# Agenda

## Lyon County School District Board of Trustees

A LCSD INSURANCE COMMITTEE MEETING of the Board of Trustees of Lyon County School District will be held on Monday, November 16, 2026, beginning at 3:30 PM at the following location:

**Lyon Complex Building D, 3750 W. Spruce Ave., Silver Springs, NV 89429**

The subjects to be discussed or considered upon which any formal action may be taken are listed below. Items do not have to be taken in the order shown on this meeting notice.

In the event that you are unable to attend the LCSD Board of Trustees meeting, you may submit public comment by 12:00 pm the day of the board meeting by clicking here. Public comment will be forwarded to all LCSD Trustees prior to the board meeting. Please note that this link is monitored for public comment only.

1. CALL TO ORDER
2. PLEDGE OF ALLEGIANCE
3. ROLL CALL AND WELCOME
4. APPROVAL OF AGENDA
5. APPROVAL OF MINUTES 3
6. PUBLIC PARTICIPATION

The public is invited to address the committee. The purpose of public comment is to bring issues, concerns, or praiseworthy items to the attention of the committee. No action may be taken on any subject raised during public comment until the matter has been properly placed on an agenda for a properly noticed meeting pursuant to NRS 241 (Nevada's Open Meeting Law).

If you wish to speak, please step up to the front table, be seated, and state your name. Your comments must be limited to no more than three minutes and must fall under the committee's jurisdiction and control. In consideration of others, avoid repetition. Although this committee does not restrict comments based upon viewpoint, comments will be prohibited if the contents are willfully disruptive, slanderous, amount to personal attacks, or interfere with the rights of other speakers. Comments made during this time will be monitored by the Committee Chairperson.

The public comment can be emailed to blakesmith@lyoncsd.org. The committee will not discuss these comments, but they will be listed in the minutes of the meeting.

7. (FOR DISCUSSION ONLY) Presentation on Anthem member and employer benefits. Presented by Anthem Representatives. 5

8. (FOR DISCUSSION ONLY) Update on Anthem Medical Plans and Guardian Dental and Vision Plans. Presented by LP Insurance.

9. (FOR DISCUSSION AND POSSIBLE ACTION) Future meeting dates. Presented by Committee Chair Kathy Rudy.

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11. ADJOURN

If you have questions or public records requests, please contact the LCSD Communications and Public Relations Officer at (Communications@lyoncsd.org).

The notice for this meeting was posted at the Lyon County School District Administrative Office and posted to the Lyon County School District website (http://lyoncsd.org) and the Nevada Public Notice Website (http://notice.nv.gov) in accordance with NRS 241.020 (3) (b).

*LYON COUNTY SCHOOL DISTRICT STATEMENT OF NONDISCRIMINATION AND ACCESSIBILITY*
*The Lyon County School District does not discriminate on the basis of race, color, national origin, gender, disability or age in any of its policies, procedures, or practices, in compliance with Title VI of the Civil Rights Act of 1964 (pertaining to race, color, and national origin), Title IX of the Educational Amendments of 1972, section 504 of the Rehabilitation Act, the Americans with Disabilities Act, and Age Discrimination Act of 1975, and any other pertinent statute or requirement. This Non-Discrimination policy covers admission, access, treatment, and employment in the District's programs and activities, including Occupational Education. For information regarding opportunities, policies, or the filing of grievances, contact your school principal.*
*The Lyon County School District is pleased to provide accommodations for the handicapped or disabled. Members of the public who are disabled and require special accommodations or assistance at the meeting are requested to notify the Administrative Assistant to the Superintendent and Board of Trustees in writing at 25 E. Goldfield Ave., Yerington, NV 89447, email mheim@lyoncsd.org, or call (775) 463-6800 Ext. 10034 at least one week prior to the meeting.*

# MINUTES

## Lyon County School District Insurance Committee

A meeting of the Insurance Committee of Lyon County School District will be held on Monday, October 19, 2026, beginning at 3:30 PM at Lyon Complex Building D, 3750 W. Spruce Ave., Silver Springs, NV 89429.

Items on this agenda may be taken out of order; the public body may combine two or more agenda items for consideration; and the public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time.

1. CALL TO ORDER: **3:36**
2. PLEDGE OF ALLEGIANCE
3. ROLL CALL AND WELCOME: **Shannon Nelson, Loraine De La Torre, Anna Brueher, Joy Hanssen, Kathy Rudy, Dusti Houk, Kevin Monaghan, Ron Parsons, Connor Deck, Becky Stidham,**
4. APPROVAL OF AGENDA: **Loraine De La Torre motioned to approve the agenda, Anna Brueher 2nd, motion carried.**
5. APPROVAL OF MINUTES: **Anna Brueher motioned to approve the minutes, Dusti Houk 2nd, motion carried.**
6. PUBLIC PARTICIPATION

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The public comment can be emailed to blakesmith@lyoncsd.org. The committee will not discuss these comments, but they will be listed in the minutes of the meeting. **None at this time.**

7. (FOR DISCUSSION ONLY) Introduction of Kaiser Permanente — New Health Insurance carrier in the greater Reno area. Presented by Kevin Monaghan and Becky Stidham, LP Insurance. **Please see attached.**
8. (FOR DISCUSSION ONLY) Anthem Medical, Guardian Dental and Vision plan updates. Presented by Kevin Monaghan and Becky Stidham, LP Insurance. **Please see attached.**

9. (FOR DISCUSSION AND POSSIBLE ACTION) Future committee dates. Presented by Committee Chair and LCCSEA President Kathy Rudy. **The committee's next meeting is schedueled for November 16, 2026 and the one after that will be January 12, 2027.**
10. PUBLIC PARTICIPATION
The public is invited to address the committee. The purpose of public comment is to bring issues, concerns, or praiseworthy items to the attention of the committee. No action may be taken on any subject raised during public comment until the matter has been properly placed on an agenda for a properly noticed meeting pursuant to NRS 241 (Nevada's Open Meeting Law). If you wish to speak, please step up to the front table, be seated, and state your name. Your comments must be limited to no more than three minutes and must fall under the committee's jurisdiction and control. In consideration of others, avoid repetition. Although this committee does not restrict comments based upon viewpoint, comments will be prohibited if the contents are willfully disruptive, slanderous, amount to personal attacks, or interfere with the rights of other speakers. Comments made during this time will be monitored by the Committee Chairperson.

The public comment can be emailed to blakesmith@lyoncsd.org. The committee will not discuss these comments, but they will be listed in the minutes of the meeting. **None at this time.**
11. ADJOURN: **Anna Brueher motioned to adjourn the meeting, Joy Hanssen 2nd, motion carried. Meeting adjourned at 4:51PM**

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The notice for this meeting will be posted at the Lyon County School District Administrative Office, Lyon County School District websites (http://www.lyoncsd.org) and Nevada Public Notice Website (http://notice.nv.gov) in accordance with NRS 241.020 (3) (b).

Lyon County School District Statement of Nondiscrimination and Accessibility
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# 2026 Strategic Insights

## Lyon County School District

November 16, 2026

Anthem



# Today's Attendees

## Client

***Lyon County School District***

## Consultants

**Kevin Monaghan,**
*Producer, LP Insurance Services*

**Becky Stidham,**
*Account Executive, LP Insurance*

## Anthem

**Luisa Carmona,**
*Strategic Account Consultant*

**Gilbert Soto,**
*Health Information Manager*

**Jim Thorne,**
*Account Service Manager, Sr.*

**Meghan Sanders,**
*Pharmacist Program Manager*

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# Agenda

Updates & Priorities

Executive Summary – What is the Data Telling Us?

Medical and Rx Deep Dive

Strategic Considerations

Next Steps

# About Your Review

## Reporting Periods

### Current Period
Incurred July 2025 - June 2026,
*paid through August 2026*

## High-Cost Claimants

### HCC
Paid Claims ≥ $50,000

### Non-HCCs
Paid Claims < $50,000

## Plan Profile and Benchmark

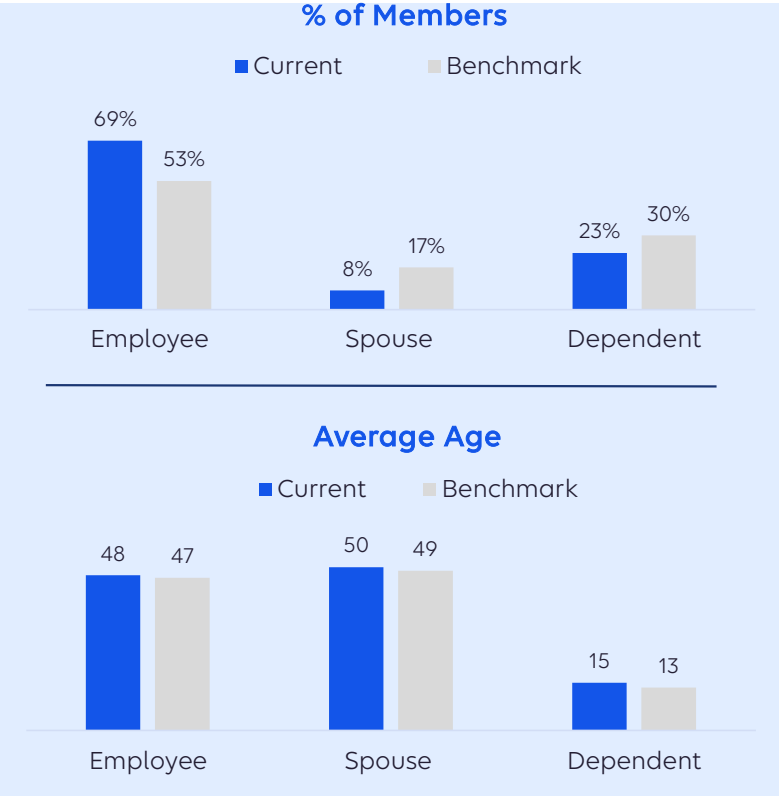
### Plan Profile
Total Account

### Benchmark
Commercial Book of Business/CII BOB 8

- PMPM (per member per month) paid amount is the metric used throughout this analysis to understand paid amount trends by individual plan participants (per member) over the duration of the plan period (per month)
- Utilization per 1,000 metrics included in this report are annualized (e.g., Visits per 1,000 = 12,000 * (Visits / Member Months)) so that rates are comparable between time periods with differing lengths. Does not apply to utilizer and prevalence per 1,000 metrics (e.g., Prevalence per 1,000 = 1,000 * (Claimants / Average Members)).
- Data included: Medical and Pharmacy

# Enrollment

The average member age was 40.1 compared to 37.0 for the benchmark.




## Employees

**79%**
Female

**47.6**
Avg age
(46.8 bmrk)

**44%**
Generation X
(1965-1980)

## Total Members

**68%**
Female

**40.1**
Avg age

**1.4**
Contract size

## Benchmark

**50%**
Female

[9]

**37.0**
Avg age

**1.9**
Contract size

# Financial Review

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# Executive Summary (Medical)

## What was the spend?

**$442.58**
**Current Period PMPM**
Benchmark PMPM: $473.90

**$8.0M**
**Total plan spend**

**$173.75**
**High-Cost Claimant PMPM**
Non-HCC PMPM: $268.83

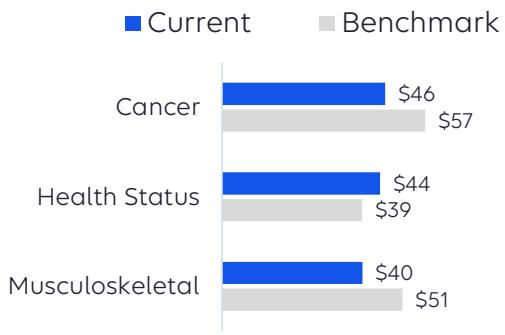
**39.3%**
**of plan spend from HCCs**

## What were the top conditions?

**29%**
**of plan spend from top 3 conditions**
% of spend

**Current Top 3**
- 10% Cancer
- 10% Health Status
- 9% Musculoskeletal

Top 3 Conditions by PMPM




## What's impacting members?
% of members

**39.5%**
**Chronic Conditions**
(32.7% bmrk)

**18.4%**
**Behavioral Health Claim**
(14.5% bmrk)

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## Are members visiting PCPs & completing wellness checks?
% of members

**66.1%**
**Primary Care Physician Visit**
(57.3% bmrk)

**42.8%**
**Adult Wellness Compliance**
(45.8% bmrk)





Current Period: Incurred July 2025 - June 2026, paid through August 2026

# Pharmacy trends at a glance

| Total plan cost PMPM | Total non-specialty plan cost PMPM | Total specialty plan cost PMPM |
|---|---|---|
| **$148.62** | **$89.53** | **$59.09** |
| Plan cost PMPM | Plan cost PMPM | Plan cost PMPM |

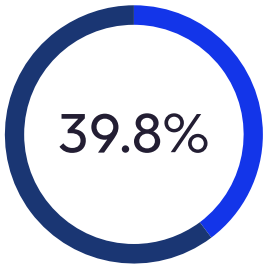
## Plan performance

- Total pharmacy plan cost is $2.7M
- Total pharmacy plan cost PMPM is $148.62 (BOB is $191)
- Specialty drugs accounted for 39.8% of pharmacy costs (BOB 53.5%)
- Member cost share 16.3%

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| | | | |
|---|---|---|---|
| **88.6%** | **16.3%** | **$112.54** | |
| Generic fill rate | Member cost share | Avg plan cost per adj Rx | |
| **15.3%** | **15.3%** | **$4,967** | |
| Specialty GFR | Specialty member cost share | Specialty plan cost per adj Rx | |

### Specialty percent of plan cost



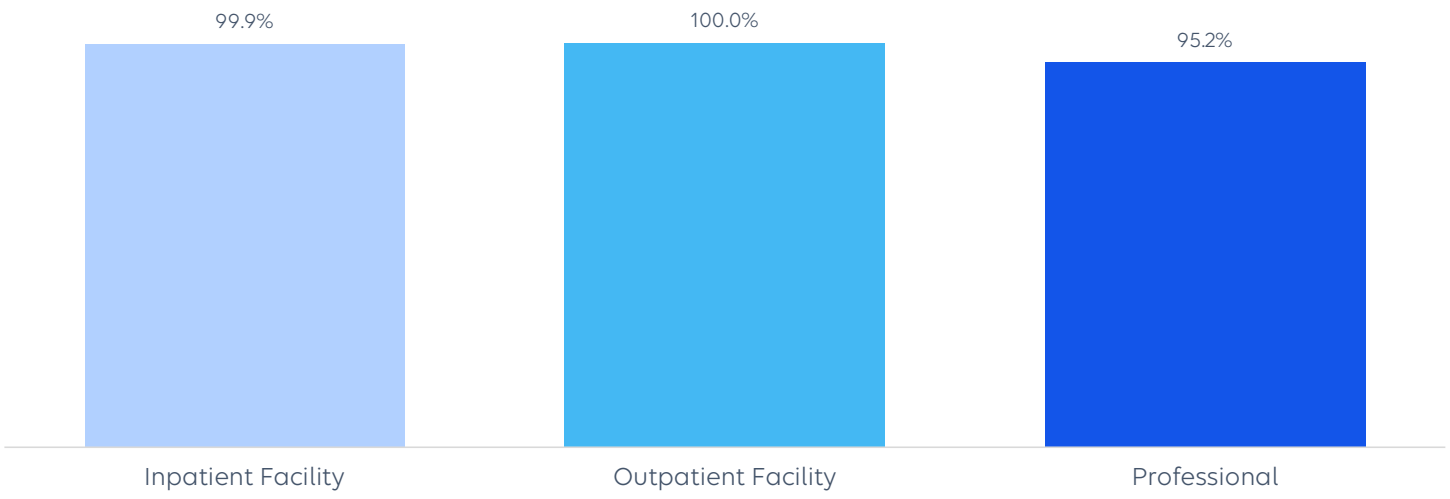

Estimated Rebates included for plan cost
Prior Period: N/A

# Network

| 98.2% | 60.4% | $15.3M |
|---|---|---|
| Paid In-Network | In-Network Discount % | Total Discount Amount |

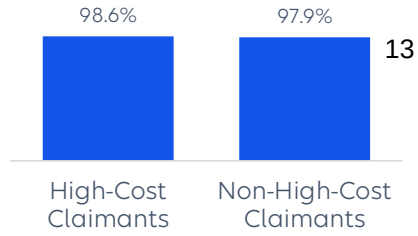
## By Setting

### In Network by Setting

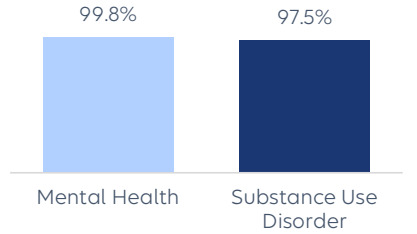



## Network Utilization

### High-Cost Claimants




### Behavioral Health



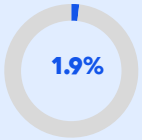





Current Period: Incurred July 2025 - June 2026, paid through August 2026

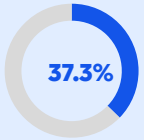
# High-Cost Claimants (Medical & Pharmacy)

**% of Members**




(1.9% bmrk)

**% of Spend**




(48.7% bmrk)

| $$ Range | Current Count |
|---|---|
| >$1M | 0 |
| $500k - 999k | 0 |
| $250k - 499k | 3 |
| $100k - 249k | 11 |
| $50k - 99k | 19 |
| **Total** | **33** |

**$121K**

**Average High Cost Claim**

Benchmark: $134K

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| HCC | Relationship | Age Band | Health Condition | Diagnosis | Medical Paid | Pharmacy Paid | Total Paid | Active Status |
|---|---|---|---|---|---|---|---|---|
| 1 | Employee | 55-59 | Cancer | Encounter For Other Aftercare (Lymphoma) | $344,505 | $18,275 | $362,780 | Yes |
| 2 | Employee | 40-49 | Nervous | Sleep Disorders | $281,443 | $16,914 | $298,356 | Yes |
| 3 | Employee | 50-54 | Cancer | Brain | $280,428 | $3,464 | $283,891 | No |
| 4 | Child | 1-19 | Circulatory | Cardiomyopathy | $237,099 | $509 | $237,608 | Yes |
| 5 | Child | 1-19 | Injury & Poisoning | Comp Intrl Ortho Pros Dev Impl Gft | $233,334 | $0 | $233,334 | Yes |
| 6 | Child | 1-19 | Behavioral Health | Anxiety | $186,449 | $45,899 | $232,348 | Yes |
| 7 | Employee | 65+ | Infectious/Parasitic | Sepsis | $165,281 | $104 | $165,385 | Yes |
| 8 | Child | 20-29 | Behavioral Health | Maj Depress D/O Recurrent | $142,619 | $8,733 | $151,352 | Yes |
| **9** | **Employee** | **50-54** | **Isturisa** | **Treat high levels of cortisol in the blood with Cushing's syndrome** | **$7,546** | **$132,484** | **$140,030** | **No** |
| 10 | Employee | 55-59 | Infectious/Parasitic | Sepsis | $134,067 | $1,316 | $135,383 | No |

# Top 25 drugs

- Represent 72.6% of your total plan cost and comprise 11 indications
- 10 of your top 25 are specialty drugs, making up 52% of your spend
- Essential Formulary

| Rank | Peer rank | Brand name | Drug type | Indication | Rxs | Patients | Plan cost | Plan cost PMPM | Peer plan cost PMPM | Prior rank | Prior Rxs | Prior patients | Prior plan cost PMPM | % change plan cost PMPM |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 1 | Mounjaro | NS | Diabetes | 179 | 26 | $246,074.67 | $13.55 | $13.06 | | | | | |
| 2 | 3 | Ozempic | NS | Diabetes | 145 | 25 | $222,631.69 | $12.26 | $9.19 | | | | | |
| 3 | 5 | Dupixent | S | Dermatologic Conditions | 61 | 7 | $204,082.32 | $11.24 | $6.50 | | | | | |
| 4 | 4 | Humira | S | Inflammatory Conditions | 30 | 4 | $186,119.04 | $10.25 | $8.89 | | | | | |
| 5 | 219 | Isturisa | S | Endocrine Disorders | 6 | 1 | $117,814.51 | $6.49 | $0.11 | | | | | |
| 6 | 20 | Otezla | S | Inflammatory Conditions | 23 | 3 | $114,416.44 | $6.30 | $1.63 | | | | | |
| 7 | 9 | Rinvoq | S | Inflammatory Conditions | 20 | 2 | $113,440.36 | $6.25 | $3.68 | | | | | |
| 8 | 113 | Imbruvica | S | Cancer | 10 | 1 | $100,426.74 | $5.53 | $0.27 | | | | | |
| 9 | 10 | Jardiance | NS | Diabetes | 68 | 17 | $63,082.27 | $3.47 | $3.57 | | | | | 15 |
| 10 | 2 | Skyrizi | S | Inflammatory Conditions | 3 | 1 | $62,061.51 | $3.42 | $9.47 | | | | | |
| 11 | 21 | Vraylar | NS | Psychiatric/Neuro Disorders | 29 | 6 | $56,031.07 | $3.09 | $1.49 | | | | | |
| 12 | 28 | Qulipta | NS | Migraine Headaches | 39 | 5 | $50,441.21 | $2.78 | $1.15 | | | | | |
| 13 | 18 | Dexcom | NS | Diabetes | 83 | 13 | $49,638.90 | $2.73 | $1.68 | | | | | |
| 14 | 121 | Actemra | S | Inflammatory Conditions | 10 | 1 | $46,546.54 | $2.56 | $0.25 | | | | | |
| 15 | 19 | Nurtec | NS | Migraine Headaches | 35 | 9 | $40,849.05 | $2.25 | $1.66 | | | | | |
| 16 | 74 | Caplyta | NS | Psychiatric/Neuro Disorders | 21 | 6 | $40,704.30 | $2.24 | $0.39 | | | | | |
| 17 | 14 | Eliquis | NS | Anticoagulation | 64 | 14 | $40,365.58 | $2.22 | $2.75 | | | | | |
| 18 | 12 | Cosentyx | S | Inflammatory Conditions | 2 | 1 | $39,040.35 | $2.15 | $3.16 | | | | | |
| 19 | 22 | Trulicity | NS | Diabetes | 20 | 3 | $27,493.69 | $1.51 | $1.47 | | | | | |
| 20 | 75 | Nucala | S | Asthma | 10 | 1 | $27,493.45 | $1.51 | $0.39 | | | | | |
| 21 | 31 | Xarelto | NS | Anticoagulation | 20 | 6 | $25,782.30 | $1.42 | $1.00 | | | | | |
| 22 | 54 | Emgality | NS | Migraine Headaches | 27 | 5 | $25,535.30 | $1.41 | $0.53 | | | | | |
| 23 | 44 | Creon | NS | Gi Disorders | 9 | 1 | $22,108.72 | $1.22 | $0.60 | | | | | |
| 24 | 57 | Estradiol | NS | Hormone Supplementation | 329 | 85 | $19,459.05 | $1.07 | $0.52 | | | | | |
| 25 | 165 | Ibsrela | NS | Gi Disorders | 10 | 1 | $18,355.77 | $1.01 | $0.17 | | | | | |
| | | **Total** | | | **1,253** | **244** | **$1,959,994.82** | | | | | | | |

Prior Period: N/A
Current Period: Incurred July 2025 - June 2026 paid through August 2026

# Place of Service

| Place of Service | Spend Attributed to HCCs | Top Conditions |
|---|---|---|
| **Inpatient**<br>$99 PMPM<br>$1.8M; 22.3% of total spend (25.3% bmrk) | 76.2%<br>(77.3% bmrk) | Cancer was the highest spend condition category |
| **Outpatient[1]**<br>$123 PMPM<br>$2.2M; 27.7% of total spend (31.7% bmrk) | 40.8%<br>(52.3% bmrk) | Nervous System was the highest spend condition category |
| **Emergency**<br>$58 PMPM<br>$1.1M; **13.1% of total spend** (8.3% bmrk) | 29.1%<br>(21.4% bmrk) | Top diagnoses by visits: Sore throat, Throat/Chest Pain, Abdominal/Pelvic Pain |
| **Professional**<br>$163 PMPM<br>$3.0M; 36.8% of total spend (34.8% bmrk) | 19.3%<br>(30.7% bmrk) | Health Status and Behavioral Health were the highest spend condition categories |

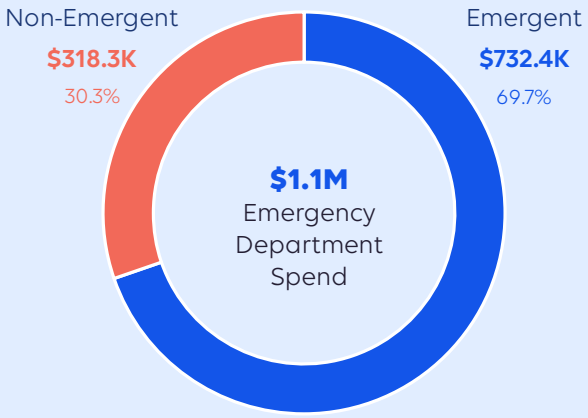
16

[1]Outpatient excludes Emergency

# Emergency Department

Emergency department visits per 1,000 were 68.4% above the benchmark. Educating members on alternate settings of care (retail, virtual, primary) can help drive better outcomes and reduce member and employer costs.

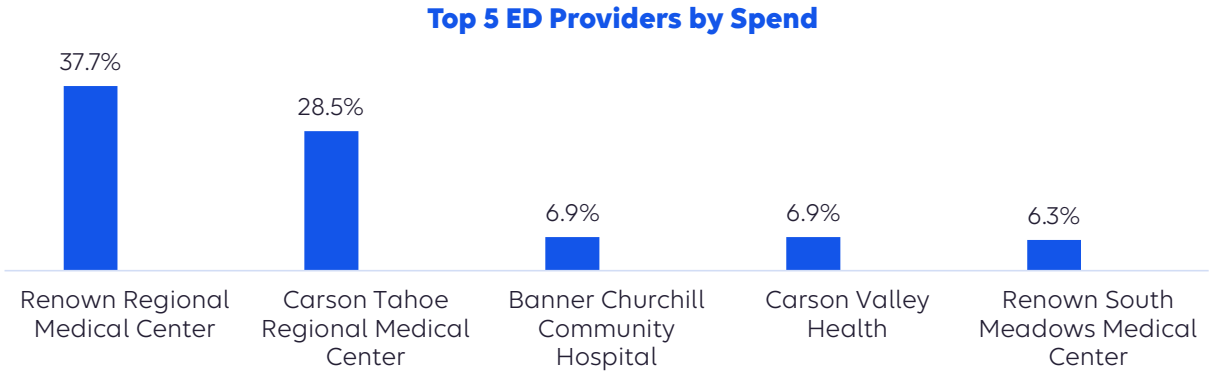
- Emergency Department Facility spend accounted for **13.1% of total** medical spend, (8.3% bmrk)
- **Employees** had the highest ED visits per 1,000 by relationship
- **57.4%** of visits were **potentially avoidable** (43.5% bmrk)
- **Employees** had the highest **potentially avoidable** ED visits per 1,000 by relationship







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Current Period: Incurred July 2025 - June 2026, paid through August 2026

# Alternate settings of care

| | Top 10 ER Dx | Utilization per 1000 | | Average Cost per Visit | |
|---|---|---|---|---|---|
| | | ER | Urgent Care | ER | Urgent Care |
| 1 | Sore Throat | 19.8 | 37.6 | $186 | $147 |
| 2 | Pain In Throat And Chest | 12.5 | 8.9 | $3,146 | $97 |
| 3 | Abdominal And Pelvic Pain | 10.4 | 8.2 | $2,422 | $209 |
| 4 | Maternal Care Oth Cond Predominantly Rel Preg | 10.3 | #N/A | $1,778 | #N/A |
| 5 | Acute Upper Resp Infections | 8.1 | 27.8 | $660 | $154 |
| **6** | **Dorsalgia (Back Pain)** | **6.7** | **2.9** | **$1,691** | **$142** |
| 7 | Viral Infection Of Unspecified Site | 6.6 | #N/A | $756 | #N/A |
| 8 | Influenza | 5.9 | 10.2 | $1,644 | $233 |
| 9 | Type 2 Diabetes Mellitus | 5.2 | 2.2 | $3,019 | $132 |
| 10 | Dizziness And Giddiness | 5.1 | 7.4 | $1,438 | $123 |

| | ED Visits by Day of Week | ER Visits | ER Per 1000 | ER Cost Per Visit |
|---|---|---|---|---|
| 1 | DAYTON, NV | 42% | 636.1 | $1,133 |
| 2 | FERNLEY, NV | 19% | 198.6 | $3,586 |
| 3 | YERINGTON, NV | 14% | 327.4 | $2,469 |
| 4 | SILVER SPGS, NV | 8% | 412.4 | $1,630 |
| 5 | CARSON CITY, NV | 4% | 286.7 | $2,042 |
| | **Total ED** | **533** | **352.0** | **$1,973** |
| | *Total Non-Avoidable ED* | *227* | *149.8* | *$3,231* |
| | *Total Avoidable ED* | *306* | *202.2* | *$1,040* |
| | *Total Urgent Care* | *764* | *504.8* | *$128* |

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## Notable Findings:

- 11% of members with an ER visit had 3 or more visits (8% bmrk)
- Tuesday and Monday had the highest ER visits by day
- Monday had the highest Urgent Care visits by day
- Avoidable visits were 57% of ER volume but only 30% of ER spend — $1,040 per avoidable ER visit vs $128 at Urgent Care

# Telehealth

Telehealth can provide a lower cost and more convenient option for care. This slide encompasses the entirety of technology-driven virtual healthcare including virtual care with a doctor or local provider*.

### Key Metrics

**19.7%**
of members had a telehealth visit
(17.4% bmrk)

Which accounted for
**2.7%**
of total spend
(2.3% bmrk)

### What were the visit types?

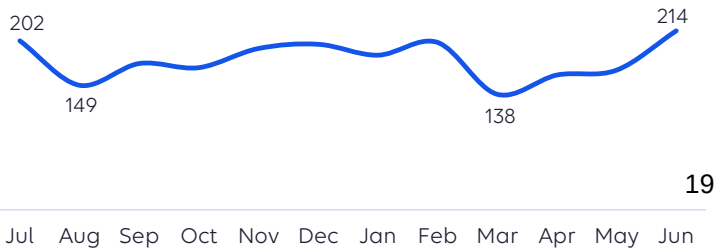
**73.6%** behavioral health (69.6% bmrk)
**12.1%** PCP (18.2% bmrk)

### What is the financial impact?

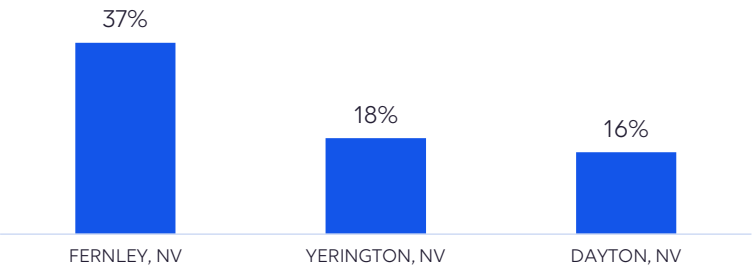
**$106** avg telehealth cost per visit
**$184** avg professional cost per visit
**$1,973** avg emergency cost per visit

* Includes LHO and other VPC service providers where applicable

### Telehealth Visits: by Month




### Telehealth Visits by City



# Clinical Review

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# Pharmacy trends at a glance

## Clinical cost drivers

- Diabetes, Inflammatory Conditions, Dermatologic Conditions, Migraine Headaches and Endocrine Disorders represent 66% of total pharmacy spend
- Mounjaro, Ozempic, Dupixent, Humira and Isturisa represent $977K of total pharmacy spend
- 7 of the top 10 drugs were for specialty medications
- Diabetes is the top driver of non-specialty indications
- Inflammatory Conditions is the top driver of specialty indications

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### Diabetes

#1 Indication by highest plan cost

**$38.52**
Plan cost PMPM

**119**
Patients in current period

### Mounjaro

#1 Drug by highest plan cost

**$1,377**
Plan cost per Rx

**26**
Patients in current period

### Hypertension/Heart Disease

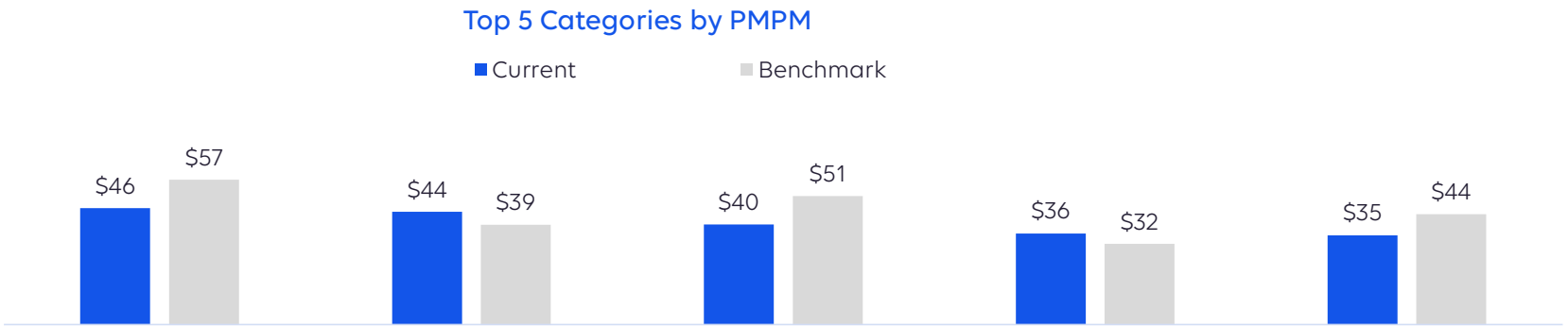
Top indications by total days

**365.2**
Days of therapy per patient

**325**
Patients in current period

Estimated Rebates included for plan cost
Prior Period: N/A

# Top 5 Health Condition Categories




| Key Metrics | **#1 Cancer**<br>$833.6K<br>55 Claimants | **# 2 Health Status**<br>$807.8K<br>949 Claimants | **# 3 Musculoskeletal**<br>$717.6K<br>455 Claimants | **# 4 Ill-Defined Conditions**<br>$652.4K<br>610 Claimants | **# 5 Circulatory**<br>$639.6K<br>211 Claimants |
|---|---|---|---|---|---|
| % of members | 3% | 56% | 27% | 36% | 12% |
| % of total spend | 10% | 10% | 9% | 8% | 8% |
| % of spend attributed to HCCs* | 82% | 0% | 15% | 0% | 69% |

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**% of spend by category**

- **34%** Chemo/Radiation
- **32%** Brain Cancer
- **14%** Breast Cancer

- **38%** Cancer Screenings
- **28%** Wellness Exam
- **12%** Office Visit

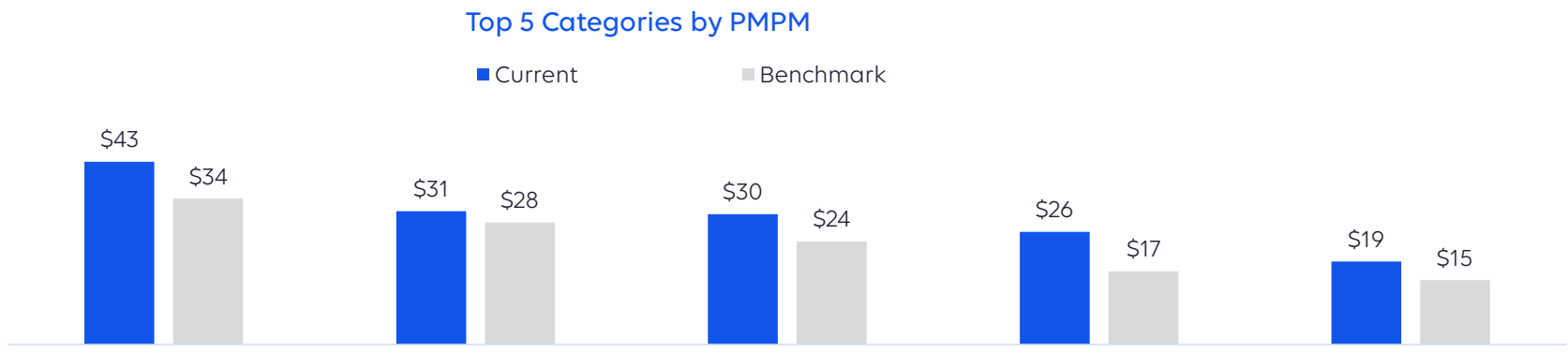
- **18%** Osteo of Knee
- **15%** Joint Disorder
- **13%** Back Pain

- **16%** Throat/Chest Pain
- **11%** Abdominal/Pelvic Pain
- **6%** Sx Signs Invlv Emotional State

- **28%** Chronic heart disease
- **18%** Irregular Heartbeat
- **15%** CAD

*The percent of condition spend due to HCCs with a related primary diagnosis

# Non-HCC Top 5 Health Condition Categories




| Key Metrics | #1 Health Status<br>$774.4K<br>917 Claimants | # 2 Musculoskeletal<br>$565.0K<br>433 Claimants | # 3 Ill-Defined Conditions<br>$553.0K<br>581 Claimants | # 4 Maternity<br>$477.2K<br>39 Claimants | # 5 Genitourinary<br>$352.4K<br>300 Claimants |
|---|---|---|---|---|---|
| % of members | 54% | 25% | 34% | 2% | 18% |
| % of total spend | 16% | 12% | 11% | 10% | 7% |
| **Top diagnoses % of spend** | • 39% Cancer Screenings<br>• 29% Annual wellness checkup<br>• 11% Routine doctor office visit | • 20% Knee arthritis (wear & tear)<br>• 18% Joint pain & disorders<br>• 15% Back Pain | • 18% Sore throat / chest pain<br>• 11% Stomach / pelvic pain<br>• 6% Dizziness & balance problems | • 11% Water breaking early (before labor)<br>• 10% High blood pressure during pregnancy<br>• 8% Other pregnancy-related care | • 15% Irregular periods<br>• 13% Abnormal vaginal bleeding<br>• 12% Pelvic pain & menstrual conditions |

All high-cost claimant claims and costs are excluded from this report, regardless of primary diagnosis

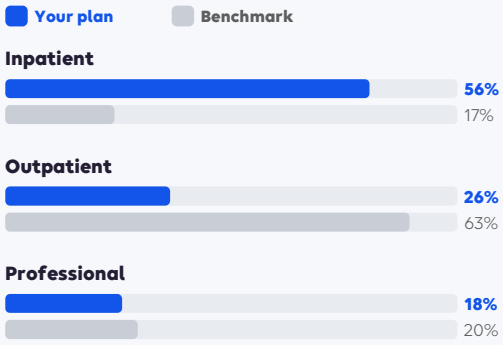
# Cancer: Where the $833.6K Went

Cancer is **10% of total plan spend from just 3% of members** — spend per member is below benchmark, but care is concentrated in the inpatient setting and in a handful of high-cost diagnoses.

| $833.6K | 55 | $46 | 82.2% |
|---|---|---|---|
| **Total cancer spend** | **Members with a cancer claim** | **Cancer spend PMPM** | **High-cost claimant share** |
| 10% of total plan spend | 3% of total membership | 20% below the $57 benchmark | A few cases drive the total |

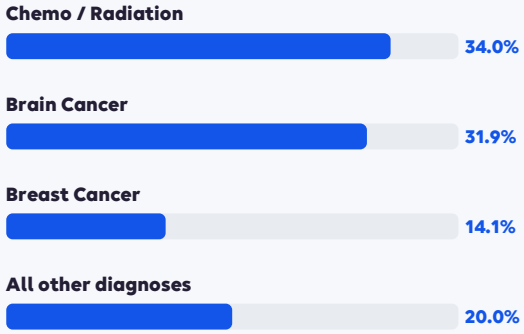
## Where the care happened

Share of cancer spend by setting




## What drove the spend

Share of cancer spend by diagnosis




## What was potentially preventable

"Impactable" = could have been prevented or caught earlier

| 18% | 73% | 11% |
|---|---|---|
| **of spend** | **of claimants** | **of HCC spend** |
| 28% bmrk | 63% bmrk | 25% bmrk |

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### How engaged are these members?

- **89.1%** had a primary care visit (81.6% bmrk)
- **21.8%** also have a behavioral health condition (16.1% bmrk)
- **5.8%** of cancer spend was medical specialty drugs (40.5% bmrk)

### What this means for benefits planning

Cost per member is healthy — **$46 PMPM vs $57 benchmark**. The opportunity is the care setting: inpatient is 56% of cancer spend against a 17% benchmark, so review site-of-care and outpatient infusion options with the carrier.

Only 18% of cancer spend was potentially impactable (28% benchmark) and engagement is strong (96.4% vs 85.5%) — hold the line by promoting screenings, since early detection is what keeps these cases out of the inpatient setting.



Source: slides 19 & 20 (Cancer / Cancer Drilldown)

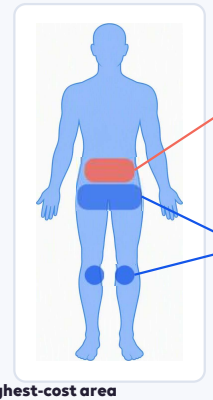
# Musculoskeletal: Where the $717.6K Goes

MSK touches **27% of your members but is only 9% of plan spend** — cost per member runs 22% under benchmark. The leverage is in steering joint care to lower-cost settings and to therapy before surgery.

| $717.6K | 455 | $39.52 | 15.2% |
|---|---|---|---|
| **Total MSK spend** | **Members with an MSK claim** | **MSK spend PMPM** | **High-cost claimant share** |
| 9% of plan spend | 27% of membership | vs $50.74 benchmark (-22%) | of MSK spend is high-cost |

## Which body areas are driving cost?

Shaded by share of MSK surgeries



**Lower back & spine**
3% of all MSK surgeries
Back pain: 13.5% of spend, 29.2% of claimants

**Knee & hip**
49% of all MSK surgeries
Knee osteo + joint disorder: 32.9% of spend

Highest-cost area

High volume, lower surgical cost

## Top diagnoses by spend

Share of MSK spend / share of claimants

**Osteoarthritis of Knee** — 17.8%
5.1% of claimants

**Joint Disorder** — 15.1%
45.3% of claimants

**Back Pain** — 13.5%
29.2% of claimants

Joint disorder hits the most people; knee osteoarthritis costs the most per person.

## Where care happened

Share of MSK spend by setting, vs benchmark

| | Your plan | Benchmark |
|---|---|---|
| Outpatient | 52.0% | 47.4% |
| Professional | 44.4% | 38.6% |
| Inpatient | 3.5% | 14.0% |

**Good news:** only 3.5% of MSK spend is inpatient vs a 14% benchmark — joint care is already largely outpatient.

## What an HR benefits leader should do with this

Surgery is 52% of MSK spend and knees and hips are 49% of those procedures. Physical therapy is only 10% — **promoting conservative therapy before joint surgery is the single biggest lever**, and 27.3% of these members also carry a behavioral health condition (22.0% benchmark), which slows recovery.



Body map shaded by share of MSK surgeries

# Top 10 indications

- The highest trend cannot be determined (no current history)
- The highest trend cannot be detmermind (no prior history)
- Generic fill rate (GFR) in Diabetes is 0.4 points higher than the benchmark
- 84.8% of total plan cost is due to the top 10 indications below

| Rank | Peer rank | Indication | Rxs | Patients | Plan cost | Plan cost PMPM | Peer plan cost PMPM | Prior rank | Prior Rxs | Prior patients | Generic fill rate | Prior generic fill rate | Prior plan cost PMPM | % change plan cost PMPM |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | Diabetes | 1,019 | 119 | $699,383.73 | $38.52 | $35.62 | | | | 35.7% | | | |
| 2 | 1 | Inflammatory Conditions | 101 | 17 | $576,062.59 | $31.73 | $47.08 | | | | 15.3% | | | |
| 3 | 5 | Dermatologic Conditions | 302 | 127 | $231,906.05 | $12.77 | $8.49 | | | | 72.7% | | | 26 |
| 4 | 7 | Migraine Headaches | 228 | 59 | $145,959.35 | $8.04 | $5.21 | | | | 43.7% | | | |
| 5 | 17 | Endocrine Disorders | 18 | 5 | $125,485.06 | $6.91 | $1.80 | | | | 13.4% | | | |
| 6 | 3 | Cancer | 122 | 19 | $122,087.76 | $6.72 | $16.27 | | | | 94.1% | | | |
| 7 | 10 | Psychiatric/Neuro Disorders | 218 | 32 | $117,895.06 | $6.49 | $3.54 | | | | 75.0% | | | |
| 8 | 8 | Asthma | 673 | 198 | $112,690.26 | $6.21 | $4.89 | | | | 76.8% | | | |
| 9 | 12 | Gi Disorders | 83 | 30 | $89,601.57 | $4.93 | $2.87 | | | | 44.6% | | | |
| 10 | 9 | Anticoagulation | 99 | 25 | $66,533.40 | $3.66 | $3.82 | | | | 16.8% | | | |
| | | **Total** | **2,863** | **631** | **$2,287,604.84** | | | | | | | | | |



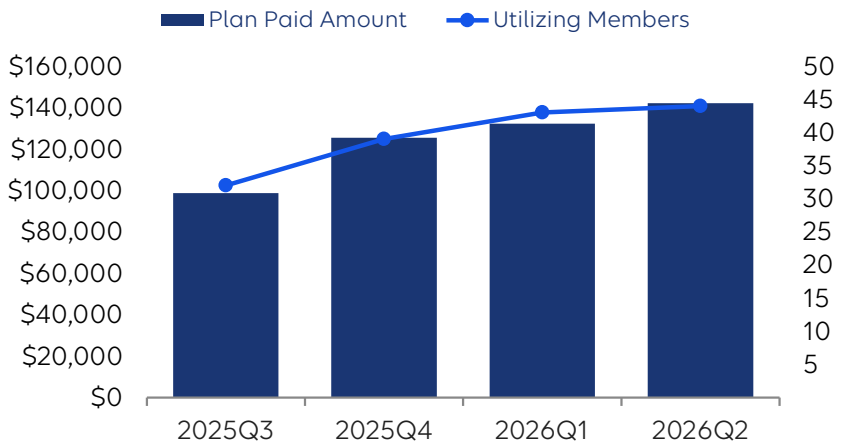
Prior Period: N/A
Current Period: Incurred July 2025 - June 2026 paid through August 2026

## Top 20 Drugs by Utilization

| Rank | Indication | Drug | Scripts | Patients | Plan Paid |
|---|---|---|---|---|---|
| 1 | INFECTIONS | AMOXICILLIN | 391 | 281 | $1,191.74 |
| 2 | THYROID DISORDERS | LEVOTHYROXINE | 366 | 99 | $1,053.20 |
| 3 | HORMONE SUPPLEMENTATION | ESTRADIOL | 329 | 85 | $19,459.05 |
| 4 | HYPERTENSION/HEART DISEASE | LISINOPRIL | 295 | 87 | $371.61 |
| 5 | HIGH CHOLESTEROL | ATORVASTATIN | 290 | 93 | $3,771.46 |
| 6 | ASTHMA | ALBUTEROL | 283 | 150 | $2,919.19 |
| 7 | HYPERTENSION/HEART DISEASE | LOSARTAN | 282 | 78 | $989.98 |
| 8 | DEPRESSION | BUPROPION | 219 | 58 | $1,760.74 |
| 9 | DEPRESSION | SERTRALINE | 218 | 58 | $1,507.82 |
| 10 | DEPRESSION | ESCITALOPRAM | 218 | 57 | $497.72 |
| 11 | DIABETES | METFORMIN | 214 | 64 | $839.85 |
| 12 | HIGH CHOLESTEROL | ROSUVASTATIN | 203 | 67 | $2,952.07 |
| 13 | HYPERTENSION/HEART DISEASE | AMLODIPINE | 203 | 55 | $115.16 |
| 14 | INFLAMMATION/PAIN | GABAPENTIN | 189 | 57 | $630.74 |
| 15 | INFLAMMATION/IMMUNE DISORDERS | PREDNISONE | 187 | 130 | $50.98 |
| 16 | HORMONE SUPPLEMENTATION | PROGESTERONE | 183 | 56 | $11,579.80 |
| 17 | INFECTIONS | DOXYCYCLINE | 183 | 118 | $1,965.15 |
| 18 | DIABETES | MOUNJARO | 179 | 26 | $246,074.67 |
| 19 | ANXIETY | HYDROXYZINE | 179 | 70 | $431.02 |
| 20 | INFLAMMATION/PAIN | MELOXICAM | 173 | 73 | $266.46 |

# Diabetic GLP-1 drugs

- Diabetic GLP-1 drugs PMPM of $27.45 is above benchmark of $24.64
- Highest utilization was in 2026Q2




| | 2025Q3 | 2025Q4 | 2026Q1 | 2026Q2 |
|---|---|---|---|---|
| Plan paid amount | $98,751 | $125,381 | $132,200 | $142,022 |
| Utilizing members | 32 | 39 | 43 | 44 |
| Plan cost PMPM | $22 | $27 | $29 | $31 |

Top 5 drugs - Current period

| Drug name | Patient count | Rx count | Total plan paid | Total net patient paid |
|---|---|---|---|---|
| Mounjaro | 26 | 179 | $246,075 | $18,778 |
| Ozempic | 25 | 145 | $222,632 | $10,361 |
| Trulicity | 3 | 20 | $27,494 | $1,147 |
| Rybelsus | 1 | 2 | $2,154 | $86 |
| **Total** | **55** | **346** | **$498,354** | |

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# Chronic conditions: where HR can focus support

Each highlighted condition affects a larger share of members than the benchmark.

OVERALL CHRONIC IMPACT

**597**

members with a chronic condition

**37.5%**

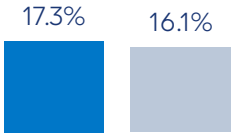
of total costs*



## Obesity

**295 members**

Share of all members



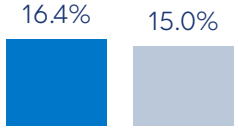

+1.2 percentage points vs benchmark



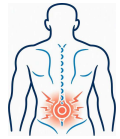
## High blood pressure

**279 members**

Share of all members



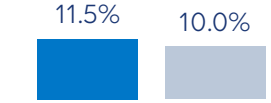

+1.4 percentage points vs benchmark



## Lower back pain

**195 members**

Share of all members




+1.5 percentage points vs benchmark

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**Suggested focus** Review participation in weight-management, blood-pressure and back-care support.

*Cost measure uses chronic conditions as the primary diagnosis. Members may have multiple conditions. One-year snapshot, not a trend.

# Preventive Screenings

Prevention and well visits play a key role in the wellbeing of your population. Regular wellness checks and cancer screenings increase early detection, which is shown to improve member's outcomes as well as decrease illness severity and cost. Primary care relationships help to promote preventive screenings.

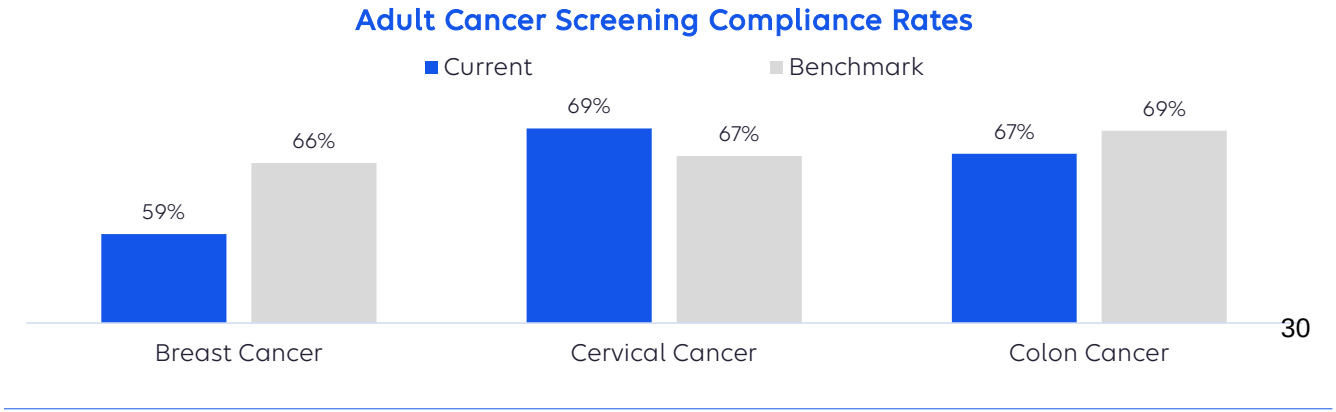
**Preventive Screenings:**

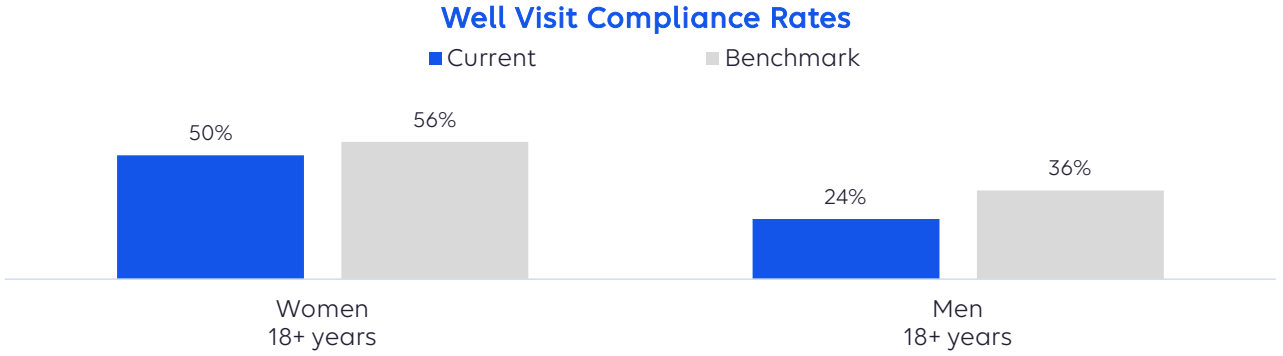
- **43%** of members had an adult wellness visit, (46% bmrk)

**PCP Insights:**

- **66%** of members had a **PCP visit**, (57% bmrk)

| Continuously Enrolled% Non-Utilizers | |
|---|---|
| Current | 10.5% |
| Benchmark | 16.0% |








Current Period: Incurred July 2025 - June 2026, paid through August 2026

# Key Insights Overview

The information below outlines key analysis insights and corresponding recommendations to inform next steps.

## Strengths

- Total cost runs below benchmark — $591.20 total paid PMPM vs $664.63 (-11.0%), with medical -6.6% and pharmacy -22.1%; inpatient use is also low at 46.5 admits per 1,000 (51.4 bmrk).
- Network performance is excellent — 98.2% of spend is in-network at a 60.4% discount, producing $15.3M in total discounts.
- Members are connected to care — 66% had a PCP visit (57% bmrk), only 10.5% were non-utilizers (16.0% bmrk), and telehealth reach is 19.7% (17.4% bmrk).

## Areas of Opportunity



| Observations | Recommendations |
|---|---|
| • Emergency department use is the largest outlier: 352.0 ED visits per 1,000 vs 209.1 benchmark (+68.4%), and 57.4% of visits were potentially avoidable (43.5% bmrk). ED is 13.1% of medical spend vs 8.3%. | • Promote alternate settings of care. An avoidable ED visit costs $1,040 vs $128 at urgent care and $106 for telehealth. Focus on Dayton and Fernley and on repeat users — 11% of ED members had 3+ visits. |
| • Behavioral health prevalence is high: 18.4% of members have a BH claim (14.5% bmrk), and 50.3% of them carry at least one other chronic condition, which raises cost and lowers treatment compliance. | • Expand integrated behavioral and chronic condition care management, and keep virtual access open — BH already drives 73.6% of telehealth visits, making it the easiest channel to scale. |
| • Prevention is trailing while cancer leads spend: 43% adult wellness compliance (46% bmrk), breast screening 58.8% and colon 66.7% below benchmark, yet cancer is the #1 category at $833.6K from 55 members. | • Run targeted screening and wellness campaigns, prioritizing men 18+ (24.3% well-visit compliance vs 35.9% bmrk), so disease is caught earlier and high-cost claimant spend is contained. |

# Reading This Snapshot: The What, The Why, The So What

One year of data, measured against a commercial book of business benchmark — **the comparison is the trend line.**

## THE WHAT

What is the data telling us?

- **$8.0M** total plan spend; **$442.58 PMPM** vs $473.90 benchmark (-6.6%)
- Top 3 conditions = **29% of spend** — Cancer $833.6K, Health Status, Musculoskeletal $717.6K
- **37.3% of spend** comes from high-cost claimants (Med + Rx) — just 1.9% of members
- Chronic prevalence **39.5%** (32.7% bmrk); behavioral health **18.4%** (14.5% bmrk)
- ED use **352 visits per 1,000** vs 209.1 benchmark — 57.4% potentially avoidable

## THE WHY

Why does it look this way?

- An older, employee-heavy population: average age **40.1 vs 37.0**, 69% employees vs 52.6% benchmark
- Cost is concentrated, not spread — chronic and behavioral conditions cluster in a small group of members
- Members are connected to care (66.1% PCP visit, 10.5% non-utilizers) but still default to the ED for avoidable needs
- Prevention trails: adult wellness **42.8%** vs 45.8%; men 18+ only 24.3% vs 35.9%

## THE SO WHAT

So what should we do about it?

- **Steer avoidable ED volume** to urgent care and telehealth — $1,040 a visit vs $128 and $106
- **Integrate behavioral health** with chronic care management; half of BH members carry another condition
- **Close screening gaps** where cancer is the #1 category — $833.6K from 55 members
- **Review site of care for cancer** — 56% of spend is inpatient against a 17% benchmark
- **Conservative therapy first for MSK** — surgery is 52% of spend, physical therapy only 10%

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### Why a single year still deserves your attention

Without a trend line, the benchmark does the work: every figure here is measured against a commercial book of business, so you can see what is off today. And the drivers are **structural — chronic prevalence, site of care, prevention gaps — not one-time events.** Acting now sets the baseline that next year's trend will be measured against.

# Appendix



Anthem

# Infusion: 72% of spend is paid at hospital-based facilities

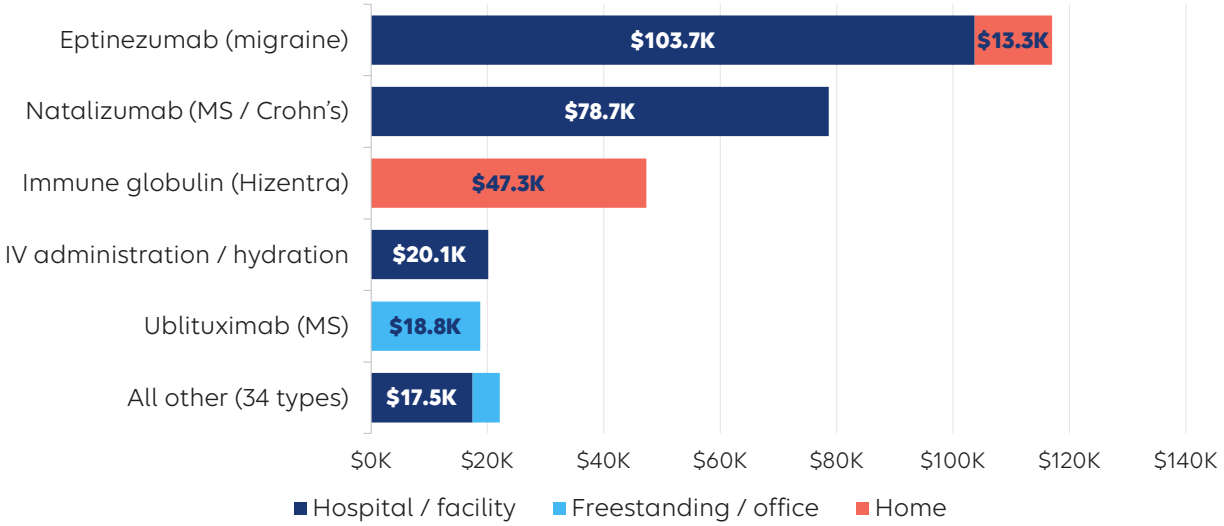
Total plan-paid amount
**$304.1K**
Jul 2025 – Jun 2026

● Hospital / facility
**$220.0K**
72.4% of paid

● Freestanding / office
**$23.5K**
7.7% of paid

● Home
**$60.6K**
19.9% of paid

## Medical paid by drug / service and site of care




## What stands out

- Two drugs **= $182K, 83%** of the amount paid at hospital-based facilities: eptinezumab and natalizumab 34
- **Home is $60.6K (20%),** mostly immune globulin (Hizentra, $47.3K)
- **Freestanding / office is only $23.5K (8%),** led by ublituximab at $18.8K

**So what: Specialty drugs paid at hospital-based facilities are the first place to review site of care.**

**Note:** Figures are plan-paid amounts (Medical Paid): what the health plan paid after member cost-sharing; not billed charges or allowed amounts. Site of care is based on each claim's place of service.

# Lab: 75% of spend is paid at hospital-based facilities

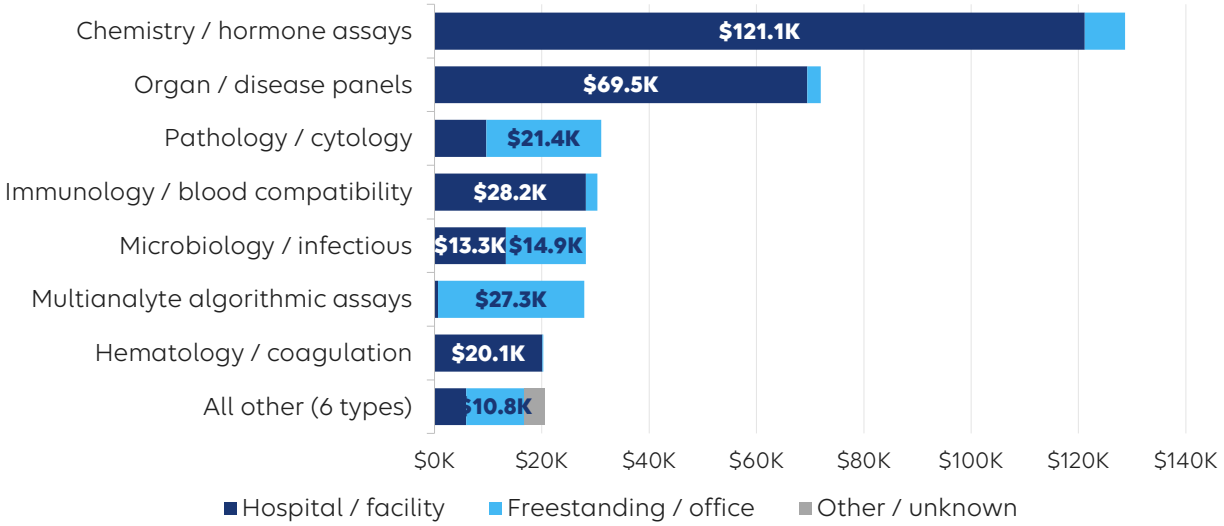
Total plan-paid amount
**$359.0K**
Jul 2025 – Jun 2026

● Hospital / facility
**$268.5K**
74.8% of paid

● Freestanding / office
**$86.7K**
24.2% of paid

● Home / other
**$3.8K**
1.1% · no home lab claims

## Medical paid by test type and site of care




## What stands out

- Routine chemistry and panels **= $201K (56%)** of lab spend, 94–97% paid at hospital-based facilities
- **Specialty tests skew freestanding:** multianalyte and molecular/genetic assays 98%, pathology 69%
- **Freestanding labs total $86.7K (24%);** no home lab spend

**So what: High-volume routine tests paid at hospital-based facilities are the main site-of-care lever.**

**Note:** Figures are plan-paid amounts (Medical Paid): what the health plan paid after member cost-sharing; not billed charges or allowed amounts. Site of care is based on each claim's place of service.

# Imaging: 84% of spend is paid at hospital-based facilities

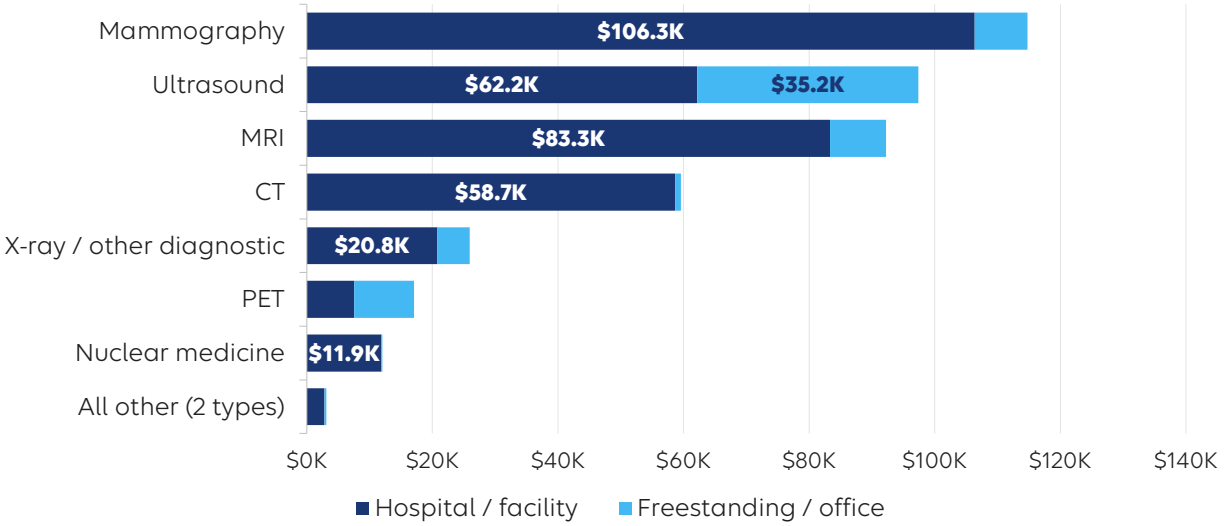
Total plan-paid amount
**$422.3K**
Jul 2025 – Jun 2026

● Hospital / facility
**$353.5K**
83.7% of paid

● Freestanding / office
**$68.6K**
16.2% of paid

● Home / other
**$0.1K**
<0.1% · no home imaging claims

## Medical paid by imaging type and site of care




## What stands out

- Mammography, MRI and CT **= $267K (63%)** of imaging spend, 90–99% paid at hospital-based facilities
- Freestanding is strongest in **ultrasound (36%) and PET (56%)**
- MRI plan-paid averages $718 per reported visit at hospital-based facilities vs. $129 freestanding **(descriptive, not mix-adjusted)**

**So what: MRI and CT paid at hospital-based facilities are the key site-of-care opportunity.**

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**Note:** Figures are plan-paid amounts (Medical Paid): what the health plan paid after member cost-sharing; not billed charges or allowed amounts. Site of care is based on each claim's place of service..

# Top line performance metrics

| Description | Current | Prior | Change | Benchmark |
|---|---|---|---|---|
| Avg subscribers per month | 1,045 | | | |
| Avg members per month | 1,513 | | | |
| Avg patients per month | 516 | | | |
| Pct members utilizing benefit | 34.2% | | | |
| Average members age | 40.0 | | | 35.6 |
| Total Rxs | 14,816 | | | |
| Total adjusted Rxs | 23,979 | | | |
| Total adjusted home delivery Rxs | 1,041 | | | |
| Total gross cost | $3,224,653 | | | |
| Total member cost | $526,027 | | | |
| Total plan cost | $2,698,625 | | | |
| Plan cost PMPM | $149 | | | $191 |
| Specialty plan cost PMPM | $59 | | | $102 |
| Specialty percent of plan cost | 39.8% | | | 53.5% |
| Member cost % | 16.3% | | | 9.0% |
| Net member cost % | 10.7% | | | 6.7% |
| Total days | 694,571 | | | |
| Formulary compliance rate | 98.5% | | | 97.8% |
| Home delivery utilization | 4.8% | | | 7.2% |
| Generic fill rate | 88.6% | | | 87.0% |
| Generic conversion rate | 99.3% | | | |

37

33

Benchmark: Commercial Book of Business

Prior Period: N/A
Current Period: Incurred July 2025 - June 2026 paid through August 2026

## Adherence report

| PDC report period | Client | Unique patients | Overall PDC |
|---|---|---|---|
| 07/01/2025 - 06/30/2026 | LYON COUNTY SCHOOL DISTRICT | 624 | 84.4% |

| Therapeutic category/drug class | Patient count | Female count | Male count | Avg age | 0-19% PDC | 20-39% PDC | 40-59% PDC | 60-70% PDC | 80-100% PDC | Target PDC | Client PDC | Bmrk PDC |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Anticoagulation (Atrial Fibrillation Only) | 6 | 3 | 3 | 73 | | | | | 6 | 80.0% | 98.2% | 89.8% |
| Antiobesity (All classes) | 9 | 9 | | 53 | | 3 | 5 | 4 | 2 | 80.0% | 56.8% | 71.7% |
| Anxiety Disorders | 113 | 97 | 16 | 43 | 2 | 8 | 23 | 34 | 93 | 80.0% | 86.7% | 84.1% |
| Asthma | 30 | 24 | 6 | 55 | | 1 | 5 | 9 | 23 | 75.0% | 87.8% | 73.8% |
| Attention Deficit Hyperactivity Disorder (ADHD) | 33 | 27 | 6 | 38 | | 5 | 6 | 14 | 20 | 80.0% | 81.4% | 74.4% |
| Behavioral Health | 19 | 15 | 4 | 42 | | 1 | 5 | 7 | 14 | 80.0% | 83.3% | 83.8% |
| Cholesterol | 109 | 63 | 46 | 57 | 1 | 2 | 7 | 24 | 99 | 80.0% | 93.2% | 89.5% |
| Chronic Obstructive Pulmonary Disease (COPD) | 2 | 2 | | 57 | | 1 | 1 | 2 | 1 | 80.0% | 67.4% | 77.6% |
| Depression | 63 | 52 | 11 | 41 | 1 | 2 | 10 | 19 | 54 | 80.0% | 89.6% | 85.6% |
| Diabetes | 53 | 34 | 19 | 56 | | 1 | 3 | 10 | 49 | 80.0% | 94.2% | 90.3% |
| Diabetic Test Strips | 4 | 3 | 1 | 33 | | 2 | 3 | 3 | | 80.0% | 48.1% | 68.7% |
| Glaucoma | 4 | 3 | 1 | 64 | 1 | | 1 | 2 | 3 | 80.0% | 84.5% | 78.7% |
| Hypertension | 142 | 93 | 49 | 56 | | 4 | 12 | 34 | 133 | 80.0% | 91.5% | 89.7% |
| Oral Anticoagulants | 21 | 11 | 10 | 60 | | 1 | 1 | 2 | 20 | 80.0% | 92.9% | 87.6% |
| Oral Oncology Agents (Non-Specialty) | 5 | 5 | | 55 | | 1 | 1 | 1 | 4 | 80.0% | 93.3% | 83.2% |
| PCSK9 Inhibitors | 2 | 1 | 1 | 63 | | | | | 2 | 80.0% | 98.3% | 85.9% |
| Rheumatoid Arthritis (Non-Infused Only) | 9 | 7 | 2 | 57 | | | 2 | 4 | 7 | 80.0% | 87.6% | 84.2% |





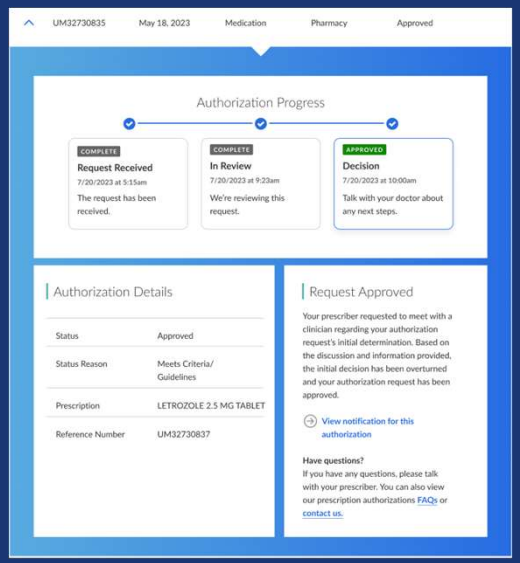
34

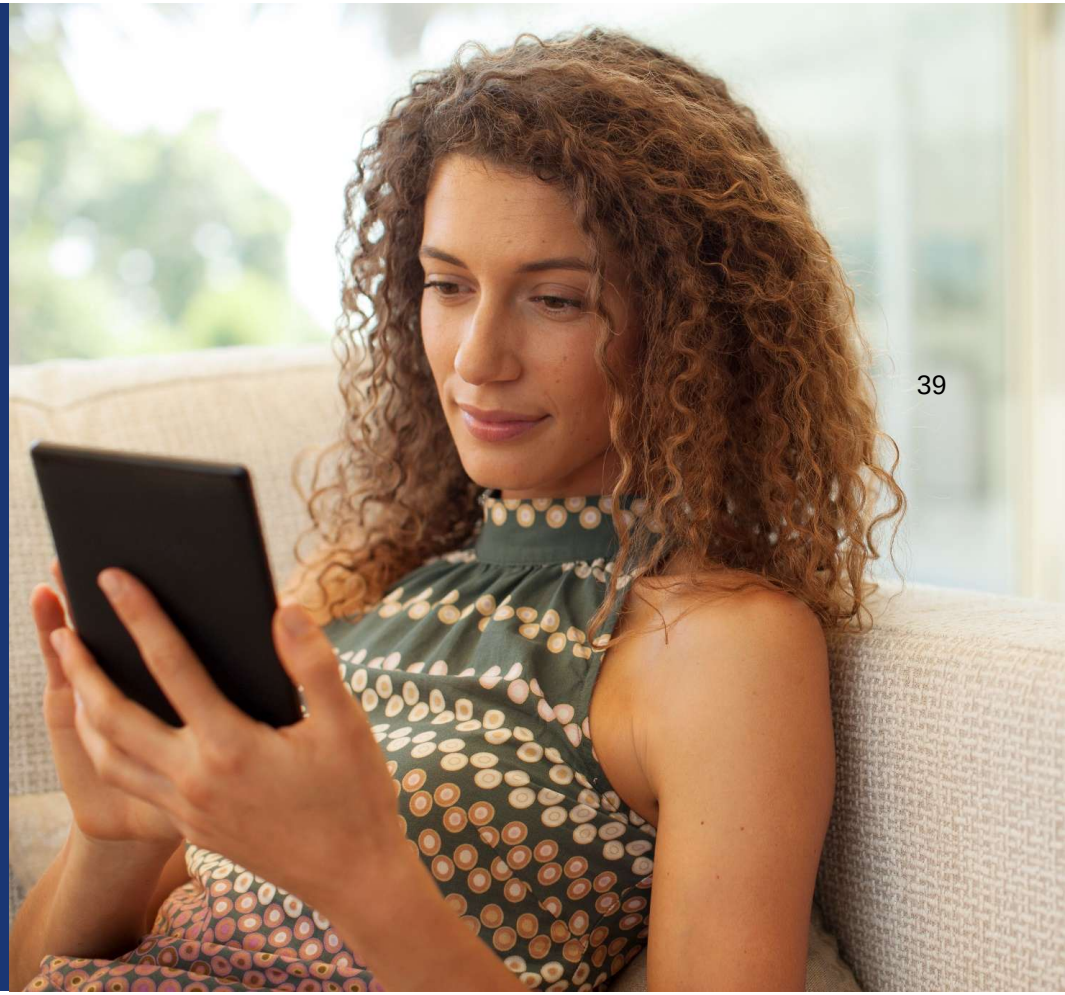
# What’s new with Prior Authorization Tracker at anthem.com

## Prior Authorization Tracker

We're enhancing the member experience by providing greater visibility into the authorization process and offering detailed explanations of their status.

Members can now view pharmacy authorization details using a tracker on the web portal at anthem.com.



# Financial Overview (Medical)

| | Current | Benchmark | Current Period Variance to Benchmark |
|---|---|---|---|
| Members | 1,513 | | |
| Employees | 1,045 | | |
| Contract Size | 1.4 | 1.9 | -23.9% |
| Average Age | 40.1 | 37.0 | 8.5% |
| Risk Score | 1.39 | 1.36 | 2.6% |
| Medical Allowed PMPM | $545.49 | $624.82 | -12.7% |
| Plan Paid Cost Share % | 81.1% | 75.8% | |
| Total Paid Amount | $8,036,427 | | |
| Medical Paid PEPM | $640.97 | $901.71 | -28.9% |
| Medical Paid PMPM | $442.58 | $473.90 | -6.6% |
| In Network Discounts | 60.4% | | |
| Percent Paid In Network | 98.2% | | |
| HCC PMPM | $173.75 | $229.97 | -24.4% |
| Non-HCC PMPM | $268.83 | $243.94 | 10.2% |

40



Current Period: Incurred July 2025 - June 2026, paid through August 2026

# Financial Overview (Medical & Pharmacy)

| | Current | Benchmark | Current Period Variance to Benchmark |
|---|---|---|---|
| Members | 1,513 | | |
| Employees | 1,045 | | |
| Contract Size | 1.4 | 1.9 | -23.9% |
| Average Age | 40.1 | 37.0 | 8.5% |
| Risk Score | 1.39 | 1.36 | 2.6% |
| Medical Allowed PMPM | $545.49 | $624.82 | -12.7% |
| Plan Paid Cost Share % | 81.1% | 75.8% | |
| Total Paid Amount | $10,735,039 | | |
| Medical Paid PEPM | $640.97 | $901.71 | -28.9% |
| Pharmacy Paid PEPM | $215.23 | $338.17 | -36.4% |
| Total Paid PEPM | $856.20 | $1239.87 | -30.9% |
| Medical Paid PMPM | $442.58 | $473.90 | -6.6% |
| Pharmacy Paid PMPM | $148.62 | $190.73 | -22.1% |
| Total Paid PMPM | $591.20 | $664.63 | -11.0% |
| In Network Discounts | 60.4% | | |
| Percent Paid In Network | 98.2% | | |
| Total HCC PMPM | $220.71 | $325.43 | -32.2% |
| Total Non-HCC PMPM | $370.50 | $339.21 | 9.2% |

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Current Period: Incurred July 2025 - June 2026, paid through August 2026

# Behavioral Health Details

**$34.70**
**Paid PMPM**

## Population

**314**
**BH Claimants**
**18.4%**
**of Membership**
(14.5% bmrk)

**84%**
Members with a
**PCP Visit**
(83% bmrk)

## Conditions

Prevalence: claimants per 1,000

| 87.2 | 68.7 | 39.7 |
|---|---|---|
| **Anxiety** | **Depression** | **Adjustment Disorder** |
| 7.8% of members | 6.1% of members | 3.5% of members |
| (6.2%) | (3.9%) | (2.3%) |

Spend: PMPM

| $9.20 | $7.73 | $3.87 |
|---|---|---|
| **Depression** | **Anxiety** | **Alcohol and Drug** |
| 26.5% of BH spend | 22.3% of BH spend | 11.2% of BH spend |
| (22.3%) | (17.1%) | (14.2%) |

## Relationship

claimants per 1,000

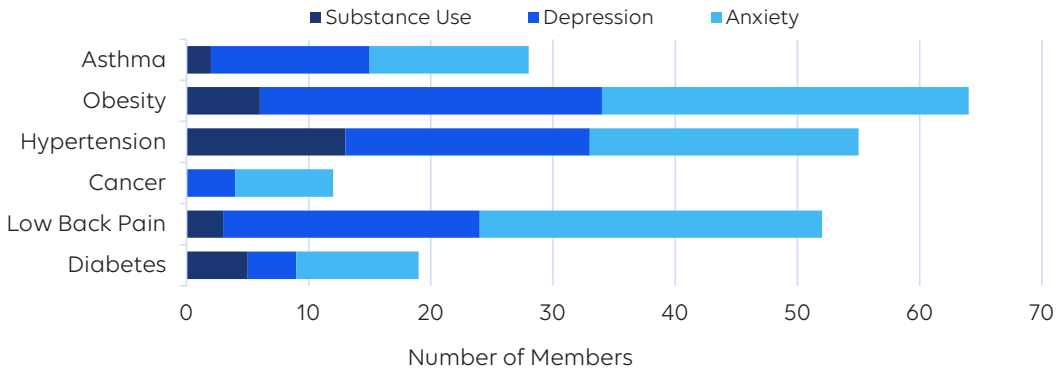
| 219.2 | 160.5 | 191.5 |
|---|---|---|
| **Employee** | **Spouse** | **Dependent** |
| 72.7% of BH claimants | 6.0% of BH claimants | 21.3% of BH claimants |
| (51.7%) | (17.6%) | (17.6%) |

Spend: PMPM

| $9.20 | $7.73 | $3.87 |
|---|---|---|
| **Employee** | **Spouse** | **Dependent** |
| 43.9% of BH spend | 6.6% of BH spend | 49.5% of BH spend |
| (40.0%) | (14.2%) | (45.8%) |

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## Chronic Conditions BH Comorbidity




**50.3%**

of members with a behavioral health diagnosis have at least one other chronic condition

Patients with medical and behavioral condition comorbidity cost more and are less compliant with key condition management actions (e.g., medication compliance, etc.)

( ) = Benchmark

# Place of Service Detail

| | Current | Benchmark | Current Period Variance to Benchmark |
|---|---|---|---|
| **Inpatient Facility** | | | |
| Acute Admissions per 1,000 | 46.5 | 51.4 | -9.5% |
| Acute Days per 1,000 | 219.9 | 261.7 | -16.0% |
| Average Length of Stay – Acute | 4.7 | 5.1 | -7.1% |
| Paid Amount per Acute Admit | $25,530 | $27,622 | -7.6% |
| Inpatient Paid Amount | $1,795,250 | | |
| Inpatient Paid PMPM | $98.87 | $119.68 | -17.4% |
| **Outpatient Facility** | | | |
| ED Visits per 1,000 | 352.0 | 209.1 | 68.4% |
| ED Paid Amount per Visit | $1,973 | $2,249 | -12.3% |
| Total Outpatient Visits per 1000 | 2389.5 | 1647.5 | 45.0% |
| Total Paid Amount per Visit | $907 | $1,378 | -34.2% |
| Total Outpatient Paid Amount | $3,280,729 | | |
| Total Outpatient PMPM | $180.68 | $189.24 | -4.5% |
| **Professional** | | | |
| **Primary Care** | | | |
| Visits per 1,000 | 2744.6 | 2523.6 | 8.8% |
| Paid Amount per Visit | $163 | $153 | 6.8% |
| **Specialty Care** | | | |
| Visits per 1,000 | 7886.9 | 8099.8 | -2.6% |
| Paid Amount per Visit | $191 | $197 | -2.8% |
| Total Professional Paid Amount | $2,960,448 | | |
| Total Professional PMPM | $163.04 | $164.98 | -1.2% |
| **Total** | | | |
| Paid Amount | $8,036,427 | | |
| Total Medical PMPM | $442.58 | $473.90 | -6.6% |

# Inpatient Drilldown

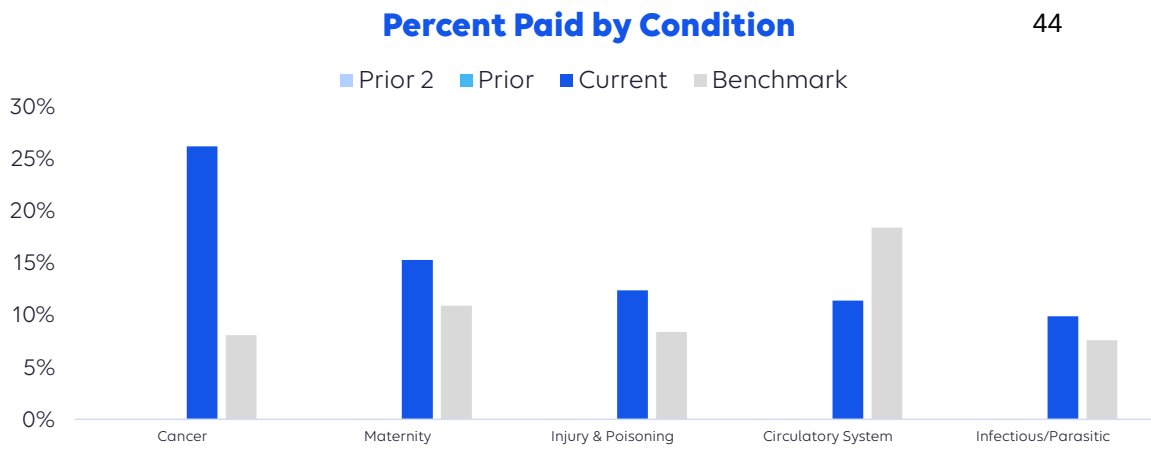
| Inpatient Facility | Current | Benchmark | Current Period Variance to Benchmark |
|---|---|---|---|
| Acute Admissions | 70 | | |
| Acute Admissions per 1,000 | 46.5 | 51.4 | -9.5% |
| Acute Days per 1,000 | 219.9 | 261.7 | -16.0% |
| Average Length of Stay - Acute | 4.7 | 5.1 | -7.1% |
| Paid Amount per Acute Admit | $25,530 | $27,622 | -7.6% |
| Inpatient Paid Amount | $1,795,250 | | |
| Inpatient Paid PMPM | $98.87 | $119.68 | -17.4% |

**Medical admissions** represented the largest share of inpatient spend at 38.9%, (36.3% benchmark)

- Primary component: 44.8% on Cancer

**Surgical admissions** represented the second largest share of inpatient spend at 29.0%, (42.7% benchmark)

- Primary component: 42.9% on Injury & Poisoning



# Outpatient Drilldown

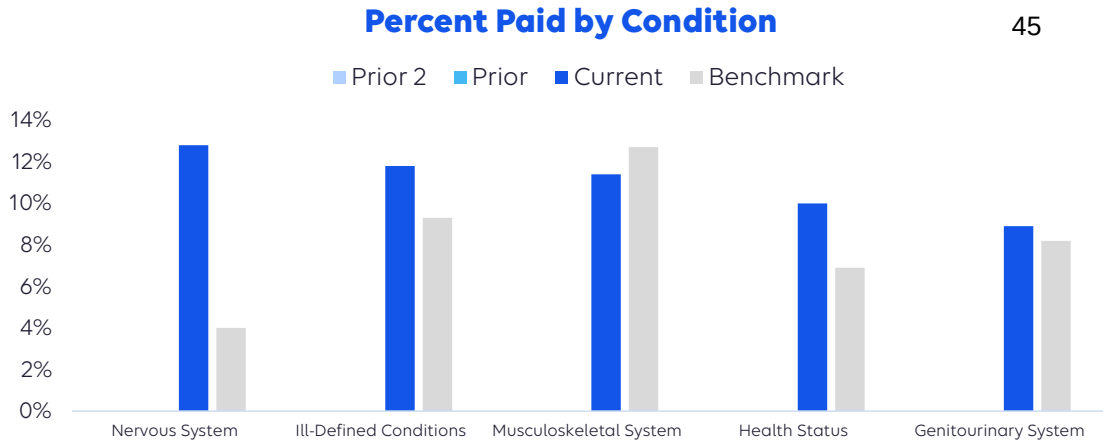
| Outpatient Facility | Current | Benchmark | Current Period Variance to Benchmark |
|---|---|---|---|
| ED Visits | 533 | | |
| ED Visits per 1,000 | 352.0 | 209.1 | 68.4% |
| ED Paid Amount per Visit | $1,973 | $2,249 | -12.3% |
| Total Outpatient Visits per 1000 | 2,390 | 1,648 | 45.0% |
| Total Paid Amount per Visit | $907 | $1,378 | -34.2% |
| Total Outpatient Paid Amount | $3,280,729 | | |
| Total Outpatient PMPM | $180.68 | $189.24 | -4.5% |

**Emergency Room** represented the largest share of outpatient spend at 32.0%, (20.7% benchmark)

- Primary component: 24.8% on Ill-Defined Conditions

**Surgery** accounted for the second largest share of spend at 29.2%, (37.8% benchmark)

- Primary component: 25.3% on Musculoskeletal System



# Professional Drilldown

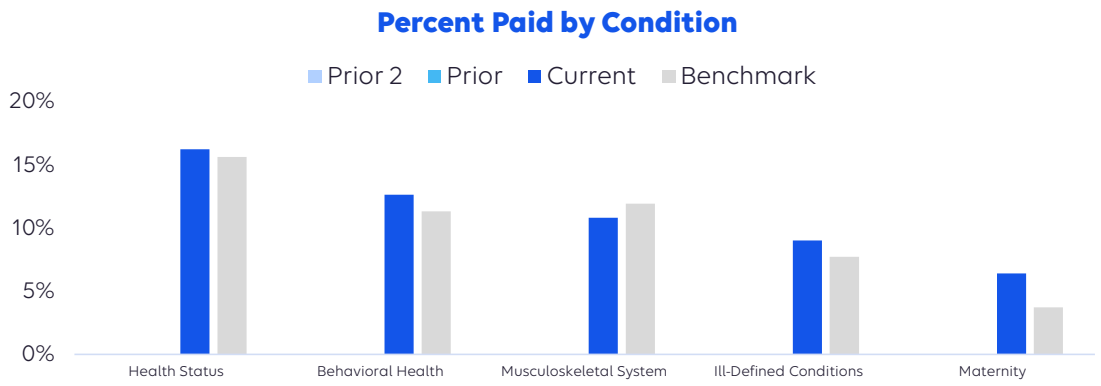
| Total Professional | Current | Benchmark | Current Variance to Benchmark |
|---|---|---|---|
| **Professional** | | | |
| Primary Care | | | |
| Primary Care Visits | 4,153 | | |
| Visits per 1,000 | 2,744.6 | 2,523.6 | 8.8% |
| Paid Amount per Visit | $163 | $153 | 6.8% |
| **Specialty Care** | | | |
| Specialty Care Visits | 11,934 | | |
| Visits per 1,000 | 7,886.9 | 8,099.8 | -2.6% |
| Paid Amount per Visit | $191 | $197 | -2.8% |
| Total Professional Paid Amount | $2,960,448 | | |
| Total Professional PMPM | $163.04 | $164.98 | -1.2% |

**Office/Home Visits** represented the largest share of professional spend at 26.5%, (17.6% benchmark)

- Primary component: 12.7% on Ill-Defined Conditions

**Op Surgery** accounted for the second largest share of spend at 13.7%, (14.0% benchmark)

- Primary component: 23.9% on Musculoskeletal System



# Generational Segmentation

Anthem can connect in ways your employees prefer with meaningful, personalized connections.

| | Gen A<br>>2009<br>**7.7%** of Spend<br>**11.8%** of Members | Gen Z<br>1997-2009<br>**15.3%** of Spend<br>**17.2%** of Members | Millennials<br>1981-1996<br>**17.5%** of Spend<br>**25.0%** of Members | Gen X<br>1965-1980<br>**44.7%** of Spend<br>**34.3%** of Members | Baby Boomers<br>1946-1964<br>**13.9%** of Spend<br>**11.0%** of Members |
|---|---|---|---|---|---|
| **Most-costly Health Condition** | Circulatory (Behavioral Health) | Behavioral Health (Behavioral Health) | Maternity (Maternity) | Cancer (Cancer) | Musculoskeletal (Cancer) |
| **Most prevalent Chronic Condition*** | Asthma (Anxiety) | Obesity (Anxiety) | Obesity (Obesity) | Hypertension (Hypertension) | Hypertension (Hypertension) |
| **Average Cost PMPM** | $288 ($242) | $394 ($264) | $310 ($413) | $576 ($661) | $556 ($832) |
| **% of Members with a PCP Visit** | 71.6% (74.6%) | 46.8% (51.0%) | 66.4% (57.3%) | 78.8% (67.3%) | 79.8% (63.7%) |
| **% Digital Engagement**** | 0.0% (12.3%) | 37.3% (33.3%) | 62.4% (63.8%) | 64.3% (59.0%) | 53.9% (49.7%) |
| **% Comprehensively Engaged** | 26.6% (53.0%) | 62.0% (64.1%) | 85.3% (82.3%) | 86.7% (84.0%) | 85.6% (73.4%) |
| **Annual Wellness Compliance Rate** | 47.3% (65.9%) | 30.0% (38.8%) | 41.1% (53.7%) | 49.5% (76.8%) | 49.0% (75.2%) |

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( ) = Benchmark

**Digital engagement rates exclude members under 18

*Enhanced logic identifies members with comorbid conditions by looking out to 10 diagnosis fields





Current Period: Incurred July 2025 - June 2026, paid through August 2026

# Top 10 Medical Specialty Drugs ranked by spend

The top 10 medical specialty drugs accounted for 93.6% of the total medical specialty drug spend in the current period.

| Current Rank | Drug Name | Drug Indication | Spend | Utilizers |
|---|---|---|---|---|
| | | | Current | Current |
| 1 | Vyepti | Misc Conditions | $119,480 | 2 |
| 2 | Tysabri | Multiple Sclerosis | $80,008 | 1 |
| 3 | Hizentra | Immune Deficiency | $48,152 | 1 |
| 4 | Spravato | Depression | $40,149 | 1 |
| 5 | Botox / Botox Cosmetic | Neuromuscular Conditions/Cosmetic | $39,594 | 11 |
| 6 | Enhertu | Cancer | $33,308 | 1 |
| 7 | Levonorgestrel (Iud)* | Contraceptives | $19,670 | 15 |
| 8 | Briumvi | Multiple Sclerosis | $19,656 | 1 |
| 9 | Thyrogen | Diagnostic Aids | $9,030 | 1 |
| 10 | Zarxio | Hematopoietic Agents | $8,765 | 1 |
| **Top 10 Total** | | | **$417,811** | **35** |

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# Top 10 Medical Specialty Drug Claimants

- The **top 10** medical specialty claimants with >$100K in medical specialty drug spend are listed below. These claimants accounted for 24% of the total medical specialty spend in the current period.
- The **total HCC impact** for utilizers with >$100K in SpRx spend increased from 0 to 1 utilizers and accounted for 24% of total medical SpRx spend.

| Claimant | Medical Condition Category | Drug Name | Drug Indication | Top 10 HCC? | SpRx Current Spend | SpRx % of total medical spend per claimant |
|---|---|---|---|---|---|---|
| 1 | Nervous System | Vyepti | Misc Conditions | HCC #2 | **$108,986** | 39% |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |

49

The highest spend condition categories, drug names, and drug indications are listed; however, members may have spend in more than one

SpRx refers to medical specialty drugs

# Potentially Impactable Condition Details*

| | Diabetes | CAD | Hypertension | Low Back Pain | Obesity |
|---|---|---|---|---|---|
| | **127** claimants<br>**7%** of members | **28** claimants<br>**2%** of members | **279** claimants<br>**16%** of members | **195** claimants<br>**11%** of members | **295** claimants<br>**17%** of members |
| **% of Members with a PCP** | 90.6% (86.8%) | 100.0% (82.3%) | 92.8% (88.1%) | 90.8% (84.0%) | 92.2% (91.4%) |
| **% Comprehensively Engaged** | 90.6% (87.3%) | 92.9% (83.4%) | 93.9% (87.2%) | 91.8% (86.8%) | 89.2% (89.6%) |
| **% Digitally Engaged** | 56.0% (60.2%) | 57.1% (56.6%) | 63.0% (61.5%) | 66.8% (64.8%) | 69.4% (67.3%) |
| **% Traditionally Engaged**** | 2.4% (6.5%) | 3.6% (7.4%) | 2.5% (4.7%) | 2.6% (4.2%) | 1.4% (4.2%) |
| **% Care Gaps Closed** | 14.7% (47.9%) | 12.5% (42.7%) | 11.8% (44.5%) | 14.5% (39.0%) | 8.2% (41.0%) |
| **% Adult Wellness Compliance** | 40.9% (56.8%) | 52.6% (57.5%) | 52.4% (61.3%) | 46.7% (59.4%) | 53.4% (66.6%) |

( ) = Benchmark

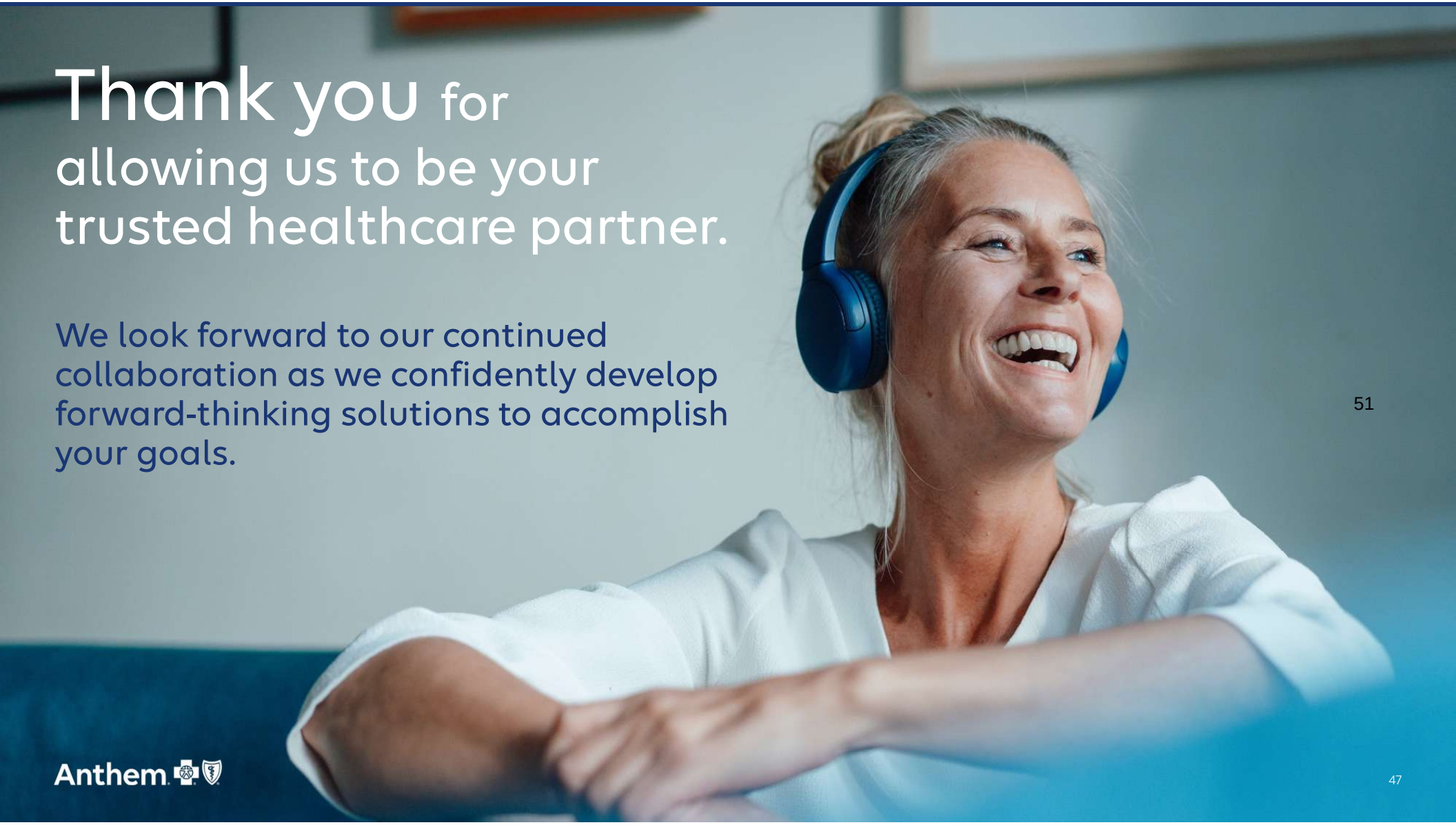
*Enhanced logic identifies members with these conditions by looking out to 10 diagnosis fields

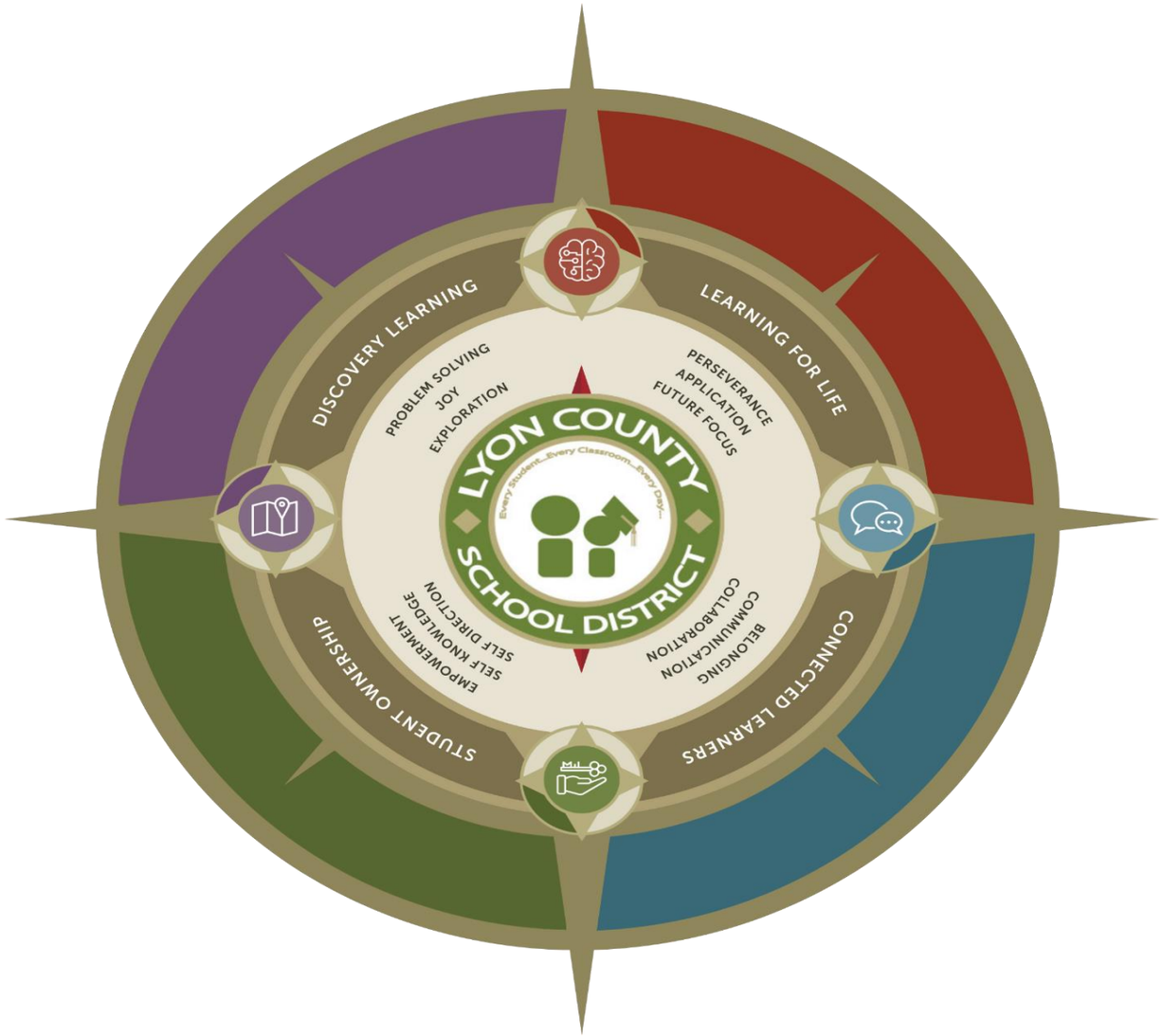
**Clinically engaged with a nurse





Current Period: Incurred July 2025 - June 2026, paid through August 2026


Thank you for
allowing us to be your
trusted healthcare partner.
We look forward to our continued collaboration as we confidently develop forward-thinking solutions to accomplish your goals.
51
Anthem
47




# Monthly Reporting Package

## Prepared For:

## Lyon County School District

**Incurred Through:**
August 2025 - July 2026

**Paid Through:**
September 2026

Presented By: INSURANCE

**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 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Aug-25 | 958 | 1,410 | $1,006,867 | $1,051 | $560,228 | $585 | $225,366 | $235 | 29% | $785,594 | $820 | 78% |
| Sep-25 | 1,030 | 1,513 | $1,074,920 | $1,044 | $492,057 | $478 | $198,687 | $193 | 29% | $690,745 | $671 | 64% |
| Oct-25 | 1,032 | 1,512 | $1,123,170 | $1,088 | $808,655 | $784 | $213,978 | $207 | 21% | $1,022,633 | $991 | 91% |
| Nov-25 | 1,055 | 1,538 | $1,096,525 | $1,039 | $644,507 | $611 | $183,207 | $174 | 22% | $827,713 | $785 | 75% |
| Dec-25 | 1,064 | 1,545 | $1,119,683 | $1,052 | $760,748 | $715 | $237,763 | $223 | 24% | $998,511 | $938 | 89% |
| Jan-26 | 1,061 | 1,541 | $1,121,062 | $1,057 | $800,920 | $755 | $246,500 | $232 | 24% | $1,047,420 | $987 | 93% |
| Feb-26 | 1,061 | 1,527 | $1,125,380 | $1,061 | $589,776 | $556 | $210,040 | $198 | 26% | $799,816 | $754 | 71% |
| Mar-26 | 1,059 | 1,524 | $1,110,028 | $1,048 | $445,618 | $421 | $241,442 | $228 | 35% | $687,060 | $649 | 62% |
| Apr-26 | 1,060 | 1,521 | $1,109,061 | $1,046 | $523,605 | $494 | $249,571 | $235 | 32% | $773,176 | $729 | 70% |
| May-26 | 1,056 | 1,513 | $1,101,739 | $1,043 | $715,981 | $678 | $249,954 | $237 | 26% | $965,935 | $915 | 88% |
| Jun-26 | 1,055 | 1,512 | $1,098,759 | $1,041 | $822,796 | $780 | $307,320 | $291 | 27% | $1,130,116 | $1,071 | 103% |
| Jul-26 | 1,047 | 1,511 | $1,201,962 | $1,148 | $683,962 | $653 | $286,164 | $273 | 29% | $970,126 | $927 | 81% |
| Total | | | $13,289,158 | | $7,848,852 | | $2,849,991 | | 27% | $10,698,843 | | 81% |
| Average | 1,045 | 1,514 | | $1,060 | | $626 | | $227 | | | $853 | |

**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 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Aug-24 | 973 | 1,409 | $877,513 | $902 | $490,636 | $504 | $257,893 | $265 | 34% | $748,529 | $769 | 85% |
| 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 | 1,047 | 1,502 | $1,083,633 | $1,035 | $794,317 | $759 | $133,416 | $127 | 14% | $927,733 | $886 | 86% |
| Total | | | $11,329,531 | | $8,240,033 | | $2,787,824 | | 25% | $11,027,857 | | 97% |
| Average | 1,042 | 1,488 | | $906 | | $658 | | $223 | | | $881 | |

**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** | 1,045 | 1,514 | $1,060 | $626 | $227 | 26.6% | $853 | 80.5% |
| **Prior** | 1,042 | 1,488 | $906 | $658 | $223 | 25.3% | $881 | 97.3% |
| **Change %** | 0.3% | 1.8% | 17.0% | -5.0% | 1.9% | 1.4% | -3.2% | -16.8% |

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

## Large Claimant Claim Progression - Most Recent 12 Months

| Claimant Number | Age | Active (Y/N) | Gender | Health Condition Category | Primary Medical Diagnosis | Claim Type | Aug-25 | Sep-25 | Oct-25 | Nov-25 | Dec-25 | Jan-26 | Feb-26 | Mar-26 | Apr-26 | May-26 | Jun-26 | Jul-26 | Total | Grand Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | Ages 45-54 | Y | F | Nervous System | Sleep Disorders | Medical | $4,663 | $878 | $24,356 | $7,912 | $22,148 | $3,195 | $2,048 | $26,555 | $2,707 | $1,092 | $159,997 | $14,190 | $269,741 | $287,906 |
| | | | | | | Rx | $1,632 | $87 | $1,383 | $2,842 | $1,433 | $1,477 | $1,206 | $1,233 | $1,268 | $2,834 | $1,362 | $1,410 | $18,165 | |
| 2 | Ages 45-54 | N | F | Neoplasms - Malignant | Malignant Neoplasm Of Brain | Medical | $438 | $2,200 | $172,703 | $781 | $46,576 | $1,005 | $44,172 | $5,351 | $3,797 | $0 | $0 | $0 | $277,023 | $278,888 |
| | | | | | | Rx | $1,610 | $0 | $51 | $54 | $150 | $0 | $1 | $0 | $0 | $0 | $0 | $0 | $1,866 | |
| 3 | Ages 12-17 | Y | M | Circulatory System | Cardiomyopathy | Medical | $0 | $759 | $0 | $0 | $0 | $230,383 | $939 | $1,601 | $1,067 | $680 | $0 | $196 | $235,625 | $236,134 |
| | | | | | | Rx | $0 | $0 | $0 | $0 | $0 | $89 | $51 | $185 | $0 | $185 | $0 | $0 | $509 | |
| 4 | Ages 18-25 | Y | M | Injury & Poisoning | Comp Intrl Ortho Pros Dev Impl Gft | Medical | $0 | $0 | $0 | $176 | $779 | $0 | $304 | $0 | $210 | $215,254 | $88 | $0 | $216,811 | $216,811 |
| | | | | | | Rx | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | |
| 5 | Ages 18-25 | Y | M | Injury & Poisoning | Injury Of Unspecified Body Region | Medical | $46,213 | $20,920 | $5,641 | $4,861 | $22,328 | $97 | $40,103 | $628 | $3,210 | $98 | $5,126 | $8,190 | $157,415 | $208,311 |
| | | | | | | Rx | $1,317 | $770 | $1,032 | $1,167 | $9,136 | $4,537 | $3,911 | $6,841 | $5,629 | $6,469 | $4,152 | $5,934 | $50,896 | |
| 6 | Ages 45-54 | Y | F | Endocrine/Metabolic | Other Hypothyroidism | Medical | $425 | $562 | $451 | $311 | $1,716 | $129 | $215 | $208 | $329 | $2,755 | $15 | $276 | $7,390 | $167,304 |
| | | | | | | Rx | $1,110 | $3,284 | $4 | $4 | $3,246 | $0 | $11,620 | $15,010 | $11,701 | $30,063 | $55,500 | $28,373 | $159,914 | |
| 7 | Ages 65+ | N | M | Infectious/Parasitic | Other Sepsis | Medical | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $3,698 | $4,865 | $22,627 | $125,607 | $0 | $156,797 | $156,900 |
| | | | | | | Rx | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $12 | $28 | $63 | $0 | $103 | |
| 8 | Ages 18-25 | Y | F | Behavioral Health | Maj Depress D/O Recurrent | Medical | $9,790 | $7,878 | $21,823 | $19,265 | $29,570 | $17,586 | $7,376 | $6,324 | $3,922 | $6,396 | $4,460 | $4,644 | $139,034 | $147,758 |
| | | | | | | Rx | $32 | $0 | $1,841 | $1,825 | $129 | $1,679 | $2,275 | $660 | $170 | $0 | $95 | $17 | $8,723 | |
| 9 | Ages 55-64 | Y | F | Nervous System | Other Disorders Of Brain | Medical | $6,858 | $8,956 | $1,499 | $1,731 | $1,851 | $3,085 | $571 | $191 | $3,894 | $0 | $16,641 | $83,320 | $128,597 | $145,972 |
| | | | | | | Rx | $0 | $17,103 | $109 | $5 | $17 | $0 | $0 | $0 | $0 | $0 | $21 | $120 | $17,375 | |
| 10 | Ages 55-64 | N | F | Infectious/Parasitic | Other Sepsis | Medical | $23,051 | $12,268 | $16,434 | $78,960 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $130,713 | $132,019 |
| | | | | | | Rx | $613 | $669 | $25 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $1,306 | |

## Large Claimant Claim Progression - Most Recent 12 Months

| Claimant Number | Age | Active (Y/N) | Gender | Health Condition Category | Primary Medical Diagnosis | Claim Type | Aug-25 | Sep-25 | Oct-25 | Nov-25 | Dec-25 | Jan-26 | Feb-26 | Mar-26 | Apr-26 | May-26 | Jun-26 | Jul-26 | Total | Grand Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 11 | Ages 45-54 | Y | M | Circulatory System | Chronic Ischemic Heart Disease | Medical | $0 | $610 | $95,695 | $328 | $189 | $0 | $0 | $2,123 | $914 | $0 | $6,171 | $12,356 | $118,386 | $118,514 |
| | | | | | | Rx | $0 | $0 | $0 | $0 | $59 | $0 | $0 | $21 | $21 | $21 | $0 | $6 | $128 | |
| 12 | Ages 55-64 | Y | F | Nervous System | Multiple Sclerosis | Medical | $184 | $9,236 | $9,249 | $5,390 | $9,392 | $5,995 | $7,936 | $9,547 | $9,650 | $9,725 | $9,810 | $14,853 | $100,967 | $117,492 |
| | | | | | | Rx | $13 | $13 | $3,374 | $84 | $3,177 | $0 | $9 | $3,125 | $0 | $3,258 | $112 | $3,359 | $16,525 | |
| 13 | Ages 65+ | Y | F | Neoplasms - Benign | Benign Neoplasm Of Meninges | Medical | $440 | $1,323 | $2,779 | $1,894 | $170 | $97,686 | $268 | $953 | $888 | $1,191 | $0 | $1,640 | $109,233 | $109,262 |
| | | | | | | Rx | $0 | $0 | $0 | $0 | $0 | $0 | $16 | $0 | $7 | $0 | $7 | $0 | $29 | |
| 14 | Ages 55-64 | Y | F | Infectious/Parasitic | Other Sepsis | Medical | $1,527 | $1,103 | $229 | $1,369 | $1,505 | $1,672 | $2,607 | $1,129 | $1,143 | $57,663 | $5,611 | $2,219 | $77,776 | $96,611 |
| | | | | | | Rx | $2,407 | $771 | $334 | $2,257 | $2,352 | $889 | $1,160 | $1,172 | $3 | $2,859 | $3,615 | $1,015 | $18,835 | |
| 15 | Ages 55-64 | Y | M | Diseases of the Blood | Sarcoidosis | Medical | $4,870 | $2,658 | $294 | $842 | $1,731 | $232 | $1,122 | $1,234 | $1,560 | $180 | $197 | $172 | $15,091 | $96,322 |
| | | | | | | Rx | $19 | $272 | $12,478 | $6,383 | $6,511 | $6,716 | $6,427 | $6,427 | $6,785 | $6,497 | $7,681 | $15,036 | $81,232 | |
| 16 | Ages 55-64 | Y | F | Injury & Poisoning | Superficial Inj Wrist Hand Finger | Medical | $13,612 | $499 | $0 | $0 | $329 | $223 | $0 | $370 | $5,072 | $1,508 | $663 | $1,985 | $24,263 | $87,981 |
| | | | | | | Rx | $520 | $406 | $377 | $360 | $431 | $7,956 | $7,077 | $9,243 | $14,231 | $1,831 | $8,049 | $13,237 | $63,718 | |
| 17 | Ages 45-54 | Y | F | Genitourinary System | Inflammatory Disease Cervix Uteri | Medical | $784 | $446 | $0 | $1,706 | $0 | $2,801 | $2,090 | $9,096 | $32,854 | $6,608 | $30,849 | $0 | $87,234 | $87,335 |
| | | | | | | Rx | $0 | $0 | $0 | $0 | $0 | $0 | $55 | $0 | $0 | $20 | $26 | $0 | $101 | |
| 18 | Ages 65+ | N | M | Neoplasms - Malignant | Malignant Neoplasm Of Prostate | Medical | $0 | $60 | $598 | $296 | $0 | $133 | $142 | $223 | $711 | $0 | $407 | $0 | $2,569 | $84,998 |
| | | | | | | Rx | $17,966 | $12,798 | $12,803 | $34 | $0 | $7,513 | $7,518 | $7,513 | $8,772 | $0 | $7,514 | $0 | $82,429 | |
| 19 | Ages 55-64 | Y | M | Circulatory System | Atrial Fibrillation And Flutter | Medical | $0 | $43 | $0 | $187 | $0 | $207 | $77,130 | $250 | $33 | $229 | $0 | $34 | $78,113 | $84,211 |
| | | | | | | Rx | $608 | $608 | $1,215 | $608 | $2 | $334 | $407 | $1,095 | $17 | $18 | $1,139 | $48 | $6,098 | |
| 20 | Ages 55-64 | Y | F | Health Status | Enc Screening Malignant Neoplasms | Medical | $0 | $511 | $0 | $370 | $0 | $0 | $0 | $0 | $0 | $0 | $67 | $88 | $1,035 | $84,157 |
| | | | | | | Rx | $6,713 | $5,620 | $5,620 | $5,620 | $5,620 | $12,076 | $6,038 | $0 | $6,109 | $6,109 | $7,777 | $15,817 | $83,121 | |

## Large Claimant Claim Progression - Most Recent 12 Months

| Claimant Number | Age | Active (Y/N) | Gender | Health Condition Category | Primary Medical Diagnosis | Claim Type | Aug-25 | Sep-25 | Oct-25 | Nov-25 | Dec-25 | Jan-26 | Feb-26 | Mar-26 | Apr-26 | May-26 | Jun-26 | Jul-26 | Total | Grand Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 21 | Ages 55-64 | Y | F | Musculoskeletal System | Osteoarthritis Of Hip | Medical | $16,757 | $480 | $102 | $541 | $63,513 | $21 | $0 | $0 | $0 | $0 | $618 | $0 | $82,031 | $83,006 |
| | | | | | | Rx | $0 | $209 | $0 | $0 | $13 | $209 | $0 | $0 | $209 | $0 | $88 | $247 | $974 | |
| 22 | Ages 55-64 | Y | F | Musculoskeletal System | Osteoarthritis Of Knee | Medical | $460 | $2,230 | $0 | $71 | $635 | $313 | $123 | $0 | $0 | $14,560 | $655 | $231 | $19,279 | $79,788 |
| | | | | | | Rx | $4,706 | $5,104 | $5,582 | $0 | $5,104 | $6,446 | $6,446 | $2,318 | $5,288 | $6,447 | $6,468 | $6,600 | $60,510 | |
| 23 | Ages 35-44 | Y | F | Endocrine/Metabolic | Overweight And Obesity | Medical | $161 | $0 | $0 | $0 | $1,421 | $351 | $244 | $165 | $16 | $14,006 | $413 | $486 | $17,263 | $79,779 |
| | | | | | | Rx | $0 | $0 | $0 | $0 | $0 | $20,607 | $20,607 | $0 | $0 | $21,179 | $122 | $0 | $62,516 | |
| 24 | Ages 55-64 | Y | F | Neoplasms - Malignant | Malignant Neoplasm Of Breast | Medical | $10,504 | $5,102 | $53,741 | $3,368 | $290 | $248 | $0 | $50 | $0 | $0 | $619 | $0 | $73,923 | $74,001 |
| | | | | | | Rx | $25 | $0 | $0 | $25 | $0 | $0 | $28 | $0 | $0 | $0 | $0 | $0 | $77 | |
| 25 | Ages 45-54 | Y | M | Diseases of the Blood | Common Variable Immunodeficiency | Medical | $4,894 | $5,069 | $5,442 | $5,998 | $5,175 | $1,055 | $4,170 | $4,638 | $5,230 | $5,601 | $6,018 | $4,702 | $57,993 | $65,888 |
| | | | | | | Rx | $2,238 | $0 | $220 | $2,389 | $0 | $0 | $2,093 | $0 | $850 | $37 | $24 | $43 | $7,895 | |
| 26 | Ages 55-64 | Y | F | Nervous System | Migraine | Medical | $181 | $0 | $1,925 | $0 | $296 | $698 | $1,156 | $0 | $142 | $292 | $161 | $525 | $5,377 | $63,894 |
| | | | | | | Rx | $5,333 | $7,313 | $5,879 | $5,837 | $5,755 | $7,078 | $6,110 | $6,171 | $6,267 | $59 | $1,366 | $1,349 | $58,517 | |
| 27 | Ages 26-34 | Y | F | Maternity | Pre-Exist Htn Comp Preg Cb Puerper | Medical | $0 | $92 | $0 | $76 | $6,445 | $0 | $17 | $550 | $40,491 | $14,412 | $83 | $0 | $62,165 | $62,230 |
| | | | | | | Rx | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $17 | $48 | $0 | $0 | $65 | |
| 28 | Ages 65+ | Y | F | Musculoskeletal System | Osteoporosis W/Current Path Fx | Medical | $780 | $341 | $577 | $1,603 | $886 | $34,718 | $57 | $0 | $934 | $1,384 | $3,002 | $219 | $44,502 | $61,874 |
| | | | | | | Rx | $619 | $599 | $3,671 | $599 | $3,580 | $372 | $403 | $3,632 | $403 | $3,337 | $17 | $142 | $17,373 | |
| 29 | Ages 45-54 | Y | F | Behavioral Health | Other Anxiety Disorders | Medical | $3,945 | $20 | $262 | $431 | $1,113 | $0 | $20 | $21 | $21 | $21 | $21 | $241 | $6,117 | $58,642 |
| | | | | | | Rx | $83 | $14 | $37 | $14 | $37 | $7,392 | $7,414 | $7,560 | $7,393 | $7,531 | $7,493 | $7,556 | $52,526 | |
| 30 | Ages 55-64 | Y | M | Injury & Poisoning | Comp Intrl Ortho Pros Dev Impl Gft | Medical | $2,102 | $623 | $0 | $0 | $512 | $818 | $421 | $1,507 | $14,861 | $11,421 | $1,303 | $21,573 | $55,143 | $57,692 |
| | | | | | | Rx | $134 | $0 | $0 | $0 | $4 | $0 | $19 | $78 | $707 | $812 | $38 | $758 | $2,550 | |

## Large Claimant Claim Progression - Most Recent 12 Months

| Claimant Number | Age | Active (Y/N) | Gender | Health Condition Category | Primary Medical Diagnosis | Claim Type | Aug-25 | Sep-25 | Oct-25 | Nov-25 | Dec-25 | Jan-26 | Feb-26 | Mar-26 | Apr-26 | May-26 | Jun-26 | Jul-26 | Total | Grand Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 31 | Ages 45-54 | Y | F | Ill-Defined Conditions | Abnormalities Of Heart Beat | Medical | $203 | $1,704 | $258 | $470 | $15 | $0 | $188 | $0 | $129 | $0 | $0 | $3,879 | $6,846 | $56,125 |
| | | | | | | Rx | $20 | $20 | $20 | $4,536 | $4,741 | $6,038 | $6,038 | $4,794 | $4,851 | $6,039 | $6,039 | $6,141 | $49,278 | |
| 32 | Ages 18-25 | Y | F | Maternity | Unspecified Maternal Hypertension | Medical | $319 | $319 | $511 | $5,597 | $5,504 | $5,005 | $487 | $602 | $1,381 | $976 | $30,876 | $3,334 | $54,912 | $54,940 |
| | | | | | | Rx | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $0 | $28 | $28 | |
| 33 | Ages 35-44 | Y | F | Ill-Defined Conditions | Abn Inconclusive Find Dx Imag Brst | Medical | $2,784 | $1,860 | $0 | $0 | $48 | $72 | $784 | $2,159 | $180 | $197 | $1,337 | $1,533 | $10,955 | $54,041 |
| | | | | | | Rx | $3,781 | $3,152 | $4,304 | $4,304 | $3,152 | $3,354 | $3,354 | $3,387 | $3,527 | $3,619 | $3,609 | $3,544 | $43,086 | |
| 34 | Ages 05-11 | Y | M | Neoplasms - Malignant | Lymphoid Leukemia | Medical | $193 | $4,321 | $12,613 | $13,750 | $235 | $191 | $17,309 | $283 | $142 | $145 | $1,578 | $167 | $50,926 | $52,184 |
| | | | | | | Rx | $279 | $164 | $170 | $164 | $168 | $73 | $94 | $0 | $73 | $73 | $0 | $0 | $1,258 | |
| 35 | Ages 35-44 | Y | F | Ill-Defined Conditions | Abnormalities Of Heart Beat | Medical | $0 | $43 | $0 | $32 | $0 | $3,257 | $687 | $2,730 | $248 | $5,897 | $1,924 | $4,534 | $19,352 | $51,866 |
| | | | | | | Rx | $0 | $0 | $2,499 | $1,601 | $1,601 | $2,824 | $2,348 | $8,423 | $3,070 | $1,157 | $2,423 | $6,569 | $32,514 | |
| **Grand Total** | | | | | | | **$207,918** | **$152,094** | **$490,209** | **$199,025** | **$280,792** | **$508,835** | **$315,409** | **$171,075** | **$227,980** | **$505,451** | **$539,113** | **$302,934** | | **$3,900,837** |

## Top Inpatient Facilities by Incurred Claims

| Rank | Provider Name | City | State | Unique Claimants | Amount Per Claimant | Admissions | Claim Amount | Percent Total Paid |
|---|---|---|---|---|---|---|---|---|
| 1 | RENOWN REGIONAL MEDICAL CENTER | RENO | NV | 15 | $52,462 | 18 | $786,927 | 51.0% |
| 2 | CARSON TAHOE REGIONAL MEDICAL CENTER | CARSON CITY | NV | 25 | $10,950 | 25 | $273,750 | 17.7% |
| 3 | LUCILE PACKARD CHILDREN'S HOSPITAL | PALO ALTO | CA | * | * | * | $169,820 | 11.0% |
| 4 | RENOWN SOUTH MEADOWS MEDICAL CENTER REHAB | RENO | NV | * | * | * | $70,979 | 4.6% |
| 5 | RENOWN SOUTH MEADOWS MEDICAL CENTER | RENO | NV | * | * | * | $56,826 | 3.7% |
| 6 | NORTHERN NEVADA SIERRA MEDICAL CTR | RENO | NV | * | * | * | $49,546 | 3.2% |
| 7 | SIERRA NEVADA MEMORIAL MINERS HOSPITAL | GRASS VALLEY | CA | * | * | * | $35,395 | 2.3% |
| 8 | NEW DAWN TREATMENT CENTERS | FAIR OAKS | CA | * | * | * | $28,980 | 1.9% |
| 9 | RENO BEHAVIORAL HEALTHCARE HOSPITAL | RENO | NV | * | * | * | $21,530 | 1.4% |
| 10 | NORTHWEST MEDICAL CENTER | TUCSON | AZ | * | * | * | $12,019 | 0.8% |
| 11 | BANYAN CASTLE ROCK LLC | CASTLE ROCK | CO | * | * | * | $10,210 | 0.7% |
| 12 | BANNER CHURCHILL COMMUNITY HOSPITAL | FALLON | NV | * | * | * | $10,056 | 0.7% |
| 13 | HOLYOKE CAPITAL JV | HOLYOKE | MA | * | * | * | $9,587 | 0.6% |
| 14 | NORTHERN NEVADA MEDICAL CENTER | RENO | NV | * | * | * | $4,306 | 0.3% |
| 15 | CARSON VALLEY HEALTH | GARDNERVILLE | NV | * | * | * | $2,153 | 0.1% |
| 16 | SHORTRIDGE ACADEMY LLC | MILTON | NH | * | * | * | $1,965 | 0.1% |
| | **Total Inpatient Facility In-Network** | | | | | | **$1,544,047** | **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 | RENOWN REGIONAL MEDICAL CENTER | RENO | NV | 420 | $2,154 | 1,249 | $904,677 | 27.3% |
| 2 | CARSON TAHOE REGIONAL MEDICAL CENTER | CARSON CITY | NV | 364 | $2,174 | 997 | $791,258 | 23.9% |
| 3 | BANNER CHURCHILL COMMUNITY HOSPITAL | FALLON | NV | 99 | $2,775 | 230 | $274,748 | 8.3% |
| 4 | NORTHERN NEVADA SIERRA MEDICAL CTR | RENO | NV | 17 | $14,676 | 27 | $249,491 | 7.5% |
| 5 | RENOWN SOUTH MEADOWS MEDICAL CENTER | RENO | NV | 104 | $1,998 | 170 | $207,751 | 6.3% |
| 6 | SOUTH LYON MEDICAL CENTER | YERINGTON | NV | 106 | $1,631 | 297 | $172,918 | 5.2% |
| 7 | CARSON VALLEY HEALTH | GARDNERVILLE | NV | 47 | $2,816 | 98 | $132,357 | 4.0% |
| 8 | RENO ORTHOPAEDIC SURGERY CENTER | RENO | NV | 30 | $3,155 | 37 | $94,641 | 2.9% |
| 9 | NORTHERN NEVADA MEDICAL CENTER | SPARKS | NV | 20 | $3,360 | 37 | $67,199 | 2.0% |
| 10 | THRIVE WELLNESS OF RENO | RENO | NV | * | * | 92 | $63,605 | 1.9% |
| 11 | BANNER FORT COLLINS MEDICAL CENTER | FORT COLLINS | CO | * | * | * | $59,764 | 1.8% |
| 12 | STANFORD MEDICAL CENTER | PALO ALTO | CA | * | * | * | $25,325 | 0.8% |
| 13 | CARSON ENDOSCOPY CENTER | CARSON CITY | NV | 22 | $818 | 24 | $17,990 | 0.5% |
| 14 | COMPREHENSIVE SURGICAL CARE OF RENO TAHOE | RENO | NV | * | * | * | $17,485 | 0.5% |
| 15 | RENO 1 VA CLINIC | RENO | NV | 8 | $2,020 | 23 | $16,156 | 0.5% |
| 16 | EVOLENT SPECIALTY SERVICE | CARSON CITY | NV | 11 | $1,271 | 13 | $13,985 | 0.4% |
| 17 | ADVENTHEALTH CASTLE ROCK | CASTLE ROCK | CO | * | * | * | $11,843 | 0.4% |
| 18 | MEDMARK TREATMENT CENTERS STOCKTON | STOCKTON | CA | * | * | 12 | $11,745 | 0.4% |
| 19 | EDEN HOSPICE | CARSON CITY | NV | * | * | 72 | $11,209 | 0.3% |
| 20 | FRISBIE MEMORIAL HOSPITAL | ROCHESTER | NH | * | * | * | $10,615 | 0.3% |
| 21 | DIGESTIVE HEALTH CENTER | RENO | NV | 22 | $472 | 25 | $10,384 | 0.3% |
| 22 | FLORIDA ORTHOPEDIC INSTITUTE SURGERY CENTER | TEMPLE TERRACE | FL | * | * | * | $9,640 | 0.3% |
| 23 | CHARLIE HEALTH INC | LAS VEGAS | NV | * | * | 32 | $9,445 | 0.3% |
| 24 | CHRISTUS GOOD SHEPHERD MEDICAL CENTER MARSHALL | MARSHALL | TX | * | * | * | $9,412 | 0.3% |
| 25 | REGENTS OF THE UNIVERSITY OF CALIFORNIA | SACRAMENTO | CA | * | * | 12 | $8,287 | 0.3% |
| 26 | ALL OTHERS | ALL OTHERS | NA | 87 | $1,221 | 163 | $106,239 | 3.2% |
| | **Total Outpatient Facility In-Network** | | | | | | **$3,308,170** | **100%** |

* - less than 5 unique claimants

59

## Top 25 Drugs - Paid

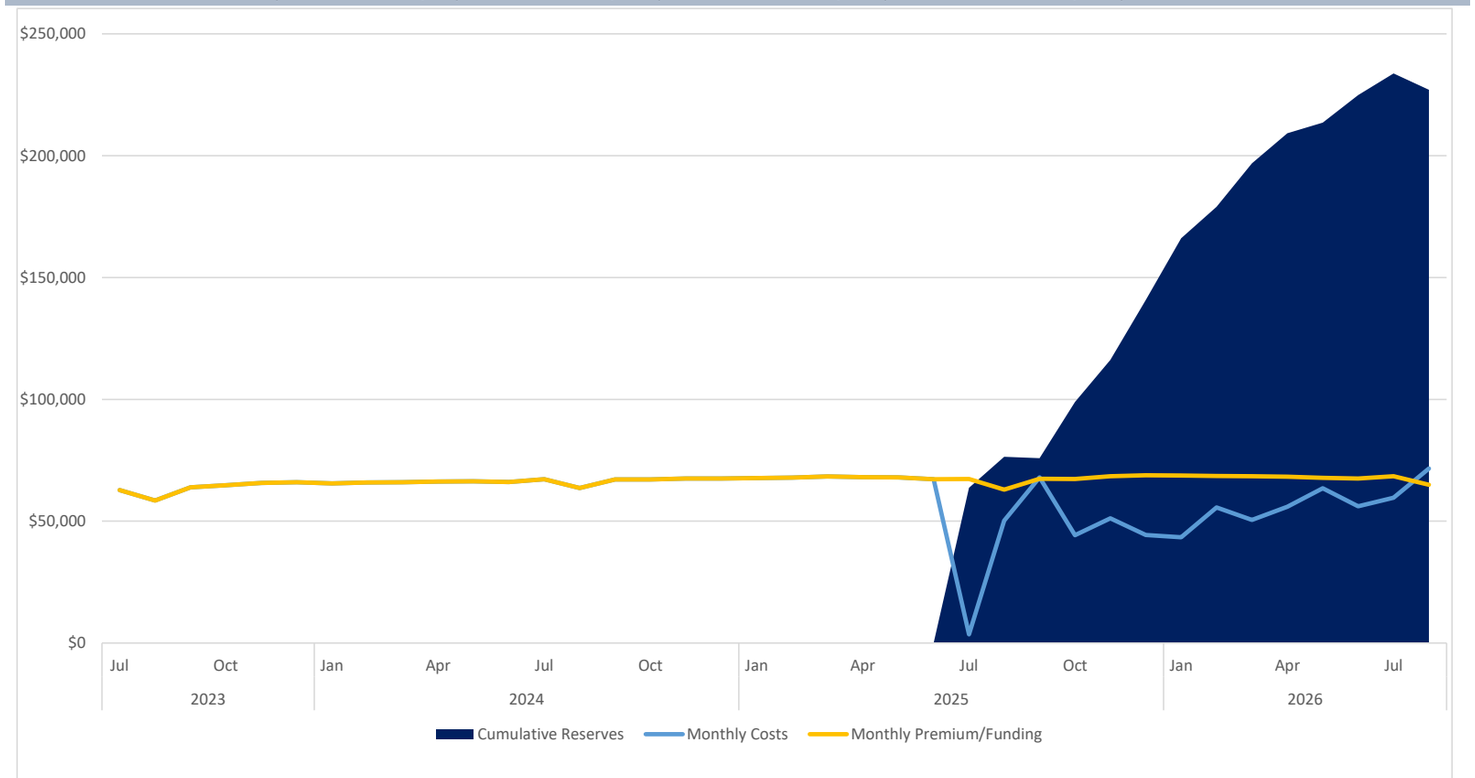
| Rank | Drug Name | Primary Indication | Drug Type | Specialty (Y/N) | Unique Claimants | Claim Amount Total | Claim Amount % of Total Claims | Claim Amount Per Script | Claim Amount PMPM | Days Supply Per Script |
|---|---|---|---|---|---|---|---|---|---|---|
| 1 | MOUNJARO | DIABETES | BRAND | N | 26 | $266,880 | 9.4% | $1,029 | $14.69 | 37.97 |
| 2 | OZEMPIC | DIABETES | BRAND | N | 24 | $218,633 | 7.7% | $975 | $12.03 | 45 |
| 3 | DUPIXENT | DERMATOLOGIC CONDITIONS | BRAND | Y | 7 | $215,348 | 7.6% | $3,435 | $11.85 | 31 |
| 4 | HUMIRA PEN | INFLAMMATORY CONDITIONS | BRAND | Y | 5 | $214,945 | 7.5% | $6,311 | $11.83 | 28 |
| 5 | ISTURISA | ENDOCRINE DISORDERS | BRAND | Y | * | $145,194 | 5.1% | $19,492 | $7.99 | 24 |
| 6 | RINVOQ | INFLAMMATORY CONDITIONS | BRAND | Y | * | $128,993 | 4.5% | $5,777 | $7.10 | 30 |
| 7 | OTEZLA | INFLAMMATORY CONDITIONS | BRAND | Y | * | $92,295 | 3.2% | $4,826 | $5.08 | 30 |
| 8 | IMBRUVICA | CANCER | BRAND | Y | * | $82,330 | 2.9% | $9,695 | $4.53 | 28 |
| 9 | SKYRIZI PEN | INFLAMMATORY CONDITIONS | BRAND | Y | * | $62,062 | 2.2% | $8,352 | $3.42 | 65 |
| 10 | JARDIANCE | DIABETES | BRAND | N | 18 | $60,562 | 2.1% | $404 | $3.33 | 65 |
| 11 | QULIPTA | MIGRAINE HEADACHES | BRAND | N | 6 | $57,655 | 2.0% | $1,153 | $3.17 | 34 |
| 12 | VRAYLAR | PSYCHIATRIC/NEURO DISORDERS | BRAND | N | 7 | $56,533 | 2.0% | $1,662 | $3.11 | 34 |
| 13 | CAPLYTA | PSYCHIATRIC/NEURO DISORDERS | BRAND | N | 6 | $55,083 | 1.9% | $1,520 | $3.03 | 43 |
| 14 | ACTEMRA | INFLAMMATORY CONDITIONS | BRAND | Y | * | $51,834 | 1.8% | $4,875 | $2.85 | 28 |
| 15 | NURTEC | MIGRAINE HEADACHES | BRAND | N | 11 | $44,056 | 1.5% | $1,151 | $2.43 | 28 |
| 16 | ELIQUIS | ANTICOAGULATION | BRAND | N | 15 | $39,469 | 1.4% | $387 | $2.17 | 46 |
| 17 | COSENTYX SENSOREADY PEN | INFLAMMATORY CONDITIONS | BRAND | Y | * | $39,037 | 1.4% | $18,389 | $2.15 | 28 |
| 18 | DEXCOM G7 SENSOR | DIABETES | BRAND | N | 11 | $35,796 | 1.3% | $362 | $1.97 | 47 |
| 19 | TRULICITY | DIABETES | BRAND | N | * | $27,527 | 1.0% | $960 | $1.52 | 40 |
| 20 | NUCALA | ASTHMA | BRAND | Y | * | $27,359 | 1.0% | $2,864 | $1.51 | 28 |
| 21 | EMGALITY | MIGRAINE HEADACHES | BRAND | N | * | $27,248 | 1.0% | $656 | $1.50 | 46 |
| 22 | XARELTO | ANTICOAGULATION | BRAND | N | 6 | $26,455 | 0.9% | $566 | $1.46 | 66 |
| 23 | CREON | GI DISORDERS | BRAND | N | * | $24,892 | 0.9% | $2,601 | $1.37 | 30 |
| 24 | IBSRELA | GI DISORDERS | BRAND | N | * | $22,839 | 0.8% | $1,649 | $1.26 | 43 |
| 25 | TRELEGY ELLIPTA | ASTHMA | BRAND | N | 5 | $21,513 | 0.8% | $594 | $1.18 | 34 |
| | **Totals - Top 25 Drugs** | | - | **10** | - | **$2,044,538** | **72%** | - | - | - |

* = Less than 5 claimants

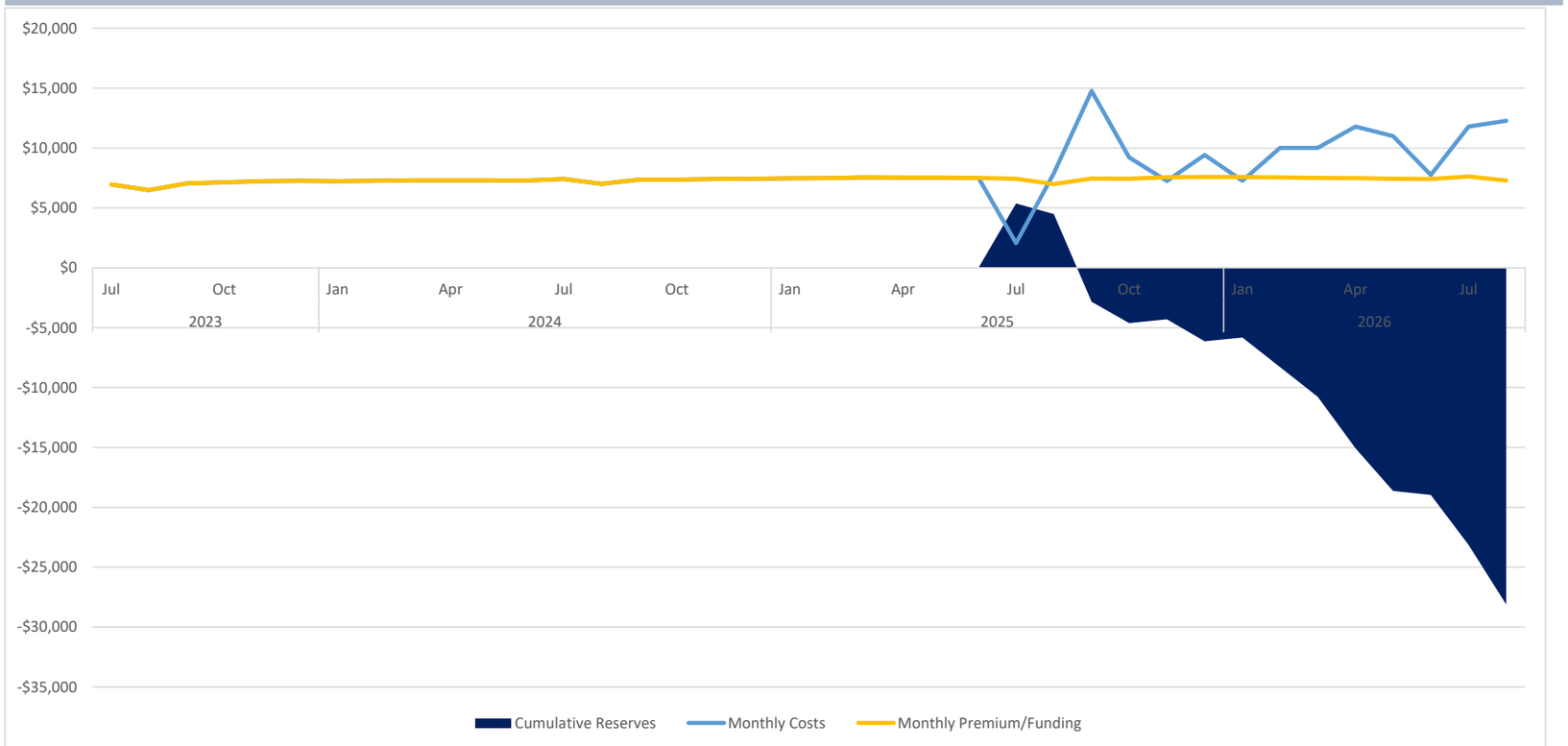
# Lyon County School District

Dental Self-Funded Claims Exhibit (Paid)

| Period | Subscribers | Administrative Fees | Paid Claims | Total Cost | Budgeted Funding | Cost to Funding Ratio |
|---|---|---|---|---|---|---|
| Sep-25 | 1,120 | $3,528 | $64,465 | $67,993 | $67,372 | 101% |
| Oct-25 | 1,124 | $3,540 | $40,686 | $44,227 | $67,290 | 66% |
| Nov-25 | 1,146 | $3,610 | $47,558 | $51,168 | $68,480 | 75% |
| Dec-25 | 1,154 | $3,635 | $40,679 | $44,314 | $68,846 | 64% |
| Jan-26 | 1,153 | $3,632 | $39,782 | $43,414 | $68,771 | 63% |
| Feb-26 | 1,152 | $3,629 | $51,998 | $55,627 | $68,569 | 81% |
| Mar-26 | 1,150 | $3,623 | $46,923 | $50,545 | $68,411 | 74% |
| Apr-26 | 1,151 | $3,626 | $52,301 | $55,927 | $68,263 | 82% |
| May-26 | 1,144 | $3,604 | $59,900 | $63,503 | $67,799 | 94% |
| Jun-26 | 1,138 | $3,582 | $52,525 | $56,107 | $67,466 | 83% |
| Jul-26 | 1,147 | $3,610 | $56,017 | $59,627 | $68,486 | 87% |
| Aug-26 | 1,074 | $3,380 | $68,240 | $71,620 | $64,912 | 110% |
| **Total** | **13,653** | **$42,997** | **$621,074** | **$664,071** | **$814,666** | **82%** |



| Period | Subscribers | Administrative Fees | Paid Claims | Total Cost | Budgeted Funding | Cost to Funding Ratio |
|---|---|---|---|---|---|---|
| Sep-25 | 1,137 | $2,047 | $12,725 | $14,771 | $7,460 | 198% |
| Oct-25 | 1,141 | $2,054 | $7,167 | $9,220 | $7,442 | 124% |
| Nov-25 | 1,164 | $2,095 | $5,163 | $7,259 | $7,562 | 96% |
| Dec-25 | 1,172 | $2,110 | $7,306 | $9,416 | $7,589 | 124% |
| Jan-26 | 1,170 | $2,106 | $5,162 | $7,268 | $7,580 | 96% |
| Feb-26 | 1,169 | $2,104 | $7,912 | $10,016 | $7,549 | 133% |
| Mar-26 | 1,167 | $2,101 | $7,909 | $10,010 | $7,519 | 133% |
| Apr-26 | 1,168 | $2,102 | $9,689 | $11,791 | $7,496 | 157% |
| May-26 | 1,161 | $2,090 | $8,909 | $10,998 | $7,445 | 148% |
| Jun-26 | 1,155 | $2,077 | $5,680 | $7,757 | $7,420 | 105% |
| Jul-26 | 1,163 | $2,092 | $9,706 | $11,797 | $7,630 | 155% |
| Aug-26 | 1,091 | $1,960 | $10,309 | $12,269 | $7,283 | 168% |
| **Total** | **13,858** | **$24,937** | **$97,636** | **$122,573** | **$89,974** | **136%** |



## Lyon County School District Claims and Service Tracking

LCSDsupport@lpins.net

Claims assistance from October 13, 2026 to November 11, 2026

| Medical | Pending | Resolved | Totals |
|---|---|---|---|
| Claims Assistance | | 1 | 1 |
| Pharmacy / RX | 1 | | 1 |
| Eligibility | | | 0 |
| Provider Assistance | | 1 | 1 |
| Approvals / Prior Authorizations | | 1 | 1 |
| Denied Claims / Services | | | 0 |
| Appeals | 1 | | 1 |
| Benefit Related Questions | | | 0 |
| Coordination of Benefits | | | 0 |

| Dental/Vision | Pending | Resolved | Totals |
|---|---|---|---|
| Claims Assistance | | | 0 |
| Eligibility | | | 0 |
| Approvals / Prior Authorizations | | | 0 |
| Denied Claims / Services | | 1 | 1 |
| Provider Assistance | | 1 | 1 |
| Benefit Related Questions | | | 0 |

| Phone Call Log | Pending | Resolved | Totals |
|---|---|---|---|
| Claims Assistance | | | 0 |
| Pharmacy / RX | | | 0 |
| Eligibility | | | 0 |
| Provider Assistance | | | 0 |
| Approvals / Prior Authorizations | | | 0 |
| Denied Claims / Services | | | 0 |
| Appeals | | | 0 |
| Benefit Related Questions | | | 0 |
| Coordination of Benefits | | | 0 |
| **Total Claim Assistance Requests:** | | | 7 |

INSURANCE