

Outpatient Review

OEBB and PEBB Innovation Workgroup

Attachment No. 4

May 21, 2019



Introduction

This analysis follows the March Innovation Workgroup (IWG) report to take a more detailed look into areas driving outpatient and drug cost and use as well as follow-up information on specific conditions.

Areas of focus:

- Outpatient hospital drilldown
 - Overall utilization review
 - Facility costs
 - High-tech imaging
 - Drugs paid through the medical benefit
 - Top procedures
- Prescription drug drilldown — mail order, retail and specialty
- PEBB spine/back review by agency
- Spend stratification review
- Top condition review

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Introduction

Data for this analysis is on an incurred date basis using allowed costs. All data was pulled from the PEBB and OEGB IBM data warehouses.

	Current Period	Prior Period
PEBB	January '18 – December '18	January '17 – December '17
Total Allowed (Med + Rx)	\$922,162,316	\$878,010,895
Membership	135,069	135,427
Subscribers	51,339	51,198
Total PMPM	\$568.95	\$540.27
Risk Score	1.09	
OEGB	January '18 – December '18	January '17 – December '17
Total Allowed (Med + Rx)	\$758,865,782	\$732,414,153
Membership	156,082	153,364
Subscribers	65,126	63,691
Total PMPM	\$405.16	\$397.97
Risk Score	0.93	

Executive Summary

- Outpatient services in total represent about 2/3 of total medical and drug spend for both OEGB and PEBB
- From the March report, facility outpatient surgery and prescription specialty drugs were the largest components of trend
- This analysis reviews details of outpatient and drug spend spend that could potentially impact increases in these areas, focusing on:
 - Change in cost PMPM
 - Change in use per 1,000 members
 - Change in cost per service
 - Setting of care — balance of inpatient and outpatient services for specific areas where appropriate setting of care could be an issue
- At the IWGs request, this report also contains additional drill down from the March analysis on spine and back surgeries by agency for the PEBB population and condition analysis focusing on members with between \$20k and \$50k in cost

Executive Summary (Continued)

Topic	Finding	Recommendation
Overall balance between inpatient and outpatient services	Cost per unit is increasing for both inpatient and outpatient.	Review specific services in combination for outpatient and inpatient for provider differences.
OP High-Tech Imaging	Use is increasing while cost per service is decreasing for all but nuclear medicine.	Review specific nuclear medicine providers with largest cost per service.
Specialty pharmacy	Significant driver of pharmacy benefit trend, especially for PEBB.	Consider specific drugs provided through the medical benefit and whether there are savings opportunities. Further look at inpatient cost per service for PEBB.

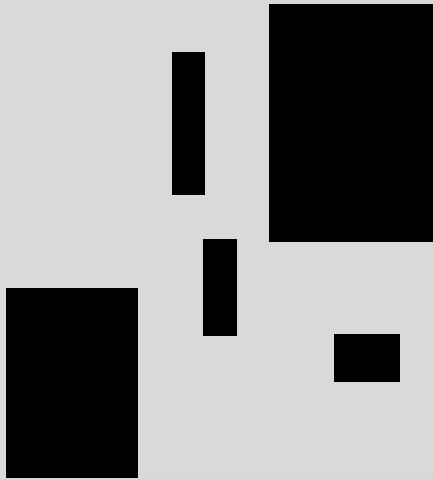
Executive Summary (Continued)

Topic	Finding	Recommendation
Chemotherapy	Most chemotherapy is performed in the outpatient setting. However cost per visit for chemo drugs has increased significantly, especially for PEB	Review specific chemo drugs to determine if there are cost savings opportunities.
Dialysis	Most dialysis is taking place in the outpatient setting. Cost and use changes are very moderate.	No further analysis.
Pharmacy	Mail order use has increased significantly for PEBB.	Investigate whether there are further cost savings opportunities by increasing use of mail order.

Executive Summary (Continued)

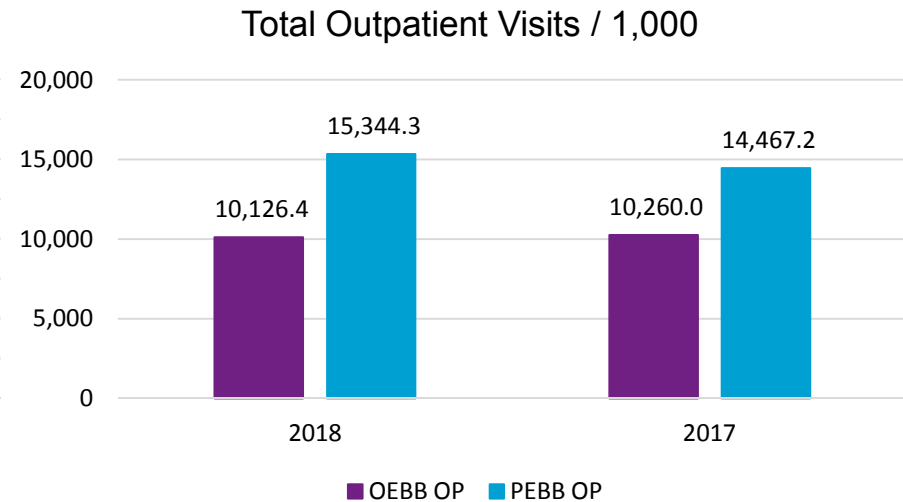
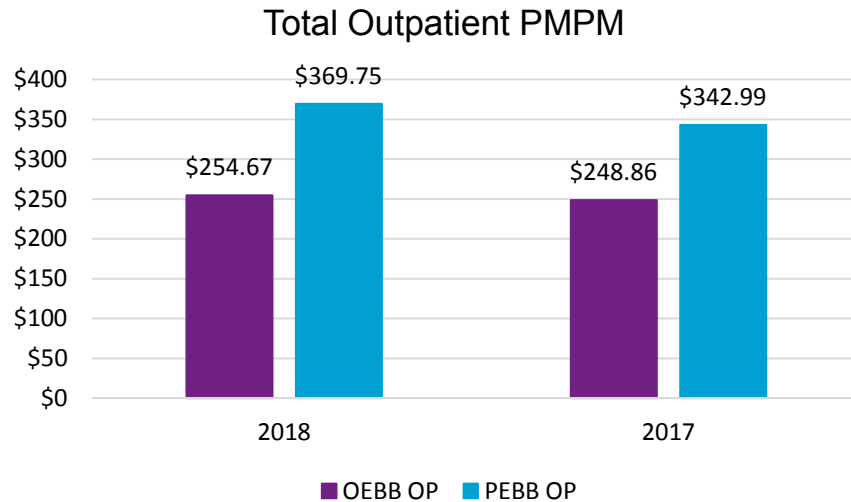
Topic	Finding	Recommendation
Conditions	Musculoskeletal, female genital procedures and major digestive have the highest PMPM cost increase.	Review service cost savings opportunities at the provider level.

Outpatient Review



Outpatient Costs

Total Outpatient



Observations

- Cost PMPM has increased 2.3% for OEBB and 7.8% for PEBB
- Utilization has decreased 1.3% for OEBB and increased 6.1% for PEBB
- Outpatient costs represent about 2/3 of total cost for both OEBB and PEBB
- PEBB outpatient utilization and costs are significantly higher than OEBB

Outpatient Costs

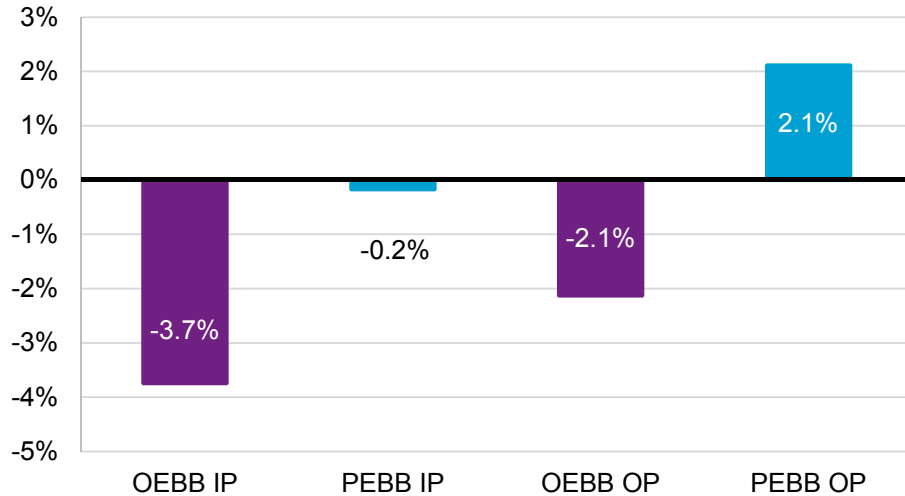
Total Outpatient (Continued)

OEBB	2018 Allowed	% of Total Allowed	PMPM	Visits	Visits / 1,000	2017 Allowed	% of Total Allowed	PMPM	Visits	Visits / 1,000
Outpatient Medical	\$476,989,710	62.9%	\$254.67	1,580,548	10,126	\$457,993,692	62.5%	\$248.86	1,573,518	10,260
YOY Change	4.1%		2.3%	0.4%	-1.3%					
PEBB	2018 Allowed	% of Total Allowed	PMPM	Visits	Visits / 1,000	2017 Allowed	% of Total Allowed	PMPM	Visits	Visits / 1,000
Outpatient Medical	\$582,100,464	63.1%	\$369.75	2,013,035	15,344	\$557,386,172	63.3%	\$342.99	1,959,186	14,467
YOY Change	4.4%		7.8%	2.7%	6.1%					

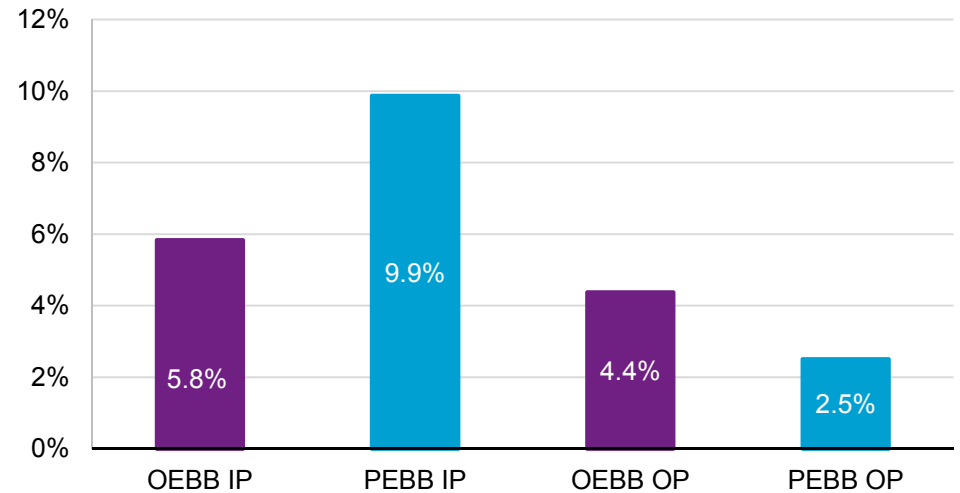
Hospital Aggregate Analysis

Cost and Utilization for IP and OP Facility

Change in admits / visits per 1,000



Change in cost per admit / visit



Observations

- Facility costs make up about 1/3 of total outpatient cost for both OEBB and PEBB
- PEBB has higher costs, higher utilization than OEBB. Both are increasing at a higher rate for PEBB than for OEBB.
- IP utilization is decreasing for both OEBB and PEBB
- OP utilization is decreasing for OEBB but increasing for PEBB

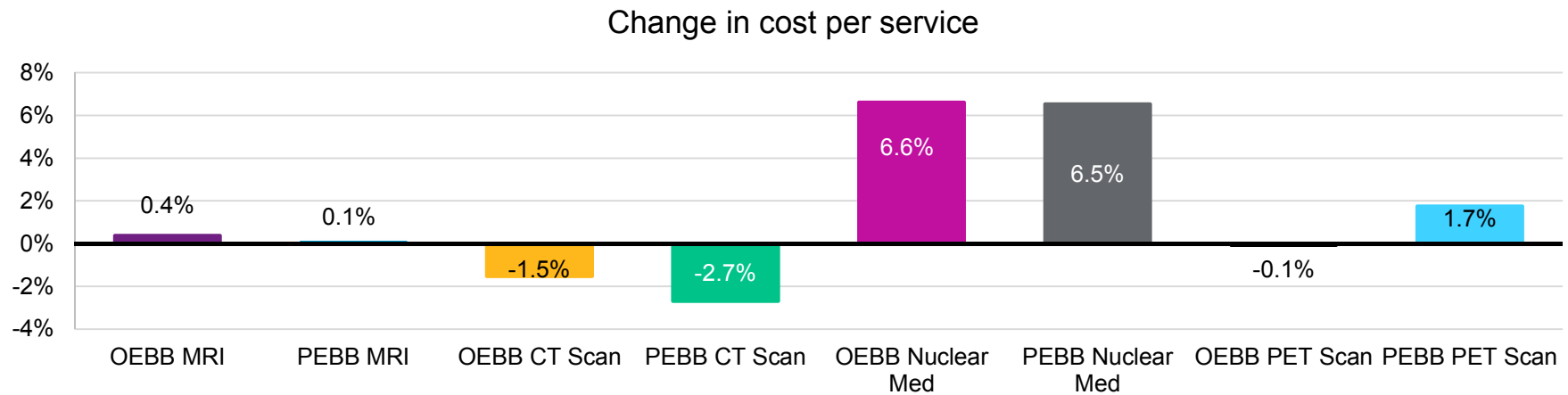
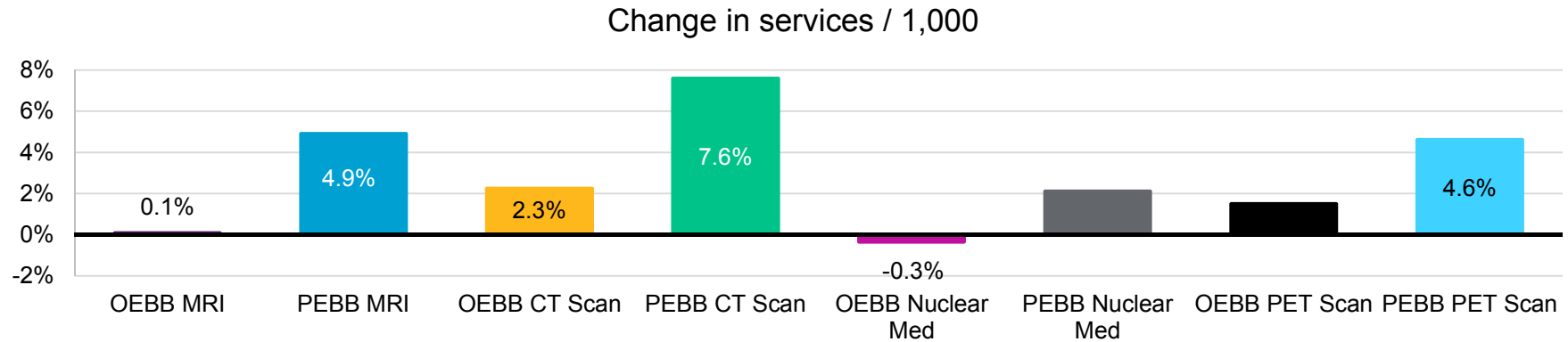
Hospital Aggregate Analysis

Cost and Utilization for IP and OP Facility (Continued)

OEBS	2018 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1,000	\$\$ / Admit (Visit)	2017 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1,000	\$\$ / Admit (Visit)
IP Medical	\$138,550,304	\$73.97	5,244	33.6	\$26,420.73	\$133,636,479	\$72.61	5,353	34.9	\$24,964.78
YOY Change		1.9%	-2.0%	-3.7%	5.8%					
OP Medical	\$163,506,701	\$87.30	83,088	532.3	\$1,967.87	157,274,383	\$85.46	83,414	543.9	\$1,885.47
YOY Change		2.2%	-0.4%	-2.1%	4.4%					
PEBS	2018 Allowed	PMPM	Admits/V isits	Admits (Visits) / 1,000	\$\$ / Admit (Visit)	2017 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1,000	\$\$ / Admit (Visit)
IP Medical	\$171,681,415	\$109.05	6,323	48.2	\$27,151.89	\$161,571,387	\$99.42	6,538	48.3	\$24,712.66
YOY Change		9.7%	-3.3%	-0.2%	9.9%					
OP Medical	\$184,969,220	\$117.49	109,586	835.3	\$1,687.89	182,425,789	\$112.26	110,783	818.1	\$1,646.69
YOY Change		4.7%	-1.1%	2.1%	2.5%					

Hospital Outpatient Drilldown

High-Tech Imaging



Observations

- High-Tech Imaging is 3.5% of OEBB outpatient cost and 3.1% of PEBB outpatient cost
- For both PEBB and OEBB, the PMPM cost of nuclear medicine increased by over 6% while utilization decreased
- PET and CT scan PMPM cost increased by nearly 5% and 9% for PEBB

Hospital outpatient drilldown

High-Tech Imaging (Continued)

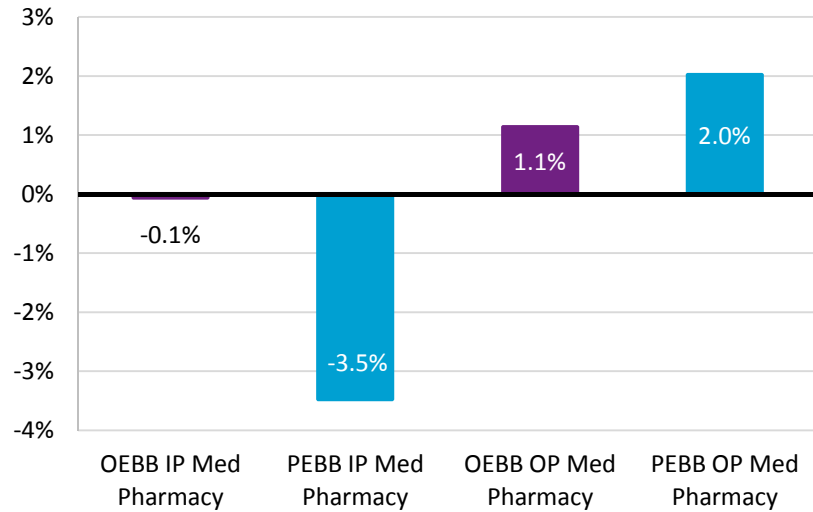
OEBB	2018 Allowed	PMPM	Srvcs	Srvs / 1,000	Cost / Service	2017 Allowed	PMPM	Srvcs	Srvs / 1,000	Cost / Service
OP MRI	\$8,216,218	\$4.39	11,591	74.3	\$708.84	\$8,037,320	\$4.37	11,380	74.2	\$706.27
YOY Change		0.4%		0.1%	0.4%					
OP CT Scans	\$5,413,122	\$2.89	9,655	61.9	\$560.65	\$5,282,695	\$2.87	9,278	60.5	\$569.38
YOY Change		0.7%		2.3%	-1.5%					
OP Nuclear Medicine	\$1,987,774	\$1.06	2,984	19.1	\$666.14	\$1,838,458	\$1.00	2,942	19.2	\$624.90
YOY Change		6.2%		-0.3%	6.6%					
OP PET Scans	\$1,032,064	\$0.55	408	2.6	\$2,529.57	\$999,891	\$0.54	395	2.6	\$2,531.37
YOY Change		1.4%		1.5%	-0.1%					

PEBB	2018 Allowed	PMPM	Srvcs	Srvs / 1,000	Cost / Service	2017 Allowed	PMPM	Srvcs	Srvs / 1,000	Cost / Service
OP MRI	\$9,159,356	\$5.65	13,815	102.3	\$663.00	\$8,749,860	\$5.38	13,204	97.5	\$662.67
YOY Change		5.0%		4.9%	0.1%					
OP CT Scans	\$5,631,094	\$3.47	10,796	79.9	\$521.59	\$5,392,336	\$3.32	10,061	74.3	\$535.96
YOY Change		4.7%		7.6%	-2.7%					
OP Nuclear Medicine	\$2,223,955	\$1.37	3,659	27.1	\$607.80	\$2,050,010	\$1.26	3,593	26.5	\$570.56
YOY Change		8.8%		2.1%	6.5%					
OP PET Scans	\$887,136	\$0.55	385	2.9	\$2,304.25	\$835,685	\$0.51	369	2.7	\$2,264.73
YOY Change		6.4%		4.6%	1.7%					

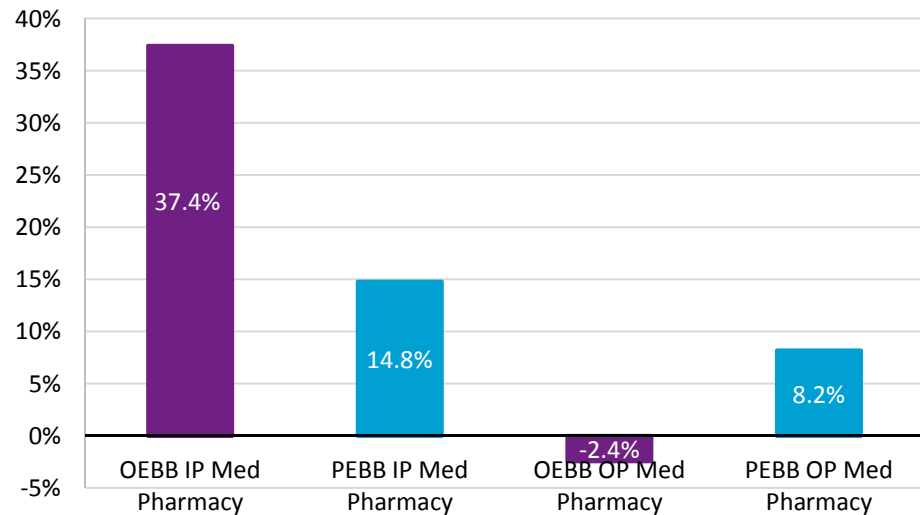
Hospital Outpatient Drilldown

Pharmacy — Through Medical Benefit Including Specialty

Change in admits / visits per 1,000



Change in cost per admit / visit



Observations

- Drugs through the medical benefit make up about 11% of outpatient cost for both OEBB and PEBB
- PMPM cost and utilization for outpatient drugs through the medical benefit have increased slightly for both OEBB and PEBB

Hospital Outpatient Drilldown

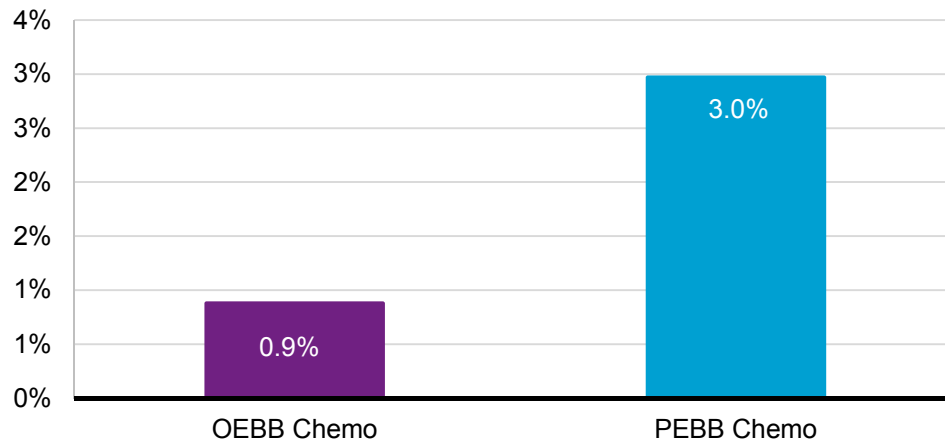
Pharmacy — Through Medical Benefit Including Specialty (Continued)

OEBB	2018 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1,000	\$\$ / Admit (Visit)	2017 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1000	\$\$ / Admit (Visit)
IP Pharmacy	\$4,746,892	\$2.53	7,491	48.0	\$634	\$3,397,284	\$1.85	7,365	48.0	\$461
YOY Change		37.3%	1.7%	-0.1%	37.4%					
OP Pharmacy	\$52,368,211	\$27.96	24,640	157.9	\$2,125	\$52,140,282	\$28.33	23,939	156.1	\$2,178
YOY Change		-1.3%	2.9%	1.1%	-2.4%					
PEBB	2018 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1,000	\$\$ / Admit (Visits)	2017 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1000	\$\$ / Admit (Visit)
IP Pharmacy	\$16,157,967	\$9.97	6,917	51.2	\$2,336	\$14,621,729	\$9.00	7,185	53.1	\$2,035
YOY Change		10.8%	-3.7%	-3.5%	14.8%					
OP Pharmacy	\$63,581,695	\$39.23	28,698	212.5	\$2,216	\$57,767,556	\$35.55	28,206	208.3	\$2,048
YOY Change		10.4%	1.7%	2.0%	8.2%					

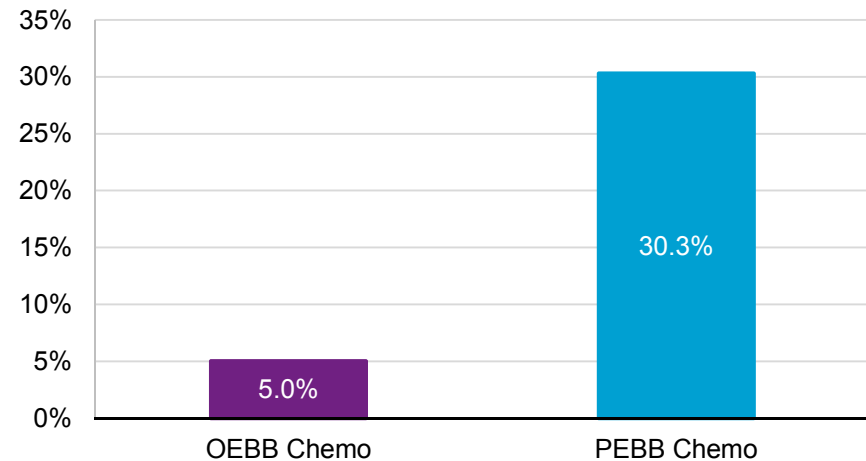
Hospital Outpatient Drilldown

Chemo Specialty — Through Medical Benefit

Change in admits / visits per 1,000



Change in cost per admit / visit



Observations

- The majority of chemo specialty drugs in the medical benefit is in the outpatient setting
- PEBB cost PMPM has increased more than for OEBC

Hospital Outpatient Drilldown

Chemo Specialty Drugs — Through Medical Benefit (Continued)

OEBB	2018 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1,000	\$\$ / Admit (Visit)	2017 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1,000	\$\$ / Admit (Visit)
Chemo — Med Pharmacy	\$23,432,717	\$12.5	4,584	29.4	\$5,112	\$21,733,308	\$11.8	4,465	29.1	\$4,868
YOY Change		5.9%	2.7%	0.9%	5.0%					
PEBB	2018 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1,000	\$\$ / Admit (Visit)	2017 Allowed	PMPM	Admits/ Visits	Admits (Visits)/ 1,000	\$\$ / Admit (Visit)
Chemo — Med Pharmacy	\$20,000,605	\$12.34	4570.0	33.8	\$4,376	\$14,947,728	\$9.20	4450.0	32.9	\$3,359
YOY Change		34.2%	2.7%	3.0%	30.3%					

Hospital Outpatient Drilldown

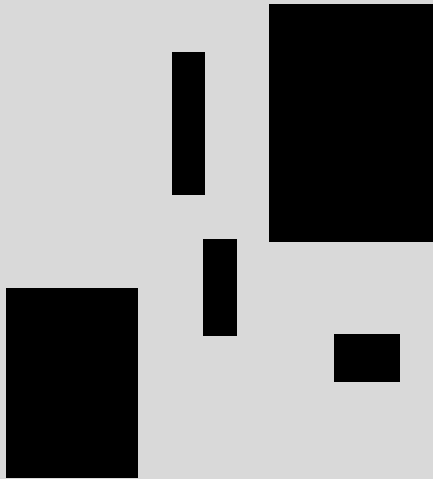
OP Procedures — Combined OEGB / PEBB

OEGB and PEBB Combined	PMPM YOY	2018 Allowed	PMPM	Visits	Visits /1,000	\$\$ / Visit	2017 Allowed	PMPM	Visits	Visits /1,000	\$\$ / Visit
Other major musculoskeletal surgery	16.9%	\$24,196,973	\$7.02	2,948	10.3	\$8,207.93	\$20,810,113	\$6.01	2,719	9.4	\$7,653.59
Major female genital procedures	8.0%	\$14,549,684	\$4.22	1,347	4.7	\$10,801.55	\$13,541,674	\$3.91	1,253	4.3	\$10,807.40
Other major digestive procedures	10.4%	\$12,758,942	\$3.70	2,069	7.2	\$6,166.72	\$11,619,909	\$3.35	1,890	6.5	\$6,148.10
Other major cardiovascular procedures	-7.1%	\$12,509,983	\$3.63	903	3.1	\$13,853.80	\$13,538,494	\$3.91	966	3.3	\$14,015.00
Colonoscopy	6.7%	\$8,909,845	\$2.58	3,887	13.5	\$2,292.22	\$8,390,491	\$2.42	3,928	13.6	\$2,136.07
Specialty drugs other than chemotherapy	-2.0%	\$4,651,860	\$1.35	372	1.3	\$12,505.00	\$4,769,482	\$1.38	402	1.4	\$11,864.38
Major nervous system procedures	-11.6%	\$4,098,559	\$1.19	398	1.4	\$10,297.89	\$4,662,534	\$1.35	411	1.4	\$11,344.36
Transurethral surgery	3.5%	\$3,870,442	\$1.12	560	1.9	\$6,911.50	\$3,760,538	\$1.09	555	1.9	\$6,775.74
Other major breast surgery	7.3%	\$3,806,533	\$1.10	347	1.2	\$10,969.84	\$3,567,612	\$1.03	350	1.2	\$10,193.18
Upper GI endoscopy	4.1%	\$3,344,110	\$0.97	1,663	5.8	\$2,010.89	\$3,229,362	\$0.93	1,682	5.8	\$1,919.95

Observations

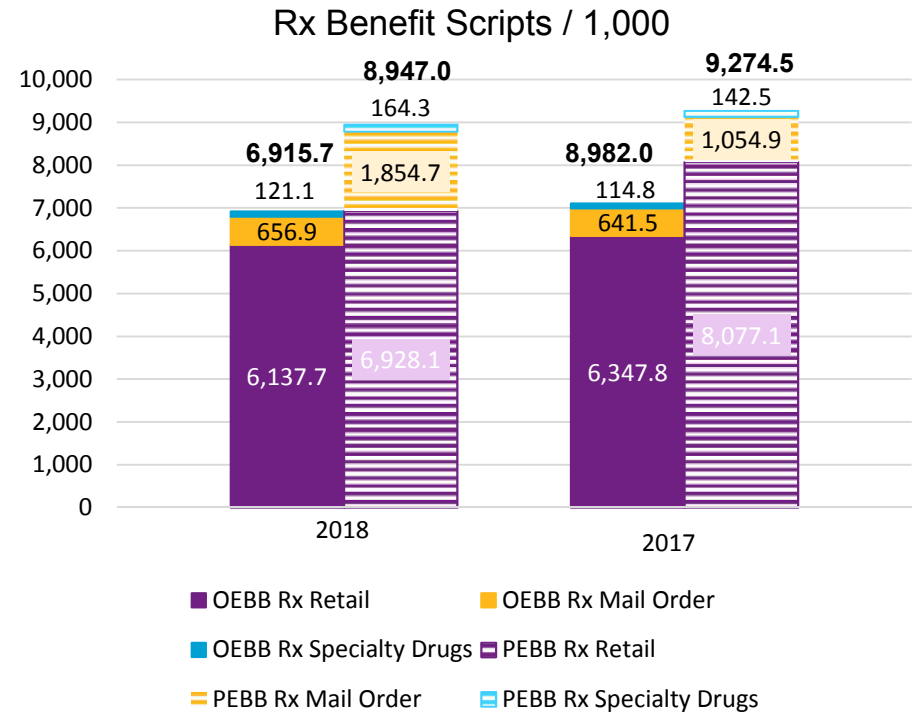
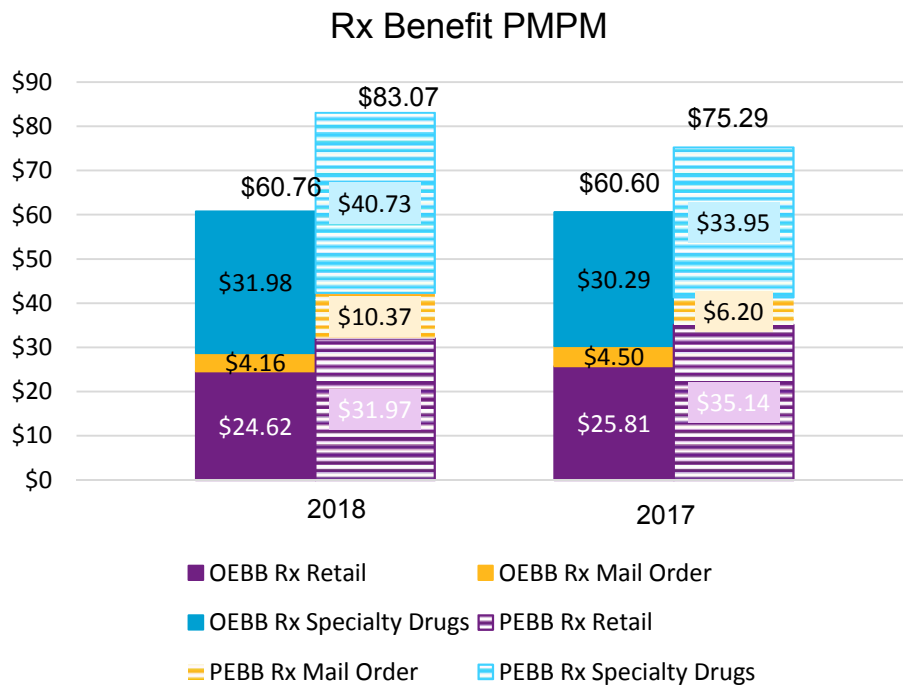
- OP facility procedure cost is 17.7% of OEGB total outpatient cost and 16.0% of PEBB outpatient cost
- The top procedures for both PEBB and OEGB have significant overlap
- Highest cost increases in PMPM amounts were in the musculoskeletal (driven by cost per visit), female genital procedures (driven by volume of services) and major digestive procedures (driven by cost and volume of services)

Prescription Drug Review



Pharmacy Analysis

Drugs in Rx Benefit



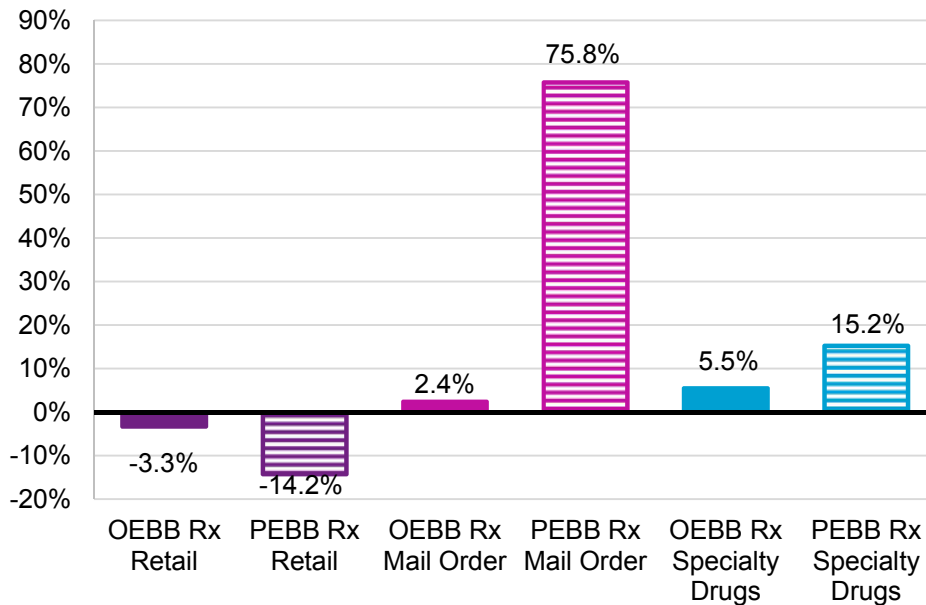
Observations

- OEBB total pharmacy PMPM cost is nearly flat while PEBB PMPM cost has increased 10%
- PEBB mail order utilization is significantly greater than OEBB
- Specialty pharmacy spend has increased significantly more for OEBB than for PEBB

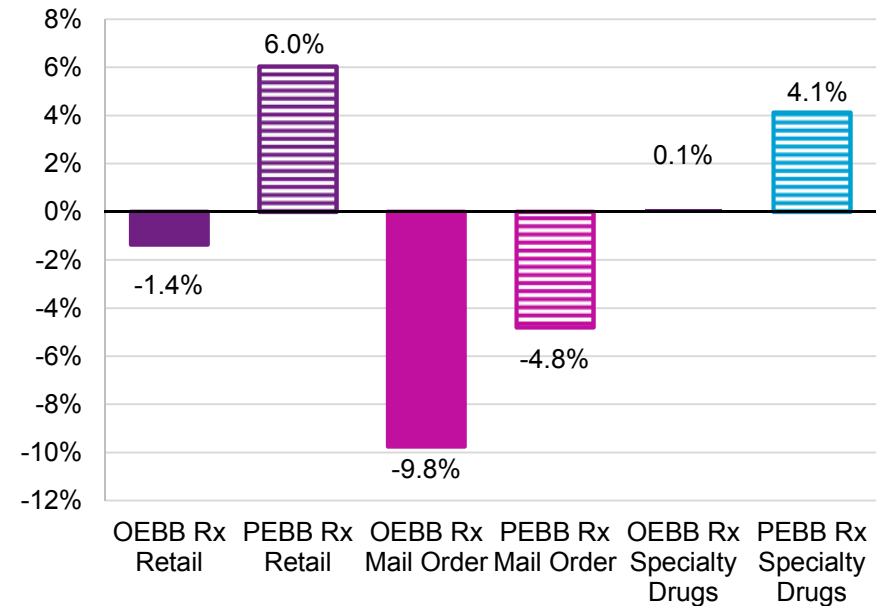
Pharmacy Analysis

Drugs in Rx Benefit (Continued)

Change in scripts per 1,000



Change in cost per script



Observations

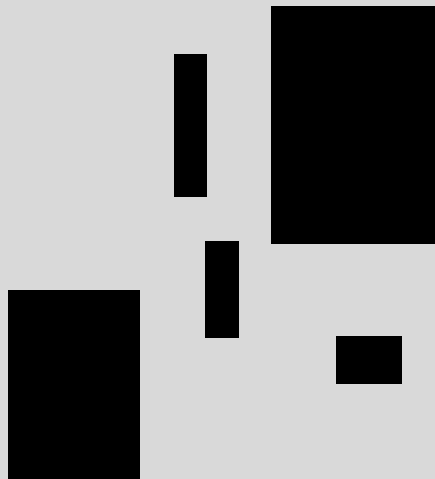
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- Specialty pharmacy spend has increased significantly more for OEBB than for PEBB

Pharmacy Analysis

Drugs in Rx Benefit

OEBB	2018 Allowed	PMPM	Scripts	Scripts / 1,000	\$ / Script	2017 Allowed	PMPM	Scripts	Scripts / 1,000	\$\$ / Script
Retail	\$46,110,069	\$24.62	957,981	6,137.7	\$48.13	\$47,504,428	\$25.81	973,516	6,347.8	\$48.80
YOY change		-4.6%	-1.6%	-3.3%	-1.4%					
Mail Order	\$7,784,808	\$4.16	102,532	656.9	\$75.93	\$8,277,450	\$4.50	98,378	641.5	\$84.14
YOY change		-7.6%	4.2%	2.4%	-9.8%					
Specialty	\$59,899,347	\$31.98	18,905	121.1	\$3,168.44	\$55,737,207	\$30.29	17,606	114.8	\$3,165.81
YOY change		5.6%	7.4%	5.5%	0.1%					
Total	\$113,794,224	\$60.76	1,079,418	6,915.7	\$105.42	\$111,519,085	\$60.60	1,089,500	7,104.0	\$102.36
YOY change		0.3%	-0.9%	-2.7%	3.0%					
PEBB	2018 Allowed	PMPM	Scripts	Scripts / 1,000	\$ / Script	2017 Allowed	PMPM	Scripts	Scripts / 1,000	\$\$ / Script
Retail	\$51,810,142	\$31.97	935,770	6,928.1	\$55.37	\$57,112,053	\$35.14	1,093,855	8,077.1	\$52.21
YOY change		-9.0%	-14.5%	-14.2%	6.0%					
Mail Order	\$16,812,162	\$10.37	250,508	1,854.7	\$67.11	\$10,070,319	\$6.20	142,859	1,054.9	\$70.49
YOY change		67.4%	75.4%	75.8%	-4.8%					
Specialty	\$66,022,321	\$40.73	22,187	164.3	\$2,975.72	\$55,171,343	\$33.95	19,304	142.5	\$2,858.03
YOY change		20.0%	14.9%	15.2%	4.1%					
Total	\$134,644,625	\$83.07	1,208,465	8,947.0	\$111.42	\$122,353,716	\$75.29	1,256,018	9,274.5	\$97.41
YOY change		10.3%	-3.8%	-3.5%	14.4%					

Spine and Back Review



Spine and Back

PEBB Only — Top 10 Agencies by Prevalence*

Rank	Agency	Patients per 1,000	Patients/1,000 above PEBB Average	Allowed per Patient	Admits per Patient
1	Eastern Oregon University	197.8	18.9%	\$4,582	0.024
2	Department of Environmental Quality	195.2	17.3%	\$2,645	0.004
3	Department of Corrections	193.5	16.2%	\$3,695	0.020
4	Judges	193.5	16.2%	\$3,663	0.018
5	Oregon Corrections Enterprise	191.1	14.9%	\$1,395	0.000
6	Oregon Department of Transportation	182.5	9.6%	\$3,900	0.023
7	Division of State Lands	180.1	8.2%	\$2,089	0.000
8	Consumer and Business Services	179.0	7.5%	\$2,373	0.011
9	Employment Department	177.4	6.6%	\$2,665	0.014
10	Oregon State Lottery	176.5	6.1%	\$5,939	0.047

* Excludes Kaiser

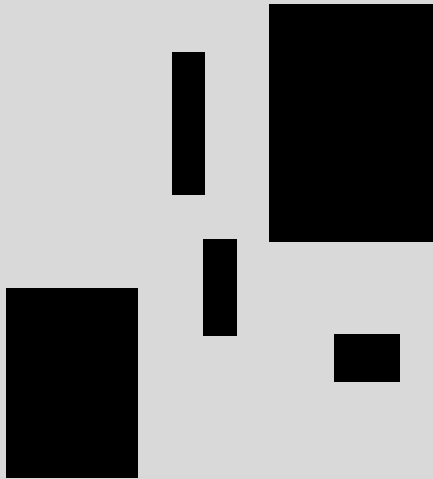
Spine and Back

PEBB Only — Top 10 Agencies by Size*

Rank	Agency	Patients per 1,000	Patients/1,000 above PEBB Average	Allowed per Patient	Admits per Patient
1	Department of Human Services	157.9	-5.1%	\$2,964	0.015
2	Oregon State University	148.7	-10.6%	\$2,321	0.007
3	Department of Corrections	193.5	16.2%	\$3,695	0.020
4	University of Oregon	163.8	-1.5%	\$2,275	0.003
5	Oregon Department of Transportation	182.5	9.6%	\$3,900	0.023
6	Oregon Health Authority	162.6	-2.3%	\$2,896	0.015
7	Portland State University	164.8	-1.0%	\$2,314	0.010
8	Oregon State Police	171.0	2.7%	\$2,621	0.014
9	Judicial Department	171.3	2.9%	\$2,879	0.011
10	Department of Justice	162.2	-2.5%	\$3,334	0.016

* Excludes Kaiser

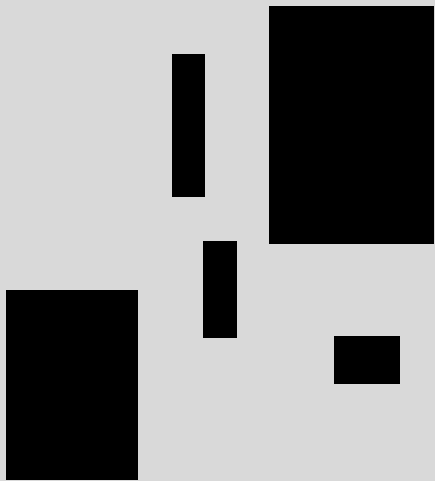
Spend Stratification



Member Stratification by Cost

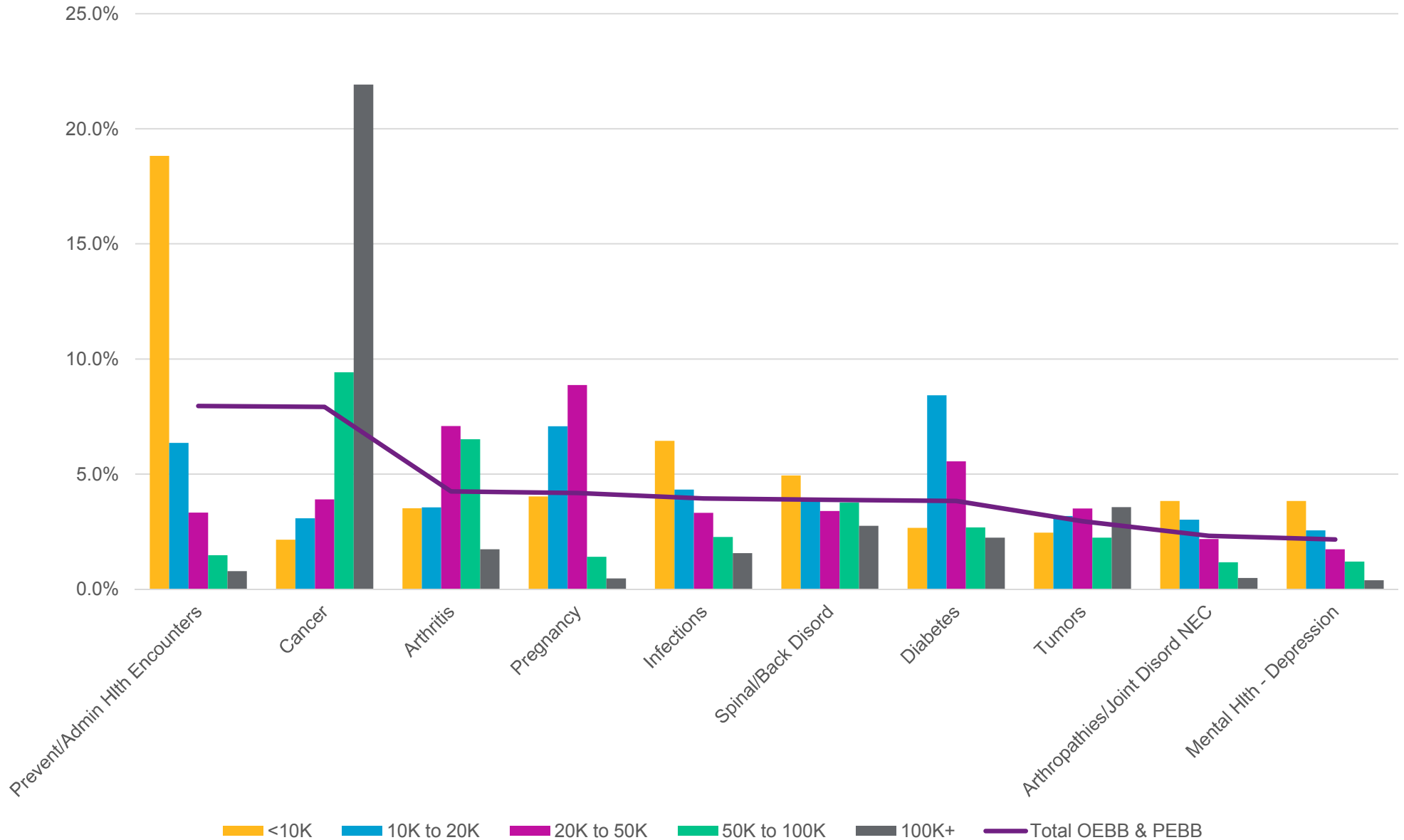
Cost Bracket	Avg Member Age	Allowed PMPM	ER/ 1,000	Admits/ 1,000	ALOS	Scripts/ 1,000	Specialty/ 1,000
Total OEBB PEBB	34.6	\$516	177.6	46.2	4.0	8,655	155
10k to 20k	43.5	\$1,325	577.8	145.8	2.7	23,411	471
20k to 50k	44.0	\$2,812	824.1	413.7	3.3	26,217	942
50k to 100k	48.8	\$6,172	1,088.8	636.6	4.3	34,806	3,245
OEBB — 20k to 50k	44.6	\$2,713	785.1	419.6	3.2	24,443	869
PEBB — 20k to 50k	43.3	\$2,909	862.1	407.9	3.4	27,943	1,013

Top Conditions by Spend



Spend by Top 10 Conditions

Combined OEGB and PEBB



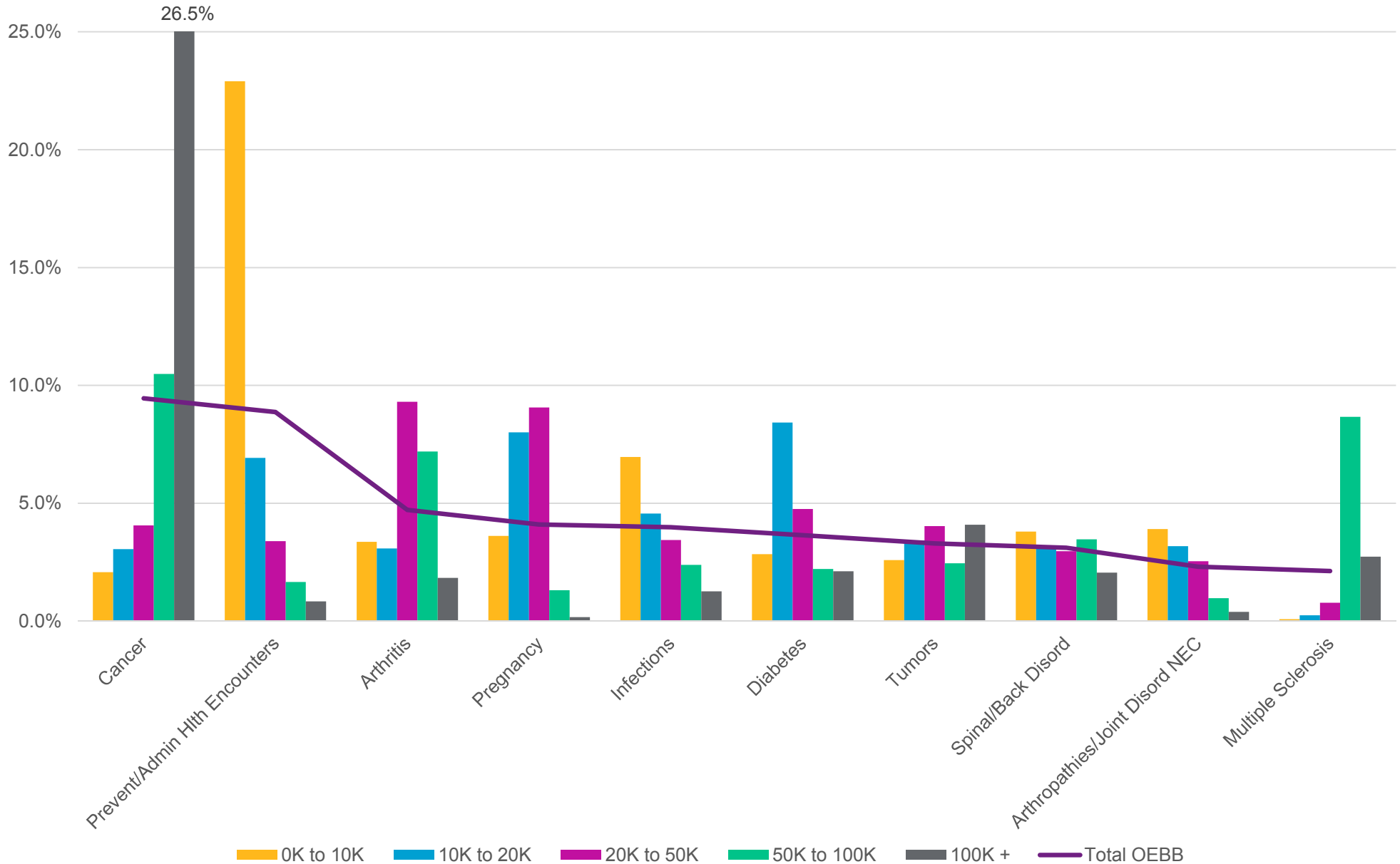
Top Conditions by Member Spend

Combined OEGB and PEBB

Rank	Total OEGB and PEBB	<\$10k	\$10k to \$20k	\$20k to \$50k	\$50k to \$100k	\$100k+
1	Prevent/Admin Hlth Encounters	Prevent/Admin Hlth Encounters	Diabetes	Pregnancy	Cancer	Cancer
2	Cancer	Infections	Pregnancy	Arthritis	Multiple Sclerosis	Coronary Artery Disease
3	Arthritis	Spinal/Back Disord	Prevent/Admin Hlth Encounters	Diabetes	Arthritis	Tumors
4	Pregnancy	Pregnancy	Infections	Cancer	Rheumatoid Arthritis	Neurological Disorders, NEC
5	Infections	Arthropathies/Joint Disord NEC	Spinal/Back Disord	Tumors	Crohns Disease	Cardiovasc Disord
6	Spinal/Back Disord	Mental Hlth - Depression	Arthritis	Spinal/Back Disord	Spinal/Back Disord	Condition Rel to Tx
7	Diabetes	Arthritis	Tumors	Prevent/Admin Hlth Encounters	Skin Disorders	Renal Function Failure
8	Tumors	Diabetes	Cancer	Infections	Coronary Artery Disease	Chemotherapy Encounters
9	Arthropathies/Joint Disord NEC	Tumors	Arthropathies/Joint Disord NEC	Fracture/Disloc	Cardiac Arrhythmias	Spinal/Back Disord
10	Mental Hlth - Depression	Infec/Inflam - Skin/Subcu Tiss	Mental Hlth - Depression	Cholecystitis/Cholelithiasis	Diabetes	Cerebrovascular Disease

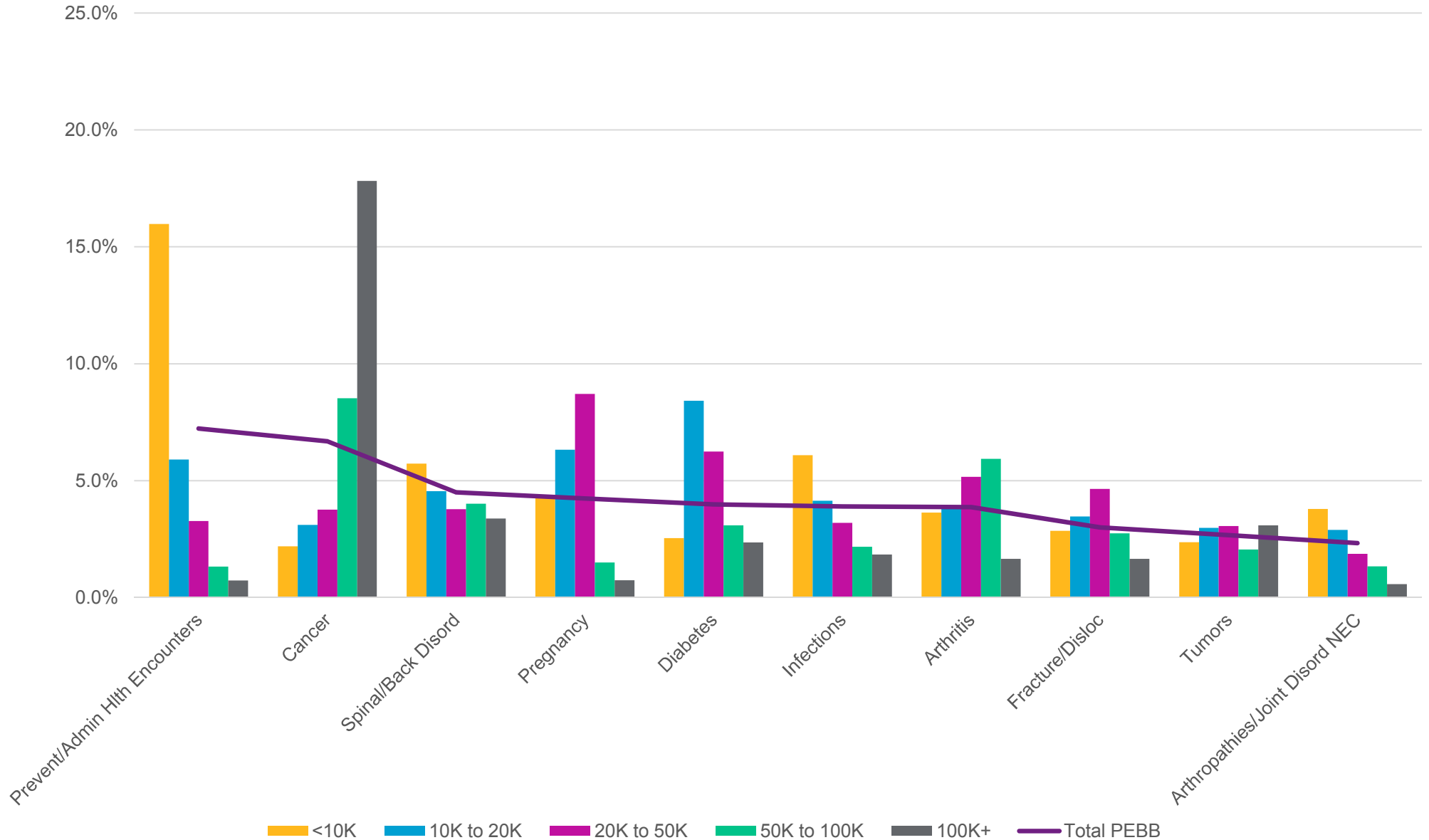
Spend by Top 10 Conditions

OEBB



Spend by Top 10 Conditions

PEBB

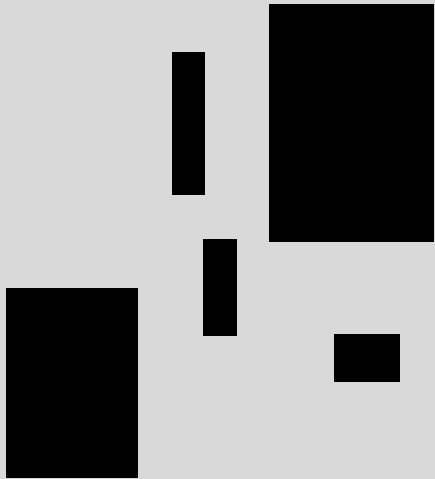


Top Conditions by Member Spend

Focus on \$20k to \$50k in Spend

Rank	Total OEBB and PEBB	Total OEBB	OEBB \$20k to \$50k	Total PEBB	PEBB \$20k to \$50k
1	Prevent/Admin Hlth Encounters	Cancer	Arthritis	Prevent/Admin Hlth Encounters	Pregnancy
2	Cancer	Prevent/Admin Hlth Encounters	Pregnancy	Cancer	Diabetes
3	Arthritis	Arthritis	Diabetes	Spinal/Back Disord	Arthritis
4	Pregnancy	Pregnancy	Cancer	Pregnancy	Fracture/Disloc
5	Infections	Infections	Tumors	Diabetes	Spinal/Back Disord
6	Spinal/Back Disord	Diabetes	Infections	Infections	Cancer
7	Diabetes	Tumors	Prevent/Admin Hlth Encounters	Arthritis	Prevent/Admin Hlth Encounters
8	Tumors	Spinal/Back Disord	Spinal/Back Disord	Fracture/Disloc	Infections
9	Arthropathies/Joint Disord NEC	Arthropathies/Joint Disord NEC	Cholecystitis/Cholelithiasis	Tumors	Tumors
10	Mental Hlth - Depression	Multiple Sclerosis	Arthropathies/Joint Disord NEC	Arthropathies/Joint Disord NEC	Cholecystitis/Cholelithiasis

Next Steps



Next Steps

- Overall inpatient and outpatient: review facility costs for specific inpatient admissions and outpatient visits to see if this is an issue of service type, provider and/or geography
- Nuclear medicine: review specific providers and diagnoses to determine if unit cost increases are warranted
- Specialty drugs (including chemotherapy): review specific medications to look for cost savings opportunities such as going through the pharmacy benefit, moving procedures from the inpatient to the outpatient setting, or if there are significant cost variations for similar drugs
- Mail order pharmacy: consider whether there is an opportunity to encourage higher mail order use especially in the OEBC population and whether this could result in cost savings
- Conditions: review potential cost savings opportunities at the provider level for musculoskeletal, female genital procedures and digestive procedures