

Cost & Utilization



Highlights

Demographics	<ul style="list-style-type: none">▪ The population in 2011 – 2,001 contracts – 4,406 members▪ The average contract size: 2.2▪ The average member age 41 and subscriber age 53 is older than the comparison▪ 51% of the population is male
Financial Measures	<ul style="list-style-type: none">• Plan cost in 2011 - \$16,886,753• Plan cost per member in 2011 - average of \$319 per member per month• The Plan cost per member per year in 2011 was 28% higher than that of the comparison• The member cost share is 3% with the average member cost per contract at \$267• 98% of the plan cost were remitted to a participating provider, with a savings of 33%
Plan Cost Distribution and High Cost Claimants	<ul style="list-style-type: none">• 89% of the membership accessed care in 2011• 3% of the membership with claims expense in excess of \$25K accounted for 33% of the plan cost• Three members had claims over \$250k and are forecasted to have claims greater than \$50K over the next 12 months.
Utilization	<ul style="list-style-type: none">• The Outpatient setting accounted for 40% of plan costs followed by the Physician setting with 38%.• Physician office visits were 35% higher than the comparison population. The average total cost per visit was \$83.• Emergency Room visits were 25% higher than the comparison with 19% of those visits classified as potentially avoidable visits. ER average cost per visit was \$1,302.• The most costly and prevalent conditions amenable to prevention or optimal management include back pain 19%, hypertension 12% and depression/anxiety 11%.