Dear Clinic Administrator or Medical Director,

Comagine Health is pleased to release its sixth round of Clinic Comparison Reports. As a reminder, the goal of the Clinic Comparison Report is to demonstrate clinic variation in cost and quality compared to a state average. This report displays information based on claims data for commercial patients attributed to a primary care clinic. The report includes:

- Cost, resource utilization, and Price Index at the clinic level for the 2018 commercial population.
- Detail for inpatient, outpatient, professional and pharmacy claims.
- A statewide average for all measures.

Some key findings from SAMPLE CLINIC ABC's report:

Risk Score



The Clinic Risk Score represents the morbidity burden of a subset of patients in your clinic. Comagine Health uses the Johns Hopkins Adjusted Clinical Groups (ACG) System which measures morbidity burden based on disease patterns, age and gender using diagnoses found in claims data.

Summary by Service Category

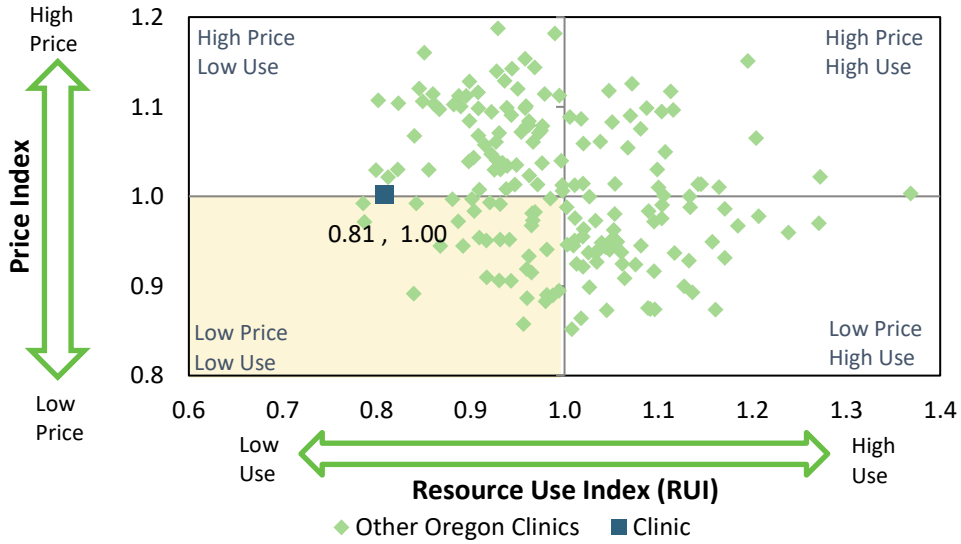
	TCI	=	RUI	x	Price Index
Professional	**1.00**		1.01		0.99
Outpatient Facility	**0.53**		0.53		1.01
Inpatient Facility	**0.65**		0.66		0.99
Pharmacy	**0.89**		0.86		1.03
Overall	**0.81**		0.81		1.00

A Total Cost Index, Price Index or Resource Use Index value greater than 1.00 means the clinic's score is higher than the Oregon average score for the measure.

For more information see the Total Cost of Care Definitions page.

Price vs. Resource Use Comparison

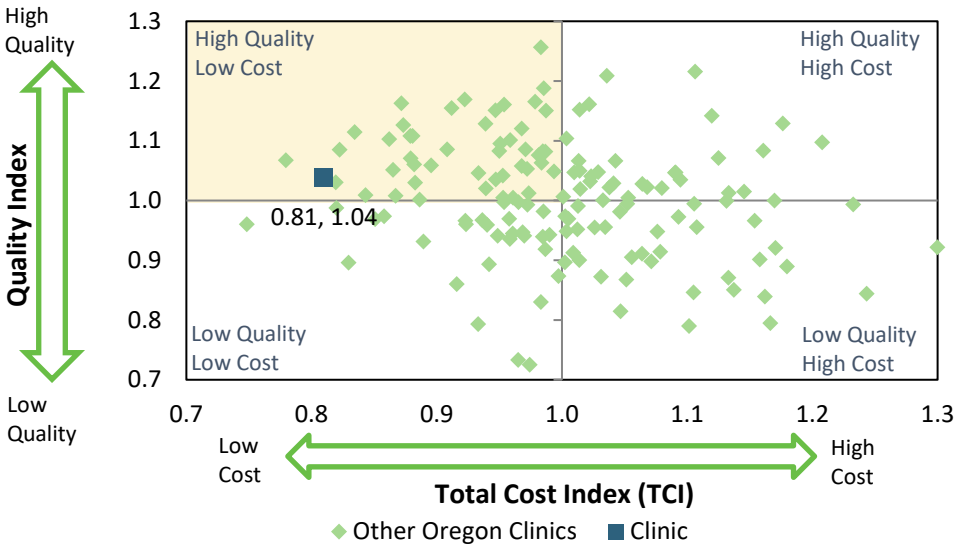
This chart shows the two components of the Total Cost Index: the Resource Use Index (RUI) and the Price Index. Your clinic's price and resource use are compared to other clinics across Oregon. Clinics that are lower in price and resource use appear in the lower left quadrant.



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Quality vs. Total Cost Comparison

This chart shows your clinic's Quality Composite and total cost compared to other clinics across Oregon. Clinics that are higher in quality and lower in price appear in the upper left quadrant. See the Clinic Comparison Report FAQs for how Comagine Health calculates the Quality Composite and Total Cost of Care indices.



This report is based on HealthPartners' cost of care measures, which have been endorsed by the National Quality Forum (NQF) for commercial populations. For more information on the measure, see the Definitions page and the Frequently Asked Questions.

To ensure the reports are as useful as possible, Comagine Health will continue to solicit input regarding the content and format from stakeholders and partners. More information about Comagine Health's Cost of Care work can be found on our website at: http://q-corp.org/our-work/costofcare.

Questions? Please contact a member of the Cost of Care team at QCorpInfo@comagine.org or 503-972-7843.

Thank you,

Meredith Roberts
Executive Director, Comagine Health Oregon

Comagine Health (formerly Q Corp and HealthInsight Oregon) is a national, nonprofit, health care consulting firm. We work collaboratively with patients, providers, payers and other stakeholders to reimagine, redesign and implement sustainable improvements in the health care system. As a trusted, neutral party, we work in our communities to address key, complex health and health care delivery problems.

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SAMPLE CLINIC ABC

Adult Clinic Comparison Report: Quality, Utilization & Cost

Segment: Commercially Insured Adults Age 18-64
Reporting Period: Jan 2018 – Dec 2018

Total Cost of Care Definitions & Glossary Page 1

About this report

This report shows clinic-specific data on cost, utilization, quality and resource use measures, comparing your clinic to others in Oregon.

Patient Population: Cost and utilization reports use Comagine Health's commercially insured adult (18-64) population for claims incurred January 1, 2018 – December 31, 2018 with 3 months run-out. Annual costs over $125,000 for any individual patient are excluded. Other quality and resource use measures use Comagine Health's commercially insured population in its entirety for the same pe riod.

Patient Attribution: Patients are assigned to a primary care provider (PCP) contained in the Comagine Health provider directory based on having sp ecific types of primary care visits with that PCP. PCPs and their patients are then assigned to a clinic. Attribution to a PCP is based on the following:

- A patient is attributed to the PCP the patient has seen the most across the two-year attribution period (January 1, 2017 – December 31, 2018).
- A patient is attributed to a single PCP. If there is a tie in the number of visits, the patient will be attributed to the most recently seen PCP.
- Patients who received care solely from specialists, urgent care clinics or other providers not included in the provider directory are not assigned a primary care provider (*unattributed*). In addition, if a patient did not have one of the specific types of visits based on CPT codes, the patient is not attributed.

Overall Summary by Service Category for SAMPLE CLINIC ABC

	Clinic		OR Average				
	Raw PMPM	**Adj PMPM**	PMPM	**TCI**	= RUI	x Price Index
Professional	**$265.66**	**$225.09**	$225.42	**1.00**	1.01	0.99
Outpatient Facility	**$87.30**	**$73.97**	$139.44	**0.53**	0.53	1.01
Inpatient Facility	**$59.84**	**$50.70**	$77.67	**0.65**	0.66	0.99
Pharmacy	**$116.79**	**$98.95**	$111.48	**0.89**	0.86	1.03
Overall	**$529.59**	**$448.71**	$554.00	**0.81**	0.81	1.00

See Definitions Page 2 for a description of Service Categories (Professional, Outpatient Facility, etc)

Raw PMPM: Raw Per Member Per Month (PMPM) is the total allowed amount (payments from the health plan and the member combined) paid to the clinic for all attributed patients, divided by the number of member months. Annual per member costs are capped at $125,000.

Adj PMPM: Adjusted PMPM is the clinic's retrospective risk-adjusted PMPM allowed amount, normalized to the Oregon average. Comagine Health uses the Johns Hopkins ACG System which groups patient populations by disease pattern, age and gender. The risk-adjusted amount allows comparison to other clinics regardless of a clinic's illness burden. If the Adjusted PMPM is higher than the Raw PMPM, that indicates that the clinic has a panel with a lower illness burden than the Oregon average.

Risk Adjusted PMPM = Raw PMPM / Risk Score

OR Average: The Oregon average is the average of all patients in the peer group, in this case commercial patients in Oregon between the ages of 18 and 64 who have been attributed to a clinic receiving these reports. OR Average is shown in comparison to the clinic's adjusted PMPM.

Price Index: Price Index is a risk-adjusted measure of the *price component* of managing patient health relative to the Oregon Average. The Price Index is affected by fee schedules, referral patterns and place of service.

Price Index = TCI / RUI

RUI: Resource Use Index (RUI) is a risk-adjusted measure of the *frequency and intensity* of the services used to manage patient health relative to a benchmark. RUIs are calculated based on standard weights for each service in a service category:

Inpatient: MS-DRG (Medicare Diagnosis-Related Grouper)
Outpatient: APC (Ambulatory Payment Classification)
Professional: RVU (Relative Value Units)
Pharmacy: NDC (National Drug Code) Average Wholesale Price

TCI: Total Cost Index (TCI) is a risk-adjusted measure of the *overall cost effectiveness* of managing patient health relative to the Oregon average. This measure includes both the frequency and price of services provided.

OR Average is the average for the patients attributed to clinics receiving these reports.

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Total Cost of Care Definitions & Glossary Page 2

Service Category Definitions

Professional: Includes all costs for professional services delivered in any setting; inpatient, outpatient, or in a clinic, lab, or imaging center. It also includes ancillary services (lab, radiology, DME, etc.) delivered outside a hospital facility.
Outpatient Facility: Includes only services billed by a hospital facility. Professional services for surgeons, hospitalists or other providers billed by a medical group are included in the Professional Service Category.
Inpatient Facility: Includes only services billed by a hospital facility. Professional services that are billed by a medical group are included in the Professional Service Category.
Pharmacy: Includes all drugs covered by the patient's pharmacy benefit.

PMPM: Per Member Per Month (PMPM) refers to the ratio of some services or cost divided into the number of members in a particular group on a monthly basis. For example, if an HMO has 10,000 members that spend $20,000 on cardiovascular surgery in one month, the cost on a PMPM basis would be $20,000 divided by 10,000 equaling $2 per member per month.

Specialist Services: All services, including office visits and procedures, provided by a specialist.

TCI, RUI and Price Index: Oregon averages for TCI, Price Index and RUI are set at 1.0. The Oregon average is the average score for all patients attributed for clinics receiving these reports. A clinic's score indicates to what extent the attributed patients differ from the Oregon average. Values below 1.0 indicate the clinic's panel has lower cost or resource use than average; above 1.0 means the clinic's panel is higher than average.

Clinic Comparison Report Glossary

APC:	Ambulatory Payment Classification
CT:	Computed Tomography
DME:	Durable Medical Equipment
DNRI:	Dopamine & Norepinephrine Reuptake Inhibitor
ED:	Emergency Department
HbA1c:	Hemoglobin A1c
MRI:	Magnetic Resonance Imaging
MS- DRG:	Medicare Diagnosis Related Grouper
NDC:	National Drug Code
OT:	Occupational Therapy
PET:	Positron Emission Tomography
PMPM:	Per Member Per Month
PT:	Physical Therapy
RVU:	Relative Value Units
ST:	Speech Therapy
SSRI:	Selective Serotonin Reuptake Inhibitor

MS-DRG: The Medicare Diagnosis Related Grouper (MS-DRG) is a statistical system of classifying any inpatient stay into groups for the purposes of payment. The DRG classification system divides possible diagnoses into more than 20 major body systems and subdivides them into almost 500 groups for the purpose of Medicare reimbursement.
APC: The Ambulatory Payment Classification (APC) is a system for reimbursing acute care facilities (hospitals) for outpatient services for Medicare patients.
RVU: Relative Value Units (RVUs) are units assigned to individual CPT codes which, when multiplied by a conversion factor and geographical adjustment, creates the compensation level for a particular service.
NDC: The National Drug Code (NDC) is a unique product identifier used in the United States for drugs intended for human use.

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SAMPLE CLINIC ABC

Adult Clinic Comparison Report: Quality, Utilization & Cost

Segment: Commercially Insured Adults Age 18-64
Reporting Period: Jan 2018 – Dec 2018

Overview

Patient Demographics

	Clinic		Oregon Average Scaled to Clinic's size	
	Number	**Percent**	**Number**	**Percent**
Attributed patients (Benchmark is average number per clinic)	**2,639**		2,639	
Average Age (approximate)	**48**		44	
% Male	**1,151**	**43.6%**	1,156	43.8%
% Female	**1,488**	**56.4%**	1,483	56.2%
No Chronic Condition Indicated	**1,387**	**52.6%**	1,386	52.5%
Chronic Condition - patients may have more than one	**1,252**	**47.4%**	1,253	47.5%
Acute Myocardial Infarction	**4**	**0.2%**	5	0.2%
Alzheimer's Disease and Related Disorders or Senile Dementia	**8**	**0.3%**	4	0.2%
Asthma	**69**	**2.6%**	82	3.1%
Atrial Fibrillation	**19**	**0.7%**	20	0.7%
Cancer	**114**	**4.3%**	102	3.9%
Chronic Kidney Disease	**83**	**3.1%**	113	4.3%
Chronic Obstructive Pulmonary Disease and Bronchiectasis	**16**	**0.6%**	21	0.8%
Depression	**408**	**15.5%**	432	16.4%
Diabetes	**114**	**4.3%**	171	6.5%
Heart Failure	**14**	**0.5%**	16	0.6%
Hyperlipidemia	**443**	**16.8%**	458	17.4%
Hypertension	**411**	**15.6%**	473	17.9%
Ischemic Heart Disease	**109**	**4.1%**	55	2.1%
Mental Illness	**99**	**3.8%**	105	4.0%
Osteoporosis	**49**	**1.9%**	24	0.9%
Rheumatoid Arthritis/ Osteoarthritis	**284**	**10.8%**	214	8.1%
Stroke / Transient Ischemic Attack	**6**	**0.2%**	7	0.3%

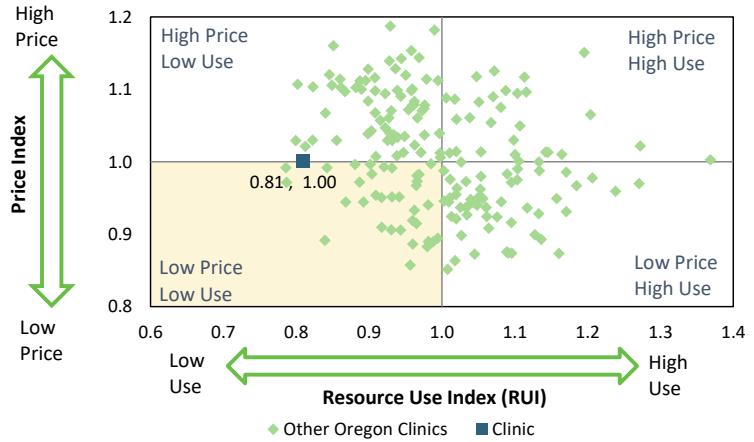
Overall Summary by Service Category

	Clinic Raw PMPM	Clinic Adj PMPM	OR Average PMPM	TCI	= RUI	x Price Index
Professional	**$265.66**	**$225.09**	$225.42	**1.00**	1.01	0.99
Outpatient Facility	**$87.30**	**$73.97**	$139.44	**0.53**	0.53	1.01
Inpatient Facility	**$59.84**	**$50.70**	$77.67	**0.65**	0.66	0.99
Pharmacy	**$116.79**	**$98.95**	$111.48	**0.89**	0.86	1.03
Overall	**$529.59**	**$448.71**	$554.00	**0.81**	0.81	1.00

Blue highlight indicates index values 10% or more above the Oregon Average.

A TCI, RUI or Price Index value greater than 1.00 means the clinic's score is higher than the Oregon adult average score for the measure.

Price vs. Resource Use Comparison by Clinic



OR Average is the average for the patients attributed to clinics receiving these reports.

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SAMPLE CLINIC ABC

Adult Clinic Comparison Report: Quality, Utilization & Cost

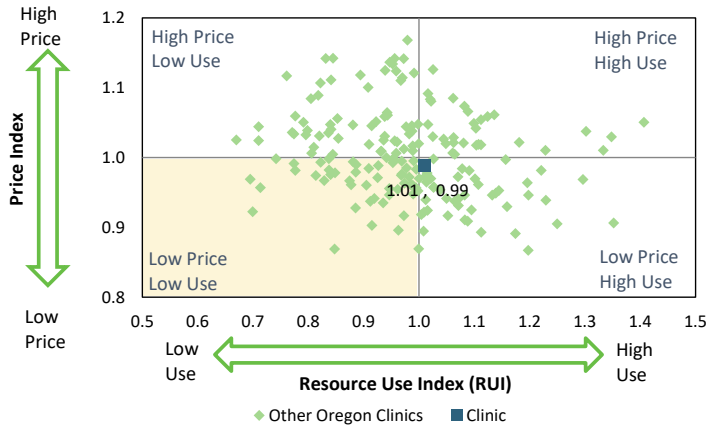
Segment: Commercially Insured Adults Age 18-64
Reporting Period: Jan 2018 – Dec 2018

Professional Services

Professional PMPM by Service Category

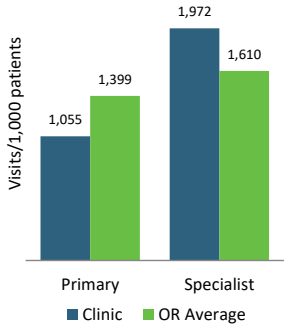
	Clinic Adj PMPM	OR Average PMPM	TCI	= RUI	Price x Index
Evaluation & Management	**$50.64**	$57.57	**0.88**	0.87	1.01
Surgery & Anesthesia	**$34.37**	$36.82	**0.93**	0.91	1.03
Preventive Screenings	**$11.93**	$12.47	**0.96**	1.07	0.89
Physical Therapy & Rehab	**$15.04**	$11.79	**1.28**	1.33	0.96
Lab & Pathology	**$11.34**	$10.13	**1.12**	1.17	0.96
Preventive Visits	**$9.60**	$9.59	**1.00**	1.04	0.96
Psychiatric Visits	**$9.24**	$9.23	**1.00**	0.88	1.13
Endoscopic Procedures	**$5.61**	$6.02	**0.93**	0.85	1.09
Advanced Imaging	**$8.12**	$5.11	**1.59**	1.67	0.95
Emergency Dept. Visits	**$6.60**	$4.63	**1.42**	0.90	1.58
Echography	**$4.33**	$4.01	**1.08**	1.18	0.92
Oncology & Chemotherapy	**$0.61**	$3.26	**0.19**	0.19	0.99
Standard Imaging	**$4.49**	$2.94	**1.53**	1.56	0.98
Durable Medical Equipment	**$1.30**	$2.58	**0.51**	0.60	0.84
Chiropractic Treatments	**$2.40**	$2.54	**0.94**	0.97	0.97
Preventive Vaccinations	**$1.42**	$1.87	**0.76**	0.74	1.03
Cardiac Imaging & Tests	**$1.30**	$1.02	**1.27**	1.24	1.02
Consultations	**$0.01**	$0.25	**0.04**	0.09	0.43
Dialysis	**$0.00**	$0.12	-	-	-
Other Professional Services	**$46.75**	$43.47	**1.08**	1.12	0.96
Total	**$225.09**	$225.42	**1.00**	1.01	0.99

Professional Price vs. Resource Use Comparison by Clinic

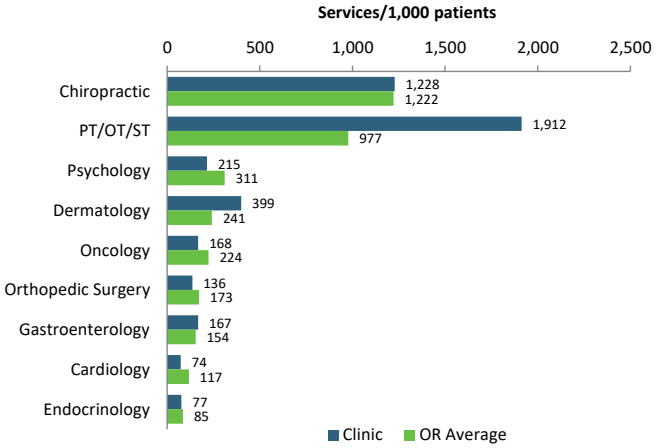


Primary and Specialty Care Utilization:

Evaluation & Management *



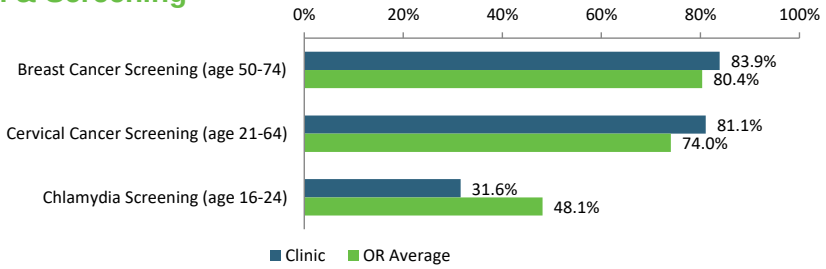
Specialist Services, Top Categories *



Note: Specialist utilization can be driven by a clinic's patient population. A higher risk score can drive higher utilization of specialists.

Prevention & Screening

(higher is better)



Professional Services includes all costs for professional services delivered in any setting: inpatient, outpatient, or in a clinic, lab, or imaging center. It also includes ancillary services (lab, radiology, DME, etc.) delivered outside of a hospital facility.

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Adult Clinic Comparison Report: Quality, Utilization & Cost

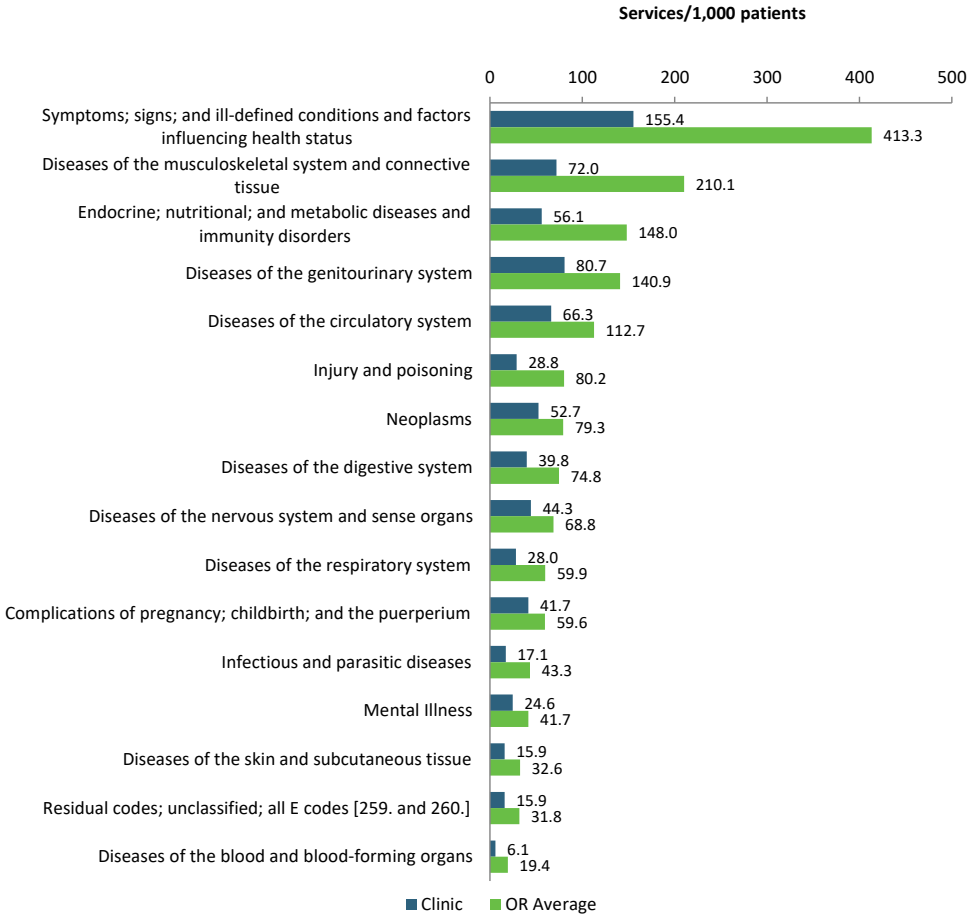
Segment: Commercially Insured Adults Age 18-64
Reporting Period: Jan 2018 – Dec 2018

Outpatient Facility

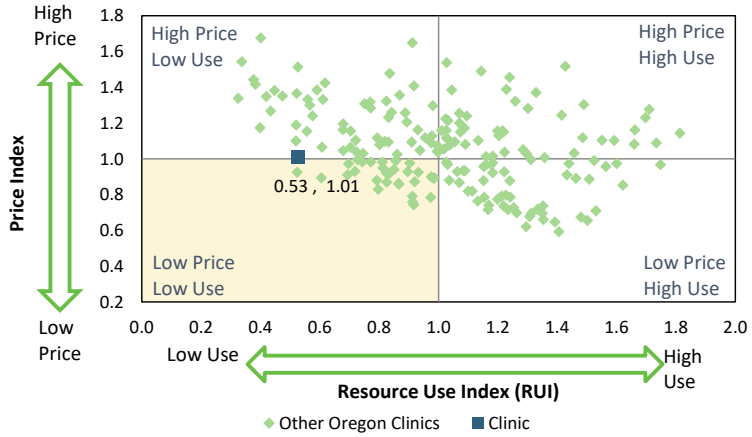
Outpatient Facility PMPM by Service Category

	Clinic Adj PMPM	OR Average PMPM	TCI	= RUI	x Price Index
Operating Room	**$23.93**	$39.67	**0.60**	0.74	0.82
Emergency Dept. Visits	**$12.15**	$18.35	**0.66**	0.62	1.07
Lab & Pathology	**$4.51**	$9.55	**0.47**	0.50	0.95
Advanced Imaging	**$3.81**	$8.44	**0.45**	0.45	1.00
Surgery & Anesthesia	**$4.10**	$7.11	**0.58**	0.83	0.70
Preventive Screenings	**$0.89**	$6.82	**0.13**	0.18	0.74
Physical Therapy & Rehab	**$0.82**	$4.83	**0.17**	0.20	0.85
Oncology & Chemotherapy	**$1.40**	$4.82	**0.29**	0.31	0.93
Cardiac Imaging & Tests	**$2.17**	$3.92	**0.55**	0.61	0.91
Echography	**$1.08**	$3.20	**0.34**	0.31	1.10
Evaluation & Management	**$0.93**	$3.07	**0.30**	0.46	0.65
Standard Imaging	**$0.69**	$2.75	**0.25**	0.20	1.29
Dialysis	**$0.00**	$1.78	**-**	-	-
Endoscopic Procedures	**$0.25**	$1.64	**0.15**	0.15	1.04
Psychiatric Visits	**$0.58**	$0.53	**1.10**	1.01	1.10
Other Outpatient Facility	**$16.65**	$22.96	**0.73**	0.39	1.88
Total	**$73.97**	$139.44	**0.53**	0.53	1.01

Outpatient Facility Visits: Clinical Classifications (CCS) *



Outpatient Price vs. Resource Use Comparison by Clinic



Outpatient Facility includes only services billed by a hospital facility. Professional services for surgeons, hospitalists or other providers billed by a medical group are included in the Professional Service Category.

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Radiology & Emergency

Radiology (Outpatient Facility and Professional Services)

	Clinic Adj PMPM	OR Average PMPM	TCI	= RUI	x Price Index
Advanced Imaging (e.g., MRI, CT, PET)	**$11.93**	$13.55	**0.88**	1.13	0.78
Echography	**$5.41**	$7.21	**0.75**	0.92	0.81
Standard Imaging	**$5.19**	$5.69	**0.91**	1.26	0.73
Cardiac Imaging & Tests	**$3.47**	$4.94	**0.70**	0.77	0.91

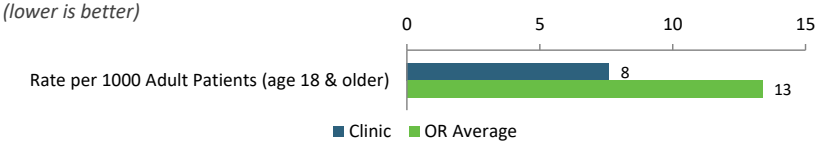
Emergency Department Utilization *

(lower is better)

	Clinic	OR Average
ED Visits/1000 patients	**111.4**	141.6

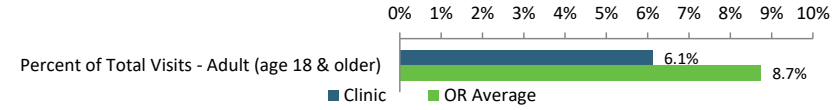
Rate per 1000 of Potentially Avoidable ED Visits

(lower is better)



Potentially Avoidable ED Visits, % of Total ED Visits

(lower is better)



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Segment: Commercially Insured Adults Age 18-64
Reporting Period: Jan 2018 – Dec 2018

Inpatient Cost & Utilization

Inpatient PMPM by Service Category

	Clinic Adj PMPM	OR Average PMPM		TCI	=	RUI	x	Price Index
Acute Admissions	**$50.49**	$76.77		**0.66**	=	0.66	x	0.99
Surgical	**$31.82**	$51.00		**0.62**	=	0.62	x	1.00
Medical	**$18.68**	$25.77		**0.72**	=	0.73	x	0.99
Non-Acute	**$0.21**	$0.89		**0.23**	=	0.23	x	1.00
All Admissions	**$50.70**	$77.67		**0.65**	=	0.66	x	0.99

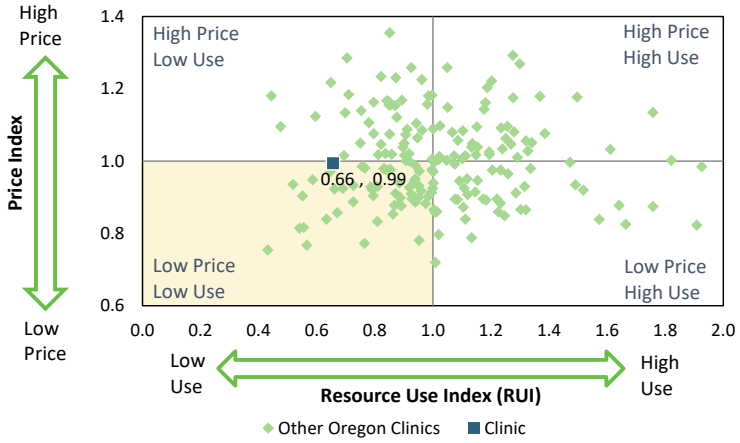
Inpatient Utilization *

(lower is better)

	Clinic	OR Average
Admits/1,000 Patients (Acute & Non-Acute)	**30.3**	40.1
30-day all cause readmissions, unadjusted	**12.9%**	7.0%

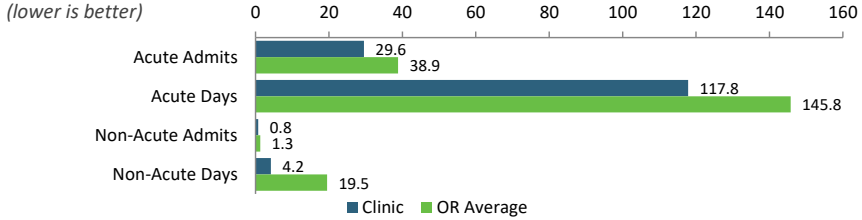
Note: Non-Acute Admissions are admission to and services provided in a Skilled Nursing, Subacute, or Rehabilitation Facility.

Inpatient Price vs. Resource Use Comparison by Clinic



Admissions & Inpatient Days per 1,000 Patients *

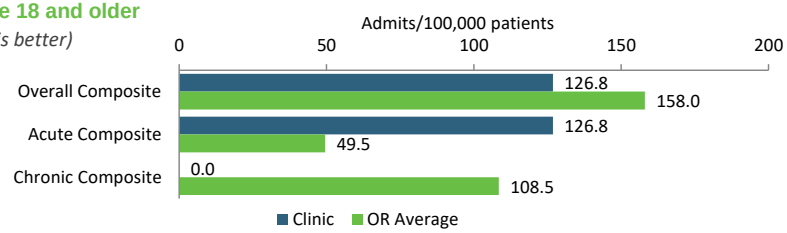
(lower is better)



Potentially Avoidable Hospital Admissions *

Age 18 and older

(lower is better)



Inpatient Facility includes only services billed by a hospital facility. Professional services that are billed by a medical group are included in the Professional Service Category.

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Adult Clinic Comparison Report: Quality, Utilization & Cost

Segment: Commercially Insured Adults Age 18-64
Reporting Period: Jan 2018 – Dec 2018

Chronic Conditions

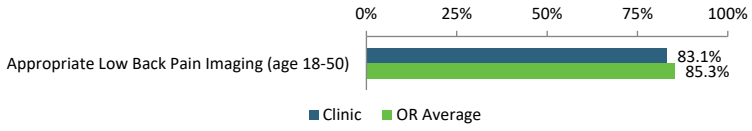
Chronic Condition Patient Summary

	Clinic		OR Average			
	Patients	Adj PMPM	PMPM	TCI	= RUI	x Price Index
Acute Myocardial Infarction	**4**	**-**	$4,429	**-**	-	-
Alzheimer's Disease and Related Disorders or Senile Dementia	**8**	**-**	$2,332	**-**	-	-
Asthma	**69**	**$901**	$1,478	**0.61**	1.07	0.57
Atrial Fibrillation	**19**	**-**	$2,203	**-**	-	-
Cancer	**114**	**$953**	$1,517	**0.63**	1.00	0.63
Chronic Kidney Disease	**83**	**$966**	$1,715	**0.56**	0.71	0.79
Chronic Obstructive Pulmonary Disease and Bronchiectasis	**16**	**-**	$1,980	**-**	-	-
Depression	**408**	**$782**	$907	**0.86**	1.26	0.68
Diabetes	**114**	**$779**	$1,238	**0.63**	0.63	1.00
Heart Failure	**14**	**-**	$2,946	**-**	-	-
Hyperlipidemia	**443**	**$805**	$902	**0.89**	1.31	0.68
Hypertension	**411**	**$728**	$1,006	**0.72**	1.10	0.66
Ischemic Heart Disease	**109**	**$955**	$1,870	**0.51**	0.83	0.62
Mental Illness	**99**	**$771**	$991	**0.78**	1.07	0.73
Osteoporosis	**49**	**$1,040**	$1,287	**0.81**	1.02	0.79
Rheumatoid Arthritis/ Osteoarthritis	**284**	**$1,021**	$1,451	**0.70**	1.06	0.66
Stroke / Transient Ischemic Attack	**6**	**-**	$3,341	**-**	-	-

Note: The Chronic Condition Patient Summary is limited to conditions with 30 or more attributed patients. For conditions with less than 30 patients, cost information is suppressed.

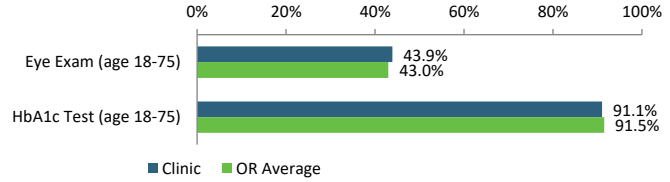
Musculoskeletal Conditions

(higher is better)



Comprehensive Diabetes Care

(higher is better)



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SAMPLE CLINIC ABC

Adult Clinic Comparison Report: Quality, Utilization & Cost

Segment: Commercially Insured Adults Age 18-64
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Pharmacy

Pharmacy by Category

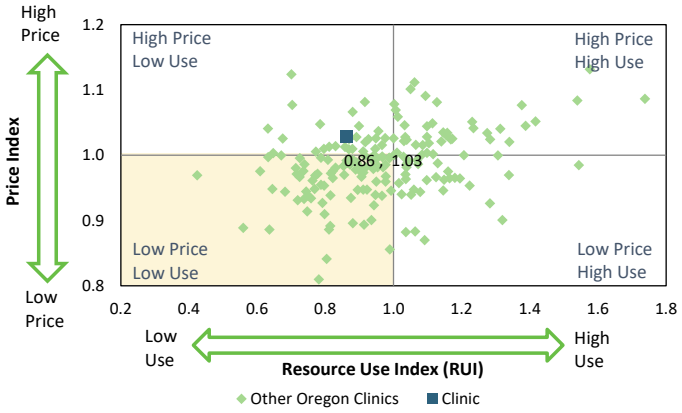
	Clinic Adj PMPM	OR Average PMPM	TCI	=	RUI	Price x Index
Single-source Brand	**$64.83**	$78.41	**0.83**		0.80	1.03
Generic	**$22.03**	$19.52	**1.13**		0.97	1.17
Multi-source Brand	**$12.09**	$13.55	**0.89**		0.87	1.02
Total	**$98.95**	$111.48	**0.89**		0.86	1.03

Single Source Brand: A prescription drug manufactured by only one company. No generic equivalent is available.
Multi-Source Brand: A prescription drug that is manufactured by more than one manufacturer. These drugs are available both as a brand-name and as a generic.

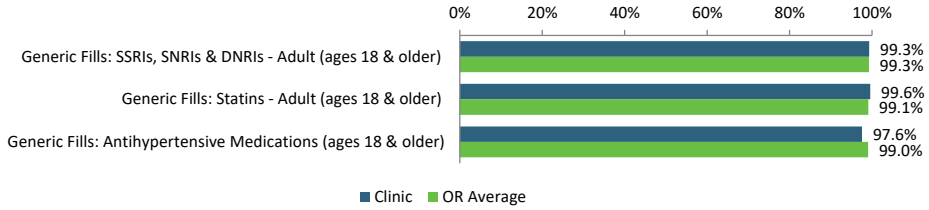
Top 10 Therapeutic Classes with % Generic Fills

	Clinic Adj PMPM	Clinic % Generic	OR Average PMPM	OR Average % Generic	TCI	=	RUI	Price x Index
Immunosuppressants	**$25.56**	**30%**	$27.66	32%	**0.92**		0.91	1.02
Hormones & Synthetic Subst.	**$19.49**	**65%**	$23.89	60%	**0.82**		0.79	1.03
Central Nervous System Agents	**$14.79**	**94%**	$11.96	97%	**1.24**		1.11	1.12
Anti-Infective Agents	**$2.72**	**99%**	$11.13	95%	**0.24**		0.31	0.80
Misc. Pharmacotherapy Agents	**$9.68**	**80%**	$10.05	81%	**0.96**		0.98	0.98
Unknown Therapeutic Class	**$3.94**	**87%**	$4.14	87%	**0.95**		0.90	1.06
Cardiovascular Agents	**$5.88**	**98%**	$3.88	98%	**1.51**		1.12	1.36
Autonomic Drugs	**$2.56**	**77%**	$3.56	69%	**0.72**		0.76	0.95
Antineoplastic Agents	**$3.96**	**97%**	$3.48	93%	**1.14**		0.64	1.77
Skin & Mucous Membrane Agents	**$2.45**	**92%**	$2.37	93%	**1.03**		1.02	1.02

Pharmacy Price vs. Resource Use Comparison by Clinic



Medication Management



Pharmacy includes all drugs covered by the patient's pharmacy benefit.

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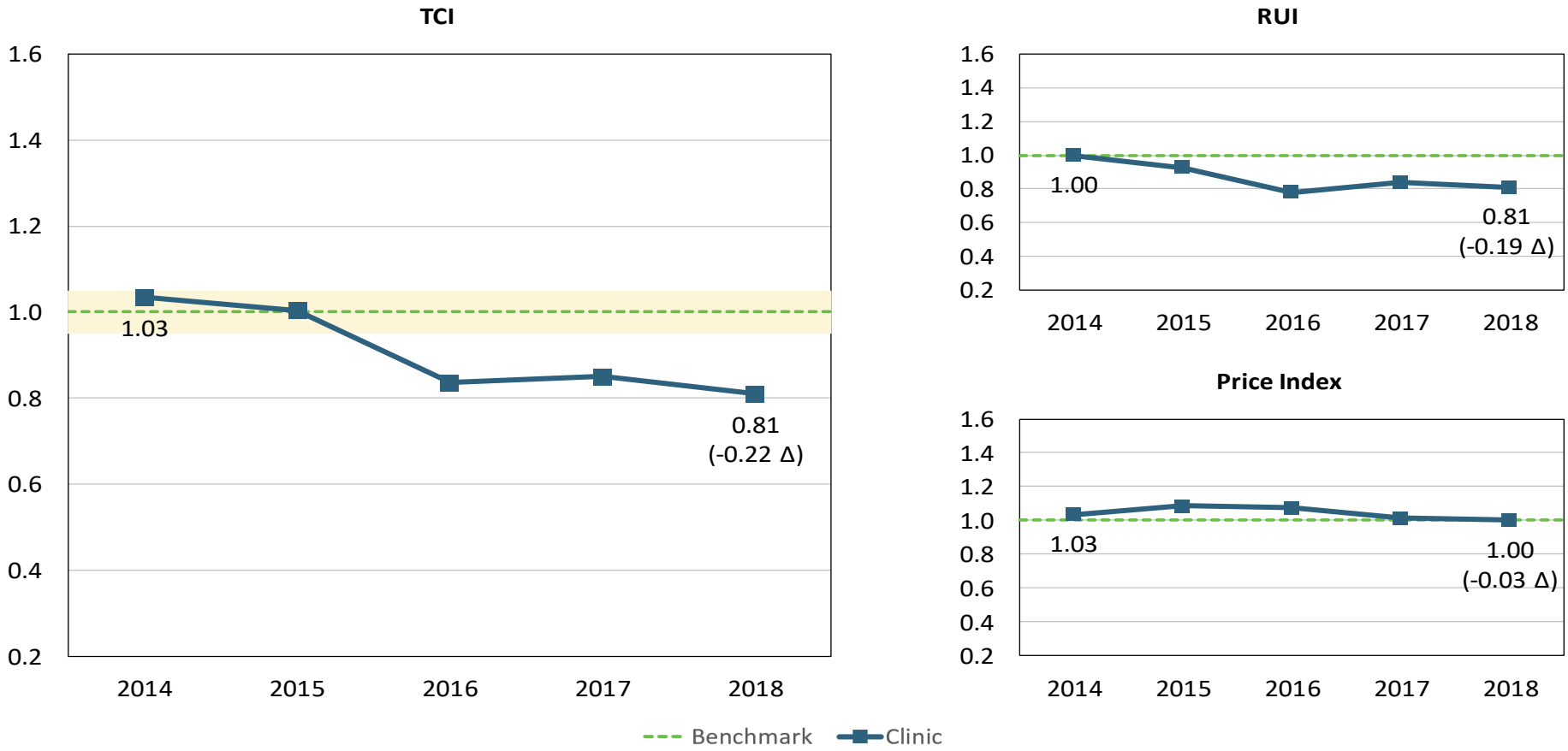
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Adult Clinic Comparison Report: Quality, Utilization & Cost

Segment: Commercially Insured Adults Age 18-64
Reporting Period: Jan 2018 – Dec 2018

Trends Page 1

Overall



	Overall			Professional			Outpatient			Inpatient			Pharmacy		
Year	TCI	RUI	Price Index	TCI	RUI	Price Index	TCI	RUI	Price Index	TCI	RUI	Price Index	TCI	RUI	Price Index
2014	1.03	1.00	1.03	1.10	1.10	1.00	0.76	0.82	0.93	1.32	1.13	1.16	1.04	0.94	1.11
2015	1.00	0.93	1.08	1.16	1.10	1.05	0.72	0.56	1.28	0.99	0.81	1.22	1.01	1.08	0.93
2016	0.84	0.78	1.07	1.05	0.99	1.06	0.58	0.49	1.17	0.59	0.54	1.09	0.85	0.85	1.00
2017	0.85	0.84	1.01	0.99	0.98	1.00	0.56	0.54	1.04	0.77	0.82	0.94	0.97	0.91	1.07
2018	0.81	0.81	1.00	1.00	1.01	0.99	0.53	0.53	1.01	0.65	0.66	0.99	0.89	0.86	1.03

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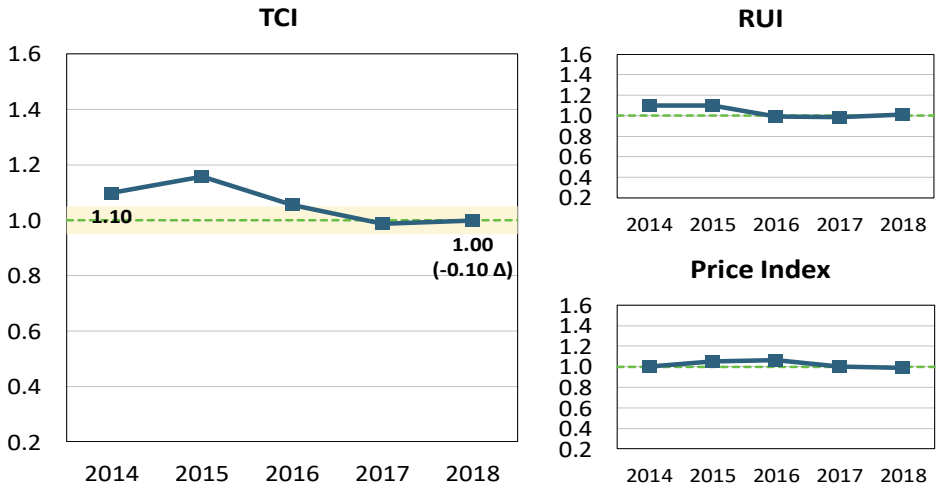
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Adult Clinic Comparison Report: Quality, Utilization & Cost

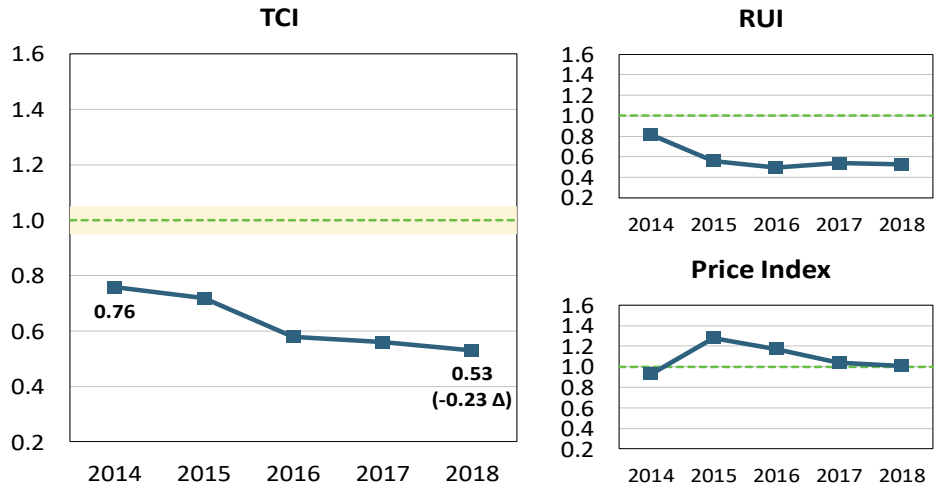
Segment: Commercially Insured Adults Age 18-64
Reporting Period: Jan 2018 – Dec 2018

Trends Page 2

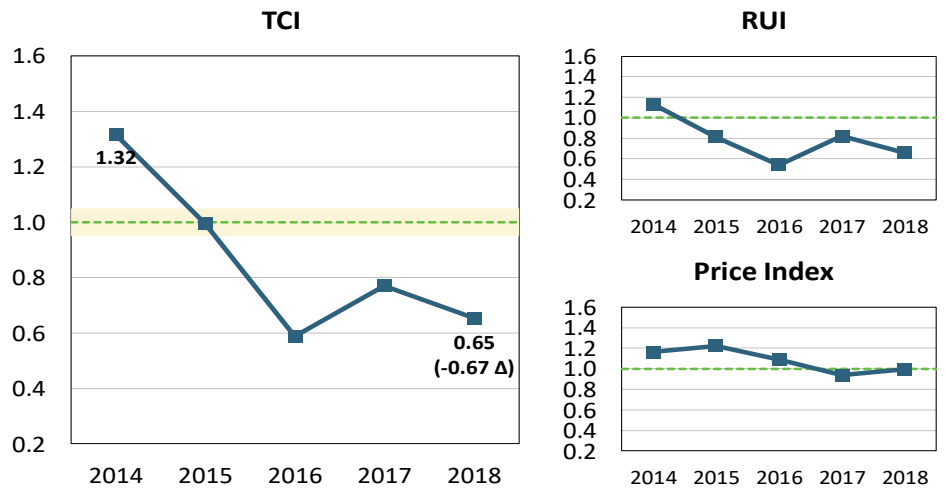
Professional



Outpatient

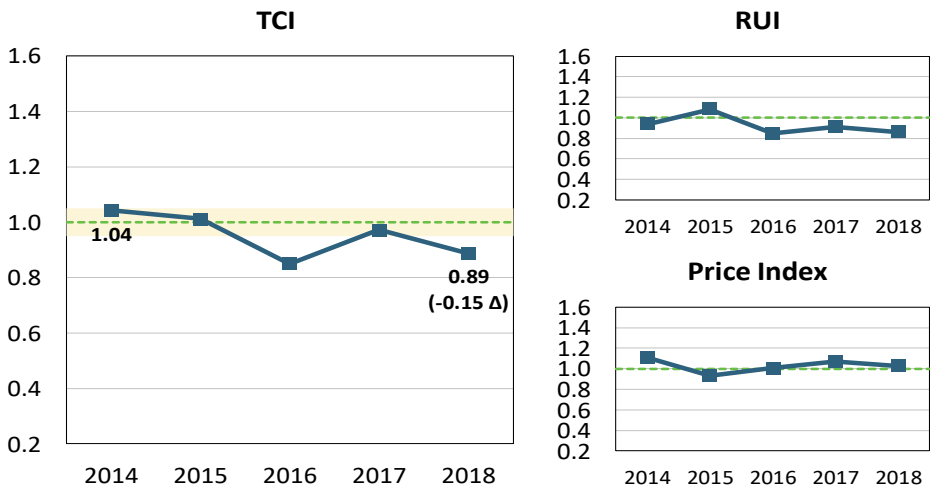


Inpatient



Benchmark Clinic

Pharmacy



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