Employee Medical Benefits Board Regular Meeting

Monday, May 8, 2017

Newtown Municipal Center Newtown, CT 06470

THESE MINUTES ARE SUBJECT TO APPROVAL BY THE EMPLOYEE MEDICAL BENEFITS BOARD

The Employee Medical Benefits Board held a regular meeting Monday, May 8, 2017. The meeting was held in Meeting Room 1, Newtown Municipal Center, 3 Primrose Street, Newtown, CT. The meeting was called to order at 6:15pm.

Present: Jim O'Sullivan, Donna Van Waalwijk, Jim Loring, Dave Stott

Also Present: Robert Tait, Ron Bienkowski, Ellie Whelan

Acceptance of Minutes from previous meeting: Ms. Van Waalwijk moved to approve the minutes of the February 6, 2017 meeting. Mr. O'Sullivan seconded, motion unanimously approved.

Voter Comments: None

New Business

Elect a Chairman - Ms. Van Waalwijk moved to nominate Jim Loring as Chairman, Mr. O'Sullivan seconded. Mr. Loring agreed to do it for a year. Motion unanimously approved.

Review claim months of February, March, April (Attachment A) – Mr. Tait explained that during the Legislative Council budget process they were looking at 8 months' worth of claims. February claims were very favorable. The Council decided not to increase the contribution. They have always started in \$2.7 million in fund balance. It is estimated to increase to \$3.6 million which is 28% of claims. This will give flexibility next year.

Review current status of Self-funded Insurance Reserve Fund, and estimate for year-end (June 30, 2017) – Mr. Tait provided the difference between claims on Anthem report and town report (Attachment B).

Review Anthem renewal – Mr. Tait provided the renewal cost summary and the Self Insurance Plan Summary (Attachment C). Overall net retention and stop loss went down.

Review other information board members, partners, insurance consultant make available – Mr. Loring expressed concern that the board agreed to increase contributions by 2% at the February meeting but when it got to the LC in the budget process, it was reduced without consulting the board. Mr. Tait explained that when they were at the LC they had another month of claims and it was favorable. If the claims went up, they would not have taken the same action.

Communications - None

Announcements - Next meeting is scheduled for Monday, September 18, 2017 at 6:15pm.

Having no further business, the meeting was adjourned at 7:00pm.

Arlene Miles, Clerk Pro-Tem

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TOWN OF NEWTOWN CLAIMS ANALYSIS

5/8/2017															
					8 ō	3,409,000 2,756,000	2015-16 2016-17						•	•	
12,754,975	s	pius H.S.A. pimts			als:	Yellow highlight totals 2014-15 3,341,000	Yellow h 2014-15				1	ns above.	ot in monthly clair	h.s.a. payments not in monthly daims above.	
12,441,975	, ,	10,078,000	•	,	847,000	1,143,000	766,000	844,000	1,095,000	1,205,000	1,018,000	861,000	1,081,000	1,218,000	TOTAL
	72%	7,236,000			587,000	833,000	547,000	626,000	800,000	909,000	643,000	619,000	781,000	891,000	BOE
	28%	<u>TOTALS</u> 2,842,000	<u>Jun-17</u>	May-17	<u>Apr-17</u> 260,000	Mar-17 310,000	Feb-17 219,000	<u>Jan-17</u> 218,000	<u>Dec-16</u> 295,000	Nov-16 296,000	<u>Oct-16</u> 375,000	<u>Sep-16</u> 242,000	Aug-16 300,000	<u>Jul-16</u> 327,000	TOWN
313,000 h.s.a.				SHIER BOOK	- T	A COLUMN	FISCAL YEAR 2016 - 2017	FISCAL YEA	CHEST SELECTION OF THE PERSON	THE STATE OF THE S					_
		6.4%	,								1	1	9		i
83%		13,375,000 APR=	1,319,000	914,000	958,000	1.430.000	1.021.000	991,000	1.076.000	943,000	1.272.000	995,000	1.108.000	1.348.000	TOTAL
	71%	9,705,000	1,055,000	693,000	690,000	1,005,000	753,000	671,000	848,000	655,000	701,000	737,000	817,000	1.080.000	BOE
	29%	3,670,000	<u>Jun-16</u> 264,000	<u>May-16</u> 221,000	<u>Apr-16</u> 268,000	Mar-16 425,000	<u>Feb-16</u> 268,000	<u>Jan-16</u> 320.000	<u>Dec-15</u> 228.000	Nov-15 288,000	Oct-15 571,000	<u>Sep-15</u> 258,000	Aug-15 791,000	<u>Jul-15</u> 268 000	NWOT
171,250 h.s.a.							FISCAL YEAR 2015 - 2016	FISCAL YEA							
		2.0%	47,000	179,000	NAF fees			£ 10							
82%		12,573,000 APR=	903,000	1,183,000	1,105,000	1,143,000	1,093,000	837,000	956,000	951,000	1,074,000	895,000	1,042,000	1,165,000	TOTAL
	68%		701,000	843,000	801,000	782,000	728,000	603,000	652,000	644,000	599,000	543,000	821,000	834,000	308
	32%	3,843,000	202,000	340,000	304,000	361,000	365,000	234,000	304,000	307,000	475,000	352,000	221,000	331,000	NWOT
		TOTALS	Jun-15	May-15	Apr-15	Mar-15	Feh-15	Jan-15	Dec-14	Nov-14	Oct-14	Sen-14	Δ110-14	11.14	
135,583 h.s.a.							FISCAL YEAR 2014 - 2015	FISCAL YEA							_
210		12,321,000 APR= 6.9%	1,265,000	1,026,000	1,000,000	1,192,000	924,000	766,000	1,084,000	925,000	921,000	000,588	1,103,000	1,233,000	TOTAL
	/3%	8,798,000	803,000	623,000	739,000	856,000	721,000	546,000	804,000	649,000	741,000	493,000	865,000	958,000	BOE _
	27%	3,523,000	462,000	403,000	261,000	336,000	203,000	220,000	280,000	276,000	180,000	389,000	238,000	275,000	NWOT
		TOTALS	<u>Jun-14</u>	May-14	Apr-14	احا	Feb-14	<u>Jan-14</u>	Dec-13	Nov-13	Oct-13	Sep-13	Aug-13	<u>Jul-13</u>	çi J
111,750 h.s.a.							FISCAL YEAR 2013 - 2014	FISCAL YEA		100					_
82%		11,527,000 APR= 2.4%	924,000	1,147,000	1,025,000	956,000	1,000,000	838,000	1,005,000	884,000	1,010,000	779,000	990,000	969,000	TOTAL
	75%		709,000	843,000	763,000	677,000	754,000	596,000	739,000	694,000	812,000	611,000	764,000	722,000	308
	25%	2,843,000	<u>215,000</u>	304,000	262,000	279,000	246,000	<u>Jan-13</u> 242,000	266,000	190,000	198,000	168,000	226,000	<u>Jul-12</u> 247,000	NWOT
							FISCAL YEAR 2012 - 2013	FISCAL YEA			34			0	_
81%		11,260,000 APR=	1,120,000	971,000	1,002,000	990,000	884,000	839,000	923,000	796,000	732,000	1,008,000	922,000	1,073,000	TOTAL
	72%	8,112,000	802,000	659,000	726,000	692,000	657,000	601,000	621,000	573,000	561,000	742,000	618,000	860,000	308 308
	28%	<u>TOTALS</u> 3.148.000	Jun-12 318.000	May-12 312,000	<u>Apr-12</u> 276.000	Mar-12	Feb-12	<u>jan-12</u>	Dec-11 702 000	Nov-11	0ct-11	Sep-11	Aug-11	<u>Jul-11</u>	TOWN
							FISCAL YEAR 2011 - 2012	FISCAL YEA							_

TOWN OF NEWTOWN MEDICAL SELF INSURANCE FUND ANALYSIS @ APR 30, 2017 FISCAL YEAR 2016 - 2017 FORCAST

ESTIMATED FUND BALANCE @ JUNE 30, 2017	CONSULTANT FEES TOTAL EXPENSES	ADMINISTRATIVE FEES: MUNICIPAL EDUCATION	ESTIMATED EXPENSES CLAIMS/NAF: MUNICIPAL EDUCATION	INTEREST EARNED ON INVESTMENTS TOTAL REVENUES	RETIREE/COBRA/AGENCY CONTRIBUTIONS: MUNICIPAL EDUCATION	EMPLOYEE CONTRIBUTIONS: MUNICIPAL EDUCATION	ESTIMATED REVENUES EMPLOYER CONTRIBUTIONS: MUNICIPAL EDUCATION	FUND BALANCE @ JULY 1, 2016	TOWN OF NEWTOWN MEDICAL SELF INSURANCE FUND ANALYSIS @ APR 30, 2017 FISCAL YEAR 2016 - 2017 FORCAST
3,250,000			FROM CLAIMS ANALYSIS		350,000 392,000	360,000 2,080,000	3,163,000 8,685,000	8	WN ALYSIS @ APR 30, 20 FORCAST
3,674,000 28%	55,000 14,109,000	1,054,000	13,000,000	10,000 15,040,000	742,000	2,440,000	11,848,000	2,743,000	017
ESTIMATED FUND BALAI	CONSULT	ADMINISTRA: MUNICIPAL EDUCATION	ESTIMATED EX CLAIMS/NAF: MUNICIPAL EDUCATION	INTEREST	RETIREE/COB MUNICIPAL EDUCATION	EMPLOYEE CO	ESTIMATED RI EMPLOYER C MUNICIPAL EDUCATION	ESTIMATED	
ND BALANCE @ JUNE 30, 2018 25% OF TOTAL CLAIMS =	CONSULTANT FEES TOTAL EXPENSES	ADMINISTRATIVE FEES: MUNICIPAL EDUCATION	ESTIMATED EXPENSES CLAIMS/NAF: MUNICIPAL EDUCATION	INTEREST EARNED ON INVESTMENTS TOTAL REVENUES	RETIREE/COBRA/AGENCY CONTRIBUTIONS: MUNICIPAL EDUCATION	ONTRIBUTIONS:	EVENUES ONTRIBUTIONS:	ESTIMATED FUND BALANCE @ JULY 1, 2017	TOWN OF NEWTOWN MEDICAL SELF INSURANCE FUND ANALYS FISCAL YEAR 2017 - 2018 FOR
NCE @ JUNE 30	ANT FEES TOTAL EXPENSES	TRATIVE FEES: PAL 10N	<u>D EXPENSES</u> IAF: ON	EARNED ON INVESTMENTS TOTAL REVENUES	:/COBRA/AGENCY CONTRIBUTIONS: 350,000 SIPAL 392,000 392,000	EE CONTRIBUTIONS: 357,000 IPAL 2,100,000	ED REVENUES TER CONTRIBUTIONS: 1,163,000 1,163,000 1,163,000	FUND BALANCE @ JULY 1, 2017	TOWN OF NEWTOWN MEDICAL SELF INSURANCE FUND ANALYSIS @ APR 30, 2017 FISCAL YEAR 2017 - 2018 FORECAST

Difference between claims on Anthem report and town report: HHACKNEW IN

- Network Access Fees (NAF) are in town claims. Reported as a fee on Anthem report (\$240,000 rounded).
- BOE dental claims are not in Anthem report (\$464,000 rounded.....admin fees are around \$36,000).
- BOE H.S.A. contributions are not in Anthem report (\$311,000 rounded).



Hi Bob and Ron,

Per our conversations there is good news on the Anthem renewal. Total cost is down about \$900K from the initial all attributed to claims improvement. Overall from a total cost perspective we are seeing about a 1.18% reduction in total cost or about \$170K versus the in-force Anthem renewal.

Rates are now about 4.5% increase over last year versus the 10% in the initial renewal. Rates are up even though we are seeing a decrease in expected cost due to two main reasons; 1) Anthem allocation rates were underfunded last year by about 2% and 2) We have had additional HSA underfunded last year by about 2% and 2) We have had additional HSA underfunded last year by about 2% and 2) We have had additional HSA.

Attached is my summary Projection Model based on Anthem's revised renewal, but here are the highlights:

- 1. Claims are now down 2% to \$12M over the In-Force 16-17 renewal (Down about 4% versus claims thru Dec 16 Initial 2017 Renewal Experience Period)
- 2. Excess Claims over \$175 are up to \$343K
- 3. New claims are down 3.5%
- 4. Experience Period Enrollment is down about 2%
- 5. Projected claims are about \$13M down about 1.1% from 16-17 In-force
- 6. Total Cost down to \$14.2M from \$14.4M or about 170K.

Let me know if you have any questions,

Renewal

aor

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Milliman | 80 Lamberton Road | Windsor, CT 06095 | USA
Tel +1 860 687 0188 | Fax +1 860 687 2111 | milliman.com

Training to Joon on the Gard.							
Section of the sectio	마구이	in-Force Anthem '16-	5	Initial Renewal	,	Revised Renewal	
Experience		'17		17-18		17-18	
Experience Period Thru:		Dec-15	١	Dec-16	ı	Feb-17	
Gross Paid Claims	⇔	12,260,038	ક્ક	12,543,004 2.31%	₩	12,015,448 -2.00%	7% —
Excess Claims	↔	(158,985)	(A)	(223,178) 40.4%	₩	(343,171) 115.9%	9%
Paid Claims Less Large Claims	(A	12,101,053	(A)	12,319,826 1.81%	₩	11,672,277 -3.54%	4%
Experience Period Contracts		9,292		9,175 -1.26%		9,122 -1.	3%
Adjusted Claims PCPM	ક્ક	1,302.31	€9	1,342.76 3.11%	€Ð	1,279.57 -1.75%	5%
	NOTE	NOTE: ABC Removed					

\$602K Claimant

	90	OETA CIGILII	CHIE							
Experience Large Claim Data	V	200 C C C C C C C C C C C C C C C C C C	200	1000000	100	CHINES THE	Services county	and the state of	MENTAGE.	
Members Over \$50K (\$Count)	\$ 3,9	3,990,707	34 mbrs	\$ 3,687,324	- 1	41 mbrs	\$ 3,49	3,499,221 37	37 mbrs	
Of Those Over \$50K Also Over \$175K										
(\$-Count)	\$ 1,1	1,104,605	1 mbrs	\$ 748	748,165	3 mbrs	\$ 69		2 mbrs	
Claims in Excess of \$175K	(A	579,605		\$ 22:	223,165		\$ 34	343,171		
Claim Modeling	Anthe	Anthem's Result	=	≥	ABC Trend	ď	A	ABC Trend		
Trend Months:		18			ձ			15		72
Adjusted Claims PCPM	(A)	7.	1,302.31	()	- <u>-</u> -	1,342.76	ь	1,27	9.57	
Annual Trend			6.10%			8.51%		00	.75%	17
Applied Trend			9.3%			13.0%		_	1.1%	
Trended Claims PCPM	Ġ	1.4	1,423.26	G	<u></u>	1,517.72	G	1,421.02	3.02	
Trended Claims with Margin	G	1,4	1,423.26	(A	<u>ب</u>	1,517.72	()	1,42	1.02	
Current Contracts			772			758			752	
Projected Trended Claims	69	13,18	13,185,104	49	13,80	13,805,186	()	12,823	272	
Adjustment-Force to ABC or Bene Adj	•		0.9943	•		1.0020	,		0106	
Adjusted Projected Claims	5	13,10	13,109,832	\$	13,83	13,832,460	\$	12,959,316	,316	
Other Expenses			Name of	WASHING.	TO MENTE				The state of the s	
Stop Loss Admin & NAF	()	4 8 3 8	835,662 433,187	ഗ ഗ	36 36	862,061 394,945	ഗ ഗ	855 394	855,006 394,467	
Total Cost	SALES OF SALES				SELECTION OF THE SE	S DESCRIPTION OF SECTION OF SECTI				
Projected Total Cost	€9	14,37	14,378,681	↔	15,08	15,089,466	€9	14,208,789	,789	
Contracts PCPY	(A	18,6	772 18,625.23	G)	19,9	758 19,906.95	(A	75; 18,894.67	752 4.67	
Cost Change		THE X	MISH WITH			NAME OF THE OWNER.				Participation of the second se
Projected Total Cost (\$%)				\$ 710,785		4.94%	\$ (169,	892)	-1.18%	
PCPY PCPY						-1.81% 6.88%		→ ½	-2.59% 1.45%	

Trend: Anthem=7.86% Med, 13.07% RX, 6% Dental

Report 1

Renewal Cost Summary

Newtown Town And Board Of Education

Renewal Effective Date: July 1, 2017

Expected Paid Claims by Coverage Category

Estimated Total Retention and Stop Loss Fees Estimated Retention and Stop Loss: **Network Access Fee:** Total Expected Paid Claims: Vision Dental Drug Stop Loss Fees Retention Fees Medical \$12,959,316 \$10,864,044 \$1,011,658 \$1,936,272 \$156,652 \$155,160 \$855,006 \$237,815 \$3,840

determining the maximum liability for aggregate stop loss coverage. for your budgetary purposes. These projections are also used as the basis for renewal period. These amounts are provided to assist you with estimating claim liability The Expected Paid Claims represents the actuarial projection of claims cost for the

Estimated Total Cost:

\$14,208,788

*Claims, Retention, and Stop Loss costs were calculated based on contracts as of March, 2017

The Network Access Fee listed above is capped at 100% with a maximum dollar amount of \$237,815

For further information, please contact your account representative. Nongrandfathered plans are subject to additional provisions under the Patient Protection and Affordable Care Act that do not apply to grandfathered plans. The health benefit plan(s) reflected in this quote is not considered to be grandfathered under the provisions of the Patient Protection and Affordable Care Act

for nongrandfathered plans, including 100 percent coverage of in-network preventive care services. This renewal rate includes changes to the standard medical plan to ensure compliance with the requirements of the federal health care reform legislation

renewal period will be retained by Anthem. July 1, 2017 - June 30, 2018. Wellness Program receipts are required for reimbursement. Any unused Wellness Funds remaining after the close of the This renewal includes the cost of a Wellness Fund of \$15,000 to be used toward the purchase of health and wellness services for the renewal period



Self Insurance Plan Summary

For the Contract Year Beginning Jul-2016
Claims Billed Through Feb-2017

This report will NOT show manual adjustments made to a group's account.

This report shows claims which were BILLED to the group during each month. The amounts subsequently PAID by the group or DRAWN from the group's account may not coincide with the month the claims were billed.





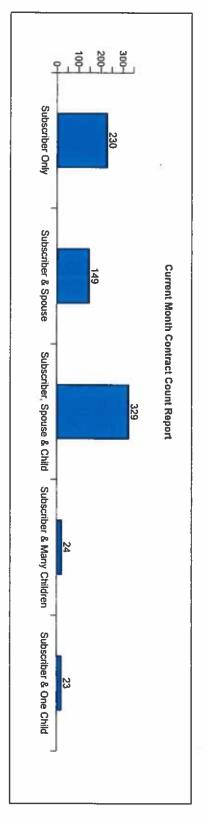
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Rolling 12 Months Medical Contract Count Summary

Restated Membership From Mar-2016 through Feb-2017

AVERAGE	TOTAL	Feb-17	Jan-17	Dec-16	Nov-16	Oct-16	Sep-16	Aug-16	Jul-16	Jun-16	May-16	Apr-16	Mar-16	Period
762	9,144	755	759	758	763	763	760	748	749	773	773	771	772	Medical Contracts
1,986	23,830	1,967	1,977	1,979	1,990	1,996	1,985	1,955	1,959	2,013	2,006	2,000	2,003	Medical Members
232	2,787	230	231	229	230	228	230	227	226	238	239	239	240	Subscriber only
155	1,856	149	151	152	155	155	153	153	155	158	160	158	157	Subscriber & spouse
328	3,940	329	331	332	330	331	329	322	322	329	327	328	330	Subscriber, spouse & child
24	285	24	24	23	24	25	25	24	23	23	23	23	24	Subscriber & many children
23	276	23	22	22	24	24	23	22	23	25	24	23	21	Subscriber & one child





Contract and Member counts are for Medical Coverage.
 Membership is restated to reflect retroactive adjustments

⁻ This report is not meant to replace the contract year settlement.



Health Insights
Data View Direct

Contract Count

3/8/2017 1.A.1

Rolling 12 Months Medical and Prescription Drug Billed Claims Summary Report

Billed Claims From Mar-2016 through Feb-2017

\$506.06	\$91.36	\$416.18	\$0.00	\$173.54	\$242.64			PMPM
\$1,318.82	\$238.31	\$1,084.61	\$0.00	\$452.26	\$632.35			PEPM
\$1,004,942	\$178,471	\$826,472	\$0	\$344,622	\$481,850	1,986	762	AVERAGE
\$12,059,309	\$2,141,650	\$9,917,659	\$0	\$4,135,462	\$5,782,197	23,830	9,144	TOTAL
\$759,211	\$168,425	\$590,786	\$0	\$280,555	\$310,231	1,967	755	Feb-17
\$883,966	\$226,296	\$657,670	\$0	\$296,324	\$361,346	1,977	759	Jan-17
\$1,191,513	\$148,146	\$1,043,367	\$0	\$376,888	\$666,479	1,979	758	Dec-16
\$1,171,548	\$170,329	\$1,001,218	\$0	\$391,395	\$609,824	1,990	763	Nov-16
\$978,624	\$152,335	\$826,289	\$0	\$335,503	\$490,786	1,996	763	Oct-16
\$790,853	\$144,272	\$646,581	\$0	\$305,645	\$340,936	1,985	760	Sep-16
\$913,380	\$145,872	\$767,508	\$0	\$371,822	\$395,686	1,955	748	Aug-16
\$1,023,216	\$210,017	\$813,199	So	\$309,520	\$503,680	1,959	749	Jul-16
\$1,279,622	\$162,880	\$1,116,742	\$0	\$376,978	\$739,764	2,013	773	Jun-16
\$867,358	\$169,238	\$698,120	\$0	\$342,412	\$355,707	2,006	773	May-16
\$873,624	\$252,428	\$621,196	\$0	\$314,937	\$306,259	2,000	771	Apr-16
\$1,326,394	\$191,412	\$1,134,983	\$0	\$433,483	\$701,500	2,003	772	Mar-16
Total Claims	Prescription Drug	Medical Total	Major Med	Med/Surg	Institutional	Members	Contracts	Period

⁻ This report is not meant to replace the contract year settlement.

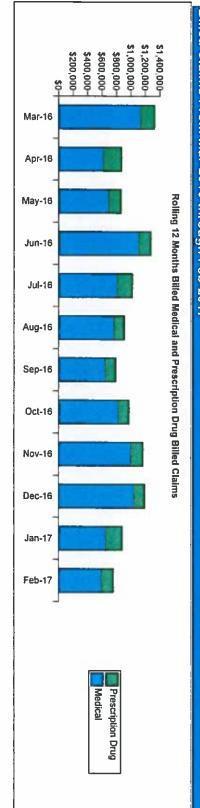




Contract and Member counts are for Medical Coverage.

Rolling 12 Months Medical and Prescription Drug Billed Claims Summary Report





- Contract and Member counts are for Medical Coverage.
- This report is not meant to replace the contract year settlement.





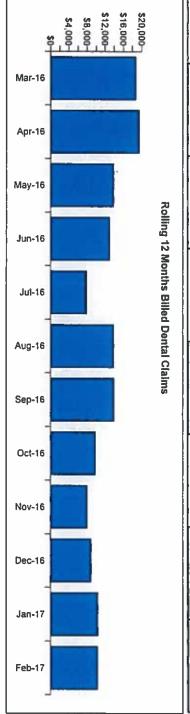
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Claims Summary 2.A.2

Rolling 12 Months Ancillary Billed Claims and Contract Count Summary

Billed Claims From Mar-2016 through Feb-2017

				\$26.74			PMPM
				\$61.73			PEPM
1,954	749	135	47	\$12,346	462	200	AVERAGE
23,442	8,987	1,625	564	\$148,148	5,541	2,400	TOTAL
1,967	755	136	47	\$10,297	449	198	Feb-17
1,977	759	137	47	\$10,382	449	198	Jan-17
1,979	758	137	47	\$8,942	456	199	Dec-16
1,990	763	137	47	\$8,047	459	200	Nov-16
1,996	763	137	47	\$9,823	464	200	Oct-16
1,985	760	136	47	\$13,926	462	198	Sep-16
1,955	748	136	47	\$13,851	464	199	Aug-16
1,571	592	136	48	\$7,897	465	200	Jul-16
2,013	773	134	47	\$12,987	470	201	Jun-16
2,006	773	134	47	\$13,867	468	203	May-16
2,000	771	132	46	\$19,436	466	201	Apr-16
2,003	772	133	47	\$18,694	469	203	Mar-16
Members	Contracts	Members	Contracts	Claims	Members	Contracts	Period
	Pharmacy		Vision			Dentai	





This report is not meant to replace the contract year settlement.

Anthem.

Health Insights Data View Direct

Pharmacy membership may differ from medical membership due to liming of file updates

Ancillary Claims

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3/8/2017

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Contract Year-to-Date Medical/Rx Claims Comparison Summary

Billed Claims From Jul-2016 through Feb-2017

			000 10	6 Nov-18	16 Oct-16	Sep-16	Aug-16	Jul-16	
	100							10000	5
							i i		\$200,000-
							N.		\$400,000
									\$600,000
Lybooked Claims			90 80						
E VANCO						L			\$800,000
Actual Billed Claims					L		100		\$1,000,000-
				J					\$1,200,000
		pected Claims	ns Compared to Ex	Contract Year-to-Date Actual Billed Claims Compared to Expected Claims	Contract Year-to-Da	_			
	= 8,088,000	>town claims analysis =	>town clai	8,249,000 -		Total			
				311,000	BOE HSA contri	BOE H			
				231,000	es	NAF fees			
				304,000	ental	BOE dental			
				analysis:	Reconciliation to town analysis:	Reconcilia			
\$1,348,416	\$1,348,416	\$1,078,733	\$1,078,733	\$925,434	\$925,434	\$38,604	\$964,039	757	AVERAGE
\$10,787,330	\$10,787,330	\$8,629,864	\$8,629,864	\$7,403,476	\$7,403,476	\$308,835	\$7,712,311	6,055	TOTAL
\$10,787,330	\$1,348,416	\$8,629,864	\$1,078,733	\$7,403,476	\$713,852	\$45,358	\$759,211	755	Feb-17
\$9,438,914	\$1,348,416	\$7,551,131	\$1,078,733	\$6,689,623	\$779,409	\$104,557	\$883,966	759	Jan-17
\$8,090,498	\$1,348,416	\$6,472,398	\$1,078,733	\$5,910,215	\$1,049,594	\$141,919	\$1,191,513	758	Dec-16
\$6,742,081	\$1,348,416	\$5,393,665	\$1,078,733	\$4,860,621	\$1,163,304	\$8,243	\$1,171,548	763	Nov-16
\$5,393,665	\$1,348,416	\$4,314,932	\$1,078,733	\$3,697,316	\$969,867	\$8,758	\$978,624	763	Oct-16
\$4,045,249	\$1,348,416	\$3,236,199	\$1,078,733	\$2,727,450	\$790,853	50	\$790,853	760	Sep-16
\$2,696,833	\$1,348,416	\$2,157,466	\$1,078,733	\$1,936,597	\$913,380	\$0	\$913,380	748	Aug-16
\$1,348,416	91	\$1,078,733	\$1,078,733	\$1,023,216	\$1,023,216	\$0	\$1,023,216	749	Jul-16
Aggregate Claims	Aggregate	Claims	Claims	Claims	Claims	over ISL	(Med & Rx)	Contracts	Period
		Cumulative	TY POOR	Cumulative	Actual Billad	Claims	Total Claims		
	125 %					\$175,000			



Claims over ISL: credited claims dollars in excess of the Individual Stop Loss (ISL) amount.

Cumulative Amounts: These amounts are running sums.



Anthem.

Claims Compare

Expected Claims: Annual projection of claims made by Underwriting at renewal

Total Claims: for Medical (including Vision) and Prescription Drug claims.

⁻⁻ Actual Billed Claims: the net claims amount (Total Claims less "Claims over ISL") billed to the group.
-- This report is not meant to replace the contract year settlement.

Claim

Catastrophic Claims Summary

Billed Claims From Jul-2016 through Feb-2017

Year-to-Date Claimants exceeding 50% of Individual Stop Loss (Specific)

Group ISL = \$175,000

50% of Group ISL = \$87,500

	Inactive	Active	Active	Active	Active	Active	Member Status
	SUBSCRIBER	SUBSCRIBER	SUBSCRIBER	SPOUSE	CHILD	SUBSCRIBER	Relationship to Subscriber
	16022320020306518814	12302720001121000208	15540220050523202018	19245520050314296318	11122420001113981826	00390619970913907605	Member
	Z	2	2	N	Z	Z	Newborn Ind
	685	685	685	684	685	685	SIP Rel Code
\$1,128,206	\$94,152	\$125,465	\$106,189	\$148,029	\$194,336	\$460,035	Medical
\$44,112	\$1,735	\$467	\$33,962	\$3,507	\$3,559	\$883	Drug
\$0	\$0	\$0	\$0	\$0	\$0	\$0	Ancillary
\$1,172,318	\$95,887	\$125,932	\$140,150	\$151,536	\$197,895	\$460,918	Total Claims
\$308,835	\$0	\$0	\$0	\$0	\$22,918	\$285,918	Claims Over ISL
\$863,482	\$95,887	\$125,932	\$140,150	\$151,536	\$174,977	\$175,000	Actual Billed Claims

⁻⁻ This report is not meant to replace the contract year settlement.



Claims over tSL: credited claims dollars in excess of the Individual Stop Loss (ISL) amount.

Actual Billed Claims: the net claims amount (Total Claims less "Claims over ISL") billed to the group.

Newborn Ind: If "Y" then it is possible Parent and Baby claims are combined. This will be resolved by Underwriting during contract year settlement.

Catastrophic

3/8/2017 2.D.1

If group does not purchase ISL insurance from Anthem, this report will show members with claims over \$50,000.

Member Status: Active = member is enrolled in the group's medical plan, "Non-Active" = member is no longer enrolled in the group's medical plan.

⁻⁻ Member ID: Encrypted Member IDs will remain the same from one period to the next

Contract Year-to-Date Variable Fees Summary

Billed Claims From Jul-2016 through Feb-2017

\$231,032	\$0	\$0	\$231,032	\$108,268	\$122,764	\$5,963,392	\$2,159,454	\$3,803,938	Total
\$0	\$0	\$0	\$0	\$0	\$0	\$502,072	\$303,922	\$198,149	Feb-17
\$0	\$0	\$0	\$0	\$0	\$0	\$551,954	\$262,939	\$289,015	Jan-17
\$0	\$0	\$0	0\$	\$0	\$0	\$853,712	\$236,700	\$617,012	Dec-16
\$0	\$0	\$0	0\$	\$0	\$0	\$1,367,793	\$316,291	\$1,051,502	Nov-16
\$0	\$0	\$0	0\$	\$0	\$0	\$702,925	\$268,616	\$434,309	Oct-16
\$7,968	\$0	\$0	\$7,968	\$5,316	\$2,652	\$593,366	\$255,362	\$338,003	Sep-16
\$112,996	\$0	\$0	\$112,996	\$52,466	\$60,530	\$659,476	\$262,325	\$397,151	Aug-16
\$110,068	\$0	\$0	\$110,068	\$50,486	\$59,582	\$732,093	\$253,298	\$478,795	Jul-16
Total Fees	Other Variable Fees	SIP Admin Fee as % of Claims	Total NAF Fee	Professional	Facility	Total Savings	Professional	Facility	Period
		11	The second second	Local NAF Fee		vings	Local Discount Savings	Local	

NOTE: Fees billed on a per contract or per member basis ARE NOT shown in this report. This report only shows variable fees which vary with monthly claims amounts.

⁻ This report is not meant to replace the contract year settlement.



-- NAF Fees: Network Access Fees are based on a percentage of Anthem's Discount Savings amount.

 Other Fees: may include NH BHN capitation fees and/or other administrative fees based on a percentage of claims.

Fees 3.A.1

Local Discount Savings: the difference between the provider's Charge amount and Anthem's Allowed contracted payment amount. These Discount Savings are for Anthem's local in-state provider network.

Retention SIP Fees: includes only those fees that are based on a percentage of claims.

Claims Lag Table

Billed Claims From Mar-2016 through Feb-2017

Medical

\$9,917,659	\$590,786	\$657,670	\$1,043,367	\$1,001,218	\$826,289	\$646,581	\$767,508	\$813,199	\$1,116,742	\$698,120	\$621,196	\$1,134,983	Total Paid
\$275,211	\$275,211	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Feb-17
\$530,740	\$263,777	\$266,963	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Jan-17
\$689,467	\$21,035	\$236,717	\$431,715	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Dec-16
\$1,051,077	\$24,414	\$116,228	\$397,009	\$513,426	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Nov-16
\$862,482	\$1,337	\$17,729	\$153,633	\$343,851	\$345,931	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Oct-16
\$731,193	\$5,037	\$8,096	\$35,677	\$101,000	\$263,595	\$317,787	\$0	\$0	\$0	\$0	\$0	\$0	Sep-16
\$774,543	-\$583	\$4,331	\$9,518	\$4,748	\$168,579	\$188,552	\$399,397	\$0	\$0	\$0	\$0	\$0	Aug-16
\$810,576	-\$10	\$5,868	\$11,645	\$35,936	\$12,098	\$97,816	\$279,428	\$367,796	\$0	\$0	\$0	\$0	Jul-16
\$1,046,534	\$122	\$397	\$2,786	\$973	\$17,754	\$13,210	\$33,623	\$363,127	\$614,542	\$0	\$0	\$0	Jun-16
\$842,950	\$113	00	\$1,383	-\$668	\$2,360	\$13,264	\$37,514	\$49,100	\$354,716	\$385,167	\$0	\$0	May-16
\$708,383	\$0	\$151	\$194	\$377	\$11,220	\$1,506	\$7,211	\$4,186	\$112,456	\$233,956	\$337,128	\$0	Apr-16
\$859,029	\$700	\$0	\$0	\$834	-\$265	\$11,913	\$2,013	\$2,027	\$13,240	\$43,543	\$249,576	\$535,448	Mar-16
\$735,475	-\$366	\$1,190	-\$192	\$740	\$5,017	\$2,533	\$8,322	\$26,963	\$21,788	\$35,454	\$34,492	\$599,535	Prior
Total Incurred	Feb-17	Jan-17	Dec-16	Nov-16	Oct-16	Sep-16	Aug-16	Jul-16	Jun-16	May-16	Apr-16	Mar-16	Claims Only

- Medical Claims Only: excludes Prescription Drug and Dental claims.
- -- Prescription Drugs: Includes only those claims billed through a retail pharmacy using a drug card.
- This report is not meant to replace the contract year settlement.



Health Insights
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Claims Lag

4.A.1 3/8/2017

Claims Lag Table

Billed Claims From Mar-2016 through Feb-2017

Prescription

\$2,141,650	\$168,425	\$226,296	\$148,146	\$170,329	\$152,335	\$144,272	\$145,872	\$210,017	\$162,880	\$169,238	\$252,428	\$191,412	Total Paid
\$106,975	\$106,975	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	SO	Feb-17
\$236,900	\$61,306	\$175,593	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Jan-17
\$148,970	\$70	\$50,926	\$97,974	\$0	\$0	\$0	SO	90	\$0	\$0	\$0	\$0	Dec-16
\$180,797	\$0	-\$223	\$50,141	\$130,879	\$0	\$0	\$0	\$0	\$0	SO	\$0	\$0	Nov-16
\$139,465	\$70	\$0	\$31	\$36,947	\$102,418	\$0	\$0	\$0	\$0	\$0	\$0	so	Oct-16
\$137,722	0.8	\$0	\$0	\$0	\$46,424	\$91,297	\$0	\$0	\$0	\$0	\$0	\$0	Sep-16
\$149,405	\$0	\$0	\$0	\$1,563	\$3,493	\$52,548	\$91,802	\$0	\$0	\$0	\$0	\$0	Aug-16
\$167,079	\$0	\$0	\$0	\$940	\$0	\$10	\$54,070	\$112,059	\$0	50	\$0	\$0	Jul-16
\$206,117	\$0	\$0	\$0	So	\$0	\$91	\$0	\$97,958	\$108,068	\$0	\$0	\$0	Jun-16
\$170,495	\$35	\$0	\$0	\$0	\$0	\$64	\$0	\$0	\$54,824	\$115,571	\$0	\$0	May-16
\$182,950	\$0	\$0	\$0	\$0	\$0	\$20	\$0	\$0	-\$12	\$53,691	\$129,250	\$0	Apr-16
\$240,180	\$105	\$0	\$0	\$0	\$0	\$102	\$0	\$0	so	-\$24	\$122,214	\$117,783	Mar-16
\$74,595	-\$136	\$0	\$0	\$0	\$0	\$139	\$0	\$0	\$0	\$0	\$964	\$73,629	Prior
Total Incurred	Feb-17	Jan-17	Dec-16 .	Nov-16	Oct-16	Sep-16	Aug-16	Jul-16	Jun-16	May-16	Apr-16	Mar-16	Drug

This report is not meant to replace the contract year settlement.



Claims Lag

4.A.2

⁻⁻ Medical Claims Only: excludes Prescription Drug and Dental claims.

⁻⁻ Prescription Drugs: Includes only those claims billed through a retail pharmacy using a drug card.

Glossary of Terms

Actual vs Expected Claims: "Actual Paid Claims" divided by "Expected Claims". Similar to a Loss Ratio. A value of 100% indicates the group's claims are as projected by Underwriting.

ASL: Aggregate Stop Loss, insurance to protect against excessive total group claims. This is a percentage of claims amount in excess of the expecte claims amount

Average: The average monthly amount - Claims divided by the number of months for the contract year-to-date (YTD).

Claims over ISL: Claims in excess of the Individual Stop Loss (ISL). If the group has ISL coverage through Anthem dollar amounts in this column will reflect claim dollars for members in excess of the ISL. These excess dollars were not billed to the group. If the group does not have ISL through Anthem, there will be no dollar amounts in this column.

Medical contract counts (Subscribers/Employees). Amounts are restated to reflect retroactive membership adjustments

Dental: Dental coverage under a separate (stand alone) policy. Does not include dental claims covered though the medical plan

Expected Claims: This amount is determined in Underwriting. It is the projected claims amount for the contract period. The monthly value is 1/12 the annual amount determined by Underwriting. If a group does not have Aggregate Stop Loss (ASL) through Anthem, the Expected Claims amount may be \$0.

Institutional: Claims billed through a facility (typically hospitals) on a UB92 claim form.

ISL: Individual Stop Loss, insurance to protect against excessive individual member claims.

Local Discount Savings: The in-state Anthem network savings: The difference between the claim CHARGE amount and the ALLOWED amount. Local Discount Savings does not include savings from Anthem's Blue Card (out of state) network or Retail Prescription Drug network. A group's Local Network Access Fee (NAF) may be calculated based on the Local Discount Savings.

Network Access Fee (NAF) is a fee paid by the group to gain access to Anthem's local (in-state) provider network. This fee may be a percentage of the Local Discount Savings (LDS) amount. Some groups may be charged a per member/per contract amount to gain access to Anthem's Local provider network. Per member/per contract amounts ARE NOT shown in this report. Only NAF fees as a percentage of LDS are included in this report.

Can include claims for Durable Medical Equipment (DME), Drug claims paid under the medical benefit, or other specially classified services

Maximum Aggregate: The ASL % multiplied by the Expected Claims amount. For groups who do not have ASL coverage through Anthem, this amount may be \$0

Claims billed through a physician's office on a HCFA 1500 claim form. This category also includes Vision claims.

Member Status: "Active" means the member is enrolled in the group's Medical plan. "Inactive" means the member is NOT enrolled in the group's Medical plan

Members: (Employees and Dependents) are medical member counts. Amounts are restated to reflect retroactive membership adjustments

Newborn Ind: Indicates if the member is a newborn baby. Occasionally, the newborn baby's claims will be combined with the parent's claims until the baby has its own member ID

Other Fees: (Year-to-Date Fees Summary report): These are New Hampshire Behavioral Health Network (BHN) capitation fees or miscellaneous fees based on a percentage of claims. Other than BHN capitation fees, no per member/per contract fees are shown on this report.

PEPM: Per Employee Per Month - Claims per Employee per Month (for annual amounts multiply by 12).

PMPM: Per Member Per Month - Claims per Member per Month (for annual amounts multiply by 12)

Prescription Drug: Claims billed through a retail pharmacy using a prescription drug card

SIP Rel Cd: The group's code used by finance (billing). A group could have more than one SIP Rel Cd depending on how the group is administered by Finance or Underwriting. Ex: A Town and a Board of Education could have separate SIP Rel Cds.

SIP Retention Fee: For groups with Administrative Fees based on a percentage of claims. Administrative Fees based on per member/per contract amounts ARE NOT shown on this report

Vision: Vision coverage under a separate (stand alone) policy. The associated claims are included in the Med/Surg claims category

The time period reflects months in the current contract plan year



Health Insights
DataView Direct

Glossary

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