

**RICHLAND COUNTY**

Company # 902410

Dates of Service 6/1/2019 to 5/31/2020

Paid Claims Through 8/13/2020

MLR Report

Month	Member Months	Subscriber Months	Total Premium	Total Medical Paid	Total Rx Paid	Total Claims Paid	MLR
Jun-19	568	226	\$278,274	\$220,011	\$72,566	\$292,576	105.1%
Jul-19	557	221	\$271,389	\$232,904	\$77,731	\$310,635	114.5%
Aug-19	560	223	\$273,543	\$215,064	\$66,436	\$281,500	102.9%
Sep-19	573	226	\$276,314	\$242,823	\$74,915	\$317,738	115.0%
Oct-19	567	226	\$274,478	\$298,755	\$78,252	\$377,008	137.4%
Nov-19	574	228	\$277,427	\$122,475	\$62,308	\$184,783	66.6%
Dec-19	575	229	\$279,881	\$171,784	\$67,563	\$239,346	85.5%
Jan-20	555	221	\$275,718	\$87,144	\$79,513	\$166,657	60.4%
Feb-20	552	220	\$274,158	\$154,132	\$71,085	\$225,217	82.1%
Mar-20	553	221	\$274,660	\$129,301	\$102,770	\$232,071	84.5%
Apr-20	553	220	\$274,032	\$54,838	\$75,690	\$130,528	47.6%
May-20	550	218	\$271,971	\$146,828	\$80,422	\$227,251	83.6%
Total	6,737	2,679	\$3,301,843	\$2,076,059	\$909,250	\$2,985,309	90.4%

Pharmacy Utilization Report

Type	# Scripts	Total Paid	Paid per Script	Paid PMPM	% Total Paid
Brand	578	\$781,976	\$1,352.90	\$116.07	86.0%
Generic	4,348	\$127,274	\$29.27	\$18.89	14.0%
Total	4,926	\$909,250	\$184.58	\$134.96	100.0%

Large Claim Report (Top 10 by Total Claims Paid)

Member	Total Medical Paid	Total Rx Paid	Total Claims Paid	Effective Today	Diagnosis
1	\$3,508	\$205,960	\$209,467	Yes	[REDACTED]
2	\$192,552	\$413	\$192,965	Yes	[REDACTED]
3	\$1,740	\$115,534	\$117,275	Yes	[REDACTED]
4	\$112,170	\$4,922	\$117,092	Yes	[REDACTED]
5	\$249	\$101,625	\$101,874	Yes	[REDACTED]
6	\$668	\$92,258	\$92,926	Yes	[REDACTED]
7	\$3,531	\$75,471	\$79,002	Yes	[REDACTED]
8	\$68,840	\$1,248	\$70,088	No	[REDACTED]
9	\$53,415	\$7,553	\$60,968	Yes	[REDACTED]
10	\$34,279	\$20,962	\$55,241	Yes	[REDACTED]
Totals	\$470,953	\$625,946	\$1,096,899		

Annual Deductible (Single/Family)
Coinsurance
Max Out-of-Pocket (Single/Family)
Deductible Type:
Physician Services
Office Visit
Specialist Visit
Emergency Services
Urgent Care
Emergency Room
Hospital Services
Inpatient Services
Delivery & Newborn Charges
Outpatient Services
Diagnostic Services
Lab & X-Ray
MR/PET/CAT Scan
Behavioral Health
Inpatient
Transitional
Outpatient
Other Services
Durable Medical Equipment
Therapy Services
Pharmacy Benefits
Tier 1/Tier 2/Tier 3
Value Tier
Max Out-of-Pocket (Single/Family)
Additional Benefits

Renewal Offering

HMO1-1

In-Network

\$3,000 / \$6,000

0%

\$3,000 / \$6,000

Embedded

Ded & Coins

Ded & Coins

Ded & Coins

Ded & Coins

Ded & Coins

Ded & Coins

Ded & Coins

Ded & Coins

Ded & Coins

Ded & Coins

Ded & Coins

Ded & Coins

20% Coins

Ded & Coins

\$10/\$35/\$60

\$5 Rx Outcomes

\$2,000 / \$4,000

Evisits - Subject to Deductible, then
100% Coverage; Artificial Insemination;
Hearing Aid

Unlimited

Unlimited

Unlimited

Health Care Reform
Preventive Services
Annual Maximum
Lifetime Maximum

Large: To view the Summary of Benefits and Coverage (SBC), go to QuartzBenefits.com/sbclookup and enter the tracking number for each plan. You may also call 1-800-362-3310 to request a free paper copy. This proposal includes coverage for state and federally mandated benefits. Please Note: 0.04% of the quoted rates are due to required fees as part of the Patient Protection and Affordable Care Act including the Health Insurer Fee, the Reinsurance Assessment Fee and the Patient Centered Outcomes Research Institute Fee. Benefit year plans.

Coverage Type

Single
Family
Medicare Single
Medicare Family
Medicare Split

Contracts

72
139
0
0
0

Rates

\$658.86
\$1,637.60
\$527.09
\$1,054.18
\$1,185.94

Total Monthly Premium

\$275,064.32

Change From Current Premium

4.99%

Line of Business Code

9000013

Payor State

WI

SBC Tracking IDs:

OFCLHEI

SOB Tracking IDs:

OFCLHEI