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## Health Plan Management Report

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# Greater Tompkins Consortium

Union Industry Comparison

Incurred between January 1, 2022 and December 31, 2022, paid through March 31, 2023

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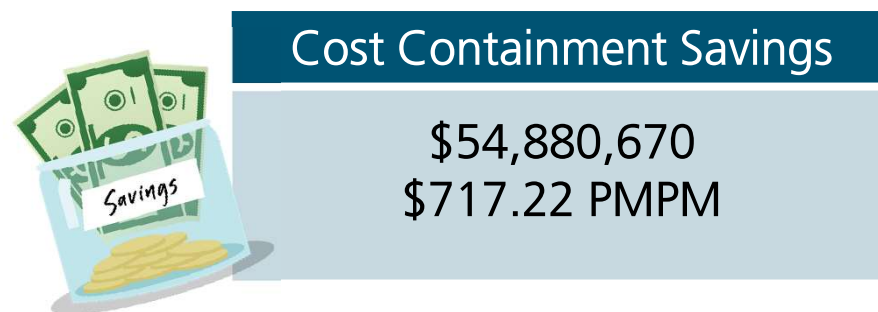


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# Highlights

- ✓ **Enrollment:** Subscribers increased 3% while overall membership increased 1%.
- ✓ Plan cost in the current period was down 5% (\$2.1M) overall and 7% on a per member per month basis.
- ✓ The number of **High Cost Claimants** over \$150K declined from 23 in 2021 to 20 claimants in 2022.
  - These 20 High Claimants accounted for 15% of Plan Costs and over **\$5.6 million** in claims.
- ✓ **Depression & Anxiety** was the top prevalent condition in 2022, representing 27% of the population and over **\$1.2 Million** in Total Costs.



# At a Glance

	Prior	Current	% Change
Average Contracts	3,034	3,116	+3%
Average Members	6,302	6,383	+1%
Plan Cost	\$38,515,344	\$36,426,389	-5%
Member Cost	\$1,828,456	\$2,116,012	+16%
Total Cost *	\$44,536,065	\$42,634,503	-4%

Prior - Incurred between January 1, 2021 and December 31, 2021, paid through March 31, 2022

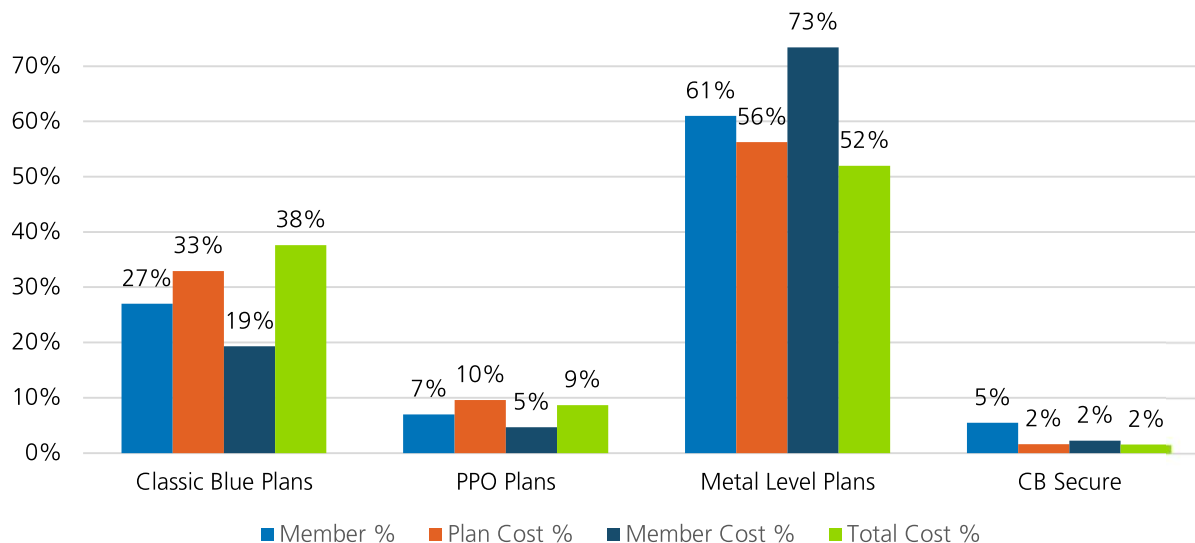
Current - Incurred between January 1, 2022 and December 31, 2022, paid through March 31, 2023

Union Comparison data is based on a large sample of clients, representing approximately 118,000 members

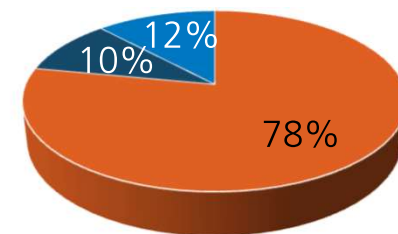
\* Current Total Cost includes \$3,640,673 in COB payments. COB accounted for 8.5% of total cost. Retirees accounted for 96% of COB.

	Prior	Current	% Change	Comparison	Current vs Comparison
Plan Cost per Contract per Year	\$12,845	\$11,835	-8%	\$11,222	5% higher
Plan Cost per Member per Month	\$515	\$481	-7%	\$436	10% higher
Total Cost per Member per Year	\$7,067	\$6,679	-5%	\$5,971	12% higher
Percent Member Cost Share	4%	5%	+25%	7%	less
Member Cost per Contract per Year	\$603	\$679	+13%	\$795	15% lower
Members per Contract	2.1	2.0	-5%	2.1	less

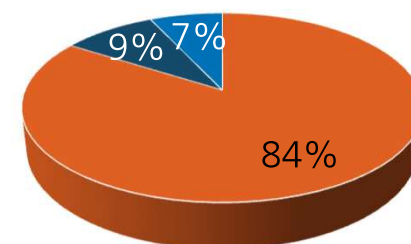
Percentage of Enrollment and Cost by Plan



% Members by Class



% Plan Cost by Class



Active Retiree under 65 Retiree over 65

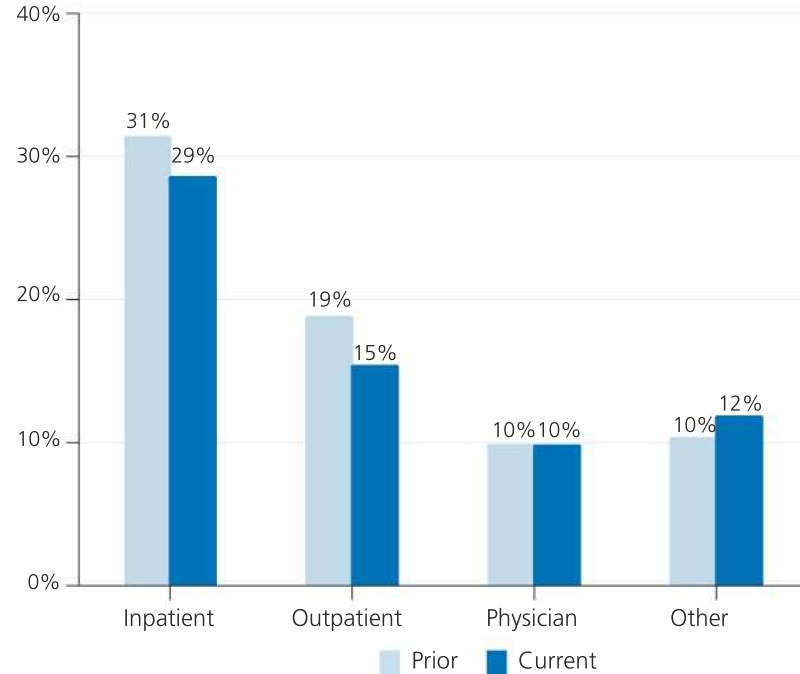
# Plan Cost by Arena of Care

Arena	Plan Cost			PMPM					Admits / Cases / Rx Count		
	Prior	Current	Current % of Total	Prior	Current	% Change	Comparison	Current vs Comparison	Prior	Current	% Change
Inpatient	\$7,767,606	\$5,514,494	15%	\$102.71	\$71.99	-30%	\$92.71	22% lower	442	405	-8%
Outpatient	\$17,495,350	\$17,718,541	48%	\$231.35	\$231.32	0%	\$203.51	14% higher	29,613	27,378	-8%
Physician	\$12,076,893	\$12,104,507	33%	\$159.70	\$158.03	-1%	\$126.95	24% higher	107,255	109,290	+2%
Other	\$1,175,495	\$1,088,847	3%	\$15.54	\$14.22	-8%	\$12.20	17% higher	5,179	5,682	+10%

## High Claimants Over \$150,000

### Impact: High Claimants over \$150,000

High Claimants Plan Cost			
Arena	Prior Plan Cost	Current Plan Cost	% Change
Inpatient	\$2,442,246	\$1,574,610	-36%
Outpatient	\$3,283,222	\$2,720,317	-17%
Physician	\$1,185,106	\$1,184,670	0%
Other	\$121,177	\$128,660	+6%
Total	\$7,031,751	\$5,608,257	-20%





# Plan Cost by Arena of Care

Inpatient	Plan Cost	PMPM		
		Prior	Current	Comparison
Surgical	\$2,902,521	\$42.33	\$37.89	\$39.86
Medical	\$1,388,673	\$39.10	\$18.13	\$33.51
Maternity	\$570,629	\$9.37	\$7.45	\$7.65
Psychiatric	\$228,282	\$3.82	\$2.98	\$3.41
Well Newborn	\$136,578	\$2.22	\$1.78	\$1.09

Outpatient	Plan Cost	PMPM		
		Prior	Current	Comparison
Outpatient Surgery	\$6,046,695	\$73.69	\$78.94	\$79.68
Pharmacy	\$3,147,411	\$43.57	\$41.09	\$31.17
Radiology	\$2,466,734	\$31.57	\$32.20	\$23.35
Pathology	\$1,901,575	\$27.46	\$24.83	\$11.22
Emergency Room	\$1,814,519	\$22.47	\$23.69	\$26.99

Top 5	Plan Cost	% Plan Cost	# of Admits	% Admits
Cayuga Medical Center At Ithaca	\$1,237,505	22%	127	31%
Upstate University Hospital	\$786,643	14%	34	8%
Strong Memorial Hospital	\$727,755	13%	14	3%
Robert Packer Hospital	\$433,108	8%	32	8%
Guthrie Cortland Medical Center	\$325,838	6%	42	10%
All Other Facilities	\$2,003,645	36%	156	39%
Total	\$5,514,494	100%	405	100%

Top 5	Plan Cost	% Plan Cost	# of Cases	% Cases
Cayuga Medical Center At Ithaca	\$8,300,869	47%	12,155	44%
Robert Packer Hospital	\$1,532,616	9%	498	2%
Guthrie Cortland Medical Center	\$1,405,138	8%	1,806	7%
Strong Memorial Hospital	\$522,838	3%	522	2%
United Health Services Hospitals	\$518,487	3%	577	2%
All Other Facilities	\$5,438,593	31%	11,820	43%
Total	\$17,718,541	100%	27,378	100%

Inpatient Management		
Inpatient Reviews	% Reviewed by a Medical Director	% Lower Cost Treatment
109	13% / 14	9% / 10
Comparison	19%	11%
Current Savings		Comparison
\$4.86 PMPM / \$371,880		\$6.54 PMPM

Outpatient Management	
Outpatient Reviews	% Lower Cost Treatment
1,450	9% / 131
Comparison	15%
Current	Comparison
\$9.12 PMPM / \$698,544	\$2.72 PMPM



Physician	Plan Cost	PMPM		
		Prior	Current	Comparison
Physician Office Visits	\$3,080,548	\$37.87	\$40.22	\$30.95
Office Administered Drugs	\$1,541,470	\$21.33	\$20.12	\$16.46
Outpatient Surgery	\$918,438	\$12.60	\$11.99	\$9.37
Radiology	\$905,272	\$11.00	\$11.82	\$10.98
Outpatient Psychiatric	\$792,871	\$11.18	\$10.35	\$5.34

➤ 31% of adults during the current period had an annual physical.



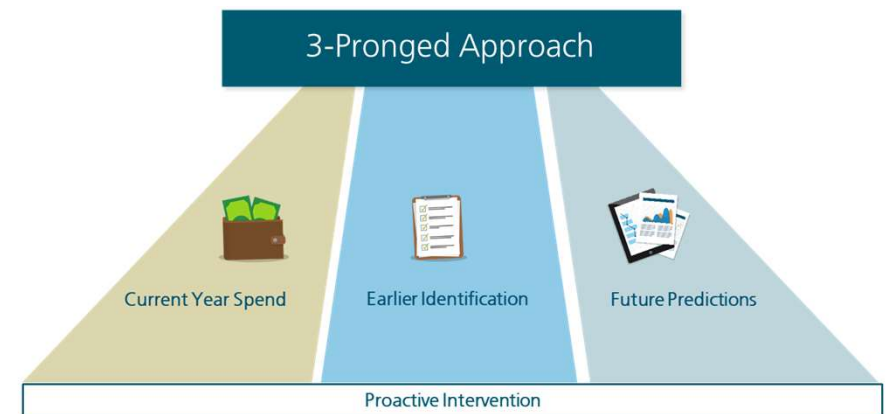
# High Cost Claimant Impact

	Prior	Current	% Change	Comparison	Current vs Comparison
Number of Claimants with Plan Cost >= \$150,000	23	20	-13%	--	--
Percent of Members with Plan Cost >= \$150,000	0.34%	0.29%	-14%	--	--
Number of Claimants/1000 with Plan Cost >= \$150,000	3.6	3.1	-14%	5.0	38% lower
Plan Cost for Claimants >= \$150,000	\$7,031,751	\$5,608,257	-20%	--	--
Percent of Plan Cost for Claimants >= \$150,000	18%	15%	-16%	--	--
Average Plan Cost per Claimant >= \$150,000	\$307,840	\$280,416	-9%	--	--
Plan Cost PMPY Excluding Claimants >= \$150,000	\$5,079	\$4,914	-3%	\$4,056	21% higher

## Top 10 High Cost Claimants Impact

Gender	Member Count	Category	Member Count		
Male	7	Cancer	3		
Female	3	Neurologic Disorders	3		
		All Others	4		
Relation	Member Count	Product	Member Count		
Self	5	Indemnity	3		
Spouse	3	PPO	7		
Child	2				
Status	Member Count	Care Management Program	Forecasted Cost >\$50K		
Active	8	UM	Yes		
Termed	2	CM	No		
		DM			
Count	8	5	4	8	2

## The High-Cost Claimant Identification



## Member-Centric Care

- ✓ Care Management
- ✓ Behavioral Health Management
- ✓ Wellbeing Programs
- ✓ Assists and Educates Members
- ✓ Tailors Support Plans
- ✓ Identifies Potential Cost Savings

# Gaps in Care Estimates

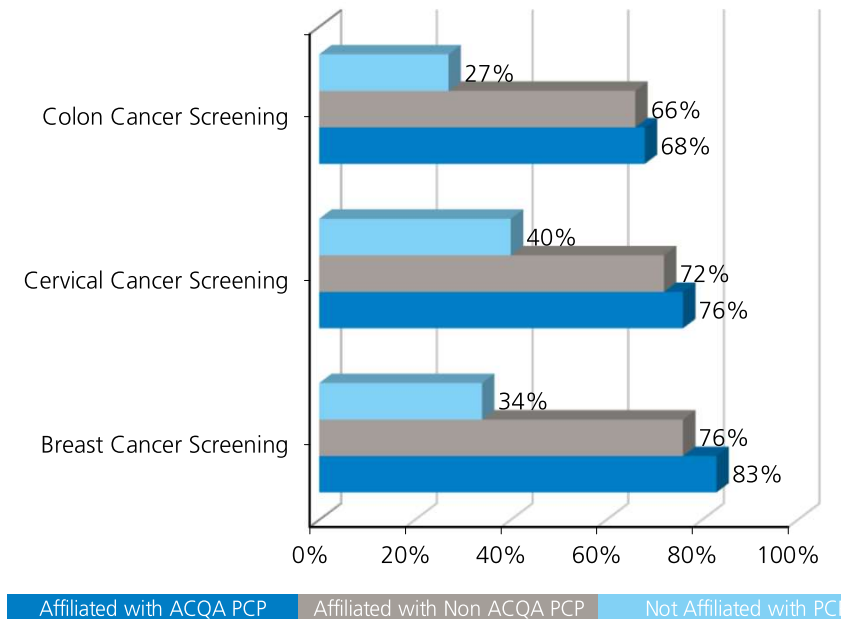
Guideline	Eligible Members	Guideline Compliance Rate	
		Current	Comparison
Preventive Services			
Child and Adolescent Well-Care Visits (1 per year for ages 3-11)	527	86%	83%
Child and Adolescent Well-Care Visits (1 per year for ages 12-17)	424	80%	79%
Child and Adolescent Well-Care Visits (1 per year for ages 18-21)	340	40%	48%
Breast Cancer Screening (1 in the past 2 years for women ages 50-74)	637	75%	79%
Cervical Cancer Screening (1 in the past 3 years for women ages 21-64)	1,249	74%	77%
Colon Cancer Screening (1 in the past 10 years for adults ages 45+)	1,919	65%	66%

➤ 2021 Compliance: 70% Breast, 68% Cervical, 69% Colon

Members Affiliated with a PCP	Count	Percent	Comparison
Members Affiliated with a PCP	6,609	82%	74%
• Members Affiliated with an ACQA PCP	4,785	69%	53%
Members Not Affiliated with a PCP	1,277	18%	26%
Total Members	6,974	-	-

ACQA = Accountable Cost and Quality Agreement

- 374 members not affiliated with a PCP had no services
- 345 members not affiliated with a PCP utilized Urgent Care or Emergency Room services

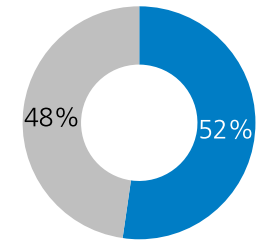


# Chronic Condition Prevalence

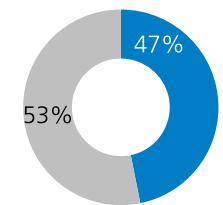
## Most Prevalent Chronic Conditions

	# of Members	Total Cost	Prevalence		
			Prior	Current	Comparison
Depression and Anxiety	1,824	\$1,291,949	26.4%	26.6%	23.2%
Cholesterol Disorders	1,706	\$104,267	20.1%	24.9%	23.6%
Hypertension	1,700	\$245,114	22.3%	24.8%	21.4%
Diabetes	605	\$908,937	9.0%	8.8%	7.6%
Asthma	511	\$170,370	5.7%	7.5%	6.2%
Ischemic Heart Disease	383	\$864,828	5.8%	5.6%	4.0%
Chronic Obstructive Pulmonary Disease	212	\$81,981	2.7%	3.1%	2.4%
Congestive Heart Failure	143	\$132,602	2.0%	2.1%	1.7%

## Greater Tompkins Consortium



## Union

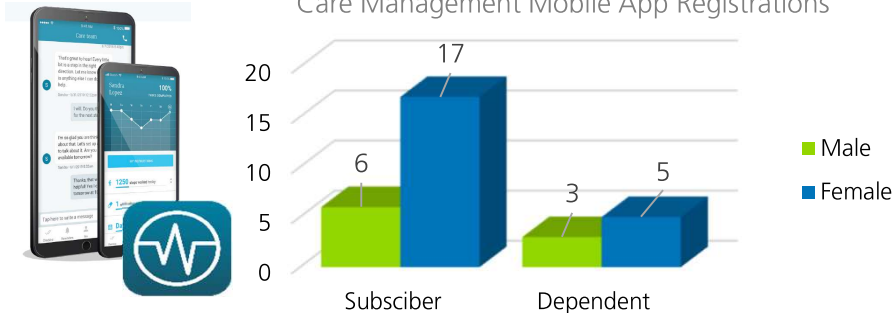


■ % of Members with At Least One Chronic Condition

➤ Within your population 52% of your members have at least one chronic condition, and 28% have two or more.

## Member Engagement & Population Health Management

### Care Management Mobile App Registrations



Member Engagement	Members	Cases	% of Cases	Comparison
Engaged	34	40	25%	19%
Outreached	111	115	73%	39%
Outreached - No Contact	2	2	1%	42%
Total	144	157	--	--

Members with ...	Unique Members with an Outreach	Total # of Program Outreaches	Outreaches per Member	Gaps Closed
High Cost Members* <i>with</i> Chronic Conditions	14	235	16.8	5
High Cost Members* <i>w/o</i> Chronic Conditions <u>or</u> High ER Utilizers**	27	154	5.7	8
Chronic Condition(s)	906	2,801	3.1	406
Other Members with an Outreach	710	1,050	1.5	101
Total	1,657	4,240	2.6	520

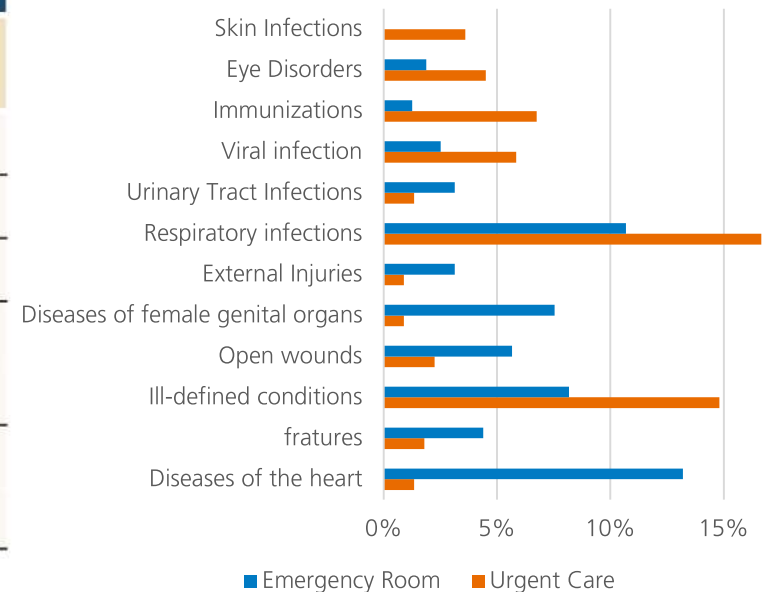
# Consumerism

Visit Type	Count		Visits/Registrations per 1,000				
	Prior	Current	Prior	Current	% Change	Comparison	Current vs Comparison
Physician Office Visits: Total Visits *	29,457	30,856	4,674	4,834	+3%	4,197	15% higher
Telehealth Visits: (Non MDLIVE)	12,891	10,783	2,046	1,689	-17%	863	96% higher
Urgent Care: Total Visits	2,192	2,012	348	315	-9%	320	2% lower
ER: Low Acuity Visits	341	318	54	50	-7%	58	14% lower
ER: Total Visits	1,278	1,334	203	209	+3%	214	2% lower
Telemedicine Visits: (MDLIVE - Acute)	42	45	7	7	0%	16	56% lower
Telemedicine Visits: (MDLIVE - Behavioral)	41	14	7	2	-71%	5	60% lower
Telemedicine Registered Members	182	213	29	33	+14%	46	28% lower

Visit Type	Average Total Cost/Visit		
	Current	Comparison	Current vs Comparison
Physician Office Visits *	\$129	\$116	11% higher
Telehealth Visits: (Non MDLIVE)	\$109	\$111	2% lower
Urgent Care Visits	\$199	\$146	36% higher
ER: Low Acuity Visits	\$1,842	\$1,777	4% higher
ER: All Visits	\$1,796	\$1,918	6% lower
Telemedicine Visits: (MDLIVE - Acute)	\$40	\$40	similar
Telemedicine Visits: (MDLIVE - Behavioral)	\$66	\$80	18% lower

\* Telemedicine and Telehealth visits included

Top UC & ER visits per 1,000 by Diagnoses



■ Emergency Room ■ Urgent Care

# Provider Network



Savings	
Percent Savings *:	55%
Billed Charges:	\$95,660,790
Total Costs *:	\$42,634,503
Network Savings:	\$53,026,287

\* Percent Savings = Network Savings / Billed Charges

\* Total Costs = Plan Costs + Member Costs + Other Carrier Liability



Non-Participating Provider Utilization	
Number of Individuals:	872
Plan Costs:	\$831,467
Member Costs:	\$186,497
Percent Plan Cost:	2.3%

Arena	Participating Provider			Total Plan Costs
	Local Provider	Blue Card Provider	Non-Par Provider	
Inpatient	\$4,551,448	\$892,070	\$70,976	\$5,514,494
Outpatient	\$15,368,458	\$2,317,659	\$32,424	\$17,718,541
Physician	\$10,702,038	\$922,594	\$479,876	\$12,104,507
Other	\$796,348	\$44,309	\$248,191	\$1,088,847
Pharmacy	\$451,428	--	--	\$451,428
Total	\$31,869,718	\$4,176,632	\$831,467	\$36,877,818



Blue Card
Bluecard claims represent 11% of Total Costs
PA: 58%, NY: 12%, GA: 5%
IL: 4%, TN: 3%, Other: 18%

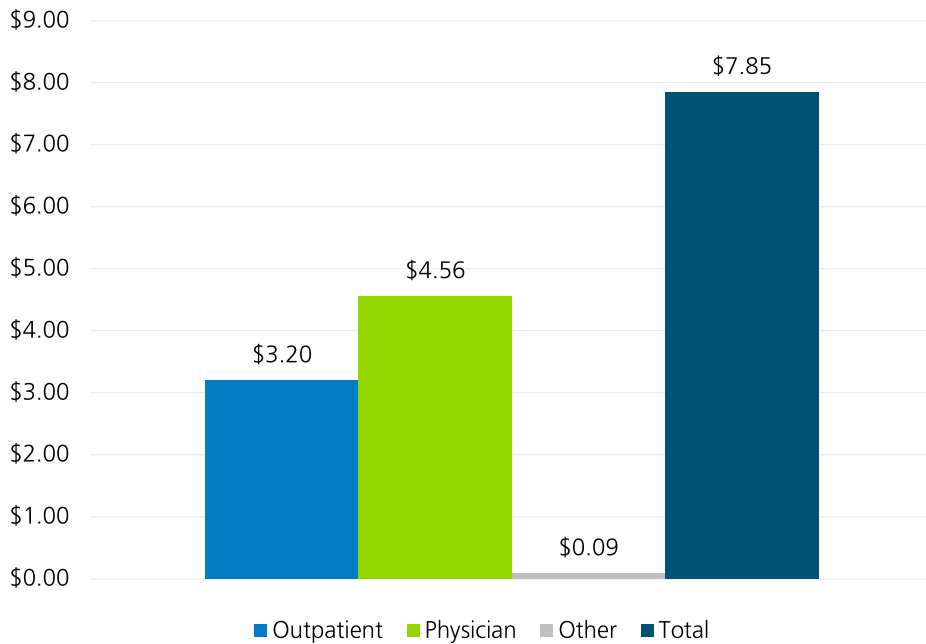
## Non-Par Provider Utilization

Top 5 Treatment Types	% Plan Cost	Member Count
Ambulance	28%	196
Outpatient Psychiatric	26%	137
Chiropractor	17%	298
Physical Therapy	8%	189
Psychiatric	6%	1
All Other	15%	564
Total	100%	872

# Pre and Post Payment Savings

## Pre-Payment

Clinical Editing Programs drive down claim expense by managing medical and payment policies through enforcing correct coding protocols. A multi-faceted approach enables maximum savings with a focus on cost containment, promoting claims billing accuracy, and payment integrity.

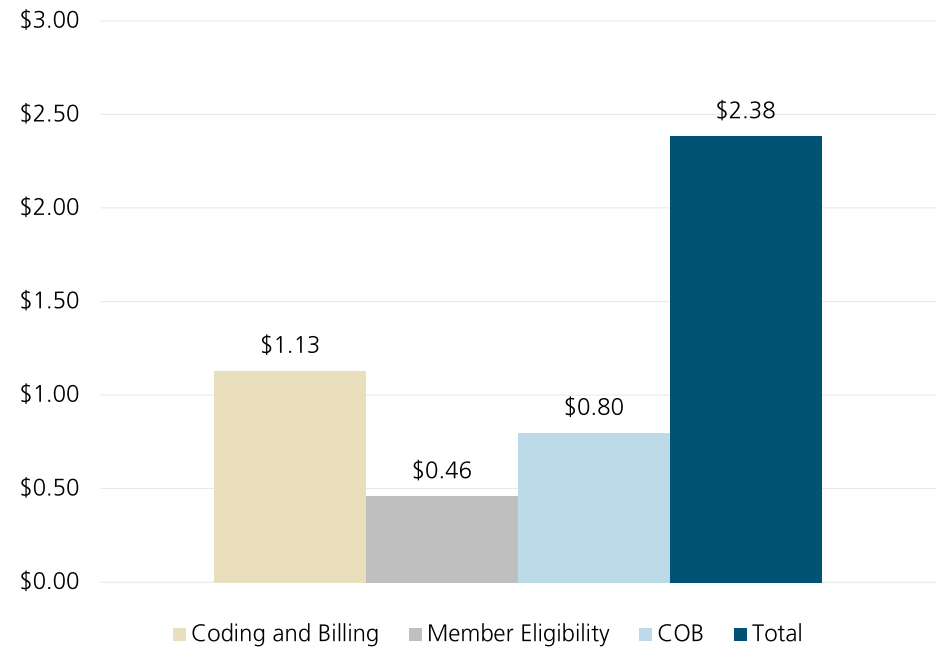


Arena	Total Savings	PMPM Savings	Comparison PMPM Savings
Outpatient	\$245,109	\$3.20	\$1.84
Physician	\$348,974	\$4.56	\$3.74
Other	\$7,011	\$0.09	\$0.18
<b>Total</b>	<b>\$601,094</b>	<b>\$7.85</b>	<b>\$5.76</b>

\*Standard correct coding programs are not presently applied to Inpatient facilities, however the Health Plan is looking into future opportunity.

## Post-Payment

Payment Integrity is the focus, with a goal to control health benefits expense through retrospective review including validation of appropriate billing and payment. Identified overpayments are recovered and future overpayments will be minimized through audits and remediation.



Detail	Total Savings	PMPM Savings	Comparison PMPM Savings
Coding and Billing	\$86,586	\$1.13	\$0.89
COB	\$61,150	\$0.80	\$0.98
Member Eligibility	\$35,129	\$0.46	\$0.22
<b>Total</b>	<b>\$182,865</b>	<b>\$2.38</b>	<b>\$2.10</b>



# Cost Containment



Network Savings:  
\$53,026,287



Inpatient Reviews:  
\$371,880



Outpatient Reviews:  
\$698,544



Pre-Payment Savings:  
\$601,094



Post Payment Recoveries:  
\$182,865



Total Savings:  
\$54,880,670  
\$717.22 PMPM



# Looking Forward

## Condition Management



52% of members have at least one **chronic condition**. Proper management of these conditions can lead to improved quality of life for members and help to avoid the potential for more costly diagnoses. Excellus resources and the Consortium wellness channel are both great ways to aid efforts.

## Preventive Screenings

Only 31% of adult membership had an **annual physical** in 2022. Encourage members to utilize their preventive, no-cost benefits to stay engaged in their personal health. Early detection is key to successful treatment and controlling costs.



## Site of Care

Pharmacy was the second-highest cost driver in the outpatient arena at **\$3.1M**. Our Site of Care program could present an opportunity to reduce costs, by the shifting member care from high-cost facilities to homecare or a lower-cost facility.



# Appendix



A nonprofit independent licensee of the Blue Cross Blue Shield Association

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Information

# Member Support Resources

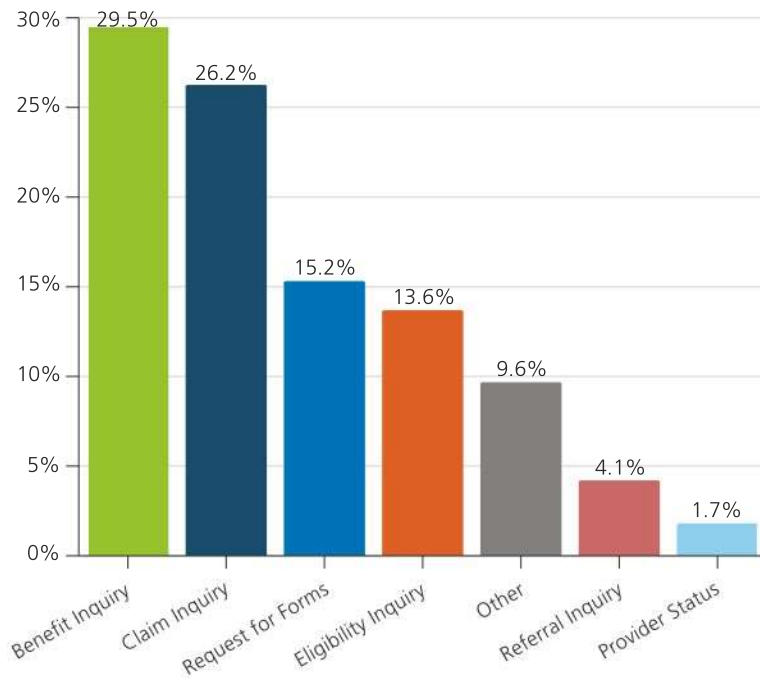
## Customer Care Calls



Our Customer Care department is available Monday - Friday to assist members with questions or concerns.

### Telephone Stats

957 members contacted Customer Care with 1,561 inquiries.

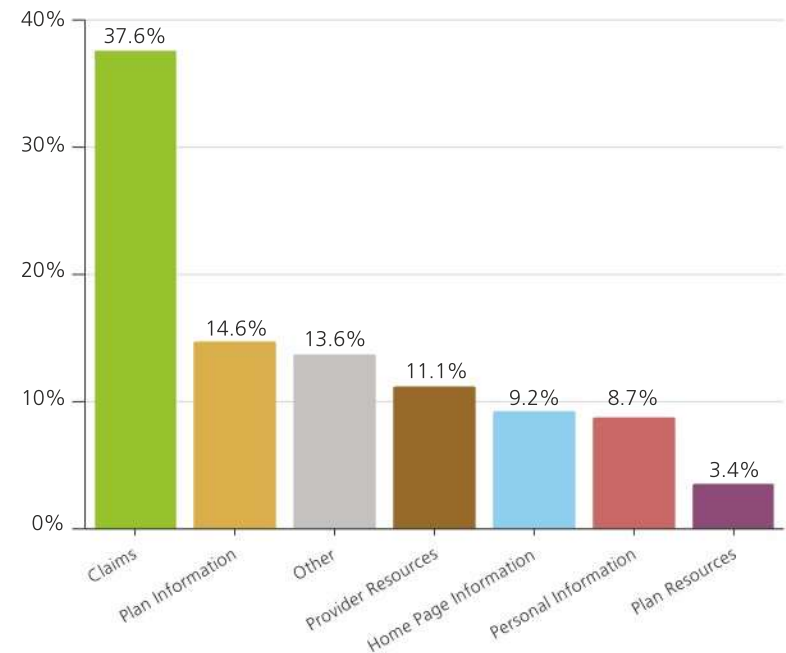


## Self-Service Web Tools



Via online accounts, our site allows for self-service activities 24/7, providing members with information about their coverage and benefits.

Web/Mobile	Prior	Current	Comparison
Adult Members (18+) with website logic	1,510 / 22%	1,697 / 30%	25%
Adult Members (18+) using the mobile app	83 / 1%	126 / 2%	3%

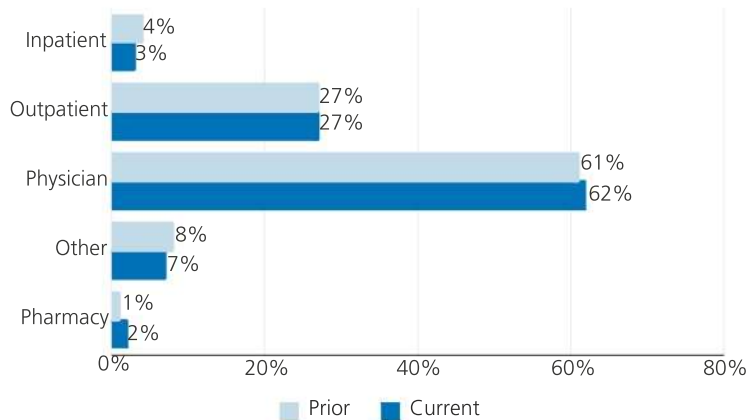


All Others: Health & Wellness, 0.6% Prescription Information, 0.5% Rewards & Incentives, 0.4% Transparency Tool, 0.2% Educational Resources, 0.1%

# Member Cost Share

Member Cost Bands	Number of Contracts			Percent of Contracts		
	Prior	Current	% Change	Prior	Current	% Change
< \$249	1,582	1,505	-5%	48%	45%	-6%
\$250 - \$999	1,319	1,312	-1%	40%	39%	-3%
\$1,000 - \$1,499	154	209	+36%	5%	6%	+20%
\$1,500 - \$2,499	86	154	+79%	3%	5%	+67%
\$2,500 - \$3,499	60	75	+25%	2%	2%	0%
\$3,500 - \$4,499	41	40	-2%	1%	1%	0%
\$4,500 - \$5,499	19	15	-21%	1%	0%	-100%
\$5,500 - \$6,999	14	27	+93%	0%	1%	+100%
\$7,000 - \$8,999	7	10	+43%	0%	0%	0%
\$9,000 - \$10,999	6	5	-17%	0%	0%	0%
\$11,000 +	4	2	-50%	0%	0%	0%

% Member Cost by Arena



	Member Cost	Total Cost	Member Cost as a % of Total Cost
Inpatient	\$55,654	\$6,579,742	1%
Outpatient	\$561,217	\$19,581,860	3%
Physician	\$1,315,255	\$14,566,020	9%
Other	\$150,206	\$1,421,773	11%
Pharmacy	\$33,680	\$485,108	7%
Total	\$2,116,012	\$42,634,503	5%

# Costs by Clinical Classification

	Current Total Cost	Current Total Cost PMPM	Comparison Total Cost PMPM
Symptoms and Health Factors	\$7,081,120	\$92.45	\$72.66
Musculoskeletal System	\$5,415,267	\$70.70	\$59.75
Circulatory System	\$4,190,052	\$54.70	\$50.36
Nervous System and Sense Organs	\$4,183,478	\$54.62	\$39.10
Neoplasms	\$3,040,748	\$39.70	\$47.03
Digestive System	\$2,954,189	\$38.57	\$41.28
Injury and Poisoning	\$2,419,619	\$31.59	\$32.27
Genitourinary System	\$2,017,272	\$26.34	\$27.27
Mental Health and Substance Abuse	\$1,977,082	\$25.81	\$22.37
Endocrine and Nutritional	\$1,833,858	\$23.94	\$20.54
Infectious and Parasitic	\$1,632,331	\$21.31	\$18.84
Respiratory System	\$1,480,978	\$19.33	\$22.66
Blood and Blood Disorders	\$1,149,013	\$15.00	\$7.05
Pregnancy and Childbirth	\$1,133,547	\$14.80	\$14.17
Skin and Subcutaneous	\$590,064	\$7.70	\$7.31
Congenital Anomalies	\$447,084	\$5.84	\$3.81
Perinatal Conditions	\$272,332	\$3.56	\$6.17
Other	\$212,158	\$2.77	\$2.76
Dental Diseases	\$119,201	\$1.56	\$1.69

Neoplasms	Current Total Cost
C50 Malignant neoplasm of breast	\$236,748
C79 Secondary malignant neoplasm of other and unspecified sites	\$204,837
C61 Malignant neoplasm of prostate	\$202,192
C78 Secondary malignant neoplasm of respiratory and digestive organs	\$197,381
D22 Melanocytic nevi	\$194,005
All Other	\$2,005,585
Total	\$3,040,748

Symptoms and Health Factors	Current Total Cost
Z12 Encounter for screening for malignant neoplasms	\$1,353,521
Z51 Encounter for other aftercare	\$1,312,921
Z00 Encounter for general examination without complaint, suspected or reported diagnosis	\$783,789
R10 Abdominal and pelvic pain	\$656,387
Z20 Contact with and (suspected) exposure to communicable diseases	\$434,493
All Other	\$2,540,009
Total	\$7,081,120

# Cost Distributions

## Members by Total Cost Band

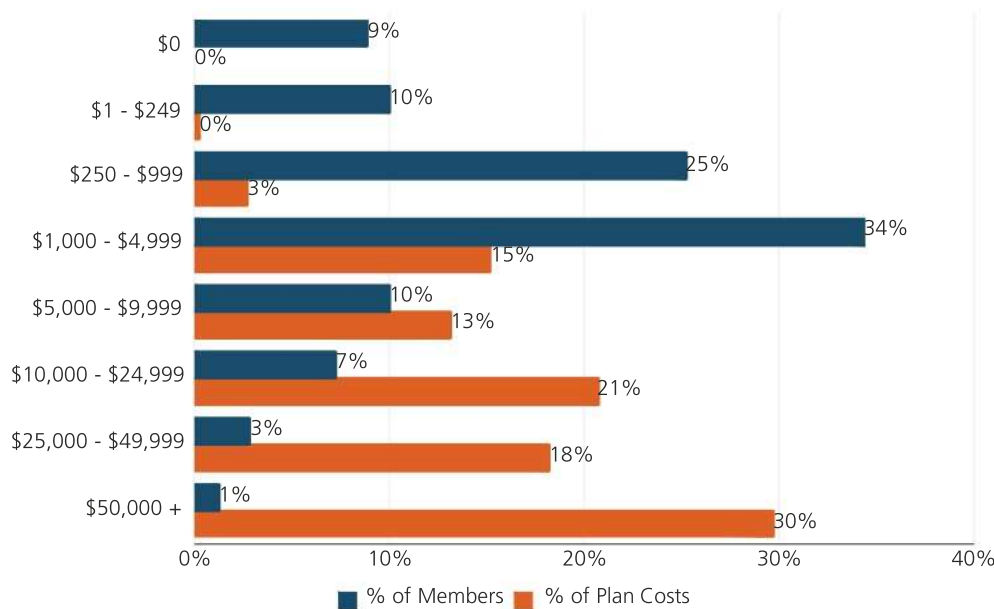
	Prior	Current	Comparison
\$0	6%	8%	16%
\$1 - \$999	31%	30%	35%
\$1,000 - \$9,999	48%	48%	39%
\$10,000 - \$24,999	9%	9%	6%
\$25,000 - \$49,999	3%	3%	2%
\$50,000 +	2%	2%	2%



### Members with \$0 in Total Costs

- 554 - Number of Members
- 36.0 - Average Age
- 65% - Male
- 43% - Subscribers
- 13% - Dependents < age 19
- 9.1 - Average Months on Plan (within report period)
- 347 - Members Enrolled for Full Reporting Period

## Percent of Members & Plan Costs



# Inpatient Utilization

	Count		Rate per 1,000 per Year				
	Prior	Current	Prior	Current	% Change	Comparison	Current vs Comparison
Admissions	442	405	70	63	-10%	59	7% higher
Average Length of Stay	6.3	6.6	--	--	+5%	5.8	14% higher

## Plan Cost and Utilization by Facility

Top 5	Plan Cost	% Plan Cost	# of Admits	% Admits
Cayuga Medical Center At Ithaca	\$1,237,505	22%	127	31%
University Hospital Suny Health Science Center	\$786,643	14%	34	8%
Strong Memorial Hospital	\$727,755	13%	14	3%
Robert Packer Hospital	\$433,108	8%	32	8%
Guthrie Cortland Medical Center	\$325,838	6%	42	10%
All Other Facilities	\$2,003,645	36%	156	39%
Total	\$5,514,494	100%	405	100%

Inpatient Management		
Inpatient Reviews	% Reviewed by a Medical Director	% Lower Cost Treatment
109	13%	9%
Comparison	19%	11%

Total Savings	
Current	Comparison
\$4.86 PMPM / \$371,880	\$6.54 PMPM



# Outpatient Utilization

	Plan Cost	PMPM			Cases	Cases/1,000/Year		
		Prior	Current	Comparison		Prior	Current	Comparison
Outpatient Surgery	\$6,046,695	\$73.69	\$78.94	\$79.68	1,317	190	206	170
Pharmacy	\$3,147,411	\$43.57	\$41.09	\$31.17	1,902	291	298	199
Radiology	\$2,466,734	\$31.57	\$32.20	\$23.35	3,904	609	612	479
Pathology	\$1,901,575	\$27.46	\$24.83	\$11.22	8,823	1,616	1,382	1,178
Emergency Room	\$1,814,519	\$22.47	\$23.69	\$26.99	1,334	203	209	214
Other Outpatient Facility	\$977,974	\$11.53	\$12.77	\$11.74	3,863	860	605	491
Observation	\$584,147	\$8.87	\$7.63	\$6.47	103	16	16	12
All Other	\$779,486	\$12.18	\$10.18	\$12.90	6,132	913	961	709
<b>Total</b>	<b>\$17,718,541</b>	<b>\$231.35</b>	<b>\$231.32</b>	<b>\$203.51</b>	<b>27,378</b>	<b>4,699</b>	<b>4,289</b>	<b>3,452</b>

## Plan Cost and Utilization by Facility

Top 5	Plan Cost	% Plan Cost	# of Cases	% Cases
Cayuga Medical Center At Ithaca	\$8,300,868	47%	12,155	44%
Robert Packer Hospital	\$1,532,616	9%	498	2%
Guthrie Cortland Medical Center	\$1,405,138	8%	1,806	7%
Strong Memorial Hospital	\$522,838	3%	522	2%
United Health Services Hospitals	\$518,487	3%	577	2%
All Other Facilities	\$5,438,593	31%	11,820	43%
<b>Total</b>	<b>\$17,718,541</b>	<b>100%</b>	<b>27,378</b>	<b>100%</b>

Outpatient Management	
Outpatient Reviews	% Lower Cost Treatment
1,450	9% / 131
Comparison	15%

Total Savings	
Current	Comparison
\$9.12 PMPM / \$698,544	\$2.72 PMPM



# Urgent Care / Emergency Room

## Urgent Care

Top 5 Diagnoses Visits	Prior	Current
Respiratory infections	464	555
Symptoms; signs; and ill-defined conditions	468	227
Ear conditions	98	178
Immunizations and screening for infectious disease	170	98
Diseases of the urinary system	96	91
Total of All Urgent Care Visits	2,192	2,012
# of Unique Members with Visits	1,514	1,363
Average Visits per Member	1.45	1.48

## Emergency Room

Top 5 Diagnoses Visits	Prior	Current
Symptoms; signs; and ill-defined conditions	141	159
Diseases of the heart	128	134
Respiratory infections	85	111
Unclassified	39	66
Open wounds	49	56
Total of All Emergency Department Visits	1,278	1,334
# of Unique Members with Visits	971	982
Average Visits per Member	1.32	1.36

# of Visits	Member Count
1	942
2	278
3	87
4	37
5+	19



# of Visits	Member Count
1	778
2	131
3	38
4	22
5+	13



Top 5 Providers	Visits	Unique Members	Total Cost
WellNow Urgent Care PC	970	692	\$102,088
Cayuga Medical Center at Ithaca	249	213	\$136,289
Soldiers and Sailors Memorial Hospi	207	142	\$30,011
CMA Medical Practice PLLC	200	173	\$62,029
FLH Medical PC	65	47	\$10,944

Top 5 Providers	Visits	Unique Members	Total Cost
Cayuga Medical Center at Ithaca	493	394	\$942,032
Guthrie Cortland Medical Center	224	177	\$368,595
Geneva General Hospital	115	80	\$151,742
Guthrie Corning Hospital	75	58	\$134,899
Robert Packer Hospital	51	45	\$79,244

# MDLIVE / Telemedicine

**MDLIVE**



	Subscriber	Spouse	Dependents	Total
Number of Registered Members*	130	43	40	213
Number of Acute Care Visits	23	17	5	45
Number of Unique Members with Acute Care Visits	18	6	4	28
Number of Behavioral Health Visits	13	1	0	14
Number of Unique Members with Behavioral Health Visits	2	1	0	3

\*Percent of Eligible Registered members is 3.1%

\*Optimal savings occur with 20% or greater registered members

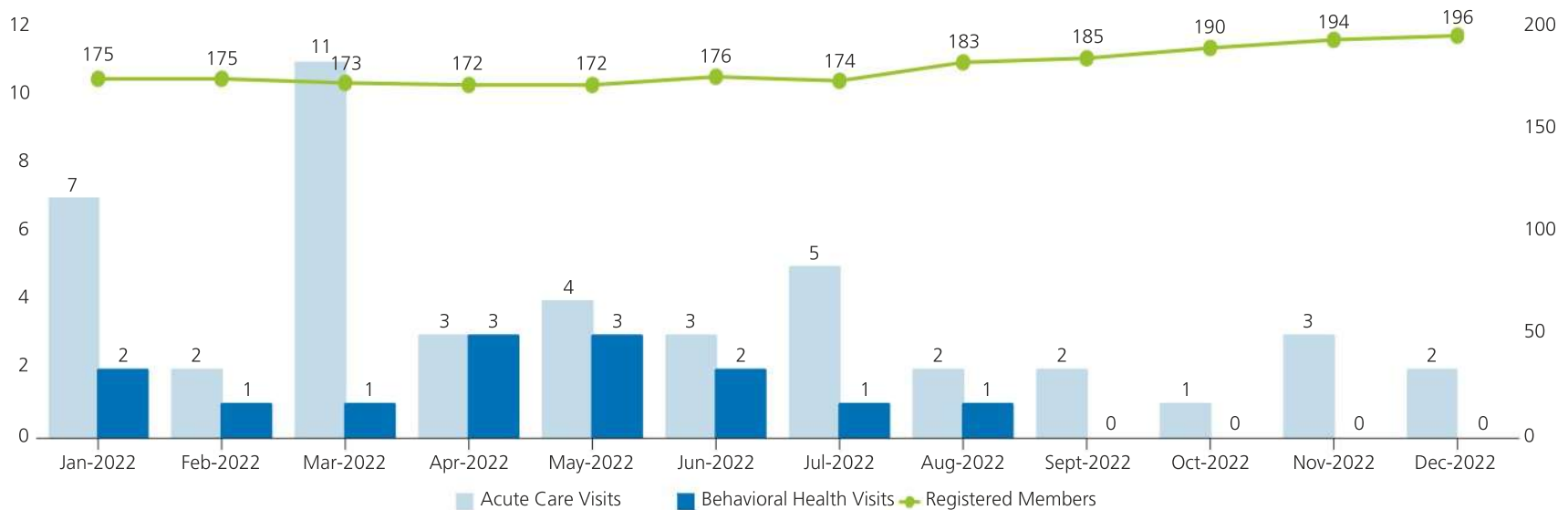
Total Estimated  
Acute Care Savings

\$6,710

Average Total Cost per  
Behavioral Health Session

\$66

## Monthly MDLIVE Utilization



# At a Glance

## Greater Tompkins Consortium

Industry Comparison

Claims Incurred Jan 2022: Dec 2022, Paid Mar 2023		Prior	Current	% Change	Comparison	Current vs Comparison
<b>Enrollment and Demographics</b>						
Average Contracts	3,034	3,116	3%	--	--	
Average Members	6,302	6,383	1%	117,872	--	
Members per Contract	2.1	2.0	-5%	2.1	less	
Average Age: Subscribers	53.9	53.8	0%	49.6	older	
Percent Male: Subscribers	56%	57%	2%	63%	less	
Average Age: All Members	41.4	41.4	0%	38.1	older	
Percent Male	49%	50%	2%	52%	less	
<b>Financial Measures</b>						
Plan Cost	\$38,972,920	\$36,877,818	-5%	--	--	
Member Cost	\$1,828,456	\$2,116,012	16%	--	--	
Total Cost	\$44,536,065	\$42,634,503	-4%	--	--	
Plan Cost per Contract per Year	\$12,845	\$11,835	-8%	\$11,222	5%	
Plan Cost per Member per Year	\$6,184	\$5,778	-7%	\$5,230	10%	
Plan Cost per Member per Month	\$515	\$481	-7%	\$436	10%	
Total Cost per Member per Year	\$7,067	\$6,679	-5%	\$5,971	12%	
Percent Member Cost Share	4%	5%	25%	7%	-29%	
Member Cost per Contract per Year	\$603	\$679	13%	\$795	-15%	
<b>Plan Costs by Arena</b>						
Inpatient Plan Cost per Member per Month	\$102.71	\$71.99	-30%	\$92.71	-22%	
Outpatient Plan Cost per Member per Month	\$231.35	\$231.32	0%	\$203.51	14%	
Physician Plan Cost per Member per Month	\$159.70	\$158.03	-1%	\$126.95	24%	
Other Plan Cost per Member per Month	\$15.54	\$14.22	-8%	\$12.20	17%	
Pharmacy Plan Cost per Member per Month	\$6.05	\$5.89	-3%	\$0.46	1,180%	
<b>High Claimant Impact</b>						
Number of Claimants with Plan Cost >= \$150,000	23	20	-13%	--	--	
Plan Cost for Claimants >= \$150,000	\$7,080,316	\$5,608,315	-21%	--	--	
Percent of Plan Cost for Claimants >= \$150,000	18.2%	15.2%	-16%	--	--	
Average Plan Cost per Claimant >= \$150,000	\$307,840	\$280,416	-9%	--	--	
Plan Cost PMPY Excluding Claimants >= \$150,000 Threshold	\$5,079	\$4,914	-3%	\$4,056	21%	
<b>Provider Networks</b>						
Percent Plan Cost to Participating Providers	97%	98%	1%	--	--	
Estimated Provider Savings	\$44,859,157	\$53,026,287	18%	--	--	
Estimated Savings as Percent of Billed Amount	50%	55%	10%	--	--	
<b>Utilization Measures</b>						
Admissions per 1,000 per Year	70	63	-10%	59	7%	
Number of Admissions	442	405	-8%	--	--	
Physician Office Visits per 1,000 per Year	4,674	4,834	3%	4,197	15%	
Emergency Room Visits per 1,000 per Year	203	209	3%	214	-2%	
Number of Emergency Room Visits	1,278	1,334	4%	--	--	
Emergency Room Visits per 1,000 per Year: Low Acuity	54	50	-7%	58	-14%	
<b>Total Cost per Visit</b>						
Physician Office	\$126	\$129	2%	\$116	11%	
Emergency Room	\$1,745	\$1,796	3%	\$1,918	-6%	

% Change: Green - rate decrease of 10% or more; Red - rate increase of 10% or more  
 Current vs Comparison: Green - 10% or more below; Red - 10% or more above

Confidential and proprietary information



# Glossary

**ALOS** Average length of stay for inpatient admissions (number of days divided by number of admissions)

**Average Members** Sum of monthly members (subscribers, spouses and dependents) divided by the number of report months (number of incurred months in an incurred and paid, or number of paid months in a paid report)

**Billed Amount** Provider charges

**Care Management** Involves one-on-one intervention through a nurse care manager - care managers work with individuals, physicians, and family members to identify needs, coordinate care, and secure necessary resources to assist in meeting goals

**Comparison** Measures for a large sample of employers - typically with 50 or more employees, with approximately **118,000** total members enrolled in PPO, POS, or EPO products

**Current** Reporting timeframe listed at the beginning of the report

**Current Status** Claimant status within the employer's plan offering as of report generation

**Disease Management** Programs that help members with chronic conditions to better manage those conditions by increasing their knowledge about their condition, its potential complications, and the importance of medication and treatment plan compliance

**Estimated Network Savings** (Amount Billed - Total Cost)

**Member Cost** (Copays + Deductible + Coinsurance)

**Other Carrier Liability** Amounts paid by another carrier (coordination of benefits)

**Plan Cost** Claims expense paid for enrolled members under the benefits of the employer's plan

**PMPM** Per member per month

**Prior** Exactly one year prior to the Current reporting timeframe

**Total Cost** (Plan Cost + Member Cost + Other Carrier Liability)

**Utilization Management** Evaluates the medical necessity and appropriateness of services based on evidence-based guidelines and national standards of care - services reviewed may include hospital admissions, home care, medical equipment, and radiology; outcomes may include approval, denial, or modification to a different level of care (e.g., inpatient to outpatient)