

**City of Gainesville -
Medical and Pharmacy
RFP - Effective
1/1/2025**

United HealthCare

Aaron Carper

06/25/2024

Contents

1. RFP Overview	3
2. General Information	3
3. Vendor Requirements.....	7
4. Background & Underwriting Information	8
5. Response Form - Medical Insurance	11
6. Response Forms - Self Funded Medical Rx/ASO	13
7. Questionnaire - Medical	16
8. Questionnaire - Stop Loss	29
9. Questionnaire - Wellness	31
10. Questionnaire - Mental/Behavioral Health	36
11. Questionnaire - Pharmacy.....	39
12. Questionnaire - General Information.....	47
13. Questionnaire - Data and Reports	64
14. Questionnaire - Enrollment & Implementation Technology.....	72
15. Questionnaire - Implementation and Billing	76
16. Questionnaire - Renewal Planning and Additional Fees.....	81
17. RFP Attachments	81
18. Vendors Response Attachments.....	82
Vendors are asked to include all documents supporting their proposal into this section.	82

1. RFP Overview

Coverage Effect Date: January 1, 2025

The City of Gainesville, hereinafter referred to the Entity, is soliciting experience and qualified firms that demonstrate the highest level of ability to provide the following lines of coverage:

- Medical and Rx Insurance with the following funding arrangements:
 - Full-Insured
 - Self-Insured
 - Administration Services Only (ASO)
 - Stop Loss Reinsurance
 - Pharmacy Benefit Management

Due Date: Proposals shall be submitted electronically via RFP360 by 5:00 PM on July 12, 2024.

Firms interested in submitting a response to this RFP agree not to contact (lobby) any employee or agent of the Entity at any time during the solicitation period and the selection process. All oral or written inquiries are to be directed to the Gehring Group. Any other contact with the owner will be considered inappropriate and subject your response to rejection/disqualification.

The Entity reserves the following rights: to waive in-formalities in any proposal; to reject any or all proposals or portions of proposals; to accept any proposal or portions of proposals deemed to be in the best interest of the Entity; and to negotiate or refuse to negotiate with any offer.

It is the Entity's intention to deal directly with all carriers via its appointed Agent of Record. The Entity's appointed Agent of Record is the Gehring Group.

2. General Information

SCOPE AND PURPOSE

The specifications include the complete set of requirements and proposal forms. Proposers are strongly encouraged to complete all proposal forms as specified and include the forms with your proposal. Failure to include proposal forms may be grounds for disqualification from this RFP Process.

INTENT OF RFP

The Entity is soliciting Medical (Self-Funding and Fully Insured Arrangements), Pharmacy Benefit Management, and Stop Loss Reinsurance coverage for Entity employees, officials, retirees, COBRA participants and their families. The Entity's goal is directed toward the highest professional level of service while providing access to a quality network of providers at an affordable cost. Proposals for PBM carve out will be considered.

CALENDAR

The intended timeline is:

• Release of RFP	06/24/2024
• Deadline for receipt of questions	07/08/2024
• Deadline to receive proposals	07/12/2024
• Initial analysis presented to Entity.	07/24/2024
• Best and Final offers presented (if necessary).	08/14/2024
• Meeting to Approve Recommendations	09/05/2024
• Open Enrollment Period	TBD
• All Data to Carrier(s)	TBD
• Plan Effective Date	January 1, 2025

This timeline is subject to change.

CONTACT PERSON

The contact person for the content of this RFP is Samantha Ricchini at Samantha.Ricchini@gehringgroup.com.

Please reach out to support@rfp360.com or +1 (844) 737-0365 if you have any questions relating to the functionality of RFP360.

ADDITIONAL INFORMATION/AMENDMENT

Request(s) for additional information or clarifications must be made in writing no later that the date specified in the RFP timeline above.

Changes to this RFP, when deemed necessary, will be completed by written addendum issued prior to the proposal due date. Proposers should not rely on any representations, statements or explanation other than those made in the RFP or in any addendum to this RFP. Where there appears to be a conflict between the RFP and any addenda issued, the last addendum will prevail. It is the proposer's responsibility to assure receipt of all addenda.

INTERVIEWS

Proposers may be asked to attend an interview in support of their proposal or to explain or demonstrate the information contained therein.

PUBLIC RECORDS LAW

Upon award recommendation or ten (10) days after opening, whichever is earlier, any material submitted in response to this RFP will become a "public record" and shall be subject to public disclosure consistent with Chapter 119, Florida Statutes (Public Record Law). However, Chapter 337 and its provisions may also be imposed. Proposers must claim the applicable exemptions to disclosure provided by law in their response to the RFP by identifying materials to be protected, and must state the reasons why such exclusion from public disclosure is necessary and legal. The Entity reserves the right to make any final determinations of the applicability of the Public Record Law.

City's Public Records Language

Florida has a very broad public records law and certain records of a contractor may be considered public records. Accordingly, by entering into an agreement with the CITY, CONTRACTOR must:

1. Keep and maintain public records required by the CITY to perform the service.

1. Upon request from the CITY's custodian of public records, provide the CITY with a copy of the requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119, F.S., or as otherwise provided by law.

1. Ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the contract if the CONTRACTOR does not transfer the records to the CITY.

d. Upon completion of the contract, transfer, at no cost, to the CITY all public records in possession of the CONTRACTOR or keep and maintain public records required by the CITY to perform the service. If the CONTRACTOR transfers all public records to the CITY upon completion of the contract, the CONTRACTOR shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If the CONTRACTOR keeps and maintains public records upon completion of the contract, the CONTRACTOR shall meet all applicable requirements for retaining public records. All records stored electronically must be provided to the CITY, upon request from the CITY's custodian of public records, in a format that is compatible with the information technology systems of the CITY.

IF THE CONTRACTOR HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE CONTRACTOR'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT (352) 393-8891, WATTSTL@CITYOFGAINESVILLE.ORG, TIFFANY WATTS-CHESTNUT, CITY OF GAINESVILLE Risk Management, P.O. BOX 490, STATION 60, GAINESVILLE, FL 32627-0490.

ACCEPTANCE / REJECTION OF PROPOSALS

The Entity reserves the right to reject any and all proposals submitted in response to this RFP, or to cancel, in part or its entirety, this request, if it is in the best interests of the Entity to do so.

The Entity reserves the right to accept or reject any or all proposals received as a result of this request, or to negotiate separately with competing proposers simultaneously, and to waive any in-formalities, defects, or irregularities in any proposal.

The Entity reserves the right to accept the proposal of a proponent other than that of the lowest proponent.

DISCLOSURE OF PROPOSAL CONTENTS

All material submitted becomes the property of the Entity. The Entity has the right to use any or all ideas presented in any reply to this RFP. Selection or rejection of the proposal does not affect this right.

RENEWAL

The awarded firm shall give a minimum of 180 days written notice prior to any renewal date to the Entity stating specifically what, if any, rate change is proposed.

CONTRACT TERMS

The Entity is requesting a three year contract with two, one year renewal options for the proposer(s) awarded the business. Proposers are welcome to provide longer rate guarantees.

RECOMMENDED RATE GUARANTEE TERMS

- Medical/Rx: 12 Months
 - ASO: 36 Months
 - Stop Loss: 12 Months
 - Fully Insured: 12 Months

3. Vendor Requirements

- **Proposal Effective Date:** January 1, 2025
- **Commissions:** Proposals should include rates that are net of commissions.
- **Retirees:** Florida Governmental Retirees must be allowed to continue coverage under the Entity's insurance program as required by Florida Statute 112.08.
- **Reference Requirement:** It is a requirement that all insurance carriers currently provide group insurance to at least two other Municipal entities with at least 2,500 employees. Proposers not able to list two current Municipal references may be disqualified from consideration.
- **Inquiries:** All questions regarding the document shall be submitted in writing via RFP360.
- **Benefit Plan Design:** Proposers are encouraged to match current plan designs as closely as possible for all lines of coverage.
- **Funding Type Proposals:** Medical/Rx proposers are expected to provide proposals on both a self-funded and fully insured basis.
- **Wellness Incentive Program:** Please outline, in detail, your proposed Wellness Program and any resources available to the Entity (including Mental Health wellness resources). Please also include \$150,000 in annual Wellness Funds.
- **Pharmacy Rebates:** Medical and Pharmacy ASO proposers must provide Pharmacy Rebates at a 100% pass through to the Entity. The Entity's pharmacy benefit manager is with current

medical carrier and Entity receives 100% of Rx rebates. Proposals carving out pharmacy administration will be considered.

- **Technology Funds:** Proposers are encouraged to include technology funds in their proposal, with a minimum of \$75,000 per year for three years.
- **Guarantees:** Proposers are encouraged to include performance guarantees, implementation guarantees, service guarantees, and network discount guarantees.
- **Rate Guarantees:** Medical proposers and Pharmacy Benefit Managers are encouraged to provide multiple year rate guarantees for self-funded administration fees.
- **Plan Implementation:** It is a requirement that the proposer awarded this contract provides representative(s) to assist with implementation, open enrollment, employee communications and ongoing assistance with routine plan administration.
- **Contract:** Please include your carrier standard contract in Word Document format with the RFP for the Entity's review.
- **Employee Communications:** It is the responsibility of all successful proposers to provide the necessary papers, forms, etc., for initial enrollment and also the administration of benefits including but not limited to: brochures outlining schedule of benefits, directories, certificates, claim forms, identification cards, benefit booklets, etc., where applicable.
- **Benefit Administration:** The Entity has retained Workday for on-line enrollment and electronic administration of the Entity's benefit programs, all proposers must have the technological capacity to transmit and accept a HIPAA 834 5010 eligibility file with proper confirmation of receipt and discrepancy reporting.
 - If the selected provider has an existing data exchange process with Workday, that process will continue including file layouts, timing and method of transmitting data. For those providers that do not have an existing data exchange process with Workday, Workday will require that utilization of the Workday standard file layout and FTP site as the method of data transmission. Eligibility files, including employee terminations, are provided on a per payroll basis.

4. Background & Underwriting Information

BACKGROUND SUMMARY

The Entity has a self-funded medical insurance plan with Florida Blue. Stop loss and pharmacy are also currently offered through Florida Blue. The Entity currently has one PPO medical plan.

The Entity has an Employee Health Center. Employees are not required to use the clinic and may still use the medical network at their choosing.

PLAN CHARACTERISTICS

Please take all of the following into consideration in your proposal:

- The Entity has 2,293 employees and 1,876 Retirees.
- The Entity's medical tier structure is 4 tiers.
- The medical and prescription drug plan consists of one PPO plan. The Entity is interested in keeping benefits as close to current as possible, so they would like to see a plan matching current benefits.
- Medical and pharmacy carriers are encouraged to include Rx Rebates in their proposal. These rebates should be made payable directly to the Entity. Please provide an estimate of expected annual Rx rebates with your proposal as well.
- Stop loss: Please quote a contract term of 12/36. Please match current policy as closely as possible. The specific deductible is \$375,000 and there is an aggregating specific deductible of \$100,000. There is no aggregate stop loss in place. Stop loss policy can be found in the attachments.

RETIREE INFORMATION

- Retirees and survivor spouses are eligible for Medical/Rx coverage.
- In addition to the Florida Blue medical plan, the Entity offers Medicare Supplement Part F/G and a Florida Blue Medicare PremierRx Part D Plan to eligible retirees.
- Out of the 1,876 retirees, 531 retirees are enrolled in the Medicare Supplement plan and 460 retirees are enrolled in the Florida Blue Retiree Health plan.

Medical Rate History (Funding Rates):

	2022	2023	2024
Florida Blue Medical Plan			
Employee Only	\$689.23	\$723.68	\$796.05
Employee + Spouse	\$1,365.41	\$1,433.68	\$1,577.04
Employee + Child(ren)	\$964.01	\$1,012.22	\$1,137.30
Employee + Family	\$1,755.04	\$1,842.81	\$2,027.07

ASO/Reinsurance Rate History:

	2022	2023	2024
ASO PEPM - Individual	\$28.23	\$28.23	\$28.23
ASO PEPM - Family	\$65.92	\$65.92	\$65.92
ISL PEPM - Composite	\$25.78	\$27.71	\$30.21

EMPLOYEE ELIGIBILITY:

Waiting Period for Benefits for all Employee Classes for Health Insurance

Commissioners and Charter Officers-No wait

Regular Full-time, ¾ Part-time, ½ Part-time, Professional Time-Limited Temporary Employees- the earliest effective date of coverage is the first of the month after 30 days of employment

Professional Temporary Employees- the earliest effective date is the first of the month after the 90th day of employment.

Retirees-City Health Plan-Earliest effective date is the first day of retirement. City Medicare Supplement and Part D- The earliest effective date is the first of the month the Retiree turns 65.

The Entity's payroll cycle is biweekly, and they have 26 paychecks during the calendar year. Retiree payments are on a monthly basis.

CONTRIBUTION STRATEGY:

- Medical:
 - Active Employees - The contributions for active employees are listed in the chart below.
 - Retirees - Retiree contribution rates are formula-based. Each Retiree receives a City Contribution valued at \$10/year of service and \$5 is added/subtracted for each year the Employee retires before/after the age of 65, respectively. (Therefore, each Retiree's contribution is different).

Contribution - Current (2024):

Medical	Employee	Employer
Employee Only	\$646.07	\$149.98
Employee + Spouse	\$889.27	\$687.77
Employee + Child(ren)	\$671.97	\$465.33
Employee + Family	\$1,159.78	\$867.29

5. Response Form - Medical Insurance

Response Form - Medical Insurance

1. Please fill out this table if you are providing a quote for a Medical plan with In Network and Out of Network Benefits.

Schedule of Benefits	Current Plan - In Network	Current Plan - Out of Network	Proposed Plan - In Network	Proposed Plan - Out of Network
Network(s) Utilized	Florida Blue BlueOptions	Florida Blue BlueOptions	UnitedHealthcare Choice Plus	Naviguard program
Deductible - Plan Year or Calendar Year	Calendar Year	Calendar Year	Calendar Year	Calendar Year
Individual Deductible	\$600 Rx Deductible: \$300	Combined with In-Network	\$600 Rx Deductible: \$300	Combined with In-Network
Family Deductible	\$1,800	Combined with In-Network	\$1,800	Combined with In-Network
Out-of-Pocket Maximum Individual	\$4,500	\$5,000	\$4,500	\$5,000
Out-of-Pocket Maximum Family	\$7,500	\$10,000	\$7,500	\$10,000
Member Coinsurance	20%	40%	20%	40%
Physician Office Visit	\$15	40% after CYD	\$15	40% after CYD
Specialist Office Visit	20% after CYD	40% after CYD	20% after CYD	40% after CYD
Preventive Care	No Charge	40%	No Charge	40%
Telehealth / Virtual Visit	\$15 (PCP) / 20% after CYD (Specialist)	40% after CYD	\$15 (PCP) / 20% after CYD (Specialist)	40% after CYD
Independent Clinical	No Charge	40% after CYD	No Charge	40% after

Lab				CYD
X-rays	\$50	40% after CYD	\$50	40% after CYD
Advanced Imaging (MRI, PET, CT)	\$125	40% after CYD	\$125	40% after CYD
Urgent Care Visit	\$30	\$30	\$30	\$30
Outpatient Surgery in Surgical Center	\$100	40% after CYD	\$100	40% after CYD
Physician Services at Surgical Center	20% after CYD	40% after CYD	20% after CYD	40% after CYD
Inpatient Hospital (Per Admit)	\$750	40% after CYD	\$750	40% after CYD
Outpatient Hospital (Per Visit)	\$150	40% after CYD	\$150	40% after CYD
Physician Services at Hospital	20% after CYD	20% after in-network CYD	20% after CYD	20% after in-network CYD
Emergency Room (Per Visit)	\$250	\$250	\$250	\$250
Mental Health & Substance Abuse Inpatient Hospital (Per Admit)	\$750	40% after CYD	\$750	40% after CYD
Mental Health & Substance Abuse Outpatient Services (Per Visit)	\$150	40% after CYD	\$150	40% after CYD
Mental Health & Substance Abuse Office Visit	\$15	40% after CYD	\$15	40% after CYD
Prescription Drugs - Tier 1 / Generic	\$10	40%	\$10	40%
Prescription Drugs - Tier 2 / Preferred Brand Name	\$300 Rx Ded + \$50	\$300 Rx Ded + 40%	\$300 Rx Ded + \$50	\$300 Rx Ded + 40%
Prescription Drugs - Tier 3 / Non-Preferred Brand Name	\$300 Rx Ded + \$80	\$300 Rx Ded + 40%	\$300 Rx Ded + \$80	\$300 Rx Ded + 40%
Prescription Drugs - Tier 4 / Specialty	\$160	\$300 Rx Ded + 40%	\$160	\$300 Rx Ded + 40%
Prescription Drugs - 90 day supply Mail Order	Tier 1 - \$20 Tier 2 - \$300 Rx Ded + \$100 Tier 3 -	N/A	N/A	N/A

	\$300 Rx Ded + \$160			
--	----------------------	--	--	--

2. Please provide the Premium equivalents for the proposed line of coverage.

Coverage Tiers	Current Rates	Proposed Rates
Employee Only		\$888.55
Employee + Spouse		\$1760.30
Employee + Child(ren)		\$1269.46
Employee + Family		\$2262.62
Rate Guarantee		Admin fee is guaranteed for 3 years.

3. Please provide the fully insured rates for the proposed line of coverage.

Coverage Tiers	Current Rates	Proposed Rates
Employee Only		Not quoted.
Employee + Spouse		Not quoted.
Employee + Child(ren)		Not quoted.
Employee + Family		Not quoted.
Rate Guarantee		Not quoted.

6. Response Forms - Self Funded Medical Rx/ASO

1. Complete if proposing Administrative Only Services (Please note the use of "N/A" in any contract details field will be evaluated as "not offered." Please use "Included" to indicate that a service is offered with no additional cost added to the ASO rates):

Contract Details and All Applicable Fees Below:	Base Plan
Name of Proposer	UHC
Name of Network(s) Utilized	Choice Plus
Administration Fee (PEPM)	\$35.70
Utilization Review (PEPM)	Included.
Network Access Fee (PEPM)	Included.
Disease Management (PEPM)	Included. (assumes RX is carved-in)
Pharmacy Management Fee (PEPM)	Varies by program - PHS Tier 2 is included.
Wellness Program Fee (PEPM)	Included

HIPAA Certification	See ASO Proposal
Other Fees (PEPM)	N/A
Termination Fees (PEPM)	Three Years
Rate Guarantee	Three years
TOTAL ADMIN FEE (PEPM) Year 1	\$35.70
TOTAL ADMIN FEE (PEPM) Year 2, if applicable	\$35.70
TOTAL ADMIN FEE (PEPM) Year 3, if applicable	\$35.70
TOTAL ADMIN FEE (PEPM) Year 4, if applicable	2.5% escalator
TOTAL ADMIN FEE (PEPM) Year 5, if applicable	2.5% escalator
Please confirm if there is a stop loss interface fee. If so, what is your stop loss interface fee?	\$3.50

2. Complete if proposing Stop Loss Insurance:

Contract Details	Proposed Offer
Type of Contract	24/12
Coverages Included	Medical and Rx
Lifetime Maximum	Unlimited
Specific Deductible	\$375,000
Specific Premium - Single PEPM	\$57.06
Specific Premium - Family PEPM	\$57.06

3. Complete if proposing Pharmacy Benefit Management:

Contract Details	Proposed Offer
Contract Length	3 years
Guarantee Level	See Rx Proposal
Contract Type	See Rx Proposal
Network Details	Our Broad Pharmacy Network is our largest, national retail pharmacy network that provides members convenient access to all major chains, grocery store pharmacies, mass merchants, small chains, pharmacy services administration organizations (PSAOs), and independent pharmacies throughout the United States (including Puerto Rico, Guam, and the Virgin Islands).
Network Type	Open.
Network Size	67,000
Major Chains Excluded (if any)	None.
Retail Network Discounts	
Overall Brand Guaranteed Discount (Post-AWP)	19.00%

Overall Generic Guaranteed Discount (must include Single Source Generics)	84.10%
Dispensing Fees - Brand	0.60
Dispensing Fees - Generic	0.60
Mail Discounts	
Overall Brand Guaranteed Discount (Post-AWP)	25.00%
Overall Generic Guaranteed Discount (must include Single Source Generics)	86.10%
Dispensing Fees - Brand	\$0.00
Dispensing Fees - Generic	\$0.00
Specialty Discounts	
Overall Guaranteed Mail Specialty Discount (Post-AWP)	20%
Overall Guaranteed Retail Specialty Discount (Post-AWP)	20%
Dispensing Fees - Brand	\$0.00
Dispensing Fees - Generic	\$0.00
Administrative Fees / Allowances	\$5.00 PEPM admin fee
Administrative Fee Credit (PEPM)	N/A
Administrative / Transaction Fee Per Claim	N/A
Clinical Fees	\$50 per PA, \$2.50 per DMR
Addtl cost for	TBD

Electronic eligibility submission	
Addtl cost for TPA / PBM Feed	TBD
Please provide your annual estimated Rx rebates for Year 1 of the contract.	\$3.7M
Guaranteed Retail Rebate Amount Per Brand Claim	\$360.03
Guaranteed Retail-90 Rebate Amount Per Brand Claim	\$1010.73
Guaranteed Mail Rebate Amount Per Brand Claim	\$1010.73
Guaranteed Mail Specialty Amount Per Brand Claim	\$3803.78
Guaranteed Retail Specialty Amount Per Brand Claim	\$3803.78

7. Questionnaire - Medical

1. Please provide your proposed Benefit Summaries as part of your response.

We are able to administer and match the current benefits. Please see response forms in section five for additional details.

2. Detailed plan documents have been included in the attachments sections of this RFP. Please outline any differences between Cigna's documents and your proposed SBCs/SPDs (ie, is there something that is currently being administered that your company cannot administer in the same way?)

We are able to administer and match the current benefits. Please see response forms in section five for additional details.

3. Please provide a Medical Geo Access report that illustrates the number of: a. 1 Hospital within 10 miles b. 2 PCPs & Pediatricians within 10 miles c. 2 OBs/Gyns, within 10 miles d. 2 Specialists within 10 miles (excluding OBs/Gyns) e. 2 Urgent Care Centers within 10 miles The report format should include a breakdown by employee city of residence with the number of employees in that location and the number of providers servicing that location. The report should also include reporting on the number and location of employees who do not meet the above criteria.

Confirmed. Please refer to the attachment "Geo Access Report" included with this proposal.

4. Please identify proposed provider network.

We are proposing our UnitedHealthcare Choice Plus network for City of Gainesville (the City).

UnitedHealthcare Choice Plus offers the same key benefits as UnitedHealthcare Choice, including providing members with access to an expansive network of health care professionals. The primary difference between the two plans is that UnitedHealthcare Choice Plus offers members a level of benefits should they choose to seek care outside the network. Like UnitedHealthcare Choice, UnitedHealthcare Choice Plus does not require members to designate a primary physician to coordinate care, nor are specialist referrals required for eligible services.

Today, our network includes approximately seven out of every 10 available physicians and nine out of 10 hospitals nationwide. Our network currently consists of over 684,000 physicians and 5,400 hospitals. Customers will appreciate the vast reach of our network and the simplicity of one unifying administrative system.

5. For proposers not proposing national network coverage, please describe available access for out-of-state residents (retirees and/or dependents of covered participants).

We are proposing a national network.

6. Please confirm requirements for coordination with Medicare for both active employees and their dependents, as well as retired employees and their dependents.

Coordination with Medicare is handled in the same manner as coordination with all other health plans. An EOB from the primary carrier is required, and claim transactions are processed according to the specific health plan as either carved-out or part of integrated benefits.

During enrollment, we ask for other coverage information for both employees and their dependents. We load this information into our claim system. Then, if during claim processing, an

indicator states that other coverage is applicable to any dependent, our system denies that dependent's claim and requests a primary insurance statement for the dependent.

We request an update to other coverage status every 12 months unless there is an indication of other insurance present.

If complete coordination of benefits (COB) information is not provided on the enrollment application, we may send an inquiry letter or call to the member requesting the information we need. Updates can also be requested online.

7. Each proposer must confirm that they will provide the following reports upon request (monthly) by the Entity or its Agent of Record: a. Large Claimants (over \$25,000) inclusive of gender, plan, diagnosis, last date of service, prognosis and if the claimant remains covered on the plan. b. Utilization reports by diagnosis, place of service, employee vs. dependent costs. c. Monthly paid claims

Our online reports, available through our employer portal, provide detailed reporting by financial program area, pharmacy, network and plan performance, and membership to help you manage your benefit plans.

You can access paid claim and utilization data for use in identifying specific trends and analyzing your health care experience. Interactive access provides the ability to add on report fields and constrain data with filters/parameters to support greater analytics. You can also select ad hoc data to create a variety of customized reports.

Data to support reports are updated on the 10th business day of the following month. You can request reports at any time, and you control whom within your company has access to the application.

The Executive Affordability Scorecard, updated monthly, provides key cost and utilization indicators and tracks demographics, cost-sharing, high-cost claimants, cost savings, utilization and managed pharmacy.

Large Claim Reports

Reports that identify the number of claimants with large losses, as well as claim payments above a variety of threshold levels, do not include any prognosis or diagnosis data; however, diagnosis reporting is available separately within each of the following reports, included in your online reporting package.

- ***Utilization by Diagnosis*** displays a comparison of claim volume and utilization by Agency for Healthcare Research and Quality (AHRQ) diagnostic category between two time periods. This high-level report includes inpatient and outpatient claims.
- ***Inpatient Utilization by Diagnosis*** displays a comparison of utilization and costs by AHRQ diagnostic category for inpatient place of service between two service periods.
- ***Outpatient Utilization by Diagnosis*** displays a comparison of claim volume and utilization by AHRQ diagnostic category for outpatient place of service between two service periods. Since the treatment of different diagnoses varies substantially by setting, this report provides a high-level view of utilization in an outpatient setting. Patterns and trends over two periods of time can be identified.

You can run your own Large Loss Claim Payment report, setting the reporting threshold at the desired reporting level. It is important to note that the Large Loss Claim Payment report is not intended to support third-party stop loss reporting.

Our reports are based on claims activity and do not include prognosis. Our online reports and annual, hard-copy Plan Performance Package reports include information presented by Agency for Healthcare Research and Quality (AHRQ) diagnostic category.

Information available to self-funded customers contains protected health information (PHI) as defined by HIPAA Privacy Rules. We require a valid signed administrative services agreement (ASA) or a valid signed business associate agreement (BAA) to extend a self-funded customer access to PHI.

Utilization Reports

We offer our self-funded customers quarterly medical necessity reporting at the book-of-business (BOB) level. These reports demonstrate the savings achieved across our BOB and the potential impact to customers' health care objectives that can result from our core medical necessity program. We also offer BOB-level reporting for our buy-up Radiology and Cardiology Prior Authorization and Site of Service programs.

Described below are just a few of the metrics included in our core medical necessity report.

- **Outpatient Prior Authorization Procedures**-This section of the report includes the number of outpatient pre-service requests, adverse determination rates and estimated net paid savings, all broken out by various service categories.
- **Inpatient Prior Authorization Procedures**-This section of the report includes the number of inpatient pre-service requests, adverse determination rates and estimated net paid savings, all broken out by various service categories.
- **Concurrent Review**-This section includes the number of inpatient days for which we issued adverse determinations, broken out by reason codes. This section also includes a breakdown of the number of inpatient days that were shifted to observation days and the estimated net paid savings associated with adverse determinations.

The report also includes a summary section that outlines the total estimated savings per member, per month, as a result of our medical necessity program.

Paid Claims Reports - Financial Performance

We provide detailed reporting by financial program area, pharmacy, network plan performance and other categories.

- ***Claim Expenses by Size of Payment*** profiles the distribution of claim payments, based on the total claim payments paid to each claimant. It uses pre-set dollar ranges to group the experience into meaningful buckets, and displays a count and a percent distribution of claimants and claim payments. This report is useful for determining the number of claimants with large losses and the claim payments above a variety of threshold levels.
- ***Claim Lag Study*** displays payments and shows their relationship between service months and the book months. It includes medical and managed pharmacy data. This report is used to identify the lag between the incurred services and the date of the claim processing. This information is used for estimating future claims for the period and to set reserves.
- ***Detail Payment¹*** provides information for each individual for whom payments were made for the reporting period. Types of information included in this report include identifiers, such as employee Social Security number (SSN), claimant first name and their relationship to the employee. Characteristics of the payment are included as well, such as benefit type, check number, service date and payment amount. Selected aggregate payments are also listed, such as capitation or assessment amounts associated with the New York HealthCare Reform Act (NYHCRA). Aggregate payments will not have an SSN associated with the payment.
- ***Large Loss Claim Payments²*** is based on the results of the Claim Expense by Size of Payment report. It provides a detailed profile of each claimant above a chosen threshold level. Information contained in this report will directly identify claimants.
- ***Payments by Benefit Type*** provides information on the distribution of total payments for the reporting period based on the type of benefit received. All types of payments are included in the body of this report, so it provides a comprehensive profile of the results of all financial transactions. In addition, the payments are segregated based on relationship status, i.e., employee, spouse, child/other dependent, to provide another perspective on the nature of the payments.
- ***Payments by Month*** provides a monthly perspective on claim expenses. Claim payments are calculated based on the month they are booked to financial accounting systems and are divided into several buckets to provide further clarity on any variations in results over time. Capitation, medical, managed pharmacy and dental claims are each highlighted in separate columns.

Please refer to the attachment "Sample Report Package" included with our proposal.

8. Are you able to provide prognosis/medical case review on a quarterly basis?

Reports that identify the number of claimants with large losses, as well as claim payments above a variety of threshold levels, do not include any prognosis or diagnosis data. Additionally, the Large Loss Claim Payment report contains protected health information (PHI) and is not available to fully insured customers through Employer eServices.

However, diagnosis reporting is available separately within each of the following reports:

- *Utilization by Diagnosis* displays a comparison of claim volume and utilization by Agency for Healthcare Research and Quality (AHRQ) diagnostic category between two time periods. This high-level report includes inpatient and outpatient claims (available within our online reports).
- *Inpatient Utilization by Diagnosis* displays a comparison of utilization and costs by AHRQ diagnostic category for inpatient place of service between two service periods (available as an ad hoc for an additional fee).
- *Outpatient Utilization by Diagnosis* displays a comparison of claim volume and utilization by AHRQ diagnostic category for outpatient place of service between two service periods. Since the treatment of different diagnoses varies substantially by setting, this report provides a high-level view of utilization in an outpatient setting. Patterns and trends over two periods of time can be identified (available as an ad hoc for an additional fee).

Additionally, high-level diagnostic reporting is included in the Claims Experience report included with your package, which provides trend information on a variety of health care cost and utilization statistics to enable you to monitor changes in plan performance over time. Costs are examined by health care cost category, as well as by the highest-cost diagnostic groupings.

9. Are you willing to conduct face-to-face meetings quarterly (including medical/pharmacy director and financial analyst support) with the client to discuss financial and program enhancement/cost containment ideas that will assist the client in benefit design strategy, and will not necessarily be focused on plan design coverage reductions?

Yes.

10. Please describe your prior authorization process, specifically as it relates to high-cost specialty medications (such as Ozempic, Mounjaro, etc). Please confirm if you are able to accept a file of current authorizations and if there is a cost associated with this.

The prior authorization process may be initiated by phone or electronically via our Prior Authorization and Notification Tool that can be accessed by providers on UHCProvider.com. With this time-saving application, providers can see if prior authorization or notification is required, submit a request, check status and perform a case update - all in a single online tool.

Intake coordinators can confirm eligibility and network benefit information at the time of the call or initiate electronic inquiries and confirmations. Service requests for which no clinical review is

required can be approved instantly by intake staff or through our portal's auto-routing rules. We send system-generated determination letters to the member and provider when services are approved or denied. We also verbally notify the requestor as required. We complete all correspondence within the mandated time frames.

We forward service requests that require clinical expertise to our clinical coverage review team for review by a nurse or medical director. The clinical coverage review team reviews services according to benefit plan documents, state and federal regulations where applicable, medical policy and nationally accepted, evidence-based care guidelines. We send system-generated letters confirming the authorization or denial to the member, physician and facility. We also verbally notify the requestor as required. We complete all correspondence within the mandated time frames.

Utilization management staff members create member cases and document clinical information obtained during the review process directly into our proprietary care management system. The system transfers information automatically to the claims system in order to facilitate accurate, timely claim adjudication.

We require advance notification for all inpatient admissions. We require prior authorization for all services on our core prior authorization list. Facilities are responsible for confirming the coverage approval is on file resulting from the prior authorization. Prior authorization is the first step in the coverage determination process and for case management program referrals. Information received about planned medical services supports the processes of pre-service clinical coverage review and care coordination. Prior authorization is required to verify whether the services are medically necessary and covered, as well as support the member's needs throughout their course of treatment, from pre-service planning to post-discharge support. We perform a medical necessity review on all services that require prior authorization. We also offer Medical Necessity add-on programs as a buy-up for self-funded customers.

Our prior authorization list is reviewed regularly and subject to change based on evidence-based medicine guidelines. We perform a thorough financial and non-financial analysis of services and procedures prior to adding them to our prior authorization list. We consider the latest scientific evidence, special medical society guidance, cost cost-effectiveness and quality of care when recommending prior authorization of services.

Our network providers are contractually obligated to notify us of all inpatient admissions and to obtain prior authorization for the services and procedures on our prior authorization list, whether performed in an inpatient or outpatient setting. Providers can access the current prior authorization list on our provider portal, uhcprovider.com.

There is a \$50 billing rate per Prior Authorization.

11. Please list and describe your Disease Management programs that are included in proposal.

Disease management is embedded in our Personal Health Support (PHS) solution. the PHS solution includes the following:

- Clinically integrated delivery model for case and disease management for more than 100 conditions and includes asthma, chronic obstructive pulmonary disease (COPD), coronary artery disease, diabetes, heart failure
- Predictive model and clinical technology to identify gaps in care through:
 - 7 data sources (medical, pharmacy, vision, health survey results, biometric results, physician notifications, lab results)
 - 930+ rules and algorithms to establish condition identification, grouping by episode of care, gap analysis based on evidenced-based medicine and HEDIS rules and risk scoring
- High-risk members targeted and prioritized for nurse outreach through:
 - General case management includes nurse outreach following discharge for all members
 - Screening for behavioral health for all members
 - Complex case management delivered by registered nurses certified in complex care
 - Digital modality so members can chat with their nurse, view, and update care plans, view educational resources, connect biometric devices
 - Self-paced diabetes courses
 - Members receive mail-based support in the form of condition newsletters

The City plan can realize as much as \$10.05 PMPM in savings with our model.

12. Please list and describe Utilization Management programs included in proposal and other available options, if applicable.

Our utilization management program uses a medical necessity review process that focuses on helping members receive the right care, in the right place, at the right cost. This process is essential to lowering costs and eliminating wasteful and unnecessary spending. Our medical directors and nursing staff work closely with health care providers to ensure treatment plans are consistent with evidence-based guidelines, are clinically appropriate, cost-effective and optimize health care outcomes. Our utilization management program consists of the following components:

- **Prior Authorization-**The prior authorization process determines benefit coverage based on medical necessity criteria for services, tests or procedures that are appropriate and cost-effective for the individual member. It is a member-centric review to evaluate the clinical appropriateness of requested services. Requests for prior authorization are reviewed according to medical policy and evidence-based clinical criteria. We require prior authorization for a core list of certain inpatient and outpatient services.

- **We also offer an optional add-on Prior Authorization program that enables self-funded customers to add services that meet their population's needs, which increases our ability to manage health care costs, promotes optimal outcomes and improves the member experience. The optional add-on Prior Authorization program is available for an additional cost**
- **Admission Notification-We require hospitals, skilled nursing facilities and acute rehabilitation facilities to notify us within 24 hours of all inpatient facility admissions or by next business day for weekend admissions. For emergency admissions where a member/enrollee is unstable and not capable of providing coverage information at the time of admission, the facility should notify us as soon as the information is known and communicate the extenuating circumstances.**
- **Inpatient Care Management-Inpatient Care Management (ICM) helps hospitalized members receive the most appropriate care based on their specific clinical status and health care needs. It is designed to achieve optimal clinical outcomes by applying nationally recognized clinical guidelines and best practices to reduce unnecessary variation in clinical use of services. ICM nurses use evidence-based medicine standards to evaluate whether the care provided to a member is at the appropriate level, whether there were any unnecessary delays in service, whether the level of care being provided is medically appropriate and if discharge plans are being established. ICM nurses perform the following:**
- **Concurrent Review-ICM nurses perform concurrent reviews to help ensure a hospital stay is proceeding as planned. Nurses complete an initial assessment to determine the goal length of stay, which determines the frequency of review and/or referral to other care management programs.**
- **Discharge Planning-Discharge planning occurs throughout the member's inpatient stay and is established by the treating provider; our ICM staff collaborates with the treating provider and facility to coordinate the member's discharge needs including services such as home health care, transition to a skilled nursing facility or inpatient rehabilitation center. Additionally, we refer members who may benefit from post-discharge support to our Transitional Case Management program for additional nurse support.**

- **Medical Claim Review (MCR)-MCR performs retrospective medical claim reviews of post-service and pre/post-payment medical necessity review when submitted.**

Appeals-Our clinical appeals team reviews appeals related to adverse determinations using applicable benefit documents, new and existing clinical information, scientific evidence and federal and state mandates. Cases are sent to the appropriate medical director who may determine if the case requires an external physician review

13. Please confirm dependent child(ren) eligibility.

Confirmed. Based on health reform legislation, all dependents are eligible for continuing coverage under their parents' plan until they reach their 26th birthday.

14. Please confirm proposer has included telemedicine benefit in medical quote. Telemedicine should include Behavioral/Mental Health.

Confirmed. 24/7 Virtual Visits delivers video-based visits to patients who are located outside of medical facilities, using live audio/video technology.

Our model includes a 24/7 Virtual Visits network of contracted virtual provider groups.

We also offer behavioral health virtual visits through our network of 169,100 providers across the country. Services include initial evaluations, ongoing treatment, psychotherapy, and medication management.

15. For plans that provide out-of-network coverage, if radiologists, anesthesiologists and pathologists are not part of the network, is the member responsible for cost at the in-network or out-of-network reimbursement levels?

Providers of anesthesia, radiology and pathology services are contracted to participate in our networks. Local market conditions and competitive pricing levels are all taken into consideration as part of the fee negotiation process. The payment level for out-of-network (OON) radiologists, anesthesiologists and pathologists depends on the place of service and several other factors, including the customer's specific benefit plan.

The standard reimbursement method for anesthesia services is calculated using the time-based anesthesia conversion factor subject to appropriate payment policies. Anesthesia time involves the continuous actual presence of the anesthesia practitioner. The medical group must include time, in minutes, on the claim form. A time unit is equal to 15 minutes of actual time. Partial time units are prorated and calculated to one decimal place rounded to the nearest tenth. Another anesthesia reimbursement method used for labor and delivery is calculated using the applicable per case payment.

Our system uses an automated recall process, which allows RAPL claims to be automatically reprocessed after the referring claim is received.

16. How do you handle transition of care for members currently undergoing treatment or have existing relationships with the incumbent carrier's network providers?

Our Transition of Care policy gives new UnitedHealthcare members the option to request extended coverage from their current, OON health care provider at network rates for a limited time due to a specific medical condition until the safe transfer to a network health care provider can be arranged. New members may request transition of care if they are undergoing treatment for:

- **Pregnancy during any trimester if an OB/GYN provider has been chosen and care has been established, and/or as determined by the member's plan through six weeks post-delivery**
- **Coverage for newborn children begins at the moment of birth and continues for 30 days. Members must select a network pediatrician and notify their health plan representative within 30 days from the baby's date of birth to add the baby to the member's plan.**
- **Newly diagnosed or relapsed cancer and currently receiving chemotherapy, radiation therapy or reconstruction**
- **Transplant candidates or transplant recipients in need of ongoing care due to complications associated with a transplant**
- **Recent major surgeries in the acute phase and follow-up period (generally six to eight weeks after surgery)**
- **Serious acute conditions in active treatment such as heart attacks or strokes**
- **Other serious chronic conditions that require active treatment**
- **Examples of conditions that do not qualify for transition of care include:**
- **Routine exams, vaccinations and health assessments**
- **Chronic conditions such as diabetes, arthritis, allergies, asthma, kidney disease and hypertension that are stable**
- **Minor illnesses such as colds, sore throats and ear infections**
- **Elective scheduled surgeries**

To receive transition of care benefits, members must submit a request within 30 days after their effective date by calling customer service and completing the transition of care form with their provider.

We review the condition and course of treatment against clinical criteria to determine the length of network coverage by the OON provider.

Transition of care only applies when UnitedHealthcare assumes the primary payment role in accordance with COB rules.

17. Provide a medical disruption report for the provider lists attached to this RFP.

Records	In-Network	Out-of-Network
No. Total Records	see attached exhibit	see attached exhibit
% of Total Records	see attached exhibit	see attached exhibit

18. Self-Insured: Provide recommended premium equivalents for the current and [optional: alternate] plan designs shown in the medical benefit response form section.

Confirmed.

19. Self-Insured: Please confirm if medical ASO quote is contingent upon bundled Stop Loss and/or PBM administration. If so, please confirm what is required to be attached and/or pricing differential without bundled administration.

Additional fees will apply if stop loss or PBM are carved out. NHP is not available if either carves out.

20. Self-Insured: Is your company willing to provide administrative fee guarantee? If so, please provide the details of your guarantee.

Admin fee is guaranteed for 3 years.

21. Capitation: What is your Capitated Fee (PEPM)? Is this Capitated Fee Guaranteed and for how long? Please confirm which types of claims are Capitated.

There are no capitated fees.

22. Describe your proposed transplant program and how transplant cases are handled.

We have offered a transplant program to support safe, successful and cost-effective transplant care since 1989. The main components of the program include network access, clinical management, dedicated medical directors and unparalleled resources and services.

- **Network Access: We offer three network components to address the full spectrum of needs identified by customers:**
- **TRS Centers of Excellence Network: For access to clinical and financial excellence in transplantation**
- **Transplant Access Program (TAP): For geographic access, economic value and administrative relief**
- **Extra-Contractual Services: For contracting expertise on a case-by-case basis**
- **Clinical Management: Direct clinical management for the patient through each phase of the transplant episode**
- **Dedicated Medical Directors: Our 2 dedicated medical directors review member care plans on an as-needed basis to determine if there are any inconsistencies with commonly**

accepted medical practice guidelines and/or if there are areas of opportunity to tailor the care plan to better serve the member.

- **Resources and Services:** The resources and services offered by TRS include, but are not limited to, online tools, decision-making tools, center statistics, educational opportunities and training.

23. Describe how complex cases are managed and coordinated.

Complex case management covers catastrophic illnesses and injuries that are serious, life changing and potentially life threatening requiring immediate and knowledgeable assessment of the member's condition, prognosis and treatment recommendations.

Complex case management addresses catastrophic cases that have complex access, care plan, psychosocial or knowledge needs, and need coordination of multiple providers, access to community resources and longer-term, intensive outreach. A combination of indication factors, such as multiple prior hospitalizations, age considerations, diagnosis, clinical and comorbid conditions, complexity of discharge needs, behavioral health comorbidities and polypharmacy situations often mark the needs of members appropriate for complex case management.

Certified case management nurses manage complex case management cases that they expect to require longer timeframes for interactions. The same nurse who makes the initial contact continues as the member's assigned nurse for both the current and any future health support needs, whenever possible.

We offer services to support members suffering from combined catastrophic and chronic diseases, including services to help members address issues of daily living that fall outside other covered benefits. For example, we can help with cooking and grocery shopping, transportation to doctor appointments, assistive technology, educational materials and respite services for family members, improving members' functioning and ability to cope with the disease.

24. Describe your process for discharge planning and home health care.

Discharge plans are established by the treating provider; UnitedHealthcare does not dictate care. However, our inpatient care management (ICM) team will identify members with discharge plans from the moment of the initial inpatient review. Discharge planning review continues throughout the inpatient stay.

Our clinical staff collaborates with the attending physician and facility to coordinate the member's discharge needs, including services such as home health care, transition to a skilled nursing facility or another component of our care management program, based on member eligibility.

Our clinical staff also refers members who may benefit from post-discharge support to our Transitional Case Management program, which is designed to help avoid preventable readmissions.

25. Is proposer willing to provide performance guarantees for your network discounting? If so, please include details.

Not offered at this time.

26. Are you willing to waive the actively at work, dependent non-confinement limitation provisions for all currently enrolled individuals on medical?

Yes. We agree that we will cover the following individuals under the plan:

- Employees who are not actively at work on the effective date of their coverage
- Dependents who are confined in a hospital or other health care facility on the effective date of their coverage

27. Optional: Please confirm coverage for Domestic Partners and their eligible dependents.

We assume that the City owns their eligibility rules. You determine who should be covered and assume eligibility verification. If you are set up to allow children of domestic partners, then we would accept their enrollment without question, as long as the children of the domestic partners are not considered over-age according to the eligibility rules you established.

28. Self-Insured: Provide a medical repricing analysis if quoting medical using the attached repricing data. Please provide repricing for the same time period included in the attachment(s), May 2023-April 2024.

Confirmed.

8. Questionnaire - Stop Loss

1. Please confirm proposed stop loss quote is firm. If not, please provide details as to why.

Not confirmed, signed disclosure form is still required.

2. Please confirm proposed quote contract terms.

24/12 \$375k

3. Please confirm proposal does not include lasers.

Confirmed.

4. Please confirm proposer's process for inclusion of lasers, if applicable, at renewal.

Laser are considered upon renewal. No new lasers upon renewal provision can be added for an additional 8% load to the ISL rates.

5. Please detail data requirements in order to process reimbursements.

We update individual stop loss (ISL) accumulations daily to provide automated reimbursement. We track ISL claim accumulations through our Individual Stop Loss Reporting System (ISLRS). During implementation, we enter the specific deductible into this system when we install your account. Claim information is fed from our claim system to ISLRS daily. When a member's policy year-to-date claims exceed the ISL deductible, a credit is automatically fed to our banking system. Credits are typically applied before payment instruments are cashed and charged to your claim-funding bank account.

Unlike other insurers that use managing general underwriters (MGUs), third-party administrators (TPAs) and external stop loss insurers to administer stop loss claims, we have the advantage of being both the claim administrator and the stop loss carrier.

We receive a reporting package every 10 days (three times per month). Claims are processed within 10 business days or less and a reimbursement is issued to the customer. The customer has the choice of an Automated Clearing House (ACH) or check for reimbursement. The customer can receive the reimbursement directly or it can be deposited into an account of their choosing, that is not the claim-funding bank account.

6. What is the time frame for reimbursements once the claim information is submitted for payment? Do you offer Advanced Funding on claims reimbursements at no cost to the client?

Stop loss claim payments are automatically credited to the City's claim-funding bank account when the ISL level or the ASL attachment point is exceeded. We typically apply these credits before payment instruments are cashed and charged to the bank account, making reimbursement virtually immediate.

Because our stop loss and medical claim systems are fully integrated, we are able to provide virtually immediate stop loss reimbursement, eliminating the need for stop loss advances.

7. Please confirm that proposer will base stop loss coverage reimbursements on the 'Eligible Expenses' as defined by the medical ASO plan document.

Confirmed.

8. Does proposal exclude any member population included in census.

No.

9. If proposer is awarded the Stop Loss insurance contract, please confirm if policy is guaranteed renewable.

Not confirmed.

10. How many months of current year experience are required to offer a firm renewal?

This proposal is contingent upon the review of claims information (including large claims) updated within 120 days of the effective date.

11. Upon underwriting approval, does proposer offer a maximum renewal rate cap on specific rates?

This can be added for an additional load to the ISL rates.

12. Does proposer have an aggregating specific deductible option available that represents a dollar for dollar premium off-set to share risk?

Not offered.

13. What aggregate corridors are available for consideration?

We are willing to offer a variety of aggregate corridors up to 125%.

9. Questionnaire - Wellness

1. Please confirm that your proposal includes annual Wellness Funds and the amount you will be providing annually. Please outline how the funds can be used and if any conditions apply.

Confirmed. We have included in our financial exhibits, an outline of our wellness funds. We have dedicated clinical team members who will work with the City and your local account management team to review and develop optimal wellness strategies.

The following items are eligible services covered by wellness credits.

- Biometric screening to measure cholesterol, blood pressure, blood glucose and body fat percent**
- Dedicated on-site health and wellness coordinator service/program management**
- Employee Assistance Program (EAP) fee reimbursement:**
 - Reimbursement of the EAP fees is allowed - even if the program includes financial or legal counseling if the financial advice is general and not intended to result in the sale of a specific product or service and there is no compensation from the advisors to the customer. Note: Optum Health's EAP meets these requirements.**
 - If financial and legal counseling services are included in the EAP, they may be a taxable event for the plan participant and thus require communication to the customer/plan sponsor to consult with their tax professional for further guidance on any reporting obligations.**

- **Financial Counseling (educational programs for self-funded and fully insured customers if permitted under the applicable Wellness Stipend):**
- **Debt Management/Credit Counseling (the difference between good and bad debt, warning signs of debt problems, avoiding high interest loans, tips on handling credit cards wisely, avoiding large purchases)**
- **General Financial Investment Concepts (risk and return, diversification, dollar cost averaging, compounded returns)**
- **Historical Differences in Rates of Return of different asset classes (equities, bonds, cash) based on standard market indices**
- **Effects of Inflation on Estimating Future Retirement and Other Savings Needs (education, health care needs, emergency funds, etc.)**
- **Determining Investment Time Horizons**
- **Assessing Risk Tolerance**
- **Note: The following financial counseling services are ineligible for reimbursement due to legal liability concerns: rendering individualized investment advice or services for a fee or other compensation, specific investment recommendations (ex. Apple stock), individualized advice or guidance on wills, trusts, or tax liability, and specific debt consolidation offers for a fee or other compensation**
- **Flu shots**
- **Food-related items to incent participation in onsite wellness events. Item must contribute to an overall healthy lifestyle (Examples of covered items: fruit/veggie trays, nuts, pretzels, crackers, granola/trail mix, bottled water, healthy box lunches, catered healthy lunches, smoothies/juice bars, etc.) Items such as but not limited to soda, cookies, coffee, candy or catering that does not contribute to an overall healthy lifestyle or education of healthy nutritional choices are not eligible for reimbursement.**
- **Health and wellness onsite educational classes from an external vendor or speaker (i.e., stress management, nutrition, cooking demo, etc.)**
- **Hepatitis B shots**
- **Health coaching (modifiable risks) online, telephonic, onsite/via mail**
- **On-site health clinic preventive services**

- **On-site health fair services- osteoporosis screening, skin cancer screening, nutritional consulting/education, mobile mammography or cardiovascular screening**
- **Paper health assessments**
- **Printing expenses and materials that are directly related to a health and wellness event to promote participation in an eligible wellness service. Wellness credits should not be used to assist with the communications of non-wellness related events for Open Enrollment purposes. If there is a combined open enrollment and wellness event, only the wellness communication materials are eligible for reimbursement (non-wellness open enrollment materials are not covered). Billing must be able to clearly identify on the invoice the wellness eligible expenses to approve the reimbursement.**
- **Smoking cessation programs and therapy (i.e., nicotine replacement therapy) including cotinine testing to test for tobacco usage**
- **Wellness-related consultative services from physicians, licensed therapists, registered dieticians and other health care professionals**
- **Fees related to program subscription for vendors who are coordinating either online or on-site eligible wellness services**
- **The fees for producing data feeds to UnitedHealthcare/Optum Health for biometric screening data to be loaded into Rally (standard file layout only). Non-standard file layouts may generate additional costs and are not considered reimbursable under this program.**
- **The fees for generating out of company data extracts that are explicitly used to support wellness programs**

2. Are there any additional costs to the Entity or employees to participate in your wellness programs or services?

We offer a variety of wellness programs and resources under a self-funded arrangement that emphasize employee health and promote healthy behaviors. Preventive care reminders and the One Pass Select program are included at no additional cost.

Preventive Care Reminders

We provide preventive treatment reminders for mammograms, pediatric immunizations, adolescent immunizations, cervical cancer screenings, and low-density lipoprotein (LDL) screenings for individuals with coronary artery disease and comprehensive exams for individuals with diabetes.

One Pass Select

One Pass Select is a subscription-based fitness and wellness network of digital apps, brick and mortar fitness centers and grocery/home essential delivery options that maximizes wellness opportunities for members. Members can choose from various membership tiers and simply pay a monthly fee for the tier chosen. Members can upgrade or downgrade membership tiers monthly or cancel at any time with 30 days' notice.

3. Will the account team assigned include a designated wellness coordinator? If so, which wellness services will be included?

Yes. Your Field Account Manager, Michaele Morgan, has wellness responsibilities and has access to our Health Engagement Consultant, Niki Castro.

As part of your AMT, Michaele and Niki will work collaboratively with you to create a multi-year wellness strategic plan focusing on long-term goals and objectives. Our HECs are located nationally and support customers on a regional level. They are passionate about health and well-being, are results-oriented, and build successful health and wellness programs by:

- **Analyzing employer utilization and health care data to identify potential areas for cost and health improvements**
- **Creating a communication strategy that incorporates social determinants of health (SDOH) factors**
- **Presenting strategies to address identified opportunities with the goal of promoting health ownership and increasing engagement in programs**
- **Consulting on wellness program design, communications and outcome measurement**
- **Developing a comprehensive multi-year strategic plan and providing quarterly reviews to evaluate progress**
- **Providing best practice consultation and ideas for engaging members based on successful initiatives and approaches of other similarly situated customers**

4. Will you attend Wellness Events through the year? If so, how many? Are there any related costs for attendance?

Yes. Representation at health and wellness events can be arranged.

5. Does your company offer rate discounts on the proposed programs, in dollars or percent, to employer groups who implement an active, participatory Wellness Program? If so, please describe the discount model amount and requirements.

We are happy to discuss upon finalist notification.

6. Does your wellness program provide a proactive health education and improvement program for those with a chronic condition?

Yes. Our Wellness Coaching solution can help individuals with health conditions, regardless of severity. Members with conditions at any level of severity can proactively enroll in any of our

Wellness Coaching services, while those with chronic conditions can benefit significantly from coaching for fitness, nutrition, heart health and other programs.

Our other clinical programs, such as case management for the high-risk population, fully integrate with Wellness Coaching and share information for a consistent member experience. Coaches can immediately see the participant's clinical, self-reported, behavioral and lifestyle information and tailor their conversations to the needs of individual participants. Based on the participant's information, the coach may recommend that they work with a PHS nurse. Also, your FAM and dedicated health promotion specialist will work collaboratively to develop strategies to engage those with chronic conditions.

7. Does your wellness program utilize behavioral coaching principles and evidence-based medicine guidelines to optimize self-management skills to foster sustained health improvement?

Yes. Our Wellness Coaching solution delivers comprehensive well-being programs with expert coaches and a digital experience, while getting members engaged and excited about improving their health with leading engagement campaigns. Wellness Coaching draws on our extensive wellness experience and clinical research, as well as our strong understanding of engagement and consumer trends. Our programs drive behavior change through delivery of an evidence-based curriculum, with strong integration between digital and telephonic modalities.

8. Does your wellness program include: a. Chronic condition-specific coaching? b. Pre- and post-discharge calls? c. Lifestyle management coaching: stress, weight management, and tobacco cessation? d. Treatment decision support and coaching?

Yes. For chronic condition-specific coaching, nurses help members achieve the goals within their care plan through telephonic outreach using a coaching model that includes the Transtheoretical Model of Change, motivational interviewing, and inductive logic. Using the clinical care platform, member information and gaps in care display and nurses can focus conversations and interactions on the opportunities that have the greatest benefit to the member.

For pre-and post-discharge calls, all members discharged from a facility receive a Welcome Home letter encouraging them to participate in our Case Management program and call if they need support. Behavioral health coordinators contact members stratified as low readmission risk to make sure they have an outpatient appointment scheduled. They also discuss barriers to care (e.g., medication or treatment plan adherence), provide additional resources as needed and connect members with a licensed case manager when they need clinical support. We assign a behavioral health case manager to members with heightened risk of readmission or other complex needs. Case managers call members within 3 business days of discharge to confirm they have a follow-up appointment scheduled with a clinician. They serve as a bridge to connect members, family, clinicians, PCPs, and benefit plans to align goals and close gaps in care. With providers, they also review treatment plans and member progress toward recovery goals.

As noted above, lifestyle management coaching: stress, weight management, and tobacco cessation are included in our wellness coaching program. Participants will have access to live coaching and

online courses for stress through our Wellness Coaching program, Real Appeal to address weight management, and Quit For Life to address tobacco cessation.

Lastly, for treatment decision support and coaching, we offer information throughout the care management process to help members understand their treatment options. We also offer our Decision Support program. This program engages members to understand their conditions and treatment alternatives, find physicians and other health care professionals who meet evidence-based standards for quality and efficiency and understand what to expect based on their course of care. Through this program we strive to ensure that members have full information on their conditions and available treatment alternatives.

10. Questionnaire - Mental/Behavioral Health

1. Describe how your integrated offerings engage those with unaddressed behavioral health concerns or needs. Do you have any outcome metrics that show the success of these measures and the impact to overall medical cost?

We engage members with unaddressed behavioral health needs in the following ways:

- On the member website, members can use our online navigation tool, which asks members to answer screening questions, identify goals and select topics of interest. Based on their answers, the tool guides members to appropriate resources. When they are ready to find a provider, members can access the provider search tool to identify a provider who would be a good fit for them. The website also includes educational resources and links to digital tools, self-paced programs and alternate care options.
- Our advanced analytics use hundreds of algorithms to help us identify changes in a member's behavioral status and engage them in programs, such as case management or and self-paced digital resources
- Nurses screen for depression, anxiety and other conditions and engage a behavioral health case manager when members have co-occurring behavioral and medical issues.

Because utilization can vary widely based on multiple factors, we do not establish targeted behavioral health utilization rates. For example, customer and member demographics and industry can affect utilization, as well as benefit plan design and other marketplace factors.

2. Describe how you assist members in navigating and identifying available behavioral health appointments.

Advocate4Me can support members with non-clinical needs related to their health issues, including appointment scheduling.

We have also developed our Express Access specialty network of clinicians who have contractually agreed to meet a 5-day appointment availability. Members can call the toll-free number for Express Access provider referrals or use our online provider search and filter on Express Access providers. They also can call back and request our assistance in locating an available appointment, when needed.

3. Please list any lawsuits or settlements against your company in the past three years regarding mental health parity or denial of behavioral claims.

Because of the nature of our business, we are routinely subject to lawsuits alleging various causes of action. Although the results of pending litigation are always uncertain, we do not believe the results of any such actions, currently threatened or pending, individually or in the aggregate, will have a material adverse effect on our consolidated financial position or the results of our operations. Any material litigation or legal actions are disclosed in our financial statements available on the UnitedHealth Group Incorporated (UnitedHealth Group) website: www.unitedhealthgroup.com. UnitedHealth Group is our parent company.

4. Describe your efforts to improve access to behavioral care and your efforts to identify and engage people reluctant to seek behavioral care.

Uniformed professionals have unique treatment needs because of the nature and circumstances of their professions, including routine exposure to extreme levels of stress and trauma. This can lead to higher levels of PTSD, anxiety, depression and substance use than the general population. Yet, their work culture and schedules can hinder their access to behavioral health care.

First responders with substance use disorder (SUD) or other behavioral health issues often experience:

- A tendency to try to manage on their own because of the stigma often associated with behavioral health issues**
- Fear of losing their careers if their employer discovered their condition**

UnitedHealthcare supports first responders, such as police, firefighters and other uniformed professionals facing challenges around SUD treatment, trauma/PTSD and other mental health issues. We help employers keep valued employees on the job while actively and effectively treating their behavioral health needs. Our First Responder Program makes this possible through several strategies to address the unique needs of this population. They include:

Treatment settings exclusively for first responders: Our programs keep first responders separate from other individuals in treatment, providing discreet settings in which first responders interact only with each other. We also suppress first responder specialty designations from our online provider directories, allowing only our staff to access that information.

Thoroughly vetted specialty providers: To participate in our outpatient network for first responders, providers must detail their expertise working with this population and sign an attestation that they meet or exceed the necessary qualifications.

Carefully scrutinized facility-based programs: We thoroughly investigate all first responder programs before they can join our specialized network. This includes site visits that confirm they provide treatment in settings exclusively for first responders.

Friction-free, expedited access to treatment: On program launch, we introduce a customer's trusted representative, such as a union leader, to local network facilities that specialize in first responder care. First responders can turn to the trusted representative at any time they need help, and the local network facility will accept those members into treatment without anyone having to call us first.

5. Please describe any specific programs you have targeting first responders and/or the law enforcement population.

Uniformed professionals have unique treatment needs because of the nature and circumstances of their professions, including routine exposure to extreme levels of stress and trauma. This can lead to higher levels of anxiety, depression and substance use than the general population. Yet, their work culture and schedules can hinder their access to behavioral health care.

First responders with substance use disorder (SUD) or other behavioral health issues often experience:

- A tendency to try to manage on their own because of the stigma often associated with behavioral health issues
- Fear of losing their careers if their employer discovered their condition

Providing Discreet, Sensitive Support for First Responders

We support first responders, such as police, firefighters and other uniformed professionals facing challenges around SUD treatment, trauma and other mental health issues. We help you keep valued employees on the job while actively and effectively treating their behavioral health needs. Our First Responder Program makes this possible through several strategies to address the unique needs of this population. They include:

- **Treatment settings exclusively for first responders:** Our programs keep first responders separate from other individuals in treatment, providing discreet settings in which first responders interact only with each other. We also suppress first responder specialty designations from our online provider directories, allowing only our staff to access that information.
- **Thoroughly vetted specialty providers:** To participate in our outpatient network for first responders, providers must detail their expertise working with this population and sign an attestation that they meet or exceed the necessary qualifications. Our network includes 231 licensed clinicians in Florida that have the vetted expertise in treating first responders. Virtual mental health care for first responders and their families is also available through Telemetry, which includes highly specialized providers uniquely qualified to help first responders.
- **Carefully scrutinized facility-based programs:** We thoroughly investigate all first responder programs before they can join our specialized network. This includes site visits that confirm they provide treatment in settings exclusively for first responders. In Florida, we contract with Hazelden for their specialized programming for police and corrections officers.
- **Friction-free, expedited access to treatment:** On program launch, we introduce a customer's trusted representative, such as a union leader, to local network facilities that specialize in first responder care. First responders can turn to the trusted representative at any time they need help, and the local network facility will accept those members into treatment without anyone having to call us first.
- **Coordinated transition to aftercare:** For seamless continuity of care within our carefully curated network, facilities discharging first responders automatically refer them to one of our vetted outpatient providers for aftercare.

11. Questionnaire - Pharmacy

1. Please confirm which database proposer uses to analyze claims utilization data.

We use a custom version of the RxClaim online transaction processing system to adjudicate claims. RxClaim verifies the claim at the point of service prior to submission for payment.

RxClaim is our proprietary rules-based claims processing system that is designed for online, real-time adjudication of prescription drug claims. Retail, home delivery, and specialty claims are adjudicated through the fully integrated online system.

2. Provide a copy of the proposed formulary. Is proposer's formulary based on lowest cost and evidence-based guidelines?

Yes. Our Prescription Drug List (PDL) strategy examines clinical value, medication cost and health care cost to determine the overall health care value of prescription medications, as compared to others in the same class, and assigns tier placement accordingly.

Please refer to the attachment "Traditional PDL."

3. Provide a list of standard drug exclusions.

Please refer to the attachment "Strategic Exclusions."

4. Does prescription drug proposal(s) include Step Therapy, Prior Authorization and Quantity Limits?

Yes. Our comprehensive suite of clinical and utilization management programs, in coordinated effort with our PDL strategies, optimal benefit designs and member engagement initiatives, improve quality of care while providing cost-saving options.

5. Does prescription drug proposal(s) include an open or closed formulary?

Our Traditional PDL is considered an open formulary.

6. Will proposer cover the cost of transferring existing mail order prescriptions from the incumbent carrier? If so, please provide file specifications for transfer of data. If not, please outline the Mail Order process.

Yes. Our transition approach focuses on supporting plan objectives while minimizing member disruption. We work directly with the customer's mail service vendor to receive a compatible electronic file of open prescriptions for all current members.

We participate in the Open Refill Transfer File Coalition-a collaborative effort that involves several other top PBMs. The Coalition develops a uniform format and method for transferring open mail service prescriptions to create efficiencies and minimize member disruption. We support the 1600 fixed file format adopted by the Coalition.

Members also have the option of obtaining a new prescription from their physician and mailing in the new prescription. The physician can also submit the new prescription through e-Prescribing.

In certain cases, new prescriptions are required, such as for controlled substances due to regulatory requirements. Any prescriptions on file that may be out of refills will be unable to be transferred. Compound prescriptions are excluded from the open refill file as they are not dispensed by our Home Delivery Pharmacy.

The transfer of electronic records does not incur any additional costs; however, if non-standard methods for transferring claims information are required, additional charges may apply.

7. Will proposer cover the cost of transferring existing Prior Authorizations and other satisfied Drug Edits from the incumbent carrier? If so, please provide file specifications for transfer of data.

Yes. As part of the transfer process, we capture all necessary information on prior authorizations and other limits that may be in place.

8. Please outline proposer's Specialty Drug process, including clinical support available to members, and if a third party vendor is involved in these transactions.

We recognize the importance of specialty pharmacy and infusion regimens in the life of our members and leverage our nationwide Optum Specialty Pharmacy and Optum Infusion Pharmacy network to clinically support the whole patient and provide timely delivery of medications. Our comprehensive network of 15 specialty pharmacies plus several regional infusion pharmacies provides drug availability for patients anywhere in the United States and its territories, lets us manage weather disruptions and permits us to automatically assign a site to dispense a patient's medication. We leverage relationships with additional pharmacy providers nationwide for specific limited distribution drugs or in the rare case of an extreme drug shortage.

In addition to Optum Specialty Pharmacy and Optum Infusion Pharmacy locations, we operate Genoa Healthcare which dispenses select specialty medications from pharmacies strategically positioned in community mental health centers, federally qualified health centers and similar clinics where a concentration of high-needs individuals exists.

Clinical Management

Our holistic clinical management model includes therapy management programs, nursing services coordination and clinical monitoring, and our personalized patient engagement tools, which include patient education, video series tailored to the patient and virtual visits with a pharmacist.

Our support encompasses adherence, education, utilization management, dose optimization and specialty care assessment from pharmacists and nurses. We provide integrated management across medical and pharmacy benefits and develop unique strategies, dependent on medication and benefit.

Through our Exclude at Launch Program, we delay PDL coverage for certain new medications while overall health care value is evaluated to provide appropriate access and clinical program

support. New medications that meet specific criteria are reviewed within six months of launch by our PDL Management Committee to determine benefit coverage.

Member Support

At Optum Specialty and Infusion Pharmacy, we use our resources and expertise to enhance the patient experience and optimize care throughout the patient journey, beginning with the first prescription fill. We support specialty treatments and take a hands-on approach to patient care that makes a meaningful imprint on the health and quality of life of each patient.

Optum Specialty Pharmacy, along with our clinicians and other professional staff, actively supports members affected by more than 200 disease states. The 93 percent adherence rate of patients enrolled in our clinical engagement programs are supported by clinical expertise, strong provider relationships and clinical insights, demonstrates our patient-centric focus, compassionate support and program effectiveness.

By connecting the pharmacy care continuum at its most critical points, we help ensure members get the critical treatments they need when and where they need them, while advocating for their physical and financial health through robust clinical and cost avoidance strategies.

Through our innovative Savings IQ technology, we have expanded our ability to connect patients with available financial resources to help pay for their medication. Today we help patients who voice financial concerns find available resources and the process is very manual and time consuming. This Savings IQ software solution automates financial navigation and has built-in key workflow steps, enabling us to proactively review financial resources with every patient. By advocating for medication affordability, we can help patients get on therapy faster and stay on therapy longer, leading to higher adherence, better clinical outcomes and cost savings opportunities.

Patient financial assistance is available through:

- Copay cards
- Foundation Grants
- Manufacturer programs

9. Is insulin or other diabetic supplies such as glucometers, test strips, lancets, etc. considered under the pharmacy benefit proposed or subject to medical plan benefits? If subject to medical plan benefits, please confirm service category.

Yes. We include ancillary supplies, such as, peak flow meters, inhaled medication spacer devices, diabetes self-monitoring testing strips, insulin syringes, lancets and lancet devices, on our PDL.

10. Is proposed pricing offer based on implementation of any new mandatory mail programs, clinical programs or plan design changes?

In our evaluation, we are proposing strategies as similar as possible to the existing pharmacy benefit.

11. Does prescription drug proposal(s) allow the client the right to accept or reject formulary content decisions that impact plan design? Please provide data analytics specific to the client's drug mix and the associated economic impact.

Not Confirmed. While the PDL itself cannot be customized, customers may customize drug coverage through strategies such as benefit design including, rules or limitations for coverage, exclusions and cost share structure. The account executive works with the City to define pharmacy management goals, select the appropriate benefit design and suggest clinical programs to meet specific objectives.

Please refer to the attachment "Tier Impact Analysis."

12. Is proposer willing to grandfather existing users of a non-covered drug? If so, please confirm if indefinite or subject to a defined time period (i.e. 12 months).

UnitedHealthcare's Traditional PDL allows clients to accept or decline recommended formulary exclusions which should make continuation of care provisions unnecessary.

13. Is proposer willing to grandfather existing users of medications that require prior authorization (including specialty medications) without having to meet proposer's requirements?

UnitedHealthcare's Traditional PDL allows clients to accept or decline recommended formulary exclusions which should make continuation of care provisions unnecessary.

14. What is the generic substitution policy and process for both mail order and retail?

We encourage our retail pharmacy network to substitute generic medications as authorized by the physician and in accordance with applicable state law, regulations and the highest standard of professional practice. Each Home Delivery Pharmacy complies with generic substitution laws of the state in which it is located.

Our generic dispensing policy is comprised of three components:

- Product selection requirements: Strict standards for quality of product, consistency of supply and competitive pricing must be followed.**
- Professional dispensing requirements: We support the generic substitution of bioequivalent medication while exercising the best professional judgment in honoring the physician's intentions.**

- **Individual and physician awareness: Generic substitution is maximized by educating members and physicians about generic medications**

In specific circumstances, switching to a generic equivalent may not be recommended. For example when a multi-source brand name medication is available at a generic price, the brand name medication may be the preferred option.

15. Does proposer own the mail order program? If not, please confirm the Mail Order process.

Yes. We own and operate seven Home Delivery Pharmacy facilities located strategically throughout the United States. Each facility combines the latest automation technologies with eyes-on inspection and verification at multiple checkpoints throughout the fulfillment process.

Our pharmacies operate on a completely integrated platform, which enables us to balance workloads and monitor inventories across our facilities. Integration also allows us to provide members with consistent, efficient, and timely fulfillment of their home delivery prescriptions in the event of product shortages, periods of high volume or other disruptions. Prescriptions can be shipped from any facility with our system coordinating orders to support timely delivery based on geographic proximity.

16. Is proposer willing to conduct face-to-face meetings annually (including pharmacy director and financial analyst support) with the client to discuss financial and program enhancement/cost containment ideas that will assist the client in benefit design strategy, and will not necessarily be focused on plan design coverage reductions?

Yes.

17. Self-Insured PBM: Does prescription drug proposal(s) ensure that no discount guarantee value will be derived from (1) the additional co-pay value in member pay the difference claims, (2) the AWP value from any compound claims or bulk chemical claims that are labeled and adjudicated under U&C, and (3) the AWP value from pharmacy input errors? All discount guarantees will be trued up on an annual basis 90 days after the end of each contract year?

Confirm, except discount reconciliation will be provided 120 days after the end of the contract year.

18. Self-Insured PBM: Does prescription drug proposal(s) ensure that Average Wholesale Price (AWP) for individual claims will not be an annual average, is from one consistent source and will not, in any way be calculated or adjusted or assigned an alternate NDC number?

Yes. Our AWP source is the Medi-Master Drug Data Base (MDDDB). Medi-Span has provided comprehensive drug information to the health care industry for more than 30 years.

19. Self-Insured PBM: Each proposer must confirm that proposed generic guarantee is based on all generic drugs adjudicated and classified by MONY codes, including single source, and not only MAC'd generic drugs.

Contract definition (adjudication):

Generic Drug: A prescription drug product, whether identified by its chemical, proprietary or non-proprietary name, that is therapeutically equivalent and interchangeable with a Prescription Drug having an identical amount of the same active ingredient(s). For purposes of this Agreement, the Generic Drug determination is made based upon factors including indicators included in the Medi-Span Prescription Pricing Guide (with supplements) or other available data resource that identify as a Generic product.

Reconciliation definition:

Generic Drug: An FDA approved drug, or a drug that is designated by FDA a DESI (Drug Efficacy Study Implementation) drug, or product, that is therapeutically equivalent to other pharmaceutically equivalent products, as set forth in Medi-Span's National Drug Data File as a generic drug identified by all products meeting at least one of the following criteria:

Medi-Span Multi-Source Code ("MSC") is equal to Y.

20. Self-Insured PBM: Does prescription drug proposal(s) provide an auditable contract with guaranteed price points at the specific client level?

Yes. We agree to an audit provision that affords both parties access to records that are pertinent and directly related to the party's performance under the agreement. Under appropriate circumstances, we allow agents of the employer to conduct an audit; however, we require a confidentiality agreement and reserve the right to review and rebut information in such an audit.

We permit annual claim processing audits, which are consistent with generally acceptable auditing standards, such as a statistically valid, random sample audit (maximum of 300 claims). The audit provision requires:

- The time, place, duration and frequency of the audit are reasonable and agreed to by both parties.**
- The information reviewed relates to either the current or previous calendar year.**
- We review the legal basis for access to any proprietary and/or confidential participant information.**
- Both parties pay for their own audit costs. In addition, the customer reimburses us for any unanticipated costs we incur, for any costs of an audit after termination.**

With respect to audits regarding the payment of rebates by pharmaceutical manufacturers, the audit must be conducted by a "big four" public accounting firm that maintains a separate and

stand-alone audit department. Rebate audits include no more than the top five pharmaceutical manufacturers or 75 percent of rebate spend, whichever is less.

Pharmacy network contracts are considered proprietary and not available for audits.

21. Self-Insured PBM: Does proposer retain any portion of the Rx rebates (retail or mail)? If so, what percentage? If not, are you willing to provide a quote in which all rebates are passed through to the employer?

No. We are proposing a shared rebate arrangement with 100% of rebates passed through to the City.

22. Self-Insured PBM: Please confirm that proposal includes Rx rebates payable directly to the Entity.

Confirmed.

23. Self-Insured PBM: Each proposer must confirm that the client will receive all quarterly formulary rebate and reconciliation payments within 90 days of quarter's close. If "Not Confirmed," indicate the number of days that you will pay quarterly rebates within?

Pharmacy rebates are paid quarterly, 180 days following the end of each quarter.

24. Self-Insured PBM: Do single-source generics fall within the proposer's generic or brand-name tiers? How are single-source generics classified when projecting discounts by tier?

Please refer to the financial exhibits included with our proposal.

25. As a condition of responding to this Request for Proposal, the proposer understands and acknowledges that as a public sector governmental entity, the Entity is not subject to ERISA and, as such, is subject to state insurance laws including, but not limited to, the requirements of section 626.8825. Proposer further represents that it is in compliance with the terms and conditions of the Florida Prescription Drug Act and that nothing regarding the proposer's network, compensation, pricing, or administrative structure would prohibit the Entity from submitting the attestation of compliance thereunder, as required by law. Where requested by the Entity, proposer will submit such attestation on Client's behalf. Proposer agrees to indemnify the Entity from any and all losses arising from Carrier's failure to structure its administrative processes in a manner that complies with the Florida Prescription Drug Act.

Optum Rx on behalf of its prescription benefit management subsidiaries that serve as a first-tier entity providing plan services to Clients such as UHC, establishes and implements controls and processes to support compliance with the applicable laws, rules, regulations and regulatory guidance. Functional and operational departments within the company have appropriate written standards to guide activities to support compliance with applicable State and Federal rules and regulations. UHC can use their annual delegation reviews to verify Optum Rx processes. If UHC

must submit a formal attestation to a regulatory agency concerning an Optum Rx supported activity, then Optum Rx will support UHC by providing the appropriate sub-attestation to the City. UHC in turn would complete any regulatory agency attestation and submit on their own behalf.

UnitedHealthcare agrees to indemnify the City for any losses arising from our failure to structure the administrative processes in a manner that complies with the Florida Prescription Drug Act.

12. Questionnaire - General Information

1. Are you willing to provide performance guarantees for implementation and servicing of your products? If so, please describe the performance guarantees you are proposing.

Yes. Please refer to the attachment "Performance Guarantees" included with our proposal.

2. Please indicate the group name, address, contact person, and telephone number of up to three firms in Florida to whom your company has forfeited money because of service problems in the last three years.

We understand the commitment you require from your selected vendor to provide proof of our ability to administer the services proposed. Our service and performance targets are developed to reflect our performance guarantee commitments customized to each individual customer.

While there are times where we have had to forfeit money due to service issues, this information is proprietary. As such, we are contractually unable to provide details regarding those customers. However, to ensure performance of the services proposed, we have responded to and outlined our proposed guarantees within our response.

Annually, UnitedHealthcare commissions a proprietary employer satisfaction study from a third-party research firm to track performance nationally, regionally, and by funding type (self-funded versus fully insured). The study provides data to help us identify areas of strength and those in need of attention. The following was captured in the 2022 study:

- Overall satisfaction and Net Promoter Score
- Employee Attributes
- Emotional Connection
- Sales/Renewal/Account Service
- Ratings for Field Account Manager (FAM)
- Ratings for SAE
- Website
- Problem Resolution
- Benefit Design
- Cost

- **Communications**
- **Programs**
- **Pharmacy Products**
- **Specialty Products**

Below is a sample of "good" ratings related to some key performance areas. Good is defined by those giving a score of 6 to 10:

- **Ninety-three percent are very likely to recommend UnitedHealthcare to others**
- **Ninety-two percent say their employees are extremely satisfied with the service they receive from UnitedHealthcare**
- **Ninety-two percent say they receive excellent value from UnitedHealthcare products and services**
- **Ninety-three percent are extremely satisfied with the sales/renewal process**

Additionally, your account management team will meet with you regularly to review the metrics agreed upon through management reports that measure our performance against the guarantees mutually agreed upon.

3. Do you agree to allow retirees over and under 65 to continue coverage under the same plan at the same rate as active employees as required by Section 112.08, Florida Statutes, for public entities?

True

4. Provide the name, title, and contact information of the individual who would have direct daily account responsibility for the employee benefits program(s) you are proposing. If more than one person will be filling this role, please respond with complete information for all. The Entity is requiring a dedicated representative on all lines, no 800 numbers or generic emails.

Below is the account management team that will be servicing the City:

Angela Hartman, Strategic Account Executive (SAE)

Email: angela_hartman@uhc.com

Phone: (813) 371-7460

The SAE designs and executes a mutually agreed-upon business plan and coordinates the setup of the products and services selected. The SAE delivers reporting and analysis of financial, claim cost and utilization data and presents new product and service options, as well as annual renewal information. In summary, the SAE works to align the goals of the customer with the products and services we offer and oversees all service aspects of the customer's plan.

Michaele Morgan, Field Account Manager (FAM)

Email: michaele_morgan@uhc.com

Phone: (813) 890-63253

During implementation, the FAM coordinates and conducts open-enrollment meetings. In addition, the FAM trains you on the powerful online tools available to help you administer health benefits. The FAM meets regularly with the customer to discuss service trends and analysis.




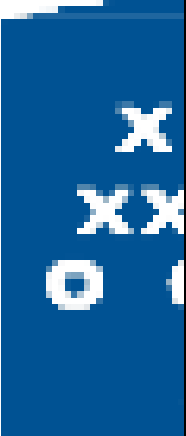
5. What is your account service team’s average response time to client requests or questions?

We respond back to inquiries within 24 hours.

6. Describe the services provided by your account service team to the employees.

Your account management team (AMT) focuses on your satisfaction with plan performance and will help you and your employees with their day-to-day needs and long-term goals. You will be supported by a multi-functional AMT. Your administrative and strategic team will be well-trained in your benefit program and cultural requirements. The AMT, led by the SAE, contains representation from all disciplines specifically required to serve your needs.

Account Management Team	
--------------------------------	--

			
<p>Strategic Account Executive</p> <p>Local Representative Owns the Overall Customer Relationship</p>	<p>Field Account Manager (FAM)</p> <p>Local Representative Manages the Customer Service Experience</p>	<p>Dedicated Client Service Manager (DCSM)</p> <p>Centralized Contact -Issue Resolution on All Day-to-Day Service Inquiries</p>	<p>Implementation Manager (IM)</p> <p>Ensures all Key Milestones are Achieved During Implementation</p>

The AMT assigned to your account delivers on our promise to maximize the investment that you make in health care. The team's top priority is building a successful partnership with you to address your overall goals and coordinate day-to-day activities. The AMT is your point of contact for all aspects of administration, claims, underwriting, contracts, eligibility, billing and reporting and works to ensure that all of your needs are met.

Through regular performance assessments, we ensure plans are meeting your business and financial objectives, and we partner with you to propose solutions as new needs emerge.

<p>Essential Account Management Roles</p>	
--	--

<p>SAE</p>	<p>Oversees the initial implementation and any necessary plan changes</p> <p>Designs and executes a mutually agreed-upon business plan</p> <p>Coordinates effective facilitation of services and products selected</p> <p>Presents new product and service options on an ongoing basis</p> <p>Delivers reporting and analysis of financial, claim cost and utilization data</p> <p>Keeps the customer informed of industry trends and legislative changes</p> <p>Plans, prepares and presents annual renewal information</p> <p>Monitors the financial performance of the plan</p> <p>Works to align the goals of the customer with the products and services we offer</p>
<p>FAM</p>	<p>Oversees overall service experience</p> <p>Coordinates and conducts open-enrollment meetings</p> <p>Educates the customer about our services and programs, such as our employer and employee electronic tools and wellness programs</p> <p>Keeps the customer informed of changes impacting service experience</p> <p>Meets regularly with the customer to discuss service trends and analysis</p>
<p>DCSM</p>	<p>Responsible for day-to-day service issue resolution</p> <p>Often able to resolve issues on the first call</p> <p>Uses our fully integrated claim, eligibility and customer-specific benefit information system</p> <p>Routes service matters to dedicated support areas and tracks them through to resolution</p> <p>■ Works closely with the FAM to ensure all customer service needs are met</p>

IM	<p>Provides oversight, coordination and strategic direction during implementations</p> <p>Works closely with the customer, the SAE and appropriate functional departments to ensure that all key milestones are met during the implementation</p> <p>Ideally positioned to identify any gaps in customer perceptions and the appropriate resources to resolve them</p>
Extended Service Representatives	<p>Participants from across our company work with your AMT, including: billing/banking analyst, case installation analyst, electronic data manager, underwriter and claims analyst</p>

A Working, Customized Partnership

We recognize that you are a unique company with unique employees. We believe the AMT structure outlined above offers functional expertise and excellence, while maintaining a customer focus. Our teams will understand your business objectives, and they have the expertise to partner with you to help achieve those goals.

Our commitment is to partner with you to design a plan that works the way you and your employees do-consistently meeting your financial and business objectives, and continually evolving with your changing business needs, year after year.

7. Describe the services provided by your account service team to the Human Resources department.

We offer you a comprehensive on-boarding process that is worry-free. We look at the implementation as an opportunity to make a great first impression on you and your employees. We will alleviate your concerns from the outset at all the key levels:

- We help your benefits team by handling many of the administrative tasks that would otherwise take their focus away from their everyday priorities.**

- We help your employees by providing clear print and online communications and one-call-solves-all access to friendly customer service advocates during open enrollment.**

- We help you by providing quick and easy access to an experienced implementation manager (IM), selected based on your unique company culture, who will be ready to answer your questions and address issues quickly and effectively. And, since we can handle most of the implementation process once we obtain approval on key deliverables, we will save you a precious commodity: time.
- We build you a customized implementation plan. We realize that the City has unique needs, and that implementation is a critical time for you and your employees. We first seek to understand your needs and then we build a customized implementation plan that addresses all aspects of implementation, including communications, ID card delivery, shared expectations, and a detailed transition plan post-implementation. Our planning sets you and your employees up for a successful transition.

In our service model, two individuals will proactively manage service for your account. Our DCSM acts as a single point of contact for all day-to-day service issues. The FAM focuses on providing education on services and programs (such as electronic tools and wellness programs), open-enrollment needs, and identification and analysis of customer-specific service trends.

Individuals in both roles typically have a minimum of five years of experience in a related service industry. The majority of our DCSMs and FAMs has more than three years of managed health care service experience, and most have a bachelor's degree with either a medical or dental background.

8. Please confirm your customer service hours. Please also confirm the location (city and state) of your call center's headquarters.

Our advocates are available from 8 a.m. to 11 p.m. ET, Monday through Friday.

For the City, member services will be provided by our service region in Greensboro, North Carolina.

Advocate4Me

The foundational customer service model is the standard and embedded offering for UnitedHealthcare's customer service at no additional cost. Advocate4Me organizes all aspects of care around issues. This includes financial, benefits and claims, pharmacy, provider search, plan selection, wellness, emotional health, clinical support and complex healthcare support.

9. Does your company help facilitate annual open enrollments?

Open Enrollment Support	Response
-------------------------	----------

a. Onsite meetings?	Yes.
b. Educational materials?	Yes.
c. Printed Materials at no cost?	Yes.

10. What is your company’s current A. M. Best, Moody’s and/or Standard and Poor’s ratings?

	A.M. Best	Moody's	Standard & Poor's
UnitedHealth Group	a***	A2**	A+*
Effective Date (Last Update from Ratings Agencies)	December 14, 2023	July 27, 2023	September 11, 2023

** Strong capacity to meet financial commitments, but somewhat more susceptible to the adverse effects of changes in circumstances and economic conditions than obligors in higher-rated categories*

*** Investment Grade (Rated as upper-medium grade and low credit risk)*

**** Excellent*

11. Do you utilize any “wrap” or leased networks not negotiated or owned by your company? a. If yes, what is the name of the network?

Yes. We use leased or vendor networks where it is not feasible to develop our own networks. Vendor networks must comply with the same quality standards we use for our own networks. Vendor network compensation varies based on market demands and the customary practices of the local marketplace. We retain responsibility for claim processing. In addition, we oversee all quality issues, including quality control of the physicians and other health care professionals in the network.

We use leased networks in the following sites:

Location	Vendor
Hawaii	MDX

Michigan: Upper Peninsula	Upper Peninsula Health Plan (UPHP)
Western Kentucky	Center Care
U.S. Virgin Islands	VI Equicare
Puerto Rico	MAPFRE

12. Describe capabilities available through member website and mobile app. Please describe further any additional functionality available to employer as plan administrator.

We help make it easier for members to navigate their entire health journey by creating a virtual front door to all available UnitedHealthcare resources. Whether accessing the digital tools through our member portal, myuhc.com, or the UnitedHealthcare app, members enjoy a personalized digital experience based on benefits, member activity data, conditions, and interactions. We are committed to providing tools and information that is transparent, relevant, accessible, and timely.

Our digital support tools engage members with information that can help them take charge of their health plan, evaluate the cost and quality of the care they receive and make informed decisions around health care options. This one-stop, self-service resource includes: member coverage and benefits information which includes copayments and out of pocket information, a plan- and geographic-specific provider search tool to find networks, quality and cost-efficient providers, program recommendations, claims information, and a robust dashboard with personalized recommendations such as clinical programs, screenings, medication information and much more.

Once registered, the tools display information specific to that member's plan design and benefit options and work together to help members:

- Understand their benefits and the financial impact of care decisions and head of household self-service access (data aggregates at the family unit level)
- Access links to a variety of third-party vendors (if included in a customer's plan design) with single sign-on. The expansion of Additional Benefits is bringing vendor programs, internal clinical programs, and third-party integrations to one place in the digital experience where members can access all the programs available to them.
- Stay informed through push notifications and asynchronous/persistent messaging through our app.
- Manage claims

- Find out how each claim was processed
- Track status of claims in the adjudication process
- Note claims to watch
- Add personalized notes
- Pay claims online
- Print claim forms
- Submit medical reimbursements and OON claims digitally
- Find a provider or facility based on personal preferences and cost and quality evaluation (and send the provider's information directly to a text-enabled cell phone). New features include:
 - Searching on behalf of plan members
 - Compare feature
 - Improved map view
 - Deeper integration with Healthgrades (pictures, bios, reviews)
 - Get care from anywhere with access the 24/7 Virtual Visit network for non-emergent care
 - Estimate treatment costs and evaluate treatment options based on medical condition or the procedure needed, personal preferences and quality evaluation. Estimates include detailed cost summaries that incorporate commonly bundles services for common procedures while also providing additional information with helpful information and disclaimers. Members can:
 - Look up estimates based on the billing code for a particular procedure
 - View estimates based on if a procedure is preventive or diagnostic
 - View a cost estimate based on a specific member on their plan
 - View in and OON estimates for a procedure
 - Save cost estimate to easily reference back to it in the future and share cost estimates as a pdf with others
 - Compare up to four providers and facilities at a time, sort by cost, convenience, quality, and access "one click estimates" for the most searched services.
 - Access vision and dental cost estimates (dental billing codes, services and CPTs)
 - Receive notification when prior authorization is needed for a procedure to be covered as well as when a procedure is part of a larger care path.
 - View plan summary and service limits - compares where the consumer stands from a financial perspective before and after the procedure
 - View search history displayed through a list of links with the ability to access directly the page searched in a previous session.
 - Manage prescriptions and access pharmacy tools such as order prescription refills, easily switch from retail to mail order and track shipment status, get estimates, and compare medication pricing (features depend on plan design)
 - Follow through on clinical recommendations and access wellness programs
 - Connect to someone who can answer benefits or care questions

Through advancements in digital strategy, analytics and personalization, members receive support designed to:

- Help them find and choose effective options for care
- Ensure cost and quality information is readily available
- Encourage them to become activated and confident; to be informed and empowered managers of their health, the quality of health care they receive and their health care expenditures

Please visit our demo site at www.welcometomyuhc.com for a hands-on feel of the dynamic tools we have designed to inform and engage members in their health care and health care cost management.

UnitedHealthcare Mobile App

Your employees are on the go. They want quick and easy access to information pertaining to their health plan and benefits.

The UnitedHealthcare app is a free mobile application available on Apple and Google App stores, designed to accommodate their health care interactions on a mobile device. From finding health care providers to estimating costs, they can access information anytime, anywhere with this go-to resource. Best of all, information is personalized, confidential and:

- **Informed** - To help members know their health care plan - understand coverage, review and manage claims
- **Resourceful** - To help members find and receive care that is convenient and appropriate
- **Engaged** - To help members understand treatment choices, compare costs and eliminate surprises

Our UnitedHealthcare app helps members access their personalized, plan-specific health care information anywhere using their HealthSafe ID username and password. Members can:

- Understand their benefits and the financial impact of care decisions
- Access their medical, dental and vision ID cards with the option to add their Medical ID card to Apple or Google Wallet.
- Receive push notifications
- Access claims details and manage claims while also having total visibility into the lifecycle of a claim from start to finish. Enhanced claim tracking capabilities including when member or provider action is required.
- Search for network physicians and facilities based on personal preferences and cost, call them, share their information via email or text, view their location on a map, get driving directions and save them to their favorite physicians on their phone.
- Access the 24/7 Virtual Visit network for non-emergent care

- **Estimate treatment costs and evaluate treatment options based on medical condition or the procedure needed, personal preferences and quality evaluation. Estimates include detailed cost summaries that incorporate commonly bundles services for common procedures while also providing additional information with helpful information and disclaimers. Members can:**
 - **Look up estimates based on the billing code for a particular procedure**
 - **View estimates based on if a procedure is preventive or diagnostic**
 - **View a cost estimate based on a specific member on their plan**
 - **View in and out-of-network estimates for a procedure**
 - **Save cost estimate to easily reference back to it in the future**
 - **Share cost estimates as a pdf with others, compare up to four providers and facilities at a time, sort by cost, convenience, quality, and access "one click estimates" for the most searched services.**
 - **Access dental cost estimates (dental billing codes, services and CPTs)**
 - **Access vision cost estimates**
 - **Receive notification when prior authorization is needed for a procedure to be covered as well as when a procedure is part of a larger care path.**
 - **View plan summary and service limits - compares where the consumer stands from a financial perspective before and after the procedure**
- **Access pharmacy tools (prescription management) functionality, current medication list, drug pricing, track home delivery, opportunities for cost savings.**
- **Access mental health benefits and resources with a guided user experience as well as personalized mental health recommendations**
- **Access links to a variety of third-party vendors (if included in a customer's plan design and applicable to the quote)**
- **Call us or chat live with an advocate**

If not yet registered on myuhc.com, members can register using the app and then use that same username and password for both the member portal and the mobile app.

Employer Website

Employer eServices is a secure, web-based application that houses a suite of tools, designed to streamline specific benefit administration functions for the City.

Features available through Employer eServices include:

- **Web-based or electronic eligibility management**
- **Electronic billing and payment**
- **Online cost and utilization reporting**
- **Access to our national directory of hospitals, facilities, physicians and health care professionals**

Access to a library of resources, engagement materials, ready-to-use flyers, brochures and videos you can use to share with your employees so they can get the most out of their plans. Materials can be printed, emailed or posted to your website or intranet.

13. Describe any available benchmarking tools proposer can provide.

Our benchmark reports will compare your plan results with other customers within your industry. We group customers for benchmarks by specific characteristics, such as industry, geography or funding. For instance, we can compare a group of school districts within our customer base and then refine that report to compare those school districts against districts of a particular size or within a specific geographic area. This flexibility gives you access to meaningful, relevant, industry-specific information that you can use when analyzing the performance of your own plans.

Our database is comprised of our book of business and groupings of like industries that are large enough to be statistically significant. In order for a benchmark to be provided, there must be a statistically valid number of customers and members in the specific grouping desired. Additionally, for a variety of reasons not all customers may be included in benchmarking data. This includes customers whose contracts specifically exclude our ability to include them in benchmarking data.

While the customer will not have direct access to create their own benchmarks, your SAE will work with you to build the benchmarks into your plan performance review presentations and, if necessary, can assist in building a custom benchmark.

14. Please specify if proposer is SSAE 18 / SOC / SAS certified.

-Yes. SOC 2 and SOC 3 reports offer one option when it comes to reporting on a company's security framework. There are a number of alternatives to SOC 2 / SOC 3 that are based on different security frameworks. HITRUST common security framework is an alternative to SOC 2 and SOC 3. UnitedHealthcare is HITRUST-certified, and a copy of the certification letter can be made available to customers upon request. Customers also have appropriate audit rights in their contract and can conduct their own review of UnitedHealthcare's security within the guidelines set by their contract.

15. Describe any fee/payment arrangements you have in place that promote affordability, quality and access to care.

Better information for you and your employees-arrived at through the right information, proven analysis methods and recommendations that are closely tailored to your population-is necessary to bend the cost curve and to deliver the results you want.

The information derived from our affordability tools and the corresponding solutions achieve consistently strong results across a diverse customer base because we have the experience and discipline to:

- Identify exactly what drives costs today and how to achieve savings tomorrow
- Understand how each individual uses and manages health care benefits
- Thoughtfully select and calibrate programs to meet specific business and employee health benefits requirements

We have developed two proprietary tools to assist customers in optimizing their health care investment:

- **Motivating Health Ownership** - Focuses on your specific plan offerings and identifies opportunities to improve plan financial return by combining plan components, such as clinical programs, rewards and technology, in a way that meets your specific population health needs and overall goals
- **Health Activation Index** - Focuses on how your employees make decisions and identifies opportunities to help them make better health choices

If you have invested in affordability programs, we want to ensure they are working effectively for you and your employee population. Our Motivating Health Ownership (MHO) approach tiers each UnitedHealthcare customer based on their medical cost performance and the degree to which tailored affordability solutions have been adopted.

Generally, the larger the number of key affordability programs comprising a customer's health care plan, the greater the ability to control medical costs. However, there is more to achieving better results than simply piling on new programs. We find the right programs based on a thorough analysis of your data. That may mean removing programs that no longer are producing results or no longer fit the make-up of an employee population.

By scoring plan components on expected intensity for both cost reduction and increased individual activation, we can plot your benefit plan on the framework and compare your position to the UnitedHealthcare book of business and to other firms in your industry. This allows us to measure the performance of the components as well as the synergy produced by integration. At UnitedHealthcare, we believe that it is the calibration of plan components, informed by an employer's specific health population needs and company culture that leads to the best results.

The Results: Tailored strategies for optimal adoption of your affordability programs. Our AMTs extensively analyze each customer's health cost drivers and risks and identify the right solutions to address their financial challenges. By using the principles of the MHO plan, we can make sure that we are maximizing the value of the solutions we recommend to our customers. Our advice is backed by our experience with more than 5 million members in CDHPs, more than 2 million members in rewards-based plans and the insights gained from analyzing more than 30 million health care decisions each year.

Even if you have the right programs, how do you know that employees are using them to make good health decisions?

The Health Activation Index (HAI) gives us the capability to learn how individuals make choices and to help them make better ones. The HAI stratifies member populations by health risk, lifestyle risk, demographics and disease state and then analyzes consumer behavior on more than 50 decision points encompassing financial, care setting and the use of health care and wellness information, resources and services. By breaking down an aggregate population into smaller groups with similar demographic, socio-economic and health care engagement levels, we can better understand how health benefits are used, identify areas of the plan that may not be optimally used and develop strategies that can promote positive behavior change. The HAI gives us invaluable insights into past performance and helps us address the underlying decisions.

A Broad Portfolio of Proven Solutions

For example, if your results show that your employees did not comply with mammography screenings; your AMT would work with you to develop a targeted communications program.

Once consumers modify their behavior and learn to make the best decisions possible, their lives improve-and so does your balance sheet. The HAI gives us invaluable insights into past performance and helps us address the underlying decisions. Armed with these HAI insights, we help customers address problems by creating programs with greater member relevance-so our customers can focus their dollars where they will produce the greatest result.

Our research shows that employees make suboptimal decisions about their health approximately 40% of the time. We see that not as a problem, but as an opportunity. By using these tools, we will conduct a thorough and ongoing analysis of your plan's performance, assessing employee adoption of programs and utilization by population segment.

Health Plan Manager

Actionable data is key to the success of MHO; it enables you to measure the results of the plan constructed and identify future opportunities. Ultimately, our goal is to provide you with focused data to help guide better plan design and better plan performance. The outcome is simple: improved health and well-being of the City's covered population.

Our Health Plan Manager application captures the scope of your clinical management programs' outreach and engagement results and then shows how the numbers compare to relevant norms. It augments medical information with social attributes, geographic and economic data to target high-needs/low-engagement populations.

Health Plan Manager is an easy-to-use, interactive platform that offers a comprehensive look at health data, including medical claims, prescription claims, ancillary claims, population life stage/demographics, clinical and well-being and provider information that benefits you, the customer, and your members.

With Health Plan Manager, we provide you with a targeted, data-driven road map to help you optimize your overall health plan performance and help your population achieve Individual Health Ownership.

Working with you and your employees, we will define specific behavioral goals for each population segment, outline desired results and develop engagement strategies based on life stages and change readiness-strategies that work. Our fully integrated solutions will continually evolve with your changing business needs.

Healthplan Performance Review

Through regular performance assessments and the annual Healthplan Performance review, we make sure our plans are consistently meeting your business and financial objectives, and we partner with you to propose solutions as new needs evolve.

Our analysis is built on key indicators of performance that reveal the most about the efficiency and effectiveness of a plan.

We develop insights in three categories to form our recommendations and guide appropriate course corrections:

- **Benefit and incentive designs**
- **Care and network resources**
- **Communication and change campaigns**

Combining these insights and tactics, we work with you to finalize and implement a revised strategy for greater efficiency and more effective cost management.

We focus on motivating the individual-one member at a time-because we've learned that personal relevance is the key to effective behavioral change.

16. Provide the name, title, and contact information for three (3) references for Florida Municipalities with at least 2,500 covered employees. Additionally, please ensure that your proposed references are not part of a Trust or other type of consortium. Your references should be entities that have been insured by your company for at least three (3) years immediately preceding the response due date. Please include:

Group Name

Contact Name

Contact Title

Contact Phone

Contact Email

Coverage/Services Provided

Length of Time

Group Name: City of St. Petersburg

Contact Name: Jason Hall

Contact Title: Benefits Manager

Contact Phone: (727) 893-7462

Contact Email: jason.hall@stpete.org

Coverage/Services Provided: Medical Claim Administration, Flexible Spending Administration, Health Reimbursement Account Administration, COBRA Administration, General Clinical Programs including Diabetes, Behavioral Health and Wellness, and Pharmacy Benefits Administration through OptumRx

Length of Time: 14 years

Group Name: City of Tampa

Contact Name: Tony Hagler

Contact Title: Benefits Manager, Human Resources Department

Contact Phone: (813) 274-5757

Contact Email: tony.hagler@tampagov.net

Coverage/Services Provided: Medical Claim Administration, Flexible Spending Administration, COBRA Administration, General Clinical Programs including Disease Management, EAP and Wellness, and Pharmacy Benefits Administration through OptumRx

Length of Time: 13 years

Group Name: City of Lakeland
Contact Name: Sophie Nieves
Contact Title: Health Benefits Specialist
Contact Phone: (863) 834-8890

Contact Email: Sophie.Nieves@lakelandgov.net

Coverage/Services Provided: Medical Claim Administration, Flexible Spending Administration, General Clinical Programs including Disease Management, and Wellness, and Pharmacy Benefits Administration through OptumRx

Length of Time: 21 years

Group Name: Broward County Government

Contact Name: Lisa Morrison

Contact Title: Human Resources Manager

Contact Phone: (954) 357-6720

Contact Email: lmorrison@broward.org

Coverage/Services Provided: Medical Claims Administration

Length of Time: 12 years

13. Questionnaire - Data and Reports

1. Describe the monthly reports you will provide regarding the utilization and claims associated with the employee benefits program(s) you are proposing. Please indicate in your description if any of the reports would be provided at an additional cost over the fees associated with the programs.

Our online reports provide accessible, comprehensive information to help you manage your benefit plans. We draw on our extensive database, software and analytic resources to provide quick, easy and secure access to information and expert analysis through our online reports via Employer eServices. You fully control access to Employer eServices by designating a client master administrator (CMA) from within your organization to sign on and grant access privileges to staff members, including consultants. This CMA then has security control over whom within your company, including your consultant, has access to the application, down to the specific features level.

Described below are our report frequency, brief overviews of the types of reports provided and an overview of our Executive Affordability Scorecard report.

Report Frequency

Data to support reports are updated on the 10th business day of the following month. You can request reports at any time and review them online after a brief processing period.

Report Types

We provide detailed reporting by financial program area, pharmacy, network plan performance and other categories. Each report is briefly described below.

Financial Performance

nClaim Expenses by Size of Payment profiles the distribution of claim payments, based on the total claim payments paid to each claimant. It uses pre-set dollar ranges to group the experience into meaningful buckets, and displays a count and a percent distribution of claimants and claim payments. This report is useful for determining the number of claimants with large losses and the claim payments above a variety of threshold levels.

nClaim Lag Study displays payments and shows their relationship between service months and the book months. It includes medical and managed pharmacy data. This report is used to identify the lag between the incurred services and the date of the claim processing. This information is used for estimating future claims for the period and to set reserves.

nDetail Payment¹ provides information for each individual for whom payments were made for the reporting period. Types of information included in this report include identifiers, such as employee Social Security number (SSN), claimant first name and their relationship to the employee. Characteristics of the payment are included as well, such as benefit type, check number, service date and payment amount. Selected aggregate payments are also listed, such as capitation or assessment amounts associated with the New York HealthCare Reform Act (NYHCRA). Aggregate payments will not have an SSN associated with the payment.

nLarge Loss Claim Payments² is based on the results of the Claim Expense by Size of Payment report. It provides a detailed profile of each claimant above a chosen threshold level. Information contained in this report will directly identify claimants.

nPayments by Benefit Type provides information on the distribution of total payments for the reporting period based on the type of benefit received. All types of payments are included in the body of this report, so it provides a comprehensive profile of the results of all financial transactions. In addition, the payments are segregated based on relationship status, i.e., employee, spouse, child/other dependent, to provide another perspective on the nature of the payments.

nPayments by Month provides a monthly perspective on claim expenses. Claim payments are calculated based on the month they are booked to financial accounting systems and are divided into several buckets to provide further clarity on any variations in results over time. Capitation, medical, managed pharmacy and dental claims are each highlighted in separate columns.

Managed Pharmacy

■ **Managed Pharmacy Plan Performance** tracks the use of generic, preferred brand-name and non-preferred brand-name drugs filled by distribution channel (either retail pharmacies or mail service). Utilization measures include counts of claimants and prescriptions for each Prescription Drug List tier. Cost information focuses on reductions, such as discounts and employee cost-sharing to calculate total cost, per-prescription costs, and per-member-per-month (PMPM) costs paid by the employer.

■ ***Managed Pharmacy Cost and Utilization by Month*** outlines pharmaceutical utilization month by month by detailing the total number of generic and brand-name drug prescriptions filled by both retail pharmacies and mail service. The report also breaks down the overall net paid per month, per prescription and per member. The membership utilization and cost information is useful in monitoring trends within the current reporting period.

■ ***Managed Pharmacy Critical Indicators*** includes a variety of measures to gauge the effectiveness of your managed pharmacy program. Highlighting your experience within retail, mail service and overall programs, it provides period-to-period trending information to track changes in patterns over time. Trend information will help you monitor changes in utilization that may be influenced by benefit design and changes in the pharmaceutical industry/prescribing patterns. Measures include prescription volumes and costs per member, mix of single-source, multi-source and generic drugs prescribed, and generic substitution rates.

■ ***Key Generic Substitution Indicators by Month*** details generic substitution rates and is useful for tracking potential cost savings on a monthly basis. In addition to providing the overall generic substitution rate, the report isolates the percentage of single-source and multi-source drugs dispensed. Single-source drugs do not allow physicians or members to elect a generic substitution since they are available only as a brand. As multi-source drugs may be filled using either a generic or brand-name drug, the report further breaks down whether a brand-name drug was elected by either the physician, member or mandated by state law.

■ ***Managed Pharmacy Utilization by Age Group*** details demographic characteristics of claimants relative to cost and utilization. It allows for a closer look at the impact made by population characteristics on managed pharmacy utilization.

■ ***Top Drug Utilization Ranked by Net Paid and Volume*** profile pharmaceutical utilization by drug name, ranked by volume of prescriptions. Each distinct drug is displayed alongside its associated utilization and cost information. Key measures for each drug include numbers of claimants and prescriptions, unit cost measures and net paid totals. This information is used to determine the highest cost or most frequently prescribed drugs alongside their respective prescription and per-day costs.

■ ***Top Therapeutic Class Utilization Ranked by Net Paid and Volume*** identify drugs by therapeutic classes based either on the prescription frequency or the total paid amounts. In addition to providing utilization volumes, the report also provides the ratio of generic to brand-name drugs utilized and the generic substitution rate experienced for each class of drugs profiled.

Medical Management Performance

■ ***Costs and Utilization by Procedure*** displays a comparison between two service periods of the volume and professional costs of surgical procedures by procedure chapter. This high-level report on surgical experience provides an overall perspective on patterns and trends for this component of health care utilization.

■ ***Utilization by Diagnosis*** displays a comparison between two time periods of claim volume and utilization by Agency for Healthcare Research and Quality (AHRQ) Diagnostic Category. This high-level report includes inpatient and outpatient claims.

■ ***Inpatient Utilization by Diagnosis*** displays a comparison between two service periods of utilization and costs by AHRQ diagnostic category for inpatient place of service.

■ ***Outpatient Utilization by Diagnosis*** displays a comparison between two service periods of claim volume and utilization by AHRQ diagnostic category for outpatient place of service. Since the treatment of different diagnoses varies substantially by setting, this report provides a high-level view of utilization in an outpatient setting. Patterns and trends over two periods of time can be identified.

Network Performance

n***Network Utilization*** compares current and prior period charges, discounts and paid dollars by network benefit level and the participation status of the provider.

n***Top Hospitals*** displays inpatient and outpatient utilization, charges and paid dollars by hospital ranked by total paid dollars. The claims are aggregated by a provider identification number (MPIN) and identified by the hospital name, city and state. The hospitals are ranked by the highest total net paid for both inpatient and outpatient care. You can select the hospitals to display based on utilization or cost statistics.

n***Top Physicians*** displays utilization, charges and paid dollars for the top-ranked participating and non-participating physicians. The physicians are ranked by the highest total net paid. You can select the physicians to display based on utilization or cost statistics.

Plan Performance

n***Claim Experience*** provides trend information on a variety of health care cost and utilization statistics to enable you to monitor changes in plan performance over time. Costs are examined by health care cost category as well as by the highest-cost diagnostic groupings. Costs are displayed as totals and per-member-per-month (PMPM) statistics, along with a year-to-year percent change comparison. Utilization information includes the number of admissions, days confined, outpatient facility services, physician visits and allied health visits. This information is provided in total and in rates per thousand. Unit costs are also displayed for each of these types of utilization.

n***Health Care Cost Management Summary*** provides information on the dollar impact of network management and plan provisions through the display of all submitted charges, covered amounts, discounts, cost-sharing amounts and net paid amounts for health care expenses. Net paid dollars are the only dollar amounts available for managed pharmacy and capitation expenses.

n***Cost and Utilization Summary*** provides a summary overview of your medical costs and utilization trends, on a period-to-period comparative basis, for up to 36 months of historical data. This

equates to up to a maximum of 18 months of current data, compared to a maximum of 18 months of previous data. Filter options available for this report include group number, two customer-specific identifiers, employment status, funding arrangement category, market hierarchy, Medicare status and product hierarchy.

nInpatient Utilization and Costs by Admission Type displays utilization statistics, charges and paid dollars for inpatient care by type of admission. Event utilization and expense facts are summed by admission type summary for medical, surgical, mental health and substance abuse (MH/SA), and non-acute care admissions and by more detailed categories for maternity and newborn admissions.

nBill Count by Month provides a count of the number of unique bills for a service (or set of services) within the specified time period. If the identification code for a service (or set of services) existed within the six months prior to the process month, it will not be included in this report in order to avoid duplicate counts.

nDistribution of Discounts shows savings achieved through contracted arrangements, special negotiated discounts, prompt payment discounts, customer-specific discounts and other discounts. Data is split by health care cost category (physician, allied health, pharmacy, facility inpatient and facility outpatient), which assists in the evaluation of plan and network performance. Discounts negotiated with providers offer significant savings on the charges for eligible health care services.

nDistribution of Ineligible Charges shows dollars saved through plan provisions and health care cost management programs, including duplicate bills, benchmark reductions, benefit limits, preexisting conditions, abuse and fraud, medical claim review and other ineligible charges. Data is split by health care cost category (physician, allied health, pharmacy, facility inpatient and facility outpatient). This information assists in evaluating the performance of the benefit plan, as well as the effectiveness of our cost-containment programs.

nDistribution of Other Savings summarizes a variety of approaches that further reduce the amount of health care charges covered by the plan. COB with commercial carriers and with Medicare offers significant savings opportunities. In addition, various mechanisms used in contractual relationships with providers also offer savings. This report shows other savings to the plan resulting from COB with Medicare, COB with commercial plans, provider sanctions, withholding, pay reductions and all other savings split by health care cost category.

nUtilization and Costs by Provider Type displays utilization and cost by place of service and provider type. Claims are summed by inpatient or outpatient location and basic types of providers such as facility, allied health professionals and physicians by type of physician (e.g., primary, OB/GYN and specialist).

nUtilization by Age Group displays the distribution of claimants, charges and paid dollars by claimant age range. Besides providing a high-level view of health care utilization by age range, this report can be used in tandem with other fields to provide information on the relationship between age and specific types of utilization.

Membership

n *Membership by Market* displays the distribution of employees and dependents by market. Employees are grouped by coverage tier. The number of positively enrolled dependents is shown, and for non-positive enrollment, the dependent counts will be based on user options of estimated or actual. Estimated counts are based on employee information, while actual counts reflect the number of dependents who have submitted claims.

n *Membership by Month* displays the distribution of plan members by month. Employees are grouped by coverage tier. The number of positively enrolled dependents is shown, and for non-positive enrollment, the dependent counts will be based on user options of estimated or actual. Estimated counts are based on employee information while actual counts reflect the number of dependents who have submitted claims.

n *Membership Report with Demographic and Geographic Factors* displays the distribution of employees and dependents by gender and age range. Employees are grouped by coverage tier. The number of positively enrolled dependents is shown, and for non-positive enrollment, the dependent counts will be based on user options of estimated or actual. Estimated counts are based on employee information while actual counts reflect the number of dependents who have submitted claims. The geographic and demographic adjustment factors are calculated and displayed for only positively enrolled, non-Medicare members included in the report selection criteria.

Executive Affordability Scorecard

The Executive Affordability Scorecard provides key cost and utilization indicators that enable you to make informed plan decisions that drive quality and affordability. The report tracks demographics, cost-sharing, high-cost claimants, cost savings, utilization and managed pharmacy, if provided through our organization. Once released, scorecards are available in your automated reports folder on Employer eServices.

The Executive Affordability Scorecard is updated monthly for a rolling 12-month period with two months of claim run-out. Year-end reports are released 90 days after the end of the year and include two months of run-out.

[1]	The Detail Payment report is an optional report available for self-funded plans. Customers concerned with access to individuals' specific claim information and governing HIPAA guidelines may elect to exclude this report from their standard package or replace it with a non-confidential version that suppresses claimant identity.
[2]	The Large Loss Claim Payment report is generated in the self-funded customer reporting package when one or more claimants present paid claim amounts for the reporting period in

<p>excess of a chosen threshold. This report does not reflect customer-specific stop loss contract provisions and is not intended to support either UnitedHealthcare or external stop loss programs.</p>
--

Customized Reports

Your reporting package enables you to customize report parameters to create more detailed views of the data and includes a broad array of membership and utilization information. You can edit the default layout by adding variables to the report during the creation process of your online reports.

You can also select ad hoc data to create a variety of customized reports.

You can contact your SAE any time should you need additional reports. Ad hoc reports are available for an additional fee.

2. What is your proposed frequency of reporting on utilization experience? Is there a charge for utilization data analysis?

Data to support reports are updated on the 10th business day of the following month. You can request reports at any time and review them online after a brief processing period at no additional charge.

3. The Entity utilizes NavMD as their third-party data analytics system. Please confirm that you will be providing file feeds to NavMD on a monthly basis. Please include any costs for file feeds in your ASO fee.

Confirmed. We are able to provide file feeds to NavMD on a monthly basis at no additional charge.

4. Are there any additional fees for reporting? Please provide all reporting options/packages and their associated costs. It is the request of the Entity that proposers absorb the costs of monthly reporting packages.

Our online reports, available through our employer portal, provide detailed reporting by financial program area, pharmacy, network and plan performance, and membership to help you manage your benefit plans.

There is no additional fee for access to the online reports through the Employer eServices Customer Reporting.

You can access paid claim and utilization data for use in identifying specific trends and analyzing your health care experience. Interactive access provides the ability to add on report fields and constrain data with filters/parameters to support greater analytics. You can also select ad hoc data to create a variety of customized reports.

Data to support reports are updated on the 10th business day of the following month. You can request reports at any time, and you control whom within your company has access to the application.

The Executive Affordability Scorecard, updated monthly, provides key cost and utilization indicators and tracks demographics, cost-sharing, high-cost claimants, cost savings, utilization and managed pharmacy.

AD Hoc Reports

We assess a report-specific charge for ad hoc reports not available through Employer eServices Customer Reporting.

Pricing for custom ad hoc reports is determined by a cost-calculation formula that incorporates all production cost factors, including hourly user and data processing staff costs, computer costs and non-salary expenses. Normally, we provide a cost estimate before we begin work on an ad hoc report.

Please refer to the attachment "Sample Report Package."

5. How often are internal claim audits conducted and what percentage of claims are audited? If you use a third-party to audit claims, please disclose the name of auditor.

We support two different standard sampling methodologies in our claim quality audits: simple random samples and stratified random samples.

Regardless of the sampling method chosen, every claim processed during the review period has the potential to be selected for review; therefore, no claim is excluded from the sample selection process, including those for which we have made no payment.

The percentage of claims selected for examination by the external auditors varies. External audits are limited to a statistically valid sample or other approved methodology, not to exceed 400 claims.

6. How do you identify fraudulent claims and how will you notify the Entity?

We use our internal processes to identify potential fraud and abuse. We review all claims for a provider that fit particular patterns. During the initial phase, we evaluate the case at the provider level. It is not until we enter into a settlement agreement that we identify claims at the member level, at which point the group becomes identifiable. We do not notify the customer when we initiate a fraud and abuse case. There is no systematic way to pre-notify a particular group of

their involvement of a case, their claims exposure, or amounts at issue prior to the time at which we allocate recovered funds.

7. Describe the process for identifying and paying claims which may be subject to subrogation.

We use ICD-10 codes in our initial screening of pended or paid claims to identify potential subrogation cases. This initial screening kicks off data matching processes and potential member outreach to locate other insurance. Our analytics team has developed an analytic model to score cases as they are created to determine the best identification or outreach methods.

8. Please confirm that there will be online access for claim reports by the Entity and Gehring Group.

Confirmed. Our online reporting system is available 24 hours a day, seven days a week (with infrequent planned outages). The reports are available online within minutes after they are requested. You will be able to initiate reporting requests using this data at any time and review the reports online after allowing the system a limited time to process your requests.

Access to Employer eServices is fully controlled by the City. The first step is for you to designate a CMA within your organization. This CMA then has security control over who, within your company or including your consultant, has access to the application, down to the specific features level. For example, one designated user may be given access to reporting, eligibility and billing information, while another user may only be given access to billing functions.

The CMA simply signs on to Employer eServices and selects the Manage Access application-no additional ID or password is needed. The Manage Access function enables the CMA to:

- View current users
- Create new users
- Deactivate users
- Assign and change data access and function privileges
- Delegate the CMA role to another individual within the company

14. Questionnaire - Enrollment & Implementation Technology

1. Does your company (or third-party) process electronic eligibility files via automation or are manual steps necessary? If manual steps are required to process files, please explain this process and impact on processing time.

We encourage you to update eligibility via Employer eServices. With Employer eServices, employee eligibility data can be entered from your computer directly to our eligibility system. New employees can be enrolled in a matter of minutes, not days or weeks. Updating a member's information-changing an address, adding a dependent or updating a status-can also be done

quickly and easily. To ensure that our eligibility information is updated and accurate at all times, it is important that you update your internal systems when submitting eligibility changes via Employer eServices between electronic submissions.

Eligibility updated via our Employer eServices online portal is made in real time to our eligibility system. Claims and other downstream systems are updated within 24 to 48 hours as we rely on overnight batch feeds to other internal systems. If eligibility is being updated electronically via our eligibility system, typically the updates are made within 24 hours of receipt of a clean file, but our standard turnaround time to process eligibility file updates is three business days.

Emergency enrollments by methods other than Employer eServices take more time. The turnaround for urgent faxed enrollments is two days while urgent enrollments called into our customer care line is 24 hours. Urgent is defined as someone at the physician's office seeking services. Once a member is successfully enrolled, an alternate identification number is provided, confirming the enrollment.

2. Does your company outsource the processing of electronic eligibility to a third-party? If so, please provide company name.

No. We complete electronic eligibility in-house.

3. Please specify if your company (or third-party) accepts the HIPAA 834 5010 file layout as well as all other file layouts accepted for automated enrollment. Please provide applicable coding supplements and other applicable file specification documents.

Yes. We accept the following eligibility file layouts:

- **UnitedHealthcare Gateway Standard Format (GSF)-this is our standard electronic file format that incorporates data fields from the HIPAA-compliant 834 format, as well as previous UnitedHealthcare standard layouts.**
- **HIPAA-compliant 834 file format-this is the industry-standard format.**
- **Our standard layouts will enable you to benefit from all of the processing efficiencies of our eligibility system, as well as provide us with a more streamlined mapping procedure.**
- **While we can accept non-standard eligibility file formats that provide the necessary data elements used to populate our required structure codes, customers who can transmit eligibility updates using either the HIPAA-compliant 834 format or our proprietary UnitedHealthcare GSF can benefit from superior service levels available through our Employer eServices Electronic Eligibility Management System. The system is an easy-to-use, fully automated, internet-based application that provides you with direct, immediate access to your eligibility counts, eligibility file transaction status and other statistical information, including online error reports. It enables your eligibility information to pass directly from your system to ours with no human intervention, resulting in a timelier and accurate eligibility process. We welcome the opportunity to discuss the customer benefits of this system in further detail during the implementation process.**

When using the standard layouts referenced above, we require that all data be submitted in the prescribed format, including such case structure data elements as plan variation and reporting code. Our Electronic Eligibility Guide will identify the location and data elements for populating required structure codes.

Acceptance of any of the two eligibility file layouts described above is included in the quoted rates/fees.

4. What is your company's (or third-party's) standard processing time for electronic eligibility to be updated in all applicable internal systems (eligibility/claims/billing/etc.)? If time varies, please specify for each system.

All eligibility updates are available for claim processing within 24 hours. Scheduled electronic eligibility files overlay all existing eligibility records; therefore, to ensure that our eligibility information is updated and accurate at all times, it is important for you to update your internal systems when submitting eligibility changes via Employer eServices between electronic submissions.

5. Will your company (or third-party) provide confirmation notification to the group when files are processed? Please provide details related to this notification process (email, requirement of group to log into company website, etc.)

Yes. The City will receive an automated email notification once its eligibility file completes processing through our online eligibility management system.

6. Please provide implementation time (in days) for initial set-up of automated enrollment (electronic eligibility) of an established group with your company.

3

7. Please provide implementation time (in days) for initial set-up of automated enrollment (electronic eligibility) of a new group with your company.

5

8. Please provide set-up time needed for changes to file structure, plans, funding strategy, platform changes for an established group with your company. What alternative options does your company provide to receive enrollment should these changes cause delay in set-up of the EDI process?

The length of time it takes to implement a change is dependent on the complexity of the change. We request a lead-time of 10 to 15 weeks to implement your new electronic file. This gives time to review and complete the eligibility questionnaire, determine and complete a file testing schedule, set up a file transmission method, load your production file and issue ID cards.

We also encourage you to update eligibility using the Employer eServices. With Employer eServices, employee eligibility data is entered from your computers directly to our eligibility

system. New employees are enrolled in a matter of minutes, not days or weeks. Updating a member's information-changing an address, adding a dependent or updating a status-is performed quickly and easily. To ensure that our eligibility information is updated and accurate at all times, updating your internal systems is important when submitting eligibility changes via Employer eServices between electronic submissions.

We can accept an Excel file, as a one-time event for initial or open enrollment eligibility, provided that the City uses our standard Spreadsheet Solutions/Excel X-tool template and sends fewer than 3,000 eligibility records (employees and dependents) for the annual enrollment. Excel spreadsheets and/or CSV feeds are not accepted for ongoing eligibility maintenance.

9. Please provide file testing time frame (in days) for initial set-up and structure changes.

120

10. Please provide the standard time frame required to process files, generate, and mail member ID cards. What options does the group have if ID card delivery is delayed beyond the plan effective date?

The standard time frame - from our receipt of clean eligibility data to card production to members receiving their card in the mail - usually takes three weeks. The initial eligibility load and quality assurance steps takes three to five days, assuming clean eligibility data.

However, an individual whose eligibility has been processed in our system has medical coverage, whether or not they have received their ID card. In the event an ID card has not been received by the effective date, members can verify eligibility and plan design information online, by using our mobile app, or by calling Advocate4Me member service.

Members may print the front and back of the ID card directly from our member website, myuhc.com, 12 to 24 hours after the ID card file is received by the vendor, released to print and the member's most current coverage effective date is no longer a future effective date. Members may also request temporary cards from our member service advocates.

11. Please confirm your company will provide ongoing file feeds to multiple third-party vendors (i.e., PBM, Stop Loss, and Data Analytics) at no cost to the group?

Confirmed. We interface with many third-party vendors on behalf of our customers. No costs apply.

12. The group utilizes a third-party vendor for data analytics. Will you cover the \$2,500 set up fee and the \$0.65 PEPM for the monthly data analytics interface?

No

13. The Entity currently uses Workday as its HRIS and Benefits Administration system. Please indicate if you have experience with Workday and indicate if you have experience with any other HRIS and Benefits Administration systems.

Yes. We have extensive experience interfacing with Workday to transmit and receive eligibility data for our mutual customers. Currently, we have approximately 151 customers that use Workday to send eligibility data to us. We request a lead-time of 10 to 15 weeks to implement a new electronic file. This will allow time to review and complete the eligibility questionnaire, determine and complete a file testing schedule, set up a file transmission method, load your production file and issue ID cards.

We accept the following eligibility file layouts:

- **UnitedHealthcare Gateway Standard Format: This is our standard electronic file format that incorporates data fields from the HIPAA-compliant 834 format, as well as our previous standard layouts.**
- **HIPAA-compliant 834 file format: This is the industry-standard format.**

While UnitedHealthcare does have customers who utilize Workday as a vendor, we are precluded by contractual obligations not to release vendors used by our customers who are not subject to the UnitedHealthcare business associate agreement.

15. Questionnaire - Implementation and Billing

1. Please provide a brief description of the implementation process, including requirements and timeline.

The implementation process begins shortly after case award.

Initial Implementation Meeting

Immediately following notification that we have been selected as the carrier, our account representatives meet with the City to expedite a smooth benefit plan transition. These representatives may include the account executive, SAE, IM and benefit consultant. Our goal is to detail the services we plan to provide and the expected timeline to ensure they align with the City's expectations. We work with you to communicate the benefits strategy to your employees and their dependents.

The IM provides oversight, coordination and strategic direction during case implementations. This individual works closely with the City, our SAE and all of the appropriate functional departments to ensure that all key milestones are achieved during the implementation. The benefit consultant, who has a thorough understanding of the products and services selected, is ideally

positioned to identify any gaps in customer perceptions and the appropriate resources to resolve them.

We provide the City with implementation documents important to the implementation process, such as a benefit summaries, eligibility and enrollment information and other information specific to your plan.

Moving forward in our collaborative discussions, our account representatives use this binder as a guide to ensure the following information and milestones are on track and meeting your expectations.

Roles and Responsibilities	Includes review of key contacts and accountabilities for implementation
Implementation Timeline	Enables a review of key milestones and deadlines for case installation, including meeting schedules
Products and Services	Informs a detailed discussion of what we will provide, including a complete description of the benefit plan(s)
Eligibility and Reporting	Provides a description of eligibility and financial reporting needs, including eligibility file layout and review of premium and claim data reporting requirements
Banking	Describes the establishment of account and processes
Enrollment Strategy and Communication Materials	Introduces enrollment meeting strategy and resources, including member materials like enrollment forms and benefit summaries

Implementation Process

After the initial meeting, the IM and SAE work with experts from various functional areas to complete the detailed steps of the implementation. These functional area representatives, who are aligned immediately after notification of the sale, include transaction operations (claims), member service, eligibility, ID cards, contracts, billing, banking, COBRA, reporting and underwriting.

The SAE and the IM manage the process and are responsible for communicating with the City. The goal is to ensure that the case implementation activities listed below occur accurately and on time.

<p>Benefit Design</p>	<p>The City is asked to sign off on a detailed document summarizing the structure and plan design. After the required information is collected, our case installation unit loads the benefit design information into the appropriate systems. This electronic installation ensures that:</p> <ul style="list-style-type: none"> • We are set up to accurately pay claims. • Our member service department can effectively confer with members about coverage and answer inquiries during the open enrollment period. • Our eligibility units can process eligibility files. • Our ID card unit can produce the cards from the successful eligibility file load. <p>Other areas, such as care management and our member website, myuhc.com, can draw upon accurately loaded eligibility and benefit information when delivering services to members.</p>
<p>Eligibility</p>	<p>Discussions regarding eligibility and timing of open enrollment occur during implementation. Our eligibility unit captures the data we need to create ID cards, pay claims and feed eligibility information to vendors and other areas.</p>
<p>Billing and Banking</p>	<p>Our billing unit processes monthly fees and records payments so we can produce a variety of financial reports. Our banking unit provides financial and statistical data for our self-funded customers. By establishing banking and reporting needs up front, we provide a foundation for subsequent customer reports and for financial reconciliation.</p>
<p>Claims</p>	<p>Our transaction operations staff processes claims using information programmed into our claims system by our installation analyst and/or eligibility data manager. Once programmed, the system is fully automated and integrated. Paper claims received by our regional mail operation are scanned and sent to one of our transaction centers for processing. If applicable, we can also transfer claim/accumulator history from a prior carrier.</p>

<p>Member Service</p>	<p>Once each member's specific plan and benefit information is loaded, our systems enable member service advocates to access the data via online tools and applications that are integrated with our claim processing functions. We coordinate calls to our member service centers based on volume to ensure that each inquiry is handled promptly and effectively. By balancing call volume across all available resources, our service model reduces wait times, increases first-call resolution and promotes greater member satisfaction.</p>
<p>ID Cards</p>	<p>We issue durable plastic medical ID cards. Individual members receive one ID card. Employees with covered dependents receive two ID cards, which conveniently list the employee and all covered family members on the same card. A magnetic strip on the back of the medical ID card enables health care professionals to check eligibility and copayment responsibility electronically at the time of service. This helps to streamline and simplify the member's check-in at the physician's office.</p> <p>The IM creates an ID card sample and reviews it with you for approval.</p>
<p>Contract Administration</p>	<p>Our contract administration team produces all employer and member contractual documents. As changes are made to the plan or new legislation is enacted, our contract administrator produces amendments to keep documentation current.</p>
<p>Communication Materials</p>	<p>We work in conjunction with the City to prepare the appropriate communication materials for the areas above, including benefit summaries, enrollment forms and any additional supporting documentation for the enrollment strategy.</p>

Implementation Conclusion

Installation is complete when the case is claim-ready, the bank account is funded and member service advocates are ready to answer member questions.

We confirm that the benefit designs were loaded into the claim system and completed as agreed.

The IM transitions from the account 31 days following the overall case-ready date. Responsibility for serving the City shifts to the SAE, the FAM and the DCSM. The SAE is responsible for acting on the City's behalf to design, develop and deploy optimum solutions by leveraging expertise and

resources throughout our organization. The FAM and DCSM work together to resolve service-related requests.

The assigned AMT members remain active in ongoing account administration throughout the plan year. The FAM and the SAE cooperate to assess customer-specific trends, develop tactical solutions and maintain the highest levels of service throughout the plan year.

Please see "Sample Implementation Timeline" attached to our proposal.

2. Please confirm proposer is flexible to modify standard contract language.

Our preference is that any change in the services to be provided under the administrative services agreement (ASA) would be mutually agreed to in writing, prior to implementation. We would notify the City of our additional costs to provide such services. If the parties are unable to agree to a new fee, UnitedHealthcare shall have no obligation to provide the change in service, and the City may terminate the contract.

3. Please confirm proposer is willing to waive binder payment requirements.

Customers must disclose requested information before we can underwrite coverage. Further requests for information or conditions may accompany any issued quote. Customers must comply with the terms of the quote before we approve the application.

We must also receive a binder check containing one full month of premium from customers at least 30 days before the coverage effective date.

4. Please confirm proposer is willing to accept a self-bill for proposed line(s) of coverage.

Customers may choose self-bill (non-eligibility-based) invoicing as an alternative to our standard list-bill (eligibility-based) invoicing.

Non-eligibility-based, self-billed invoices contain employee counts based upon the prior month's reported employee counts. You can adjust counts online through our employer portal, Employer eServices.

5. What is proposer's standard billing snap shot date and grace period for payment?

Customers should pay administrative fees within 15 days of our due date. We may assess interest charges for payments received more than 15 days past the due date. Interest rates vary from quarter to quarter. Late fees are charged through a separate invoice or as part of the year-end reconciliation.

6. Would you allow a grace period after the due date of 45 days for payment of an invoice?

Confirmed.

16. Questionnaire - Renewal Planning and Additional Fees

1. Is proposer willing to provide renewal offer at least 180 days prior to renewal effective date?

Confirmed.

2. Are any of the rates proposed contingent on any additional information? If so, please disclose.

Our rates are not contingent upon additional information.

3. What additional services are available and at what cost?

Along with offering our Choice Plus network, we are also offering Surest. Surest is a health plan solution that delivers an innovative plan design and member experience, replacing deductibles and coinsurance with copayments that members can see before they seek care.

Surest sets these copayments based on the cost and quality of treatments and providers. For members, these copayments include all the services provided in a visit, eliminating the fuzzy math of deductibles and coinsurance and the frustration from unexpected charges.

The result?

Employers save up to 15% and employees have 54% lower out-of-pocket costs.

17. RFP Attachments

All documents being included with this RFP will be attached to this section. Attachments include:

1. Censuses - Actives & Retirees (Excel Format) - [City of Gainesville Census Report FL Blue - Actives.xlsx](#) [City of Gainesville Census Report FL Blue - Retirees.xlsx](#)
2. Medical Top Providers (For Disruption Analysis - Please provide response in Excel Format) - [Gainesville - Medical Disruption Report.xlsx](#)
3. Pharmacy Claims Reporting (For Tier Disruption Analysis - Please provide response in Excel format) - [Gainesville - Pharmacy Claims RX Filled 05012023-04302024 -FINAL.xlsx](#)
4. Medical Repricing Report (For Repricing Analysis - Please provide response in Excel format) - [Gainesville - Medical Repricing Report - 05012023-04302024.xlsx](#)
5. Medical Discount Chart (For Discount Analysis - Please provide response in Word format) - [Gainesville - Discount Chart.docx](#)
6. Medical Claims Experience - [Gainesville - 2022 Monitoring.xlsx](#) [Gainesville - 2023 Monitoring.xlsx](#) [Gainesville - 2024 YTD Monitoring.xlsx](#) [Gainesville - HCC 2022 vs. 2021.xlsx](#) [Gainesville - HCC 2024 YTD vs. 2023.xlsx](#)
7. Medical Benefit Summary and SPD - [010124 - Gainesville - FL Blue - BlueOptions 03359 SBC.pdf](#)
8. Stop Loss Policy - [010124 - Gainesville - FL Blue - Stop Loss Policy.pdf](#)

9. Agent of Record Letter - [042624-City of Gainesville-GG div RSC AOR Letter.pdf](#)
10. ASO Agreement - [010115 - Gainesville - FL Blue - Administrative Services Agreement.pdf](#)[010120 - Gainesville - FL Blue - Administrative Services Agreement - Amendment #1.pdf](#)[010122 - Gainesville - FL Blue - Administrative Services Agreement - Amendment #2.pdf](#)[010123 - Gainesville - FL Blue - Administrative Services Agreement - Amendment #3.pdf](#)

18. Vendors Response Attachments

Vendors are asked to include all documents supporting their proposal into this section.

- 1. Please attach all documents needed to support your proposal.**

See Attachment: RFP Attachments.zip



Network Analysis

Choice/Choice Plus Network
City of Gainesville (FL)

July 5, 2024

Access Group Summary By Employee Group

July 5, 2024

Access Analysis
Custom

Employee / Provider Groups
All Employees
Hospital
PCP with Pediatricians
OB-GYN
Specialist
Urgent Care

Employees With and Without Access									
Employee		Provider		Counts #	With Access		Without Access		
Group	#	Group	Standard		#	%	#	%	
All Employees	1,916	Hospital	1 in 10 miles	4,718	1,195	62.4	721	37.6	
		PCP with Pediatricians	2 in 10 miles	891,850	1,875	97.9	41	2.1	
		OB-GYN	2 in 10 miles	107,850	1,271	66.3	645	33.7	
		Specialist	2 in 10 miles	1,669,034	1,893	98.8	23	1.2	
		Urgent Care	2 in 10 miles	11,293	1,273	66.4	643	33.6	

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Employees

Provider Group
Hospital

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Employees	1,916	Hospital	1 in 10 miles	1,195	62.4	721	37.6	4,718	4,445	4,668	8.7	12.3

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹		Average Distance	
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	Hospital	1 in 10 miles	863	98.1	17	1.9	2	3.3	5.8	
	Alachua	146	Hospital	1 in 10 miles	59	40.4	87	59.6	0	10.5	13.9	
	Newberry	108	Hospital	1 in 10 miles	46	42.6	62	57.4	0	9.7	13.8	
	High Springs	96	Hospital	1 in 10 miles	0	0.0	96	100.0	0	17.1	20.5	
	Hawthorne	55	Hospital	1 in 10 miles	0	0.0	55	100.0	0	16.5	20.4	
	Ocala	55	Hospital	1 in 10 miles	55	100.0	0	0.0	3	4.0	5.1	
	Archer	45	Hospital	1 in 10 miles	14	31.1	31	68.9	0	11.8	14.0	
	Trenton	43	Hospital	1 in 10 miles	0	0.0	43	100.0	0	24.4	28.3	
	Starke	38	Hospital	1 in 10 miles	5	13.2	33	86.8	0	13.1	20.1	
	Fort White	33	Hospital	1 in 10 miles	0	0.0	33	100.0	0	17.1	23.7	
	Keystone Heights	32	Hospital	1 in 10 miles	0	0.0	32	100.0	0	20.3	22.7	
	Lake Butler	32	Hospital	1 in 10 miles	24	75.0	8	25.0	1	5.8	20.2	
	Williston	31	Hospital	1 in 10 miles	0	0.0	31	100.0	0	19.4	20.0	
	Melrose	25	Hospital	1 in 10 miles	0	0.0	25	100.0	0	18.3	22.4	
	Waldo	20	Hospital	1 in 10 miles	0	0.0	20	100.0	0	15.6	18.3	
	Bronson	18	Hospital	1 in 10 miles	0	0.0	18	100.0	0	19.8	21.7	
	Hampton	16	Hospital	1 in 10 miles	0	0.0	16	100.0	0	14.9	18.7	
	Lake City	15	Hospital	1 in 10 miles	13	86.7	2	13.3	1	5.7	23.0	
	Bell	13	Hospital	1 in 10 miles	0	0.0	13	100.0	0	28.9	31.7	
	Brooker	13	Hospital	1 in 10 miles	6	46.2	7	53.8	0	10.5	15.8	
	Micanopy	13	Hospital	1 in 10 miles	4	30.8	9	69.2	0	11.4	14.3	
	Old Town	10	Hospital	1 in 10 miles	0	0.0	10	100.0	0	35.7	39.2	
	Chiefland	8	Hospital	1 in 10 miles	0	0.0	8	100.0	0	32.1	34.9	
	Citra	8	Hospital	1 in 10 miles	0	0.0	8	100.0	0	15.6	15.6	
	Interlachen	8	Hospital	1 in 10 miles	2	25.0	6	75.0	0	12.0	27.2	
	Jacksonville	8	Hospital	1 in 10 miles	8	100.0	0	0.0	9	3.7	5.7	
	Reddick	7	Hospital	1 in 10 miles	0	0.0	7	100.0	0	15.4	15.6	
	Branford	6	Hospital	1 in 10 miles	0	0.0	6	100.0	0	22.6	35.7	
	Lawtey	6	Hospital	1 in 10 miles	0	0.0	6	100.0	0	13.7	16.6	
	Palatka	6	Hospital	1 in 10 miles	5	83.3	1	16.7	1	3.5	24.9	
	Anthony	4	Hospital	1 in 10 miles	4	100.0	0	0.0	0	8.3	8.3	
	Crystal River	4	Hospital	1 in 10 miles	4	100.0	0	0.0	1	5.5	15.8	
	Palm Coast	4	Hospital	1 in 10 miles	4	100.0	0	0.0	2	3.0	5.9	
	Beverly Hills	3	Hospital	1 in 10 miles	3	100.0	0	0.0	0	7.9	11.7	
	Dunnellon	3	Hospital	1 in 10 miles	1	33.3	2	66.7	0	12.0	18.3	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Hospital

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
AL	Birmingham	35213	1	Hospital	1 in 10 miles	0	1	100.0	2.4	3.1
CA	Stockton	95209	1	Hospital	1 in 10 miles	0	1	100.0	5.5	5.8
FL	Alachua	32615	142	Hospital	1 in 10 miles	0	59	41.5	8.5	12.0
	Anthony	32617	4	Hospital	1 in 10 miles	0	4	100.0	8.3	8.3
	Archer	32618	45	Hospital	1 in 10 miles	0	14	31.1	8.1	10.4
	Bellevue	34420	2	Hospital	1 in 10 miles	0	2	100.0	8.8	10.2
	Beverly Hills	34465	3	Hospital	1 in 10 miles	0	3	100.0	7.9	11.7
	Bradenton	34209	1	Hospital	1 in 10 miles	1	1	100.0	0.9	4.3
	Brooker	32622	13	Hospital	1 in 10 miles	0	6	46.2	9.2	16.7
	Brooksville	34602	1	Hospital	1 in 10 miles	0	1	100.0	9.8	11.4
	Crystal River	34428	1	Hospital	1 in 10 miles	1	1	100.0	1.8	17.8
		34429	3	Hospital	1 in 10 miles	0	3	100.0	6.7	15.1
	Daytona Beach	32118	1	Hospital	1 in 10 miles	0	1	100.0	3.2	5.7
	Deland	32724	1	Hospital	1 in 10 miles	0	1	100.0	2.1	6.3
	Dunnellon	34433	1	Hospital	1 in 10 miles	0	1	100.0	7.3	14.9
	Eustis	32726	1	Hospital	1 in 10 miles	0	1	100.0	2.8	12.1
	Fernandina Beach	32034	1	Hospital	1 in 10 miles	1	1	100.0	2.2	13.7
	Fleming Island	32003	3	Hospital	1 in 10 miles	0	3	100.0	5.3	7.4
	Gainesville	32601	69	Hospital	1 in 10 miles	0	69	100.0	1.6	5.3
		32603	3	Hospital	1 in 10 miles	0	3	100.0	1.4	3.6
		32604	2	Hospital	1 in 10 miles	0	2	100.0	0.9	4.1
		32605	166	Hospital	1 in 10 miles	1	166	100.0	2.5	3.8
		32606	126	Hospital	1 in 10 miles	0	126	100.0	2.6	6.0
		32607	80	Hospital	1 in 10 miles	0	80	100.0	1.7	3.9
		32608	138	Hospital	1 in 10 miles	0	138	100.0	3.7	5.6
		32609	112	Hospital	1 in 10 miles	0	97	86.6	4.5	6.9
		32614	5	Hospital	1 in 10 miles	0	5	100.0	2.6	4.2
		32627	1	Hospital	1 in 10 miles	0	1	100.0	2.1	5.3
		32635	1	Hospital	1 in 10 miles	0	1	100.0	1.7	3.5
		32641	85	Hospital	1 in 10 miles	0	84	98.8	4.2	8.3
		32653	92	Hospital	1 in 10 miles	0	91	98.9	4.7	6.6
	Glen Saint Mary	32040	1	Hospital	1 in 10 miles	0	1	100.0	5.7	19.0
	Hernando	34442	1	Hospital	1 in 10 miles	0	1	100.0	6.5	14.2
	Hollister	32147	1	Hospital	1 in 10 miles	0	1	100.0	7.2	32.0
	Inglis	34449	1	Hospital	1 in 10 miles	0	1	100.0	8.8	25.8
	Interlachen	32148	8	Hospital	1 in 10 miles	0	2	25.0	9.5	29.7
	Inverness	34450	2	Hospital	1 in 10 miles	0	2	100.0	3.0	21.2
	Jacksonville	32204	1	Hospital	1 in 10 miles	1	1	100.0	0.8	1.2
		32205	1	Hospital	1 in 10 miles	0	1	100.0	1.8	3.4
		32211	1	Hospital	1 in 10 miles	0	1	100.0	3.1	4.8

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Hospital

Employees With Access												
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance			
			#	Group	Standard	#	#	%	1	2		
FL	Jacksonville	32225	3	Hospital	1 in 10 miles	0	3	100.0	6.0	7.0		
		32226	1	Hospital	1 in 10 miles	0	1	100.0	5.0	9.8		
		32258	1	Hospital	1 in 10 miles	1	1	100.0	0.7	5.6		
	Lake Butler	32054	32	Hospital	1 in 10 miles	1	24	75.0	3.8	21.3		
		Lake City	32024	7	Hospital	1 in 10 miles	0	5	71.4	6.5	24.1	
			32025	3	Hospital	1 in 10 miles	0	3	100.0	4.0	20.9	
			32055	2	Hospital	1 in 10 miles	1	2	100.0	3.8	24.8	
			32056	3	Hospital	1 in 10 miles	0	3	100.0	2.9	22.0	
		Lake Placid	33852	1	Hospital	1 in 10 miles	1	1	100.0	1.7	12.2	
		Macclenny	32063	1	Hospital	1 in 10 miles	1	1	100.0	0.8	21.2	
		Merritt Island	32952	1	Hospital	1 in 10 miles	0	1	100.0	2.6	4.4	
			32953	1	Hospital	1 in 10 miles	0	1	100.0	5.7	6.5	
		Micanopy	32667	13	Hospital	1 in 10 miles	0	4	30.8	8.5	11.3	
		Middleburg	32068	3	Hospital	1 in 10 miles	1	3	100.0	3.2	8.0	
		Newberry	32669	108	Hospital	1 in 10 miles	0	46	42.6	6.0	10.2	
		Niceville	32578	1	Hospital	1 in 10 miles	1	1	100.0	4.1	11.4	
		Ocala	34470	8	Hospital	1 in 10 miles	0	8	100.0	3.0	3.1	
			34471	10	Hospital	1 in 10 miles	2	10	100.0	1.3	1.3	
			34472	3	Hospital	1 in 10 miles	0	3	100.0	6.8	6.8	
			34474	3	Hospital	1 in 10 miles	1	3	100.0	1.9	2.9	
			34475	4	Hospital	1 in 10 miles	0	4	100.0	2.9	2.9	
			34476	12	Hospital	1 in 10 miles	0	12	100.0	4.6	8.4	
			34479	2	Hospital	1 in 10 miles	0	2	100.0	4.8	4.8	
			34480	5	Hospital	1 in 10 miles	0	5	100.0	4.9	4.9	
			34481	1	Hospital	1 in 10 miles	0	1	100.0	5.7	10.0	
			34482	7	Hospital	1 in 10 miles	0	7	100.0	7.2	8.5	
			Ocoee	34761	1	Hospital	1 in 10 miles	1	1	100.0	1.8	4.7
			Orange Park	32065	2	Hospital	1 in 10 miles	0	2	100.0	2.9	4.1
		32073		1	Hospital	1 in 10 miles	1	1	100.0	0.2	6.9	
		Oxford	34484	1	Hospital	1 in 10 miles	0	1	100.0	6.5	15.0	
		Palatka	32177	6	Hospital	1 in 10 miles	1	5	83.3	2.0	26.5	
		Palm Bay	32905	1	Hospital	1 in 10 miles	0	1	100.0	2.1	4.1	
		Palm Coast	32137	2	Hospital	1 in 10 miles	1	2	100.0	2.9	7.6	
			32164	2	Hospital	1 in 10 miles	1	2	100.0	3.2	4.1	
		Panama City	32405	2	Hospital	1 in 10 miles	1	2	100.0	0.8	3.1	
		Pensacola	32526	1	Hospital	1 in 10 miles	0	1	100.0	5.4	6.5	
		Perry	32347	2	Hospital	1 in 10 miles	1	2	100.0	1.5	25.4	
			32348	1	Hospital	1 in 10 miles	0	1	100.0	8.1	33.8	
		Pinellas Park	33782	1	Hospital	1 in 10 miles	0	1	100.0	2.4	3.8	
		Punta Gorda	33950	1	Hospital	1 in 10 miles	1	1	100.0	1.9	5.9	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Hospital

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Raiford	32083	1	Hospital	1 in 10 miles	0	1	100.0	7.4	15.9
	Saint Augustine	32084	2	Hospital	1 in 10 miles	0	2	100.0	3.7	14.2
		32086	1	Hospital	1 in 10 miles	1	1	100.0	3.1	18.9
	Saint Johns	32259	3	Hospital	1 in 10 miles	1	3	100.0	3.4	5.2
	Sanderson	32087	1	Hospital	1 in 10 miles	0	1	100.0	8.7	22.8
	Sarasota	34240	1	Hospital	1 in 10 miles	0	1	100.0	4.6	4.8
	Starke	32091	38	Hospital	1 in 10 miles	0	5	13.2	9.2	21.4
	Sun City Center	33571	1	Hospital	1 in 10 miles	0	1	100.0	0.6	5.0
	Tallahassee	32309	1	Hospital	1 in 10 miles	0	1	100.0	6.4	8.6
	Tampa	33613	1	Hospital	1 in 10 miles	1	1	100.0	0.9	5.7
		33647	1	Hospital	1 in 10 miles	0	1	100.0	4.8	5.1
	Tarpon Springs	34689	1	Hospital	1 in 10 miles	1	1	100.0	1.0	7.1
	The Villages	32162	1	Hospital	1 in 10 miles	0	1	100.0	3.2	10.7
	Wesley Chapel	33543	2	Hospital	1 in 10 miles	0	2	100.0	3.3	3.8
	Worthington Springs	32697	1	Hospital	1 in 10 miles	0	1	100.0	8.6	18.7
	GA	Blairsville	30512	1	Hospital	1 in 10 miles	1	1	100.0	2.5
Blue Ridge		30513	1	Hospital	1 in 10 miles	1	1	100.0	3.8	21.4
Valdosta		31601	1	Hospital	1 in 10 miles	0	1	100.0	4.2	15.6
		31605	1	Hospital	1 in 10 miles	0	1	100.0	5.6	12.1
IL	Carterville	62918	1	Hospital	1 in 10 miles	0	1	100.0	4.0	5.2
KY	Russellville	42276	2	Hospital	1 in 10 miles	1	2	100.0	2.8	25.6
MA	South Hadley	01075	1	Hospital	1 in 10 miles	0	1	100.0	3.7	7.4
NC	Franklin	28734	2	Hospital	1 in 10 miles	1	2	100.0	3.8	12.6
SC	Anderson	29621	1	Hospital	1 in 10 miles	1	1	100.0	1.4	24.7
TN	Kingsport	37664	2	Hospital	1 in 10 miles	0	2	100.0	2.6	4.1
TX	Copperas Cove	76522	1	Hospital	1 in 10 miles	0	1	100.0	6.9	14.2
	Granbury	76048	1	Hospital	1 in 10 miles	1	1	100.0	1.5	13.2
VA	Lynchburg	24502	1	Hospital	1 in 10 miles	0	1	100.0	5.2	16.0
Grand Totals			1,454	Hospital	1 in 10 miles	33	1,195	82.2	3.8	7.4

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Hospital

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
AL	Wadley	36276	1	Hospital	1 in 10 miles	0	1	100.0	12.8	18.2
FL	Alachua	32615	142	Hospital	1 in 10 miles	0	83	58.5	12.0	15.3
		32616	4	Hospital	1 in 10 miles	0	4	100.0	10.4	13.9
	Archer	32618	45	Hospital	1 in 10 miles	0	31	68.9	13.5	15.6
	Bell	32619	13	Hospital	1 in 10 miles	0	13	100.0	28.9	31.7
	Branford	32008	6	Hospital	1 in 10 miles	0	6	100.0	22.6	35.7
	Bronson	32621	18	Hospital	1 in 10 miles	0	18	100.0	19.8	21.7
	Brooker	32622	13	Hospital	1 in 10 miles	0	7	53.8	11.6	15.1
	Chiefland	32626	8	Hospital	1 in 10 miles	0	8	100.0	32.1	34.9
	Citra	32113	8	Hospital	1 in 10 miles	0	8	100.0	15.6	15.6
	Cross City	32628	1	Hospital	1 in 10 miles	0	1	100.0	42.9	43.8
	Dunnellon	34431	2	Hospital	1 in 10 miles	0	2	100.0	14.3	20.0
	Earleton	32631	2	Hospital	1 in 10 miles	0	2	100.0	15.7	19.1
	Florahome	32140	1	Hospital	1 in 10 miles	0	1	100.0	13.8	24.5
	Fort Mc Coy	32134	1	Hospital	1 in 10 miles	0	1	100.0	20.5	20.5
	Fort White	32038	33	Hospital	1 in 10 miles	0	33	100.0	17.1	23.7
	Gainesville	32609	112	Hospital	1 in 10 miles	0	15	13.4	11.9	12.4
		32641	85	Hospital	1 in 10 miles	0	1	1.2	10.1	13.9
		32653	92	Hospital	1 in 10 miles	0	1	1.1	10.3	12.3
	Graham	32042	2	Hospital	1 in 10 miles	0	2	100.0	12.9	16.9
	Green Cove Springs	32043	1	Hospital	1 in 10 miles	0	1	100.0	10.5	11.4
	Greenville	32331	1	Hospital	1 in 10 miles	0	1	100.0	12.8	22.1
	Gulf Hammock	32639	2	Hospital	1 in 10 miles	0	2	100.0	21.6	32.7
	Hampton	32044	16	Hospital	1 in 10 miles	0	16	100.0	14.9	18.7
	Hawthorne	32640	55	Hospital	1 in 10 miles	0	55	100.0	16.5	20.4
		High Springs	32643	95	Hospital	1 in 10 miles	0	95	100.0	17.1
		32655	1	Hospital	1 in 10 miles	0	1	100.0	16.0	20.0
	Homosassa	34448	1	Hospital	1 in 10 miles	0	1	100.0	11.3	14.9
	Immokalee	34142	1	Hospital	1 in 10 miles	0	1	100.0	20.5	23.3
	Interlachen	32148	8	Hospital	1 in 10 miles	0	6	75.0	12.8	26.4
	Keystone Heights	32656	32	Hospital	1 in 10 miles	0	32	100.0	20.3	22.7
	Lake Butler	32054	32	Hospital	1 in 10 miles	1	8	25.0	12.0	16.9
	Lake City	32024	7	Hospital	1 in 10 miles	0	2	28.6	12.2	23.3
Lawtey	32058	6	Hospital	1 in 10 miles	0	6	100.0	13.7	16.6	
Live Oak	32060	2	Hospital	1 in 10 miles	0	2	100.0	20.8	27.7	
Lulu	32061	1	Hospital	1 in 10 miles	0	1	100.0	11.7	12.5	
Mc Intosh	32664	1	Hospital	1 in 10 miles	0	1	100.0	15.1	18.5	
Melrose	32666	25	Hospital	1 in 10 miles	0	25	100.0	18.3	22.4	
Micanopy	32667	13	Hospital	1 in 10 miles	0	9	69.2	12.6	15.7	
Morriston	32668	1	Hospital	1 in 10 miles	0	1	100.0	19.1	21.5	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Hospital

Employees Without Access											
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance		
			#	Group	Standard	#	#	%	1	2	
FL	Newberry	32669	108	Hospital	1 in 10 miles	0	62	57.4	12.4	16.5	
	O Brien	32071	2	Hospital	1 in 10 miles	0	2	100.0	18.4	36.8	
	Old Town	32680	10	Hospital	1 in 10 miles	0	10	100.0	35.7	39.2	
	Palatka	32177	6	Hospital	1 in 10 miles	1	1	16.7	11.1	17.0	
	Reddick	32686	7	Hospital	1 in 10 miles	0	7	100.0	15.4	15.6	
	Silver Springs	34488	1	Hospital	1 in 10 miles	0	1	100.0	12.2	12.3	
	Starke	32091	38	Hospital	1 in 10 miles	0	33	86.8	13.7	19.9	
	Steinhatchee	32359	3	Hospital	1 in 10 miles	0	3	100.0	34.7	54.2	
	Trenton	32693	43	Hospital	1 in 10 miles	0	43	100.0	24.4	28.3	
	Waldo	32694	20	Hospital	1 in 10 miles	0	20	100.0	15.6	18.3	
	White Springs	32096	1	Hospital	1 in 10 miles	0	1	100.0	11.4	33.6	
	Williston	32696	31	Hospital	1 in 10 miles	0	31	100.0	19.4	20.0	
	GA	Dahlonega	30533	1	Hospital	1 in 10 miles	0	1	100.0	24.1	26.1
	ME	Monson	04464	1	Hospital	1 in 10 miles	0	1	100.0	11.9	15.7
MO	Pontiac	65729	1	Hospital	1 in 10 miles	0	1	100.0	16.9	34.7	
Grand Totals			1,163	Hospital	1 in 10 miles	2	721	62.0	16.8	20.5	

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Employees

Provider Group
PCP with Pediatricians

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Employees	1,916	PCP with Pediatrici...	2 in 10 miles	1,875	97.9	41	2.1	891,850	313,160	114,573	2.3	2.6

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹	Average Distance		
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	PCP with Pediatricians	2 in 10 miles	880	100.0	0	0.0	1,164	1.1	1.2	
	Alachua	146	PCP with Pediatricians	2 in 10 miles	146	100.0	0	0.0	8	2.7	2.9	
	Newberry	108	PCP with Pediatricians	2 in 10 miles	108	100.0	0	0.0	19	1.5	3.0	
	High Springs	96	PCP with Pediatricians	2 in 10 miles	96	100.0	0	0.0	12	2.7	2.7	
	Hawthorne	55	PCP with Pediatricians	2 in 10 miles	55	100.0	0	0.0	6	3.7	4.2	
	Ocala	55	PCP with Pediatricians	2 in 10 miles	55	100.0	0	0.0	488	1.5	1.7	
	Archer	45	PCP with Pediatricians	2 in 10 miles	33	73.3	12	26.7	0	7.3	7.4	
	Trenton	43	PCP with Pediatricians	2 in 10 miles	43	100.0	0	0.0	11	3.3	4.0	
	Starke	38	PCP with Pediatricians	2 in 10 miles	38	100.0	0	0.0	37	2.4	2.4	
	Fort White	33	PCP with Pediatricians	2 in 10 miles	26	78.8	7	21.2	0	7.9	7.9	
	Keystone Heights	32	PCP with Pediatricians	2 in 10 miles	32	100.0	0	0.0	5	2.3	2.5	
	Lake Butler	32	PCP with Pediatricians	2 in 10 miles	27	84.4	5	15.6	16	5.1	5.1	
	Williston	31	PCP with Pediatricians	2 in 10 miles	31	100.0	0	0.0	30	3.2	3.3	
	Melrose	25	PCP with Pediatricians	2 in 10 miles	25	100.0	0	0.0	2	2.3	4.7	
	Waldo	20	PCP with Pediatricians	2 in 10 miles	20	100.0	0	0.0	0	6.5	6.6	
	Bronson	18	PCP with Pediatricians	2 in 10 miles	10	55.6	8	44.4	0	10.0	10.2	
	Hampton	16	PCP with Pediatricians	2 in 10 miles	16	100.0	0	0.0	0	6.1	6.1	
	Lake City	15	PCP with Pediatricians	2 in 10 miles	13	86.7	2	13.3	120	3.7	3.7	
	Bell	13	PCP with Pediatricians	2 in 10 miles	13	100.0	0	0.0	23	3.0	3.5	
	Brooker	13	PCP with Pediatricians	2 in 10 miles	13	100.0	0	0.0	2	2.5	2.5	
	Micanopy	13	PCP with Pediatricians	2 in 10 miles	13	100.0	0	0.0	0	7.4	7.5	
	Old Town	10	PCP with Pediatricians	2 in 10 miles	10	100.0	0	0.0	7	3.4	4.3	
	Chiefland	8	PCP with Pediatricians	2 in 10 miles	8	100.0	0	0.0	28	3.6	3.8	
	Citra	8	PCP with Pediatricians	2 in 10 miles	8	100.0	0	0.0	1	2.5	5.2	
	Interlachen	8	PCP with Pediatricians	2 in 10 miles	8	100.0	0	0.0	7	1.9	2.1	
	Jacksonville	8	PCP with Pediatricians	2 in 10 miles	8	100.0	0	0.0	2,032	0.8	0.8	
	Reddick	7	PCP with Pediatricians	2 in 10 miles	7	100.0	0	0.0	7	3.6	3.6	
	Branford	6	PCP with Pediatricians	2 in 10 miles	6	100.0	0	0.0	16	2.3	2.3	
	Lawtey	6	PCP with Pediatricians	2 in 10 miles	6	100.0	0	0.0	0	5.3	5.3	
	Palatka	6	PCP with Pediatricians	2 in 10 miles	6	100.0	0	0.0	50	1.8	1.9	
	Anthony	4	PCP with Pediatricians	2 in 10 miles	4	100.0	0	0.0	0	5.9	5.9	
	Crystal River	4	PCP with Pediatricians	2 in 10 miles	4	100.0	0	0.0	60	1.3	1.3	
	Palm Coast	4	PCP with Pediatricians	2 in 10 miles	4	100.0	0	0.0	119	2.1	2.2	
	Beverly Hills	3	PCP with Pediatricians	2 in 10 miles	3	100.0	0	0.0	16	1.1	1.1	
	Dunnellon	3	PCP with Pediatricians	2 in 10 miles	3	100.0	0	0.0	29	4.5	4.8	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 PCP with Pediatricians

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
AL	Birmingham	35213	1	PCP with Pediatricians	2 in 10 miles	27	1	100.0	0.5	0.5
	Wadley	36276	1	PCP with Pediatricians	2 in 10 miles	4	1	100.0	0.3	0.3
CA	Stockton	95209	1	PCP with Pediatricians	2 in 10 miles	75	1	100.0	0.6	0.6
FL	Alachua	32615	142	PCP with Pediatricians	2 in 10 miles	8	142	100.0	2.8	3.0
		32616	4	PCP with Pediatricians	2 in 10 miles	0	4	100.0	0.4	0.5
	Anthony	32617	4	PCP with Pediatricians	2 in 10 miles	0	4	100.0	5.9	5.9
	Archer	32618	45	PCP with Pediatricians	2 in 10 miles	0	33	73.3	6.1	6.2
	Bell	32619	13	PCP with Pediatricians	2 in 10 miles	23	13	100.0	3.0	3.5
	Belleview	34420	2	PCP with Pediatricians	2 in 10 miles	19	2	100.0	0.7	1.6
	Beverly Hills	34465	3	PCP with Pediatricians	2 in 10 miles	16	3	100.0	1.1	1.1
	Bradenton	34209	1	PCP with Pediatricians	2 in 10 miles	62	1	100.0	0.4	0.4
	Branford	32008	6	PCP with Pediatricians	2 in 10 miles	16	6	100.0	2.3	2.3
	Bronson	32621	18	PCP with Pediatricians	2 in 10 miles	0	10	55.6	9.0	9.0
	Brooker	32622	13	PCP with Pediatricians	2 in 10 miles	2	13	100.0	2.5	2.5
	Brooksville	34602	1	PCP with Pediatricians	2 in 10 miles	2	1	100.0	4.1	4.3
	Chiefland	32626	8	PCP with Pediatricians	2 in 10 miles	28	8	100.0	3.6	3.8
	Citra	32113	8	PCP with Pediatricians	2 in 10 miles	1	8	100.0	2.5	5.2
	Cross City	32628	1	PCP with Pediatricians	2 in 10 miles	7	1	100.0	0.2	0.6
	Crystal River	34428	1	PCP with Pediatricians	2 in 10 miles	4	1	100.0	1.8	1.8
		34429	3	PCP with Pediatricians	2 in 10 miles	56	3	100.0	1.1	1.1
	Daytona Beach	32118	1	PCP with Pediatricians	2 in 10 miles	2	1	100.0	1.4	1.6
	Deland	32724	1	PCP with Pediatricians	2 in 10 miles	13	1	100.0	1.2	1.2
	Dunnellon	34431	2	PCP with Pediatricians	2 in 10 miles	2	2	100.0	5.2	5.2
		34433	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	3.1	4.1
	Earleton	32631	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	4.2	5.7
	Eustis	32726	1	PCP with Pediatricians	2 in 10 miles	15	1	100.0	0.1	0.1
	Fernandina Beach	32034	1	PCP with Pediatricians	2 in 10 miles	66	1	100.0	0.9	0.9
	Fleming Island	32003	3	PCP with Pediatricians	2 in 10 miles	99	3	100.0	0.6	0.6
	Florahome	32140	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	3.0	8.8
Fort Mc Coy	32134	1	PCP with Pediatricians	2 in 10 miles	3	1	100.0	4.9	5.0	
Fort White	32038	33	PCP with Pediatricians	2 in 10 miles	0	26	78.8	7.1	7.1	
Gainesville	32601	69	PCP with Pediatricians	2 in 10 miles	17	69	100.0	0.4	0.4	
	32603	3	PCP with Pediatricians	2 in 10 miles	0	3	100.0	0.5	0.5	
	32604	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	0.2	0.2	
	32605	166	PCP with Pediatricians	2 in 10 miles	143	166	100.0	1.0	1.0	
	32606	126	PCP with Pediatricians	2 in 10 miles	108	126	100.0	0.7	0.8	
	32607	80	PCP with Pediatricians	2 in 10 miles	104	80	100.0	0.5	0.5	
	32608	138	PCP with Pediatricians	2 in 10 miles	231	138	100.0	0.8	0.9	
	32609	112	PCP with Pediatricians	2 in 10 miles	14	112	100.0	2.1	2.4	
32614	5	PCP with Pediatricians	2 in 10 miles	0	5	100.0	0.2	0.2		

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 PCP with Pediatricians

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Gainesville	32627	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	0.2	0.2
		32635	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	0.1	0.1
		32641	85	PCP with Pediatricians	2 in 10 miles	10	85	100.0	1.9	1.9
		32653	92	PCP with Pediatricians	2 in 10 miles	10	92	100.0	1.5	1.7
	Glen Saint Mary	32040	1	PCP with Pediatricians	2 in 10 miles	1	1	100.0	3.6	5.2
	Graham	32042	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	7.2	7.2
	Green Cove Springs	32043	1	PCP with Pediatricians	2 in 10 miles	17	1	100.0	1.3	1.3
	Hampton	32044	16	PCP with Pediatricians	2 in 10 miles	0	16	100.0	6.1	6.1
	Hawthorne	32640	55	PCP with Pediatricians	2 in 10 miles	6	55	100.0	3.7	4.2
	Hernando	34442	1	PCP with Pediatricians	2 in 10 miles	12	1	100.0	1.4	1.4
	High Springs	32643	95	PCP with Pediatricians	2 in 10 miles	12	95	100.0	2.7	2.8
		32655	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	0.1	0.1
	Hollister	32147	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	4.1	4.5
	Homosassa	34448	1	PCP with Pediatricians	2 in 10 miles	1	1	100.0	0.4	0.8
	Immokalee	34142	1	PCP with Pediatricians	2 in 10 miles	47	1	100.0	0.7	0.8
	Inglis	34449	1	PCP with Pediatricians	2 in 10 miles	2	1	100.0	3.1	3.1
	Interlachen	32148	8	PCP with Pediatricians	2 in 10 miles	7	8	100.0	1.9	2.1
	Inverness	34450	2	PCP with Pediatricians	2 in 10 miles	4	2	100.0	2.7	2.7
	Jacksonville	32204	1	PCP with Pediatricians	2 in 10 miles	161	1	100.0	0.3	0.3
		32205	1	PCP with Pediatricians	2 in 10 miles	18	1	100.0	1.0	1.0
		32211	1	PCP with Pediatricians	2 in 10 miles	13	1	100.0	1.0	1.1
		32225	3	PCP with Pediatricians	2 in 10 miles	47	3	100.0	0.8	0.8
		32226	1	PCP with Pediatricians	2 in 10 miles	7	1	100.0	1.2	1.2
		32258	1	PCP with Pediatricians	2 in 10 miles	125	1	100.0	0.4	0.6
	Keystone Heights	32656	32	PCP with Pediatricians	2 in 10 miles	5	32	100.0	2.3	2.5
	Lake Butler	32054	32	PCP with Pediatricians	2 in 10 miles	16	27	84.4	4.0	4.0
	Lake City	32024	7	PCP with Pediatricians	2 in 10 miles	14	5	71.4	5.1	5.1
		32025	3	PCP with Pediatricians	2 in 10 miles	30	3	100.0	1.8	1.8
		32055	2	PCP with Pediatricians	2 in 10 miles	76	2	100.0	1.7	1.7
		32056	3	PCP with Pediatricians	2 in 10 miles	0	3	100.0	0.1	0.1
	Lake Placid	33852	1	PCP with Pediatricians	2 in 10 miles	38	1	100.0	0.1	0.3
	Lawtey	32058	6	PCP with Pediatricians	2 in 10 miles	0	6	100.0	5.3	5.3
	Live Oak	32060	2	PCP with Pediatricians	2 in 10 miles	1	2	100.0	5.0	6.7
	Lulu	32061	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	9.4	9.4
	Macclenny	32063	1	PCP with Pediatricians	2 in 10 miles	17	1	100.0	0.5	0.5
	Mc Intosh	32664	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	5.6	5.6
	Melrose	32666	25	PCP with Pediatricians	2 in 10 miles	2	25	100.0	2.3	4.7
	Merritt Island	32952	1	PCP with Pediatricians	2 in 10 miles	21	1	100.0	1.8	1.9
		32953	1	PCP with Pediatricians	2 in 10 miles	26	1	100.0	1.1	1.1
	Micanopy	32667	13	PCP with Pediatricians	2 in 10 miles	0	13	100.0	7.4	7.5

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 PCP with Pediatricians

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Middleburg	32068	3	PCP with Pediatricians	2 in 10 miles	62	3	100.0	1.2	1.2
	Morrison	32668	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	7.1	7.2
	Newberry	32669	108	PCP with Pediatricians	2 in 10 miles	19	108	100.0	1.5	3.0
	Niceville	32578	1	PCP with Pediatricians	2 in 10 miles	32	1	100.0	0.4	0.4
	O Brien	32071	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	5.4	5.4
	Ocala	34470	8	PCP with Pediatricians	2 in 10 miles	18	8	100.0	0.7	0.7
		34471	10	PCP with Pediatricians	2 in 10 miles	267	10	100.0	0.5	0.6
		34472	3	PCP with Pediatricians	2 in 10 miles	13	3	100.0	1.3	1.3
		34474	3	PCP with Pediatricians	2 in 10 miles	75	3	100.0	0.5	0.5
		34475	4	PCP with Pediatricians	2 in 10 miles	7	4	100.0	1.6	1.9
		34476	12	PCP with Pediatricians	2 in 10 miles	30	12	100.0	1.0	1.3
		34479	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	3.2	3.2
		34480	5	PCP with Pediatricians	2 in 10 miles	0	5	100.0	2.1	2.1
		34481	1	PCP with Pediatricians	2 in 10 miles	65	1	100.0	1.6	1.6
		34482	7	PCP with Pediatricians	2 in 10 miles	2	7	100.0	4.3	4.6
	Ocoee	34761	1	PCP with Pediatricians	2 in 10 miles	172	1	100.0	0.4	1.0
	Old Town	32680	10	PCP with Pediatricians	2 in 10 miles	7	10	100.0	3.4	4.3
	Orange Park	32065	2	PCP with Pediatricians	2 in 10 miles	15	2	100.0	1.1	1.2
		32073	1	PCP with Pediatricians	2 in 10 miles	132	1	100.0	0.0	0.0
	Oxford	34484	1	PCP with Pediatricians	2 in 10 miles	6	1	100.0	0.3	2.2
	Palatka	32177	6	PCP with Pediatricians	2 in 10 miles	50	6	100.0	1.8	1.9
	Palm Bay	32905	1	PCP with Pediatricians	2 in 10 miles	76	1	100.0	0.4	0.6
	Palm Coast	32137	2	PCP with Pediatricians	2 in 10 miles	52	2	100.0	1.8	1.9
		32164	2	PCP with Pediatricians	2 in 10 miles	67	2	100.0	2.5	2.5
	Panama City	32405	2	PCP with Pediatricians	2 in 10 miles	130	2	100.0	0.3	0.3
	Pensacola	32526	1	PCP with Pediatricians	2 in 10 miles	5	1	100.0	0.8	1.1
	Perry	32347	2	PCP with Pediatricians	2 in 10 miles	7	2	100.0	1.1	1.1
		32348	1	PCP with Pediatricians	2 in 10 miles	2	1	100.0	7.0	7.1
	Pinellas Park	33782	1	PCP with Pediatricians	2 in 10 miles	14	1	100.0	0.7	0.7
	Punta Gorda	33950	1	PCP with Pediatricians	2 in 10 miles	40	1	100.0	0.3	1.1
	Raiford	32083	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	7.4	7.4
	Reddick	32686	7	PCP with Pediatricians	2 in 10 miles	7	7	100.0	3.6	3.6
	Saint Augustine	32084	2	PCP with Pediatricians	2 in 10 miles	5	2	100.0	2.6	2.8
		32086	1	PCP with Pediatricians	2 in 10 miles	112	1	100.0	0.3	0.3
	Saint Johns	32259	3	PCP with Pediatricians	2 in 10 miles	60	3	100.0	1.2	1.2
	Sanderson	32087	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	7.3	8.7
	Sarasota	34240	1	PCP with Pediatricians	2 in 10 miles	28	1	100.0	2.3	3.2
	Silver Springs	34488	1	PCP with Pediatricians	2 in 10 miles	6	1	100.0	1.2	1.2
	Starke	32091	38	PCP with Pediatricians	2 in 10 miles	37	38	100.0	2.4	2.4
	Sun City Center	33571	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	0.0	0.0

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 PCP with Pediatricians

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Tallahassee	32309	1	PCP with Pediatricians	2 in 10 miles	16	1	100.0	3.2	3.2
	Tampa	33613	1	PCP with Pediatricians	2 in 10 miles	151	1	100.0	0.2	0.4
		33647	1	PCP with Pediatricians	2 in 10 miles	67	1	100.0	0.1	0.2
		34689	1	PCP with Pediatricians	2 in 10 miles	31	1	100.0	0.5	0.6
	The Villages	32162	1	PCP with Pediatricians	2 in 10 miles	76	1	100.0	0.7	0.7
	Trenton	32693	43	PCP with Pediatricians	2 in 10 miles	11	43	100.0	3.3	4.0
	Waldo	32694	20	PCP with Pediatricians	2 in 10 miles	0	20	100.0	6.5	6.6
	Wesley Chapel	33543	2	PCP with Pediatricians	2 in 10 miles	31	2	100.0	1.6	2.1
	Williston	32696	31	PCP with Pediatricians	2 in 10 miles	30	31	100.0	3.2	3.3
	Worthington Springs	32697	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	6.5	6.5
GA	Blairsville	30512	1	PCP with Pediatricians	2 in 10 miles	50	1	100.0	2.4	2.4
	Blue Ridge	30513	1	PCP with Pediatricians	2 in 10 miles	48	1	100.0	0.8	0.8
	Dahlonega	30533	1	PCP with Pediatricians	2 in 10 miles	57	1	100.0	0.6	0.6
	Valdosta	31601	1	PCP with Pediatricians	2 in 10 miles	14	1	100.0	0.8	2.1
		31605	1	PCP with Pediatricians	2 in 10 miles	17	1	100.0	3.3	3.3
IL	Carterville	62918	1	PCP with Pediatricians	2 in 10 miles	21	1	100.0	0.9	0.9
KY	Russellville	42276	2	PCP with Pediatricians	2 in 10 miles	26	2	100.0	0.6	1.0
MA	South Hadley	01075	1	PCP with Pediatricians	2 in 10 miles	18	1	100.0	0.3	0.6
ME	Monson	04464	1	PCP with Pediatricians	2 in 10 miles	2	1	100.0	1.2	1.2
MO	Pontiac	65729	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	6.4	9.0
NC	Franklin	28734	2	PCP with Pediatricians	2 in 10 miles	150	2	100.0	1.7	1.8
SC	Anderson	29621	1	PCP with Pediatricians	2 in 10 miles	271	1	100.0	0.4	0.4
TN	Kingsport	37664	2	PCP with Pediatricians	2 in 10 miles	1	2	100.0	2.0	2.0
TX	Copperas Cove	76522	1	PCP with Pediatricians	2 in 10 miles	18	1	100.0	0.3	0.3
	Granbury	76048	1	PCP with Pediatricians	2 in 10 miles	52	1	100.0	0.4	0.4
VA	Lynchburg	24502	1	PCP with Pediatricians	2 in 10 miles	87	1	100.0	0.3	0.3
Grand Totals			1,909	PCP with Pediatricians	2 in 10 miles	4,778	1,875	98.2	2.1	2.4

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 PCP with Pediatricians

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Archer	32618	45	PCP with Pediatricians	2 in 10 miles	0	12	26.7	10.7	10.8
	Bronson	32621	18	PCP with Pediatricians	2 in 10 miles	0	8	44.4	11.3	11.7
	Fort White	32038	33	PCP with Pediatricians	2 in 10 miles	0	7	21.2	10.9	10.9
	Greenville	32331	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	12.8	12.8
	Gulf Hammock	32639	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	15.5	15.5
	Lake Butler	32054	32	PCP with Pediatricians	2 in 10 miles	16	5	15.6	11.0	11.0
	Lake City	32024	7	PCP with Pediatricians	2 in 10 miles	14	2	28.6	10.7	10.7
	Steinhatchee	32359	3	PCP with Pediatricians	2 in 10 miles	1	3	100.0	1.5	14.1
	White Springs	32096	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	10.5	10.6
	Grand Totals			142	PCP with Pediatricians	2 in 10 miles	31	41	28.9	10.5

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Employees

Provider Group
OB-GYN

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Employees	1,916	OB-GYN	2 in 10 miles	1,271	66.3	645	33.7	107,850	36,035	22,483	6.8	7.5

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹		Average Distance	
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	OB-GYN	2 in 10 miles	879	99.9	1	0.1	154	1.9	2.3	
	Alachua	146	OB-GYN	2 in 10 miles	106	72.6	40	27.4	0	8.7	8.8	
	Newberry	108	OB-GYN	2 in 10 miles	56	51.9	52	48.1	0	8.0	8.7	
	High Springs	96	OB-GYN	2 in 10 miles	1	1.0	95	99.0	0	14.1	14.5	
	Hawthorne	55	OB-GYN	2 in 10 miles	0	0.0	55	100.0	0	15.8	16.2	
	Ocala	55	OB-GYN	2 in 10 miles	55	100.0	0	0.0	50	2.3	2.9	
	Archer	45	OB-GYN	2 in 10 miles	18	40.0	27	60.0	0	9.2	11.4	
	Trenton	43	OB-GYN	2 in 10 miles	29	67.4	14	32.6	1	4.9	9.5	
	Starke	38	OB-GYN	2 in 10 miles	0	0.0	38	100.0	0	19.6	19.6	
	Fort White	33	OB-GYN	2 in 10 miles	0	0.0	33	100.0	0	13.3	16.6	
	Keystone Heights	32	OB-GYN	2 in 10 miles	0	0.0	32	100.0	0	19.0	19.0	
	Lake Butler	32	OB-GYN	2 in 10 miles	0	0.0	32	100.0	0	19.7	19.7	
	Williston	31	OB-GYN	2 in 10 miles	0	0.0	31	100.0	0	17.1	17.9	
	Melrose	25	OB-GYN	2 in 10 miles	0	0.0	25	100.0	0	17.4	17.8	
	Waldo	20	OB-GYN	2 in 10 miles	0	0.0	20	100.0	0	13.1	13.1	
	Bronson	18	OB-GYN	2 in 10 miles	0	0.0	18	100.0	0	15.2	15.9	
	Hampton	16	OB-GYN	2 in 10 miles	0	0.0	16	100.0	0	15.4	15.4	
	Lake City	15	OB-GYN	2 in 10 miles	13	86.7	2	13.3	16	5.5	5.5	
	Bell	13	OB-GYN	2 in 10 miles	0	0.0	13	100.0	0	10.0	14.6	
	Brooker	13	OB-GYN	2 in 10 miles	0	0.0	13	100.0	0	12.7	12.7	
	Micanopy	13	OB-GYN	2 in 10 miles	6	46.2	7	53.8	0	9.8	9.9	
	Old Town	10	OB-GYN	2 in 10 miles	1	10.0	9	90.0	0	12.0	13.8	
	Chiefland	8	OB-GYN	2 in 10 miles	8	100.0	0	0.0	2	3.8	4.7	
	Citra	8	OB-GYN	2 in 10 miles	0	0.0	8	100.0	0	13.4	14.6	
	Interlachen	8	OB-GYN	2 in 10 miles	2	25.0	6	75.0	0	11.7	12.5	
	Jacksonville	8	OB-GYN	2 in 10 miles	8	100.0	0	0.0	270	2.0	3.5	
	Reddick	7	OB-GYN	2 in 10 miles	0	0.0	7	100.0	0	14.3	14.6	
	Branford	6	OB-GYN	2 in 10 miles	0	0.0	6	100.0	1	2.9	19.8	
	Lawtey	6	OB-GYN	2 in 10 miles	0	0.0	6	100.0	0	16.8	16.8	
	Palatka	6	OB-GYN	2 in 10 miles	5	83.3	1	16.7	3	2.8	3.5	
	Anthony	4	OB-GYN	2 in 10 miles	4	100.0	0	0.0	0	5.9	7.0	
	Crystal River	4	OB-GYN	2 in 10 miles	4	100.0	0	0.0	10	1.8	2.6	
	Palm Coast	4	OB-GYN	2 in 10 miles	4	100.0	0	0.0	7	2.8	2.8	
	Beverly Hills	3	OB-GYN	2 in 10 miles	3	100.0	0	0.0	0	3.0	3.0	
	Dunnellon	3	OB-GYN	2 in 10 miles	1	33.3	2	66.7	1	7.6	12.5	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 OB-GYN

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
AL	Birmingham	35213	1	OB-GYN	2 in 10 miles	1	1	100.0	0.7	2.3
CA	Stockton	95209	1	OB-GYN	2 in 10 miles	5	1	100.0	1.3	1.3
FL	Alachua	32615	142	OB-GYN	2 in 10 miles	0	102	71.8	7.2	7.3
		32616	4	OB-GYN	2 in 10 miles	0	4	100.0	7.8	7.9
	Anthony	32617	4	OB-GYN	2 in 10 miles	0	4	100.0	5.9	7.0
	Archer	32618	45	OB-GYN	2 in 10 miles	0	18	40.0	6.1	8.1
	Belleview	34420	2	OB-GYN	2 in 10 miles	1	2	100.0	1.6	8.2
	Beverly Hills	34465	3	OB-GYN	2 in 10 miles	0	3	100.0	3.0	3.0
	Bradenton	34209	1	OB-GYN	2 in 10 miles	7	1	100.0	0.6	0.9
	Chiefland	32626	8	OB-GYN	2 in 10 miles	2	8	100.0	3.8	4.7
	Crystal River	34428	1	OB-GYN	2 in 10 miles	1	1	100.0	2.7	4.2
		34429	3	OB-GYN	2 in 10 miles	9	3	100.0	1.5	2.0
	Daytona Beach	32118	1	OB-GYN	2 in 10 miles	0	1	100.0	3.2	3.2
	Deland	32724	1	OB-GYN	2 in 10 miles	0	1	100.0	2.1	2.1
	Dunnellon	34433	1	OB-GYN	2 in 10 miles	0	1	100.0	6.5	6.7
	Eustis	32726	1	OB-GYN	2 in 10 miles	0	1	100.0	2.4	2.4
	Fernandina Beach	32034	1	OB-GYN	2 in 10 miles	1	1	100.0	2.1	4.8
	Fleming Island	32003	3	OB-GYN	2 in 10 miles	8	3	100.0	0.9	0.9
	Gainesville	32601	69	OB-GYN	2 in 10 miles	4	69	100.0	0.9	1.1
		32603	3	OB-GYN	2 in 10 miles	0	3	100.0	0.8	0.8
		32604	2	OB-GYN	2 in 10 miles	0	2	100.0	0.6	0.6
		32605	166	OB-GYN	2 in 10 miles	37	166	100.0	1.2	1.2
		32606	126	OB-GYN	2 in 10 miles	26	126	100.0	1.6	1.7
		32607	80	OB-GYN	2 in 10 miles	18	80	100.0	0.9	1.2
		32608	138	OB-GYN	2 in 10 miles	6	138	100.0	1.9	3.2
		32609	112	OB-GYN	2 in 10 miles	9	111	99.1	2.8	3.2
		32614	5	OB-GYN	2 in 10 miles	0	5	100.0	1.6	1.9
		32627	1	OB-GYN	2 in 10 miles	0	1	100.0	0.2	0.9
		32635	1	OB-GYN	2 in 10 miles	0	1	100.0	1.1	1.1
		32641	85	OB-GYN	2 in 10 miles	0	85	100.0	3.4	3.9
		32653	92	OB-GYN	2 in 10 miles	0	92	100.0	2.8	2.8
	Green Cove Springs	32043	1	OB-GYN	2 in 10 miles	0	1	100.0	5.4	5.4
	Hernando	34442	1	OB-GYN	2 in 10 miles	2	1	100.0	2.4	2.4
	High Springs	32643	95	OB-GYN	2 in 10 miles	0	1	1.1	9.7	9.9
	Hollister	32147	1	OB-GYN	2 in 10 miles	0	1	100.0	6.9	7.7
	Homosassa	34448	1	OB-GYN	2 in 10 miles	4	1	100.0	1.3	1.3
	Immokalee	34142	1	OB-GYN	2 in 10 miles	6	1	100.0	2.5	2.5
	Interlachen	32148	8	OB-GYN	2 in 10 miles	0	2	25.0	9.3	10.0
	Inverness	34450	2	OB-GYN	2 in 10 miles	2	2	100.0	2.9	3.0
	Jacksonville	32204	1	OB-GYN	2 in 10 miles	11	1	100.0	0.8	0.8

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 OB-GYN

Employees With Access											
State Abbr	City	Zip Code	Employee		Provider		Counts			Average Distance	
			#	Group	Standard	#	#	%	1	2	
FL	Jacksonville	32205	1	OB-GYN	2 in 10 miles	0	1	100.0	1.2	1.2	
		32211	1	OB-GYN	2 in 10 miles	0	1	100.0	2.8	3.2	
		32225	3	OB-GYN	2 in 10 miles	1	3	100.0	1.9	5.7	
		32226	1	OB-GYN	2 in 10 miles	0	1	100.0	5.0	5.0	
		32258	1	OB-GYN	2 in 10 miles	29	1	100.0	0.5	0.6	
	Lake City	32024	7	OB-GYN	2 in 10 miles	0	5	71.4	6.0	6.1	
		32025	3	OB-GYN	2 in 10 miles	0	3	100.0	3.9	3.9	
		32055	2	OB-GYN	2 in 10 miles	16	2	100.0	3.9	3.9	
		32056	3	OB-GYN	2 in 10 miles	0	3	100.0	2.9	2.9	
	Merritt Island	32952	1	OB-GYN	2 in 10 miles	8	1	100.0	2.2	2.3	
		32953	1	OB-GYN	2 in 10 miles	7	1	100.0	3.9	3.9	
	Micanopy	32667	13	OB-GYN	2 in 10 miles	0	6	46.2	7.5	7.6	
	Middleburg	32068	3	OB-GYN	2 in 10 miles	5	3	100.0	3.1	3.1	
	Newberry	32669	108	OB-GYN	2 in 10 miles	0	56	51.9	5.6	6.0	
	Niceville	32578	1	OB-GYN	2 in 10 miles	3	1	100.0	1.6	1.6	
	Ocala	34470	8	OB-GYN	2 in 10 miles	2	8	100.0	0.9	1.7	
		34471	10	OB-GYN	2 in 10 miles	27	10	100.0	0.6	0.9	
		34472	3	OB-GYN	2 in 10 miles	0	3	100.0	4.1	5.2	
		34474	3	OB-GYN	2 in 10 miles	14	3	100.0	0.6	1.2	
		34475	4	OB-GYN	2 in 10 miles	0	4	100.0	2.3	2.6	
		34476	12	OB-GYN	2 in 10 miles	1	12	100.0	1.9	2.7	
		34479	2	OB-GYN	2 in 10 miles	0	2	100.0	3.6	3.8	
		34480	5	OB-GYN	2 in 10 miles	0	5	100.0	2.7	3.6	
		34481	1	OB-GYN	2 in 10 miles	5	1	100.0	3.2	3.3	
		34482	7	OB-GYN	2 in 10 miles	0	7	100.0	6.4	6.9	
	Ocoee	34761	1	OB-GYN	2 in 10 miles	15	1	100.0	1.6	1.6	
	Old Town	32680	10	OB-GYN	2 in 10 miles	0	1	10.0	9.9	10.0	
	Orange Park	32065	2	OB-GYN	2 in 10 miles	0	2	100.0	2.9	2.9	
		32073	1	OB-GYN	2 in 10 miles	12	1	100.0	0.0	0.0	
	Oxford	34484	1	OB-GYN	2 in 10 miles	0	1	100.0	3.4	3.4	
	Palatka	32177	6	OB-GYN	2 in 10 miles	3	5	83.3	1.4	2.1	
	Palm Bay	32905	1	OB-GYN	2 in 10 miles	1	1	100.0	1.9	2.1	
	Palm Coast	32137	2	OB-GYN	2 in 10 miles	5	2	100.0	2.3	2.4	
		32164	2	OB-GYN	2 in 10 miles	2	2	100.0	3.2	3.2	
	Panama City	32405	2	OB-GYN	2 in 10 miles	15	2	100.0	0.9	0.9	
	Pensacola	32526	1	OB-GYN	2 in 10 miles	0	1	100.0	3.8	5.4	
	Pinellas Park	33782	1	OB-GYN	2 in 10 miles	0	1	100.0	1.6	1.6	
	Punta Gorda	33950	1	OB-GYN	2 in 10 miles	2	1	100.0	1.9	1.9	
	Saint Augustine	32084	2	OB-GYN	2 in 10 miles	0	2	100.0	3.7	3.7	
		32086	1	OB-GYN	2 in 10 miles	7	1	100.0	1.3	2.7	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 OB-GYN

Employees With Access											
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance		
			#	Group	Standard	#	#	%	1	2	
FL	Saint Johns	32259	3	OB-GYN	2 in 10 miles	2	3	100.0	3.0	3.0	
	Sarasota	34240	1	OB-GYN	2 in 10 miles	1	1	100.0	3.3	4.1	
	Silver Springs	34488	1	OB-GYN	2 in 10 miles	0	1	100.0	7.9	10.0	
	Sun City Center	33571	1	OB-GYN	2 in 10 miles	0	1	100.0	1.7	1.7	
	Tallahassee	32309	1	OB-GYN	2 in 10 miles	0	1	100.0	3.4	3.4	
	Tampa	33613	1	OB-GYN	2 in 10 miles	41	1	100.0	0.6	0.7	
		33647	1	OB-GYN	2 in 10 miles	36	1	100.0	0.6	0.6	
	Tarpon Springs	34689	1	OB-GYN	2 in 10 miles	2	1	100.0	0.8	0.8	
	The Villages	32162	1	OB-GYN	2 in 10 miles	0	1	100.0	2.9	2.9	
	Trenton	32693	43	OB-GYN	2 in 10 miles	1	29	67.4	3.6	7.2	
	Wesley Chapel	33543	2	OB-GYN	2 in 10 miles	8	2	100.0	2.9	3.4	
	GA	Blairsville	30512	1	OB-GYN	2 in 10 miles	8	1	100.0	2.5	2.7
		Blue Ridge	30513	1	OB-GYN	2 in 10 miles	2	1	100.0	3.8	3.8
		Valdosta	31601	1	OB-GYN	2 in 10 miles	1	1	100.0	0.8	4.0
		31605	1	OB-GYN	2 in 10 miles	12	1	100.0	4.2	4.2	
IL	Cartersville	62918	1	OB-GYN	2 in 10 miles	0	1	100.0	3.9	5.1	
KY	Russellville	42276	2	OB-GYN	2 in 10 miles	2	2	100.0	1.3	2.8	
MA	South Hadley	01075	1	OB-GYN	2 in 10 miles	1	1	100.0	0.9	2.0	
NC	Franklin	28734	2	OB-GYN	2 in 10 miles	27	2	100.0	2.4	2.5	
SC	Anderson	29621	1	OB-GYN	2 in 10 miles	18	1	100.0	0.5	1.4	
TN	Kingsport	37664	2	OB-GYN	2 in 10 miles	0	2	100.0	2.4	2.6	
TX	Copperas Cove	76522	1	OB-GYN	2 in 10 miles	4	1	100.0	1.7	1.7	
	Granbury	76048	1	OB-GYN	2 in 10 miles	9	1	100.0	0.4	0.4	
VA	Lynchburg	24502	1	OB-GYN	2 in 10 miles	14	1	100.0	0.8	1.4	
Grand Totals			1,524	OB-GYN	2 in 10 miles	529	1,271	83.4	2.8	3.2	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 OB-GYN

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
AL	Wadley	36276	1	OB-GYN	2 in 10 miles	0	1	100.0	12.8	12.8
FL	Alachua	32615	142	OB-GYN	2 in 10 miles	0	40	28.2	12.6	12.7
	Archer	32618	45	OB-GYN	2 in 10 miles	0	27	60.0	11.4	13.5
	Bell	32619	13	OB-GYN	2 in 10 miles	0	13	100.0	10.0	14.6
	Branford	32008	6	OB-GYN	2 in 10 miles	1	6	100.0	2.9	19.8
	Bronson	32621	18	OB-GYN	2 in 10 miles	0	18	100.0	15.2	15.9
	Brooker	32622	13	OB-GYN	2 in 10 miles	0	13	100.0	12.7	12.7
	Brooksville	34602	1	OB-GYN	2 in 10 miles	0	1	100.0	10.8	10.8
	Citra	32113	8	OB-GYN	2 in 10 miles	0	8	100.0	13.4	14.6
	Cross City	32628	1	OB-GYN	2 in 10 miles	0	1	100.0	17.9	18.5
	Dunnellon	34431	2	OB-GYN	2 in 10 miles	0	2	100.0	8.1	15.5
	Earleton	32631	2	OB-GYN	2 in 10 miles	0	2	100.0	13.9	14.0
	Florahome	32140	1	OB-GYN	2 in 10 miles	0	1	100.0	13.6	13.9
	Fort Mc Coy	32134	1	OB-GYN	2 in 10 miles	0	1	100.0	15.8	18.3
	Fort White	32038	33	OB-GYN	2 in 10 miles	0	33	100.0	13.3	16.6
	Gainesville	32609	112	OB-GYN	2 in 10 miles	9	1	0.9	10.5	10.5
	Glen Saint Mary	32040	1	OB-GYN	2 in 10 miles	0	1	100.0	25.8	25.8
	Graham	32042	2	OB-GYN	2 in 10 miles	0	2	100.0	13.3	13.3
	Greenville	32331	1	OB-GYN	2 in 10 miles	0	1	100.0	30.5	31.3
	Gulf Hammock	32639	2	OB-GYN	2 in 10 miles	0	2	100.0	17.8	19.1
	Hampton	32044	16	OB-GYN	2 in 10 miles	0	16	100.0	15.4	15.4
	Hawthorne	32640	55	OB-GYN	2 in 10 miles	0	55	100.0	15.8	16.2
	High Springs	32643	95	OB-GYN	2 in 10 miles	0	94	98.9	14.1	14.6
		32655	1	OB-GYN	2 in 10 miles	0	1	100.0	13.4	13.6
	Inglis	34449	1	OB-GYN	2 in 10 miles	0	1	100.0	11.6	13.5
	Interlachen	32148	8	OB-GYN	2 in 10 miles	0	6	75.0	12.5	13.3
	Keystone Heights	32656	32	OB-GYN	2 in 10 miles	0	32	100.0	19.0	19.0
	Lake Butler	32054	32	OB-GYN	2 in 10 miles	0	32	100.0	19.7	19.7
	Lake City	32024	7	OB-GYN	2 in 10 miles	0	2	28.6	11.9	11.9
	Lake Placid	33852	1	OB-GYN	2 in 10 miles	0	1	100.0	14.1	16.5
	Lawtey	32058	6	OB-GYN	2 in 10 miles	0	6	100.0	16.8	16.8
	Live Oak	32060	2	OB-GYN	2 in 10 miles	0	2	100.0	25.7	25.7
	Lulu	32061	1	OB-GYN	2 in 10 miles	0	1	100.0	12.5	12.5
	Macclenny	32063	1	OB-GYN	2 in 10 miles	0	1	100.0	21.5	21.5
	Mc Intosh	32664	1	OB-GYN	2 in 10 miles	0	1	100.0	13.6	13.6
	Melrose	32666	25	OB-GYN	2 in 10 miles	0	25	100.0	17.4	17.8
	Micanopy	32667	13	OB-GYN	2 in 10 miles	0	7	53.8	11.8	11.9
	Morrison	32668	1	OB-GYN	2 in 10 miles	0	1	100.0	15.9	18.3
	Newberry	32669	108	OB-GYN	2 in 10 miles	0	52	48.1	10.5	11.6
	O Brien	32071	2	OB-GYN	2 in 10 miles	0	2	100.0	5.4	17.4

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 OB-GYN

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Old Town	32680	10	OB-GYN	2 in 10 miles	0	9	90.0	12.2	14.2
	Palatka	32177	6	OB-GYN	2 in 10 miles	3	1	16.7	9.8	10.5
	Perry	32347	2	OB-GYN	2 in 10 miles	0	2	100.0	41.9	43.2
		32348	1	OB-GYN	2 in 10 miles	0	1	100.0	40.0	49.0
	Raiford	32083	1	OB-GYN	2 in 10 miles	0	1	100.0	23.2	23.2
	Reddick	32686	7	OB-GYN	2 in 10 miles	0	7	100.0	14.3	14.6
	Sanderson	32087	1	OB-GYN	2 in 10 miles	0	1	100.0	28.7	28.7
	Starke	32091	38	OB-GYN	2 in 10 miles	0	38	100.0	19.6	19.6
	Steinhatchee	32359	3	OB-GYN	2 in 10 miles	0	3	100.0	31.4	32.2
	Trenton	32693	43	OB-GYN	2 in 10 miles	1	14	32.6	7.5	14.1
	Waldo	32694	20	OB-GYN	2 in 10 miles	0	20	100.0	13.1	13.1
	White Springs	32096	1	OB-GYN	2 in 10 miles	0	1	100.0	10.8	10.8
	Williston	32696	31	OB-GYN	2 in 10 miles	0	31	100.0	17.1	17.9
	Worthington Springs	32697	1	OB-GYN	2 in 10 miles	0	1	100.0	16.5	16.6
	GA	Dahlonega	30533	1	OB-GYN	2 in 10 miles	1	1	100.0	1.4
ME	Monson	04464	1	OB-GYN	2 in 10 miles	0	1	100.0	15.7	15.7
MO	Pontiac	65729	1	OB-GYN	2 in 10 miles	0	1	100.0	10.7	16.9
Grand Totals			981	OB-GYN	2 in 10 miles	15	645	65.7	14.7	15.8

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Employees

Provider Group
Specialist

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Employees	1,916	Specialist	2 in 10 miles	1,893	98.8	23	1.2	1,669,034	567,550	176,394	2.3	2.7

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹		Average Distance	
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	Specialist	2 in 10 miles	879	99.9	1	0.1	2,231	1.0	1.2	
	Alachua	146	Specialist	2 in 10 miles	146	100.0	0	0.0	40	2.8	3.1	
	Newberry	108	Specialist	2 in 10 miles	108	100.0	0	0.0	12	1.7	4.9	
	High Springs	96	Specialist	2 in 10 miles	96	100.0	0	0.0	26	2.6	2.7	
	Hawthorne	55	Specialist	2 in 10 miles	55	100.0	0	0.0	2	4.1	4.2	
	Ocala	55	Specialist	2 in 10 miles	55	100.0	0	0.0	881	1.6	1.7	
	Archer	45	Specialist	2 in 10 miles	45	100.0	0	0.0	3	3.2	3.2	
	Trenton	43	Specialist	2 in 10 miles	43	100.0	0	0.0	27	3.3	4.3	
	Starke	38	Specialist	2 in 10 miles	38	100.0	0	0.0	73	2.4	2.4	
	Fort White	33	Specialist	2 in 10 miles	26	78.8	7	21.2	0	7.9	7.9	
	Keystone Heights	32	Specialist	2 in 10 miles	32	100.0	0	0.0	8	2.3	2.4	
	Lake Butler	32	Specialist	2 in 10 miles	27	84.4	5	15.6	8	5.1	5.1	
	Williston	31	Specialist	2 in 10 miles	31	100.0	0	0.0	50	3.2	3.2	
	Melrose	25	Specialist	2 in 10 miles	25	100.0	0	0.0	2	3.7	3.8	
	Waldo	20	Specialist	2 in 10 miles	20	100.0	0	0.0	0	6.6	6.6	
	Bronson	18	Specialist	2 in 10 miles	18	100.0	0	0.0	0	8.3	8.3	
	Hampton	16	Specialist	2 in 10 miles	16	100.0	0	0.0	0	6.1	6.1	
	Lake City	15	Specialist	2 in 10 miles	13	86.7	2	13.3	219	3.7	3.7	
	Bell	13	Specialist	2 in 10 miles	13	100.0	0	0.0	44	3.0	3.5	
	Brooker	13	Specialist	2 in 10 miles	13	100.0	0	0.0	0	8.8	9.0	
	Micanopy	13	Specialist	2 in 10 miles	13	100.0	0	0.0	0	7.4	7.4	
	Old Town	10	Specialist	2 in 10 miles	10	100.0	0	0.0	0	4.4	5.9	
	Chiefland	8	Specialist	2 in 10 miles	8	100.0	0	0.0	82	3.7	3.8	
	Citra	8	Specialist	2 in 10 miles	8	100.0	0	0.0	1	4.8	5.2	
	Interlachen	8	Specialist	2 in 10 miles	8	100.0	0	0.0	3	1.9	2.4	
	Jacksonville	8	Specialist	2 in 10 miles	8	100.0	0	0.0	4,192	0.7	0.7	
	Reddick	7	Specialist	2 in 10 miles	7	100.0	0	0.0	10	3.6	3.6	
	Branford	6	Specialist	2 in 10 miles	6	100.0	0	0.0	42	1.7	2.2	
	Lawtey	6	Specialist	2 in 10 miles	6	100.0	0	0.0	0	5.3	5.3	
	Palatka	6	Specialist	2 in 10 miles	6	100.0	0	0.0	119	1.9	2.3	
	Anthony	4	Specialist	2 in 10 miles	4	100.0	0	0.0	0	6.3	6.4	
	Crystal River	4	Specialist	2 in 10 miles	4	100.0	0	0.0	92	1.2	1.3	
	Palm Coast	4	Specialist	2 in 10 miles	4	100.0	0	0.0	446	1.7	2.1	
	Beverly Hills	3	Specialist	2 in 10 miles	3	100.0	0	0.0	15	1.1	1.1	
	Dunnellon	3	Specialist	2 in 10 miles	3	100.0	0	0.0	27	4.5	4.8	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Specialist

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
AL	Birmingham	35213	1	Specialist	2 in 10 miles	37	1	100.0	0.5	0.5
CA	Stockton	95209	1	Specialist	2 in 10 miles	47	1	100.0	0.6	0.6
FL	Alachua	32615	142	Specialist	2 in 10 miles	40	142	100.0	2.9	3.2
		32616	4	Specialist	2 in 10 miles	0	4	100.0	0.1	0.3
	Anthony	32617	4	Specialist	2 in 10 miles	0	4	100.0	6.3	6.4
	Archer	32618	45	Specialist	2 in 10 miles	3	45	100.0	3.2	3.2
	Bell	32619	13	Specialist	2 in 10 miles	44	13	100.0	3.0	3.5
	Belleview	34420	2	Specialist	2 in 10 miles	26	2	100.0	1.1	1.1
	Beverly Hills	34465	3	Specialist	2 in 10 miles	15	3	100.0	1.1	1.1
	Bradenton	34209	1	Specialist	2 in 10 miles	202	1	100.0	0.4	0.4
	Branford	32008	6	Specialist	2 in 10 miles	42	6	100.0	1.7	2.2
	Bronson	32621	18	Specialist	2 in 10 miles	0	18	100.0	8.3	8.3
	Brooker	32622	13	Specialist	2 in 10 miles	0	13	100.0	8.8	9.0
	Brooksville	34602	1	Specialist	2 in 10 miles	2	1	100.0	3.1	4.3
	Chiefland	32626	8	Specialist	2 in 10 miles	82	8	100.0	3.7	3.8
	Citra	32113	8	Specialist	2 in 10 miles	1	8	100.0	4.8	5.2
	Cross City	32628	1	Specialist	2 in 10 miles	8	1	100.0	0.6	1.2
	Crystal River	34428	1	Specialist	2 in 10 miles	9	1	100.0	1.6	1.8
		34429	3	Specialist	2 in 10 miles	83	3	100.0	1.1	1.1
	Daytona Beach	32118	1	Specialist	2 in 10 miles	0	1	100.0	1.0	1.0
	Deland	32724	1	Specialist	2 in 10 miles	14	1	100.0	1.0	1.2
	Dunnellon	34431	2	Specialist	2 in 10 miles	0	2	100.0	5.2	5.2
		34433	1	Specialist	2 in 10 miles	0	1	100.0	3.1	4.1
	Earleton	32631	2	Specialist	2 in 10 miles	0	2	100.0	5.7	5.7
	Eustis	32726	1	Specialist	2 in 10 miles	24	1	100.0	0.6	0.7
	Fernandina Beach	32034	1	Specialist	2 in 10 miles	183	1	100.0	0.4	0.4
	Fleming Island	32003	3	Specialist	2 in 10 miles	329	3	100.0	0.5	0.5
	Florahome	32140	1	Specialist	2 in 10 miles	0	1	100.0	3.0	3.0
	Fort Mc Coy	32134	1	Specialist	2 in 10 miles	2	1	100.0	5.0	9.3
	Fort White	32038	33	Specialist	2 in 10 miles	0	26	78.8	7.0	7.1
	Gainesville	32601	69	Specialist	2 in 10 miles	24	69	100.0	0.5	0.6
		32603	3	Specialist	2 in 10 miles	0	3	100.0	0.6	0.7
		32604	2	Specialist	2 in 10 miles	0	2	100.0	0.3	0.3
		32605	166	Specialist	2 in 10 miles	351	166	100.0	0.6	0.7
		32606	126	Specialist	2 in 10 miles	218	126	100.0	0.5	0.7
		32607	80	Specialist	2 in 10 miles	402	80	100.0	0.5	0.6
		32608	138	Specialist	2 in 10 miles	381	138	100.0	1.0	1.0
		32609	112	Specialist	2 in 10 miles	11	111	99.1	2.4	2.5
		32614	5	Specialist	2 in 10 miles	0	5	100.0	0.2	0.2
		32627	1	Specialist	2 in 10 miles	0	1	100.0	0.2	0.2

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Specialist

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Gainesville	32635	1	Specialist	2 in 10 miles	0	1	100.0	0.1	0.1
		32641	85	Specialist	2 in 10 miles	3	85	100.0	1.9	2.5
		32653	92	Specialist	2 in 10 miles	5	92	100.0	1.1	1.6
	Glen Saint Mary	32040	1	Specialist	2 in 10 miles	0	1	100.0	5.2	5.5
		Graham	32042	2	Specialist	2 in 10 miles	0	2	100.0	8.2
	Green Cove Springs	32043	1	Specialist	2 in 10 miles	13	1	100.0	1.8	1.8
	Hampton	32044	16	Specialist	2 in 10 miles	0	16	100.0	6.1	6.1
	Hawthorne	32640	55	Specialist	2 in 10 miles	2	55	100.0	4.1	4.2
	Hernando	34442	1	Specialist	2 in 10 miles	7	1	100.0	2.4	2.4
	High Springs	32643	95	Specialist	2 in 10 miles	26	95	100.0	2.6	2.7
		32655	1	Specialist	2 in 10 miles	0	1	100.0	0.1	0.1
	Hollister	32147	1	Specialist	2 in 10 miles	0	1	100.0	4.1	5.2
	Homosassa	34448	1	Specialist	2 in 10 miles	12	1	100.0	0.9	0.9
	Immokalee	34142	1	Specialist	2 in 10 miles	58	1	100.0	0.7	1.4
	Inglis	34449	1	Specialist	2 in 10 miles	0	1	100.0	8.7	8.7
	Interlachen	32148	8	Specialist	2 in 10 miles	3	8	100.0	1.9	2.4
	Inverness	34450	2	Specialist	2 in 10 miles	5	2	100.0	2.0	2.1
	Jacksonville	32204	1	Specialist	2 in 10 miles	369	1	100.0	0.1	0.2
		32205	1	Specialist	2 in 10 miles	53	1	100.0	0.7	0.8
		32211	1	Specialist	2 in 10 miles	7	1	100.0	0.7	0.7
		32225	3	Specialist	2 in 10 miles	65	3	100.0	0.8	0.8
		32226	1	Specialist	2 in 10 miles	11	1	100.0	1.2	1.2
		32258	1	Specialist	2 in 10 miles	306	1	100.0	0.4	0.4
		Keystone Heights	32656	32	Specialist	2 in 10 miles	8	32	100.0	2.3
	Lake Butler	32054	32	Specialist	2 in 10 miles	8	27	84.4	4.1	4.1
	Lake City	32024	7	Specialist	2 in 10 miles	38	5	71.4	5.1	5.1
		32025	3	Specialist	2 in 10 miles	71	3	100.0	1.8	1.8
		32055	2	Specialist	2 in 10 miles	110	2	100.0	1.7	1.7
	32056	3	Specialist	2 in 10 miles	0	3	100.0	0.1	0.1	
	Lake Placid	33852	1	Specialist	2 in 10 miles	43	1	100.0	0.5	0.7
	Lawtey	32058	6	Specialist	2 in 10 miles	0	6	100.0	5.3	5.3
	Live Oak	32060	2	Specialist	2 in 10 miles	2	2	100.0	5.0	6.7
	Lulu	32061	1	Specialist	2 in 10 miles	0	1	100.0	8.6	8.6
	Macclenny	32063	1	Specialist	2 in 10 miles	35	1	100.0	0.5	0.5
	Mc Intosh	32664	1	Specialist	2 in 10 miles	0	1	100.0	5.6	5.6
	Melrose	32666	25	Specialist	2 in 10 miles	2	25	100.0	3.7	3.8
	Merritt Island	32952	1	Specialist	2 in 10 miles	61	1	100.0	0.7	1.8
		32953	1	Specialist	2 in 10 miles	76	1	100.0	1.1	1.1
	Micanopy	32667	13	Specialist	2 in 10 miles	0	13	100.0	7.4	7.4
	Middleburg	32068	3	Specialist	2 in 10 miles	127	3	100.0	1.1	1.2

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Specialist

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Morrison	32668	1	Specialist	2 in 10 miles	0	1	100.0	7.2	7.2
	Newberry	32669	108	Specialist	2 in 10 miles	12	108	100.0	1.7	4.9
	Niceville	32578	1	Specialist	2 in 10 miles	46	1	100.0	0.4	0.4
	O Brien	32071	2	Specialist	2 in 10 miles	0	2	100.0	5.1	5.2
	Ocala	34470	8	Specialist	2 in 10 miles	27	8	100.0	0.6	0.8
		34471	10	Specialist	2 in 10 miles	538	10	100.0	0.4	0.4
		34472	3	Specialist	2 in 10 miles	17	3	100.0	1.5	1.5
		34474	3	Specialist	2 in 10 miles	181	3	100.0	0.5	0.5
		34475	4	Specialist	2 in 10 miles	5	4	100.0	1.9	1.9
		34476	12	Specialist	2 in 10 miles	26	12	100.0	1.5	1.5
		34479	2	Specialist	2 in 10 miles	0	2	100.0	3.2	3.3
		34480	5	Specialist	2 in 10 miles	1	5	100.0	2.0	2.2
		34481	1	Specialist	2 in 10 miles	73	1	100.0	1.6	2.6
		34482	7	Specialist	2 in 10 miles	3	7	100.0	4.3	4.6
	Ocoee	34761	1	Specialist	2 in 10 miles	292	1	100.0	1.0	1.1
	Old Town	32680	10	Specialist	2 in 10 miles	0	10	100.0	4.4	5.9
	Orange Park	32065	2	Specialist	2 in 10 miles	33	2	100.0	1.1	1.1
		32073	1	Specialist	2 in 10 miles	330	1	100.0	0.0	0.0
	Oxford	34484	1	Specialist	2 in 10 miles	17	1	100.0	2.2	2.2
	Palatka	32177	6	Specialist	2 in 10 miles	119	6	100.0	1.9	2.3
	Palm Bay	32905	1	Specialist	2 in 10 miles	110	1	100.0	0.4	0.4
	Palm Coast	32137	2	Specialist	2 in 10 miles	239	2	100.0	1.7	1.8
		32164	2	Specialist	2 in 10 miles	207	2	100.0	1.7	2.5
	Panama City	32405	2	Specialist	2 in 10 miles	236	2	100.0	0.3	0.6
	Pensacola	32526	1	Specialist	2 in 10 miles	13	1	100.0	1.1	1.1
	Perry	32347	2	Specialist	2 in 10 miles	24	2	100.0	1.1	1.1
		32348	1	Specialist	2 in 10 miles	15	1	100.0	6.8	7.0
	Pinellas Park	33782	1	Specialist	2 in 10 miles	19	1	100.0	0.5	0.5
	Punta Gorda	33950	1	Specialist	2 in 10 miles	126	1	100.0	0.2	0.2
	Raiford	32083	1	Specialist	2 in 10 miles	0	1	100.0	7.4	7.4
	Reddick	32686	7	Specialist	2 in 10 miles	10	7	100.0	3.6	3.6
	Saint Augustine	32084	2	Specialist	2 in 10 miles	51	2	100.0	0.9	1.5
		32086	1	Specialist	2 in 10 miles	253	1	100.0	0.1	0.1
	Saint Johns	32259	3	Specialist	2 in 10 miles	122	3	100.0	0.6	1.1
	Sanderson	32087	1	Specialist	2 in 10 miles	0	1	100.0	8.7	8.7
	Sarasota	34240	1	Specialist	2 in 10 miles	46	1	100.0	1.8	2.4
	Silver Springs	34488	1	Specialist	2 in 10 miles	2	1	100.0	1.2	1.2
	Starke	32091	38	Specialist	2 in 10 miles	73	38	100.0	2.4	2.4
	Sun City Center	33571	1	Specialist	2 in 10 miles	0	1	100.0	0.0	0.1
	Tallahassee	32309	1	Specialist	2 in 10 miles	12	1	100.0	3.2	3.4

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Specialist

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Tampa	33613	1	Specialist	2 in 10 miles	498	1	100.0	0.1	0.4
		33647	1	Specialist	2 in 10 miles	104	1	100.0	0.1	0.1
	Tarpon Springs	34689	1	Specialist	2 in 10 miles	103	1	100.0	0.0	0.2
	The Villages	32162	1	Specialist	2 in 10 miles	131	1	100.0	0.7	0.7
	Trenton	32693	43	Specialist	2 in 10 miles	27	43	100.0	3.3	4.3
	Waldo	32694	20	Specialist	2 in 10 miles	0	20	100.0	6.6	6.6
	Wesley Chapel	33543	2	Specialist	2 in 10 miles	47	2	100.0	1.5	1.6
	Williston	32696	31	Specialist	2 in 10 miles	50	31	100.0	3.2	3.2
	Worthington Springs	32697	1	Specialist	2 in 10 miles	0	1	100.0	8.0	8.0
	GA	Blairsville	30512	1	Specialist	2 in 10 miles	90	1	100.0	2.1
Blue Ridge		30513	1	Specialist	2 in 10 miles	74	1	100.0	0.8	0.8
Dahlonega		30533	1	Specialist	2 in 10 miles	112	1	100.0	0.3	0.5
Valdosta		31601	1	Specialist	2 in 10 miles	21	1	100.0	0.8	2.1
		31605	1	Specialist	2 in 10 miles	21	1	100.0	3.3	3.3
IL	Carterville	62918	1	Specialist	2 in 10 miles	42	1	100.0	0.3	0.9
KY	Russellville	42276	2	Specialist	2 in 10 miles	165	2	100.0	0.5	0.6
MA	South Hadley	01075	1	Specialist	2 in 10 miles	18	1	100.0	0.6	0.6
ME	Monson	04464	1	Specialist	2 in 10 miles	4	1	100.0	1.2	1.2
MO	Pontiac	65729	1	Specialist	2 in 10 miles	0	1	100.0	9.0	9.0
NC	Franklin	28734	2	Specialist	2 in 10 miles	265	2	100.0	0.7	1.7
SC	Anderson	29621	1	Specialist	2 in 10 miles	145	1	100.0	0.4	0.4
TN	Kingsport	37664	2	Specialist	2 in 10 miles	21	2	100.0	1.6	1.6
TX	Copperas Cove	76522	1	Specialist	2 in 10 miles	77	1	100.0	0.3	0.3
	Granbury	76048	1	Specialist	2 in 10 miles	182	1	100.0	0.1	0.1
VA	Lynchburg	24502	1	Specialist	2 in 10 miles	118	1	100.0	0.3	0.3
Grand Totals			1,908	Specialist	2 in 10 miles	9,699	1,893	99.2	2.2	2.5

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Specialist

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
AL	Wadley	36276	1	Specialist	2 in 10 miles	1	1	100.0	0.3	10.6
FL	Fort White	32038	33	Specialist	2 in 10 miles	0	7	21.2	10.9	10.9
	Gainesville	32609	112	Specialist	2 in 10 miles	11	1	0.9	10.5	10.5
	Greenville	32331	1	Specialist	2 in 10 miles	0	1	100.0	12.6	12.8
	Gulf Hammock	32639	2	Specialist	2 in 10 miles	0	2	100.0	17.8	17.8
	Lake Butler	32054	32	Specialist	2 in 10 miles	8	5	15.6	10.8	10.9
	Lake City	32024	7	Specialist	2 in 10 miles	38	2	28.6	10.7	10.7
	Steinhatchee	32359	3	Specialist	2 in 10 miles	0	3	100.0	14.1	15.3
	White Springs	32096	1	Specialist	2 in 10 miles	0	1	100.0	10.6	10.6
Grand Totals			192	Specialist	2 in 10 miles	58	23	12.0	11.5	12.1

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Employees

Provider Group
Urgent Care

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Employees	1,916	Urgent Care	2 in 10 miles	1,273	66.4	643	33.6	11,293	3,023	9,424	5.1	8.3

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹	Average Distance		
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	Urgent Care	2 in 10 miles	865	98.3	15	1.7	7	2.0	3.6	
	Alachua	146	Urgent Care	2 in 10 miles	139	95.2	7	4.8	2	3.2	6.0	
	Newberry	108	Urgent Care	2 in 10 miles	58	53.7	50	46.3	1	5.3	8.4	
	High Springs	96	Urgent Care	2 in 10 miles	15	15.6	81	84.4	0	7.9	12.6	
	Hawthorne	55	Urgent Care	2 in 10 miles	0	0.0	55	100.0	0	16.1	17.4	
	Ocala	55	Urgent Care	2 in 10 miles	55	100.0	0	0.0	13	2.4	3.2	
	Archer	45	Urgent Care	2 in 10 miles	26	57.8	19	42.2	0	8.4	9.6	
	Trenton	43	Urgent Care	2 in 10 miles	0	0.0	43	100.0	0	8.9	19.9	
	Starke	38	Urgent Care	2 in 10 miles	0	0.0	38	100.0	1	3.9	19.2	
	Fort White	33	Urgent Care	2 in 10 miles	0	0.0	33	100.0	0	13.6	16.0	
	Keystone Heights	32	Urgent Care	2 in 10 miles	0	0.0	32	100.0	0	11.4	19.8	
	Lake Butler	32	Urgent Care	2 in 10 miles	0	0.0	32	100.0	0	12.9	15.7	
	Williston	31	Urgent Care	2 in 10 miles	0	0.0	31	100.0	1	3.5	17.4	
	Melrose	25	Urgent Care	2 in 10 miles	0	0.0	25	100.0	0	14.9	18.1	
	Waldo	20	Urgent Care	2 in 10 miles	0	0.0	20	100.0	0	10.2	14.6	
	Bronson	18	Urgent Care	2 in 10 miles	0	0.0	18	100.0	0	10.5	15.9	
	Hampton	16	Urgent Care	2 in 10 miles	0	0.0	16	100.0	0	4.9	16.8	
	Lake City	15	Urgent Care	2 in 10 miles	13	86.7	2	13.3	4	4.7	5.1	
	Bell	13	Urgent Care	2 in 10 miles	0	0.0	13	100.0	0	17.9	23.9	
	Brooker	13	Urgent Care	2 in 10 miles	4	30.8	9	69.2	0	8.8	11.2	
	Micanopy	13	Urgent Care	2 in 10 miles	5	38.5	8	61.5	0	10.2	11.0	
	Old Town	10	Urgent Care	2 in 10 miles	0	0.0	10	100.0	0	14.2	31.0	
	Chiefland	8	Urgent Care	2 in 10 miles	0	0.0	8	100.0	1	4.4	26.6	
	Citra	8	Urgent Care	2 in 10 miles	2	25.0	6	75.0	0	10.5	11.0	
	Interlachen	8	Urgent Care	2 in 10 miles	2	25.0	6	75.0	0	12.3	12.3	
	Jacksonville	8	Urgent Care	2 in 10 miles	8	100.0	0	0.0	31	1.8	2.7	
	Reddick	7	Urgent Care	2 in 10 miles	4	57.1	3	42.9	0	9.7	10.5	
	Branford	6	Urgent Care	2 in 10 miles	0	0.0	6	100.0	0	20.8	22.2	
	Lawtey	6	Urgent Care	2 in 10 miles	0	0.0	6	100.0	0	8.3	16.0	
	Palatka	6	Urgent Care	2 in 10 miles	5	83.3	1	16.7	2	3.4	3.4	
	Anthony	4	Urgent Care	2 in 10 miles	4	100.0	0	0.0	0	4.1	5.1	
	Crystal River	4	Urgent Care	2 in 10 miles	4	100.0	0	0.0	2	2.4	3.3	
	Palm Coast	4	Urgent Care	2 in 10 miles	4	100.0	0	0.0	4	2.6	3.3	
	Beverly Hills	3	Urgent Care	2 in 10 miles	3	100.0	0	0.0	1	1.9	5.2	
	Dunnellon	3	Urgent Care	2 in 10 miles	1	33.3	2	66.7	1	6.5	12.4	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Urgent Care

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
AL	Birmingham	35213	1	Urgent Care	2 in 10 miles	0	1	100.0	2.9	2.9
CA	Stockton	95209	1	Urgent Care	2 in 10 miles	2	1	100.0	1.3	1.5
FL	Alachua	32615	142	Urgent Care	2 in 10 miles	2	135	95.1	3.0	5.8
		32616	4	Urgent Care	2 in 10 miles	0	4	100.0	0.6	4.6
	Anthony	32617	4	Urgent Care	2 in 10 miles	0	4	100.0	4.1	5.1
	Archer	32618	45	Urgent Care	2 in 10 miles	0	26	57.8	6.8	7.6
	Belleview	34420	2	Urgent Care	2 in 10 miles	0	2	100.0	7.2	8.2
	Beverly Hills	34465	3	Urgent Care	2 in 10 miles	1	3	100.0	1.9	5.2
	Bradenton	34209	1	Urgent Care	2 in 10 miles	0	1	100.0	2.5	3.0
	Brooker	32622	13	Urgent Care	2 in 10 miles	0	4	30.8	7.1	9.6
	Citra	32113	8	Urgent Care	2 in 10 miles	0	2	25.0	8.8	9.3
	Crystal River	34428	1	Urgent Care	2 in 10 miles	0	1	100.0	3.6	5.0
		34429	3	Urgent Care	2 in 10 miles	2	3	100.0	2.0	2.7
	Daytona Beach	32118	1	Urgent Care	2 in 10 miles	1	1	100.0	2.5	3.3
	Deland	32724	1	Urgent Care	2 in 10 miles	0	1	100.0	1.6	3.5
	Dunnellon	34433	1	Urgent Care	2 in 10 miles	0	1	100.0	5.1	6.2
	Eustis	32726	1	Urgent Care	2 in 10 miles	0	1	100.0	2.1	2.8
	Fernandina Beach	32034	1	Urgent Care	2 in 10 miles	1	1	100.0	2.3	4.2
	Fleming Island	32003	3	Urgent Care	2 in 10 miles	1	3	100.0	1.3	5.2
	Gainesville	32601	69	Urgent Care	2 in 10 miles	1	69	100.0	0.8	3.8
		32603	3	Urgent Care	2 in 10 miles	0	3	100.0	1.3	2.8
		32604	2	Urgent Care	2 in 10 miles	0	2	100.0	0.7	2.9
		32605	166	Urgent Care	2 in 10 miles	1	166	100.0	1.5	2.7
		32606	126	Urgent Care	2 in 10 miles	2	126	100.0	1.1	2.3
		32607	80	Urgent Care	2 in 10 miles	0	80	100.0	1.2	1.7
		32608	138	Urgent Care	2 in 10 miles	3	138	100.0	2.1	2.9
		32609	112	Urgent Care	2 in 10 miles	0	107	95.5	3.7	5.7
		32614	5	Urgent Care	2 in 10 miles	0	5	100.0	0.9	0.9
		32627	1	Urgent Care	2 in 10 miles	0	1	100.0	1.1	4.2
		32635	1	Urgent Care	2 in 10 miles	0	1	100.0	1.1	2.1
		32641	85	Urgent Care	2 in 10 miles	0	75	88.2	2.9	5.6
		32653	92	Urgent Care	2 in 10 miles	0	92	100.0	2.1	3.9
	Green Cove Springs	32043	1	Urgent Care	2 in 10 miles	0	1	100.0	7.0	9.5
	Hernando	34442	1	Urgent Care	2 in 10 miles	0	1	100.0	4.3	5.6
	High Springs	32643	95	Urgent Care	2 in 10 miles	0	15	15.8	4.7	9.0
	Hollister	32147	1	Urgent Care	2 in 10 miles	0	1	100.0	7.5	7.5
	Homosassa	34448	1	Urgent Care	2 in 10 miles	1	1	100.0	0.9	6.2
	Interlachen	32148	8	Urgent Care	2 in 10 miles	0	2	25.0	9.8	9.8
	Jacksonville	32204	1	Urgent Care	2 in 10 miles	0	1	100.0	3.6	4.0
		32205	1	Urgent Care	2 in 10 miles	3	1	100.0	1.8	1.8

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Urgent Care

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Jacksonville	32211	1	Urgent Care	2 in 10 miles	1	1	100.0	0.6	1.8
		32225	3	Urgent Care	2 in 10 miles	3	3	100.0	1.0	2.1
		32226	1	Urgent Care	2 in 10 miles	0	1	100.0	4.7	5.0
		32258	1	Urgent Care	2 in 10 miles	1	1	100.0	0.6	2.8
	Lake City	32024	7	Urgent Care	2 in 10 miles	1	5	71.4	5.9	6.5
		32025	3	Urgent Care	2 in 10 miles	0	3	100.0	3.1	3.3
		32055	2	Urgent Care	2 in 10 miles	3	2	100.0	3.5	3.6
		32056	3	Urgent Care	2 in 10 miles	0	3	100.0	0.4	1.2
	Merritt Island	32952	1	Urgent Care	2 in 10 miles	0	1	100.0	2.7	3.0
		32953	1	Urgent Care	2 in 10 miles	1	1	100.0	3.7	5.8
	Micanopy	32667	13	Urgent Care	2 in 10 miles	0	5	38.5	8.3	8.4
	Middleburg	32068	3	Urgent Care	2 in 10 miles	2	3	100.0	2.9	3.3
	Newberry	32669	108	Urgent Care	2 in 10 miles	1	58	53.7	2.9	5.8
	Niceville	32578	1	Urgent Care	2 in 10 miles	2	1	100.0	1.2	2.5
	Ocala	34470	8	Urgent Care	2 in 10 miles	1	8	100.0	1.0	2.8
		34471	10	Urgent Care	2 in 10 miles	5	10	100.0	1.0	1.3
		34472	3	Urgent Care	2 in 10 miles	0	3	100.0	5.3	6.4
		34474	3	Urgent Care	2 in 10 miles	2	3	100.0	1.0	1.1
		34475	4	Urgent Care	2 in 10 miles	2	4	100.0	1.5	1.8
		34476	12	Urgent Care	2 in 10 miles	1	12	100.0	1.9	3.1
		34479	2	Urgent Care	2 in 10 miles	0	2	100.0	2.3	3.0
		34480	5	Urgent Care	2 in 10 miles	0	5	100.0	4.5	4.7
		34481	1	Urgent Care	2 in 10 miles	1	1	100.0	2.6	3.9
		34482	7	Urgent Care	2 in 10 miles	0	7	100.0	5.5	6.1
	Ocoee	34761	1	Urgent Care	2 in 10 miles	3	1	100.0	1.8	1.8
	Orange Park	32065	2	Urgent Care	2 in 10 miles	0	2	100.0	2.6	2.9
		32073	1	Urgent Care	2 in 10 miles	2	1	100.0	0.2	0.4
	Oxford	34484	1	Urgent Care	2 in 10 miles	0	1	100.0	5.4	6.0
	Palatka	32177	6	Urgent Care	2 in 10 miles	2	5	83.3	1.8	1.8
	Palm Bay	32905	1	Urgent Care	2 in 10 miles	1	1	100.0	2.1	2.1
	Palm Coast	32137	2	Urgent Care	2 in 10 miles	2	2	100.0	2.0	2.7
		32164	2	Urgent Care	2 in 10 miles	2	2	100.0	3.3	3.9
	Panama City	32405	2	Urgent Care	2 in 10 miles	1	2	100.0	1.5	5.7
	Pensacola	32526	1	Urgent Care	2 in 10 miles	0	1	100.0	3.7	3.8
	Pinellas Park	33782	1	Urgent Care	2 in 10 miles	0	1	100.0	2.3	2.5
	Punta Gorda	33950	1	Urgent Care	2 in 10 miles	0	1	100.0	7.4	7.5
	Reddick	32686	7	Urgent Care	2 in 10 miles	0	4	57.1	9.0	9.3
	Saint Augustine	32084	2	Urgent Care	2 in 10 miles	0	2	100.0	3.3	3.6
		32086	1	Urgent Care	2 in 10 miles	4	1	100.0	3.0	3.1
	Saint Johns	32259	3	Urgent Care	2 in 10 miles	5	3	100.0	1.0	2.9

Access Detail By Zip Code

July 5, 2024

- Access Analysis
- Custom
- Employee / Provider Groups
- All Employees
- Urgent Care

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Sarasota	34240	1	Urgent Care	2 in 10 miles	2	1	100.0	3.2	3.3
	Sun City Center	33571	1	Urgent Care	2 in 10 miles	0	1	100.0	1.2	1.2
	Tallahassee	32309	1	Urgent Care	2 in 10 miles	0	1	100.0	6.5	8.3
	Tampa	33613	1	Urgent Care	2 in 10 miles	2	1	100.0	0.6	0.7
		33647	1	Urgent Care	2 in 10 miles	2	1	100.0	0.2	3.4
	Tarpon Springs	34689	1	Urgent Care	2 in 10 miles	1	1	100.0	1.1	3.4
	The Villages	32162	1	Urgent Care	2 in 10 miles	1	1	100.0	1.5	3.3
	Wesley Chapel	33543	2	Urgent Care	2 in 10 miles	0	2	100.0	3.6	3.8
	GA	Valdosta	31601	1	Urgent Care	2 in 10 miles	0	1	100.0	5.7
31605			1	Urgent Care	2 in 10 miles	0	1	100.0	4.2	4.2
MA	South Hadley	01075	1	Urgent Care	2 in 10 miles	0	1	100.0	2.8	2.8
SC	Anderson	29621	1	Urgent Care	2 in 10 miles	2	1	100.0	1.4	3.8
TN	Kingsport	37664	2	Urgent Care	2 in 10 miles	0	2	100.0	3.8	4.2
TX	Copperas Cove	76522	1	Urgent Care	2 in 10 miles	1	1	100.0	2.9	6.8
VA	Lynchburg	24502	1	Urgent Care	2 in 10 miles	2	1	100.0	1.7	1.9
Grand Totals			1,479	Urgent Care	2 in 10 miles	83	1,273	86.1	2.4	4.0

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Urgent Care

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
AL	Wadley	36276	1	Urgent Care	2 in 10 miles	0	1	100.0	27.1	29.2
FL	Alachua	32615	142	Urgent Care	2 in 10 miles	2	7	4.9	7.3	10.5
	Archer	32618	45	Urgent Care	2 in 10 miles	0	19	42.2	10.6	12.4
	Bell	32619	13	Urgent Care	2 in 10 miles	0	13	100.0	17.9	23.9
	Branford	32008	6	Urgent Care	2 in 10 miles	0	6	100.0	20.8	22.2
	Bronson	32621	18	Urgent Care	2 in 10 miles	0	18	100.0	10.5	15.9
	Brooker	32622	13	Urgent Care	2 in 10 miles	0	9	69.2	9.5	11.9
	Brooksville	34602	1	Urgent Care	2 in 10 miles	0	1	100.0	7.6	14.4
	Chiefland	32626	8	Urgent Care	2 in 10 miles	1	8	100.0	4.4	26.6
	Citra	32113	8	Urgent Care	2 in 10 miles	0	6	75.0	11.0	11.6
	Cross City	32628	1	Urgent Care	2 in 10 miles	0	1	100.0	17.8	38.2
	Dunnellon	34431	2	Urgent Care	2 in 10 miles	0	2	100.0	7.2	15.5
	Earleton	32631	2	Urgent Care	2 in 10 miles	0	2	100.0	12.6	14.8
	Florahome	32140	1	Urgent Care	2 in 10 miles	0	1	100.0	14.0	14.0
	Fort Mc Coy	32134	1	Urgent Care	2 in 10 miles	0	1	100.0	17.4	18.1
	Fort White	32038	33	Urgent Care	2 in 10 miles	0	33	100.0	13.6	16.0
	Gainesville	32609	112	Urgent Care	2 in 10 miles	0	5	4.5	8.7	10.7
		32641	85	Urgent Care	2 in 10 miles	0	10	11.8	8.9	11.6
	Glen Saint Mary	32040	1	Urgent Care	2 in 10 miles	0	1	100.0	6.1	23.8
	Graham	32042	2	Urgent Care	2 in 10 miles	0	2	100.0	7.0	13.7
	Greenville	32331	1	Urgent Care	2 in 10 miles	0	1	100.0	31.3	34.6
	Gulf Hammock	32639	2	Urgent Care	2 in 10 miles	0	2	100.0	18.7	19.3
	Hampton	32044	16	Urgent Care	2 in 10 miles	0	16	100.0	4.9	16.8
	Hawthorne	32640	55	Urgent Care	2 in 10 miles	0	55	100.0	16.1	17.4
	High Springs	32643	95	Urgent Care	2 in 10 miles	0	80	84.2	8.5	13.3
		32655	1	Urgent Care	2 in 10 miles	0	1	100.0	6.0	11.1
	Immokalee	34142	1	Urgent Care	2 in 10 miles	0	1	100.0	18.8	19.5
	Inglis	34449	1	Urgent Care	2 in 10 miles	0	1	100.0	12.5	12.9
	Interlachen	32148	8	Urgent Care	2 in 10 miles	0	6	75.0	13.1	13.1
	Inverness	34450	2	Urgent Care	2 in 10 miles	0	2	100.0	4.1	12.6
	Keystone Heights	32656	32	Urgent Care	2 in 10 miles	0	32	100.0	11.4	19.8
	Lake Butler	32054	32	Urgent Care	2 in 10 miles	0	32	100.0	12.9	15.7
	Lake City	32024	7	Urgent Care	2 in 10 miles	1	2	28.6	11.7	12.1
	Lake Placid	33852	1	Urgent Care	2 in 10 miles	0	1	100.0	9.9	18.5
	Lawtey	32058	6	Urgent Care	2 in 10 miles	0	6	100.0	8.3	16.0
	Live Oak	32060	2	Urgent Care	2 in 10 miles	0	2	100.0	8.7	25.8
	Lulu	32061	1	Urgent Care	2 in 10 miles	0	1	100.0	10.0	10.9
	Macclenny	32063	1	Urgent Care	2 in 10 miles	1	1	100.0	1.3	19.0
	Mc Intosh	32664	1	Urgent Care	2 in 10 miles	0	1	100.0	14.1	14.2
	Melrose	32666	25	Urgent Care	2 in 10 miles	0	25	100.0	14.9	18.1

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Employees
 Urgent Care

Employees Without Access											
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance		
			#	Group	Standard	#	#	%	1	2	
FL	Micanopy	32667	13	Urgent Care	2 in 10 miles	0	8	61.5	11.4	12.6	
	Morrison	32668	1	Urgent Care	2 in 10 miles	0	1	100.0	7.4	15.3	
	Newberry	32669	108	Urgent Care	2 in 10 miles	1	50	46.3	8.2	11.4	
	O'Brien	32071	2	Urgent Care	2 in 10 miles	0	2	100.0	17.3	18.7	
	Old Town	32680	10	Urgent Care	2 in 10 miles	0	10	100.0	14.2	31.0	
	Palatka	32177	6	Urgent Care	2 in 10 miles	2	1	16.7	11.0	11.0	
	Perry	32347	2	Urgent Care	2 in 10 miles	0	2	100.0	39.5	41.5	
		32348	1	Urgent Care	2 in 10 miles	0	1	100.0	42.6	47.0	
		Raiford	32083	1	Urgent Care	2 in 10 miles	0	1	100.0	11.6	15.0
		Reddick	32686	7	Urgent Care	2 in 10 miles	0	3	42.9	10.5	12.0
		Sanderson	32087	1	Urgent Care	2 in 10 miles	0	1	100.0	9.7	25.5
		Silver Springs	34488	1	Urgent Care	2 in 10 miles	0	1	100.0	9.2	11.8
		Starke	32091	38	Urgent Care	2 in 10 miles	1	38	100.0	3.9	19.2
		Steinhatchee	32359	3	Urgent Care	2 in 10 miles	0	3	100.0	31.4	50.5
		Trenton	32693	43	Urgent Care	2 in 10 miles	0	43	100.0	8.9	19.9
		Waldo	32694	20	Urgent Care	2 in 10 miles	0	20	100.0	10.2	14.6
		White Springs	32096	1	Urgent Care	2 in 10 miles	0	1	100.0	11.2	11.8
		Williston	32696	31	Urgent Care	2 in 10 miles	1	31	100.0	3.5	17.4
		Worthington Springs	32697	1	Urgent Care	2 in 10 miles	0	1	100.0	10.3	11.1
	GA	Blairsville	30512	1	Urgent Care	2 in 10 miles	0	1	100.0	13.8	13.8
Blue Ridge		30513	1	Urgent Care	2 in 10 miles	1	1	100.0	2.2	17.1	
Dahlonega		30533	1	Urgent Care	2 in 10 miles	1	1	100.0	1.0	12.3	
IL	Cartersville	62918	1	Urgent Care	2 in 10 miles	0	1	100.0	37.9	39.0	
KY	Russellville	42276	2	Urgent Care	2 in 10 miles	1	2	100.0	1.6	21.4	
ME	Monson	04464	1	Urgent Care	2 in 10 miles	0	1	100.0	49.1	69.5	
MO	Pontiac	65729	1	Urgent Care	2 in 10 miles	0	1	100.0	17.5	35.7	
NC	Franklin	28734	2	Urgent Care	2 in 10 miles	0	2	100.0	18.5	32.1	
TX	Granbury	76048	1	Urgent Care	2 in 10 miles	1	1	100.0	0.4	20.7	
Grand Totals			1,086	Urgent Care	2 in 10 miles	14	643	59.2	10.6	16.9	



Network Analysis

Neighborhood Health Partnership (NHP) Network

City of Gainesville (FL)

July 5, 2024

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Florida Employees (Florida)

Provider Group
Hospital (Florida)

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Florida Employees	1,894	Hospital	1 in 10 miles	1,174	62.0	720	38.0	194	189	192	8.7	12.3

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹		Average Distance	
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	Hospital	1 in 10 miles	863	98.1	17	1.9	2	3.3	5.8	
	Alachua	146	Hospital	1 in 10 miles	59	40.4	87	59.6	0	10.5	13.9	
	Newberry	108	Hospital	1 in 10 miles	46	42.6	62	57.4	0	9.7	13.8	
	High Springs	96	Hospital	1 in 10 miles	0	0.0	96	100.0	0	17.1	20.5	
	Hawthorne	55	Hospital	1 in 10 miles	0	0.0	55	100.0	0	16.5	20.4	
	Ocala	55	Hospital	1 in 10 miles	55	100.0	0	0.0	3	4.0	5.1	
	Archer	45	Hospital	1 in 10 miles	14	31.1	31	68.9	0	11.8	14.0	
	Trenton	43	Hospital	1 in 10 miles	0	0.0	43	100.0	0	24.4	28.3	
	Starke	38	Hospital	1 in 10 miles	5	13.2	33	86.8	0	13.1	20.1	
	Fort White	33	Hospital	1 in 10 miles	0	0.0	33	100.0	0	17.1	23.7	
	Keystone Heights	32	Hospital	1 in 10 miles	0	0.0	32	100.0	0	20.3	22.7	
	Lake Butler	32	Hospital	1 in 10 miles	24	75.0	8	25.0	1	5.8	20.2	
	Williston	31	Hospital	1 in 10 miles	0	0.0	31	100.0	0	19.4	20.0	
	Melrose	25	Hospital	1 in 10 miles	0	0.0	25	100.0	0	18.3	22.4	
	Waldo	20	Hospital	1 in 10 miles	0	0.0	20	100.0	0	15.6	18.3	
	Bronson	18	Hospital	1 in 10 miles	0	0.0	18	100.0	0	19.8	21.7	
	Hampton	16	Hospital	1 in 10 miles	0	0.0	16	100.0	0	14.9	18.7	
	Lake City	15	Hospital	1 in 10 miles	13	86.7	2	13.3	1	5.7	23.0	
	Bell	13	Hospital	1 in 10 miles	0	0.0	13	100.0	0	28.9	31.7	
	Brooker	13	Hospital	1 in 10 miles	6	46.2	7	53.8	0	10.5	15.8	
	Micanopy	13	Hospital	1 in 10 miles	4	30.8	9	69.2	0	11.4	14.3	
	Old Town	10	Hospital	1 in 10 miles	0	0.0	10	100.0	0	35.7	39.2	
	Chiefland	8	Hospital	1 in 10 miles	0	0.0	8	100.0	0	32.1	34.9	
	Citra	8	Hospital	1 in 10 miles	0	0.0	8	100.0	0	15.6	15.6	
	Interlachen	8	Hospital	1 in 10 miles	2	25.0	6	75.0	0	12.0	27.2	
	Jacksonville	8	Hospital	1 in 10 miles	8	100.0	0	0.0	8	3.9	6.0	
	Reddick	7	Hospital	1 in 10 miles	0	0.0	7	100.0	0	15.4	15.6	
	Branford	6	Hospital	1 in 10 miles	0	0.0	6	100.0	0	22.6	35.7	
	Lawtey	6	Hospital	1 in 10 miles	0	0.0	6	100.0	0	13.7	16.6	
	Palatka	6	Hospital	1 in 10 miles	5	83.3	1	16.7	1	3.5	24.9	
	Anthony	4	Hospital	1 in 10 miles	4	100.0	0	0.0	0	8.3	8.3	
	Crystal River	4	Hospital	1 in 10 miles	4	100.0	0	0.0	1	5.5	15.8	
	Palm Coast	4	Hospital	1 in 10 miles	4	100.0	0	0.0	2	3.0	5.9	
	Beverly Hills	3	Hospital	1 in 10 miles	3	100.0	0	0.0	0	7.9	11.7	
	Dunnellon	3	Hospital	1 in 10 miles	1	33.3	2	66.7	0	12.0	18.3	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Hospital (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Alachua	32615	142	Hospital	1 in 10 miles	0	59	41.5	8.5	12.0
	Anthony	32617	4	Hospital	1 in 10 miles	0	4	100.0	8.3	8.3
	Archer	32618	45	Hospital	1 in 10 miles	0	14	31.1	8.1	10.4
	Belleview	34420	2	Hospital	1 in 10 miles	0	1	50.0	9.6	9.7
	Beverly Hills	34465	3	Hospital	1 in 10 miles	0	3	100.0	7.9	11.7
	Bradenton	34209	1	Hospital	1 in 10 miles	1	1	100.0	0.9	4.3
	Brooker	32622	13	Hospital	1 in 10 miles	0	6	46.2	9.2	16.7
	Brooksville	34602	1	Hospital	1 in 10 miles	0	1	100.0	9.8	11.4
	Crystal River	34428	1	Hospital	1 in 10 miles	1	1	100.0	1.8	17.8
		34429	3	Hospital	1 in 10 miles	0	3	100.0	6.7	15.1
	Daytona Beach	32118	1	Hospital	1 in 10 miles	0	1	100.0	3.2	5.7
	Deland	32724	1	Hospital	1 in 10 miles	0	1	100.0	2.1	6.3
	Dunnellon	34433	1	Hospital	1 in 10 miles	0	1	100.0	7.3	14.9
	Eustis	32726	1	Hospital	1 in 10 miles	0	1	100.0	2.8	16.4
	Fernandina Beach	32034	1	Hospital	1 in 10 miles	1	1	100.0	2.2	14.0
	Fleming Island	32003	3	Hospital	1 in 10 miles	0	3	100.0	5.3	7.4
	Gainesville	32601	69	Hospital	1 in 10 miles	0	69	100.0	1.6	5.3
		32603	3	Hospital	1 in 10 miles	0	3	100.0	1.4	3.6
		32604	2	Hospital	1 in 10 miles	0	2	100.0	0.9	4.1
		32605	166	Hospital	1 in 10 miles	1	166	100.0	2.5	3.8
		32606	126	Hospital	1 in 10 miles	0	126	100.0	2.6	6.0
		32607	80	Hospital	1 in 10 miles	0	80	100.0	1.7	3.9
		32608	138	Hospital	1 in 10 miles	0	138	100.0	3.7	5.6
		32609	112	Hospital	1 in 10 miles	0	97	86.6	4.5	6.9
		32614	5	Hospital	1 in 10 miles	0	5	100.0	2.6	4.2
		32627	1	Hospital	1 in 10 miles	0	1	100.0	2.1	5.3
		32635	1	Hospital	1 in 10 miles	0	1	100.0	1.7	3.5
		32641	85	Hospital	1 in 10 miles	0	84	98.8	4.2	8.3
		32653	92	Hospital	1 in 10 miles	0	91	98.9	4.7	6.6
	Glen Saint Mary	32040	1	Hospital	1 in 10 miles	0	1	100.0	5.7	19.0
	Hernando	34442	1	Hospital	1 in 10 miles	0	1	100.0	6.5	14.2
	Hollister	32147	1	Hospital	1 in 10 miles	0	1	100.0	7.2	32.0
	Inglis	34449	1	Hospital	1 in 10 miles	0	1	100.0	8.8	25.8
	Interlachen	32148	8	Hospital	1 in 10 miles	0	2	25.0	9.5	29.7
	Inverness	34450	2	Hospital	1 in 10 miles	0	2	100.0	3.0	21.4
	Jacksonville	32204	1	Hospital	1 in 10 miles	1	1	100.0	0.8	1.2
		32205	1	Hospital	1 in 10 miles	0	1	100.0	1.8	3.4
		32211	1	Hospital	1 in 10 miles	0	1	100.0	3.1	4.8
		32225	3	Hospital	1 in 10 miles	0	3	100.0	6.6	7.8
		32226	1	Hospital	1 in 10 miles	0	1	100.0	5.0	9.8

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Hospital (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Jacksonville	32258	1	Hospital	1 in 10 miles	1	1	100.0	0.7	5.6
	Lake Butler	32054	32	Hospital	1 in 10 miles	1	24	75.0	3.8	21.3
	Lake City	32024	7	Hospital	1 in 10 miles	0	5	71.4	6.5	24.1
		32025	3	Hospital	1 in 10 miles	0	3	100.0	4.0	20.9
		32055	2	Hospital	1 in 10 miles	1	2	100.0	3.8	24.8
		32056	3	Hospital	1 in 10 miles	0	3	100.0	2.9	22.0
	Lake Placid	33852	1	Hospital	1 in 10 miles	1	1	100.0	1.7	12.2
	Macclenny	32063	1	Hospital	1 in 10 miles	1	1	100.0	0.8	21.2
	Merritt Island	32952	1	Hospital	1 in 10 miles	0	1	100.0	4.4	7.0
		32953	1	Hospital	1 in 10 miles	0	1	100.0	6.5	12.9
	Micanopy	32667	13	Hospital	1 in 10 miles	0	4	30.8	8.5	11.3
	Middleburg	32068	3	Hospital	1 in 10 miles	1	3	100.0	3.2	8.0
	Newberry	32669	108	Hospital	1 in 10 miles	0	46	42.6	6.0	10.2
	Niceville	32578	1	Hospital	1 in 10 miles	1	1	100.0	4.1	11.4
	Ocala	34470	8	Hospital	1 in 10 miles	0	8	100.0	3.0	3.1
		34471	10	Hospital	1 in 10 miles	2	10	100.0	1.3	1.3
		34472	3	Hospital	1 in 10 miles	0	3	100.0	6.8	6.8
		34474	3	Hospital	1 in 10 miles	1	3	100.0	1.9	2.9
		34475	4	Hospital	1 in 10 miles	0	4	100.0	2.9	2.9
		34476	12	Hospital	1 in 10 miles	0	12	100.0	4.6	8.4
		34479	2	Hospital	1 in 10 miles	0	2	100.0	4.8	4.8
		34480	5	Hospital	1 in 10 miles	0	5	100.0	4.9	4.9
		34481	1	Hospital	1 in 10 miles	0	1	100.0	5.7	10.0
		34482	7	Hospital	1 in 10 miles	0	7	100.0	7.2	8.5
	Ocoee	34761	1	Hospital	1 in 10 miles	0	1	100.0	4.7	4.9
	Orange Park	32065	2	Hospital	1 in 10 miles	0	2	100.0	2.9	4.1
		32073	1	Hospital	1 in 10 miles	1	1	100.0	0.2	6.9
	Palatka	32177	6	Hospital	1 in 10 miles	1	5	83.3	2.0	26.5
	Palm Bay	32905	1	Hospital	1 in 10 miles	0	1	100.0	2.1	4.1
	Palm Coast	32137	2	Hospital	1 in 10 miles	1	2	100.0	2.9	7.6
		32164	2	Hospital	1 in 10 miles	1	2	100.0	3.2	4.1
	Panama City	32405	2	Hospital	1 in 10 miles	0	2	100.0	3.1	37.1
	Pensacola	32526	1	Hospital	1 in 10 miles	0	1	100.0	5.4	6.5
	Perry	32347	2	Hospital	1 in 10 miles	1	2	100.0	1.5	25.4
		32348	1	Hospital	1 in 10 miles	0	1	100.0	8.1	33.8
	Pinellas Park	33782	1	Hospital	1 in 10 miles	0	1	100.0	2.4	3.8
	Punta Gorda	33950	1	Hospital	1 in 10 miles	1	1	100.0	1.9	5.9
	Raiford	32083	1	Hospital	1 in 10 miles	0	1	100.0	7.4	15.9
	Saint Augustine	32084	2	Hospital	1 in 10 miles	0	2	100.0	3.7	14.2
		32086	1	Hospital	1 in 10 miles	1	1	100.0	3.1	18.9

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Hospital (Florida)

Employees With Access											
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance		
			#	Group	Standard	#	#	%	1	2	
FL	Saint Johns	32259	3	Hospital	1 in 10 miles	1	3	100.0	3.4	5.2	
	Sanderson	32087	1	Hospital	1 in 10 miles	0	1	100.0	8.7	22.8	
	Sarasota	34240	1	Hospital	1 in 10 miles	0	1	100.0	4.6	4.8	
	Starke	32091	38	Hospital	1 in 10 miles	0	5	13.2	9.2	21.4	
	Sun City Center	33571	1	Hospital	1 in 10 miles	0	1	100.0	0.6	5.0	
	Tallahassee	32309	1	Hospital	1 in 10 miles	0	1	100.0	6.4	8.6	
	Tampa	33613	1	Hospital	1 in 10 miles	1	1	100.0	0.9	5.7	
		33647	1	Hospital	1 in 10 miles	0	1	100.0	4.8	5.1	
	Tarpon Springs	34689	1	Hospital	1 in 10 miles	1	1	100.0	1.0	7.1	
	Wesley Chapel	33543	2	Hospital	1 in 10 miles	0	2	100.0	3.3	3.8	
	Worthington Springs	32697	1	Hospital	1 in 10 miles	0	1	100.0	8.6	18.7	
	Grand Totals			1,434	Hospital	1 in 10 miles	25	1,174	81.9	3.8	7.3

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Hospital (Florida)

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Alachua	32615	142	Hospital	1 in 10 miles	0	83	58.5	12.0	15.3
		32616	4	Hospital	1 in 10 miles	0	4	100.0	10.4	13.9
	Archer	32618	45	Hospital	1 in 10 miles	0	31	68.9	13.5	15.6
	Bell	32619	13	Hospital	1 in 10 miles	0	13	100.0	28.9	31.7
	Bellevue	34420	2	Hospital	1 in 10 miles	0	1	50.0	10.7	10.7
	Branford	32008	6	Hospital	1 in 10 miles	0	6	100.0	22.6	35.7
	Bronson	32621	18	Hospital	1 in 10 miles	0	18	100.0	19.8	21.7
	Brooker	32622	13	Hospital	1 in 10 miles	0	7	53.8	11.6	15.1
	Chiefland	32626	8	Hospital	1 in 10 miles	0	8	100.0	32.1	34.9
	Citra	32113	8	Hospital	1 in 10 miles	0	8	100.0	15.6	15.6
	Cross City	32628	1	Hospital	1 in 10 miles	0	1	100.0	42.9	43.8
	Dunnellon	34431	2	Hospital	1 in 10 miles	0	2	100.0	14.3	20.0
	Earleton	32631	2	Hospital	1 in 10 miles	0	2	100.0	15.7	19.1
	Florahome	32140	1	Hospital	1 in 10 miles	0	1	100.0	13.8	24.5
	Fort Mc Coy	32134	1	Hospital	1 in 10 miles	0	1	100.0	20.5	20.5
	Fort White	32038	33	Hospital	1 in 10 miles	0	33	100.0	17.1	23.7
	Gainesville	32609	112	Hospital	1 in 10 miles	0	15	13.4	11.9	12.4
		32641	85	Hospital	1 in 10 miles	0	1	1.2	10.1	13.9
		32653	92	Hospital	1 in 10 miles	0	1	1.1	10.3	12.3
	Graham	32042	2	Hospital	1 in 10 miles	0	2	100.0	12.9	16.9
	Green Cove Springs	32043	1	Hospital	1 in 10 miles	0	1	100.0	10.5	11.4
	Greenville	32331	1	Hospital	1 in 10 miles	0	1	100.0	12.8	24.9
	Gulf Hammock	32639	2	Hospital	1 in 10 miles	0	2	100.0	21.6	32.7
	Hampton	32044	16	Hospital	1 in 10 miles	0	16	100.0	14.9	18.7
	Hawthorne	32640	55	Hospital	1 in 10 miles	0	55	100.0	16.5	20.4
	High Springs	32643	95	Hospital	1 in 10 miles	0	95	100.0	17.1	20.5
		32655	1	Hospital	1 in 10 miles	0	1	100.0	16.0	20.0
	Homosassa	34448	1	Hospital	1 in 10 miles	0	1	100.0	11.3	14.9
	Immokalee	34142	1	Hospital	1 in 10 miles	0	1	100.0	20.5	23.3
	Interlachen	32148	8	Hospital	1 in 10 miles	0	6	75.0	12.8	26.4
	Keystone Heights	32656	32	Hospital	1 in 10 miles	0	32	100.0	20.3	22.7
	Lake Butler	32054	32	Hospital	1 in 10 miles	1	8	25.0	12.0	16.9
	Lake City	32024	7	Hospital	1 in 10 miles	0	2	28.6	12.2	23.3
	Lawtey	32058	6	Hospital	1 in 10 miles	0	6	100.0	13.7	16.6
	Live Oak	32060	2	Hospital	1 in 10 miles	0	2	100.0	20.8	27.7
	Lulu	32061	1	Hospital	1 in 10 miles	0	1	100.0	11.7	12.5
	Mc Intosh	32664	1	Hospital	1 in 10 miles	0	1	100.0	15.1	18.5
	Melrose	32666	25	Hospital	1 in 10 miles	0	25	100.0	18.3	22.4
	Micanopy	32667	13	Hospital	1 in 10 miles	0	9	69.2	12.6	15.7
	Morrison	32668	1	Hospital	1 in 10 miles	0	1	100.0	19.1	21.5

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Hospital (Florida)

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Newberry	32669	108	Hospital	1 in 10 miles	0	62	57.4	12.4	16.5
	O Brien	32071	2	Hospital	1 in 10 miles	0	2	100.0	18.4	36.8
	Old Town	32680	10	Hospital	1 in 10 miles	0	10	100.0	35.7	39.2
	Oxford	34484	1	Hospital	1 in 10 miles	0	1	100.0	16.1	16.8
	Palatka	32177	6	Hospital	1 in 10 miles	1	1	16.7	11.1	17.0
	Reddick	32686	7	Hospital	1 in 10 miles	0	7	100.0	15.4	15.6
	Silver Springs	34488	1	Hospital	1 in 10 miles	0	1	100.0	12.2	12.3
	Starke	32091	38	Hospital	1 in 10 miles	0	33	86.8	13.7	19.9
	Steinhatchee	32359	3	Hospital	1 in 10 miles	0	3	100.0	34.7	54.2
	The Villages	32162	1	Hospital	1 in 10 miles	0	1	100.0	18.4	19.8
	Trenton	32693	43	Hospital	1 in 10 miles	0	43	100.0	24.4	28.3
	Waldo	32694	20	Hospital	1 in 10 miles	0	20	100.0	15.6	18.3
	White Springs	32096	1	Hospital	1 in 10 miles	0	1	100.0	11.4	33.6
	Williston	32696	31	Hospital	1 in 10 miles	0	31	100.0	19.4	20.0
	Grand Totals			1,163	Hospital	1 in 10 miles	2	720	61.9	16.7

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Florida Employees (Florida)

Provider Group
PCP with Pediatricians (Florida)

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Florida Employees	1,894	PCP with Pediatrici...	2 in 10 miles	1,853	97.8	41	2.2	36,573	16,937	7,710	2.2	2.6

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹		Average Distance	
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	PCP with Pediatricians	2 in 10 miles	880	100.0	0	0.0	1,146	1.1	1.2	
	Alachua	146	PCP with Pediatricians	2 in 10 miles	146	100.0	0	0.0	8	2.7	2.9	
	Newberry	108	PCP with Pediatricians	2 in 10 miles	108	100.0	0	0.0	19	1.5	3.0	
	High Springs	96	PCP with Pediatricians	2 in 10 miles	96	100.0	0	0.0	12	2.7	2.7	
	Hawthorne	55	PCP with Pediatricians	2 in 10 miles	55	100.0	0	0.0	6	3.7	4.2	
	Ocala	55	PCP with Pediatricians	2 in 10 miles	55	100.0	0	0.0	475	1.5	1.7	
	Archer	45	PCP with Pediatricians	2 in 10 miles	33	73.3	12	26.7	0	7.3	7.4	
	Trenton	43	PCP with Pediatricians	2 in 10 miles	43	100.0	0	0.0	10	3.3	4.0	
	Starke	38	PCP with Pediatricians	2 in 10 miles	38	100.0	0	0.0	33	2.4	2.4	
	Fort White	33	PCP with Pediatricians	2 in 10 miles	26	78.8	7	21.2	1	3.7	7.9	
	Keystone Heights	32	PCP with Pediatricians	2 in 10 miles	32	100.0	0	0.0	5	2.3	2.5	
	Lake Butler	32	PCP with Pediatricians	2 in 10 miles	27	84.4	5	15.6	15	5.1	5.1	
	Williston	31	PCP with Pediatricians	2 in 10 miles	31	100.0	0	0.0	30	3.2	3.3	
	Melrose	25	PCP with Pediatricians	2 in 10 miles	25	100.0	0	0.0	2	2.3	4.7	
	Waldo	20	PCP with Pediatricians	2 in 10 miles	20	100.0	0	0.0	0	6.5	6.6	
	Bronson	18	PCP with Pediatricians	2 in 10 miles	10	55.6	8	44.4	0	10.0	10.2	
	Hampton	16	PCP with Pediatricians	2 in 10 miles	16	100.0	0	0.0	0	6.1	6.1	
	Lake City	15	PCP with Pediatricians	2 in 10 miles	13	86.7	2	13.3	113	3.3	3.7	
	Bell	13	PCP with Pediatricians	2 in 10 miles	13	100.0	0	0.0	23	3.0	3.5	
	Brooker	13	PCP with Pediatricians	2 in 10 miles	13	100.0	0	0.0	2	2.5	2.5	
	Micanopy	13	PCP with Pediatricians	2 in 10 miles	13	100.0	0	0.0	0	7.4	7.5	
	Old Town	10	PCP with Pediatricians	2 in 10 miles	10	100.0	0	0.0	7	3.4	4.3	
	Chiefland	8	PCP with Pediatricians	2 in 10 miles	8	100.0	0	0.0	27	3.6	3.8	
	Citra	8	PCP with Pediatricians	2 in 10 miles	8	100.0	0	0.0	1	2.5	5.2	
	Interlachen	8	PCP with Pediatricians	2 in 10 miles	8	100.0	0	0.0	7	1.9	2.1	
	Jacksonville	8	PCP with Pediatricians	2 in 10 miles	8	100.0	0	0.0	1,632	0.8	0.8	
	Reddick	7	PCP with Pediatricians	2 in 10 miles	7	100.0	0	0.0	7	3.6	3.6	
	Branford	6	PCP with Pediatricians	2 in 10 miles	6	100.0	0	0.0	15	2.3	2.3	
	Lawtey	6	PCP with Pediatricians	2 in 10 miles	6	100.0	0	0.0	0	5.3	5.3	
	Palatka	6	PCP with Pediatricians	2 in 10 miles	6	100.0	0	0.0	48	1.8	1.9	
	Anthony	4	PCP with Pediatricians	2 in 10 miles	4	100.0	0	0.0	0	5.9	5.9	
	Crystal River	4	PCP with Pediatricians	2 in 10 miles	4	100.0	0	0.0	59	1.3	1.3	
	Palm Coast	4	PCP with Pediatricians	2 in 10 miles	4	100.0	0	0.0	110	2.1	2.2	
	Beverly Hills	3	PCP with Pediatricians	2 in 10 miles	3	100.0	0	0.0	16	1.1	1.1	
	Dunnellon	3	PCP with Pediatricians	2 in 10 miles	3	100.0	0	0.0	29	4.5	4.8	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 PCP with Pediatricians (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Alachua	32615	142	PCP with Pediatricians	2 in 10 miles	8	142	100.0	2.8	3.0
		32616	4	PCP with Pediatricians	2 in 10 miles	0	4	100.0	0.4	0.5
	Anthony	32617	4	PCP with Pediatricians	2 in 10 miles	0	4	100.0	5.9	5.9
	Archer	32618	45	PCP with Pediatricians	2 in 10 miles	0	33	73.3	6.1	6.2
	Bell	32619	13	PCP with Pediatricians	2 in 10 miles	23	13	100.0	3.0	3.5
	Bellevue	34420	2	PCP with Pediatricians	2 in 10 miles	19	2	100.0	0.7	1.6
	Beverly Hills	34465	3	PCP with Pediatricians	2 in 10 miles	16	3	100.0	1.1	1.1
	Bradenton	34209	1	PCP with Pediatricians	2 in 10 miles	61	1	100.0	0.4	0.4
	Branford	32008	6	PCP with Pediatricians	2 in 10 miles	15	6	100.0	2.3	2.3
	Bronson	32621	18	PCP with Pediatricians	2 in 10 miles	0	10	55.6	9.0	9.0
	Brooker	32622	13	PCP with Pediatricians	2 in 10 miles	2	13	100.0	2.5	2.5
	Brooksville	34602	1	PCP with Pediatricians	2 in 10 miles	2	1	100.0	4.1	4.3
	Chiefland	32626	8	PCP with Pediatricians	2 in 10 miles	27	8	100.0	3.6	3.8
	Citra	32113	8	PCP with Pediatricians	2 in 10 miles	1	8	100.0	2.5	5.2
	Cross City	32628	1	PCP with Pediatricians	2 in 10 miles	7	1	100.0	0.2	0.6
	Crystal River	34428	1	PCP with Pediatricians	2 in 10 miles	4	1	100.0	1.8	1.8
		34429	3	PCP with Pediatricians	2 in 10 miles	55	3	100.0	1.1	1.1
	Daytona Beach	32118	1	PCP with Pediatricians	2 in 10 miles	2	1	100.0	1.4	1.6
	Deland	32724	1	PCP with Pediatricians	2 in 10 miles	13	1	100.0	1.2	1.2
	Dunnellon	34431	2	PCP with Pediatricians	2 in 10 miles	2	2	100.0	5.2	5.2
		34433	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	3.1	4.1
	Earleton	32631	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	4.2	5.7
	Eustis	32726	1	PCP with Pediatricians	2 in 10 miles	10	1	100.0	0.1	0.1
	Fernandina Beach	32034	1	PCP with Pediatricians	2 in 10 miles	62	1	100.0	0.9	0.9
	Fleming Island	32003	3	PCP with Pediatricians	2 in 10 miles	92	3	100.0	0.6	0.6
	Florahome	32140	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	3.0	8.8
	Fort Mc Coy	32134	1	PCP with Pediatricians	2 in 10 miles	3	1	100.0	4.9	5.0
	Fort White	32038	33	PCP with Pediatricians	2 in 10 miles	1	26	78.8	3.2	7.1
	Gainesville	32601	69	PCP with Pediatricians	2 in 10 miles	16	69	100.0	0.4	0.4
		32603	3	PCP with Pediatricians	2 in 10 miles	0	3	100.0	0.5	0.5
		32604	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	0.2	0.2
		32605	166	PCP with Pediatricians	2 in 10 miles	139	166	100.0	1.0	1.0
		32606	126	PCP with Pediatricians	2 in 10 miles	107	126	100.0	0.7	0.8
		32607	80	PCP with Pediatricians	2 in 10 miles	100	80	100.0	0.5	0.5
		32608	138	PCP with Pediatricians	2 in 10 miles	229	138	100.0	0.8	0.9
		32609	112	PCP with Pediatricians	2 in 10 miles	14	112	100.0	2.1	2.4
		32614	5	PCP with Pediatricians	2 in 10 miles	0	5	100.0	0.2	0.2
		32627	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	0.2	0.2
		32635	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	0.1	0.1
		32641	85	PCP with Pediatricians	2 in 10 miles	10	85	100.0	1.9	1.9

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 PCP with Pediatricians (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Gainesville	32653	92	PCP with Pediatricians	2 in 10 miles	10	92	100.0	1.5	1.7
	Glen Saint Mary	32040	1	PCP with Pediatricians	2 in 10 miles	1	1	100.0	3.6	5.2
	Graham	32042	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	7.2	7.2
	Green Cove Springs	32043	1	PCP with Pediatricians	2 in 10 miles	20	1	100.0	1.3	1.3
	Hampton	32044	16	PCP with Pediatricians	2 in 10 miles	0	16	100.0	6.1	6.1
	Hawthorne	32640	55	PCP with Pediatricians	2 in 10 miles	6	55	100.0	3.7	4.2
	Hernando	34442	1	PCP with Pediatricians	2 in 10 miles	11	1	100.0	1.4	1.4
	High Springs	32643	95	PCP with Pediatricians	2 in 10 miles	12	95	100.0	2.7	2.8
		32655	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	0.1	0.1
	Hollister	32147	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	4.1	4.5
	Homosassa	34448	1	PCP with Pediatricians	2 in 10 miles	1	1	100.0	0.4	0.8
	Immokalee	34142	1	PCP with Pediatricians	2 in 10 miles	48	1	100.0	0.7	0.8
	Inglis	34449	1	PCP with Pediatricians	2 in 10 miles	2	1	100.0	3.1	3.1
	Interlachen	32148	8	PCP with Pediatricians	2 in 10 miles	7	8	100.0	1.9	2.1
	Inverness	34450	2	PCP with Pediatricians	2 in 10 miles	4	2	100.0	2.7	2.7
	Jacksonville	32204	1	PCP with Pediatricians	2 in 10 miles	169	1	100.0	0.3	0.3
		32205	1	PCP with Pediatricians	2 in 10 miles	18	1	100.0	1.0	1.0
		32211	1	PCP with Pediatricians	2 in 10 miles	13	1	100.0	1.0	1.1
		32225	3	PCP with Pediatricians	2 in 10 miles	40	3	100.0	0.8	0.8
		32226	1	PCP with Pediatricians	2 in 10 miles	7	1	100.0	1.2	1.2
		32258	1	PCP with Pediatricians	2 in 10 miles	106	1	100.0	0.4	0.6
	Keystone Heights	32656	32	PCP with Pediatricians	2 in 10 miles	5	32	100.0	2.3	2.5
	Lake Butler	32054	32	PCP with Pediatricians	2 in 10 miles	15	27	84.4	4.0	4.0
	Lake City	32024	7	PCP with Pediatricians	2 in 10 miles	14	5	71.4	5.1	5.1
		32025	3	PCP with Pediatricians	2 in 10 miles	29	3	100.0	1.8	1.8
		32055	2	PCP with Pediatricians	2 in 10 miles	70	2	100.0	1.7	1.7
		32056	3	PCP with Pediatricians	2 in 10 miles	0	3	100.0	0.1	0.1
	Lake Placid	33852	1	PCP with Pediatricians	2 in 10 miles	34	1	100.0	0.1	0.3
	Lawtey	32058	6	PCP with Pediatricians	2 in 10 miles	0	6	100.0	5.3	5.3
	Live Oak	32060	2	PCP with Pediatricians	2 in 10 miles	1	2	100.0	5.0	6.7
	Lulu	32061	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	9.4	9.4
	Macclenny	32063	1	PCP with Pediatricians	2 in 10 miles	15	1	100.0	0.5	0.5
	Mc Intosh	32664	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	5.6	5.6
	Melrose	32666	25	PCP with Pediatricians	2 in 10 miles	2	25	100.0	2.3	4.7
	Merritt Island	32952	1	PCP with Pediatricians	2 in 10 miles	20	1	100.0	1.8	1.9
		32953	1	PCP with Pediatricians	2 in 10 miles	24	1	100.0	1.1	1.1
	Micanopy	32667	13	PCP with Pediatricians	2 in 10 miles	0	13	100.0	7.4	7.5
	Middleburg	32068	3	PCP with Pediatricians	2 in 10 miles	60	3	100.0	1.2	1.2
	Morriston	32668	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	7.1	7.2
	Newberry	32669	108	PCP with Pediatricians	2 in 10 miles	19	108	100.0	1.5	3.0

Access Detail By Zip Code

July 5, 2024

Access Analysis
Custom

Employee / Provider Groups
All Florida Employees (Florida)
PCP with Pediatricians (Florida)

Employees With Access											
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance		
			#	Group	Standard	#	#	%	1	2	
FL	Niceville	32578	1	PCP with Pediatricians	2 in 10 miles	20	1	100.0	0.4	0.4	
	O Brien	32071	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	5.4	5.4	
	Ocala	34470	8	PCP with Pediatricians	2 in 10 miles	17	8	100.0	0.7	0.7	
		34471	10	PCP with Pediatricians	2 in 10 miles	257	10	100.0	0.5	0.6	
		34472	3	PCP with Pediatricians	2 in 10 miles	13	3	100.0	1.3	1.3	
		34474	3	PCP with Pediatricians	2 in 10 miles	75	3	100.0	0.5	0.5	
		34475	4	PCP with Pediatricians	2 in 10 miles	7	4	100.0	1.6	1.9	
		34476	12	PCP with Pediatricians	2 in 10 miles	30	12	100.0	1.0	1.3	
		34479	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	3.2	3.2	
		34480	5	PCP with Pediatricians	2 in 10 miles	0	5	100.0	2.1	2.1	
		34481	1	PCP with Pediatricians	2 in 10 miles	63	1	100.0	1.6	1.6	
		34482	7	PCP with Pediatricians	2 in 10 miles	2	7	100.0	4.3	4.6	
		Ocoee	34761	1	PCP with Pediatricians	2 in 10 miles	84	1	100.0	0.4	1.6
		Old Town	32680	10	PCP with Pediatricians	2 in 10 miles	7	10	100.0	3.4	4.3
		Orange Park	32065	2	PCP with Pediatricians	2 in 10 miles	14	2	100.0	1.1	1.2
			32073	1	PCP with Pediatricians	2 in 10 miles	129	1	100.0	0.0	0.0
		Oxford	34484	1	PCP with Pediatricians	2 in 10 miles	5	1	100.0	0.3	2.2
		Palatka	32177	6	PCP with Pediatricians	2 in 10 miles	48	6	100.0	1.8	1.9
		Palm Bay	32905	1	PCP with Pediatricians	2 in 10 miles	73	1	100.0	0.4	0.6
		Palm Coast	32137	2	PCP with Pediatricians	2 in 10 miles	48	2	100.0	1.8	1.9
			32164	2	PCP with Pediatricians	2 in 10 miles	62	2	100.0	2.5	2.5
		Panama City	32405	2	PCP with Pediatricians	2 in 10 miles	120	2	100.0	0.3	0.3
		Pensacola	32526	1	PCP with Pediatricians	2 in 10 miles	5	1	100.0	0.8	1.1
		Perry	32347	2	PCP with Pediatricians	2 in 10 miles	7	2	100.0	1.1	1.1
			32348	1	PCP with Pediatricians	2 in 10 miles	2	1	100.0	7.0	7.1
		Pinellas Park	33782	1	PCP with Pediatricians	2 in 10 miles	11	1	100.0	0.7	0.7
		Punta Gorda	33950	1	PCP with Pediatricians	2 in 10 miles	40	1	100.0	0.3	1.1
		Raiford	32083	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	7.4	7.4
		Reddick	32686	7	PCP with Pediatricians	2 in 10 miles	7	7	100.0	3.6	3.6
		Saint Augustine	32084	2	PCP with Pediatricians	2 in 10 miles	5	2	100.0	2.6	2.8
			32086	1	PCP with Pediatricians	2 in 10 miles	98	1	100.0	0.3	0.3
		Saint Johns	32259	3	PCP with Pediatricians	2 in 10 miles	67	3	100.0	1.2	1.2
		Sanderson	32087	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	7.3	8.7
		Sarasota	34240	1	PCP with Pediatricians	2 in 10 miles	22	1	100.0	2.3	3.2
		Silver Springs	34488	1	PCP with Pediatricians	2 in 10 miles	6	1	100.0	1.2	1.2
		Starke	32091	38	PCP with Pediatricians	2 in 10 miles	33	38	100.0	2.4	2.4
		Sun City Center	33571	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	0.0	0.0
		Tallahassee	32309	1	PCP with Pediatricians	2 in 10 miles	14	1	100.0	3.2	3.2
		Tampa	33613	1	PCP with Pediatricians	2 in 10 miles	142	1	100.0	0.2	0.4
			33647	1	PCP with Pediatricians	2 in 10 miles	67	1	100.0	0.1	0.2

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 PCP with Pediatricians (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Tarpon Springs	34689	1	PCP with Pediatricians	2 in 10 miles	29	1	100.0	0.5	0.6
	The Villages	32162	1	PCP with Pediatricians	2 in 10 miles	73	1	100.0	0.7	0.7
	Trenton	32693	43	PCP with Pediatricians	2 in 10 miles	10	43	100.0	3.3	4.0
	Waldo	32694	20	PCP with Pediatricians	2 in 10 miles	0	20	100.0	6.5	6.6
	Wesley Chapel	33543	2	PCP with Pediatricians	2 in 10 miles	27	2	100.0	2.1	2.1
	Williston	32696	31	PCP with Pediatricians	2 in 10 miles	30	31	100.0	3.2	3.3
	Worthington Springs	32697	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	6.5	6.5
	Grand Totals			1,887	PCP with Pediatricians	2 in 10 miles	3,592	1,853	98.2	2.1

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 PCP with Pediatricians (Florida)

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Archer	32618	45	PCP with Pediatricians	2 in 10 miles	0	12	26.7	10.7	10.8
	Bronson	32621	18	PCP with Pediatricians	2 in 10 miles	0	8	44.4	11.3	11.7
	Fort White	32038	33	PCP with Pediatricians	2 in 10 miles	1	7	21.2	5.4	10.9
	Greenville	32331	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	12.8	12.8
	Gulf Hammock	32639	2	PCP with Pediatricians	2 in 10 miles	0	2	100.0	15.5	15.5
	Lake Butler	32054	32	PCP with Pediatricians	2 in 10 miles	15	5	15.6	10.9	11.0
	Lake City	32024	7	PCP with Pediatricians	2 in 10 miles	14	2	28.6	7.8	10.7
	Steinhatchee	32359	3	PCP with Pediatricians	2 in 10 miles	1	3	100.0	1.5	14.1
	White Springs	32096	1	PCP with Pediatricians	2 in 10 miles	0	1	100.0	10.5	10.6
	Grand Totals			142	PCP with Pediatricians	2 in 10 miles	31	41	28.9	9.4

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Florida Employees (Florida)

Provider Group
OB-GYN (Florida)

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Florida Employees	1,894	OB-GYN	2 in 10 miles	1,249	65.9	645	34.1	5,085	2,030	1,279	6.8	7.5

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹		Average Distance	
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	OB-GYN	2 in 10 miles	879	99.9	1	0.1	151	1.9	2.3	
	Alachua	146	OB-GYN	2 in 10 miles	106	72.6	40	27.4	0	8.7	8.8	
	Newberry	108	OB-GYN	2 in 10 miles	56	51.9	52	48.1	0	8.0	8.7	
	High Springs	96	OB-GYN	2 in 10 miles	1	1.0	95	99.0	0	14.1	14.5	
	Hawthorne	55	OB-GYN	2 in 10 miles	0	0.0	55	100.0	0	15.8	16.2	
	Ocala	55	OB-GYN	2 in 10 miles	55	100.0	0	0.0	49	2.3	2.9	
	Archer	45	OB-GYN	2 in 10 miles	14	31.1	31	68.9	0	9.2	11.6	
	Trenton	43	OB-GYN	2 in 10 miles	29	67.4	14	32.6	1	4.9	9.5	
	Starke	38	OB-GYN	2 in 10 miles	0	0.0	38	100.0	0	19.6	19.6	
	Fort White	33	OB-GYN	2 in 10 miles	0	0.0	33	100.0	0	13.3	16.6	
	Keystone Heights	32	OB-GYN	2 in 10 miles	0	0.0	32	100.0	0	19.0	19.0	
	Lake Butler	32	OB-GYN	2 in 10 miles	0	0.0	32	100.0	0	19.7	19.7	
	Williston	31	OB-GYN	2 in 10 miles	0	0.0	31	100.0	0	17.1	17.9	
	Melrose	25	OB-GYN	2 in 10 miles	0	0.0	25	100.0	0	17.4	17.8	
	Waldo	20	OB-GYN	2 in 10 miles	0	0.0	20	100.0	0	13.1	13.1	
	Bronson	18	OB-GYN	2 in 10 miles	0	0.0	18	100.0	0	15.2	15.9	
	Hampton	16	OB-GYN	2 in 10 miles	0	0.0	16	100.0	0	15.4	15.4	
	Lake City	15	OB-GYN	2 in 10 miles	13	86.7	2	13.3	16	5.5	5.5	
	Bell	13	OB-GYN	2 in 10 miles	0	0.0	13	100.0	0	10.0	14.6	
	Brooker	13	OB-GYN	2 in 10 miles	0	0.0	13	100.0	0	12.7	12.7	
	Micanopy	13	OB-GYN	2 in 10 miles	6	46.2	7	53.8	0	9.8	9.9	
	Old Town	10	OB-GYN	2 in 10 miles	1	10.0	9	90.0	0	12.0	13.8	
	Chiefland	8	OB-GYN	2 in 10 miles	8	100.0	0	0.0	2	3.8	4.7	
	Citra	8	OB-GYN	2 in 10 miles	0	0.0	8	100.0	0	13.4	14.6	
	Interlachen	8	OB-GYN	2 in 10 miles	2	25.0	6	75.0	0	11.7	12.5	
	Jacksonville	8	OB-GYN	2 in 10 miles	8	100.0	0	0.0	267	2.0	3.5	
	Reddick	7	OB-GYN	2 in 10 miles	0	0.0	7	100.0	0	14.3	14.6	
	Branford	6	OB-GYN	2 in 10 miles	0	0.0	6	100.0	1	2.9	19.8	
	Lawtey	6	OB-GYN	2 in 10 miles	0	0.0	6	100.0	0	16.8	16.8	
	Palatka	6	OB-GYN	2 in 10 miles	5	83.3	1	16.7	3	2.8	3.5	
	Anthony	4	OB-GYN	2 in 10 miles	4	100.0	0	0.0	0	5.9	7.0	
	Crystal River	4	OB-GYN	2 in 10 miles	4	100.0	0	0.0	10	1.8	2.6	
	Palm Coast	4	OB-GYN	2 in 10 miles	4	100.0	0	0.0	7	2.8	2.8	
	Beverly Hills	3	OB-GYN	2 in 10 miles	3	100.0	0	0.0	0	3.0	3.0	
	Dunnellon	3	OB-GYN	2 in 10 miles	1	33.3	2	66.7	1	7.6	12.5	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 OB-GYN (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Alachua	32615	142	OB-GYN	2 in 10 miles	0	102	71.8	7.2	7.3
		32616	4	OB-GYN	2 in 10 miles	0	4	100.0	7.8	7.9
	Anthony	32617	4	OB-GYN	2 in 10 miles	0	4	100.0	5.9	7.0
	Archer	32618	45	OB-GYN	2 in 10 miles	0	14	31.1	5.7	7.9
	Belleview	34420	2	OB-GYN	2 in 10 miles	1	2	100.0	1.6	8.2
	Beverly Hills	34465	3	OB-GYN	2 in 10 miles	0	3	100.0	3.0	3.0
	Bradenton	34209	1	OB-GYN	2 in 10 miles	7	1	100.0	0.6	0.9
	Chiefland	32626	8	OB-GYN	2 in 10 miles	2	8	100.0	3.8	4.7
	Crystal River	34428	1	OB-GYN	2 in 10 miles	1	1	100.0	2.7	4.2
		34429	3	OB-GYN	2 in 10 miles	9	3	100.0	1.5	2.0
	Daytona Beach	32118	1	OB-GYN	2 in 10 miles	0	1	100.0	3.2	3.2
	Deland	32724	1	OB-GYN	2 in 10 miles	0	1	100.0	2.1	2.1
	Dunnellon	34433	1	OB-GYN	2 in 10 miles	0	1	100.0	6.5	6.7
	Eustis	32726	1	OB-GYN	2 in 10 miles	0	1	100.0	2.4	2.4
	Fernandina Beach	32034	1	OB-GYN	2 in 10 miles	1	1	100.0	2.1	4.8
	Fleming Island	32003	3	OB-GYN	2 in 10 miles	8	3	100.0	0.9	0.9
	Gainesville	32601	69	OB-GYN	2 in 10 miles	4	69	100.0	0.9	1.1
		32603	3	OB-GYN	2 in 10 miles	0	3	100.0	0.8	0.8
		32604	2	OB-GYN	2 in 10 miles	0	2	100.0	0.6	0.6
		32605	166	OB-GYN	2 in 10 miles	36	166	100.0	1.2	1.2
		32606	126	OB-GYN	2 in 10 miles	26	126	100.0	1.6	1.7
		32607	80	OB-GYN	2 in 10 miles	17	80	100.0	1.0	1.3
		32608	138	OB-GYN	2 in 10 miles	6	138	100.0	1.9	3.4
		32609	112	OB-GYN	2 in 10 miles	9	111	99.1	2.8	3.2
		32614	5	OB-GYN	2 in 10 miles	0	5	100.0	1.6	1.9
		32627	1	OB-GYN	2 in 10 miles	0	1	100.0	0.2	0.9
		32635	1	OB-GYN	2 in 10 miles	0	1	100.0	1.1	1.1
		32641	85	OB-GYN	2 in 10 miles	0	85	100.0	3.4	3.9
	32653	92	OB-GYN	2 in 10 miles	0	92	100.0	2.8	2.8	
	Green Cove Springs	32043	1	OB-GYN	2 in 10 miles	0	1	100.0	5.4	5.4
	Hernando	34442	1	OB-GYN	2 in 10 miles	2	1	100.0	2.4	2.4
	High Springs	32643	95	OB-GYN	2 in 10 miles	0	1	1.1	9.7	9.9
Hollister	32147	1	OB-GYN	2 in 10 miles	0	1	100.0	6.9	7.7	
Homosassa	34448	1	OB-GYN	2 in 10 miles	4	1	100.0	1.3	1.3	
Immokalee	34142	1	OB-GYN	2 in 10 miles	6	1	100.0	2.5	2.5	
Interlachen	32148	8	OB-GYN	2 in 10 miles	0	2	25.0	9.3	10.0	
Inverness	34450	2	OB-GYN	2 in 10 miles	2	2	100.0	2.9	3.0	
Jacksonville	32204	1	OB-GYN	2 in 10 miles	12	1	100.0	0.8	0.8	
	32205	1	OB-GYN	2 in 10 miles	0	1	100.0	1.2	1.2	
	32211	1	OB-GYN	2 in 10 miles	0	1	100.0	2.8	3.2	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 OB-GYN (Florida)

Employees With Access											
State Abbr	City	Zip Code	Employee		Provider		Counts			Average Distance	
			#	Group	Standard	#	#	%	1	2	
FL	Jacksonville	32225	3	OB-GYN	2 in 10 miles	1	3	100.0	1.9	5.7	
		32226	1	OB-GYN	2 in 10 miles	0	1	100.0	5.0	5.0	
		32258	1	OB-GYN	2 in 10 miles	29	1	100.0	0.5	0.6	
	Lake City	32024	7	OB-GYN	2 in 10 miles	0	5	71.4	6.0	6.1	
		32025	3	OB-GYN	2 in 10 miles	0	3	100.0	3.9	3.9	
		32055	2	OB-GYN	2 in 10 miles	16	2	100.0	3.9	3.9	
		32056	3	OB-GYN	2 in 10 miles	0	3	100.0	2.9	2.9	
	Merritt Island	32952	1	OB-GYN	2 in 10 miles	8	1	100.0	2.2	2.3	
		32953	1	OB-GYN	2 in 10 miles	7	1	100.0	3.9	3.9	
	Micanopy	32667	13	OB-GYN	2 in 10 miles	0	6	46.2	7.5	7.6	
	Middleburg	32068	3	OB-GYN	2 in 10 miles	5	3	100.0	3.1	3.1	
	Newberry	32669	108	OB-GYN	2 in 10 miles	0	56	51.9	5.6	6.0	
	Niceville	32578	1	OB-GYN	2 in 10 miles	3	1	100.0	1.6	1.6	
	Ocala	34470	8	OB-GYN	2 in 10 miles	2	8	100.0	0.9	1.7	
		34471	10	OB-GYN	2 in 10 miles	27	10	100.0	0.6	0.9	
		34472	3	OB-GYN	2 in 10 miles	0	3	100.0	4.1	5.2	
		34474	3	OB-GYN	2 in 10 miles	13	3	100.0	0.6	1.2	
		34475	4	OB-GYN	2 in 10 miles	0	4	100.0	2.3	2.6	
		34476	12	OB-GYN	2 in 10 miles	1	12	100.0	1.9	2.7	
		34479	2	OB-GYN	2 in 10 miles	0	2	100.0	3.6	3.8	
		34480	5	OB-GYN	2 in 10 miles	0	5	100.0	2.7	3.6	
		34481	1	OB-GYN	2 in 10 miles	5	1	100.0	3.2	3.3	
		34482	7	OB-GYN	2 in 10 miles	0	7	100.0	6.4	6.9	
		Ocoee	34761	1	OB-GYN	2 in 10 miles	7	1	100.0	1.6	1.6
		Old Town	32680	10	OB-GYN	2 in 10 miles	0	1	10.0	9.9	10.0
		Orange Park	32065	2	OB-GYN	2 in 10 miles	0	2	100.0	2.9	2.9
			32073	1	OB-GYN	2 in 10 miles	12	1	100.0	0.0	0.0
	Oxford	34484	1	OB-GYN	2 in 10 miles	0	1	100.0	3.4	3.4	
	Palatka	32177	6	OB-GYN	2 in 10 miles	3	5	83.3	1.4	2.1	
	Palm Bay	32905	1	OB-GYN	2 in 10 miles	1	1	100.0	1.9	2.1	
	Palm Coast	32137	2	OB-GYN	2 in 10 miles	5	2	100.0	2.3	2.4	
		32164	2	OB-GYN	2 in 10 miles	2	2	100.0	3.2	3.2	
	Panama City	32405	2	OB-GYN	2 in 10 miles	15	2	100.0	0.9	0.9	
	Pensacola	32526	1	OB-GYN	2 in 10 miles	0	1	100.0	3.8	5.4	
	Pinellas Park	33782	1	OB-GYN	2 in 10 miles	0	1	100.0	1.6	1.6	
	Punta Gorda	33950	1	OB-GYN	2 in 10 miles	2	1	100.0	1.9	1.9	
	Saint Augustine	32084	2	OB-GYN	2 in 10 miles	0	2	100.0	3.7	3.7	
		32086	1	OB-GYN	2 in 10 miles	7	1	100.0	1.3	2.7	
	Saint Johns	32259	3	OB-GYN	2 in 10 miles	1	3	100.0	3.0	4.1	
	Sarasota	34240	1	OB-GYN	2 in 10 miles	1	1	100.0	3.3	4.4	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 OB-GYN (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Silver Springs	34488	1	OB-GYN	2 in 10 miles	0	1	100.0	7.9	10.0
	Sun City Center	33571	1	OB-GYN	2 in 10 miles	0	1	100.0	1.7	1.7
	Tallahassee	32309	1	OB-GYN	2 in 10 miles	0	1	100.0	3.4	6.0
	Tampa	33613	1	OB-GYN	2 in 10 miles	30	1	100.0	0.6	0.7
						36	1	100.0	0.6	0.6
	Tarpon Springs	34689	1	OB-GYN	2 in 10 miles	2	1	100.0	0.8	0.8
	The Villages	32162	1	OB-GYN	2 in 10 miles	0	1	100.0	2.9	2.9
	Trenton	32693	43	OB-GYN	2 in 10 miles	1	29	67.4	3.6	7.2
	Wesley Chapel	33543	2	OB-GYN	2 in 10 miles	8	2	100.0	2.9	3.4
	Grand Totals			1,506	OB-GYN	2 in 10 miles	403	1,249	82.9	2.8

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 OB-GYN (Florida)

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Alachua	32615	142	OB-GYN	2 in 10 miles	0	40	28.2	12.6	12.7
	Archer	32618	45	OB-GYN	2 in 10 miles	0	31	68.9	10.9	13.3
	Bell	32619	13	OB-GYN	2 in 10 miles	0	13	100.0	10.0	14.6
	Branford	32008	6	OB-GYN	2 in 10 miles	1	6	100.0	2.9	19.8
	Bronson	32621	18	OB-GYN	2 in 10 miles	0	18	100.0	15.2	15.9
	Brooker	32622	13	OB-GYN	2 in 10 miles	0	13	100.0	12.7	12.7
	Brooksville	34602	1	OB-GYN	2 in 10 miles	0	1	100.0	10.8	10.8
	Citra	32113	8	OB-GYN	2 in 10 miles	0	8	100.0	13.4	14.6
	Cross City	32628	1	OB-GYN	2 in 10 miles	0	1	100.0	17.9	18.5
	Dunnellon	34431	2	OB-GYN	2 in 10 miles	0	2	100.0	8.1	15.5
	Earleton	32631	2	OB-GYN	2 in 10 miles	0	2	100.0	13.9	14.0
	Florahome	32140	1	OB-GYN	2 in 10 miles	0	1	100.0	13.6	13.9
	Fort Mc Coy	32134	1	OB-GYN	2 in 10 miles	0	1	100.0	15.8	18.3
	Fort White	32038	33	OB-GYN	2 in 10 miles	0	33	100.0	13.3	16.6
	Gainesville	32609	112	OB-GYN	2 in 10 miles	9	1	0.9	10.5	10.5
	Glen Saint Mary	32040	1	OB-GYN	2 in 10 miles	0	1	100.0	25.8	25.8
	Graham	32042	2	OB-GYN	2 in 10 miles	0	2	100.0	13.3	13.3
	Greenville	32331	1	OB-GYN	2 in 10 miles	0	1	100.0	34.4	35.4
	Gulf Hammock	32639	2	OB-GYN	2 in 10 miles	0	2	100.0	17.8	19.1
	Hampton	32044	16	OB-GYN	2 in 10 miles	0	16	100.0	15.4	15.4
	Hawthorne	32640	55	OB-GYN	2 in 10 miles	0	55	100.0	15.8	16.2
	High Springs	32643	95	OB-GYN	2 in 10 miles	0	94	98.9	14.1	14.6
		32655	1	OB-GYN	2 in 10 miles	0	1	100.0	13.4	13.6
	Inglis	34449	1	OB-GYN	2 in 10 miles	0	1	100.0	11.6	13.5
	Interlachen	32148	8	OB-GYN	2 in 10 miles	0	6	75.0	12.5	13.3
	Keystone Heights	32656	32	OB-GYN	2 in 10 miles	0	32	100.0	19.0	19.0
	Lake Butler	32054	32	OB-GYN	2 in 10 miles	0	32	100.0	19.7	19.7
	Lake City	32024	7	OB-GYN	2 in 10 miles	0	2	28.6	11.9	11.9
	Lake Placid	33852	1	OB-GYN	2 in 10 miles	0	1	100.0	14.1	16.5
	Lawtey	32058	6	OB-GYN	2 in 10 miles	0	6	100.0	16.8	16.8
	Live Oak	32060	2	OB-GYN	2 in 10 miles	0	2	100.0	25.7	25.7
	Lulu	32061	1	OB-GYN	2 in 10 miles	0	1	100.0	12.5	12.5
	Macclenny	32063	1	OB-GYN	2 in 10 miles	0	1	100.0	21.5	21.5
	Mc Intosh	32664	1	OB-GYN	2 in 10 miles	0	1	100.0	13.6	13.6
	Melrose	32666	25	OB-GYN	2 in 10 miles	0	25	100.0	17.4	17.8
	Micanopy	32667	13	OB-GYN	2 in 10 miles	0	7	53.8	11.8	11.9
	Morrison	32668	1	OB-GYN	2 in 10 miles	0	1	100.0	15.9	18.3
	Newberry	32669	108	OB-GYN	2 in 10 miles	0	52	48.1	10.5	11.6
	O Brien	32071	2	OB-GYN	2 in 10 miles	0	2	100.0	5.4	17.4
	Old Town	32680	10	OB-GYN	2 in 10 miles	0	9	90.0	12.2	14.2

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 OB-GYN (Florida)

Employees Without Access											
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance		
			#	Group	Standard	#	#	%	1	2	
FL	Palatka	32177	6	OB-GYN	2 in 10 miles	3	1	16.7	9.8	10.5	
	Perry	32347	2	OB-GYN	2 in 10 miles	0	2	100.0	41.9	43.2	
		32348	1	OB-GYN	2 in 10 miles	0	1	100.0	40.0	49.0	
		32083	1	OB-GYN	2 in 10 miles	0	1	100.0	23.2	23.2	
	Reiddick	32686	7	OB-GYN	2 in 10 miles	0	7	100.0	14.3	14.6	
	Sanderson	32087	1	OB-GYN	2 in 10 miles	0	1	100.0	28.7	28.7	
	Starke	32091	38	OB-GYN	2 in 10 miles	0	38	100.0	19.6	19.6	
	Steinhatchee	32359	3	OB-GYN	2 in 10 miles	0	3	100.0	31.4	32.2	
	Trenton	32693	43	OB-GYN	2 in 10 miles	1	14	32.6	7.5	14.1	
	Waldo	32694	20	OB-GYN	2 in 10 miles	0	20	100.0	13.1	13.1	
	White Springs	32096	1	OB-GYN	2 in 10 miles	0	1	100.0	10.8	10.8	
	Williston	32696	31	OB-GYN	2 in 10 miles	0	31	100.0	17.1	17.9	
	Worthington Springs	32697	1	OB-GYN	2 in 10 miles	0	1	100.0	16.5	16.6	
	Grand Totals			977	OB-GYN	2 in 10 miles	14	645	66.0	14.7	15.8

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Florida Employees (Florida)

Provider Group
Specialist (Florida)

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Florida Employees	1,894	Specialist	2 in 10 miles	1,870	98.7	24	1.3	63,951	27,271	10,386	2.3	2.7

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹		Average Distance	
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	Specialist	2 in 10 miles	879	99.9	1	0.1	2,197	1.0	1.2	
	Alachua	146	Specialist	2 in 10 miles	146	100.0	0	0.0	40	2.8	3.1	
	Newberry	108	Specialist	2 in 10 miles	108	100.0	0	0.0	11	1.7	4.9	
	High Springs	96	Specialist	2 in 10 miles	96	100.0	0	0.0	26	2.6	2.7	
	Hawthorne	55	Specialist	2 in 10 miles	55	100.0	0	0.0	3	4.1	4.2	
	Ocala	55	Specialist	2 in 10 miles	55	100.0	0	0.0	829	1.5	1.7	
	Archer	45	Specialist	2 in 10 miles	45	100.0	0	0.0	3	3.2	3.2	
	Trenton	43	Specialist	2 in 10 miles	43	100.0	0	0.0	25	3.3	4.3	
	Starke	38	Specialist	2 in 10 miles	38	100.0	0	0.0	71	2.4	2.4	
	Fort White	33	Specialist	2 in 10 miles	26	78.8	7	21.2	0	7.9	7.9	
	Keystone Heights	32	Specialist	2 in 10 miles	32	100.0	0	0.0	9	2.3	2.3	
	Lake Butler	32	Specialist	2 in 10 miles	26	81.2	6	18.8	7	5.1	5.3	
	Williston	31	Specialist	2 in 10 miles	31	100.0	0	0.0	48	3.2	3.3	
	Melrose	25	Specialist	2 in 10 miles	25	100.0	0	0.0	2	3.7	3.7	
	Waldo	20	Specialist	2 in 10 miles	20	100.0	0	0.0	0	6.6	6.6	
	Bronson	18	Specialist	2 in 10 miles	18	100.0	0	0.0	0	8.3	8.3	
	Hampton	16	Specialist	2 in 10 miles	16	100.0	0	0.0	0	6.1	6.1	
	Lake City	15	Specialist	2 in 10 miles	13	86.7	2	13.3	205	3.7	3.7	
	Bell	13	Specialist	2 in 10 miles	13	100.0	0	0.0	44	3.0	3.5	
	Brooker	13	Specialist	2 in 10 miles	12	92.3	1	7.7	0	8.8	9.2	
	Micanopy	13	Specialist	2 in 10 miles	13	100.0	0	0.0	0	7.4	7.4	
	Old Town	10	Specialist	2 in 10 miles	10	100.0	0	0.0	0	4.4	5.9	
	Chiefland	8	Specialist	2 in 10 miles	8	100.0	0	0.0	77	3.7	3.8	
	Citra	8	Specialist	2 in 10 miles	8	100.0	0	0.0	1	4.8	5.2	
	Interlachen	8	Specialist	2 in 10 miles	8	100.0	0	0.0	3	1.9	2.4	
	Jacksonville	8	Specialist	2 in 10 miles	8	100.0	0	0.0	3,338	0.7	0.7	
	Reddick	7	Specialist	2 in 10 miles	7	100.0	0	0.0	11	3.6	3.6	
	Branford	6	Specialist	2 in 10 miles	6	100.0	0	0.0	42	1.9	1.9	
	Lawtey	6	Specialist	2 in 10 miles	6	100.0	0	0.0	0	5.3	5.3	
	Palatka	6	Specialist	2 in 10 miles	6	100.0	0	0.0	112	1.8	1.9	
	Anthony	4	Specialist	2 in 10 miles	4	100.0	0	0.0	0	5.0	6.3	
	Crystal River	4	Specialist	2 in 10 miles	4	100.0	0	0.0	82	1.2	1.3	
	Palm Coast	4	Specialist	2 in 10 miles	4	100.0	0	0.0	438	2.1	2.1	
	Beverly Hills	3	Specialist	2 in 10 miles	3	100.0	0	0.0	15	1.1	1.1	
	Dunnellon	3	Specialist	2 in 10 miles	3	100.0	0	0.0	27	4.5	4.8	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Specialist (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Alachua	32615	142	Specialist	2 in 10 miles	40	142	100.0	2.9	3.2
		32616	4	Specialist	2 in 10 miles	0	4	100.0	0.1	0.3
	Anthony	32617	4	Specialist	2 in 10 miles	0	4	100.0	5.0	6.3
	Archer	32618	45	Specialist	2 in 10 miles	3	45	100.0	3.2	3.2
	Bell	32619	13	Specialist	2 in 10 miles	44	13	100.0	3.0	3.5
	Bellevue	34420	2	Specialist	2 in 10 miles	27	2	100.0	1.1	1.1
	Beverly Hills	34465	3	Specialist	2 in 10 miles	15	3	100.0	1.1	1.1
	Bradenton	34209	1	Specialist	2 in 10 miles	190	1	100.0	0.4	0.4
	Branford	32008	6	Specialist	2 in 10 miles	42	6	100.0	1.9	1.9
	Bronson	32621	18	Specialist	2 in 10 miles	0	18	100.0	8.3	8.3
	Brooker	32622	13	Specialist	2 in 10 miles	0	12	92.3	8.7	9.1
	Brooksville	34602	1	Specialist	2 in 10 miles	2	1	100.0	3.1	4.3
	Chiefland	32626	8	Specialist	2 in 10 miles	77	8	100.0	3.7	3.8
	Citra	32113	8	Specialist	2 in 10 miles	1	8	100.0	4.8	5.2
	Cross City	32628	1	Specialist	2 in 10 miles	8	1	100.0	0.6	1.2
	Crystal River	34428	1	Specialist	2 in 10 miles	9	1	100.0	1.6	1.8
		34429	3	Specialist	2 in 10 miles	73	3	100.0	1.1	1.1
	Daytona Beach	32118	1	Specialist	2 in 10 miles	1	1	100.0	1.0	1.0
	Deland	32724	1	Specialist	2 in 10 miles	13	1	100.0	1.0	1.2
	Dunnellon	34431	2	Specialist	2 in 10 miles	0	2	100.0	5.2	5.2
		34433	1	Specialist	2 in 10 miles	0	1	100.0	3.1	4.1
	Earleton	32631	2	Specialist	2 in 10 miles	0	2	100.0	5.7	5.7
	Eustis	32726	1	Specialist	2 in 10 miles	22	1	100.0	0.6	0.7
	Fernandina Beach	32034	1	Specialist	2 in 10 miles	150	1	100.0	0.4	0.4
	Fleming Island	32003	3	Specialist	2 in 10 miles	300	3	100.0	0.5	0.5
	Florahome	32140	1	Specialist	2 in 10 miles	0	1	100.0	3.0	3.0
	Fort Mc Coy	32134	1	Specialist	2 in 10 miles	2	1	100.0	5.0	9.3
	Fort White	32038	33	Specialist	2 in 10 miles	0	26	78.8	7.0	7.1
	Gainesville	32601	69	Specialist	2 in 10 miles	23	69	100.0	0.5	0.6
		32603	3	Specialist	2 in 10 miles	0	3	100.0	0.6	0.7
		32604	2	Specialist	2 in 10 miles	0	2	100.0	0.3	0.6
		32605	166	Specialist	2 in 10 miles	342	166	100.0	0.6	0.7
		32606	126	Specialist	2 in 10 miles	214	126	100.0	0.5	0.7
		32607	80	Specialist	2 in 10 miles	391	80	100.0	0.5	0.6
		32608	138	Specialist	2 in 10 miles	382	138	100.0	1.0	1.0
		32609	112	Specialist	2 in 10 miles	11	111	99.1	2.4	2.5
		32614	5	Specialist	2 in 10 miles	0	5	100.0	0.2	0.2
		32627	1	Specialist	2 in 10 miles	0	1	100.0	0.2	0.2
		32635	1	Specialist	2 in 10 miles	0	1	100.0	0.1	0.1
		32641	85	Specialist	2 in 10 miles	3	85	100.0	1.9	2.5

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Specialist (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Gainesville	32653	92	Specialist	2 in 10 miles	3	92	100.0	1.1	1.6
	Glen Saint Mary	32040	1	Specialist	2 in 10 miles	0	1	100.0	5.2	5.5
	Graham	32042	2	Specialist	2 in 10 miles	0	2	100.0	8.2	8.2
	Green Cove Springs	32043	1	Specialist	2 in 10 miles	9	1	100.0	1.3	1.8
	Hampton	32044	16	Specialist	2 in 10 miles	0	16	100.0	6.1	6.1
	Hawthorne	32640	55	Specialist	2 in 10 miles	3	55	100.0	4.1	4.2
	Hernando	34442	1	Specialist	2 in 10 miles	7	1	100.0	2.4	2.4
	High Springs	32643	95	Specialist	2 in 10 miles	26	95	100.0	2.6	2.7
		32655	1	Specialist	2 in 10 miles	0	1	100.0	0.1	0.1
	Hollister	32147	1	Specialist	2 in 10 miles	0	1	100.0	4.1	5.2
	Homosassa	34448	1	Specialist	2 in 10 miles	12	1	100.0	0.9	0.9
	Immokalee	34142	1	Specialist	2 in 10 miles	58	1	100.0	0.7	1.4
	Inglis	34449	1	Specialist	2 in 10 miles	0	1	100.0	8.7	8.7
	Interlachen	32148	8	Specialist	2 in 10 miles	3	8	100.0	1.9	2.4
	Inverness	34450	2	Specialist	2 in 10 miles	4	2	100.0	2.1	2.7
	Jacksonville	32204	1	Specialist	2 in 10 miles	348	1	100.0	0.1	0.2
		32205	1	Specialist	2 in 10 miles	48	1	100.0	0.7	0.8
		32211	1	Specialist	2 in 10 miles	7	1	100.0	0.7	0.7
		32225	3	Specialist	2 in 10 miles	50	3	100.0	0.9	0.9
		32226	1	Specialist	2 in 10 miles	11	1	100.0	1.2	1.2
		32258	1	Specialist	2 in 10 miles	257	1	100.0	0.4	0.4
	Keystone Heights	32656	32	Specialist	2 in 10 miles	9	32	100.0	2.3	2.3
	Lake Butler	32054	32	Specialist	2 in 10 miles	7	26	81.2	3.9	4.0
	Lake City	32024	7	Specialist	2 in 10 miles	36	5	71.4	5.1	5.1
		32025	3	Specialist	2 in 10 miles	62	3	100.0	1.8	1.8
		32055	2	Specialist	2 in 10 miles	107	2	100.0	1.7	1.7
		32056	3	Specialist	2 in 10 miles	0	3	100.0	0.1	0.1
	Lake Placid	33852	1	Specialist	2 in 10 miles	41	1	100.0	1.1	1.1
	Lawtey	32058	6	Specialist	2 in 10 miles	0	6	100.0	5.3	5.3
	Live Oak	32060	2	Specialist	2 in 10 miles	2	2	100.0	5.0	6.7
	Lulu	32061	1	Specialist	2 in 10 miles	0	1	100.0	8.6	8.6
	Macclenny	32063	1	Specialist	2 in 10 miles	28	1	100.0	0.5	0.5
	Mc Intosh	32664	1	Specialist	2 in 10 miles	0	1	100.0	5.6	5.6
	Melrose	32666	25	Specialist	2 in 10 miles	2	25	100.0	3.7	3.7
	Merritt Island	32952	1	Specialist	2 in 10 miles	53	1	100.0	0.7	1.8
		32953	1	Specialist	2 in 10 miles	69	1	100.0	1.1	1.1
	Micanopy	32667	13	Specialist	2 in 10 miles	0	13	100.0	7.4	7.4
	Middleburg	32068	3	Specialist	2 in 10 miles	120	3	100.0	1.0	1.1
	Morrison	32668	1	Specialist	2 in 10 miles	0	1	100.0	7.2	7.3
	Newberry	32669	108	Specialist	2 in 10 miles	11	108	100.0	1.7	4.9

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Specialist (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Niceville	32578	1	Specialist	2 in 10 miles	52	1	100.0	0.4	0.4
	O Brien	32071	2	Specialist	2 in 10 miles	0	2	100.0	5.2	5.2
	Ocala	34470	8	Specialist	2 in 10 miles	26	8	100.0	0.6	0.8
		34471	10	Specialist	2 in 10 miles	495	10	100.0	0.4	0.5
		34472	3	Specialist	2 in 10 miles	16	3	100.0	1.5	1.5
		34474	3	Specialist	2 in 10 miles	176	3	100.0	0.5	0.5
		34475	4	Specialist	2 in 10 miles	5	4	100.0	1.3	1.9
		34476	12	Specialist	2 in 10 miles	24	12	100.0	1.5	1.5
		34479	2	Specialist	2 in 10 miles	1	2	100.0	1.6	3.2
		34480	5	Specialist	2 in 10 miles	1	5	100.0	2.0	2.2
		34481	1	Specialist	2 in 10 miles	71	1	100.0	2.6	2.7
		34482	7	Specialist	2 in 10 miles	3	7	100.0	4.3	4.6
	Ocoee	34761	1	Specialist	2 in 10 miles	138	1	100.0	1.0	1.1
	Old Town	32680	10	Specialist	2 in 10 miles	0	10	100.0	4.4	5.9
	Orange Park	32065	2	Specialist	2 in 10 miles	33	2	100.0	1.1	1.1
		32073	1	Specialist	2 in 10 miles	313	1	100.0	0.0	0.0
	Oxford	34484	1	Specialist	2 in 10 miles	18	1	100.0	2.2	2.2
	Palatka	32177	6	Specialist	2 in 10 miles	112	6	100.0	1.8	1.9
	Palm Bay	32905	1	Specialist	2 in 10 miles	110	1	100.0	0.4	0.4
	Palm Coast	32137	2	Specialist	2 in 10 miles	229	2	100.0	1.7	1.8
		32164	2	Specialist	2 in 10 miles	209	2	100.0	2.5	2.5
	Panama City	32405	2	Specialist	2 in 10 miles	224	2	100.0	0.6	0.6
	Pensacola	32526	1	Specialist	2 in 10 miles	10	1	100.0	1.1	1.1
	Perry	32347	2	Specialist	2 in 10 miles	23	2	100.0	1.1	1.1
		32348	1	Specialist	2 in 10 miles	14	1	100.0	6.8	7.0
	Pinellas Park	33782	1	Specialist	2 in 10 miles	17	1	100.0	0.5	0.5
	Punta Gorda	33950	1	Specialist	2 in 10 miles	118	1	100.0	0.2	0.2
	Raiford	32083	1	Specialist	2 in 10 miles	0	1	100.0	7.4	7.4
	Reddick	32686	7	Specialist	2 in 10 miles	11	7	100.0	3.6	3.6
	Saint Augustine	32084	2	Specialist	2 in 10 miles	49	2	100.0	0.9	1.5
		32086	1	Specialist	2 in 10 miles	215	1	100.0	0.1	0.1
	Saint Johns	32259	3	Specialist	2 in 10 miles	104	3	100.0	0.6	1.1
	Sanderson	32087	1	Specialist	2 in 10 miles	0	1	100.0	8.7	8.7
	Sarasota	34240	1	Specialist	2 in 10 miles	38	1	100.0	1.8	2.4
	Silver Springs	34488	1	Specialist	2 in 10 miles	2	1	100.0	1.2	1.2
	Starke	32091	38	Specialist	2 in 10 miles	71	38	100.0	2.4	2.4
	Sun City Center	33571	1	Specialist	2 in 10 miles	0	1	100.0	0.1	0.1
	Tallahassee	32309	1	Specialist	2 in 10 miles	12	1	100.0	3.2	3.4
	Tampa	33613	1	Specialist	2 in 10 miles	495	1	100.0	0.1	0.4
		33647	1	Specialist	2 in 10 miles	102	1	100.0	0.1	0.1

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Specialist (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Tarpon Springs	34689	1	Specialist	2 in 10 miles	94	1	100.0	0.0	0.2
	The Villages	32162	1	Specialist	2 in 10 miles	118	1	100.0	0.7	0.7
	Trenton	32693	43	Specialist	2 in 10 miles	25	43	100.0	3.3	4.3
	Waldo	32694	20	Specialist	2 in 10 miles	0	20	100.0	6.6	6.6
	Wesley Chapel	33543	2	Specialist	2 in 10 miles	36	2	100.0	1.5	2.1
	Williston	32696	31	Specialist	2 in 10 miles	48	31	100.0	3.2	3.3
	Worthington Springs	32697	1	Specialist	2 in 10 miles	0	1	100.0	8.0	8.4
Grand Totals			1,887	Specialist	2 in 10 miles	7,636	1,870	99.1	2.2	2.6

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Specialist (Florida)

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Brooker	32622	13	Specialist	2 in 10 miles	0	1	7.7	9.9	10.1
	Fort White	32038	33	Specialist	2 in 10 miles	0	7	21.2	10.9	10.9
	Gainesville	32609	112	Specialist	2 in 10 miles	11	1	0.9	10.5	10.5
	Greenville	32331	1	Specialist	2 in 10 miles	0	1	100.0	12.6	12.8
	Gulf Hammock	32639	2	Specialist	2 in 10 miles	0	2	100.0	17.8	17.8
	Lake Butler	32054	32	Specialist	2 in 10 miles	7	6	18.8	10.7	10.8
	Lake City	32024	7	Specialist	2 in 10 miles	36	2	28.6	10.7	10.7
	Steinhatchee	32359	3	Specialist	2 in 10 miles	0	3	100.0	14.1	15.3
	White Springs	32096	1	Specialist	2 in 10 miles	0	1	100.0	10.6	10.6
	Grand Totals			204	Specialist	2 in 10 miles	54	24	11.8	11.8

Access Summary By City

July 5, 2024

Access Analysis
Custom

Employee Group
All Florida Employees (Florida)

Provider Group
Urgent Care (Florida)

¹ Provider counts represent:
#: Provider access points
P: Unique providers
L: Unique provider locations

Employees With and Without Access												
Employee		Provider		With Access		Without Access		Counts ¹			Average Distance	
Group	#	Group	Standard	#	%	#	%	#	P	L	1	2
All Florida Employees	1,894	Urgent Care	2 in 10 miles	1,263	66.7	631	33.3	819	257	752	5.9	8.4

Key Geographic Areas												
State Abbr	City	Employee	Provider		With Access		Without Access		Counts ¹		Average Distance	
		#	Group	Standard	#	%	#	%	#	1	2	
FL	Gainesville	880	Urgent Care	2 in 10 miles	865	98.3	15	1.7	7	2.0	3.6	
	Alachua	146	Urgent Care	2 in 10 miles	139	95.2	7	4.8	2	3.2	6.0	
	Newberry	108	Urgent Care	2 in 10 miles	58	53.7	50	46.3	1	5.3	8.4	
	High Springs	96	Urgent Care	2 in 10 miles	15	15.6	81	84.4	0	7.9	12.6	
	Hawthorne	55	Urgent Care	2 in 10 miles	0	0.0	55	100.0	0	16.1	17.5	
	Ocala	55	Urgent Care	2 in 10 miles	55	100.0	0	0.0	13	2.4	3.2	
	Archer	45	Urgent Care	2 in 10 miles	26	57.8	19	42.2	0	8.4	9.6	
	Trenton	43	Urgent Care	2 in 10 miles	0	0.0	43	100.0	0	8.9	19.9	
	Starke	38	Urgent Care	2 in 10 miles	0	0.0	38	100.0	0	19.5	20.2	
	Fort White	33	Urgent Care	2 in 10 miles	0	0.0	33	100.0	0	13.6	16.0	
	Keystone Heights	32	Urgent Care	2 in 10 miles	0	0.0	32	100.0	0	19.8	21.0	
	Lake Butler	32	Urgent Care	2 in 10 miles	0	0.0	32	100.0	0	14.9	15.9	
	Williston	31	Urgent Care	2 in 10 miles	0	0.0	31	100.0	1	3.5	17.4	
	Melrose	25	Urgent Care	2 in 10 miles	0	0.0	25	100.0	0	18.0	19.2	
	Waldo	20	Urgent Care	2 in 10 miles	0	0.0	20	100.0	0	14.6	16.3	
	Bronson	18	Urgent Care	2 in 10 miles	0	0.0	18	100.0	0	10.5	15.9	
	Hampton	16	Urgent Care	2 in 10 miles	0	0.0	16	100.0	0	16.8	17.7	
	Lake City	15	Urgent Care	2 in 10 miles	13	86.7	2	13.3	4	4.7	5.1	
	Bell	13	Urgent Care	2 in 10 miles	0	0.0	13	100.0	0	17.9	23.9	
	Brooker	13	Urgent Care	2 in 10 miles	4	30.8	9	69.2	0	9.6	11.8	
	Micanopy	13	Urgent Care	2 in 10 miles	5	38.5	8	61.5	0	10.2	11.0	
	Old Town	10	Urgent Care	2 in 10 miles	0	0.0	10	100.0	0	14.2	31.0	
	Chiefland	8	Urgent Care	2 in 10 miles	0	0.0	8	100.0	1	4.4	26.6	
	Citra	8	Urgent Care	2 in 10 miles	2	25.0	6	75.0	0	10.5	11.0	
	Interlachen	8	Urgent Care	2 in 10 miles	2	25.0	6	75.0	0	12.3	12.3	
	Jacksonville	8	Urgent Care	2 in 10 miles	8	100.0	0	0.0	30	1.8	2.7	
	Reddick	7	Urgent Care	2 in 10 miles	4	57.1	3	42.9	0	9.7	10.5	
	Branford	6	Urgent Care	2 in 10 miles	0	0.0	6	100.0	0	20.8	22.2	
	Lawtey	6	Urgent Care	2 in 10 miles	0	0.0	6	100.0	0	16.9	17.2	
	Palatka	6	Urgent Care	2 in 10 miles	5	83.3	1	16.7	2	3.4	3.4	
	Anthony	4	Urgent Care	2 in 10 miles	4	100.0	0	0.0	0	4.1	5.1	
	Crystal River	4	Urgent Care	2 in 10 miles	4	100.0	0	0.0	2	2.4	3.3	
	Palm Coast	4	Urgent Care	2 in 10 miles	4	100.0	0	0.0	4	2.6	3.3	
	Beverly Hills	3	Urgent Care	2 in 10 miles	3	100.0	0	0.0	1	1.9	5.2	
	Dunnellon	3	Urgent Care	2 in 10 miles	1	33.3	2	66.7	1	6.5	12.4	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Urgent Care (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Alachua	32615	142	Urgent Care	2 in 10 miles	2	135	95.1	3.0	5.8
		32616	4	Urgent Care	2 in 10 miles	0	4	100.0	0.6	4.6
	Anthony	32617	4	Urgent Care	2 in 10 miles	0	4	100.0	4.1	5.1
	Archer	32618	45	Urgent Care	2 in 10 miles	0	26	57.8	6.8	7.6
	Belleview	34420	2	Urgent Care	2 in 10 miles	0	2	100.0	7.2	8.2
	Beverly Hills	34465	3	Urgent Care	2 in 10 miles	1	3	100.0	1.9	5.2
	Bradenton	34209	1	Urgent Care	2 in 10 miles	0	1	100.0	2.5	3.0
	Brooker	32622	13	Urgent Care	2 in 10 miles	0	4	30.8	7.1	9.6
	Citra	32113	8	Urgent Care	2 in 10 miles	0	2	25.0	8.8	9.3
	Crystal River	34428	1	Urgent Care	2 in 10 miles	0	1	100.0	3.6	5.0
		34429	3	Urgent Care	2 in 10 miles	2	3	100.0	2.0	2.7
	Daytona Beach	32118	1	Urgent Care	2 in 10 miles	1	1	100.0	2.5	3.3
	Deland	32724	1	Urgent Care	2 in 10 miles	0	1	100.0	1.6	3.5
	Dunnellon	34433	1	Urgent Care	2 in 10 miles	0	1	100.0	5.1	6.2
	Eustis	32726	1	Urgent Care	2 in 10 miles	0	1	100.0	2.1	2.8
	Fernandina Beach	32034	1	Urgent Care	2 in 10 miles	1	1	100.0	2.3	4.2
	Fleming Island	32003	3	Urgent Care	2 in 10 miles	1	3	100.0	1.3	5.2
	Gainesville	32601	69	Urgent Care	2 in 10 miles	1	69	100.0	0.8	3.8
		32603	3	Urgent Care	2 in 10 miles	0	3	100.0	1.3	2.8
		32604	2	Urgent Care	2 in 10 miles	0	2	100.0	0.7	2.9
		32605	166	Urgent Care	2 in 10 miles	1	166	100.0	1.5	2.7
		32606	126	Urgent Care	2 in 10 miles	2	126	100.0	1.1	2.3
		32607	80	Urgent Care	2 in 10 miles	0	80	100.0	1.2	1.7
		32608	138	Urgent Care	2 in 10 miles	3	138	100.0	2.1	2.9
		32609	112	Urgent Care	2 in 10 miles	0	107	95.5	3.7	5.7
		32614	5	Urgent Care	2 in 10 miles	0	5	100.0	0.9	0.9
		32627	1	Urgent Care	2 in 10 miles	0	1	100.0	1.1	4.2
	32635	1	Urgent Care	2 in 10 miles	0	1	100.0	1.1	2.1	
	32641	85	Urgent Care	2 in 10 miles	0	75	88.2	2.9	5.6	
	32653	92	Urgent Care	2 in 10 miles	0	92	100.0	2.1	3.9	
	Green Cove Springs	32043	1	Urgent Care	2 in 10 miles	0	1	100.0	7.0	9.5
	Hernando	34442	1	Urgent Care	2 in 10 miles	0	1	100.0	4.3	5.6
High Springs	32643	95	Urgent Care	2 in 10 miles	0	15	15.8	4.7	9.0	
Hollister	32147	1	Urgent Care	2 in 10 miles	0	1	100.0	7.5	7.5	
Homosassa	34448	1	Urgent Care	2 in 10 miles	1	1	100.0	0.9	6.2	
Interlachen	32148	8	Urgent Care	2 in 10 miles	0	2	25.0	9.8	9.8	
Jacksonville	32204	1	Urgent Care	2 in 10 miles	0	1	100.0	3.6	4.0	
	32205	1	Urgent Care	2 in 10 miles	3	1	100.0	1.8	1.8	
	32211	1	Urgent Care	2 in 10 miles	1	1	100.0	0.6	1.8	
	32225	3	Urgent Care	2 in 10 miles	3	3	100.0	1.0	2.1	

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Urgent Care (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Jacksonville	32226	1	Urgent Care	2 in 10 miles	0	1	100.0	4.7	5.0
		32258	1	Urgent Care	2 in 10 miles	1	1	100.0	0.6	2.8
	Lake City	32024	7	Urgent Care	2 in 10 miles	1	5	71.4	5.9	6.5
		32025	3	Urgent Care	2 in 10 miles	0	3	100.0	3.1	3.3
		32055	2	Urgent Care	2 in 10 miles	3	2	100.0	3.5	3.6
	Merritt Island	32056	3	Urgent Care	2 in 10 miles	0	3	100.0	0.4	1.2
		32952	1	Urgent Care	2 in 10 miles	0	1	100.0	2.7	3.0
		32953	1	Urgent Care	2 in 10 miles	1	1	100.0	3.7	5.8
	Micanopy	32667	13	Urgent Care	2 in 10 miles	0	5	38.5	8.3	8.4
	Middleburg	32068	3	Urgent Care	2 in 10 miles	2	3	100.0	2.9	3.3
	Newberry	32669	108	Urgent Care	2 in 10 miles	1	58	53.7	2.9	5.8
	Niceville	32578	1	Urgent Care	2 in 10 miles	2	1	100.0	1.2	2.5
	Ocala	34470	8	Urgent Care	2 in 10 miles	1	8	100.0	1.0	2.8
		34471	10	Urgent Care	2 in 10 miles	5	10	100.0	1.0	1.3
		34472	3	Urgent Care	2 in 10 miles	0	3	100.0	5.3	6.4
		34474	3	Urgent Care	2 in 10 miles	2	3	100.0	1.0	1.1
		34475	4	Urgent Care	2 in 10 miles	2	4	100.0	1.5	1.8
		34476	12	Urgent Care	2 in 10 miles	1	12	100.0	1.9	3.1
		34479	2	Urgent Care	2 in 10 miles	0	2	100.0	2.3	3.0
		34480	5	Urgent Care	2 in 10 miles	0	5	100.0	4.5	4.7
		34481	1	Urgent Care	2 in 10 miles	1	1	100.0	2.6	3.9
		34482	7	Urgent Care	2 in 10 miles	0	7	100.0	5.5	6.1
	Ocoee	34761	1	Urgent Care	2 in 10 miles	3	1	100.0	1.8	1.8
	Orange Park	32065	2	Urgent Care	2 in 10 miles	0	2	100.0	2.6	2.9
		32073	1	Urgent Care	2 in 10 miles	2	1	100.0	0.2	0.4
	Oxford	34484	1	Urgent Care	2 in 10 miles	0	1	100.0	5.4	6.0
	Palatka	32177	6	Urgent Care	2 in 10 miles	2	5	83.3	1.8	1.8
	Palm Bay	32905	1	Urgent Care	2 in 10 miles	1	1	100.0	2.1	2.1
	Palm Coast	32137	2	Urgent Care	2 in 10 miles	2	2	100.0	2.0	2.7
		32164	2	Urgent Care	2 in 10 miles	2	2	100.0	3.3	3.9
	Panama City	32405	2	Urgent Care	2 in 10 miles	1	2	100.0	1.5	5.7
	Pensacola	32526	1	Urgent Care	2 in 10 miles	0	1	100.0	3.7	3.8
	Pinellas Park	33782	1	Urgent Care	2 in 10 miles	0	1	100.0	2.3	2.5
	Punta Gorda	33950	1	Urgent Care	2 in 10 miles	0	1	100.0	7.4	7.5
	Reddick	32686	7	Urgent Care	2 in 10 miles	0	4	57.1	9.0	9.3
	Saint Augustine	32084	2	Urgent Care	2 in 10 miles	0	2	100.0	3.3	3.6
		32086	1	Urgent Care	2 in 10 miles	4	1	100.0	3.0	3.1
	Saint Johns	32259	3	Urgent Care	2 in 10 miles	5	3	100.0	1.0	2.9
	Sarasota	34240	1	Urgent Care	2 in 10 miles	2	1	100.0	3.2	3.3
	Sun City Center	33571	1	Urgent Care	2 in 10 miles	0	1	100.0	1.2	1.2

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Urgent Care (Florida)

Employees With Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	With Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Tallahassee	32309	1	Urgent Care	2 in 10 miles	0	1	100.0	6.5	8.3
	Tampa	33613	1	Urgent Care	2 in 10 miles	2	1	100.0	0.6	0.7
		33647	1	Urgent Care	2 in 10 miles	2	1	100.0	0.2	3.4
		34689	1	Urgent Care	2 in 10 miles	1	1	100.0	1.1	3.4
	The Villages	32162	1	Urgent Care	2 in 10 miles	1	1	100.0	1.5	3.3
	Wesley Chapel	33543	2	Urgent Care	2 in 10 miles	0	2	100.0	3.6	3.8
	Grand Totals			1,469	Urgent Care	2 in 10 miles	76	1,263	86.0	2.4

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Urgent Care (Florida)

Employees Without Access										
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance	
			#	Group	Standard	#	#	%	1	2
FL	Alachua	32615	142	Urgent Care	2 in 10 miles	2	7	4.9	7.3	10.5
	Archer	32618	45	Urgent Care	2 in 10 miles	0	19	42.2	10.6	12.4
	Bell	32619	13	Urgent Care	2 in 10 miles	0	13	100.0	17.9	23.9
	Branford	32008	6	Urgent Care	2 in 10 miles	0	6	100.0	20.8	22.2
	Bronson	32621	18	Urgent Care	2 in 10 miles	0	18	100.0	10.5	15.9
	Brooker	32622	13	Urgent Care	2 in 10 miles	0	9	69.2	10.8	12.9
	Brooksville	34602	1	Urgent Care	2 in 10 miles	0	1	100.0	7.6	14.4
	Chiefland	32626	8	Urgent Care	2 in 10 miles	1	8	100.0	4.4	26.6
	Citra	32113	8	Urgent Care	2 in 10 miles	0	6	75.0	11.0	11.6
	Cross City	32628	1	Urgent Care	2 in 10 miles	0	1	100.0	17.8	38.2
	Dunnellon	34431	2	Urgent Care	2 in 10 miles	0	2	100.0	7.2	15.5
	Earleton	32631	2	Urgent Care	2 in 10 miles	0	2	100.0	14.8	17.2
	Florahome	32140	1	Urgent Care	2 in 10 miles	0	1	100.0	14.0	14.0
	Fort Mc Coy	32134	1	Urgent Care	2 in 10 miles	0	1	100.0	17.4	18.1
	Fort White	32038	33	Urgent Care	2 in 10 miles	0	33	100.0	13.6	16.0
	Gainesville	32609	112	Urgent Care	2 in 10 miles	0	5	4.5	8.8	11.1
		32641	85	Urgent Care	2 in 10 miles	0	10	11.8	8.9	11.6
	Glen Saint Mary	32040	1	Urgent Care	2 in 10 miles	0	1	100.0	23.8	24.0
	Graham	32042	2	Urgent Care	2 in 10 miles	0	2	100.0	13.7	15.5
	Greenville	32331	1	Urgent Care	2 in 10 miles	0	1	100.0	35.9	36.2
	Gulf Hammock	32639	2	Urgent Care	2 in 10 miles	0	2	100.0	18.7	19.3
	Hampton	32044	16	Urgent Care	2 in 10 miles	0	16	100.0	16.8	17.7
	Hawthorne	32640	55	Urgent Care	2 in 10 miles	0	55	100.0	16.1	17.5
	High Springs	32643	95	Urgent Care	2 in 10 miles	0	80	84.2	8.5	13.3
		32655	1	Urgent Care	2 in 10 miles	0	1	100.0	6.0	11.1
	Immokalee	34142	1	Urgent Care	2 in 10 miles	0	1	100.0	18.8	19.5
	Inglis	34449	1	Urgent Care	2 in 10 miles	0	1	100.0	12.5	12.9
	Interlachen	32148	8	Urgent Care	2 in 10 miles	0	6	75.0	13.1	13.1
	Inverness	34450	2	Urgent Care	2 in 10 miles	0	2	100.0	4.1	12.6
	Keystone Heights	32656	32	Urgent Care	2 in 10 miles	0	32	100.0	19.8	21.0
	Lake Butler	32054	32	Urgent Care	2 in 10 miles	0	32	100.0	14.9	15.9
	Lake City	32024	7	Urgent Care	2 in 10 miles	1	2	28.6	11.7	12.1
	Lake Placid	33852	1	Urgent Care	2 in 10 miles	0	1	100.0	9.9	18.5
	Lawtey	32058	6	Urgent Care	2 in 10 miles	0	6	100.0	16.9	17.2
	Live Oak	32060	2	Urgent Care	2 in 10 miles	0	2	100.0	25.8	27.5
	Lulu	32061	1	Urgent Care	2 in 10 miles	0	1	100.0	10.0	10.9
	Macclenny	32063	1	Urgent Care	2 in 10 miles	0	1	100.0	19.0	19.1
	Mc Intosh	32664	1	Urgent Care	2 in 10 miles	0	1	100.0	14.1	14.2
	Melrose	32666	25	Urgent Care	2 in 10 miles	0	25	100.0	18.0	19.2
	Micanopy	32667	13	Urgent Care	2 in 10 miles	0	8	61.5	11.4	12.6

Access Detail By Zip Code

July 5, 2024

Access Analysis
 Custom
 Employee / Provider Groups
 All Florida Employees (Florida)
 Urgent Care (Florida)

Employees Without Access											
State Abbr	City	Zip Code	Employee	Provider		Counts	Without Access		Average Distance		
			#	Group	Standard	#	#	%	1	2	
FL	Morrison	32668	1	Urgent Care	2 in 10 miles	0	1	100.0	7.4	15.3	
	Newberry	32669	108	Urgent Care	2 in 10 miles	1	50	46.3	8.2	11.4	
	O Brien	32071	2	Urgent Care	2 in 10 miles	0	2	100.0	17.3	18.7	
	Old Town	32680	10	Urgent Care	2 in 10 miles	0	10	100.0	14.2	31.0	
	Palatka	32177	6	Urgent Care	2 in 10 miles	2	1	16.7	11.0	11.0	
	Perry	32347	2	Urgent Care	2 in 10 miles	0	2	100.0	41.5	44.5	
		32348	1	Urgent Care	2 in 10 miles	0	1	100.0	47.0	50.6	
	Raiford	32083	1	Urgent Care	2 in 10 miles	0	1	100.0	23.4	23.7	
	Reddick	32686	7	Urgent Care	2 in 10 miles	0	3	42.9	10.5	12.0	
	Sanderson	32087	1	Urgent Care	2 in 10 miles	0	1	100.0	25.5	27.0	
	Silver Springs	34488	1	Urgent Care	2 in 10 miles	0	1	100.0	9.2	11.8	
	Starke	32091	38	Urgent Care	2 in 10 miles	0	38	100.0	19.5	20.2	
	Steinhatchee	32359	3	Urgent Care	2 in 10 miles	0	3	100.0	31.4	52.3	
	Trenton	32693	43	Urgent Care	2 in 10 miles	0	43	100.0	8.9	19.9	
	Waldo	32694	20	Urgent Care	2 in 10 miles	0	20	100.0	14.6	16.3	
	White Springs	32096	1	Urgent Care	2 in 10 miles	0	1	100.0	11.2	11.8	
	Williston	32696	31	Urgent Care	2 in 10 miles	1	31	100.0	3.5	17.4	
	Worthington Springs	32697	1	Urgent Care	2 in 10 miles	0	1	100.0	10.3	11.1	
	Grand Totals			1,074	Urgent Care	2 in 10 miles	8	631	58.8	12.8	17.0



September 11, 2024

A comparison of

UnitedHealthcare Choice Plus Providers

to providers utilized by employees of

City of Gainesville (FL)



September 11, 2024

A comparison of

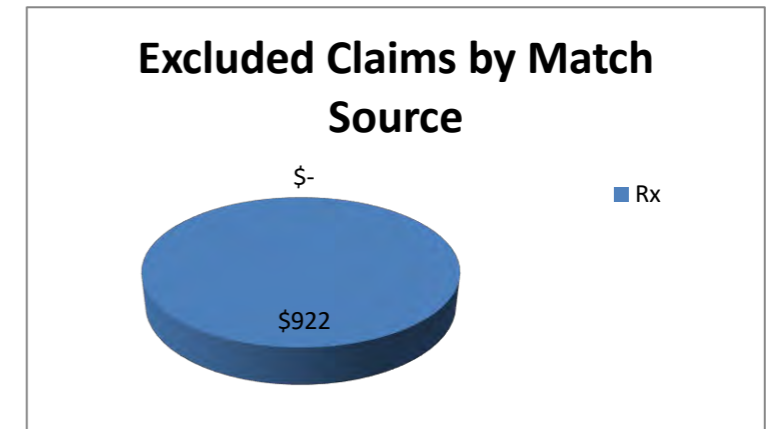
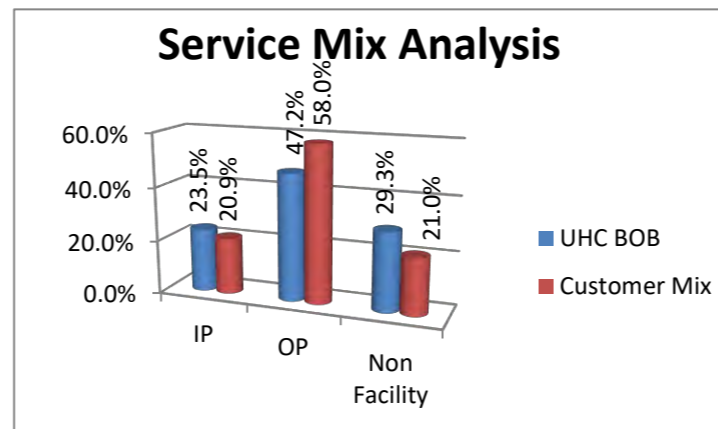
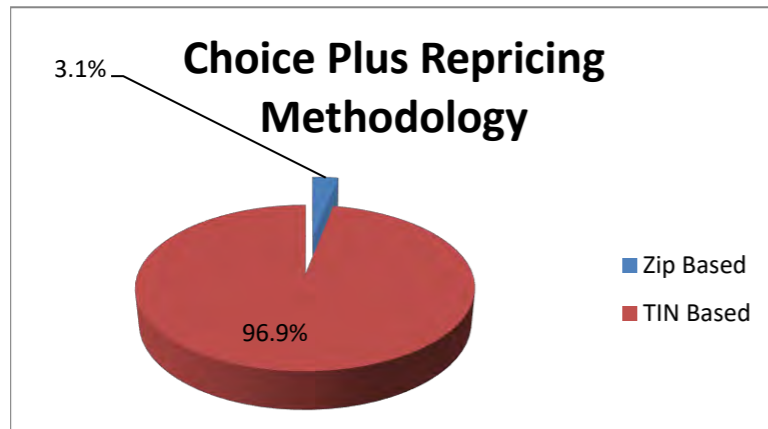
Neighborhood Health Partners Providers

to providers utilized by employees of

City of Gainesville (FL)

Repricing Summary
City of Gainesville (FL) Choice Plus TIN Summary Expected Discounts
UnitedHealthcare, Inc., Proprietary & Confidential
Wednesday, July 10, 2024

Type of Service	Total Submitted		Charges Not Processed	INN (Par Providers)		Discount %	OON (Non Par Providers)		Discount %	Total All Providers		Discount %
	Charges			Charges	Allowed		Charges	Allowed		Charges	Allowed	
Inpatient	\$ 18,182,784	\$ -	-	\$ 18,182,784	\$ 5,794,412	68.1%	\$ -	\$ -		\$ 18,182,784	\$ 5,794,412	68.1%
Outpatient	50,425,303	-	-	50,425,303	13,713,151	72.8%	-	-		50,425,303	13,713,151	72.8%
Non Facility	18,285,853	922	922	15,854,708	6,230,021	60.7%	2,430,222	505,279	79.2%	18,284,931	6,735,300	63.2%
Total	86,893,940		922	84,462,795	25,737,584	69.5%	2,430,222	505,279	79.2%	86,893,018	26,242,863	69.8%



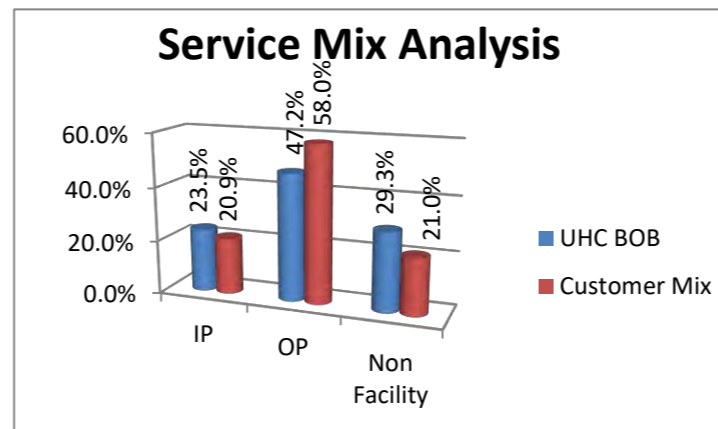
Other Notes (if applicable):

Footnotes:

1. This is an estimate only. Actual costs and discounts may vary based on a number of factors including member utilization and provider mix.
2. UHC's discount calculation is 1- (Allowed Charges/Eligible Charges).
3. UHC Expected Allowed has been determined using discounts based upon provider TIN, type of service, product, and expected trend. A credibility limit has been established for each type of service (TOS). In cases where a TIN/TOS combination falls below this credibility level, a zip 3 average discount is used.
4. There is no consideration for network development activities that would result in better future overall discounts due to higher % of in-network reimbursement.
5. Rx and Invalid records have not been repriced.
6. For all out of network claims, Naviguard expected cost savings has been applied.

Repricing Summary
City of Gainesville (FL) Choice Plus Zip Summary
UnitedHealthcare, Inc., Proprietary & Confidential
Wednesday, July 10, 2024

Type of Service	Total Submitted		Charges Not Processed	INN (Par Providers)			OON (Non Par Providers)			Total All Providers		
	Charges			Charges	Allowed	Discount %	Charges	Allowed	Discount %	Charges	Allowed	Discount %
Inpatient	\$ 18,182,784	\$ -	-	\$ 18,182,784	\$ 6,289,587	65.4%	\$ -	\$ -		\$ 18,182,784	\$ 6,289,587	65.4%
Outpatient	50,425,303	-	-	50,425,303	16,049,176	68.2%	-	-		50,425,303	16,049,176	68.2%
Non Facility	18,285,853	922	922	15,854,708	6,594,481	58.4%	2,430,222	505,279	79.2%	18,284,931	7,099,760	61.2%
Total	86,893,940	922	922	84,462,795	28,933,244	65.7%	2,430,222	505,279	79.2%	86,893,018	29,438,523	66.1%



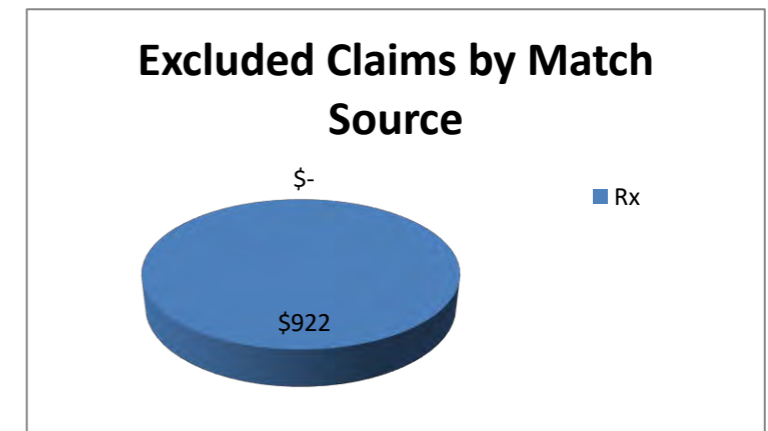
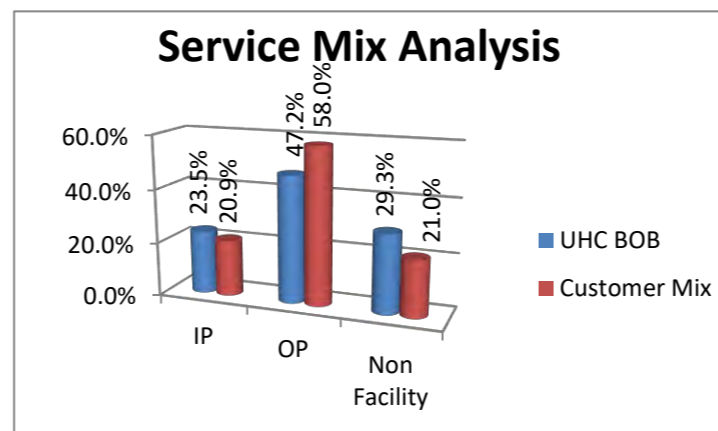
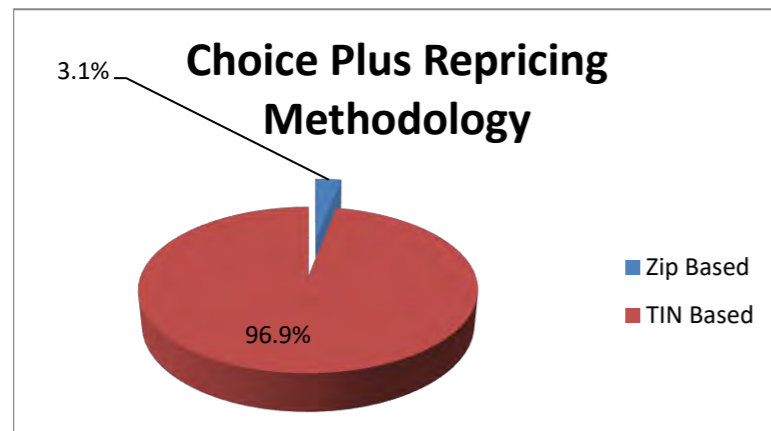
Other Notes (if applicable):

Footnotes:

- UHC Expected Allowed has been determined using zip 3 average discounts based on the UHC Book of Business by type of service and product.
- Zip 3 average discounts may be different than customer specific discounts based on their mix of facilities and services. This is for comparison to carriers who do not have the ability to reprice at a TIN level.

Repricing Summary
City of Gainesville (FL) Choice Plus TIN Summary
UnitedHealthcare, Inc., Proprietary & Confidential
Wednesday, July 10, 2024

Type of Service	Total Submitted		Charges Not Processed	INN (Par Providers)		Discount %	OON (Non Par Providers)		Discount %	Total All Providers		Discount %
	Charges			Charges	Allowed		Charges	Allowed		Charges	Allowed	
Inpatient	\$ 18,182,784	\$ -	-	\$ 18,182,784	\$ 5,894,120	67.6%	\$ -	\$ -		\$ 18,182,784	\$ 5,894,120	67.6%
Outpatient	50,425,303	-	-	50,425,303	14,104,526	72.0%	-	-		50,425,303	14,104,526	72.0%
Non Facility	18,285,853	922		15,854,708	6,338,246	60.0%	2,430,222	505,279	79.2%	18,284,931	6,843,525	62.6%
Total	86,893,940	922		84,462,795	26,336,892	68.8%	2,430,222	505,279	79.2%	86,893,018	26,842,171	69.1%



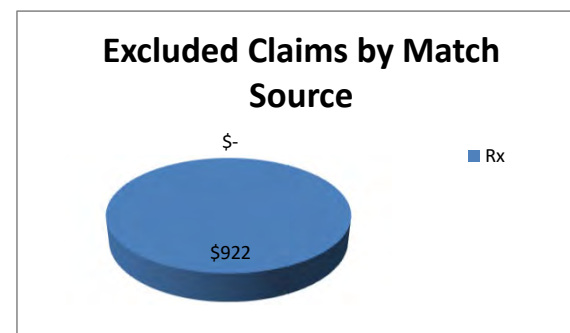
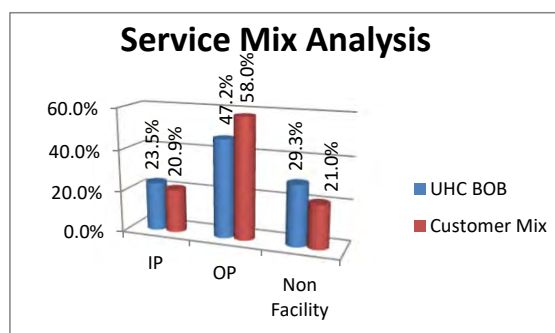
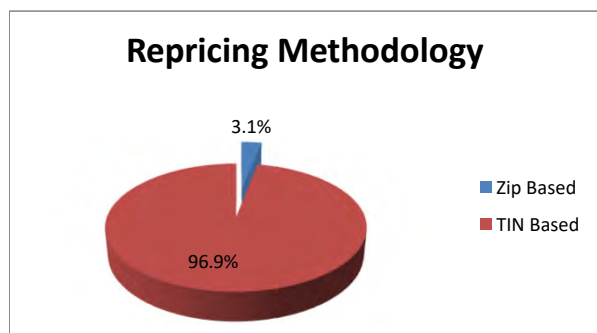
Other Notes (if applicable):

Footnotes:

1. This is an estimate only. Actual costs and discounts may vary based on a number of factors including member utilization and provider mix.
2. UHC's discount calculation is 1- (Allowed Charges/Eligible Charges).
3. UHC Expected Allowed has been determined using discounts based upon provider TIN, type of service, and product. A credibility limit has been established for each type of service (TOS). In cases where a TIN/TOS combination falls below this credibility level, a zip 3 average discount is used.
4. There is no consideration for network development activities that would result in better future overall discounts due to higher % of in-network reimbursement.
5. Rx and Invalid records have not been repriced.
6. For all out of network claims, Naviguard expected cost savings has been applied.

Repricing Summary
City of Gainesville (FL) NHP TIN Summary Expected Discounts
UnitedHealthcare, Inc., Proprietary & Confidential
Wednesday, July 10, 2024

Type of Service	Total Submitted Charges	Charges Not Processed	INN (Par Providers)			OON (Non Par Providers)			Total All Providers		
			Charges	Allowed	Discount %	Charges	Allowed	Discount %	Charges	Allowed	Discount %
Inpatient	\$ 18,182,784	\$ -	\$ 17,926,898	\$ 5,702,627	68.2%	\$ 255,887	\$ 64,257	74.9%	\$ 18,182,784	\$ 5,766,884	68.3%
Outpatient	50,425,303	-	50,145,159	13,578,758	72.9%	280,144	68,743	75.5%	50,425,303	13,647,501	72.9%
Non Facility	18,285,853	922	16,959,434	7,064,674	58.3%	1,325,497	275,963	79.2%	18,284,931	7,340,637	59.9%
Total	86,893,940	922	85,031,490	26,346,059	69.0%	1,861,528	408,962	78.0%	86,893,018	26,755,022	69.2%



Other Notes (if applicable):

Footnotes:

- This is an estimate only. Actual costs and discounts may vary based on a number of factors including member utilization and provider mix.
- UHC's discount calculation is 1- (Allowed Charges/Eligible Charges).
- UHC Expected Allowed has been determined using discounts based upon provider TIN, type of service, product, and expected trend. A credibility limit has been established for each type of service (TOS). In cases where a TIN/TOS combination falls below this credibility level, a zip 3 average discount is used.
- There is no consideration for network development activities that would result in better future overall discounts due to higher % of in-network reimbursement.
- Rx and Invalid records have not been repriced.
- For all out of network claims, Naviguard expected cost savings has been applied.



Medical Repricing Summary City of Gainesville (FL) Wednesday, July 10, 2024

This repricing analysis is intended to provide UnitedHealthcare's best approximation of future customer discounts and costs based upon the current mix of providers and services. Additional cost savings are achieved by UHC's clinical and cost management services and should be taken into consideration. This summary is a best estimate, but does not represent a discount guarantee. For all repricing methodologies the discount calculation used is 1-(minus) Allowed Charges divided by Eligible Charges.

Repricing Methodologies:

Page 1 - Provider Specific Projected Repricing

The provider specific projected repricing methodology applies projected discounts by Tax Identification Number (TIN) and type of service (inpatient, outpatient, or non-facility). Known and expected contract changes are reflected in the discounts applied. The analysis considers the group's specific provider utilization and mix of services, and adjusts for contract fluctuations. When a provider specific discount is not available, a zip-3 discount is applied.

Page 2 - Zip Repricing

In this methodology, discounts are applied based on zip-3 and type of service. The zip discounts reflect utilization based on the UHC book of business rather than the group itself. Provider TINs are not taken into consideration.

Page 3 - Provider Specific Expected Current Repricing

The provider specific repricing methodology applies expected current discounts by Tax Identification Number (TIN) and type of service (inpatient, outpatient, or non-facility). Known and expected contract changes are reflected in the discounts applied. The analysis considers the group's specific provider utilization and mix of services, and adjusts for contract fluctuations. When a provider specific discount is not available, a zip-3 discount is applied.

PDF Summary:

Total Submitted Charges

An ideal repricing starts with an eligible billed amount. This is a dollar amount that removes any ineligible/not covered amount, such as duplicate or denied charges. However, this amount is taken directly from the claims file and may not represent eligible charges. Should allowed or paid charges be supplied in the claims file, repricing with these charges will result in understated discounts being reported, given the incumbent's discounts have already been applied.

Charges Not Processed

All records that have not been included in the repricing analysis are located in the Charges not Processed section of the summary. Exclusions include, but are not limited to pharmacy claims and invalid records. Large amounts of exclusions may indicate poor claims data, such as records with insufficient TIN or zip detail.

INN (Par Providers)

Par records are determined from the disruption file. All records except those found in the Charges Not Processed and NoMatch (OON) have been included in the INN repricing. A provider specific repricing is performed where applicable. For those records where this cannot be achieved a zip-3 repricing is performed. The Repricing Methodology graph shows the percentage of providers repriced via TIN vs. zip-3 discounts. The greater the TIN match, the more the repricing results reflect the customer's specific provider mix.

OON (Non Par Providers)

Records showing a match source of NoMatch on the disruption analysis are deemed to be out of network. The default repricing methodology for OON records reflects Shared Savings Program (SSP) discounts. Non par claims are repriced with market level SSP discounts by type of service. MNRP or other alternate OON repricing methodologies can be reported upon request. The footnote section in the Repricing Summary states the non-par methodology that was applied in each specific analysis.

Total All Providers

This is a summary of all repriced records. This includes all INN (Par Providers) and OON (Non Par Providers).

Service Mix Analysis Graph

This shows the client's distribution of spend by service type compared to United's book of business. Any large variances should be reviewed. Aggregate discounts will vary based on the concentration of charges by service type.

*The sets of claim data we receive vary significantly in content and quality, and the field names and the definitions used by the various payers are not standard. It is necessary for us to interpret the information in each file and determine the data elements necessary for our repricing process. These differences can have an impact on the network value shown in the repricing analysis.

City of Gainesville:

Please answer the below question as part of your proposal:

What are the average network discounts for the area the census covers broken down by County:

Charge Type	Alachua County	Marion County	Levy County	Columbia County	Gilchrist County	Putnam County	Clay County	Union County	Bradford County
Doctors	55.4%	55.9%	61.5%	57.7%	58.4%	52.3%	57.4%	58.9%	55.6%
Outpatient Hospital	71.9%	72.9%	79.8%	76.2%	81.1%	76.4%	71.7%	77.9%	80.0%
Inpatient Hospital	67.6%	67.7%	66.8%	74.0%	70.3%	67.4%	65.0%	70.0%	64.4%
Urgent Care Centers	40.9%	34.2%	38.3%	57.5%	47.1%	61.5%	36.1%	60.3%	59.8%
Emergency Room	53.2%	61.3%	55.2%	57.8%	52.3%	61.3%	71.6%	72.7%	61.6%

City of Gainesville:

Please answer the below question as part of your proposal:

What are the average network discounts for the area the census covers broken down by County:

Charge Type	Alachua County	Marion County	Levy County	Columbia County	Gilchrist County	Putnam County	Clay County	Union County	Bradford County
Doctors	55.4%	55.9%	61.5%	57.7%	58.4%	52.3%	57.4%	58.9%	55.6%
Outpatient Hospital	71.9%	72.9%	79.8%	76.2%	81.1%	76.4%	71.7%	77.9%	80.0%
Inpatient Hospital	67.6%	67.7%	66.8%	74.0%	70.3%	67.4%	65.0%	70.0%	64.4%
Urgent Care Centers	40.9%	34.2%	38.3%	57.5%	47.1%	61.5%	36.1%	60.3%	59.8%
Emergency Room	53.2%	61.3%	55.2%	57.8%	52.3%	61.3%	71.6%	72.7%	61.6%



ASO MEDICAL FEES

Fees assume an Average Contract Size of 1.75

Our proposed fees are subject to the terms and conditions noted in the Financial Commentary provided with this response.

ASO Fees (PEPM)	Year 1	Year 2	Year 3
Plan Year	1/1/2025 through 12/31/2025	1/1/2026 through 12/31/2026	1/1/2027 through 12/31/2027
Choice+	\$35.70	\$35.70	\$35.70
NHP	\$35.70	\$35.70	\$35.70
Surest	\$57.12	\$57.12	\$57.12
Credits			
Administrative Credit (General Purpose)	\$75,000	\$75,000	\$75,000
Wellness Credit	\$150,000	\$150,000	\$150,000

The following services may require an additional cost (not applicable to Surest plans unless otherwise noted):

Additional Disease Management, Specialty and Wellness Programs (Fees are on a PEPM basis unless specifically noted)	Year 1	Year 2	Year 3
	1/1/2025 through 12/31/2025	1/1/2026 through 12/31/2026	1/1/2027 through 12/31/2027
Disease Management Programs:			
Congestive Heart Failure (VOM)	Included in Personal Health Support	Included in Personal Health Support	Included in Personal Health Support
Chronic Obstructive Pulmonary Disease (VOM)			
Coronary Artery Disease (VOM)			
Diabetes Program (VOM)			
Asthma Program (VOM)			
Clinical Specialty Network Programs:			
Neonatal Resource Services	Included	Included	Included
Medical Management Programs			
Core Medical Necessity	Included	Included	Included
Physical Health Solutions:			
Chiropractic Network	Included	Included	Included
Physical Therapy/Occupational Therapy/Speech Therapy Network	Included	Included	Included
Complementary Alternative Medicine (CAM) Network Management	Included	Included	Included
Other Programs/Services:			
PHS 3.0 Tier 2	Included	Included	Included
Behavioral Health Solutions	Included	Included	Included
Claim Fiduciary	Included	Included	Included
Pharmacy Data Integration	\$3.00	\$3.00	\$3.00
Third Party Stop Loss Reporting	\$3.50	\$3.50	\$3.50
Other Programs/Services (Fees collected through Bank Account):			
Onsite Customer Service Representative	Included	Included	Included
Child and Family Behavioral Coaching	\$240 Per Case	\$240 Per Case	\$240 Per Case
Child and Family Behavioral Coaching Month 2+	\$144 Per Case	\$144 Per Case	\$144 Per Case
Maven Maternity 12 Month Program	\$925 Per Case	\$925 Per Case	\$925 Per Case
Virtual Behavioral Coaching	\$72 Per Session	\$72 Per Session	\$72 Per Session
Virtual Behavioral Coaching Weekly Call	\$55 Per Session	\$55 Per Session	\$55 Per Session
Programs below apply to Surest only:			
Behavioral Health Network	Included	Included	Included
Surest Clinical Support	Included	Included	Included
Core Medical Necessity	Included	Included	Included
Physical Therapy/Occupational Therapy/Speech Therapy Network	Included	Included	Included
Transplant Resource Services	Included	Included	Included
Chiropractic Network	Included	Included	Included
Second Opinion Services (2nd MD)	Included	Included	Included
Claim Fiduciary	Included	Included	Included

The following are not included in the above ASO Fees (not applicable to Surest plans unless otherwise noted):

Additional Services	Fee
Naviguard	40.00% of savings
Transplant Resource Services Transplant Cost Negotiation Program	\$8,333 per negotiation
Payment Integrity (Fees collected through Bank Account):	
Coordination of Benefits	30% of the gross recovery or prevented amount
Pre-Pay	30% of the gross recovery or prevented amount
Post-Pay	30% of the gross recovery amount
Subrogation Services	33.3% of the gross recovery amount
Additional Services (Applies to Surest plans only)	Fee
Shared Savings	40.00% of savings
Transplant Resource Services Transplant Cost Negotiation Program	\$8,333 per negotiation
Payment Integrity (Fees collected through Bank Account):	
Coordination of Benefits	30% of the gross recovery or prevented amount
Pre-Pay	30% of the gross recovery or prevented amount
Post-Pay	30% of the gross recovery amount
Subrogation Services	33.3% of the gross recovery amount

*The fee per individual claim for Naviguard will not exceed \$20,000.00 per claim.

- Please refer to the Financial Commentary for additional services in the administrative fees and optional services that can be included for an additional cost

The following are included in the ASO Fees (applies to Active and Pre-65 Retiree population only, not applicable to Surest plans unless otherwise noted):

- UnitedHealthcare Pharmacy. If the pharmacy is carved out to another vendor, the ASO fees and Credits are subject to change.
- eServices Reporting - (interactive fully Web-based reporting)
- Federal External Review Program (third level appeals) - our Medical ASO fee includes a maximum of 5 reviews. Reviews in excess of this limit will be charged at \$500 per review.
- Advocate4Me Customer Service Model that provides participants with access to a one-stop advocacy resource for an unprecedented range of needs, including support and access to services across medical benefits, claims, pharmacy, clinical, incentives, and more. team organized around the account providing in-depth, actionable insights based on real-time data.
- Customer Service, our quoted customer service model offers members a high-touch, personal guide who provides support in navigating benefits, understanding payment options, resolving claim issues and working through the health care system. In addition to acting as a one-stop shop where members can be directed to the most appropriate existing services, representatives can provide additional information relevant to personal needs and take ownership of inquires end-to-end. For those not resolved during the initial call, customer service representatives take ownership until resolution including call back to the member.
- Employer Internet Solution – www.employereservices.com
- Our quote includes the management of over 100 disease states/conditions, as part of our Personal Health Support (PHS) program. We believe this approach will adequately address the clinical conditions present within the population - though we are open to discussing and proposing alternative programs, should clinical prevalence indicate an appropriate ROI.
- Consumer Activation, including basic navigation guide, health statements with individualized messaging, advanced concierge call services, and access to member portal with consumer activation messaging
- UnitedHealthcare will duplicate requested plan of benefits in principle and in a manner compatible with our understanding of the basic plan designs. Our quotation may be adjusted contingent upon review of all Medical plan design specifics. Our fees may be adjusted, or changes to the plans may be required to enable us to administer claim payments.
- A detailed list of the services included and assumed in our quotation are outlined in the Financial Commentary.
- Our proposal including all aspects of pricing and performance guarantees are based on the assumed packaged set of services as outlined in the Financial Commentary. Any deviations to this set of services gives us the right to revise our quote.

Pricing Assumptions

- The Plan or its sponsor is responsible for state or federal surcharges, assessments, or similar taxes or fees imposed by governmental entities or agencies on the Plan, Plan Sponsor or us, including but not limited to those imposed pursuant to the Patient Protection and Affordable Care Act of 2010 (PPACA), as amended from time to time. This includes responsibility for determining the amount due, funding, and remitting the PPACA Transitional Reinsurance fee and the PCORI fee which are remitted to the government (federal and/or state).
- The fees quoted do not include state or federal surcharges, assessments, or similar taxes/fees imposed by governmental entities or agencies on the Plan, Plan Sponsor or UnitedHealthcare. We reserve the right to adjust the rates (i) in the event of any changes in federal, state or other applicable legislation or regulation; (ii) in the event of any changes in plan design or procedures required by the applicable regulatory authority or by the sponsor; and (iii) as otherwise permitted in the Administrative Services Agreement.
- The administrative fees set forth herein do not include fees related to the requirements set forth in the Consolidated Appropriations Act, 2021, including the No Surprises Act. Additional fees for these new regulatory requirements will be provided at a future date once regulatory guidance is received and final compliance requirements are determined.
- UnitedHealthcare reserves the right to revise this quotation under the following circumstances:
 - The total number of enrolled medical employees varies by more than 10 percent from the assumed medical enrollment of 1919
 - The average contract size, defined as the total number of enrolled employees plus dependents divided by the total number of enrolled employees, varies by 10 percent or more from the assumed average contract size of 1.75.
 - The benefits or service requirements requested and/or quoted change prior to or after the effective date.
 - In the event of any changes in federal, state or other applicable legislation or regulation that require changes to this quotation.
 - In the event of any changes in plan design required by the applicable regulatory authority or by the Plan sponsor.
 - In the event that any taxes, surcharges, assessments, or similar charges are imposed by governmental entities or agencies on the Plan or UnitedHealthcare, in its role as administrator or insurer.
 - As otherwise permitted in our Administrative Services Agreement
- Our mature quotation includes the processing of runout claims for 6 months following the termination of our contract.
- If pharmacy benefits are carved out the ASO fees quoted above may be revised.

- Customer will only receive Rebates to the extent that Rebates are actually received by United. For example, if a government action or a major change in pharmaceutical industry practices eliminates or materially reduces manufacturer Rebate programs, Customer's payment amount may be reduced or eliminated. In such event, United shall promptly notify Customer and revise or eliminate such payment effective with the date of the reduction or elimination in Rebate payments. In addition, reduction or elimination of Rebates in this event shall constitute a change in the Agreement as described in the Fees Section such that United has the right to increase the fees for the Pharmacy Benefits Management services or increase the percentage of Rebate dollars retained by United.
- We reserve the right to adjust our rebate guarantee if changes made to our prescription drug list (PDL) for the purpose of achieving lower net drug cost for CITY OF GAINESVILLE (FL) and our other ASO customers result in significant reductions to the rebate level.
- CITY OF GAINESVILLE (FL) will receive 100.0% of rebates on prescription drug products dispensed under the medical benefit plan.
- Commissions are excluded.
- This quotation assumes UnitedHealthcare will retain claim fiduciary responsibility
- United will provide a Wellness Credit, Administrative Credit (General Purpose) to help CITY OF GAINESVILLE (FL) mitigate costs associated with additional wellness services from United, administration of the plan□
These credits are available as follows:
 - The parties must have an executed Agreement.
 - The first month of service fees under the Agreement has been received by United.
 - CITY OF GAINESVILLE (FL)'s enrollment with United must always exceed 1917 Employees.
- Credits must be used between 01/01/2025 and 01/01/2026. Any Credits not used during this time period are forfeit.
- Upon request from CITY OF GAINESVILLE (FL), a credit will be issued in United's fee billing system.
- Upon presentation of receipts for costs, a credit will be issued in United's fee billing system in the amount of the receipted expenses, total amount not to exceed the full credit.
- If CITY OF GAINESVILLE (FL) terminates the Agreement prior to 12/31/2027, CITY OF GAINESVILLE (FL) will repay United a prorated portion of the amount of credit that has been paid as of the termination date. All unpaid credits are forfeit.
- If enrollment with United falls below the enrollment threshold, CITY OF GAINESVILLE (FL) will repay United an amount proportional to the enrollment reduction based on the amount of the credit paid at the time enrollment falls below the threshold.
- The amount of the credit not yet paid is reduced proportional to the enrollment reduction.
- If during the course of the first year unforeseen or additional expense items arise related to the CITY OF GAINESVILLE (FL) implementation, UHC reserves the right to use a portion of this credit to offset such expenses.
- Onsite Customer Service Representative is included and billed through the bank account at \$6.52 PEPM.



CITY OF GAINESVILLE (FL) Stop Loss Exhibit

Effective Date: 1/1/2025-12/31/2025

This document may contain protected health information (PHI) and should only be shared with individuals designated to view such

Individual Stop Loss

ISL Total Quoted Subscribers

ISL Rate PEPM

ISL Deductible

ISL Liability Limit (per individual)

ISL Contract Basis

ISL Includes Early Retirees

ISL Includes Medicare Retirees

ISL Includes RX

ISL Includes Commissions

Lasered Claimants**

Total Stop Loss Premium PEPM

Monthly Stop Loss Premium Cost

Annual Stop Loss Premium

ISL Proposed Option 1

1,925

\$57.06

\$375,000

Unlimited

24/12

Yes

No

Yes

No

TBD

\$57.06

\$109,841

\$1,318,086

Stop Loss Rating Assumptions

- The stop loss attachment points and premium rates provided by UnitedHealthcare in this quotation will be effective from 1/1/2025-12/31/2025.
- Our quotation is based on new dates of loss and claims with dates of services on or after the effective date of 1/1/2025.
- COBRA enrollees do not make up more than five percent of the total covered population.
- The benefits or service requirements requested and/or quoted do not change prior to or after the effective date.
- Changes in federal, state or other applicable legislation or regulation do not require changes to this proposal.
- Stop loss protection benefits are based on the proposed plan of benefits. CITY OF GAINESVILLE (FL) will provide UnitedHealthcare® with a copy of the plan document when finalized. UnitedHealthcare® reserves the right to change the rates for the stop loss policy if the plan of benefits in the finalized plan document differs from the proposed plan of benefits.
- Individual Stop Loss claims will accumulate toward the stop loss on an issued basis.
- This proposal is contingent upon the review of claims information (including large claims) updated within 120 days of the effective date.
- Accelerated Reimbursement is a process in which the stop loss carrier will expedite the eligible claim reimbursement to a group when an individual exceeds the Individual Specific Deductible and Aggregating Specific Deductible, if applicable. Claim requests
- Claim appeals approved by an Independent Review Organization (IRO) as provided in the Patient Protection and Affordable Care Act (PPACA) will be reimbursed according to the terms and conditions of the Stop Loss Policy.
- Government surcharges, pool charges, covered lives assessments, and PPO access fees are not covered by the Stop Loss Policy.
- Actively at work provision for employee and non-confinement provision for dependent's) waived subject to disclosure.
- All claimants reported in the request for proposal as being "deceased", "terminated", "waived", and "not covered" are excluded from stop-loss coverage. If UHC later learns of any material inaccuracy in such information, or failure or refusal to disclose any such information, including all claims or possible claims which you would know about, we may reject a claim to which such information applies, reject the application, change the terms, conditions, premiums or void coverage. Quote is contingent on A 75% minimum participation is required unless specifically approved by underwriting.
- UnitedHealthcare may pay the selling broker for the promotion, sale, and renewal of the products and services offered in this proposal. In addition to our standard compensation, we may make additional cash payments or reimbursements to selling brokers in recognition of their marketing and distribution activities, persistency levels, and volume of business.

For New York situs business, we may pay reduced compensation where fewer services are offered and increased compensation where more services are provided. Producers must comply with the specific compensation disclosure requirements of New York Regulation 194.

General Exclusions Provisions

UnitedHealthcare will not reimburse Policyholder for any of the following:

- Any payment which does not strictly comply with the terms and conditions of the Plan Document;
- Any payment for claims that are not covered as part of the underlying plan design (i.e. FSA, HRA & HSA dollars are excluded).
- Any payment or expense caused by or resulting from war, declared or undeclared or international armed conflict;

- Any payment for litigation costs and expenses, extra-contractual damages, compensatory damages, interest, exemplary and punitive damages or liabilities, including but not limited to those resulting from negligence, intentional wrongs, fraud, bad faith or strict liability on the part of the Policyholder, Plan, Administrator or any agent or representative of the Policyholder, plan or Administrator;
- Any payment for occupational accidents or illnesses which are also eligible expenses covered by Workers' Compensation or Occupational Disease law, or similar legislation, whether or not coverage under such law is actually in force.
- Any payment associated with benefits not covered by the underlying employee benefit plan, which are nevertheless paid by the employer.

Individual Stop Loss Underwriting Considerations [Disclosure form is required]

UnitedHealthcare will require the receipt of a signed Employer Disclosure Statement no sooner than 60 days prior to the effective date. Information must include diagnosis, prognosis, current and proposed treatment plans, and current status of the claimant and total claim amounts paid to date. UnitedHealthcare reserves the right to set separate individual stop loss risk levels or exclude specific individuals from coverage based upon the disclosure statement. If the information requested on the disclosure statement is not available for all or some of the employees, we reserve the right to adjust our quoted rates, or remove our quotation from consideration. A copy of the Employer Disclosure Statement is provided at the end of this document.

UnitedHealthcare reserves the right to revise this quotation under the following circumstances:

- An award is not made within 90 days of the issuance of this quotation.
- If the number of covered medical employees varies by more than ten percent from our quoted level of 1925
- The average contract size, defined as the total number of enrolled members divided by the total number of enrolled employees, varies by ten percent or more from the assumed average contract size of 1.74
- The actual enrollment by product varies by ten percent or more from the following:

Product	Subscribers
Choice+	1,917
Surest	1
NHP	1

24/12 Individual Stop Loss Underwriting Considerations

- Will require CITY OF GAINESVILLE (FL)'s agreement that UnitedHealthcare may audit claims incurred during the run-in period with the incumbent.
- Our 24/12 quotation is based on claims with dates of loss on or after 01/02/2024 and paid on or after 01/01/2025 effective date.
-
- As part of this 24/12 ISL offer UnitedHealthcare is not offering to administer the processing of the run-in claims. Under this arrangement, the prior claims administrator will continue to adjudicate claims with dates of service prior to the effective date of our Stop Loss Policy. Those claims that were incurred during the run-in period prior to the effective date that are paid during the initial
- We recommend that CITY OF GAINESVILLE (FL) have the run-out administrator prepare reports that show any individual whose claims exceed 50% of the ISL deductible. UnitedHealthcare will run similar reports on the claim activity that they adjudicate
- Any individual's claims that appear on either of the reports is a potential ISL claim. By adding the claims from the large loss '50% report' to the individual's claims on the other platform will provide the total claims to be accumulated against the ISL deductible.

- If UnitedHealthcare claims exceed the 50% level, will need to gather and supply the other administrator's records on that individual to develop the total ISL accumulation. The report from the prior administrator must contain:
 - Diagnosis
 - Billed Amounts
 - Paid Amounts
 - Dates of Services
 - Dates of Payments
 - Check Numbers
- UHC may, for any individual, require the customer to supply additional details of the claims on individuals whose claims may qualify for an ISL claim.
- This quotation requires a minimum of 120 days lead-time from notice of sale to the plan effective date for implementation.
- This contract will renew to a "Paid" basis.



	Plan 1 Current Plan	Plan 2 Alternate Plan
Plan Name	CRXN MOD	BXKN MOD
Product	Choice+ Legacy	Choice+ NHP
Multiple Option with: HRA or HSA	0 No	0 No
	Network	Network
Office Copay (PCP/SPC)	PCP \$15, SPC D&C	PCP \$15, SPC D&C
Other Copays (IP/UC/ER)	IP D&C, UC \$30, ER D&C	IP D&C, UC \$30, ER D&C
Deductible (Indiv/Fam)	\$600/1800	\$600/1800
Coinsurance	80%	80%
Out-of-Pocket (Indiv/Fam) Pharmacy Plan	\$4500/7500 UHC \$10/50/80; 2.0 MO Natl	\$4500/7500 UHC \$10/50/80; 2.0 MO Natl
	Out of Network	Out of Network
Deductible (Indiv/Fam)	\$600/1800	\$600/1800
Coinsurance	60%	60%
Out-of-Pocket (Indiv/Fam)	\$5000/10000	\$5000/10000
	Projected Claims	Projected Claims
Assumed Enrollment	1917	0
Expected Claims (Immature)	\$996.74	\$956.87
Expected Claims (Mature)	\$1,172.64	\$1,125.73
Maximum Claims	N/A	N/A

*Medical and Pharmacy Plan Design provided highlights the core plan design features. The Summary Plan Description will provide full plan design.
 Note: Expected and Maximum claims are based on Stop Loss Option 1 illustrated in the Stop Loss Exhibit.



Effective Date: 01/01/2025

Performance Standards and Credits

Effective for the period: January 01, 2025 through January 01, 2026

Category	Guarantee Description	Measurement Criteria	Credit Amount
Administrative Services			
Implementation	These guarantees apply only to the initial implementation.		
1. ID Cards.	99% mailed within 10 business days after final member eligibility is received, system loaded and passes a quality assurance check.	Date ID Cards are mailed.	\$8,300
2. Electronic Claim Ready Date	Electronic Claim Ready by the effective date or within 18 business days after account structure is entered into the system, final member eligibility is received, and benefit plan design is finalized.	Date plan benefits and employee and dependent eligibility data is system loaded.	\$8,300
3. Medical Eligibility Initial Implementation File	Load all medical eligibility to eligibility system within 3 business days of receipt. This is applicable to Initial Implementation file only, does not apply to paper eligibility (i.e. Spreadsheet Solutions/xTool).	Elapsed time from date file is received to the date upon which the electronic file is loaded into the eligibility system.	\$8,300
Claim Operations			
1. Time to Process: percent of claims paid in 10 business days	94.00 % in ten business days Gradients are 94.00% within 11 business days 94.00% within 12 business days 94.00% within 13 business days 94.00% within 14 business days 94.00% within 15 or more business days	Site level, by standard claim operations reports.	\$1,660 \$3,320 \$4,980 \$6,640 \$8,300
2. Dollar Accuracy: Percentage of claims dollars processed accurately.	99.00% Gradients are 98.99%-98.50% 98.49%-98.00% 97.99%-97.50% 97.49%-97.00% Below 97.00%	Office level.	\$1,660 \$3,320 \$4,980 \$6,640 \$8,300
3. Procedural Accuracy: percent of claims processed without non-financial error.	97.00% Gradients are 96.99%-96.50% 96.49%-96.00% 95.99%-95.50% 95.49%-95.00% Below 95.00%	Office level.	\$1,660 \$3,320 \$4,980 \$6,640 \$8,300
Customer Phone Service			
1. Average Speed to Answer.	30 seconds or less Gradients are 32 seconds or less 34 seconds or less 36 seconds or less 38 seconds or less Greater than 38 seconds	Team level	\$1,660 \$3,320 \$4,980 \$6,640 \$8,300
2. Abandonment Rate.	1.80% Gradients are 1.81%-2.30% 2.31%-2.80% 2.81%-3.30% 3.31%-3.80% Greater than 3.80%	Team level	\$1,660 \$3,320 \$4,980 \$6,640 \$8,300
3. Call Quality Score	93.00% Gradients are 92.99%-91.00% 90.99%-89.00% 88.99%-87.00% 86.99%-85.00% Below 85.00%	Office level	\$1,660 \$3,320 \$4,980 \$6,640 \$8,300
Member Satisfaction			
1. Claimant & Key Customer Overall Satisfaction	80% satisfaction score based on % responding: Completely Satisfied, Very Satisfied and Somewhat Satisfied Products are PPO, POS, EPO, Managed Indemnity, HMO	Telephone Survey Based on UNET Service Center performance scores. Key Customer study may be conducted for an additional charge.	\$4,150
Overall UHC Satisfaction			
1. Employer health care decision makers	Based on the response to the question, "Overall, how satisfied are you with UnitedHealthcare?" If the response is a score of 5-10 on the 0-10 scale where 0 means very dissatisfied and 10 means very satisfied, the guarantee has been met.	Based on Employer health care decision makers' overall satisfaction with UnitedHealthcare..	\$4,150
Total At Risk			\$83,000

Medicare Supplemental and Surest plans are excluded from Performance Guarantees.

Confidential/Proprietary/Competitively Sensitive Information

Administrative Services Assumptions

UnitedHealthcare® is pleased to provide the following checklist to describe services for CITY OF GAINESVILLE (FL)'s medical, managed pharmacy, mental health and substance abuse employee benefits plans.

Although the final terms of the arrangement will be reflected in the contracts between CITY OF GAINESVILLE (FL) and the applicable UnitedHealth Group® affiliate/contracting entity, this document will provide supplemental information to the financial exhibits.

The quotation presented in the financial exhibits was based on the assumptions outlined in this document. The information contained in this proposal is confidential.

This quotation requires a minimum of 120 days lead-time from notice of sale to the plan effective date for implementation.

Before a final agreement is reached, we will require financial statements providing information satisfactory to UnitedHealthcare indicating CITY OF GAINESVILLE (FL)'s ability to meet financial obligations under the plan.

Financial statements required include a Balance Sheet, Income Statement and Cash Flow Statement. Financial information must be up-to-date to within the most recent quarter available and include at least one year of data. Data must also include supporting documentation and footnotes.

The required minimum balance is based on your financial condition as viewed by us. We will require that you provide certain financial information for evaluation to determine your ability to meet financial obligations under the agreement. The required balance may be revised based on that evaluation.

Standard and Additional Services

The following is a checklist of the standard administrative services offered by UnitedHealthcare. In addition to our standard services, we have indicated those additional services that are offered at an additional fee.

Any service not specifically listed within this document is assumed to be excluded from quoted fees.

A. Account Management Services

Service	Included in Medical Fee	Comments
Implementation and maintenance of account.	Yes	
Enrollment meetings and support with representatives available for enrollment meetings in locations with 100 or more employees on a mandatory attendance basis, or 300 or more employees on a voluntary attendance basis, and for health fairs in locations with 500 or more employees.	Yes	This assumes local business travel and normal hours. Minimum six week notice of meeting.

Standard initial enrollment materials including: <ul style="list-style-type: none"> ■ Benefit plan brochures and promotional materials ■ Pre-member websites ■ Web-based and digital communications ■ Directions for accessing our directory of physicians and other health care professionals via myuhc.com®. 	Yes	
Home mailing of enrollment kits.	No	
Ongoing account management including: <ul style="list-style-type: none"> ■ Designated account resources under the direction of a Strategic Client Executive. ■ Ongoing management and review of benefits and data. 	Yes	
Summary Plan Description (SPD) Assistance.	Yes	CITY OF GAINESVILLE (FL) is responsible for the legal sufficiency of these booklets.
CITY OF GAINESVILLE (FL) will develop the (SPD) describing the plan(s). For purposes of this provision, plan means each individual plan design. When developing the SPD, we will provide CITY OF GAINESVILLE (FL) with one non-customized template SPD per product to assist in development efforts. CITY OF GAINESVILLE (FL) will provide us with a copy of the SPD for review in a timely manner. We will review that draft and a final draft of the SPD that CITY OF GAINESVILLE (FL) provides to us.		
Summary of Benefits and Coverage Electronic version provided to employer. <ul style="list-style-type: none"> ■ Standard UHC format ■ Includes only benefits administered by UHC ■ Maximum of two requests per year (initial request and up to 1 amendment) 	Yes	Additional charges will apply for printing and/or mailing; inclusions of benefits not provided by UHC, requests in excess of two per year, approved customization.
Plan documents.	No	ERISA places the obligation for the creation of plan documents on the employer (plan sponsor).
Standard accounting structure: <ul style="list-style-type: none"> ■ Suffixes to accommodate separate claims reporting for different benefit plans. ■ Claim accounts to accommodate separate claims data for different locations and groups. 	Yes	Maximum of 25 distinct suffix/account splits.
Maintenance of up to 3 separate benefit plans.	Yes	Maintenance of additional benefit plans may incur additional cost.
Online services accessed through our Employer eServices Web site include (depending on your benefit plan): customer reporting solutions; electronic billing solutions; and online administration options that include online eligibility maintenance, claim status inquiry, request ID card, and secure messaging. Online tutorials and toll-free customer service also are available.	Yes	Customer reporting solutions and claim status inquiry are not available for Surest plans.

<p>In addition to being a resource for your specific plan information and covered employee population, uhceservices.com offers online access to your premium invoices and payments. In the Billing and Payment Center of the website, you can:</p> <ul style="list-style-type: none"> ■ View, download and print invoices ■ Pay your bill ■ View payments, balances, and statements ■ Request a Billed vs. Paid report ■ Manage banking information ■ Establish an agreement to enable automated monthly payments or to simply pay online ■ Request adjustment invoices and view adjustments after eligibility changes 	Yes	
---	-----	--

B. Eligibility Management Services

Service	Included in Medical Fee	Comments
Standard ID card production and issuance.	Yes	
UnitedHealthcare-generated alternative member ID numbers (not based on SSN).	No	
CITY OF GAINESVILLE (FL) provided alternative member ID numbers (not based on SSN).	No	Standard UHC guidelines required
<p>Electronic Eligibility Processing</p> <p>Electronic enrollment processing:</p> <ul style="list-style-type: none"> ■ Each submission to be a single consolidated file that includes data for all customer locations. Separate eligibility submissions for COBRA (one file that includes data for all customer locations) are acceptable. <p>Submission format:</p> <ul style="list-style-type: none"> ■ UnitedHealth Group® Standard 3005 Format; HIPAA 834 Compliant Format ■ Single data source required. <p>Submission frequency:</p> <ul style="list-style-type: none"> ■ (Preferred) Changes file daily in combination with a full population file on a monthly schedule. <p>Or</p> <ul style="list-style-type: none"> ■ (Acceptable) Changes file weekly or bi-weekly in combination with a full population file on a monthly or quarterly schedule. <p>Or</p> <ul style="list-style-type: none"> ■ (Acceptable) Full file weekly or bi-weekly. <p>Transmission method:</p> <ul style="list-style-type: none"> ■ FTP with UHT-approved encryption – (Preferred). ■ Direct connect (Acceptable). 	Yes	If it is determined that eligibility processing will require additional file submissions or the format differs from the standards noted, we will evaluate those deviations – which may incur additional cost.

C. Banking Services

This document is confidential and proprietary UnitedHealthcare information and may be used only by personnel in relation to this quote.

Service	Included in Medical Fee	Comments
Banking		
Central Banking	Yes	All applicable banking letters and other required agreements must be executed a minimum of 15 days prior to the effective date in order to implement the banking arrangements.
One bank account established at Bank of America. CITY OF GAINESVILLE (FL) pre-authorizes daily transfer of funds (UnitedHealthcare initiated) to cover the amount of funds which have been withdrawn from your bank account during the one working day period using Daily ACH transfer.		
CITY OF GAINESVILLE (FL) provides deposit and maintains a balance in bank account equal to not less than 2 days of expected bank account activity for Daily ACH transfer.		
This amount will be based on 2 days of mature expected plan benefit payments with appropriate adjustments for anticipated non-daily activity (e.g., prescription drug benefits and other routine administrative fee payments).		
The required minimum balance is based on your financial condition as viewed by us. We will require that you provide certain financial information for evaluation to determine your ability to meet financial obligations under the agreement. The required balance may be revised based on that evaluation.		
Standard online banking reports to include: Detail Daily Statistics, Summary and Net Charge Distribution, Issued-Not-Paid Outstanding Check, and Aged Outstanding reports,.	Yes	

D. Underwriting and Financial Services

Service	Included in Medical Fee	Comments
Overall program accounting (year-end reconciliation).	Yes	
Annual projection of cost impact for benefit design changes.	Yes	
Annual reserve estimates.	Yes	
Annual government filings of 1099 reports to the IRS regarding payments made to physicians and other health care professionals.	Yes	
Provide required data necessary to enable CITY OF GAINESVILLE (FL) to file Form 5500.	Yes	

E. eServices® Customer Reporting Services

Service	Included in Medical Fee	Comments
---------	-------------------------	----------

This document is confidential and proprietary UnitedHealthcare information and may be used only by personnel in relation to this quote.

An expanded online customer reporting system, offering online Internet based statistical and financial reports. Up to five customer IDs are included.	Yes	There is an additional annual charge of \$1,000 for each ID in excess of five. □ Not available for Surest plans.
An expanded online customer reporting system,	No	An additional fee of \$23,000 per year plus
Health Plan Manager	Yes	
Our proprietary tool that enables segmentation of CITY OF GAINESVILLE (FL)'s data by dozens of attributes-enabling analysis of financial, clinical and individual decision-making patterns. With this enhanced capability, we can provide CITY OF GAINESVILLE (FL) with a targeted, data-driven strategic roadmap to optimize your overall health plan performance.		
Non-standard or ad hoc reports, or standard reports at a non-standard frequency.	No	
Monthly Statistical Data Extracts	No	Available for an additional charge.
Interface with third party stop loss vendor.	No	If CITY OF GAINESVILLE (FL) elects a carrier other than UnitedHealthcare Insurance Company for their stop loss coverage, there is an additional fee for UnitedHealthcare to prepare and provide claim statistical reports designed to meet the requirements of most insurers, to support the customer's filing of Individual Stop Loss (ISL) claims. If the customer's third party stop loss insurer requires additional claim detail records beyond the reports, UnitedHealthcare has additional services available for an additional fee.

F. Claims Administration Services

Service	Included in Medical Fee	Comments
Plan implementation of CITY OF GAINESVILLE (FL)'s	Yes	

employee benefits plans, set up of benefit design, eligibility data, and a testing of sample claims.		
Standard claims processing including: <ul style="list-style-type: none"> ■ Re-pricing and payment of claims. ■ Auto and manual adjudication using proprietary software. ■ Claim edit/review and cost containment program including utilization of software to evaluate claims prior to payment to guard against inappropriate unbundling of reimbursement requests. ■ Subsequent claim review. 	Yes	
Standard claim forms (when applicable).	Yes	
Medical claim review of specific health care claims to promote coding accuracy, benefit interpretation, and apply reimbursement and medical policy including utilization of software to evaluate claims prior to payment to guard against inappropriate unbundling of reimbursement requests.	Yes	
Notification of claims in excess of \$250,000. Notification will exclude Protected Health Information (PHI), but will include date claim processed, claim number, patient relationship, amount paid, product type, plan variation, first and last date of service, primary diagnosis code, and EOC remark codes.	Yes	
Production of monthly electronic Health Statements , which summarizes all claim activity for the previous period, including remaining account balances for deductibles, out-of-pocket expenses, and other pertinent health-related information to help consumers.	Yes	Not available for Surest plans.
UnitedHealthcare will retain claim fiduciary responsibility for the UnitedHealthcare-administered medical benefit plan.	Yes	
Federal External Review Program (Voluntary third level appeal).	Yes	Our Medical ASO fee includes a maximum of 5 reviews. Reviews in excess of this limit will be charged at \$500 per review.
Our mature fee quotation includes the processing of run-out claims for 6 months following the termination of our contract.	Yes	
During the term of the Agreement or six months following termination, CITY OF GAINESVILLE (FL) or its representatives may perform an annual audit of UnitedHealthcare services, at its own expense, subject to UnitedHealthcare standard requirements regarding prior notice, confidentiality, scope, length, time and place, and findings.	Yes	CITY OF GAINESVILLE (FL) is obligated to pay incurred audit expenses. Other charges may apply if the audit does not meet UnitedHealthcare standards.

G. Payment Integrity

Service	Included in Medical Fee	Comments
<p>Coordination of Benefits: Prospective use of analytics, algorithms, and proprietary datasets to identify members that have other insurance as primary</p>	No	30% of the gross recovery or prevented amount.
<p>Pre-Pay: Prospective services to help ensure accurate claim payment.</p> <ul style="list-style-type: none"> •Detection and recovery of wasteful, abusive, and/or fraudulent claims. •Search claims for patterns which indicate possible waste or error by identifying specific claims for additional review or for an adjustment. •Evaluate claims to identify inappropriate levels of care, coding and/or resource utilization. •Review of claims for inappropriate billing of services not documented in clinical notes by Board certified, same-specialty medical directors. •Prospective review of facility claims based on an itemized bill review. Analytics identify claims, record request sent to provider, claim is adjusted/denied based on review of those records •More expansive edits after the internal payment policy edits and are more expansive to identify claims that may need an adjustment. 	No	30% of the gross recovery or prevented amount.
<p>Post-Pay: Retrospective services to help ensure accurate claim payment.</p> <ul style="list-style-type: none"> •Detection and recovery of wasteful, abusive, and/or fraudulent claims. •Search claims for patterns which indicate possible waste or error by identifying specific claims for additional review. •In-depth review of hospital medical records or other related documentation compared to claimed amounts to ensure billing accuracy. •Review, validate, and recover credit balances (dollars) on existing patient accounts through a combination of analysis and technology, on-site at hospitals and facilities. •Large-scale analytics to identify additional recovery opportunities; claims re-examined every month for up to 12 months. 	No	30% of the gross recovery amount.

<p>Subrogation: Services to prevent the payment of Plan benefits, or recover Plan benefits, which should be paid by a third party.</p> <ul style="list-style-type: none"> •Plan benefits, which should be paid by a third party. •Does not include benefits paid in connection with coordination of benefits, Medicare, or other Overpayments. •Customer will not engage any entity except United to provide such services without prior United approval. 	No	33.3% of the gross recovery amount.
<p>Claims Tracking and Validation (CTV) is a pre-pay program that targets and prioritizes potential billing errors for manual review and correction.</p>	No	<input type="checkbox"/> Not available for Surest plans.

H. Member Services

Service	Included in Medical Fee	Comments
<p>Toll-free access to a customer care center, staffed by customer care professionals, during the hours of 7:00 a.m. to 10:00 p.m., in the enrollee’s time zone</p>	Yes	Surest plans include toll-free access to a customer care center, staffed by customer care professionals, during the hours of 6:00 a.m. to 9:00 p.m. central time zone.
<p>Advocate4Me Customer Service Model that provides participants with access to a one-stop advocacy resource for an unprecedented range of needs, including support and access to services across medical benefits, claims, pharmacy, clinical, incentives, and more.</p>	Yes	Not available for Surest plans.
<p>Surest Member Services: From self-service to full-service, Surest gives people power over their health experience. We provide instant answers, low prices, treatment options, navigation support, choice and flexibility. Health insurance at their fingertips and on their side. With three tiers of member support and licensed clinical advocates, members receive support that uncovers unmet needs and elicits their preferences for empathetic individualized support.</p>	Yes	Included on Surest plans only.

<p>Access for your employees to our myuhc.com member website. Our integrated portal gives members access to tools and information from one starting point so they can:</p> <ul style="list-style-type: none"> ■ Learn more about benefits and coverage ■ Find a provider or facility based on personal preferences and cost and quality evaluation (and send the provider's information directly to a text-enabled cell phone) ■ Estimate treatment costs and evaluate care paths and treatment options based on medical condition or the procedure needed, personal preferences and quality evaluation ■ Check claim status and history and manage claims, including the capability for subscribers to pay out-of-pocket amounts to their providers online ■ Print a temporary ID card or request a new one ■ Manage prescriptions and access pharmacy tools via the Pharmacies & Prescriptions tab ■ Access health care tools and information on the Health & Wellness tab ■ Links to pharmacy, mental health/substance abuse, vision, FSA, HRA, HSA, and/or dental sites, if services provided by UnitedHealth Group. 	Yes	<p>Not available for Surest plans. □</p> <p>Surest members can access tools and information on Surest.com</p>
<p>Online health assessment tool accessed through the myuhc.com member Web site.</p> <ul style="list-style-type: none"> ■ A comprehensive health and lifestyle survey that measuring lifestyle habits and health-related risk areas. ■ Immediate online feedback and results provided to the participant. 	Yes	Not available for Surest plans.

I. Network Services

Service	Included in Medical Fee	Comments
<p>Network access, management and administrative activities including physician (and other health care professional) relations, clinical profiling, credentialing, and contracting (including value-based payment programs, such as performance based models), and network analysis and system development.</p>	Yes	Standard on all network plans. Clinical incentive and bonus payments are collected through the bank account.
<p>UnitedHealth PremiumSM Designation Program which recognizes physicians and hospitals whose practices are consistent with evidence and consensus-based standards of practice.</p>	Yes	Available in designated markets.
<p>Access to networks of chiropractic and complementary alternative medicine providers through the Optum Physical Health network.</p>	Yes	
<p>Physical Health Chiropractic Clinical Support which promotes evidence-based chiropractic care through sharing evidence-based protocols and guidelines with practitioners. A notification requirement for network chiropractors applies.</p>	No	Not available for Surest plans.

<p>Transplant Resource Services , including access to our Transplant Resource Services Centers of Excellence Network and Transplant Access Program, travel and lodging benefit, and Personal Health Support.</p>	Yes	
<p>Transplant Resource Services Transplant Cost Negotiation Program, negotiated discounted reimbursement rate for transplant recipients utilizing non-contracted facilities for transplants.</p>	No	Additional fee per negotiation will apply.
<p>Reports when members use Network Providers that participate in Alternative Payment Methodologies.</p>	No	Reports indicate your funding of the Alternative Payment Methodologies
<p>Maximum Non-Network Reimbursement Program (MGRP) for non-emergency non-network claims.</p>	No	No additional charge if adopted.
<p>Reimbursement at 110% of Medicare.</p>		
<p>Shared Savings Program</p> <p>Provides savings on select non-Network facility and physician claims that are not eligible for standard network discounts.</p> <p>Provides access to discounted charges from health care providers who contract or will negotiate with a third party to provide discounted charges.</p>	No	<p>Customer will pay a fee equal to 40.00% of the Savings Obtained as a result of the Shared Savings Enhanced Program, to be paid through a withdrawal from the Bank Account. □</p> <p>Applies to the Surest plans only</p> <p>Savings Obtained means the amount billed by a health care provider minus the final amount paid to the health care provider pursuant to the out-of-network program selected by the Plan which includes amounts payable by the Participant.</p>
<p>Naviguard Program</p> <p>Offers a reimbursement methodology applicable to out of network claims which calculates allowed amounts based on what a healthcare provider generally accepts for the same or similar service.</p> <p>Includes an advocacy component where Participants can access dedicated resources, and on-line tools and materials to help Participants stay in network and where assistance is provided in explaining reimbursement methodologies.</p> <p>If the provider objects to what it was paid from the application of the allowed amount, or member contacts United for support with resolving a balance bill, United will increase compensation for a particular claim if: (a) United reasonably concludes that the particular facts and circumstances related to a claim provide justification for reimbursement greater than that which would result from the application of the allowed amount, and (b) United believes that it would serve the best interests of the Plan</p>	No	<p>Customer will pay a fee equal to 40.00% of the Savings Obtained as a result of Naviguard, to be paid through a withdrawal from the Bank Account. □</p> <p>Not available for Surest plans.</p> <p>The fee per individual claim will not exceed \$20,000.00.</p>

and its Participants (including interests in avoiding costs and expenses of disputes over payment of claims).		
		Savings Obtained means the amount billed by a health care provider minus the final amount paid to the health care provider pursuant to the out-of-network program selected by the Plan which includes amounts payable by the Participant.
Passive PPO Network access and discounts available to out of area plan participants.	No	Not available for Surest plans.
Access to Extended Networks, which expands network access through the use of leased network relationships.	No	Available at an additional charge. <input type="checkbox"/> Not available for Surest plans.

J. Care Management and Outreach Services

Service	Included in Medical Fee	Comments
Personal Health Support A clinical solution designed to help enhance member engagement, increase medical cost savings, and improve health outcomes, providing the full spectrum of clinical services in a condition-agnostic way. The solution: <ul style="list-style-type: none"> ■ Provides personalized health improvement support across the full spectrum of care including complex and chronic condition case management ■ Intelligently calibrates the level of support provided across condition by assigning estimated monetary savings to members' holistic health improvement needs and prioritizing support based on opportunities with the greatest total savings potential ■ Connects with members on an emotional level to influence desire for behavior change and interaction with resources via inbound / outbound, multi-modal engagement opportunities ■ Calibrated to client specific budget and intervention priorities to maximize the return on investment 	Yes	Not available for Surest plans.

Surest's clinical support assists members in managing their health through education, empowerment and support. Our NCQA accredited nurse case management combined with our multi-disciplinary clinical advocates guide members to high value treatments and providers that align with their personal care preferences for better health outcomes.	Yes	Included on Surest plans only.
Congenital Heart Disease Resource Services offered through United Resource Networks.	No	Additional fees may apply for Surest plans.
Complex Medical Condition Programs	No	Additional Fees apply. Please see Fee Exhibit.
Wellness Programs	No	Additional Fees apply. Please see Fee Exhibit.
Real Appeal evidence based weight loss program.	No	Additional charge applies, to be paid through a withdrawal from the Bank Account.
Medical policy functions , as guided by a medical director, including health policy and quality assurance and medical management analysis and structure.	Yes	Standard on all managed plans.
Core Medical Necessity	Yes	Customized list of procedures may require an additional charge.
Medical Necessity Optional Add On programs for:		Additional Fee Applies.
Cancer Guidance Program	Yes	<input type="checkbox"/> Not available for Surest plans.
Predictive modeling , using data from a proprietary system, to identify individuals at risk and offer proactive programs to improve their health status.	Yes	Standard on all managed plans. Additional charges apply for integrating an outside vendor's pharmacy data.
Consumer Engagement The Surest app is where it's at. Members search for cost and coverage, compare treatment options, find condition-based programs and support all at time of need. Campaigns may be behavior driven, condition-based or general education and priority health topics. Channels used are based on preferences.	Yes	
Employee Health Education and Medical Self-Care Program Services		
Virtual Visits which allows members to choose a virtual visit provider group, see and speak to a doctor using their mobile device or computer. During the virtual visit, members can obtain a diagnosis and, if appropriate, a prescription that can be sent to their pharmacy	Yes	Member pay amounts will be based on the benefit plan design. Claims charged to CITY OF GAINESVILLE (FL) will be based on the provider cost
Data Integration		
Integration of ongoing external pharmacy vendor data into predictive model	No	Additional Fee Applies.

Integration of historical external pharmacy vendor data into predictive model	No	Additional charges will apply.
Integration of historical medical data into predictive model	No	Additional charges will apply.

K. OptumHealth Behavioral Solutions — Mental Health and Substance Abuse Services

Service	Included in Medical Fee	Comments
<p>UnitedHealth Care Behavioral Health Solutions including:</p> <ul style="list-style-type: none"> ■ Network access, development and maintenance including physician (and other health care provider) relations, credentialing and contracting, network analysis and system development. ■ Claims processing, adjudication and member services. ■ Ongoing case management by licensed care manager coordinated through a network of psychiatrists, psychologists, social workers, and facilities. ■ Intensive inpatient care management, including utilization management, discharge planning, post discharge care management and follow-up services. ■ Interventions for Inpatient and Outpatient outliers using data, analytics and algorithms ■ Account management, and standard reporting ■ Integration with internal employee assistance program (EAP) and non-UBH EAP vendors. ■ Applied Behavioral Analysis (Network, Claims processing & adjudication and Utilization Management) for Autism as part of the standard benefit ■ Member referrals to licensed care manager from medical disease and case management programs. 	Yes	Not available for Surest plans.
<p>Surest offers access to Optum's broad Behavioral Health Network including virtual and in-person providers. We manage facility utilization, pay claims, manage transitions including post-discharge calls, remove obstacles for families with special needs, assess needs, offer education, and guide to in-network services and providers that match their preferences. Licensed Clinical Social Workers have experience with a broad range of behavioral health conditions from pediatric SUDS and autism to gender transitions or PTSD.</p>	Yes	Included on Surest plans only.

Non-Standard Services

L. Additional Claim Services

Service	Included in Fee Provided	Comments
Non-standard claim forms.	No	
CITY OF GAINESVILLE (FL) logo on ID card.	No	We have assumed the addition of a black and white or color CITY OF GAINESVILLE (FL) logo, in an acceptable format to the ID
Customized text on ID cards.	No	
Annual re-issuance of ID cards to all employees if changes in benefits do not occur.	No	
Non-standard explanation of benefits (EOBs), and/or copies of EOBs sent to the employer.	No	
Disability and Dependent Verification	No	Available at an additional charge.
Claim audits that exceed the UnitedHealthcare standard.	No	

M. Additional Account Management Services

Service	Included in Fee Provided	Comments
Customized communication materials.	No	
Customized physician and provider directories.	No	
Employee satisfaction surveys specific to CITY OF GAINESVILLE (FL).	No	
Eligibility processing outside the services electronic eligibility model or information received in non-standard format (i.e., other than the UnitedHealth Group Standard 3005 format or 834 HIPAA compliant format), from multiple sources and/or additional submissions more frequently than daily.	No	
Multiple bank accounts and/or multiple class codes for CITY OF GAINESVILLE (FL).	No	
CITY OF GAINESVILLE (FL) authorization of each individual transfer.	No	
Non-standard contracts that would include customized style sheets, foreign language translations, greater than two document proofs and engagement of UnitedHealthcare attorneys for negotiation of the agreements.	No	

Pricing Assumptions

This document is confidential and proprietary UnitedHealthcare information and may be used only by personnel in relation to this quote.

- The services provided by UnitedHealthcare in this quotation will be effective from January 01, 2025 through December 31, 2027.
- The Plan or its sponsor is responsible for state or federal surcharges, assessments, or similar taxes or fees imposed by governmental entities or agencies on the Plan, Plan Sponsor or us, including but not limited to those imposed pursuant to the Patient Protection and Affordable Care Act of 2010 (PPACA), as amended from time to time. This includes responsibility for determining the amount due, funding, and remitting the PPACA Transitional Reinsurance fee and the PCORI fee which are remitted to the government (federal and/or state).
- The fees quoted do not include state or federal surcharges, assessments, or similar taxes/fees imposed by governmental entities or agencies on the Plan, Plan Sponsor or UnitedHealthcare. We reserve the right to adjust the rates (i) in the event of any changes in federal, state or other applicable legislation or regulation; (ii) in the event of any changes in plan design or procedures required by the applicable regulatory authority or by the sponsor; and (iii) as otherwise permitted in the Administrative Services Agreement.
- The administrative fees set forth herein do not include fees related to the requirements set forth in the Consolidated Appropriations Act, 2021, including the No Surprises Act. Additional fees for these new regulatory requirements will be provided at a future date once regulatory guidance is received and final compliance requirements are determined.
- If awarded this business, UnitedHealthcare, on your behalf and under your employer identification number, will open and maintain a bank account to provide us the means to access your funds for the sole purpose of payment of Plan benefits, expenses, and taxes/fees. You agree to hold UnitedHealthcare harmless for any and all federal, state, local or other governmental demand, charge or tax (by whatever name) assessed against or imposed upon UnitedHealthcare arising out of the administration of the plan.
- UnitedHealthcare will be the exclusive health care administrator.
- UnitedHealthcare reserves the right to revise this quotation under the following circumstances:
 - The total number of enrolled medical employees varies by more than 10 percent from the assumed medical enrollment of 1,919.
 - The average contract size, defined as the total number of enrolled employees plus dependents divided by the total number of enrolled employees, varies by 10 percent or more from the assumed average contract size of 1.75.
 - The benefits or service requirements requested and/or quoted change prior to or after the effective date.
 - An award is not made within 90 days of the issuance of this quotation.
 - In the event of any changes in federal, state or other applicable legislation or regulation that require changes to this quotation.
 - In the event of any changes in plan design or procedures required by the applicable regulatory authority or by the Plan sponsor.
 - In the event that any taxes, surcharges, assessments, or similar charges are imposed by governmental entities or agencies on the Plan or UnitedHealthcare, in its role as administrator or insurer.
 - As otherwise permitted in our Administrative Services Agreement.
- Our quote assumes managed pharmacy is included. Refer to the managed pharmacy exhibit for details. If pharmacy is carved out to another vendor, our ASO fees are subject to change.
- Commissions are excluded.

- Our mature quotation includes the processing of runout claims for 6 months following the termination of our contract.
- CITY OF GAINESVILLE (FL) will receive 100% of rebates on prescription drug products dispensed under the medical benefit plan.
- The combined total of all financial penalties associated with the Guarantees included in this response will in no event total more than 0.0% of the charged fees.
- Our proposal including all aspects of pricing is based on the assumed packaged set of services as outlined in the Financial Commentary. Any deviations to this set of services gives us the right to revise our quote.
- United will provide a Wellness Credit, Administrative Credit (General Purpose) to help CITY OF GAINESVILLE (FL) mitigate costs associated with additional wellness services from United, administration of the plan□
These credits are available as follows:

- The parties must have an executed Agreement
- The first month of service fees under the Agreement has been received by United.
- CITY OF GAINESVILLE (FL)'s enrollment with United must always exceed 1917 Employees.
- Wellness Credit, Administrative Credit (General Purpose) must be used between 1/1/2025 and 01/01/2026□
- Upon presentation of receipts for costs, a credit will be issued in United's fee billing system in the amount of the receipted expenses, total amount not to exceed the full credit.
- If CITY OF GAINESVILLE (FL) terminates the Agreement prior to 12/31/2027, CITY OF GAINESVILLE (FL) will repay United a prorated portion of the amount of credit that has been paid as of the termination date. All unpaid credits are forfeit.
- If the CITY OF GAINESVILLE (FL)'s enrollment with United falls below the enrollment threshold, CITY OF GAINESVILLE (FL) will repay United an amount proportional to the enrollment reduction based on the amount of the credit paid at the time enrollment falls below the threshold.
- The amount of the credit not yet paid is reduced proportional to the enrollment reduction.
- If during the course of the first year unforeseen or additional expense items arise related to the CITY OF GAINESVILLE (FL) implementation, UHC reserves the right to use a portion of this credit to offset such expenses.
- Please refer to the Financial Exhibits for details regarding the amounts of credit(s) and when it is available for use. Credits are subject to repayment or forfeiture as noted above.
- This quotation assumes that CITY OF GAINESVILLE (FL) employees and dependents are covered under full-extended benefits from the prior carrier.
- In the unlikely event that the arrangement is terminated by CITY OF GAINESVILLE (FL) during the implementation phase, implementation costs incurred by UnitedHealthcare will be borne by CITY OF GAINESVILLE (FL).
- This quotation assumes UnitedHealthcare will retain claim fiduciary responsibility
- This quotation assumes a standard UnitedHealthcare accounting structure will be utilized.
 - Suffixes, to accommodate separate claims reporting for different benefit plans.

- Claim accounts, to accommodate separate claims data for locations/groups and plans (maximum of 25 distinct suffix/account splits).
- Maintenance of up to 3 separate benefit plans.
- UnitedHealthcare will duplicate the requested plan of benefits in principle and in a manner compatible with our understanding of the basic plan designs. Our quotation may be adjusted contingent upon review of all medical plan design specifics. Based upon this review, our fees may be adjusted, or changes to the plans may be required to enable us to administer claim payments.
- CITY OF GAINESVILLE (FL) is required to sign the Administrative Service Agreement prior to the effective date of our transaction processing services. The effective date will be delayed if the Agreement is not signed.
- Fee payment terms:
 - Fee payment is due on the first of each month and the expected receipt date is the fifteenth of that month. After the fifteenth, we will assess an interest penalty on any unpaid amount.
 - Additional routine fees associated with self-insured groups, including value-based pricing fees and Shared Savings Program fees , will be collected through the bank account on the due date.
 - Additional routine fees associated with self-insured groups, including value-based pricing fees and Shared Savings Program fees, will be collected as follows:
 - An estimate of the current month's fees will be billed in the current month.
 - Subsequent months' bills will reflect a true up of the prior month as well as an estimate for the current month.
 - These fees will be collected through the bank account on the due date.
 - Annual reconciliation fees associated with ASO contracts are due upon receipt of notice of the amounts due, with an expected receipt date of 30 days thereafter. After 30 days, we will assess an interest penalty on any unpaid amount.
- The quotation presented is solely for the 3 plan designs referenced herein.
- Please note that the assumptions in this quotation differ from portions of your Request for Proposal. In the event of a conflict, our quotation controls.

UnitedHealthcare STOP LOSS INSURANCE

EMPLOYER DISCLOSURE STATEMENT

The Employer is required to disclose the information requested on this form for the following:

1. an employee, dependent, retiree or COBRA beneficiary who had claims that exceeded the lesser of \$75,000 or 50% of the quoted Individual Stop Loss deductible during the twelve month period preceding this Statement.
2. any individual confined in a hospital or institution within 90 days prior to this report.
3. an employee who is away from work due to disability on the date this form is signed, or who is expected to be away from work due to disability on the requested effective date and any dependent, retiree or COBRA beneficiary who is disabled (unable to perform normal duties of a person of like age and sex) on the date this form is signed or who is expected to be so disabled on the requested effective date.
4. any individual who has been diagnosed with any heart condition or cancer, premature birth, any autoimmune disorder, hemophilia, has renal failure and/or is receiving dialysis, had or has been diagnosed to need any transplant (organ or blood) or is on a transplant list or are receiving 8 or more hours per day of home health care.
5. any individual who has previously been covered under the plan and may become eligible or re-eligible to enroll in the plan due to plan changes required by the federal Healthcare Reform laws, including those with more than \$500,000 in claims during the last 5 years or who have known ongoing medical conditions.

Name	EE or Dep	D.O.B	Sex	Date Disabled	Diagnosis or Nature of Disability	Current Treatment and Health Status	Date Expected to Return to Work	Claims Paid in the last 12 months	Claims pending payment

The information shown above will be treated as confidential by UnitedHealthcare.

The Employer named below, through its authorized officer, hereby represents that the above list is true, complete and accurate to the best of their knowledge, and nothing has been knowingly or intentionally omitted. The Employer further acknowledges, understands, and agrees that this information may be used by UnitedHealthcare in evaluating and determining the acceptability of the Employer's risk and that no coverage shall be provided unless agreed by UnitedHealthcare.

If the Employer fails to disclose an individual(s) and UnitedHealthcare determines that this individual(s) was an unacceptable risk that should have been disclosed, such individual will be excluded from the Specific and Aggregate Excess Loss coverage.

The Policyholder asserts that due diligence was performed in acquiring the information necessary to complete this Disclosure Statement, including a review of the following (check all that apply): Precertification Reports Case Management Reports Claim Reports Large Loss Reports Diagnosis/Procedure Reports Disability/FMLA reports from each location of the Policy Holder

Employer _____

Signed by _____ Dated: _____

The Standard Medical Service Fees (excluding Optional and Non-Standard Fees) and that portion of the Standard Medical Service Fees attributable to Commission Funds, if applicable, (hereinafter referred to as "Fees") payable by Customer under this Agreement will be adjusted through a credit to Customer's Service Fees in accordance with the arrangements set forth below unless otherwise noted.

Unless otherwise specified, these arrangements apply to pharmacy benefits and are effective for the period beginning 01/01/2025 and ending on 12/31/2027 (each twelve month period is a "Guarantee Period"). With respect to the aspects of United's performance addressed in this exhibit, these fee adjustments are Customer's exclusive financial remedies.

The arrangements will become effective upon the later of (1) the effective date of the Guarantee Period; or (2) the date the Agreement is signed by both parties. In the event these arrangements become effective later than the effective date of the Guarantee Period the arrangements will commence with the Agreement Period during which the Agreement is signed by both parties.

United shall not be required to meet any of the guarantees provided for in this Agreement or amendments thereto to the extent United's failure is due to Customer's actions or inactions or if United fails to meet these standards due to fire, embargo, strike, war, accident, pandemic, act of God, acts of terrorism or United's required compliance with any law, regulation, or governmental agency mandate or anything beyond United's reasonable control.

Prior to the end of the Guarantee Period, and provided that this Agreement remains in force, United may specify to Customer in writing new arrangements for the subsequent Guarantee Period. If United specifies new arrangements, United will also provide Customer with a new Exhibit that will replace this Exhibit for that subsequent Guarantee Period.

Pharmacy Financials				
Definition	Pharmacy rate guarantees.			
Measurement and Criteria		01/01/2025	01/01/2026	01/01/2027
	Combined Discount Guarantee - Broad Network			
	Retail Brand, Average Wholesale Price (AWP) less	19.00%	19.10%	19.20%
	Retail Brand -- 90 Day Supply, AWP less	22.50%	22.60%	22.70%
	Retail Generic - 30 and 90 Day Supply, AWP less	84.10%	84.20%	84.30%
	Mail Order Brand, AWP less	25.00%	25.10%	25.20%
	Mail Order Generic, AWP less	86.10%	86.20%	86.30%
	The Guaranteed Discount amount will be determined by multiplying the AWP by the guaranteed discount off AWP by each component and adding the amounts together.			
	Dispensing Fees - Broad Network			
	Retail Brand - 30 Day	\$0.60	\$0.60	\$0.60
	Retail Brand -- 90 Day Supply	\$0.30	\$0.30	\$0.30
	Retail Generic - 30 Day	\$0.60	\$0.60	\$0.60
	Retail Generic -- 90 Day Supply	\$0.30	\$0.30	\$0.30
	Dispensing fee totals are calculated by multiplying the actual scripts for each type by the contracted rate for that script type.			
	Minimum Rebate Guarantee (Traditional PDL)			
	Rebate Sharing Percentage	100.0%	100.0%	100.0%
	Basis, per script	Brand	Brand	Brand
	Retail - 30 Day	\$360.03	\$434.71	\$502.26
	Retail - 90 Day Supply	\$1,010.73	\$1,230.90	\$1,430.12
	Mail Order	\$1,010.73	\$1,230.90	\$1,430.12
	Specialty	\$3,803.78	\$4,475.78	\$5,025.23
	Fees			
	Pharmacy Administration Fee (PEPM)	\$5.00	\$5.00	\$5.00
	Prior Authorizations (per review)	\$50.00	\$50.00	\$50.00
	Direct Member Reimbursement (per paper claim)	\$2.50	\$2.50	\$2.50
Level	Customer Specific			
Period	Annually			
Payment Period	Annually			
Payment Amount -- Discounts	The amount the actual discounts are less than the combined guaranteed Retail, Mail, and Specialty discount amount.			
Payment Amount -- Dispensing Fees	The amount the combined actual dispensing fee exceeds the combined guaranteed dispensing fee.			
Conditions	<p>Discount & Dispense Fee Specific Conditions</p> <ul style="list-style-type: none"> Discounts are based on actual Network Pharmacy brand and generic usage of retail and mail order drugs. The guaranteed discount amount will be determined by multiplying the AWP by the contracted discount rate off AWP by component. Does not apply to items covered under the Plan for which no AWP measure exists. Discounts calculated based on AWP less the ingredient cost; discount percentages are the discounts divided by the AWP. Discounts for retail and mail order generic prescriptions represent the average AWP based on savings off Maximum Allowable Cost (MAC) pricing for MAC generics and percentage discount savings off AWP for non-MAC generics. All other discounts represent the percentage discount savings off of AWP. 			

- The arrangement excludes generic medications launched as an 'at-risk' product, generic medication with pending litigation, compound drugs, retail out of network claims, mail order drugs (for dispensing fee arrangement) and Indian Health Service Claims.
- The Arrangement excludes usual & customary claims, vaccines, long term care facility claims.
- The Arrangement includes veterans' affairs facility claims, over-the-counter claims.
- The 90 day supply Retail guarantee includes drugs dispensed for 84 days or greater.
- The Mail Order guarantee includes drugs dispensed for 46 days or greater; claims with less than 46 days supply are reconciled at retail.
- When a drug is identified as a brand name drug, it will be considered a brand name drug for the calculation of discount guarantees. When a drug is identified as a generic drug, it will be considered a generic drug for the calculation of discount guarantees.

- Specialty drugs dispensed outside United's specialty Pharmacy Network are included in the retail guarantees. Specialty drugs dispensed through United's specialty Pharmacy Network are excluded from the Retail and Mail guarantees.

Rebate Specific Conditions

- Assumes implementation of United's Traditional PDL
 - Assumes adoption of United's brand for generic PDL strategy
 - Client directed deviations from the PDL and PDL exclusions or uptiers, or clinical programs may result in changes to pricing and guarantees, which will be factored in at the time of rebate payment and/or reconciliation.
 - Calculation of the guaranteed rebate amount will exclude ineligible claims including:
 - claims where the plan is not the primary payer (e.g., coordination of benefits and subrogation claims)
 - claims approved by formulary exception
 - claims not covered by Customer's benefit design or PDL
 - claims receiving 340B pricing
 - long term care pharmacy claims
 - federal government pharmacy claims
 - claims for non-FDA approved products
 - compound drug claims
 - direct member reimbursement claims
 - Over-the-counter and repackaged drugs are excluded from the claim counts; Insulins are not excluded.
 - Devices are excluded from the claim counts; Test Strips are not excluded.
 - Vaccines are excluded from the claim counts.
 - Rebate guarantee payments or reconciliations may be adjusted in the event of a change impacting the level of Rebates due to the introduction of therapeutically equivalent, lower Rebate drugs (e.g. biosimilar, authorized brand alternative, lower cost non-Generic Drug alternative) or the reduction of Wholesale Acquisition Cost on a Brand Drug subject to Rebates. In the event a payment or reconciliation adjustment is required, such adjustment will be based on the difference between a) pharmaceutical manufacturer revenue prior to the introduction of the lower Rebate drugs and b) the actual pharmaceutical manufacturer revenue received after the introduction of the lower Rebate drugs. Such adjustment does not apply to Generic Drugs that launch after the Brand Drug no longer has patent protection.
 - The Rebate guarantees set forth herein account for projected Rebate reductions in the following classes of Prescription Drugs in connection with the elimination of the Average Manufacturer's Price (AMP) Cap pursuant to the American Rescue Plan Act of 2021: Insulin products and Respiratory Medications. United reserves the right to modify or eliminate any Rebate guarantees if there are any additional changes to Rebates received from pharmaceutical manufacturers.
- United reserves the right to modify or eliminate this arrangement as follows based upon changes in Rebates:
- if changes made to United's PDL, for the purpose of achieving a lower net drug cost for Customer and United's other ASO customers, result in significant reductions to the Rebate level
 - in the event that there are material deviations to the anticipated timing of drugs that will come off patent and no longer generate Rebates
 - if there is a change impacting the availability or amount of Rebates offered by drug manufacturer(s), including changes related to the elimination or material modification of a drug manufacturer(s) historic models or practices related to the provision of Rebates
 - United will pay Rebates consistent with the Agreement. A reconciliation of the Rebate amounts will occur after the end of each annual contract period and when Rebate payments are substantially complete. The reconciliation calculates the minimum rebate amount by multiplying the actual number of scripts filled by the applicable rebate amount for that script type.

- Manufacturer Administrative Fees are the administrative fees paid by drug manufacturers to United's PBM affiliate as consideration for maintaining systems and processes necessary for managing and administering Rebate programs. Manufacturer Administrative Fees are included in the guaranteed rebate arrangement.

- If Customer terminates pharmacy benefit services with United prior to the end of the Pharmacy Pricing Term, United will retain any and all pending or future Rebates payable under the Agreement as of the effective date of the termination of pharmacy benefit services and no reconciliation of minimum rebate guarantees will apply.

General Conditions

- All pricing guarantees shall remain in effect for the entire contract period of 01/01/2025 through 12/31/2027 ("Pharmacy Pricing Term"). Each twelve month period is a Guarantee Period.

- Specialty drugs typically covered under the medical benefit (administered / handled by a provider, administered in a physician's office, ambulatory or home infusion), and/or transitioned to the pharmacy benefit, are excluded from all guarantees.

- Drugs, products, supplies approved, covered and/or prescribed for the diagnosis, treatment or prevention of COVID-19 are excluded from all guarantees.

- For mail order drugs, specialty drugs, and retail pharmacy drugs and services including dispensing fees, the amount United reimburses the Network Pharmacy will be equal to the Customer's payment for a prescription drug product or service.

- Pricing and guarantees assume enrollment of 1,917 Employees and 3,357 Participants; pricing and guarantees may be revised or withdrawn if actual enrollment varies by 10% or more from assumptions.

- The lesser of three logic (non-ZBL) will apply to Participant payments. Participants pay the lesser of the discounted price, the usual and customary charge or the cost share amount.

- All pricing guarantees require the selection of United's PBM as exclusive provider of pharmacy benefit services, including but not limited to retail, mail order, and specialty networks.

United will have no financial guarantee obligation under the Agreement for any partial Guarantee Period if Customer terminates with an effective date prior to the end of the Pharmacy Pricing Term.

- In the event any of the terms herein is inconsistent with the requirements of any federal, state or other applicable law or regulation, then the inconsistent term(s) will be null and void and United will have the right to revise, reprice or revoke this arrangement.

- United reserves the right to revise or revoke this arrangement if: a) changes in federal, state or other applicable law or regulation require modifications; b) there are material changes to the AWP as published by the pricing agency that establishes the AWP as used in these arrangements; c) Customer makes benefit changes that impact the arrangements; d) there is a material industry change in pricing methodologies resulting in a new source or benchmark; e) it is not accepted within ninety (90) days of the issuance of our quote; f) if Customer changes their mail service benefit; g) Customer utilizes a vendor, that facilitates steering members to different drugs or pharmacies to the extent these services impact the financial guarantees under this Agreement.

Brand / Generic Reconciliation Definition

- **Brand Drug:** An FDA approved drug, or a drug that is designated by FDA a DESI (Drug Efficacy Study Implementation) drug, or product, which is manufactured and distributed by an innovator drug company, or its licensee, set forth in Medi-Span's National Drug Data File as a brand drug identified by all of the products meeting at least one of the following criteria:

- Medi-Span Multi-Source Code ("MSC") is equal to M, O, or N.

- **Generic Drug:** An FDA approved drug, or a drug that is designated by FDA a DESI (Drug Efficacy Study Implementation) drug, or product, that is therapeutically equivalent to other pharmaceutically equivalent products, as set forth in Medi-Span's National Drug Data File as a generic drug identified by all products meeting at least one of the following criteria:

- Medi-Span Multi-Source Code ("MSC") is equal to Y.

PTRX (05/2024)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Benadryl	Brand & Generic	Allergies	Legend Medication with OTC Equivalent	OTC Benadryl
Benzac, Desquam, Panoxyl, Brevoxyl	Brand & Generic	Acne	Legend Medication with OTC Equivalent	OTC benzoyl peroxide
Histex	Brand & Generic	Allergies	Legend Medication with OTC Equivalent	n/a
Imodium	Brand & Generic	Diarrhea	Legend Medication with OTC Equivalent	OTC Imodium
Lac-Hydrin 12%	Brand & Generic	Skin conditions	Legend Medication with OTC Equivalent	OTC Lac-Hydrin
Lotrimin 1%	Brand & Generic	Infections	Legend Medication with OTC Equivalent	OTC Lotrimin
Meclizine	Brand & Generic	Motion sickness	Legend Medication with OTC Equivalent	OTC Meclizine
Motrin Suspension, Pedia-Profen	Brand & Generic	Pain & inflammation	Legend Medication with OTC Equivalent	OTC Motrin
Prilosec Capsules	Multi-Source Brand	Ulcers, heartburn & reflux	Legend Medication with OTC Equivalent	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Pepcid Tablets	Brand & Generic	Ulcers, heartburn & reflux	Legend Medication with OTC Equivalent	OTC Pepcid AC
Axid Capsules	Brand & Generic	Ulcers, heartburn & reflux	Legend Medication with OTC Equivalent	OTC Pepcid AC, OTC Zantac
Zantac Capsules/Tablets	Brand & Generic	Ulcers, heartburn & reflux	Legend Medication with OTC Equivalent	OTC Zantac
Prevacid Capsules	Brand & Generic	Ulcers, heartburn & reflux	Legend Medication with OTC Equivalent	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Clarinex	Brand & Generic	Allergies	Therapeutic Equivalent to an OTC medication	levocetirizine (generic Xyzal), OTC - Allegra, Claritin, Xyzal, Zyrtec
Clarinex-D	Brand & Generic	Allergies	Therapeutic Equivalent to an OTC medication	levocetirizine (generic Xyzal) + OTC pseudoephedrine (generic Sudafed); OTC - Allegra D, Claritin D, Zyrtec D
Nexium Capsules	Brand & Generic	Ulcers, heartburn & reflux	Legend Medication with OTC Equivalent	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Zyrtec Tablet	Brand & Generic	Allergies	Legend Medication with OTC Equivalent	OTC Zyrtec
Doryx	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate (generic Vibramycin), doxycycline monohydrate 50 mg or 100 mg (generic Monodox)
Caduet	Brand & Generic	High blood pressure/Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	amlodipine (geneic Norvasc) plus atorvastatin (generic Lipitor)
Coreg CR	Brand & Generic	High blood pressure/Heart fail	Same active ingredient of therapeutic equivalent available by prescription	carvedilol immediate-release (generic Coreg)
Genotropin	Single Source Brand	Growth hormone	Same active ingredient of therapeutic equivalent available by prescription	Norditropin Flexpro, Nutropin AQ NuSpin

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Humatrope	Single Source Brand	Growth hormone	Same active ingredient of therapeutic equivalent available by prescription	Norditropin Flexpro, Nutropin AQ NuSpin
Omnitrope	Single Source Brand	Growth hormone	Same active ingredient of therapeutic equivalent available by prescription	Norditropin Flexpro, Nutropin AQ NuSpin
Requip XL	Brand & Generic	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	ropinirole immediate-release (generic Requip)
Sancuso	Single Source Brand	Nausea & vomiting	Same active ingredient of therapeutic equivalent available by prescription	ondansetron (generic Zofran), granisetron (generic Kytril)
Treximet	Brand & Generic	Migraines	Same active ingredient of therapeutic equivalent available by prescription	naproxen tablets (generic Naprosyn) plus sumatriptan (generic Imitrex)
Adoxa tablet	Multi-Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate (generic Vibramycin), doxycycline monohydrate 50 mg or 100 mg (generic Monodox)
Veramyst	Single Source Brand	Allergies	Same active ingredient of therapeutic equivalent available by prescription	flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, OTC - Flonase, Nasacort, Nasonex, Rhinocort
Adoxa capsule	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate (generic Vibramycin), doxycycline monohydrate 50 mg or 100 mg (generic Monodox)
Soma 250	Brand & Generic	Muscle relaxant	Same active ingredient of therapeutic equivalent available by prescription	carisoprodol (generic Soma 350mg)
Venlafaxine ER tablet	Brand & Generic	Mental health	Same active ingredient of therapeutic equivalent available by prescription	venlafaxine extended-release capsule (generic Effexor XR)
Clobex Shampoo	Brand & Generic	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate)
Amrix	Brand & Generic	Muscle relaxant	Same active ingredient of therapeutic equivalent available by prescription	cyclobenzaprine 5 mg, 10 mg (generic Flexeril)
Asacol HD Tablet	Brand & Generic	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	mesalamine delayed-release (generic Delzicol), mesalamine delayed-release (generic Lialda), Apriso
Augmentin XR	Brand & Generic	Infections	Same active ingredient of therapeutic equivalent available by prescription	amoxicillin/clavulanic acid (generic Augmentin)
Detrol LA	Brand & Generic	Overactive bladder	Same active ingredient of therapeutic equivalent available by prescription	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Flector (diclofenac patch)	Brand & Authorized Brand Alternative	Pain & inflammation	Legend Medication with OTC Equivalent	OTC Voltaren Arthritis Pain 1% gel

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Xopenex Nebs	Multi-Source Brand	Asthma	Modified version of therapeutic equivalent available by prescription	albuterol nebs (generic Proventil), levalbuterol (generic Xopenex Nebs)
Edluar	Single Source Brand	Sleep	Same active ingredient of therapeutic equivalent available by prescription	zolpidem (generic Ambien)
Aplenzin	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	bupropion (generic Wellbutrin), bupropion extended-release (Wellbutrin SR), bupropion extended-release (generic Wellbutrin XL)
Provigil	Multi-Source Brand	Narcolepsy	Modified version of therapeutic equivalent available by prescription	modafinil (generic Provigil)
Ryzolt	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	tramadol (generic Ultram), tramadol biphasic 24hr extended-release tablet (generic Ryzolt), tramadol extended-release (generic Ultram XR)
Ziana	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin solution (generic Cleocin-T) plus tretinoin cream (generic Retin-A) or OTC Differin 0.1%
Acuvail	Single Source Brand	Eye pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	ketorolac ophthalmic solution (generic Acular)
Extavia	Single Source Brand	Multiple Sclerosis	Same active ingredient of therapeutic equivalent available by prescription	glatiramer acetate [Glatopa (generic Copaxone)], Avonex, Betaseron, Plegridy
Kadian	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	morphine sulfate extended-release tablet (generic MS Contin), morphine sulfate extended-release (generic Kadian)
metoclopramide orally disintegrating tablet (Metozolv ODT)	Brand & Generic	Reflux	Same active ingredient of therapeutic equivalent available by prescription	metoclopramide (generic Reglan)
Naprelan	Brand & Generic	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	naproxen tablets (generic Naprosyn, generic Anaprox DS), OTC naproxen (Aleve)
Twynsta	Brand & Generic	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	amlodipine/valsartan (generic Exforge) or amlodipine (generic Norvasc) PLUS telmisartan (generic Micardis)
Zipsor	Brand & Generic	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	diclofenac tablets (generic Cataflam, generic Voltaren)
Allegra	Brand & Generic	Allergies	Legend Medication with OTC Equivalent	OTC Allegra
Androgel 1% and 1.62% packets (brand and generic); Androgel 1.62% pump (brand only)	Brand & Generic	Testosterone replacement	Same active ingredient of therapeutic equivalent available by prescription	testosterone 1.62% gel pump (generic Androgel 1.62%), Testim
Aricept 23mg	Multi-Source Brand	Alzheimer's disease	Same active ingredient of therapeutic equivalent available by prescription	donepezil (generic Aricept)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Elestat	Multi-Source Brand	Allergies	Therapeutic OTC Equivalent; prescription alternatives available	OTC ketotifen (Zaditor), azelastine (generic Optivar), epinastine (generic Elestat), Lastacaft
Cambia	Brand and Generic	Migraines	Same active ingredient of therapeutic equivalent available by prescription	diclofenac tablets (generic Cataflam, generic Voltaren)
Mirapex ER	Brand & Generic	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	pramipexole immediate-release (generic Mirapex)
Pataday	Brand & Generic	Allergies	Legend Medication with OTC Equivalent	OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), epinastine (generic Elestat), Lastacaft
diclofenac sodium 1.5% topical solution (generic Pennsaid)	Generic Only	Pain & inflammation	Legend Medication with OTC Equivalent	OTC Voltaren Arthritis Pain 1% gel
Zyclara	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	imiquimod (generic Aldara)
Zonatuss	Single Source Brand	Cough & cold	Same active ingredient of therapeutic equivalent available by prescription	benzonatate (generic Tessalon Pearles)
Emadine	Single Source Brand	Allergies	Therapeutic Equivalent to an OTC medication	OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), epinastine (generic Elestat), Lastacaft
Patanol	Multi-Source Brand	Allergies	Legend Medication with OTC Equivalent	OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), epinastine (generic Elestat), Lastacaft
Morgidox Kit	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate (generic Vibramycin), doxycycline monohydrate 50 mg or 100 mg (generic Monodox)
Tricor 48 mg, 145 mg (brand only)	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablet (generic Lofibra, Tricor, Triglide), fenofibrate micronized capsule 43 mg, 130 mg (generic Antara), fenofibrate micronized capsule 67 mg, 134 mg, 200 mg (generic Lofibra/Tricor)
Trilipix	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	fenofibric acid delayed-release (generic Trilipix), fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablet (generic Lofibra, Tricor, Triglide), fenofibrate micronized capsule 43 mg, 130 mg (generic Antara), fenofibrate micronized capsule 67 mg, 134 mg, 200 mg (generic Lofibra/Tricor)
Beyaz	Brand & Generic	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	Yaz + folic acid

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Centany AT	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	mupirocin ointment (generic Bactroban)
Ciclodan Kit	Brand & Generic	Infections	Same active ingredient of therapeutic equivalent available by prescription	ciclopirox solution (generic Loprox)
Clindacin Kit/Pac	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin 1% gel, solution (generic Cleocin T)
Jalyn	Brand & Generic	Benign Prostatic Hypertrophy	Same active ingredient of therapeutic equivalent available by prescription	dutasteride (generic Avodart) PLUS tamsulosin (generic Flomax)
Keralyt Scalp Kit	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	salicylic acid shampoo (generic Salex)
Nitrolingual PumpSpray	Brand & Generic	Chest pain	Same active ingredient of therapeutic equivalent available by prescription	nitroglycerin spray (generic NitroMist), nitroglycerin sublingual tablets (generic Nitrostat)
omeprazole sodium bicarbonate capsules (generic Zegerid capsules)	Generic Only	Ulcers, heartburn & reflux	Legend Medication with OTC Equivalent	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Safyral	Brand & Generic	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	Yasmin + folic acid
Silenor	Brand & Generic	Sleep	Same active ingredient of therapeutic equivalent available by prescription	doxepin (generic Sinequan)
Tobradex ST	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	tobramycin/dexamethasone (generic Tobradex)
Tribenzor	Brand & Generic	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	amlodipine (generic Norvasc) PLUS olmesartan/HCTZ (generic Benicar HCT)
Umecta	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	urea 40%
Veltin	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin solution (generic Cleocin-T) plus tretinoin cream (generic Retin-A) or OTC Differin 0.1%
Xerese	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	acyclovir capsule/tablet (generic Zovirax) famciclovir tablet (generic Famvir), valacyclovir tablet (generic Valtrex), OTC Abreva
Zuplenz	Single Source Brand	Nausea & vomiting	Same active ingredient of therapeutic equivalent available by prescription	ondansetron (generic Zofran)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Pediaderm AF	Single Source Brand	Diaper rash	Same active ingredient of therapeutic equivalent available by prescription	nystatin cream (generic Mycostatin)
Alsuma	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	sumatriptan (generic Imitrex)
Analpram Advanced Kit	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone/pramoxine cream (generic Analpram E)
Dermasorb AF	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	triamcinolone cream/ointment (generic Aristocort)
Umecta	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	urea 40%
Umecta Nail Kit	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	urea 40%
Umecta PD	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	urea 40%
Uramaxin GT	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	urea 40%
Sumaxin TS	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	sodium sulfacetamide/sulfur 10-5%
Dermasorb AF	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	triamcinolone cream/ointment (generic Aristocort)
Tizanidine Comfort Pac	Single Source Brand	Muscle relaxant	Same active ingredient of therapeutic equivalent available by prescription	tizanidine tablet (generic Zanaflex)
Rosadan Kit - cream	Single Source Brand	Rosacea	Same active ingredient of therapeutic equivalent available by prescription	metronidazole 0.75% cream (generic Metrocream)
Atelvia	Brand & Generic	Osteoporosis	Same active ingredient of therapeutic equivalent available by prescription	alendronate (generic Fosamax), ibandronate (generic Boniva), risedronate (generic Actonel)
Fentora (fentanyl buccal tab)	Brand & Authorized Brand Alternative	Cancer pain	Same active ingredient of therapeutic equivalent available by prescription	fentanyl citrate lozenges (generic Actiq)
Fortesta	Brand & Generic	Testosterone replacement	Same active ingredient of therapeutic equivalent available by prescription	testosterone 1.62% gel pump (generic Androgel 1.62%), Testim
Kapvay	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	clonidine extended-release (generic Kapvay), guanfacine extended-release (generic Intuniv)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Axiron	Brand & Generic	Testosterone replacement	Same active ingredient of therapeutic equivalent available by prescription	testosterone 1.62% gel pump (generic Androgel 1.62%), Testim
Pramosone E	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone/pramoxine (generic Analpram E)
Duac	Multi-Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin 1.2%/benzoyl peroxide 5% gel (generic Duac), clindamycin solution (generic Cleocin-T) plus OTC benzoyl peroxide
Altoprev	Single Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	lovastatin (generic Mevacor)
Bepreve	Brand & Generic	Allergies	Therapeutic Equivalent to an OTC medication	OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), epinastine (generic Elestat), Lastacaft
Clindagel	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin 1% gel, solution (generic Cleocin T)
ConZip (tramadol extended release capsule)	Brand & Authorized Brand Alternative	Pain	Same active ingredient of therapeutic equivalent available by prescription	tramadol (generic Ultram), tramadol biphasic 24hr extended-release tablet (generic Ryzolt), tramadol extended-release (generic Ultram XR)
Exforge	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	amlodipine/valsartan (generic Exforge)
Exforge HCT ⁴	Brand & Generic	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	amlodipine/valsartan (generic Exforge) PLUS hydrochlorothiazide
Generess FE	Brand & Generic	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	norethindrone/ethinyl estradiol FE 1/0.02 mg [Aurovela FE, Blisovi FE, Gildess FE, Hailey FE, Junel FE, Larin FE, Microgestin FE, Tarina FE (branded generics for Loestrin FE)]
Gralise	Single Source Brand	Neuropathic pain	Same active ingredient of therapeutic equivalent available by prescription	gabapentin (generic Neurontin)
Horizant	Single Source Brand	Neuropathic pain	Same active ingredient of therapeutic equivalent available by prescription	gabapentin (generic Neurontin)
Lipitor	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	atorvastatin (generic Lipitor)
Lorzone	Brand & Generic	Muscle relaxant	Same active ingredient of therapeutic equivalent available by prescription	chlorzoxazone (generic Parafon Forte DSC)
Metrogel 1%	Brand & Generic	Rosacea	Same active ingredient of therapeutic equivalent available by prescription	metronidazole 0.75% gel (generic Metrogel)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
ProCort	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone/pramoxine (generic Analpram E)
Rosadan Kit - gel	Single Source Brand	Rosacea	Same active ingredient of therapeutic equivalent available by prescription	metronidazole 0.75% gel (generic Metrogel)
Skelaxin	Multi-Source Brand	Muscle relaxant	Same active ingredient of therapeutic equivalent available by prescription	cyclobenzaprine 5 mg, 10 mg (generic Flexeril), chlorzoxazone (generic Parafon Forte DSC), metaxalone (generic Skelaxin), methocarbamol (generic Robaxin)
Staxyn	Multi-Source Brand	Erectile dysfunction	Same active ingredient of therapeutic equivalent available by prescription	ildenafil (generic Viagra, generic Staxyn)
Sumaxin CP	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	sodium sulfacetamide/sulfur 10-5%
Trianex	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	triamcinolone ointment (generic Aristocort)
Zegerid capsule	Brand	Ulcers, heartburn & reflux	Legend Medication with OTC Equivalent	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Astelin	Multi-Source Brand	Allergies	Same active ingredient of therapeutic equivalent available by prescription	OTC azelastine (Astepro Allergy), azelastine 0.1% nasal spray (generic Astelin)
Oleptro	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	trazodone (generic Desyrel)
Aqua Glycolic HC	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone 2.5% (generic Hytone)
Uramaxin GT Kit	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	urea 40%
Optivar	Multi-Source Brand	Allergies	Therapeutic Equivalent to an OTC medication	OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), epinastine (generic Elestat), Lastacaft
Promiseb Complete Kit	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	Promiseb
Ribasphere Ribapak	Generic Only	Hepatitis C	Same active ingredient of therapeutic equivalent available by prescription	ribavirin (generic Copegus, Rebetol)
Ambien	Multi-Source Brand	Sleep	Same active ingredient of therapeutic equivalent available by prescription	zolpidem (generic Ambien)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Ambien CR	Multi-Source Brand	Sleep	Same active ingredient of therapeutic equivalent available by prescription	zolpidem (generic Ambien), zolpidem extended-release (generic Ambien CR)
Intermezzo	Brand & Generic	Sleep	Same active ingredient of therapeutic equivalent available by prescription	zolpidem (generic Ambien)
Actiq	Multi-Source Brand	Cancer pain	Same active ingredient of therapeutic equivalent available by prescription	fentanyl citrate lozenges (generic Actiq)
Astepro	Brand & Generic	Allergies	Legend Medication with OTC Equivalent	OTC azelastine (Astepro Allergy), azelastine 0.1% nasal spray (generic Astelin)
Azor	Brand & Generic	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	amlodipine/valsartan (generic Exforge) or amlodipine (generic Norvasc) PLUS olmesartan (generic Benicar)
Binosto	Single Source Brand	Osteoporosis	Same active ingredient of therapeutic equivalent available by prescription	alendronate (generic Fosamax)
Ciclodan/Loprox Cream Kit	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	ciclopirox (generic Loprox)
Cosopt PF	Brand & Generic	Glaucoma	Same active ingredient of therapeutic equivalent available by prescription	dorzolamide/timolol (generic Cosopt)
Diovan HCT	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	valsartan/hydrochlorothiazide (generic Diovan HCT)
Dymista	Brand & Generic	Allergies	Legend Medication with OTC Equivalent	fluticasone (generic Flonase), azelastine 0.1% (generic Astelin), OTC - Flonase, Nasacort, Nasonex, Rhinocort, Astepro Allergy
Effexor XR	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	venlafaxine extended-release capsule (generic Effexor XR)
Entocort EC	Multi-Source Brand	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	budesonide (generic Entocort EC)
Flomax	Multi-Source Brand	Benign Prostatic Hypertrophy	Same active ingredient of therapeutic equivalent available by prescription	tamsulosin (generic Flomax)
Lexapro	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	escitalopram (generic Lexapro)
Natroba	Multi-Source Brand	Lice/Scabbies	Same active ingredient of therapeutic equivalent available by prescription	malathion (generic Ovide), permethrin (generic Elimite), spinosad (generic Natroba)
Percocet	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	acetaminophen/oxycodone (generic Percocet)
Plavix	Multi-Source Brand	Stroke & heart attack prevention	Same active ingredient of therapeutic equivalent available by prescription	clopidogrel (generic Plavix)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Protonix	Multi-Source Brand	Ulcers, heartburn & reflux	Same active ingredient of therapeutic equivalent available by prescription	pantoprazole (generic Protonix)
Prozac	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	fluoxetine capsules (generic Prozac)
Singulair Chewable Tablet	Multi-Source Brand	Allergies	Same active ingredient of therapeutic equivalent available by prescription	montelukast chewable tablet (generic Singulair)
Singulair Tablet	Multi-Source Brand	Allergies	Same active ingredient of therapeutic equivalent available by prescription	montelukast tablet (generic Singulair)
Soltamox	Single Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	tamoxifen (generic Nolvadex)
Sumadan	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	sulfacetamide sodium/sulfur 10-5%
Sumadan Kit	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	sodium sulfacetamide/sulfur 10-5%
Synalar Kit	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	fluocinolone 0.025% cream, ointment (generic Synalar cream, ointment)
Synalar TS	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	fluocinolone 0.01% solution (generic Synalar solution)
Valtrex	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	valacyclovir (generic Valtrex)
Virasal	Brand & Generic	Wart removal	Legend Medication with OTC Equivalent	salicylic acid OTC
Wellbutrin SR	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	bupropion extended-release (generic Wellbutrin SR)
Wellbutrin XL	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	bupropion extended-release (generic Wellbutrin XL)
Zoloft	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	sertraline (generic Zoloft)
Ketodan Combination Package	Generic Only	Infections	Same active ingredient of therapeutic equivalent available by prescription	ketoconazole cream (generic Nizoral)
Monodox	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate (generic Morgidox, Vibramycin), doxycycline monohydrate 50 mg or 100 mg (generic Monodox)
Ultravate X Combination Package	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	halobetasol cream (generic Ultravate)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Absorica 10, 20, 30, 40 mg (brand only); Absorica	Multi-Source Brand/Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	isotretinoin [Amnesteem, Claravis, Myorisan, Zenatane (branded generics for Accutane)]
Acanya	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin 1.2%/benzoyl peroxide 5% gel (generic Duac), clindamycin (generic Cleocin-T) plus OTC benzoyl peroxide
Actos	Multi-Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	pioglitazone (generic Actos)
Adderall	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine immediate-release (generic Adderall)
Arimidex	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	anastrozole (generic Arimidex)
Ativan	Multi-Source Brand	Anxiety	Same active ingredient of therapeutic equivalent available by prescription	lorazepam (generic Ativan)
Beconase AQ	Single Source Brand	Allergies	Therapeutic Equivalent to an OTC medication	flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, OTC - Flonase, Nasacort, Nasonex, Rhinocort
Benzaclin jar	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin 1.2%/benzoyl peroxide 5% gel (generic Duac), clindamycin solution (generic Cleocin-T) plus OTC benzoyl peroxide
Benzaclin pump	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin 1.2%/benzoyl peroxide 5% gel (generic Duac), clindamycin solution (generic Cleocin-T) plus OTC benzoyl peroxide
Celexa	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	citalopram (generic Celexa)
Delzicol	Multi-source brand	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	mesalamine delayed-release (generic Delzicol), mesalamine delayed-release (generic Lialda), Apriso
Desvenlafaxine	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	desvenlafaxine (generic Pristiq), venlafaxine extended-release capsule (generic Effexor XR)
Detrol	Multi-Source Brand	Overactive bladder	Therapeutic Equivalent to an OTC medication	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Enablex	Brand & Generic	Overactive bladder	Therapeutic Equivalent to an OTC medication	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Femara	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	letrozole (generic Femara)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Forfivo XL (bupropion extended-release)	Brand & Authorized Brand Alternative	Mental health	Same active ingredient of therapeutic equivalent available by prescription	bupropion (generic Wellbutrin), bupropion extended-release (Wellbutrin SR), bupropion extended-release (generic Wellbutrin XL)
Gelnique	Single Source Brand	Overactive bladder	Therapeutic Equivalent to an OTC medication	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Geodon	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	ziprasidone (generic Geodon)
Imitrex injection & tablets	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	sumatriptan injection, tablets (generic Imitrex)
Locoid Lipocream	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone butyrate (generic Locoid)
Locoid Lotion	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone butyrate (generic Locoid), triamcinolone acetonide 0.1% lotion (generic Kenalog lotion)
Maxalt	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	rizatriptan (generic Maxalt), rizatriptan orally disintegrating tablet (generic Maxalt MLT)
Maxalt-MLT	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	rizatriptan (generic Maxalt), rizatriptan orally disintegrating tablet (generic Maxalt MLT)
Myrbetriq	Single Source Brand	Overactive bladder	Therapeutic Equivalent to an OTC medication	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Oxytrol	Single Source Brand	Overactive bladder	Legend Medication with OTC Equivalent	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Pentasa	Single Source Brand	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	mesalamine delayed-release (generic Delzicol), mesalamine delayed-release (generic Lialda), Apriso
Prevpac	Brand & Generic	Ulcers due to H. pylori	Same active ingredient of therapeutic equivalent available by prescription	bismuth subcitrate/metronidazole/tetracycline (generic Pylera), Omeclamox-Pak
Rayos	Single Source Brand	Oral steroid	Same active ingredient of therapeutic equivalent available by prescription	prednisone
Retin-A Micro	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	OTC Differin 0.1% gel, tretinoin cream (generic Retin-A)
Revatio	Multi-Source Brand	Pulmonary hypertension	Same active ingredient of therapeutic equivalent available by prescription	sildenafil (generic Revatio)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Risperdal	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	risperidone (generic Risperdal)
Sanctura	Multi-Source Brand	Overactive bladder	Therapeutic Equivalent to an OTC medication	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Sanctura XR	Brand & Generic	Overactive bladder	Therapeutic Equivalent to an OTC medication	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Seroquel	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	quetiapine (generic Seroquel)
Sorilux (calcipotriene)	Brand & Authorized Brand Alternative	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	calcipotriene solution (generic Dovonex)
Valium	Multi-Source Brand	Anxiety	Same active ingredient of therapeutic equivalent available by prescription	diazepam (generic Valium)
Vesicare	Multi-Source Brand	Overactive bladder	Therapeutic Equivalent to an OTC medication	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Xanax	Multi-Source Brand	Anxiety	Same active ingredient of therapeutic equivalent available by prescription	alprazolam (generic Xanax)
Xanax XR	Multi-Source Brand	Anxiety	Same active ingredient of therapeutic equivalent available by prescription	alprazolam extended-release (generic Xanax XR)
Zovirax Ointment	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	acyclovir ointment (generic Zovirax), acyclovir capsule/tablet (generic Zovirax) famciclovir tablet (generic Famvir), valacyclovir tablet (generic Valtrex)
Zyprexa	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	olanzapine (generic Zyprexa)
Zyprexa Zydis	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	olanzapine (generic Zyprexa), olanzapine orally disintegrating tablet (generic Zyprexa Zydis)
Onmel	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	itraconazole (generic Sporanox)
Abstral	Single Source Brand	Cancer pain	Same active ingredient of therapeutic equivalent available by prescription	fentanyl citrate lozenges (generic Actiq)
Aciphex	Multi-Source Brand	Ulcers, heartburn & reflux	Therapeutic Equivalent to an OTC medication	rabeprazole (generic Aciphex)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Cymbalta	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	duloxetine (generic Cymbalta), venlafaxine ER capsules (generic Effexor ER)
Daytrana	Single Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Focalin XR	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), dexmethylphenidate extended-release capsules (generic Focalin XR), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Ilevro	Single Source Brand	Eye pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	bromfenac ophthalmic solution (generic Bromday, Xibrom), diclofenac ophthalmic solution (generic Voltaren), ketorolac ophthalmic solution (generic Acular), Nevanac
Intuniv	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	guanfacine extended-release (generic Intuniv)
Lidoderm	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	lidocaine transdermal patch (generic Lidoderm), ZTLido
Lotemax gel	Brand & Generic	Eye pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	prednisolone (generic Pred Forte), loteprednol 0.5% ophthalmic suspension (generic Lotemax), Lotemax Ointment, Maxidex, Vexol
Luxiq	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone lotion (generic Valisone)
Minastrin 24 FE	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	Charlotte 24 FE, Melodetta 24 FE, Mibelas 24 FE, norethindrone/ethinyl estradiol FE 1/0.02 mg chewable tablet (generic Minastrin 24 FE)
Nasacort AQ	Brand & Generic	Allergies	Legend Medication with OTC Equivalent	flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, OTC - Flonase, Nasacort, Nasonex, Rhinocort
Nasonex	Brand & Generic	Allergies	Therapeutic Equivalent to an OTC medication	flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, OTC - Flonase, Nasacort, Nasonex, Rhinocort
Omnaris	Single Source Brand	Allergies	Therapeutic Equivalent to an OTC medication	flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, OTC - Flonase, Nasacort, Nasonex, Rhinocort

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Oxtellar XR	Single Source Brand	Seizures	Same active ingredient of therapeutic equivalent available by prescription	oxcarbazepine (generic Trileptal)
Prolensa	Single Source Brand	Eye pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	bromfenac ophthalmic solution (generic Bromday, Xibrom), diclofenac ophthalmic solution (generic Voltaren), ketorolac ophthalmic solution (generic Acular), Nevanac
Qnasl	Single Source Brand	Allergies	Therapeutic Equivalent to an OTC medication	flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, OTC - Flonase, Nasacort, Nasonex, Rhinocort
Quillivant XR	Single Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Rhinocort Aqua	Brand & Generic	Allergies	Therapeutic Equivalent to an OTC medication	flunisolide (generic Nasarel), fluticasone (generic Flonase), Zetonna, OTC - Flonase, Nasacort, Nasonex, Rhinocort
Ritalin LA	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Simbrinza	Single Source Brand	Glaucoma	Same active ingredient of therapeutic equivalent available by prescription	brimonidine (generic Alphagan) plus brinzolamide (generic Azopt) or dorzolamide (generic Cosopt)
Suboxone Film	Multi-Source Brand	Opioid dependence	Same active ingredient of therapeutic equivalent available by prescription	buprenorphine/naloxone (generic Suboxone), Zubsolv
Suboxone Tablets	Multi-Source Brand	Opioid dependence	Same active ingredient of therapeutic equivalent available by prescription	buprenorphine/naloxone (generic Suboxone), Zubsolv
Sumadan XLT Kit	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	sulfacetamide sodium/sulfur 10-5%
Tobi nebulized solution	Brand & Generic	Supportive care for Cystic Fibrosis	Same active ingredient of therapeutic equivalent available by prescription	tobramycin 300 mg/4 mL (generic Bethkis), Tobi Podhaler
Trokendi XR	Brand & Generic	Seizures	Same active ingredient of therapeutic equivalent available by prescription	topiramate immediate-release (generic Topamax)
Vanos	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	fluocinonide 0.05% (generic Lidex)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Verdeso	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	desonide lotion (generic Desowen)
Xodol/Vicodin/Vicodin ES/Vicodin HP	Brand & Generic	Pain	Same active ingredient of therapeutic equivalent available by prescription	hydrocodone/acetaminophen 5/325 mg (generic Norco), hydrocodone/acetaminophen 7.5/325 mg generic Norco), hydrocodone/acetaminophen 10/325 mg (generic Norco)
Zenzedi 5 mg, 10 mg (brand only); Zenzedi 15 mg, 20 mg, 30 mg (brand & generic)	Brand & Generic	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine (generic Adderall), dextroamphetamine (generic Dexedrine)
Giazo	Single Source Brand	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	balsalazide (generic Colazal), mesalamine delayed-release (generic Delzicol), mesalamine delayed-release (generic Lialda), sulfasalazine (generic Azulfidine), Apriso
Dermasorb XM 39% Kit	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	urea 40%
Aciphex Sprinkle	Brand & Generic	Ulcers, heartburn & reflux	Therapeutic Equivalent to an OTC medication	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Antara 30 mg, 90 mg	Single Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablet (generic Lofibra, Tricor, Triglide), fenofibrate micronized capsule 43 mg, 130 mg (generic Antara), fenofibrate micronized capsule 67 mg, 134 mg, 200 mg (generic Lofibra/Tricor)
Antara 43 mg and 130 mg	Multi-Source brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablet (generic Lofibra, Tricor, Triglide), fenofibrate micronized capsule 43 mg, 130 mg (generic Antara), fenofibrate micronized capsule 67 mg, 134 mg, 200 mg (generic Lofibra/Tricor)
Astagraf XL	Single Source Brand	Transplant	Same active ingredient of therapeutic equivalent available by prescription	tacrolimus (generic Prograf)
Avelox tablet	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	moxifloxacin tablets (generic Avelox)
Brisdelle	Brand & Generic	Symptoms associated with menopause	Same active ingredient of therapeutic equivalent available by prescription	estradiol (generic Estrace), paroxetine (generic Paxil), paroxetine extended-release (generic Paxil CR)
Clobex Lotion	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Clodan Kit	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate)
Cloderm cream	Multi-Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	clocortolone 0.1% cream (generic Cloderm), mometasone furoate cream 0.1% (generic Elocon)
Denavir	Single Source Brand	Infections	Therapeutic Equivalent to an OTC medication	acyclovir capsule/tablet (generic Zovirax), famciclovir tablet (generic Famvir), valacyclovir tablet (generic Valtrex), OTC - Abreva
doxycycline 75 mg capsule (generic Monodox)	Generic Only	Infections	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate (generic Vibramycin), doxycycline monohydrate 50 mg or 100 mg (generic Monodox)
Ertaczo	Single Source Brand	Infections	Therapeutic Equivalent to an OTC medication	ciclopirox (generic Loprox), econazole (generic Spectazole), ketoconazole (generic Nizoral), OTC - clotrimazole, miconazole, terbinafine
Evista	Multi-Source Brand	Osteoporosis	Same active ingredient of therapeutic equivalent available by prescription	raloxifene tablet (generic Evista)
Fenoglide	Brand & Generic	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablet (generic Lofibra, Tricor, Triglide), fenofibrate micronized capsule 43 mg, 130 mg (generic Antara), fenofibrate micronized capsule 67 mg, 134 mg, 200 mg (generic Lofibra/Tricor)
Fibricor (fenofibrate)	Brand & Authorized Brand Alternative	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablet (generic Lofibra, Tricor, Triglide), fenofibrate micronized capsule 43 mg, 130 mg (generic Antara), fenofibrate micronized capsule 67 mg, 134 mg, 200 mg (generic Lofibra/Tricor)
Fioricet with Codeine 50 mg/300 mg/40 mg/30 mg	Brand & Generic	Pain	Same active ingredient of therapeutic equivalent available by prescription	butalbital/acetaminophen/caffeine/codeine phosphate 50 mg/325 mg/40 mg/30 mg (generic Fioricet with Codeine)
Glycate (glycopyrrolate)	Brand & Authorized Brand Alternative	Excessive secretions	Same active ingredient of therapeutic equivalent available by prescription	glycopyrrolate (generic Robinul)
Lipofen	Brand & Generic	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablet (generic Lofibra, Tricor, Triglide), fenofibrate micronized capsule 43 mg, 130 mg (generic Antara), fenofibrate micronized capsule 67 mg, 134 mg, 200 mg (generic Lofibra/Tricor)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Lofibra capsules	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablet (generic Lofibra, Tricor, Triglide), fenofibrate micronized capsule 43 mg, 130 mg (generic Antara), fenofibrate micronized capsule 67 mg, 134 mg, 200 mg (generic Lofibra/Tricor)
Lovaza	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	omega-3-acid ethyl esters (generic Lovaza)
Lunesta	Multi-Source Brand	Sleep	Same active ingredient of therapeutic equivalent available by prescription	eszopiclone (generic Lunesta)
Luzu (luliconazole)	Brand & Authorized Brand Alternative	Infections	Therapeutic Equivalent to an OTC medication	ciclopirox (generic Loprox), econazole (generic Spectazole), ketoconazole (generic Nizoral), OTC - clotrimazole, miconazole, terbinafine
Mepron suspension	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	atovaquone suspension (generic Mepron)
Micardis	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	telmisartan (generic Micardis)
Micardis HCT	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	telmisartan/hydrochlorothiazide (generic Micardis HCT)
Naftin 1% and 2% cream, gel	Brand & Generic	Infections	Therapeutic Equivalent to an OTC medication	ciclopirox (generic Loprox), econazole (generic Spectazole), ketoconazole (generic Nizoral), OTC - clotrimazole, miconazole, terbinafine
Neo-Synalar Kit	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	fluocinolone cream (generic Lidex) plus OTC Neosporin
Neuac 1.2%-5% Kit	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin 1.2%/benzoyl peroxide 5% gel (generic Duac), clindamycin solution (generic Cleocin-T) plus OTC benzoyl peroxide
Noritrate	Single Source Brand	Rosacea	Same active ingredient of therapeutic equivalent available by prescription	metronidazole 0.75% cream (generic Metrocream)
Olux	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate)
Olux-E	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Oxistat Lotion	Brand & Generic	Infections	Therapeutic Equivalent to an OTC medication	ciclopirox (generic Loprox), econazole (generic Spectazole), ketoconazole (generic Nizoral), OTC - clotrimazole, miconazole, terbinafine
Pexeva	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	paroxetine (generic Paxil), paroxetine extended-release (generic Paxil CR)
Prilosec Suspension	Single Source Brand	Ulcers, heartburn & reflux	Therapeutic Equivalent to an OTC medication	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Protonix Granules for Suspension	Brand & Generic	Ulcers, heartburn & reflux	Therapeutic Equivalent to an OTC medication	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Quartette	Brand & Generic	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	levonorgestrel/ethinyl estradiol 0.15/0.03 mg [Iclevia, Introvale, Jolessa, Setlakin (branded generic Seasonale)]
Taclonex Ointment	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	Enstilar foam, Taclonex suspension
Topicort spray	Brand & Generic	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	desoximetasone 0.05% gel (generic Topicort), fluocinonide 0.05% solution (generic Lidex)
Triglide	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablet (generic Lofibra, Tricor, Triglide), fenofibrate micronized capsule 43 mg, 130 mg (generic Antara), fenofibrate micronized capsule 67 mg, 134 mg, 200 mg (generic Lofibra/Tricor)
Utopic	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	urea 40%
Viramune XR	Multi-Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	nevirapine (generic Viramune)
Vusion (miconazole)	Brand & Authorized Brand Alternative	Diaper rash	Therapeutic Equivalent to an OTC medication	nystatin Cream (generic Mycostatin), OTC - miconazole
Zorvolex	Single Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	diclofenac tablet (generic Cataflam, generic Voltaren), ibuprofen (generic Motrin), naproxen tablets (generic Anaprox, generic Anaprox DS, generic Naprosyn), OTC ibuprofen (Advil/Motrin), OTC naproxen (Aleve)
Zovirax cream	Brand & Generic	Infections	Therapeutic Equivalent to an OTC medication	acyclovir capsule/tablet (generic Zovirax), famciclovir tablet (generic Famvir), valacyclovir tablet (generic Valtrex), OTC - Abreva

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Duragesic	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	fentanyl transdermal patch [12, 25, 50, 75, 100 mcg/hr only (generic Duragesic)]
Fabior	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	OTC Differin 0.1% gel, tretinoin cream (generic Retin-A), tazarotene 0.1% cream (generic Tazorac)
SelRx	Single Source Brand	Skin Conditions	Legend Medication with OTC Equivalent	selenium sulfide shampoo
Atralin	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	OTC Differin 0.1% gel, tretinoin cream (generic Retin-A)
Tretin-X	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	OTC Differin 0.1% gel, tretinoin cream (generic Retin-A)
Zutripro	Multi-Source Brand	Cough & Cold	Same active ingredient of therapeutic equivalent available by prescription	chlorpheniramine/hydrocodone/pseudoephedrine solution (generic Zutripro)
Genestin	Single Source Brand	Hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	estradiol tablet (generic Estrace), Premarin
Avinza	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	morphine sulfate extended-release tablet (generic MS Contin), morphine sulfate extended-release capsule (generic Avinza)
Fioricet with Codeine 50 mg/325 mg/40 mg/30 mg	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	butalbital/acetaminophen/caffeine/codeine phosphate 50 mg/325 mg/40 mg/30 mg (generic Fioricet with Codeine)
Khedezla	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	desvenlafaxine (generic Pristiq), venlafaxine extended-release capsule (generic Effexor XR)
Avar	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	sulfacetamide sodium/sulfur 10-5%
Avar LS	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	sulfacetamide sodium/sulfur 10-5%
Celebrex	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	celecoxib (generic Celebrex)
Diovan	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	valsartan (generic Diovan)
Ecoza	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	ciclopirox (generic Loprox), econazole (generic Spectazole), ketoconazole (generic Nizoral), OTC - clotrimazole, miconazole, terbinafine
Evzio (naloxone)	Brand & Authorized Brand Alternative	Opioid overdose	Same active ingredient of therapeutic equivalent available by prescription	naloxone (generic Narcan), Narcan Nasal Spray
Keralac	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	urea 40% cream

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Otrexup	Single Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	methotrexate tablets, Rasuvo
Ovace Plus	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	sulfacetamide sodium/sulfur 10-5%
Plexion	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	sulfacetamide sodium/sulfur 10-5%
Protopic	Multi-Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	tacrolimus ointment (generic Protopic)
Qudexy XR	Brand & Generic	Seizures	Same active ingredient of therapeutic equivalent available by prescription	topiramate immediate-release (generic Topamax)
Sitavig	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	acyclovir capsule/tablet (generic Zovirax), famciclovir tablet (generic Famvir), valacyclovir tablet (generic Valtrex), OTC - Abreva
UltraSal-ER	Single Source Brand	Wart removal	Legend Medication with OTC Equivalent	OTC salicylic acid
Versacloz	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	clozapine (generic Clozaril), clozapine orally disintegrating tablet (generic Fazaclo)
Vogelxo (Testosterone topical gel - Upsher Smith)	Brand & Generic	Testosterone replacement	Same active ingredient of therapeutic equivalent available by prescription	testosterone 1.62% gel pump (generic Androgel 1.62%), Testim
Minocin	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	minocycline immediate-release capsules (generic Minocin)
Pennsaid 2% solution	Single Source Brand	Pain & inflammation	Legend Medication with OTC Equivalent	OTC Voltaren Arthritis Pain 1% gel
Saizen	Single Source Brand	Growth hormone	Same active ingredient of therapeutic equivalent available by prescription	Norditropin Flexpro, Nutropin AQ NuSpin
Zomacton	Single Source Brand	Growth hormone	Same active ingredient of therapeutic equivalent available by prescription	Norditropin Flexpro, Nutropin AQ NuSpin
Adrenaclick	Multi-Source Brand	Severe allergic reactions	Same active ingredient of therapeutic equivalent available by prescription	epinephrine auto-injector (generic Adrenaclick, generic EpiPen/EpiPen Jr.), Auvi-Q, Symjepi
Vituz	Single Source Brand	Cough & Cold	Same active ingredient of therapeutic equivalent available by prescription	chlorpheniramine/hydrocodone/pseudoephedrine (generic Zutripro), guaifenesin/codeine solution (generic Cheratussin), hydrocodone polistirex/chlorpheniramine polistirex (generic Tussionex Pennkinetic)
Prodrin	Multi-Source Brand	Headaches	Same active ingredient of therapeutic equivalent available by prescription	N/A

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Exalgo	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	morphine sulfate extended-release tablet (generic MS Contin)
Abilify tablets	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	aripiprazole (generic Abilify)
Hysingla ER	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	hydrocodone extended-release (generic Hysingla), morphine sulfate extended-release tablet (generic MS Contin)
Acticlate	Brand & Generic	Infections	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate (generic Vibramycin, Vibra-tab), doxycycline monohydrate 50 mg or 100 mg (generic Monodox)
Afrezza	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humalog KwikPen, Insulin Lispro KwikPen, vial (unbranded Humalog), Lyumjev KwikPen
Bunavail	Single Source Brand	Opioid dependence	Same active ingredient of therapeutic equivalent available by prescription	buprenorphine/naloxone (generic Suboxone), Zubsolv
Colcrys	Multi-Source Brand	Gout	Same active ingredient of therapeutic equivalent available by prescription	colchicine tablet (generic Colcrys), Mitigare
Differin 0.3% gel	Brand & Generic	Acne	Legend Medication with OTC Equivalent	OTC Differin 0.1% gel, tretinoin cream (generic Retin-A)
Esomeprazole strontium	Single Source Brand	Ulcers, heartburn & reflux	Legend Medication with OTC Equivalent	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Fortamet	Brand & Generic	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	metformin (generic Glucophage), metformin extended-release (generic Glucophage XR)
Glumetza	Brand & Generic	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	metformin (generic Glucophage), metformin extended-release (generic Glucophage XR)
Karbinal ER	Single Source Brand	Allergies	Same active ingredient of therapeutic equivalent available by prescription	carbinoxamine tablets (generic Palgic)
Natesto	Single Source Brand	Testosterone replacement	Same active ingredient of therapeutic equivalent available by prescription	testosterone 1.62% gel pump (generic Androgel 1.62%), Testim
Onexton	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	clindamycin topical solution (generic Cleocin T) + OTC benzoyl peroxide or clindamycin/benzoyl peroxide (generic Duac) 1.2%-5%
PCP 100 Kit	Single Source Brand	Constipation	Same active ingredient of therapeutic equivalent available by prescription	metoclopramide (generic Reglan) + OTC medications for constipation
Select Diabetic Meters ⁴	Single Source Brand	Diabetes	Therapeutic Equivalent to an OTC medication	Accu-Check Guide/Guide Me Blood Glucose Monitoring System, Contour Next Blood Glucose Monitoring System, OneTouch Verio Flex Blood Glucose Monitoring System

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Select Diabetic Test Strips ⁴	Single Source Brand	Diabetes	Therapeutic Equivalent to an OTC medication	Accu-Check Guide Test Strips, Contour Next Test Strips, OneTouch Ultra Test Strips, OneTouch Verio Test Strips
Subsys	Single Source Brand	Cancer pain	Same active ingredient of therapeutic equivalent available by prescription	fentanyl citrate lozenges (generic Actiq)
Tirosint (levothyroxine) capsules	Brand & Authorized Brand Alternative	Thyroid hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	levothyroxine (generic Synthroid)
Xigduo XR	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Synjardy, Synjardy XR
Zyrtec oral solution	Brand & Generic	Allergies	Legend Medication with OTC Equivalent	OTC Children's Zyrtec Allergy Syrup
Xartemis XR	Single Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	oxycodone/acetaminophen (generic Percocet)
Moderiba Tablet, Pak	Generic Only	Hepatitis C	Same active ingredient of therapeutic equivalent available by prescription	ribavirin (generic Copegus)
Anafranil	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	clomipramine (generic Anafranil)
Anusol HC Supp	Multi-Source Brand	Hemorrhoids	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone cream (generic Anusol-HC), hydrocortisone suppository (generic Anusol-HC)
Aptensio XR	Brand & Generic	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Augmentin	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	amoxicillin/clavulanic acid (generic Augmentin)
Augmentin ES-600	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	amoxicillin/clavulanic acid (generic Augmentin)
Avodart	Multi-Source Brand	Benign Prostatic Hypertrophy	Same active ingredient of therapeutic equivalent available by prescription	dutasteride (generic Avodart), finasteride (generic Proscar)
Betapace	Multi-Source Brand	Arrhythmias	Same active ingredient of therapeutic equivalent available by prescription	sotalol (generic Betapace)
Cardizem	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	diltiazem (generic Cardizem)
Cardizem CD	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	diltiazem extended-release (generic Cardizem CD)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Cardizem LA	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	diltiazem extended-release (generic Cardizem LA)
Colazal	Multi-Source Brand	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	balsalazide (generic Colazal)
D.H.E. 45	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	dihydroergotamine (generic D.H.E. 45), eletriptan (generic Relpax), naratriptan (generic Amerge), rizatriptan (generic Maxalt/Maxalt MLT), sumatriptan (generic Imitrex), zolmitriptan (generic Zomig/Zomig-ZMT)
Dibenzyline	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	phenoxybenzamine (generic Dibenzyline)
doxycycline delayed-release capsule (generic Oracea)	Generic	Rosacea	Same active ingredient of therapeutic equivalent available by prescription	minocycline immediate-release capsules (generic Minocin), doxycycline hyclate (generic Vibramycin), doxycycline monohydrate 50 mg and 100 mg (generic Monodox)
Duexis	Brand & Generic	Pain	Legend Medication with OTC Equivalent	ibuprofen (generic Motrin) + OTC famotidine (generic Pepcid AC)
E.E.S. 400	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	erythromycin ethylsuccinate (generic E.E.S. 400)
Evekeo	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine immediate-release (generic Evekeo), amphetamine/dextroamphetamine immediate-release (generic Adderall), dextroamphetamine immediate-release (generic Dexedrine)
Exelon Patch	Multi-Source Brand	Alzheimer's disease	Same active ingredient of therapeutic equivalent available by prescription	rivastigmine transdermal patch (generic Exelon), rivastigmine capsules (generic Exelon)
fentanyl transdermal patch 37.5, 62.5, 87.5 mcg/hr only (Select strengths only)	Generic Only	Pain	Same active ingredient of therapeutic equivalent available by prescription	fentanyl transdermal patch [12, 25, 50, 75, 100 mcg/hr only (generic Duragesic)]
Invega	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	paliperidone (generic Invega)
Duloxetine 40 mg (generic Irenka)	Brand & Generic	Mental health	Same active ingredient of therapeutic equivalent available by prescription	duloxetine (generic Cymbalta), venlafaxine extended-release (generic Effexor XR)
Kenalog Spray	Multi-Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	triamcinolone spray (generic Kenalog)
Kitabis Pak	Single Source Brand	Supportive care for Cystic Fibrosis	Same active ingredient of therapeutic equivalent available by prescription	tobramycin 300 mg/4 mL (generic Bethkis)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Lescol XL	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	atorvastatin (generic Lipitor), fluvastatin extended-release (generic Lescol XL), lovastatin (generic Mevacor), pravastatin (generic Pravachol), rosuvastatin (generic Crestor), simvastatin (generic Zocor)
Librax	Multi-Source Brand	Irritable bowel disease	Same active ingredient of therapeutic equivalent available by prescription	chlordiazepoxide/clidinium (generic Librax)
Lodosyn	Multi-Source Brand	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	carbidopa (generic Lodosyn)
Loprox Shampoo	Multi-Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	ciclopirox shampoo (generic Loprox Shampoo)
Lotronex	Multi-Source Brand	Irritable bowel disease	Same active ingredient of therapeutic equivalent available by prescription	alosetron (generic Lotronex)
Migranal	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	dihydroergotamine nasal spray (generic Migranal), eletriptan (generic Relpax), naratriptan (generic Amerge), rizatriptan (generic Maxalt/Maxalt MLT), sumatriptan (generic Imitrex), zolmitriptan (generic Zomig/Zomig-ZMT)
Namenda XR	Multi-Source Brand	Alzheimer's disease	Same active ingredient of therapeutic equivalent available by prescription	memantine immediate-release (generic Namenda), memantine extended-release (generic Namenda XR)
Namzaric	Single Source Brand	Alzheimer's disease	Same active ingredient of therapeutic equivalent available by prescription	donepezil (generic Aricept) plus memantine immediate-release (generic Namenda)
Nuversa	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	metronidazole 0.75% vaginal gel (generic Metrogel-Vaginal)
Nuvigil	Multi-Source Brand	Narcolepsy	Same active ingredient of therapeutic equivalent available by prescription	armodafinil (generic Nuvigil)
Penlac Nail Lacquer	Multi-Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	ciclopirox 8% solution (generic Penlac Nail Lacquer)
Proctocort	Multi-Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone 1% cream (generic Proctocort), hydrocortisone 30 mg suppository (generic Proctocort)
Rytary	Single Source Brand	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	carbidopa/levodopa extended-release tablet (generic Sinemet CR), carbidopa/levodopa (generic Sinemet)
Synalar cream, ointment, solution	Multi-Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	fluocinolone 0.01% solution (generic Synalar solution), fluocinolone 0.025% cream, ointment (generic Synalar cream, ointment)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Tasmar	Multi-Source Brand	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	entacapone (generic Comtan), tolcapone (generic Tasmar)
Tenoretic	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	atenolol/chlorthalidone (generic Tenoretic 50, Tenoretic 100)
Tenormin	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	atenolol (generic Tenormin)
Tivorbex (indomethacin)	Brand & Authorized Brand Alternative	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	indomethacin capsule (generic Indocin)
Tuzistra XR	Single Source Brand	Cough & cold	Same active ingredient of therapeutic equivalent available by prescription	hydrocodone polistirex/chlorpheniramine polistirex (generic Tussionex Pennkinetic), Z-Tuss AC
Valcyte tablets	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	valganciclovir (generic Valcyte)
Vaseretic	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	enalapril/hydrochlorothiazide (generic Vaseretic)
Vasotec	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	enalapril (generic Vasotec)
Vimovo	Brand & Generic	Pain & inflammation	Legend Medication with OTC Equivalent	naproxen tablets (generic Naprosyn) plus omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prevacid 24, Prilosec OTC, Zegerid OTC
Xenazine	Multi-Source Brand	Huntington's disease	Same active ingredient of therapeutic equivalent available by prescription	tetrabenazine (generic Xenazine)
Zegerid packet	Brand & Generic	Ulcers, heartburn & reflux	Same active ingredient of therapeutic equivalent available by prescription	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), OTC - Nexium 24 HR, Prilosec OTC, Prevacid 24 HR, Zegerid OTC
Zestoretic	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	lisinopril/hydrochlorothiazide (generic Zestoretic)
Zestril	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	lisinopril (generic Zestril)
Zyvox	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	linezolid (generic Zyvox)
Pazeo	Single Source Brand	Allergies	Legend Medication with OTC Equivalent	OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), epinastine (generic Elestat), Lastacaft

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
FlowTuss	Single Source Brand	Cough & Cold	Same active ingredient of therapeutic equivalent available by prescription	guaifenesin/codeine solution (Cheratussin)
Hycofenix	Single Source Brand	Cough & Cold	Same active ingredient of therapeutic equivalent available by prescription	guaifenesin/codeine solution (Cheratussin)
Clarifoam EF	Multi-Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	sulfacetamide sodium/sulfur 10-5% (generic Clarifoam EF)
Embeda	Single Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	morphine sulfate extended-release tablet (generic MS Contin)
Crestor	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	rosuvastatin (generic Crestor)
Butrans (brand only)	Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	tramadol extended-release (generic Ultram ER), tramadol biphasic 24hr extended-release tablet (generic Ryzolt), Belbuca
Durlaza	Single Source Brand	Stroke & heart attack prevention	Legend Medication with OTC Equivalent	OTC aspirin
Envarsus XR ⁴	Single Source Brand	Transplant	Same active ingredient of therapeutic equivalent available by prescription	tacrolimus (generic Prograf)
Gleevec	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	imatinib (generic Gleevec)
Granix	Single Source Brand	Neutropenia	Same active ingredient of therapeutic equivalent available by prescription	Zarxio
Ixinity	Single Source Brand	Hemophilia	Same active ingredient of therapeutic equivalent available by prescription	BeneFIX, Rixubis
Neo-Synalar cream	Single Source Brand	Skin Conditions	Same active ingredient of therapeutic equivalent available by prescription	OTC Triple Antibiotic Ointment plus fluocinolone 0.025% cream (generic Synalar)
Neupogen	Single Source Brand	Neutropenia	Same active ingredient of therapeutic equivalent available by prescription	Zarxio
Onzetra Xsail	Single Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	sumatriptan nasal spray (generic Imitrex)
Ortho Tri-Cyclen Lo	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	norgestimate/ethinyl estradiol Lo 0.18-0.215-0.25/0.025 mg [Tri-Lo-Estarylla, Tri-Lo-Marzia, Tri-Lo-Mili, Tri-Lo-Sprintec, Tri-Vylibra Lo (branded generics Ortho Tri-Cyclen Lo)]
Oxaydo	Single Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	oxycodone immediate-release (generic Roxicodone)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
OxyContin (oxycodone extended-release)	Brand & Authorized Brand Alternative	Pain	Same active ingredient of therapeutic equivalent available by prescription	morphine sulfate extended-release tablet (generic MS Contin)
Prestalia	Single Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	amlodipine (generic Norvasc) plus perindopril (generic Aceon)
Viramune	Multi-Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	nevirapine (generic Viramune)
Vivlodex	Brand & Generic	Pain	Same active ingredient of therapeutic equivalent available by prescription	meloxicam (generic Mobic)
Zembrace SymTouch	Single Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	sumatriptan injection (generic Imitrex)
Epiduo Forte	Brand & generic	Acne	Legend Medication with OTC Equivalent	OTC Differin 0.1% gel plus OTC benzoyl peroxide
Helixate FS	Single Source Brand	Hemophilia	Same active ingredient of therapeutic equivalent available by prescription	Kogenate FS, Kovaltry, Novoeight, Nuwiq
Sumavel DosePro	Single Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	sumatriptan injection (generic Imitrex)
Zecuity	Single Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	sumatriptan injection, nasal spray, tablets (generic Imitrex)
Adzenys (amphetamine extended-release)	Brand & Authorized Brand Alternative	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Allzital	Single Source Brand	Headaches	Same active ingredient of therapeutic equivalent available by prescription	butalbital/acetaminophen 50mg/325 mg (generic Phenrilin)
Alogliptin (Nesina authorized generic)	Authorized Brand Alternative	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Nesina
Alogliptin/metformin (Kazano authorized generic)	Authorized Brand Alternative	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Kazano
Alogliptin/pioglitazone (Oseni authorized generic)	Authorized Brand Alternative	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Oseni
Avita 0.025%	Generic Only	Acne	Therapeutic Equivalent to an OTC medication	OTC Differin 0.1% gel, tretinoin cream (generic Retin-A)
Benicar	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	olmesartan (generic Benicar)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Benicar HCT	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	olmesartan HCT (generic Benicar HCT)
Cellcept	Multi-Source Brand	Transplant	Same active ingredient of therapeutic equivalent available by prescription	mycophenolate (generic Cellcept)
Differin 0.1% cream, gel, lotion	Brand & Generic	Acne	Legend Medication with OTC Equivalent	OTC Differin 0.1% gel, tretinoin cream (generic Retin-A)
Dyanavel XR	Single Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Epiduo	Brand & Generic	Acne	Legend Medication with OTC Equivalent	OTC Differin 0.1% gel plus OTC benzoyl peroxide
EpiPen/EpiPen Jr	Multi-Source Brand	Severe allergic reactions	Same active ingredient of therapeutic equivalent available by prescription	epinephrine auto-injector (generic Adrenaclick, generic EpiPen/EpiPen Jr.), Auvi-Q, Symjepi
Epzicom	Multi-Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	abacavir/lamivudine (generic Epzicom)
Imuran	Multi-Source Brand	Transplant	Same active ingredient of therapeutic equivalent available by prescription	azathioprine (generic Imuran)
Loprox 0.77%	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	ciclopirox 0.77% (generic Loprox)
metoprolol tartrate 37.5, 75 mg	Generic Only	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	metoprolol (25, 50, 100 mg strengths) (generic Lopressor)
minocycline tablet (generic Dynacin)	Generic Only	Acne	Same active ingredient of therapeutic equivalent available by prescription	minocycline immediate-release capsules (generic Minocin)
Myfortic	Multi-Source Brand	Transplant	Same active ingredient of therapeutic equivalent available by prescription	mycophenolate delayed-release (generic Myfortic)
Neoral	Multi-Source Brand	Transplant	Same active ingredient of therapeutic equivalent available by prescription	cyclosporine modified (generic Neoral)
Parlodel	Multi-Source Brand	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	bromocriptine (generic Parlodel)
Quillichew ER	Single Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Rapamune	Multi-Source Brand	Transplant	Same active ingredient of therapeutic equivalent available by prescription	sirolimus (generic Rapamune)
Retin-A cream	Multi-Source Brand	Acne	Therapeutic Equivalent to an OTC medication	OTC Differin 0.1% gel, tretinoin cream (generic Retin-A)
Retin-A gel	Brand & Generic	Acne	Therapeutic Equivalent to an OTC medication	OTC Differin 0.1% gel, tretinoin cream (generic Retin-A)
Sandimmune	Multi-Source Brand	Transplant	Same active ingredient of therapeutic equivalent available by prescription	cyclosporine (generic Sandimmune)
Sernivo	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone lotion (generic Diprosone)
Solodyn	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	minocycline immediate-release capsules (generic Minocin)
Minocycline ER 45 mg, 90 mg, 135 mg ⁴	Generic Only	Acne	Same active ingredient of therapeutic equivalent available by prescription	minocycline immediate-release capsules (generic Minocin)
Spritam	Single Source Brand	Seizures	Same active ingredient of therapeutic equivalent available by prescription	levetiracetam tablets, oral solution (generic Keppra)
Targadox	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate (generic Vibramycin), doxycycline monohydrate (generic Monodox)
Taytulla	Brand & Generic	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	norethindrone/ethinyl estradiol 24 FE 1/0.02 mg [Aurovela 24 FE, Junel 24 FE, Larin 24 FE, Microgestin 24 FE, Tarina 24 FE (branded generic Loestrin 24 FE)], norethindrone/ethinyl estradiol FE 1/0.02 mg [Aurovela 24 FE, Junel 24 FE, Larin 24 FE, Microgestin 24 FE, Tarina 24 FE (branded generics for Loestrin FE)]
Tolak	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	fluorouracil 5% cream (generic Efudex)
Vagifem	Multi-Source Brand	Hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	estradiol vaginal tablet [Yuvaferm (generic Vagifem)]
Zetia	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	ezetimibe tablet (generic Zetia)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Metadate CD	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Floxin Otic	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	ofloxacin 0.3 % solution (generic Floxin Otic, Ocuflax)
AirDuo Respiclick	Brand	Asthma/COPD	Same active ingredient of therapeutic equivalent available by prescription	fluticasone propionate/salmeterol (generic Advair Diskus), Advair HFA, Breo Ellipta, Fluticasone propionate/Salmeterol (AirDuo Respiclick Authoized Generic), Symbicort
Arymo ER	Single Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	morphine sulfate extended-release tablet (generic MS Contin)
Azilect	Multi-Source Brand	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	rasagiline (generic Azilect)
Baraclude tablets	Multi-Source Brand	Hepatitis B	Same active ingredient of therapeutic equivalent available by prescription	entecavir tablet (generic Baraclude)
BromSite	Single Source Brand	Eye pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	bromfenac ophthalmic solution (generic Bromday, Xibrom), diclofenac ophthalmic solution (generic Voltaren), ketorolac ophthalmic solution (generic Acular), Nevanac
Cordran 0.05% lotion	Multi-Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	flurandrenolide 0.05% lotion (generic Cordran), triamcinolone acetonide 0.1% lotion (generic Kenalog lotion)
Dulera	Single Source Brand	Asthma/COPD	Therapeutic Equivalent available by prescription	fluticasone propionate/salmeterol (generic Advair Diskus), Advair HFA, Breo Ellipta, Symbicort
Dutoprol	Single Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	metoprolol (generic Toprol-XL) plus hydrochlorothiazide
Emflaza	Single Source Brand	Duchenne Muscular Dystrophy	Therapeutic Equivalent available by prescription	prednisone
GoNitro	Single Source Brand	Chest pain	Same active ingredient of therapeutic equivalent available by prescription	nitroglycerin spray (generic NitroMist), nitroglycerin sublingual tablets (generic Nitrostat)
Inderal LA	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	propranolol extended-release capsule (generic Inderal LA)
Livalo	Brand & Generic	Cholesterol/Lipid lowering	Therapeutic Equivalent available by prescription	atorvastatin (generic Lipitor), lovastatin (generic Mevacor), pravastatin (generic Pravachol), rosuvastatin (generic Crestor), simvastatin (generic Zocor)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Otovel (ciprofloxacin/fluocinolone)	Brand & Authorized Brand Alternative	Infections	Same active ingredient of therapeutic equivalent available by prescription	ofloxacin 0.3% solution (generic Floxin, Ocuflax)
Pristiq	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	desvenlafaxine extended-release tablet (generic Pristiq)
Rayaldee	Single Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	calcitriol (generic Rocaltrol), doxercalciferol (generic Hectorol), paricalcitol (generic Zemplar)
Relistor tablet	Single Source Brand	Constipation	Same active ingredient of therapeutic equivalent available by prescription	Symproic
Restasis MultiDose	Single Source Brand	Dry eye disease	Same active ingredient of therapeutic equivalent available by prescription	Restasis (single use vials), Xiidra
RyVent (carbinoxamine) 6 mg	Generic Only	Allergies	Same active ingredient of therapeutic equivalent available by prescription	carbinoxamine tablets (generic Palgic)
Sandostatin	Multi-Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	octreotide (generic Sandostatin)
Sarafem tablets	Brand & Generic	Mental health	Same active ingredient of therapeutic equivalent available by prescription	fluoxetine capsules (generic Prozac)
Seroquel XR	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	quetiapine extended-release (generic Seroquel XR)
Strattera	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	atomoxetine (generic Strattera)
Vigamox	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	moxifloxacin ophthalmic solution (generic Vigamox)
Vytorin	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	simvastatin/ezetimibe (generic Vytorin)
Xultophy	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Soliqua
Yosprala (aspirin/omeprazole)	Brand & Authorized Brand Alternative	Stroke & heart attack prevention	Legend Medication with OTC Equivalent	OTC aspirin plus omeprazole (Prilosec), pantoprazole (Protonix)
Daxbia	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	cephalexin (generic Keflex)
Prozac Weekly	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	fluoxetine capsules (generic Prozac)
LoCort/ZonaCort	Single Source Brand	Oral Steroid	Same active ingredient of therapeutic equivalent available by prescription	dexamethasone tablets

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Opana ER	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	morphine sulfate extended-release tablet (generic MS Contin), oxycodone extended-release (generic Opana ER)
Micort-HC 2.5% cream	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone 2.5% cream
Acetaminophen/Caffeine/Dihydrocodeine 325 mg/30mg/16mg tablet (e.g. Dvorah, Panlor)	Brand & Generic	Pain	Same active ingredient of therapeutic equivalent available by prescription	acetaminophen/codeine (Tylenol with codeine), Trezix
Climara	Multi-Source Brand	Hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	estradiol transdermal patch (generic Climara) amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Cotempla XR-ODT	Single Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	
Effient	Multi-Source Brand	Stroke & heart attack prevention	Same active ingredient of therapeutic equivalent available by prescription	prasugrel (generic Effient)
Fosrenol	Multi-Source Brand	Elevated phosphate levels	Same active ingredient of therapeutic equivalent available by prescription	lanthanum chewable tablets (generic Fosrenol)
Gocovri	Single Source Brand	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	amantadine immediate-release (generic Symmetrel)
MorphaBond ER	Single Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	morphine sulfate extended-release tablet (generic MS Contin)
Motofen	Single Source Brand	Diarrhea	Same active ingredient of therapeutic equivalent available by prescription	OTC loperamide (generic Imodium A-D), diphenoxylate/atropine (generic Lomotil)
Mydayis	Brand & Generic	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Relpax	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	eletriptan (generic Relpax)
Reyataz capsules	Multi-Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	atazanavir capsules (Reyataz)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Tamiflu	Multi-Source Brand	Influenza	Same active ingredient of therapeutic equivalent available by prescription	oseltamivir (generic Tamiflu)
Utibron Neohaler	Single Source Brand	COPD	Same active ingredient of therapeutic equivalent available by prescription	Anoro Ellipta, Bevespi Aerosphere, Stiolto Respimat
Viagra	Multi-Source Brand	Erectile dysfunction	Same active ingredient of therapeutic equivalent available by prescription	sildenafil (generic Viagra)
Viread tablets	Multi-Source Brand	Hepatitis B/HIV	Same active ingredient of therapeutic equivalent available by prescription	tenofovir tablets (generic Viread)
Xadago	Single Source Brand	Parkinson's disease	Therapeutic Equivalent available by prescription	selegiline (generic Eldepryl), rasagiline (generic Azilect)
chlorzoxazone 250 mg tablet	Generic Only	Muscle relaxant	Same active ingredient of therapeutic equivalent available by prescription	chlorzoxazone 500 mg tablet (generic Parafon Forte DSC)
nitisinone (generic Orfadin)	Generic Only	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	Orfadin
ArmonAir RespiClick	Single Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	Arnuity Ellipta, QVAR RediHaler
Zodex	Single Source Brand	Oral Steroid	Same active ingredient of therapeutic equivalent available by prescription	dexamethasone (generic Decadron)
Aktipak	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	benzoyl peroxide 5%/erythromycin 3% gel (generic Benzamycin), erythromycin gel (generic Erygel)
Novolin 70/30 (includes Relion)	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humulin 70/30
Novolin N (includes Relion)	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humulin N
Novolin R (includes Relion)	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humulin R
Novolog	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humalog KwikPen, Insulin Lispro KwikPen, vial (unbranded Humalog), Lyumjev KwikPen
Novolog 70/30	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humalog 75/25, Insulin Lispro Protamine/Insulin Lispro KwikPen Mix 75/25 (unbranded Humalog 75/25 KwikPen)
Vyzulta	Single Source Brand	Glaucoma	Therapeutic Equivalent available by prescription	latanoprost (generic Xalatan), Lumigan 0.01%
Admelog	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humalog KwikPen, Insulin Lispro KwikPen, vial (unbranded Humalog), Lyumjev KwikPen

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Apidra	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humalog KwikPen, Insulin Lispro KwikPen, vial (unbranded Humalog), Lyumjev KwikPen
Atripla	Multi-Source Brand	HIV	Therapeutic Equivalent available by prescription	efavirenz/emtricitabine/tenofovir disoproxil fumarate (generic Atripla), Symfi, Symfi Lo
Bonjesta	Single Source Brand	Nausea & vomiting associated with pregnancy	Therapeutic Equivalent available by supplement	OTC doxylamine (Unisom) + pyridoxine (Vitamin B6)
Copaxone	Multi-Source Brand	Multiple Sclerosis	Same active ingredient of therapeutic equivalent available by prescription	glatiramer acetate [Glatopa (generic Copaxone)]
Decadron	Single Source Brand	Oral steroid	Same active ingredient of therapeutic equivalent available by prescription	dexamethasone
Diclegis	Brand & Generic	Nausea & vomiting associated with pregnancy	Therapeutic Equivalent available by supplement	OTC doxylamine (Unisom) + pyridoxine (Vitamin B6)
Farxiga	Single Source Brand	Diabetes	Therapeutic Equivalent available by prescription	Jardiance
Fenortho	Generic Only	Pain & inflammation	Therapeutic Equivalent to an OTC medication	ibuprofen (generic Motrin), naproxen tablets (generic Naprosyn, generic Anaprox DS), OTC ibuprofen (Advil/Motrin), OTC naproxen (Aleve)
Fiasp	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humalog KwikPen, Insulin Lispro KwikPen, vial (unbranded Humalog), Lyumjev KwikPen
Impoyz	Single Source Brand	Skin conditions	Therapeutic Equivalent available by prescription	betamethasone dipropionate augmented 0.05% cream (generic Diprolene AF) and fluocinonide 0.05% cream (generic Lidex cream)
Lyrica CR	Brand & Generic	Neuropathic pain	Same active ingredient of therapeutic equivalent available by prescription	amitriptyline (generic Elavil), duloxetine (generic Cymbalta), gabapentin (generic Neurontin), pregabalin (generic Lyrica)
Movantik	Single Source Brand	Constipation	Therapeutic Equivalent available by prescription	Symproic
Nalfon	Brand & Generic	Pain & inflammation	Therapeutic Equivalent to an OTC medication	ibuprofen (generic Motrin), naproxen tablets (generic Naprosyn, generic Anaprox DS), OTC ibuprofen (Advil/Motrin), OTC naproxen (Aleve)
Norvir tablets	Multi-Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	ritonavir tablets (generic Norvir)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Qtern	Single Source Brand	Diabetes	Therapeutic Equivalent available by prescription	Glyxambi
Rebinyn	Single Source Brand	Hemophilia	Same active ingredient of therapeutic equivalent available by prescription	Alprolix, Benefix, Idelvion, Rixubis
Renvela tablets	Multi-Source Brand	Elevated phosphate levels	Same active ingredient of therapeutic equivalent available by prescription	sevelamer tablets (generic Renvela)
Sabril powder pack	Multi-Source Brand	Seizures	Same active ingredient of therapeutic equivalent available by prescription	vigabatrin powder pack (generic Sabril)
Segluromet	Single Source Brand	Diabetes	Therapeutic Equivalent available by prescription	Synjardy, Synjardy XR
Steglatro	Single Source Brand	Diabetes	Therapeutic Equivalent available by prescription	Jardiance
Steglujan	Single Source Brand	Diabetes	Therapeutic Equivalent available by prescription	Glyxambi
Xhance	Single Source Brand	Nasal polyps	Therapeutic Equivalent to an OTC medication	fluticasone (generic Flonase)
Ximino (Minocycline extended-release)	Brand & Authorized Brand Alternative	Acne	Same active ingredient of therapeutic equivalent available by prescription	minocycline immediate-release capsules (generic Minocin)
Zavesca	Multi-Source Brand	Enzyme deficiency	Same active ingredient of therapeutic equivalent available by prescription	miglustat (generic Zavesca)
Adcirca	Multi-Source Brand	Pulmonary hypertension	Same active ingredient of therapeutic equivalent available by prescription	tadalafil (generic Adcirca)
Ajovy	Single Source Brand	Migraines	Therapeutic Equivalent available by prescription	Aimovig, Emgality, Nurtec ODT
Ampyra	Multi-Source Brand	Multiple Sclerosis	Same active ingredient of therapeutic equivalent available by prescription	dalfampridine (generic Ampyra)
Balcoltra	Brand & Generic	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	levonorgestrel 0.1 mg/ethinyl estradiol 0.02 mg [Afirmelle, Aubra, Aubra EQ, Aviane, Delyla, Falmina, Larissia, Lessina, Levonorgestrel/Ethinyl Estradiol 0.1/0.02 mg, Lutera, Orsythia, Sronyx, Vienva (generic Alesse)]
Butalbital/Acetaminophen 50/300 mg capsule	Single Source Brand	Headaches	Same active ingredient of therapeutic equivalent available by prescription	butalbital/acetaminophen 50 mg/325 mg (generic Phrenilin)
Canasa	Multi-Source Brand	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	mesalamine suppositories (generic Canasa)
Cialis	Multi-Source Brand	Erectile dysfunction	Same active ingredient of therapeutic equivalent available by prescription	tadalafil (generic Cialis)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Cinryze	Single Source Brand	Hereditary angioedema	Therapeutic Equivalent available by prescription	Haegarda, Takhzyro
Decadron elixir	Multi-Source Brand	Oral steroid	Same active ingredient of therapeutic equivalent available by prescription	dexamethasone elixir (generic Decadron)
Levitra	Multi-Source Brand	Erectile dysfunction	Same active ingredient of therapeutic equivalent available by prescription	ildenafil (generic Levitra)
Lodine	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	etodolac (generic Lodine)
Nalocet (oxycodone/acetaminophen) 2.5/300 mg	Brand & Authorized Brand Alternative	Pain	Same active ingredient of therapeutic equivalent available by prescription	oxycodone/acetaminophen (generic Percocet)
Primlev (oxycodone/acetaminophen) 5/300 mg	Brand & Authorized Brand Alternative	Pain	Same active ingredient of therapeutic equivalent available by prescription	oxycodone/acetaminophen (generic Percocet)
Siklos	Single Source Brand	Sickle cell disease	Same active ingredient of therapeutic equivalent available by prescription	hydroxyurea (generic Hydrea), Droxia
Symtuza	Single Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	Prezcobix plus Cimduo, Prezcobix plus Descovy
Yonsa	Single Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	abiraterone 250mg (generic Zytiga)
Zypitamag	Single Source Brand	Cholesterol/Lipid lowering	Therapeutic Equivalent available by prescription	atorvastatin (generic Lipitor), lovastatin (generic Mevacor), pravastatin (generic Pravachol), rosuvastatin (generic Crestor), simvastatin (generic Zocor)
Noctiva	Single Source Brand	Excessive nighttime urination	Same active ingredient of therapeutic equivalent available by prescription	Nocdurna
RoxyBond	Single Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	oxycodone immediate-release (generic Roxicodone)
Altreno	Single Source Brand	Acne	Therapeutic Equivalent to an OTC medication	OTC Differin gel, tretinoin cream (generic Retin-A)
Minolira	Single Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	minocycline immediate-release capsules (generic Minocin)
Seysara	Single Source Brand	Acne	Therapeutic Equivalent available by prescription	doxycycline hyclate (generic Vibramycin), doxycycline monohydrate 50 mg and 100 mg (generic Monodox), minocycline immediate-release

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Ryclora	Brand & Generic	Allergies	Therapeutic Equivalent to an OTC medication	OTC chlorpheniramine (generic Chlor-Trimeton)
Albuterol HFA [Ventolin HFA authorized generic (Prasco)]	Authorized Brand Alternative	Asthma	Same active ingredient of therapeutic equivalent available by prescription	albuterol sulfate HFA (generic ProAir HFA, generic Proventil HFA)
Hydrocodone/Guaifenesin 2.5 mg/200 mg/5 mL	Single Source Brand	Cough & cold	Therapeutic Equivalent available by prescription	guaifenesin/codeine solution (Cheratussin AC)
Tolsura	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	itraconazole capsule (generic Sporanox)
Abilify MyCite	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	aripiprazole (generic Abilify)
Nivestym	Single Source Brand	Neutropenia	Same active ingredient of therapeutic equivalent available by prescription	Zarxio
Osmolex ER	Single Source Brand	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	amantadine immediate-release (generic Symmetrel)
Sympazan	Single Source Brand	Seizures	Same active ingredient of therapeutic equivalent available by prescription	clobazam (generic Onfi), clonazepam (generic Klonopin), lamotrigine (generic Lamictal), topiramate (generic Topamax)
Bryhali	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	fluocinonide 0.05% gel/solution (generic Lidex), desoximetasone 0.05% gel (generic Topicort)
Cordran 0.025% cream	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone valerate 0.2% cream (generic Westcort cream), prednicarbate 0.1% cream (generic Dermatop cream), fluticasone propionate cream 0.05% (generic Cutivate cream)
Lexette (halobetasol 0.05% foam)	Brand & Authorized Brand Alternative	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel/solution (generic Temovate)
Xyosted	Single Source Brand	Testosterone replacement	Same active ingredient of therapeutic equivalent available by prescription	testosterone 1.62% gel pump (generic Androgel 1.62%), testosterone injection, Testim
Ilumya ⁴	Single Source Brand	Inflammatory conditions	Therapeutic Equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cimzia, Cosentyx, Cyltezo, Enbrel, Hadlima, Humira, Skyrizi, Stelara, Tremfya
Dexedrine	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), dextroamphetamine extended-release (generic Dexedrine)
Epogen	Single Source Brand	Anemia	Same active ingredient of therapeutic equivalent available by prescription	Retacrit

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Procrit	Single Source Brand	Anemia	Same active ingredient of therapeutic equivalent available by prescription	Retacrit
Ranexa	Multi-Source Brand	Angina	Same active ingredient of therapeutic equivalent available by prescription	ranolazine (generic Ranexa)
Pulmicort inhalation suspension	Multi-Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	budesonide inhalation suspension (generic Pulmicort)
Lovenox	Multi-Source Brand	Blood clots	Same active ingredient of therapeutic equivalent available by prescription	enoxaparin (generic Lovenox)
Lonhala Magnair	Single Source Brand	COPD	Therapeutic Equivalent available by prescription	Spiriva Handihaler/Resipmat, Yupelri
Tudorza Pressair	Single Source Brand	COPD	Therapeutic Equivalent available by prescription	Spiriva Handihaler/Resipmat
Xalatan	Multi-Source Brand	Glaucoma	Same active ingredient of therapeutic equivalent available by prescription	latanoprost (generic Xalatan)
Norvasc	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	amlodipine (generic Norvasc)
Minivelle	Multi-Source Brand	Hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	estradiol patch (generic Minivelle, generic Vivelle-Dot)
Prometrium	Multi-Source Brand	Hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	progesterone (generic Prometrium)
Plaquenil	Multi-Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	hydroxychloroquine (generic Plaquenil)
Exjade	Multi-Source Brand	Iron overload	Same active ingredient of therapeutic equivalent available by prescription	desferasirox (generic Exjade)
Fulphila/Nivestym	Single Source Brand	Neutropenia	Same active ingredient of therapeutic equivalent available by prescription	Neulasta, Udenyca
Oracea	Brand	Rosacea	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate (generic Morgidox, Vibramycin), doxycycline monohydrate 50 mg and 100 mg (generic Monodox)
Klonopin	Multi-Source Brand	Seizures	Same active ingredient of therapeutic equivalent available by prescription	clonazepam (generic Klonopin)
diflorasone 0.05% ointment (generic Psorcon)	Generic Only	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	clobetasol 0.05% ointment (generic Temovate), halobetasol 0.05% ointment (generic Ultravate)
Ultravate 0.05% lotion	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel/solution (generic Temovate)
Cytomel	Multi-Source Brand	Thyroid hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	liothyronine (generic Cytomel)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Siliq ⁴	Single Source Brand	Inflammatory conditions	Therapeutic Equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cimzia, Cosentyx, Cyltezo, Enbrel, Hadlima, Humira, Skyrizi, Stelara, Tremfya
Taltz ⁴	Single Source Brand	Inflammatory conditions	Therapeutic Equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cimzia, Cosentyx, Cyltezo, Enbrel, Hadlima, Humira, Skyrizi, Stelara, Tremfya
Adhansia XR	Single Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Evekeo ODT	Single Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Rapaflo	Multi-Source Brand	Benign Prostatic Hypertrophy	Same active ingredient of therapeutic equivalent available by prescription	silodosin (generic Rapaflo)
Uloric	Multi-Source Brand	Gout	Same active ingredient of therapeutic equivalent available by prescription	allopurinol (generic Zyloprim), febuxostat (generic Uloric)
Noxafil tablets	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	posaconazole tablets (generic Noxafil)
Tosymra	Single Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	sumatriptan (generic Imitrex) injection, nasal spray, or tablets
pyridostigmine 30 mg	Generic Only	Myasthenia Gravis	Same active ingredient of therapeutic equivalent available by prescription	pyridostigmine 60 mg (generic Mestinon)
Dxevo 11-day/Dexabliss	Single Source Brand	Oral steroid	Same active ingredient of therapeutic equivalent available by prescription	dexamethasone
HiDex 6-day	Single Source Brand	Oral steroid	Same active ingredient of therapeutic equivalent available by prescription	dexamethasone
Qmiiz ODT	Single Source Brand	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	meloxicam (generic Mobic)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Select prenatal vitamins	Single Source Brand	Prenatal vitamin	Same active ingredient of therapeutic equivalent available by prescription	Brand and generic prenatal vitamins
Clobex 0.05% spray	Multi-Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	clobetasol 0.05% spray (generic Clobex spray)
Duobrii	Single Source Brand	Skin conditions	Therapeutic Equivalent available by prescription	gel (generic Topicort), Enstillar, tazarotene 0.1% cream (generic Tazorac), Taclonex solution
Vectical	Multi-Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	calcitriol ointment (generic Vectical)
Basaglar KwikPen	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Lantus, Toujeo
Janumet/Janumet XR	Single Source Brand	Diabetes	Therapeutic Equivalent available by prescription	saxagliptin/metformin extended-release (generic Kombiglyze XR), Kazano, Jentaduetto, Jentaduetto XR
Januvia	Single Source Brand	Diabetes	Therapeutic Equivalent available by prescription	saxagliptin (generic Onglyza), Nesina, Tradjenta
Levemir/Levemir FlexTouch ⁴	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Lantus, Toujeo
Tresiba/Tresiba FlexTouch	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Lantus, Toujeo
Absorica LD	Brand & Generic	Acne	Same active ingredient of therapeutic equivalent available by prescription	isotretinoin [Amnesteem, Claravis, Myorisan, Zenatane (generic for Accutane)]
Duaklir	Single Source Brand	COPD	Therapeutic Equivalent available by prescription	Anoro Ellipta, Bevespi Aerosphere
Cequa	Single Source Brand	Dry eye disease	Same active ingredient of therapeutic equivalent available by prescription	Restasis (single use vials), Xiidra
Consensi	Single Source Brand	High blood pressure/Pain and inflammation	Same active ingredient of therapeutic equivalent available by prescription	amlodipine (generic Norvasc) + celecoxib (generic Celebrex)
Temixys	Single Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	Cimduo
Secuado	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	(generic Seroquel), risperidone (generic Risperdal), ziprasidone (generic Geodon), Saphris
Vumerity	Single Source Brand	Multiple Sclerosis	Therapeutic Equivalent available by prescription	dimethyl fumarate (generic Tecfidera), Bafiertam
Apadaz	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	benzhydrocodone/acetaminophen (generic Apadaz), hydrocodone/acetaminophen (generic Norco)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Relafen DS	Single Source Brand	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	nabumetone (generic Relafen)
Invokana ⁴	Single Source Brand	Diabetes	Therapeutic Equivalent available by prescription	Jardiance
Descovy ⁴	Single Source Brand	HIV	Therapeutic Equivalent available by prescription	emtricitabine/tenofovir disoproxil fumarate (generic Truvada)
Alvesco	Single Source Brand	Asthma	Therapeutic Equivalent available by prescription	Arnuity Ellipta, QVAR RediHaler
Asmanex HFA/Twisthaler	Single Source Brand	Asthma	Therapeutic Equivalent available by prescription	Arnuity Ellipta, QVAR RediHaler
Invokamet/Invokamet XR	Single Source Brand	Diabetes	Therapeutic Equivalent available by prescription	Synjardy, Synjardy XR
ketoprofen	Generic Only	Pain & inflammation	Therapeutic Equivalent to an OTC medication	ibuprofen (generic Motrin), naproxen tablets (generic Naprosyn, generic Anaprox DS), OTC ibuprofen (Advil/Motrin), OTC naproxen (Aleve)
ketoprofen ER	Generic Only	Pain & inflammation	Therapeutic Equivalent to an OTC medication	diclofenac (generic Cataflam, Voltaren), flurbiprofen (generic Ansaid), ibuprofen (generic Motrin), naproxen tablets (generic Naprosyn), OTC ibuprofen (Advil/Motrin), OTC naproxen (Aleve)
Synthroid	Multi-Source Brand	Thyroid hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	levothyroxine (generic Synthroid)
Tecfidera	Multi-Source Brand	Multiple Sclerosis	Same active ingredient of therapeutic equivalent available by prescription	dimethyl fumarate (generic Tecfidera), Bafiertam
Truvada 200 mg/300 mg	Multi-Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	emtricitabine/tenofovir disoproxil fumarate (generic Truvada)
Zerviate	Single Source Brand	Allergies	Therapeutic Equivalent to an OTC medication	OTC ketotifen (Zaditor), OTC olopatadine (Pataday), azelastine ophthalmic solution (generic Optivar), epinastine (generic Elestat), Lastacaft
Esperoct	Single Source Brand	Hemophilia	Same active ingredient of therapeutic equivalent available by prescription	Advate, Kogenate FS, Kovaltry, NovoEight, Nuwiq, Recombinate
Nyvepria	Single Source Brand	Neutropenia	Same active ingredient of therapeutic equivalent available by prescription	Neulasta, Udenyca
tramadol HCL 100mg	Generic Only	Pain	Same active ingredient of therapeutic equivalent available by prescription	Use 2 of the tramadol 50 mg (generic Ultram)
Jatenzo	Single Source Brand	Testosterone replacement	Same active ingredient of therapeutic equivalent available by prescription	testosterone 1.62% gel pump (generic AndroGel 1.62%), Testim

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Talicia	Single Source Brand	Ulcers due to H. pylori	Same active ingredient of therapeutic equivalent available by prescription	amoxicillin (generic Amoxil) + omeprazole (generic Prilosec) + rifabutin (generic Mycobutin) OR Omeclamox
Voltaren 1% gel	Brand & Generic	Pain & inflammation	Legend Medication with OTC Equivalent	OTC Voltaren Arthritis Pain 1% gel
Afinitor	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	everolimus (generic Afinitor)
Zytiga 250mg	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	abiraterone 250mg (generic Zytiga)
Zytiga 500mg	Brand & Generic	Cancer	Same active ingredient of therapeutic equivalent available by prescription	Use 2 of the abiraterone 250mg (generic Zytiga)
Incruse Ellipta	Single Source Brand	COPD	Therapeutic Equivalent available by prescription	Spiriva Respimat/HandiHaler
Bystolic	Brand & Generic	High blood pressure	Therapeutic Equivalent available by prescription	atenolol (generic Tenormin), bisoprolol (generic Zebeta), metoprolol (generic Lopressor)
Inderal XL	Single Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	propranolol (generic Inderal), propranolol extended-release (generic Inderal LA)
Innopran XL	Single Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	propranolol (generic Inderal), propranolol extended-release (generic Inderal LA)
Fexmid 7.5mg (cyclobenzaprine)	Brand & Generic	Muscle relaxant	Same active ingredient of therapeutic equivalent available by prescription	cyclobenzaprine 5 mg, 10 mg (generic Flexeril)
Mestinon 60 mg tablet	Multi-Source Brand	Myasthenia Gravis	Same active ingredient of therapeutic equivalent available by prescription	pyridostigmine (generic Mestinon)
Forteo	Brand & Generic	Osteoporosis	Same active ingredient of therapeutic equivalent available by prescription	Teriparatide, Tymlos
Zohydro ER	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	hydrocodone bitartrate extended-release (generic Hysingla, generic Zohydro), morphine sulfate extended-release tablet (generic MS Contin)
Cuprimine	Brand & Generic	Wilson's disease	Same active ingredient of therapeutic equivalent available by prescription	penicillamine titratabs (generic Depen)
ProAir Digihaler	Single Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	albuterol sulfate HFA (generic ProAir HFA, generic Proventil HFA)
Kuvan	Multi-Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	sapropterin (generic Kuvan)
Arazlo	Single Source Brand	Acne	Therapeutic Equivalent to an OTC medication	OTC Differin, tretinoin cream

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Hemady	Single Source Brand	Oral steroid	Same active ingredient of therapeutic equivalent available by prescription	dexamethasone tablet
Zcort 7-day	Single Source Brand	Oral steroid	Same active ingredient of therapeutic equivalent available by prescription	dexamethasone tablet
Airduo Digihaler	Single Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	fluticasone propionate/salmeterol (generic Advair Diskus), Advair HFA, Breo Ellipta, Symbicort
Armonair Digihaler	Single Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	Arnuity Ellipta, QVAR RediHaler
Phexxi	Single Source Brand	Contraceptive	Therapeutic Equivalent to an OTC medication	OTC spermicides
Twirla	Single Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	Xulane, Zafemy (branded generics Ortho Evra)
Bynfezia Pen	Single Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	octreotide (generic Sandostatin)
Mycapssa ⁴	Single Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	octreotide (generic Sandostatin), Somatuline Depot
Ortikos	Single Source Brand	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	budesonide extended-release (generic Entocort EC)
Semglee	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Lantus, Toujeo
Relafen	Multi-Source Brand	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	nabumetone (generic Relafen)
Licart	Single Source Brand	Pain & inflammation	Legend Medication with OTC Equivalent	OTC Voltaren Arthritis Pain 1% gel
Halog 0.1% Solution	Single Source Brand	Skin conditions	Therapeutic Equivalent available by prescription	fluocinonide 0.05% gel/solution (generic Lidex), desoximetasone 0.05% gel (generic Topicort)
Proair HFA	Multi-Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	albuterol sulfate HFA (generic ProAir HFA, generic Proventil HFA)
Proair RespiClick	Single Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	albuterol sulfate HFA (generic ProAir HFA, generic Proventil HFA)
Proventil HFA	Multi-Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	albuterol sulfate HFA (generic ProAir HFA, generic Proventil HFA)
Ventolin HFA	Single Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	albuterol sulfate HFA (generic ProAir HFA, generic Proventil HFA)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Riomet	Multi-Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	metformin tablets (generic glucophage), metformin oral solution (generic Riomet)
Aromasin	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	exemestane (generic Aromasin)
Tarceva	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	erlotinib (generic Tarceva)
Temodar capsules	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	temozolomide (generic Temodar)
Xeloda	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	capecitabine (generic Xeloda)
Seasonique	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	Setlakin (generics for Seasonale)], levonorgestrel/ethinyl estradiol [Amethia, Ashlyna, Camrese, Daysee, Jaimiess, Simpesse (generics for
Bethkis	Multi-Source Brand	Supportive care for Cystic Fibrosis	Same active ingredient of therapeutic equivalent available by prescription	tobramycin 300 mg /4 mL (generic Bethkis)
Elidel	Multi-Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	pimecrolimus (generic Elidel), tacrolimus (generic Protopic)
Halog cream	Multi-Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone dipropionate augmented 0.05% cream (generic Diprolene AF), fluocinonide 0.05% cream (generic Lidex cream), halcinonide 0.1% cream (Halog)
Lotrel	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	amlodipine/benazepril (generic Lotrel)
Nityr	Single Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	Orfadin
Sensipar	Multi-Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	calcium acetate (generic PhosLo), sevelamer (generic Renagel), Velphoro
Syprine	Multi-Source Brand	Blood disorders	Same active ingredient of therapeutic equivalent available by prescription	trientine (generic Syprine)
Fareston	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	toremifene (generic Fareston)
Carafate	Multi-Source Brand	Ulcers	Same active ingredient of therapeutic equivalent available by prescription	sulcrafate (generic Carafate)
Prevacid Solutab	Multi-Source Brand	Ulcers, heartburn & reflux	Same active ingredient of therapeutic equivalent available by prescription	lansoprazole delayed-release orally disintegrating tablet (generic Prevacid Solutab), omeprazole (generic Prilosec), pantoprazole (generic Protonix), OTC - Nexium, Prilosec, Prevacid, Zegerid

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Amicar	Multi-Source Brand	Blood disorders	Same active ingredient of therapeutic equivalent available by prescription	aminocaproic acid (generic Amicar)
Atacand	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	candesartan (generic Atacand)
Avapro	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	irbesartan (generic Avapro)
Cozaar	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	losartan (generic Cozaar)
Sustiva capsules	Multi-Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	efavirenz (generic Sustiva)
Estrace vaginal cream	Multi-Source Brand	Hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	estradiol tablets (generic Estrace), estradiol vaginal cream (generic Estrace vaginal cream)
Jadenu granule, tablet	Multi-Source Brand	Iron overload	Same active ingredient of therapeutic equivalent available by prescription	deferasirox (generic Jadenu)
Paxil CR	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	paroxetine extended-release (generic Paxil CR)
Zomig tablets	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	zolmitriptan tablets (generic Zomig)
Frova	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	frovatriptan (Frova)
Varubi	Single Source Brand	Nausea & vomiting	Therapeutic Equivalent available by prescription	aprepitant capsule (generic Emend)
Travatan Z	Brand & Generic	Glaucoma	Same active ingredient of therapeutic equivalent available by prescription	latanoprost (generic Xalatan), Lumigan
Norco	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	hydrocodone/acetaminophen (generic Norco)
Roxicodone	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	oxycodone immediate-release (generic Roxicodone)
Actonel	Multi-Source Brand	Osteoporosis	Same active ingredient of therapeutic equivalent available by prescription	alendronate (generic Fosamax), ibandronate (generic Boniva)
Letairis	Multi-Source Brand	Pulmonary hypertension	Same active ingredient of therapeutic equivalent available by prescription	ambrisentan (generic Letairis)
Revatio suspension	Multi-Source Brand	Pulmonary hypertension	Same active ingredient of therapeutic equivalent available by prescription	sildenafil (generic Revatio)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Uroxatral	Multi-Source Brand	Benign Prostatic Hypertrophy	Same active ingredient of therapeutic equivalent available by prescription	alfuzosin (generic Uroxatral), doxazosin (generic Cardura), terazosin (generic Hytrin), tamsulosin (generic Flomax)
Zonalon	Multi-Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone dipropionate cream 0.05% (generic Diprosone), desoximetasone cream 0.05% (generic Topicort), fluocinonide cream 0.05% (generic Lidex), mometasone furoate cream 0.1% (generic Elocon), triamcinolone acetonide cream 0.5% (generic Aristocort)
Doral	Brand & Generic	Sleep	Therapeutic Equivalent available by prescription	temazepam (generic Restoril)
Zortress (brand only)	Multi-Source Brand	Transplant	Same active ingredient of therapeutic equivalent available by prescription	cyclosporine (generic Neoral, Sandimmune, Gengraf), everolimus (generic Zortress), tacrolimus (generic Prograf)
Niacor (niacin)	Single Source Brand	Cholesterol/Lipid lowering	Therapeutic Equivalent available by supplement	niacin extended-release (generic Niaspan)
Vascepa ⁴	Brand & Generic	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	atorvastatin (generic Lipitor), fenofibrate 48 mg, 54 mg, 145 mg, 160 mg tablets (generic Lofibra, Tricor), omega-3 ethyl esters (generic Lovaza), rosuvastatin (generic Crestor), simvastatin (generic Zocor)
Gimoti	Single Source Brand	Reflux	Same active ingredient of therapeutic equivalent available by prescription	metoclopramide (generic Reglan)
SevenFACT	Single Source Brand	Hemophilia	Same active ingredient of therapeutic equivalent available by prescription	NovoSeven
Conjupri (Levamlodipine)	Single Source Brand & Authorized Brand Alternative	High blood pressure	Modified version active ingredient therapeutic equivalent by prescription	amlodipine (generic Norvasc)
RediTrex	Single Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	methotrexate tablets, Rasuvo
Alkindi Sprinkle	Single Source Brand	Oral steroid	Same active ingredient of therapeutic equivalent available by prescription	hydrocortisone tablet (generic Cortef)
Qdolo	Single Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	tramadol (generic Ultram)
Ongentys	Single Source Brand	Parkinson's disease	Therapeutic Equivalent available by prescription	carbidopa/levodopa (generic Sinemet), entacapone (generic Comtan)
Impeklo	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone 0.05% augmented gel (generic Diprolene), clobetasol propionate 0.05% gel (generic Temovate), clobetasol 0.05% solution (generic Temovate)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Desoxyn	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	methamphetamine (generic Desoxyn)
Aricept 5 mg, 10 mg	Multi-Source Brand	Alzheimer's disease	Same active ingredient of therapeutic equivalent available by prescription	donepezil (generic Aricept)
Rythmol SR	Multi-Source Brand	Arrhythmias	Same active ingredient of therapeutic equivalent available by prescription	propafenone extended-release capsules (generic Rythmol)
Arixtra	Multi-Source Brand	Blood clots	Same active ingredient of therapeutic equivalent available by prescription	fondaparinux (generic Arixtra)
OsmoPrep	Single Source Brand	Bowel preparation	Therapeutic Equivalent available by prescription	polyethylene glycol powder (generic Glycolax), PEG (generic Golytely), Sutab, Suprep
Praluent	Single Source Brand	Cholesterol/Lipid lowering	Therapeutic Equivalent available by prescription	Repatha
Zocor	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	simvastatin (generic Zocor)
Loestrin FE 1/20	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	norethindrone/ethinyl estradiol [Aurovela FE, Blisovi FE, Hailey FE, Junel FE, Larin FE, Microgestin FE, Tarina FE (generics for Loestrin FE 1/20)]
Evoxac	Multi-Source Brand	Dry mouth	Same active ingredient of therapeutic equivalent available by prescription	cevimeline (generic Evoxac)
DDAVP injection, tablets	Multi-Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	desmopressin (generic DDAVP)
Lotemax 0.5% ophthalmic suspension	Multi-Source Brand	Eye inflammation	Same active ingredient of therapeutic equivalent available by prescription	loteprednol 0.5% ophthalmic suspension (generic Lotemax)
Pred Forte 1%	Multi-Source Brand	Eye inflammation	Same active ingredient of therapeutic equivalent available by prescription	prednisolone 1% ophthalmic suspension (generic Pred Forte)
Aldactone	Multi-Source Brand	Heart failure	Same active ingredient of therapeutic equivalent available by prescription	spironolactone (generic Aldactone)
Inspra	Multi-Source Brand	Heart failure	Same active ingredient of therapeutic equivalent available by prescription	eplerenone (generic Inspra)
Hepsera	Multi-Source Brand	Hepatitis B	Same active ingredient of therapeutic equivalent available by prescription	adefovir (generic Hepsera)
Altace	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	ramipril (generic Altace)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Atacand HCT	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	candesartan/hydrochlorothiazide (generic Atacand HCT)
Avalide	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	irbesartan/hydrochlorothiazide (generic Avalide)
Catapres-TTS	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	clonidine patch (generic Catapres-TTS)
Coreg	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	carvedilol (generic Coreg)
Hyzaar	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	losartan/hydrochlorothiazide (generic Hyzaar)
Procardia XL	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	nifedipine extended-release tablet (generic Procardia XL)
Lexiva	Multi-Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	fosamprenavir (generic Lexiva)
Estrace	Multi-Source Brand	Hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	estradiol tablets (generic Estrace)
Gastrocrom	Multi-Source Brand	Inflammation	Same active ingredient of therapeutic equivalent available by prescription	cromolyn oral concentrate (generic Gastrocrom)
Pamelor	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	nortriptyline (generic Pamelor)
Paxil	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	paroxetine (generic Paxil)
Amerge	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	naratriptan (generic Amerge)
Zomig ZMT	Multi-Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	zolmitriptan orally disintegrating tablet (generic Zomig)
Soma 350 mg tablets	Multi-Source Brand	Muscle spasms	Same active ingredient of therapeutic equivalent available by prescription	carisoprodol 350 mg tablets (generic Soma)
Mestinon Timespan	Multi-Source Brand	Myasthenia gravis	Same active ingredient of therapeutic equivalent available by prescription	pyridostigmine extended-release tablet (generic Mestinon Timespan)
Transderm Scop	Multi-Source Brand	Nausea & vomiting	Same active ingredient of therapeutic equivalent available by prescription	scopolamine transdermal patch (generic Transderm Scop)
Zofran tablets	Multi-Source Brand	Nausea & vomiting	Same active ingredient of therapeutic equivalent available by prescription	ondansetron (generic Zofran)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Ultram	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	tramadol (generic Ultram)
Arthrotec	Multi-Source Brand	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	diclofenac/misoprostol (generic Arthrotec)
Naprosyn tablets	Multi-Source Brand	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	naproxen tablets (generic Naprosyn, Anaprox DS), OTC ibuprofen (Advil/Motrin), OTC naproxen (Aleve)
Soriatane	Multi-Source Brand	Psoriasis	Same active ingredient of therapeutic equivalent available by prescription	acitretin (generic Soriatane)
Prudoxin	Multi-Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone dipropionate cream 0.05% (generic Diprosone), desoximetasone cream 0.05% (generic Topicort), fluocinonide cream 0.05% (generic Lidex), mometasone furoate cream 0.1% (generic Elocon), triamcinolone acetonide cream 0.5% (generic Aristocort)
Rozerem	Multi-Source Brand	Sleep	Same active ingredient of therapeutic equivalent available by prescription	ramelteon (generic Rozerem)
Ingrezza	Single Source Brand	Tardive dyskinesia	Therapeutic Equivalent available by prescription	Austedo
Valcyte oral solution	Multi-Source Brand	Viral infections	Same active ingredient of therapeutic equivalent available by prescription	valganciclovir oral solution (generic Valcyte)
Winlevi	Single Source Brand	Acne	Therapeutic Equivalent available by prescription	OTC Differin, tretinoin cream
Hycodan	Multi-Source Brand	Cough & cold	Same active ingredient of therapeutic equivalent available by prescription	hydrocodone/homatropine (generic Hycodan)
Orladeyo	Single Source Brand	Hereditary angioedema	Therapeutic Equivalent available by prescription	Haegarda, Takhzyro
Gemtesa	Single Source Brand	Overactive bladder	Therapeutic Equivalent available by prescription	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Vesicare LS	Single Source Brand	Overactive bladder	Same active ingredient of therapeutic equivalent available by prescription	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare)
Prolate (oxycodone/acetaminophen) 10 mg/300 mg per 5 mL	Brand & Authorized Brand Alternative	Pain	Same active ingredient of therapeutic equivalent available by prescription	oxycodone/acetaminophen (generic Percocet)
Cataflam	Multi-Source Brand	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	diclofenac tablets (generic Cataflam, generic Voltaren)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Wynzora	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	betamethasone (generic Diprosone) + calcipotriene (generic Dovonex), Enstilar, Taclonex Suspension
Thyquidity	Single Source Brand	Thyroid replacement	Same active ingredient of therapeutic equivalent available by prescription	levothyroxine (generic Synthroid), Tirosint-Sol
Helidac Therapy	Single Source Brand	Ulcers due to H. pylori	Same active ingredient of therapeutic equivalent available by prescription	metronidazole (generic Flagyl) + tetracycline (generic Sumycin) + OTC bismuth subsalicylate or Omeclamox-Pak
Xalkori ⁴	Single Source Brand	Cancer	Therapeutic Equivalent available by prescription	Alecensa, Alunbrig
Zykadia ⁴	Single Source Brand	Cancer	Therapeutic Equivalent available by prescription	Alecensa, Alunbrig
Ritalin tablets	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	methylphenidate tablets (generic Ritalin)
Patanase	Multi-Source Brand	Allergies	Same active ingredient of therapeutic equivalent available by prescription	olopatadine 0.6% nasal spray (generic Patanase)
Namenda	Multi-Source Brand	Alzheimer's disease	Same active ingredient of therapeutic equivalent available by prescription	memantine (generic Namenda)
Isordil Titrados	Multi-Source Brand	Angina	Same active ingredient of therapeutic equivalent available by prescription	isosorbide dinitrate 5 mg, 10 mg, 20 mg, 30 mg (generic Isordil Titrados)
Proscar	Multi-Source Brand	Benign prostatic hypertrophy	Same active ingredient of therapeutic equivalent available by prescription	finasteride (generic Proscar)
Agrylin	Multi-Source Brand	Blood disorders	Same active ingredient of therapeutic equivalent available by prescription	anagrelide (generic Agrylin)
Tykerb	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	lapatinib tablet (generic Tykerb)
Niaspan	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	niacin extended-release (generic Niaspan)
Pravachol	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	pravastatin (generic Pravachol)
Estrostep FE	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	norethindrone/ethinyl estradiol 1/20-1/30-1/35 [Tilia FE, Tri-Legest FE (generic Estrostep FE)]
Femhrt	Multi-Source Brand	Hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	norethindrone/ethinyl estradiol 0.5 mg/2.5 mcg [Fyavolv (generic Femhrt)]
Loestrin 1.5/30	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	norethindrone/ethinyl estradiol 1.5 mg/30 mcg [Aurovela, Hailey, Junel 1.5/30, Larin, Microgestin (generic Loestrin 1.5/30)]

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Loestrin 1/20	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	norethindrone/ethinyl estradiol 1 mg/20 mcg [Aurovela, Junel 1/20, Larin, Microgestin (generic Loestrin 1/20)]
Loestrin FE 1.5/30	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	norethindrone/ethinyl estradiol 1.5 mg/30 mcg [Aurovela FE, Blisovi FE, Hailey FE, Junel FE, Larin FE, Microgestin FE, (generic Loestrin FE 1.5/30)]
Mircette	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	desogestrel/ethinyl estradiol [Azurette, Bekyree, Kariva, Pimtreea, Simliya, Viorele, Volnea (generic Mircette)]
Amaryl	Multi-Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	glimepiride (generic Amaryl)
Actigall	Multi-Source Brand	Gallstones	Same active ingredient of therapeutic equivalent available by prescription	ursodiol (generic Actigall, generic Usro 250, generic Urso Forte)
Urso 250	Multi-Source Brand	Gallstones	Same active ingredient of therapeutic equivalent available by prescription	ursodiol (generic Actigall, generic Usro 250, generic Urso Forte)
Urso Forte	Multi-Source Brand	Gallstones	Same active ingredient of therapeutic equivalent available by prescription	ursodiol (generic Actigall, generic Usro 250, generic Urso Forte)
Edecrin	Multi-Source Brand	Heart failure	Same active ingredient of therapeutic equivalent available by prescription	ethacrynic acid tablets (generic Edecrin)
Accupril	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	quinapril (generic Accupril)
Dyrenium	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	triamterene capsules (generic Dyrenium)
Tarka	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	trandolapril/verapamil extended-release tablet (generic Tarka)
Toprol XL	Multi-Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	metoprolol succinate extended-release tablet (generic Toprol XL)
Diflucan tab, suspension	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	fluconazole (generic Diflucan)
Kerydin	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	itraconazole (generic Sporanox), oral terbinafine (generic Lamisil), ciclopirox (generic Penlac)
Arava	Multi-Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	leflunomide (generic Arava)
Remeron tablet, SolTab	Multi-Source Brand	Mental Health	Same active ingredient of therapeutic equivalent available by prescription	mirtazapine (generic Remeron)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Rebif/Rebif Rebidose	Single Source Brand	Multiple sclerosis	Same active ingredient of therapeutic equivalent available by prescription	dimethyl fumarate (generic Tecfidera), fingolimod (generic Gilenya), glatiramer acetate (generic Copaxone), teriflunomide (generic Aubagio), Avonex, Bafiertam, Betaseron, Plegridy
Emend capsules	Multi-Source Brand	Nausea & vomiting	Same active ingredient of therapeutic equivalent available by prescription	aprepitant capsules (generic Emend)
Boniva tablet	Multi-Source Brand	Osteoporosis	Same active ingredient of therapeutic equivalent available by prescription	ibandronate (generic Boniva)
Ditropan XL	Multi-Source Brand	Overactive bladder	Same active ingredient of therapeutic equivalent available by prescription	oxybutynin extended-release tablet (generic Ditropan XL)
Mobic	Multi-Source Brand	Pain & inflammation	Same active ingredient of therapeutic equivalent available by prescription	meloxicam (generic Mobic)
Carac (fluorouracil) 0.5%	Single Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	fluorouracil 5% (generic Efudex), Fluoroplex 1% cream
Dovonex	Multi-Source Brand	Skin conditions	Same active ingredient of therapeutic equivalent available by prescription	calcipotriene cream (generic Dovonex)
Mephyton	Multi-Source Brand	Vitamin	Same active ingredient of therapeutic equivalent available by prescription	phytonadione (generic Mephyton)
Northera	Multi-Source Brand	Low blood pressure	Same active ingredient of therapeutic equivalent available by prescription	droxidopa (generic Northera)
clemastine 0.5mg/5ml	Generic only	Allergies	Legend Medication with OTC Equivalent	OTC clemastine (generic Tavist)
Accrufer	Single Source Brand	Iron deficiency	Therapeutic equivalent available by supplement	Non-prescription iron supplements
Qelbree	Single Source Brand	ADHD	Therapeutic Equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), atomoxetine (generic Strattera), guanfacine extended-release (generic Intuniv), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsule (generic Metadate CD or Ritalin LA), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Exservan	Single Source Brand	ALS	Same active ingredient of therapeutic equivalent available by prescription	riluzole (generic Rilutek), Tiglutik
Roszet (Ezetimibe/rosuvastatin)	Brand & Authorized Brand Alternative	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	ezetimibe (generic Zetia) plus rosuvastatin (generic Crestor) or ezetimibe/simvastatin (generic Vytorin)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Nextstellis	Single Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	Yaz, Yasmin
Reltone (Ursodiol)	Single Source Brand	Gallstones	Same active ingredient of therapeutic equivalent available by prescription	ursodiol (generic Actigall)
Ponvory	Single Source Brand	Multiple sclerosis	Therapeutic Equivalent available by prescription	fingolimod (generic Gilenya), Mayzent, Zeposia
Myrbetriq granules	Single Source Brand	Overactive bladder	Therapeutic Equivalent available by prescription	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare)
Norgesic/Orphengesic Forte	Brand & Generic	Pain	Same active ingredient of therapeutic equivalent available by prescription	OTC aspirin + cyclobenzaprine tablet (generic Flexeril), chlorzoxazone (generic Parafon Forte DSC) methocarbamol (generic Robaxin), orphenadrine extended-release (generic Norflex), or tizanidine (Zanaflex Tablets)
Elepsia XR	Single Source Brand	Seizures	Same active ingredient of therapeutic equivalent available by prescription	levetiracetam (generic Keppra), levetiracetam extended-release (generic Keppra XR)
naproxen suspension (generic Naprosyn)	Generic only	Pain & inflammation	Legend Medication with OTC Equivalent	OTC naproxen tablets (Aleve), OTC ibuprofen suspension (Advil/Motrin)
Rilutek	Multi-Source Brand	Amyotrophic lateral sclerosis (ALS)	Same active ingredient of therapeutic equivalent available by prescription	riluzole (generic Rilutek)
Amitiza	Multi-Source Brand	Constipation	Same active ingredient of therapeutic equivalent available by prescription	lubiprostone (generic Amitiza)
Trulance	Single Source Brand	Constipation	Therapeutic Equivalent available by prescription	Linzess, Motegrity
GlucaGen Hypokit	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	glucagon (generic Glucagon Emergency Kit), Baqsimi, Gvoke, Zegalogue
Glucagon Emergency Kit (Lilly)	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	glucagon (generic Glucagon Emergency Kit), Baqsimi, Gvoke, Zegalogue
Azopt	Multi-Source Brand	Glaucoma	Same active ingredient of therapeutic equivalent available by prescription	brinzolamide (generic Azopt), dorzolamide (generic Trusopt)
isosorbide dinitrate 40mg	Generic	Heart failure	Same active ingredient of therapeutic equivalent available by prescription	isosorbide dinitrate 2 x 20 mg (generic Isordil Titrados)
prednisolone solution 5mg/5ml, 25mg/5ml, 6.7mg/5ml, 20mg/5ml, 10mg/5ml	Generic	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	prednisolone sodium phosphate 15mg/5mL (generic Prelone)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Bupap	Brand and Generic	Migraine	Same active ingredient of therapeutic equivalent available by prescription	butalbital/acetaminophen 50 mg/325 mg (generic Phrenilin)
Toviaz	Single Source Brand	Overactive bladder	Therapeutic Equivalent to an OTC medication	oxybutynin (generic Ditropan), oxybutynin extended-release (generic Ditropan XL), solifenacin (generic Vesicare), tolterodine (generic Detrol), trospium (generic Sanctura), Oxytrol OTC
Dexilant	Brand & Generic	Ulcers, heartburn & reflux	Therapeutic Equivalent to an OTC medication	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), Nexium Suspension, Prevacid Solu-tab, OTC - Nexium, Prevacid, Prilosec, Zegerid
Carbaglu	Multi-Source Brand	Elevated ammonia levels	Same active ingredient of therapeutic equivalent available by prescription	carglumic tablets (generic Carbaglu)
Thalitone 15mg	Single Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	chlorthalidone (generic Hygroton)
Lymepak	Single Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	doxycycline hyclate 100 mg (generic Morgidox, Vibramycin), doxycycline monohydrate 100 mg (generic Monodox)
Loreev XR sprinkle	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	lorazepam (generic Ativan)
Lybalvi	Single Source Brand	Mental health	Therapeutic Equivalent available by prescription	aripiprazole (generic Abilify), olanzapine (generic Zyprexa), quetiapine (generic Seroquel), risperidone (generic Risperdal), ziprasidone (generic Geodon)
Sertraline 150mg, 200 mg capsules	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	sertraline tablets 25 mg, 50 mg, 100 mg (generic Zoloft)
Qulipta	Single Source Brand	Migraines	Therapeutic Equivalent available by prescription	Aimovig, Emgality, Nurtec ODT
Trudhesa nasal spray	Single Source Brand	Migraines	Same active ingredient of therapeutic equivalent available by prescription	almotriptan (Axert), eletriptan (Relpax), frovatriptan (Frova), naratriptan (Amerge), rizatriptan (Maxalt/Maxalt MLT), sumatriptan (Imitrex) nasal spray/tablets, zolmitriptan (Zomig) tablets, Zomig nasal spray
Lofena (diclofenac 25 mg)	Brand and Generic	Pain & inflammation	Therapeutic Equivalent to an OTC medication	naproxen tablets (generic Naprosyn, Anaprox DS), OTC ibuprofen (Advil/Motrin), OTC naproxen (Aleve)
Elyxyb solution	Single Source Brand	Pain & inflammation	Therapeutic Equivalent to an OTC medication	OTC ibuprofen (Advil/Motrin), OTC naproxen (Aleve), celecoxib capsules (generic Celebrex)
Eprontia solution	Single Source Brand	Seizures	Same active ingredient of therapeutic equivalent available by prescription	topiramate immediate-release (generic Topamax), topiramate sprinkle (generic Topamax sprinkle)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
NuvaRing	Multi-Source Brand	Contraceptive	Same active ingredient of therapeutic equivalent available by prescription	etonogestrel/ethinyl estradiol vaginal ring [Eluryng (generic NuvaRing)]
Vivelle-Dot	Multi-Source Brand	Hormone replacement	Same active ingredient of therapeutic equivalent available by prescription	estradiol transdermal patch (generic Vivelle-Dot)
Twynéo	Single Source Brand	Acne	Therapeutic Equivalent to an OTC medication	OTC benzoyl peroxide + OTC Differin gel or tretinoin cream (generic Retin A)
Eulexin (brand only)	Single Source Brand	Cancer	Therapeutic Equivalent available by prescription	bicalutamide (generic Casodex)
Recorlev	Single Source Brand	Cushing's disease	Same active ingredient of therapeutic equivalent available by prescription	ketoconazole (generic Nizoral)
Dartisla ODT	Single Source Brand	Excessive secretions	Same active ingredient of therapeutic equivalent available by prescription	glycopyrrolate tablet (generic Robinul)
Soaanz	Single Source Brand	Heart failure	Same active ingredient of therapeutic equivalent available by prescription	torsemide (generic Demadex)
Citalopram hydrobromide capsules	Single Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	citalopram (generic Celexa)
Anaprox DS	Multi-Source Brand	Pain and inflammation	Same active ingredient of therapeutic equivalent available by prescription	naproxen (generic Naprosyn, generic Anaprox DS), OTC naproxen (Aleve)
Seglentis	Single Source Brand	Pain and inflammation	Same active ingredient of therapeutic equivalent available by prescription	celecoxib capsules (generic Celebrex) plus tramadol (generic Ultram)
Dhivy	Single Source Brand	Parkinson's disease	Same active ingredient of therapeutic equivalent available by prescription	carbidopa/levodopa (generic Sinemet)
Vemlidy ⁴	Single Source Brand	Hepatitis B	Same active ingredient of therapeutic equivalent available by prescription	entecavir (generic Baraclude), tenofovir disoproxil fumarate (generic Viread)
Aczone	Multi-Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	dapsone topical gel (generic Aczone), OTC Differin Gel
Nilandron	Brand & Generic	Cancer	Therapeutic Equivalent available by prescription	bicalutamide (generic Casodex)
Welchol	Multi-Source Brand	Cholesterol/Lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	colesevelam (generic Welchol)
Auryxia	Single Source Brand	Elevated phosphate levels	Therapeutic Equivalent available by prescription	sevelamer (generic Renagel), Velphoro
Renagel	Multi-Source Brand	Elevated phosphate levels	Same active ingredient of therapeutic equivalent available by prescription	sevelamer (generic Renagel)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Renvela packets	Multi-Source Brand	Elevated phosphate levels	Same active ingredient of therapeutic equivalent available by prescription	sevelamer carbonate (generic Renvela)
Alinia tablets	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	nitazoxanide (generic Alinia)
Dilaudid	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	hydromorphone (generic Dilaudid)
MS Contin	Multi-Source Brand	Pain	Same active ingredient of therapeutic equivalent available by prescription	morphine sulfate (generic MS Contin)
Firazyr	Multi-Source Brand	Hereditary angioedema	Same active ingredient of therapeutic equivalent available by prescription	icatibant acetate (generic Firazyr)
Nexavar	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	sorafenib (generic Nexavar)
Viiibryd	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	vilazodone (generic Viiibryd)
Epsolay	Single Source Brand	Acne	Therapeutic Equivalent available by prescription	Soolantra
Adlarity	Single Source Brand	Alzheimer's disease	Same active ingredient of therapeutic equivalent available by prescription	donepezil tablet (generic Aricept), galantamine (Razadyne), memantine (generic Namenda), rivastigmine transdermal patch (generic Exelon)
Ibsrela	Single Source Brand	Constipation	Therapeutic Equivalent available by prescription	Linzess, lubiprostone (generic Amitiza)
metformin 625 mg tablets	Generic	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	metformin (generic Glucophage, generic Glucophage XR)
Robinul / Robinul Forte	Multi-Source Brand	Excessive secretions	Same active ingredient of therapeutic equivalent available by prescription	glycopyrrolate tablet (generic Robinul / Robinul Forte)
Nexiclon XR (Clonidine Extended-Release)	Single Source Brand & Authorized	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	clonidine (generic Catapres)
Tascenso ODT	Single Source Brand	Multiple sclerosis	Same active ingredient of therapeutic equivalent available by prescription	fingolimod (generic Gilenya)
Lyvispah granules	Single Source Brand	Muscle spasms	Same active ingredient of therapeutic equivalent available by prescription	baclofen (generic Lioresal), Ozobax
Releuko	Single Source Brand	Neutropenia	Same active ingredient of therapeutic equivalent available by prescription	Zarxio

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Quviviq	Single Source Brand	Sleep	Therapeutic Equivalent available by prescription	zolpidem (generic Ambien), zaleplon (generic Sonata), eszopiclone (generic Lunesta)
Tlando	Single Source Brand	Testosterone replacement	Same active ingredient of therapeutic equivalent available by prescription	testosterone 1.62% gel pump (generic Androgel 1.62%), Testim
Relexxii (Methylphenidate Extended-Release)	Brand & Generic	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR), lisdexamfetamine dimesylate (generic Vyvanse), methylphenidate extended-release capsules (generic Metadate CD, Ritalin LA), methylphenidate extended-release osmotic release (generic Concerta)
Afinitor Disperz	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	everolimus tablet for oral suspension (generic Afinitor Disperz)
Sutent	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	sunitinib (generic Sutent)
Katerzia suspension	Single Source Brand	High blood pressure	Same active ingredient of therapeutic equivalent available by prescription	amlodipine (generic Norvasc), Norliqva solution
Insulin glargine (generic Lantus/Lantus Solostar Authorized Brand Alternative)	Authorized Brand Alternative	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Lantus, Toujeo
Gilenya (brand only)	Multi-Source Brand	Multiple sclerosis	Same active ingredient of therapeutic equivalent available by prescription	fingolimod (generic Gilenya)
Ryaltris	Single Source Brand	Allergies	Same active ingredient of therapeutic equivalent available by prescription	olopatadine (generic Patanase) plus an over-the-counter nasal steroid (e.g., Nasonex Allergy), or over-the-counter Astepro Allergy plus an over-the-counter nasal steroid (e.g., Nasonex Allergy)
Entadfi	Single Source Brand	Benign prostatic hyperplasia	Same active ingredient of therapeutic equivalent available by prescription	finasteride (generic Proscar) plus tadalafil (generic Cialis)
Javygtor	Single Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	sapropterin (generic Kuvan)
Lanreotide	Single Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	Somatuline Depot
Pheburane	Single Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	sodium phenylbutyrate (generic Buphenyl)
Allopurinol 200mg	Single Source Brand	Gout	Same active ingredient of therapeutic equivalent available by prescription	allopurinol 100mg or 300mg (generic Zyloprim)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
methocarbamol 1000mg	Generic	Muscle spasms	Same active ingredient of therapeutic equivalent available by prescription	methocarbamol 500 mg (generic Robaxin)
Fynetra	Single Source Brand	Neutropenia	Same active ingredient of therapeutic equivalent available by prescription	Neulasta, Udenyca
Stimufend	Single Source Brand	Neutropenia	Same active ingredient of therapeutic equivalent available by prescription	Neulasta, Udenyca
Buphenyl	Multi-Source Brand	Endocrine disorders	Same active ingredient of therapeutic equivalent available by prescription	sodium phenylbutyrate (generic Buphenyl)
Esbriet	Multi-Source Brand	Pulmonary fibrosis	Same active ingredient of therapeutic equivalent available by prescription	pirfenidone (generic Esbriet)
Vyvanse	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	lisdexamfetamine dimesylate (generic Vyvanse)
Latuda	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	lurasidone (generic Latuda)
Aubagio	Multi-Source Brand	Multiple sclerosis	Same active ingredient of therapeutic equivalent available by prescription	teriflunomide (generic Aubagio)
Fluticasone propionate HFA (Flovent HFA Authorized brand alternative)	Authorized Brand Alternative	Asthma	Same active ingredient of therapeutic equivalent available by prescription	Arnuity Ellipta, QVAR RediHaler
Fluticasone/salmeterol HFA (Advair HFA Authorized brand alternative)	Authorized Brand Alternative	Asthma/COPD	Same active ingredient of therapeutic equivalent available by prescription	fluticasone propionate/salmeterol (generic Advair Diskus), Advair HFA, Breo Ellipta, Symbicort
Fluticasone/Vilanterol Ellipta (Breo Ellipta Authorized brand Alternative)	Authorized Brand Alternative	Asthma/COPD	Same active ingredient of therapeutic equivalent available by prescription	fluticasone propionate/salmeterol (generic Advair Diskus), Advair HFA, Breo Ellipta, Symbicort
Ezetimibe/Atorvastatin	Single Source Brand	Cholesterol/lipid lowering	Same active ingredient of therapeutic equivalent available by prescription	simvastatin/ezetimibe (generic Vytorin), ezetimibe (generic Zetia) plus atorvastatin (generic Lipitor)
Humalog Tempo Pen	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humalog KwikPen, Insulin Lispro KwikPen (unbranded Humalog), Lyumjev KwikPen
Lyumjev Tempo Pen	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Humalog KwikPen, Insulin Lispro KwikPen (unbranded Humalog), Lyumjev KwikPen
Rezvoglar Kwikpen	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Lantus, Toujeo
Abrilada	Single Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cyltezo, Hadlima, Humira
Adalimumab-fkjp	Single Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cyltezo, Hadlima, Humira

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Hulio	Single Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cyltezo, Hadlima, Humira
Hyrimoz	Single Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cyltezo, Hadlima, Humira
Idacio	Single Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cyltezo, Hadlima, Humira
Yuflyma	Single Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cyltezo, Hadlima, Humira
Yusimry	Single Source Brand	Inflammatory conditions	Same active ingredient of therapeutic equivalent available by prescription	Adalimumab-adaz (unbranded Hyrimoz), Amjevita, Cyltezo, Hadlima, Humira
Cortisone tablet	Single Source Brand	Oral steroid	Modified version active ingredient therapeutic equivalent by prescription	hydrocortisone (generic Cortef)
Oxybutynin 5mg/5ml oral solution	Single Source Brand	Overactive bladder	Same active ingredient of therapeutic equivalent available by prescription	oxybutynin oral syrup (generic Ditropan)
Konvomep	Single Source Brand	Ulcers, heartburn & reflux	Therapeutic Equivalent to an OTC medication	lansoprazole orally disintegrating tablet (generic Prevacid Solu-tab), Nexium Suspension, OTC - Nexium, Prevacid, Prilosec, Zegerid
Finacea	Multi-Source Brand	Acne	Same active ingredient of therapeutic equivalent available by prescription	azelaic acid gel (generic Finacea)
Adderall XR	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	amphetamine/dextroamphetamine extended-release 24hr (generic Adderall XR)
Concerta	Multi-Source Brand	ADHD	Same active ingredient of therapeutic equivalent available by prescription	methylphenidate extended-release osmotic release (generic Concerta)
Flovent Diskus	Single Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	Arnuity Ellipta, QVAR RediHaler
Flovent HFA	Single Source Brand	Asthma	Same active ingredient of therapeutic equivalent available by prescription	Arnuity Ellipta, QVAR RediHaler
Pulmicort Flexhaler	Single Source Brand	Asthma	Therapeutic Equivalent available by prescription	Arnuity Ellipta, QVAR RediHaler
Advair Diskus	Multi-Source Brand	Asthma/COPD	Same active ingredient of therapeutic equivalent available by prescription	fluticasone propionate/salmeterol (generic Advair Diskus)
Targretin gel	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	bexarotene gel (generic Targretin)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Targretin capsule	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	bexarotene capsule (generic Targretin)
BiDil	Multi-Source Brand	Chest pain	Same active ingredient of therapeutic equivalent available by prescription	isosorbide dinitrate/hydralazine (generic BiDil)
Humalog vial	Single Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	Insulin Lispro vial (unbranded Humalog)
Kombiglyze XR	Multi-Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	saxagliptin/metformin extended-release (generic Kombiglyze XR)
Onglyza	Multi-Source Brand	Diabetes	Same active ingredient of therapeutic equivalent available by prescription	saxagliptin (generic Onglyza)
Edarbi	Single Source Brand	High blood pressure	Therapeutic Equivalent available by prescription	candesartan (generic Atacand), irbesartan (generic Avapro), losartan (generic Cozaar), olmesartan (generic Benicar), telmisartan (generic Micardis), valsartan (generic Diovan)
Edarbyclor	Single Source Brand	High blood pressure	Therapeutic Equivalent available by prescription	candesartan HCT (generic Atacand HCT), irbesartan HCT (generic Avalide), losartan HCT (generic Hyzaar), olmesartan HCT (Benicar HCT), valsartan HCT (generic Diovan HCT)
Prezista	Multi-Source Brand	HIV	Same active ingredient of therapeutic equivalent available by prescription	darunavir (generic Prezista)
Ciprodex	Multi-Source Brand	Infections	Same active ingredient of therapeutic equivalent available by prescription	ciprofloxacin/dexamethasone otic (generic Ciprodex)
Lialda	Multi-Source Brand	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	mesalamine delayed-release (generic Delzicol), mesalamine delayed-release (generic Lialda), Apriso
Uceris rectal foam	Multi-Source Brand	Inflammatory bowel disease	Same active ingredient of therapeutic equivalent available by prescription	budesonide rectal foam (generic Uceris)
Saphris	Multi-Source Brand	Mental health	Same active ingredient of therapeutic equivalent available by prescription	asenapine maleate sublingual tablet (generic Saphris)
Xyrem	Single Source Brand	Narcolepsy	Same active ingredient of therapeutic equivalent available by prescription	armodafinil (generic Nuvigil), modafinil (generic Provigil), Sodium Oxybate [Xyrem Authorized generic (Hikma)], Sunosi, Wakix, Xywav
Ziextenzo	Single Source Brand	Neutropenia	Same active ingredient of therapeutic equivalent available by prescription	Neulasta, Udenyca
Votrient (brand only)	Multi-Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	pazopanib (generic Votrient)

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
Miebo	Single Source Brand	Dry eye disease	Therapeutic Equivalent available by prescription	Restasis single dose vials, Xiidra
Olpruva	Single Source Brand	Endocrine disorder	Same active ingredient of therapeutic equivalent available by prescription	sodium phenylbutyrate (generic Buphenyl)
Sogroya	Single Source Brand	Growth hormone	Therapeutic Equivalent available by prescription	Norditropin Flexpro, Nutropin AQ NuSpin, Ngenla, Skytrofa
Inpefa	Single Source Brand	Heart failure	Therapeutic Equivalent available by prescription	Jardiance
Sodium oxybate [(Amneal), authorized brand alternative Xyrem]		Narcolepsy	Same active ingredient of therapeutic equivalent available by prescription	armodafinil (generic Nuvigil), modafinil (generic Provigil), Lumryz, Sodium Oxybate [(Hikma) authorized brand alternative Xyrem], Sunosi, Xywav
Liqrev	Single Source Brand	Pulmonary hypertension	Same active ingredient of therapeutic equivalent available by prescription	sildenafil (generic Revatio)
Zolpidem tartrate capsule	Single Source Brand	Sleep	Same active ingredient of therapeutic equivalent available by prescription	zolpidem tablets (generic Ambien, generic Ambien CR)
Cuvrior	Single Source Brand	Wilson's disease	Same active ingredient of therapeutic equivalent available by prescription	trientine (generic Syprine)
Imbruvica 140 mg, 280 mg (tablet only)	Single Source Brand	Cancer	Same active ingredient of therapeutic equivalent available by prescription	Imbruvica capsules
Sajazir	Single Source Brand	Hereditary angioedema	Same active ingredient of therapeutic equivalent available by prescription	icatibant acetate (generic Firazyr)
Millipred	Single Source Brand	Oral steroid	Same active ingredient of therapeutic equivalent available by prescription	prednisone tablets, prednisolone tablets

¹Certain exclusions may not be applicable in certain states due to regulation restrictions.

²Medications listed as single source did not have a generic equivalent available at time document created.

³Legend Medications with OTC Equivalent Exclusions - some of these medications are no longer available as a prescription (ie: Legend) medication

⁴May be eligible for a clinical review

*Multi-source Brand excluded on all Flex Packages

Strategic Benefit Coverage Exclusions¹

This is a comprehensive list of medications currently not covered under the pharmacy benefit. We do not make the decision to exclude medications from benefit coverage lightly. A medication is only excluded when it offers no clinical value over other options in its class and its exclusion can be leveraged to achieve significant savings for our customers while preserving affordable choices for members. This medication is excluded for the majority of benefit plans. For customers not participating in exclusions or the Exclude at Launch Program, this medication is in the highest tier.

Updated - 1/8/2024

Medication Name	Brand and/or Generic ²	Therapeutic Use	Exclusion Rationale ³	Alternative Treatment Option(s)
-----------------	-----------------------------------	-----------------	----------------------------------	---------------------------------

The following classes of medications are also typically excluded from the pharmacy benefit. Contact your pharmacy account team if you have questions about these classes: Durable medical equipment except diabetic supplies and spacers for metered dose inhalers, Infertility (unless state mandated), Injectables except those defined by UHC as self-administered, Nutritional Food Products, Smoking Cessation, Vitamins (except prescription single entity, prescription prenatal vitamins, and prescription fluoride multivitamins for children (other vitamins may be covered under some benefit plans)), and Weight Loss.



Sample Report Package

Employer eServices[®] Cost & Utilization Reporting

Automated & Custom Reports

United
Healthcare

Table of Contents

Reports by Service Level.....	4
Financial.....	6
Claim Expenses by Size of Payment	6
Claim Expenses by Size of Payment - Core	7
Claim Lag Study	8
Detail Payment	9
Financial Managed Ad Hoc.....	10
Large Loss Claim Payments	10
Payments by Benefit Type	11
Payments by Month	12
Premium Managed Ad Hoc	12
Premium vs Claims Incurred Including IBNR – Underwriting – Basic	13
Premium vs Claims Incurred Including IBNR – Non-Standard	14
Premium vs Claims Incurred Including IBNR – Non-Standard - Core	15
Managed Pharmacy	16
Key Generic Substitution Indicators by Month	16
Managed Pharmacy Ad Hoc	16
Managed Pharmacy Cost and Utilization by Month	17
Managed Pharmacy Critical Indicators	18
Managed Pharmacy Plan Performance	20
Managed Pharmacy Utilization by Age Group	21
Top Drug Utilization Ranked by Net Paid	22
Top Drug Utilization Ranked by Volume	23
Top Therapeutic Class Utilization Ranked by Net Paid	24
Top Therapeutic Class Utilization Ranked by Volume	25
Medical	26
Bill Count by Month	26
Claim Experience	27



© 2023 United HealthCare Services, Inc. All Rights Reserved

Cost and Utilization by Procedure	31
Cost and Utilization Summary	32
Distribution of Discounts*	36
Distribution of Ineligible Charges	37
Distribution of Other Savings	38
Health Care Cost Management Summary	39
Inpatient Event Ad Hoc	40
Inpatient Utilization and Costs by Admission Type	41
Inpatient Utilization by Diagnosis	42
Medical Dollar Ad Hoc	43
Medical Dollar Ad Hoc Discounts*	43
Medical Dollar Ad Hoc Provider*	43
Medical Utilization Ad Hoc	43
Network Utilization	44
Outpatient Utilization by Diagnosis	45
Top Hospitals Ranked by Total Net Paid	46
Top Physicians Ranked by Total Net Paid	47
Utilization and Costs by Provider Type	48
Utilization by Age Group	49
Utilization by Diagnosis	50
<i>Membership</i>	<i>51</i>
Membership by Market	51
Membership by Month	52
Membership Managed Ad Hoc	52
Membership With Demographic and Geographic Factors	53



© 2023 United HealthCare Services, Inc. All Rights Reserved

Reports by Service Level

REPORT NAME	STANDARD	SELECT	EXPANDED
Financial			
Claim Expenses by Size of Payment		•	•
Claim Expenses by Size of Payment – Core	•	•	•
Claim Lag Study	•	•	•
Detail Payment †	•	•	•
Detail Payment Non – Confidential	•	•	•
Financial Managed Ad Hoc			•
Large Loss Claim Payments †	•	•	•
Payments by Benefit Type	•	•	•
Payments By Month	•	•	•
Premium Managed Ad Hoc ±			•
Premium vs Claims Incurred Including IBNR - Basic ±		•	•
Premium vs Claims Including IBNR – Underwriting – Nonstandard ±		•	•
Premium vs Claims Including IBNR – Underwriting – Nonstandard – Core ±	•	•	•
Managed Pharmacy			
Key Generic Substitution Indicators By Month			•
Managed Pharmacy Ad Hoc			•
Managed Pharmacy Cost and Utilization by Month	•	•	•
Managed Pharmacy Critical Indicators			•
Managed Pharmacy Plan Performance	•	•	•
Managed Pharmacy Utilization by Age Group			•
Top Drug Utilization Ranked by Net Paid			•
Top Drug Utilization Ranked by Volume			•
Top Therapeutic Class Utilization Ranked by Net Paid			•
Top Therapeutic Class Utilization Ranked by Volume			•
Medical			
Bill Count by Month †			•



Claim Experience	•	•	•
Cost and Utilization by Procedure	•	•	•
Cost and Utilization Summary	•	•	•
Distribution of Discounts			•
Distribution of Ineligible Charges			•
Distribution of Other Savings			•
Healthcare Cost Management Summary	•	•	•
Inpatient Event Ad Hoc			•
Inpatient Utilization and Costs by Admission Type	•	•	•

© 2023 United HealthCare Services, Inc. All Rights Reserved

4

REPORT NAME	STANDARD	SELECT	EXPANDED
Inpatient Utilization by Diagnosis			•
Medical Dollar Ad Hoc			•
Medical Utilization Ad Hoc			•
Network Utilization	•	•	•
Outpatient Utilization by Diagnosis			•
Top Hospitals Ranked by Total Net Paid			•
Top Physicians Ranked by Total Net Paid			•
Utilization and Costs by Provider Type			•
Utilization by Age Group			•
Utilization by Diagnosis	•	•	•
Membership			
Membership by Market	•	•	•
Membership By Month	•	•	•
Membership Managed Ad Hoc			•
Membership with Demographic and Geographic Factors	•	•	•

• Report is available at this service level

± Report includes information for fully insured funding only

† Report includes information for ASO funding only





Financial

Claim Expenses by Size of Payment

Payment Category	Metrics	Number of Claimants	% Claimants	Payments	% Payments
Total		2,043	100.0%	\$3,028,750.32	100.0%
<\$.01		19	0.9%	(\$4,365.19)	(0.1%)
\$.01-\$49		195	9.5%	5,472.25	0.2%
\$50-\$99		202	9.9%	\$14,834.39	0.5%
\$100-\$249		420	20.6%	\$69,991.81	2.3%
\$250-\$499		380	18.6%	\$135,179.03	4.5%
\$500-\$999		302	14.8%	\$215,372.49	7.1%
\$1,000-\$2,499		324	15.9%	\$503,095.44	16.6%
\$2,500-\$4,999		103	5.0%	\$361,542.33	11.9%
\$5,000-\$9,999		52	2.5%	\$363,521.02	12.0%
\$10,000-\$14,999		22	1.1%	\$257,225.76	8.5%

Claim Expenses by Size of Payment - Core



Payment Category	Metrics	Number of Claimants	% Claimants	Payments	% Payments
Total		2,043	100.0%	\$3,028,750.32	100.0%
<\$.01		19	0.9%	(\$4,365.19)	(0.1%)
\$.01-\$49		195	9.5%	5,472.25	0.2%
\$50-\$99		202	9.9%	\$14,834.39	0.5%
\$100-\$249		420	20.6%	\$69,991.81	2.3%
\$250-\$499		380	18.6%	\$135,179.03	4.5%
\$500-\$999		302	14.8%	\$215,372.49	7.1%
\$1,000-\$2,499		324	15.9%	\$503,095.44	16.6%
\$2,500-\$4,999		103	5.0%	\$361,542.33	11.9%
\$5,000-\$9,999		52	2.5%	\$363,521.02	12.0%
\$10,000-\$14,999		22	1.1%	\$257,225.76	8.5%

Claim Lag Study

Book Year/Month	Metrics	Payments						
	Service Year/Month	2008-01	2008-02	2008-03	2008-04	2008-05	2008-06	Total
2008-01		\$111,394	\$0	\$0	\$0	\$0	\$0	\$111,394
2008-02		\$216,056	\$167,146	\$0	\$0	\$0	\$0	\$383,202
2008-03		\$64,015	\$350,339	\$135,190	\$0	\$0	\$0	\$549,544
2008-04		\$8,916	\$37,311	\$303,377	\$166,481	\$0	\$0	\$516,086
2008-05		\$10,550	\$18,506	\$18,923	\$258,669	\$182,371	\$0	\$489,019
2008-06		\$2,222	\$6,085	\$21,927	\$19,803	\$250,822	\$185,902	\$486,760
Total		\$413,152	\$579,387	\$479,417	\$444,953	\$433,193	\$185,902	\$2,536,004



Detail Payment

Subscriber Number	Subscriber Name	Claimant First Name	Relationship	Employment Status	Medicare Status	Benefit Type	Payment Type	Series Designator	Check Number	Service Day	Issue Day	Charge Day	Metrics	Payments		
00011111111	LASTNAME, A.	ANAME	Subscriber	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999903	2/2/2004	26-FEB-04	20-FEB-04		\$18.02		
									00999904	2/2/2004	26-FEB-04	20-FEB-04		\$11.76		
									00999914	5/3/2004	20-MAY-04	14-MAY-04		\$47.19		
						Outpatient/Professional Medical	Other Payments, Standard	VE	10000001	2/2/2004	20-FEB-04	23-FEB-04		\$46.40		
									40000004	5/3/2004	14-MAY-04	17-MAY-04		\$34.93		
	Total													\$158.30		
	Total														\$158.30	
00011111112	LASTNAME, B.	BNAME	Subscriber	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999902	1/26/2004	12-FEB-04	06-FEB-04		\$34.45		
									00999905	5/24/2004	17-JUN-04	11-JUN-04		\$37.39		
									00999906	2/4/2004	26-FEB-04	20-FEB-04		\$1.14		
									00999908	4/10/2004	06-MAY-04	30-APR-04		\$37.39		
									00999910	3/5/2004	25-MAR-04	19-MAR-04		\$34.45		
			Total													\$144.82
			XNAME	Spouse	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999901	12/22/2003	15-JAN-04	09-JAN-04		\$55.22	
									00999907	2/4/2004	26-FEB-04	20-FEB-04		\$18.26		
									00999911	3/3/2004	25-MAR-04	19-MAR-04		\$51.42		
									00999912	4/30/2004	20-MAY-04	14-MAY-04		\$48.77		
		Outpatient X-Ray and Lab					Other Payments, Standard	VE	12000021	4/26/2004	07-MAY-04	10-MAY-04		\$114.59		
			Total													\$308.56
			YNAME	Child	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999909	3/25/2004	08-APR-04	02-APR-04		\$6.50	
		Outpatient/Professional Medical					Other Payments, Standard	VE	30000003	3/25/2004	12-APR-04	13-APR-04		\$43.28		
				Student	Active	Non-Medicare	Outpatient/Professional Medical	Other Payments, Standard	VE	20000002	2/16/2004	08-MAR-04	09-MAR-04		\$43.28	
	Total														\$93.06	
	ZNAME	Child	Active	Non-Medicare	Medco Health	Other Payments, Standard	NN	00999913	5/6/2004	20-MAY-04	14-MAY-04		\$61.71			
Outpatient/Professional Medical					Other Payments, Standard	VF	01000001	5/6/2004	28-MAY-04	01-JUN-04		\$44.89				
		Total													\$106.60	
	Total														\$653.04	
Total															\$3,273,298.92	

Financial Managed Ad Hoc



Suffix	Employment Status	Metrics	UnitedHealthcare Options w/ Ben Diff PPO Payments	UnitedHealthcare Options w/o Ben Diff PPO Payments	UnitedHealthcare Indemnity Payments	UnitedHealthcare Dental Managed Indemnity Payments	Total Payments
AA	Active		\$334,336.91	\$85,048.00	\$0	\$0	\$417,384.91
C	Active		\$1,502,107.99	\$84,459.26	\$0	\$0	\$1,586,567.25
	Retired		\$6,868.98	\$0	\$0	\$0	\$6,868.98
DD	Active		\$0	\$0	\$0	\$79,957.11	\$79,957.11
L	Active		\$0	\$0	\$1,341.53	\$0	\$1,341.53
	Retired		\$1,240.89	\$0	\$270,328.19	\$0	\$271,569.08
Total			\$1,842,554.77	\$169,507.26	\$271,669.72	\$79,957.11	\$2,363,688.86

Large Loss Claim Payments

Claimant	Relationship	Subscriber	Employment Status	Medicare Status	Policy Number	Suffix	Account	Product	HMO Account Division	Payments
First name	Child	0000000012 LASTNAME, X.	Not Active	Non- Medicare	000001234	AB	1	POS Select Plus (POS)	UNITED HEALTHCARE INC.	\$231,861.76
	Total									\$231,861.76
First name	Child	00000300123 LASTNAME, X.	Not Active	Non-Medicare	000001234	AB	1	POS Select Plus (POS)	UNITED HEALTHCARE INC.	\$4,443.58
First name	Total									\$4,443.58
First name	Other Dependent	00000001234 LASTNAME, X.	Not Active	Non-Medicare	000001234	AC	1	POS Select Plus (POS)	UNITED HEALTHCARE INC.	\$166,597.75
First name	Total									\$166,597.75
First name	Spouse	00000012345 LASTNAME, X.	Active	Non-Medicare	000001234	AB	1	POS Select Plus (POS)	UNITED HEALTHCARE INC.	\$102,951.52
First name	Total									\$102,951.52
Total										\$505,854.61

Payments by Benefit Type



Benefit Type		Relationship Group	Subscriber	Spouse	Dependent/Other	Total
		Metrics	Payments	Payments	Payments	Payments
50	Dental		\$83,151.90	\$64,115.31	\$68,766.18	\$216,033.39
70	Orthodontia		\$0.00	\$0.00	\$8,669.29	\$8,669.29
200	Medco Health		\$351,820.43	\$218,479.41	\$112,327.41	\$682,627.25
260	Inpatient Hospital Room & Board		\$92,086.43	\$40,053.51	\$56,042.84	\$188,182.78
270	Inpatient Hospital Miscellaneous		\$336,389.41	\$94,304.29	\$31,004.03	\$461,697.73
300	Outpatient Hospital Miscellaneous		\$123,245.79	\$126,805.98	\$71,471.47	\$321,523.24
310	Emergency Room		\$34,311.85	\$19,655.80	\$20,616.91	\$74,584.56
320	Surgery		\$79,494.60	\$88,983.14	\$28,898.83	\$197,376.57
330	Anesthesia		\$28,999.63	\$20,529.74	\$6,595.97	\$56,125.34
350	Assistant Surgical		\$10,909.06	\$1,453.11	\$97.53	\$12,459.70
360	Inpatient Medical		\$19,294.39	\$2,400.78	\$14,588.36	\$36,283.53
380	Other Medical		\$9,095.17	\$261.14	\$1,077.58	\$10,433.89
390	Chemotherapy		\$127.18	\$4,399.91	\$789.11	\$5,316.20
400	Radiation Therapy		\$10,490.98	\$53.84	\$0.00	\$10,544.82
410	Outpatient X-Ray and Lab		\$197,836.80	\$121,870.14	\$52,511.69	\$372,218.63
420	Outpatient Psychiatric		\$7,369.57	\$9,068.03	\$6,776.30	\$23,213.90
450	Comprehensive Medical Expenses		\$33,353.46	\$96.04	\$109.13	\$33,558.63
470	Supplemental Accident		\$7,251.83	\$5,189.65	\$15,177.14	\$27,618.62
Total			\$1,628,755.97	\$970,515.94	\$654,695.40	\$3,253,967.31

Payments by Month



Book Year/Month	Benefit Payment	Medical	Managed Pharmacy	Dental	Capitation	Total
	Metrics	Payments	Payments	Payments	Payments	Payments
2008-01		\$317,226	\$91,715	\$31,602	\$3,399	\$443,943
2008-02		\$350,872	\$101,771	\$28,873	\$3,276	\$484,792
2008-03		\$513,536	\$109,514	\$39,833	\$3,179	\$666,062
2008-04		\$383,653	\$168,086	\$44,186	\$3,294	\$599,218
2008-05		\$394,700	\$106,412	\$32,445	\$3,252	\$536,810
2008-06		\$386,409	\$105,128	\$47,764	\$3,172	\$542,474
Total		\$2,346,397	\$682,627	\$224,703	\$19,572	\$3,273,299

Premium Managed Ad Hoc

Bill Quarter	Primary Coverage Indicator	Restated Billed Premium	Restated Billed Subscribers	Restated Billed Premium PSPM
Q22008	Primary Coverage	\$101,002	207	\$487.93
	Not Primary Coverage	\$13,164	0	\$0
Q32008	Primary Coverage	\$223,031	463	\$483.65
	Not Primary Coverage	\$37,986	0	\$0
Q42008	Primary Coverage	\$145,032	304	\$477.08
	Not Primary Coverage	\$52,615	0	\$0
Total		\$573,729	974	\$224,703

Premium vs Claims Incurred Including IBNR – Underwriting – Basic



Year/Month	Members	Subscribers	Premium	Premium PMPM	Medical Payments	Capitation Payments	Managed Pharmacy Payments	Total Payments	Claims to Premium Ratio	Total Payments PMPM	12 Month Rolling Average PMPM
2020-08	282	172	\$146,117	\$518.14	\$156,309	\$4,594	\$19,542	\$180,445	123.5%	\$639.88	
2020-09	285	172	\$147,366	\$517.07	\$163,555	\$4,643	\$26,630	\$194,828	132.2%	\$683.61	
2020-10	288	173	\$149,133	\$517.82	\$230,589	\$4,692	\$23,423	\$258,704	173.5%	\$898.28	
2020-11	291	174	\$151,052	\$519.08	\$173,892	\$4,742	\$31,832	\$210,465	139.3%	\$723.25	
2020-12	292	175	\$151,871	\$520.11	\$151,270	\$4,758	\$36,613	\$192,640	126.8%	\$659.73	
2021-01	288	172	\$156,411	\$543.09	\$161,130	\$5,325	\$25,143	\$191,598	122.5%	\$665.27	
2021-02	287	170	\$155,715	\$542.56	\$52,172	\$5,307	\$34,454	\$91,933	59.0%	\$320.32	
2021-03	273	163	\$148,192	\$542.83	\$65,587	\$5,048	\$28,478	\$99,112	66.9%	\$363.05	
2021-04	272	162	\$147,542	\$542.43	\$913,267	\$5,029	\$33,093	\$951,389	644.8%	\$3,497.76	
2021-05	290	169	\$155,056	\$534.67	\$139,015	\$5,362	\$19,751	\$164,128	105.9%	\$565.96	
2021-06	278	163	\$149,412	\$537.45	\$147,605	\$5,140	\$22,892	\$175,637	117.6%	\$631.79	
2021-07	283	165	\$151,881	\$536.68	\$134,042	\$5,251	\$26,460	\$165,753	109.1%	\$585.70	\$843.84
2021-08	276	162	\$148,763	\$539.00	(\$150,117)	\$5,122	\$56,669	(\$88,326)	(59.4%)	(\$320.02)	\$766.34
2021-09	260	155	\$141,448	\$544.03	\$165,790	\$4,807	\$38,022	\$208,619	147.5%	\$802.38	\$776.10
2021-10	246	145	\$133,791	\$543.87	(\$98,220)	\$4,567	\$41,670	(\$51,983)	(38.9%)	(\$211.31)	\$692.74
2021-11	254	150	\$134,530	\$529.65	\$74,680	\$4,623	\$37,354	\$116,656	86.7%	\$459.28	\$672.07
2021-12	248	146	\$134,283	\$541.46	\$80,369	\$4,586	\$26,681	\$111,636	83.1%	\$450.14	\$656.27
2022-01	191	99	\$93,018	\$487.01	\$10,354	\$4,011	\$17,589	\$31,954	34.4%	\$167.30	\$625.87
2022-02	199	104	\$96,820	\$486.53	\$16,772	\$4,179	\$16,642	\$37,593	38.8%	\$188.91	\$626.11
2022-03	204	108	\$99,573	\$488.10	\$56,346	\$4,284	\$32,117	\$92,748	93.1%	\$454.65	\$638.39
2022-04	201	109	\$98,980	\$492.44	\$33,954	\$4,221	\$24,458	\$62,633	63.3%	\$311.61	\$350.53
2022-05	195	107	\$96,782	\$496.32	\$33,263	\$4,095	\$25,814	\$63,172	65.3%	\$323.96	\$326.66
2022-06	189	105	\$94,585	\$500.45	\$22,059	\$3,969	\$25,528	\$51,556	54.5%	\$272.78	\$292.06
2022-07	193	107	\$96,884	\$501.99	\$32,969	\$4,053	\$21,225	\$58,247	60.1%	\$301.80	\$261.49

Total by Experience Period

Current Period	2,656	1,497	\$1,369,458	\$278,218	\$52,516	\$363,770	\$694,504	50.7%	\$261.49
Prior Period	3,409	2,030	\$1,809,749	\$2,488,432	\$59,892	\$328,310	\$2,876,634	159.0%	\$843.84

Average Membership/PMPM Premium and Payments by Experience Period

Current Period	221	125	\$515.61	\$104.75	\$19.77	\$136.96	\$261.49
Prior Period	284	169	\$530.87	\$729.96	\$17.57	\$96.31	\$843.84

% Change

Current Period vs Prior Period	(22.1%)	(26.3%)	(2.9%)	(85.6%)	12.5%	42.2%	(69.0%)
--------------------------------	---------	---------	--------	---------	-------	-------	---------

Premium vs Claims Incurred Including IBNR – Non-Standard



Year/Month	Members	Subscribers	Premium	Premium PMPM	Medical Payments	Capitation Payments	Managed Pharmacy Payments	Total Payments	Claims to Premium Ratio	Total Payments PMPM	12 Month Rolling Average PMPM
2008-01	165,814	64,789	\$46,448,856	\$280.13	\$26,920,205	\$3,907,394	\$8,214,718	\$39,042,318	84.1%	\$235.46	\$270.69
2008-02	164,912	64,945	\$45,894,116	\$300.67	\$27,974,798	\$3,903,596	\$8,015,982	\$39,894,376	86.9%	\$261.36	\$273.63
2008-03	163,541	63,127	\$45,827,494	\$300.72	\$27,655,783	\$3,895,226	\$8,450,951	\$40,001,960	87.3%	\$262.49	\$274.83
2008-04	164,236	63,879	\$45,737,844	\$300.85	\$28,311,318	\$3,885,077	\$8,405,053	\$40,601,448	88.8%	\$267.06	\$278.66
2008-05	168,784	64,984	\$47,134,940	\$310.54	\$29,026,484	\$3,876,716	\$8,654,564	\$41,557,765	88.2%	\$273.79	\$283.09
2008-06	164,222	65,632	\$47,086,836	\$310.59	\$28,015,983	\$3,860,405	\$8,410,831	\$40,287,219	85.6%	\$265.74	\$284.28
2008-07	163,124	64,124	\$46,410,000	\$306.17	\$31,129,666	\$3,861,036	\$8,632,570	\$43,623,272	94.0%	\$287.79	\$286.79
2008-08	165,219	63,555	\$46,949,332	\$310.07	\$29,762,108	\$3,847,580	\$8,598,165	\$42,207,853	89.9%	\$278.76	\$288.46
2008-09	164,547	64,875	\$46,860,841	\$310.44	\$29,681,554	\$3,835,691	\$8,761,837	\$42,279,081	90.2%	\$293.52	\$290.04
2008-10	167,945	65,845	\$46,281,210	\$307.49	\$31,211,241	\$3,825,585	\$9,141,693	\$44,178,519	95.5%	\$280.09	\$291.84
2008-11	166,457	66,901	\$46,773,474	\$311.80	\$27,498,190	\$3,822,505	\$8,455,999	\$39,776,694	85.0%	\$280.86	\$293.07
2008-12	167,855	65,974	\$46,731,337	\$311.75	\$28,739,275	\$3,815,958	\$9,539,989	\$42,095,222	90.1%	\$265.11	\$294.71

Total by Experience Period

Current Period	1,687,165	710,836	\$537,767,671	\$355.547,178	\$41,603,325	\$101,786,721	\$498,937,225	92.8%	\$295.73
Prior Period	1,830,646	5,035,670	\$558,136,281	\$345,924,044	\$46,336,770	\$103,282,353	\$495,543,167	88.8%	\$270.69

Average Membership/PMPM Premium and Payments by Experience Period

Current Period	140,597	59,236	\$318.74	\$210.74	\$24.66	\$60.33	\$295.73
Prior Period	152,554	419,639	\$304.88	\$188.96	\$25.31	\$56.42	\$270.69

% Change

Current Period vs Prior Period	(7.8%)	(85.9%)	4.5%	11.5%	(2.6%)	6.9%	9.2%
--------------------------------	--------	---------	------	-------	--------	------	------

Premium vs Claims Incurred Including IBNR – Non-Standard - Core



Year/Month	Members	Subscribers	Premium	Premium PMPM	Medical Payments	Capitation Payments	Managed Pharmacy Payments	Total Payments	Claims to Premium Ratio	Total Payments PMPM	12 Month Rolling Average PMPM
2008-01	165,814	64,789	\$46,448,856	\$280.13	\$26,920,205	\$3,907,394	\$8,214,718	\$39,042,318	84.1%	\$235.46	\$270.69
2008-02	164,912	64,945	\$45,894,116	\$300.67	\$27,974,798	\$3,903,596	\$8,015,982	\$39,894,376	86.9%	\$261.36	\$273.63
2008-03	163,541	63,127	\$45,827,494	\$300.72	\$27,655,783	\$3,895,226	\$8,450,951	\$40,001,960	87.3%	\$262.49	\$274.83
2008-04	164,236	63,879	\$45,737,844	\$300.85	\$28,311,318	\$3,885,077	\$8,405,053	\$40,601,448	88.8%	\$267.06	\$278.66
2008-05	168,784	64,984	\$47,134,940	\$310.54	\$29,026,484	\$3,876,716	\$8,654,564	\$41,557,765	88.2%	\$273.79	\$283.09
2008-06	164,222	65,632	\$47,086,836	\$310.59	\$28,015,983	\$3,860,405	\$8,410,831	\$40,287,219	85.6%	\$265.74	\$284.28
2008-07	163,124	64,124	\$46,410,000	\$306.17	\$31,129,666	\$3,861,036	\$8,632,570	\$43,623,272	94.0%	\$287.79	\$286.79
2008-08	165,219	63,555	\$46,949,332	\$310.07	\$29,762,108	\$3,847,580	\$8,598,165	\$42,207,853	89.9%	\$278.76	\$288.46
2008-09	164,547	64,875	\$46,860,841	\$310.44	\$29,681,554	\$3,835,691	\$8,761,837	\$42,279,081	90.2%	\$293.52	\$290.04
2008-10	167,945	65,845	\$46,281,210	\$307.49	\$31,211,241	\$3,825,585	\$9,141,693	\$44,178,519	95.5%	\$280.09	\$291.84
2008-11	166,457	66,901	\$46,773,474	\$311.80	\$27,498,190	\$3,822,505	\$8,455,999	\$39,776,694	85.0%	\$280.86	\$293.07
2008-12	167,855	65,974	\$46,731,337	\$311.75	\$28,739,275	\$3,815,958	\$9,539,989	\$42,095,222	90.1%	\$265.11	\$294.71

Total by Experience Period

Current Period	1,687,165	710,836	\$537,767,671	\$355.547,178	\$41,603,325	\$101,786,721	\$498,937,225	92.8%	\$295.73
Prior Period	1,830,646	5,035,670	\$558,136,281	\$345,924,044	\$46,336,770	\$103,282,353	\$495,543,167	88.8%	\$270.69

Average Membership/PMPM Premium and Payments by Experience Period

Current Period	140,597	59,236	\$318.74	\$210.74	\$24.66	\$60.33	\$295.73
Prior Period	152,554	419,639	\$304.88	\$188.96	\$25.31	\$56.42	\$270.69

% Change

Current Period vs Prior Period	(7.8%)	(85.9%)	4.5%	11.5%	(2.6%)	6.9%	9.2%
--------------------------------	--------	---------	------	-------	--------	------	------

Managed Pharmacy



Key Generic Substitution Indicators by Month

Service Year/Month	Metrics	% of Total Prescriptions - Generic	Ingredient Cost Paid per Prescription - Generic	Generic Substitution Rate	% of Total Prescriptions - Single Source	Ingredient Cost Paid per Prescription - Single Source	% of Total Prescriptions - Multi Source	Ingredient Cost Paid per Prescription - Multi Source	% Multi Source-Physician DAW	% Multi Source-Patient DAW	% Multi Source-State Law DAW	% Multi Source-Other DAW
2008-07		39.6%	\$17.70	79.2%	50.0%	\$89.57	10.4%	\$31.19	17.5%	18.5%	3.7%	60.2%
2008-08		41.3%	\$18.84	81.1%	49.0%	\$88.64	9.6%	\$41.81	18.8%	17.7%	3.7%	59.8%
2008-09		40.9%	\$17.83	80.8%	49.4%	\$90.68	9.7%	\$47.30	18.4%	19.1%	3.0%	59.4%
2008-10		41.2%	\$17.45	80.2%	48.6%	\$90.25	10.2%	\$37.26	15.7%	18.7%	2.7%	63.0%
2008-11		41.1%	\$17.49	81.2%	49.4%	\$88.63	9.5%	\$34.67	15.6%	19.2%	2.5%	62.6%
2008-12		42.1%	\$18.27	81.2%	48.1%	\$84.38	9.8%	\$45.70	15.5%	18.8%	2.7%	63.0%
Total		41.1%	\$17.87	80.6%	49.1%	\$88.67	9.9%	\$39.56	16.9%	18.7%	3.0%	61.4%

*Report only available at the Expanded Level

Managed Pharmacy Ad Hoc

Metrics	Number of Claimants	Number of Prescriptions	Plan Net Paid	HRA Net Paid	Total Net Paid	Total Net Paid per Prescription	Total Net Paid per Claimant
	585	1,207	\$12,116.56	\$5,926.19	\$18,042.75	\$14.95	\$30.84

*Report only available at the Expanded Level

Managed Pharmacy Cost and Utilization by Month



Service Year/ Month	Number of Subscribers	Number of Members	Retail Generic Number of Prescriptions	Retail Brand Number of Prescriptions	Retail Total Number of Prescriptions	Home Delivery Generic - Number of Prescriptions	Home Delivery Brand - Number of Prescriptions	Home Delivery Total - Number of Prescriptions	Total Generic Number of Prescriptions	Total Brand Number of Prescriptions	Total Number of Prescriptions	Net Paid	Net Paid per Prescription	Net Paid per Member
2008-01	916	2,346	756	1,154	1,910	31	94	125	787	1,248	2,035	\$101,862	\$50.06	\$43.42
2008-02	926	2,377	769	1,120	1,889	37	82	119	806	1,202	2,008	\$111,531	\$55.54	\$46.92
2008-03	916	2,365	817	1,299	2,116	28	101	129	845	1,400	2,245	\$135,222	\$60.23	\$57.18
2008-04	910	2,351	723	1,165	1,888	42	108	150	765	1,273	2,038	\$120,943	\$59.34	\$51.44
2008-05	902	2,340	724	1,187	1,911	37	95	132	761	1,282	2,043	\$109,386	\$53.54	\$46.75
2008-06	903	2,349	681	1,199	1,880	29	71	100	710	1,270	1,980	\$139,880	\$70.65	\$59.55
Total	5,473	14,128	4,470	7,124	11,594	204	551	755	4,674	7,675	12,349	\$718,824	\$58.21	\$50.88

Managed Pharmacy Critical Indicators

Current Period – Detail Current Period - Total



Metrics	Submission Method	Retail	Home Delivery
Number of Claimants		1,566	172
Number of Prescriptions		11,594	755
Prescriptions PMPY		9.85	0.64
Prescriptions per Claimant		7.40	4.39
% of Total Prescriptions - Single Source		51.4%	62.8%
% of Total Prescriptions - Multi Source		10.0%	10.2%
% of Total Prescriptions - Generic		38.6%	27.0%
Generic Substitution Rate		79.4%	72.6%
% Multi-Source Physician DAW		15.3%	20.8%
% Multi-Source Patient DAW		24.2%	1.3%
% Multi-Source State Law DAW		5.2%	3.9%
% Multi-Source Other DAW		55.3%	74.0%
Average Net Paid PMPM		\$44.20	\$6.68
Average Net Paid per Claimant per Period		\$398.79	\$548.41
Average Net Paid per Prescriptions		\$53.86	\$124.94
Average Copay per Prescription		\$14.48	\$37.48
Average Days Supply		23.68	83.28
Average Ingredient Cost Paid per Day of Therapy		\$2.80	\$1.95

Metrics	
Number of Claimants	1,619
Number of Prescriptions	12,349
Prescriptions PMPY	10.49
Prescriptions per Claimant	7.63
% of Total Prescriptions - Single Source	52.1%
% of Total Prescriptions - Multi Source	10.0%
% of Total Prescriptions - Generic	37.8%
Generic Substitution Rate	79.1%
% Multi-Source Physician DAW	15.6%
% Multi-Source Patient DAW	22.8%
% Multi-Source State Law DAW	5.1%
% Multi-Source Other DAW	56.5%
Average Net Paid PMPM	\$50.88
Average Net Paid per Claimant per Period	\$443.99
Average Net Paid per Prescriptions	\$58.21
Average Copay per Prescription	\$15.89
Average Days Supply	27.32
Average Ingredient Cost Paid per Day of Therapy	\$2.64

*Report only available at the Expanded Level
Prior Period – Detail Prior Period - Total



Metrics	Submission Method	Retail	Home Delivery
Number of Claimants		1,453	135
Number of Prescriptions		10,693	648
Prescriptions PMPY		9.86	0.60
Prescriptions per Claimant		7.36	4.80
% of Total Prescriptions - Single Source		52.0%	63.3%
% of Total Prescriptions - Multi Source		9.8%	9.1%
% of Total Prescriptions - Generic		38.2%	27.6%
Generic Substitution Rate		79.5%	75.2%
% Multi-Source Physician DAW		23.8%	22.0%
% Multi-Source Patient DAW		27.2%	5.1%
% Multi-Source State Law DAW		3.1%	6.8%
% Multi-Source Other DAW		45.9%	66.1%
Average Net Paid PMPM		\$34.92	\$6.95
Average Net Paid per Claimant per Period		\$312.74	\$669.44
Average Net Paid per Prescriptions		\$42.50	\$139.47
Average Copay per Prescription		\$11.70	\$19.23
Average Days Supply		22.99	82.72
Average Ingredient Cost Paid per Day of Therapy		\$2.27	\$1.92

Metrics	
Number of Claimants	1,487
Number of Prescriptions	11,341
Prescriptions PMPY	10.46
Prescriptions per Claimant	7.63
% of Total Prescriptions - Single Source	52.6%
% of Total Prescriptions - Multi Source	9.8%
% of Total Prescriptions - Generic	37.6%
Generic Substitution Rate	79.3%
% Multi-Source Physician DAW	23.7%
% Multi-Source Patient DAW	26.0%
% Multi-Source State Law DAW	3.3%
% Multi-Source Other DAW	46.9%
Average Net Paid PMPM	\$41.87
Average Net Paid per Claimant per Period	\$366.36
Average Net Paid per Prescriptions	\$48.04
Average Copay per Prescription	\$12.13
Average Days Supply	26.40
Average Ingredient Cost Paid per Day of Therapy	\$2.21

*Report only available at the Expanded Level



Managed Pharmacy Plan Performance

Detail

Tier Level	Submission Method Category	Number of Claimants	Number of Prescriptions	Discounts	Ingredient Cost Paid Amount	Dispensing Fee	Sales Tax Amount	Deductible	Coinsurance/Copay	Ancillary Amount	Employee Cost Sharing PMPM	Net Paid	Net Paid Per Prescription	Net Paid PMPM
Tier 1	Retail	1,109	4,470	\$89,543	\$75,368	\$9,451	\$222	\$0	\$32,223	\$0	\$2.28	\$52,817	\$11.82	\$3.74
	Home Delivery	71	204	\$12,819	\$10,829	\$0	\$6	\$0	\$3,237	\$0	\$0.23	\$7,598	\$37.24	\$0.54
Tier 2	Retail	1,080	5,300	\$107,443	\$527,314	\$9,414	\$865	\$0	\$81,966	\$0	\$5.80	\$455,627	\$85.97	\$32.25
	Home Delivery	136	450	\$29,856	\$92,985	\$0	\$34	\$0	\$18,341	\$0	\$1.30	\$74,678	\$165.95	\$5.29
Tier 3	Retail	642	1,824	\$33,497	\$166,146	\$3,183	\$438	\$0	\$53,713	\$0	\$3.80	\$116,053	\$63.63	\$8.21
	Home Delivery	52	101	\$5,908	\$18,757	\$0	\$13	\$0	\$6,720	\$0	\$0.48	\$12,050	\$119.31	\$0.85

Detail
Subtotals by Tier

Tier Level	Number of Claimants	Number of Prescriptions	Discounts	Ingredient Cost Paid Amount	Dispensing Fee	Sales Tax Amount	Deductible	Coinsurance/Copay	Ancillary Amount	Employee Cost Sharing PMPM	Net Paid	Net Paid Per Prescription	Net Paid PMPM
Tier 1	1,135	4,674	\$102,362	\$86,196	\$9,451	\$228	\$0	\$35,460	\$0	\$2.51	\$60,415	\$12.93	\$4.28
Tier 2	1,146	5,750	\$137,298	\$620,300	\$9,414	\$899	\$0	\$100,307	\$0	\$7.10	\$530,306	\$92.23	\$37.54
Tier 3	676	1,925	\$39,404	\$184,903	\$3,183	\$450	\$0	\$60,433	\$0	\$4.28	\$128,103	\$66.55	\$9.07

Subtotals by Tier
Total

Number of Claimants	Number of Prescriptions	Discounts	Ingredient Cost Paid Amount	Dispensing Fee	Sales Tax Amount	Deductible	Coinsurance/Copay	Ancillary Amount	Employee Cost Sharing PMPM	Net Paid	Net Paid Per Prescription	Net Paid PMPM
1,619	12,349	\$279,064	\$891,399	\$22,047	\$1,578	\$0	\$196,200	\$0	\$13.89	\$718,824	\$58.21	\$50.88

Managed Pharmacy Utilization by Age Group

Detail



Age Band	Metrics	Number of Claimants	Number of Prescriptions	Number of Prescriptions PMPY	Number of Prescriptions per Claimant	Net Paid	Net Paid PMPM	Net Paid per Claimant	Net Paid per Prescription
<1		21	68	0.06	3.24	\$750	\$0.05	\$35.70	\$11.02
1-9		227	979	0.83	4.31	\$48,691	\$3.45	\$214.50	\$49.74
10-19		234	1,071	0.91	4.58	\$49,922	\$3.53	\$213.34	\$46.61
20-24		71	350	0.30	4.93	\$16,073	\$1.14	\$226.38	\$45.92
25-29		74	369	0.31	4.99	\$18,545	\$1.31	\$250.60	\$50.26
30-34		150	1,159	0.98	7.73	\$86,139	\$6.10	\$574.26	\$74.32
35-39		213	1,242	1.05	5.83	\$58,406	\$4.13	\$274.21	\$47.03
40-44		251	2,065	1.75	8.23	\$98,088	\$6.94	\$390.79	\$47.50
45-49		175	1,616	1.37	9.23	\$87,463	\$6.19	\$499.79	\$54.12
50-54		129	1,705	1.45	13.22	\$105,754	\$7.49	\$819.80	\$62.03
55-59		88	1,029	0.87	11.69	\$113,272	\$8.02	\$1,287.18	\$110.08
60-64		45	573	0.49	12.73	\$28,980	\$2.05	\$644.00	\$50.58
65-69		9	92	0.08	10.22	\$5,539	\$0.39	\$615.44	\$60.21
70-74		2	23	0.02	11.50	\$834	\$0.06	\$416.83	\$36.25
75 +		1	8	0.01	8.00	\$368	\$0.03	\$368.30	\$46.04

Detail
Total

Metrics	Number of Claimants	Number of Prescriptions	Number of Prescriptions PMPY	Number of Prescriptions per Claimant	Net Paid	Net Paid PMPM	Net Paid per Claimant	Net Paid per Prescription
	1,619	12,349	10.49	7.63	\$718,824	\$50.88	\$443.99	\$58.21

*Report only available at the Expanded Level

Top Drug Utilization Ranked by Net Paid

Top Drugs



Drug Name	FDB Standard Therapeutic Class	Metrics	Number of Claimants	Number of Prescriptions	Net Paid	% of Total Prescriptions	% of Net Paid	Net Paid per Prescription	Average Days Supply	Ingredient Cost Paid per Day Of Therapy
TEMODAR	ANTINEOPLASTICS		1	14	\$40,037.90	0.1%	5.6%	\$2,859.85	19.64	\$146.51
	Subtotal		0	14	\$40,037.90	0.1%	5.6%	\$2,859.85	19.64	\$146.51
NEXIUM	ANTI-ULCER PREPS/GASTROINTESTINAL PREPS		65	204	\$28,838.81	1.7%	4.0%	\$141.37	38.79	\$4.02
	Subtotal		0	204	\$28,838.81	1.7%	4.0%	\$141.37	38.79	\$4.02
GLEEVEC	ANTINEOPLASTICS		1	5	\$22,834.98	0.0%	3.2%	\$4,567.00	30.00	\$152.99
	Subtotal		0	5	\$22,834.98	0.0%	3.2%	\$4,567.00	30.00	\$152.99
LIPITOR	LIPOTROPICS		77	255	\$22,014.25	2.1%	3.1%	\$86.33	40.23	\$2.64
	Subtotal		0	255	\$22,014.25	2.1%	3.1%	\$86.33	40.23	\$2.64
Subtotal			0	483	\$130,951.08	3.9%	18.2%	\$271.12	38.79	\$7.45

All Other Drugs

Metrics	Number of Claimants	Number of Prescriptions	Net Paid	% of Total Prescriptions	% of Net Paid	Net Paid per Prescription	Average Days Supply	Ingredient Cost Paid per Day Of Therapy
	1,604	11,866	\$587,873.14	96.1%	81.8%	\$49.54	26.86	\$2.36

All Other Drugs
All Drugs

Metrics	Number of Claimants	Number of Prescriptions	Net Paid	% of Total Prescriptions	% of Net Paid	Net Paid per Prescription	Average Days Supply	Ingredient Cost Paid per Day Of Therapy
	1,619	12,349	\$718,824.22	100.0%	100.0%	\$58.21	27.32	\$2.64

*Report only available at the Expanded Level

Top Drug Utilization Ranked by Volume

Top Drugs



Drug Name	FDB Standard Therapeutic Class	Metrics	Number of Claimants	Number of Prescriptions	Net Paid	% of Total Prescriptions	% of Net Paid	Net Paid per Prescription	Average Days Supply	Ingredient Cost Paid per Day Of Therapy
ZYRTEC	ANTI-HISTAMINES		113	278	\$11,717.49	2.3%	1.6%	\$42.15	32.19	\$1.73
	Subtotal		0	278	\$11,717.49	2.3%	1.6%	\$42.15	32.19	\$1.73
LIPITOR	LIPOTROPICS		77	255	\$22,014.25	2.1%	3.1%	\$86.33	40.23	\$2.64
	Subtotal		0	255	\$22,014.25	2.1%	3.1%	\$86.33	40.23	\$2.64
SYNTHROID	THYROID PREPS		53	217	\$1,065.02	1.8%	0.1%	\$4.91	37.18	\$0.52
	Subtotal		0	217	\$1,065.02	1.8%	0.1%	\$4.91	37.18	\$0.52
NEXIUM	ANTI-ULCER PREPS/GASTROINTESTINAL PREPS		65	204	\$28,838.81	1.7%	4.0%	\$141.37	38.79	\$4.02
	Subtotal		0	204	\$28,838.81	1.7%	4.0%	\$141.37	38.79	\$4.02
SINGULAIR	BRONCHIAL DILATORS		67	193	\$13,622.25	1.6%	1.9%	\$70.58	32.88	\$2.64
	Subtotal		0	193	\$13,622.25	1.6%	1.9%	\$70.58	32.88	\$2.64
Subtotal			0	1,147	\$77,257.82	9.3%	10.7%	\$67.36	36.21	\$2.30

Top Drugs

Metrics	Number of Claimants	Number of Prescriptions	Net Paid	% of Total Prescriptions	% of Net Paid	Net Paid per Prescription	Average Days Supply	Ingredient Cost Paid per Day Of Therapy
	1,578	11,202	\$641,566.40	90.7%	89.3%	\$57.27	26.41	\$2.69

All Other Drugs

Metrics	Number of Claimants	Number of Prescriptions	Net Paid	% of Total Prescriptions	% of Net Paid	Net Paid per Prescription	Average Days Supply	Ingredient Cost Paid per Day Of Therapy
	1,619	12,349	\$718,824.22	100.0%	100.0%	\$58.21	27.32	\$2.64

*Report only available at the Expanded Level

Top Therapeutic Class Utilization Ranked by Net Paid

Top Therapeutic Classes



FDB Standard Therapeutic Class	Metrics	Number of Claimants	Number of Prescriptions	Prescriptions per Claimant	Average Days Supply	Net Paid	Net Paid PMPM	Net Paid per Prescription	Generic %	Single-Source %	Multi-Source %	Generic Substitution %
MISCELLANEOUS		199	482	2.42	26.61	\$71,098	\$5.03	\$147.51	13.9%	72.6%	13.5%	50.8%
ANTINEOPLASTICS		17	55	3.24	28.51	\$66,536	\$4.71	\$1,209.75	54.5%	40.0%	5.5%	90.9%
PSYCHOSTIMULANTS-ANTIDEPRESSANTS		258	1,041	4.03	33.44	\$62,423	\$4.42	\$59.96	33.0%	64.4%	2.6%	92.7%
ANTI-ULCER PREPS/GASTROINTESTINAL PREPS		141	463	3.28	35.20	\$54,591	\$3.86	\$117.91	7.8%	92.2%	0.0%	100.0%
LIPOTROPICS		141	565	4.01	37.88	\$48,464	\$3.43	\$85.78	2.5%	97.0%	0.5%	82.4%
Subtotal		0	2,606	0	33.35	\$303,112	\$21.45	\$116.31	18.8%	77.4%	3.8%	83.4%

Top Therapeutic Classes

Metrics	Number of Claimants	Number of Prescriptions	Prescriptions per Claimant	Average Days Supply	Net Paid	Net Paid PMPM	Net Paid per Prescription	Generic %	Single-Source %	Multi-Source %	Generic Substitution %
	1,527	9,743	6.38	25.71	\$415,712	\$29.42	\$42.67	42.9%	45.4%	11.7%	78.6%

All Other Therapeutic Classes

Metrics	Number of Claimants	Number of Prescriptions	Prescriptions per Claimant	Average Days Supply	Net Paid	Net Paid PMPM	Net Paid per Prescription	Generic %	Single-Source %	Multi-Source %	Generic Substitution %
	1,619	12,349	7.63	27.32	\$718,824	\$50.88	\$58.21	37.8%	52.1%	10.0%	79.1%

*Report only available at the Expanded Level

Top Therapeutic Class Utilization Ranked by Volume

Top Therapeutic Classes



FDB Standard Therapeutic Class	Metrics	Number of Claimants	Number of Prescriptions	Prescriptions per Claimant	Average Days Supply	Net Paid	Net Paid PMPM	Net Paid per Prescription	Generic %	Single-Source %	Multi-Source %	Generic Substitution %
PSYCHOSTIMULANTS-ANTIDEPRESSANTS		258	1,041	4.03	33.44	\$62,423	\$4.42	\$59.96	33.0%	64.4%	2.6%	92.7%
SYSTEMIC CONTRACEPTIVES		183	629	3.44	37.53	\$14,736	\$1.04	\$23.43	49.4%	31.8%	18.8%	72.5%
ANTIHISTAMINES		270	626	2.32	29.96	\$25,643	\$1.82	\$40.96	10.1%	89.6%	0.3%	96.9%
NARCOTIC ANALGESICS		271	595	2.20	11.87	\$13,681	\$0.97	\$22.99	79.0%	10.4%	10.6%	88.2%
OTHER HYPOTENSIVES		140	572	4.09	39.18	\$14,908	\$1.06	\$26.06	42.8%	54.0%	3.1%	93.2%
Subtotal		0	3,463	0	30.79	\$131,390	\$9.30	\$37.94	41.4%	52.0%	6.6%	86.3%

Top Therapeutic Classes
All Other Therapeutic Classes

Metrics	Number of Claimants	Number of Prescriptions	Prescriptions per Claimant	Average Days Supply	Net Paid	Net Paid PMPM	Net Paid per Prescription	Generic %	Single-Source %	Multi-Source %	Generic Substitution %
	1,464	8,886	6.07	25.97	\$587,434	\$41.58	\$66.11	36.5%	52.2%	11.4%	76.3%

All Other Therapeutic Classes

Metrics	Number of Claimants	Number of Prescriptions	Prescriptions per Claimant	Average Days Supply	Net Paid	Net Paid PMPM	Net Paid per Prescription	Generic %	Single-Source %	Multi-Source %	Generic Substitution %
	1,619	12,349	7.63	27.32	\$718,824	\$50.88	\$58.21	37.8%	52.1%	10.0%	79.1%

*Report only available at the Expanded Level

Medical

Bill Count by Month



Process Year/Month	Employment Status	Medicare Status	Metrics	Bill Count
2008-01	Active	Non-Medicare		1,951
		Medicare		4
2008-02	Active	Non-Medicare		2,205
		Medicare		5
2008-03	Active	Non-Medicare		2,214
		Medicare		2
2008-04	Active	Non-Medicare		2,165
		Medicare		4
2008-05	Active	Non-Medicare		2,224
		Medicare		1
2008-06	Active	Non-Medicare		2,422
Total				13,197

*Report only available at the Expanded Level

Claim Experience

[Enrollment Detail](#)

[Benefit Cost Sharing Detail](#)



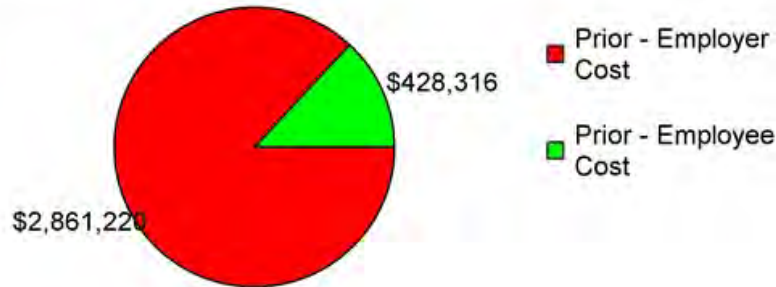
Metrics	Type of Coverage	Medical	Pharmacy
Prior - Average Number of Subscribers		875	811
Current - Average Number of Subscribers		951	912
% Change - Average Number of Subscribers		8.6%	12.5%
Prior - Average Number of Members		2,251	2,169
Current - Average Number of Members		2,402	2,355
% Change - Average Number of Members		6.7%	8.6%
Prior - Contract Size		2.57	2.67
Current - Contract Size		2.53	2.58
% Change - Contract Size		(1.8%)	(3.5%)



Metrics	Prior Employer Cost	Prior Employer Cost Sharing	Current Employer Cost	Current Employer Cost Sharing	% Change Employer Cost Sharing
	\$2,861,220	87.0%	\$2,693,687	86.1%	(1.0%)

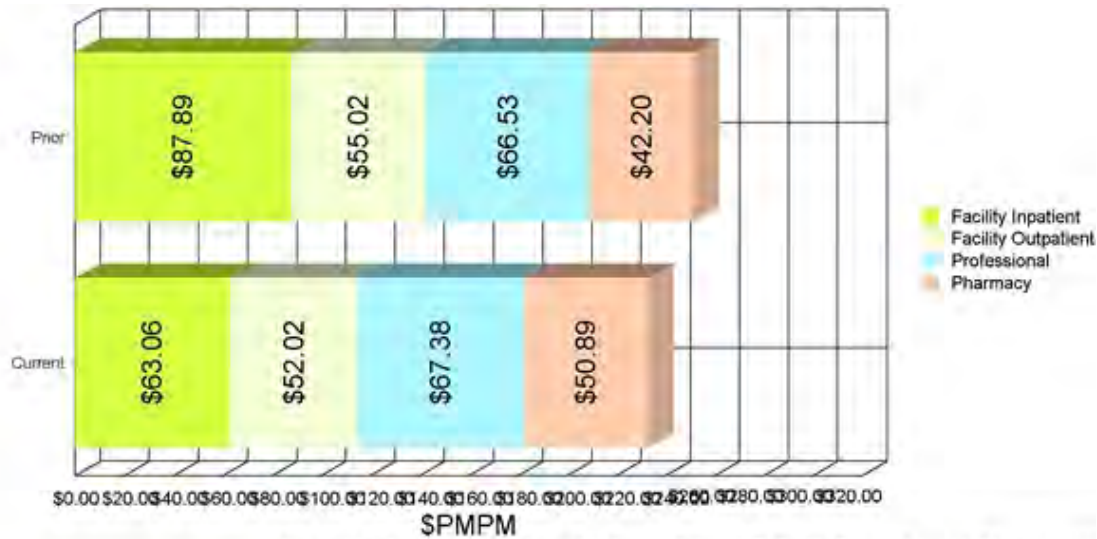
Enrollment Detail
Prior Benefit Cost Sharing (Prior to COB)

Benefit Cost Sharing Detail



Claim Cost by Healthcare Cost Category





Note: Professional Consists of Primary Care, OB/GYN, Specialty and Allied Health

Claim Cost by Healthcare Cost Category

~~Claim Cost by Healthcare Cost Category Detail~~

Healthcare Cost Category Rollup	Metrics	Prior Total Net Paid	Current Total Net Paid	Prior - Net Paid PMPM	Current Net Paid PMPM	% Change Net Paid PMPM
1	Facility Inpatient	\$1,187,027	\$908,820	\$87.89	\$63.06	(28.2%)
2	Facility Outpatient	\$747,608	\$749,809	\$55.35	\$52.03	(6.0%)
3	Physician - Primary Care	\$201,937	\$219,713	\$14.95	\$15.25	2.0%
4	Physician - OB/GYN	\$48,464	\$85,142	\$3.59	\$5.91	64.6%
5	Physician - Specialty	\$531,352	\$566,519	\$39.34	\$39.31	(0.1%)
6	Allied Health	\$116,745	\$99,699	\$8.64	\$6.92	(20.0%)
7	Managed Pharmacy	\$544,779	\$718,824	\$41.87	\$50.88	21.5%
Total		\$3,377,912	\$3,348,526	\$251.64	\$233.36	(7.3%)

Other Claim Cost



Metrics	Prior - Total Capitation Net Paid	Current - Total Capitation Net Paid	Prior - Total Capitation Net Paid PMPM	Current - Total Capitation Net Paid PMPM	% Change Total Capitation Net Paid PMPM
	\$8,478	\$19,563	\$0.63	\$1.36	116.3%

Other Claim Cost

Metrics	Prior Total Net Paid	Current Total Net Paid	Prior - Net Paid PMPM	Current Net Paid PMPM	% Change Net Paid PMPM
	\$3,386,390	\$3,368,089	\$252.27	\$234.72	(7.0%)

Total Costs

Outpatient and Professional Utilization by Healthcare Cost Category

Healthcare Cost Category Detail	Metrics	Prior Number of Units	Current Number of Units	Prior Units per 1000	Current Units per 1000	Prior - Net Paid per Unit	Current Net Paid per Unit	% Change Units per 1000	% Change Net Paid per Unit
2 Facility Outpatient		5,201	4,947	2,310.5	2,059.7	\$143	\$152	(10.9%)	6.1%
3 Physician - Primary Care		2,542	2,641	1,129.3	1,099.6	\$79	\$83	(2.6%)	4.7%
4 Physician - OB/GYN		255	319	113.3	132.8	\$190	\$267	↑ ↓ 17.2%	40.4%
5 Physician - Specialty		1,476	1,702	655.7	708.6	\$360	\$333	8.1%	(7.5%)
6 Allied Health		249	272	110.6	113.2	\$469	\$367	2.4%	(21.8%)

Cost by Diagnosis Chapter



Diagnosis Chapter Rollup	Metrics	Prior Total Net Paid	Current Total Net Paid	Prior - Net Paid PMPH	Current Net Paid PMPH	% Change Net Paid PMPH
1	CIRCULATORY SYSTEM	\$280,603	\$479,747	\$20.78	\$33.29	60.2%
2	NEOPLASMS	\$440,496	\$352,263	\$32.61	\$24.44	(25.1%)
3	INJURY AND POISONING	\$380,730	\$268,024	\$28.19	\$18.60	(34.0%)
4	MUSKULO CNCTV TISSUE	\$272,875	\$202,001	\$20.20	\$14.02	(30.6%)
5	GENITOURINARY SYSTEM	\$213,695	\$177,593	\$15.82	\$12.32	(22.1%)
6	DIGESTIVE SYSTEM	\$265,921	\$142,089	\$19.69	\$9.86	(49.9%)
7	RESPIRATORY SYSTEM	\$256,180	\$140,856	\$18.97	\$9.77	(48.5%)
8	NERVOUS SYS SENSE ORGANS	\$150,011	\$128,186	\$11.11	\$8.89	(19.9%)
Total		\$2,833,133	\$2,629,702	\$209.77	\$182.48	(13.0%)

Inpatient Utilization

Metrics	
Prior - Number of Days	580
Current - Number of Days	360
Prior - Days per 1000	257.7
Current - Days per 1000	149.9
Prior - Net Paid per Day	\$2,069
Current - Net Paid per Day	\$2,690
% Change - Days per 1000	(41.8%)
% Change - Net Paid per Day	30.0%
Prior - Number of Admissions	81
Current - Number of Admissions	80
Prior - Admissions per 1000	36.0
Current - Admissions per 1000	33.3
Prior - Net Paid per Admission	\$14,819
Current - Net Paid per Admission	\$12,107
% Change - Admissions per 1000	(7.4%)
% Change - Net Paid per Admission	(18.3%)

Cost and Utilization by Procedure



Detail

Procedure Chapter	Metrics	Prior Period Number of Claimants	Prior Period Number of Procedures	Prior Period Covered Amount	Prior Period Covered Amount PMPM	Prior Period Net Paid	Prior Net Paid PMPM	Current Period Number of Claimants	Current Period Number of Procedures	Current Period Covered Amount	Current Period Covered Amount PMPM	Current Period Net Paid	Current Net Paid PMPM
OPERATIONS NERVOUS SYS		13	47	\$85,485	\$6.33	\$81,658	\$6.05	16	17	\$23,935	\$1.66	\$18,053	\$1.25
OPERATIONS ENDOCRINE SYS		0	0	0	\$0.00	0	\$0.00	2	0	\$3,772	\$0.26	\$2,464	\$0.17
OPERATIONS EYE		15	26	\$11,558	\$0.86	\$9,693	\$0.72	19	22	\$32,793	\$2.28	\$25,661	\$1.78
OPERATIONS EAR		17	26	\$12,197	\$0.90	\$9,041	\$0.67	18	23	\$9,019	\$0.63	\$7,625	\$0.53
OPER NOSE MOUTH PHARYNX		21	77	\$54,708	\$4.05	\$45,103	\$3.34	23	20	\$22,060	\$1.53	\$14,626	\$1.01
OPER RESPIRATORY SYS		10	14	\$14,197	\$1.05	\$12,362	\$0.92	8	8	\$279,881	\$19.42	\$279,108	\$19.37
OPER HEMIC LYMPHATIC SYS		4	5	\$313,333	\$23.20	\$312,327	\$23.13	1	2	\$436	\$0.03	\$349	\$0.02
OPER DIGESTIVE SYS		51	80	\$221,002	\$16.36	\$199,580	\$14.78	57	76	\$140,791	\$9.77	\$110,162	\$7.64
OPER URINARY SYS		13	22	\$123,649	\$9.16	\$117,509	\$8.70	9	10	\$5,582	\$0.39	\$4,257	\$0.30
OPER MALE GENITAL ORGANS		6	8	\$4,604	\$0.34	\$3,693	\$0.27	14	13	\$38,630	\$2.68	\$33,783	\$2.34
OPER FEMALE GENITAL ORGANS		29	43	\$44,309	\$3.28	\$39,421	\$2.92	39	54	\$87,293	\$6.06	\$72,020	\$5.00
OBSTETRICAL PROCEDURES		10	29	\$28,222	\$2.09	\$22,942	\$1.70	20	33	\$92,671	\$6.43	\$70,448	\$4.89
OPER INTEGUMENTARY SYS		129	254	\$85,601	\$6.34	\$73,985	\$5.48	132	230	\$102,088	\$7.08	\$93,417	\$6.48
MISC DIAG THERAPEUTIC		1,593	17,110	\$1,509,039	\$111.73	\$1,196,558	\$88.59	1,769	19,287	\$1,621,009	\$112.48	\$1,319,040	\$91.53

Detail

Prior Period Number of Claimants	Prior Period Number of Procedures	Prior Period Covered Amount	Prior Period Covered Amount PMPM	Prior Period Net Paid	Prior Net Paid PMPM	Current Period Number of Claimants	Current Period Number of Procedures	Current Period Covered Amount	Current Period Covered Amount PMPM	Current Period Net Paid	Current Net Paid PMPM
1,595	18,378	\$3,111,713	\$230.39	\$2,692,065	\$199.32	1,779	20,436	\$2,814,422	\$195.30	\$2,384,592	\$165.47

Cost and Utilization Summary



Metrics	Prior Period	Current Period	Change
Highlights			
Demographics			
Average Enrolled Subscribers	0	978	0
Average Enrolled Membership	0	2,318	0
Average Contract Size	0	2.4	0
Average Family Size	0	3.3	0
Age/Gender Factor	0	0.9	0
Claimants per 1,000	0	301.2	0
Covered Expenses PMPM			
Total Covered Expenses PMPM	\$0.00	\$122.14	0
Standard Medical Covered Expenses PMPM	\$0.00	\$108.37	0
Mental Health/Substance Abuse Covered Expenses PMPM	\$0.00	\$0.24	0
Managed Pharmacy Covered Expenses PMPM	\$0.00	\$13.53	0
Total Net Paid PMPM			
Total Net Paid PMPM	\$0.00	\$65.31	0
Standard Medical Total Net Paid PMPM	\$0.00	\$61.14	0
Mental Health/Substance Abuse Total Net Paid PMPM	\$0.00	\$0.28	0
Managed Pharmacy Total Net Paid PMPM	\$0.00	\$3.89	0
Benefit Adequacy			
Percent of Covered Expenses (before COB) Paid by the Plan	0.00%	47.70%	47.7
High Cost Claimants (\$50,000+)			
Number of Claimants	0	0	0
Total Net Paid PMPM	\$0.00	\$0.00	0
Percent of Total Net Paid	0.00%	0.00%	0
Inpatient Utilization			
Admissions per 1,000	0	5.6	0
Days per 1,000	0	10.8	0
Average Length of Stay	0	1.92	0
Average Paid per Day	\$0	\$3,529	0
Network Indicators			
Eligible Medical Expenses Paid at Network Benefit Level	0.00%	92.80%	92.8
Eligible Medical Expenses from Participating Providers	0.00%	91.80%	91.8



Average UHC Participating Provider Discount	0.00%	35.40%	35.4
Total UHC Network Provider Discount PMPM	\$0.00	\$59.82	0
Details			
High Cost Claimants (\$50,000+)			
High Cost Claimants per 1,000	0	0	0
Average Paid per High Cost Claimant	\$0	\$0	0
Percent of Total Net Paid	0.00%	0.00%	0
Standard Medical - Total Net Paid PMPM (excludes MH/SA)			
Standard Medical - Total Net Paid PMPM	\$0.00	\$61.14	0
Physician	\$0.00	\$24.40	0
Primary Care	\$0.00	\$8.37	0
Specialists (including OB/GYN)	\$0.00	\$16.03	0
Facility	\$0.00	\$34.72	0
Inpatient	\$0.00	\$19.18	0
Outpatient	\$0.00	\$15.53	0
Allied Health	\$0.00	\$2.02	0
Medical Pharmacy	\$0.00	\$0.00	0
Standard Medical - Total Net Paid Unit Costs (excludes MH/SA)			
Inpatient Facility Total Net Paid per Admission	\$0	\$8,052	0
Medical	\$0	\$2,847	0
Surgical	\$0	\$11,825	0
Maternity (includes Well Newborn)	\$0	\$4,051	0
Other Newborn	\$0	\$0	0
Non-Acute	\$0	\$0	0
Inpatient Facility Total Net Paid per Day	\$0	\$4,187	0
Medical	\$0	\$1,898	0
Surgical	\$0	\$5,913	0
Maternity (includes Well Newborn)	\$0	\$2,025	0
Other Newborn	\$0	\$0	0
Non-Acute	\$0	\$0	0
Outpatient Surgery Total Net Paid per Encounter	\$0	\$2,057	0
Emergency Room Total Net Paid per Visit	\$0	\$539	0
Inpatient - Total Net Paid per Physician Visit	\$0.00	\$65.71	0
Primary Care	\$0.00	\$72.57	0
Specialist	\$0.00	\$61.13	0
OB/GYN	\$0.00	\$0.00	0
Outpatient - Total Net Paid per Physician Visit	\$0.00	\$59.30	0



Primary Care	\$0.00	\$56.90	0
Specialist	\$0.00	\$60.03	0
OB/GYN	\$0.00	\$74.86	0
Standard Medical - Utilization (excludes MH/SA)			
Inpatient Admissions per 1,000	0	5.6	0
Medical	0	0.9	0
Surgical	0	3	0
Maternity	0	1.7	0
Other Newborn	0	0	0
Non-Acute	0	0	0
C-Section Rate	0%	25%	25
Inpatient Days per 1,000	0	10.8	0
Medical	0	1.3	0
Surgical	0	6	0
Maternity	0	3.5	0
Other Newborn	0	0	0
Non-Acute	0	0	0
Inpatient Average Length of Stay	0	1.92	0
Medical	0	1.5	0
Surgical	0	2	0
Maternity	0	2	0
Other Newborn	0	0	0
Non-Acute	0	0	0
Surgical Outpatient Facility Visits per 1,000	0	9.5	0
Emergency Room Visits per 1,000	0	17.3	0
Inpatient - Physician Visits per 1,000	0	6	0
Primary Care	0	3	0
Specialist	0	4	0
OB/GYN	0	0	0
Outpatient - Physician Visits per 1,000	0	288	0
Primary Care	0	188	0
Specialist	0	75	0
OB/GYN	0	25	0
Managed Pharmacy			
Total Net Paid PMPM	\$0.00	\$3.89	0
Tier1	\$0.00	\$0.90	0
Tier2	\$0.00	\$2.24	0
Tier3	\$0.00	\$0.76	0
Tier4	\$0.00	\$0.00	0



Total Net Paid PMPM by Submission Method			
Retail Delivery	\$0.00	\$3.11	0
Home Delivery	\$0.00	\$0.78	0
Total Net Paid per Script	\$0.00	\$14.95	0
Tier1	\$0.00	\$6.04	0
Tier2	\$0.00	\$29.72	0
Tier3	\$0.00	\$20.68	0
Tier4	\$0.00	\$0.00	0
Total Net Paid per Script by Submission Method			
Retail Delivery	\$0.00	\$13.27	0
Home Delivery	\$0.00	\$30.33	0
Scripts per Member per Year	0	3.1	0
Tier1	0	1.8	0
Tier2	0	0.9	0
Tier3	0	0.4	0
Tier4	0	0	0
Scripts per Member per Year by Submission Method			
Retail Delivery	0	2.8	0
Home Delivery	0	0.3	0
Average Total Net Paid per Day	\$0.00	\$0.50	0
Retail Delivery	\$0.00	\$0.55	0
Home Delivery	\$0.00	\$0.37	0
Other Indicators			
Percent Generic Scripts	0.00%	52.70%	52.7
Percent Home Delivery Scripts	0.00%	9.90%	9.9
Benefit Adequacy	0.00%	19.30%	19.3
Mental Health / Substance Abuse			
Total Net Paid PMPM	\$0.00	\$0.28	0
Inpatient	\$0.00	\$0.00	0
Outpatient	\$0.00	\$0.28	0
Unit Costs			
Inpatient per Admission	\$0	\$0	0
Inpatient per Day	\$0	\$0	0
Outpatient per Encounter	\$0	\$0	0
Utilization			
Inpatient Admissions per 1,000	0	0	0
Inpatient Days per 1,000	0	0	0
Average Length of Stay	0	0	0
Outpatient Encounters per 1,000	0	0	0
Other Indicators			
Eligible Medical Expenses from Participating Providers	0.00%	82.10%	82.1
Eligible Medical Expenses Paid at Network Benefit Level	0.00%	65.10%	65.1



Distribution of Discounts

Healthcare Cost Category Detail	Metrics	Contracted Discount	Special Negotiated Discount	Shared Savings Discount	Prompt Payment Discount	Customer Specific Discount	Other Discount	Total Discounts
Physician - Primary Care		\$129,634	(\$85)	\$1,626	\$0	\$0	\$23	\$131,198
Physician - OB/GYN		\$73,766	\$0	\$81	\$0	\$0	\$349	\$74,196
Physician - Specialty		\$451,563	(\$129)	\$5,233	\$0	\$0	\$371	\$457,038
Allied Health		\$45,572	\$25	\$2,414	\$0	\$0	\$0	\$48,010
Facility Inpatient		\$700,953	\$3,886	\$894	\$0	\$0	\$0	\$705,733
Facility Outpatient		\$593,213	\$1,653	\$1,550	\$0	\$0	\$5,423	\$601,839
Medical Pharmacy		\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total		\$1,994,701	\$5,349	\$11,797	\$0	\$0	\$6,166	\$2,018,013

Distribution of Discounts*

Healthcare Cost Category Detail	Metrics	Contracted Discount	Special Negotiated Discount	Shared Savings Discount	Prompt Payment Discount	Customer Specific Discount	Naviguard Discount	Other Discount	Total Discounts
Physician - Primary Care		\$283,918	\$801	\$9,590	\$0	\$0	\$0	\$811	\$295,121
Physician - OB/GYN		\$113,801	\$186	\$0	\$0	\$0	\$0	\$0	\$113,987
Physician - Spedalty		\$1,043,434	\$39,443	\$16,048	\$0	\$0	\$0	\$22,827	\$1,121,753
Allied Health		\$336,501	\$3,596	\$4,278	\$0	\$0	\$0	\$10,113	\$354,488
Facility Inpatient		\$1,873,209	\$184,811	\$35,499	\$0	\$0	\$0	\$0	\$2,093,519
Facility Outpatient		\$7,023,326	\$193,856	\$41,115	\$0	\$0	\$0	\$20,340	\$7,278,636
Medical Pharmacy		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total		\$10,674,190	\$422,693	\$106,531	\$0	\$0	\$0	\$54,091	\$11,257,504

*Report only available at the Expanded Level

Distribution of Ineligible Charges



Healthcare Cost Category Detail	Metrics	Duplicate Bill	R&C Reduction	Benefit Limits	Pre-existing Conditions	Abuse and Fraud	Medical Claim Review	Other Ineligible Charges	Total Ineligible Charges
Physician - Primary Care		\$21,875.47	\$1,891.62	\$3,904.51	\$0.00	\$2,969.50	\$235.00	\$18,380.06	\$49,256.16
Physician - OB/GYN		\$52,385.14	\$2,331.40	\$5,566.00	\$0.00	\$0.00	\$0.00	\$9,657.32	\$69,939.86
Physician - Specialty		\$57,079.55	\$11,481.18	\$1,639.34	\$0.00	\$1,239.00	\$1,147.96	\$69,955.96	\$142,542.99
Allied Health		\$7,243.65	\$6,145.02	\$8,143.50	\$0.00	\$0.00	\$2,719.48	\$14,771.02	\$39,022.67
Facility Inpatient		\$77,414.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$122,977.87	\$200,392.09
Facility Outpatient		\$74,785.67	\$5,233.05	\$1,621.60	\$0.00	\$450.00	\$1,230.16	\$91,277.54	\$174,598.02
Medical Pharmacy		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,063.47	\$1,063.47
Total		\$290,783.70	\$27,082.27	\$20,874.95	\$0.00	\$4,658.50	\$5,332.60	\$328,083.24	\$676,815.26

*Report only available at the Expanded Level

Distribution of Other Savings

Metrics	Healthcare Cost Category Detail	Physician Primary Care	Physician - OB/GYN	Physician - Specialty	Allied Health	Facility Inpatient	Facility Outpatient	Medical Pharmacy	Total
Commercial COB Reductions		\$663	\$3,527	\$12,448	\$1,372	\$3,877	\$8,827	\$112	\$30,827
Commercial COB Savings		\$1,254	\$3,263	\$2,056	\$265	\$2,290	\$8,412	\$0	\$17,541
Commercial COB Total		\$1,917	\$6,790	\$14,505	\$1,637	\$6,167	\$17,239	\$112	\$48,367
Medicare COB Reductions		\$421	\$0	\$0	\$155	\$1,050	\$1,166	\$0	\$2,792
Medicare COB Savings		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Medicare COB Total		\$421	\$0	\$0	\$155	\$1,050	\$1,166	\$0	\$2,792
Provider Sanction		\$0	\$0	\$2,013	\$0	\$0	\$0	\$0	\$2,013
All Other Savings		\$0	(\$31)	(\$26)	(\$0)	(\$553)	(\$8,140)	\$0	(\$8,750)
Total Savings		\$2,338	\$6,759	\$16,492	\$1,792	\$6,665	\$10,265	\$112	\$44,422

*Report only available at the Expanded Level



Health Care Cost Management Summary

HCCMS excluding Managed Pharmacy



Metrics	Physician Primary Care	Physician - OB/GYN	Physician - Specialty	Allied Health	Facility Inpatient	Facility Outpatient	Medical Pharmacy	Total
Submitted Charges	\$460,902	\$253,332	\$1,280,446	\$248,791	\$1,870,877	\$1,686,926	\$1,290	\$5,802,563
Savings Due to Ineligible Charges	\$49,256	\$69,940	\$142,543	\$39,023	\$200,392	\$174,598	\$1,063	\$676,815
Eligible Charges	\$411,646	\$183,392	\$1,137,903	\$209,768	\$1,670,485	\$1,512,328	\$226	\$5,125,748
Savings Due to Discounts	\$131,198	\$74,196	\$457,038	\$48,010	\$705,733	\$601,839	\$0	\$2,018,013
Covered Amount	\$280,447	\$109,196	\$680,866	\$161,758	\$964,752	\$910,490	\$226	\$3,107,735
Savings due to Deductibles	\$14,591	\$4,819	\$33,332	\$25,152	\$4,823	\$57,338	\$0	\$140,054
Savings due to Coinsurance	\$6,109	\$7,528	\$41,612	\$20,774	\$44,444	\$80,000	\$0	\$200,468
Savings due to Copays	\$37,697	\$4,949	\$22,910	\$14,340	\$0	\$13,193	\$0	\$93,088
Gross Payable	\$222,051	\$91,900	\$583,011	\$101,492	\$915,485	\$759,960	\$226	\$2,674,124
Other Savings	\$2,338	\$6,759	\$16,492	\$1,792	\$6,665	\$10,265	\$112	\$44,422
Net Paid	\$219,713	\$85,142	\$566,519	\$99,699	\$908,820	\$749,694	\$115	\$2,629,702
Net Paid PMPM	\$15.25	\$5.91	\$39.31	\$6.92	\$63.06	\$52.02	\$0.01	\$182.48
Net Paid as a % of Grand Total	8.4%	3.2%	21.5%	3.8%	34.6%	28.5%	0.0%	100.0%

HCCMS Managed Pharmacy Costs

Metrics	Submitted Charges	Savings Due to Discounts	Savings due to Deductibles	Savings Due to Coinsurance	Savings due to Copays	Net Paid	Net Paid PMPM	Net Paid as a % of Grand Total
	\$1,194,088	\$279,064	\$0	\$0	\$196,200	\$718,824	\$50.88	100.0%

HCCMS Managed Pharmacy Costs
Cost Sharing and Summary Statistics

Metrics	
Total Deductible as a % of Total Covered Amount	3.5%
Total Coinsurance as a % of Total Covered Amount	5.0%



Total Copay as a % of Total Covered Amount	7.2%
Total Gross Payable as a % of Total Covered Amount	84.3%
Total Other Savings as a % of Total Covered Amount	1.1%
Total Net Paid as a % of Total Covered Amount	83.2%
Submitted Charges	\$6,996,652
Savings Due to Ineligible Charges	\$676,815
Eligible Charges	\$6,319,837
Savings Due to Discounts	\$2,297,078
Covered Amount	\$4,022,759
Savings Due to Deductibles	\$140,054
Savings Due to Coinsurance	\$200,468
Savings Due to Copays	\$289,288
Gross Payable	\$3,392,948
Other Savings	\$44,422
Net Paid	\$3,348,526
Net Paid PMPM	\$233.36

Inpatient Event Ad Hoc

Metrics	Covered Amount	Plan Net Paid	HRA Net Paid	Total Net Paid	Plan Net Paid per Day	HRA Net Paid per Day	Total Net Paid per Day
	\$2,420,768.35	\$2,061,435.48	\$28,238.60	\$2,089,674.08	\$1,848.82	\$25.33	\$1,874.15

Inpatient Utilization and Costs by Admission Type



Detail

Admission Type Group	Admission Type	Metrics	Number of Admissions	Admissions Per 1000	Number of Days	Days Per 1000	Average Length of Stay	Covered Amount Per Admission	Covered Amount Per Day	Net Paid Per Admission	Net Paid Per Day
Medical / Surgical	Medical		30	12.5	98	40.8	3.3	\$10,112	\$3,096	\$9,689	\$2,966
	Surgical		21	8.7	153	63.7	7.3	\$27,384	\$3,759	\$26,610	\$3,652
	Subtotal		51	21.2	251	104.5	4.9	\$17,224	\$3,500	\$16,657	\$3,384
Maternity	Maternity - Cesarean Section		7	2.9	22	9.2	3.1	\$3,569	\$1,136	\$2,985	\$950
	Maternity - Vaginal Delivery		10	4.2	23	9.6	2.3	\$3,460	\$1,504	\$2,916	\$1,268
	Maternity - Other		2	0.8	4	1.7	2.0	\$6,360	\$3,180	\$5,772	\$2,886
	Subtotal		19	7.9	49	20.4	2.6	\$3,805	\$1,476	\$3,242	\$1,257
Newborn	Newborn - Well		13	5.4	32	13.3	2.5	\$1,278	\$519	\$914	\$371
	Newborn - Other		3	1.2	9	3.7	3.0	\$2,361	\$787	\$2,018	\$673
	Subtotal		16	6.7	41	17.1	2.6	\$1,481	\$578	\$1,121	\$437
MH/SA	MH/SA - Mental Health		4	1.7	19	7.9	4.8	\$6,735	\$1,418	\$5,584	\$1,176
	MH/SA - Substance Abuse		2	0.8	24	10.0	12.0	\$10,215	\$851	\$8,223	\$685
	Subtotal		6	2.5	43	17.9	7.2	\$7,895	\$1,102	\$6,464	\$902
Other	Skilled Nursing		1	0.4	8	3.3	8.0	\$768	\$96	\$768	\$96
	Subtotal		1	0.4	8	3.3	8.0	\$768	\$96	\$768	\$96

Detail Total

Metrics	Number of Admissions	Admissions Per 1000	Number of Days	Days Per 1000	Average Length of Stay	Covered Amount Per Admission	Covered Amount Per Day	Net Paid Per Admission	Net Paid Per Day
	80	33.3	360	149.9	4.5	\$12,782	\$2,840	\$12,107	\$2,690

*Report only available at the Expanded Level

Inpatient Utilization by Diagnosis



Diagnosis Chapter	Prior Period Number of Admissions	Current Period Number of Admissions	Prior Period Number of Days	Current Period Number of Days	Prior Period Average Length of Stay	Current Period Average Length of Stay	Prior Period Covered Amount	Current Period Covered Amount	Prior Period Covered Amount per Admission	Current Period Covered Amount per Admission	Prior Period Covered Amount per Day	Current Period Covered Amount per Day
INFECTIOUS & PARASITIC DIS	1	0	6	0	6.0	0	\$12,150	0	\$12,150	0	\$2,025	0
NEOPLASMS	8	9	68	35	8.5	3.9	\$347,886	\$169,091	\$43,486	\$18,788	\$5,116	\$4,831
ENDCR NUTRI METABOLIC IMMUN	3	4	6	9	2.0	2.3	\$6,970	\$10,019	\$2,323	\$2,505	\$1,162	\$1,113
BLOOD & BLOOD FORM ORGANS	0	1	0	2	0	2.0	0	\$12,850	0	\$12,850	0	\$6,425
MENTAL DISORDERS	4	6	155	43	38.8	7.2	\$27,893	\$47,370	\$6,973	\$7,895	\$180	\$1,102
NERVOUS SYS SENSE ORGANS	3	2	11	2	3.7	1.0	\$15,382	\$7,198	\$5,127	\$3,599	\$1,398	\$3,599
CIRCULATORY SYSTEM	8	7	57	86	7.1	12.3	\$165,415	\$403,919	\$20,677	\$57,703	\$2,902	\$4,697
RESPIRATORY SYSTEM	6	3	48	17	8.0	5.7	\$76,403	\$27,528	\$12,734	\$9,176	\$1,592	\$1,619
DIGESTIVE SYSTEM	14	9	79	26	5.6	2.9	\$142,894	\$45,130	\$10,207	\$5,014	\$1,809	\$1,736
GENITOURINARY SYSTEM	5	3	37	11	7.4	3.7	\$131,706	\$16,468	\$26,341	\$5,489	\$3,560	\$1,497
PREGNANCY CHILDBIRTH PUERP	9	19	28	49	3.1	2.6	\$32,936	\$88,917	\$3,660	\$4,680	\$1,176	\$1,815
MUSKULO CNCTV TISSUE	4	1	8	3	2.0	3.0	\$67,773	\$10,376	\$16,943	\$10,376	\$8,472	\$3,459
CONGENITAL ANOMALIES	1	1	1	4	1.0	4.0	\$1,965	\$27,380	\$1,965	\$27,380	\$1,965	\$6,845
PERINATAL PERIOD	3	3	12	9	4.0	3.0	\$10,964	\$7,083	\$3,655	\$2,361	\$914	\$787
INJURY AND POISONING	8	9	49	49	6.1	5.4	\$159,147	\$106,151	\$19,893	\$11,795	\$3,248	\$2,166
OTHER CONDITIONS	4	3	15	15	3.8	5.0	\$29,884	\$43,085	\$7,471	\$14,362	\$1,992	\$2,872
Total	81	80	580	360	7.2	4.5	\$1,229,369	\$1,022,564	\$15,177	\$12,782	\$2,120	\$2,840

*Report only available at the Expanded Level

Medical Dollar Ad Hoc



Metrics	Gross Payable	Plan Net Paid	HRA Net Paid	Total Net Paid	R&C Reduction	Total Savings
	\$258,047.28	\$237,190.26	\$47,463.77	\$284,654.03	\$4,902.55	\$20,857.0

*Report only available at the Expanded Level

Medical Dollar Ad Hoc Discounts*

Metrics	Gross Payable	Plan Net Paid	HRA Net Paid	Total Net Paid	Total Savings	Total Discounts
	\$7,624,584.58	\$7,130,921.03	\$268,305.28	\$7,399,226.31	\$493,663.55	\$11,257,503.98

*Report only available at the Expanded Level

Medical Dollar Ad Hoc Provider*

Metrics	Submitted Charges	Covered Amount	Plan Net Paid	HRA Net Paid	Total Savings
	\$25,229,893.11	\$9,548,775.17	\$7,130,921.03	\$268,305.28	\$493,663.55

*Report only available at the Expanded Level

Medical Utilization Ad Hoc

Metrics	Number of Claimants	Number of Services	Number of Visits	Plan Net Paid	HRA Net Paid	Total Net Paid
	698	3,765	1,159	\$237,190.26	\$47,463.77	\$284,654.03

*Report only available at the Expanded Level

Network Utilization



Metrics	Network Benefit Level	Network Benefits – UHG Network			Non-Network Benefits			Neutral Benefits			Total
	Provider Participation Status Category	UHC Network Provider	Non-UHC Network Provider	Total	UHC Network Provider	Non-UHC Network Provider	Total	UHC Network Provider	Non-UHC Network Provider	Total	
Prior - Eligible Charges		\$5,187,050	\$268,904	\$5,455,954	\$28,309	\$342,786	\$371,096	\$671	\$37,908	\$38,579	\$5,865,629
Prior - Eligible Charges as % of Total		88.4%	4.6%	93.0%	0.5%	5.8%	6.3%	0.0%	0.6%	0.7%	100.0%
Current - Eligible Charges		\$4,755,082	\$27,423	\$4,782,505	\$33,389	\$236,101	\$269,490	\$7,608	\$66,146	\$73,754	\$5,125,748
Current - Eligible Charges as % of Total		92.8%	0.5%	93.3%	0.7%	4.6%	5.3%	0.1%	1.3%	1.4%	100.0%
% Change - Eligible Charges		(8.3%)	(89.8%)	(12.3%)	17.9%	(31.1%)	(27.4%)	1033.8%	74.5%	91.2%	(12.6%)
Prior - Discounts		\$1,950,434	\$0	\$1,950,434	\$0	\$0	\$0	\$0	\$0	\$0	\$1,950,434
Prior - Discounts as % of Total		100.0%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%
Current - Discounts		\$1,994,577	\$0	\$1,994,577	\$0	\$0	\$0	\$124	\$0	\$124	\$1,994,701
Current - Discounts as % of Total		100.0%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%
% Change - Discounts		2.3%	0	2.3%	0	0	0	0	0	0	2.3%
Prior - Discounts as % of Eligible Charges		37.6%	0.0%	35.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	33.3%
Current - Discounts as % of Eligible Charges		41.9%	0.0%	41.7%	0.0%	0.0%	0.0%	1.6%	0.0%	0.2%	38.9%
Prior - Total Net Paid		\$2,444,643	\$138,098	\$2,582,741	\$15,275	\$206,286	\$221,561	\$184	\$28,647	\$28,831	\$2,833,133
Prior - Net Paid as % of Total		86.3%	4.9%	91.2%	0.5%	7.3%	7.8%	0.0%	1.0%	1.0%	100.0%
Current - Total Net Paid		\$2,399,561	\$22,851	\$2,422,412	\$12,654	\$141,240	\$153,894	\$4,307	\$49,090	\$53,397	\$2,629,702
Current - Net Paid as % of Total		91.2%	0.9%	92.1%	0.5%	5.4%	5.9%	0.2%	1.9%	2.0%	100.0%
% Change - Total Net Paid		(1.8%)	(83.5%)	(6.2%)	(17.2%)	(31.5%)	(30.5%)	2240.9%	71.4%	85.2%	(7.2%)
Prior - Employer Cost Sharing		87.5%	95.5%	87.9%	63.7%	73.6%	72.8%	30.4%	76.0%	75.3%	86.3%
Current - Employer Cost Sharing		87.3%	83.3%	87.3%	49.5%	60.4%	59.4%	70.7%	74.2%	73.9%	84.6%

Outpatient Utilization by Diagnosis

[Detail](#)



Diagnosis Chapter	Metrics	Prior Period Number of Claimants	Current Period Number of Claimants	Prior Period Number of Services	Current Period Number of Services	Prior Period Number of Visits	Current Period Number of Visits	Prior Period Covered Amount	Current Period Covered Amount	Prior Period Covered Amount per Service	Current Period Covered Amount per Service
INFECTIOUS & PARASITIC DIS		171	166	478	158	143	\$98,564	\$28,482	\$138	\$60	\$624
NEOPLASMS		111	116	529	132	206	\$96,147	\$195,150	\$182	\$172	\$728
ENDR NUTRI METABOLIC IMMUN		222	260	1,179	1,397	234	244	\$53,047	\$58,859	\$45	\$42
BLOOD & BLOOD FORM ORGANS		18	22	79	146	8	816	\$6,788	\$38,631	\$86	\$265
MENTAL DISORDERS		111	145	531	699	374	443	\$57,668	\$83,469	\$109	\$119
NERVOUS SYS SENSE ORGANS		417	454	1,733	1,415	709	712	\$165,992	\$147,481	\$96	\$104
CIRCULATORY SYSTEM		169	200	1,018	970	276	324	\$127,293	\$138,213	\$125	\$142
RESPIRATORY SYSTEM		672	621	3,310	3,202	978	859	\$214,095	\$142,335	\$65	\$44
DIGESTIVE SYSTEM		165	160	540	652	185	205	\$131,026	\$121,765	\$243	\$187
GENITOURINARY SYSTEM		311	351	1,289	1,613	370	465	\$189,076	\$185,380	\$147	\$115
PREGNANCY CHILDBIRTH PUERP		48	73	292	517	52	65	\$18,930	\$58,362	\$65	\$113

Detail

Metrics	Prior Period Number of Claimants	Current Period Number of Claimants	Prior Period Number of Services	Current Period Number of Services	Prior Period Number of Visits	Current Period Number of Visits	Prior Period Covered Amount	Current Period Covered Amount	Prior Period Covered Amount per Service	Current Period Covered Amount per Service
	171	166	478	158	143	\$98,564	\$28,482	\$138	\$60	\$624

*Report only available at the Expanded Level

Top Hospitals Ranked by Total Net Paid

Top Hospitals



Hospital Name	City	State	Provider Participation Status Category	Number of Inpatient Admissions	Number of Inpatient Days	Inpatient Covered Amount	Inpatient Net Paid	Outpatient Number of Services	Outpatient Covered Amount	Outpatient Net Paid	Net Paid Total
WOMENS HOSPITAL CITY	FALLS CHURCH	Virginia	Participating Provider	1	71	\$258,268	\$258,268	7	\$4,301	\$3,841	\$262,109
HOSPITAL COUNTY	MARIETTA	Georgia	Participating Provider	10	36	\$194,677	\$193,665	76	\$37,205	\$35,767	\$229,432
HOSPITAL	DALLAS	Texas	Participating Provider	1	18	\$58,818	\$58,157	1	\$169	\$69	\$58,226
Subtotal				12	125	\$511,460	\$510,090	84	\$41,675	\$39,777	\$549,767

Top Hospitals

Metrics	Number of Inpatient Admissions	Number of Inpatient Days	Inpatient Covered Amount	Inpatient Net Paid	Outpatient Number of Services	Outpatient Covered Amount	Outpatient Net Paid	Net Paid Total
	64	211	\$391,021	\$338,322	1,227	\$570,281	\$454,279	\$792,601

All Other Hospitals

Metrics	Number of Inpatient Admissions	Number of Inpatient Days	Inpatient Covered Amount	Inpatient Net Paid	Outpatient Number of Services	Outpatient Covered Amount	Outpatient Net Paid	Net Paid Total
	80	360	\$964,627	\$909,269	1,373	\$654,790	\$536,001	\$1,445,270

*Report only available at the Expanded Level

Top Physicians Ranked by Total Net Paid

Top Physicians



Physician Name	State	Provider Participation Status Category	Number of Claimants	Number of Visits	Number of Services	Covered Amount	Net Paid
FIRST A LASTNAME	Ohio	Participating Provider	1	8	169	\$42,876	\$42,631
FIRST B LASTNAME	North Carolina	Participating Provider	1	4	69	\$18,357	\$18,237
FIRST C LASTNAME	Georgia	Participating Provider	1	41	125	\$17,275	\$17,050
Subtotal			3	53	363	\$78,508	\$77,918

Top Physicians

Metrics	Number of Claimants	Number of Visits	Number of Services	Covered Amount	Net Paid
	1,649	5,193	11,752	\$895,226	\$718,094

All Other Physicians

Metrics	Number of Claimants	Number of Visits	Number of Services	Covered Amount	Net Paid
	1,649	5,265	12,259	\$998,453	\$818,768

*Report only available at the Expanded Level

Utilization and Costs by Provider Type

Cost by Provider Type - Details



Place of Service Category	Provider Type Utilization	Metrics	Number of Claimants	Covered Amount	Covered Amount per Claimant	Covered Amount PMPM	Net Paid	Net Paid per Claimant	Net Paid PMPM
Inpatient	Facility		79	\$964,627	\$12,210	\$66.94	\$909,269	\$11,510	\$63.10
	Physician Primary Care		43	\$15,552	\$362	\$1.08	\$10,463	\$243	\$0.73
	Physician OB/GYN		21	\$38,464	\$1,832	\$2.67	\$28,292	\$1,347	\$1.96
	Physician Specialist		54	\$122,240	\$2,264	\$8.48	\$103,505	\$1,917	\$7.18
	Allied Health		9	\$8,930	\$992	\$0.62	\$6,087	\$676	\$0.42
Outpatient	Facility		937	\$933,632	\$996	\$64.79	\$762,127	\$813	\$52.89
	Physician Primary Care		1,300	\$266,048	\$205	\$18.46	\$210,215	\$162	\$14.59
	Physician OB/GYN		260	\$70,962	\$273	\$4.92	\$56,967	\$219	\$3.95
	Physician Specialist		760	\$485,208	\$638	\$33.67	\$409,345	\$539	\$28.41
	Allied Health		371	\$152,827	\$412	\$10.60	\$93,613	\$252	\$6.50
	Miscellaneous		34	\$41,254	\$1,213	\$2.86	\$32,088	\$944	\$2.23
	Pharmacy		5	\$7,990	\$1,598	\$0.55	\$7,731	\$1,546	\$0.54

Cast by Provider Type - Details

Metrics	Number of Claimants	Covered Amount	Covered Amount per Claimant	Covered Amount PMPM	Net Paid	Net Paid per Claimant	Net Paid PMPM
	1,783	\$3,107,735	\$1,743	\$215.65	\$2,629,702	\$1,475	\$182.48

*Report only available at the Expanded Level

Utilization by Age Group

Detail



Medical Age Group	Metrics	Average Member Count	Claimant Count	Covered Amount	Covered Amount PMPM	Covered Amount per Claimant	Net Paid	Net Paid PMPM	Net Paid per Claimant
< 1		25	44	79,606	\$5.52	\$1,809	\$58,295	\$4.05	\$1,325
1 - 9		370	294	279,141	\$19.37	\$949	\$230,849	\$16.02	\$785
10 - 19		446	292	265,647	\$18.43	\$910	\$216,680	\$15.04	\$742
20 - 24		104	59	44,032	\$3.06	\$746	\$36,518	\$2.53	\$619
25 - 34		311	235	495,870	\$34.41	\$2,110	\$416,677	\$28.91	\$1,773
35 - 44		607	453	581,546	\$40.35	\$1,284	\$459,749	\$31.90	\$1,015
45 - 54		389	314	689,134	\$47.82	\$2,195	\$600,475	\$41.67	\$1,912
55 - 64		142	122	599,971	\$41.63	\$4,918	\$541,170	\$37.55	\$4,436
65 +		9	8	72,787	\$5.05	\$9,098	\$69,289	\$4.81	\$8,661

Detail

Metrics	Average Member Count	Claimant Count	Covered Amount	Covered Amount PMPM	Covered Amount per Claimant	Net Paid	Net Paid PMPM	Net Paid per Claimant
	2,402	1,783	3,107,735	\$215.65	\$1,743	\$2,629,702	\$182.48	\$1,475

*Report only available at the Expanded Level

Utilization by Diagnosis

Detail



Diagnosis Chapter	Metrics	Prior Period Number of Claimants	Prior Period Claimants per 1000	Prior Period Net Paid	Prior Period Net Paid % of Total	Prior Net Paid PMPM	Current Period Number of Claimants	Current Period Claimants per 1000	Current Period Net Paid	Current Period Net Paid % of Total	Current Net Paid PMPM
INFECTIOUS & PARASITIC DIS		174	77.3	\$96,220	3.4%	\$7.12	169	70.4	\$26,501	1.0%	\$1.84
NEOPLASMS		111	49.3	\$440,496	15.5%	\$32.61	118	49.1	\$352,263	13.4%	\$24.44
ENDCR NUTRI METABOLIC IMMUN		225	100.0	\$49,341	1.7%	\$3.65	264	109.9	\$61,570	2.3%	\$4.27
BLOOD & BLOOD FORM ORGANS		19	8.4	\$6,873	0.2%	\$0.51	22	9.2	\$50,735	1.9%	\$3.52
MENTAL DISORDERS		112	49.8	\$55,611	2.0%	\$4.12	148	61.6	\$91,506	3.5%	\$6.35
NERVOUS SYS SENSE ORGANS		417	185.3	\$150,011	5.3%	\$11.11	457	190.3	\$128,186	4.9%	\$8.89
CIRCULATORY SYSTEM		171	76.0	\$280,603	9.9%	\$20.78	204	84.9	\$479,747	18.2%	\$33.29
RESPIRATORY SYSTEM		677	300.8	\$256,180	9.0%	\$18.97	627	261.1	\$140,856	5.4%	\$9.77
DIGESTIVE SYSTEM		171	76.0	\$265,921	9.4%	\$19.69	168	69.9	\$142,089	5.4%	\$9.86
GENITOURINARY SYSTEM		312	138.6	\$213,695	7.5%	\$15.82	352	146.6	\$177,593	6.8%	\$12.32
PREGNANCY CHILDBIRTH PUERP		48	21.3	\$59,339	2.1%	\$4.39	74	30.8	\$149,600	5.7%	\$10.38
SKIN & SUBCUTANEOUS TISSUE		179	79.5	\$28,338	1.0%	\$2.10	216	89.9	\$46,393	1.8%	\$3.22
MUSKULO CNCTV TISSUE		333	147.9	\$272,875	9.6%	\$20.20	383	159.5	\$202,001	7.7%	\$14.02
CONGENITAL ANOMALIES		19	8.4	\$21,996	0.8%	\$1.63	25	10.4	\$74,823	2.8%	\$5.19
PERINATAL PERIOD		15	6.7	\$34,704	1.2%	\$2.57	24	10.0	\$35,981	1.4%	\$2.50
INJURY AND POISONING		206	91.5	\$380,730	13.4%	\$28.19	215	89.5	\$268,024	10.2%	\$18.60
OTHER CONDITIONS		662	294.1	\$220,200	7.8%	\$16.30	729	303.5	\$201,835	7.7%	\$14.01

Detail

Metrics	Prior Period Number of Claimants	Prior Period Claimants per 1000	Prior Period Net Paid	Prior Net Paid PMPM	Current Period Number of Claimants	Current Period Claimants per 1000	Current Period Net Paid	Current Net Paid PMPM
	1,596	709.0	\$2,833,133	\$209.77	1,783	742.3	\$2,629,702	\$182.48

Membership



Membership by Market

Market Number	Market Name	Single Subscribers	Subscribers with one Dependent	Subscribers with Two or More Dependents	Total Subscribers	Non-Positively Enrolled Dependents	Positively Enrolled Dependents	Total Members
0002407	PHOENIX, AZ	39	31	46	115	0	176	290
0004422	LA., ORANGE & VENTURA, CA	4	2	3	9	0	11	21
0010460	ATLANTA, GA	7	16	16	40	0	64	102
0012471	CHICAGO, IL	7	3	7	17	0	25	41
0013476	INDIANAPOLIS, IN	6	3	11	20	0	39	59
0017622	MONROLE, LA	3	10	19	32	0	70	102
0020494	BOSTON, MA	11	2	9	22	0	34	56
Total		77	67	111	255	0	419	671

Membership by Month

Membership Year/Month	Single Subscribers	Subscribers plus Spouse	Subscribers plus Child/Children	Subscribers plus Family	Total Subscribers	Non-Positively Enrolled Dependents	Positively Enrolled Dependents	Total Members
2008-01	351	142	73	390	956	0	1,439	2,395
2008-02	351	141	75	398	965	0	1,459	2,424
2008-03	344	139	73	399	955	0	1,458	2,413
2008-04	343	139	68	399	949	0	1,450	2,399
Total	2,065	834	421	2,384	5,704	0	8,707	14,411



Membership Managed Ad Hoc

Market Number	Market Name	Single Subscribers	Subscribers with One Dependent	Subscribers with Two or More Dependents	Total Subscribers	Non-Positively Enrolled Dependents	Positively Enrolled Dependents	Total Members
0004422	SAN FRANCISCO, CA	782	380	314	1,475	0	1,276	2,751
0005440	DENVER, CO	391	205	315	910	0	1,225	2,135
0010457	ROME, GA	1	1	1	3	0	3	5
0011468	SOUTHWEST IDAHO, ID	280	233	408	921	0	1,656	2,577
Total		2,275	1,371	1,831	5,477	0	7,116	12,593

*Report only available at the Expanded Level

Membership With Demographic and Geographic Factors



Gender	Age Group Band	Single Subscribers	Subscribers with One Dependent	Subscribers with Two or More Dependents	Total Subscribers	Positively Enrolled Dependents	Total Members	Percentage of Member Distribution
	< 20	0.0	0.0	0.0	0.0	218.3	218.3	9.1%
	20 - 24	16.0	2.2	0.5	18.7	35.3	54.0	2.2%
	25 - 29	28.2	7.7	18.5	54.3	4.0	58.3	2.4%
	30 - 34	32.7	20.0	46.3	99.0	5.2	104.2	4.3%
	35 - 39	30.3	22.0	84.2	136.5	16.0	152.5	6.3%
	40 - 44	25.3	21.3	88.8	135.5	23.5	159.0	6.6%
	45 - 49	26.5	22.3	65.2	114.0	11.8	125.8	5.2%
	> 50	15.7	25.3	28.3	69.3	9.2	78.5	3.3%
	Total	192.3	159.2	345.0	696.5	541.2	1,237.7	51.5%
	< 20	0.0	0.0	0.0	0.0	227.3	227.3	9.5%
	20 - 24	5.7	0.8	0.0	6.5	43.7	50.2	2.1%
	25 - 29	9.2	1.2	1.0	11.3	37.5	48.8	2.0%
	30 - 34	20.0	6.5	7.0	33.5	66.5	100.0	4.2%
	35 - 39	25.8	10.0	11.5	47.3	88.3	135.7	5.6%
	40 - 44	32.2	6.2	13.8	52.2	107.5	159.7	6.6%
	45 - 49	22.3	9.8	14.0	46.2	64.5	110.7	4.6%
	> 50	11.2	8.0	3.2	22.3	51.7	74.0	3.1%
	Total	151.8	50.0	52.3	254.2	910.0	1,164.2	48.5%
Total		344.2	209.2	397.3	950.7	1,451.2	2,401.8	100.0%

Gender	Metrics	Single Subscribers Average Age	Subscribers with One Dependent Average Age	Subscribers with Two or More Dependents Average Age	Total Subscribers Average Age	Positively Enrolled Dependents Average Age	Total Members Average Age
Male		39	46	41	41	16	30
Female		43	44	42	43	26	30
Total		41	45	41	42	22	30

Metrics	Per Subscriber Geographic Factor	Per Member Geographic Factor	Per Subscriber Demographic Factor	Per Member Demographic Factor
	0.956	0.948	0.000	0.940

