Regence Regence

City of Vancouver

Utilization and Cost Review Incurred January 2022 - December 2022 Paid January 2022 - January 2023

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Date of presentation: May 10, 2023

This report was prepared for CITY OF VANCOUVER and is based on medical and pharmacy claims. Dental and vision claims are excluded. This data is intended only for the use of the individual or entity to which the report has been provided and may contain information that is privileged and confidential. The data contained within the report is for information purposes only and should not be used for medical treatment or diagnosis purposes.

Data presented in this report is based on the following date ranges:

Current Period: Incurred from January 2022 - December 2022, Paid January 2022 - January 2023 Prior Period: Incurred from January 2021 to December 2021, Paid January 2021 - January 2022

Benchmark data presented in this report is based on the Regional Comparison - Oregon cohort.

High-Cost Claimants (HCC) are defined as members with paid expenses greater than \$100,000 within the reporting period.

Groups: All Subgroups: All

This report was prepared on 03/06/2023

City of Vancouver- Group Utilization Summary

Incurred January – December 2022, paid January – February 2023

Key take aways for this review period

- Medical and Rx combined trend is up 10% driven by large claimants
- ER utilization has increased, and avoidable ER visits are above benchmark (BM)
- Cancer prevalence above BM and driving 27% increase in HCC/1k
- 66.3% of total pharmacy spend from specialty medications

Wins

- 88% of members are utilizing services
- More members with a chronic condition are well-managed than at-risk
- Meeting or close-to-meeting 8 of 10 Preventative Care measures
- Behavioral health engagement is high
- \$18.49 PMPM in estimated & actual savings from pharmacy/medical drug programs

Opportunities

- Promote primary care engagement and ED alternatives
- Promote access to behavioral health virtual providers and resources
- Consider Flex Access for specialty drug savings on PPO plan

Medical Summary

How has your medical plan performed for the year?

KEY NUMBERS

Metrics	Current	Trend
Medical + RX PMPM	\$588	10.0%
Medical PMPM	\$417	9.0%
Members	1,433	0.7%
Contract Size	2.8	-0.1%
Average Age	33.4	-0.9%
% Female	48%	1%

TREND DRIVERS

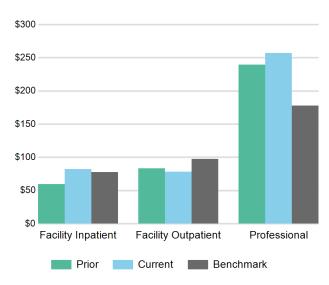
37.5% Facility Inpatient

7.3% Professional

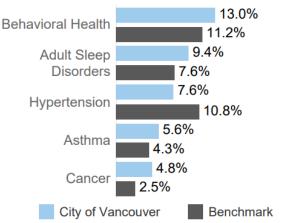
NETWORK UTILIZATION

- 99.1% In-Network Utilization
- 60.4% of members attribute to a provider
- 88.0% of members are utilizing services

MEDICAL PAID PMPM



CHRONIC CONDITIONS

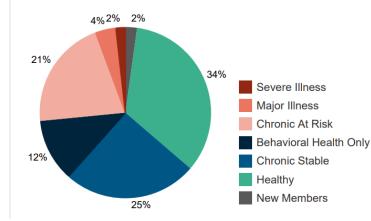


HIGH-COST CLAIMANT PMPM



*High-Cost Claimant includes Medical and Pharmacy

HEALTH STATUS



Data incurred 12/31/2021 - 12/30/2022, processed through 12/30/2022

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Regence BlueCross BlueShield of Oregon

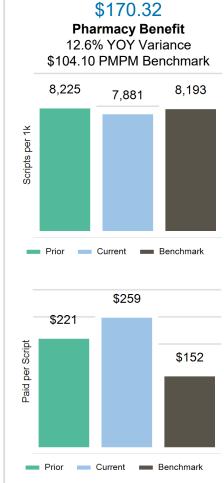
Utilization and Cost by Service Type

What influenced the cost trend?









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Irend Drivers			
Inpatient Facility	Outpatient Facility	Professional Visits	Pharmacy Benefit
 5% decrease in admissions per 1k 44% increase in paid per admit Increase driven by surgical paid per admission and admits per 1k 	 2% decrease in visits per 1k 5% decrease in paid per visit Decrease in drugs/IV therapy paid per visit 119 ER visits/1k increased 39% and is below BM of 160 visits/1k 44.5% avoidable ER vs. 41% BM 	 2% decrease in visits per 1k 10% increase in paid per visit 14 visits/member is 40% above BM Increase in paid PMPM distributed across most service types 	 4% decrease in scripts per 1k 18% increase in paid per script Increase in specialty paid per script

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High-cost claimant summary

What is the impact of high-cost claimants on plan spend?

1.0% of the population accounts for 29% of plan paid

14 # of High-Cost Claimants 27.3% YOY Change **9.7** HCC/1k Members 27.6% YOY Change **\$207,175** Average paid/HCC -3.1% YOY Change **29%** % of Total Paid 26% Prior **\$168.71** HCC Paid PMPM 22.4% YOY Change

Excluding high-cost members, paid PMPM increased 6% year over year

	Membe	r count	Average paid per member						
	Prior	Current	Prior	Current	Prior	Current	% Change	Benchmark	% Variance
Non-high-cost members	1,445	1,424	\$3,936	\$4,147	\$396.26	\$419.00	5.7%	\$319.97	30.9%
High-cost members	11	14	\$213,794	\$207,175	\$137.80	\$168.71	22.4%	\$102.30	64.9%
All Members	1,456	1,438	\$6,260	\$7,026	\$534.06	\$587.71	10.0%	\$422.28	39.2%

*HCC Threshold \$100,000 Benchmark - Oregon

High cost claimant details

Which members were cost drivers in the current period?

Member	Primary Diagnosis	Medical Paid	Pharmacy Paid	Total Paid	Programs	Risk of Ongoing Claims	Relationship	Age Group

Information Redacted

DEFINITIONS

Programs		Risk of Or	Risk of Ongoing Claims			
СМ	Care Management	High	Per AI, member is likely to have high-cost claims going forward.			
UM	Utilization Management	Medium	Per AI, member is likely to continue to have claims but claims likely will not meet high-cost claimant threshold.			
DM	Disease Management	Low	Per AI, member is stable and claims are likely to decrease and not meet high-cost claimant threshold.			

Top Members with Future High Risk Claimant Details

Which members have conditions expected to drive high costs in your future year?

		Dreenective	Average	Future					
		Prospective Risk Score	Future Cost	Inpatient Stay	Claims spend				On prior
Membe	r Diagnosis	(12 month)	(12 months)	Probability	YTD	Targeted	Relationship	Age Group	slide

Information Redacted

Notes:

- · All members above are evaluated for clinical referral
- Top members with Future Risk over 9 are reviewed
- The claimants identified in this report were those likely to incur costs in the next 12 months based on our predictive modeling algorithm. The financial prediction is an estimate only, where the costs may be higher or lower. It is probable other members will incur higher costs as the year progresses that cannot be predicted due to acute conditions, trauma, maternity care and new diagnoses.

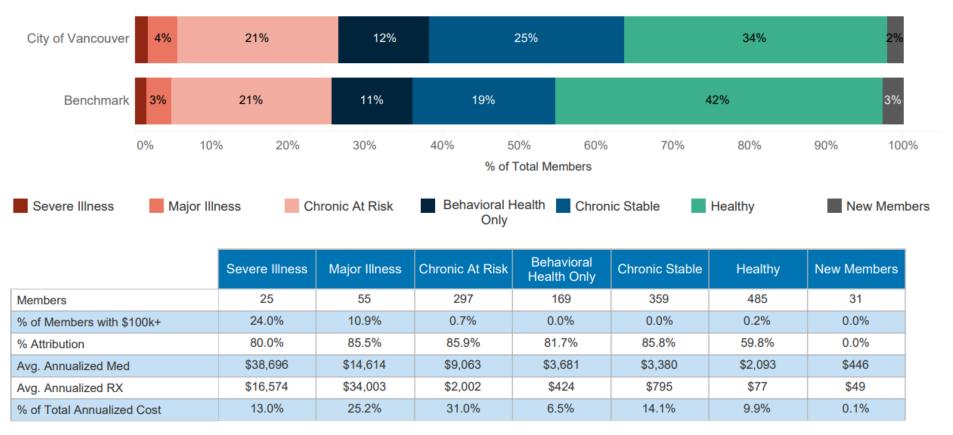
DEFINITIONS

Progra	ms	Risk Scores		
СМ	Care Management	Prospective Risk Score (12 month)	The relative risk of the member for the most recent 12 months compared to other plan members with respect to total costs	
UM	Utilization Management	Average Estimated Future Cost (12 months)	This risk is calculated based on the members paid claims with Regence. The algorithm predicts cost based on the Impact Pro national average for the member's condition	
DM	Disease Management	Future Inpatient Stay Probability	The probability of a non-obstetrics inpatient stay in the next 12 months.	

Population risk stratification

How do costs vary based on population health risk category?

Population Health Categories - Members



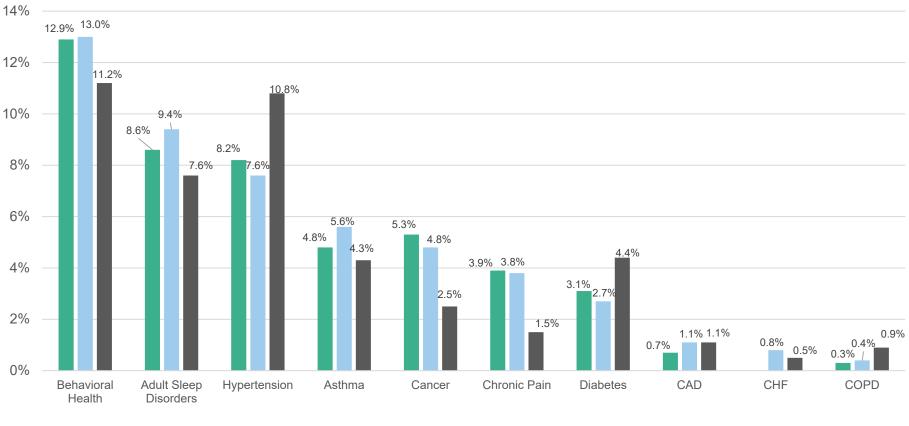
Data incurred 12/31/2021 - 12/30/2022, processed through 12/30/2022

% Attribution only includes members within the Regence 4-state area and may therefore underrepresent actual provider attribution rates. Average Medical Cost per Member and Average Rx Cost per Member are annualized.

Chronic Conditions

What are the most prevalent conditions in your population?

- Prevalence of hypertension and diabetes have decreased and remain below benchmark (BM)
- Cancer prevalence remains high at >2% above BM



Year over Year Comparison

Prior Current Benchmark

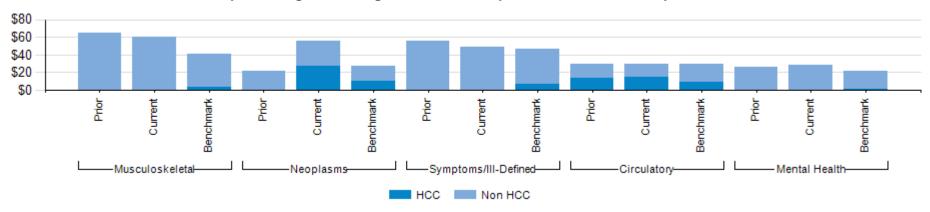
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Top Diagnostic Categories

	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022			
Diagnostic Category	Paid PMPM	Paid PMPM	PMPM % Change	Benchmark	Benchmark Variance
Symptoms/III-Defined	\$75.47	\$73.67	-2.4%	\$69.55	5.9%
Musculoskeletal	\$64.36	\$59.88	-7.0%	\$41.36	44.8%
Neoplasms	\$21.91	\$55.56	153.6%	\$27.73	100.4%
Circulatory	\$30.01	\$29.73	-0.9%	\$30.31	-1.9%
Mental Health	\$25.88	\$28.36	9.6%	\$21.95	29.2%
Genitourinary	\$31.13	\$26.03	-16.4%	\$19.52	33.4%
Injury/Poisoning	\$28.21	\$21.87	-22.5%	\$22.74	-3.9%
Digestive	\$22.50	\$20.72	-7.9%	\$25.06	-17.3%
Infectious/Parasitic	\$8.18	\$17.69	116.1%	\$11.31	56.4%
Pregnancy	\$16.78	\$15.39	-8.3%	\$13.29	15.8%
All Other	\$58.34	\$68.49	17.4%	\$70.24	-2.5%
Total	\$382.78	\$417.39	9.0%	\$353.05	18.2%

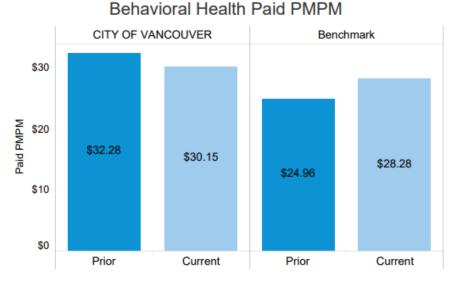
• Symptoms/III-Defined was the costliest diagnostic category and paid PMPM decreased -2.4% between reporting periods.

• The top 4 diagnostic categories account for 52.4% of total medical costs in the current period.

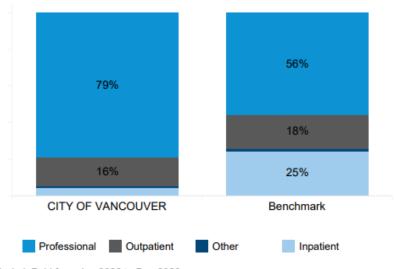


Top Five Diagnostic Categories with HCC Impact and Benchmark Comparison

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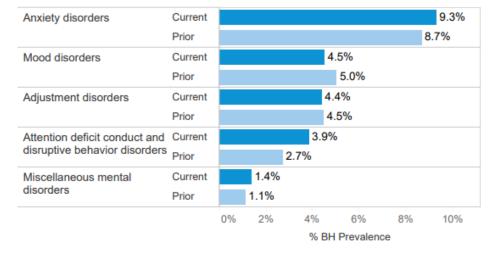
Behavioral Health % Paid by Service Type





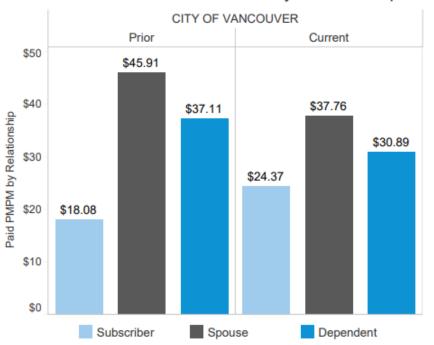
Behavioral Health Services per 1,000

Top 5 Behavioral Health Condition Prevalence



Current Period: Paid from Jan 2022 to Dec 2022 Prior Period: Paid from Jan 2021 to Dec 2021

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Behavioral Health Paid PMPM by Relationship

Top 10 Places of Service by Paid

Top 10 Places of Service by Paid	% of BH Paid	% of BH Services
Outpatient Psychiatric	48.6%	69.5%
Physical Therapy	12.2%	8.4%
Other - Clinic	8.7%	6.5%
Office/Home Visits - PCP	6.8%	5.7%
Substance Use Disorders - Hospital	4.8%	0.1%
Office Administered Drugs - General	4.4%	0.4%
Psychiatric - Intensive Outpatient	3.7%	1.4%
Office/Home Visits - Specialist	2.5%	2.4%
Preventive Other - General	1.8%	1.7%
Emergency Department	1.3%	0.3%
Other	5.2%	3.7%

Top 5 Diagnosis Categories Mood disorders	Inpatient	Outpatient \$21,431	Professional \$126,470	Other	OON % for BH Paid* 0.2%	% of Total Medical Paid** 2.0%
Anxiety disorders		\$17,464	\$102,282	\$3,011	4.7%	1.7%
Adjustment disorders		\$2,295	\$57,911		10.4%	0.8%
Attention deficit conduct and disruptive behavior		\$10,987	\$31,564		0.0%	0.6%
Developmental disorders		\$1,249	\$38,519		0.0%	0.5%
Other	\$24,783	\$27,637	\$52,314		1.7%	1.4%
Grand Total	\$24,783	\$81,064	\$409,059	\$3,011	2.7%	7.0%

Current Period: Paid from Jan 2022 to Dec 2022 Prior Period: Paid from Jan 2021 to Dec 2021

*OON % for BH Paid = Out of Network BH claims / (In Network BH claims + Out of Network BH claims) **% of Total Medical Paid = BH claims / Total Medical claims

Regence Behavioral Health Resources- regence.com



Regence behavioral health team

*Sign in to www.regence.com/go/mental-health to find available provider options (may vary by state) More details on the above resources/virtual behavioral health providers in the appendix *myStrengh is not a current program for the City and is a buy-up option

ER Details

- CITY OF VANCOUVER's avoidable ER rate of 44.5% is above the Regional Comparison Oregon book of business benchmark of 40.9%.
 - The top avoidable ER Diagnosis was Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified.

Top 10 CCSR Diagnosis - All ER

CCS ICD Diagnosis Group	Total ER Visits
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	47
Injury, Poisoning and Certain Other Consequences of External Causes	34
Diseases of the Digestive System	22
Diseases of the Genitourinary System	12
Diseases of the Circulatory System	11
Diseases of the Nervous System	11
Diseases of the Respiratory System	10
Certain Infectious and Parasitic Diseases	5
Diseases of the Musculoskeletal System and Connective Tissue	4
Diseases of the Skin and Subcutaneous Tissue	4
All Others	12
Total	171

Top 10 Member Locations

Member Core Based Statistical Area	Potentially Avoidable %	Total ER Visits
38900 - Portland-Vancouver-Hillsboro, OR- WA	43.0%	160
31020 - Longview, WA	61.3%	6
29820 - Las Vegas-Henderson-Paradise, NV	97.7%	3
11820 - Astoria, OR	0.0%	1
16500 - Centralia, WA	0.0%	1
All Others		0
Total	44.5%	171

Top 10 ER Providers

Provider Name	Total ER Visits
LEGACY SALMON CREEK HOSPITAL [P:198339]	80
PEACEHEALTH SOUTHWEST MEDICAL CENTER [P:75698]	38
LEGACY EMANUEL HOSP & HLTH CTR [P:67106]	18
OHSU HOSPITAL AND CLINICS [P:67082]	5
LEGACY GOOD SAMARITAN MEDICAL CENTER [P:67108]	3
ST JOHN MEDICAL CENTER [P:900009451]	3
PULLMAN REGIONAL HOSPITAL [XN:1366446767]	3
PROVIDENCE PORTLAND MEDICAL [P:68028]	2
YAKIMA VALLEY MEMORIAL HOSPITAL [P:900011086]	2
ST VINCENT HEALTHCARE [XN:1083655997]	2
All Others	15
Total	171

Top 10 CCSR Diagnosis - Avoidable ER

CCS ICD Diagnosis Group	Total ER Visits
Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified	33
Diseases of the Digestive System	10
Diseases of the Respiratory System	6
Diseases of the Genitourinary System	5
Diseases of the Skin and Subcutaneous Tissue	4
Diseases of the Ear and Mastoid Process	3
Diseases of the Musculoskeletal System and Connective Tissue	3
Injury, Poisoning and Certain Other Consequences of External Causes	3
Diseases of the Circulatory System	2
Diseases of the Nervous System	2
All Others	2
Total	72

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Doctor On Demand[™]

- Anywhere, anytime access to board-certified and licensed providers for medical and behavioral health needs and support- 24/7/365 days a year
- Video call consultation visits for non-urgent medical and behavioral health needs
- Receive a prescription and have it sent to your local pharmacy

Plan	Cost per visit
Active Employee PPO Plan	Medical/Behavioral Health Visits: \$20/visit
Active Employee HSA Plan	 Pre-Deductible Medical Visits: \$64/visit Behavioral Health Visits: Start at \$90/visit After Deductible 20% coinsurance
Retiree Plans	Medical/Behavioral Health Visits: 100% covered

Access Doctor on Demand at <u>doctorondemand.com/regence-or</u> or through the Doctor on Demand mobile app

HEDIS Preventive Care

HEDIS Measure	Submeasure	Patient Count	Compliance Rate	HEDIS 75th Percentile	
Breast Cancer Screening		631	72.1%	72.9%	
Cervical Cancer Screening		1,223	65.9%	75.9%	٠
Child and Adolescent Well-Care Visits	1,521	41.9%	61.2%	٠	
Childhood Immunization Status	DTaP/DT	48	89.6%	87.1%	
	Combination #10	48	60.4%	62.6%	
Colorectal Cancer Screening		1,424	58.8%	66.2%	
Comprehensive Diabetes Care	Eye Exam	259	62.2%	52.6%	
	A1c Testing	259	88.8%	89.2%	
Plan All-Cause Readmissions		81	3.7%	7.0%	
Use of Imaging Studies for Low Back Pain		118	86.4%	81.1%	

Data measurement period: incurred 01/2021 - 12/2021, processed 01/2021 - 05/2022 Measures with less than 30 eligible members are excluded from reports due to low volume.

Green = Target met Yellow = within 10% Red = Not met target > 10%

Breast Cancer Screening requires 2 years of continuous enrollment.

Cervical Cancer Screening requires 3 years of continuous enrollment.

Colorectal Cancer Screening is underreported using claims data due to the 10 year lookback period. The colorectal cancer screening compliance rate is compiled using medical record review.

A lower percentage is better when looking at Plan All-Cause Readmissions and Use of Opioids at High Dosage.

Resources Available to Address the HEDIS Preventive Care Gaps Include:

- Flyers
- Videos
- Access resources here: <u>Health Plans | Showpad</u>

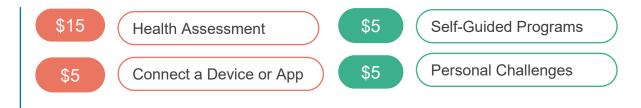
Regence Embedded Core Program

Engagement focused on preventive

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Exit

2023 Rewards | Redeem up to \$25 in gift cards



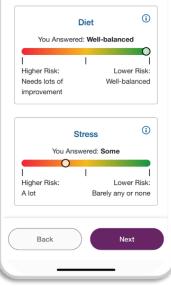
Snapshot Report

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Review

Here's what we	know a	about	you	so	far
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Health Assessment



Overview

An out-of-the-box, turnkey embedded wellbeing platform to help drive engagement to healthy activities. Gain access to base features that help personalize recommendations to your members on the next best step in their health journey.



Key Features

Up to \$25 in Regence-funded e-gift cards for completing online well-being activities



Access to the Empower platform via web and mobile app, health assessment, personalized recommendations, 12 self-guided programs, 40+ personal challenges, trackers, device connectivity, health library/resources, and more.

Member Engagement

How are members connecting beyond claims?



regence.com

38.4% of members are registered on regence.com

57.6% of subscribers are registered on regence.com



Provider engagement

60.4% of members are attributed to a primary care provider based on having at least 1 wellness or preventive visit in the past 24 months.



Condition Manager

122 identified members

119 enrolled members



Care Management Core

23 members were outreached for care management

- 15 members were successfully contacted
- 15 members were engaged with a care manager

100% of members successfully contacted were engaged with a care manager



Utilization Management

124 procedures were reviewed through prior authorization

83.1% of UM reviews were approved

902 radiology procedures were reviewed



Regence Pregnancy Program

31 members participated in the Pregnancy program

94.1% of members who delivered a baby participated in the pregnancy program

5

Regence Advice24

33 calls were made to the NurseLine in Jan–Dec 2022

2

Doctor on Demand[™]

42 members have activated Doctor on Demand since inception

29 medical visits Jan – Dec 2022

35 behavioral health visits Jan – Dec 2022

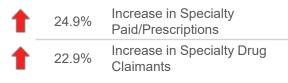
Pharmacy Summary

How has your pharmacy plan performed this year?

KEY NUMBERS

Pharmacy Metrics	Current	Trend
Avg Pharmacy Members	1,433	0.7%
Claimants	1,124	1.4%
Prescriptions per member	7.9	-4.2%
Paid per Prescription	\$259	17.5%
Specialty Drug Claimants	59	22.9%
Specialty Paid/Prescription	\$7,766	24.9%

TREND DRIVERS



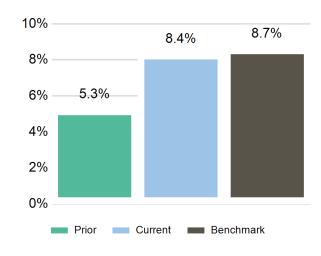
Top 5 Non-Specialty Therapeutic Drug Class by Cost

Therapeutic Drug Class	Prescriptions	Claimants
Incretin Mimetic Agents (diabetes)	78	12
Imidazole-Related Antifungals (infection)	72	43
Amphetamines (attention deficit disorder)	416	55
Sympathomimetics (asthma)	290	122
Digestive Enzymes	12	2

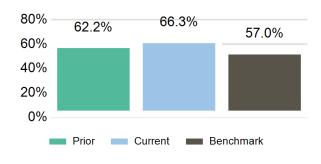
PAID PMPM



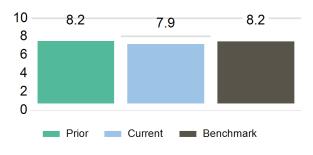
MEMBER COST-SHARE



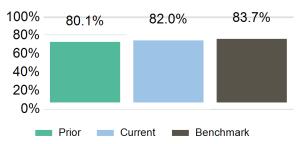
% SPECIALTY PAID



PRESCIPTIONS PER MEMBER



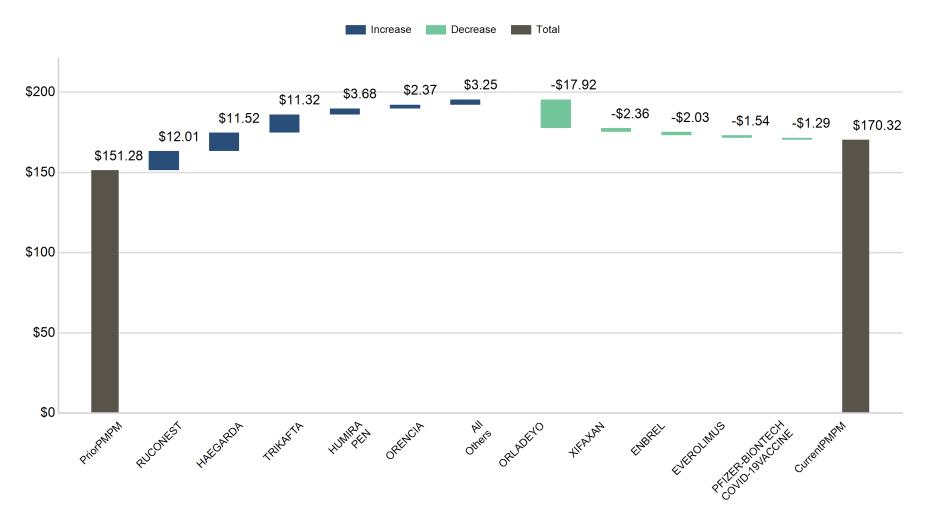
GENERIC DISPENSING RATE



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Pharmacy Waterfall

- Pharmacy Paid PMPM increased 12.6% from prior period.
- The top 5 medications with PMPM increases and decreases from prior are shown in the table below.



Medications driving Rx paid PMPM Trend

• The top 20 Medications by cost in both time periods are shown in the table below.

			Prior			Current		
Medication	Indication	Specialty Drug	Claimants	Prescriptions	Paid PMPM	Claimants	Prescriptions	Paid PMPM
TRIKAFTA	Cystic fibrosis	Y	1	8	\$8.69	1	15	\$20.01
ICATIBANT ACETATE (generic Firazyr)	Hereditary angioedema (acute attacks)	Y	1	13	\$12.60	1	17	\$12.30
ALECENSA	Cancer	Y	1	11	\$10.39	1	13	\$11.13
ORLADEYO	Hereditary angioedema (prevent attacks)	Y	1	8	\$17.92			
STELARA	Autoimmune diseases	Y	1	6	\$8.38	1	7	\$9.00
RUCONEST	Hereditary angioedema (acute attacks)	Y				1	5	\$12.01
HAEGARDA	Hereditary angioedema (prevent attacks)	Y				1	4	\$11.52
VUMERITY	Multiple sclerosis	Y	1	12	\$5.42	1	12	\$5.51
CRESEMBA	Fungal infection	N	1	7	\$4.35	1	5	\$4.15
DUPIXENT	Autoimmune diseases	Y	3	23	\$4.26	3	19	\$3.60
SKYRIZI	Autoimmune diseases	Y	1	2	\$3.11	1	3	\$3.29
COSENTYX PEN	Autoimmune diseases	Y	1	10	\$3.45	1	9	\$2.63
HUMIRA PEN	Autoimmune diseases	Y	1	3	\$1.02	1	14	\$4.71
BIKTARVY	HIV	Y	1	5	\$2.30	1	5	\$2.17
VYVANSE	Attention deficit disorder	N	18	101	\$1.72	21	117	\$2.16
OZEMPIC	Diabetes	N	5	12	\$0.94	7	47	\$2.89
NORDITROPIN FLEXPRO	Growth hormone	Y	1	13	\$2.29	1	6	\$1.34
CREON	Digestive enzymes	N	3	7	\$0.75	2	12	\$2.63
ELIQUIS	Blood thinner	N	9	46	\$1.00	13	52	\$2.12
ORENCIA	Autoimmune diseases	Y	1	1	\$0.28	1	9	\$2.66
ALL OTHER			1,106	11,410	\$62.42	1,123	10,920	\$54.51
TOTAL			1,108	11,698	\$151.28	1,124	11,291	\$170.32

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		Prior			Current		
Medication	Indication	Claimants	Prescriptions	Prescriptions per 1K	Claimants	Prescriptions	Prescriptions per 1K
PFIZER-BIONTECH COVID-19 VACCINE	Covid vaccine	382	643	452.1	65	66	46.1
LEVOTHYROXINE SODIUM	Low thyroid	60	279	196.2	66	277	193.3
AMPHETAMINE/DEXTROAMPHETAMINE	Attention deficit disorder	31	194	136.4	34	251	175.2
ATORVASTATIN CALCIUM	Cholesterol	72	220	154.7	71	218	152.2
ESCITALOPRAM OXALATE	Depression	50	205	144.1	52	194	135.4
LISINOPRIL	Blood pressure/heart	60	206	144.8	51	159	111.0
SERTRALINE HCL	Depression	47	171	120.2	46	159	111.0
HYDROCODONE BITARTRATE/ACETAMINOPHEN	Pain (opioid)	99	157	110.4	85	142	99.1
OXYCODONE HYDROCHLORIDE	Pain (opioid)	61	142	99.8	64	150	104.7
OMEPRAZOLE	Stomach ulcer	56	160	112.5	45	116	81.0
BUPROPION HYDROCHLORIDE ER (XL)	Depression	31	111	78.0	44	153	106.8
LOSARTAN POTASSIUM	Blood pressure/heart	35	120	84.4	37	132	92.1
TRAZODONE HYDROCHLORIDE	Sleep	36	125	87.9	35	125	87.2
ESTRADIOL	Hormone replacement	47	137	96.3	36	101	70.5
AMLODIPINE BESYLATE	Blood pressure/heart	33	109	76.6	35	129	90.0
ALBUTEROL SULFATE HFA	Asthma	62	86	60.5	97	145	101.2
MONTELUKAST SODIUM	Asthma	31	103	72.4	32	123	85.9
VYVANSE	Attention deficit disorder	18	101	71.0	21	117	81.7
ALPRAZOLAM	Anxiety	32	104	73.1	30	104	72.6
TESTOSTERONE CYPIONATE	Hormone replacement	26	96	67.5	27	108	75.4
ALL OTHER		974	8,231	5,787.6	1,073	8,325	5,810.8
TOTAL		1,108	11,698	8,225.5	1,124	11,291	7,881.1

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2023 Drug Pipeline

Q2 2	2023	Q3 :	2023	Q4	2023
Efgartigimod (myasthenia gravis/SQ injection)	Paxlovid™ \$\$\$-\$\$\$\$ Nirmatrelvir/ritonavir (COVID/oral) EUA 12/21	Lebrikizumab (atopic dermatitis/SQ injection)	Humira® adalimumab (antiinflammatory /SQ) Launch of biosimilars	Etrasimod (ulcerative colitis/oral)	Vamorolone*^ (Duchenne muscular dystrophy/oral)
Zynquista™ sotagliflozin (heart failure/oral)	Obeticholic acid\$\$ (Nonalcoholic hepatitis/oral)	Zilucoplan (myasthenia gravis/ SQ injection)	Vyvanse® Lisdexamfetamine (ADHD/oral) Expected Generic	Stelara® (antiinflammatory diseases/infusion & SQ Launch of biosimilars	Entyvio® vedolizumab (ulcerative colitis/SQ, currently IV)
Roctavian^ \$\$\$\$ Valoctocogene (hemophilia A/ infusion)	Bimzelx™ bimekizumab (psoriasis/ subcutaneous)	COVID vaccines Intramuscular injection govt supply could end as soon as summer 2023	Concizumab (hemophilia A and B/subcutaneous)	Lifileucel^* (skin cancer/ infusion)	Lovotibeglogene automcel^ \$\$\$ (Sickle cell anemia/infusion)
SRP-9001^ \$\$\$\$ (Duchenne muscular dystrophy/infusion)		Talquetamab (Multiple myeloma/SQ health administered)	Fidanacogene elaparvovec^ (Hemophilia B/infusion)		Medical benefit: IV Infusion
		Beyfortus™ Nirsevimab			Pharmacy benefit: Self-administered
		(Respiratory syncytial virus		к	еу
		[RSV]/intramuscular)		\$	<0.08 PMPM
^ Gene or CAR-T therap *FDA Priority Review	у			\$	\$\$\$0.08-0.39 PMPM
EUA = Emergency Use A				\$	\$\$\$\$0.40-\$2.00 PMPM

\$\$\$\$ >\$2.00 PMPM

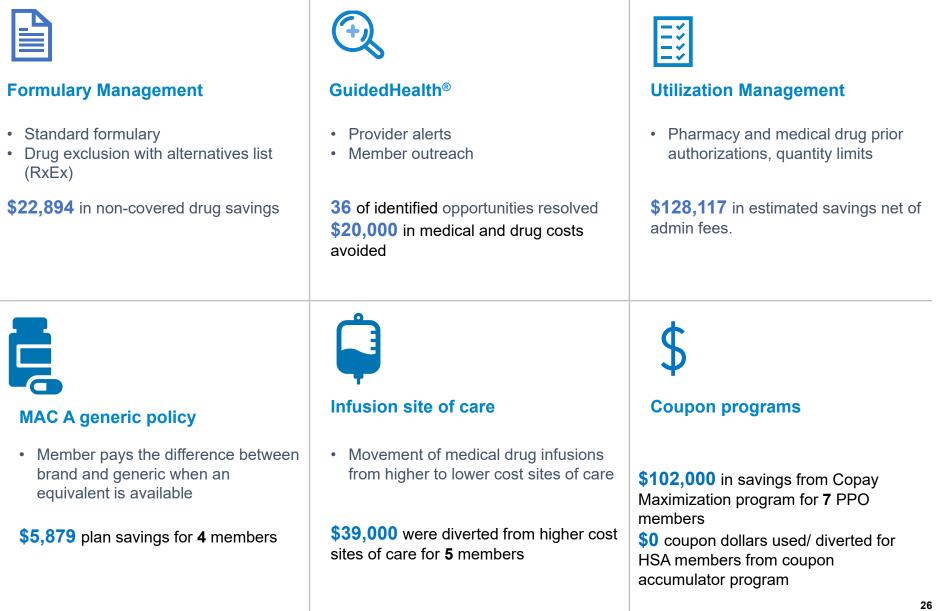
Last updated 5/02/2023

Current pharmacy programs and opportunities

Program not implemented

Programs	Description	
Formulary	Standard Formulary with Drug Exclusions with Alternatives (RxEx) list	
Benefit Design	3 tier: \$10 Tier 1, \$30 Tier 2, \$60 Tier 3 for PPO plan; 20% for HSA plan. Compounds Tier 3 - require prior authorization if over \$500; Consider adding Tier 4 to PPO plan (specialty tier) and adjusting copays.	
Generics	Member pays the difference if fills a brand drug when a generic equivalent is available. MAC A applies to all plan (moved to MAC A for HSA 1.1.2023)	IS
Specialty Select	Requires filling specialty drugs at a preferred specialty pharmacy to provide optimal drug cost and quality of service Includes split fill program that reduces waste.	e.
Coupon management	Coupon management programs that offer savings to members and clients for drugs that offer coupons. Copay Max program for PPO; Coupon Accumulator program for HSA Consider FlexAccess for PPO.	
Mail Order	Allows members to obtain greater than 30 days supply of long-term medications via mail. 1 copay for 90-day supp Mail order provider: Express Scripts. Consider move to Amazon Home Deliver with embedded MedsYourW discount card.	
Medication Support	Embedded medication support in Regence.com. Consider Enhanced Medication Support (EMS): addition of a medication effectiveness and cost transparency tool, additional campaigns, and 'ask-a-pharmacist'.	
Site of Care program	Moving medical drug infusions to a lower cost infusion site when available (e.g., the home or an ambulatory site).	
Utilization Management	Integrated prior authorization, step therapy and quantity limits for drugs on the pharmacy and medical benefit.	
GuidedHealth®	Integrated medical and pharmacy program that identifies care gaps (poor drug adherence, safety issues); notifies provider/member through a phone calls and/or letter	
Point-of-Sale Alerts	Identifies opportunities to improve safety and health outcomes for members (such as duplicate therapies or drug interactions) at point of sale in pharmacy	
Controlled Substances	Evidence-based policies to ensure appropriate prescribing; suite of services to provide member support; point-of- sale alerts for pharmacists	

Pharmacy Management Program Outcomes (2022)



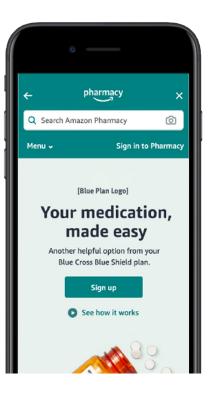
\$317,890 (\$18.49 PMPM) in estimated & actual plan savings in 2022

Regence coupon management solution considerations

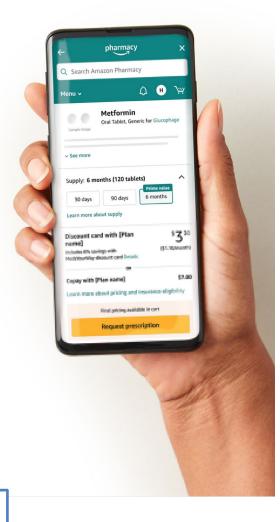
	Coupon accumulator (in place)	Copay maximization (in place)*	Flex Access (new)		
Applicable plans	HSA	PPO	PPO only		
Requires specialty pharmacy	Yes	Yes	No		
Coupon value	Does not apply to accumulators	Coupon value is maximized and does not apply to accumulators	Coupon value is maximized and does not apply to accumulators		
Medications	Any drug where a coupon is applied	105	609 (includes HIV)		
Members pay	Out-of-pocket cost	\$0	\$0—\$35		
Administration fee	\$0	\$100/claim	\$200/claim*		
City of Vancouver estimated savings	\$0 diverted (2022)	\$102,000 on 7 members (net admin fees, 2022)	\$220,135 on 21 members (net admin fees, 4/1/22- 3/31/23)		
Notes	Group may keep coupon accumulator program for HSA plan and adopt Flex Access for PPO plan. *Copay maximization program sunsetting 12/31/23				

New home delivery option

Amazon Pharmacy Home Delivery with integrated MedsYourWay[®] discount savings



- Can stay with ESI Mail delivery or switch to Amazon Pharmacy Home Delivery
- Incorporates MedsYourWay® discount card and applies covered purchases to accumulators
- May offer better pricing
- Superior member digital experience with easy sign-up and shopping experience
- Amazon Prime members get 2-day free delivery or 5-day free delivery without Prime Membership



14 utilizers of ESI in 2022 (City of Vancouver) 0 utilizers from Vancouver Housing

Enhanced Medication Support (EMS)

Upgrade your solution to maximize savings on Regence.com

	Medication Support (Embedded)	Enhanced Medication Support (Buy-up)
Pharmacy Benefit Information Research medication coverage and cost based on your formulary and benefit structure	\checkmark	~
Find a Pharmacy Search for pharmacies in your area and compare prices	\checkmark	\checkmark
Medication Timeline See all your medication claim history information in one place	\checkmark	\checkmark
Specialty Pharmacy and Mail Order Integration Research and access specialty pharmacy and mail order services	~	~
Pharmacy Forms and Documents Find all the forms and documents needed to leverage your pharmacy benefits	\checkmark	~
Medication campaign alerts 3 basic types of campaigns: safety, recall, and general information	\checkmark	\checkmark
Medication campaign alerts 8 <u>additional</u> campaign types including cost savings and medication adherence		\checkmark
Ask a Pharmacist Concierge support available for you; Medication Cabinet checks		\checkmark
Effectiveness at-a-glance Compare medications by grade and price to help select the right medication		~
Quarterly Reporting Actionable reports to highlight the savings opportunities for your population, realized savings, and more		~
Client Success Manager A partner to help drive engagement and maximize your savings potential		~

Key Findings & Opportunities

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	Finding	Opportunities
Medical Spend	Medical paid PMPM increased 9% from prior year and is 18% above benchmark 88% of members are utilizing services	Continue to promote primary care engagement for preventative care, early illness and mental health detection, and avoidance of ER visits.
Pharmacy Spend	Pharmacy paid PMPM increased 13% from prior year and is 64% above benchmark Specialty drugs account for 66% of the total paid amount for pharmacy claims	Consider Flex Access for specialty drug savings on PPO plan Consider enhanced medication support with custom population campaigns
Provider & ER Utilization	 60% of members attribute to a primary care provider 14 professional visits/member is 40% above BM ER utilization increased 39% YOY to 119 visits/1k and is still below BM of 160 visits/1k The avoidable ER rate is 45% vs. 41% BM 	Promote primary care engagement as a strategy to reduce avoidable ER visits Promote NurseLine (Advice24) and Doctor on Demand as alternatives to ER utilization
Behavioral Health	Behavioral health paid PMPM is 6% above benchmark 79% of BH spend is for professional services	 Promote in-network virtual behavioral health providers to support mental health and easier access to care TalkSpace AbleTo+ Doctor on Demand
Population Health	Members are near or above 75 th percentile for 8 out of 10 HEDIS measures High enrollment in Condition Manager and Pregnancy programs Musculoskeletal paid PMPM is 45% above benchmark.	Continue to promote Primary Care manage chronic conditions and mitigate risks Encourage members to log into Regence.com for up-to-date and personalized benefit information Promote Empower wellness and response to care gaps messaging to increase member engagement with care

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Appendix

	Approved SOC/Other		Savings for Approved SOC		
Infusion Name	Number of Members	Claim Counts	Rounded Savings	PMPM Savings	
ENTYVIO	1	8	\$15K	\$0.90	
FASENRA	1	2	\$0K	\$0.00	
INFLECTRA	3	14	\$24K	\$1.40	
REMICADE	1	1	\$0K	\$0.00	
Total	5	25	\$39K	\$2.30	

Additional notes on infusion site of care:

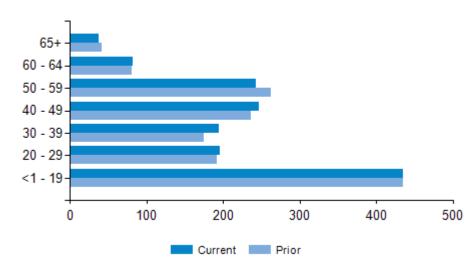
• Dates of Service: Incurred Jan 2022 - Dec 2022* (this report does not have full runout)

• Savings is calculated from the difference in average infusion at unapproved OP hospital and an approved SOC.

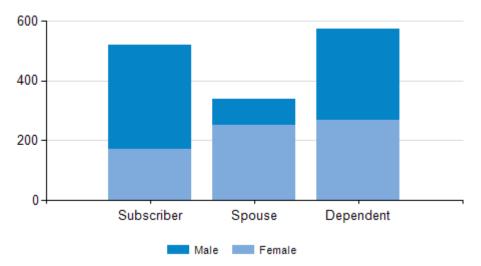
Enrollment Overview

Demographics	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022	% Change	Benchmark	Benchmark Variance
Average Membership	1,422	1,433	0.7%		
Subscribers	516	520	0.9%		
Spouses	337	340	0.9%		
Dependents	569	573	0.5%		
Average Contract Size	2.8	2.8	-0.1%		
% Female	48.1%	48.5%	0.7%	48.5%	
Average Age	33.7	33.4	-0.9%	33.3	0.5%
Subscribers	46.8	46.1	-1.6%	46.0	0.2%
Spouses	47.7	47.1	-1.3%	47.0	0.2%
Dependents	13.6	13.8	1.6%	13.2	4.7%

Average Members by Age Band



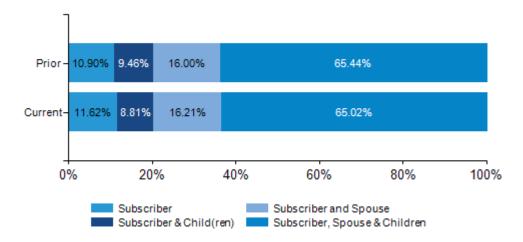
Gender Ratio by Relationship



1,432.7

0.7%

% of Total Members of Enrollment Tier



Top 5 Member States	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022	% Change
WA	1,247.4	1,267.8	1.6%
OR	110.4	132.0	19.5%
AZ	18.8	11.3	-39.8%
AL	6.0	5.8	-4.2%
TN	10.3	5.3	-49.2%
Top 5 States Summary	1,393.0	1,418.3	1.8%
All Other States	29.2	14.3	-50.9%
Overall Summary	1,422.2	1,432.7	0.7%

Members by Class Plan **Top 3 Class Plans** Jan 2021 - Dec 2021 Jan 2022 - Dec 2022 % Change MESA1001 - ASC 999.7 1.010.2 1.1% Custom Product 1 MHSA1001 - HSA 305.3 300.4 -1.6% Medical Plan 1 MESA2001 - ASC 117.2 122.1 4.2%

1,422.2

Custom Product 2

Summary

- Average Members increased 0.7% compared to the prior reporting period and Average Subscribers increased 0.9%.
- The population is 48.5% female with an overall average age of 33.4 years (see Enrollment Overview page).
- 65.0% of members are enrolled in the Subscriber, Spouse & Children enrollment tier.
- Enrollment in the MESA1001 ASC Custom Product 1 class plan increased 1.1% compared to the prior reporting period.
- There are 37 members in the group that are over the age of 65 as of the current reporting period (see Enrollment Overview page).

Cost & Utilization Key Indicators

Jan 2021 - Dec 2021 Jan 2022 - Dec 2022 **Benchmark Variance** Service Category Metric % Change Benchmark Allowed PMPM \$61.92 \$86.59 39.9% \$83.77 3.4% Paid \$1,016,369.39 \$1,407,838.94 38.5% Paid PMPM \$59.56 \$81.89 37.5% \$77.62 5.5% Admissions 53 51 -3.8% Facility Inpatient Admissions Per 1,000 37.3 35.6 -4.5% 35.1 1.4% Days Per 1,000 161.7 136.1 -15.8% 186.7 -27.1% Average Length of Stay 4.3 3.8 -11.9% 5.9 -35.5% Paid Per Admission \$19,176.78 \$27,604.69 43.9% \$27,985.70 -1.4% Paid Per Day \$4,419.00 \$7,219.69 63.4% \$4,782.86 50.9% Allowed PMPM \$93.41 \$91.00 -2.6% \$114.70 -20.7% Paid \$1,424,873.26 \$1,346,579.49 -5.5% Paid PMPM -6.2% -19.8% \$83.49 \$78.33 \$97.68 Facility Outpatient Visits 364 361 -0.8% Visits Per 1,000 255.9 252.0 -1.6% 355.9 -29.2% Paid Per Visit \$3,914.49 \$3,730.14 -4.7% \$3,006.37 24.1% 38.7% Allowed PMPM \$291.81 \$310.90 6.5% \$224.07 Paid \$4,091,335.78 \$4,421,372.89 8.1% 44.7% Paid PMPM \$239.74 \$257.18 7.3% \$177.75 Professional 38,607 38,516 -0.2% Services Services Per Member 27,146.6 26,884.1 -1.0% 20,291.8 32.5% Paid Per Service \$105.97 \$114.79 8.3% \$102.93 11.5% \$447.13 \$488.49 \$422.54 15.6% Allowed PMPM 9.2% Paid \$6,532,578.43 \$7,175,791.32 9.8% Paid PMPM \$382.78 \$417.39 9.0% \$353.05 18.2% Medical Summary In-Network Paid % 99.0% 99.1% 98.5% In-Network Services % 96.9% 97.8% 96.8% Plan Share % 87.0% 87.3% 84.3% Allowed PMPM \$163.34 \$186.99 14.5% 61.0% \$116.18 Paid \$2,581,745.30 \$2,928,125.12 13.4% Paid PMPM \$151.28 \$170.32 12.6% \$104.10 63.6% Prescriptions 11,698 11,291 -3.5% Pharmacy Prescriptions Per Member 8.2 7.9 -4.2% 8.2 -3.8% Prescriptions Per 1,000 8,225.5 7,881.1 -4.2% 8,192.9 -3.8% Paid Per Prescription \$220.70 \$259.33 17.5% \$151.58 71.1% \$675.48 35.1% Allowed PMPM \$610.47 10.6% \$499.81 10.9% **Overall Summary** Paid \$9,114,323.73 \$10,103,916.44 Paid PMPM \$587.71 10.0% \$422.28 39.2% \$534.06

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\$587.71

Current Paid PMPM

10.0% Change Year Over Year

> **39.2%** Greater than Benchmark

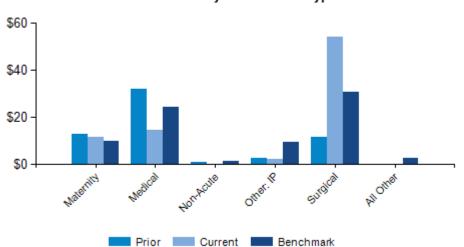
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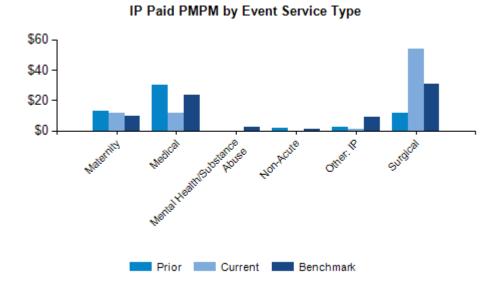
Inpatient Analysis

Metrics	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022	% Change	Benchmark	Benchmark Variance
IP Allowed	\$1,056,647.24	\$1,488,697.30	40.9%		
IP Allowed PMPM	\$61.92	\$86.59	39.9%	\$83.77	3.4%
IP Paid	\$1,016,369.39	\$1,407,838.94	38.5%		
IP Paid PMPM	\$59.56	\$81.89	37.5%	\$77.62	5.5%
Admissions	53	51	-3.8%		
Admissions per 1,000	37.3	35.6	-4.5%	35.1	1.4%
Paid per Admission	\$19,176.78	\$27,604.69	43.9%	\$27,985.70	-1.4%
Days	230	195	-15.2%		
Days per 1,000	161.7	136.1	-15.8%	186.7	-27.1%
Paid per Day	\$4,419.00	\$7,219.69	63.4%	\$4,782.86	50.9%
Average Length of Stay	4.3	3.8	-11.9%	5.9	-35.5%

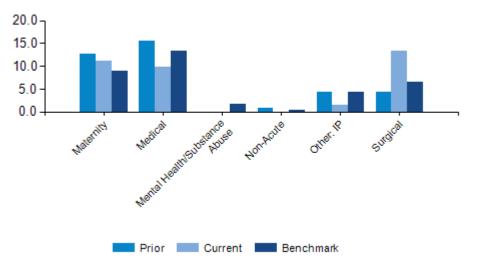


IP Paid PMPM by Line Service Type

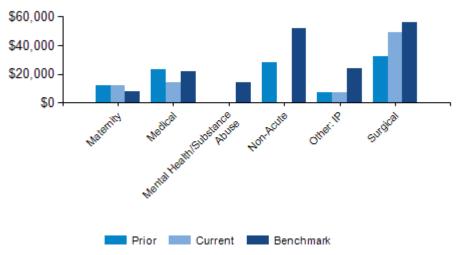
- IP Paid PMPM increased 37.5% compared to the prior reporting period and was 5.5% greater than the benchmark.
- The Line Service Type with the highest IP Paid PMPM in the current period was Surgical at \$54.12.
- Admissions per 1,000 at 35.6 in the current period, is trending down compared to the prior period and is greater than the benchmark value of 35.1.



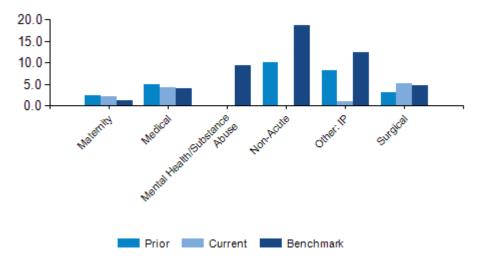
Admissions per 1,000 by Event Service Type



Paid per Admission by Event Service Type



Average Length of Stay by Event Service Type

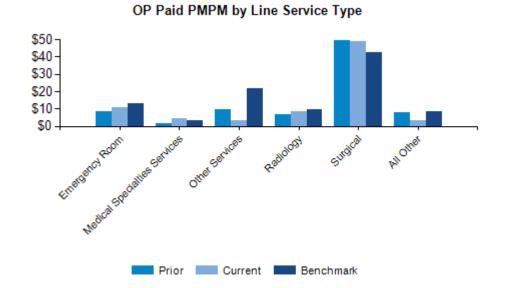


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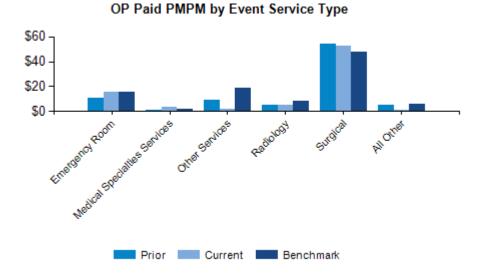
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Outpatient Analysis

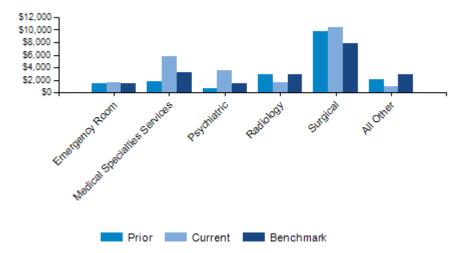
Metrics	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022	% Change	Benchmark	Benchmark Variance
OP Allowed	\$1,594,183.60	\$1,564,457.88	-1.9%		
OP Allowed PMPM	\$93.41	\$91.00	-2.6%	\$114.70	-20.7%
OP Paid	\$1,424,873.26	\$1,346,579.49	-5.5%		
OP Paid PMPM	\$83.49	\$78.33	-6.2%	\$97.68	-19.8%
Visits	364	361	-0.8%		
Visits per 1,000	255.9	252.0	-1.6%	355.9	-29.2%
Paid per Visit	\$3,914.49	\$3,730.14	-4.7%	\$3,006.37	24.1%

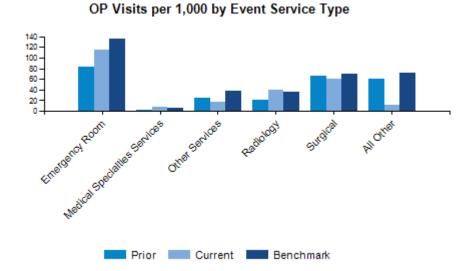


- OP Paid PMPM decreased 6.2% compared to the prior reporting period and was 19.8% less than the benchmark.
- The Line Service Type with the highest OP Paid PMPM in the current period was Surgical at \$48.92.
- Visits per 1,000 at 252.0 in the current period is trending down compared to the prior period and is less than the benchmark value of 355.9.



Paid per Visit by Event Service Type





- Surgical was the event service type with the highest paid PMPM for outpatient services in the current reporting period. Paid PMPM decreased 3.3% compared to the prior reporting period and was 10.2% greater than the benchmark.
- Emergency Room had the highest rate of visits per 1,000 in the current reporting period.
- Surgical had the highest amount paid per visit in the current reporting period.

Emergency Room Analysis

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Metrics	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022	% Change	Benchmark	Benchmark Variance
ER Allowed	\$330,918.05	\$467,817.27	41.4%		
ER Allowed PMPM	\$19.39	\$27.21	40.3%	\$34.23	-20.5%
ER Paid	\$249,228.64	\$359,731.01	44.3%		
ER Paid PMPM	\$14.60	\$20.92	43.3%	\$25.69	-18.5%
ER Visits	122	171	40.2%		
ER Visits per 1,000	85.8	119.4	39.1%	158.8	-24.8%
Allowed per ER Visit	\$2,712.44	\$2,735.77	0.9%	\$2,577.17	6.2%
Paid per ER Visit	\$2,042.86	\$2,103.69	3.0%	\$1,930.56	9.0%
% of Claimants w/ 3+ ER Visits	2.8%	5.0%	75.4%	6.7%	-26.4%

ER Utilization by Visit Count

ER Utilization by Top 5 Diagnosis Group

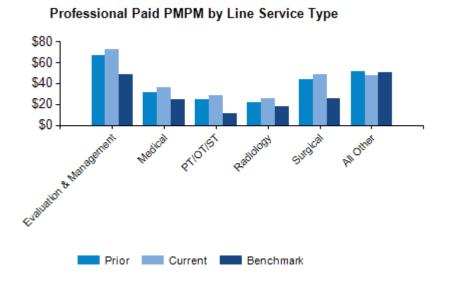
Diagnosis Group	ER Paid	ER Visits	Paid per ER Visit	ER Visits per 1,000
Digestive	\$101,566.89	22	\$4,616.68	15
Symptoms/III-Defined	\$74,114.65	46	\$1,611.19	32
Genitourinary	\$54,590.97	12	\$4,549.25	8
Circulatory	\$32,428.84	11	\$2,948.08	8
Injury/Poisoning	\$30,813.09	34	\$906.27	24
All Other	\$66,216.57	45	\$1,408.86	33
Total	\$359,731.01	171	\$2,103.69	119

ER Visits	% of ER Utilizers	ER Visits	ER Paid
1	85.1%	119	\$242,456.19
2	9.9%	28	\$44,282.91
3	2.8%	12	\$34,579.40
4	2.1%	12	\$38,995.87
5+			
Total	100.0%	171	\$359,731.01

- ER Paid PMPM increased 43.3% between the two reporting periods and was 18.5% less than the benchmark.
- ER visits per 1,000 increased 39.1% between the two reporting periods and was 24.8% less than the benchmark.

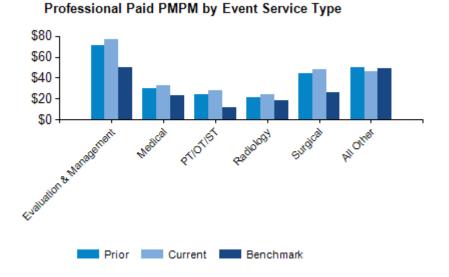
Professional Analysis

Metrics	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022	% Change	Benchmark	Benchmark Variance
Professional Allowed	\$4,979,957.35	\$5,344,928.44	7.3%	20110111	
Professional Allowed PMPM	\$291.81	\$310.90	6.5%	\$224.07	38.7%
Professional Paid	\$4,091,335.78	\$4,421,372.89	8.1%		
Professional Paid PMPM	\$239.74	\$257.18	7.3%	\$177.75	44.7%
Visits	20,638	20,332	-1.5%		
Visits per Member	14.51	14.19	-2.2%	10.08	40.7%
Paid per Visit	\$198.24	\$217.46	9.7%	\$205.13	6.0%
Procedures	38,607	38,516	-0.2%		
Procedures per 1,000	27,146.6	26,884.1	-1.0%	20,291.8	32.5%
Paid per Procedure	\$105.97	\$114.79	8.3%	\$102.93	11.5%

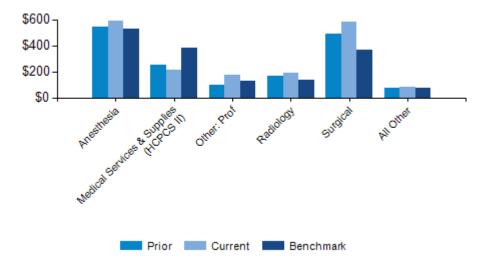


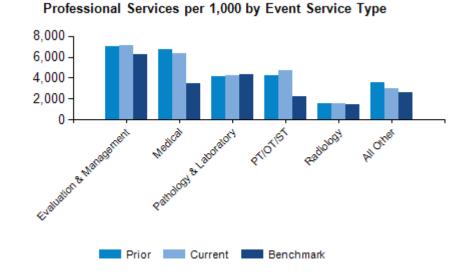
- Professional Paid PMPM increased 7.3% compared to the prior reporting period and was 44.7% greater than the benchmark.
- The Line Service Type with the highest Professional Paid PMPM in the current period was Evaluation & Management at \$72.09
- Visits per Member at 14.2 in the current period is trending down compared to the prior period and is greater than the benchmark value of 10.1.

Professional Key Indicators by Event Service Type



Paid per Service by Event Service Type





• Evaluation & Management was the event service type with the highest paid PMPM for professional services in the current reporting period. Paid PMPM increased 8.2% compared to the prior reporting period and was 53.6% greater than the benchmark.

- Evaluation & Management had the highest rate of services per 1,000 in the current reporting period.
- Anesthesia had the highest amount paid per service in the current reporting period.

Pharmacy Key Indicators

Demographics	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022	% Change	Benchmark	Benchmark Variance
Claimants	1,108	1,124	1.4%		
Prescriptions	11,698	11,291	-3.5%		
Prescriptions per Member	8.2	7.9	-4.2%	8.2	-3.8%
Generic Dispensing Rate	80.1%	82.0%		83.7%	
Paid	\$2,581,745.30	\$2,928,125.12	13.4%		
Paid PMPM	\$151.28	\$170.32	12.6%	\$104.10	63.6%
Paid per Prescription	\$220.70	\$259.33	17.5%	\$151.58	71.1%
Paid per Claimant	\$2,330.10	\$2,605.09	11.8%	\$1,380.29	88.7%
Out of Pocket % Cost Share	5.3%	8.4%		8.7%	
Specialty Drug Claimants	48	59	22.9%		
Specialty % of Paid	62.2%	66.3%		57.0%	
Specialty Paid per Prescription	\$6,219.87	\$7,765.62	24.9%		

- Pharmacy Paid PMPM increased 12.6% between the two reporting periods and it was 63.6% greater than the benchmark.
- Prescriptions per Member decreased 4.2% between the two reporting periods and it was 3.8% less than the benchmark, while Paid per Prescription increased 17.5% between the two reporting periods and it was 71.1% greater than the benchmark.
- Specialty Drugs accounted for 66.3%, compared to 62.2% of the pharmacy spend in the prior period, and 57.0% for the benchmark.

Specialty Drug Indicator	Paid PMPM	Prescriptions	Paid per Prescription	Prescriptions per Member
Yes	\$112.92	250	\$7,765.62	0.2
No	\$57.39	11,041	\$89.37	7.7
Summary:All	\$170.32	11,291	\$259.33	7.9

Top Non-Specialty Prescription Drugs

Prior Rank	Current Rank	Drug Name	Therapeutic Class	Prescriptions	Paid	Paid per Prescription	Generic Indicator	Rank by Volume	Paid (Prior Period)
1	1	CRESEMBA	1140 - Imidazole-Related Antifungals	5	\$71,303.22	\$14,260.64	Brand	14	\$74,174.18
8	2	OZEMPIC	2717 - Incretin Mimetic Agents	47	\$49,644.19	\$1,056.26	Brand	5	\$16,049.66
10	3	CREON	5120 - Digestive Enzymes	12	\$45,202.14	\$3,766.85	Brand	12	\$12,871.07
3	4	VYVANSE	6110 - Amphetamines	117	\$37,149.76	\$317.52	Brand	1	\$29,388.69
7	5	ELIQUIS	8337 - Direct Factor Xa Inhibitors	52	\$36,505.55	\$702.03	Brand	4	\$17,030.41
9	6	XYOSTED	2310 - Androgens	67	\$27,329.59	\$407.90	Brand	3	\$15,561.85
11	7	JARDIANCE	2770 - Sodium-Glucose Co- Transporter 2 (SGLT2) Inhibitors	27	\$23,844.58	\$883.13	Brand	7	\$11,988.68
2	8	VICTOZA	2717 - Incretin Mimetic Agents	18	\$19,202.18	\$1,066.79	Brand	9	\$29,521.57
6	9	EMGALITY	6770 - Calcitonin Gene-Related Peptide (CGRP) Receptor Antag	20	\$16,000.58	\$800.03	Brand	8	\$18,157.62
12	10	SYMBICORT	4420 - Sympathomimetics	42	\$14,497.69	\$345.18	Brand	6	\$11,358.66
14	11	NURTEC	6770 - Calcitonin Gene-Related Peptide (CGRP) Receptor Antag	13	\$14,074.93	\$1,082.69	Brand	10	\$5,377.70
5	12	METHYLPHENIDATE HYDROCHLORIDE ER	6140 - Stimulants - Misc.	87	\$13,703.23	\$157.51	Generic	2	\$18,216.83
13	13	RYTARY	7320 - Antiparkinson Dopaminergics	5	\$13,567.36	\$2,713.47	Brand	15	\$10,145.05
4	14	TRULICITY	2717 - Incretin Mimetic Agents	7	\$12,683.04	\$1,811.86	Brand	13	\$24,821.53
	15	QULIPTA	6770 - Calcitonin Gene-Related Peptide (CGRP) Receptor Antag	13	\$11,954.93	\$919.61	Brand	11	
		All Other		10,509	\$580,057.62	\$55.20			\$682,354.07
		Total		11,041	\$986,720.59	\$89.37			\$977,017.57

Specialty Drug Analysis

Metrics	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022	% Change	Benchmark	Benchmark Variance
Allowed	\$1,655,030.12	\$2,064,084.30	24.7%		
Allowed PMPM	\$96.98	\$120.06	23.8%	\$60.34	99.0%
Paid	\$1,604,727.73	\$1,941,404.53	21.0%		
Paid PMPM	\$94.03	\$112.92	20.1%	\$57.23	97.3%
Prescriptions per Member	0.2	0.2	-3.8%	0.1	18.5%
Specialty Drug Claimants	48	59	22.9%		
Specialty Drug Prescriptions	258	250	-3.1%		
Specialty Paid per Prescription	\$6,219.87	\$7,765.62	24.9%	\$5,157.64	50.6%
Total Out of Pocket	\$6,104.33	\$118,448.00	1840.4%		
Out of Pocket PMPM	\$0.18	\$3.44	1826.2%		
Specialty % of Paid	62.2%	66.3%	6.7%	57.0%	16.4%

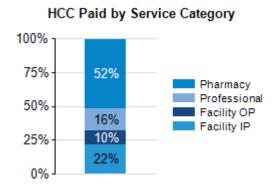
Top 5 Specialty Drugs	Prescriptions	Paid	Paid per Prescription
TRIKAFTA	15	\$343,940.25	\$22,929.35
ICATIBANT ACETATE	17	\$211,420.57	\$12,436.50
RUCONEST	5	\$206,529.00	\$41,305.80
HAEGARDA	4	\$198,081.00	\$49,520.25
ALECENSA	13	\$191,329.26	\$14,717.64
All Other	196	\$790,104.45	\$4,031.15
Total	250	\$1,941,404.53	\$7,765.62

- Pharmacy Paid PMPM for specialty drugs increased 20.1% compared to the prior reporting period and was 97.3% greater than the benchmark.
- 2.2% of prescriptions were for specialty drugs, accounting for 66.3% of the total paid amount for all pharmacy claims.
- The top specialty drug was TRIKAFTA for a cost of \$343,940.25.

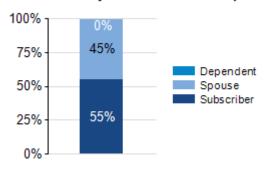
High Cost Claimant Breakdown

Claimant Paid Band	Claimants	Claimants %	Paid	Paid %	Paid per Claimant
\$10,000 - \$50,000	150	82.0%	\$3,250,668.17	43.2%	\$21,671.12
\$50,001 - \$100,000	19	10.4%	\$1,377,225.86	18.3%	\$72,485.57
\$100,001 - \$250,000	11	6.0%	\$1,608,060.66	21.4%	\$146,187.33
\$250,001 - \$500,000	2	1.1%	\$646,215.26	8.6%	\$323,107.63
Greater than \$500,000	1	0.5%	\$646,170.62	8.6%	\$646,170.62
Summary > \$50,000	33	18.0%	\$4,277,672.40	56.8%	\$129,626.44
Overall Summary	183	100.0%	\$7,528,340.57	100.0%	\$41,138.47

Top HCC Leading Diagnostic Categories	Claimants	Paid	Paid per Claimant
Neoplasms	10	\$692,666.60	\$69,266.66
Leukemia - chronic lymphocytic leukemia (CLL)	1	\$164,334.66	\$164,334.66
Head and neck cancers - lip and oral cavity	1	\$142,900.09	\$142,900.09
Secondary malignancies	2	\$120,275.77	\$60,137.89
All Other	9	\$265,156.08	\$29,461.79
Circulatory	9	\$254,857.74	\$28,317.53
Nonrheumatic and unspecified valve disorders	2	\$108,004.77	\$54,002.39
Other and ill-defined cerebrovascular disease	1	\$83,807.04	\$83,807.04
Acute hemorrhagic cerebrovascular disease	2	\$55,062.57	\$27,531.29
All Other	8	\$7,983.36	\$997.92
Symptoms/III-Defined	14	\$137,511.97	\$9,822.28
Encounter for antineoplastic therapies	3	\$61,269.65	\$20,423.22
Abdominal pain and other digestive/abdomen signs and symptoms	6	\$15,538.99	\$2,589.83
Implant, device or graft related encounter	3	\$11,590.83	\$3,863.61
All Other	14	\$49,112.50	\$3,508.04
All Other	14	\$1,815,410.23	\$129,672.16
Total	14	\$2,900,446.54	\$207,174.75



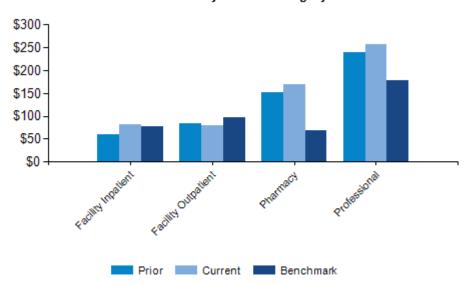
HCC Paid by Member Relationship



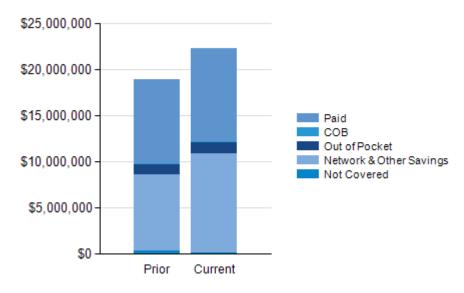
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Financial Key Indicators

Financial Key Indicators	Jan 2021 - Dec 2021	Jan 2022 - Dec 2022	% Change	Benchmark	Benchmark Variance
Billed	\$18,801,134.93	\$22,179,590.26	18.0%		
Contract Exclusion Amount	\$398,465.05	\$117,428.56	-70.5%		
Allowed	\$10,418,268.80	\$11,612,845.44	11.5%		
Total Out of Pocket	\$1,123,203.61	\$1,309,245.31	16.6%		
СОВ	\$68,774.13	\$97,189.25	41.3%		
Paid	\$9,114,323.73	\$10,103,916.44	10.9%		
Paid PEPM	\$1,472.19	\$1,618.18	9.9%	\$761.33	112.5%
Paid PMPM	\$534.06	\$587.71	10.0%	\$422.28	39.2%
HCC Paid PMPM	\$137.80	\$168.71	22.4%	\$102.30	64.9%
Excluding HCC Paid PMPM	\$396.26	\$419.00	5.7%	\$319.97	30.9%



Paid PMPM by Service Category



Breakdown of Billed Amount

Regence | TrendSmart

Claims Distribution

Paid Band	Claimants	Claimants %	Paid	Paid %	Paid/Claimant
\$0	19	1.3%	\$0.00	0.0%	\$0.00
\$1 - \$4,999	1,077	74.9%	\$1,484,509.38	14.7%	\$1,378.37
\$5,000 - \$9,999	159	11.1%	\$1,091,066.49	10.8%	\$6,862.05
\$10,000 - \$19,999	88	6.1%	\$1,274,567.44	12.6%	\$14,483.72
\$20,000 - \$49,999	62	4.3%	\$1,976,100.73	19.6%	\$31,872.59
Summary < \$50,000	1,405	97.7%	\$5,826,244.04	57.7%	\$4,146.79
\$50,000 - \$99,999	19	1.3%	\$1,377,225.86	13.6%	\$72,485.57
Summary < \$100,000	1,424	99.0%	\$7,203,469.90	71.3%	\$5,058.62
\$100,000 - \$249,999	11	0.8%	\$1,608,060.66	15.9%	\$146,187.33
\$250,000 - \$499,999	2	0.1%	\$646,215.26	6.4%	\$323,107.63
Summary < \$500,000	1,437	99.9%	\$9,457,745.82	93.6%	\$6,581.59
Greater Than \$500,000	1	0.1%	\$646,170.62	6.4%	\$646,170.62
Overall Summary	1,438	100.0%	\$10,103,916.44	100.0%	\$7,026.37

	Claimants	%	Paid %		Paid/Claima	nt
Paid Band	Jan 2022 - Jan 2023	Benchmark	Jan 2022 - Jan 2023	Benchmark	Jan 2022 - Jan 2023	Benchmark
Summary < \$50,000	97.71%	98.18%	57.66%	59.76%	\$4,146.79	\$3,152.09
Summary < \$100,000	99.03%	99.37%	71.29%	75.79%	\$5,058.62	\$3,949.86
Summary < \$500,000	99.93%	99.98%	93.60%	96.80%	\$6,581.59	\$5,014.37

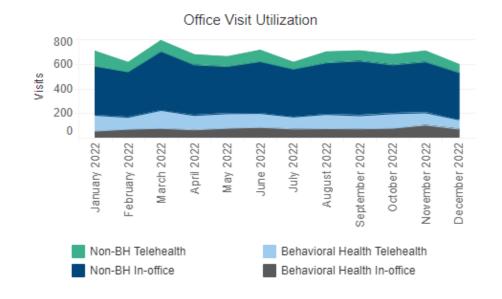
• 197 members, representing 12.0% of the population, did not utilize any services in the current period.

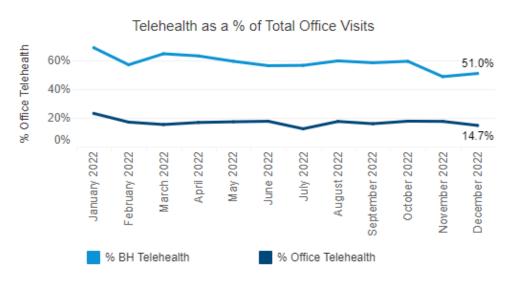
Regence | TrendSmart

Network Analysis

Network Indicator	Service Category	Covered	Provider Discount	Provider Discount %	Paid	% of total Paid
	Facility Inpatient	\$3,589,408.57	\$2,139,814.36	59.6%	\$1,360,147.85	19.3%
In Notwork	Facility Outpatient	\$2,721,262.27	\$1,237,248.96	45.5%	\$1,290,615.84	18.4%
In Network	Professional	\$8,967,963.03	\$3,653,525.02	40.7%	\$4,315,245.72	61.4%
	Summary	\$15,278,633.87	\$7,030,588.34	46.0%	\$6,966,009.41	99.1%
	Facility Inpatient					
Out of Notwork	Facility Outpatient					
Out of Network	Professional	\$123,483.68			\$65,495.43	0.9%
	Summary	\$123,483.68			\$65,495.43	0.9%
Overall Summary		\$15,402,117.55	\$7,030,588.34	45.6%	\$7,031,504.84	100.0%

Telehealth Visits





100.0% of successfully contacted members engaged with a care manager

	Prior	Current	Benchmark
Members Outreached	1.3%	1.6%	1.8%
Members Contacted	1.0%	1.0%	0.9%
Members Not Engaged	0.1%	0.0%	0.1%
Members Engaged	1.0%	1.0%	0.9%

* An additional 4 cases are currently open and engagement status is pending

	Prior	Current	Benchmark
% Engagement Rate	100.0%	100.0%	95.1%
% Contact Rate	73.7%	65.2%	51.5%

Members can have multiple cases. Member Engagement status based on highest level of contact on any case.

Members Outreached = Member attempted to be reached by a care manager Members Contacted = Member successfully reached by a care manager Engagement Rate = Members Engaged / Members Contacted Contact Rate = Members Contacted / Members Outreached

Exclusions from this dashboard:

Cases for care gap closure Maternity care advocate cases

Current reporting period: 202201 - 202212 Prior reporting period: 202101 - 202112



Care Management Case Summary



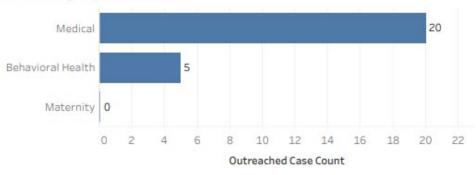
Top Conditions	Prior	Current
Other	9	5
Pain	3	3
Acute Health Condition	1	4
Cancer		4
Substance Use Disorder	2	2
Gastrointestinal		3
Anxiety	2	
Chronic Condition (Non-BH)		2
Pregnancy	2	
Trauma - physical	1	1
All Other	4	

Top Conditions and Top Identification tables use outreached case counts. Members can have multiple cases.

Exclusions from this dashboard: Cases for care gap closure

Maternity care advocate cases

Current reporting period: 202201 - 202212 Prior reporting period: 202101 - 202112 Cases by Open Reason

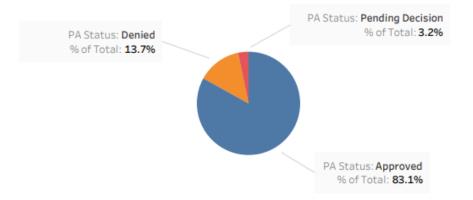


Top Identification Reasons	Prior	Current
ER Utilization	6	10
Hospital Discharge	8	5
High Cost Claimant	1	2
Pregnancy	3	
СМ	1	1
Inpatient Hospital Concurrent Review		2
Member/Caregiver		2
Network Related Case Management	1	1
All Other	1	1
Al Predictive Model	1	
Account Exc/Sales	2	

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Utilization Management

% Prior Authorizations Approved/Denied



Prior Authorizations by Service Group

	Approved	Denied	Pending	Grand Total	% Approved
Additional PAs	52	2	0	54	96.3%
Medicine	20	4	1	25	80.0%
Genetic Testing	2	6	3	11	18.2%
Pharmacy	10	1	0	11	90.9%
Surgery	6	2	0	8	75.0%
Radiology	7	0	0	7	100.0%
Physical Medicine	4	1	0	5	80.0%
Allied Health	1	1	0	2	50.0%
Durable Medical Equipment	1	0	0	1	100.0%
Grand Total	103	17	4	124	83.1%

Additional PAs include vendor and internal PAs for which there is not enough data to classify into another category. Additional PAs are not included in savings calculations.

Data represents a count of unique services.

Medical and surgery table shows top 10, if available.

AIM radiology is excluded from pie chart and Prior Authoizations by Service Group.

Prior Authorization Source

Source	Service Count	% Approved
REGENCE INTERNAL PAs	124	83.1%
Grand Total	124	83.1%
Courses.	Comico Count	0/ Античная
Source	Service Count	% Approved

Service Details for Medical/Surgery

	Service Description	Approved	Denied	Pending	Grand Total	% Approved
	Transcranial Magnetic Stimulation as a Treatment of Depression and Other Di		0	0	9	100.0%
-	Gender Affirming	3	2	0	5	60.0%
Medical	Charged-Particle (Proton) Radiotherapy	4	0	0	4	100.0%
~	Intensity Modulated Radiotherapy (IMRT) for Breast Cancer	4	0	0	4	100.0%
	Investigational Gene Expression and Multianalyte Testing	0	2	1	3	0.0%
	Surgeries for Snoring, Obstructive Sleep Apnea Syndrome, and Upper Air	2	1	0	3	66.7%
	Bariatric Surgery	0	1	0	1	0.0%
Surgery	Lumbar Spinal Fusion	1	0	0	1	100.0%
Surg	Microwave Tumor Ablation	1	0	0	1	100.0%
	Pectus Excavatum and Carinatum Surgery	1	0	0	1	100.0%
	Sacroiliac Joint Fusion	1	0	0	1	100.0%

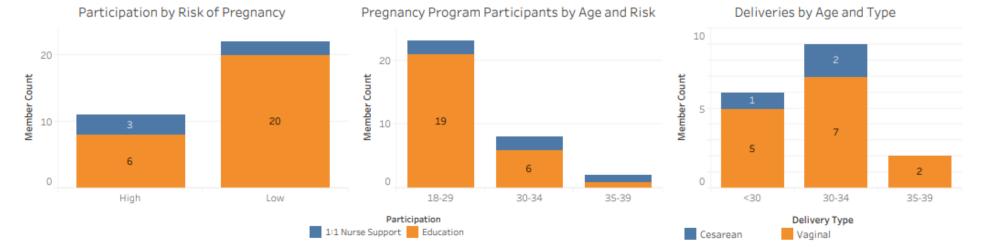
	1:1 Nurse Support	Education	Grand Total
Prior Period	2	10	12
202201		1	1
202202		4	4
202203		1	1
202204		1	1
202205		3	3
202207	1	2	3
202209	1		1
202210		1	1
202211		4	4
202212	1	1	2
Grand Total	5	26	31

Number of Members Participating (Open by Month)

Pregnancy Program Participation by Delivery

Delivery Type	# of Deliveries	% of Deliveries Participating
Cesarean	3	100.0%
Vaginal	14	92.9%
Grand Total	17	94.1%

Prior period includes cases that opened between 202101 and 202112 and remained open on or after 202201

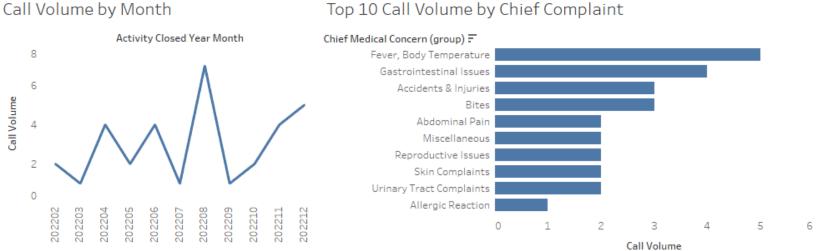


▶ 1:1 Nurse Support: Member engaged with a nurse case manager and receives education

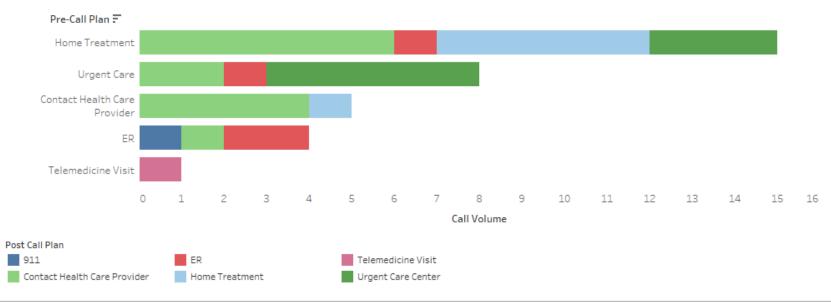
Education- Member receives education through seasonal newsletters

▶ Participant- Participating members receive outreach via phone, welcome letters and/ or seasonal newsletters

NurseLine



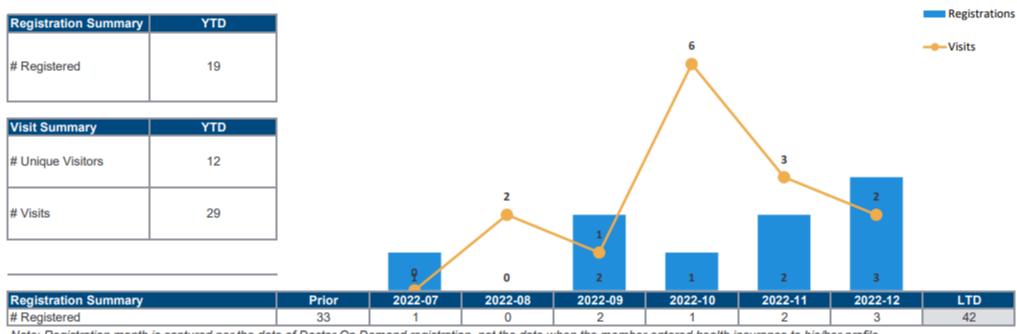
Call Redirection: Post-Call vs Pre-Call Intent



Top 10 Call Volume by Chief Complaint

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Doctor On Demand™ Utilization January- December 2022



Note: Registration month is captured per the date of Doctor On Demand registration, not the date when the member entered health insurance to his/her profile.

Visit Summary		Prior	2022-07	2022-08	2022-09	2022-10	2022-11	2022-12	LTD
# Unique Visitors		14	0	2	1	6	3	2	19
# Visits		50	0	2	1	6	3	2	64
Visit Frequency	% 1 Visit	28.6%	-	100.0%	100.0%	100.0%	100.0%	100.0%	36.8%
	% 2 Visits	21.4%	-	0.0%	0.0%	0.0%	0.0%	0.0%	21.1%
	% 3 Visits Or More	50.0%	-	0.0%	0.0%	0.0%	0.0%	0.0%	42.1%

Note: Because a visitor can be unique in multiple months, but only once over history, Prior + Monthly "# Unique Visitors" will not sum to the Total.

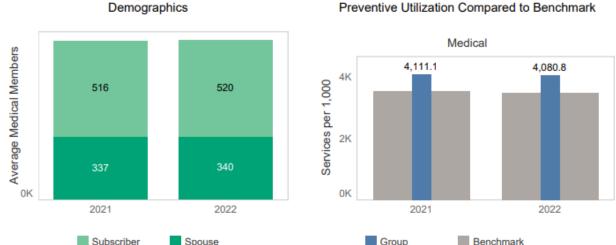
Visit Type Summary		Prior	2022-07	2022-08	2022-09	2022-10	2022-11	2022-12	LTD
Medical		24	0	1	0	2	2	0	29
Mental Health	Therapy	18	0	1	0	1	0	1	21
	Psychiatry	8	0	0	1	3	1	1	14

Wellbeing Opportunity

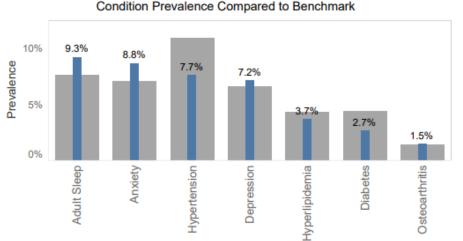
Option

- Group's annualized cost per member is higher than the OR benchmark 3 out of 7 conditions shown below •
- Group's prevalence is above benchmark for 4 out of 7 conditions shown below •

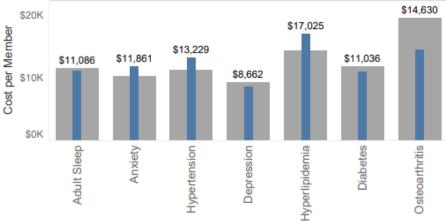
Option: Consider Empower to increase wellness engagement



Spouse



Annualized Medical Cost per Member Compared to Benchmark



 HEDIS 75th Percentile*: The 75th percentile indicates the compliance measure is higher than 75% of other
 Condition Prevalence Dates: Incurred 12/31/2021 - 12/30/2022, processed through 12/30/2022 health plans in a national dataset.

Costs includes medical cost, pharmacy costs are excluded.

HEDIS Dates: 1/1/2021 - 12/31/2021, processed through 3/31/2022

Preventive Dates: Incurred dates 1/1/2021 - 12/31/2022

Regence Empower™

Helps employees get on the path to health and well-being

Regence Empower step-by-step guidance includes:

Core offering	Custom offering
 Personalized employee experience with customized results from a Health Assessment Rewards, including Regence-funded \$25 gift card for healthy activities, such as self-guided programs and personal challenges Mobile app to track progress and access well-being resources 	 Dedicated client success manager to support campaigns and activities Customizable experience, content and rewards Reporting to drive engagement and outcomes Employee access to health coaches and educational webinars

Severe Illness	Major Illness	Chronic At Risk	Behavioral Health Only	Chronic Stable	Healthy	New Members
• Members in this category have a complex or catastrophic medical condition like transplants, active cancer, dialysis, dementia, etc., or are receiving end of life care.	• Members in this category have a chronic condition and are at high risk of ER visits, inpatient stays, and/or high future costs, or have a rare high-cost condition.	• Members in this category have a chronic condition and are at risk of an ER visit, inpatient admission, have open care gaps, and/or are high risk for future costs.	• Members in this category have a behavioral health condition, but no other chronic conditions.	• Members in this category have a stable chronic condition, no open care gaps, and are low risk for future inpatient stays or ER visits.	 Members in this category do not have any behavioral health or chronic conditions and are low risk for future costs and future acute episodes. 	• Members in this category do not have enough claims activity to bucket them in one of the other categories.

Note: Members fall into the highest level health risk group for which they qualify.

Embedded Regence Resources

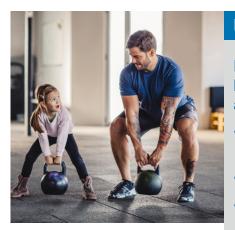
Your Regence health plan includes embedded resources for you and your employees. You can increase employee satisfaction and have a more engaged and educated workforce by accessing resources and taking advantage of these opportunities.



Integrated content on regence.com and the Regence app

- One experience, any device
- Personalized home screen and insights
- Member ID card
- Claims and benefits

- Health history
- In-network provider search
- Cost estimator
- Health and wellness resources
- Online chat with Customer Service



Regence Advantages

Discounts on dozens of health-related products and services, including

- Active&Fit Direct:
 \$25/month gym membership
- Glasses and LASIK
- Hearing aids



Employee educational resources

- Employee-facing educational videos
- Open enrollment guides
- Engagement Toolkits

Regence Behavioral Health Resources

*To find available options- sign in to www.regence.com/go/mental-health

Regence Empower	AbleTo NEW!	dr. on demand	talkspace
 Embedded program through Regence.com Wellbeing platform providing personalized guidance on their journey toward improved health Self-guided programs for emotional wellbeing (i.e. stress mgmt., sleep mgmt., etc) 	 Network provider* Virtual therapy and emotional support programs Cognitive Behavioral Therapy (CBT) Licensed & accredited cognitive behavioral therapists Age 18+ 	 24/7 telehealth for primary and non-urgent care Licensed therapists & psychiatrists Confidential, convenient, online therapy National network 	 Network provider* Digital health modules, coaching, psychotherapy and medication management Video, phone, messaging with providers Age 13+
Hazelden Betty Ford	charlie health	Boulder	*nocd
 Network provider* Personalized addiction treatment with both brick-and-mortar locations Now offering RecoveryGo, a Virtual Care and Recovery Support Services 	 Network provider* Personalized Intensive Outpatient (IOP) treatment programs for teens, young adults, and their families in healing Connect instantly from anywhere with licensed professionals (Available 24/7) Ages 12-26 	 Network provider* Long-term support & telehealth treatment for substance use, including alcohol, use disorder (AUD) & opioid use disorder (OUD) Available 24/7 Age 18+ 	 Network provider* Licensed therapists who specialize in Exposure and Response Prevention (ERP) therapy, the most effective OCD treatment 24/7 support to appropriately treat OCD for all life stages from childhood through adulthood Age 6+
	wyStrength Buy-up Solution	EQUIP NEW!	
	 Self-help solution for mental health and well-being Interactive, customized behavioral health and resilience-building resources 	 Network provider* Dedicated eating disorder treatment provider Evidence-based care through a dedicated five-person team: therapist, physician, peer mentor, family mentor and dietician Age 6 to 24 	

AbleTo, MDLIVE, myStrength, Talkspace, Boulder Care, Charlie Health, Hazelden Betty Ford Foundation, NOCD & Equip are separate companies that provide services for Regence members.

Member facing engagement campaigns

Digital personalized engagement to drive members to regence.com and resources

Regence.com and App Employer Engagement Toolkit



Start here! Read this how-to guide for tips on getting started. It includes a breakdown of each asset with suggestions for distribution and a sample campaign timeline for rolling out these assets within your organization.

Empower employees to make the most of their health benefits

You're invested in the health of your employees and your business. To support you, we created this engagement toolkit you can use to encourage your employees to take full advantage of the benefits and cost-savings tools available to them on the Regence website and app—the best place for your employees to find care and personalized support.

In this toolkit, you'll find a collection of effective and easy-to-use engagement materials that drive adoption of the Regence website and app, including printable and digital materials. Use them all or share the items that work best for your organization and your employees.

How-to Guide



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Behavioral Health Employer Engagement Toolkit



Empower employees to make the most of their health benefits

You're invested in the health of your employees and your business. To support you, we created this engagement toolkit you can use to encourage your employees to take full advantage of the benefits and cost-savings tools available to them on the Regence website and app—the best place for your employees to find care and personalized support.

In this toolkit, you'll find a collection of effective and easy-to-use engagement materials that increase awareness of behavioral health issues and the resources available to employees and their dependents through their health plan. Use them all or share the items that work best for your organization and your employees.

May is Mental Health Awareness Month!

This campaign can be deployed at any time of the year, but consider using it during the month of May to capitalize on other communications efforts.



