

DecisionMaster[®] WAREHOUSE



Health Plan Management Report

City and County of Broomfield

Entire Group

January 01, 2012 - December 31, 2012



Prepared by:

HUB International
7770 Jefferson NE
Albuquerque, NM 87109
505.828.4000

Project ID 275670

Health Plan Cost

Your company's health care costs per employee include administrative, fixed and variable costs. Claim amounts represent claims paid during the period but not necessarily incurred during the period.

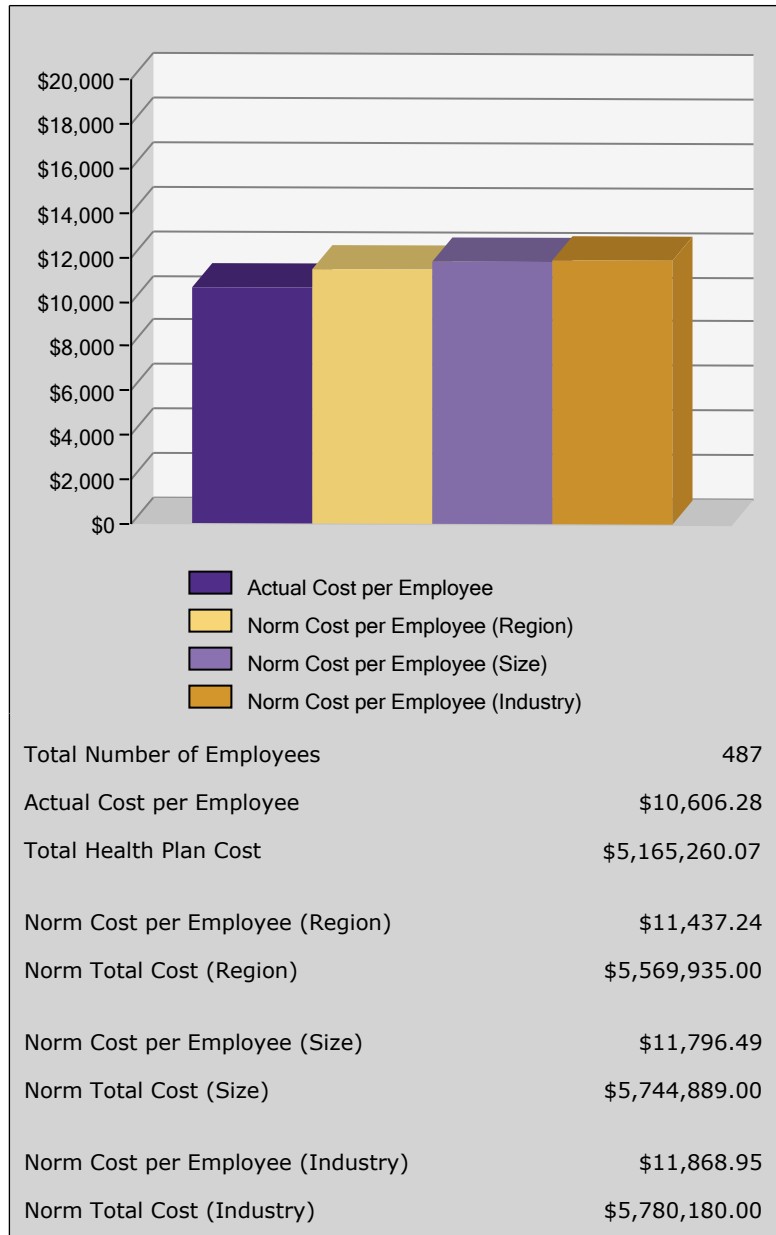
Methodology

Your plan costs were compared to norm data for similar employer plans based on region, industry, and employer size.

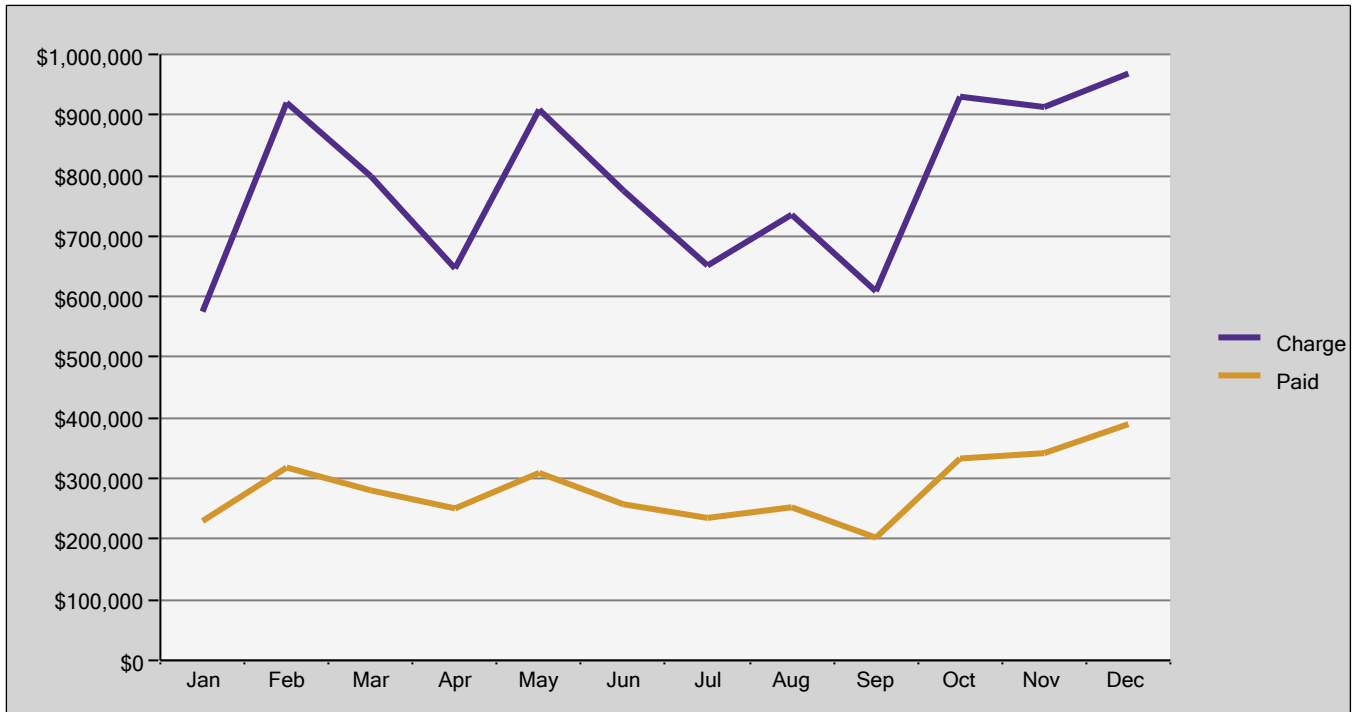
Region	West
Industry Type	State/Local Government
Employer Size	200+ Workers

For More Information...

The actual costs for your company are shown in the table. The charts on the next page show your company's claim charges and payments by month for this reporting period. The tables show a breakdown of your health plan costs. If prescription drug claims cost or premium was included in the funding information it will be reflected in actual cost and in the table on the next page.



Health Plan Cost Trend



Your Total Health Plan Cost

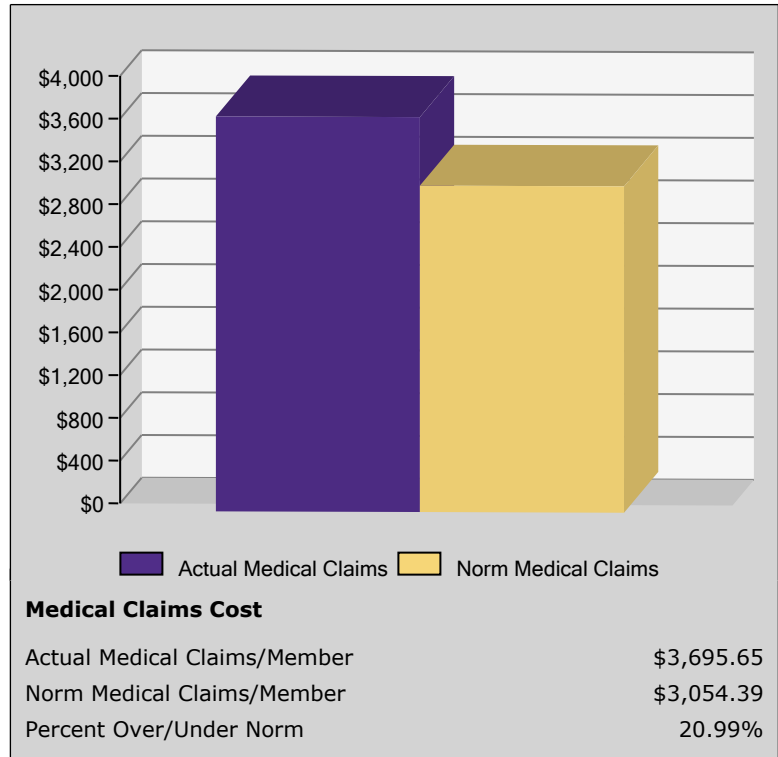
	Per EE	Total
Net Paid Claims (Less Amount over Specific)	\$6,793.21	\$3,308,291
Prescription Drug Cost	\$1,495.27	\$728,196
Administrative Costs/Premium	\$2,317.81	\$1,128,773
Actual Cost	\$10,606.28	\$5,165,260
Region Benchmark	\$11,437.24	\$5,569,935
Employer Size Benchmark	\$11,796.49	\$5,744,889
Industry Type Benchmark	\$11,868.95	\$5,780,180

Medical Claims Cost

Your company's health care costs per member for medical claims costs are displayed. No administrative or fixed costs are included, but Rx is included unless otherwise noted. Claim amounts represent claims paid during the period but not necessarily incurred during the period.

Methodology

Your medical claims costs were compared to norm data for similar employer plans based on region, plan type and industry. This comparison provides an opportunity to determine how the pure utilization and amount paid by the plan compares to a norm, exclusive of the administrative fees. This comparison is an overview of your claims costs; additional information on the subsequent pages will provide key areas to investigate further.



For More Information...

Focus on the detail exhibits in the management report to discover where your plan varies from the norm. Then, use the ad hoc analysis capabilities of Cognos and the recommendations on those exhibits to analyze which factors are driving cost and utilization.

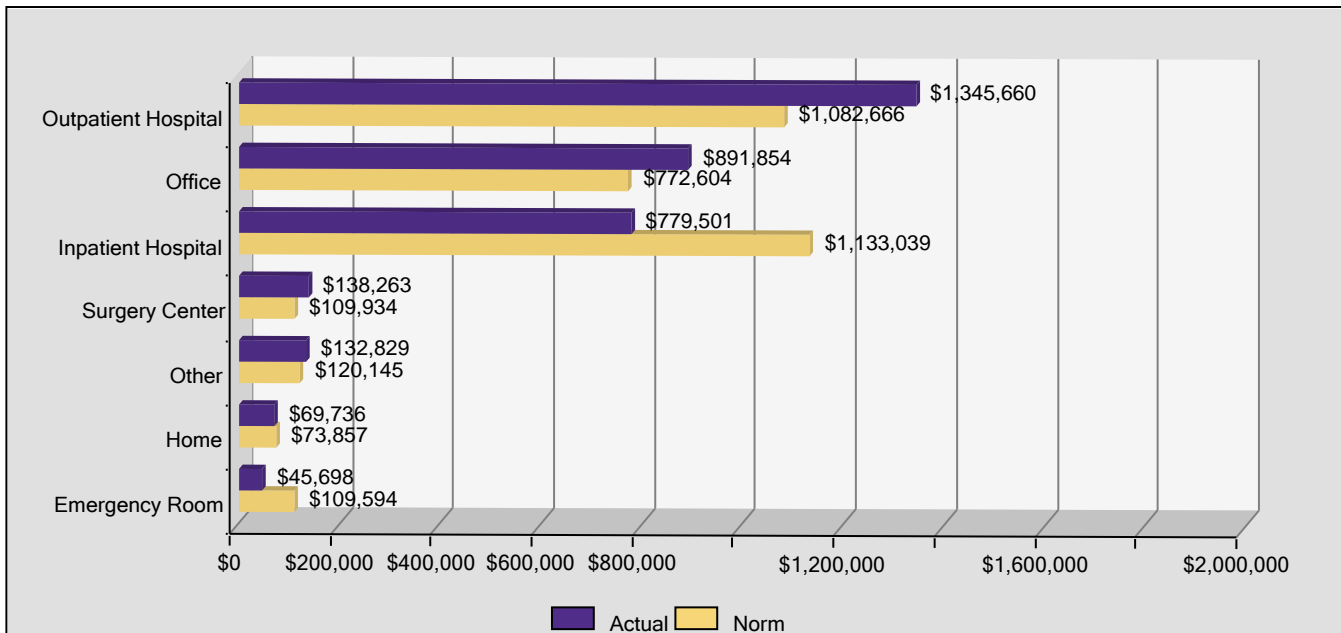
Claims by Place of Service

This analysis illustrates the distribution of paid claims among the various types of health care facilities used by your plan participants, as broken out by your claims administrator.

Methodology

The place of service categories used below are those prescribed by the Centers for Medicare & Medicaid Services (CMS). The paid amounts shown by each category contain both professional (physician fees, surgeon fees and anesthesiologist fees) and facility fees (hospital room and board, supplies and all ancillary services).

Total Paid by Place of Service



	Actual	Norm	Variance
Outpatient Hospital	39.54%	31.81%	24.29%
Office	26.20%	22.70%	15.43%
Inpatient Hospital	22.90%	33.29%	-31.20%
Surgery Center	4.06%	3.23%	25.77%
Other	3.90%	3.53%	10.56%
Home	2.05%	2.17%	-5.58%
Emergency Room	1.34%	3.22%	-58.30%

For More Information

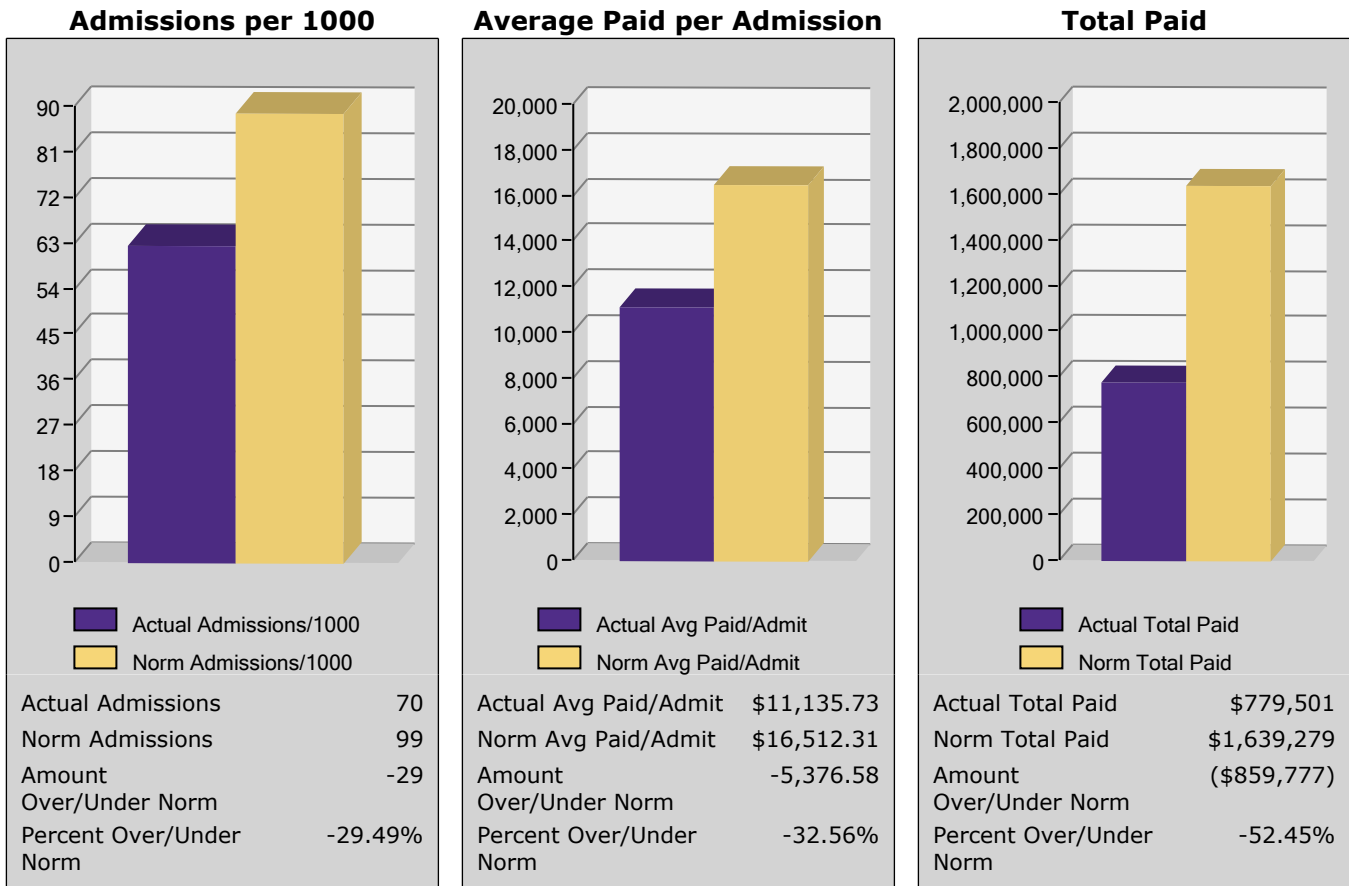
Use the ad hoc analysis capabilities of Cognos to access the **Claims History** package, and view the data by **Place of Service**. Using this feature, you can further analyze your data by a number of factors, including **Diagnosis (ICD9)** and **Procedure Category**.

Inpatient Analysis

Inpatient provider utilization has been defined, for the purpose of this report, as the number of instances your company's plan participants were admitted to inpatient facilities for overnight treatment, including those individuals who did not have surgery.

Methodology

Your company's claims were analyzed according to whether care was delivered in an inpatient facility. Inpatient paid amounts include facility (hospital room and board, supplies and ancillary charges) and professional services (physician fees, surgeon fees and anesthesiologist fees).



For More Information...

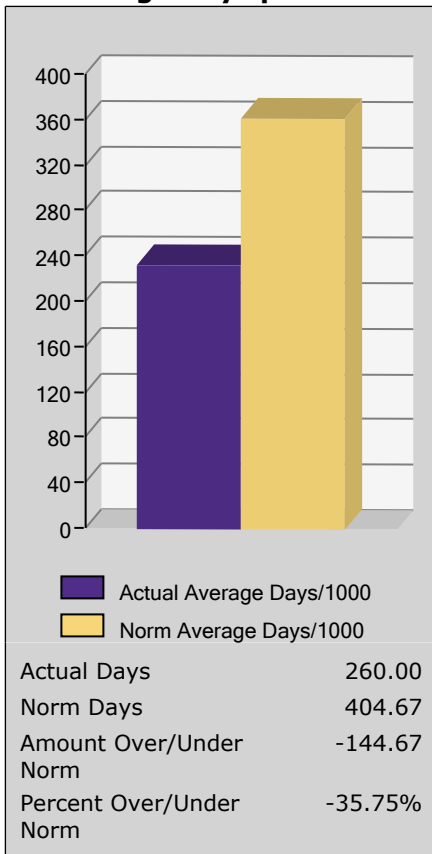
Using the ad hoc analysis capabilities of Cognos, access the **Inpatient Hospital** package. With this package, you can analyze your data by a number of factors including: **Relationship, Age Range, Gender** and **Diagnosis (ICD9)**.

Inpatient Length of Stay

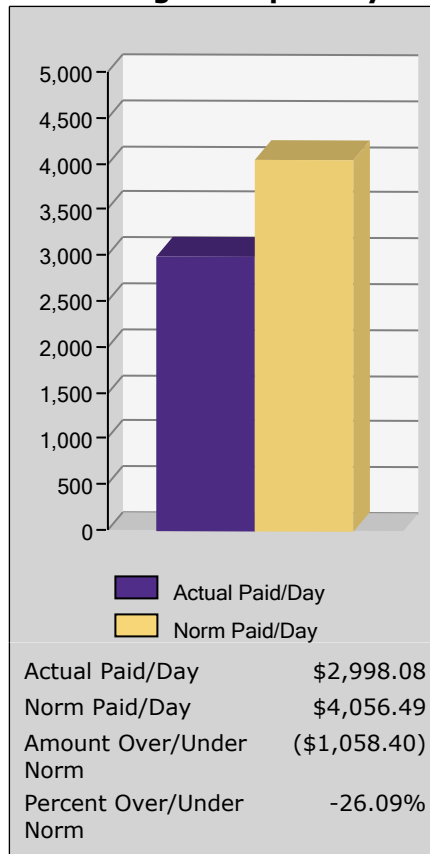
Inpatient provider utilization has been defined, for the purpose of this report, as the number of instances your company's plan participants were admitted to inpatient facilities for overnight treatment, including those individuals who did not have surgery.

Methodology

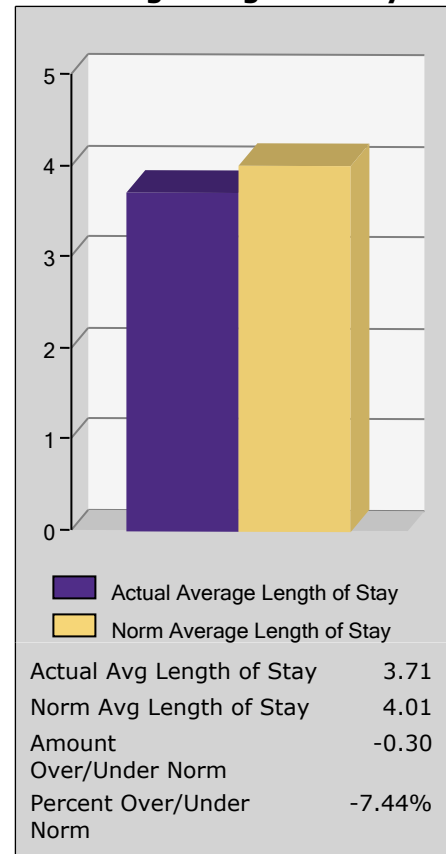
Average Days per 1000



Average Paid per Day



Average Length of Stay



For More Information...

Using the ad hoc analysis capabilities of Cognos, access the **Inpatient Hospital** package. You can then analyze your data by a number of factors including: **Relationship, Age Range, Gender, and Diagnosis (ICD9)**.

Inpatient Provider Usage

This exhibit analyzes your company's inpatient provider usage. The exhibit includes total dollars paid and total inpatient claims for each hospital. Claims are split between those marked as in-network and those marked as out-of-network for each provider.

Methodology

Your company's experience was analyzed to determine the most frequently used providers in an inpatient setting. Both facility and professional paid amounts appear. Inpatient admissions are noted on the facility claim, so "0" in the Admits column appears for professional providers. This information measures network utilization. The "percent of all paid" shows how effectively your plan design directs plan participants to the network.

Inpatient Provider	Network	# of Admits	Total Paid	% of All Paid
EXEMPLA GOOD SAMARITAN MEDICAL	Yes	20	\$232,055	29.77%
AVISTA HOSPITAL	Yes	16	\$94,333	12.10%
EXEMPLA LUTHERAN MEDICAL CENTER	Yes	6	\$80,895	10.38%
CENTURA ORTHO COLORADO AT ST	Yes	2	\$47,417	6.08%
PORTER HOSPITAL	Yes	1	\$44,300	5.68%
BOULDER COMMUNITY HOSPITAL	Yes	3	\$28,357	3.64%
LITTLETON ADVENTIST HOSPITAL	Yes	1	\$26,487	3.40%
MCKEE MEDICAL CENTER	Yes	1	\$18,443	2.37%
SWEDISH MEDICAL CENTER	Yes	2	\$14,216	1.82%
SKY RIDGE MEDICAL CENTER	Yes	1	\$13,456	1.73%
Others		16	\$175,256	22.48%
Totals		70	\$779,501	100.00%

For More Information...

Use the ad hoc analysis capabilities of Cognos to determine what factors are driving your utilization and total paid.

- Access the **Inpatient Hospital** package, and view the data by **Network** and **Provider** to determine where plan participants are receiving services in-network or out-of-network.
- Review the **Inpatient Hospital** package, and view the data by **Major Diagnostic Category**, then **Network** > **Out-of-Network**, to determine what types of admissions are going out-of-network.

Inpatient Surgery

This exhibit analyzes your company's inpatient surgeries. The exhibit includes the top ten surgeries by total dollars.

Methodology

Your company's inpatient surgery claims were summarized by procedure code. Charges reflect the surgeon's charges only; anesthesia, assistant surgeon and facility/supply charges are not included. This exhibit shows your top ten surgical procedures by total paid dollars. All other surgeries can be viewed in the Inpatient Surgery package of Cognos.

CPT Description	Claimants	Total Paid	Average Paid
CESAREAN DELIVERY	6	\$12,971	\$2,161.89
OBSTETRICAL CARE	6	\$9,507	\$1,584.57
LAP GASTR BYPASS INCL SMLL I	1	\$8,655	\$8,655.00
TOTAL KNEE ARTHROPLASTY	2	\$6,622	\$3,311.14
REMOVAL OF BRAIN LESION	1	\$5,013	\$5,012.96
BREAST RECONSTRUCTION	1	\$4,752	\$4,752.07
LAP GASTRIC BYPASS/ROUX-EN-Y	1	\$2,768	\$2,767.94
IMPLANT NEUROELECTRODE	1	\$2,527	\$2,526.74
CABG, VEIN, SINGLE	1	\$2,269	\$2,269.09
TOTAL HIP ARTHROPLASTY	1	\$2,252	\$2,251.90

For More Information...

Use the ad hoc analysis capabilities of Cognos to determine what factors are driving your inpatient surgery utilization and total dollars paid.

- Access the **Inpatient Surgery** package, and view the data by **Network** to determine if plan participants are receiving services from in-network or out-of-network providers.
- Access the **Inpatient Surgery** package, and view the data by **Major Diagnostic Category** to determine if surgeries fall into a particular category.

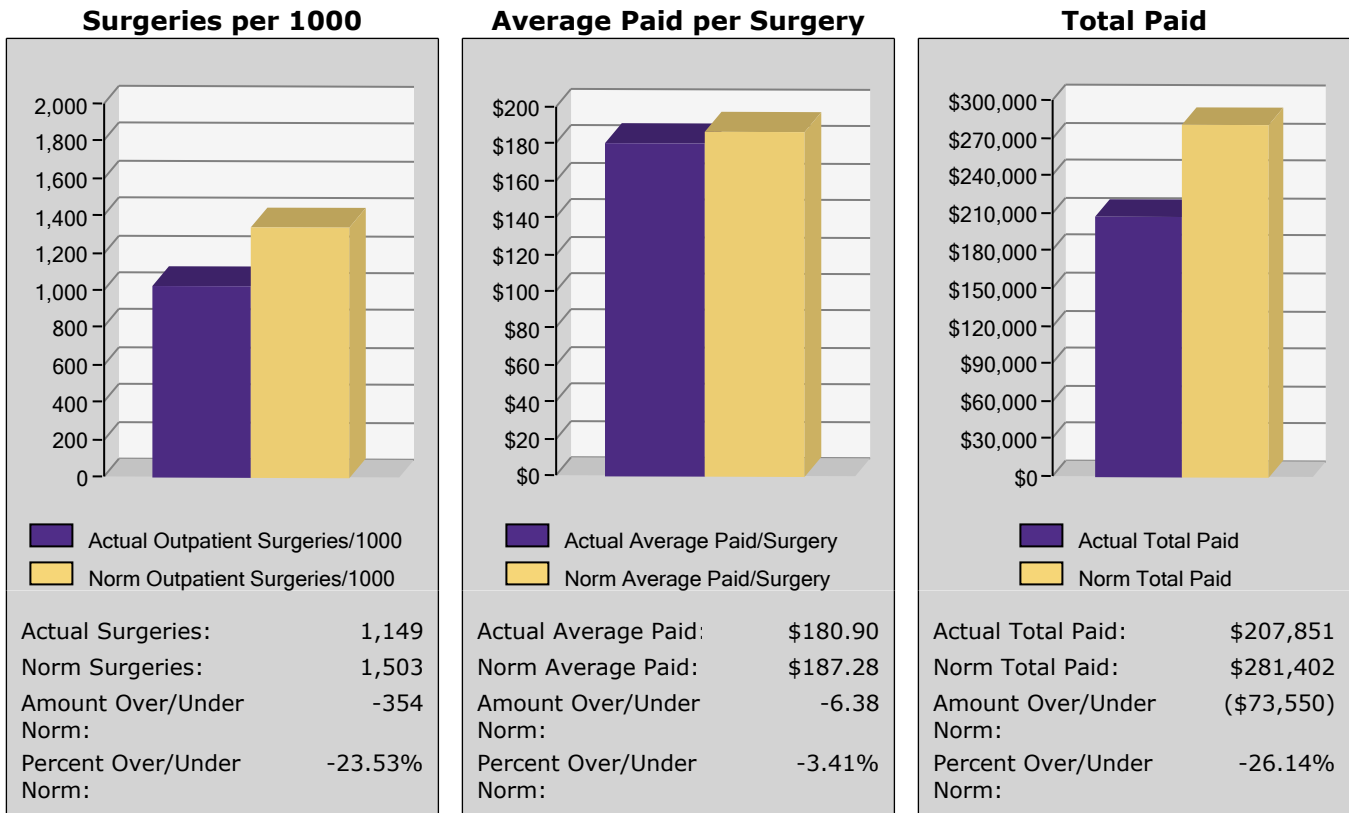
High average paid amount and utilization can indicate the need for better coordination with your utilization review vendor. Some surgeries may not need to be performed inpatient and would be more cost-effective if performed as outpatient procedures.

Outpatient Surgery

This analysis defines outpatient surgery utilization as the number of instances your company's plan participants had a surgical procedure performed on an outpatient basis.

Methodology

Your company's outpatient surgery claims were summarized by procedure code. Paid amounts include surgery only; anesthesia, assistant surgeon and facility/supply charges are not included.



For More Information...

Use the ad hoc analysis capabilities of Cognos to determine which factors are driving your outpatient utilization and total dollars paid.

- Access the **Outpatient Surgery** package, and view the data by **Procedure Category** to determine the breakdown of surgical costs.
- Access the **Outpatient Surgery** package, and view the data by **Major Diagnostic Category** to further determine if surgeries were for relatively low or high cost procedures.

Use this information to assess the need for outpatient utilization review for non-emergency surgeries.

Outpatient Surgery by Procedure

This chart illustrates the outpatient surgery utilization for your company and includes the number of procedures performed in an outpatient setting, compared to the norm.

Methodology

Your company's claims were summarized by outpatient surgical procedures for your plan members to the norm. This exhibit includes only professional fees, not facility fees, for the top ten procedures. Use the ad hoc analysis capabilities of Cognos to see all other surgery codes.

CPT Description	Claimants	Total Paid	Avg Paid
NECK SPINE FUSE&REMOVE ADDL	2	\$7,048	\$3,524.23
KNEE ARTHROSCOPY/SURGERY	4	\$6,317	\$1,579.32
BIOPSY OF SKIN LESION	48	\$5,430	\$113.13
REPAIR OF WOUND OR LESION	7	\$5,125	\$732.11
DESTRUCT LESION, 1-14	36	\$5,077	\$141.04
COLONOSCOPY AND BIOPSY	15	\$4,939	\$329.28
LAPAROSCOPY, APPENDECTOMY	1	\$4,818	\$4,818.15
DESTROY BENIGN/PREMLAL LESION	50	\$4,469	\$89.38
INSERT SPINE FIXATION DEVICE	3	\$4,052	\$1,350.51
DRAIN/INJECT, JOINT/BURSA	28	\$3,891	\$138.95

For More Information...

Use the ad hoc analysis capabilities of Cognos to determine which factors are driving outpatient cost and utilization. Access the **Outpatient Surgery** package, and view the data by **Procedure Category**. Sort by **Claims** to see the source of charges in this area.

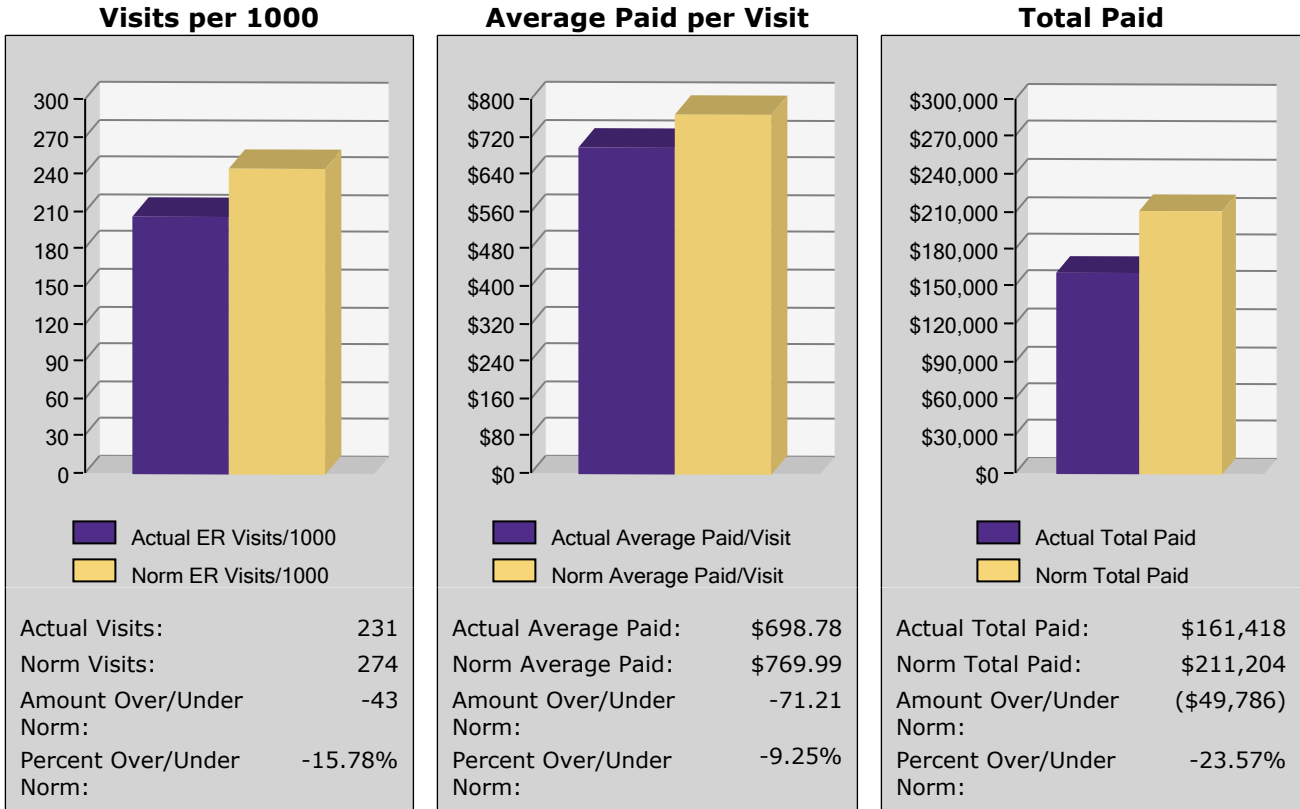
Use **Alternative Modeling** to evaluate the effect a plan design change could have on your costs in this area. For example, change the **Outpatient Surgery Copay** to see the impact on health plan costs.

Emergency Room Visits

This chart illustrates the breakdown of your company's health care claim dollars paid in the emergency room compared to the norm.

Methodology

Your company's claims were analyzed by a combination of place of service and service coding of emergency room, as designated by the claims administrator.



For More Information...

Use the ad hoc analysis capabilities of Cognos to determine what factors are driving your cost and emergency room utilization.

- Access the **Emergency Room** package, and view the data by **Relationship** to determine who is seeking care.
- View data by **Network > Out Of Network**, and sort the data by **Diagnosis (ICD9)** code to determine what types of services are taking place in the ER.

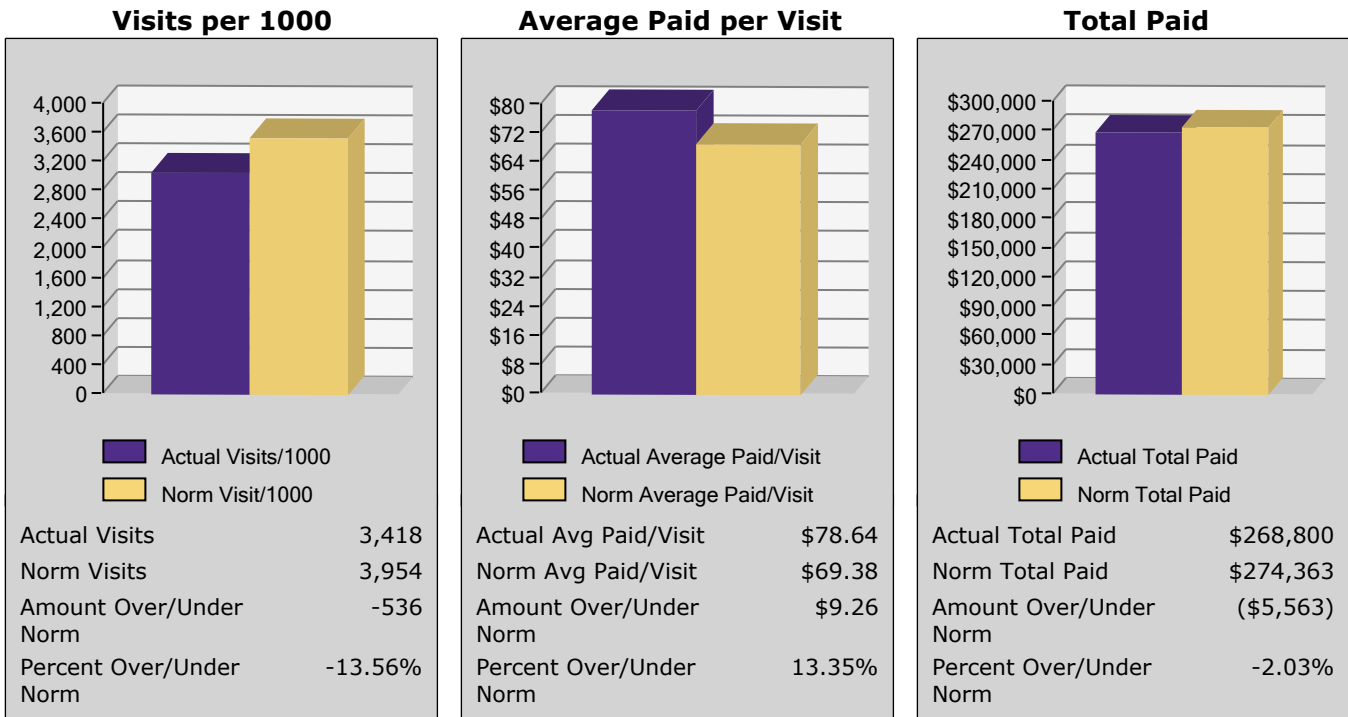
Use **Alternative Modeling** to change copays, and determine the impact on plan costs and the members affected by such a change.

Office Visits

This analysis defines office visit utilization as the number of instances your company's plan participants visited a clinic or office of a physician/practitioner for outpatient treatment.

Methodology

General office visits are defined by the occurrence of "office visit" or "consultation" procedure codes. Providers use these codes for all office visits regardless of how long the visit lasts.



For More Information...

Use the ad hoc analysis capabilities of Cognos to determine what is driving office visit cost and utilization. Access the **Office Visits** package, and view the data by **Provider** or **Major Diagnostic Category (MDC)**.

Use **Alternative Modeling** to evaluate the effect a plan design change could have on cost or members in this area. For example, change the **Primary Care Copay** and compare the change in plan payment.

Office/Clinic Usage Data Table

This exhibit analyzes your company's office and clinic usage. Claims are split between those marked as in-network and those marked as out-of-network for each provider.

Methodology

Your company's experience was analyzed to determine the ten most frequently used doctors/clinics. The top ten provider are listed in descending order of total paid.

Provider Name	Network	# of Visits	Total Paid	% of All Paid
EXEMPLA LUTHERAN HOSPICE	Yes	231	\$18,964	7.06%
BOULDER MEDICAL CENTER ASC	Yes	120	\$10,796	4.02%
HILL JAMES R	Yes	75	\$5,207	1.94%
ACILITY NAME COMMUNITY MEDICAL	Yes	65	\$5,064	1.88%
BOULDER COMMUNITY HOSPITAL-BC	Yes	47	\$3,688	1.37%
SARINOPOULOS E MARK	Yes	50	\$3,481	1.29%
ESSIG JULIA	Yes	40	\$3,315	1.23%
UNIVERSITY PHYSICIANS INC	Yes	20	\$3,046	1.13%
CAVANAGH MICHAEL K	Yes	37	\$3,002	1.12%
BOYLE SHEILA R	Yes	42	\$2,997	1.11%
Others		2691	\$209,240	77.84%
Totals		3418	\$268,800	100.00%

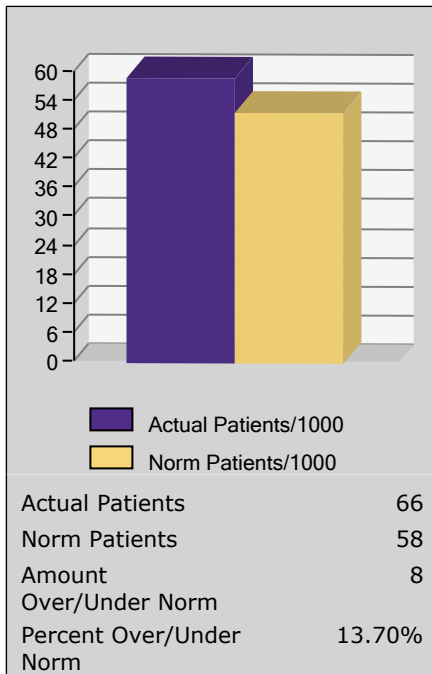
For More Information...

Use the ad hoc analysis capabilities of Cognos to determine what factors are driving your office utilization and total dollars paid. Access the **Office Visits** package, and view the data by **Provider** and by **Procedure Category** to examine the specific nature of individual clinic visits.

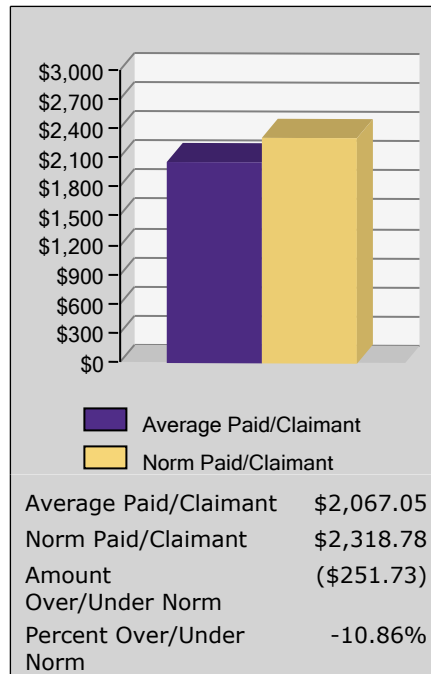
Arthritis

According to the Centers for Disease Control, arthritis is the leading cause of disability in the United States. An estimated 40 million (1 in 7 adults) people in the United States have arthritis or other rheumatic conditions. By the year 2020, this number is expected to reach 59 million. Rheumatic diseases are the leading cause of disability among adults age 65 and older.

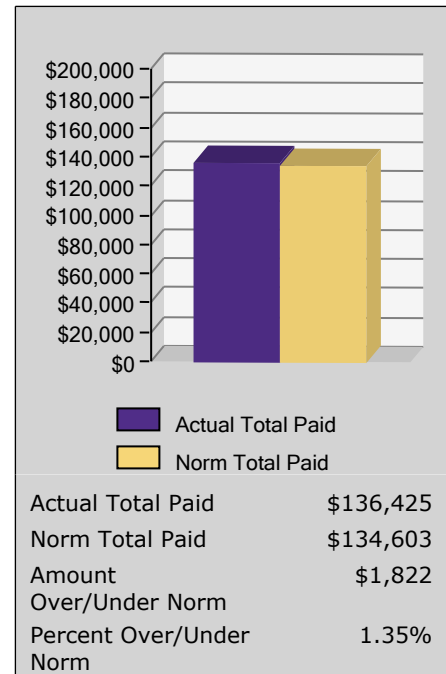
Patients per 1000



Average Paid per Claimant



Total Paid



For More Information...

Use the ad hoc analysis capabilities of Cognos to see how claims related to arthritis affected your company. Access the **Claims History** package, and view the data by **Disease > Arthritis**.

For general health information on arthritis, refer to:

- National Institute of Arthritis and Musculoskeletal and Skin Diseases, www.niams.nih.gov.
- The Arthritis Foundation, www.arthritis.org.

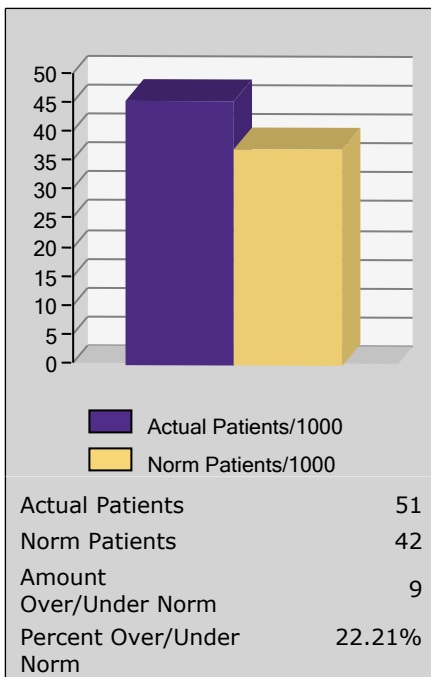
Source: The Arthritis Foundation and Centers for Disease Control and Preventions, National Center for Chronic Disease Prevention and Health Promotion.

Norm Source: Copyright ©2012 Truven Health Analytics Inc. MarketScan® Research Databases. All rights reserved.

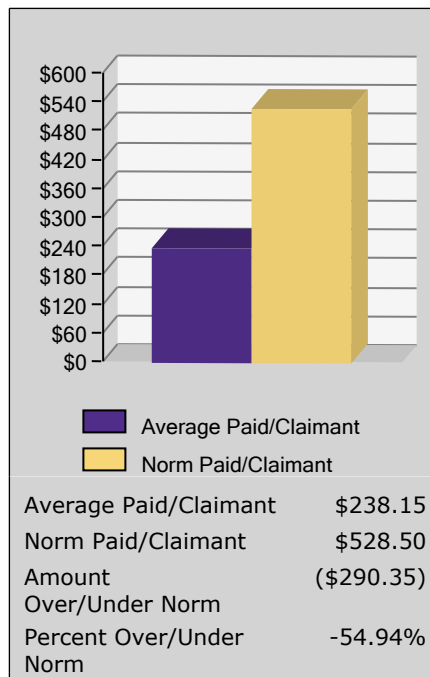
Asthma/Chronic Obstructive Pulmonary Disease

Approximately 20 million Americans have asthma, according to the American Lung Association. Direct health care costs for asthma in the United States total more than \$10 billion annually; indirect costs (lost productivity) add another \$8 billion for a total of \$18 billion.

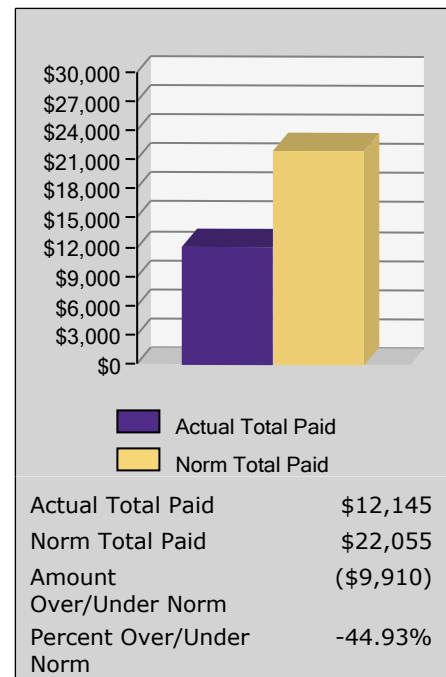
Patients per 1000



Average Paid per Claimant



Total Paid



For More Information...

Use the ad hoc analysis capabilities of Cognos to see how claims related to respiratory functions affected your company. Access the **Claims History** package, and filter the data by **Disease > Asthma/COPD**.

For general health information on asthma and chronic obstructive pulmonary disease, refer to:

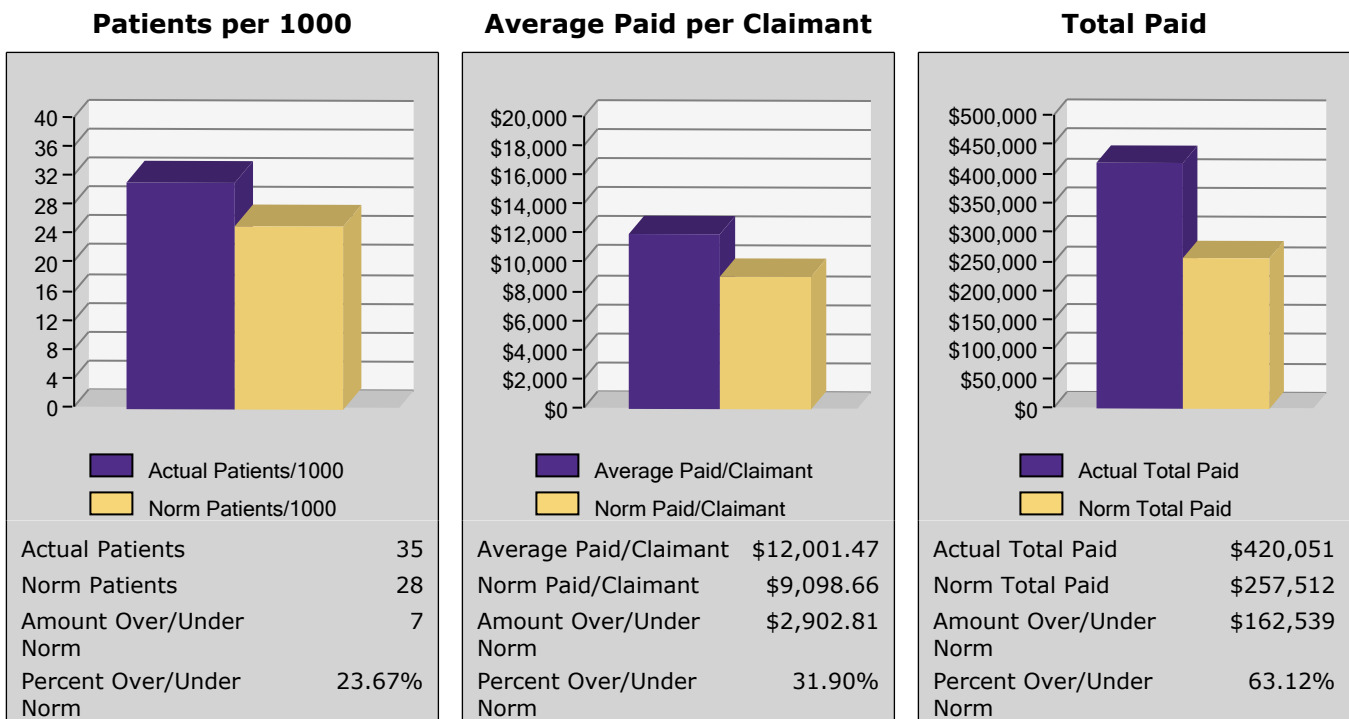
- American Lung Association, www.lungusa.org.
- Asthma and Allergy Foundation of America, www.aafa.org.

Source: National Institutes of Health, National Heart, Lung, and Blood Institute - May 2002, Asthma and Allergy Foundation of America.

Norm Source: Copyright ©2012 Truven Health Analytics Inc. MarketScan® Research Databases. All rights reserved.

Cancer

Cancer accounts for nearly one-quarter of deaths in the United States, exceeded only by heart diseases, according to the American Cancer Society. It is estimated that about 1.64 million new cases of cancer will be diagnosed in 2012. Cancers of the prostate and breast will be the most frequently diagnosed cancers in men and women, respectively, followed by lung and colorectal cancers both in men and in women.



For More Information...

Use the ad hoc analysis capabilities of Cognos to see how claims related to cancer affected your company. Access the **Claims History** package, and view the data by **Disease > Cancer**.

For general health information on cancer, refer to:

- American Cancer Society, www.cancer.org.
- National Cancer Institute, www.cancer.gov.

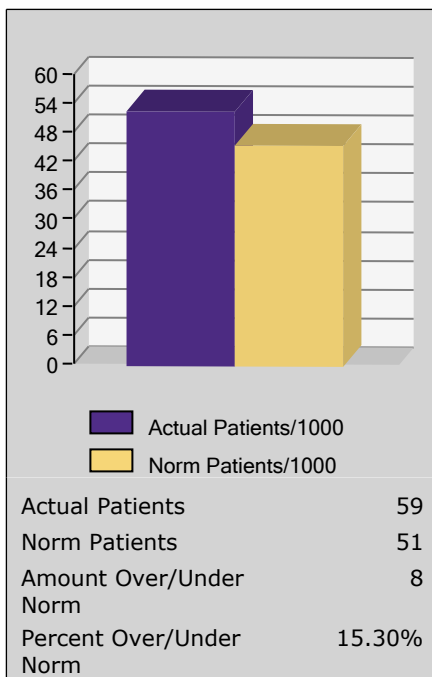
Source: The American Cancer Society

Norm Source: Copyright ©2012 Truven Health Analytics Inc. MarketScan® Research Databases. All rights reserved.

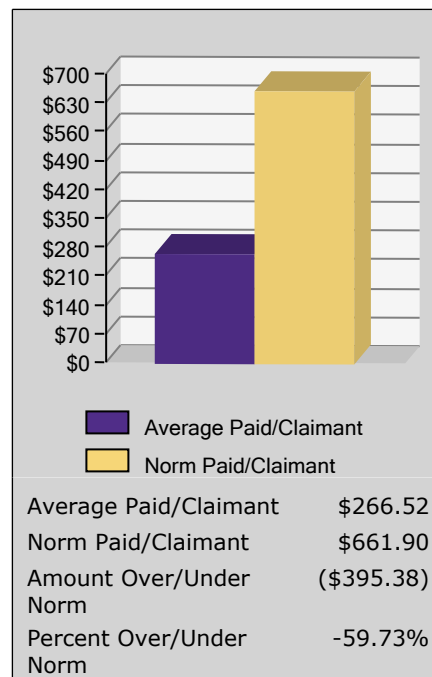
Depression

Depressive disorders affect approximately 18.8 million American adults or about 9.5% of the U.S. population age 18 and older in a given year, according to the National Institute for Mental Health. This includes major depressive disorder, dysthymic disorder, and bipolar disorder. Depression will be the second largest killer after heart disease by 2020. Depression results in more absenteeism than almost any other physical disorder and costs employers more than \$51 billion per year in absenteeism and lost productivity, not including high medical and pharmaceutical bills.

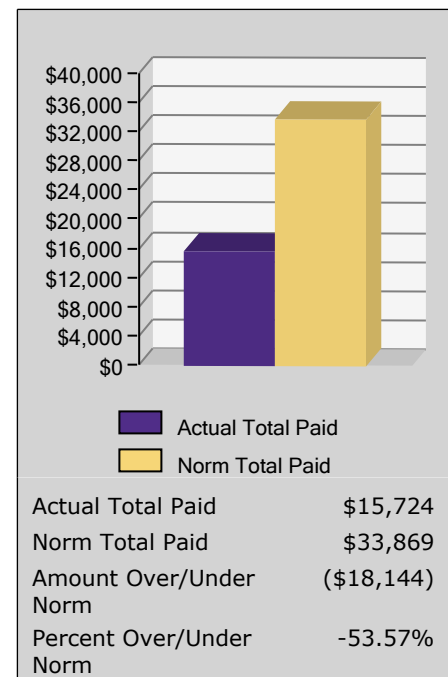
Patients per 1000



Average Paid per Claimant



Total Paid



For More Information...

Use the ad hoc analysis capabilities of Cognos to see how claims related to depression affected your company. Access the **Claims History** package, and view the data by **Disease > Depression**.

For general health information on depression, refer to:

- National Mental Health Association, www.nmha.org.
- National Institute for Mental Health, www.nimh.nih.gov.

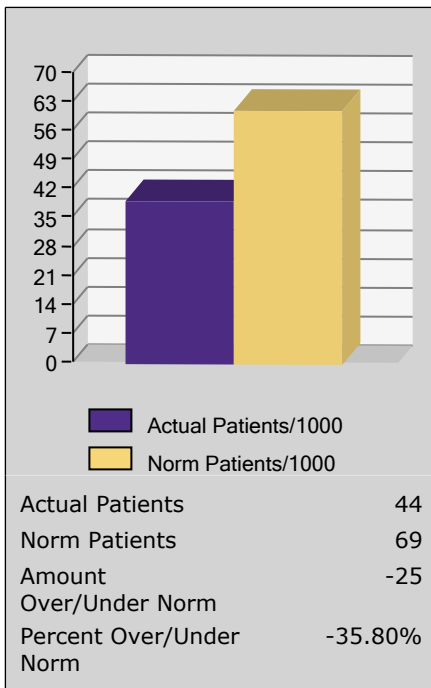
Source: National Institute of Mental Health 2003

Norm Source: Copyright ©2012 Truven Health Analytics Inc. MarketScan® Research Databases. All rights reserved.

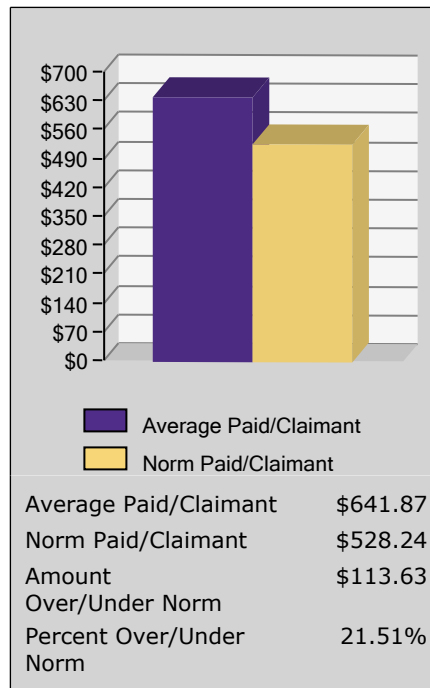
Diabetes

According to the American Diabetes Association, there are 20.8 million people in the U.S., or 7% of the population, who have diabetes. Unfortunately, although an estimated 14.6 million have been diagnosed, 6.2 million people (or nearly one-third) are still unaware that they have the disease. The economic impact is huge. The 2002 estimate was \$132 billion, or one out of every 10 health care dollars spent in the United States.

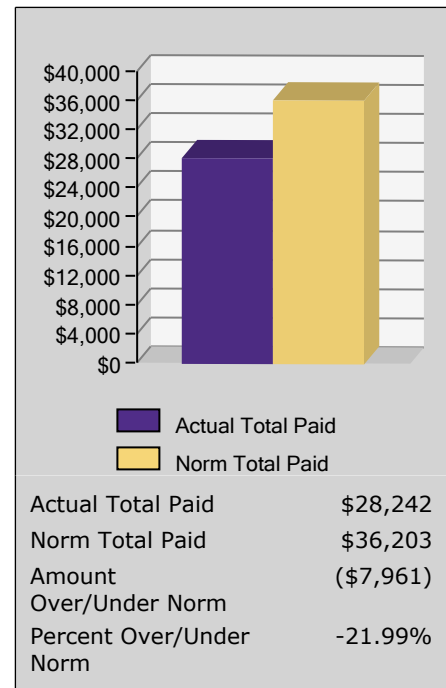
Patients per 1000



Average Paid per Claimant



Total Paid



For More Information...

Use the ad hoc analysis capabilities of Cognos to see how claims related to diabetes affected your company. Access the **Claims History** package, and view the data by **Disease > Diabetes**.

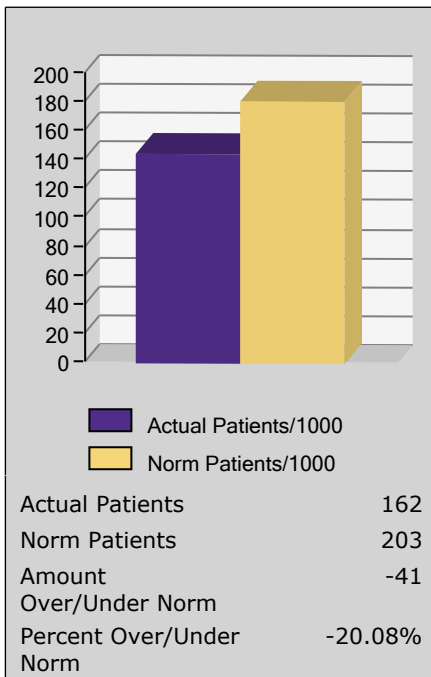
For general health information on diabetes, refer to:

- Centers for Disease Control Prevention, www.cdc.gov/diabetes.
- American Diabetes Association, www.diabetes.org.
- Joslin Diabetes Center, www.joslin.org.

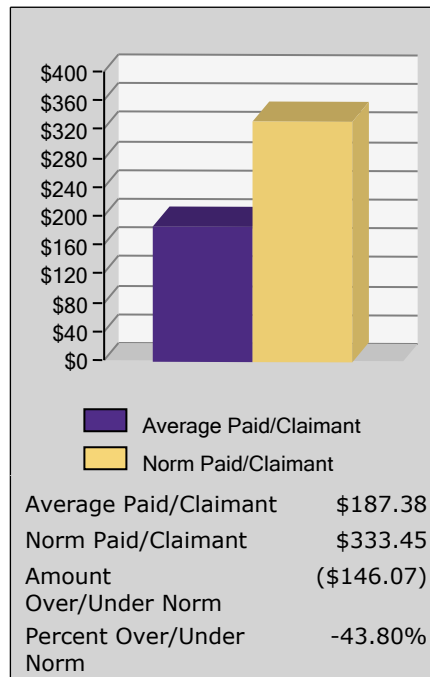
Heart Disease

Heart diseases rank as the number one killer in America, claiming the lives of over 871,000 people in 2004, according to the American Heart Association. Recognizing that 37% of Americans are affected by some type of heart disease, prevention and management are crucial to our healthcare system and our economic well-being. The estimated direct and indirect cost of the disease in the United States for 2007 is \$431.8 billion. Risk factors in younger populations are rising, which is a growing concern. Additionally, lifestyle choices play a major role in prevention of these diseases, so employer education and assistance can be very effective.

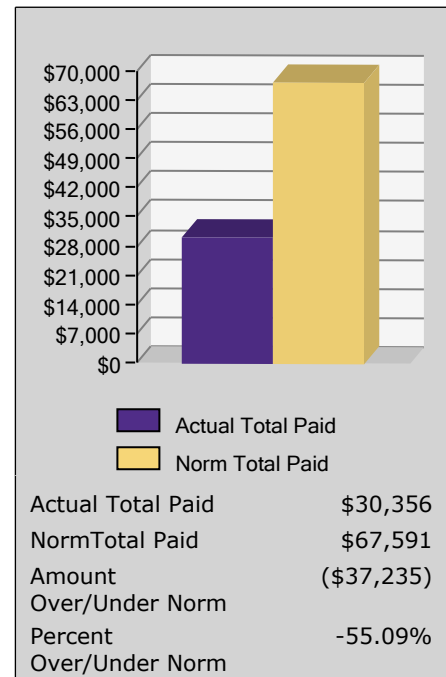
Patients per 1000



Average Paid per Claimant



Total Paid



For More Information...

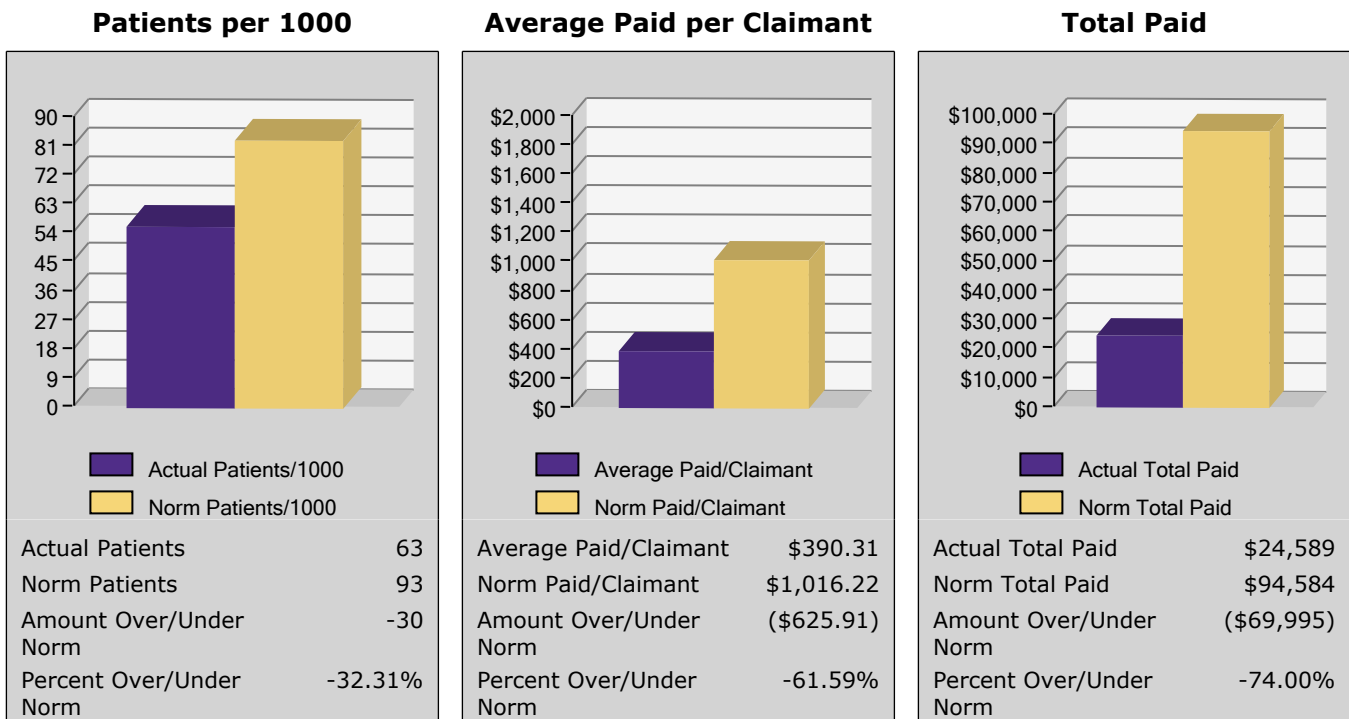
Use the ad hoc analysis capabilities of Cognos to see how claims related to heart disease affected your company. Access the **Claims History** package, and view the data by **Disease > Heart Disease**.

For general health information on heart disease, refer to:

- American Heart Association, www.heart.org.
- National Heart, Lung Blood Institute, www.nhlbi.nih.gov.

Low Back Pain

One-half of all working Americans admit to having back pain symptoms each year, according to the American Chiropractic Association. Back pain is one of the most common reasons for missed work. In fact, back pain is the second most common reason for visits to the doctor's office, outnumbered only by upper-respiratory infections. Americans spend at least \$50 billion each year on back pain



For More Information...

Use the ad hoc analysis capabilities of Cognos to see how claims related to lower back pain affected your company. Access the **Claims History** package, and filter the data by **Disease > Low Back Pain**.

For general health information on low back pain, refer to:

- American Academy of Orthopaedic Surgeons, www.orthoinfo.aaos.org.
- American Chiropractic Association, www.acatoday.org.

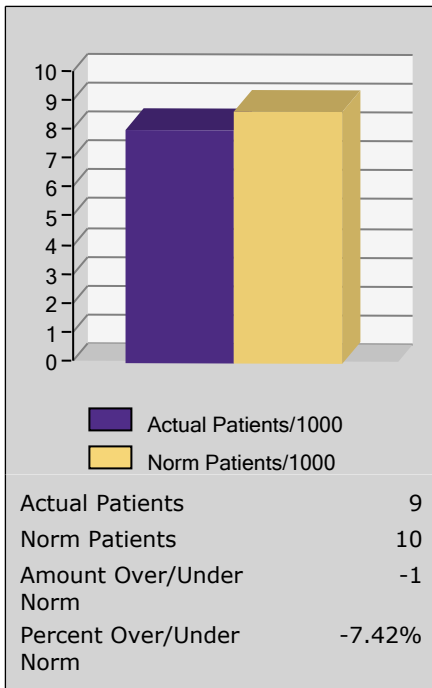
Source: American Academy of Orthopaedic Surgeons, American Academy of Physical Medicine and Rehabilitation, Mayo Clinic

Norm Source: Copyright ©2012 Truven Health Analytics Inc. MarketScan® Research Databases. All rights reserved.

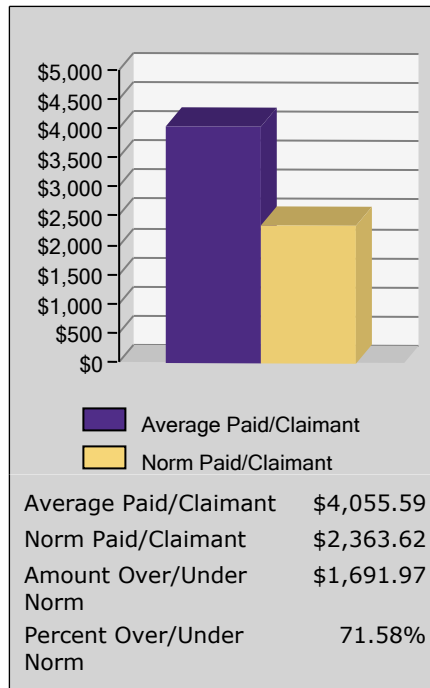
Obesity

Currently, more than 64% of US adults are either overweight or obese, according to the Centers for Disease Control and Prevention. Obesity is associated with significantly increased risk of diabetes mellitus, hypertension, dyslipidemia, certain forms of cancer, sleep apnea, and osteoarthritis. In addition, the increasing prevalence of obesity and its associated complications places a tremendous burden on health care utilization and costs.

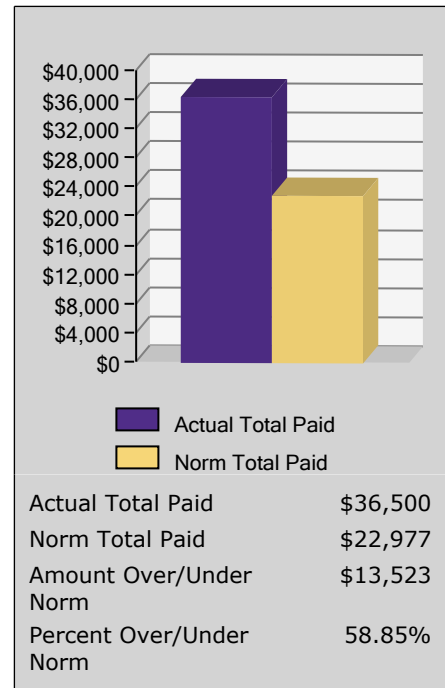
Patients per 1000



Average Paid per Claimant



Total Paid



For More Information...

Use the ad hoc analysis capabilities of Cognos to see how claims related to obesity affected your company. Access the **Claims History** package, and view the data by **Disease > Obesity**.

For general health information on obesity, refer to:

- American Society for Bariatric Physicians, www.asbp.org.
- Centers for Disease Control Prevention, www.cdc.gov/obesity.

Source: HealthLeaders Fact File January 2004 - Medstat, American Heart Association

Norm Source: Copyright ©2012 Truven Health Analytics Inc. MarketScan® Research Databases. All rights reserved.

At - A - Glance

General Information	
Total Employees	487
Total Covered Lives	1118
Total Claim Charges	\$9,435,463.15
Total Claim Payments	\$3,403,540.00

Area	Actual	Norm	Difference	Experience
Health Plan Costs	\$10,606	\$11,437	-7.27%	Favorable
Medical Claims Costs	\$3,696	\$3,054	20.99%	Unfavorable
IP Analysis - Admissions/1000	63	89	-29.49%	Favorable
IP Analysis - Average Paid/Admission	\$11,136	\$16,512	-32.56%	Favorable
Maternity Admissions/1000	13	17	-18.90%	Favorable
Maternity Average Paid/Admission	\$8,640	\$3,913	120.81%	Unfavorable
OP Surgery/1000	1,028	1,344	-23.53%	Favorable
OP Surgery Average Paid	\$181	\$187	-3.41%	Favorable
ER Visits/1000	207	245	-15.78%	Favorable
ER Average Paid	\$699	\$770	-9.25%	Favorable
Office Visits Visits/1000	3,057	3,537	-13.56%	Favorable
Office Visits Average Paid	\$79	\$69	13.35%	Unfavorable
Chiropractic Visits/1000	9	320	-97.20%	Favorable
Chiropractic Average Paid/Visit	\$4	\$18	-76.77%	Favorable
Physical Therapy Visits/1000	191	386	-50.41%	Favorable
Physical Therapy Paid/Visit	\$14	\$18	-23.60%	Favorable
Radiology Visits/1000	893	1,490	-40.07%	Favorable
Radiology Paid/Visit	\$134	\$247	-45.96%	Favorable
IPMH Admissions/1000	4	3	47.45%	Unfavorable
IPMH Average Paid/Admission	\$3,381	\$7,101	-52.39%	Favorable
OP Mental Health Visits/1000	490	562	-12.78%	Favorable
OP Mental Health Average Paid/Visit	\$81	\$86	-5.89%	Favorable

Norms Source: "Employer Health Benefits 2012 Annual Survey", The Henry J. Kaiser Family Foundation and Health Research and Educational Trust, September 2012.

Norms Source: Copyright ©2012 Truven Health Analytics Inc. MarketScan® Research Databases. All rights reserved.