# SFHSS All Payer Claims Database Express Dashboard

September 10, 2020

# Express Dashboard Notes:

- All data is sourced from the All Payer Claims Database (APCD)
- Current dashboard is for incurred dates Apr 2019 Mar 2020 with Paid through Jun 2020. The Diagnostic Cost Grouper (DCG) for risk scoring is based on the recent completed year of Jan-Dec 2019. The timing of the dashboard ensures there is a three month run-out so that there is not a huge decrease in spend between current and prior periods
- The risk scores presented are rescaled to the total population between the plans for the purpose of comparison. The annual presentation of risk scores is non-rescaled
- Risk scores may not always add up to a 100% due to members who are non-Medicare but may move to Medicare during the period
- Financials are not included in the Medicare Dashboard
- Measures identified as acute are those that take place in an acute inpatient setting. These include inpatient hospitals, birthing centers, inpatient psychiatric facilities, and residential substance abuse treatment facilities
- Total premium includes Basic Vision and the Healthcare Sustainability Fee

# Express Dashboard Notes:

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

- Chronic, Non-Stratified – All other episodes not stratified as a manageable condition with a flare-up or a maintenance episode

# Covid-19 Dashboard Notes:

# COVID-19 Diagnosis:

U07.1 COVID-19 as primary or secondary diagnosis

B9729 Other coronavirus as secondary diagnosis

# **COVID-19 Screenings:**

DNA / RNA diagnostic tests typically indicate ongoing presence of the virus

Codes: U0004, U0003, U0002, U0001, G2024, G2023, C9803, 87635

Antibody diagnostic tests typically indicate ongoing or past presence of the virus

Codes: 86318, 86328, 86769

# **Telemedicine visits:**

Procedure code = 98966, 989667, 98968, 98969, 98970, 98971, 98972, 99421, 99422, 99423, 99441, 99442, 99443, G0406, G0407, G0408, G0425, G0426, G0427, G0459, G0508, G0509, G2010, G2012, G3014, T1014 OR Procedure Modifier Code = 95, G0, GQ, GT

OR Place of Service = Telehealth

# Caveats:

It is possible that COVID-19 patients, screenings, and admissions are significantly lower than expected within your clients' database. It is all dependent upon when the individual carriers are able to re-adjudicate claims.

These reports are based on coding guidelines issued by CMS. It is likely that not all providers followed these guidelines, and thus these reports will not identify those COVID-19 claims until/unless those claims are adjusted in the future.

# Key Observations:

- With incurred data through March 2020, claim suppression as a result of Covid-19 has not yet been quantified. The shelter-in-place order for San Francisco, Contra Costa, Alameda, Marin, San Mateo and Santa Clara counties went into effect on March 16, 2020
- Total number of high cost claimants (HCC) continues to trend upward with 107 more claimants over the previous period (2350). 47.8% of spend results from High Cost Claimants, up from 45.9% in the previous period
- Total Costs per Employee/Non-Medicare Retiree per Year increased over previous period with Kaiser Permanente leading with an 8% increase. BSC Access+ and UHC PPO experienced slight decreases. The per employee/retiree costs per year for prescription drugs, and facility outpatient costs is 2 to 3 times lower for KP than other plans. UHC PPO risk scores and Facility Inpatient and Outpatient costs are significantly higher compared to populations in the other plans.
- 2% of the Active & Early Retiree population accounts for 40.1% of costs

# Key Observations:

- Specialty drugs continue to dominate the15 top drugs by cost. Three new entries to the top 15 are Stelara and Consentyx, both used in the treatment of psoriatic arthritis and Dupixent used in the treatment of allergic diseases such as eczema and asthma
- Utilization trends for Medicare retirees decreased in both Medicare plans in admits per 1000 services OP and visits to the ER for the first time since having both UHC MA PPO and KPSA which could be indicative of impacts from Covid-19
- Scripts per 1000 and days supply Rx for Medicare retirees increased over previous period.
- 83% of the Medicare retiree population are categorized in risk band profiles of At Risk, Struggling, or In Crisis which is 4 percent higher than previous period
- Top prevalence for chronic conditions in both Medicare and Non-Medicare populations (active and early retiree) is found in low back pain, hypertension and diabetes.

# **CCSF Non Medicare Dashboard**

August 12, 2020

Previous Period:Apr 2018 - Mar 2019 (Incurred)Current Period:Apr 2019 - Mar 2020 (Incurred)Paid Through:Jun 2020

SAN FRANCISCO HEALTH SERVICE SYSTEM

# **Financial**

Previous Period: Apr 2018 - Mar 2019 (Incurred) Current Period: Apr 2019 - Mar 2020 (Incurred) Paid Through: Jun 2020

## **Financial Summary**

# Demographics

	Previous	Current	% Change
Allowed Amount Med and Rx	\$638,202,368	\$649,601,730	1.8%
Third Party Amt Med and Rx	\$8,412,067	\$9,086,288	8.0%
Out of Pocket Med and Rx	\$20,427,046	\$19,627,482	-3.9%
Allow Amt PMPY Med and Rx	\$6,827.23	\$6,902.33	1.1%
Allow Amt PEPY Med and Rx	\$13,555.22	\$13,733.14	1.3%
Allowed Amount IP Acute	\$187,542,048	\$194,259,148	3.6%
Allowed Amount OP Med	\$338,203,158	\$337,050,355	-0.3%
Allowed Amount Rx	\$106,947,324	\$112,832,478	5.5%

	BSC Access+	BSC Trio	Kaiser Permanente	UHC	Total	
Employees	10,704	6,303	28,416	1,879	47,302	
Members	23,385	11,927	55,781	3,021	94,113	
Family Size	2.2	1.9	2.0	1.6	2.0	
Average Employee Age	49.6	49.5	46.5	53.6	47.9	
Average Member Age	37.6	39.6	36.6	47.1	37.6	
Employees % Male	51.7%	51.5%	51.1%	55.3%	51.5%	
Members % Male	47.7%	48.3%	48.6%	48.1%	48.3%	
Risk Score	54.2	53.1	47.1	106.6	51.5	

SAN FRANCISCO

**HEALTH SERVICE SYSTEM** 





## **High Cost Claimants Overview**

	BSC Access+	BSC Trio	Kaiser Permanente	UHC	Total
High Cost Claimants	742	344	1,123	209	2,350
HCC Allow Amt Per Pat Med and Rx	\$125,688	\$115,301	\$130,041	\$136,200	\$130,820
HCC Allow Amt Pay Per Pat Med IP	\$105,990	\$107,712	\$120,319	\$117,051	\$114,663
HCC Allow Amt Per Pat Med OP	\$44,359	\$37,999	\$42,382	\$55,950	\$44,600
HCC Allow Amt Per Pat Rx	\$26,269	\$19,594	\$13,705	\$20,724	\$19,570
HCC Percent of Total Allowed Amount	50.9%	47.1%	44.4%	60.3%	47.8%
HCC Allowed Amount	\$93,260,536	\$39,663,396	\$146,036,183	\$28,465,867	\$307,425,981
Total Allowed Amount	\$183,176,869	\$84,196,934	\$328,586,600	\$47,188,948	\$643,149,352
Allow Amt PMPY with HCC	\$7,833.20	\$7,059.50	\$5,890.64	\$15,621.60	\$6,833.78
Allowed Amount PMPY without HCC	\$3,845.10	\$3,733.92	\$3,272.62	\$6,198.16	\$3,567.22

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



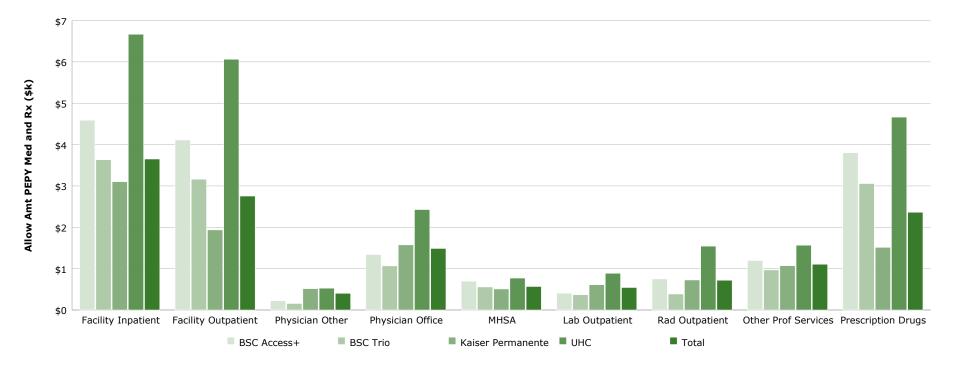
# **Financial**

Current Period: Apr 2019 - Mar 2020 (Incurred) Paid Through: Jun 2020

# SAN FRANCISCO HEALTH SERVICE SYSTEM

### **Cost Per Employee Per Year (PEPY)**

	BSC Access+	BSC Trio	Kaiser Permanente	UHC	Total
Facility Inpatient	\$4,587.58	\$3,632.74	\$3,103.19	\$6,666.43	\$3,651.19
Facility Outpatient	\$4,110.69	\$3,161.45	\$1,937.05	\$6,061.89	\$2,755.93
Physician Other	\$222.84	\$157.30	\$516.53	\$527.04	\$402.62
Physician Office	\$1,339.80	\$1,066.92	\$1,574.66	\$2,428.88	\$1,487.78
MHSA	\$696.28	\$556.87	\$508.82	\$771.96	\$568.10
Lab Outpatient	\$406.04	\$369.54	\$612.19	\$887.18	\$544.13
Rad Outpatient	\$750.35	\$386.39	\$725.83	\$1,544.84	\$718.67
Other Prof Services	\$1,196.86	\$969.00	\$1,071.56	\$1,566.35	\$1,105.90
Prescription Drugs	\$3,801.83	\$3,058.02	\$1,513.73	\$4,663.76	\$2,362.42
Total Allowed Amount	\$17,112.27	\$13,358.23	\$11,563.57	\$25,118.32	\$13,596.73





### **Financial** Current Period: Apr 2019 - Mar 2020 (Incurred) Paid Through: Jun 2020

# SAN FRANCISCO HEALTH SERVICE SYSTEM

### **Cost and Utilization Trends**

	BSC Access+	BSC Trio	Kaiser Permanente	UHC	Total	West Norm
Allow Amt PEPY Med and Rx	\$17,112.27	\$13,358.23	\$11,563.57	\$25,118.32	\$13,596.73	\$12,590.29
Admits Per 1000 Acute	46.7	45.0	35.9	79.1	41.1	50.0
Days LOS Admit Acute	4.88	4.93	4.41	5.57	4.69	4.32
Days Per 1000 Adm Acute	228.1	221.9	158.1	441.0	192.7	209.8
Svcs Per 1000 OP Med	23,394.4	21,536.3	17,568.4	47,460.7	20,478.3	26,088.6
Visits Per 1000 ER	198.0	190.9	197.2	267.8	198.8	173.1
Scripts Per 1000 Rx	12,509.2	12,459.2	5,662.4	16,764.4	8,581.4	8,871.0
Days Supply PMPY Rx	354.63	351.92	295.20	511.80	324.11	327.88
Allow Amt Per Adm Acute	\$47,315	\$45,688	\$52,136	\$52,085	\$49,877	\$32,857
Allow Amt Per Svc OP Med	\$164	\$156	\$183	\$172	\$173	\$136
Allow Amt Per Script Rx	\$139	\$130	\$136	\$173	\$138	\$139

# **Plan Performance\***

	BSC Access+	BSC Trio	Kaiser Permanente	UHC	Total
Relative Risk Score Concurrent	104.5	100.84	87.2	199.1	96.5
Members Avg Med	23,385	11,927	55,781	3,021	94,113
Allowed Amount PMPM Med and Rx	\$651.49	\$588.15	\$488.14	\$1,301.30	\$567.50
Health Service System Ratio to the Average	2.5	2.3	2.1	2.5	2.3

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

#### **Premium Contributions**

	BSC Access+	BSC Trio	Kaiser Permanente	UHC	Total
Employer Premium Contribution Med	\$192,022,682	\$88,408,426	\$344,636,939	\$36,316,669	\$661,384,716
Employee Premium Contribution Med	\$33,155,900	\$13,634,639	\$46,404,464	\$57,516	\$93,252,520
Total Medical Premium Amount	\$225,178,582	\$102,043,065	\$391,041,403	\$36,374,185	\$754,637,235



# Clinical

Previous Period:Apr 2018 - Mar 2019 (Incurred)Current Period:Apr 2019 - Mar 2020 (Incurred)Paid Through:Jun 2020

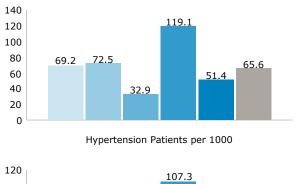
# SAN FRANCISCO HEALTH SERVICE SYSTEM

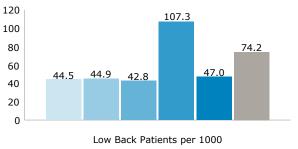
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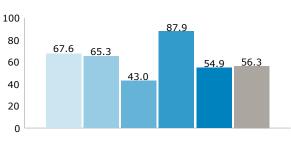
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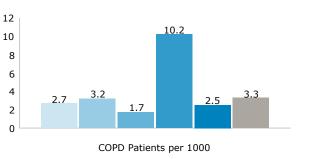








#### Diabetes Patients per 1000





21.6

20.8

21.6



# **Quality Markers**

Utilization Metrics (per 1000 enrollees)

	BSC Access+	BSC Trio	Kaiser Permanente	UHC	Total
Emergency Room	198	191	197	268	199
% Admit	11.1%	11.4%	2.1%	18.4%	6.1%
% Ambulatory	88.9%	88.6%	97.9%	81.6%	93.9%
Readmissions	3.0	3.4	1.7	7.3	2.4
Avoidable Admissions	2.4	1.2	1.3	4.6	1.7
Complications	13.8	9.8	9.0	29.9	11.3

# **Well Care and Preventive Visits**

28

24

20

16

12

8

4

0

	Previous	Current	% Change
Visits Well Baby	5,606	4,925	-12.1%
Visits Well Child	3,534	3,251	-8.0%
Visits Preventive Adult	25,384	21,114	-16.8%
Visits Per 1000 Well Baby	4,517.0	3,981.9	-11.8%
Visits Per 1000 Well Child	933.9	844.6	-9.6%
Visits Per 1000 Prevent Adult	341.1	282.0	-17.3%



# **Express Dashboard**

Time Period:2019 (Previous Complete Incurred Calendar Year)Paid Through:Jun 2020

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# SAN FRANCISCO HEALTH SERVICE SYSTEM

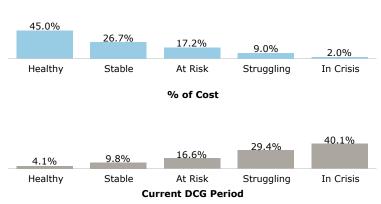
#### **Top 10 Episode Summary Groups\***

	Current Complete Year					
	Allowed Amount Per Epis West Region	Episodes	Patients			
Prevent/Admin Hlth Encounters	\$686	67,969	63,521			
Diabetes	\$5,881	3,592	3,506			
Osteoarthritis	\$7,003	3,162	3,004			
Pregnancy w Vaginal Delivery	\$18,917	602	602			
HIV Infection	\$30,285	410	410			
Cancer - Breast	\$23,258	668	668			
Cerebrovascular Disease	\$22,013	391	332			
Coronary Artery Disease	\$15,394	702	617			
Newborns, w/wo Complication	\$10,371	541	411			
Condition Rel to Tx - Med/Surg	\$12,508	627	546			
Top 10 Subtotal	\$2,060	78,664	65,969			
All Episode Summary Groups	\$2,016	255,891	83,864			

	Allowed Amount Epis Total	Episodes	Allowed Amount Per Epis Total	% of Total
Acute Conditions	\$294,903,191	162,689	\$1,813	48.6%
Chronic, Acute Flare-ups	\$29,014,089	613	\$47,331	4.8%
Chronic, Maintenance	\$36,942,275	10,490	\$3,522	6.1%
Chronic, Non-Stratified	\$192,162,199	19,778	\$9,716	31.7%
Well Care	\$53,586,926	62,321	\$860	8.8%
Total	\$606,608,681	255,891	\$2,371	100.0%

\*Episodes are based on the most recent complete incurred calendar year 2019.

### **Risk Band Profiles**



% of Population

### **Top 11 Mental Health Episodes**

**Episode Type\*** 

	Current Complete Year							
	Allowed Amount Per Epis Total	Allowed Amount Per Epis West Region	Episodes	Patients	Visits			
Autism	\$17,072	\$10,943	298	298	16,686			
Schizophrenia	\$13,151	\$10,286	108	108	1,886			
Eating Disorders	\$9,557	\$12,505	52	50	568			
Bipolar Disorder	\$5,947	\$4,019	459	409	7,544			
Substance Abuse	\$4,940	\$9,103	1,128	907	7,632			
Antisocial Behav	\$2,949	\$1,794	63	63	277			
Depression	\$2,213	\$1,703	3,899	3,715	43,098			
Obsess-Compulsiv	\$2,115	\$1,312	67	63	1,064			
Psychoses, NEC	\$1,873	\$1,221	156	127	977			
Anxiety Disorder	\$970	\$758	2,978	2,833	21,812			

1) The healthiest 45.0% of the population accounts for 4.1% of the total cost.

2) The least healthy 2.0% of the population accounts for 40.1% of the total cost.



# Drug

**Allowed** \$12

\$4

\$0

Anti-Infective Agents

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Current Period: Apr 2019 - Mar 2020 (Incurred) Paid Through: Jun 2020

**Top 15 Therapeutic Classes** 

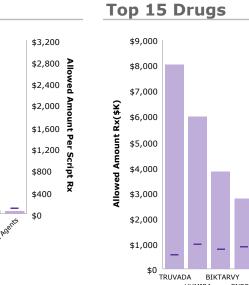
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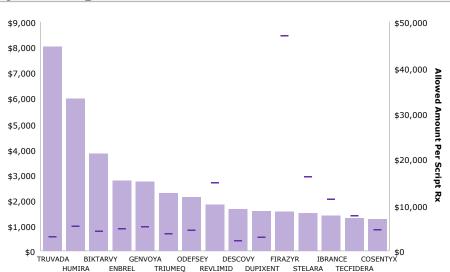
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Allowed Amount Rx — Allowed Amount Per Script Rx

All Therapeutic Classes	\$112,832,478	100.0%	815,669	\$138.33	All Dr
Top 15 Subtotal	\$111,348,056	98.7%	793,788	\$140.27	Top 1
Diagnostic Agents	\$520,758	0.5%	5,301	\$98.24	COSEN
Electrolytic, Caloric, Water	\$671,127	0.6%	26,000	\$25.81	TECFII
Respiratory Tract Agents	\$877,220	0.8%	16,391	\$53.52	IBRAN
Eye, Ear, Nose Throat	\$2,528,082	2.2%	34,777	\$72.69	STELA
Blood Form/Coagul Agents	\$2,757,791	2.4%	7,075	\$389.79	FIRAZ
Autonomic Drugs	\$2,990,050	2.6%	38,170	\$78.34	DUPIX
Gastrointestinal Drugs	\$3,233,937	2.9%	33,835	\$95.58	DESCO
Skin & Mucous Membrane	\$3,383,082	3.0%	44,372	\$76.24	REVLI
Cardiovascular Agents	\$4,893,792	4.3%	187,117	\$26.15	ODEFS
Antineoplastic Agents	\$8,163,176	7.2%	5,056	\$1,614.55	TRIUM
Misc Therapeutic Agents	\$8,856,351	7.8%	19,611	\$451.60	GENVO
Central Nervous System	\$9,014,524	8.0%	168,464	\$53.51	ENBRE
Immunosuppressants	\$15,589,375	13.8%	5,395	\$2,889.60	BIKTA
Hormones & Synthetic Subst	\$17,539,277	15.5%	127,824	\$137.21	HUMIF
Anti-Infective Agents	\$30,329,513	26.9%	74,400	\$407.65	TRUVA
	Allowed Amount Rx	Percent of Total	Scripts Rx	Allowed Amount Per Script Rx	
	1				

Respiratory Track Agen

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	Allowed Amount Rx	Percent of Total	Scripts Rx	Allowed Amount Per Script Rx
VADA	\$8,013,582	7.1%	2,628	\$3,049.31
IIRA	\$5,972,566	5.3%	1,106	\$5,400.15
TARVY	\$3,819,499	3.4%	891	\$4,286.76
REL	\$2,763,677	2.4%	578	\$4,781.45
IVOYA	\$2,728,333	2.4%	516	\$5,287.47
UMEQ	\$2,265,766	2.0%	610	\$3,714.37
FSEY	\$2,119,845	1.9%	465	\$4,558.81
LIMID	\$1,816,066	1.6%	122	\$14,885.79
COVY	\$1,646,444	1.5%	752	\$2,189.42
PIXENT	\$1,560,068	1.4%	519	\$3,005.91
AZYR	\$1,549,776	1.4%	33	\$46,962.92
LARA	\$1,485,739	1.3%	92	\$16,149.34
ANCE	\$1,391,596	1.2%	123	\$11,313.79
FIDERA	\$1,280,034	1.1%	168	\$7,619.25
SENTYX	\$1,254,539	1.1%	273	\$4,595.38
15 Subtotal	\$39,667,530	35.2%	8,876	\$4,469.08
Drugs	\$112,832,478	100.0%	815,669	\$138.33

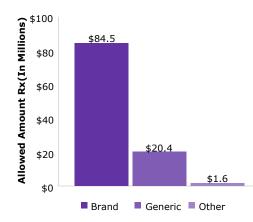
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# Drug

Previous Period: Apr 2018 - Mar 2019 (Incurred) Current Period: Apr 2019 - Mar 2020 (Incurred) Paid Through: Jun 2020

# Speciality Drug Metrics



**Brand & Generic Cost** 

	Allowed Amount Med and Rx			Allow Amt PMPY Med and Rx			
	Previous	Current	% Change	Previous	Current	% Change	
Non-Specialty Drugs	\$44,692,775	\$43,978,255	-1.6%	\$478.11	\$467.29	-2.3%	
Specialty Drugs							
Prescription Specialty Drugs	\$62,254,550	\$68,854,222	10.6%	\$665.97	\$731.61	9.9%	
Professional Specialty Drugs	\$17,348,307	\$18,663,717	7.6%	\$185.59	\$198.31	6.9%	
Facility Outpatient Specialty Drugs	\$1,842,278	\$1,689,820	-8.3%	\$19.71	\$17.96	-8.9%	
Specialty Total	\$81,445,135	\$89,207,759	9.5%	\$871.27	\$947.88	8.8%	
Total	\$126,137,910	\$133,186,015	5.6%	\$1,349.37	\$1,415.17	4.9%	

# **Key Drug Metrics**

	BSC Access+	BSC Trio	Kaiser Permanente	UHC	Total
Allow Amt PMPY Rx	\$1,740.30	\$1,616.09	\$771.11	\$2,900.49	\$1,187.36
Scripts Per 1000 Rx	12,509.22	12,459.22	5,662.43	16,764.38	8,581.36
Allow Amt Per Script Rx	\$139.12	\$129.71	\$136.18	\$173.01	\$138.37
Days Supply PMPY Rx	354.63	351.92	295.20	511.80	324.11
Scripts Generic Efficiency Rx	98.2%	98.5%	96.9%	96.0%	97.6%
% Scripts Dispensed as Generic	85.5%	85.6%	82.6%	81.8%	84.1%



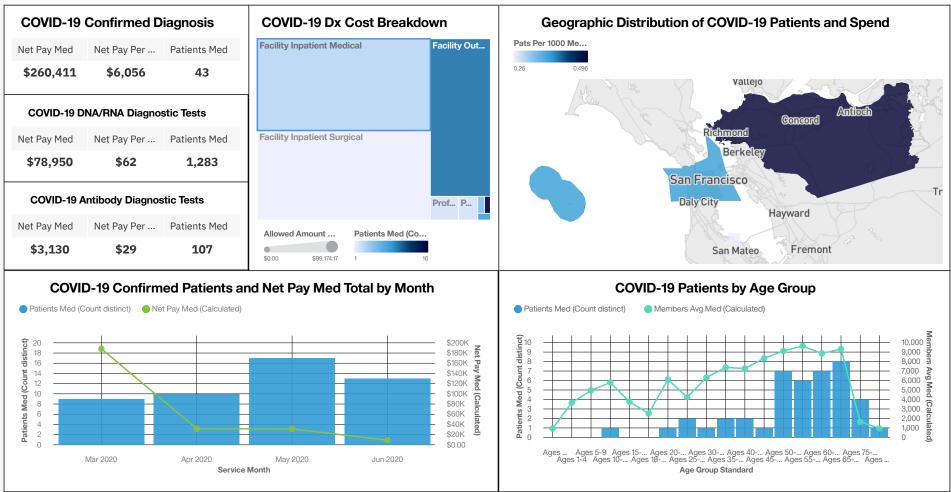


#### 9/4/2020

#### COVID-19 Summary and Trend

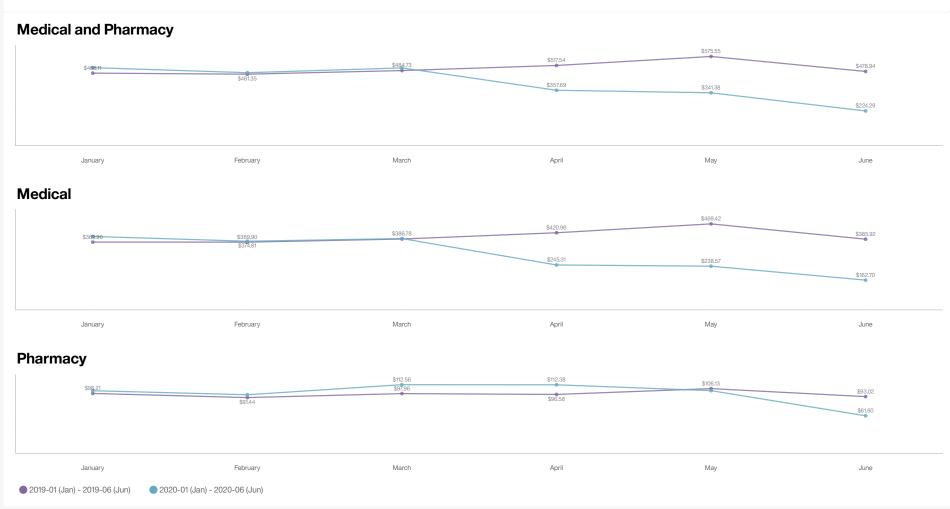
COVID-19 Dashboard \*

COVID-19 Summary and Trend Key Metrics To report on the most recent data and identify emerging diagnoses we are reporting on service months with insufficient run-out for claims to complete. As new data is added to your database results may change. COVID-19 diagnoses and screenings are limited to service year = 2020



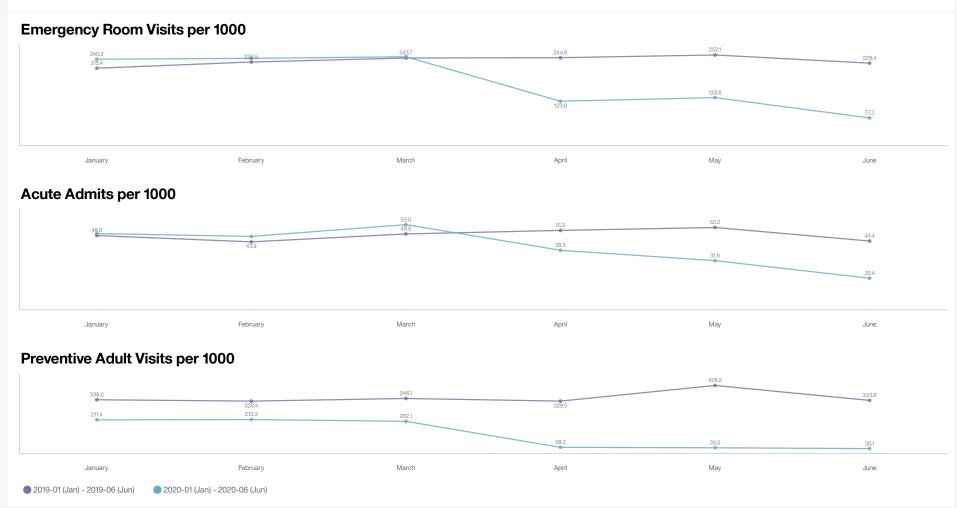
#### **Trend Detail**

COVID-19 Impact on Total Net Pay PMPM Rates by Paid Month - Previous vs Current YTD



#### Utilization Rate Trend

COVID-19 Impact on Total Utilization Rates by Paid Month - Previous vs Current YTD



# **CCSF Medicare Dashboard**

August 12, 2020

Previous Period:Apr 2018 - Mar 2019 (Incurred)Current Period:Apr 2019 - Mar 2020 (Incurred)Paid Through:Jun 2020

SAN FRANCISCO HEALTH SERVICE SYSTEM

# **Financial**

Previous Period: Apr 2018 - Mar 2019 (Incurred) Current Period: Apr 2019 - Mar 2020 (Incurred) Paid Through: Jun 2020

## **Demographics**

SAN FRAN	CISCO	
HEALTH	SERVICE	SYSTEM

	Kaiser Permanente	UHC	Total
Employees	10,686	12,792	23,480
Members	13,323	16,121	29,447
Family Size	1.2	1.3	1.3
Average Employee Age	75.2	74.9	75.0
Average Member Age	74.7	74.3	74.5
Employees % Male	48.6%	47.3%	47.8%
Members % Male	45.2%	44.1%	44.6%
Risk Score	241.9	265.8	255.0

# **Cost and Utilization Trends**

	Kaiser Permanente	UHC	Total
Admits Per 1000 Acute	143.9	179.9	163.6
Days LOS Admit Acute	5.24	5.89	5.63
Days Per 1000 Adm Acute	753.4	1,059.8	921.1
Svcs Per 1000 OP Med	40,865.0	83,961.2	64,459.2
Visits Per 1000 ER	427.7	475.8	454.0
Scripts Per 1000 Rx	19,716.7	26,868.8	23,634.6
Days Supply PMPY Rx	1,314.01	1,420.28	1,372.25

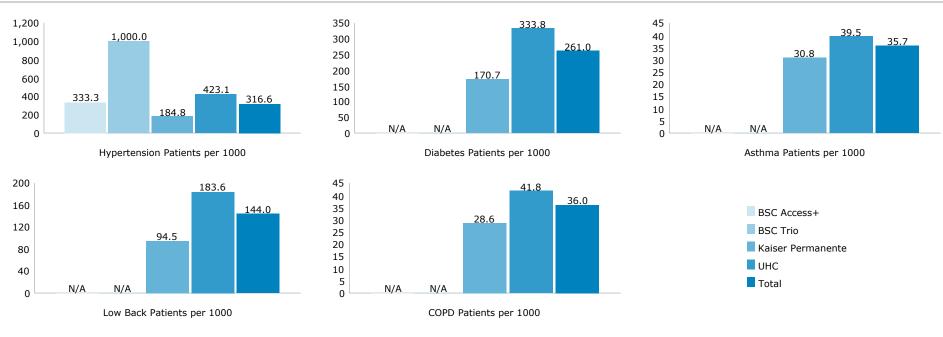


# Clinical

Previous Period:Apr 2018 - Mar 2019 (Incurred)Current Period:Apr 2019 - Mar 2020 (Incurred)Paid Through:Jun 2020

**Chronic Condition Prevalence** 

# SAN FRANCISCO HEALTH SERVICE SYSTEM



# **Quality Markers**

Utilization Metrics (per 1000 enrollees)

	Kaiser Permanente	UHC	Total	_
Emergency Room	428	476	454	
% Admit	2.6%	28.8%	17.6%	
% Ambulatory	97.4%	71.2%	82.4%	
Readmissions	14.4	13.1	13.7	
Avoidable Admissions	19.7	23.7	21.9	
Complications	44.6	67.8	57.5	

## **Well Care and Preventive Visits**

	Previous	Current	% Change
Visits Preventive Adult	10,868	11,100	2.1%
Visits Per 1000 Prevent Adult	380.9	377.0	-1.0%



# Clinical

Time Period:2019 (Previous Complete Incurred Calendar Year)Paid Through:Jun 2020

### **Top 10 Episode Summary Groups\***

	Current Cor	nplete Year
	Episodes	Patients
Diabetes	4,753	4,494
HIV Infection	186	186
Cancer - Leukemia	203	198
Prevent/Admin HIth Encounters	25,450	23,102
Cancer - Lung	245	245
Rheumatoid Arthritis	289	289
Cancer - Prostate	672	672
Hypertension, Essential	7,430	7,350
Cardiac Arrhythmias	2,762	2,159
Asthma	994	982
Top 10 Subtotal	42,984	26,106
All Episode Summary Groups	162,714	29,074

# SAN FRANCISCO HEALTH SERVICE SYSTEM

## **Episode Type\***

	Episodes
Acute Conditions	95,717
Chronic, Acute Flare-ups	1,857
Chronic, Maintenance	14,524
Chronic, Non-Stratified	27,962
Well Care	22,654
Total	162,714

\*Episodes are based on the most recent complete incurred calendar year 2019.

## **Risk Band Profiles**



% of Population



# Drug

Previous Period: Apr 2018 - Mar 2019 (Incurred) Current Period: Apr 2019 - Mar 2020 (Incurred) Paid Through: Jun 2020

# **Specialty Drug Metrics**

	Scripts Rx		Days Supply PMPY Rx			<b>Claims Paid</b>			
	Previous	Current	% Change	Previous	Current	% Change	Previous	Current	% Change
Non-Specialty Drugs	650,942	680,308	4.5%	1,304.59	1,349.37	3.4%	653,400	682,634	4.5%
Specialty Drugs									
Prescription Specialty Drugs	13,197	15,729	19.2%	20.02	23.02	15.0%	13,303	15,819	18.9%
Professional Specialty Drugs							9,296	8,853	-4.8%
Facility Outpatient Specialty Drugs							2,790	2,526	-9.5%
Specialty Total	13,197	15,729	19.2%	20.02	23.02	15.0%	25,389	27,198	4.7%
Total	664,139	696,037	4.8%	1,324.61	1,372.39	3.6%	678,786	709,832	4.6%

# **Key Drug Metrics**

	Kaiser Permanente	UHC	Total
Scripts Per 1000 Rx	19,716.69	26,868.82	23,634.63
Days Supply PMPY Rx	1,314.01	1,420.28	1,372.25
Scripts Generic Efficiency Rx	98.2%	98.1%	98.2%
% Scripts Dispensed as Generic	85.0%	80.5%	82.2%





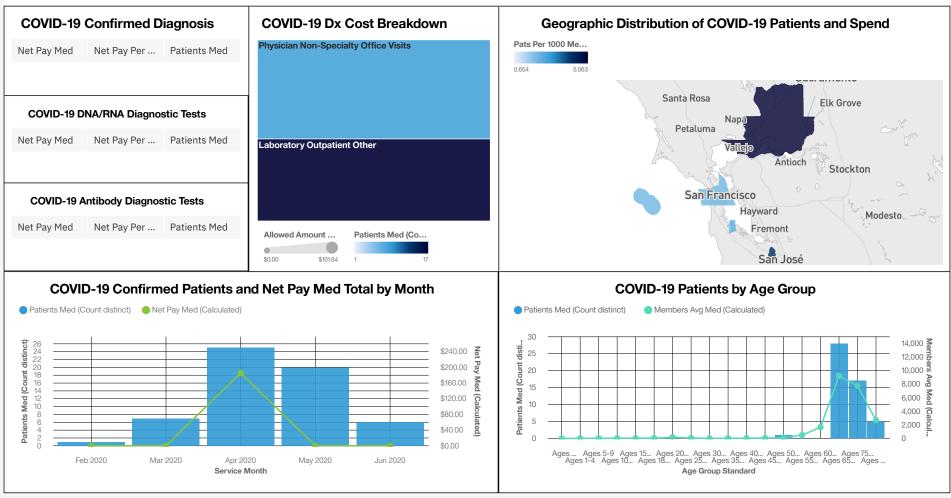


#### 9/4/2020

#### COVID-19 Summary and Trend

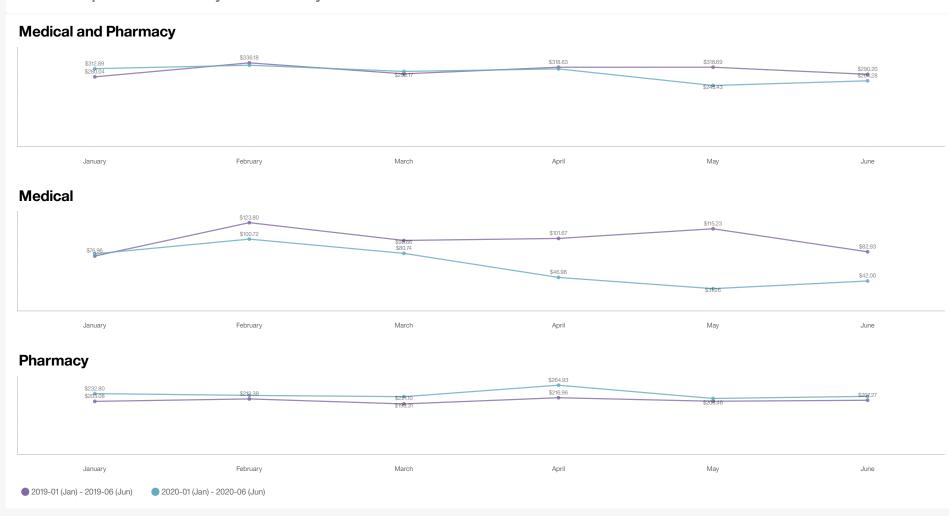
COVID-19 Dashboard

COVID-19 Summary and Trend Key Metrics To report on the most recent data and identify emerging diagnoses we are reporting on service months with insufficient run-out for claims to complete. As new data is added to your database results may change. COVID-19 diagnoses and screenings are limited to service year = 2020



#### Trend Detail

COVID-19 Impact on Total Net Pay PMPM Rates by Paid Month - Previous vs Current YTD



#### Utilization Rate Trend

COVID-19 Impact on Total Utilization Rates by Paid Month - Previous vs Current YTD

