California Department of Managed Health Care/Department of Insurance SB 17 - Large Group Prescription Drug Cost Reporting Form For policies subject to CHSC 1385.045 or CIC 10181.45

1.	Reporting Year	2018
2.	DMHC Health Plan ID/CDI NAIC No.	60053
3.	Legal Name	Kaiser Permanente Insurance Company
4.	DBA	

* Cells highlighted in light blue are formula.

Tab Name	Worksheet Percent of Premium Attributable to Prescription Drug Costs
PharmPctPrem	reicent of Fremium Attributable to Frescription Drug Costs
YoYTotalPlanSpnd	Year-Over-Year Increase, as a Percentage, in Per Member Per Month, Total Health Plan Spending
YoYCompofPrem	Year-Over-Year Increase in Per Member Per Month Costs for Drug Prices Compared to Other Components of Health Care Premium
SpecTierForm	Specialty Tier Formulary List
PharmDocOff	Percent of Premium Attributable To Drugs Administered in a Doctor's Office
PharmBenMgr	Health Plan/Insurer Uses of Prescription Drug Benefit Manager

California Department of Managed Health Care/Department of Insurance SB 17 - Large Group Prescription Drug Cost Reporting Form For policies subject to CHSC 1385.045 or CIC 10181.45 Percent of Premium Attributable to Prescription Drug Costs (Subsection (c)(4)(A)(i))

Company Legal Name: Kaiser Permanente Insurance Company Calendar Year: 2018

Includes Plan Pharmacy, Network Pharmacy, and Mail Order Pharmacy for Outpatient Use				
Covered Prescription Drug Categories	Total Paid Dollar Amount (PMPM)	Percent of Paid Premium Attributable to Prescriptions Drug Costs		
1. Generic Drugs				
- Excluding Specialty Generic Drugs	\$9.47	2.2%		
2. Brand Name Drugs - Excluding Specialty Brand Name Drugs	\$13.89	3.2%		
3. Generic and Brand Name Specialty Drugs	\$26.97	6.2%		
Total (= 1+2+3)	\$50.33	11.7%		
4. Pharmacy Manufacturer Rebate Amount (negative)	\$0.00	0.0%		

	2018
Total Health Care Paid Premiums with pharmacy benefits	
carve-in (PMPM)	\$431.59

California Department of Managed Health Care/Department of Insurance SB 17 - Large Group Prescription Drug Cost Reporting Form For policies subject to CHSC 1385.045 or CIC 10181.45 Year-Over-Year Increase, as a Percentage, in Per Member Per Month, Total Health Plan Spending (Subsection (c)(4)(A)(ii))

Company Legal Name: Kaiser Permanente Insurance Company Calendar Year: 2018

Includes Plan Pharmacy,	Includes Plan Pharmacy, Network Pharmacy, and Mail Order Pharmacy for Outpatient Use				
Covered Prescription Drug Categories	2018 Total Annual Plan Spending Dollar Amount (PMPM)	2017 Total Annual Plan Spending Dollar Amount (PMPM)	Year-Over-Year Increase (%) in Total Annual Plan Spending		
1. Generic Drugs - Excluding Specialty Generic Drugs	\$12.93	\$13.10	-1.3%		
2. Brand Name Drugs - Excluding Specialty Brand Name Drugs	\$15.63	\$15.76	-0.8%		
3. Generic and Brand Name Specialty Drugs	\$27.54	\$26.34	4.5%		
Total = (1+2+3)	\$56.10	\$55.20	1.6%		
Pharmacy Manufacturer Rebate Amount (negative)	\$0.00	\$0.00	#DIV/0!		

	2018	2017	Year-Over-Year Increase (%)
Total Health Care Paid Premiums with pharmacy benefits carve-in (PMPM)	\$431.59	\$443.30	-2.6%

California Department of Managed Health Care/Department of Insurance SB 17 - Large Group Prescription Drug Cost Reporting Form For policies subject to CHSC 1385.045 or CIC 10181.45 Year-Over-Year Increase in Per Member Per Month Costs for Drug Prices Compared to Other Components of Health Care Premium (Subsection (c)(4)(A)(iii))

Company Legal Name: Kaiser Permanente Insurance Company Calendar Year: 2018

Medical Coverage (regardless of pharmacy benefits

carve-in coverage)

Components of Total Health Care Paid Premiums with pharmacy benefits carve-in (PMPM)	2018 (PMPM)	2017 (PMPM)	Year-Over-Year Increase (PMPM) in Total Annual Plan Spending
1) Paid Plan Cost - Prescription Drugs			
(dispensed at pharmacy)	\$50.33	\$48.55	\$1.78
2) Paid Plan Cost - Prescription Drugs, if available			
(administered in doctor's office)			\$0.00
3) Pharmacy Manufacturer Rebate (Negative)	\$0.00	\$0.00	\$0.00
4) Paid Plan Cost - Medical Benefits Excludes			
Prescription Drugs above (1) & (2)	\$379.84	\$386.57	-\$6.73
5) Administration Cost Excluding Total Commission Expenses	\$62.38	\$59.67	\$2.71
6) Total Commission Expenses	\$11.79	\$11.56	\$0.23
7) Taxes and Fees	\$11.22	-\$6.44	\$17.66
	* ~~ ~~	\$50.04	0 7.00
8) Profit/Other	-\$83.96	-\$56.61	-\$27.36
9) Total Health Care Premium with pharmacy benefits			
carve-in	\$431.59	\$443.30	-\$11.71
Total Member Months	2018	2017	
Prescription Drugs Coverage	71,396	76,314	
	71,000	70,014	

71,396

76,314

Cultismia Department of Managed Health Cane/Department of Insurance 58 IT - Large Group Prescription Drug Cost Reporting Form For policies appendiation The Formulary List Specially The Formulary List (Subsection (c)(4)(A)(r))

Company Legal Name: Kaiser Permanente Insurance Company Calendar Year: 2018

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California Department of Managed Health Care/Department of Insurance SB 17 - Large Group Prescription Drug Cost Reporting Form For policies subject to CHSC 1385.045 or CIC 10181.45 Percent of Premium Attributable To Drugs Administered in a Doctor's Office (Subsection (c)(4)(B))

Company Legal Name: Kaiser Permanente Insurance Company Calendar Year: 2018

	Paid Dollar Amount	Percent of Paid
Benefits Categories	(PMPM)	Premium
(1) Drug Benefits Covered as Part of Medical Benefits		
Administered in Doctor's Office, if available		0.0%
(2) Total Medical/Pharmacy Benefits	\$430.17	99.7%

Total Health Care Paid Premiums with pharmacy benefits carve-		
in (PMPM)	\$431.59	

California Department of Managed Health Care/Department of Insurance SB 17 - Large Group Prescription Drug Cost Reporting Form For policies subject to CHSC 1385.045 or CIC 10181.45 Health Plan/Insurer Uses of Prescription Drug Benefit Manager (Subsection (c)(4)(C)(I) & (c)(4)(C)(ii))

Company Legal Name: Kaiser Permanente Insurance Company Calendar Year: 2018

A. (i) Does the health plan utilize a pharmacy benefit manager (PBM) to prescription drug services to its enrollees?

✓ Yes No

If yes, please provide responses to the remaining questions on this page.

(ii) Please provide the name(s) of the PBM(s) utilized by the health plan and select the functions delegated to the PBM(s).					
Functions Delegated to PBM(s)					
Name(s) of PBM(s)	Utilization management	Claim processing and provider dispute			
MedImpact	Yes	Yes	Yes		