

Monthly Reporting Package

Prepared For:

Lyon County School District

Incurred Through:

September 2024 - August 2025

Paid Through:

October 2025



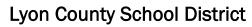


						Current 12 Months						
Period	Employees	Members	Premium	Premium PEPM	Medical Claims	Medical Claims PEPM	Rx Claims	Rx Claims PEPM	Rx % of Total Claims	Total Claims	Total Claims PEPM	Paid Loss Ratio
Sep-24	1,040	1,481	\$928,709	\$893	\$835,827	\$804	\$238,675	\$229	22%	\$1,074,502	\$1,033	116%
Oct-24	1,041	1,485	\$929,599	\$893	\$973,800	\$935	\$245,368	\$236	20%	\$1,219,168	\$1,171	131%
Nov-24	1,045	1,492	\$935,665	\$895	\$753,897	\$721	\$214,095	\$205	22%	\$967,992	\$926	103%
Dec-24	1,047	1,495	\$935,402	\$893	\$691,825	\$661	\$249,203	\$238	26%	\$941,028	\$899	101%
Jan-25	1,050	1,501	\$938,958	\$894	\$741,533	\$706	\$252,249	\$240	25%	\$993,782	\$946	106%
Feb-25	1,053	1,505	\$940,311	\$893	\$462,323	\$439	\$267,223	\$254	37%	\$729,546	\$693	78%
Mar-25	1,058	1,506	\$946,215	\$894	\$727,239	\$687	\$248,629	\$235	25%	\$975,868	\$922	103%
Apr-25	1,052	1,495	\$939,011	\$893	\$737,988	\$702	\$229,501	\$218	24%	\$967,489	\$920	103%
May-25	1,053	1,495	\$939,848	\$893	\$492,413	\$468	\$226,411	\$215	31%	\$718,824	\$683	76%
Jun-25	1,047	1,488	\$934,667	\$893	\$538,235	\$514	\$225,161	\$215	29%	\$763,396	\$729	82%
Jul-25	1,049	1,504	\$1,083,633	\$1,033	\$836,942	\$798	\$133,491	\$127	14%	\$970,433	\$925	90%
Aug-25	961	1,413	\$1,006,867	\$1,048	\$604,401	\$629	\$226,414	\$236	27%	\$830,814	\$865	83%
otal			\$11,458,886		\$8,396,423		\$2,756,420		25%	\$11,152,843		97%
verage	1,041	1,488		\$918		\$672		\$221			\$893	

						Previous 12 Months						
Period	Employees	Members	Premium	Premium PEPM	Medical Claims	Medical Claims PEPM	Rx Claims	Rx Claims PEPM	Rx % of Total Claims	Total Claims	Total Claims PEPM	Paid Loss Ratio
Sep-23	965	1,423	\$805,613	\$835	\$575,119	\$596	\$311,096	\$322	35%	\$886,215	\$918	110%
Oct-23	978	1,445	\$816,275	\$835	\$453,527	\$464	\$244,269	\$250	35%	\$697,796	\$713	85%
Nov-23	992	1,463	\$826,789	\$833	\$485,037	\$489	\$295,051	\$297	38%	\$780,088	\$786	94%
Dec-23	994	1,465	\$828,874	\$834	\$583,045	\$587	\$277,654	\$279	32%	\$860,699	\$866	104%
Jan-24	994	1,462	\$825,421	\$830	\$648,003	\$652	\$223,122	\$224	26%	\$871,125	\$876	106%
Feb-24	1,001	1,468	\$831,340	\$831	\$423,320	\$423	\$211,229	\$211	33%	\$634,549	\$634	76%
Mar-24	1,005	1,478	\$836,614	\$832	\$580,122	\$577	\$235,858	\$235	29%	\$815,980	\$812	98%
Apr-24	1,015	1,487	\$831,243	\$819	\$584,083	\$575	\$226,284	\$223	28%	\$810,367	\$798	97%
May-24	1,018	1,492	\$845,174	\$830	\$808,363	\$794	\$239,451	\$235	23%	\$1,047,814	\$1,029	124%
Jun-24	1,014	1,488	\$843,202	\$832	\$563,202	\$555	\$209,160	\$206	27%	\$772,362	\$762	92%
Jul-24	1,033	1,494	\$935,262	\$905	\$832,758	\$806	\$259,151	\$251	24%	\$1,091,909	\$1,057	117%
Aug-24	973	1,409	\$877,513	\$902	\$490,636	\$504	\$257,893	\$265	34%	\$748,529	\$769	85%
Total			\$10,103,320		\$7,027,215		\$2,990,218		30%	\$10,017,433		99%
Average	999	1,465		\$843		\$585		\$250			\$835	

	Average Membership and PEPM Premium and Claims by Experience Period										
Period	Employees	Members	Premium PEPM	Medical Claims PEPM	Rx Claims PEPM	Rx % of Total Claims	Total Claims PEPM	Paid Loss Ratio			
Current	1,041	1,488	\$918	\$672	\$221	24.7%	\$893	97.3%			
Prior	999	1,465	\$843	\$585	\$250	29.9%	\$835	99.1%			
Change %	4.1%	1.6%	8.1%	12.9%	-13.3%	-5.1%	6.4%	-1.8%			

^{*}Medical data provided by Aetna monthly reporting package. Experience period and claims data will change prior to renewal.





Large Claim, Progression > \$25,000

				Large Claimant Claim Progr	ession - Most Recent 12 Mo	nths				
Claimant Number	Age	Active (Y/N)	Relationship to Subscriber	Health Condition Category	Primary Medical Diagnosis	Claim Type	Jul-25	Aug-25	Total	Grand Total
1	Ages 55-64	Υ	Employee/Self	Neoplasms - Malignant	Encounter For Other Aftercare	Medical Rx	\$335,163 \$1,020	\$7,343 \$0	\$342,506 \$1,020	\$343,526
2	Ages 18-25	Υ	Child/Other Dependent	Behavioral Health	Other Anxiety Disorders	Medical Rx	\$41,849 \$866	\$52,541 \$1,341	\$94,390 \$2,208	\$96,597
3	Ages 35-44	Υ	Employee/Self	Genitourinary System	Excess Frequent Irreg Menstruation	Medical Rx	\$852 \$0	\$36,666 \$0	\$37,518 \$0	\$37,518
4	Ages 65+	Υ	Employee/Self	Diseases of the Eye	Other Retinal Disorders	Medical Rx	\$329 \$17,987	\$0 \$18,293	\$329 \$36,280	\$36,609
5	Ages 45-54	Υ	Employee/Self	Health Status	Enc Gen Exam No Complaint Suspct Dx	Medical Rx	\$573 \$74	\$201 \$33,042	\$774 \$33,115	\$33,889
6	Ages 45-54	Υ	Employee/Self	Nervous System	Migraine	Medical Rx	\$24,470 \$136	\$5,311 \$1,661	\$29,780 \$1,797	\$31,578
7	Ages 45-54	Υ	Employee/Self	Genitourinary System	Pain & Oth Cond Fe Gen Orgn & Menst	Medical Rx	\$29,520 \$23	\$0 \$0	\$29,520 \$23	\$29,544
8	Ages 55-64	Y	Employee/Self	Neoplasms - Malignant	Malignant Neoplasm Of Breast	Medical Rx	\$3,035 \$9	\$24,921 \$624	\$27,957 \$633	\$28,590
9	Ages 55-64	Υ	Employee/Self	Injury & Poisoning	Superficial Inj Wrist Hand Finger	Medical Rx	\$188 \$396	\$26,215 \$530	\$26,403 \$925	\$27,328
Grand Tot	tal						\$456,493	\$208,687		\$665,180

	Large Claimants Prior Plan Year									
Claimant	Condition	Services Rendered in Last Quarter	Pharmacy Paid Amount	Medical Paid Amount	Inpatient Paid Amount	Ambulatory Paid Amount	Total Medical/Rx Paid Amount			
1	ACUTE LYMPHOBLASTIC LEUKEMIA, IN REMISSION	Yes	\$19,571	\$312,081	\$210,865	\$101,216	\$331,652			
2	ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY	Yes	\$3,356	\$247,858	\$152,658	\$95,200	\$251,215			
3	MALIGNANT NEOPLASM OF RETROPERITONEUM	Yes	\$6,796	\$240,451	\$208,416	\$32,034	\$247,246			
4	MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT FEMALE BREAST	Yes	\$7,588	\$181,187	\$0	\$181,187	\$188,775			
5	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	Yes	\$17,410	\$156,998	\$69,425	\$87,573	\$174,408			
6	MULTIPLE SCLEROSIS	Yes	\$17,637	\$156,246	\$0	\$156,246	\$173,883			
7	MALIGNANT NEOPLASM OF PROSTATE	Yes	\$132,445	\$2,918	\$0	\$2,918	\$135,363			
8	RESPIRATORY CONDITIONS DUE TO SMOKE INHALATION	Yes	\$313	\$129,544	\$19,830	\$109,713	\$129,857			
9	UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE	Yes	\$1	\$118,687	\$0	\$118,687	\$118,688			
10	END STAGE RENAL DISEASE	Yes	\$3,267	\$114,337	\$20,929	\$93,408	\$117,604			



	Large Claimants Prior Plan Year										
Claimant	Condition	Services Rendered in Last Quarter	Pharmacy Paid Amount	Medical Paid Amount	Inpatient Paid Amount	Ambulatory Paid Amount	Total Medical/Rx Paid Amount				
11	ENCNTR SCREEN MAMMOGRAM FOR MALIGNANT NEOPLASM OF BREAST	Yes	\$114,478	\$1,329	\$0	\$1,329	\$115,808				
12	SEPSIS DUE TO METHICILLIN SUSCEPTIBLE STAPHYLOCOCCUS AUREUS	Yes	\$184	\$113,936	\$108,301	\$5,635	\$114,120				
13	ACUTE DRUG-INDUCED INTERSTITIAL LUNG DISORDERS	Yes	\$635	\$111,599	\$91,606	\$19,993	\$112,234				
14	DISEASE OF GALLBLADDER, UNSPECIFIED	Yes	\$12,669	\$91,083	\$37,547	\$53,536	\$103,752				
15	OBESITY, UNSPECIFIED	Yes	\$8,247	\$91,044	\$79,875	\$11,169	\$99,291				
16	ENCNTR SCREEN MAMMOGRAM FOR MALIGNANT NEOPLASM OF BREAST	Yes	\$91,710	\$573	\$0	\$573	\$92,284				
17	Patent foramen ovale	Yes	\$7,751	\$84,040	\$62,372	\$21,668	\$91,791				
18	UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE	Yes	\$14,843	\$76,795	\$0	\$76,795	\$91,638				
19	JUVENILE OSTEOCHONDROSIS OF SPINE, THORACOLUMBAR REGION	No	\$664	\$84,390	\$83,109	\$1,281	\$85,053				
20	UNSP SYMPTOMS AND SIGNS INVOLVING THE GENITOURINARY SYSTEM	No	\$83,971	\$383	\$0	\$383	\$84,354				



In Excess of \$50,000

Large Claims

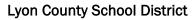
	Large Claimants Prior Plan Year										
Claimant	Condition	Services Rendered in Last Quarter	Pharmacy Paid Amount	Medical Paid Amount	Inpatient Paid Amount	Ambulatory Paid Amount	Total Medical/Rx Paid Amount				
21	SUBMUCOUS LEIOMYOMA OF UTERUS	Yes	\$1,981	\$81,565	\$9,729	\$71,836	\$83,546				
22	MALIGNANT NEOPLASM OF PROSTATE	No	\$60,792	\$22,430	\$0	\$22,430	\$83,222				
23	INTRACRANIAL AND INTRASPINAL PHLEBITIS AND THROMBOPHLEBITIS	Yes	\$2,239	\$76,449	\$50,092	\$26,357	\$78,689				
24	CHRONIC MIGRAINE W/O AURA, NOT INTRACTABLE, W/O STAT MIGR	Yes	\$67,323	\$10,342	\$0	\$10,342	\$77,666				
25	PAIN DUE TO INTERNAL ORTHOPEDIC PROSTH DEV/GRFT, INIT	Yes	\$10,718	\$65,898	\$52,753	\$13,145	\$76,616				
26	PAROXYSMAL ATRIAL FIBRILLATION	Yes	\$6,710	\$68,707	\$0	\$68,707	\$75,417				
27	MULTIPLE SCLEROSIS	Yes	\$175	\$73,605	\$0	\$73,605	\$73,780				
28	RHEU ARTHRITIS W RHEU FACTOR MULT SITE W/O ORG/SYS INVOLV	Yes	\$70,148	\$1,063	\$0	\$1,063	\$71,211				
29	NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION	Yes	\$9,323	\$61,883	\$56,969	\$4,914	\$71,206				
30	SPINAL STENOSIS, LUMBAR REGION WITH NEUROGENIC CLAUDICATION	Yes	\$2,133	\$67,175	\$0	\$67,175	\$69,308				



	Large Claimants Prior Plan Year										
Claimant	Condition	Services Rendered in Last Quarter	Pharmacy Paid Amount	Medical Paid Amount	Inpatient Paid Amount	Ambulatory Paid Amount	Total Medical/Rx Paid Amount				
31	ACUTE RESPIRATORY FAILURE WITH HYPOXIA	Yes	\$24,637	\$41,835	\$17,054	\$24,781	\$66,472				
32	ILLNESS, UNSPECIFIED	No	\$ 0	\$65,707	\$64,914	\$793	\$65,707				
33	PAIN DUE TO INTERNAL ORTHOPEDIC PROSTH DEV/GRFT, INIT	Yes	\$15,619	\$49,952	\$15,794	\$34,158	\$65,572				
34	POSTLAMINECTOMY SYNDROME, NOT ELSEWHERE CLASSIFIED	Yes	\$357	\$63,803	\$0	\$63,803	\$64,160				
35	ILLNESS, UNSPECIFIED	Yes	\$23,937	\$39,830	\$4,843	\$34,986	\$63,766				
36	SPONDYLOLISTHESIS, LUMBAR REGION	Yes	\$1	\$63,114	\$0	\$63,114	\$63,116				
37	ENCNTR SCREEN MAMMOGRAM FOR MALIGNANT NEOPLASM OF BREAST	Yes	\$61,610	\$970	\$0	\$970	\$62,580				
38	POSTLAMINECTOMY SYNDROME, NOT ELSEWHERE CLASSIFIED	Yes	\$0	\$62,521	\$0	\$62,521	\$62,521				
39	COMMON VARIABLE IMMUNODEFICIENCY, UNSPECIFIED	Yes	\$7,203	\$55,022	\$0	\$55,022	\$62,225				
40	VOLVULUS	Yes	\$114	\$61,035	\$52,318	\$8,717	\$61,149				



	Large Claimants Prior Plan Year										
Claimant	Condition	Services Rendered in Last Quarter	Pharmacy Paid Amount	Medical Paid Amount	Inpatient Paid Amount	Ambulatory Paid Amount	Total Medical/Rx Paid Amount				
41	MECH COMPL OF INTERNAL LEFT KNEE PROSTHESIS, INIT ENCNTR	Yes	\$118	\$59,666	\$55,203	\$4,463	\$59,784				
42	OTHER FATIGUE	No	\$56,042	\$2,631	\$0	\$2,631	\$58,673				
43	UMBILICAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE	Yes	\$2,311	\$55,638	\$12,633	\$43,005	\$57,949				
44	VENTRICULAR PREMATURE DEPOLARIZATION	Yes	\$421	\$57,149	\$0	\$57,149	\$57,571				
45	ILLNESS, UNSPECIFIED	Yes	\$8,382	\$48,823	\$38,987	\$9,836	\$57,205				
46	MALIGNANT NEOPLASM OF PROSTATE	Yes	\$37,572	\$18,531	\$0	\$18,531	\$56,103				
47	ABNORMAL ELECTROCARDIOGRAM (ECG) (EKG)	No	\$49,045	\$5,719	\$0	\$5,719	\$54,764				
48	HYPERTENSIVE HEART DISEASE WITH HEART FAILURE	Yes	\$5,998	\$47,691	\$39,617	\$8,074	\$53,690				
49	MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT FEMALE BREAST	Yes	\$18,710	\$32,288	\$0	\$32,288	\$50,998				
50	BENIGN NEOPLASM OF ASCENDING COLON	Yes	\$23	\$50,682	\$31,137	\$19,546	\$50,705				



Large Claims

In Excess of \$50,000

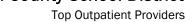
IN	ISURANCE
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	Large Claimants Prior Plan Year									
Claimant	Condition	Services Rendered in Last Quarter	Pharmacy Paid Amount	Medical Paid Amount	Inpatient Paid Amount	Ambulatory Paid Amount	Total Medical/Rx Paid Amount			
51	PAIN IN RIGHT ANKLE AND JOIN	No	\$49,863	\$596	\$ 0	\$596	\$50,459			
52	SEPSIS, UNSPECIFIED ORGANISM	Yes	\$22,236	\$28,202	\$24,914	\$3,289	\$50,438			
	Total		\$1,159,279	\$3,756,005	\$1,671,891	\$2,084,114	\$4,915,283			



	Top Inpatient Facilities by Incurred Claims										
Rank	Provider Name	City	State	Unique Claimants	Amount Per Claimant	Admissions	Claim Amount	Percent Total Paid			
1	UC DAVIS MEDICAL CENTER	SACRAMENTO	CA	*	*	*	\$308,448	78.1%			
2	SHORTRIDGE ACADEMY LLC	MILTON	NH	*	*	*	\$27,107	6.9%			
3	CARSON TAHOE REGIONAL MEDICAL CENTER	CARSON CITY	NV	*	*	*	\$20,393	5.2%			
4	RENO BEHAVIORAL HEALTHCARE HOSPITAL	RENO	NV	*	*	*	\$19,281	4.9%			
5	HOLYOKE CAPITAL JV, LLC	HOLYOKE	MA	*	*	*	\$11,771	3.0%			
6	BANYAN CASTLE ROCK	CASTLE ROCK	CO	*	*	*	\$7,977	2.0%			
7	NORTHERN NEVADA SIERRA MEDICAL CTR	RENO	NV	*	*	*	\$0	0.0%			
	Total Inpatient Facility In-Network						\$394,977	100%			

^{* -} less than 5 unique claimants





Top Outpatient Facilities by Incurred Claims									
Rank	Provider Name	City	State	Unique Claimants	Amount Per Claimant	Visits	Claim Amount	Percent Total Paid	
1	CARSON TAHOE REGIONAL MEDICAL CENTER	CARSON CITY	NV	115	\$1,296	186	\$149,050	28.7%	
2	RENOWN REGIONAL MEDICAL CENTER	RENO	NV	143	\$780	220	\$111,541	21.5%	
3	BANNER CHURCHILL COMMUNITY HOSPITAL	FALLON	NV	37	\$2,071	71	\$76,614	14.8%	
4	NORTHERN NEVADA MEDICAL CENTER	SPARKS	NV	*	*	*	\$28,226	5.4%	
5	SOUTH LYON MEDICAL CENTER	YERINGTON	NV	30	\$892	44	\$26,766	5.2%	
6	UC DAVIS MEDICAL CENTER	SACRAMENTO	CA	*	*	17	\$23,947	4.6%	
7	RENOWN SOUTH MEADOWS MEDICAL CENTER	RENO	NV	18	\$889	24	\$16,000	3.1%	
8	CARSON VALLEY HEALTH	GARDNERVILLE	NV	12	\$1,205	15	\$14,466	2.8%	
9	NORTHERN NEVADA SIERRA MEDICAL CTR	RENO	NV	*	*	*	\$11,635	2.2%	
10	FRISBIE MEMORIAL HOSPITAL	ROCHESTER	NH	*	*	*	\$11,316	2.2%	
11	BARTON MEMORIAL HOSPITAL	SOUTH LAKE TAHOE	CA	*	*	6	\$10,771	2.1%	
12	MEMORIAL HOSPITAL OF CONVERSE COUNTY	DOUGLAS	WY	*	*	*	\$5,262	1.0%	
13	PORTSMOUTH REGIONAL HOSPITAL	PORTSMOUTH	NH	*	*	*	\$5,168	1.0%	
14	COMMUNITY HOSPITAL OF ANACONDA	ANACONDA	MT	*	*	*	\$4,835	0.9%	
15	DIGESTIVE HEALTH CENTER	RENO	NV	8	\$536	9	\$4,287	0.8%	
16	SOUTH MEADOWS ENDOSCOPY CENTER	RENO	NV	6	\$703	7	\$4,216	0.8%	
17	CARSON ENDOSCOPY CENTER	CARSON CITY	NV	*	*	*	\$3,367	0.6%	
18	SAINT MARYS REGIONAL MEDICAL CENTER	RENO	NV	*	*	*	\$2,816	0.5%	
19	MEDICAL UNIVERSITY HOSPITAL AUTHORITY	COLUMBIA	SC	*	*	*	\$2,296	0.4%	
20	EVOLENT SPECIALTY SERVICE	CARSON CITY	NV	*	*	*	\$2,103	0.4%	
21	QUAIL SURGICAL & PAIN MANAGEMENT CENTER	RENO	NV	*	*	*	\$1,292	0.2%	
22	RENO ORTHOPAEDIC SURGERY CENTER	RENO	NV	*	*	*	\$1,235	0.2%	
23	SWIFT SURGERY CTR	RENO	NV	*	*	*	\$1,192	0.2%	
24	MERCY HOSPITAL NORTHWEST ARKANSAS	ROGERS	AR	*	*	*	\$155	0.0%	
25	JOINT BASE ELMENDORF RICHARDSON MTF	ELMENDORF AFB	AK	*	*	*	\$11	0.0%	
26	ALL OTHERS	ALL OTHERS	NA	*	*	*	\$0	0.0%	
	Total Outpatient Facility In-Network						\$518,569	100%	

^{* -} less than 5 unique claimants





Top 25 Drugs - Paid										
Rank	Drug Name	Primary Indication	Drug Type	Specialty (Y/N)	Unique Claimants	Claim Amount Total	Claim Amount % of Total Claims	Claim Amount Per Script	Claim Amount PMPM	Days Supply Per Script
1	IMBRUVICA	CANCER	BRAND	Y	*	\$36,280	10.1%	\$16,928	\$12.44	28
2	COSENTYX SENSOREADY PEN	INFLAMMATORY CONDITIONS	BRAND	Υ	*	\$33,002	9.2%	\$30,540	\$11.31	28
3	OZEMPIC	DIABETES	BRAND	N	15	\$26,459	7.4%	\$953	\$9.07	44
4	DUPIXENT	DERMATOLOGIC CONDITIONS	BRAND	Υ	5	\$25,046	7.0%	\$2,909	\$8.59	32
5	MOUNJARO	DIABETES	BRAND	N	12	\$23,453	6.5%	\$1,038	\$8.04	35
6	HUMIRA PEN	INFLAMMATORY CONDITIONS	BRAND	Υ	*	\$13,460	3.7%	\$6,280	\$4.61	28
7	LIVDELZI	OTHER MISC CONDITIONS	BRAND	Υ	*	\$13,111	3.6%	\$12,133	\$4.49	30
8	JARDIANCE	DIABETES	BRAND	N	8	\$11,182	3.1%	\$580	\$3.83	67
9	ELIQUIS	ANTICOAGULATION	BRAND	N	9	\$11,106	3.1%	\$574	\$3.81	45
10	OTEZLA	INFLAMMATORY CONDITIONS	BRAND	Υ	*	\$10,498	2.9%	\$4,898	\$3.60	30
11	LINZESS	GI DISORDERS	BRAND	N	5	\$7,283	2.0%	\$522	\$2.50	56
12	RINVOQ	INFLAMMATORY CONDITIONS	BRAND	Υ	*	\$6,834	1.9%	\$6,325	\$2.34	30
13	VRAYLAR	PSYCHIATRIC/NEURO DISORDERS	BRAND	N	*	\$4,921	1.4%	\$923	\$1.69	50
14	ACTEMRA	INFLAMMATORY CONDITIONS	BRAND	Υ	*	\$4,791	1.3%	\$4,434	\$1.64	28
15	DIMETHYL FUMARATE	MULTIPLE SCLEROSIS	GENERIC	Υ	*	\$4,375	1.2%	\$2,041	\$1.50	30
16	EMGALITY	MIGRAINE HEADACHES	BRAND	N	*	\$4,329	1.2%	\$677	\$1.48	45
17	BREO ELLIPTA	ASTHMA	BRAND	N	5	\$4,281	1.2%	\$365	\$1.47	47
18	FARXIGA	DIABETES	BRAND	N	*	\$4,165	1.2%	\$551	\$1.43	70
19	NURTEC	MIGRAINE HEADACHES	BRAND	N	*	\$3,268	0.9%	\$1,512	\$1.12	15
20	TEMOZOLOMIDE	CANCER	GENERIC	Υ	*	\$3,227	0.9%	\$753	\$1.11	28
21	TRULICITY	DIABETES	BRAND	N	*	\$3,073	0.9%	\$953	\$1.05	28
22	TRELEGY ELLIPTA	ASTHMA	BRAND	N	*	\$2,850	0.8%	\$662	\$0.98	30
23	ESTRADIOL	HORMONE SUPPLEMENTATION	GENERIC	N	39	\$2,792	0.8%	\$30	\$0.96	62
24	TRYPTYR	OPHTHALMIC CONDITIONS	BRAND	N	*	\$2,604	0.7%	\$803	\$0.89	90
25	DAPAGLIFLOZIN PROPANEDIOL	DIABETES	BRAND	N	*	\$2,548	0.7%	\$337	\$0.87	70
	Totals - Top 25 Drugs		-	10	-	\$264,939	74%	-	-	-

^{* =} Less than 5 claimants



Period	Subscribers	Administrative Fees	Paid Claims	Total Cost	Budgeted Funding	Cost to Funding Ratio
Jul-25	1,131	\$3,563	\$0	\$3,563	\$67,342	5%
Aug-25	1,047	\$3,298	\$46,920	\$50,218	\$63,071	80%
Sep-25	1,115	\$3,512	\$64,465	\$67,977	\$67,155	101%
Oct-25	1,118	\$3,522	\$40,686	\$44,208	\$67,134	66%
Nov-25						
Dec-25						
Jan-26						
Feb-26						
Mar-26						
Apr-26						
May-26						
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Period	Subscribers	Administrative Fees	Paid Claims	Total Cost	Budgeted Funding	Cost to Funding Ratio
Jul-25	1,143	\$2,057	\$0	\$2,057	\$7,425	28%
Aug-25	1,059	\$1,906	\$5,986	\$7,892	\$6,998	113%
Sep-25	1,128	\$2,030	\$12,725	\$14,755	\$7,411	199%
Oct-25	1,131	\$2,036	\$7,167	\$9,203	\$7,402	124%
Nov-25						
Dec-25						
Jan-26						
Feb-26						
Mar-26						
Apr-26						
May-26						
lun-26						

