

Why use this report?

Gain a deeper understanding of the overall utilization and trend impacts from the COVID pandemic.

This detailed Monthly Analytic Report provides insights into the following key areas:

- COVID-19 specific claim activity
- Telemedicine volumes and impact
- Overall health care utilization changes
- Risk profile for severe illness based on CDC guidance

This data can help you more fully explore the types of services and population being impacted during the pandemic and will help you answer your key questions such as:

- How many members have evidence of the condition or been tested?
- How many hospitalizations have there been?
- Where are people seeking care?
- How has overall utilization of physician services changed with social distancing and closure of physician offices?
- What is the demand and utilization for telehealth services?
- What is the higher risk for severe illness profile within this population? What is the risk profile for employees specifically?
- Are we seeing the impact of deferral of care such as reduction in elective surgeries, etc.?

Things to consider when reviewing this data

Reporting is based on diagnosis codes that are billed on a claim

Standard codes and coding guidance have rapidly evolved. While healthcare institutions adjust to new codes and coding changes, claims may be understated based on:



- Provider variance in understanding billing guidance
- Inability to confirm diagnosis due to testing limitations



- Test results received by provider post-claim submission
- No claim submission (e.g., testing covered by public health entity or inpatient)



- Claim submission prior to the introduction of COVID-19 specific ICD-10 codes

What codes are used in the COVID monthly view?

The following diagnoses and procedures are used to identify likely COVID-19 related claims in this report. **These codes represent our current best efforts to identify likely COVID-19 activity.** References to COVID-19 in this report are based on the codes below, some of which are not COVID-specific. These codes will generate claim activity in the prior period as they are not new.

COVID-19- Specific Diagnosis Codes - These are the new World Health Organization codes for COVID-19 cases which were not released until April 2020. Widespread adoption is expected to take time:

U07.1 - COVID-19 confirmed cases - Data is included when this code is billed as the primary, secondary or tertiary diagnosis

Coronavirus Diagnosis Codes - Providers were guided to bill these in the initial outbreak:

B97.29 - Other coronavirus as the cause of diseased

B34.2 - Coronavirus infection, unspecified

Exposure Diagnosis Codes - Pre-existing codes used for COVID-19 screenings and for non-confirmed/non-presumptive cases. Because these codes may also be used for suspected exposure to other biological agents and viral communicable diseases, some claims may be for non-COVID related cases:

Z03.818 - Suspected exposure to other biological agents ruled out

Z20.828 - Exposure to other viral communicable diseases

Testing Procedure Codes - Used to identify COVID-19 and antibody testing: **86328, 86408, 86409, 86413, 86769, 87426, 87635, 87636, 87637, 87811, C9803, G2023, G2024, U0001, U0002, U0003, U0004, 0202U, 0223U, 0224U, 0225U, 0226U, 0240U, 0241U**

Telemedicine - Metrics include Teladoc as well as community based providers performing approved telemedicine services

Report terms

Here are more specific details behind terms used in this report:

Claimant Distribution Definitions:

- **Confirmed Cases** - The number of members who had a claim with the COVID-19 specific diagnosis code U07.1 billed as one of the first 3 diagnoses on a claim
- **Probable Cases** - The number of members who have either of the general coronavirus codes shown on the left billed as the primary diagnosis on a claim
- **Exposure Cases** - The number of members who have either of the exposure diagnosis codes shown on the left billed as the primary diagnosis on a claim
- **Lab Test Only Cases** - The number of members who had a lab test with a diagnosis code other than the five used in this report to identify COVID-19 claimants. These members have ONLY had claims for testing and do not have other claims that fit the criteria outlined above

High Risk Members - We used the CDC guidance to identify members within the population that may be at higher risk for severe illness. This includes members who are over 64 as well as those that have one or more conditions outlined by the CDC such as serious heart conditions, diabetes, chronic kidney disease, etc. The CDC guidance can be found here: <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html>

Time Periods - *Current* and *Prior* represent 2020 and 2019 incurred claims for the dates shown at the top of this report. The claim lag for both time periods is the same to provide a consistent year over year comparison

Prior: Jan - Sep 2019, paid through September 2019
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COVID-19 population alerts

Hot Spots In the United States - Map (to the right)

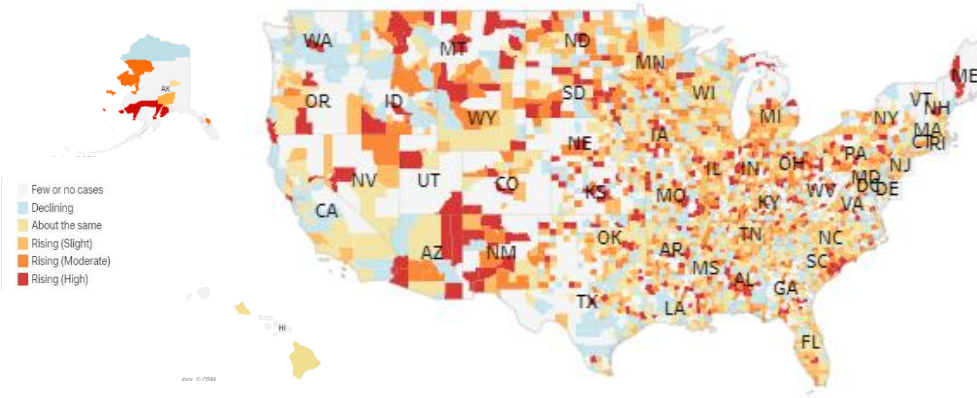
The map shows how the number of new cases have CHANGED in the last two weeks across the U.S. (not plan sponsor-specific). This provides an indication of which direction the level of new cases is trending.

County Alerts (below)

The tables below show the average daily new cases per 100,000 individuals by county over the past 7 days. These rates are reflective of the overall population of the county, not of your specific membership. This data is to highlight where you have membership in counties experiencing high or emerging rates of new cases.

We use information collected by the CDC to calculate a '7 day average new case count.' This data is normalized for population size (new cases per 100,000 individuals) to smooth unusual daily highs or lows, caused by data collection fluctuations.

The data below is for your top 25 counties (by membership) that are identified as having either a high or emerging average daily case rates. There could be less than 25 counties in the tables (or none) if the alert criteria is not met.



Few or no cases
 Declining
 About the same
 Rising (Slight)
 Rising (Moderate)
 Rising (High)

Heat map of recent growth by county: This map shows the average growth between the last seven days and the previous seven days. Brown colors indicate an increasing trend while cool colors indicate a decreasing trend. Few or no cases indicates less than 20 new cases in the past 2 weeks. Other colors in the legend are determined by % change in new cases in the past 2 weeks: **Declining** <=-15%; **About the same** <-15% and >-15%; **Rising (Slight)** >=15% and <50%; **Rising (Moderate)** >=50% and <100%; **Rising (High)** >=100%
 Last Updated: 10/12/2020 | Source: John Hopkins Data/CDC

High risk counties (red) had greater than 25 daily new cases per 100,000 individuals
Emerging risk counties (orange) had between 10 and 25 daily new cases per 100,000 individuals

Data is for week ending:
 10/11/2020

Note: Counties with less than 20 new cases in the prior week will not appear in this report. New case data is not available for approximately 30 counties. "Your members" represents your total commercial Aetna self-insured membership.

High Risk (>=25 new cases per 100,000 individuals)

State, County	County population	Your members	Avg daily new cases per 100K
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No high risk counties

Emerging Risk (10-24 new cases per 100,000 individuals)

State, County	County population	Your members	Avg daily new cases per 100K
New Jersey, Atlantic	274,549	859	12.5
New Jersey, Ocean	576,567	29	22.9
Delaware, New Castle	538,479	23	15.6
Pennsylvania, Delaware	558,979	12	10.1
Florida, St. Johns	190,039	2	13.7
Pennsylvania, Philadelphia	1,526,006	2	11.8
Florida, Polk	602,095	2	16.4
New Jersey, Monmouth	630,380	1	13.3

SOUTHERN COASTAL HEALTH INSURANCE FUND - 93791981

Group Number(s): 737420,737421

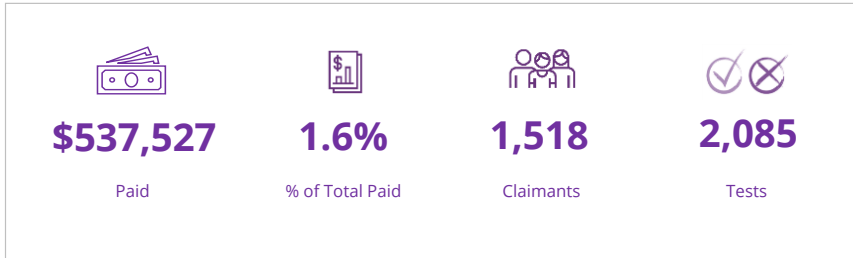
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At a glance

COVID-19

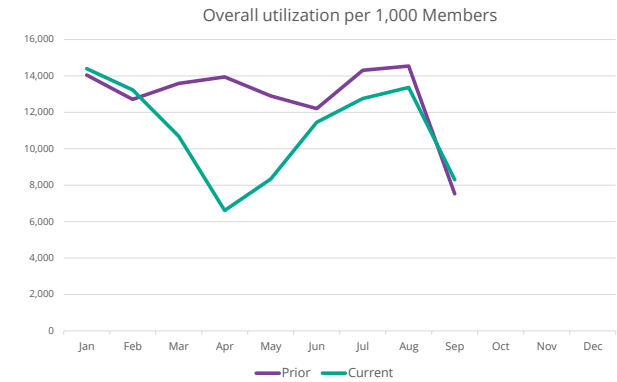
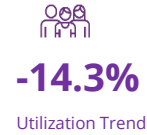
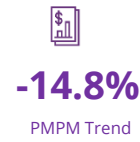


More detailed information is found on the next page to help you answer critical questions:

- ✓ How is COVID-19 impacting our health care spend? What is the context of trends and spend distribution across cost categories?
- ✓ How many members are affected?
- ✓ How many claims-based tests have been conducted for the virus and antibodies?

Additional views and detailed data tables following the main report also provide specific cost and utilization metrics across age band categories as well as service categories

Total healthcare services



Current month utilization is understated due to incomplete claims (no lag period applied). This chart is intended to show the changes in utilization patterns throughout the year compared to the same period last year

COVID-19 population risk



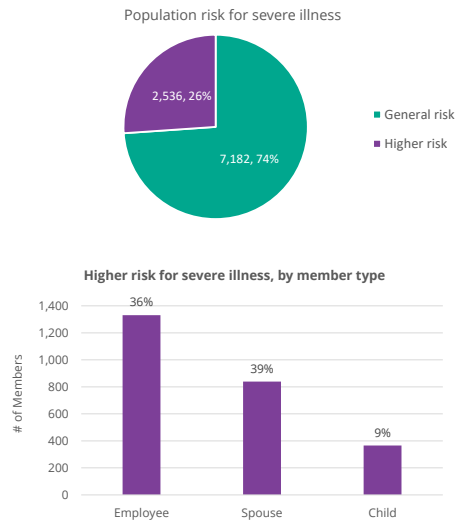
26.1%

Members at risk for severe illness

General risk for contracting COVID-19 exists across the population. Age and underlying health conditions are associated with higher risk for severe illness with the potential for severe symptoms, hospitalizations, ICU services, and poorer outcomes.

The pie chart shows the number and percent of your population with CDC-identified "higher risk for severe illness" factors.

The bar chart displays this information by member type.



Total Telemedicine



Many members are turning to telemedicine services as an alternative to traditional care.

Telemedicine services reflected in this view are not specific to COVID-19 care. This view is intended to help understand the broader impact of pandemic-induced pattern of care changes on telemedicine services.

Page 4 and 5 of this report provide additional context for this data by comparing to reductions in office visits and other key metrics.

This is a change of **2,185%** in visits compared to this time last year



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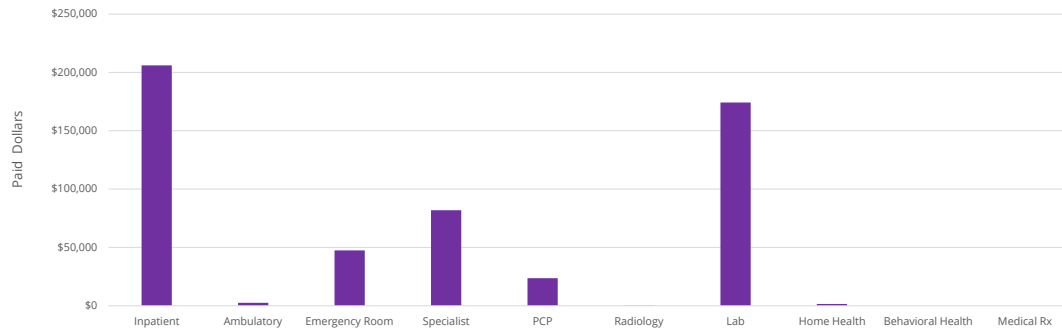


COVID-19 Costs

\$537,527

represents COVID-related claims for **1,518** unique claimants across these medical cost categories:

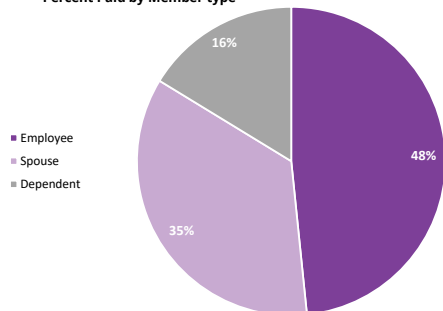
COVID-19 represents **1.6%** of total year to date costs



Spotlight on specific categories



Percent Paid by Member type



Claimant distribution*

how your total claimants break down based on diagnosis code information



93	Confirmed
7	Probable
981	Exposure
437	Lab test only

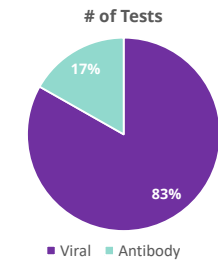
*refer to Report terms on page 1

Coronavirus testing

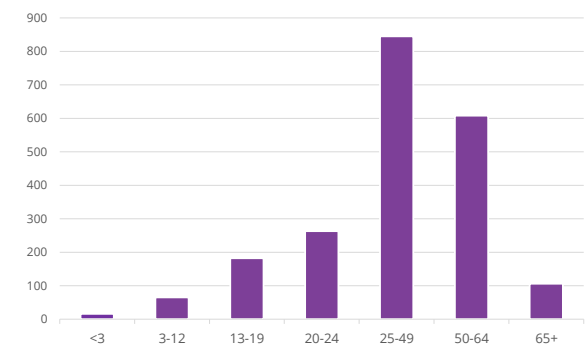


2,085

COVID Tests



of Tests by Age Band

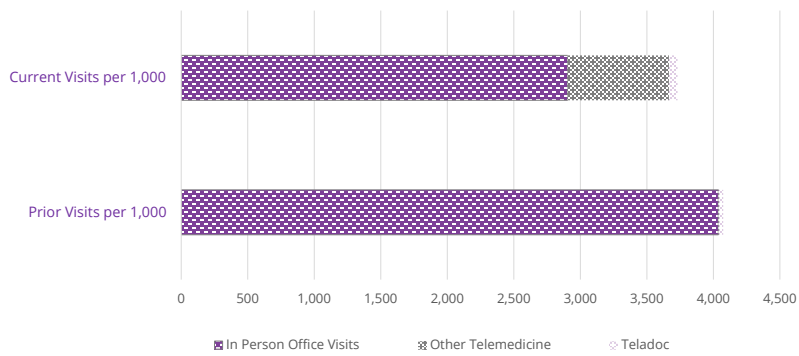


Telemedicine

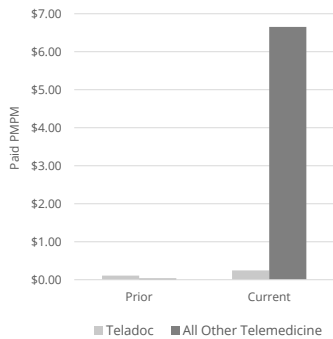
What is this population's telemedicine utilization and how has it changed?



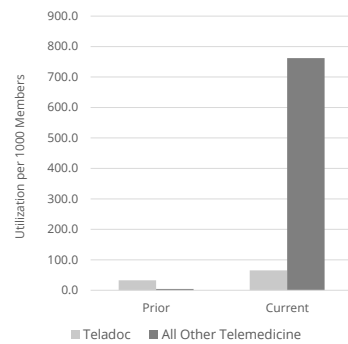
Utilization Patterns



Telemedicine Paid



Telemedicine Utilization

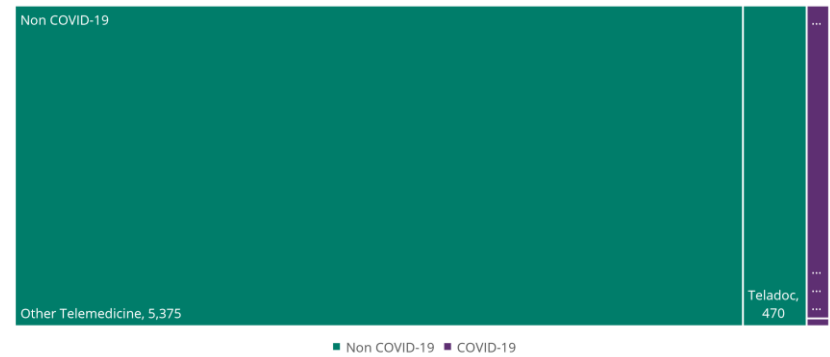


How telemedicine is being used in the context of the pandemic

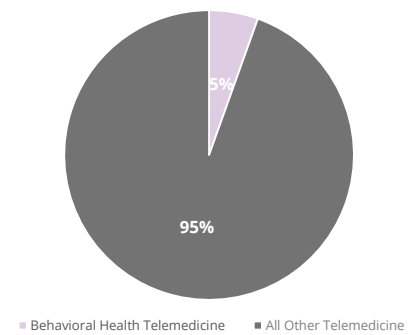
Changes in the use of telemedicine services are an immediate observable side effect of the pandemic. Stay at home orders and social distancing resulted in many healthcare providers ceasing non-emergent office visits and providing them virtually via secured technology. This change in practice has and will result in large increases in telemedicine utilization with expected decreases in office-based utilization.

Why is this population turning to telemedicine?

Current Telemedicine Visits



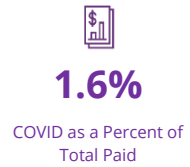
Behavioral vs All Other



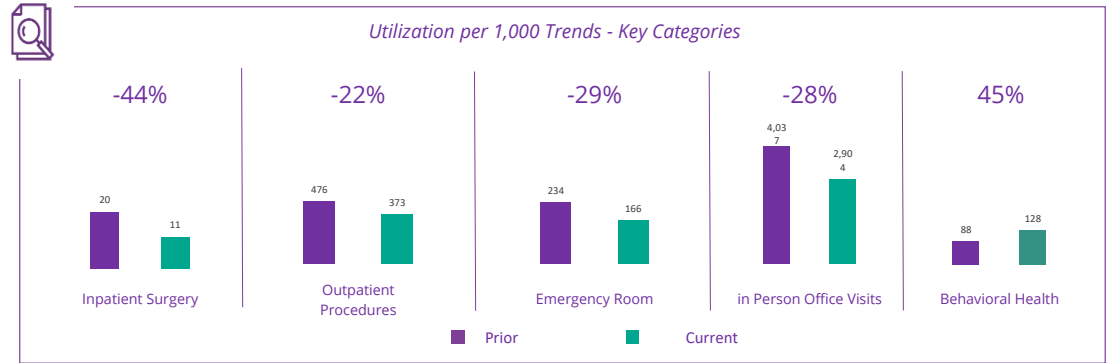
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Overall Healthcare Services

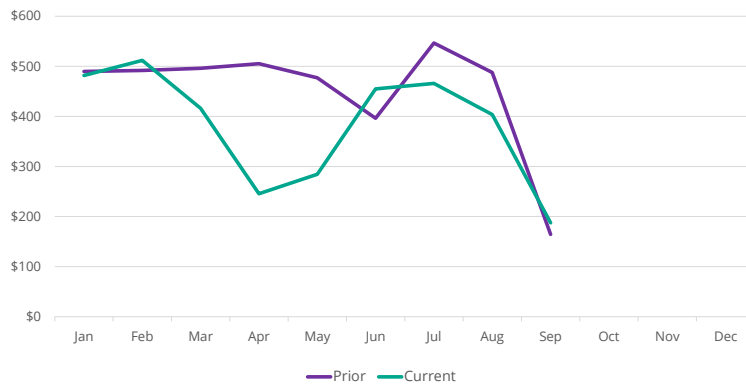
How are services changing?



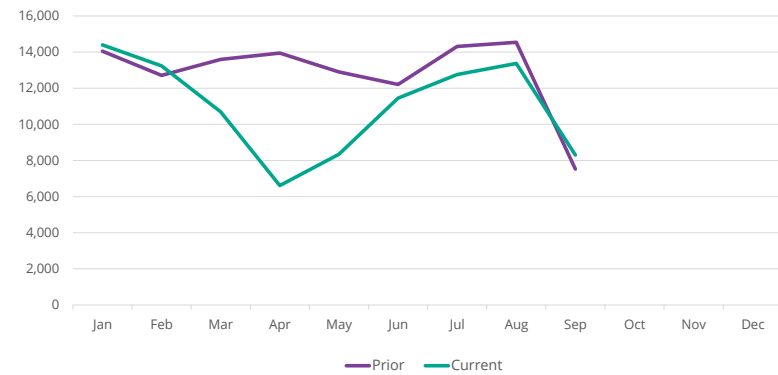
Spotlight - How is utilization changing?



Paid per Member per Month



Utilization per 1,000 Members



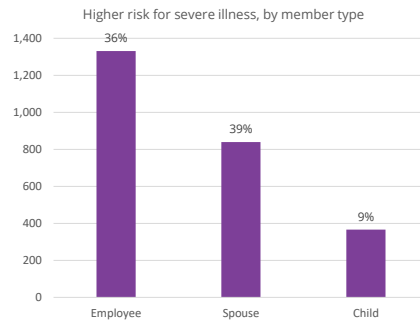
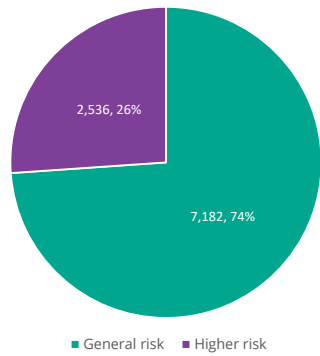
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Risk of the Population

2,536

members are at higher risk for severe illness, representing **26.1%**

of the population, using CDC-identified higher risk factors like age and pre-existing chronic conditions

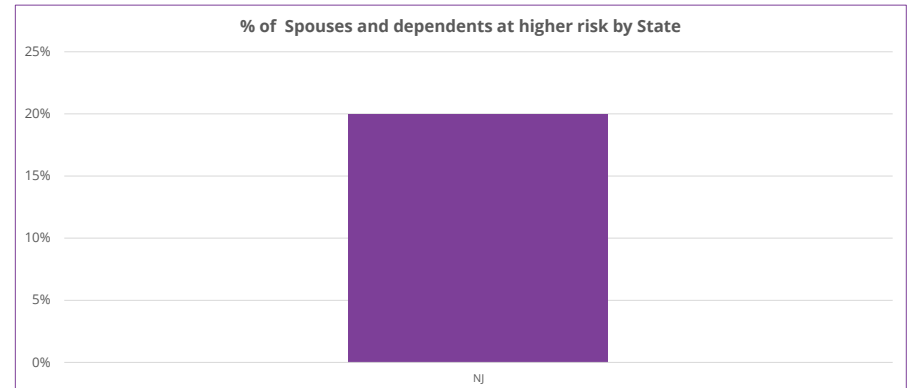
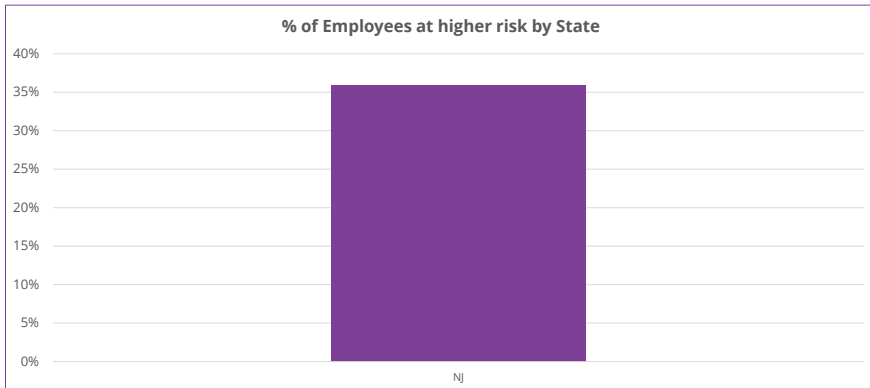


General risk for contracting COVID-19 exists across the population. Age and underlying health conditions are associated with higher risk for severe illness with the potential for severe symptoms, hospitalizations, ICU services, and poorer outcomes. The CDC provides guidelines, recommendations, and resources for those who are considered at higher-risk for severe illness.

The pie chart shows the percent of members with CDC-identified "higher risk for severe illness" factors.

The bar chart to the left shows risk by member type.

The bar charts below provide a sense of risk by state.



Data in these charts is only shown for states where there are at least 50 employees



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Table 1: Total COVID-19 Medical Cost and Utilization:

Age Band	# of Unique Claimants			Medical Paid			Medical Paid PMPM			Visits			Visits per 1,000			Cost per Visit		
	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change
<3 years	0	17	-	\$0	\$2,231	-	\$0.00	\$0.03	-	0	22	-	0.0	3.0	-	\$0	\$101	-
3 - 12 years	0	62	-	\$0	\$8,575	-	\$0.00	\$0.10	-	0	78	-	0.0	10.7	-	\$0	\$110	-
13 - 19 years	0	154	-	\$0	\$27,534	-	\$0.00	\$0.32	-	0	244	-	0.0	33.6	-	\$0	\$113	-
20 - 24 years	0	175	-	\$0	\$43,090	-	\$0.00	\$0.49	-	0	340	-	0.0	46.8	-	\$0	\$127	-
25 - 49 years	1	603	60,200.0%	\$13	\$224,250	1,785,333.0%	\$0.00	\$2.57	1,746,826.0%	1	1,104	110,300.0%	0.1	152.0	107,919.0%	\$13	\$203	1517.2%
50 - 64 years	3	426	14,100.0%	\$1,621	\$182,987	11,185.5%	\$0.02	\$2.10	10,942.1%	3	766	25,433.3%	0.4	105.5	24,882.6%	\$540	\$239	-55.8%
65+ years	0	81	-	\$0	\$48,860	-	\$0.00	\$0.56	-	0	164	-	0.0	22.6	-	\$0	\$298	-
Total	4	1,518	37,850.0%	\$1,634	\$537,527	32,796.6%	\$0.02	\$6.17	32,087.1%	4	2,718	67,850.0%	0.6	374.2	66,384.5%	\$408	\$198	-51.6%

Table 2: COVID-19 Testing

Age Band	# of Unique Claimants			# of Tests			Paid Amount			Paid PMPM			Cost per Test		
	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change
<3 years	0	16	-	0	16	-	\$0	\$1,095	-	\$0.00	\$0.01	-	\$0	\$68	-
3 - 12 years	0	57	-	0	65	-	\$0	\$5,309	-	\$0.00	\$0.06	-	\$0	\$82	-
13 - 19 years	0	141	-	0	182	-	\$0	\$15,619	-	\$0.00	\$0.18	-	\$0	\$86	-
20 - 24 years	0	162	-	0	263	-	\$0	\$22,626	-	\$0.00	\$0.26	-	\$0	\$86	-
25 - 49 years	0	557	-	0	845	-	\$0	\$70,500	-	\$0.00	\$0.81	-	\$0	\$83	-
50 - 64 years	0	409	-	0	608	-	\$0	\$51,282	-	\$0.00	\$0.59	-	\$0	\$84	-
65+ years	0	73	-	0	106	-	\$0	\$9,932	-	\$0.00	\$0.11	-	\$0	\$94	-
Total	0	1,415	-	0	2,085	-	\$0	\$176,363	-	\$0.00	\$2.02	-	\$0	\$85	-

Table 3: Emergency Room Cost and Utilization of COVID-19:

Age Band	# of Unique Claimants			Medical Paid			Medical Paid PMPM			Visits			Visits per 1,000			Cost per Visit		
	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change
<3 years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-
3 - 12 years	0	3	-	\$0	\$342	-	\$0.00	\$0.00	-	0	3	-	0.0	0.4	-	\$0	\$114	-
13 - 19 years	0	1	-	\$0	\$77	-	\$0.00	\$0.00	-	0	1	-	0.0	0.1	-	\$0	\$77	-
20 - 24 years	0	6	-	\$0	\$8,777	-	\$0.00	\$0.10	-	0	6	-	0.0	0.8	-	\$0	\$1,463	-
25 - 49 years	0	12	-	\$0	\$22,821	-	\$0.00	\$0.26	-	0	14	-	0.0	1.9	-	\$0	\$1,630	-
50 - 64 years	0	6	-	\$0	\$8,537	-	\$0.00	\$0.10	-	0	7	-	0.0	1.0	-	\$0	\$1,220	-
65+ years	0	3	-	\$0	\$6,890	-	\$0.00	\$0.08	-	0	3	-	0.0	0.4	-	\$0	\$2,297	-
Total	0	31	-	\$0	\$47,444	-	\$0.00	\$0.54	-	0	34	-	0.0	4.7	-	\$0	\$1,395	-

Section 4: Teladoc/Telemedicine Cost and Utilization of COVID-19:

Age Band	# of Unique Claimants			Medical Paid			Medical Paid PMPM			Visits			Visits per 1,000			Cost per Visit		
	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change
<3 years	0	3	-	\$0	\$313	-	\$0.00	\$0.00	-	0	3	-	0.0	0.4	-	\$0.00	\$104.39	-
3 - 12 years	0	3	-	\$0	\$547	-	\$0.00	\$0.01	-	0	3	-	0.0	0.4	-	\$0.00	\$182.34	-
13 - 19 years	0	18	-	\$0	\$2,281	-	\$0.00	\$0.03	-	0	21	-	0.0	2.9	-	\$0.00	\$108.64	-
20 - 24 years	0	12	-	\$0	\$1,200	-	\$0.00	\$0.01	-	0	15	-	0.0	2.1	-	\$0.00	\$80.01	-
25 - 49 years	0	50	-	\$0	\$6,219	-	\$0.00	\$0.07	-	0	66	-	0.0	9.1	-	\$0.00	\$94.23	-
50 - 64 years	0	38	-	\$0	\$3,604	-	\$0.00	\$0.04	-	0	48	-	0.0	6.6	-	\$0.00	\$75.09	-
65+ years	0	6	-	\$0	\$1,163	-	\$0.00	\$0.01	-	0	9	-	0.0	1.2	-	\$0.00	\$129.24	-
Total	0	130	-	\$0	\$15,328	-	\$0.00	\$0.18	-	0	165	-	0.0	22.7	-	\$0.00	\$92.90	-

Table 4a: All Telemedicine (regardless of diagnosis)

Telemedicine	# of Unique Claimants			Medical Paid			Medical Paid PMPM			Visits			Visits per 1,000			Cost per Visit		
	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change
All Telemedicine	177	2,985	1,586.4%	\$11,625	\$601,090	5,070.5%	\$0.14	\$6.90	4,959.0%	263	6,010	2,185.2%	37.0	827.4	2,135.9%	\$44	\$100	126.3%



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Table 5: Urgent Care / Retail and Minute Clinic Cost and Utilization of COVID-19:

Age Band	# of Unique Claimants			Medical Paid			Medical Paid PMPM			Visits			Visits per 1,000			Cost per Visit		
	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change
<3 years	0	3	-	\$0	\$634	-	\$0.00	\$0.01	-	0	3	-	0.0	0.4	-	\$0.00	\$211.33	-
3 - 12 years	0	8	-	\$0	\$1,449	-	\$0.00	\$0.02	-	0	8	-	0.0	1.1	-	\$0.00	\$181.13	-
13 - 19 years	0	45	-	\$0	\$7,362	-	\$0.00	\$0.08	-	0	49	-	0.0	6.7	-	\$0.00	\$150.25	-
20 - 24 years	0	57	-	\$0	\$7,533	-	\$0.00	\$0.09	-	0	63	-	0.0	8.7	-	\$0.00	\$119.57	-
25 - 49 years	0	152	-	\$0	\$23,010	-	\$0.00	\$0.26	-	0	165	-	0.0	22.7	-	\$0.00	\$139.46	-
50 - 64 years	0	85	-	\$0	\$12,822	-	\$0.00	\$0.15	-	0	91	-	0.0	12.5	-	\$0.00	\$140.90	-
65+ years	0	17	-	\$0	\$2,960	-	\$0.00	\$0.03	-	0	18	-	0.0	2.5	-	\$0.00	\$164.47	-
Total	0	367	-	\$0	\$55,770	-	\$0.00	\$0.64	-	0	397	-	0.0	54.7	-	\$0.00	\$140.48	-

Table 6: Inpatient Cost and Utilization of COVID-19:

Age Band	# of Unique Claimants			Medical Paid			Medical Paid PMPM			# of Admissions			Admissions per 1,000			Cost per Admission			Average Length of Stay		
	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change
<3 years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-	0.0	0.0	-
3 - 12 years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-	0.0	0.0	-
13 - 19 years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-	0.0	0.0	-
20 - 24 years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-	0.0	0.0	-
25 - 49 years	0	3	-	\$0	\$88,578	-	\$0.00	\$1.02	-	0	3	-	0.0	0.4	-	\$0	\$29,526	-	0.0	5.3	-
50 - 64 years	0	2	-	\$0	\$96,055	-	\$0.00	\$1.10	-	0	3	-	0.0	0.4	-	\$0	\$32,018	-	0.0	6.0	-
65+ years	0	2	-	\$0	\$21,418	-	\$0.00	\$0.25	-	0	2	-	0.0	0.3	-	\$0	\$10,709	-	0.0	3.0	-
Total	0	7	-	\$0	\$206,051	-	\$0.00	\$2.36	-	0	8	-	0.0	1.1	-	\$0	\$25,756	-	0.0	5.0	-

Table 7: Cost and Utilization of COVID-19 by Medical Cost Category

Med Cost Category	# of Unique Claimants			Medical Paid			Medical Paid PMPM			Visits			Visits per 1,000			Cost per Visit		
	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change
Inpatient	0	7	-	\$0	\$206,051	-	\$0.00	\$2.36	-	0	8	-	0.0	1.1	-	\$0	\$25,756	-
Ambulatory	1	4	300.0%	\$1,161	\$2,517	116.7%	\$0.01	\$0.03	112.0%	1	4	300.0%	0.1	0.6	291.4%	\$1,161	\$629	-45.8%
Emergency Room	0	31	-	\$0	\$47,444	-	\$0.00	\$0.54	-	0	34	-	0.0	4.7	-	\$0	\$1,395	-
Specialist	1	439	43,800.0%	\$60	\$81,888	135,432.0%	\$0.00	\$0.94	132,509.0%	1	504	50,300.0%	0.1	69.4	49,213.0%	\$60	\$162	168.9%
PCP	0	175	-	\$0	\$23,701	-	\$0.00	\$0.27	-	0	250	-	0.0	34.4	-	\$0	\$95	-
Radiology	1	1	0.0%	\$371	\$188	-49.4%	\$0.00	\$0.00	-50.5%	1	2	100.0%	0.1	0.3	95.7%	\$371	\$94	-74.7%
Lab	3	1,378	45,833.3%	\$42	\$174,245	419,060.1%	\$0.00	\$2.00	410,019.9%	3	1,972	65,633.3%	0.4	271.5	64,215.6%	\$14	\$88	537.7%
Home Health	0	5	-	\$0	\$1,494	-	\$0.00	\$0.02	-	0	9	-	0.0	1.2	-	\$0	\$166	-
Behavioral Health	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-
Medical Rx	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-
Total	4	1,518	37,850.0%	\$1,634	\$537,527	32,796.6%	\$0.02	\$6.17	32,087.1%	4	2,718	67,850.0%	0.6	374.2	66,384.5%	\$408	\$198	-51.6%

Table 8: Total COVID-19 Medical Cost by Member Type:

Member Type	# of Unique Claimants			Medical Paid			Medical Paid PMPM			Distribution of Spend	
	Prior	Current	Change	Prior	Current	Change	Prior	Current	Change	Prior	Current
Employee	4	714	17,750.0%	\$1,634	\$260,025	15,813.5%	\$0.02	\$2.98	15,470.3%	100%	48%
Spouse	0	369	-	\$0	\$189,997	-	\$0.00	\$2.18	-	0%	35%
Child	0	435	-	\$0	\$87,505	-	\$0.00	\$1.00	-	0%	16%
Total	4	1,518	37,850.0%	\$1,634	\$537,527	32,796.6%	\$0.02	\$6.17	32,087.1%	100.0%	100.0%

IMPORTANT: Testing and treatment for the new coronavirus is still evolving and as a result claims experience may be effected as the industry adapts to the changing circumstances. Information is believed to be accurate as of the production date; however, it is subject to change. Aetna makes no representation or warranty of any kind, whether express or implied, with respect to the information in this report and cannot guarantee its accuracy or completeness. Aetna shall not be liable for any act or omissions made in reliance on the information.

Prior: Jan - Sep 2019, paid through September 2019
 Current: Jan - Sep 2020, paid through September 2020
 Average Current Members: 9,685



**Appendix:
 Alerts for the top 50
 counties with high
 new cases rates in
 which you have
 membership**

State, County	County population	Your members	Average daily new cases per 100K	Risk Level
New Jersey, Ocean	576,567	29	22.9	Emerging Risk
Florida, Polk	602,095	2	16.4	Emerging Risk
Delaware, New Castle	538,479	23	15.6	Emerging Risk
Florida, St. Johns	190,039	2	13.7	Emerging Risk
New Jersey, Monmouth	630,380	1	13.3	Emerging Risk
New Jersey, Atlantic	274,549	859	12.5	Emerging Risk
Pennsylvania, Philadelphia	1,526,006	2	11.8	Emerging Risk
Pennsylvania, Delaware	558,979	12	10.1	Emerging Risk

County Alerts

This table shows the rate of average daily new cases per 100,000 individuals that live in that county. These rates are reflective of the overall general population of the county, not of your specific membership in that county. We are providing this information to inform you which counties you have membership in that are experiencing a high incidence rate of new cases.

The CDC collects new case counts at the county level. We use this information to calculate a '7 day average new case count.' This data is then normalized for population size (new cases per 100,000 individuals) to smooth unusual daily highs or lows, often caused by data collection fluctuations.

The county information is for your top 50 counties in which you have membership that have the highest average daily new cases over the past seven days. Average daily new cases of 25 per 100k members are denoted as high risk (red) and those with 10-24.9 are denoted as emerging risk (orange).

Note: There may be less than 50 counties or none at all depending upon where you have membership vs .the counties with the highest risk.