Aetna Better Health of Kentucky

Paige Mankovich, CEO

May 24, 2022
Membership in Kentucky 2022

<table>
<thead>
<tr>
<th>Region</th>
<th>Total</th>
<th>Region</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region 1</td>
<td>13317</td>
<td>Region 2</td>
<td>29328</td>
</tr>
<tr>
<td>Region 3</td>
<td>30861</td>
<td>Region 4</td>
<td>41041</td>
</tr>
<tr>
<td>Region 5</td>
<td>55789</td>
<td>Region 6</td>
<td>26995</td>
</tr>
<tr>
<td>Region 7</td>
<td>16512</td>
<td>Region 8</td>
<td>35162</td>
</tr>
</tbody>
</table>

| Total Membership | 248889 |
| Female < 21     | 68269  |
| Female >= 21    | 65593  |
| Male < 21       | 71226  |
| Male >= 21      | 43801  |
Quality Outcomes
### NCQA Health Plan Rating

3.5 out of 5

<table>
<thead>
<tr>
<th>Composite</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Experience</td>
<td>⭐⭐⭐⭐⭐</td>
</tr>
<tr>
<td>Prevention</td>
<td>⭐⭐⭐⭐⭐</td>
</tr>
<tr>
<td>Treatment</td>
<td>⭐⭐⭐⭐⭐</td>
</tr>
<tr>
<td>Measures</td>
<td>Stars</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-------</td>
</tr>
<tr>
<td>Getting Care Easily</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Getting Care Quickly</td>
<td>★★★★★</td>
</tr>
<tr>
<td>BMI Percentile Assessment</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Asthma Control</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Blood Pressure Control</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Controlling High Blood Pressure</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Alcohol or drug abuse or dependence treatment engaged</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Continued follow-up after ADHD diagnosis</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Avoiding opioids at high dosage</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Avoiding continued opioid use</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Steroid after hospitalization for acute COPD</td>
<td>★★★★★</td>
</tr>
<tr>
<td>Bronchodilator after hospitalization for acute COPD</td>
<td>★★★★★</td>
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Quality Performance
Value-Based Payment Arrangements

# of Provider Groups = 15

% of Membership Attributed to Value Based Provider = 45%

VBS Group Performance 2016-2020

- Measures Above Plan Average: 88%
- Measures Below Plan Average: 12%
Quality Performance - Value-Based Payment Arrangements

**Contracting**

- Large PCP groups
- Substance use facilities
- Behavioral health specialists
- PCMH providers

**Current Priorities**

- Adolescent Well-Care Visits
- Women’s Health
- Diabetes Wellness
- Adult Access to Primary Care
- Childhood Immunizations
- Behavioral Health
- Prenatal Care
- Health Equity
Quality Outcomes
HEDIS Year over Year Trends

- Adolescent Immunizations
- Postpartum Care
- Follow-up After Hospitalization for Mental Illness
- Anti-Depressant Medication Management
- Asthma Medication

- Dental Visits
- Women’s Health Screenings
- Diabetes Eye Exam
- Prenatal Care
- Controlling Blood Pressure
HEDIS Measures and Percent Achievement

- **BMI Screening** = 27.9 percentage point increase
- **Nutrition Counseling** = 10.7 percentage point increase
- **Exercise Counseling** = 10.5 percentage point increase
- **Childhood Immunizations** = 10.9 percentage point increase
HEDIS Measures and Percent Achievement

- Cervical Cancer Screening = 0 percentage point difference
- Diabetes Poor Control* = 1.44 percentage point increase

<table>
<thead>
<tr>
<th>Year</th>
<th>% Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEDIS 2018 (MY 2017)</td>
<td></td>
</tr>
<tr>
<td>HEDIS 2019 (MY 2018)</td>
<td></td>
</tr>
<tr>
<td>HEDIS 2020 (MY 2019)</td>
<td></td>
</tr>
<tr>
<td>HEDIS 2021 (MY 2020)</td>
<td></td>
</tr>
</tbody>
</table>
COVID-19 Vaccination Rates

**TOTAL MEDICAID**
- Unvaccinated: 72518, 33%
- Vaccinated: 149,334, 67%

**SKY ONLY**
- Unvaccinated: 7059, 30%
- Vaccinated: 16,570, 70%

**AGE BREAKDOWN**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Unvaccinated</th>
<th>Vaccinated</th>
<th>Boosted</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGES 5 TO 15</td>
<td>1321, &lt;2%</td>
<td>14,924, 19%</td>
<td>6,525, 81%</td>
</tr>
<tr>
<td>AGES 16+</td>
<td>15,129, 11%</td>
<td>57,594, 41%</td>
<td>84,079, 59%</td>
</tr>
</tbody>
</table>

*Data through 03/01/2022*
COVID-19 Vaccination Incentives and Regional Breakdown

> 58k
Total member gift cards distributed

51k
Cards to 16+

7k
Cards to 5-15

> 5M in member incentives

>1M in Provider incentives

Regional Breakdown

Vaccination Rate Q1 2022
ABHKY Overall Rate

*Data through 03/01/2022
Value-Added Benefits and Services – General Health

**Digital Diabetes Solution** - Access for our members’ living with diabetes to education and self-management tools that can reduce or minimize the progression of diabetes including on demand glucose monitoring.

**Health Runs Deep** - Diabetes prevention courses that helps members improve nutrition, lose weight and increase physical activity. The class meets once a month as a group with individual follow-up calls by a CHW. Rewards are offered throughout the program.

**Maternity Matters** - Program for pregnant members and new mothers to reduce pre-mature births, mortality and encourage care by providing free transportation to appointments, cribs, car seats, financial incentives for attending prenatal and postpartum appointments.

**High Risk Pregnancy Monitoring** - This program is to support the health and well-being of high-risk pregnant members and their babies by providing at-home monitoring options such as a blood pressure cuff.

**Aetna Better Care™** - Encourage members to obtain important preventive services, while emphasizing personal responsibility and ownership of healthy living for services such as eye exams, mental health provider visits and HRA completion.

**Asthma Home Care** - Members with an asthma diagnosis can receive one set of hypoallergenic bedding and up to $150 towards one carpet cleaning annually.

**Eyeglasses & Fittings** - One free pair of eyeglasses every 24 months, including fittings. This value-added service will be provided to reduce vision distortion headaches, increase eye comfort, and improve quality of life.

**Hearing Benefits** - Adult members will be eligible for an annual exam and one hearing aid per year with unlimited visits for hearing aid fittings.

**Home Delivered Meals** - Nutritious, medically appropriate meals delivered to members post-discharge from a hospital stay or living with a chronic condition. Also includes nutritional counseling with a Registered Dietitian.

**Momentum** - Access to unique services and supplies tailored to address medical and social need with funds to use on items such as groceries, utilities, dental, gym, and gas purchases.
Value-Added Benefits and Services – Social Needs

**Job Readiness & Education**

**GED Certification & Job Skills Training** - Access to a job skills training platform and the opportunity to discover new career paths, earn credentials and certifications, and highlight those skills to local employers actively looking for talent.

**Getting on T.R.A.C.K.** - (Transition Ready Assistance & Core Knowledge) Health literacy program that provides budgeting and basic life skills for children that transition out of care, taught in partnership with community organizations.

**Enhanced Transportation** - Free transportation for activities such as job interviews and training, grocery shopping, and accessing community services not otherwise covered.

**Back to School Assistance Program** - Aetna’s Community Outreach through school-based family resource coordinators offer backpacks filled with school supplies.

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**SUD, Justice, Homeless**

**Start Strong** - Start Strong is a 90-day Jail Substance Use Diversion Program that provides members who are being released from incarceration with additional resources and support, as they transition back to their lives and communities through 1:1 care management assignment.

**Keep Kids Safe Opioid Lockbox Program** - This harm reduction intervention provides members with a lockbox to secure their medications.

**Alternatives to Opioids** - Gift cards to use towards alternative pain management services: acupuncture, massage therapy, dry-needling, and yoga.

**Simple Necessities Vending Machines** - Access for homeless population to free transportation passes and personal hygiene items.

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**SKY Specific**

**Birthday in a Box** - Each child receives a “birthday in a box” that includes party supplies, balloons, games, and a cupcake delivered by the foster care manager.

**Calming Comfort Collection** - Members with high adverse childhood experiences (ACEs) score or an anxiety diagnosis can receive supplies to help calm the impact of trauma. Items include a sound machine, aroma therapy, light therapy products, and weighted pillows.

**Connections for Life** - Eligible members receive a free cell phone and wireless plan, laptop, education & training around technology literacy.

**Deaf Mentorship Program** - SKY members in out-of-home care who are deaf or hard of hearing will be screened for unidentified language access needs by an experienced Speech Pathologist and offered 1:1 support for themselves and those in their home environment.

**Duffle Bag Program** - Personalized duffle bags filled with personal hygiene items, supplies and a blanket to SKY care members whose placements have changed from one home to another.
Innovations: CPESN
Community Pharmacy Enhanced Services
Network Collaboration

Program

• Integrates the Aetna pharmacy, medical management and care management teams with our medical and pharmacy providers to address enrollees’ pharmacy, medical and social healthcare needs.

• Focuses on identifying and meeting our enrollees’ pharmacy and health needs by bringing resources to enrollees in their community.

• Utilizes local community pharmacists to engage enrollees and create individual pharmacy care plans that define interventions based on a comprehensive assessment of enrollee medication use and health needs.

Program Goals

• Encourage collaboration between care managers, community pharmacists, plan pharmacists and plan medical directors to engage providers and positively impact enrollee outcomes.

• Improve health and medication use: decrease polypharmacy and care gaps, increase compliance, and improve safety.

• Decrease costs and waste; improve use of care (emergency department, primary care physician)

• Deliver resources to enrollees and providers in a coordinated and simple (easy to understand and act upon) manner while leveraging local community pharmacist-provider relationships to impact change and improve access to services.
### Member Success Story

**Background:**
33-year-old male engaged in CPESN Pharmacy Program with significant physical and mental health diagnoses. Specifically: depression, anxiety, and opioid use.

**Intervention:**
Member was supported by the pharmacist and Community Health Worker in the CPESN program. This support was invaluable, as the member was on their recovery journey, their mother passed away.

**Outcomes:**
Member discontinued use of opioids and have been successful in not relapsing in over a year. He has a job and is taking college courses at a local community college.
Innovations: PYX
SOCIAL DETERMINANTS OF HEALTH: PYX

- Mobile and on demand live support tool to combat social isolation and loneliness
- Supporting members impacted by severe weather in Western KY, pregnant women, transition-age youth, high risk
- Connecting members with resources for SDOH needs, guiding them to appropriate care, and connecting them to health plan benefits

Hi! I’m Amy. How can I help?

- Direct connection to health plan resources, care team
- Identify and resolve SDOH needs
- Companionship

- 90% of events impacting health outcomes happen outside of the traditional care setting
- 92% of calls uncover an SDOH need
- 58% of users show a reduced loneliness score
- 67% have improvements in depression (PHQ-9)
- 20 new members/week engaged
  - 64% completed loneliness screening
  - 36% scored lonely or very lonely
Innovations: SKY
What is SKY?

Aetna Better Health of Kentucky (Aetna) was selected to manage the state’s new Supporting Kentucky Youth program, also known as SKY.

This means that children and youth enrolled in SKY receive their Medicaid coverage through Aetna.

In addition to covering Medicaid benefits, SKY provides a high touch approach to care management. This will help families navigate the system and make it easier to get resources they need.
Our Purpose:

• Incorporate youth voice and choice
• Improve long-term health outcomes
• Achieve safety and permanency for children
• Reduce Psychotropic Polypharmacy among System Involved Youth
SKY Multi-Modal Interventions

- Cross System Collaboration with DCBS, DJJ, DMS, Provider Networks
- Trauma Informed, System of Care Principles Application
- Sharing of Population and Individual Level Data and Analytics, Drug Utilization Reviews,
- Investment to Increase Access to Evidence Based Psychosocial Interventions
- High Touch Care Management - Case Rounds, Care Planning
- Caregiver and Youth Directed Education in Lay Terms - “Medication 101”
- Prescriber Education: Informed Consent, Deprescribing
- Clinical Pharmacy Reviews and Provider Outreach
MEMBERSHIP 1/1/2021 – 3/31/2022

Q1 2022 - % OF SKY ENROLLEES BY TYPE OF ASSISTANCE

DJJ/Dually Committed 0.53%
Former Foster 18.69%
Adoption 42.19%
Out of Home Care 38.59%

2021-2022 Quarterly Comparison:
Percentage of Total SKY Members By Assistance Type

Out of Home Care
Adoption
Former Foster
DJJ/Dually Committee
SKY Program Goals

- Improve Weight Assessment, Counseling for Nutrition and Physical Activity, and Referrals for Overweight and Obesity Management in Children and Adolescent.
- Ensure Well Child and Adolescent Visits, including annual vision, dental, and physical exam completion.
- Return children from long-term out-of-home placements to their families, specifically those children placed out of state and or residential care.
- Reduce high level psychotropic polypharmacy and increase appropriate metabolic monitoring for those prescribed certain medications.
- Ensure that each child in supportive or intensive levels of care management has a care plan incorporating at least two community-based resources and supports.
- Ensure that older foster youth (age 15–26 years) have documented assessment of their transition to adult milestones.
- Build a family meeting culture through utilization of Collaborative Family Engagement and Family Finding framework that promotes healing.
- Incorporate member and family voice, choice, and preference into program development and quality improvement initiatives.
### Progress on HEDIS WCC / PIP Improvement Measures YTD 2021

**Indicator 1a**: % high risk SKY enrollees aged 3-11 years with BMI percentile documentation

- Q1 2021: 93%
- Q2 2021: 69%
- Q3 2021: 14%
- Q4 2021: 14%

**Indicator 1b**: % high risk SKY enrollees aged 12-17 years with BMI percentile documentation

- Q1 2021: 85%
- Q2 2021: 71%
- Q3 2021: 12%
- Q4 2021: 13%

**Indicator 2a**: % total SKY enrollees aged 3-11 years with documentation of counseling for nutrition

- Q1 2021: 76%
- Q2 2021: 27%
- Q3 2021: 14%
- Q4 2021: 19%

**Indicator 2b**: % total SKY enrollees aged 12-17 years with documentation of counseling for nutrition

- Q1 2021: 69%
- Q2 2021: 24%
- Q3 2021: 18%
- Q4 2021: 20%

**Indicator 3a**: % total SKY enrollees aged 3-11 years with documentation of counseling for physical activity

- Q1 2021: 77%
- Q2 2021: 29%
- Q3 2021: 18%
- Q4 2021: 27%

**Indicator 3b**: % total SKY enrollees aged 12-17 years with documentation of counseling for physical activity

- Q1 2021: 31%
- Q2 2021: 25%
- Q3 2021: 17%
- Q4 2021: 25%

**Progress on HEDIS WCC / PIP Improvement Measures YTD 2021**

- Q1 2021: 85%
- Q2 2021: 71%
- Q3 2021: 14%
- Q4 2021: 12%

**Target**

- Q1 2021: 85%
- Q2 2021: 71%
- Q3 2021: 14%
- Q4 2021: 12%
Reduce overprescribing of psychotropics medications and increase appropriate metabolic monitoring for those prescribed certain medications.

173 Individualized Psychotropic Polypharmacy Member Case Rounds and Consults completed in 1/1/2021 – 3/31/2022

At 90 days post-rounds/consult, 28% of members have generally successful outcomes

At 180 days post-rounds/consults, 44% of member have generally successful outcomes

23% reduction in pharmacy costs among those with an Individualized Psychotropic Polypharmacy Case Round or Consult Completed in 2021

% of SKY Members who Meet Criteria for HLPP, PP, and All Categories of Utilization

- % of All SKY Members who meet any criteria on Psychotropic Utilization Report
  - 10.81%
  - 10.84%
  - 10.75%
  - 9.03%
  - 9.05%
  - 8.98%

- % of All SKY Members who meet criteria for Psychotropic Polypharmacy (PP)
  - 2.69%
  - 2.71%
  - 2.78%

- % of All SKY Members who meet criteria for High Level Psychotropic Polypharmacy (HLPP)

Metabolic Monitoring for Children and Adolescents on Antipsychotics

Population: Members who meet utilization criteria for Psychotropic Polypharmacy

YOY 2021 - 2022

- % of All SKY Members who meet any criteria on Psychotropic Utilization Report
- % of All SKY Members who meet criteria for Psychotropic Polypharmacy (PP)
- % of All SKY Members who meet criteria for High Level Psychotropic Polypharmacy (HLPP)

Q1 Q2 Q3

- Jan-22 Feb-22 Mar-22

2021 2022

- 22.00% 32.20% 43.56%
- 5.20% 2.71% 2.78%
Return children from long-term out-of-home placements to their families, specifically those children placed out of state and or residential care.

Difficulty to Place Status 1/1/2021 – 4/14/2022

- Open - Difficult to Place: 51
- Open - Referred OOS: 12
- Open - Placement Found Out of State: 6
- Closed - Transition to Waiver: 2
- Closed - Bio/Fictive Kin: 3
- Closed - No Longer in DCBS Custody: 1

Out of State Placement Status

- Open - continues OOS placement: 39%
- Discharged - Other: 22%
- Discharged - Adoption: 6%
- Discharged - DCBS foster care: 6%
- Discharged - Bio/relative/fictive kin: 11%
- Discharged - PCP - PCC foster care: 11%

Out of State Referral Status

- Open - Referred OOS: 21%
- Closed - Diverted OOS (Stayed Instate): 61%
- Closed - Admitted OOS: 18%
SKY will continuously provide accessible & in-depth education, insight, and opportunity to expand perspective and practice in the system of care.

6,869 Total stakeholders attending SKY Events 1/1/2021-3/31/2022

255 Number of Events Q1 2022

SKY Training Survey Responses to Question 2: This Training Was Overall Helpful (Range = 0-5) Q1 2022

# of Stakeholder Engagement Events Q1 2022

- Stakeholder Collaboration: 122
- Required Training: 45
- Outreach/Engagement: 35
- Training Collaborative: 10
- Community Forum: 10
- Training from Training: 7
- Focus Group: 7
- Prevention and Wellness: 6
- Family Finding Coaching: 5
- HEERO Workshops: 3
- Member Advisory Council: 2
- Family Finding Bootcamps: 2
- Governance Council: 1
Innovations: Health Outreach
Health Outreach

**Diabetes Prevention Efforts**

- Group education & one on one support from a CHW
  - 100% of members completing 3 live sessions experienced weight loss
  - Average weight loss of 5.3%

**Telehealth Diabetes Self Management Education in underserved adults**

- Enrolling 50 members for efficacy study
- Adolescent study to follow

**Remote Patient Monitoring**

- At home glucose testing with trend monitoring
  - 61.8% reduction in ED costs
  - 54.1% reduction in IP costs
Providers
Primary Care Providers by Region

Region 1
- 2024

Region 2
- 4437

Region 3
- 27790

Region 4
- 6111

Region 5
- 16461

Region 6
- 6952

Region 7
- 2862

Region 8
- 7283
Substance Use Treatment Providers by Region

Region 1
2024

Region 2
4437

Region 3
27790

Region 4
6111

Region 5
16461

Region 6
6952

Region 7
2862

Region 8
7283
PH and BH Specialty Providers by Region

Region 1
2024

Region 2
4437

Region 3
27790

Region 4
6111

Region 5
16461

Region 6
6952

Region 7
2862

Region 8
7283

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## Appointment Availability

**Summary based on March 2022 Data**  
*Excludes Dentists, Pharmacy and Vision*

<table>
<thead>
<tr>
<th>Region Group</th>
<th>Total Members per Region</th>
<th>Percentage of Members With Access (Minutes)</th>
<th>Percentage of Members With Access (Miles)</th>
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</thead>
<tbody>
<tr>
<td>Region 1</td>
<td>12,969</td>
<td>94%</td>
<td>95%</td>
</tr>
<tr>
<td>Region 2</td>
<td>28,738</td>
<td>97%</td>
<td>98%</td>
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<tr>
<td>Region 3</td>
<td>29,769</td>
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<td>100%</td>
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<td>Region 4</td>
<td>39,740</td>
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<td>Region 5</td>
<td>53,750</td>
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<td>Region 6</td>
<td>26,533</td>
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<td>Region 7</td>
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<tr>
<td>Region 8</td>
<td>34,391</td>
<td>100%</td>
<td>100%</td>
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<tr>
<td><strong>Overall</strong></td>
<td><strong>241,987</strong></td>
<td><strong>98.8%</strong></td>
<td><strong>99.2%</strong></td>
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### Appointment Availability

**Physical Health**

<table>
<thead>
<tr>
<th>PCP &amp; Pediatricians Appointment Availability</th>
<th>2020</th>
<th>2021</th>
<th>Comparison</th>
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<tbody>
<tr>
<td>Same Day Emergency Availability</td>
<td>93.8%</td>
<td>94.3%</td>
<td>.05%</td>
</tr>
<tr>
<td>48 Hour Urgent Care Availability</td>
<td>95.5%</td>
<td>91.0%</td>
<td>-4.5%</td>
</tr>
<tr>
<td>Sick Care Availability within 30 Days</td>
<td>NA</td>
<td>93.6%</td>
<td>NA</td>
</tr>
<tr>
<td>Routine Care Availability within 30 Days</td>
<td>97.7%</td>
<td>97.3%</td>
<td>-0.4%</td>
</tr>
<tr>
<td>24/7 After Hours Availability</td>
<td>79.4%</td>
<td>92.2%</td>
<td>12.8%</td>
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![Map of # of Providers Per County](image)

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Proprietary
## Appointment Availability Behavioral Health

### BH Non-Medication Providers

<table>
<thead>
<tr>
<th></th>
<th>2020</th>
<th>2021</th>
<th>Comparison</th>
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<tbody>
<tr>
<td>Non-Life-Threatening Emergency within 6 Hours</td>
<td>67.6%</td>
<td>85.2%</td>
<td>17.6%</td>
</tr>
<tr>
<td>Urgent Appt within 48 Hours</td>
<td>81.7%</td>
<td>91.7%</td>
<td>10.0%</td>
</tr>
<tr>
<td>Routine Initial Visit within 10 Business Days</td>
<td>91.4%</td>
<td>86.1%</td>
<td>-5.3%</td>
</tr>
<tr>
<td>Routine Follow Up Care within 30 Business Days</td>
<td>95.7%</td>
<td>94.5%</td>
<td>-1.2%</td>
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<tr>
<td>Inpt Follow Up Care within 7 Days</td>
<td>NA</td>
<td>91.7%</td>
<td>NA</td>
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<tr>
<td>Inpt Care Outreach for Missed Appt within 24 Hours</td>
<td>NA</td>
<td>86.9%</td>
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### BH Medication Providers

<table>
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<th>2020</th>
<th>2021</th>
<th>Comparison</th>
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<tr>
<td>Non-Life-Threatening Emergency within 6 Hours</td>
<td>58.8%</td>
<td>88.0%</td>
<td>29.2%</td>
</tr>
<tr>
<td>Urgent Appt within 48 Hours</td>
<td>70.6%</td>
<td>90.8%</td>
<td>20.2%</td>
</tr>
<tr>
<td>Routine Initial Visit within 10 Business Days</td>
<td>76.5%</td>
<td>86.0%</td>
<td>9.5%</td>
</tr>
<tr>
<td>Routine Follow Up Care within 30 Business Days</td>
<td>94.1%</td>
<td>88.5%</td>
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<tr>
<td>Inpt Follow Up Care within 7 Days</td>
<td>NA</td>
<td>86.6%</td>
<td>NA</td>
</tr>
<tr>
<td>Inpt Care Outreach for Missed Appt within 24 Hours</td>
<td>NA</td>
<td>84.8%</td>
<td>NA</td>
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Audit Requests & Denials
Audit Request by Month
2019-2021

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</tr>
</thead>
<tbody>
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<td>Physical Health</td>
<td>0</td>
<td>246</td>
<td>451</td>
<td>379</td>
<td>294</td>
<td>156</td>
<td>0</td>
<td>265</td>
<td>581</td>
<td>5</td>
<td>529</td>
<td>110</td>
<td>0</td>
<td>750</td>
<td>153</td>
<td>0</td>
<td>612</td>
<td>754</td>
<td>0</td>
<td>526</td>
<td>270</td>
<td>0</td>
<td>168</td>
<td>467</td>
<td>0</td>
<td>459</td>
<td>277</td>
<td>0</td>
<td>105</td>
<td>278</td>
<td>582</td>
<td>547</td>
<td>210</td>
<td>460</td>
<td>282</td>
<td>258</td>
<td></td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>7</td>
<td>7</td>
<td>7</td>
<td>9</td>
<td>3</td>
<td>2</td>
<td>5</td>
<td>6</td>
<td>8</td>
<td>9</td>
<td>1</td>
<td>3</td>
<td>8</td>
<td>6</td>
<td>4</td>
<td>12</td>
<td>6</td>
<td>9</td>
<td>2</td>
<td>4</td>
<td>10</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td>2</td>
<td>3</td>
<td>12</td>
<td>3</td>
<td>6</td>
<td>6</td>
<td>2</td>
<td>5</td>
<td>4</td>
<td>9</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Claim Trends

<table>
<thead>
<tr>
<th>YEAR</th>
<th>Total</th>
<th>Denied</th>
<th>Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>679,910</td>
<td>592,412</td>
<td>706,988</td>
</tr>
<tr>
<td>2020</td>
<td>3,891,358</td>
<td>3,648,475</td>
<td>4,669,908</td>
</tr>
<tr>
<td>2021</td>
<td>4,571,268</td>
<td>4,240,887</td>
<td>5,376,896</td>
</tr>
</tbody>
</table>

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## Top 10 Claim Denial Rates

<table>
<thead>
<tr>
<th>Denial Reason</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exact Duplicate Claim/Service</td>
<td>10,173</td>
<td>9,843</td>
<td>9,964</td>
</tr>
<tr>
<td>No Enrollment Exists for Claim Start Date</td>
<td>9,223</td>
<td>7,783</td>
<td>6,519</td>
</tr>
<tr>
<td>Missing/Invalid/Incomplete Billing Provider/Supplier Primary Identifier</td>
<td>8,626</td>
<td>8,954</td>
<td>9,549</td>
</tr>
<tr>
<td>Missing/Incomplete/Invalid Prior Insurance Carrier(s) EOB</td>
<td>7,001</td>
<td>6,754</td>
<td>8,751</td>
</tr>
<tr>
<td>Non-Covered Charge</td>
<td>4,141</td>
<td>3,471</td>
<td>4,064</td>
</tr>
<tr>
<td>Claim/Service Lacks Information or has Submission/Billing Errors</td>
<td>3,637</td>
<td>4,892</td>
<td>6,433</td>
</tr>
<tr>
<td>An Attachment/Other Documentation is Required to Adjudicate this Claim/Service</td>
<td>3,345</td>
<td>3,553</td>
<td>-</td>
</tr>
<tr>
<td>Missing/Incomplete/Invalid Rendering Provider Taxonomy</td>
<td>3,326</td>
<td>-</td>
<td>3,372</td>
</tr>
<tr>
<td>Service Denied b/c Payment Already Made for Same/Similar Procedure Within Set Time Frame</td>
<td>3,128</td>
<td>3,144</td>
<td>-</td>
</tr>
<tr>
<td>This Provider Type/Provider Specialty May Not Bill This Service</td>
<td>3,052</td>
<td>3,862</td>
<td>-</td>
</tr>
<tr>
<td>Invalid Combination of HCPCS Modifiers</td>
<td>-</td>
<td>3,332</td>
<td>-</td>
</tr>
<tr>
<td>This Provider Type/Provider Specialty May Not bill This Service</td>
<td>-</td>
<td>-</td>
<td>4,341</td>
</tr>
<tr>
<td>The Benefit for this Service is Included in the Payment/Allowance for Another Service/Procedure that has been Adjudicated</td>
<td>-</td>
<td>-</td>
<td>3,356</td>
</tr>
<tr>
<td>Missing/Incomplete/Invalid Treatment Authorization Code</td>
<td>-</td>
<td>-</td>
<td>3,275</td>
</tr>
</tbody>
</table>
Prior Authorization Trends
2019 - 2021

2019
Total PA: 45,976
Approved: 39,760
Denied: 6,216

2020
Total PA: 42,676
Approved: 26,696
Denied: 3,709

2021
Total PA: 36,362
Approved: 22,987
Denied: 6,314
Prior Authorization Denials
2019 - 2020

<table>
<thead>
<tr>
<th>Denial Reason</th>
<th>2019</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Necessity</td>
<td>5725</td>
<td>6178</td>
</tr>
<tr>
<td>Lack of Information</td>
<td>22</td>
<td>31</td>
</tr>
<tr>
<td>Lack of PA</td>
<td>419</td>
<td>84</td>
</tr>
<tr>
<td>Denied Benefits</td>
<td>11</td>
<td>8</td>
</tr>
<tr>
<td>Out of Network</td>
<td>34</td>
<td>12</td>
</tr>
<tr>
<td>Administrative Denial</td>
<td>8</td>
<td>8</td>
</tr>
</tbody>
</table>

**Medical Necessity**
- Reasonable and required to identify, diagnose, treat, correct, cure, palliate, or prevent a disease, illness, injury, disability, or other medical condition, including pregnancy
- Appropriate in terms of the service, amount, scope, and duration based on generally accepted standards of good medical practice
- Provided in the most appropriate location, with regard to generally accepted standards of good medical practice, where the service may, for practical purposes, be safely and effectively provided
- Needed, if used in reference to an emergency medical service, to exist using the prudent layperson standard
- Provided in accordance with early and periodic screening, diagnosis, and treatment (EPSDT) requirements established in 42 U.S.C. 1396d(r) and 42 C.F.R. Part 441 Subpart B for individuals under twenty-one (21) years of age
- Provided in accordance with 42 C.F.R. 440.230; and
- Must meet national standards, if applicable.

**Lack of Information**
- Asked for additional information and provider did not submit by end of request

**Lack of Prior Authorization**
- Given if the provider did not get a PA in the retro-review timeframe, which has been extended to 7 days

**Denied Benefits**
- Not a covered benefit
- Medical Directors will cite the Member Handbook

**Out of Network**
- Medical Directors deny an out of network provider when an in network provider can provide the service

**Administrative Denial**
- Provider has submitted a request more than 7 calendar days from start date of request and no claims have been submitted.
Emergency Department Utilization
Diagnoses & Trends
Physical Health ED Utilization

- COVID-19 top diagnosis for 2021
- Pandemic decreased overall ED utilization in 2020 with increase in 2021, but
- ED utilization remains lower than pre-pandemic reporting period
- Shift toward more visits with higher acuity suggesting more appropriate ED utilization
- Continued outreach to impact high ED utilizers through Care Management

<table>
<thead>
<tr>
<th>Year</th>
<th>Member Visits</th>
<th>Visits per 1,000 members</th>
<th>Total ED Spend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>187,517</td>
<td>763</td>
<td>$83,964,714</td>
</tr>
<tr>
<td>2020</td>
<td>138,737</td>
<td>640</td>
<td>$68,582,066</td>
</tr>
<tr>
<td>2021</td>
<td>157,826</td>
<td>627</td>
<td>$77,161,864</td>
</tr>
</tbody>
</table>

Top 10 Diagnosis
- Acute Upper Respiratory Infection
- Other Chest Pain
- Urinary Tract Infection
- Chest Pain Unspecified
- Unspecified Abdominal Pain
- Nausea and Vomiting
- Viral Infection
- COVID-19
- Acute Pharyngitis
- Gastroenteritis and Colitis
Diagnoses & Trends
Behavioral Health ED Utilization

- Anxiety Disorder top diagnosis for 2019, 2020 and 2021 for BH ED visits.
- Increase in ED visits due to Suicidal Ideations year over year since 2019.
- Continued outreach to impact high ED utilizers through Care Management

<table>
<thead>
<tr>
<th>Year</th>
<th>Member Visits</th>
<th>Visits per 1,000 members</th>
<th>Total ED Spend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>11,359</td>
<td>40</td>
<td>$12,973,953</td>
</tr>
<tr>
<td>2020</td>
<td>10,214</td>
<td>45</td>
<td>$14,612,943</td>
</tr>
<tr>
<td>2021</td>
<td>12,025</td>
<td>48</td>
<td>$19,868,204</td>
</tr>
</tbody>
</table>

**Top 10 Diagnosis**

- Anxiety Disorder
- Suicidal Ideations
- Alcohol Abuse/Dependence
- Major Depressive Disorder
- Altered Mental Status
- Opiate Overdose
- Schizophrenia
- Unspecified Psychosis
- Panic Disorder
- Other Substance Abuse
## Diagnoses & Trends
### Behavioral Health Inpatient

<table>
<thead>
<tr>
<th>Year</th>
<th>Member Admits</th>
<th>Average Length of Stay</th>
<th>Admits per 1,000</th>
<th>Total BH IP Spend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>11,359</td>
<td>7.85</td>
<td>40</td>
<td>$22,468,612</td>
</tr>
<tr>
<td>2020</td>
<td>10,214</td>
<td>9.13</td>
<td>46</td>
<td>$27,780,290</td>
</tr>
<tr>
<td>2021</td>
<td>12,025</td>
<td>12.96</td>
<td>48</td>
<td>$65,284,568</td>
</tr>
</tbody>
</table>

### Top 10 Diagnosis
- Major Depressive Disorder
- Disruptive Mood Dysregulation Disorder
- Unspecified Psychosis
- Schizophrenia
- Alcohol Abuse/Dependence
- Anxiety Disorder
- Opiate Use Disorder
- Mood Disorder
- Post Traumatic Stress Disorder
- Schizoaffective Disorder

- Significant year over year increase in ALOS for members under 18 years old.
- Increase in ALOS coincides with removal of prior authorization for BH services.
- Effects of pandemic on availability of lower levels of care also contributes to longer lengths of stay, particularly in 2021.
### Diagnoses & Trends
#### Physical Health Inpatient

<table>
<thead>
<tr>
<th>Year</th>
<th>Member Admits</th>
<th>Admits per 1,000</th>
<th>Total PH Hosp Spend</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>22,249</td>
<td>102</td>
<td>$172,104,466</td>
</tr>
<tr>
<td>2020</td>
<td>21,496</td>
<td>99</td>
<td>$172,764,444</td>
</tr>
<tr>
<td>2021</td>
<td>22,671</td>
<td>92</td>
<td>$186,253,704</td>
</tr>
</tbody>
</table>

- Overall admissions slight decrease during pandemic, but severity and costs increased
- COVID-19 and respiratory diseases increased drivers of admissions in 2020 and 2021
- Heart Disease, Respiratory Illnesses and Diabetes remain as inpatient drivers

### Top 10 Diagnosis

- Infant Delivery
- Sepsis
- COVID-19
- Maternal Care
- Acute Kidney Failure
- Acute Respiratory Failure
- Pneumonia
- Morbid Obesity
- Heart Disease
- Type I Diabetes
## Readmissions Within 30 Days

### Behavioral Health

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of BH Readmissions</th>
<th>BH Readmission Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>782</td>
<td>15.9%</td>
</tr>
<tr>
<td>2020</td>
<td>837</td>
<td>18.1%</td>
</tr>
<tr>
<td>2021</td>
<td>923</td>
<td>16.5%</td>
</tr>
</tbody>
</table>

### Physical Health

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of PH Readmissions</th>
<th>PH Readmission Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>1488</td>
<td>9.3%</td>
</tr>
<tr>
<td>2020</td>
<td>1244</td>
<td>9.0%</td>
</tr>
<tr>
<td>2021</td>
<td>1231</td>
<td>9.1%</td>
</tr>
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</table>
Expenditure Drivers
## Highest Expenditures by Diagnosis
**Cost 2019 - 2021**

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>CY 2019</th>
<th>CY 2020</th>
<th>CY 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>F15.20 OTHER STIMULANT DEPENDENCE UNCOMPPLICATED</td>
<td>$9,421,970</td>
<td>$11,257,269</td>
<td>$7,967,285</td>
</tr>
<tr>
<td>A41.9 SEPSIS UNSPECIFIED ORGANISM</td>
<td>$7,157,801</td>
<td>$6,466,275</td>
<td>$8,801,182</td>
</tr>
<tr>
<td>F90.2 ATTN-DEFICIT HYPERACTIVITY D/O COMBINED TYPE</td>
<td>$9,469,564</td>
<td>$12,885,971</td>
<td>$10,444,813</td>
</tr>
<tr>
<td>Z38.01 SINGLE LIVEBORN INFANT DELIVERED BY CESAREAN</td>
<td>$8,311,060</td>
<td>$6,744,611</td>
<td>$11,919,438</td>
</tr>
<tr>
<td>F33.2 MAJ DEPRESS D/O RECURRENT SEV W/O PSYCH FEATURES</td>
<td>$11,197,684</td>
<td>$12,487,752</td>
<td>$12,814,886</td>
</tr>
<tr>
<td>Z38.00 SINGLE LIVEBORN INFANT DELIVERED VAGINALLY</td>
<td>$5,529,174</td>
<td>$6,739,908</td>
<td>$12,914,995</td>
</tr>
<tr>
<td>F43.10 POST-TRAUMATIC STRESS DISORDER UNSPECIFIED</td>
<td>$7,511,049</td>
<td>$7,003,923</td>
<td>$24,659,983</td>
</tr>
<tr>
<td>U07.1 COVID - 19</td>
<td>$15,449,932</td>
<td>$23,139,839</td>
<td>$26,487,791</td>
</tr>
<tr>
<td>F34.81 DISRUPTIVE MOOD DYSREGULATON DISORDER</td>
<td>$5,766,914</td>
<td>$8,536,521</td>
<td>$7,784,145</td>
</tr>
<tr>
<td>F11.20 OPIOID DEPENDENCE UNCOMPPLICATED</td>
<td>$8,536,521</td>
<td>$7,784,145</td>
<td>$5,000,000</td>
</tr>
<tr>
<td>N17.9 ACUTE KIDNEY FAILURE UNSPECIFIED</td>
<td>$5,000,000</td>
<td>$7,784,145</td>
<td>$10,000,000</td>
</tr>
<tr>
<td>Z51.11 ENCOUNTER FOR ANTINEOPLASTIC CHEMOTHERAPY</td>
<td>$10,000,000</td>
<td>$15,000,000</td>
<td>$20,000,000</td>
</tr>
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