Superior Court of California County of San Bernardino HMO HMO

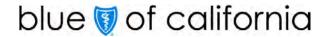
Experience and High Cost Claimants
Client Intelligence Summary (CIS) Level 2

Data through May 31, 2019

HMO - HMOX0001,HMOX0002 6/1/2017 to 5/31/2019

	Memb	ership	Premium			Medical Expenses				Drug Expenses		Total	Paid Loss	Paid
Month	Employees	Members	Medical	Drugs	Total	Capitation	MHSA	Claims Paid	Total	Claims Paid	Total	Expenses	Ratio	PMPM
Jun-2017	0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%	\$0
Jul-2017	0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%	\$0
Aug-2017	0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%	\$0
Sep-2017	0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%	\$0
Oct-2017	0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%	\$0
Nov-2017	0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%	\$0
Dec-2017	0	0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.0%	\$0
Jan-2018	319	638	\$235,973	\$92,597	\$328,570	\$67,548	\$6,878	\$29,641	\$104,067	\$31,813	\$31,813	\$135,880	41.4%	\$213
Feb-2018	319	637	\$237,423	\$93,167	\$330,590	\$129,097	\$6,867	\$30,029	\$165,993	\$84,317	\$84,317	\$250,310	75.7%	\$393
Mar-2018	318	636	\$237,499	\$93,196	\$330,695	\$129,568	\$6,856	\$82,964	\$219,389	\$66,687	\$66,687	\$286,076	86.5%	\$450
Apr-2018	320	640	\$237,799	\$93,314	\$331,113	\$130,546	\$6,899	\$206,147	\$343,592	\$72,958	\$72,958	\$416,549	125.8%	\$651
May-2018	325	646	\$237,803	\$93,315	\$331,118	\$131,820	\$6,964	\$68,542	\$207,326	\$67,549	\$67,549	\$274,875	83.0%	\$426
Jun-2018	327	650	\$240,652	\$94,433	\$335,085	\$133,601	\$7,007	\$142,887	\$283,495	\$73,189	\$73,189	\$356,684	106.4%	\$549
Jul-2018	328	651	\$242,237	\$95,055	\$337,292	\$134,831	\$7,018	\$380,432	\$522,281	\$80,054	\$80,054	\$602,335	178.6%	\$925
Aug-2018	328	651	\$243,049	\$95,374	\$338,422	\$134,616	\$7,018	\$139,089	\$280,723	\$91,149	\$91,149	\$371,872	109.9%	\$571
Sep-2018	322	641	\$237,628	\$93,247	\$330,875	\$134,302	\$6,910	\$189,644	\$330,856	\$87,209	\$87,209	\$418,065	126.4%	\$652
Oct-2018	326	646	\$240,388	\$94,330	\$334,718	\$134,800	\$6,964	\$415,025	\$556,789	\$91,796	\$91,796	\$648,585	193.8%	\$1,004
Nov-2018	328	655	\$242,611	\$95,202	\$337,812	\$137,623	\$7,061	\$112,655	\$257,339	\$102,580	\$102,580	\$359,919	106.5%	\$549
Dec-2018	330	662	\$244,608	\$95,986	\$340,594	\$138,791	\$7,136	\$52,858	\$198,785	\$89,854	\$89,854	\$288,639	84.8%	\$436
Jan-2019	325	656	\$256,851	\$100,785	\$357,636	\$140,698	\$7,373	\$41,558	\$189,630	\$63,380	\$63,380	\$253,010	70.8%	\$386
Feb-2019	324	653	\$257,514	\$101,045	\$358,559	\$141,735	\$7,340	\$55,999	\$205,074	\$58,104	\$58,104	\$263,178	73.4%	\$403
Mar-2019	326	656	\$257,514	\$101,045	\$358,559	\$140,526	\$7,373	\$40,576	\$188,476	\$75,820	\$75,820	\$264,295	73.7%	\$403
Apr-2019	324	650	\$257,003	\$100,845	\$357,848	\$140,665	\$7,306	\$22,790	\$170,761	\$60,432	\$60,432	\$231,193	64.6%	\$356
May-2019	326	652	\$258,131	\$101,287	\$359,418	\$139,262	\$7,524	\$33,697	\$180,483	\$69,189	\$69,189	\$249,672	69.5%	\$383
TOTAL	5515	11020	\$4,164,681	\$1,634,222	\$5,798,903	\$2,240,029	\$120,494	\$2,044,535	\$4,405,057	\$1,266,078	\$1,266,078	\$5,671,136	97.8%	\$515





Large Claims Report

Account: SUPERIOR COURT OF CA, COUNTY OF SAN BERNARDINO

Renewal Period: 01/01/2020

Experience Period: 06/01/2018 to 05/31/2019 Pooling Level: HMO: \$135,000, PPO: N/A

Large Claims Threshold: \$50,000

Network Claimant Paid Claims Pooling Credit Diagnosis	
HMO 1 \$314,823 \$135,000 \$179,823 Sepsis, Unspecified Organism	
2 \$235,928 \$135,000 \$100,928 Sepsis, Unspecified Organism	
3 \$164,420 \$135,000 \$29,420 Fracture of Lumbar Spine and Pelvis	
4 \$129,793 \$135,000 \$0 Non-St Elevation (Nstemi) Myocardial Infarction	
5 \$85,673 \$135,000 \$0 Other Ulcerative Colitis With Other Complication	
6 \$82,590 \$135,000 \$0 Malignant Neoplasm Of Prostate	
7 \$56,609 \$135,000 \$0 Nontraumatic Intracerebral Hemorrhage In Hemisphere, Subcortical	

Experience

A month by month roll-up of employer specific data pertaining to revenues and claim costs for the most current 24 months in the reporting period.

Month: Month and year in which premiums were earned and claims were paid.

Membership-Employees: Number of employees enrolled in the plan.

Membership-Members: Number of employees plus dependents enrolled in the plan.

Premium-Medical: Amount paid by the emplyer group to Blue Shield of California for coverage of medical benefits.

Premium-Drugs: Amount paid by the employer group to Blue Shield of California for coverage of prescription drug benefits.

Premium-Total: Sum of medical and drug premiums.

Medical Expenses-HMSA: The amount paid for behavioral health related programs.

Medical Expenses - Claims Paid: The medical claims amount paid for the enrolled members.

Medical Expenses - Total: Total amount of medical benefits paid (sum of capitaion, UBH, and medical claims paid).

Drug Expenses - Claims Paid: The drug claims amount paid for the enrolled members.

Drug Expenses - Total: Total drug claims amount paid for the enrolled members.

Total Expenses: Total amount of medical and pharmacy benefis paid for enrolled members.

Paid Loss Ratio: Ratio, expressed as a percentage, of total amount paid for medical and drug benefits (Total Expenses) to the total amount of premiums collected (Total Premium).

High Cost Claimants

A list of claimants that have medical claims equal to or greater than \$50,000 based on data from the most current 12 months in the reporting period. When multiple diagnoses exist per member, the chosen diagnosis for the member is the one with the highest medical paid amount.

