



WSHIP Yearly Operating Report 2023

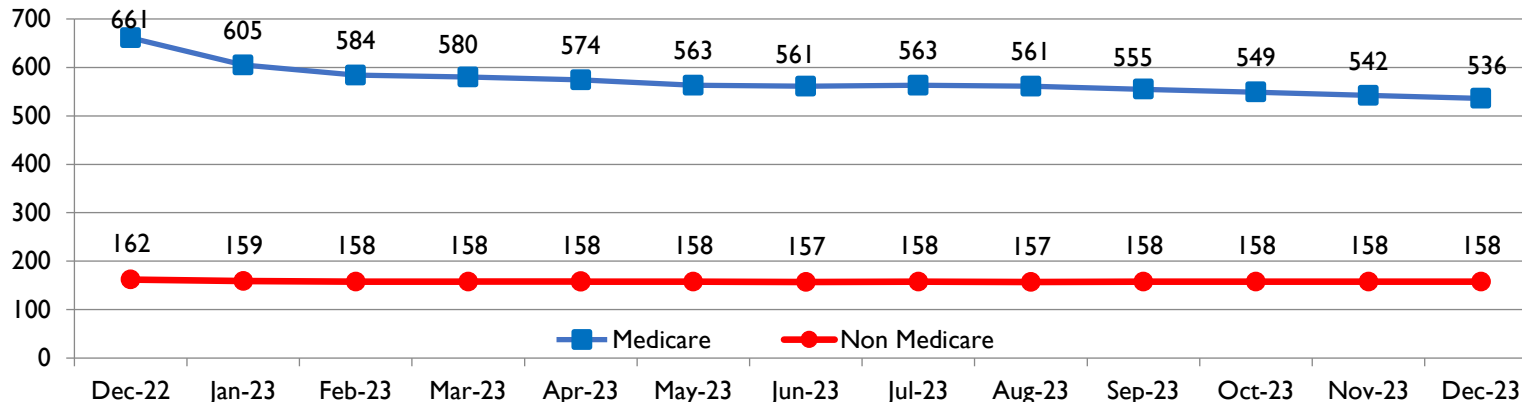
An Annual Overview Summary of the Administrator's Operations and Pool Activities

Administered by Value Health Benefit Administrators





Enrollment Summary

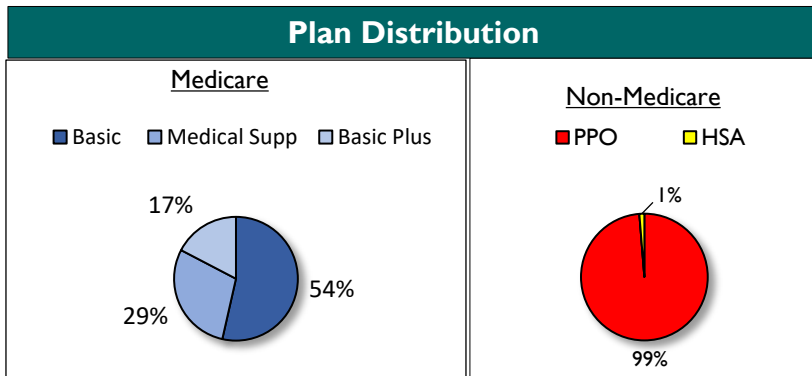


Applications Received

Medicare: 0/20

Non-Medicare: 0 (Closed)

Individuals	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Total Enrollment	882	855	823	764	742	738	732	721	718	713	707	700	694
3rd Party Sponsorship	515 (58%)	499 (58%)	471 (57%)	426 (56%)	413 (56%)	407 (55%)	404 (55%)	397 (55%)	395 (55%)	391 (55%)	387 (55%)	381 (54%)	381 (55%)
Non-Medicare	134 (79%)	131 (79%)	129 (80%)	127 (80%)	126 (80%)	126 (80%)	126 (80%)	127 (80%)	125 (80%)	126 (80%)	126 (80%)	126 (80%)	126 (80%)
EHIP	120	119	118	118	115	115	115	115	115	115	115	115	115
Other (Mostly AKF)	14	12	11	9	11	11	11	12	10	11	11	11	11
Medicare (Mostly AKF)	381 (53%)	368 (53%)	342 (52%)	299 (48%)	287 (49%)	281 (48%)	278 (48%)	270 (48%)	270 (48%)	265 (48%)	261 (48%)	255 (47%)	261 (48%)



Medicare Member Profile

Average Age: 61
 Gender: Female 41% Male 59%
 Top Diagnosis: Kidney & Urinary Disease

Non-Medicare Member Profile

Average Age: 46
 Gender: Female 30% Male 70%
 Top Diagnosis: HIV / AIDS

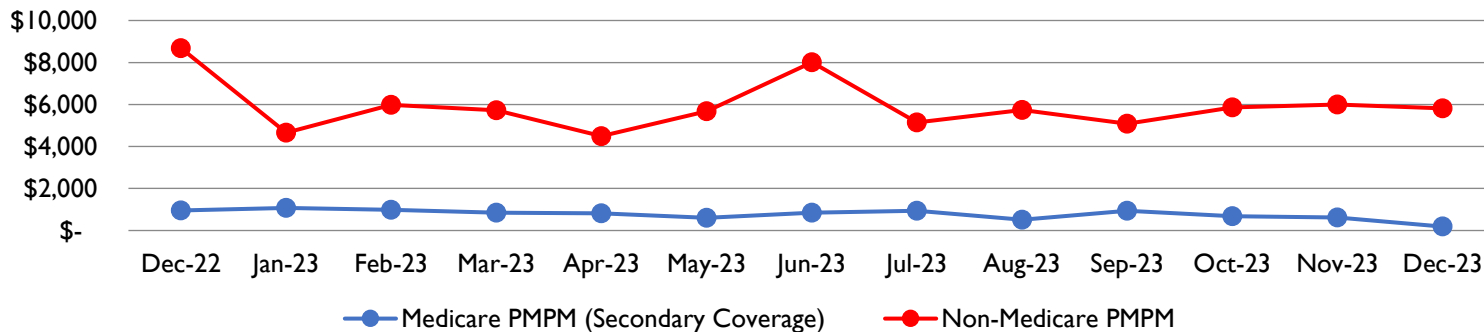
Claims Paid Summary



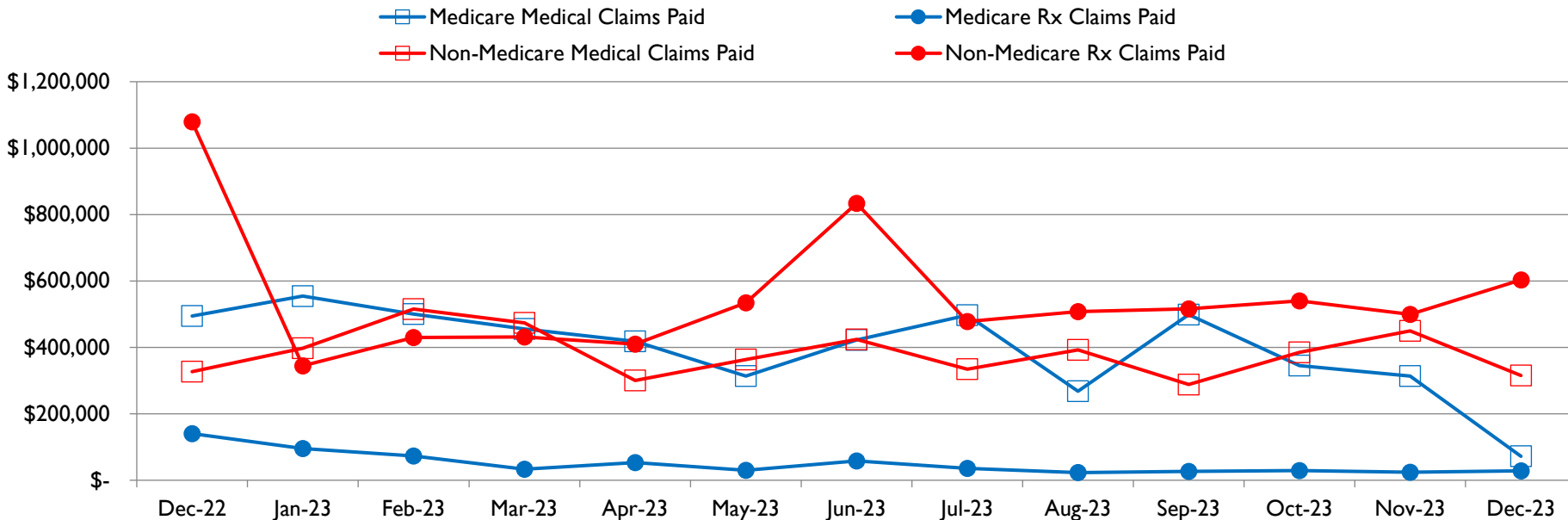
High Dollar Claims (over \$100,000)

1 High Dollar Claim
Total Paid: \$108,793.96

Claims Paid Per Member Per Month



Medical & Pharmacy Claims Paid

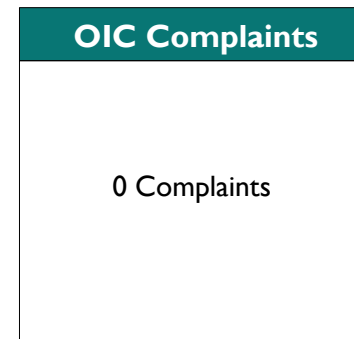
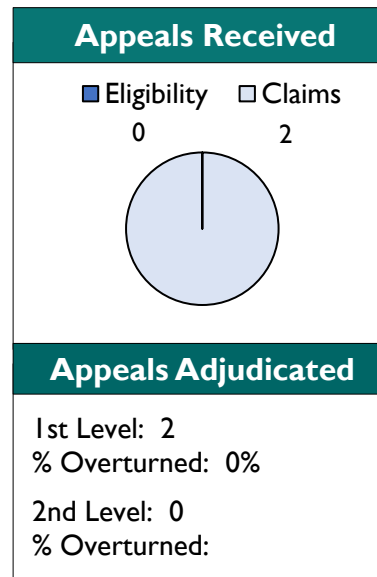
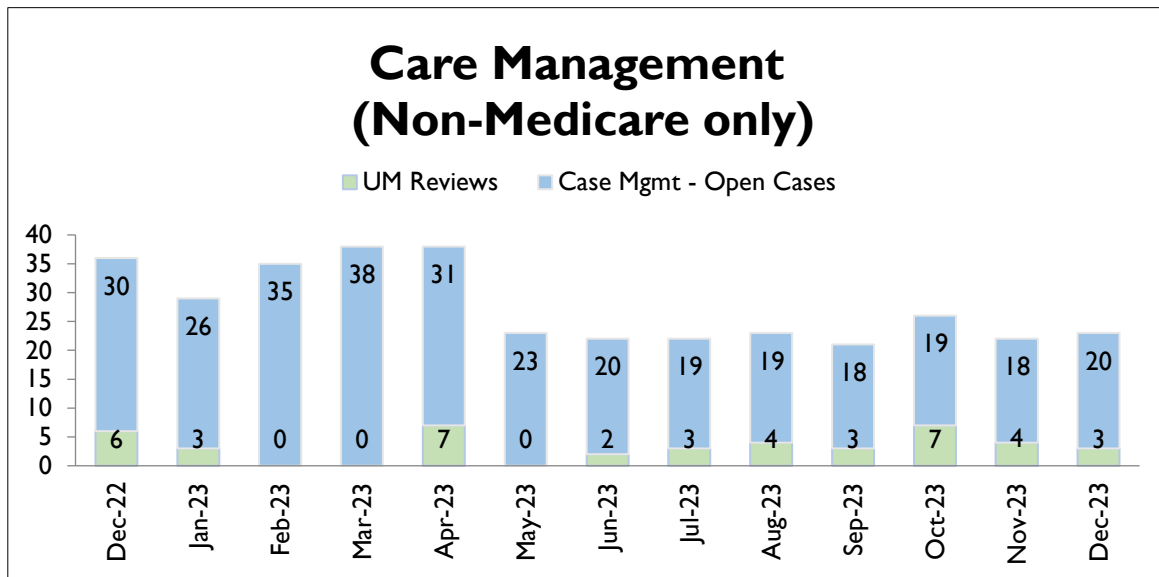


Other Activity

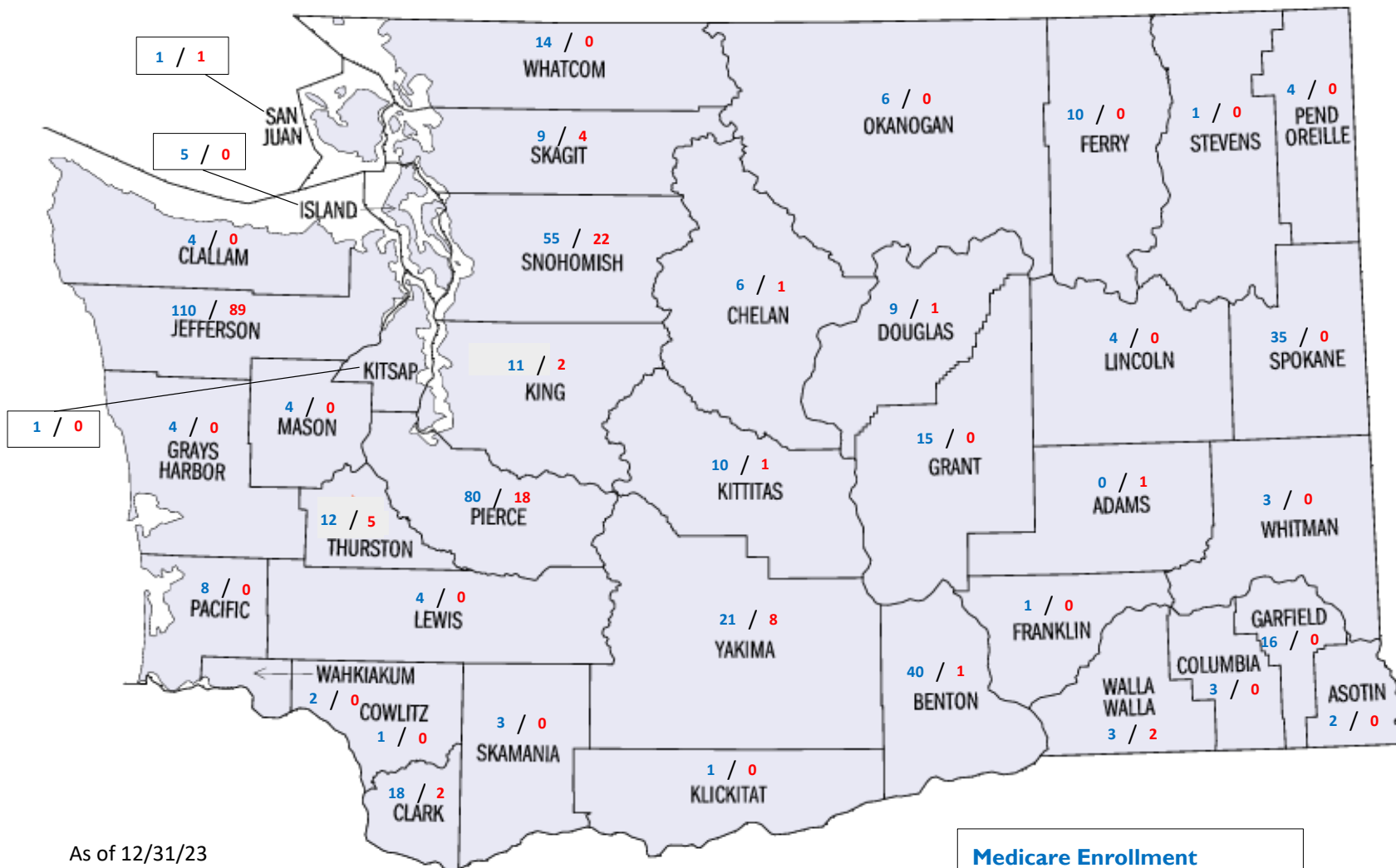


Service Levels

Metric	Dec-22	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Customer Service:													
Average Calls per Day	40	34	29	25	26	23	25	25	20	23	23	25	39
Speed of Answer (Standard 60 Sec)	191	195	112	98	115	115	115	163	48	46	43	53	59
Top Call Reason	Status	Status	Status	Status	Status	Status	Status	Status	Status	Status	Status	Status	Status
Claims:													
Claims Processing Accuracy (Standard 97%)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
30-Day Clean Claims Processing (Standard 100%)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%



Enrollment by County



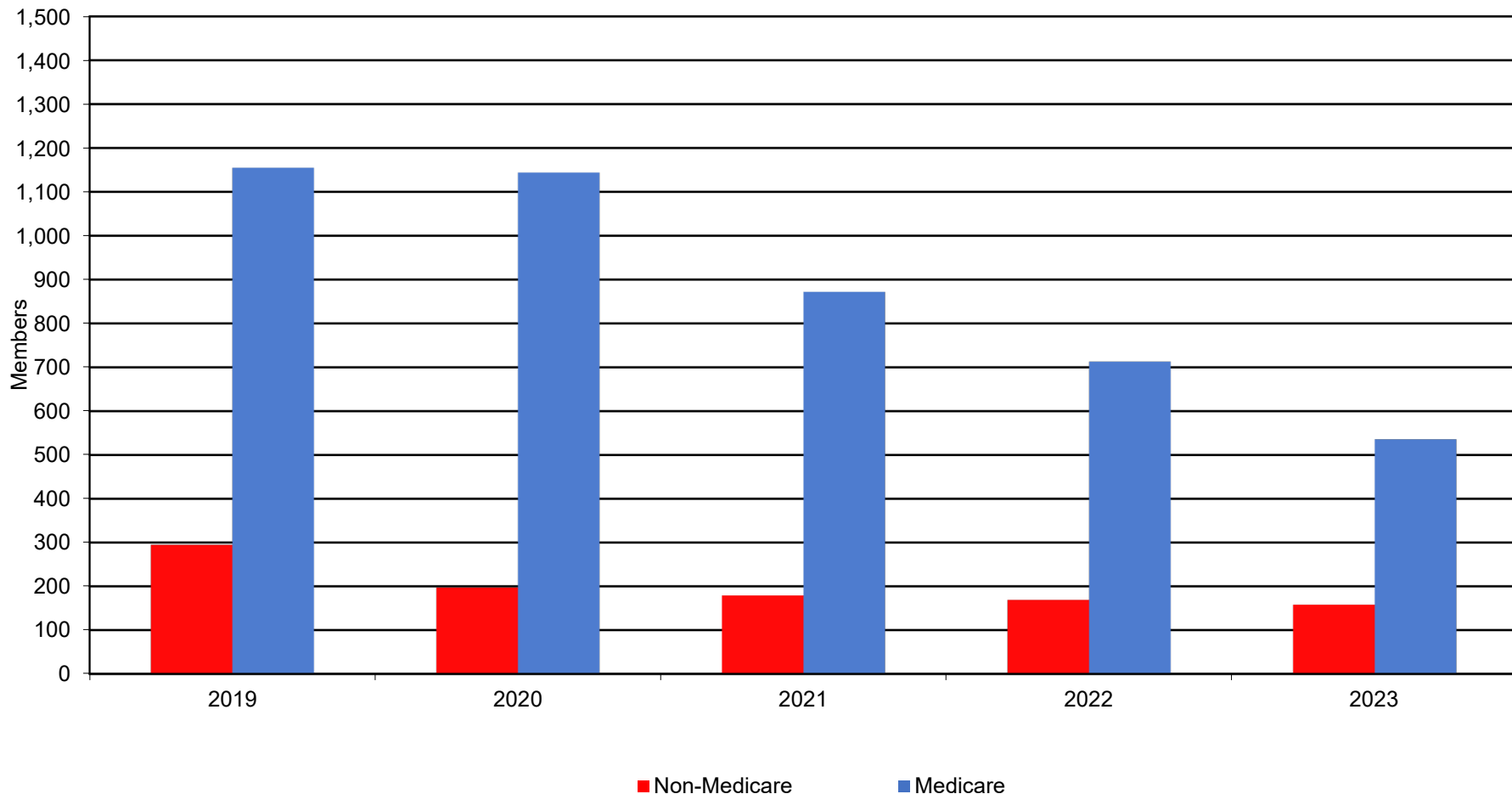
As of 12/31/23

Medicare Enrollment
Non-Medicare Enrollment

Combined Total Enrollment



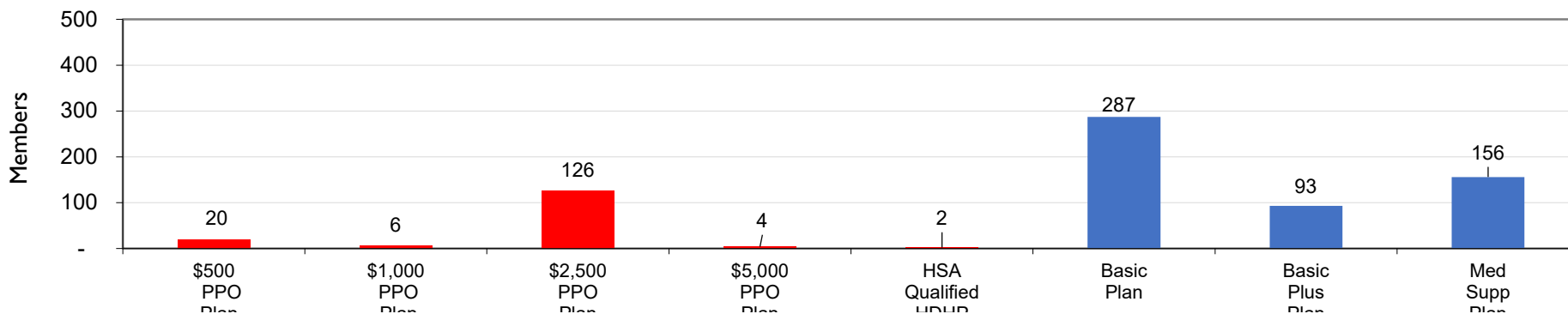
This chart has been modified to reflect a rolling 5-year trend of total enrollment within WSHIP at year end. Medicare enrollment has gradually increased from year to year. Non-Medicare enrollment has gradually decreased. In 2023 Medicare enrollment decreased by 24.9%, while Non-Medicare enrollment decreased by 6.51%



Plan and Age Distribution



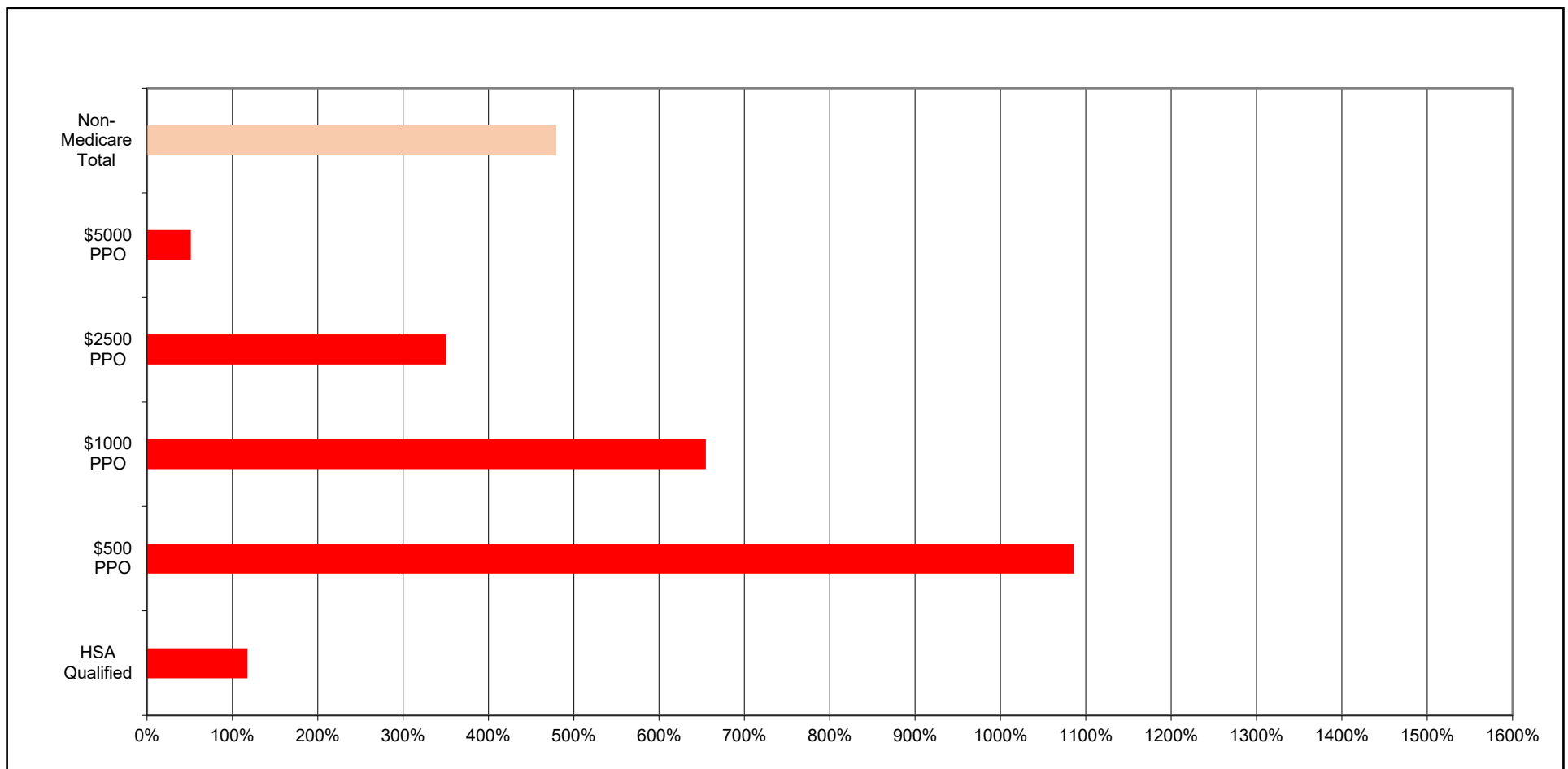
PPO Plan					HSA PPO Plan		Basic Plan	Basic Plus	Med Supp	
Age	\$500	\$1,000	\$2,500	\$5,000	Age	\$3,000	Age			
0-18	2	0	0	0	0-18	0	0-18	0	0	0
19-29	6	1	0	0	19-29	0	19-29	1	0	1
30-34	0	0	2	0	30-34	0	30-34	3	0	4
35-39	3	0	5	0	35-39	0	35-39	1	0	7
40-44	2	3	21	1	40-44	0	40-44	12	0	5
45-49	1	1	27	0	45-49	1	45-49	19	1	11
50-54	2	0	26	1	50-54	0	50-54	28	2	15
55-59	2	1	21	0	55-59	0	55-59	42	4	20
60-64	1	0	12	2	60-64	1	60-64	60	12	36
65-69	1	0	8	0	65-69	0	65-69	45	16	22
70-74	0	0	2	0	70-74	0	70-74	33	22	20
75-79	0	0	2	0	75-79	0	75-79	23	20	7
80-84	0	0	0	0	80-84	0	80-84	15	8	4
85+	0	0	0	0	85+	0	85+	5	8	4
	20	6	126	4		2		287	93	156
PPO Plan Enrollment = 156					HSA Plan Enrollment = 2					
Non-Medicare Enrollment = 158							Medicare Enrollment = 536			
Total Enrolment = 694										



Non-Medicare Loss Ratio



This chart illustrates the loss ratio for the calendar year for WSHIP Non-Medicare plans. Loss ratio is the proportionate relationship of total paid claims divided by total premiums.



Non-Medicare vs. Medicare Claim Costs

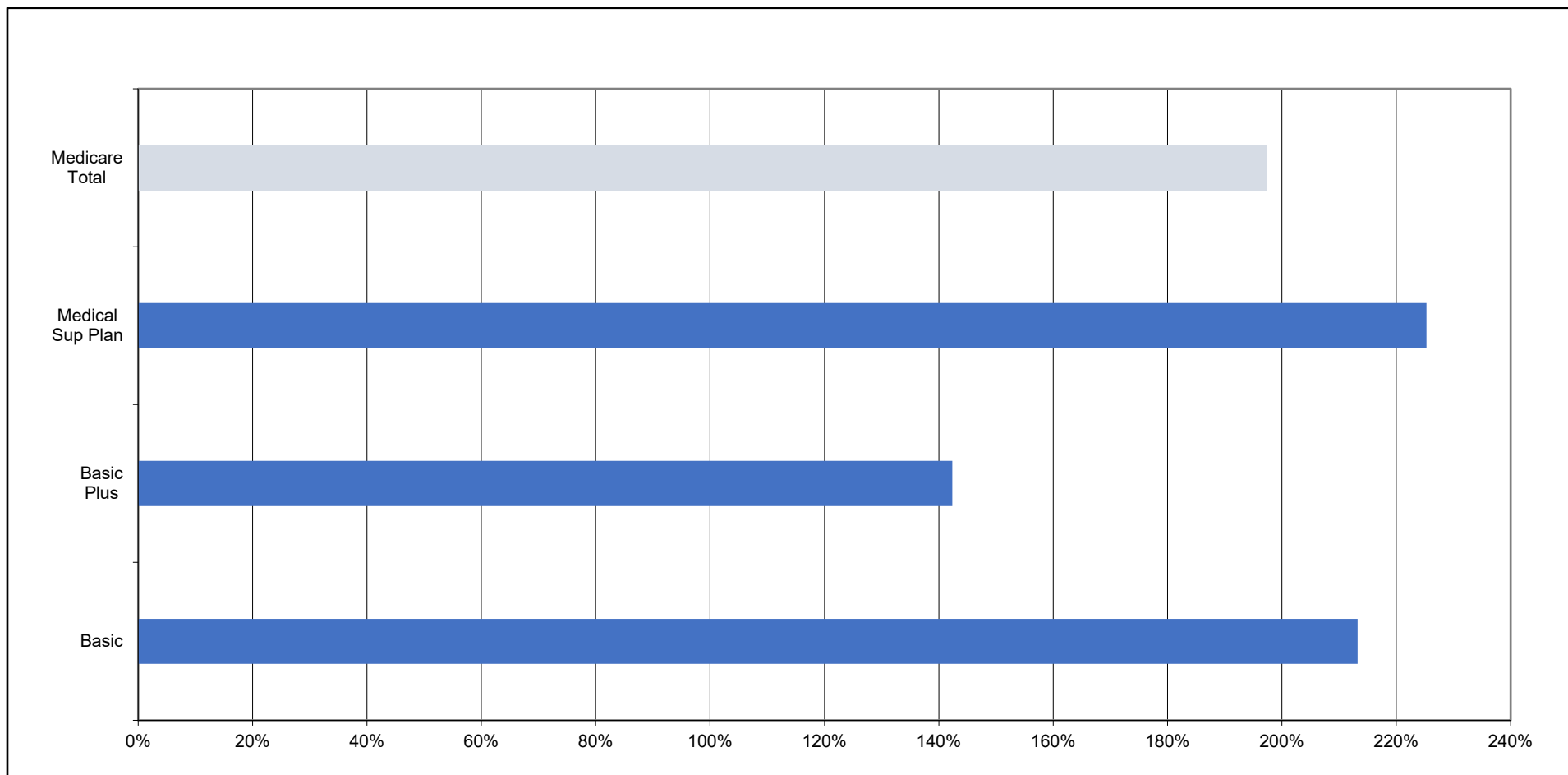


Non-Medicare vs. Medicare Claim Costs - 2023		
	Non-Medicare	Medicare
Medical Claims	\$4.64 million	\$4.66 million
Pharmacy Claims	\$6.13 million	\$ 0.51 million
Total Claims	\$10.77 Million	\$5.17 Million
Claims Costs Per Member Per Month (PMPM)	\$5,813	\$813

Medicare Loss Ratio



This chart illustrates the loss ratio for the calendar year for WSHIP Medicare plans. Loss ratio is the proportionate relationship of total paid claims divided by total premiums.





Cost Sharing

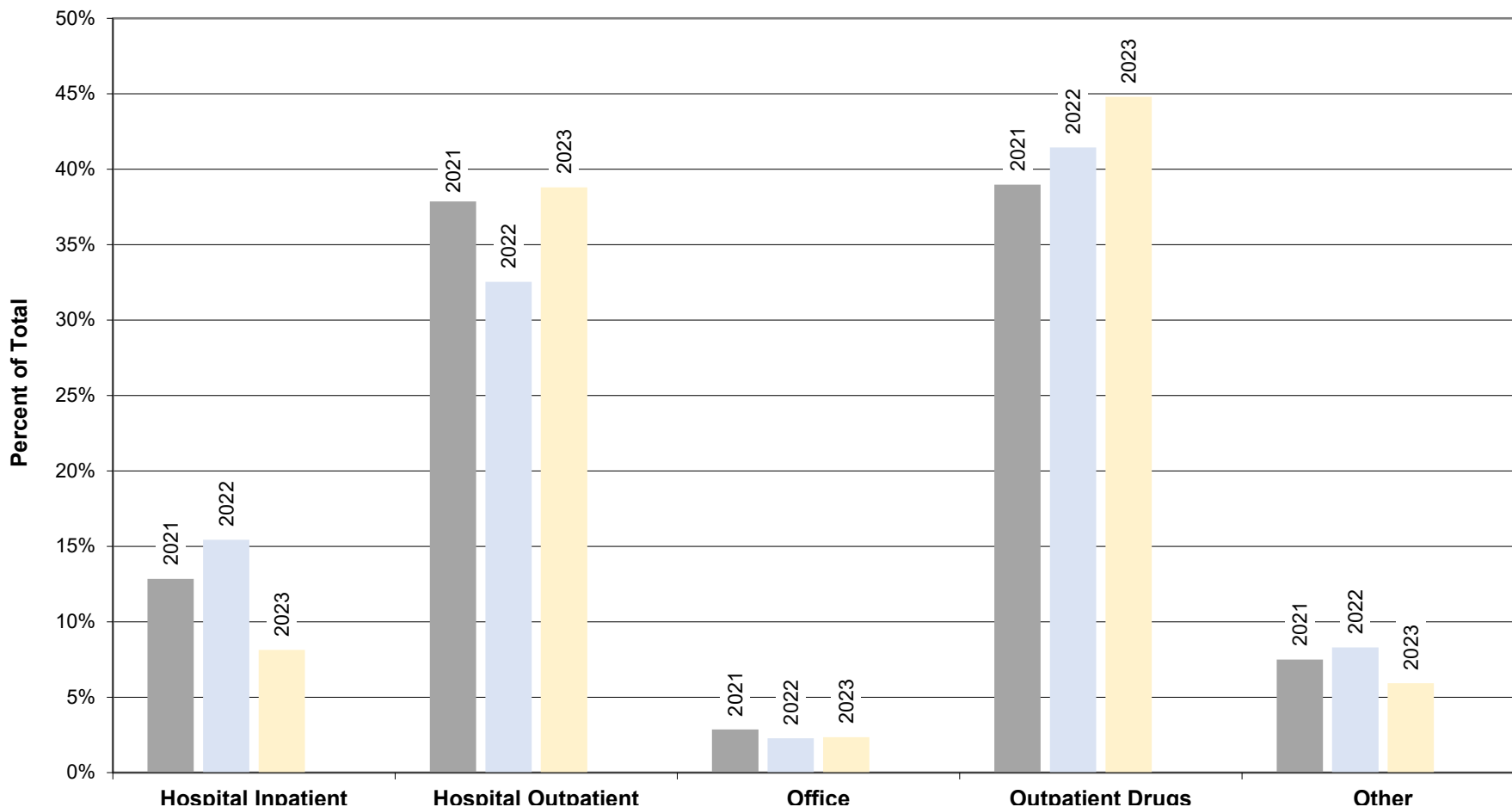
This chart illustrates the cost sharing on a per member per month (PMPM) basis. Members' totals include all out-of-pocket related health plan costs (co-pays, deductibles, coinsurance) in addition to the annual premium.

	Annual Totals				PMPM	
	Member Months	Member Paid	Total Out-of-Pocket	Total Plan Paid	Member Costs	Plan Costs
Preferred Provider Plan	1,828	\$ 2,588,334	\$ 379,007	\$ 10,723,037	\$ 1,623	\$ 5,866
HSA Qualified Plan	24	\$ 47,292	\$ 10,500	\$ 43,342	\$ 2,408	\$ 1,806
Total Non-Medicare	1,852	\$ 2,635,626	\$ 389,507	\$ 10,766,380	\$ 1,633	\$ 5,813
Basic Plus	1,110	\$ 689,316	\$ 4,226	\$ 981,456	\$ 625	\$ 884
Basic	3,467	\$ 1,334,112	\$ 2,889	\$ 2,844,729	\$ 386	\$ 821
Medical Supp Plan	1,778	\$ 595,684	\$ 1,910	\$ 1,341,887	\$ 336	\$ 755
Total Medicare	6,355	\$ 2,619,112	\$ 9,026	\$ 5,168,072	\$ 414	\$ 813
Total All Plans	8,207	\$ 5,254,738	\$ 398,533	\$ 15,934,452	\$ 689	\$ 1,942

Distribution of Claim Payments



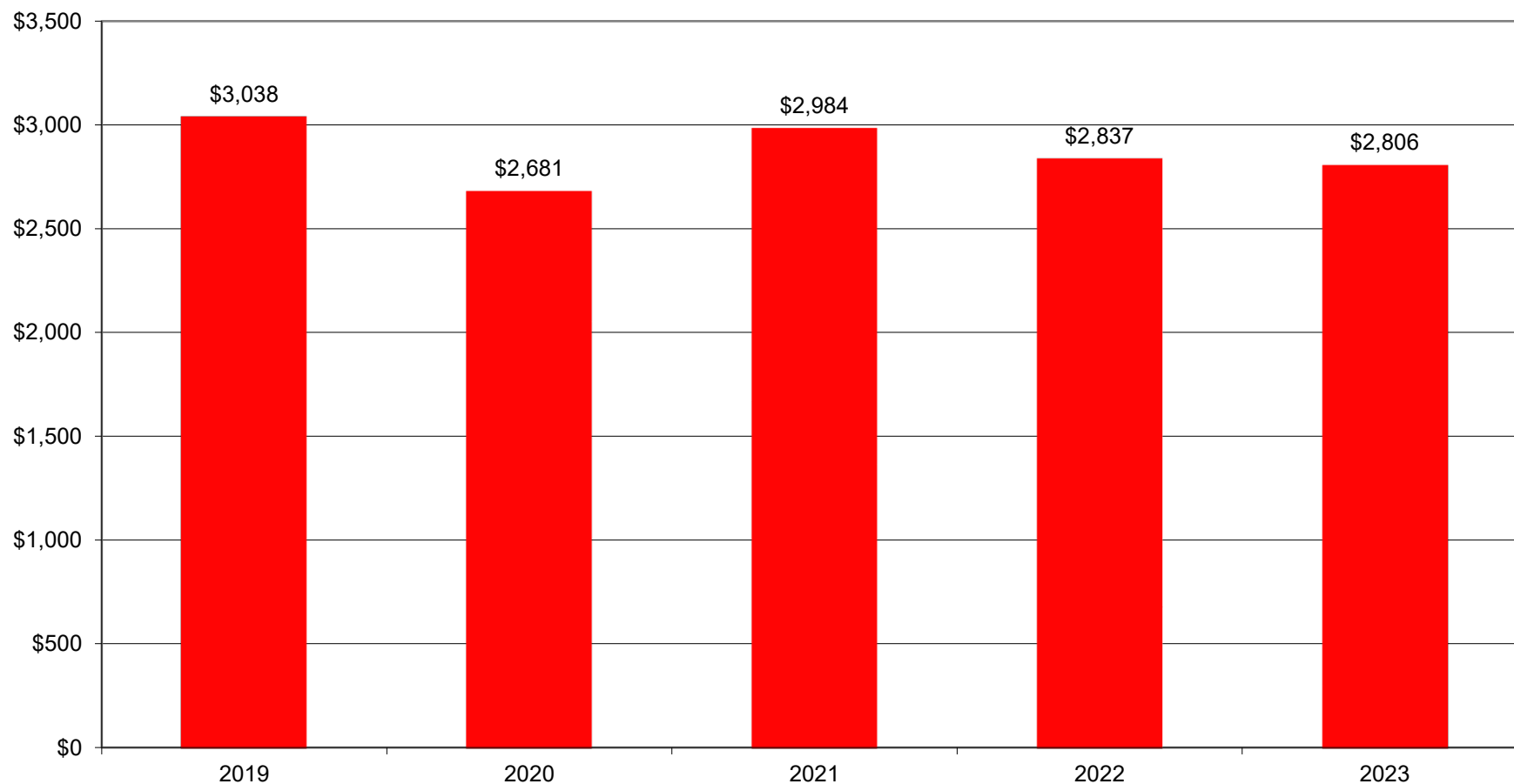
This chart illustrates the total annual combined Medicare and Non-Medicare medical and pharmacy claims paid for each place of service as a percent of the total annual cost. "Other" is a total of services not within the defined labels below, such as Ambulance, Community Mental Health Center, Home Health / Hospice, and Substance Abuse Treatment Center.





Non-Medicare Network Savings

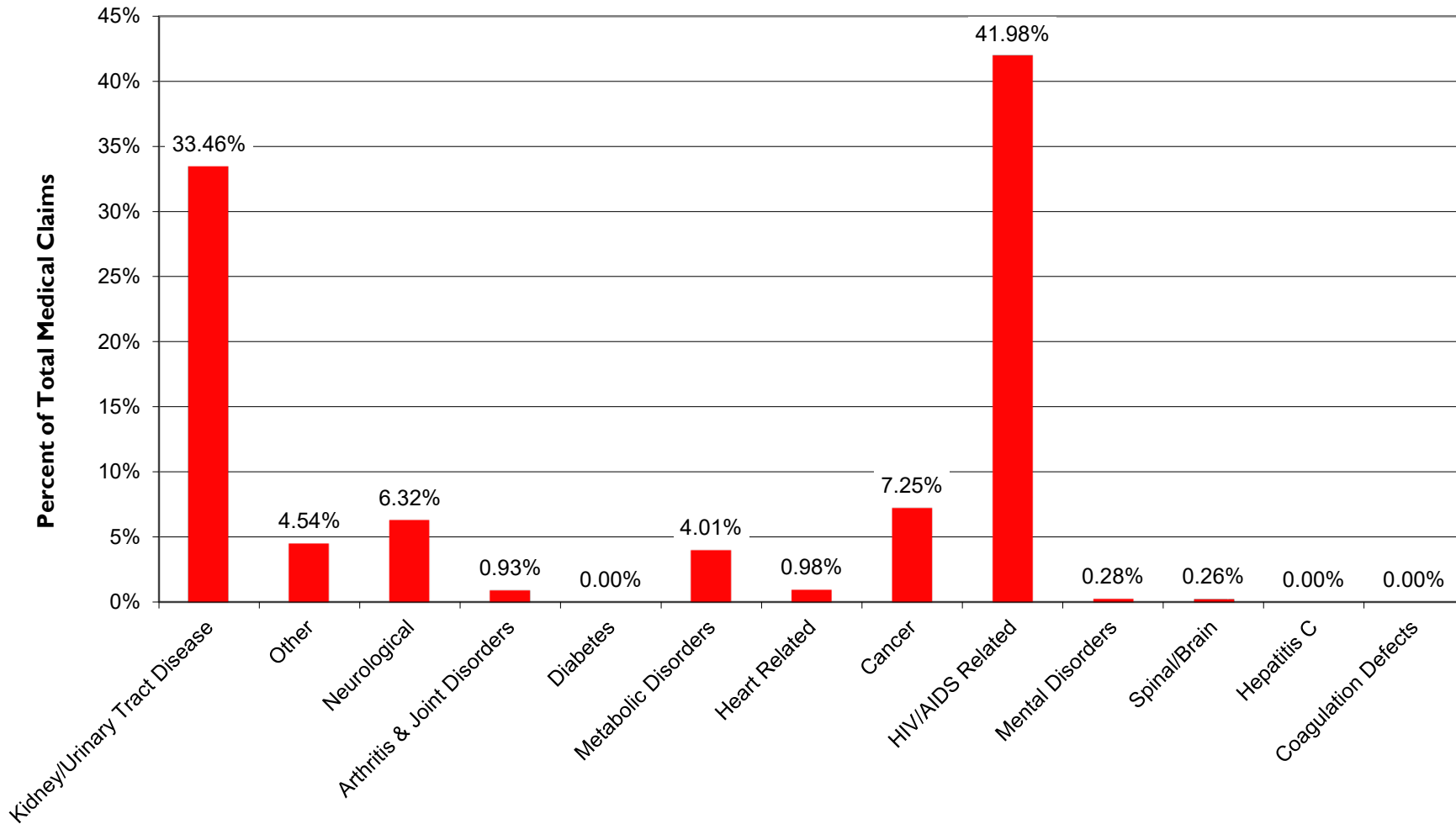
This chart depicts network discounts for the Preferred Provider Plans for paid claims on a Per Member Per Month (PMPM) basis for Non-Medicare plans. The total network savings was 48.1%. These Plans utilized networks 99% of the time.



Non-Medicare Diagnosis Categories



This chart depicts the paid medical and pharmacy claims based upon Major Diagnosis Categories for all Non-Medicare plans. The percent of WSHIP claims paid under the HIV/AIDS-Related Diagnosis Category in 2023 for Non-Medicare was 41.98%.



Medicare Diagnosis Categories



This chart depicts the paid medical and pharmacy claims based upon Major Diagnosis Categories for all Medicare plans. The percent of WSHIP claims paid under the Kidney and Urinary Tract Disease Diagnosis Category in 2023 for Medicare was 63.34%.

