

# Milliman tools to help solve your Medicare Advantage and Part D challenges

July 12, 2023



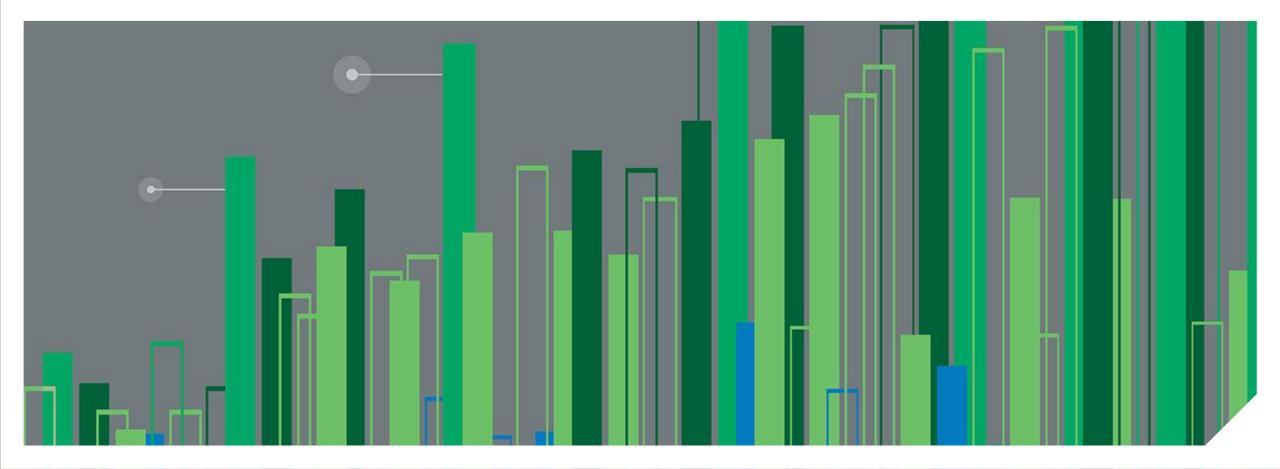


# Milliman Medicare Advantage Competitive Value Added Tool

Milliman MACVAT®

Julia Friedman, FSA, MAAA

JULY 2023



# **Current Competitive Analysis Challenges**



How do you know how your organizations' benefits stack up against the competition?



How much valuable time and resources is your organization allocating to gathering data?



How does your organization easily analyze the full range of benefits in the MA marketplace?



Data is increasingly visual; does your organization have the capabilities to draw out these relationships?

The Milliman MACVAT tool is licensed to MAOs which cover over 83% of individual MA enrollment.



# **Applications of Milliman MACVAT**

#### **Benefit Cost Sharing Summary**

- User friendly
- Easy to compare benefits for multiple sponsors
- Understandable marketability of current plan offerings

#### **Competitive Analysis**

- Allows visibility into competitive benefits across markets
- Estimates of the value added of in-network services
  - Separately for Non-Dual (non-institutionalized / non-Medicaid) and Dual populations
- Existing markets and potential service area expansion





# **Summary of Information Captured**

- General 2024 plan information (plan name, parent name, SNP type, etc.)
- Star rating
- Enrollment including crosswalks
- Member premium
- Value Added
- Benefit detail





## Milliman MACVAT® Product Suite

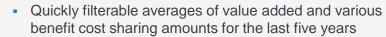
The Milliman MACVAT offers a suite of tools to assist in robust product design and Medicare Advantage market strategy.

Milliman MACVAT includes a wealth of additional analytical power in additional products we have developed to meet specific client needs. They each include comparative metrics and analytics related to the value added that is fundamental to the Milliman MACVAT.

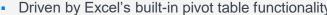
These tools have been successfully used for a number of years by clients who find their insight invaluable to developing Medicare Advantage strategy.

We are happy to provide demonstrations of these products at no charge.

#### **Yearly Benefit Tool (YBT)**



- Driven by Excel's built-in pivot table functionality
- results
- Released shortly after original MACVAT



- Year-over-year changes are calculated from the displayed

#### **Winners / Losers Tool**



- Measures key differences in important market metrics based on MA plans which captured significant membership or lost significant membership during AEP
  - E.g., premium, MOOP, cost sharing, value added, etc.
- Easily customizable by users to adjust for geography, plan design, membership capture, and more
- Released in January

#### **Alternative Value Added Calculations**

Average Relative Member Savings (MA-ARMS) Tool

- Value added is calculated based upon a single set of cost and use metrics which normalizes for geographic differences between counties to compare plans apples-toapples nationwide
- Released in November / December



#### **IRAVAT**



Determines benefit value impact of the 2025 Part D benefit structure and relativities between plans and Medicare Advantage Organizations, based on 2024 data





# **Tool Demonstration**

# **Additional Information**



# Milliman Medicare Suggest

Andy Mueller
Joseph Boschert

**JULY 12, 2023** 

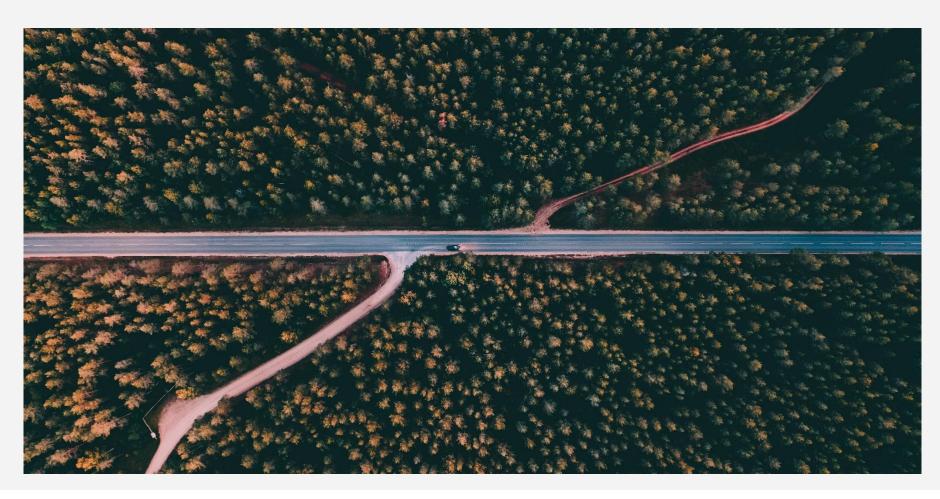


# **Current Challenges**

The pains plans often encounter...



# **Growth and Retention**

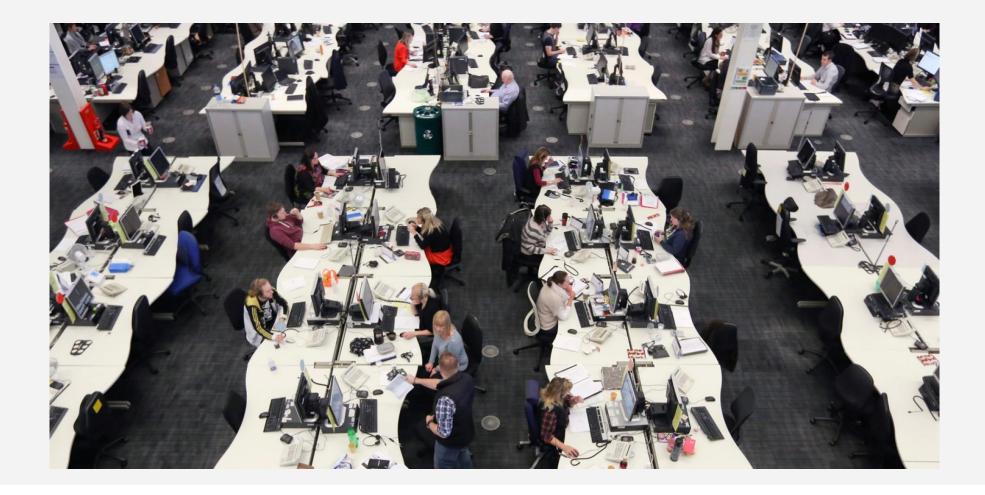


Growth
Conversion Ratios
Retention Ratios



# **Broker Influence and Cost**

Avoidable Commissions
Misaligned Incentives
Beneficiary Interest





# **Generic Marketing**



**TV Personalities** 

**Mailers** 

**CMS** Regulations

Unintelligent



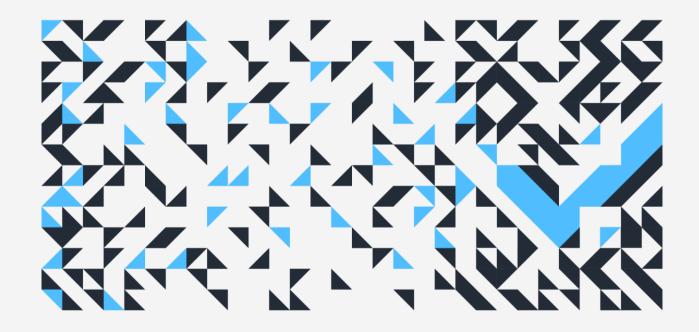
# **Perfect Competition**

Challenge to find Optimal Plan





## **Oceans of Data**



Medical + Rx Utilization

**Clinical Data** 

**Intersectional Marketing Data** 



# **Profiling and Targeting**



Plan Richness
Pharmacy Drugs
Correlations

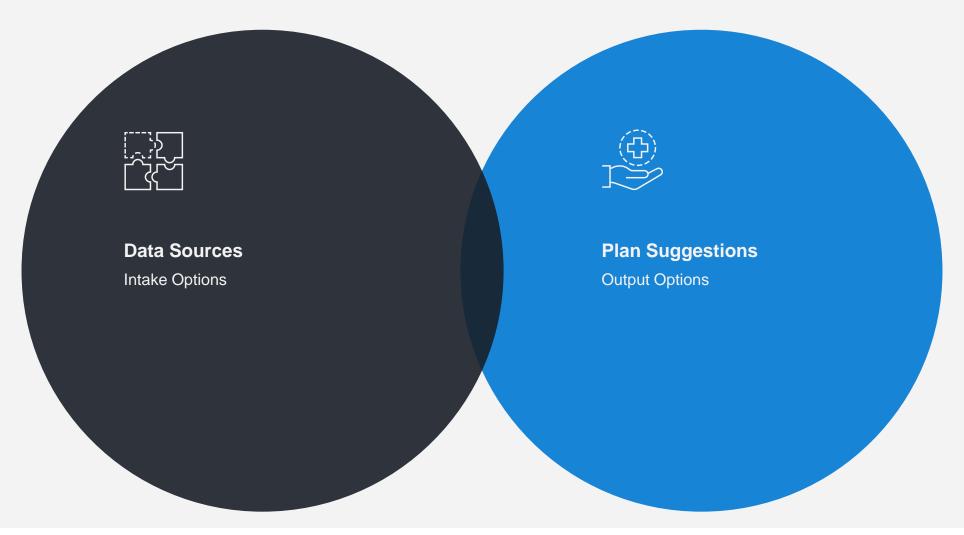


# We can do better



# **Solution Overview**

High Level





## **Data Sources**

Options



#### **Manual**

Human-entered



# Current Claims / ACO files

Eligibility / Contact

Medical

Pharmacy



#### **Rx History**

Prescription Data Service

5 inputs = Rx history



#### **CMS**

**Blue Button** 

**Existing Beneficiary** 



#### **CMS**

DPC

Provider Relationship



#### **Epic EHR**

Clinical Data

Milliman Data Connector



## **Process Flow**



#### **Intake & Transform**

Variety of sources

Common model



#### **Find Individuals**

Millions Beneficiaries
Advanced ML



#### **Adjudicate Plans**

All cost sharing categories
All Plans

Nationwide Allowed



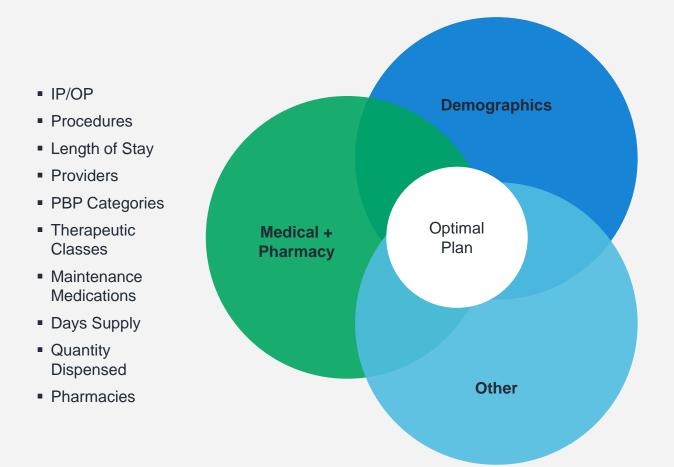
#### Rank & Suggest

OOPC Ranking
Net Wallet Ranking
Custom Weighted Ranking



# Doing better means real personalization

Thousands of features



- Age
- Gender
- Geographic Attributes

- Provider Directories
- Supplemental Benefits
- Client Filtering
- Other



# **Three Ranking Options**

**Out Of Pocket Costs (OOPC)** 

Medical Costs + Rx Costs + Premium

Default Ranking

**Net Wallet Impact** 

OOPC + Cash

Part B Premium Buydown

MSA Deposit

**Custom Weights** 

Total OOPC

**Provider Match** 

Supplemental Benefits



# **Output Options**

Serving a variety of client needs

#### **Hybrid Options**

Use one or many approaches



#### **APIs**

Developer-friendly

Systems integration

Realtime



#### Website

White-Labeled

**Quick Turnaround** 



#### **Flat Files**

**Batch Processing** 

Monthly Cycles



#### **Consulting Reports**

White glove



# Medicare Pricing at Milliman

**Medicare Repricer** 

**Medicare Reference Pricer** 

# Agenda

1	2	3	
Solutions Overview	Key Features	Supported Fee Schedules	
4	5	6	
Uses	Case Study: Payment Integrity	Case Study: VA	

# Solutions for Medicare Pricing

- Batch Processing
- Individual Claim Pricing

1. Standalone .NET

2. MedInsight

3. Cloud

4. Web Portal



## **Key features**

#### **Quarterly Updates**

We track the Federal register and the quarterly releases of each CMS Fee schedule and provides timely updates.

# **Complete Payment Adjustments**

Replicates each Medicare payment adjustment and is tested using Milliman's detailed Medicare claim feeds from CMS.

#### **Detailed Build-Up**

Generates claim-level reports detailing the build-up of all payment amounts.

## **Configurable Payments**

Include or exclude payment components such as indirect medical education (IME), graduate medical education (GME), and organ acquisition payments.

#### **MS-DRG and APC Groupers**

Software includes integrated MS-DRG and APC Groupers.

## **Provider-Specific Adjustments**

Includes providers-specific adjustments such as value-based purchasing adjustments, and quality reporting adjustments.

## Supported fee schedules

- Inpatient Prospective Payment System (IPPS)
- Critical AccessHospital (CAH) interim payments
- Outpatient Prospective Payment System (OPPS)
- Ambulatory Surgery Center (ASC)

- Physician RBRVS
- Average Sales Price (ASP) drug fee schedule
- Clinical Lab
- Parenteral and Enteral (PEN)
- Skilled Nursing Facility (SNF) PPS

- Anesthesia
- Dialysis Facility (ESRD) PPS

- Ambulance
- Durable Medical Equipment & Prosthetics (DME-POS)

- Inpatient Psychiatric Facility (IP Psych) PPS
- Long-Term Care Hospitals (LTCH)

- Inpatient Rehabilitation Facility (Rehab) PPS
- Home Health (HH)PPS

## Uses



## **Case Study: Payment integrity**

#### **Situation**

Concerned about provider payment accuracy. No comprehensive "proof" provider payments are accurate and consistent with provider contracts

### Challenge

Monitor all provider payments for consistency with Medicare fee-for-service (FFS) allowed. Then check against percent of Medicare contract terms and evaluate non-standard contract terms.

#### **Solution**

Used Medicare Repricer to adjudicate all claims to Medicare FFS, applied percent of Medicare contract terms. Additionally, ran general audits (dups, NCCI).

The table on the next page summarizes the results for specific clients.

# **Case Study: Payment integrity**

			Savin	gs (\$M)	
	Lines of		Total	Go Forward	
Plan	Business	<b>Approximate Size</b>	Opportunity	(Annual)	Resolution
Special Needs Plan	Medicare Advantage - hospital only	30,000 members	\$85.0	\$18.0	Fixed claim system configuration, reducing inpatient hospital spend by 10%. Negotiated recoupment of \$30M in overpayments.
Regional Health Plan A	Medicare Advantage	\$800M in annual premium for MA	\$26.0	\$12.0	Renegotiated outpatient hospital contracts.
Provider Affiliated Health Plan	Medicare Advantage, Managed Medicaid	\$1.4B in annual claims (50% were outside the system)	\$13.5	\$9.0	Largest savings was for recontracting Medicaid payments to dialysis providers.
Regional Health Plan B	Medicare Advantage, TRICARE	\$600M in annual claims	\$3.8	\$1.5	Implement drug unit coding edits (\$800k). Fix loading of contract parameters in claim system (\$700k).
Regional Health Plan C	Medicare Advantage, Commercial	\$270M in annual claims	\$8.8	\$0.8	Fixed claim system configuration for inpatient hospital.
Medicare Advantage Plan	Medicare Advantage	40,000 members	\$2.6	\$0.6	Fixed claim system configuration for professional.

Note: Savings opportunity reflects universe of claims identified by Milliman and confirmed by client. Go forward savings reflects estimated annual savings from client action.

# Bringing modernization and automation to claims pricing.

CLIENT

Department of Veterans Affairs

#### SITUATION

The Department of Veterans Affairs (VA) runs the largest integrated healthcare network in the nation and provides care to 9M Veterans annually. Care is provided either through the traditional model (directly through VA facilities) or through Community Care, which is healthcare services provided to Veterans by non-VA healthcare providers.

#### **CHALLENGE**

VA Community Care has expanded significantly in recent years, and VA's legacy solution for auditing claims was no longer an efficient option. Only a limited number of payment systems were supported, and only Outpatient and Professional claims could be priced using web based technology. The system was costly to maintain – besides old technology, there were multiple tailored solutions which made model maintenance difficult.

# Improved performance and efficiency

through a modernized, cloud-based pricing solution.

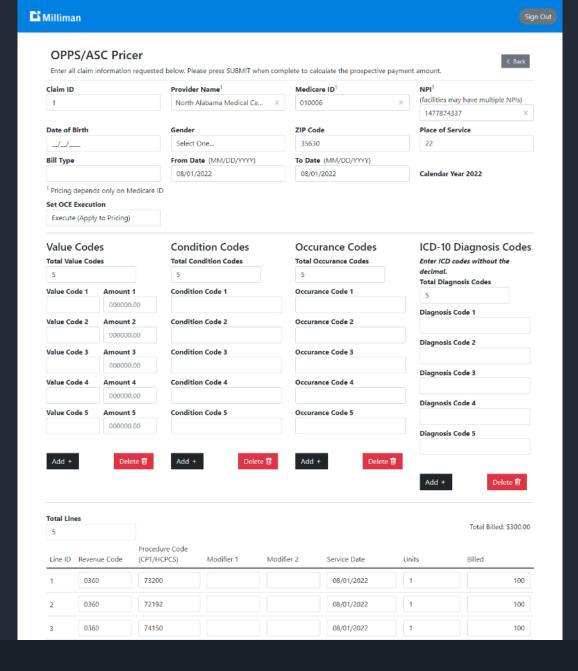
#### **SOLUTION**

Milliman's Medicare Reference Pricer (MRPricer) team implemented a cloud-based pricing service for the VA auditing team that improved efficiency by modernizing, automating, and improving the technology and workflow. MRPricer supports VA with a single solution, replacing the difficult to maintain legacy solution. The MRPricer integrates MS-DRG grouping, APC grouping and NCCI edits. The MRPRicer solution is cloud-based and can be integrated with your existing claims payment and warehousing infrastructure.



# **Medicare Reference Pricer**

**OPPS** Input screen



# **Medicare Reference Pricer**

**OPPS** Output screen

#### **OPPS/ASC Pricer - Pricing Outputs**

Medicare Allowed Amount \$203.12
Pricing Errors

#### **Basic Information**

Pricing Mode FFS Medicare
Pricing Calendar Year 2022

Claim ID
Provider Name

North Alabama Medical Center - Florence, AL

North Alabama Medical Center - Florence, AL

 Medicare ID
 010006

 ZIP Code
 35630

Claim Priced Date 2023-07-07

#### Claim Details Factors & Adjustments

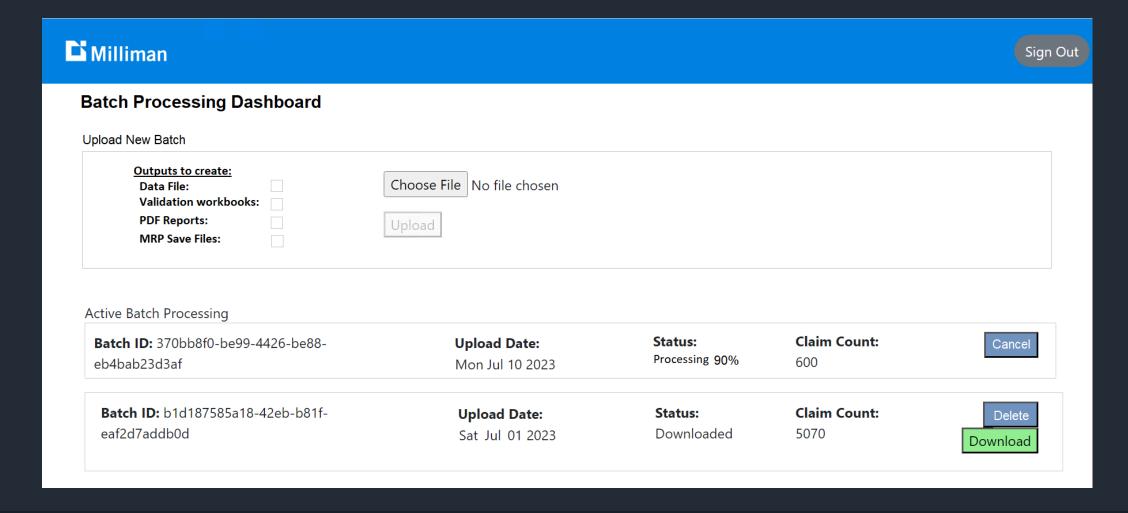
From Date 0.8113 08/01/2022 Wage Index To Date 08/01/2022 GPCI Work 1.0000 Total Billed \$300.00 **GPCI Practice** 0.8880 MSA 22520 **GPCI** Malpractice 0.9210 **MSA Description** Florence-Muscle Shoals, AL Cost-to-Charge Ratio (CCR) 0.1200 POS CCR Effective Date 02/23/2022 Bill Type **Outlier Amount** \$0.00

#### **Service Line Items**

Line ID	Revenue Code	Procedure Code (CPT / HCPCS)	Modifier 1	Modifier 2	Service Date	Units	Adjusted Units	Billed	Service Description	Allowed Prior to Lesser of Billed	Medicare Allowed	Payment Source	Final APC	APC Status Indicator	Bundled Flag	Modifier Adjustment	Multiple Surgery Adjustment	Manual Adjudication Flag	Error Flag	Error Description	Warning Flag	Warning Description
1	0360	73200			08/01/2022	1	1	\$100.00	Ct upper extremity w/o dye	\$203.12	\$203.12	APC	8005	5	N	1.00	1.00	N	N		N	
2	0360	72192			08/01/2022	1	1	\$100.00	Ct pelvis w/o dye	\$0.00	\$0.00	APC	8005	N	Y	1.00	1.00	N	N		N	
3	0360	74150			08/01/2022	1	1	\$100.00	Ct abdomen w/o dye	\$0.00	\$0.00	APC	8005	N	Υ	1.00	1.00	N	N		N	

## **Medicare Reference Pricer**

Batch Processing Dashboard





# Thank you

Please contact us, we are happy to discuss how we can help you and your client with provider reimbursement.

Charlie Mills charlie.mills@milliman.com

Valentina Decyatnik valentina.decyatnik@milliman.com

Bill Alto bill.alto@milliman.com

# Introduction to the Milliman SkySail tool

Brandon Kessler

**JULY 2023** 



Why does it exist?

The Milliman SkySail tool was created to help answer three basic questions around the financials of a pharmacy benefit contract:

- 1) What is your deal?
- 2) Are you getting that deal?
- 3) Is there a better deal?



What is it?

The Milliman SkySail tool, also known as OnX, is a fully customizable, efficient, and dynamic pharmacy claims analytics and reporting tool that simplifies contract pricing management, enables ad hoc pharmacy claims analysis, and provides near real-time alerts and functionality.



# Milliman SkySail Uses



The Milliman SkySail tool leverages our deep experience and advanced technology to provide evidence-based analytics and insights.

- Procurement Commercial/Self Funded,
   EGWP, Managed Medicaid, Discount Card
- Ongoing pharmacy benefit claims monitoring and invoice review
- Verify contract performance and validate plan design operation
- Provides both quantitative and qualitative analysis and insights to control allowed costs
- Consultative insights
- Financial audits and contract reconciliation
- Full-scale pharmacy claim repricing
- MAC and pricing appeals management



#### **Embedded Advisor Services**

Embedded Advisor Services is our suite of pharmacy consulting services, inclusive of our PBM RFP process, combined with OnX. Together we support clients holistically with ongoing management and reconciliation of the pharmacy benefit.

#### Our Embedded Advisor Services include the following:

- Initial assessment of current PBM contract and financial performance
- Full PBM RFP process (once every 36 months; thereafter as needed)
- Ongoing PBM monitoring
- Dynamic pharmacy data analytics
- PBM oversight
- Pharmacy network pricing analysis
- Quarterly Monitoring Reports with financial, clinical, and strategic insights
- Financial Audits (i.e., network rates, rebate guarantees, specialty rate analysis)\*
- Periodic market checks and/or benchmark rate analysis\*
- Contract negotiation (we do not provide legal advice)
- Validation of annual PBM reconciliation of minimum contractual guarantees
- Strategic business advice and general PBM marketplace-related intelligence discussions\*\*
- Ad hoc reporting\*\*

<sup>\*</sup>Performed as needed or by request. Does not include manufacturer audits \*\* Subject to a capped number of hours per year. Hours over the limit must be pre-approved by client and will be billed at the applicable Milliman hourly billing rates.



# Our Technology

Milliman SkySail tool



Service Highlights

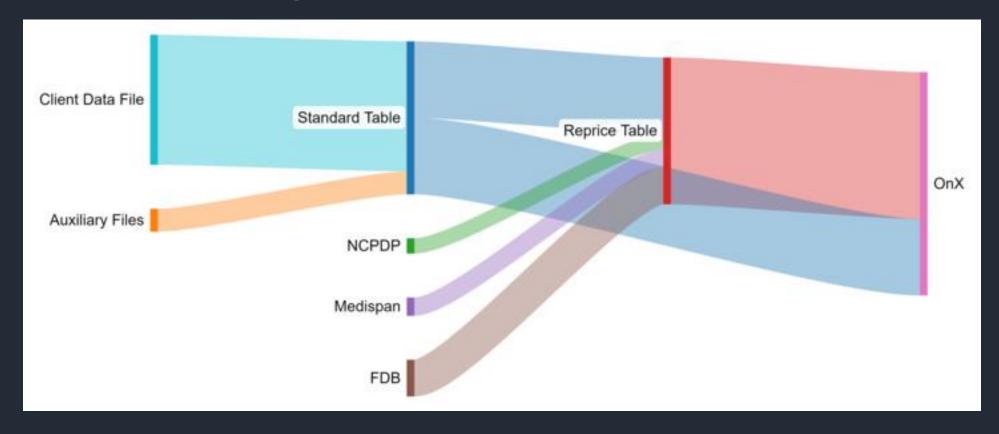
- Full-scale reconciliation insights
- Detailed contract review
- Real-time pricing validation
- Monitoring complex setups
  - GERs, BERs, DFs, Specialty, MAC, U&C, NADAC
- Provides high-level summary performance
- Allows for individual pharmacy claim analysis
- Reads and parses D.0 transaction data
- Fully Scalable
  - Currently handles over 1.5 billion transactions in seconds





Data Transfer

# **Data ingestion and transformation into OnX**



Auxiliary files include details such as specialty lists, MAC lists, limited distribution drugs, formulary lists, etc.



Our proprietary pricing and claims analysis tool



#### Intelligent

Pricing analysis



#### **Efficient**

Re-adjudicates 1 million claims <1min



#### Customizable

Dynamic reporting tailored to unique needs



#### **Scalability**

Display data from over a billion transactions in seconds



#### **Claims Based**

ClaimDNA and Ladder logic



#### **Dynamic**

User quickly and easily creates and edits reports on the fly



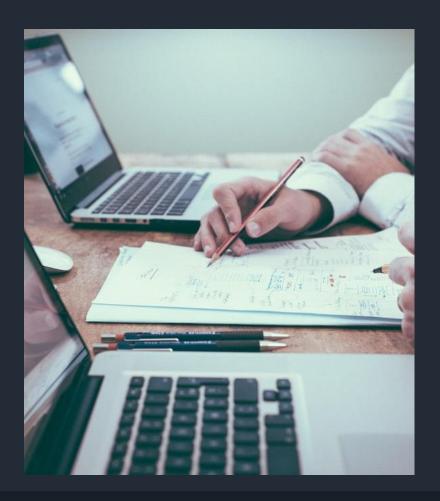
#### **Actuarial Review**

Accuracy and precision



#### **Cloud Based**

Hosted by AWS





#### **ClaimDNA**

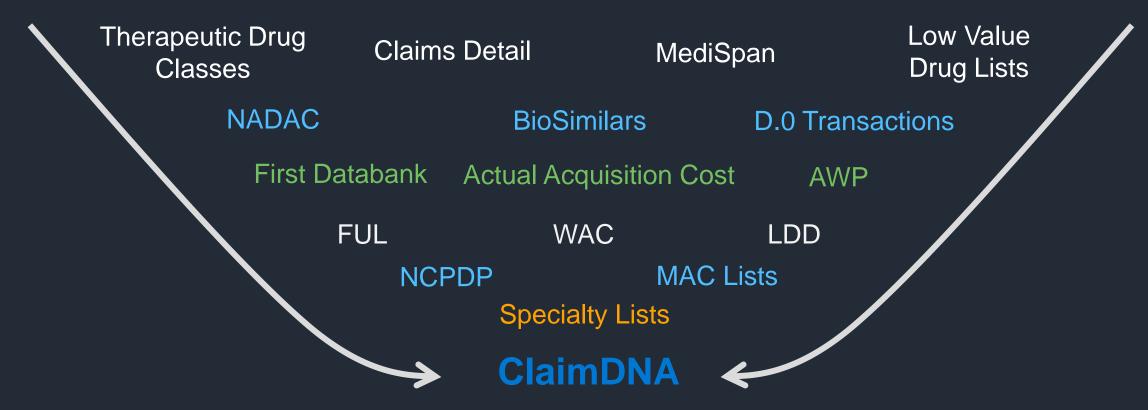
Never lose sight of a claim

- Generally designed for simple categorizations
  - Day supply ranges, brand/generic logic, yes/no data indicators, etc.
- Entirely customizable
- Generated from any list(s) provided
- Unlimited number of coded fields and levels (genes)
- Can be written on the fly
- Quickly and easily generate both detail and summary reports
- Diverse applications within OnX



#### **ClaimDNA**

Never lose sight of a claim



The Milliman Dynamic Pharmacy Analytics platform, with ClaimDNA technology, can reprice a full-scale pharmacy network at about a million claims per minute and report those claims within seconds.



## **Ladder Logic**

Never lose sight of a claim

- Used to categorize and filter large data sets
   -Custom drug classes, PBM identifiers, price lists, etc.
- Allows for extremely complex logic scenarios
- Applies logic in a step-by-step manner
- Entirely customizable
- Generated from any list(s) provided
- Designed for reporting and contract pricing management
- Logic scenarios can override itself or other ladders



**Network Identifiers** 

# Ladder Logic

#### **Priority 1 - BIN Only**

BIN	PCN	Group	NetworkID		PBM	LOB	Schedule	Recommendation
12345	(null)	(null)	(null)	->	PBM A	Medicare Part D	Medicare Part D	Keep
12345	(null)	(null)	N0032	->	PBM A	Medicare Part D	Medicare Part D	

#### **Priority 2 - BIN & Network ID**

BIN	PCN	Group	NetworkID		PBM	LOB	Schedule	Recommendation
11223	(null)	(null)	Network1	->	PBM A	Discount Card	Cash Card	Keep
11223	ABC	(null)	Network1	->	PBM A	Discount Card	Cash Card	
11223	ABC	OPEN	Network1	->	PBM A	Discount Card	Cash Card	
11223	LM	MILLA	Network1	->	PBM A	Discount Card	Cash Card	
11223	LM	MILLA2	Network1	->	PBM A	Discount Card	Cash Card	
11223	LM	CONS	Network1	->	PBM A	Discount Card	Cash Card	
11223	LM	OPN55	Network1	->	PBM A	Discount Card	Cash Card	
11223	LM	OPEN	Network1	->	PBM A	Discount Card	Cash Card	



**Network Identifiers** 

# Ladder Logic

#### Priority 3 - BIN & PCN

BIN	PCN	Group	NetworkID		PBM	LOB	Schedule	Recommendation
15332	XYZ	(null)	(null)	->	PBM B	Commercial	Commercial	Keep
15332	XYZ	(null)	RST106	->	PBM B	Commercial	Commercial	

#### Priority 4 - BIN & PCN & Network ID

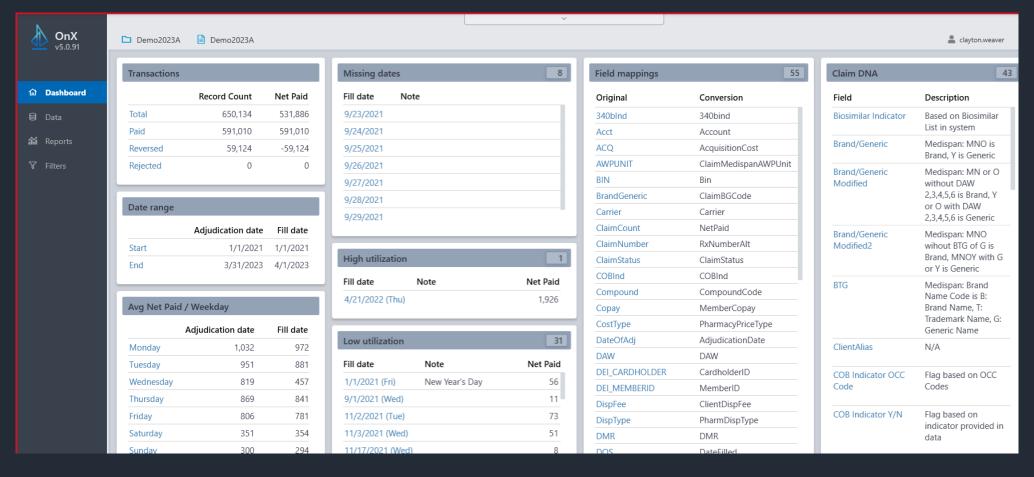
BIN	PCN	Group	NetworkID		PBM	LOB	Schedule	Recommendation
5555	CLAIM	(null)	6000	->	РВМ С	Discount Card	Cash Card	Keep
5555	CLAIM	1888C	6000	->	РВМ С	Discount Card	Cash Card	
5555	CLAIM	1888D	6000	->	РВМ С	Discount Card	Cash Card	
5555	CLAIM	1KM	6000	->	РВМ С	Discount Card	Cash Card	
5555	CLAIM	998A	6000	->	РВМ С	Discount Card	Cash Card	







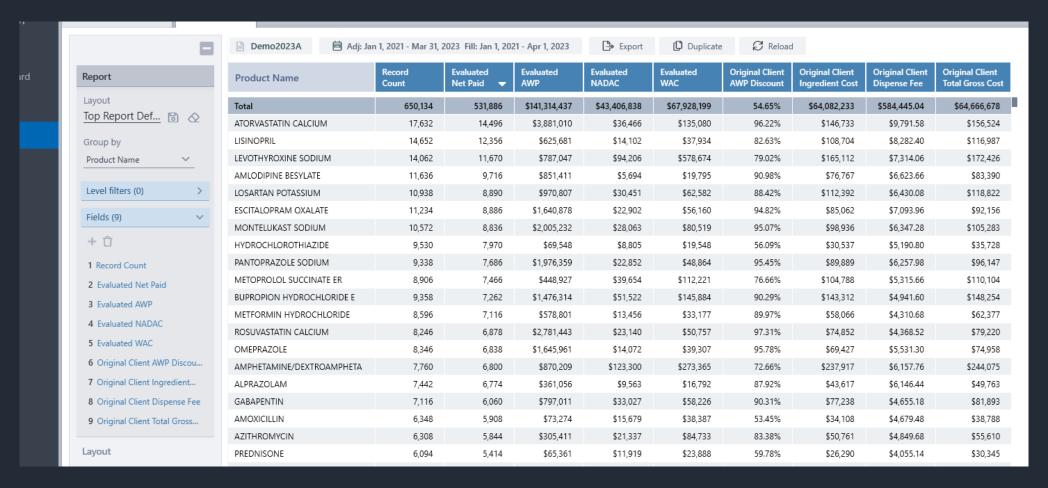
Dashboard



This view gives the user important information about the data. It assists with confirming date frame, claim counts, data cleanup and mapping, and all needed ClaimDNA requirements.



Top Reports



This report provides the user with the ability to dynamically filter and sort the key financial fields. It is used to compare competing pricing or evaluating current utilization performance.



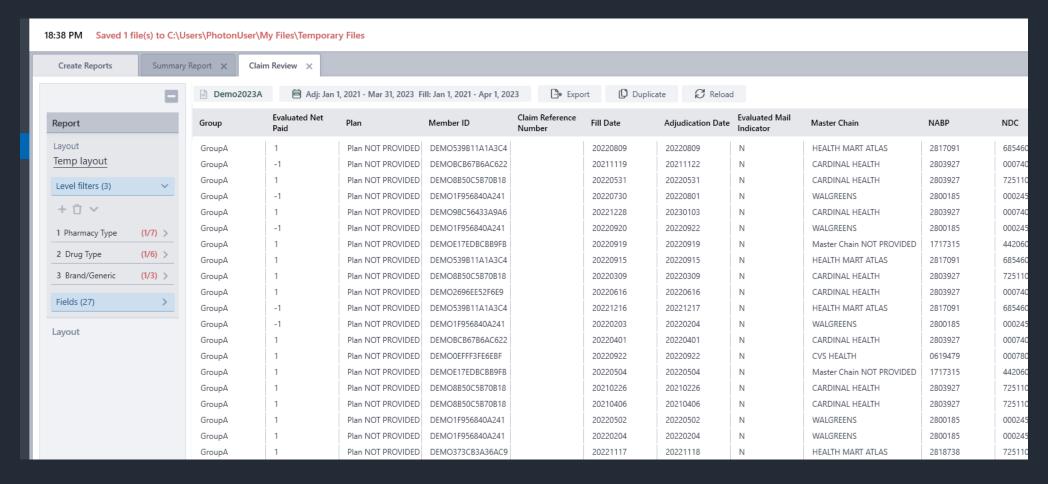
#### Summary



This report, which provides the user nearly infinite options for summarizing their data, is extremely helpful for creating date outputs, reviewing channel breakdowns of rates or costs, and understanding how your financial metrics are performing across all the different channels/variables.



Claim Review



This view gives the user a claim-by-claim breakdown of the specific summary item selected. We never lose sight of a claim.



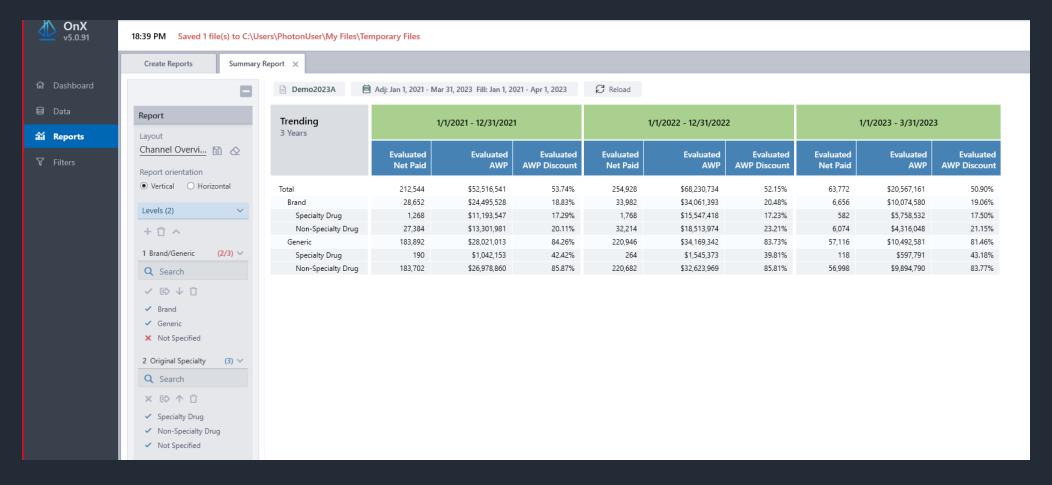
Claim Review Export

4	А	В	С	D	E	F	G	Н	1	J	K	L	М	
1		Claim Paviou I Da	ma2022A I /	Ndir Ion 1 2021 - Mar	31, 2023 Fill: Jan 1, 202	11 - Apr 1 2022								
-		Clailli Review   Del	1102023A   F	Auj. Jan 1, 2021 - Mai	31, 2023 Fill. Jall 1, 202	11 - Apr 1, 2023								
			Evaluated			Claim Reference		Adjudicati	Evaluated					
2		Group	Net Paid	Plan	Member ID	Number	Fill Date			Master Chain	NABP	NDC	Product Name	Produc
3		GroupA		Plan NOT PROVIDED	DEMO539B11A1A3C4			20220809		HEALTH MART ATLAS	2817091	68546017260	AUSTEDO	AUSTE
4		GroupA	-1.00	Plan NOT PROVIDED	DEMOBCB67B6AC622		20211119	20211122	N	CARDINAL HEALTH	2803927	00074055402	HUMIRA PEN	HUMIF
5	Retail 90	GroupA	1.00	Plan NOT PROVIDED	DEMO8B50C5B70B18		20220531	20220531	N	CARDINAL HEALTH			REPATHA SURECLICK	REPAT
6	Mail Order	GroupA	-1.00	Plan NOT PROVIDED	DEMO1F956840A241		20220730	20220801	N	WALGREENS		00024591401		DUPIXE
7	LTC	GroupA	1.00	Plan NOT PROVIDED	DEMO98C56433A9A6		20221228	20230103	N	CARDINAL HEALTH		00074055402		HUMIF
8	In House	GroupA	-1.00	Plan NOT PROVIDED	DEMO1F956840A241		20220920	20220922	N	WALGREENS	2800185	00024591401	DUPIXENT	DUPIXE
9	Specialty Pharmacy	GroupA	1.00	Plan NOT PROVIDED	DEMOE17EDBCBB9FB		20220919	20220919	N	Master Chain NOT PROVIDED	1717315	44206045510	HIZENTRA	HIZEN
10	Not Specified	GroupA	1.00	Plan NOT PROVIDED	DEMO539B11A1A3C4		20220915	20220915	N	HEALTH MART ATLAS	2817091	68546017260	AUSTEDO	AUSTE
11 I	Orug Type	GroupA	1.00	Plan NOT PROVIDED	DEMO8B50C5B70B18		20220309	20220309	N	CARDINAL HEALTH	2803927	72511076002	REPATHA SURECLICK	REPAT
12		GroupA	1.00	Plan NOT PROVIDED	DEMO2696EE52F6E9		20220616	20220616	N	CARDINAL HEALTH	2803927	00074055402	HUMIRA PEN	HUMIF
13	Specialty	GroupA	-1.00	Plan NOT PROVIDED	DEMO539B11A1A3C4		20221216	20221217	N	HEALTH MART ATLAS	2817091	68546017060	AUSTEDO	AUSTE
14	Compound	GroupA	-1.00	Plan NOT PROVIDED	DEMO1F956840A241		20220203	20220204	N	WALGREENS	2800185	00024591401	DUPIXENT	DUPIXE
15	OTC	GroupA	1.00	Plan NOT PROVIDED	DEMOBCB67B6AC622		20220401	20220401	N	CARDINAL HEALTH	2803927	00074055402	HUMIRA PEN	HUMIF
16	Vaccine	GroupA	1.00	Plan NOT PROVIDED	DEMO0EFFF3FE6EBF		20220922	20220922	N	CVS HEALTH	0619479	00078063941	COSENTYX SENSOREADY PEN	COSEN
17	Not Specified	GroupA	1.00	Plan NOT PROVIDED	DEMOE17EDBCBB9FB		20220504	20220504	N	Master Chain NOT PROVIDED	1717315	44206045510	HIZENTRA	HIZEN
18	Brand/Generic	GroupA	1.00	Plan NOT PROVIDED	DEMO8B50C5B70B18		20210226	20210226	N	CARDINAL HEALTH	2803927	72511076002	REPATHA SURECLICK	REPAT
19	Brand	GroupA	1.00	Plan NOT PROVIDED	DEMO8B50C5B70B18		20210406	20210406	N	CARDINAL HEALTH	2803927	72511076002	REPATHA SURECLICK	REPAT
20	Generic	GroupA	1.00	Plan NOT PROVIDED	DEMO1F956840A241		20220502	20220502	N	WALGREENS	2800185	00024591401	DUPIXENT	DUPIXE
21	Not Specified	GroupA	1.00	Plan NOT PROVIDED	DEMO1F956840A241		20220204	20220204	N	WALGREENS	2800185	00024591401	DUPIXENT	DUPIXE
22		GroupA	1.00	Plan NOT PROVIDED	DEMO373CB3A36AC9		20221117	20221118	N	HEALTH MART ATLAS	2818738	72511076002	REPATHA SURECLICK	REPAT
23		GroupA	1.00	Plan NOT PROVIDED	DEMO539B11A1A3C4		20220711	20220712	N	HEALTH MART ATLAS	2817091	68546017060	AUSTEDO	AUSTE
24		GroupA	1.00	Plan NOT PROVIDED	DEMO238576CBDD4A		20220607	20220607	N	CARDINAL HEALTH	2803927	00074433902	HUMIRA PEN	HUMIF
25		GroupA	1.00	Plan NOT PROVIDED	DEMO1F956840A241		20220204	20220204	N	WALGREENS		00024591401		DUPIXE
26		GroupA	1.00	Plan NOT PROVIDED	DEMO1BFF49468289		20220929	20220929	N	WALGREENS		50242021501		XOLAIF
27		GroupA	-1.00	Plan NOT PROVIDED	DEMO82EE6EE13730		20220930	20221003	N	CARDINAL HEALTH	2802684	72511076002	REPATHA SURECLICK	REPAT
28		GroupA	1.00	Plan NOT PROVIDED	DEMO5FB239119478		20211217	20211217	N	ELEVATE PROVIDER NETWORK	2630526	72511075001	REPATHA	REPAT
29		GroupA	1.00	Plan NOT PROVIDED	DEMO8B50C5B70B18		20210604	20210604	N	CARDINAL HEALTH	2803927	72511076002	REPATHA SURECLICK	REPAT
20		Group A	1.00	Dian MOT DROVIDED	DEMON122E10C0070		20210201	20210201	N	CARDINAL HEALTH	2002027	50242012001	ACTEMBA	ACTEN

The export of the claim review detail into Excel provides information such as applied filters and dates.



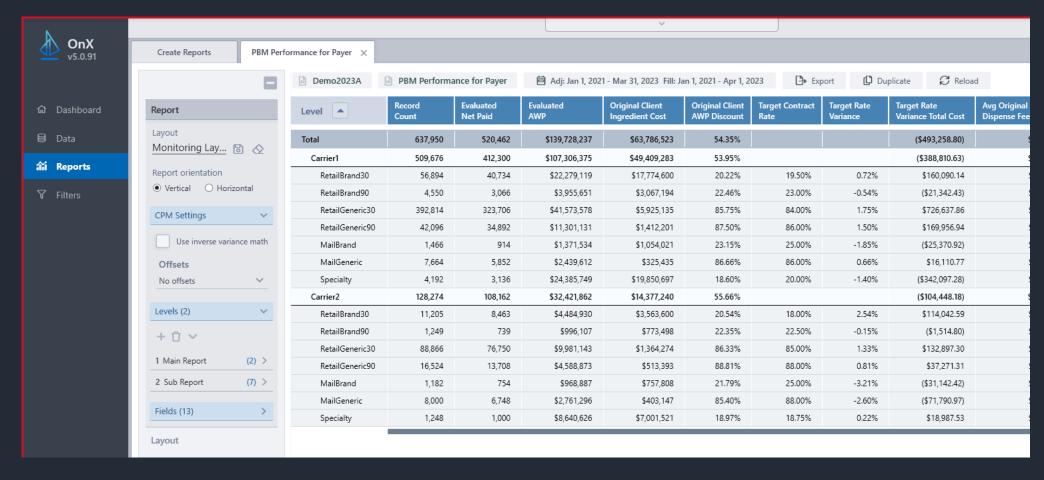
#### Trending



This report provides the user with crucial information regarding drug spend and pricing metrics performance over various time periods.



**Base Monitoring Report** 



This report provides the user the ability to analyze claim reconciliation to specific contracts and to view by any channel and toggle inclusions and exclusions in real time.



Monitoring Report with Inclusion and Exclusion Summary



In addition to the overall monitoring report, this view provides a summarized detail of individual inclusions and exclusions that apply to each line item.



Monitoring Report with Exclusion Detail

	Demo2023A PBM Performance for P	ayer 📋 Adj: Ja	n 1, 2021 - Mar 31, 2023	Fill: Jan 1, 2021 - Apr 1, 202	3 Export	Duplicate	C Reload		
Report	Level	Record Count	Evaluated Net Paid	Evaluated AWP	Original Client Ingredient Cost	Original Client AWP Discount	Target Contract Rate	Target Rate Variance	Target Ra Variance
Layout	Total	637,950	520,462	\$139,728,237	\$63,786,523	54.35%			
Monitoring Lay	Carrier1	509,676	412,300	\$107,306,375	\$49,409,283	53.95%			
Report orientation	RetailBrand30	56,894	40,734	\$22,279,119	\$17,774,600	20.22%	19.50%	0.72%	
Vertical O Horizontal	Included	56,894	40,734	\$22,279,119	\$17,774,600	20.22%	19.50%	0.72%	
CPM Settings V	Standard	56,894	40,734	\$22,279,119	\$17,774,600	20.22%	19.50%	0.72%	
or in octaings	Excluded	12,304	11,036	\$19,818,256	\$15,429,042	22.15%	19.50%	2.65%	
Use inverse variance math	Excluded as DemoCOBIND	94	70	\$67,950	\$30,202	55.55%	19.50%	36.05%	
Offsets	Excluded as DemoCompound	922	878	\$852,353	\$15,543	98.18%	19.50%	78.68%	
No offsets ∨	Excluded as DemoDMR	22	22	\$3,163	\$1,232	61.06%	19.50%	41.56%	
	Excluded as DemoDMR, DemoSpecialty	2	2	\$2,092	\$680	67.50%	19.50%	48.00%	
Levels (4)	Excluded as DemoSpecialty	3,106	2,430	\$18,634,980	\$15,220,818	18.32%	19.50%	-1.18%	
+ 0 ∨	Excluded as DemoVaccine	8,158	7,634	\$257,718	\$160,567	37.70%	19.50%	18.20%	
_	RetailBrand90	4,550	3,066	\$3,955,651	\$3,067,194	22.46%	23.00%	-0.54%	
1 Main Report (2) >	Included	4,550	3,066	\$3,955,651	\$3,067,194	22.46%	23.00%	-0.54%	
2 Sub Report (7) >	Standard	4,550	3,066	\$3,955,651	\$3,067,194	22.46%	23.00%	-0.54%	
3 Exclusion Summary (2) >	Excluded	148	120	\$1,038,673	\$601,856	42.06%	23.00%	19.06%	
4 Exclusion Detail (10) >	Excluded as DemoCOBIND	10	6	\$9,388	\$1,202	87.19%	23.00%	64.19%	
- Exclusion Settin (10)	Excluded as DemoCompound	40	40	\$215,493	\$2,015	99.07%	23.00%	76.07%	
Fields (13)	Excluded as DemoSpecialty	98	74	\$813,792	\$598,639	26.44%	23.00%	3.44%	
	RetailGeneric30	392,814	323,706	\$41,573,578	\$5,925,135	85.75%	84.00%	1.75%	
Layout	Included	392,814	323,706	\$41,573,578	\$5,925,135	85.75%	84.00%	1.75%	
PBM Performance for Payer	Standard	392,814	323,706	\$41,573,578	\$5,925,135	85.75%	84.00%	1.75%	

Beyond the summary, OnX also provides a full detail view of exclusions for any contractual line items. This is extremely helpful in determining future areas of improvement or 'games' being played.





# Thank you!

**Brandon Kessler** 

**Principal** 

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#### **Caveats**

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