

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: **87635, U0001, U0002, U0003, U0004, G2023, G2024, 86328, 86769, 0202U, C9803, 87426, 0223U, 0224U**

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

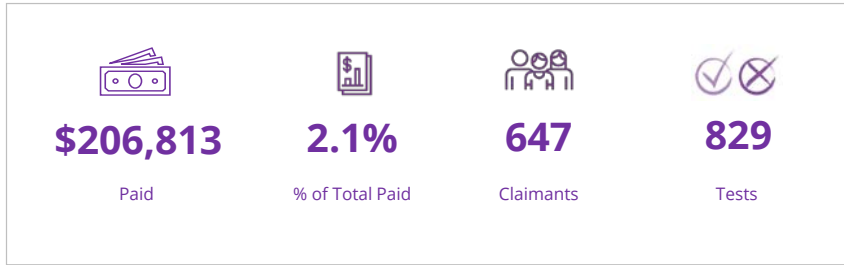
- **Lab Test Only Cases** - The number of members who had a lab test with a diagnosis code other than the five used in this report to identify COVID-19 claimants. These members have ONLY had claims for testing and do not have other claims that fit the criteria outlined above

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

At a glance

COVID-19

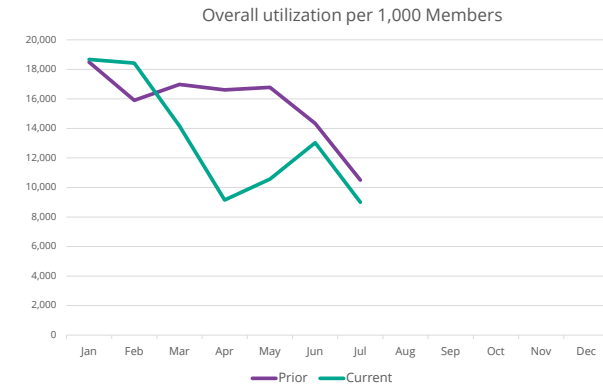


More detailed information is found on the next page to help you answer critical questions:

- ✓ 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?

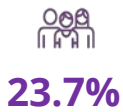
Additional views and detailed data tables following the main report also provide specific cost and utilization metrics across age band categories as well as service categories

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

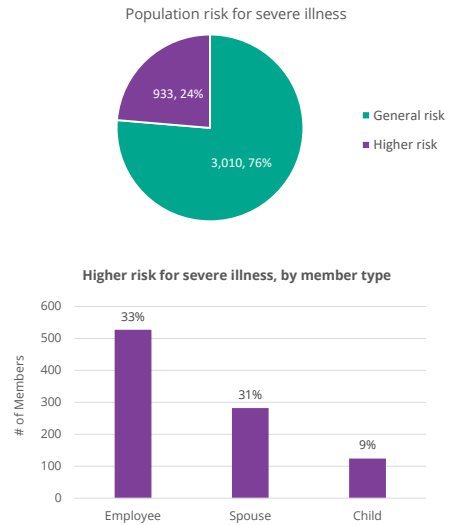


Members at risk for severe illness

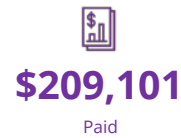
General risk for contracting COVID-19 exists across the population. Age and underlying health conditions are associated with higher risk for severe illness with the potential for severe symptoms, hospitalizations, ICU services, and poorer outcomes.

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



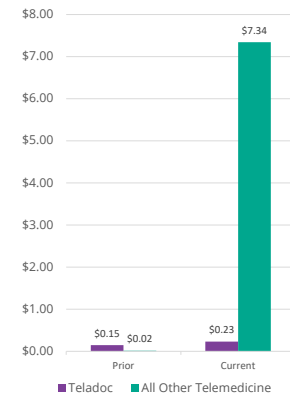
Many members are turning to telemedicine services as an alternative to traditional care.

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 **2,832%** in visits compared to this time last year

Telemedicine Paid PMPM



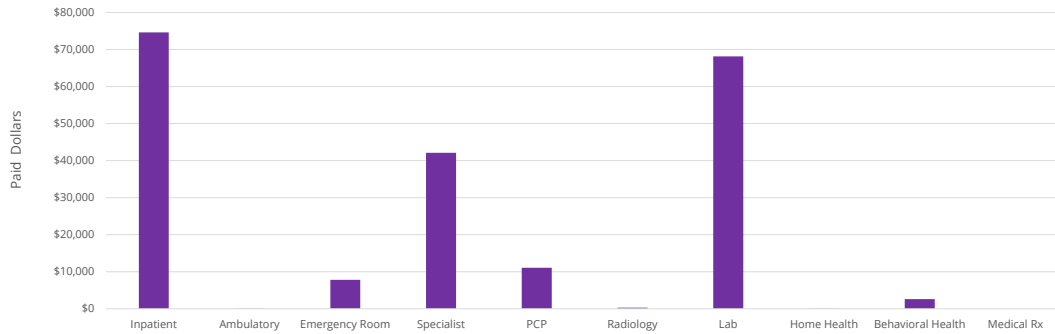


COVID-19 Costs

\$206,813

represents COVID-related claims for **647** unique claimants across these medical cost categories:

COVID-19 represents **2.1%** of total year to date costs



Spotlight on specific categories

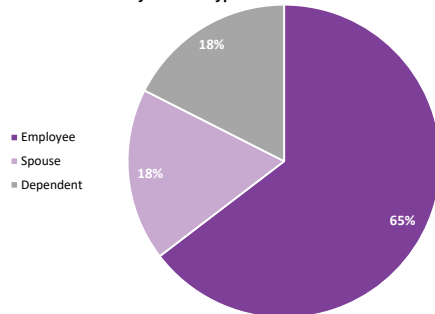


4
Admissions
Inpatient
Paid
\$74,639

7
Visits
Emergency Room
Paid
\$7,818

134
Visits
Telemedicine
Paid
\$11,771

Percent Paid by Member type



Claimant distribution*

how your total claimants break down based on diagnosis code information



73	Confirmed
11	Probable
373	Exposure
190	Lab test only

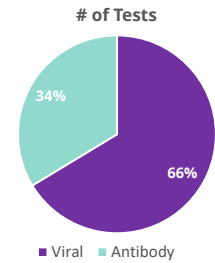
*refer to Report terms on page 1

Coronavirus testing

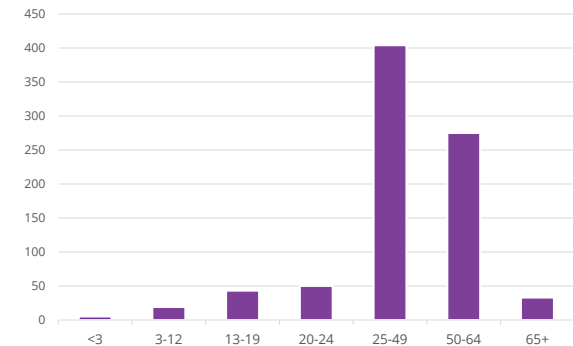


829

COVID Tests



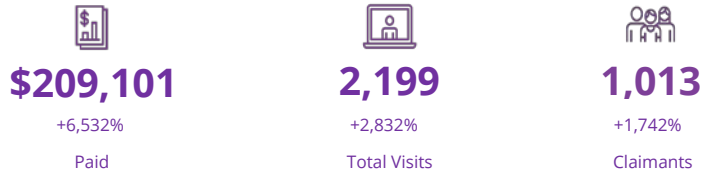
of Tests by Age Band



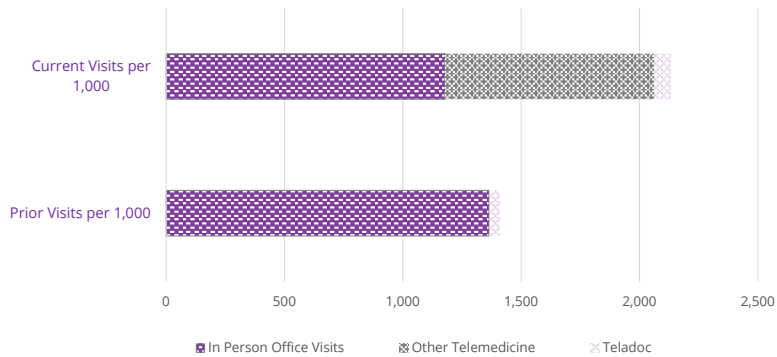


Telemedicine

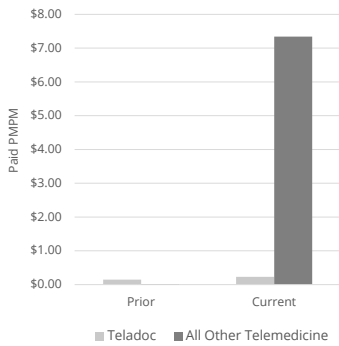
What is this population's telemedicine utilization and how has it changed?



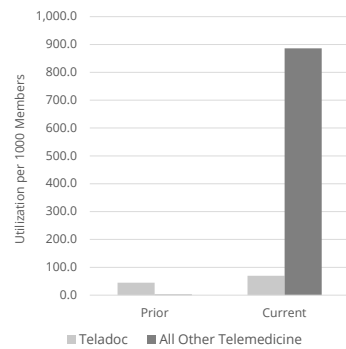
Utilization Patterns



Telemedicine Paid



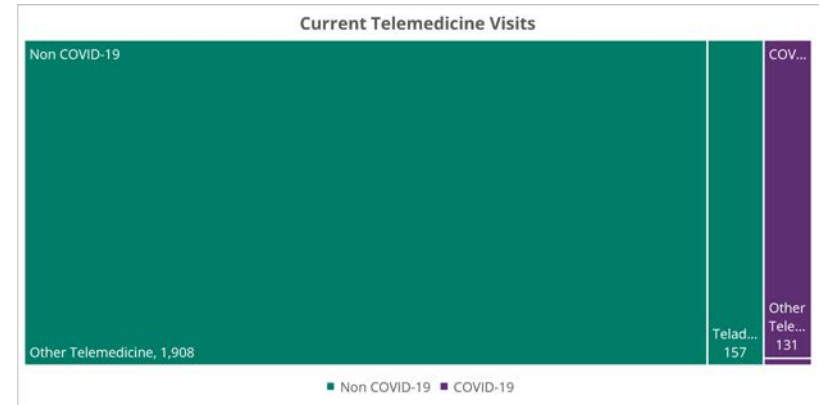
Telemedicine Utilization



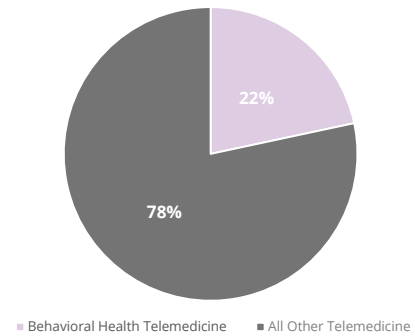
How telemedicine is being used in the context of the pandemic

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?



Behavioral vs All Other



Prior: Jan - Jul 2019, paid through July 2019
 Current: Jan - Jul 2020, paid through July 2020
 Average Current Member: 3,946

Overall Healthcare Services

How are services changing?



\$9.7M

Year to Date 2020



-18.4%

PMPM Trend



2.1%

COVID as a Percent of Total Paid



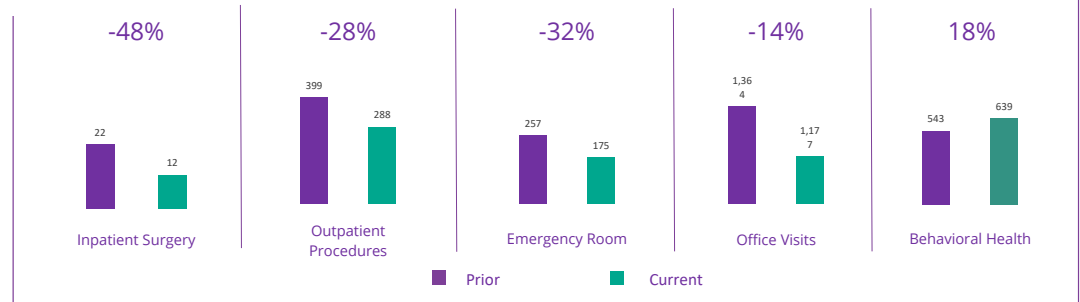
-15.0%

Utilization Trend

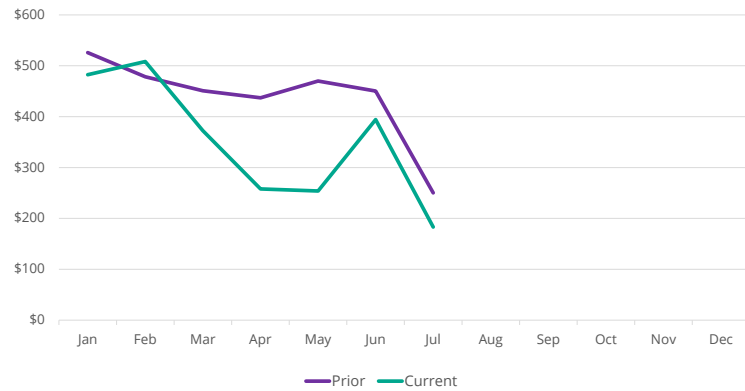
Spotlight - How is utilization changing?



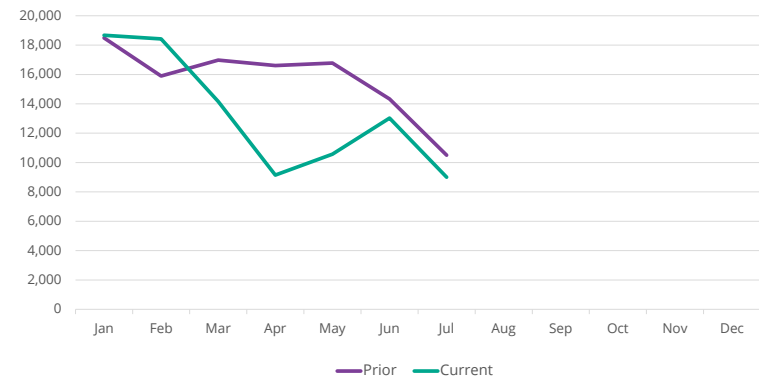
Utilization per 1,000 Trends - Key Categories



Paid per Member per Month



Utilization per 1,000 Members

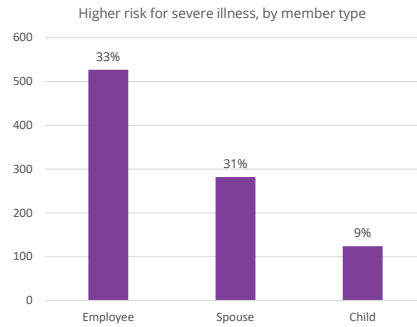
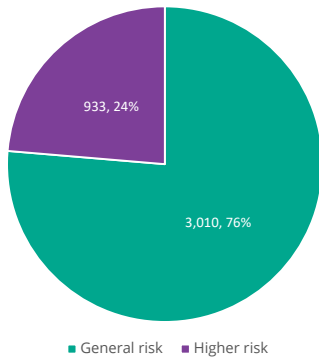




Risk of the Population

933 members are at higher risk for severe illness, representing **23.7%**

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

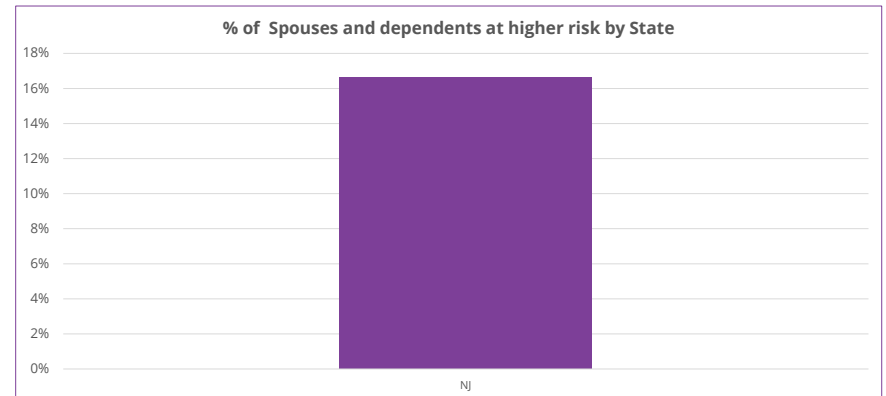
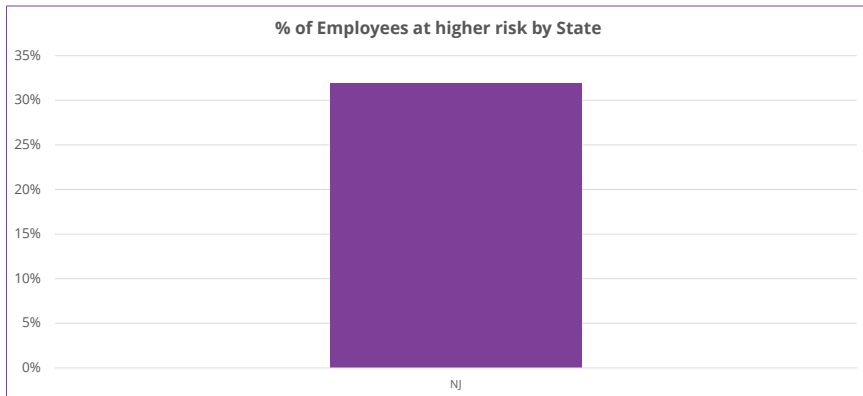


General risk for contracting COVID-19 exists across the population. Age and underlying health conditions are associated with higher risk for severe illness with the potential for severe symptoms, hospitalizations, ICU services, and poorer outcomes. The CDC provides guidelines, recommendations, and resources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



Prior: Jan - Jul 2019, paid through July 2019
 Current: Jan - Jul 2020, paid through July 2020
 Average Current Member: 3,946

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	2	5	150.0%	\$787	\$1,248	58.6%	\$0.04	\$0.05	10.6%	2	7	250.0%	1.2	3.0	144.1%	\$393	\$178	-54.7%
3 - 12 years	0	18	-	\$0	\$2,350	-	\$0.00	\$0.09	-	0	23	-	0.0	10.0	-	\$0	\$102	-
13 - 19 years	1	38	3,700.0%	\$0	\$14,314	-	\$0.00	\$0.52	-	1	69	6,800.0%	0.6	30.0	4,713.2%	\$0	\$207	-
20 - 24 years	0	47	-	\$0	\$17,957	-	\$0.00	\$0.65	-	0	78	-	0.0	33.9	-	\$0	\$230	-
25 - 49 years	6	298	4,866.7%	\$1,767	\$120,101	6,695.7%	\$0.09	\$4.35	4,640.4%	6	556	9,166.7%	3.7	241.6	6,364.1%	\$295	\$216	-26.7%
50 - 64 years	1	212	21,100.0%	\$120	\$43,578	36,215.0%	\$0.01	\$1.58	25,232.0%	1	406	40,500.0%	0.6	176.4	28,221.1%	\$120	\$107	-10.6%
65+ years	0	29	-	\$0	\$7,266	-	\$0.00	\$0.26	-	0	57	-	0.0	24.8	-	\$0	\$127	-
Total	10	647	6,370.0%	\$2,674	\$206,813	7,634.8%	\$0.14	\$7.49	5,295.5%	10	1,196	11,860.0%	6.2	519.6	8,242.9%	\$267	\$173	-35.3%

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	4	-	0	5	-	\$0	\$440	-	\$0.00	\$0.02	-	\$0	\$88	-
3 - 12 years	0	15	-	0	19	-	\$0	\$1,353	-	\$0.00	\$0.05	-	\$0	\$71	-
13 - 19 years	0	29	-	0	43	-	\$0	\$3,432	-	\$0.00	\$0.12	-	\$0	\$80	-
20 - 24 years	0	41	-	0	50	-	\$0	\$3,872	-	\$0.00	\$0.14	-	\$0	\$77	-
25 - 49 years	0	274	-	0	404	-	\$0	\$28,774	-	\$0.00	\$1.04	-	\$0	\$71	-
50 - 64 years	0	192	-	0	275	-	\$0	\$21,215	-	\$0.00	\$0.77	-	\$0	\$77	-
65+ years	0	25	-	0	33	-	\$0	\$2,620	-	\$0.00	\$0.09	-	\$0	\$79	-
Total	0	580	-	0	829	-	\$0	\$61,705	-	\$0.00	\$2.23	-	\$0	\$74	-

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	1	-	\$0	\$89	-	\$0.00	\$0.00	-	0	1	-	0.0	0.4	-	\$0	\$89	-
3 - 12 years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	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	-
20 - 24 years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-
25 - 49 years	0	3	-	\$0	\$4,792	-	\$0.00	\$0.17	-	0	4	-	0.0	1.7	-	\$0	\$1,198	-
50 - 64 years	0	2	-	\$0	\$2,937	-	\$0.00	\$0.11	-	0	2	-	0.0	0.9	-	\$0	\$1,469	-
65+ years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-
Total	0	6	-	\$0	\$7,818	-	\$0.00	\$0.28	-	0	7	-	0.0	3.0	-	\$0	\$1,117	-

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	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0.00	\$0.00	-
3 - 12 years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0.00	\$0.00	-
13 - 19 years	0	2	-	\$0	\$86	-	\$0.00	\$0.00	-	0	2	-	0.0	0.0	-	\$0.00	\$43.21	-
20 - 24 years	0	5	-	\$0	\$746	-	\$0.00	\$0.03	-	0	6	-	0.0	0.0	-	\$0.00	\$124.33	-
25 - 49 years	0	49	-	\$0	\$6,404	-	\$0.00	\$0.23	-	0	62	-	0.0	0.0	-	\$0.00	\$103.29	-
50 - 64 years	0	37	-	\$0	\$4,277	-	\$0.00	\$0.15	-	0	60	-	0.0	0.0	-	\$0.00	\$71.29	-
65+ years	0	2	-	\$0	\$257	-	\$0.00	\$0.01	-	0	4	-	0.0	0.0	-	\$0.00	\$64.29	-
Total	0	95	-	\$0	\$11,771	-	\$0.00	\$0.43	-	0	134	-	0.0	0.0	-	\$0.00	\$87.84	-

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	55	1,013	1,741.8%	\$3,153	\$209,101	6,531.6%	\$0.16	\$7.57	4,525.9%	75	2,199	2,832.0%	46.7	955.4	1,945.3%	\$42	\$95	126.2%



Prior: Jan - Jul 2019, paid through July 2019
 Current: Jan - Jul 2020, paid through July 2020
 Average Current Member: 3,946

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	1	-	\$0	\$194	-	\$0.00	\$0.01	-	0	1	-	0.0	0.4	-	\$0.00	\$193.75	-
3 - 12 years	0	5	-	\$0	\$762	-	\$0.00	\$0.03	-	0	5	-	0.0	2.2	-	\$0.00	\$152.35	-
13 - 19 years	0	12	-	\$0	\$2,084	-	\$0.00	\$0.08	-	0	14	-	0.0	6.1	-	\$0.00	\$148.84	-
20 - 24 years	0	14	-	\$0	\$2,196	-	\$0.00	\$0.08	-	0	16	-	0.0	7.0	-	\$0.00	\$137.25	-
25 - 49 years	1	76	7,500.0%	\$185	\$12,389	6,596.9%	\$0.01	\$0.45	4,571.5%	1	79	7,800.0%	0.6	34.3	5,410.7%	\$185.00	\$156.83	-15.2%
50 - 64 years	1	48	4,700.0%	\$120	\$7,638	6,264.8%	\$0.01	\$0.28	4,339.8%	1	52	5,100.0%	0.6	22.6	3,527.3%	\$120.00	\$146.88	22.4%
65+ years	0	5	-	\$0	\$716	-	\$0.00	\$0.03	-	0	7	-	0.0	3.0	-	\$0.00	\$102.30	-
Total	2	161	7,950.0%	\$305	\$25,978	8,417.5%	\$0.02	\$0.94	5,841.5%	2	174	8,600.0%	1.2	75.6	5,968.8%	\$152.50	\$149.30	-2.1%

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	1	-	\$0	\$7,507	-	\$0.00	\$0.27	-	0	1	-	0.0	0.4	-	\$0	\$7,507	-	0.0	2.0	-
20 - 24 years	0	1	-	\$0	\$8,704	-	\$0.00	\$0.32	-	0	1	-	0.0	0.4	-	\$0	\$8,704	-	0.0	1.0	-
25 - 49 years	0	1	-	\$0	\$57,020	-	\$0.00	\$2.06	-	0	1	-	0.0	0.4	-	\$0	\$57,020	-	0.0	8.0	-
50 - 64 years	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-	0.0	0.0	-
65+ years	0	1	-	\$0	\$1,408	-	\$0.00	\$0.05	-	0	1	-	0.0	0.4	-	\$0	\$1,408	-	0.0	5.0	-
Total	0	4	-	\$0	\$74,639	-	\$0.00	\$2.70	-	0	4	-	0.0	1.7	-	\$0	\$18,660	-	0.0	4.0	-

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	4	-	\$0	\$74,639	-	\$0.00	\$2.70	-	0	4	-	0.0	1.7	-	\$0	\$18,660	-
Ambulatory	0	1	-	\$0	\$40	-	\$0.00	\$0.00	-	0	1	-	0.0	0.4	-	\$0	\$40	-
Emergency Room	0	6	-	\$0	\$7,818	-	\$0.00	\$0.28	-	0	7	-	0.0	3.0	-	\$0	\$1,117	-
Specialist	3	276	9,100.0%	\$409	\$42,120	10,207.7%	\$0.02	\$1.53	7,090.3%	3	348	11,500.0%	1.9	151.2	7,991.7%	\$136	\$121	-11.1%
PCP	2	108	5,300.0%	\$147	\$11,081	7,430.8%	\$0.01	\$0.40	5,153.2%	2	139	6,850.0%	1.2	60.4	4,748.1%	\$74	\$80	8.4%
Radiology	0	9	-	\$0	\$314	-	\$0.00	\$0.01	-	0	11	-	0.0	4.8	-	\$0	\$29	-
Lab	6	555	9,150.0%	\$2,118	\$68,138	3,117.1%	\$0.11	\$2.47	2,144.1%	6	715	11,816.7%	3.7	310.7	8,212.6%	\$353	\$95	-73.0%
Home Health	0	12	-	\$0	\$50	-	\$0.00	\$0.00	-	0	13	-	0.0	5.6	-	\$0	\$4	-
Behavioral Health	0	1	-	\$0	\$2,612	-	\$0.00	\$0.09	-	0	9	-	0.0	3.9	-	\$0	\$290	-
Medical Rx	0	0	-	\$0	\$0	-	\$0.00	\$0.00	-	0	0	-	0.0	0.0	-	\$0	\$0	-
Total	10	647	6,370.0%	\$2,674	\$206,813	7,634.8%	\$0.14	\$7.49	5,295.5%	10	1,196	11,860.0%	6.2	519.6	8,242.9%	\$267	\$173	-35.3%

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	3	370	12,233.3%	\$837	\$133,645	15,872.3%	\$0.04	\$4.84	11,041.7%	31%	65%
Spouse	4	161	3,925.0%	\$1,051	\$36,897	3,412.1%	\$0.05	\$1.34	2,349.9%	39%	18%
Child	3	116	3,766.7%	\$787	\$36,270	4,511.6%	\$0.04	\$1.31	3,116.9%	29%	18%
Total	10	647	6,370.0%	\$2,674	\$206,813	7,634.8%	\$0.14	\$7.49	5,295.5%	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.