

# Financial

Previous Period: Mar 2023 - Feb 2024 (Incurred)

Current Period: Mar 2024 - Feb 2025 (Incurred)



## Net Payment Net Payment PMPM

	Previous	Current	Previous	Current	% Change	
Dental	\$51M	\$54M	\$21.2	\$21.8	3.0%	▲
Drug (RX)	\$342M	\$362M	\$141.9	\$147.1	3.6%	▲
Medical	\$1.3B	\$1.4B	\$537.9	\$569.6	5.9%	▲
<b>Total</b>	<b>\$1.69B</b>	<b>\$1.82B</b>	<b>\$701.0</b>	<b>\$738.5</b>	<b>5.4%</b>	<b>▲</b>

## Actives

	Net Payment		Net Payment PMPM			
	Previous	Current	Previous	Current	% Change	
Dental	\$49M	\$52M	\$21.2	\$21.8	2.9%	▲
Drug (RX)	\$317M	\$335M	\$137.1	\$141.4	3.2%	▲
Medical	\$1.2B	\$1.31B	\$517.7	\$552.9	6.8%	▲
<b>Total</b>	<b>\$1.56B</b>	<b>\$1.7B</b>	<b>\$676.0</b>	<b>\$716.2</b>	<b>5.9%</b>	<b>▲</b>

## Early Retirees

	Net Payment		Net Payment PMPM			
	Previous	Current	Previous	Current	% Change	
Dental	\$2M	\$2M	\$21.4	\$22.6	5.6%	▲
Drug (RX)	\$25M	\$27M	\$252.7	\$292.2	15.6%	▲
Medical	\$0.1B	\$0.09B	\$1,000.1	\$1,000.0	0.0%	▼
<b>Total</b>	<b>\$0.13B</b>	<b>\$0.12B</b>	<b>\$1,274.2</b>	<b>\$1,314.8</b>	<b>3.2%</b>	<b>▲</b>

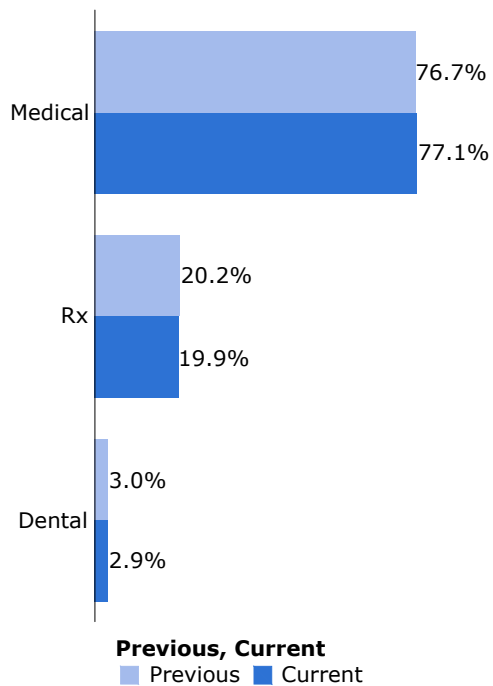
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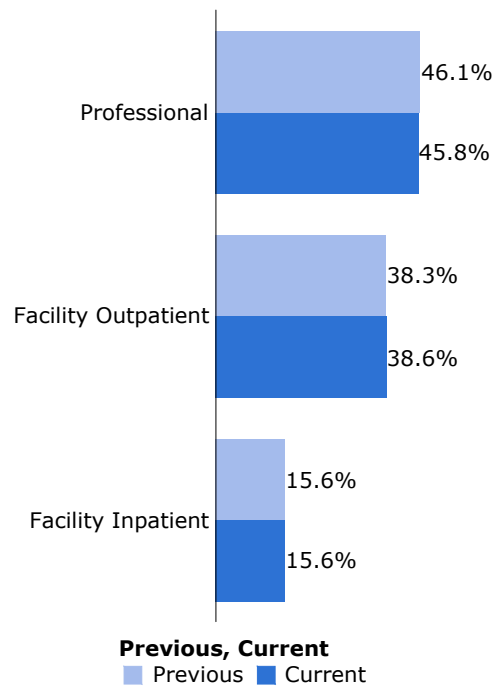
Current Period: Mar 2024 - Feb 2025 (Incurred)



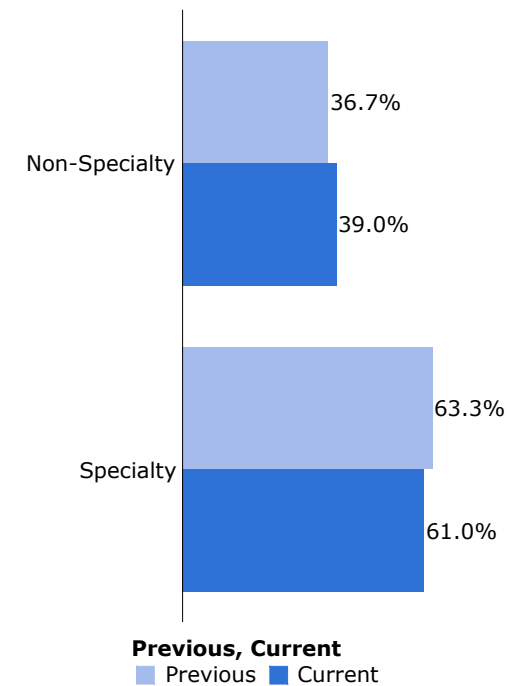
## Net Payment by Summary Categories



## Net Payment by Medical Service Categories



## Net Payment by Non-Specialty vs Specialty Drugs



# Financial

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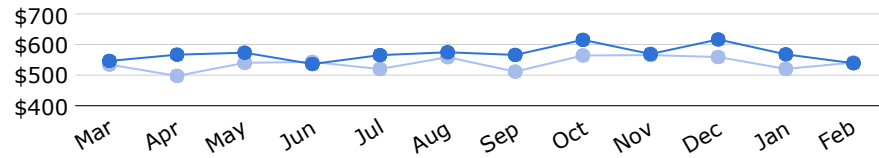


## Net Payment Per Member Trends by Benefit Categories

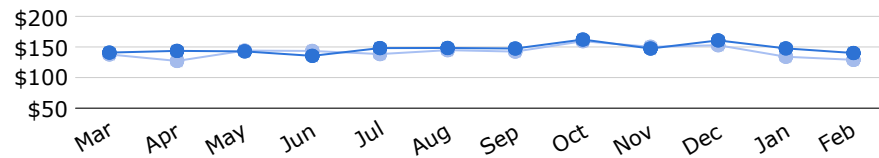
Previous

Current

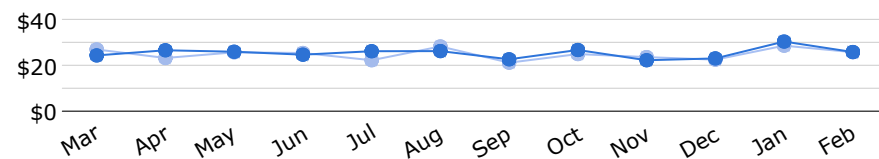
### Net Pay PMPM Med



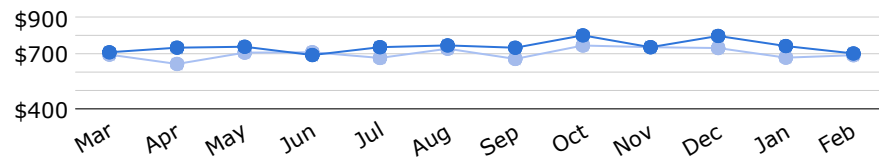
### Net Pay PMPM Rx



### Net Pay PMPM Dental



### Net Pay PMPM

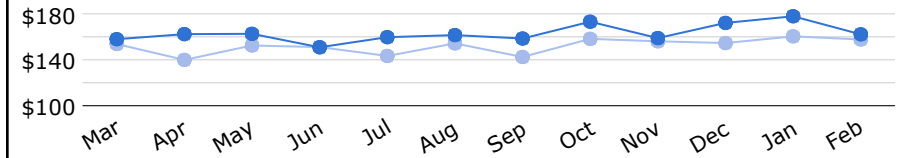


## Cost Share Monthly Trends

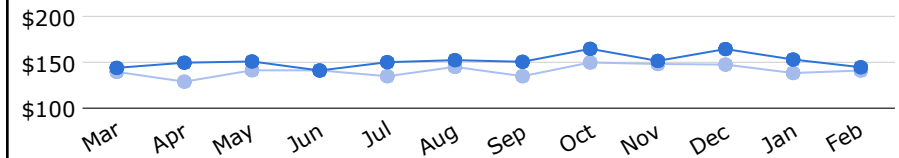
Previous

Current

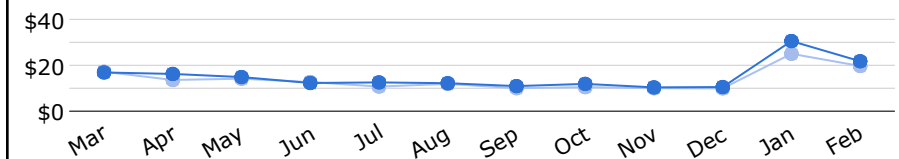
### Allowed Amount (in Millions)



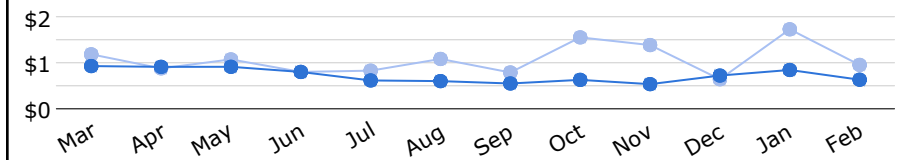
### Net Payment (in Millions)



### Out of Pocket (in Millions)



### Third Party Amount (in Millions)



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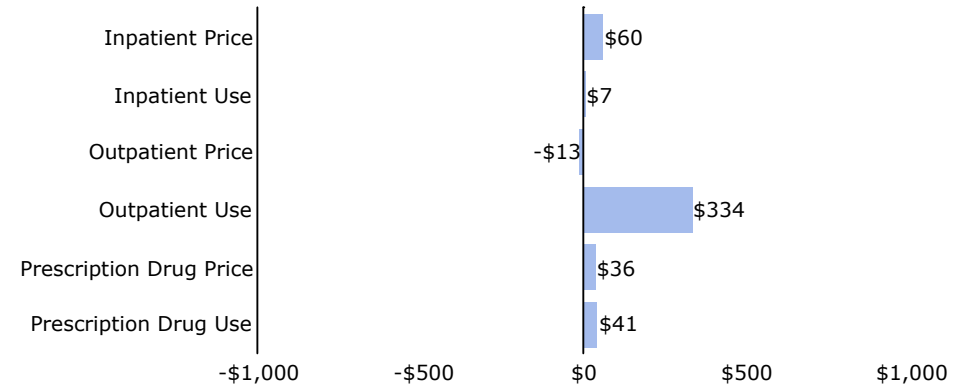


## Cost Per Member/Patient

	Previous	Current	% Change		Norm	% Difference from Norm
Allow Amt PMPY Med and Rx	\$8,792	\$9,257	5.3%	▲	\$8,591	7.8% ▲
Allow Amt Per Adm Acute	\$28,060	\$28,895	3.0%	▲	\$31,699	-8.8% ▼
Allow Amt Per Pat OP Med	\$6,018	\$6,292	4.6%	▲	\$6,046	4.1% ▲
Allow Amt Per Script Rx	\$192	\$194	1.2%	▲	\$212	-8.6% ▼
Admits Per 1000 Acute	47	47	0.4%	▲	49	-4.0% ▼
OP Events Per 1000	252	263	4.7%	▲		
Scripts Per 1000 Rx	9,471	9,761	3.1%	▲	7,935	23.0% ▲

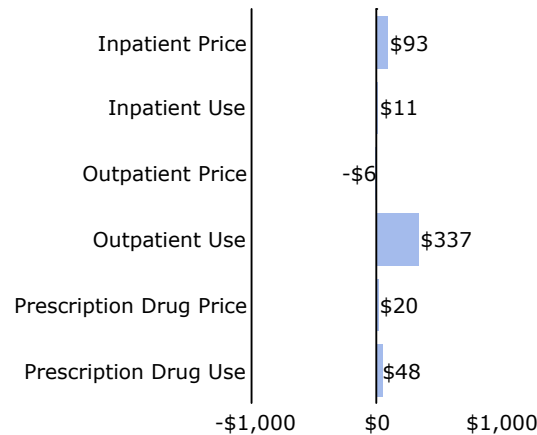
## Cost Drivers

Allowed Amount PMPY increased \$465 in the current period.  
The factors driving this change include:



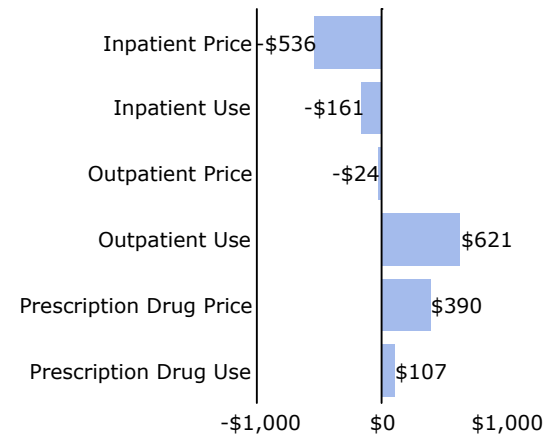
## Actives (96% of GHIP\*)

Allowed Amount PMPY increased \$502 in the current period.  
The factors driving this change include:



## Early Retirees (4% of GHIP\*)

Allowed Amount PMPY increased \$396 in the current period.  
The factors driving this change include:



\*Note: Excluding Medicare Retirees, members, and Employee Status of 'Other'

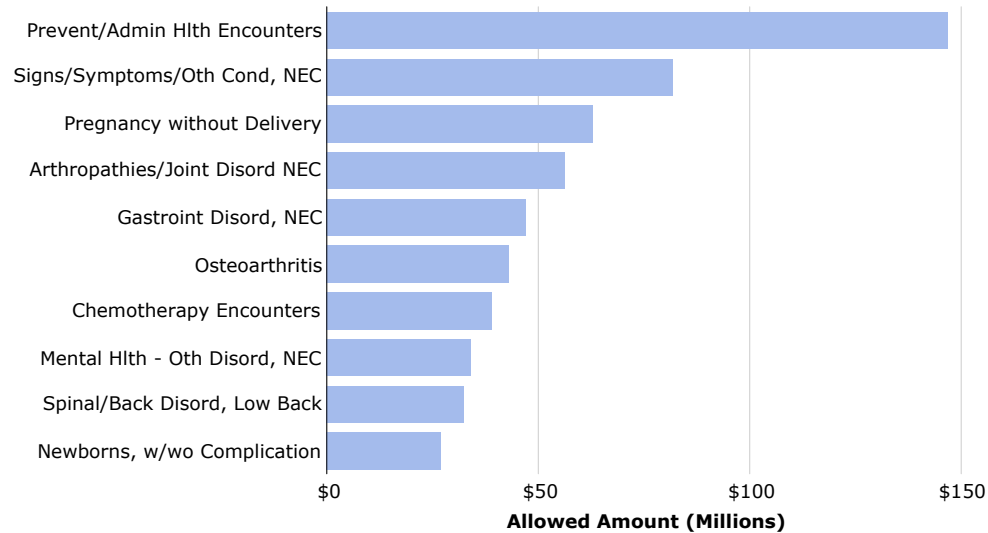
# Clinical

Previous Period: Mar 2023 - Feb 2024 (Incurred)

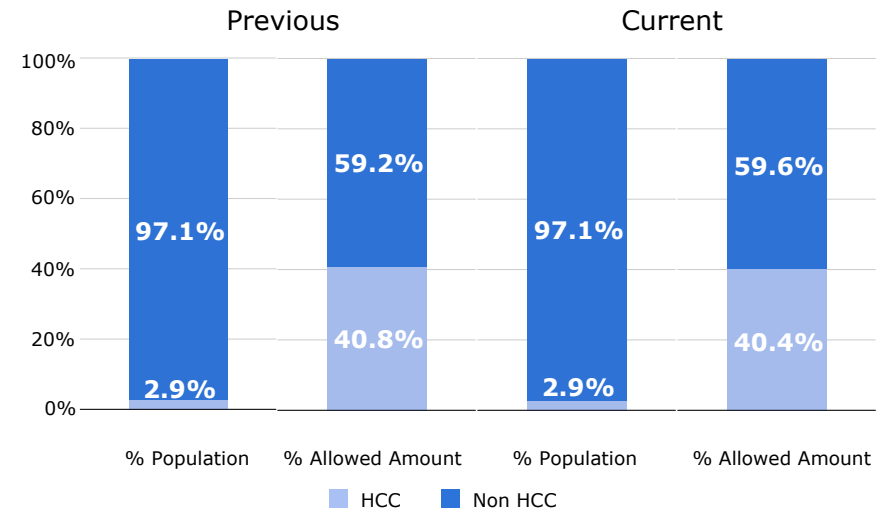
Current Period: Mar 2024 - Feb 2025 (Incurred)



## 10 Most Expensive Clinical Conditions



## High Cost Claimants (HCC) Trends



## Top 10 Conditions for \*Consistent HCC

	Allow Amt Med	Patients	**Allow Amt Per Patient Med
Chemotherapy Encounters	\$21,544,236	216	\$99,742
Signs/Symptoms/Oth Cond, NEC	\$10,753,549	1,851	\$5,810
Multiple Sclerosis	\$8,433,044	172	\$49,029
Mental Hlth - Autism	\$6,842,850	81	\$84,480
Crohn's Disease	\$6,636,278	224	\$29,626
Renal Function Failure	\$6,466,588	174	\$37,164
Condition Rel to Tx - Med/Surg	\$6,241,969	333	\$18,745
Cancer - Breast	\$5,346,694	148	\$36,126
Gastroint Disord, NEC	\$5,228,542	806	\$6,487
Respiratory Disord, NEC	\$5,174,745	713	\$7,258

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.

	Allow Amt Med	% of Total	+Patients	**Allow Amt Per Patient Med
Prevent/Admin Hlth Encounters	\$146,754,541	9.7%	143,558	\$1,022
Signs/Symptoms/Oth Cond, NEC	\$81,813,332	5.4%	55,216	\$1,482
Pregnancy without Delivery	\$62,858,834	4.2%	5,079	\$12,376
Arthropathies/Joint Disord NEC	\$56,306,577	3.7%	36,092	\$1,560
Gastroint Disord, NEC	\$46,883,956	3.1%	20,472	\$2,290
Osteoarthritis	\$42,862,965	2.8%	9,129	\$4,695
Chemotherapy Encounters	\$38,971,711	2.6%	529	\$73,671
Mental Hlth - Oth Disord, NEC	\$33,902,570	2.2%	23,875	\$1,420
Spinal/Back Disord, Low Back	\$32,279,364	2.1%	18,689	\$1,727
Newborns, w/wo Complication	\$26,775,184	1.8%	2,522	\$10,617
<b>Top 10 Subtotal</b>	<b>\$569,409,034</b>	<b>37.7%</b>	<b>169,510</b>	<b>\$3,359</b>
<b>All Clinical Conditions</b>	<b>\$1,508,748,986</b>	<b>100.0%</b>	<b>210,930</b>	<b>\$7,153</b>

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

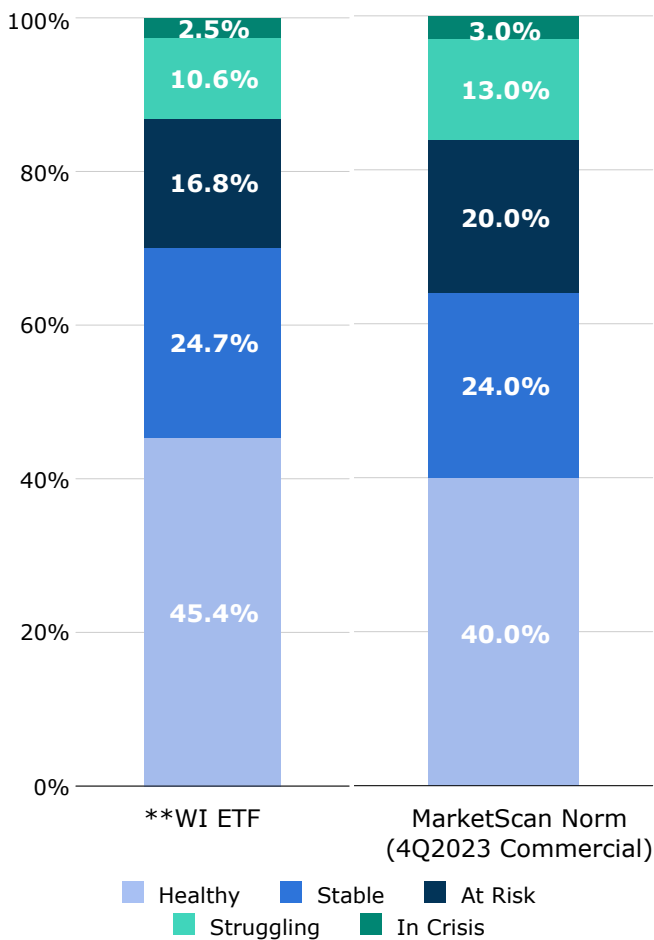
\*\*Only costs associated with this condition in the current period, patients may have multiple conditions.

# Clinical

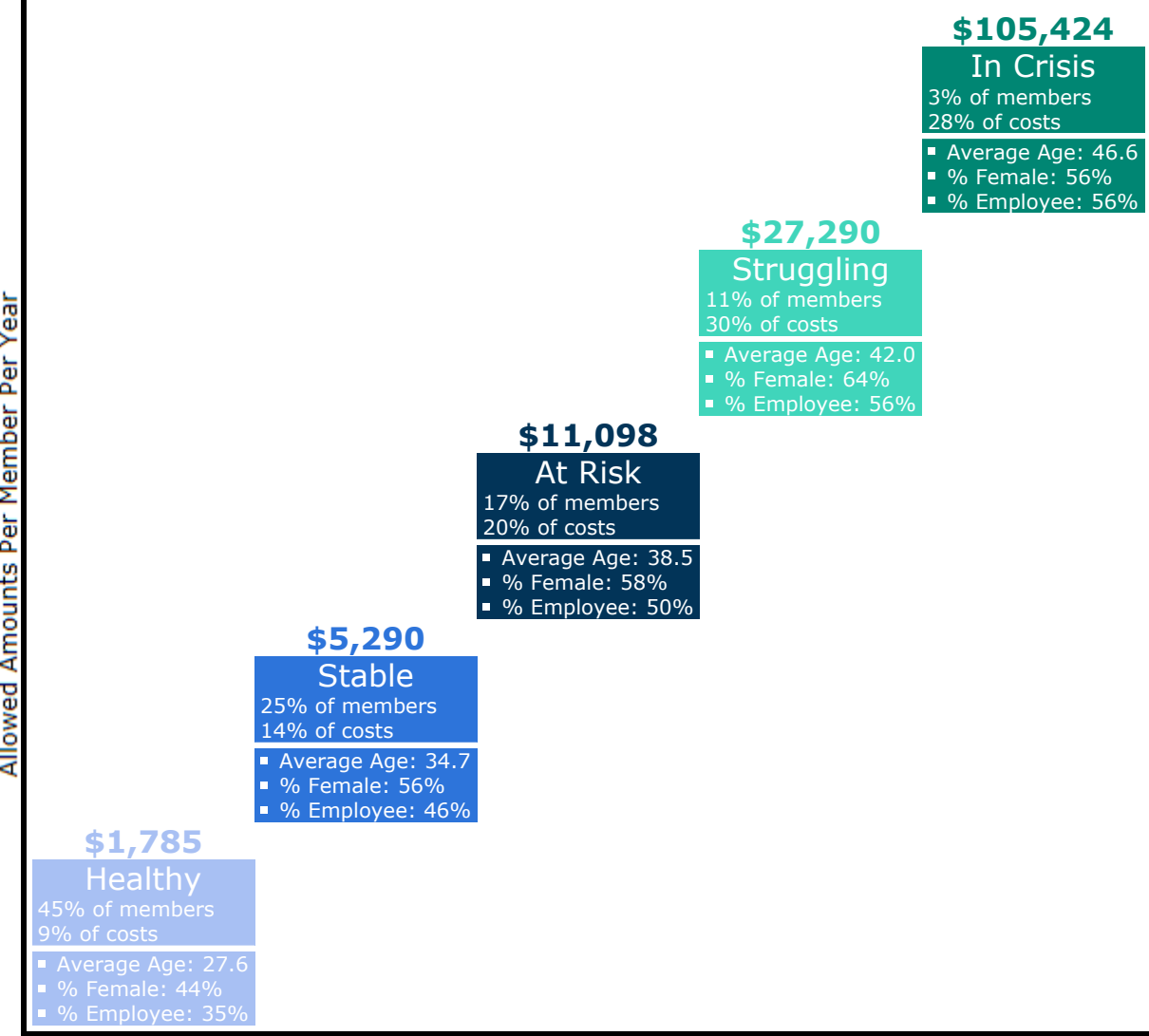
\*Current Period: Mar 2024 - Feb 2025 (Incurred)  
\*\*DCG Period: Jan 2024 - Dec 2024



## % of Members by Risk Band



## Risk Band Profiles



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

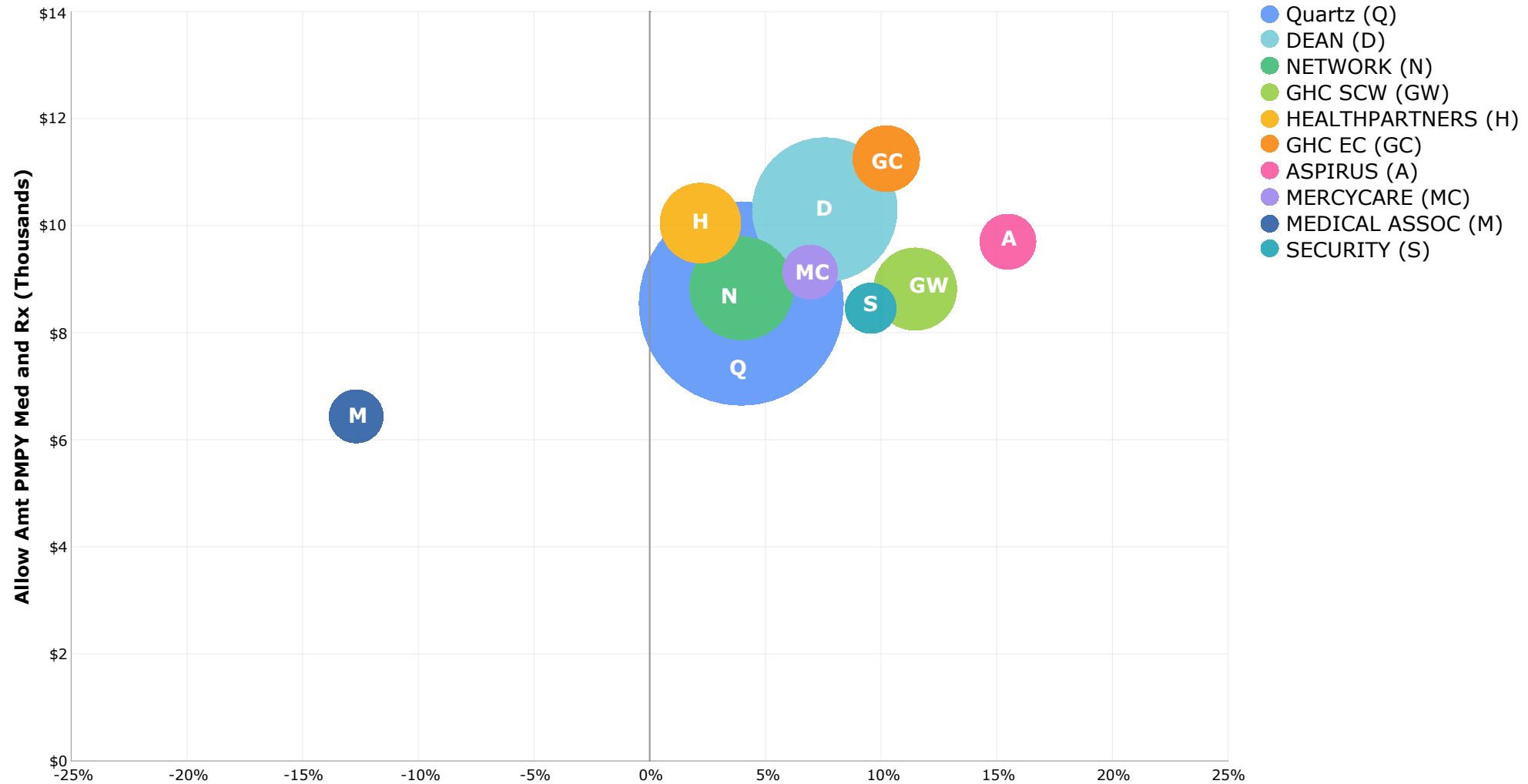
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## Enrollment and Allowed Amount PMPY by Plan Group



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

## Eligibility

Previous Period: Mar 2023 - Feb 2024 (Incurred)

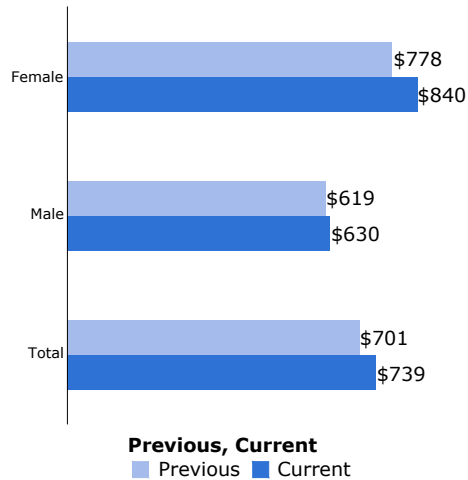
Current Period: Mar 2024 - Feb 2025 (Incurred)



	Enrollment			Average Age		
	Previous	Current	% Change	Previous	Current	% Change
Employees	97,734	99,777	2.1%	44.0	43.7	-0.6%
Members	226,525	230,436	1.7%	33.4	33.2	-0.6%
Family Size Avg	2.4	2.3	-0.4%			

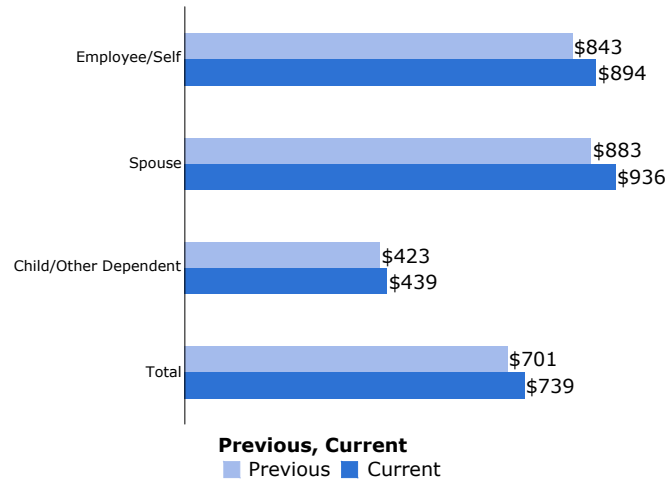
### Membership and Net Pay PMPM by Gender

	Previous	Current	% Change
Female	116,801	119,221	2.1%
Male	109,815	111,273	1.3%



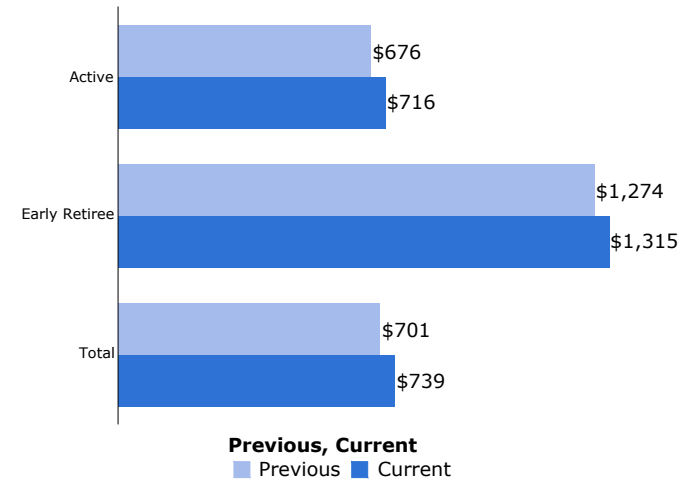
### \*Membership and Net Pay PMPM by Employee Relationship

	Previous	Current	% Change
Employee/Self	97,410	99,305	1.9%
Spouse	48,533	48,447	-0.2%
Child/Other Dependent	80,582	82,684	2.6%



### \* Membership and Net Pay PMPM by Employee Status

	Previous	Current	% Change
Active	217,698	222,306	2.1%
Early Retiree	10,967	10,423	-5.0%



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



## 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)
  - $\text{Net Payment} = \text{Allowed Amount} - (\text{OOP} + \text{Third Party Payment})$
- 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