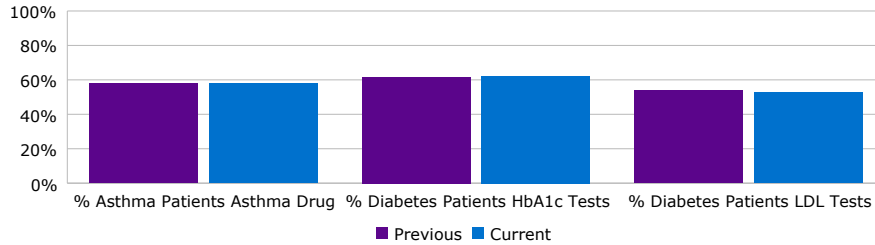


Medical and Prescription Drug Dashboard - All Members

Previous Period: Jan 2017 - Dec 2017 (Paid)

Current Period: Jan 2018 - Dec 2018 (Paid)

1. Quality Metrics*



*Quality Metrics are based on Incurred Rolling Year.

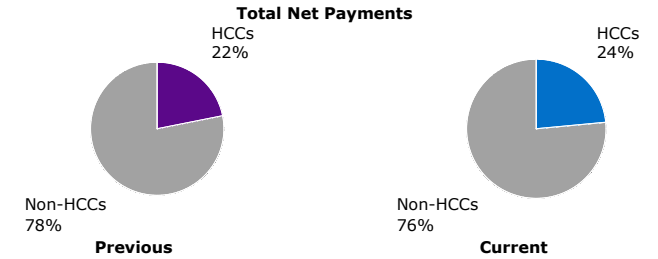
3. Well Care and Preventive Visits

	Previous	Current	Trend
Visits Per 1000 Well Baby	5,697.0	5,802.8	1.9%
Visits Per 1000 Well Child	832.9	889.3	6.8%
Visits Per 1000 Prevent Adult	387.4	415.4	7.2%

4. Medical Plan Eligibility

	Previous	Current	Trend
Average Employees	69,680	70,699	1%
Average Members	123,989	125,020	1%
Family Size	1.8	1.8	-1%
Member Age	42.8	42.9	0%
Members % Male	45%	45%	0% pts

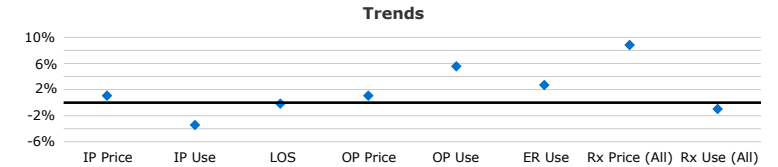
2. High Cost Claimants*



*Members with >=\$100,000 in Medical and Rx Net Payments

	Previous	Current	Trend
Patients	900	1,004	12%
Patients per 1,000	6.7	7.4	11%
Payments (in millions)	\$169.5	\$193.6	14%
Payment per Patient	\$188,344	\$192,826	2%

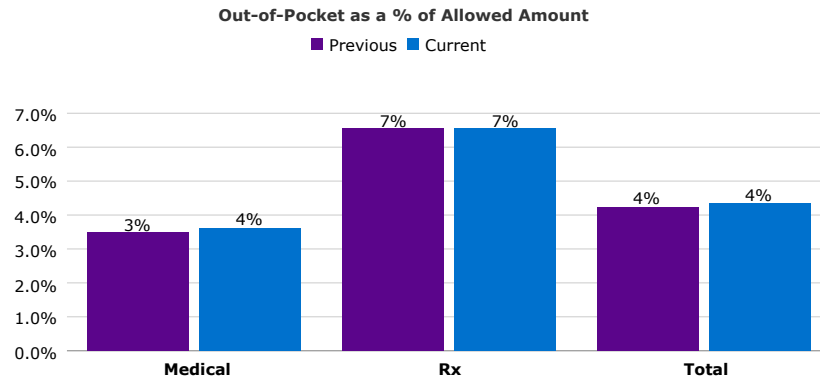
5. Price and Use



	Current	Benchmark	Trend
Inpatient			
Allowed per Admit	\$21,888	\$27,325	1%
Admits per 1,000	86.3	56.2	-4%
Days LOS	5.0	4.5	0%
Outpatient			
Allowed per Service	\$123	\$123	1%
Services PMPY	41.3	30.7	5%
Emergency Room Visits per 1,000	350	229	3%
Prescription Drugs			
Allowed/Days Supply	\$2		4%
Days Supply PMPY	629		-1%
Specialty Drugs			
Allowed/Days Supply	\$75		9%
Days Supply PMPY	11		7%
All Prescription Drugs			
Allowed/Days Supply	\$3	\$3	9%
Days Supply PMPY	640	368	-1%

● Represents a lower than -3% comparison to the benchmark
 ◆ Represents a comparison to the benchmark within +/-3%
 ■ Represents a higher than 3% comparison to the benchmark

6. Cost Sharing

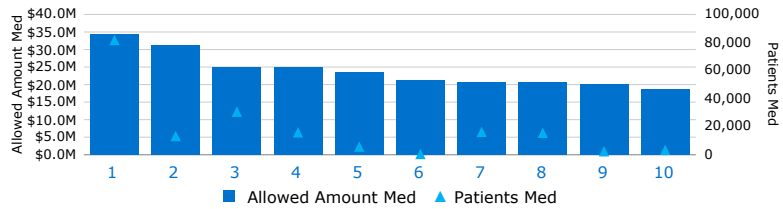


Medical and Prescription Drug Dashboard - All Members

Previous Period: Jan 2017 - Dec 2017 (Paid)

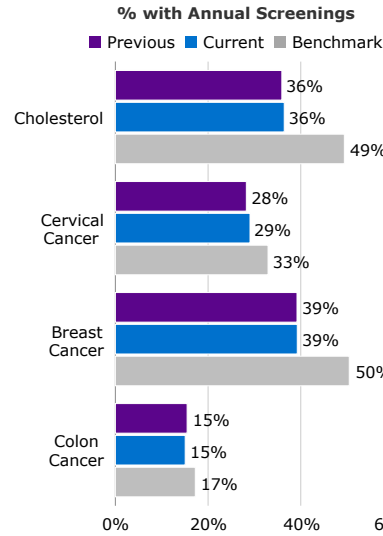
Current Period: Jan 2018 - Dec 2018 (Paid)

7. Top Medical Conditions (by cost)

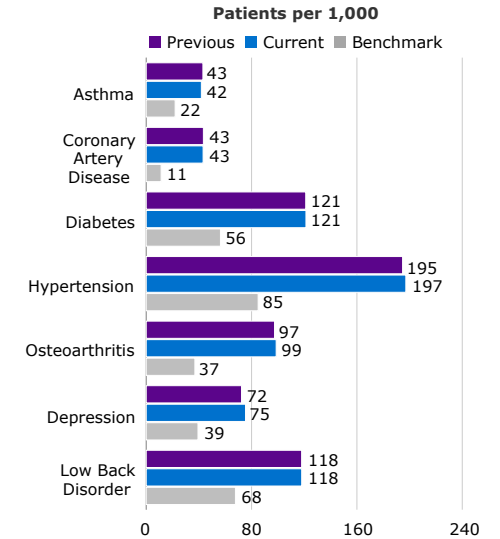


Condition	Allowed Amount Med	Patients Med	Med Allowed /Patient
1 Prevent/Admin Hlth Encounters	\$34,475,695	81,859	\$421
2 Osteoarthritis	\$31,091,186	13,361	\$2,327
3 Arthropathies/Joint Disord NEC	\$25,043,442	30,685	\$816
4 Spinal/Back Disord, Low Back	\$25,016,402	15,987	\$1,565
5 Coronary Artery Disease	\$23,516,370	5,846	\$4,023
6 Chemotherapy Encounters	\$21,239,354	545	\$38,971
7 Gastroint Disord, NEC	\$20,777,097	16,324	\$1,273
8 Respiratory Disord, NEC	\$20,690,387	15,665	\$1,321
9 Pregnancy without Delivery	\$20,057,968	2,538	\$7,903
10 Renal Function Failure	\$18,807,039	3,483	\$5,400

8. Screening Rates

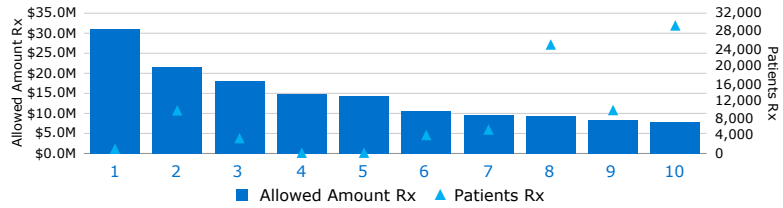


9. Chronic Condition Prevalence

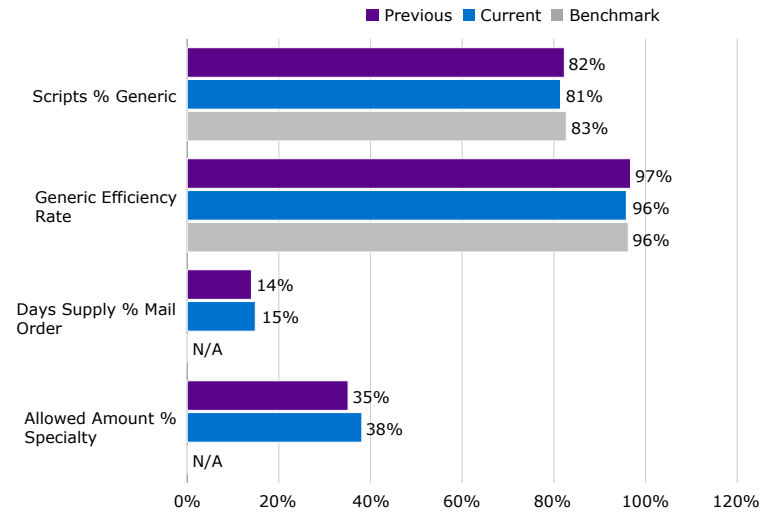


10. Prescription Drug Metrics

Top 10 Therapeutic Classes (by cost)



Therapeutic Class	Allowed Amount Rx	Patients Rx	Rx Allowed /Patient
1 Immunosuppressants, NEC	\$31,152,101	1,080	\$28,845
2 Antidiabetic Agents, Misc	\$21,558,528	9,841	\$2,191
3 Antidiabetic Agents, Insulins	\$18,019,049	3,513	\$5,129
4 Molecular Targeted Therapy	\$14,939,359	171	\$87,365
5 Biological Response Modifiers	\$14,331,145	192	\$74,641
6 Coag/Anticoag, Anticoagulants	\$10,628,637	4,216	\$2,521
7 Stimulant, Amphetamine Type	\$9,483,830	5,461	\$1,737
8 Adrenals & Comb, NEC	\$9,420,070	24,856	\$379
9 Antivirals, NEC	\$8,405,075	9,910	\$848
10 Antihyperlipidemic Drugs, NEC	\$7,927,210	29,214	\$271

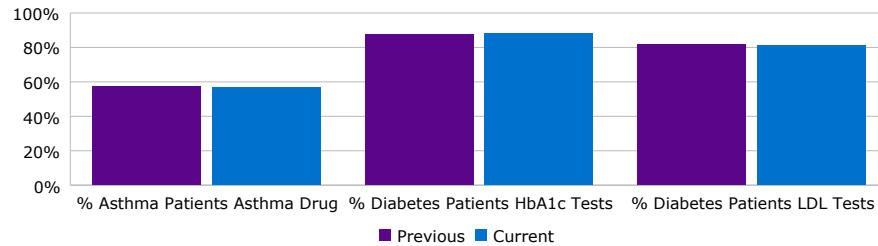


State of Delaware Medical and Prescription Drug Dashboard - Actives

Previous Period: Jan 2017 - Dec 2017 (Paid)

Current Period: Jan 2018 - Dec 2018 (Paid)

1. Quality Metrics*



*Quality Metrics are based on Incurred Rolling Year.

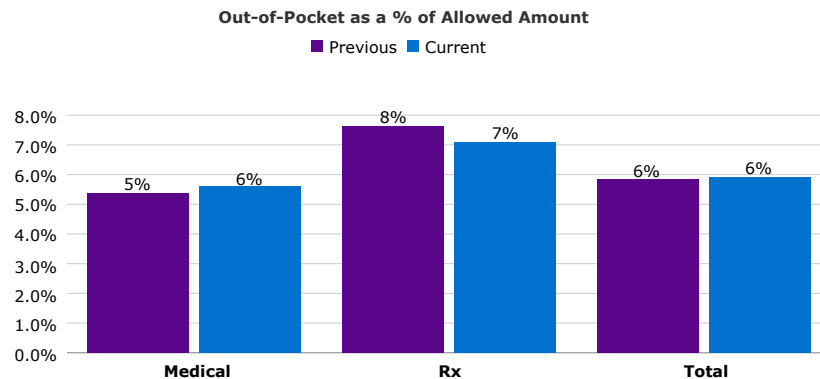
3. Well Care and Preventive Visits

	Previous	Current	Trend
Visits Per 1000 Well Baby	5,699.4	5,808.5	1.9%
Visits Per 1000 Well Child	832.5	889.9	6.9%
Visits Per 1000 Prevent Adult	453.9	483.7	6.6%

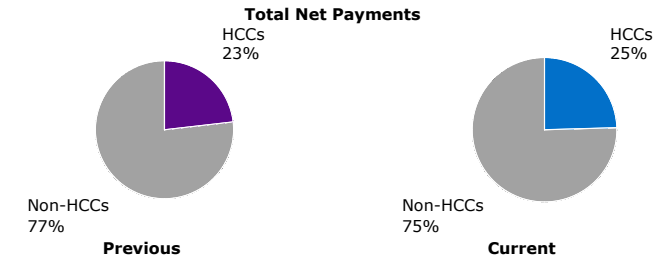
4. Medical Plan Eligibility

	Previous	Current	Trend
Average Employees	37,761	38,060	1%
Average Members	88,640	88,846	0%
Family Size	2.3	2.3	-1%
Member Age	33.0	32.9	0%
Members % Male	47%	46%	0% pts

6. Cost Sharing



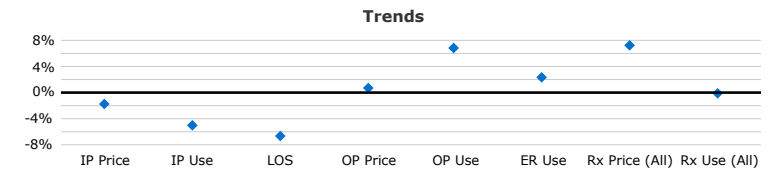
2. High Cost Claimants*



*Members with >=\$100,000 in Medical and Rx Net Payments

	Previous	Current	Trend
Patients	647	720	11%
Patients per 1,000	6.6	7.3	11%
Payments (in millions)	\$119.6	\$133.5	12%
Payment per Patient	\$184,780	\$185,432	0%

5. Price and Use



	Current	Benchmark	Trend
Inpatient			
Allowed per Admit	\$24,801	\$23,585	-2%
Admits per 1,000	59.0	54.7	-5%
Days LOS	4.3	4.2	-7%
Outpatient			
Allowed per Service	\$129	\$124	1%
Services PMPY	30.8	29.4	7%
Emergency Room Visits per 1,000	284	229	2%
Prescription Drugs			
Allowed/Days Supply	\$2		4%
Days Supply PMPY	377		0%
Specialty Drugs			
Allowed/Days Supply	\$76		3%
Days Supply PMPY	7		10%
All Prescription Drugs			
Allowed/Days Supply	\$4	\$4	7%
Days Supply PMPY	385	333	0%

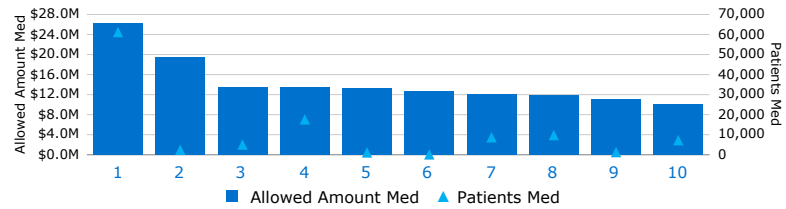
● Represents a lower than -3% comparison to the benchmark
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 ■ Represents a higher than 3% comparison to the benchmark

State of Delaware Medical and Prescription Drug Dashboard - Actives

Previous Period: Jan 2017 - Dec 2017 (Paid)

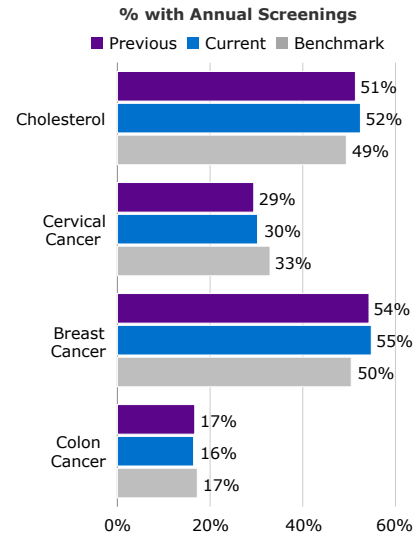
Current Period: Jan 2018 - Dec 2018 (Paid)

7. Top Medical Conditions (by cost)

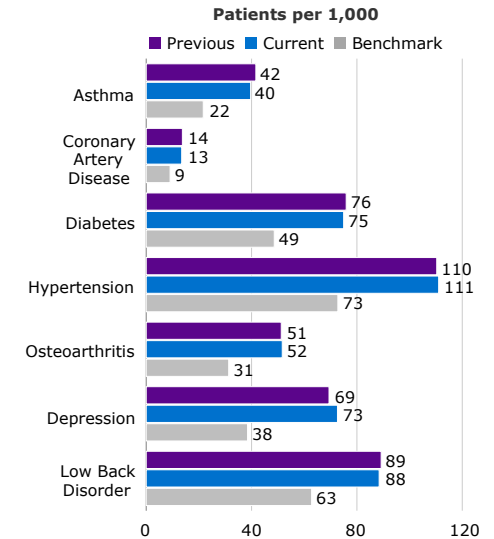


Condition	Allowed Amount Med	Patients Med	Med Allowed /Patient
1 Prevent/Admin Hlth Encounters	\$26,288,707	61,235	\$429
2 Pregnancy without Delivery	\$19,477,672	2,471	\$7,883
3 Osteoarthritis	\$13,538,060	5,089	\$2,660
4 Arthropathies/Joint Disord NEC	\$13,427,118	17,641	\$761
5 Newborns, w/wo Complication	\$13,260,818	1,173	\$11,305
6 Chemotherapy Encounters	\$12,579,257	197	\$63,854
7 Spinal/Back Disord, Low Back	\$11,992,742	8,716	\$1,376
8 Gastroint Disord, NEC	\$11,874,589	9,824	\$1,209
9 Coronary Artery Disease	\$11,072,213	1,328	\$8,338
10 Respiratory Disord, NEC	\$10,168,657	7,273	\$1,398

8. Screening Rates

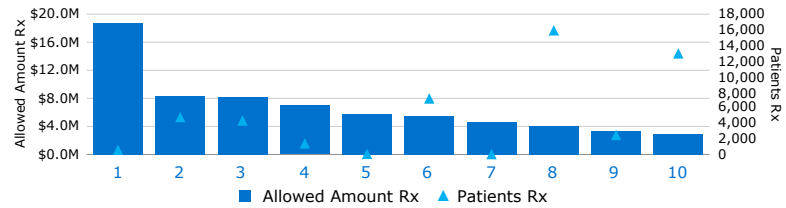


9. Chronic Condition Prevalence



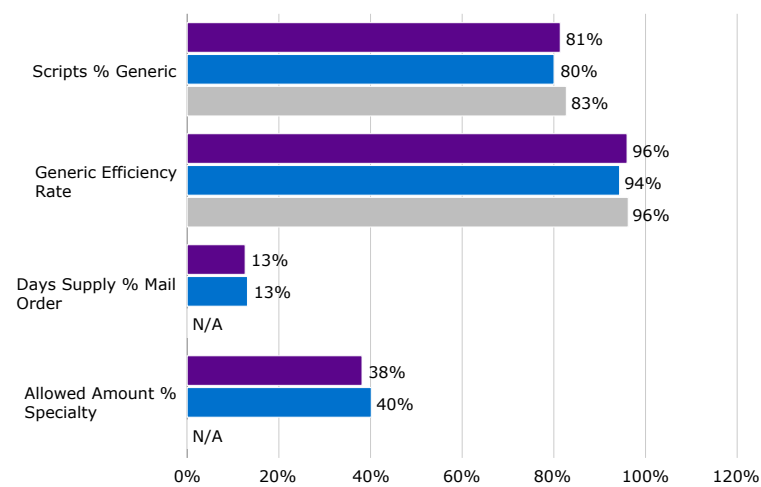
10. Prescription Drug Metrics

Top 10 Therapeutic Classes (by cost)



Therapeutic Class	Allowed Amount Rx	Patients Rx	Rx Allowed /Patient
1 Immunosuppressants, NEC	\$18,730,385	602	\$31,114
2 Stimulant, Amphetamine Type	\$8,340,068	4,797	\$1,739
3 Antidiabetic Agents, Misc	\$8,162,517	4,371	\$1,867
4 Antidiabetic Agents, Insulins	\$6,984,232	1,422	\$4,912
5 Biological Response Modifiers	\$5,716,809	83	\$68,877
6 Antivirals, NEC	\$5,487,630	7,190	\$763
7 Molecular Targeted Therapy	\$4,631,440	53	\$87,386
8 Adrenals & Comb, NEC	\$4,069,125	15,932	\$255
9 Misc Therapeutic Agents, NEC	\$3,346,597	2,507	\$1,335
10 Psychother, Antidepressants	\$2,955,004	12,977	\$228

Prescription Drug Metrics (Comparison)

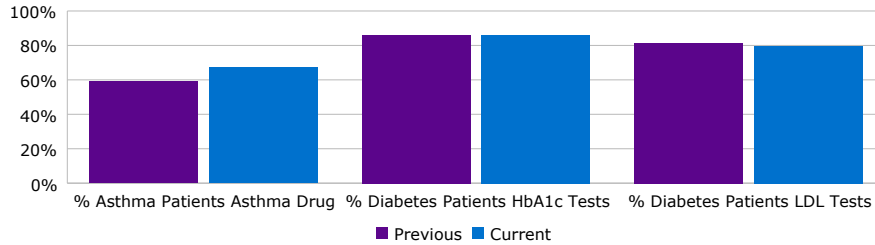


Medical and Prescription Drug Dashboard - Early Retirees

Previous Period: Jan 2017 - Dec 2017 (Paid)

Current Period: Jan 2018 - Dec 2018 (Paid)

1. Quality Metrics*



*Quality Metrics are based on Incurred Rolling Year.

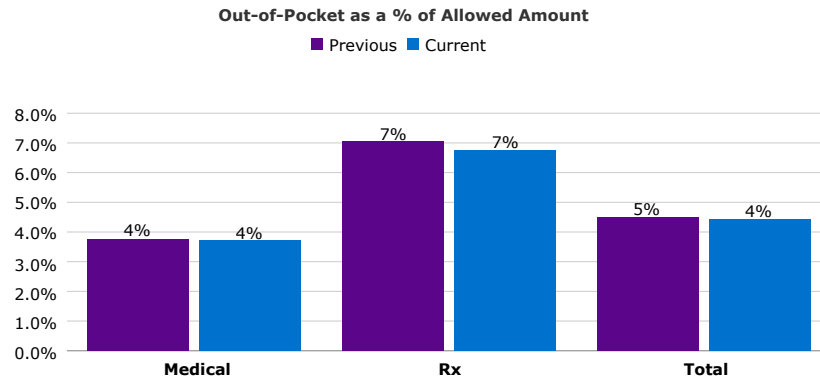
3. Well Care and Preventive Visits

	Previous	Current	Trend
Visits Per 1000 Well Baby	4,588.2	5,581.4	21.6%
Visits Per 1000 Well Child	801.8	765.2	-4.6%
Visits Per 1000 Prevent Adult	460.9	498.3	8.1%

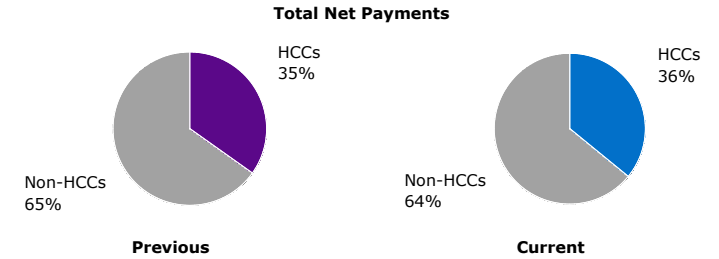
4. Medical Plan Eligibility

	Previous	Current	Trend
Average Employees	5,955	5,886	-1%
Average Members	9,170	9,140	0%
Family Size	1.5	1.6	1%
Member Age	51.0	50.7	0%
Members % Male	41%	41%	0% pts

6. Cost Sharing



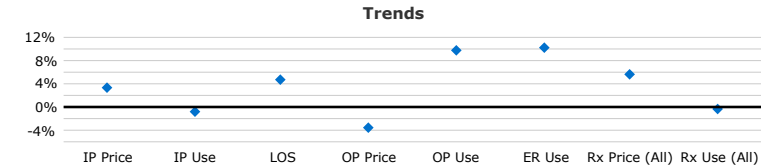
2. High Cost Claimants*



*Members with >=\$100,000 in Medical and Rx Net Payments

	Previous	Current	Trend
Patients	229	226	-1%
Patients per 1,000	20.2	20.5	2%
Payments (in millions)	\$35.2	\$37.9	8%
Payment per Patient	\$153,609	\$167,616	9%

5. Price and Use



	Current	Benchmark	Trend
Inpatient			
Allowed per Admit	\$34,075	\$33,189	◆ 3%
Admits per 1,000	86.7	67.7	■ -1%
Days LOS	5.7	5.2	■ 5%
Outpatient			
Allowed per Service	\$143	\$123	■ -4%
Services PMPY	50.7	41.9	■ 10%
Emergency Room Visits per 1,000	370	235	■ 10%
Prescription Drugs			
Allowed/Days Supply	\$2		● 4%
Days Supply PMPY	798		■ -1%
Specialty Drugs			
Allowed/Days Supply	\$71		● -6%
Days Supply PMPY	17		● 16%
All Prescription Drugs			
Allowed/Days Supply	\$3	\$3	■ 6%
Days Supply PMPY	815	675	● 0%

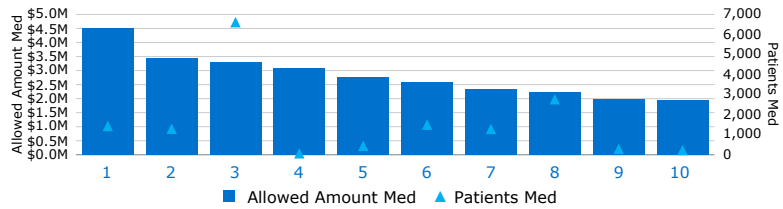
● Represents a lower than -3% comparison to the benchmark
 ◆ Represents a comparison to the benchmark within +/-3%
 ■ Represents a higher than 3% comparison to the benchmark

Medical and Prescription Drug Dashboard - Early Retirees

Previous Period: Jan 2017 - Dec 2017 (Paid)

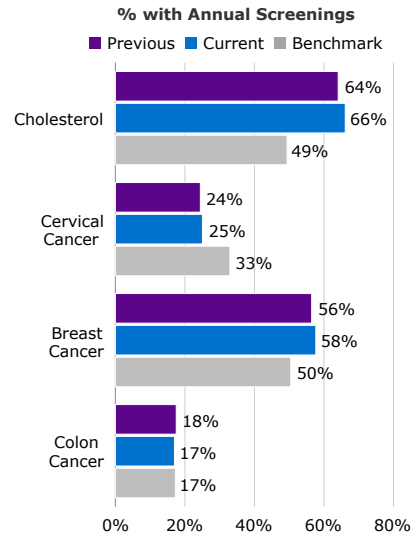
Current Period: Jan 2018 - Dec 2018 (Paid)

7. Top Medical Conditions (by cost)

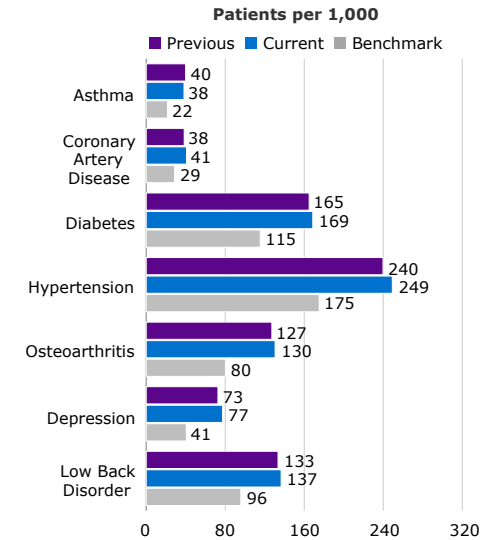


Condition	Allowed Amount Med	Patients Med	Med Allowed /Patient
1 Osteoarthritis	\$4,503,354	1,436	\$3,136
2 Gastroint Disord, NEC	\$3,451,056	1,296	\$2,663
3 Prevent/Admin Hlth Encounters	\$3,300,376	6,616	\$499
4 Chemotherapy Encounters	\$3,096,358	72	\$43,005
5 Coronary Artery Disease	\$2,757,740	449	\$6,142
6 Spinal/Back Disord, Low Back	\$2,595,432	1,503	\$1,727
7 Respiratory Disord, NEC	\$2,320,367	1,288	\$1,802
8 Arthropathies/Joint Disord NEC	\$2,219,273	2,769	\$801
9 Condition Rel to Tx - Med/Surg	\$1,994,769	294	\$6,785
10 Renal Function Failure	\$1,941,252	238	\$8,157

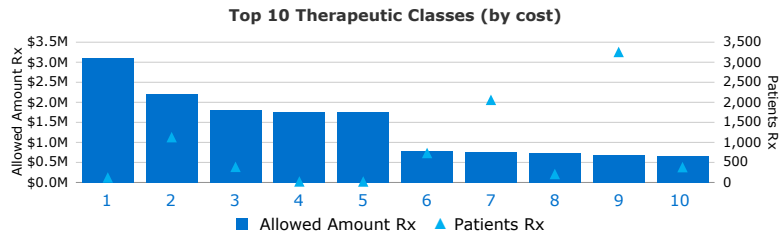
8. Screening Rates



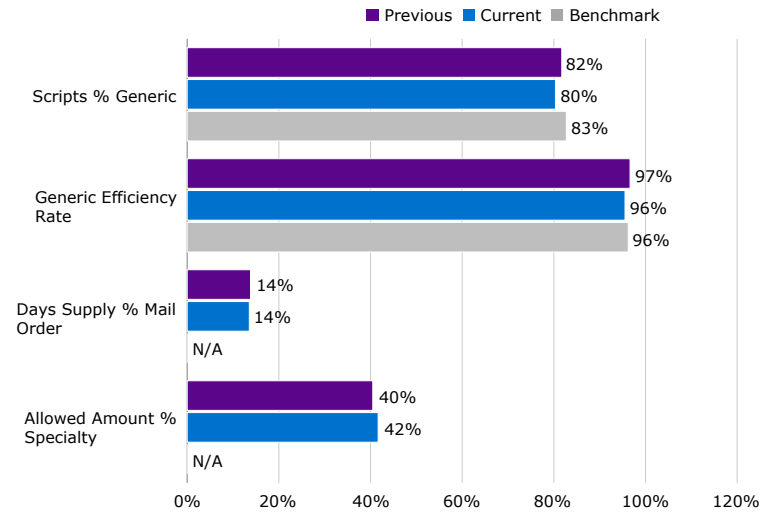
9. Chronic Condition Prevalence



10. Prescription Drug Metrics



Therapeutic Class	Allowed Amount Rx	Patients Rx	Rx Allowed /Patient
1 Immunosuppressants, NEC	\$3,106,429	125	\$24,851
2 Antidiabetic Agents, Misc	\$2,215,469	1,131	\$1,959
3 Antidiabetic Agents, Insulins	\$1,808,359	390	\$4,637
4 Biological Response Modifiers	\$1,767,190	26	\$67,969
5 Molecular Targeted Therapy	\$1,749,478	25	\$69,979
6 Antivirals, NEC	\$782,454	736	\$1,063
7 Adrenals & Comb, NEC	\$757,474	2,062	\$367
8 Antidiabetic Ag, SGLT Inhibitr	\$738,295	212	\$3,483
9 Antihyperlipidemic Drugs, NEC	\$684,427	3,257	\$210
10 Stimulant, Amphetamine Type	\$657,095	383	\$1,716

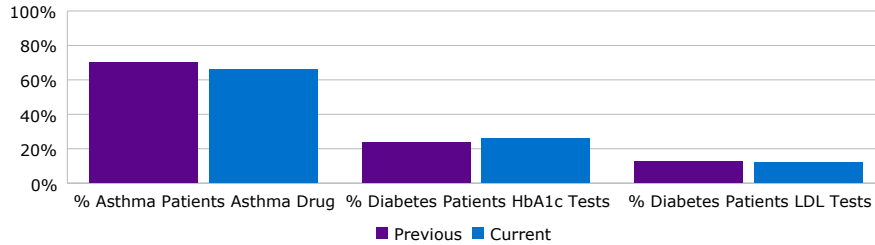


Medical and Prescription Drug Dashboard - Medicare Retirees

Previous Period: Jan 2017 - Dec 2017 (Paid)

Current Period: Jan 2018 - Dec 2018 (Paid)

1. Quality Metrics*



*Quality Metrics are based on Incurred Rolling Year.

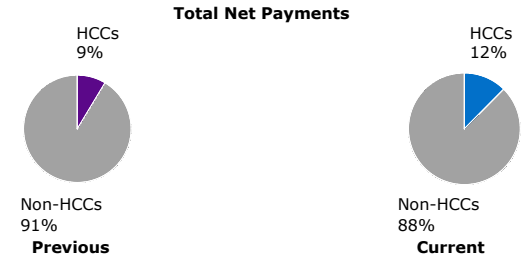
3. Well Care and Preventive Visits

	Previous	Current	Trend
Visits Per 1000 Prevent Adult	198.0	224.9	13.6%

4. Medical Plan Eligibility

	Previous	Current	Trend
Average Employees	23,601	24,364	3%
Average Members	23,659	24,472	3%
Family Size	1.0	1.0	0%
Member Age	73.2	73.2	0%
Members % Male	42%	42%	0% pts

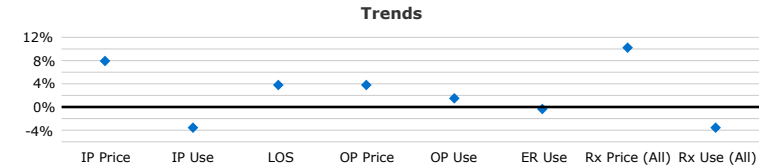
2. High Cost Claimants*



*Members with >=\$100,000 in Medical and Rx Net Payments

	Previous	Current	Trend
Patients	117	137	17%
Patients per 1,000	4.7	5.3	13%
Payments (in millions)	\$12.3	\$19.5	58%
Payment per Patient	\$105,066	\$142,171	35%

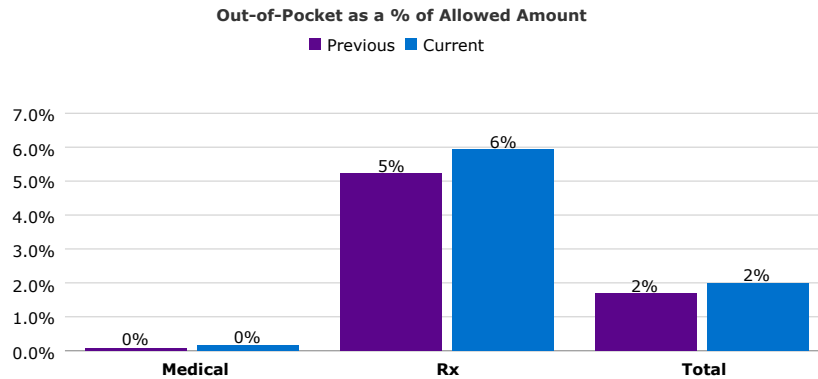
5. Price and Use



	Current	Benchmark	Trend
Inpatient			
Allowed per Admit	\$16,879	\$31,167	8%
Admits per 1,000	172.1	57.2	-4%
Days LOS	5.7	4.8	4%
Outpatient			
Allowed per Service	\$109	\$122	4%
Services PMPY	72.8	31.0	1%
Emergency Room Visits per 1,000	541	228	0%
Prescription Drugs			
Allowed/Days Supply	\$2		4%
Days Supply PMPY	1,432		-4%
Specialty Drugs			
Allowed/Days Supply	\$75		21%
Days Supply PMPY	23		-1%
All Prescription Drugs			
Allowed/Days Supply	\$3	\$3	10%
Days Supply PMPY	1,455	381	-4%

● Represents a lower than -3% comparison to the benchmark
 ◆ Represents a comparison to the benchmark within +/-3%
 ■ Represents a higher than 3% comparison to the benchmark

6. Cost Sharing

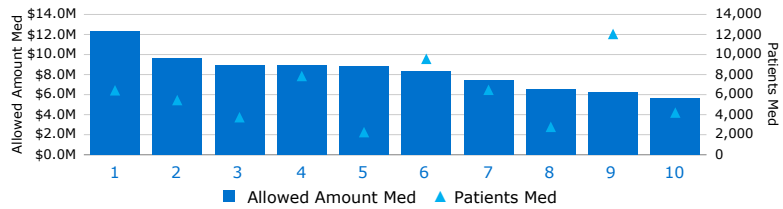


Medical and Prescription Drug Dashboard - Medicare Retirees

Previous Period: Jan 2017 - Dec 2017 (Paid)

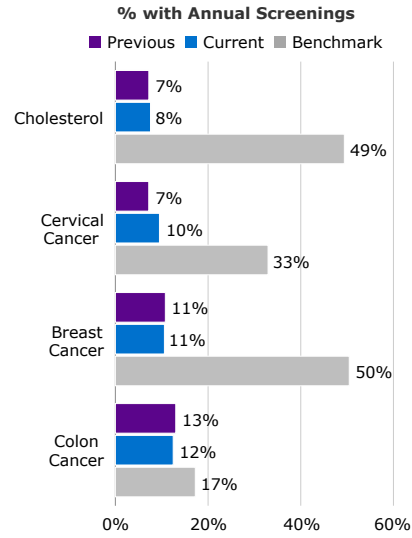
Current Period: Jan 2018 - Dec 2018 (Paid)

7. Top Medical Conditions (by cost)

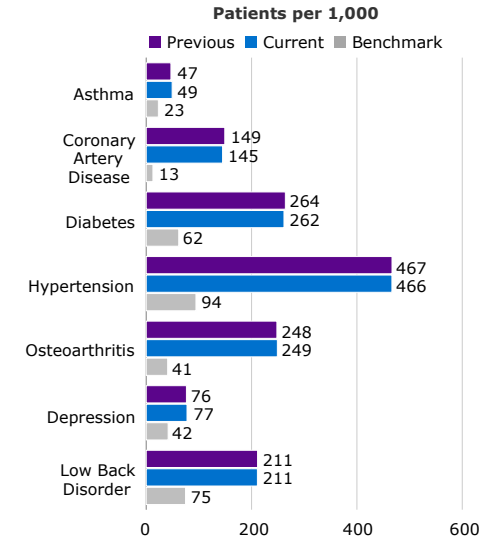


Condition	Allowed Amount Med	Patients Med	Med Allowed /Patient
1 Osteoarthritis	\$12,358,117	6,434	\$1,921
2 Spinal/Back Disord, Low Back	\$9,660,241	5,455	\$1,771
3 Coronary Artery Disease	\$8,982,484	3,746	\$2,398
4 Eye Disorders, Degenerative	\$8,924,813	7,861	\$1,135
5 Renal Function Failure	\$8,786,964	2,257	\$3,893
6 Arthropathies/Joint Disord NEC	\$8,382,841	9,575	\$875
7 Respiratory Disord, NEC	\$7,483,900	6,480	\$1,155
8 Cerebrovascular Disease	\$6,557,862	2,785	\$2,355
9 Hypertension, Essential	\$6,216,690	12,055	\$516
10 Cardiac Arrhythmias	\$5,634,704	4,207	\$1,339

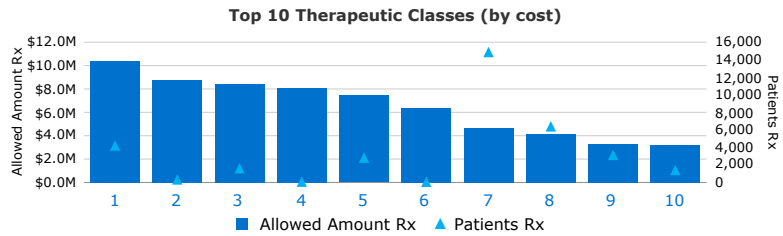
8. Screening Rates



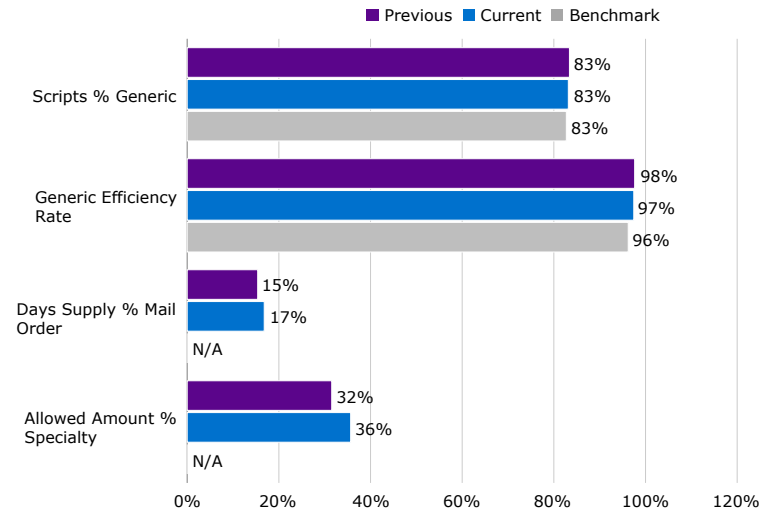
9. Chronic Condition Prevalence



10. Prescription Drug Metrics



Therapeutic Class	Allowed Amount Rx	Patients Rx	Rx Allowed /Patient
1 Antidiabetic Agents, Misc	\$10,365,455	4,220	\$2,456
2 Immunosuppressants, NEC	\$8,770,051	351	\$24,986
3 Antidiabetic Agents, Insulins	\$8,402,563	1,625	\$5,171
4 Molecular Targeted Therapy	\$8,073,971	97	\$83,237
5 Coag/Anticoag, Anticoagulants	\$7,439,588	2,836	\$2,623
6 Biological Response Modifiers	\$6,363,188	82	\$77,600
7 Antihyperlipidemic Drugs, NEC	\$4,621,610	14,880	\$311
8 Adrenals & Comb, NEC	\$4,149,714	6,403	\$648
9 Misc Therapeutic Agents, NEC	\$3,309,570	3,145	\$1,052
10 CNS Agents, Misc.	\$3,172,250	1,428	\$2,221



State of Delaware Medical and Prescription Drug Dashboard

Dashboard Glossary

General

- **Claims** are completed for claims incurred but not yet recorded (IBNR)
- **Benchmark** represents 2016 U.S. Total MarketScan norms that are age, gender, geographic, and/or severity adjusted as appropriate
- **PMPY** stands for Per Member Per Year and is weighted based on the number of months a member was enrolled in medical benefits
- **Allowed Amount (Allowed)** is the amount of submitted charges eligible for payment for medical and prescription drug claims; it is the amount eligible after applying pricing guidelines, but before deducting third party, copayment, coinsurance, or deductible amounts
- **Net Payment (Payment)** is the net amount paid by the company for medical and prescription drug claims; it represents the amount after all pricing guidelines have been applied, and all third party, copayment, coinsurance, and deductible amounts have been subtracted
- **Inpatient (IP)** represents claims for services provided under medical coverage in an acute inpatient setting; acute inpatient settings include inpatient hospitals, birthing centers, inpatient psychiatric facilities, and residential substance abuse treatment facilities
- **Outpatient (OP)** represents claims for medical services provided in any non-inpatient setting
- **Prescription Drug (Rx)** represents any claim paid under the pharmacy benefit
- **Patients** represents any member with a claim for the service (e.g., medical or prescription drug) being reported during the time period

1. Well Care and Preventive Visits

2. High Cost Claimants

- High Cost Claimants (HCCs) are members with \$100,000 or more in medical and prescription drug net payments incurred during the year
- Non-High Cost Claimants (HCCs) are members with less than \$100,000 in medical and prescription drug net payments incurred during the year

3. Quality Metrics

4. Medical Plan Eligibility

- **Average Employees** represents the number of employees with medical coverage; each employee is counted once for each month of their eligibility, then the total is averaged across the total number of months of eligibility during the time period
- **Average Members** represents the number of members with medical coverage; each member is counted once for each month of their eligibility, then the total is averaged across the total number of months of eligibility during the time period
- **Family Size** represents the average number of covered members per subscriber
- **Member Age** represents the average age of covered members during the year
- **Members % Male** represents the number of male members as a percent of total members

5. Price and Use

- **Current** represents your Price or Use rate in the Current year
- **Benchmark** represents the U.S. Total MarketScan norm for the Price or Use rate
- The **Symbol** next to the Benchmark represents your Current rate compared to the Norm
- The **Trend** represents your year-over-year trend for the Price or Use rate

6. Cost Sharing

The cost sharing percentage represents Out-of-Pocket divided by Allowed Amounts

- Out-of-Pocket represents the amount paid out-of-pocket by the member for facility, professional, and prescription drug services; this generally includes coinsurance, copayment, and deductible amounts

7. Top Medical Conditions (by cost)

- Conditions represent Truven Health Clinical Condition groupings, based on ICD-9 and ICD-10 diagnosis codes
- Clinical conditions include medical claims (i.e., prescription drug is not included)
- Note: The clinical condition of *Signs/Symptoms/Oth Cond, NEC* is excluded from this exhibit

8. Screening Rates

- **Cholesterol** identifies lipid screening tests for males aged 35+ years and females aged 45+ years; lipid screening tests include lipid panels, serum cholesterol tests, blood lipoprotein tests (e.g., HDL, LDL), and triglyceride tests [source for age and gender criteria: US Preventive Services Task Force]
- **Cervical Cancer** identifies the percentage of females aged 21 to 64 who received cervical cancer screening services [source for age, gender, procedure, diagnosis, and revenue code criteria: NCQA HEDIS 2014]
- **Breast Cancer** identifies the percentage of females aged 50 to 74 who received mammography services [source for age, gender, diagnosis, procedure, and revenue code criteria: NCQA HEDIS 2014]
- **Colon Cancer** identifies the percentage of adults aged 50 to 75 who received colon cancer screening services [source for age, diagnosis and procedure criteria: NCQA HEDIS 2014]

9. Chronic Condition Prevalence

- Conditions represent Truven Health Clinical Condition groupings, based on ICD-9 and ICD-10 diagnosis codes
- Chronic conditions identified based on medical claims

10. Prescription Drug Metrics

- **Therapeutic Class** represents the Redbook Therapeutic Class Intermediary
- **Scripts % Generic** is the number of prescriptions filled with a generic drug, expressed as a percentage of all prescriptions filled
- **Generic Efficiency Rate** is the number of prescriptions filled with a generic drug, expressed as a percentage of all prescriptions filled that could have been filled with a generic drug
- **Days Supply % Mail Order** is the percent of all prescription days supply filled via mail order
- **Allowed Amount % Specialty** is the percent of total prescription drug allowed amounts that were for medications considered to be specialty drugs (identified using Truven Health Service Categories)