

# SFHSS All Payer Claims Database Express Dashboard

September 12, 2019

## Express Dashboard Notes:

- All data is sourced from the All Payer Claims Database (APCD)
- Current dashboard is for incurred dates Apr 2018 – Mar 2019 with Paid through Jun 2019. The Diagnostic Cost Group (DCG) for risk scoring is based on the recent completed year of Jan-Dec 2018. The timing of the dashboard ensures there is a three month run-out so that there is not a huge decrease in spend between current and prior periods
- The risk scores presented are rescaled to the total population between the plans for the purpose of comparison. The annual presentation of risk scores is non-rescaled
- Risk scores may not always add up to a 100% due to members who are non-Medicare but may move to Medicare during the period
- Financials are not included in the Medicare Dashboard
- Measures identified as acute are those that take place in an acute inpatient setting. These include inpatient hospitals, birthing centers, inpatient psychiatric facilities, and residential substance abuse treatment facilities
- Total premium includes Best Doctors, Basic Vision and the Healthcare Sustainability Fee

## Express Dashboard Notes:

- Third party amounts are plan payments for members with other coverage. The coordination of benefit rules determine which coverage pays first or is “primary” and which coverage pays second or is “secondary”
- High Cost Claimants are those members with greater than or equal to \$50,000 in spending for the time period
- Chronic conditions are categorized into 3 episode types:
  - Chronic Acute Flare-ups – Manageable conditions such as Asthma, Coronary Artery Disease, Diabetes and Hypertension which have experienced an acute flare-up which is an indicator that the condition may not be well managed
  - Chronic Conditions Maintenance – identifies episodes of care related to the maintenance of a chronic condition
  - Chronic, Non-Stratified – All other episodes not stratified as a manageable condition with a flare-up or a maintenance episode

## Key Observations:

- Specialty drugs comprise 13 of the 15 top drugs by cost. Three of the HSS top 15 drugs were in the top 10 for global sales in 2018: Humira, Enbrel and Revlimid. New in the top 15 is Otezla used in the treatment of Psoriasis
- Total scripts for Active/Early Retirees were 784,898 with 83% dispensed as generic. Medicare Retirees had total scripts of 450,392 with 82% generic
- Total number of high cost claimants (HCC) continues to trend upward although BSC Trio experienced a decrease in number of claimants from previous period. 45.9% of spend results from High Cost Claimants
- Costs per Employee/Non-Medicare Retiree per Year decreased for BSC Access+ and BSC Trio, and increased for Kaiser Permanente and UHC PPO (City Plan) over previous period

## Key Observations:

- UHC PPO (City Plan) Population have a significantly higher risk score and Facility Inpatient and Outpatient costs compared to populations in the other plans. UHC Facility outpatient costs exceed inpatient primarily due to procedures related to injectable specialty drugs other than Chemotherapy
- Utilization trends for Medicare retirees increased in admits per 1000 Acute, days length of stay acute, services OP and visits to the ER. Scripts per 1000 and days supply RX decreased. 79% of the retiree population are categorized in risk band profiles of At Risk, Struggling, or In Crisis
- Top prevalence for chronic conditions in both Medicare and Non-Medicare populations (active and early retiree) is found in low back pain, hypertension and diabetes.

# CCSF Non Medicare Dashboard

August 23, 2019

**Previous Period:** Apr 2017 - Mar 2018 (Incurred)

**Current Period:** Apr 2018 - Mar 2019 (Incurred)

**Paid Through:** Jun 2019

# Financial

Previous Period: Apr 2017 - Mar 2018 (Incurred)

Current Period: Apr 2018 - Mar 2019 (Incurred)

Paid Through: Jun 2019

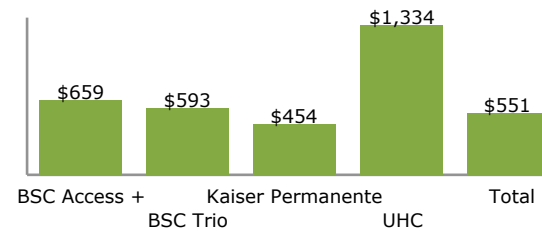
## Financial Summary

	Previous	Current	% Change
Allowed Amount Med and Rx	\$628,103,627	\$624,473,305	-0.6%
Third Party Amt Med and Rx	\$5,416,264	\$8,191,785	51.2%
Out of Pocket Med and Rx	\$19,774,586	\$20,240,318	2.4%
Allow Amt PMPY Med and Rx	\$6,803.05	\$6,694.53	-1.6%
Allow Amt PEPY Med and Rx	\$13,544.38	\$13,273.13	-2.0%
Allowed Amount IP Acute	\$193,665,552	\$179,265,961	-7.4%
Allowed Amount OP Med	\$325,017,111	\$332,768,791	2.4%
Allowed Amount Rx	\$104,860,997	\$106,966,500	2.0%

## Demographics

	BSC Access +	BSC Trio	Kaiser Permanente	UHC	Total
Employees	10,356	6,962	27,867	1,863	47,048
Members	22,752	12,949	54,600	2,980	93,281
Family Size	2.2	1.9	2.0	1.6	2.0
Average Employee Age	49.7	49.5	46.4	53.7	47.9
Average Member Age	37.5	39.9	36.6	47.2	37.6
Employees % Male	51.6%	51.8%	51.3%	54.9%	51.7%
Members % Male	47.6%	48.2%	48.5%	48.3%	48.2%
Risk Score	109.2	104.4	84.7	192.9	96.6

Current Allowed Amount PMPM Med and Rx



## High Cost Claimants Overview

	BSC Access +	BSC Trio	Kaiser Permanente	UHC	Total
<b>High Cost Claimants</b>	762	351	1,027	200	2,243
<b>HCC Allow Amt Per Pat Med and Rx</b>	\$116,890	\$114,381	\$121,926	\$143,020	\$126,188
HCC Allow Amt Pay Per Pat Med IP	\$97,051	\$111,028	\$110,384	\$141,162	\$108,777
HCC Allow Amt Per Pat Med OP	\$41,817	\$35,902	\$40,342	\$65,205	\$43,982
HCC Allow Amt Per Pat Rx	\$22,802	\$19,673	\$13,648	\$20,335	\$18,947
<b>HCC Percent of Total Allowed Amount</b>	49.5%	43.6%	42.1%	60.0%	45.9%
HCC Allowed Amount	\$89,069,882	\$40,147,717	\$125,218,342	\$28,604,075	\$283,040,016
Total Allowed Amount	\$179,969,103	\$92,067,075	\$297,190,260	\$47,700,323	\$616,926,761
<b>Allow Amt PMPY with HCC</b>	\$7,910.18	\$7,110.02	\$5,443.00	\$16,005.92	\$6,613.63
<b>Allowed Amount PMPY without HCC</b>	\$3,995.29	\$4,009.55	\$3,149.64	\$6,407.78	\$3,579.36

A High Cost Claimant is defined as a member with greater than or equal to \$50,000 in spending for the time period.

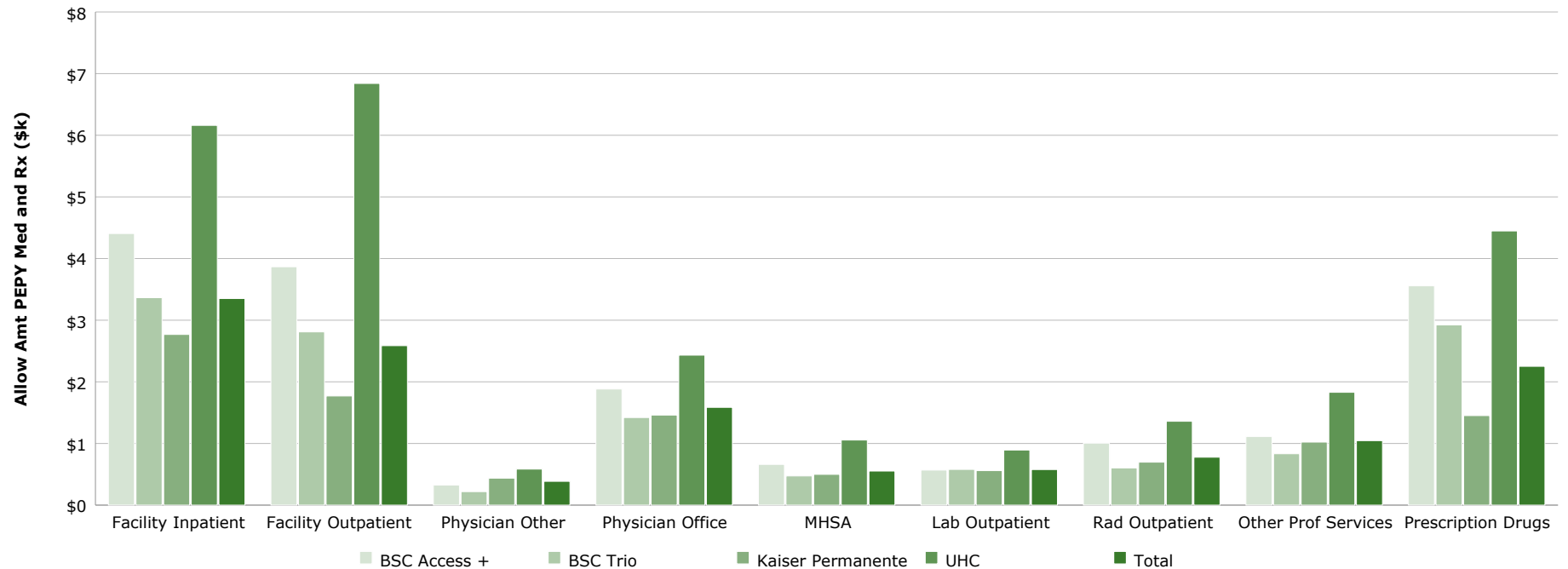
# Financial

Current Period: Apr 2018 - Mar 2019 (Incurred)

Paid Through: Jun 2019

## Cost Per Employee Per Year (PEPY)

	BSC Access +	BSC Trio	Kaiser Permanente	UHC	Total
Facility Inpatient	\$4,405.68	\$3,364.63	\$2,768.20	\$6,160.15	\$3,351.22
Facility Outpatient	\$3,865.95	\$2,809.60	\$1,770.13	\$6,840.03	\$2,586.05
Physician Other	\$324.48	\$218.64	\$437.09	\$583.95	\$385.79
Physician Office	\$1,882.47	\$1,420.55	\$1,460.62	\$2,432.20	\$1,586.02
MHSA	\$659.91	\$472.89	\$498.75	\$1,055.32	\$552.44
Lab Outpatient	\$567.73	\$579.02	\$558.85	\$893.47	\$577.04
Rad Outpatient	\$1,004.38	\$602.96	\$696.47	\$1,359.67	\$776.67
Other Prof Services	\$1,111.22	\$832.90	\$1,022.49	\$1,829.40	\$1,045.92
Prescription Drugs	\$3,556.70	\$2,922.56	\$1,452.13	\$4,447.56	\$2,251.59
<b>Total Allowed Amount</b>	<b>\$17,378.52</b>	<b>\$13,223.75</b>	<b>\$10,664.72</b>	<b>\$25,601.75</b>	<b>\$13,112.73</b>





# Financial

Current Period: Apr 2018 - Mar 2019 (Incurred)

Paid Through: Jun 2019

## Cost and Utilization Trends

	BSC Access +	BSC Trio	Kaiser Permanente	UHC	Total	West Norm
Allow Amt PEPY Med and Rx	\$17,378.52	\$13,223.75	\$10,664.72	\$25,601.75	\$13,112.73	\$12,151.82
Admits Per 1000 Acute	47.1	43.2	35.5	90.3	41.1	49.8
Days LOS Admit Acute	4.27	4.68	4.16	5.15	4.34	4.52
Days Per 1000 Adm Acute	201.2	202.4	147.4	465.1	178.3	209.7
Svcs Per 1000 OP Med	29,734.2	26,503.5	17,249.4	51,210.9	22,664.1	25,508.4
Visits Per 1000 ER	190.6	172.4	188.8	268.1	189.5	172.5
Scripts Per 1000 Rx	12,186.2	12,256.9	5,536.2	16,660.8	8,446.5	9,003.0
Days Supply PMPY Rx	346.55	347.74	291.00	512.73	319.51	333.51
Allow Amt Per Adm Acute	\$46,011	\$44,799	\$46,636	\$48,452	\$46,320	\$31,795
Allow Amt Per Svc OP Med	\$137	\$133	\$175	\$169	\$155	\$134
Allow Amt Per Script Rx	\$133	\$128	\$134	\$167	\$134	\$133

## Plan Performance\*

	BSC Access +	BSC Trio	Kaiser Permanente	UHC	Total
Relative Risk Score Concurrent	109.2	104.4	84.7	192.9	96.6
Members Avg Med	21,658	12,751	52,418	2,572	89,399
Allowed Amount PMPM Med and Rx	\$638.60	\$598.76	\$429.64	\$1,188.76	\$526.23
Health Service System Ratio to the Average	1.1	1.1	1.0	1.2	1.0

\*Plan Performance is based on the current DCG time period.

## Premium Contributions

	BSC Access +	BSC Trio	Kaiser Permanente	UHC	Total
Employer Premium Contribution Med	\$175,671,804	\$93,111,566	\$320,210,002	\$34,128,755	\$623,122,128
Employee Premium Contribution Med	\$30,821,120	\$14,665,964	\$43,077,483	\$39,387	\$88,603,954
Total Medical Premium Amount	\$206,492,925	\$107,777,531	\$363,287,485	\$34,168,142	\$711,726,082
Total Plan Payments (Med & Rx)	\$177,788,172	\$90,061,820	\$327,551,098	\$38,558,212	\$583,959,303

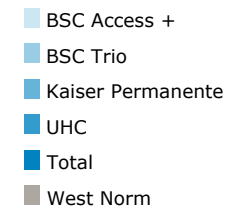
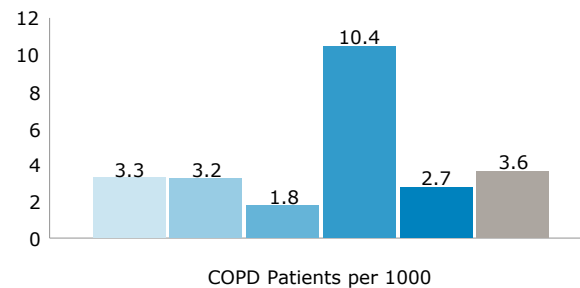
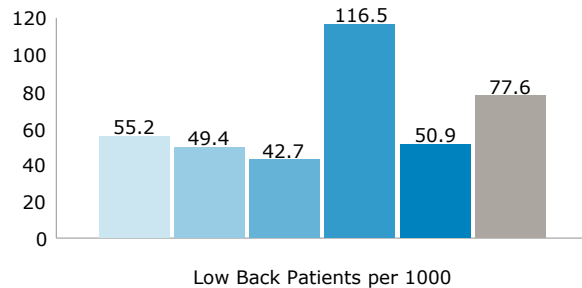
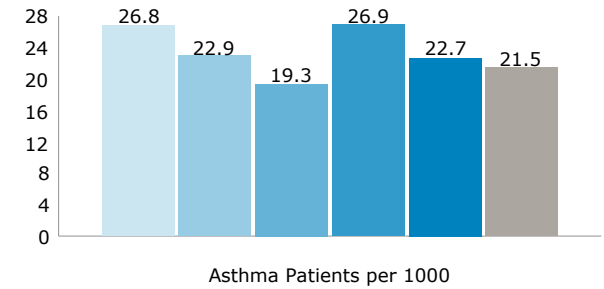
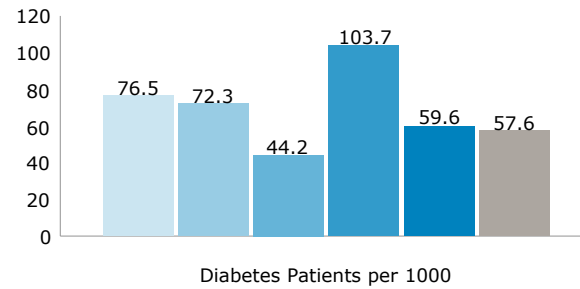
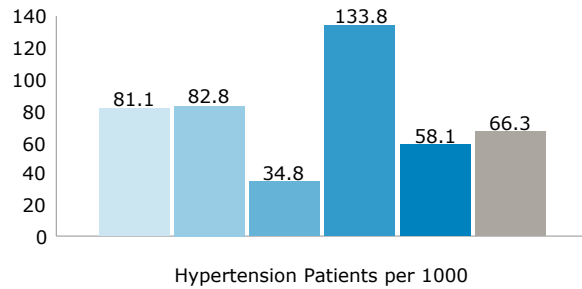
# Clinical

Previous Period: Apr 2017 - Mar 2018 (Incurred)

Current Period: Apr 2018 - Mar 2019 (Incurred)

Paid Through: Jun 2019

## Chronic Condition Prevalence



## Quality Markers

Utilization Metrics (per 1000 enrollees)

	BSC Access +	BSC Trio	Kaiser Permanente	UHC	Total
Emergency Room	191	172	189	268	190
% Admit	11.0%	13.0%	2.4%	18.6%	6.6%
% Ambulatory	89.0%	87.0%	97.6%	81.4%	93.4%
Readmissions	2.6	2.9	2.1	4.7	2.4
Avoidable Admissions	2.5	3.2	2.0	7.7	2.5
Complications	16.6	13.6	9.6	33.2	13.1

## Well Care and Preventive Visits

	Previous	Current	% Change
Visits Well Baby	5,079	5,576	9.8%
Visits Well Child	3,419	3,556	4.0%
Visits Preventive Adult	23,926	25,387	6.1%
Visits Per 1000 Well Baby	4,502.0	4,664.5	3.6%
Visits Per 1000 Well Child	934.4	940.0	0.6%
Visits Per 1000 Prevent Adult	324.7	341.8	5.3%

# Express Dashboard

Time Period: 2018 (Previous Complete Incurred Calendar Year)

Paid Through: Jun 2019

## Top 10 Episode Summary Groups\*

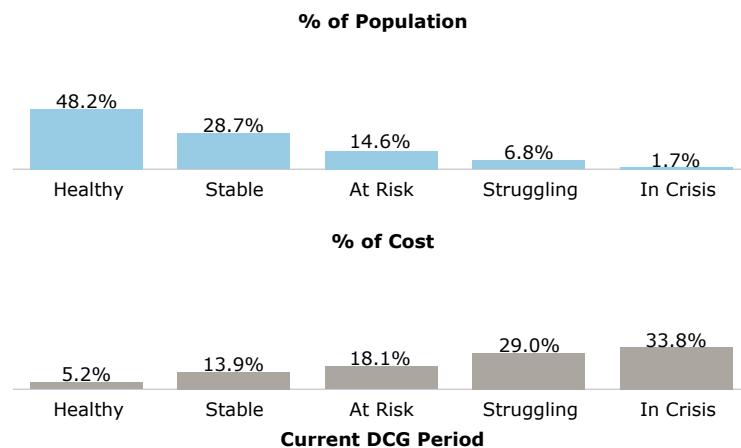
	Current Complete Year		
	Allowed Amount Per Epis West Region	Episodes	Patients
Prevent/Admin Hlth Encounters	\$687	64,122	59,482
Diabetes	\$5,587	3,739	3,644
Osteoarthritis	\$6,917	3,127	2,985
HIV Infection	\$29,482	443	443
Pregnancy w Vaginal Delivery	\$18,643	558	558
Coronary Artery Disease	\$15,103	712	623
Cancer - Breast	\$20,426	638	636
Newborns, w/wo Complication	\$10,005	580	439
Cerebrovascular Disease	\$17,982	421	350
Arthropathies/Joint Disord NEC	\$885	11,248	9,758
<b>Top 10 Subtotal</b>	<b>\$1,836</b>	<b>85,588</b>	<b>64,756</b>
<b>All Episode Summary Groups</b>	<b>\$1,991</b>	<b>254,937</b>	<b>82,140</b>

## Episode Type\*

	Allowed Amount Epis Total	Episodes	Allowed Amount Per Epis Total	% of Total
Acute Conditions	\$273,847,713	164,846	\$1,661	49.1%
Chronic, Acute Flare-ups	\$24,825,515	648	\$38,311	4.5%
Chronic, Maintenance	\$33,453,505	10,915	\$3,065	6.0%
Chronic, Non-Stratified	\$179,549,515	20,520	\$8,750	32.2%
Well Care	\$45,727,753	58,008	\$788	8.2%
<b>Total</b>	<b>\$557,404,002</b>	<b>254,937</b>	<b>\$2,186</b>	<b>100.0%</b>

\*Episodes are based on the most recent complete incurred calendar year 2018.

## Risk Band Profiles



- 1) The healthiest 48.2% of the population accounts for 5.2% of the total cost.
- 2) The least healthy 1.7% of the population accounts for 33.8% of the total cost.

## Top 11 Mental Health Episodes

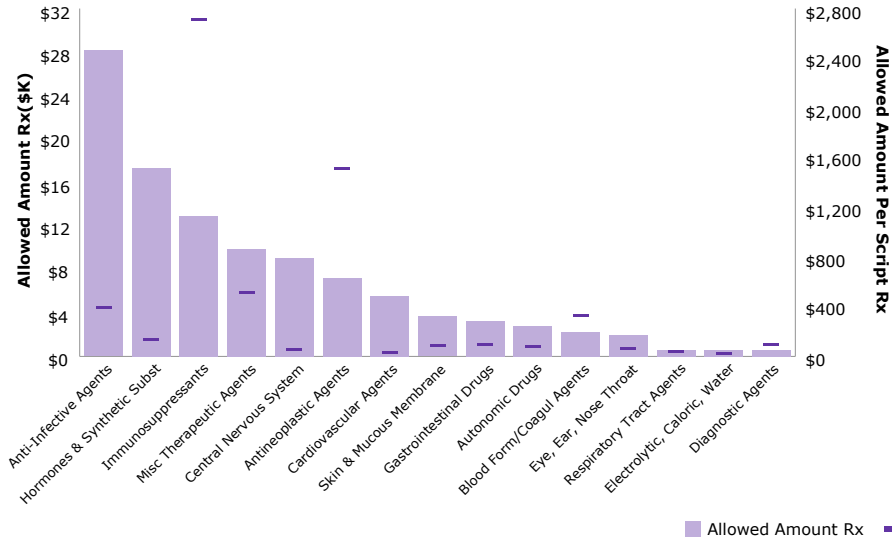
	Current Complete Year				
	Allowed Amount Per Epis Total	Allowed Amount Per Epis West Region	Episodes	Patients	Visits
Autism	\$17,901	\$9,105	256	256	14,606
Schizophrenia	\$11,254	\$9,774	102	102	1,888
Eating Disorders	\$8,546	\$13,447	50	46	507
Substance Abuse	\$4,869	\$9,027	1,099	897	6,659
Bipolar Disorder	\$4,734	\$3,826	447	402	7,483
Obsess-Compulsiv	\$2,687	\$1,242	75	68	1,148
Depression	\$2,352	\$1,708	3,881	3,674	43,626
Antisocial Behav	\$2,115	\$2,030	63	63	371
Psychoses, NEC	\$1,613	\$1,152	130	108	794
Neuroses, NEC	\$1,290	\$1,025	1,972	1,863	12,810
Anxiety Disorder	\$933	\$732	2,680	2,545	19,055

# Drug

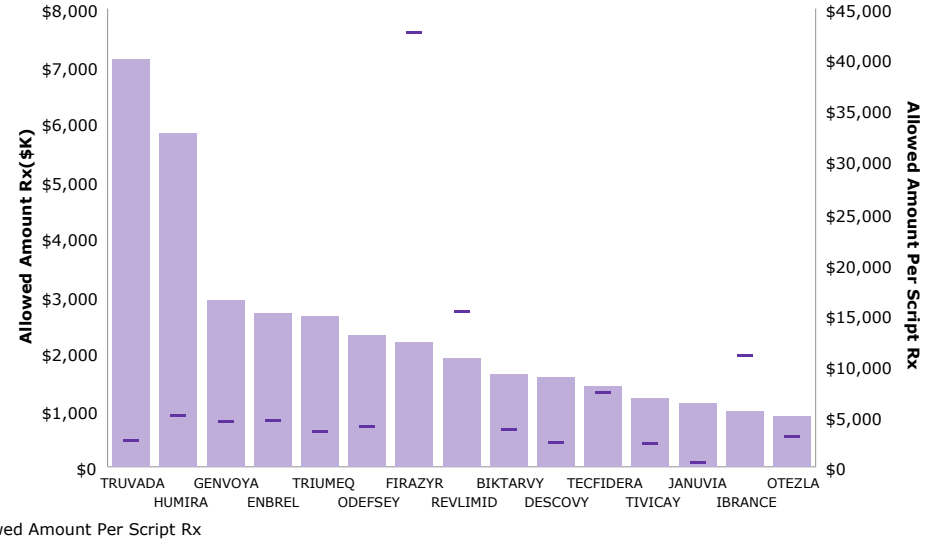
Current Period: Apr 2018 - Mar 2019 (Incurred)

Paid Through: Jun 2019

## Top 15 Therapeutic Classes



## Top 15 Drugs



	Allowed Amount Rx	Percent of Total	Scripts Rx	Allowed Amount Per Script Rx
Anti-Infective Agents	\$28,142,435	26.3%	71,875	\$391.55
Hormones & Synthetic Subst	\$17,301,008	16.2%	127,349	\$135.86
Immunosuppressants	\$12,917,297	12.1%	4,767	\$2,709.73
Misc Therapeutic Agents	\$9,845,987	9.2%	19,183	\$513.27
Central Nervous System	\$9,023,631	8.4%	168,192	\$53.65
Antineoplastic Agents	\$7,242,922	6.8%	4,799	\$1,509.26
Cardiovascular Agents	\$5,550,804	5.2%	186,015	\$29.84
Skin & Mucous Membrane	\$3,671,304	3.4%	43,009	\$85.36
Gastrointestinal Drugs	\$3,257,475	3.0%	33,609	\$96.92
Autonomic Drugs	\$2,766,895	2.6%	35,752	\$77.39
Blood Form/Coagul Agents	\$2,216,105	2.1%	6,667	\$332.40
Eye, Ear, Nose Throat	\$1,977,021	1.8%	30,373	\$65.09
Respiratory Tract Agents	\$605,139	0.6%	15,327	\$39.48
Electrolytic, Caloric, Water	\$592,284	0.6%	24,212	\$24.46
Diagnostic Agents	\$581,809	0.5%	6,016	\$96.71
<b>Top 15 Subtotal</b>	<b>\$105,692,116</b>	<b>98.8%</b>	<b>777,145</b>	<b>\$136.00</b>
<b>All Therapeutic Classes</b>	<b>\$106,966,500</b>	<b>100.0%</b>	<b>794,786</b>	<b>\$134.59</b>

	Allowed Amount Rx	Percent of Total	Scripts Rx	Allowed Amount Per Script Rx
TRUVADA	\$7,118,810	6.7%	2,711	\$2,625.90
HUMIRA	\$5,820,730	5.4%	1,145	\$5,083.61
GENVOYA	\$2,904,698	2.7%	651	\$4,461.90
ENBREL	\$2,686,151	2.5%	586	\$4,583.88
TRIUMEQ	\$2,627,874	2.5%	750	\$3,503.83
ODEFSEY	\$2,291,134	2.1%	577	\$3,970.77
FIRAZYR	\$2,175,125	2.0%	51	\$42,649.51
REVLIMID	\$1,891,068	1.8%	124	\$15,250.55
BIKTARVY	\$1,622,694	1.5%	438	\$3,704.78
DESCOVY	\$1,567,988	1.5%	669	\$2,343.78
TECFIDERA	\$1,406,620	1.3%	194	\$7,250.62
TIVICAY	\$1,200,555	1.1%	534	\$2,248.23
JANUVIA	\$1,112,886	1.0%	2,365	\$470.57
IBRANCE	\$963,827	0.9%	88	\$10,952.58
OTEZLA	\$889,397	0.8%	297	\$2,994.60
<b>Top 15 Subtotal</b>	<b>\$36,279,558</b>	<b>33.9%</b>	<b>11,180</b>	<b>\$3,245.04</b>
<b>All Drugs</b>	<b>\$106,966,500</b>	<b>100.0%</b>	<b>794,786</b>	<b>\$134.59</b>

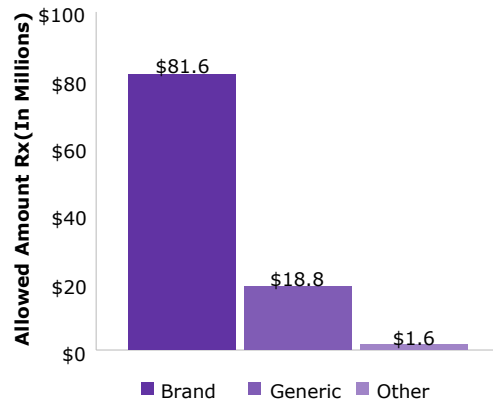
# Drug

Previous Period: Apr 2017 - Mar 2018 (Incurred)

Current Period: Apr 2018 - Mar 2019 (Incurred)

Paid Through: Jun 2019

## Brand & Generic Cost



## Specialty Drug Metrics

	Allowed Amount Med and Rx			Allow Amt PMPY Med and Rx		
	Previous	Current	% Change	Previous	Current	% Change
<b>Non-Specialty Drugs</b>	<b>\$46,031,103</b>	<b>\$44,899,180</b>	<b>-2.5%</b>	<b>\$498.57</b>	<b>\$481.33</b>	<b>-3.5%</b>
<b>Specialty Drugs</b>						
Prescription Specialty Drugs	\$58,829,893	\$62,067,320	5.5%	\$637.19	\$665.38	4.4%
Professional Specialty Drugs	\$13,611,544	\$16,288,530	19.7%	\$147.43	\$174.62	18.4%
Facility Outpatient Specialty Drugs	\$2,324,415	\$2,206,061	-5.1%	\$25.18	\$23.65	-6.1%
<b>Specialty Total</b>	<b>\$74,765,852</b>	<b>\$80,561,911</b>	<b>7.8%</b>	<b>\$809.80</b>	<b>\$863.65</b>	<b>6.6%</b>
<b>Total</b>	<b>\$120,796,955</b>	<b>\$125,461,091</b>	<b>3.9%</b>	<b>\$1,308.36</b>	<b>\$1,344.98</b>	<b>2.8%</b>

## Key Drug Metrics

	BSC Access +	BSC Trio	Kaiser Permanente	UHC	Total
Allow Amt PMPY Rx	\$1,618.90	\$1,571.38	\$741.13	\$2,780.57	\$1,135.63
Scripts Per 1000 Rx	12,186.18	12,256.93	5,536.19	16,660.81	8,446.51
Allow Amt Per Script Rx	\$132.85	\$128.20	\$133.87	\$166.89	\$134.45
Days Supply PMPY Rx	346.55	347.74	291.00	512.73	319.51
Scripts Generic Efficiency Rx	97.5%	97.8%	96.7%	96.2%	97.2%
% Scripts Dispensed as Generic	84.5%	84.7%	81.2%	81.4%	83.1%

# CCSF Medicare Dashboard

August 14, 2019

**Previous Period:** Apr 2017 - Mar 2018 (Incurred)

**Current Period:** Apr 2018 - Mar 2019 (Incurred)

**Paid Through:** Jun 2019

## Financial

Previous Period: Apr 2017 - Mar 2018 (Incurred)

Current Period: Apr 2018 - Mar 2019 (Incurred)

Paid Through: Jun 2019

## Demographics

	Kaiser Permanente	UHC	Total
Medicare Retirees	10,469	12,372	22,841
Members	13,009	15,534	28,543
Family Size	1.2	1.3	1.2
Average Employee Age	75.1	74.7	74.9
Average Member Age	74.6	74.2	74.4
Employees % Male	49.1%	47.5%	48.2%
Members % Male	45.3%	44.2%	44.7%
Risk Score	249.0	263.8	257.0

## Cost and Utilization Trends

	Kaiser Permanente	UHC	Total
Admits Per 1000 Acute	155.5	197.1	178.2
Days LOS Admit Acute	5.25	5.84	5.60
Days Per 1000 Adm Acute	816.4	1,150.4	998.2
Svcs Per 1000 OP Med	42,105.7	83,540.0	64,655.7
Visits Per 1000 ER	432.9	487.1	462.4
Scripts Per 1000 Rx	19,043.4	22,339.4	20,837.1
Days Supply PMPY Rx	1,262.62	1,145.75	1,199.01

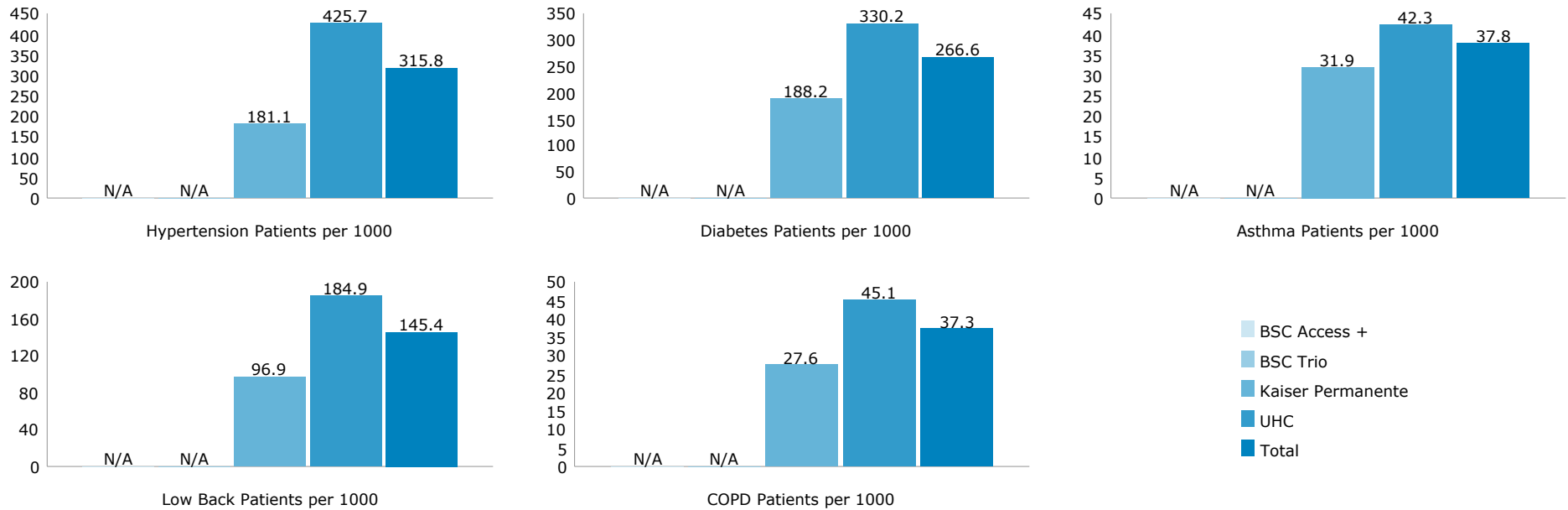
# Clinical

Previous Period: Apr 2017 - Mar 2018 (Incurred)

Current Period: Apr 2018 - Mar 2019 (Incurred)

Paid Through: Jun 2019

## Chronic Condition Prevalence



## Quality Markers

Utilization Metrics (per 1000 enrollees)

	Kaiser Permanente	UHC	Total
Emergency Room	433	487	462
% Admit	3.0%	31.1%	19.1%
% Ambulatory	97.0%	68.9%	80.9%
Readmissions	14.5	17.1	15.9
Avoidable Admissions	23.1	26.4	24.9
Complications	43.4	70.1	58.2

## Well Care and Preventive Visits

	Previous	Current	% Change
Visits Preventive Adult	10,017	10,742	7.2%
Visits Per 1000 Prevent Adult	361.7	376.3	4.0%



# Clinical

Time Period: 2018 (Previous Complete Incurred Calendar Year)

Paid Through: Jun 2019

## Top 10 Episode Summary Groups\*

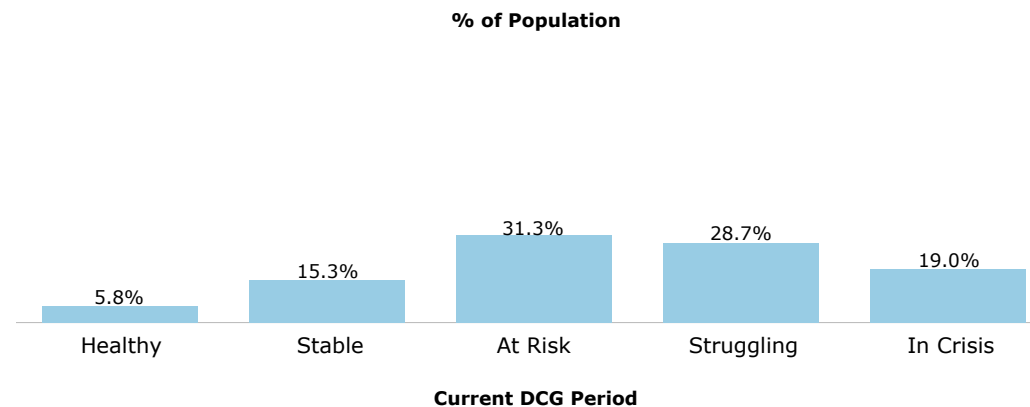
	Current Complete Year	
	Episodes	Patients
Diabetes	4,558	4,334
HIV Infection	182	182
Cancer - Leukemia	201	198
Cancer - Lung	233	233
Prevent/Admin Hlth Encounters	23,295	21,098
Rheumatoid Arthritis	273	273
Cancer - Prostate	658	658
Hypertension, Essential	7,061	6,975
Cardiac Arrhythmias	2,706	2,092
Asthma	937	928
<b>Top 10 Subtotal</b>	<b>40,104</b>	<b>24,412</b>
<b>All Episode Summary Groups</b>	<b>155,207</b>	<b>27,916</b>

## Episode Type\*

	Episodes
Acute Conditions	92,021
Chronic, Acute Flare-ups	1,829
Chronic, Maintenance	13,838
Chronic, Non-Stratified	26,900
Well Care	20,619
<b>Total</b>	<b>155,207</b>

\*Episodes are based on the most recent complete incurred calendar year 2018.

## Risk Band Profiles



## Drug

Previous Period: Apr 2017 - Mar 2018 (Incurred)

Current Period: Apr 2018 - Mar 2019 (Incurred)

Paid Through: Jun 2019

### Specialty Drug Metrics

	Scripts Rx			Days Supply PMPY Rx			Claims Paid		
	Previous	Current	% Change	Previous	Current	% Change	Previous	Current	% Change
<b>Non-Specialty Drugs</b>	<b>633,827</b>	<b>582,571</b>	<b>-8.1%</b>	<b>1,289.92</b>	<b>1,180.72</b>	<b>-8.5%</b>	<b>636,947</b>	<b>584,936</b>	<b>-8.2%</b>
<b>Specialty Drugs</b>									
Prescription Specialty Drugs	11,578	12,319	6.4%	17.87	18.49	3.4%	11,666	11,315	-3.0%
Professional Specialty Drugs							8,958	9,061	1.1%
Facility Outpatient Specialty Drugs							1,839	2,338	27.1%
<b>Specialty Total</b>	<b>11,578</b>	<b>12,319</b>	<b>6.4%</b>	<b>17.87</b>	<b>18.49</b>	<b>3.4%</b>	<b>22,463</b>	<b>22,714</b>	<b>25.3%</b>
<b>Total</b>	<b>645,405</b>	<b>594,890</b>	<b>-7.8%</b>	<b>1,307.80</b>	<b>1,199.21</b>	<b>-8.3%</b>	<b>659,407</b>	<b>607,647</b>	<b>-7.8%</b>

### Key Drug Metrics

	Kaiser Permanente	UHC	Total
Scripts Per 1000 Rx	19,043.43	22,339.36	20,837.10
Days Supply PMPY Rx	1,262.62	1,145.75	1,199.01
Scripts Generic Efficiency Rx	97.9%	97.9%	97.9%
% Scripts Dispensed as Generic	85.0%	80.1%	82.1%