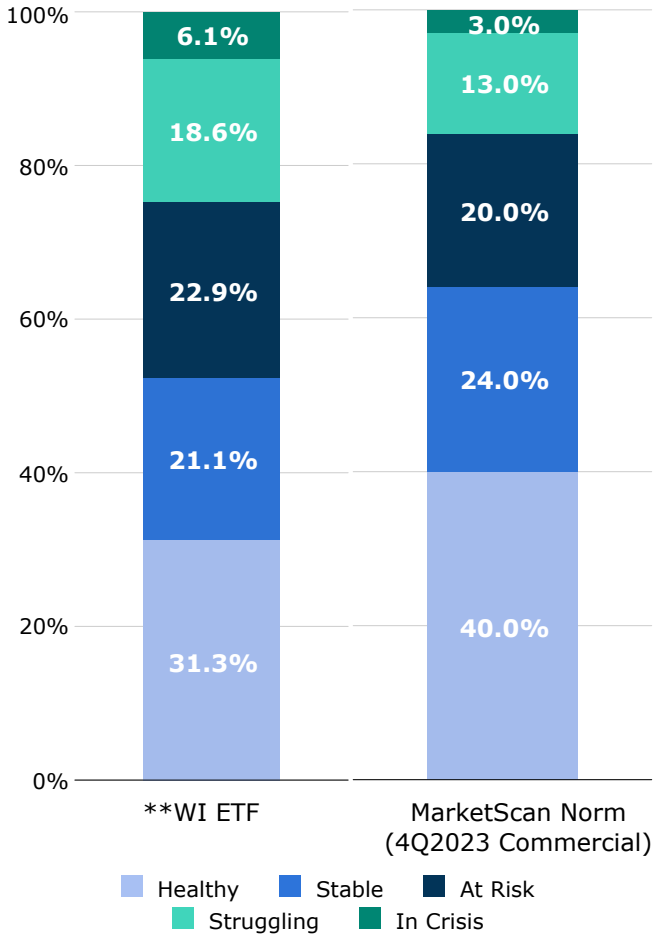
**Only costs associated with this condition in the current period, patients may have multiple conditions.

© Copyright Merative 2025

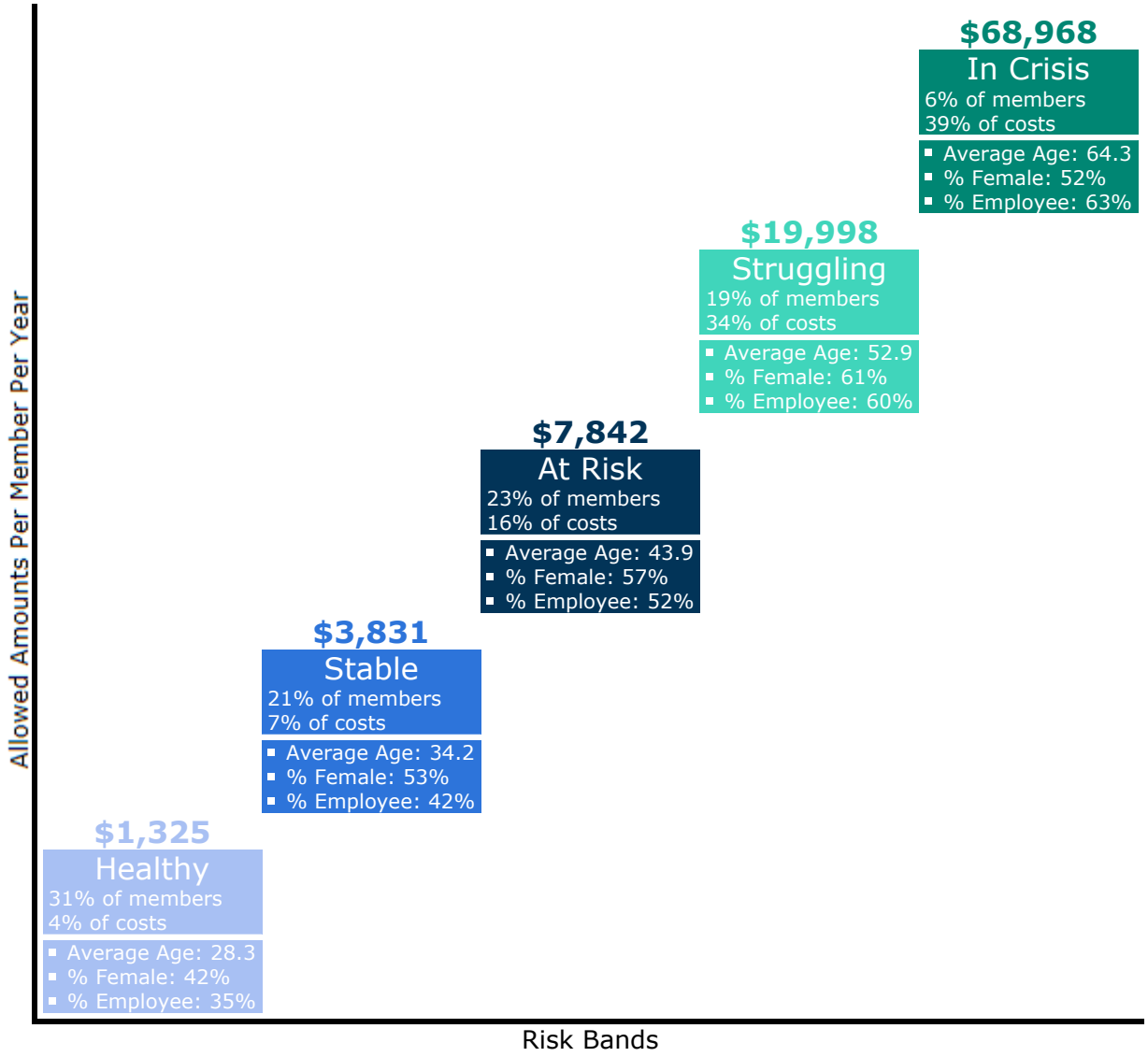
Clinical

*Current Period: Jan 2024 - Dec 2024 (Incurred)
**DCG Period: Jan 2024 - Dec 2024

% of Members by Risk Band



Risk Band Profiles



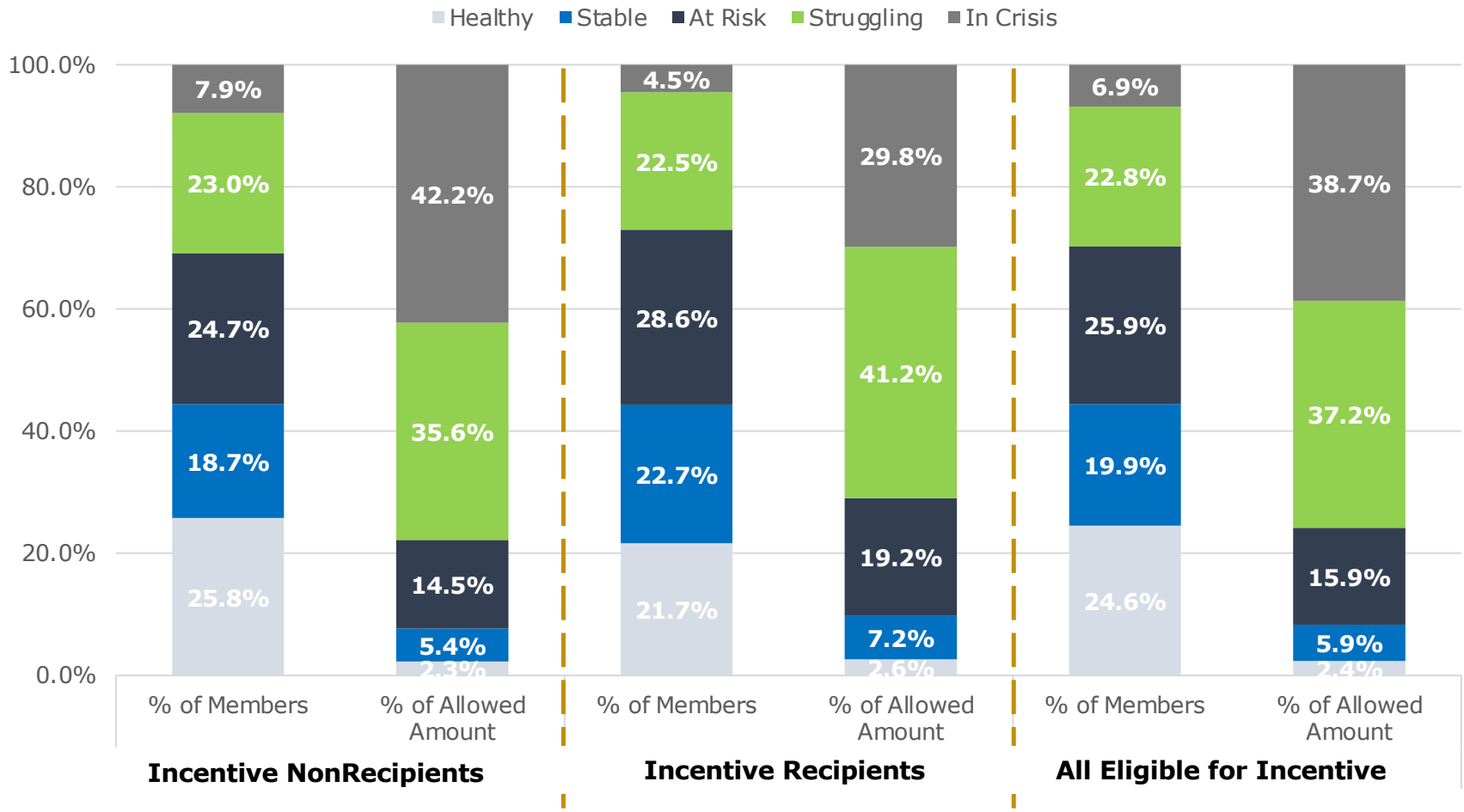
*Demographic and financial metrics are for the current period
**See glossary for details on DCG Methodology

© Copyright Merative 2025

Well Wisconsin

*Current Period: Jan 2024 – Dec 2024 (Incurred)
+DCG Period: Jan 2024 – Dec 2024

Members and Costs Distributions by +Risk Bands



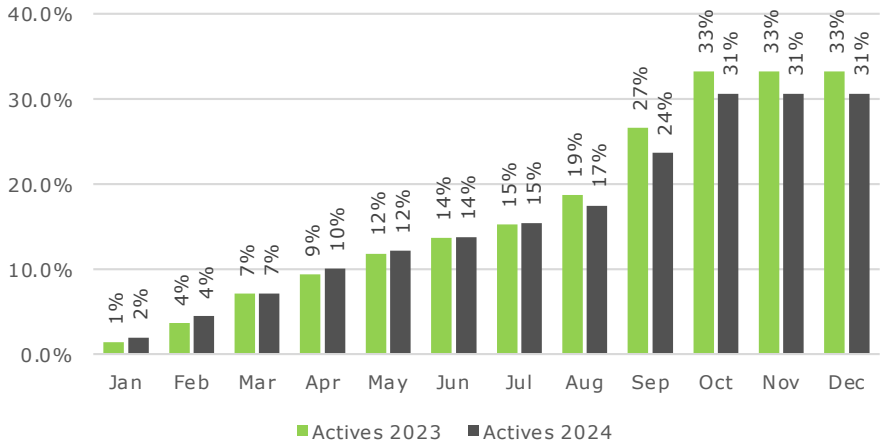
*Member and financial metrics are for the current period
+See glossary for details on DCG methodology

© Copyright Merative 2025

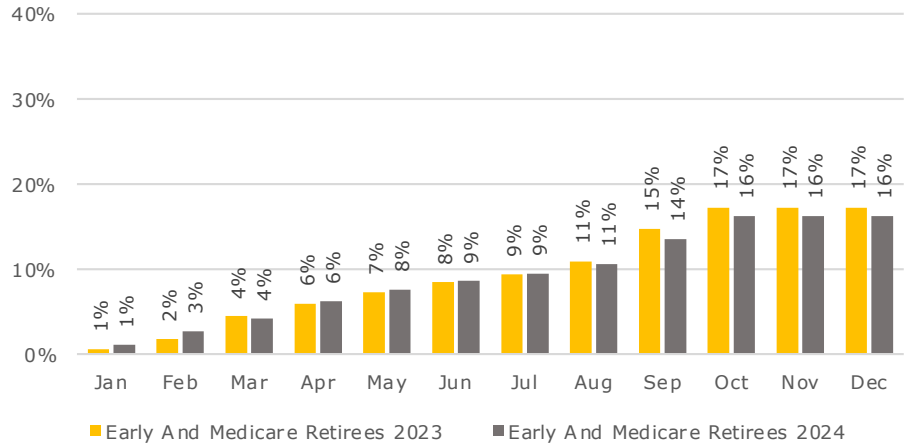
Well Wisconsin

Previous Period: Jan 2023 – Dec 2023 (Incurred)
Current Period: Jan 2024 – Dec 2024 (Incurred)

% of Eligible **Active** Members That Received Incentive



% of Eligible **Early and Medicare Retiree** Members That Received Incentive

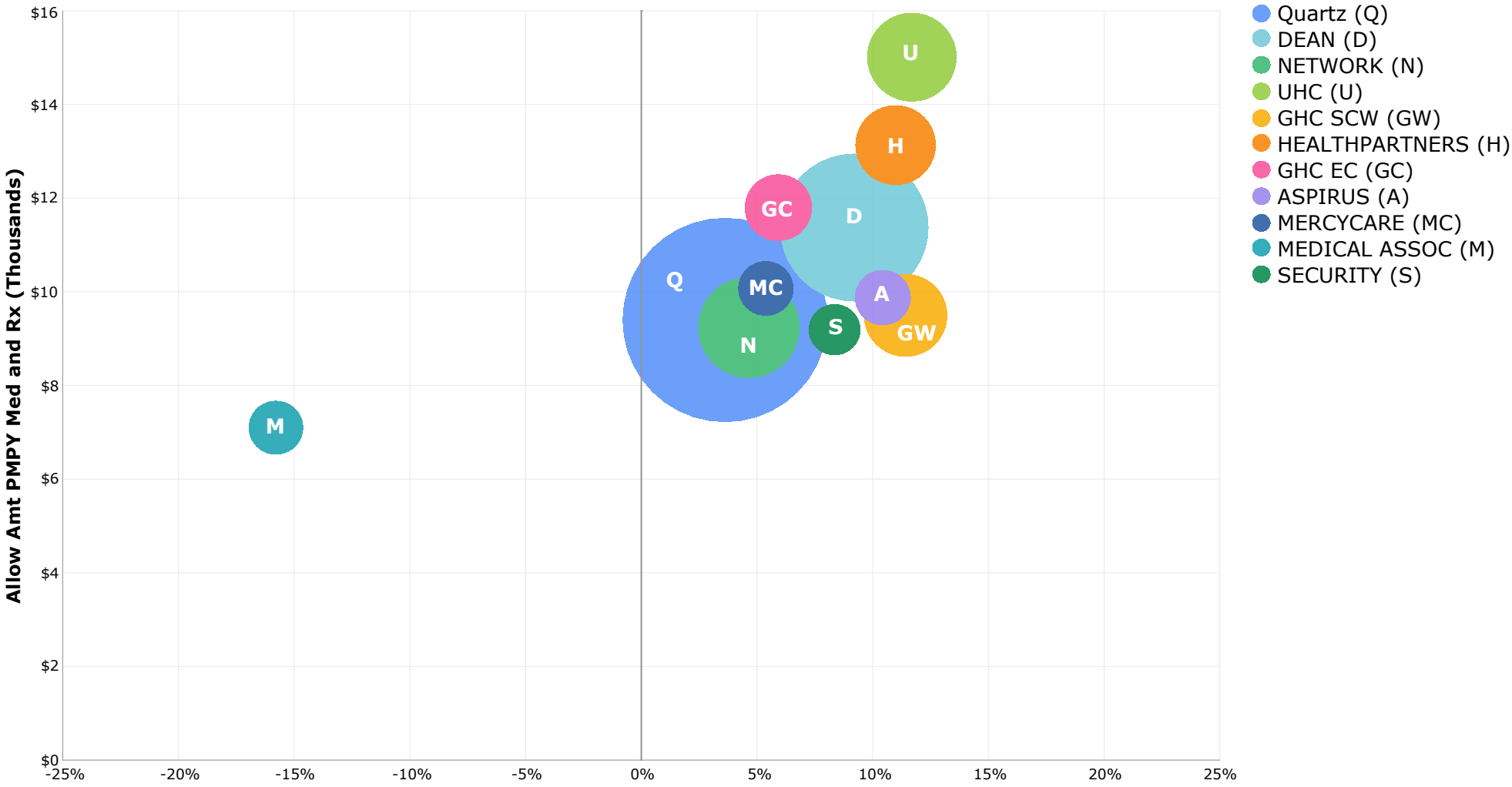


Demographics and Utilization Rates for Incentive Recipients and Non-Recipients (Current Period)

	Actives			Early And Medicare Retirees		
	Incentive Recipients	Incentive NonRecipients	% Difference	Incentive Recipients	Incentive NonRecipients	% Difference
Members	43,450	98,492		4,772	24,613	
Member Age Avg	44.5	44.4		66.8	72.1	
% Employees (Subscribers)	67.8%	65.7%		68.9%	72.5%	
Members % Male	41.5%	49.7%		39.2%	43.9%	
Visits Per 1000 Preventive Adult	577	449	-22.2%	429	452	5.4%
Visits Per 1000 ER (Potentially Avoidable)	9.87	12.45	26.1%	11.07	17.61	59.0%
Admits Per 1000 Acute (Avoidable)	0.88	1.96	121.8%	5.77	17.88	210.0%
Allow Amt PMPM Med and Rx	$963	$958	-0.5%	$1,299	$1,486	14.4%

© Copyright Merative 2025

Enrollment and Allowed Amount PMPY by Plan Group



Size of the bubbles represent current enrollment in each plan group
X-axis: % Change Allowed Amount PMPY Current vs Previous for each plan group

© Copyright Merative 2025

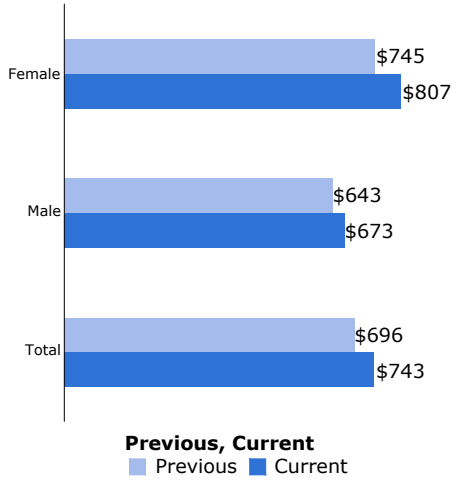
Eligibility

Previous Period: Jan 2023 - Dec 2023 (Incurred)
Current Period: Jan 2024 - Dec 2024 (Incurred)

	Enrollment			Average Age		
	Previous	Current	% Change	Previous	Current	% Change
Employees	122,744	125,790	2.5%	51.4	51.1	-0.4%
Members	262,815	268,326	2.1%	40.0	39.9	-0.3%
Family Size Avg	2.2	2.1	-0.4%			

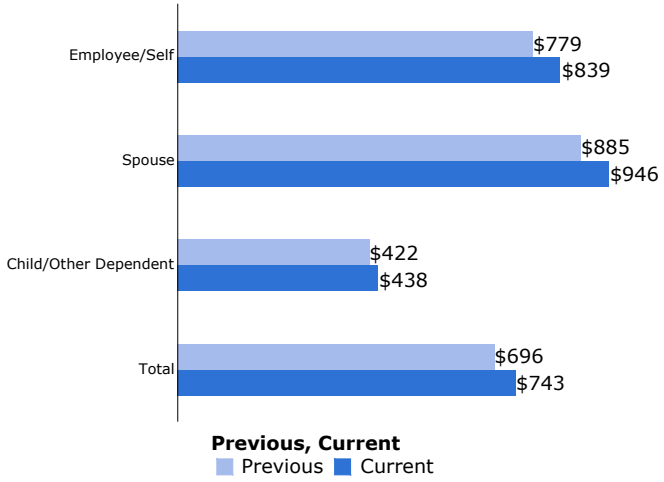
Membership and Net Pay PMPM by Gender

	Previous	Current	% Change
Female	136,795	139,948	2.3%
Male	126,110	128,441	1.8%



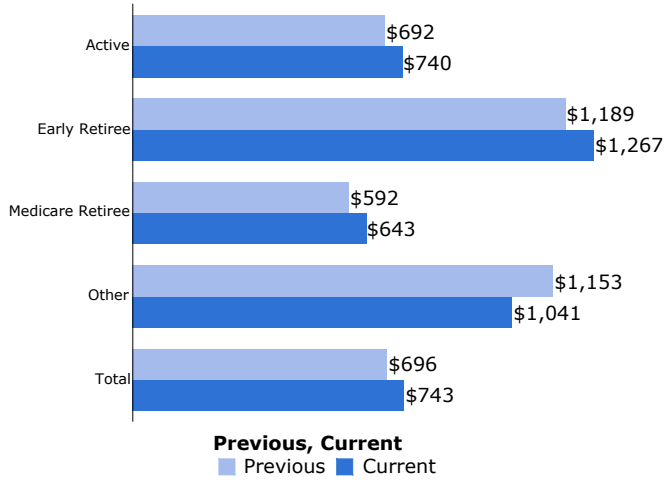
*Membership and Net Pay PMPM by Employee Relationship

	Previous	Current	% Change
Employee/Self	122,878	125,457	2.1%
Spouse	60,193	61,032	1.4%
Child/Other Dependent	79,744	81,837	2.6%



* Membership and Net Pay PMPM by Employee Status

	Previous	Current	% Change
Active	217,103	222,456	2.5%
Early Retiree	11,386	10,742	-5.7%
Medicare Retiree	38,794	39,728	2.4%
Other	1,092	958	-12.3%



*Membership counts may not be unique since there may be transitions between the listed categories during the reported period

© Copyright Merative 2025

Glossary of Terms

Time Periods

- CRY: Current Rolling Year
- DCG Periods
  - Related to Diagnostic Cost Group methodology and risk adjustment
  - Typically aligned with Jan - Dec plan year
- Incurred: the date a service was rendered
- Paid: the date that the claim for a service was paid
- PRY: Previous Rolling Year

Clinical

- Clinical Conditions: Merative description for a clinical condition based on valid ICD principal diagnosis
- IP: inpatient service, related to an admission
- OP: outpatient services
- Rx: prescription drugs

Eligibility

- Employees: subscriber/self
- Family Size: average number of covered members per family
- Member Age: average age of covered employees/members
- Members: subscribers and dependents

Financial

- Where applicable, all financial and utilization measures have completion factors applied.
- Allowed Amount: the total amount paid to the provider by all parties - the underlying medical cost that drives spending
- Net Payment: the amount paid by the plan sponsor (WI ETF)
  - Net Payment = Allowed Amount - (OOP + Third Party Payment)
- OOP: Out Of Pocket, cost to member
- Rates:
  - PMPM: Per Member Per Month
  - PMPY: Per Member Per Year
- Third Party Payment: e.g. Medicare, Medicaid, and other insurance

Other

- DCG: Diagnostic Cost Group (DCG) classifications are the foundation of a family of risk-adjusted payment and analysis methodologies
- Risk Scores and Categories
  - Are the predicted patient risk based on (i) Diagnosis codes (ICD 9/10) and (ii) Demographics
  - Concurrent / prospective: current and predicted risk scores
  - NonRescaled: DCG model population reference / average = 100
  - Rescaled: WI ETF population reference / average = 100
  - Risk Bands: groupings of risk scores based on Merative MarketScan

© Copyright Merative 2025