

# 2014 Rate Renewal Exclusively for Detour Area Schools

Quote #: 327271 MESSA Field Rep: Kirk Bascom Date Created: 04/01/2014

#### Renewal Effective 07/01/2014

PAK A - 055A Admin,Ma	inSup,UnionStaff,NonUn	2013-14 Rates	Enrollment	2014-15 Rates	
Medical:	MESSA Choices	\$517.62	Single: 1	\$526.84	
N Deductible:	\$500/\$1000	\$1,162.75	2-Person: 4	\$1,183.51	
N Coinsurance:	N/A	\$1,446.61	Family: 2	\$1,472.44	
N Copay (OV/UC/ER):	\$5/\$10/\$25	ψ1,440.01	r diffiny. Z	Ψ1, 472.44	
Rx Coverage:	Saver Rx				
oluntary Abortion:	Excluded				
) ontole		¢45 50	Cingle: 1	¢44.47	
Dental:	4000/	\$45.50	Single: 1	\$44.17	
Class I:	100%	\$85.52	2-Person: 5	\$83.39	
Class II:	90%	\$156.02	Family: 1	\$148.72	
Class III:	90%				
Annual Max:	\$1,500				
Class IV:	90%				
ifetime Max:	\$3,000				
Riders:	2 Cleanings				
	_ 0.00.111190				
/ision:	VSP 3 Plus	\$10.65	Single: 1	\$10.44	
		\$22.90	2-Person: 5	\$22.44	
		\$34.47	Family: 1	\$33.78	
		φ34.47	ганшу. Т	φ33.10	
ife Insurance:	\$50,000		7		
Rate/\$1000	400,000		•	\$0.12	
/olume				\$350,000.00	
		<b>CO 00</b>			
Composite:	<b>\$50,000</b>	\$6.00	7	\$6.00	
AD&D Coverage:	\$50,000		7		
Rate/\$1000				\$0.03	
/olume				\$350,000.00	
Composite:		\$1.50		\$1.50	
TD Benefit	70% Max \$5,000		7		
Max Monthly Salary:	\$7,143				
Vaiting Period:	90 CDMF				
Alcohol/Drug:	2 Year Limitation				
/lental/Nervous:	2 Year Limitation				
Soc. Sec. Offset:	Primary				
Pre-Exist Cond.:	Waived				
COLA:					
	No			04.05	
Rate/\$100				\$1.95	
Covered Salary				\$18,713.00	
Composite:		\$57.88		\$52.13	
otal Monthly Rate per Me		\$639.15		\$641.08	
otal Monthly Rate per Me		\$1,336.55		\$1,348.97	
otal Monthly Rate per Me	ember - Family	\$1,702.48		\$1,714.57	
	PAK A COBRA RATES:				
		Medical	Single	\$525.34	
			2-Person	\$1,182.01	
			Family	\$1,470.94	



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Dental:					
		\$47.44	Single: 0	\$46.70	
Class I:	100%	\$89.03	2-Person: 0	\$88.01	
Class II:	90%	\$159.66	Family: 2	\$154.19	
Class III:	90%	¥	,. =	*******	
Annual Max:	\$1,500				
Class IV:	90%				
Lifetime Max:	\$3,000				
Riders:	2 Cleanings				
Mucro.	2 olcarings				
Vision:	VSP 3 Plus	\$10.65	Single: 0	\$10.44	
		\$22.90	2-Person: 0	\$22.44	
		\$34.47	Family: 2	\$33.78	
		ψο 1. 17	r army. 2	ψουσ	
Life Insurance:	\$50,000		2		
Rate/\$1000				\$0.12	
Volume				\$100,000.00	
Composite:		\$6.00		\$6.00	
AD&D Coverage:	\$50,000		2		
Rate/\$1000	. ,			\$0.03	
Volume				\$100,000.00	
Composite:		\$1.50		\$1.50	
		ψ1.00		Ψ1.00	
LTD Benefit	70% Max \$5,000		2		
Max Monthly Salary:	\$7,143				
Waiting Period:	90 CDMF				
Alcohol/Drug:	2 Year Limitation				
Mental/Nervous:	2 Year Limitation				
Soc. Sec. Offset:	Primary				
Pre-Exist Cond.:	Waived				
COLA:	No				
Rate/\$100	110			\$1.95	
Covered Salary				\$5,346.00	
Composite:		\$57.88		\$52.13	
Composite.		φ37.00		φ32.13	
Total Monthly Rate per M		\$123.47		\$116.77	
Total Monthly Rate per M	Member - 2-Person	\$177.31		\$170.08	
Total Monthly Rate per M		\$259.51		\$247.60	
	PAK B COBRA RATES:				

The COBRA rates for Dental and Vision are the same as the rates above.



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PAK C - 055A Admin,Ma	ainSup,UnionStaff,NonUn	2013-14 Rates	Enrollment	2014-15 Rates	
Medical: IN Deductible: IN Coinsurance: IN Copay (OV/UC/ER): Rx Coverage: Voluntary Abortion:	MESSA ABC Plan 1 \$1250 1P; \$2500 2P&FF N/A N/A ABC Rx Excluded	\$454.97 \$1,021.82 \$1,271.22	Single: 0 2-Person: 0 Family: 0	\$463.08 \$1,040.06 \$1,293.92	
-		0.45.50	0: 1 0	04447	
Dental: Class I:	100%	\$45.50 \$85.52	Single: 0 2-Person: 0	\$44.17 \$83.39	
Class II:	90%	\$156.02	Family: 0	\$148.72	
Class III:	90%				
Annual Max:	\$1,500				
Class IV:	90%				
Lifetime Max:	\$3,000				
Riders:	2 Cleanings				
Vision:	VSP 3 Plus	\$10.65	Single: 0	\$10.44	
		\$22.90	2-Person: 0	\$22.44	
		\$34.47	Family: 0	\$33.78	
		ψ04.47	r army. O	ψ33.70	
Life Insurance:	\$50,000		0		
Rate/\$1000				\$0.12	
Volume				\$0.00	
Composite:		\$6.00		\$6.00	
AD&D Coverage:	\$50,000		0		
Rate/\$1000				\$0.03	
Volume				\$0.00	
Composite:		\$1.50		\$1.50	
LTD Benefit	70% Max \$5,000		0		
Max Monthly Salary:	\$7,143				
Waiting Period:	90 CDMF				
Alcohol/Drug:	2 Year Limitation				
Mental/Nervous:	2 Year Limitation				
Soc. Sec. Offset:	Primary				
Pre-Exist Cond.:	Waived				
COLA:	No				
Rate/\$100				\$1.95	
Covered Salary				\$0.00	
Composite:		\$57.88		\$52.13	
Total Monthly Rate per M	lember - Single	\$576.50		\$577.32	
Total Monthly Rate per M	lember - Z-Person	\$1,195.62 \$4,507.00		\$1,205.52	
Total Monthly Rate per M	lember - Family	\$1,527.09		\$1,536.05	
	PAK C COBRA RATES:				
		Medical	Single	\$461.58	
			2-Person	\$1,038.56	
			Family	\$1,292.42	



# 2014 Rate Renewal Exclusively for Detour Area Schools

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#### Renewal Effective 07/01/2014

PAK A - 055D Teachers		2013-14 Rates	Enrollment	2014-15 Rates	
Medical: IN Deductible: IN Coinsurance: IN Copay (OV/UC/ER): Rx Coverage: Voluntary Abortion:	MESSA Choices \$500/\$1000 N/A \$5/\$10/\$25 Saver Rx Excluded	\$517.62 \$1,162.75 \$1,446.61	Single: 2 2-Person: 0 Family: 4	\$526.84 \$1,183.51 \$1,472.44	
Dental: Class I: Class II: Class III: Annual Max: Class IV: Lifetime Max: Riders:	100% 90% 90% \$1,500 90% \$3,000 2 Cleanings	\$36.40 \$69.02 \$138.11	Single: 2 2-Person: 0 Family: 4	\$35.38 \$67.36 \$132.69	
Vision:	VSP 3 Plus	\$10.65 \$22.90 \$34.47	Single: 2 2-Person: 0 Family: 4	\$10.44 \$22.44 \$33.78	
Life Insurance: Rate/\$1000 Volume Composite: AD&D Coverage: Rate/\$1000 Volume Composite:	\$50,000 \$50,000	\$6.00 \$1.50	6	\$0.12 \$300,000.00 \$6.00 \$0.03 \$300,000.00 \$1.50	
LTD Benefit Max Monthly Salary: Waiting Period: Alcohol/Drug: Mental/Nervous: Soc. Sec. Offset: Pre-Exist Cond.: COLA: Rate/\$100 Covered Salary Composite:	70% Max \$5,000 \$7,143 90 CDMF 2 Year Limitation 2 Year Limitation Primary Waived No	\$34.54	6	\$0.66 \$27,733.00 \$30.51	
Total Monthly Rate per M Total Monthly Rate per M Total Monthly Rate per M	lember - 2-Person	\$606.71 \$1,296.71 \$1,661.23		\$610.67 \$1,311.32 \$1,676.92	
	PAK A COBRA RATES:	Medical  The COBRA rates	Single 2-Person Family	\$525.34 \$1,182.01 \$1,470.94	



PAK B COBRA RATES:

800.292.4910

# 2014 Rate Renewal Exclusively for Detour Area Schools

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#### Renewal Effective 07/01/2014

PAK B - 055D Teachers	<b>3</b>	2013-14 Rates	Enrollment	2014-15 Rates	
Dental:		\$37.98	Single: 0	\$35.80	
Class I:	100%	\$71.92	2-Person: 1	\$68.13	
Class II:	90%	\$141.93	Family: 3	\$133.49	
Class III:	90%		ŕ		
Annual Max:	\$1,500				
Class IV:	90%				
Lifetime Max:	\$3,000				
Riders:	2 Cleanings				
radio.	2 01041111195				
Vision:	VSP 3 Plus	\$10.65	Single: 0	\$10.44	
		\$22.90	2-Person: 1	\$22.44	
		\$34.47	Family: 3	\$33.78	
Life Insurance:	\$50,000		4		
Rate/\$1000	, ,			\$0.12	
Volume				\$200,000.00	
Composite:		\$6.00		\$6.00	
AD&D Coverage:	\$50,000	ψ0.00	4	ψ0.00	
Rate/\$1000	φου,σου		<b>-</b>	\$0.03	
Volume				\$200,000.00	
Composite:		\$1.50		\$1.50	
		φ1.50		φ1.50	
LTD Benefit	70% Max \$5,000		4		
Max Monthly Salary:	\$7,143				
Waiting Period:	90 CDMF				
Alcohol/Drug:	2 Year Limitation				
Mental/Nervous:	2 Year Limitation				
Soc. Sec. Offset:	Primary				
Pre-Exist Cond.:	Waived				
COLA:	No				
Rate/\$100				\$0.66	
Covered Salary				\$18,489.00	
Composite:		\$34.54		\$30.51	
Total Monthly Rate per N		\$90.67		\$84.25	
Total Monthly Rate per N		\$136.86		\$128.58	
Total Monthly Rate per N	lember - Family	\$218.44		\$205.28	

The COBRA rates for Dental and Vision are the same as the rates above.



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Renewal Effective 07/01/2014

PAK C - 055D Teachers		2013-14 Rates	Enrollment	2014-15 Rates	
Medical:	MESSA ABC Plan 1	\$454.97	Single: 1	\$463.08	
IN Deductible:	\$1250 1P; \$2500 2P&FF	\$1,021.82	2-Person: 0	\$1,040.06	
IN Coinsurance:	N/A	\$1,271.22	Family: 5	\$1,293.92	
IN Copay (OV/UC/ER):	N/A	¥ · ,= · · ·==	y. c	¥ 1,===1==	
Rx Coverage:	ABC Rx				
Voluntary Abortion:	Excluded				
Voluntary Abortion.	LXCIudeu				
Dental:		\$36.40	Single: 1	\$35.38	
	4000/				
Class I:	100%	\$69.02	2-Person: 0	\$67.36	
Class II:	90%	\$138.11	Family: 5	\$132.69	
Class III:	90%				
Annual Max:	\$1,500				
Class IV:	90%				
Lifetime Max:	\$3,000				
Riders:	2 Cleanings				
Vision:	VSP 3 Plus	\$10.65	Single: 1	\$10.44	
		\$22.90	2-Person: 0	\$22.44	
		\$34.47	Family: 5	\$33.78	
			·		
Life Insurance:	\$50,000		6		
Rate/\$1000				\$0.12	
Volume				\$300,000.00	
Composite:		\$34.54		\$6.00	
AD&D Coverage:	\$50,000	ψοο .	6	Ψ0.00	
Rate/\$1000	φου,σου		O .	\$0.03	
Volume				\$300,000.00	
		\$1.50		\$300,000.00 \$1.50	
Composite:		φ1.50		φ1.50	
LTD Benefit	70% Max \$5,000		6		
Max Monthly Salary:	\$7,143				
Waiting Period:	90 CDMF				
Alcohol/Drug:	2 Year Limitation				
Mental/Nervous:	2 Year Limitation				
Soc. Sec. Offset:	Primary				
Pre-Exist Cond.:	Waived				
COLA:	No				
Rate/\$100				\$0.66	
Covered Salary				\$27,733.00	
Composite:		\$34.54		\$30.51	
Composite:		<b></b> \$34.54		\$30.51	
Total Monthly Rate per Me		\$572.60		\$546.91	
Total Monthly Rate per Me		\$1,184.32		\$1,167.87	
Total Monthly Rate per Me	ember - Family	\$1,514.38		\$1,498.40	
	PAK C COBRA RATES:				
		Medical	Single	\$461.58	
			2-Person	\$1,038.56	
			Family	\$1,292.42	
			,	ψ., <u></u>	
		The COBRA rates	for Dental and Vision are the	same as the rates above.	



# **Statewide Pooled Groups**

# Medical Renewal Report Comparison to MESSA Average

# **Claims Incurred Over Rating Periods:**

Year 1: October 1, 2011 - September 30, 2012

**Year 2: October 1, 2012 – September 30, 2013** 

**Both Years: Paid through December 31, 2013** 

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#### Introduction

This report is intended to provide an analysis of the cost and utilization of health care services to help explain the 2014 rates for Statewide Pooled Groups.

IMPORTANT: The analysis is based only on individuals enrolled in MESSA's medical plan for Year 1 (10/1/2011 - 9/30/2012) or Year 2 (10/1/2012 - 9/30/2013) in the Statewide Pool.

The report contains claims <u>incurred</u> for Years 1 and 2. In both years, data includes claims <u>paid</u> through December 31, 2013.

#### Please Note:

- 1. Data for this report is NOT the same as what is provided under the Public Employees Health Benefit Act (PA 106). The reports for PA 106 contain <u>paid</u> claims/claimant information from March 1, 2011 through February 28, 2014. <u>Paid</u> claims in that report are likely to be from an earlier time period i.e. a time period that is not relevant for calculating current rates. This rate report contains data on an <u>incurred</u> period which means that these claims actually took place in the given time period and do factor into rate calculations. Similar to the PA 106 reports, however, this report does not identify claims on an individual level and maintains MESSA's commitment to member privacy.
- 2. Rates are calculated using a comparison of your group's claims experience this year to your group's experience last year. All of the analysis done in this report compares your group to the MESSA average, simply to give an indication of how your group utilizes health care relative to the rest of MESSA. Rates are **NOT** calculated based on your group's experience compared to the MESSA average.
- 3. The extent to which this report is relevant to your district depends on your group size. Larger groups have more of their rate determined by their own claims experience. Smaller groups, however, have some of their rate determined by their claims, but a significant portion may be determined by their pooled group. For example, in the 100-499 rating group, those groups closer to 100 members will have most of their rate determined by the entire 100-499 group, rather than their own claims. Those groups closer to 499 members will have more of their rate determined by their own claims.

We hope you find this report useful, but please keep in mind – rates are calculated based on a number of factors, and not all factors are weighted equally. The data from this report alone cannot be used to determine rates.

## Executive Summary - Statewide Pooled Groups

- Average Age: Statewide Pooled Groups have had no change in average age and have an average age slightly younger than the Total MESSA Population. The group has a similar average age factor in the calculation of rates.
- <u>Distribution of Costs:</u> The group has higher spending on Emergency Room visits and Outpatient Services than Total MESSA. Spending on Inpatient Admissions and Prescription Drugs is less for the group than for Total MESSA.
- <u>Inpatient Admissions:</u> The group has similar admissions per 1000 covered lives compared to the previous year. The average cost per admission for the group is approximately \$750 higher than it was last year. A higher average cost indicates that those patients being admitted from the district have increased severity of illness compared to last year. The average length of stay per admission is shorter than the average for the previous year.
- Office Visits: The group has a lower average number of office visits per covered life compared to last year. The cost per office visit was similar for the group in Year 2 compared to Year 1. Costs in Year 2 were similar to the Total MESSA average.
- <u>Emergency Room:</u> The group has had an increase in the number of emergency room visits per 1000 covered lives. The average cost of emergency room services in Year 2 for the group was lower than that for Year 1. Costs in Year 2 were higher than the Total MESSA average.
- <u>Prescription Drugs:</u> The group has had a slight decrease in the number of average prescriptions per covered life between Year 1 and Year 2. The average number of scripts per covered life is slightly lower than the average number of scripts for Total MESSA.
- Average Cost per Prescription: The average cost per prescription for the group in Year 2 is \$5.68 less than Year 1 and it is lower than the average cost per prescription for Total MESSA.
- **Generic Utilization:** The group had an increase in the utilization of generic drugs between Year 1 and Year 2. The group's use of generics is similar to the Total MESSA population.
- <u>Primary Care Providers vs. Specialists:</u> The group has had an increase in the percentage of office visits with specialist physicians over the two years of claims data. The group's percentage of office visits with specialist physicians is higher than the percentage of office visits with specialists for Total MESSA.

## **DEMOGRAPHICS**

	Year 1	Year 2
Number of Employees:	12,236	12,335

Please Note: This number is based on the average number of employees enrolled in MESSA's medical plan during Years 1 or 2. This may not match the number of employees reported in the census for renewal calculations.

Number of Covered Lives:	37,337	37,650
Ratio of Covered Lives to Employees:	Year 1	Year 2
Statewide Pooled Groups:	3.1	3.1

Total MESSA: 3.0 3.0

Percent Male (of all Covered Lives):	Year 1	Year 2
Statewide Pooled Groups:	48.6%	48.3%
Total MESSA:	48.2%	48.0%
Percent Female (of all Covered Lives):	Year 1	Year 2

Statewide Pooled Groups:

Total MESSA: 51.8% 52.0%

Average Age:	Statewide Pooled Groups		<u>Total MESSA</u>	
	Year 1	Year 2	Year 1	Year 2
Employees:	44.9	45.0	45.2	45.3
Spouses:	46.0	46.2	46.0	46.2
Children:	12.7	12.9	12.5	12.6

51.4%

51.7%

# Age Gender Breakdown:

# **Statewide Pooled Groups**

			Percent of Total
Age Group	Percent Male	Percent Female	Covered Lives
0 - 14	50.2%	49.8%	24.5%
15 - 19	51.8%	48.2%	9.2%
20 - 24	49.9%	50.1%	8.5%
25 - 29	43.5%	56.5%	4.9%
30 - 34	43.1%	56.9%	6.1%
35 - 39	46.2%	53.8%	7.5%
40 - 44	46.5%	53.5%	9.1%
45 - 49	45.6%	54.4%	8.6%
50 - 54	45.0%	55.0%	8.8%
55 - 59	47.9%	52.1%	7.6%
60 - 64	55.0%	45.0%	4.1%
65 +	71.5%	28.5%	1.1%

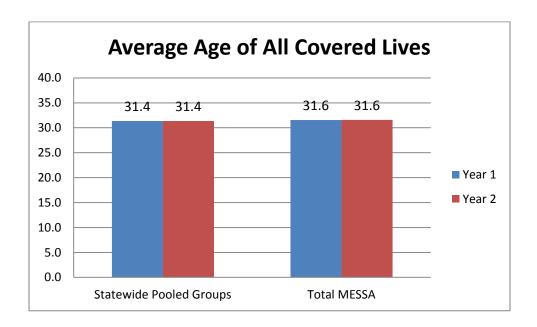
## **Total MESSA**

			Percent of Total
Age Group	Percent Male	Percent Female	<b>Covered Lives</b>
0 - 14	51.0%	49.0%	24.8%
15 - 19	51.6%	48.4%	8.5%
20 - 24	49.8%	50.2%	8.0%
25 - 29	43.1%	56.9%	4.8%
30 - 34	43.1%	56.9%	6.6%
35 - 39	46.2%	53.8%	8.1%
40 - 44	46.3%	53.7%	9.0%
45 - 49	45.7%	54.3%	8.2%
50 - 54	44.7%	55.3%	8.1%
55 - 59	46.4%	53.6%	7.7%
60 - 64	52.9%	47.1%	4.5%
65 +	62.8%	37.2%	1.6%

## <u>Average Age – Statewide Pooled Groups</u>

The average age of all covered lives is depicted here. Claims costs increase as age increases, generally because of increases in utilization and an increased severity of conditions. For example, older patients require more screenings to detect conditions such as cancer; and they tend to have more chronic conditions.

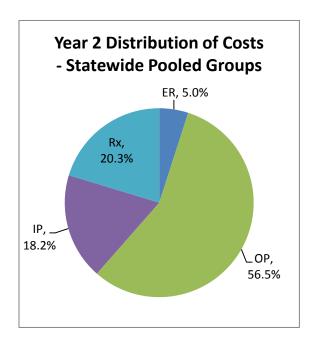
The percent change in health care costs by year of age is approximately 1.5%.

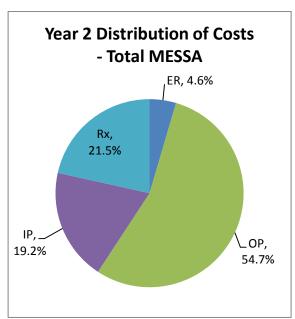


Statewide Pooled Groups have had no change in average age and have an average age slightly younger than the Total MESSA Population. The group has a similar average age factor in the calculation of rates.

## <u>Distribution of Costs – Statewide Pooled Groups</u>

While total costs are important in determining rates, so is the distribution of costs. Determining where and how spending occurs gives some indication as to the severity of conditions in the population, thereby, helping predict future costs. For example, a high rate of inpatient hospitalizations or a high rate of emergency room visits indicates that the population in a given group has a higher level of severity. A high use of outpatient visits or prescription drugs does not necessarily indicate higher severity. In fact, when these services are used properly, they may be an indication of a well-managed population. When outpatient visits or prescriptions are over-utilized, however, this leads to higher costs, and therefore adversely affects rates.



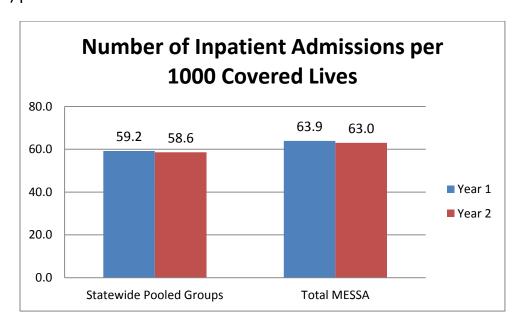


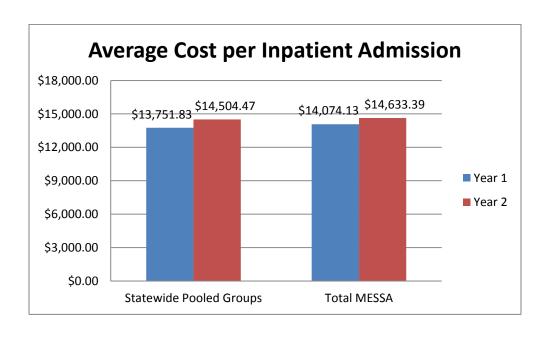
 $\label{eq:emergency Room = ER, Inpatient = IP, Outpatient = OP, Prescriptions = Rx}$ 

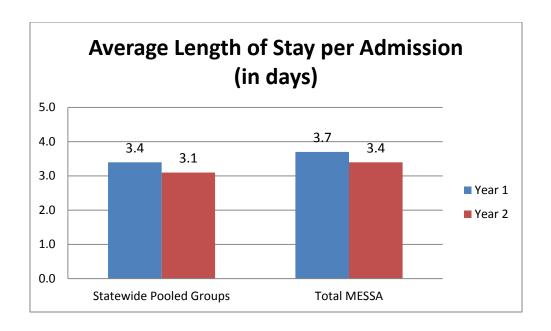
The group has higher spending on Emergency Room visits and Outpatient Services than Total MESSA. Spending on Inpatient Admissions and Prescription Drugs is less for the group than for Total MESSA.

## <u>Inpatient Admissions – Statewide Pooled Groups</u>

As described earlier, increased inpatient admissions lead to higher rates. Inpatient admissions cost more, on average, than outpatient services and indicate a higher severity of condition in the population. The following graphs depict the utilization of inpatient hospital services through: the number of covered lives that have admissions, the average cost per admission, and the average length of stay (in days) per admission.





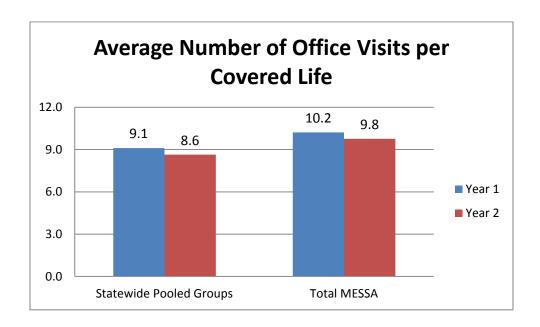


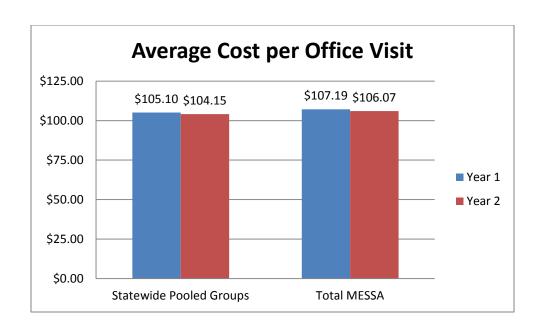
The group has similar admissions per 1000 covered lives compared to the previous year. The average cost per admission for the group is approximately \$750 higher than it was last year. A higher average cost indicates that those patients being admitted from the district have increased severity of illness compared to last year. The average length of stay per admission is shorter than the average for the previous year.

Overall, the use is similar compared to last year, while the cost per admission is higher.

## Office Visits – Statewide Pooled Groups

The effect of office visits on premium rates is not clear-cut. While an increase in office visits in the short-term can lead to increased rates, in the long term these services can actually lead to reduced rates, when utilized appropriately. This is especially true when a high use of office services leads to better management of chronic conditions or to an increased use of preventive care. Better management and the use of preventive services both lead to reduced severity of illness and, thereby, reduced rates.

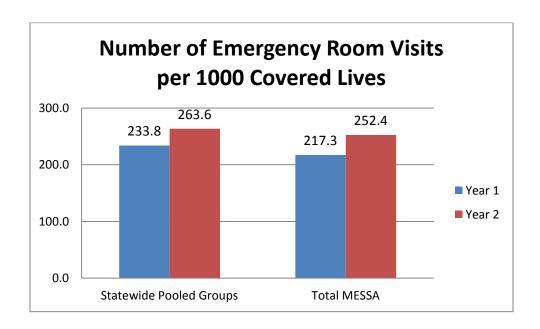


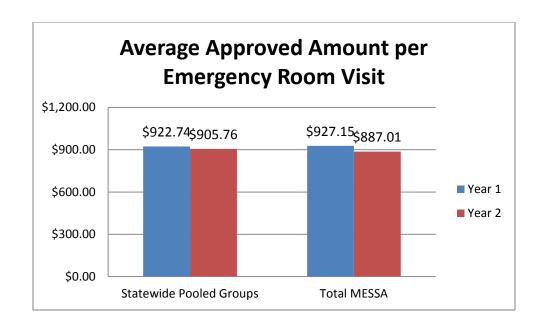


The group has a lower average number of office visits per covered life compared to last year. The cost per office visit was similar for the group in Year 2 compared to Year 1. Costs in Year 2 were similar to the Total MESSA average.

## <u>Emergency Room – Statewide Pooled Groups</u>

The extent of emergency room use provides an indication as to how members are utilizing the health care system. Since care in the emergency room costs more, a high use of emergency room visits may increase rates. The cost per emergency room visit is important because it reveals, to some extent, the severity of each case. Higher average costs show that the average patient in a district generally has worse health status. In fact this may be an indication that patients are avoiding treatment of health conditions, until they are forced to use emergency room services. High utilization coupled with lower costs per visit indicates those patients using the emergency room are doing so for less severe conditions. Using other resources, such as Urgent Care or MESSA's 24/7 Nurse Line, could help in reducing costs for the emergency room and, thereby, may lead to reduced rates.



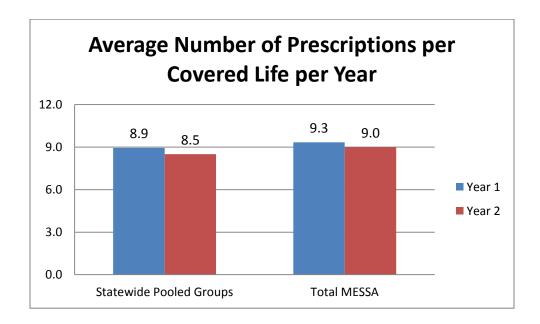


The group has had an increase in the number of emergency room visits per 1000 covered lives. The average cost of emergency room services in Year 2 for the group was lower than that for Year 1. Costs in Year 2 were higher than the Total MESSA average.

## <u>Prescription Drugs – Statewide Pooled Groups</u>

As with office visits, the use of prescription drugs does not have a clear cut impact on rates. Inappropriate use and over-utilization does lead to higher rates. However, when used properly, prescription drugs can also reduce the cost of health care by preventing the need for more invasive treatments.

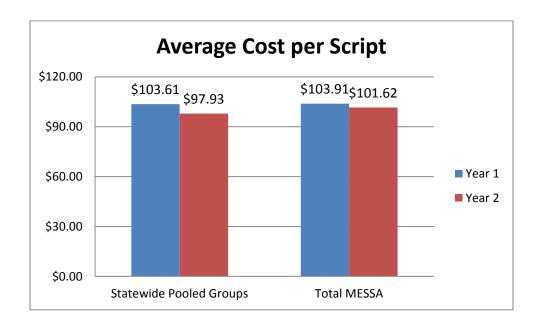
Rates are adversely affected when the cost per prescription is higher than average, such as the case with Brand Names. The following graph depicts the average number of prescriptions per covered life.



The group has had a slight decrease in the number of average prescriptions per covered life between Year 1 and Year 2. The average number of scripts per covered life is slightly lower than the average number of scripts for Total MESSA.

## <u>Average Cost per Prescription – Statewide Pooled Groups</u>

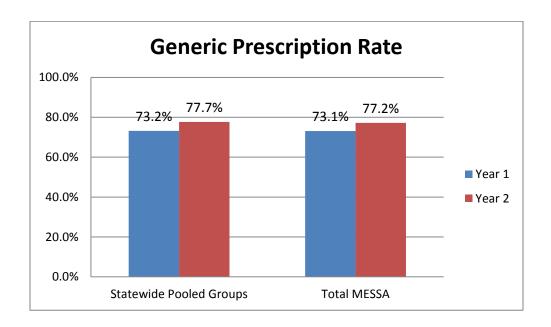
As the average cost per prescription increases, so do rates. The following graph depicts the average plan costs per prescription (copayments are not included).



The average cost per prescription for the group in Year 2 is \$5.68 less than Year 1 and it is lower than the average cost per prescription for Total MESSA.

## <u>Generic Utilization – Statewide Pooled Groups</u>

A higher utilization of generic drugs indicates an efficient use of dollars spent on prescriptions - since generics cost less and are equally effective to their brand name counterparts. The following graph depicts the utilization rate of generic medications.

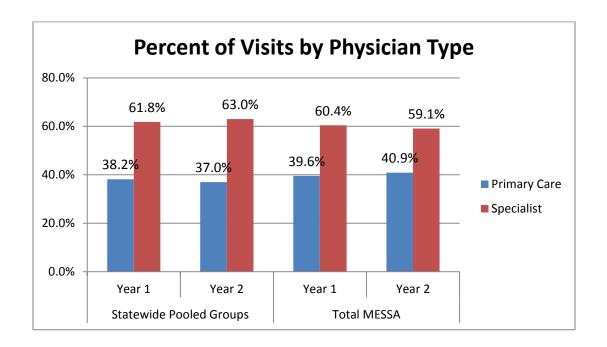


The group had an increase in the utilization of generic drugs between Year 1 and Year 2. The group's use of generics is similar to the Total MESSA population.

## <u>Providers: Primary Care vs. Specialist – Statewide Pooled Groups</u>

The number of visits is likely to be higher with specialist physicians because there is typically a greater supply of these types of providers in the health care market.

Specialist physicians generally have higher charges than primary care physicians. A high use of specialists increases overall costs and also indicates increased levels of severity for conditions.



The group has had an increase in the percentage of office visits with specialist physicians over the two years of claims data. The group's percentage of office visits with specialist physicians is higher than the percentage of office visits with specialists for Total MESSA.

#### Recommendations

- URAC Accredited MESSA Member Education Support Programs for Asthma, Cardiovascular Health, and Diabetes can help patients with these conditions manage their illnesses better; avoid hospitalizations; and reduce severity.
- An increased use of **generic medications** will help lower prescription costs.
- MESSA's Health Promotion Consultants can help develop these types of
  initiatives in your district. We also offer a wellness program tool kit as well as
  other services. Overall wellness initiatives can help in detecting illness at an
  earlier stage so that patients can be treated more effectively. Examples of
  wellness initiatives include:
  - Health Assessments to provide awareness to individuals of possible health risks and illnesses.
  - Program Development in creation of wellness programs, education, and team building.
  - Health Presentations based on claims experience to provide targeted educational programs that promote healthier lifestyle choices.
- MESSA Healthy Expectations provides support for expectant mothers. When a
  mom-to-be enrolls in the program she will receive a simple health assessment
  questionnaire to complete and return. Healthy Expectations will then send a
  guide book and a customized response providing information on health
  guidelines for pregnant women.
- MESSA Nurse Line is a health information line staffed around the clock by registered nurses trained to answer medical questions and offer guidance.
- URAC Accredited MESSA Medical Case Management is a unique program
  tailored to meet the medical needs of our members who may need extraordinary
  care if diagnosed with a catastrophic illness or injury through direct involvement
  in the management of care.