

**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.	82538
3.	Legal Name	National Health Insurance Company
4.	DBA	

* Cells highlighted in light blue are formula.

Tab Name	Worksheet
PharmPctPrem	Percent of Premium Attributable to Prescription 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: National Health 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	\$36.63	4.6%
2. Brand Name Drugs - Excluding Specialty Brand Name Drugs	\$65.11	8.2%
3. Generic and Brand Name Specialty Drugs	\$68.13	8.6%
Total (= 1+2+3)	\$169.87	21.4%
4. Pharmacy Manufacturer Rebate Amount (negative)	\$0.00	0.0%

	2018
Total Health Care Paid Premiums with pharmacy benefits carve-in (PMPM)	\$793.26

California Department of Managed Health Care/Department of Insurance
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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: National Health Insurance Company
Calendar Year: 2018

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	\$44.86	\$50.13	-10.5%
2. Brand Name Drugs - Excluding Specialty Brand Name Drugs	\$70.72	\$63.18	11.9%
3. Generic and Brand Name Specialty Drugs	\$72.05	\$103.12	-30.1%
Total = (1+2+3)	\$187.63	\$216.43	-13.3%
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)	\$793.26	\$789.29	0.5%

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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: National Health Insurance Company
Calendar Year: 2018

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)	\$169.87	\$197.80	-\$27.93
2) Paid Plan Cost - Prescription Drugs, if available (administered in doctor's office)	\$27.74	\$7.47	\$20.27
3) Pharmacy Manufacturer Rebate (Negative)	\$0.00	\$0.00	\$0.00
4) Paid Plan Cost - Medical Benefits Excludes Prescription Drugs above (1) & (2)	\$515.42	\$630.03	-\$114.61
5) Administration Cost Excluding Total Commission Expenses	\$183.00	\$188.00	-\$5.00
6) Total Commission Expenses	\$12.00	\$11.00	\$1.00
7) Taxes and Fees	\$37.00	\$21.00	\$16.00
8) Profit/Other	-\$151.77	-\$266.01	\$114.24
9) Total Health Care Premium with pharmacy benefits carve-in	\$793.26	\$789.29	\$3.97
Total Member Months	2018	2017	
Prescription Drugs Coverage	11,077	13,580	
Medical Coverage (regardless of pharmacy benefits carve-in coverage)	11,077	13,580	

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 Specialty Tier Formulary List
 (Subsection (c)(4)(A)(iv))

Company Legal Name: National Health Insurance Company
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Prescription Drug Name	Therapy Class
SANDOSTATIN	ACROMEGALY
SANDOSTATIN LAR	ACROMEGALY
SOMATULINE DEPOT*	ACROMEGALY
SOMAVERT*	ACROMEGALY
VIVITROL	ALCOHOL/OPIOD DEPENDENCY
ARALAST NP*	ALPHA-1 ANTITRYPSIN DEFICIENCY
GLASSIA*	ALPHA-1 ANTITRYPSIN DEFICIENCY
ZEMAIRA*	ALPHA-1 ANTITRYPSIN DEFICIENCY
ARANESP	ANEMIA
EPOGEN	ANEMIA
PROCRIT	ANEMIA
CINQAR*	ASTHMA
FASENRA*	ASTHMA
NUCALA*	ASTHMA
XOLAIR	ASTHMA
DUPYRANT	ATOPIC DERMATITIS
CEPROTIN*	COAGULATION DISORDERS
ARCALYST*	CRYOPYRIN-ASSOCIATED SYNDROMES
ILARIS*	CRYOPYRIN-ASSOCIATED SYNDROMES
GATTEX*	GASTROINTESTINAL DISORDERS-OTHER
OCALIVA*	GASTROINTESTINAL DISORDERS-OTHER
SOLESTA*	GASTROINTESTINAL DISORDERS-OTHER
KRYSTEXXA	GOUT
GENOTROPIN	GROWTH HORMONE & RELATED DISORDERS
HUMATROPE	GROWTH HORMONE & RELATED DISORDERS
NORDITROPIN	GROWTH HORMONE & RELATED DISORDERS
NUTROPIN	GROWTH HORMONE & RELATED DISORDERS
OMNITROPE	GROWTH HORMONE & RELATED DISORDERS
SAIZEN	GROWTH HORMONE & RELATED DISORDERS
SEROSTIM*	GROWTH HORMONE & RELATED DISORDERS
ZOMACTON	GROWTH HORMONE & RELATED DISORDERS
ZORBTIVE	GROWTH HORMONE & RELATED DISORDERS
INCRELEX*	IGF-1 Deficiency
MOZOBILO*	HEMATOPOIETICS
ADVATE	HEMOPHILIA & BLEEDING DISORDERS
ADVINAVATE	HEMOPHILIA & BLEEDING DISORDERS
AFSTYLA	HEMOPHILIA & BLEEDING DISORDERS
ALPHANATE	HEMOPHILIA & BLEEDING DISORDERS
ALPHANINE SD	HEMOPHILIA & BLEEDING DISORDERS
ALPROLIX	HEMOPHILIA & BLEEDING DISORDERS
BEBULIN	HEMOPHILIA & BLEEDING DISORDERS
BENEFIX	HEMOPHILIA & BLEEDING DISORDERS
COAGADEX*	HEMOPHILIA & BLEEDING DISORDERS
CORIFACT*	HEMOPHILIA & BLEEDING DISORDERS
ELOCTATE	HEMOPHILIA & BLEEDING DISORDERS
FEIBA	HEMOPHILIA & BLEEDING DISORDERS
FBRVGA	HEMOPHILIA & BLEEDING DISORDERS
HELIXATE FS	HEMOPHILIA & BLEEDING DISORDERS
HEMLIBRA	HEMOPHILIA & BLEEDING DISORDERS
HEMOFIL M	HEMOPHILIA & BLEEDING DISORDERS
HUMATE-P	HEMOPHILIA & BLEEDING DISORDERS
IDELVION	HEMOPHILIA & BLEEDING DISORDERS
DINITY	HEMOPHILIA & BLEEDING DISORDERS
JIVI	HEMOPHILIA & BLEEDING DISORDERS
KOATE	HEMOPHILIA & BLEEDING DISORDERS
KOATE-DVI	HEMOPHILIA & BLEEDING DISORDERS
KOGENATE FS	HEMOPHILIA & BLEEDING DISORDERS
KOVALTRY	HEMOPHILIA & BLEEDING DISORDERS
MONOCLATE-P	HEMOPHILIA & BLEEDING DISORDERS
MONONINE	HEMOPHILIA & BLEEDING DISORDERS
NOVOEIGHT*	HEMOPHILIA & BLEEDING DISORDERS
NOVOSEVEN RT	HEMOPHILIA & BLEEDING DISORDERS
NUWIQ	HEMOPHILIA & BLEEDING DISORDERS
OBIZUR*	HEMOPHILIA & BLEEDING DISORDERS
PROFLININE	HEMOPHILIA & BLEEDING DISORDERS
PROFLININE SD	HEMOPHILIA & BLEEDING DISORDERS
REBINYN	HEMOPHILIA & BLEEDING DISORDERS
RECOMBINATE	HEMOPHILIA & BLEEDING DISORDERS
RIASTAP	HEMOPHILIA & BLEEDING DISORDERS
RXUBIS	HEMOPHILIA & BLEEDING DISORDERS
STMATE	HEMOPHILIA & BLEEDING DISORDERS
TRETTEEN*	HEMOPHILIA & BLEEDING DISORDERS
VONVENDI*	HEMOPHILIA & BLEEDING DISORDERS
WILATE	HEMOPHILIA & BLEEDING DISORDERS
XYNTHA	HEMOPHILIA & BLEEDING DISORDERS
DALINZA	HEPATITIS C
EPCLUSA	HEPATITIS C
HARVONI	HEPATITIS C
MAVRET	HEPATITIS C
PEGASYS	HEPATITIS C
PEGINTRON	HEPATITIS C
REBETOL SOLUTION	HEPATITIS C
RIBATAB	HEPATITIS C

REBETOL SOLUTION	HEPATITIS C
MODERIBA	HEPATITIS C
SOVALDI	HEPATITIS C
TECHNIVME	HEPATITIS C
VIKIRA PAK	HEPATITIS C
VOSVI	HEPATITIS C
ZEPATIER	HEPATITIS C
BERINERT*	HEREDITARY ANGIOEDEMA
CINRYZE*	HEREDITARY ANGIOEDEMA
FIRAZYR*	HEREDITARY ANGIOEDEMA
HAEGARDA*	HEREDITARY ANGIOEDEMA
KALBITOR*	HEREDITARY ANGIOEDEMA
RUCONEST*	HEREDITARY ANGIOEDEMA
TAKHZYRO*	HEREDITARY ANGIOEDEMA
EGRIFTA*	HIV MEDICATIONS
FUZEON	HIV MEDICATIONS
AVEED*	HORMONAL THERAPIES
ELIGARD	HORMONAL THERAPIES
FIRMAGON	HORMONAL THERAPIES
LUPRON	HORMONAL THERAPIES
LUPANETA PACK	HORMONAL THERAPIES
LUPRON DEPOT	HORMONAL THERAPIES
NATPARA*	HORMONAL THERAPIES
SUPPRELIN LA*	HORMONAL THERAPIES
TRELSTAR	HORMONAL THERAPIES
VANTAS	HORMONAL THERAPIES
ZOLADEX	HORMONAL THERAPIES
BVIGAM*	IMMUNE DEFICIENCIES
CUVITRU	IMMUNE DEFICIENCIES
CYTOGAM	IMMUNE DEFICIENCIES
FLEBOGAMMA DIF	IMMUNE DEFICIENCIES
GAMASTAN S/D	IMMUNE DEFICIENCIES
GAMMAGARD LIQUID	IMMUNE DEFICIENCIES
GAMMAGARD S/D	IMMUNE DEFICIENCIES
GAMMAKED	IMMUNE DEFICIENCIES
GAMMAPLEX*	IMMUNE DEFICIENCIES
GAMUNEX-C	IMMUNE DEFICIENCIES
HEPAGAM B	IMMUNE DEFICIENCIES
HIZENTRA*	IMMUNE DEFICIENCIES
HYPERHEP B	IMMUNE DEFICIENCIES
HYPERRHO S/D	IMMUNE DEFICIENCIES
HYQVA	IMMUNE DEFICIENCIES
MICRHOGAM	IMMUNE DEFICIENCIES
NABI-HB	IMMUNE DEFICIENCIES
OCTAGAM	IMMUNE DEFICIENCIES
PRIVGEN	IMMUNE DEFICIENCIES
RHOGAM	IMMUNE DEFICIENCIES
RHOPHYLAC	IMMUNE DEFICIENCIES
WINRHO SDF	IMMUNE DEFICIENCIES
ACTIMMUNE*	INFECTIOUS DISEASE - OTHER
BRAVELLE	INFERTILITY
CETROTIDE	INFERTILITY
CHORIONIC	INFERTILITY
GONADOTROPIN	INFERTILITY
FOLLISTIM AQ	INFERTILITY
GAURELIX ACETATE	INFERTILITY
GONAL-F	INFERTILITY
MENOPUR	INFERTILITY
NOVAREL	INFERTILITY
OVDREL	INFERTILITY
PREGNVL	INFERTILITY
CMZIA	INFLAMMATORY BOWEL DISEASE
ENTYVIO	INFLAMMATORY BOWEL DISEASE
HUMIRA	INFLAMMATORY BOWEL DISEASE
INFLECTRA	INFLAMMATORY BOWEL DISEASE
RENFLIXADE*	INFLAMMATORY BOWEL DISEASE
RENFLIXIS*	INFLAMMATORY BOWEL DISEASE
SIMPONI	INFLAMMATORY BOWEL DISEASE
STELARA	INFLAMMATORY BOWEL DISEASE
TYSABRI*	INFLAMMATORY BOWEL DISEASE
XELJANZ	INFLAMMATORY BOWEL DISEASE
DESFERAL	IRON OVERLOAD
EXJADE*	IRON OVERLOAD
JADENU*	IRON OVERLOAD
FRALUENT	LIPID DISORDERS - PCSK9 INHIBITORS
REPATIA	LIPID DISORDERS - PCSK9 INHIBITORS
ALDURAZYME*	LYSOSOMAL STORAGE DISORDERS
CERDELGA*	LYSOSOMAL STORAGE DISORDERS
CEREZYME*	LYSOSOMAL STORAGE DISORDERS
CYSTAGON*	LYSOSOMAL STORAGE DISORDERS
ELAPRASE*	LYSOSOMAL STORAGE DISORDERS
ELELYSO*	LYSOSOMAL STORAGE DISORDERS
FABRAZYME*	LYSOSOMAL STORAGE DISORDERS
KANUMA*	LYSOSOMAL STORAGE DISORDERS
LUMIZYME*	LYSOSOMAL STORAGE DISORDERS
img18888	LYSOSOMAL STORAGE DISORDERS
NAGLAZYME*	LYSOSOMAL STORAGE DISORDERS
VMZIM*	LYSOSOMAL STORAGE DISORDERS
VPRIV*	LYSOSOMAL STORAGE DISORDERS
APOKYN*	MOVEMENT DISORDERS
AUSTEDO	MOVEMENT DISORDERS
NORTHERA*	MOVEMENT DISORDERS
NUPLAZID*	MOVEMENT DISORDERS

RADICAVA*	MOVEMENT DISORDERS
SOLIRIS*	MOVEMENT DISORDERS
XENAZINE*	MOVEMENT DISORDERS
AUBAGIO*	MULTIPLE SCLEROSIS
AVONEX*	MULTIPLE SCLEROSIS
BETASERON	MULTIPLE SCLEROSIS
AMPYRA*	MULTIPLE SCLEROSIS
EXTAVIA	MULTIPLE SCLEROSIS
GLENYA	MULTIPLE SCLEROSIS
COPAXONE	MULTIPLE SCLEROSIS
GLATOPA	MULTIPLE SCLEROSIS
LEMTRADA*	MULTIPLE SCLEROSIS
OCREVUS*	MULTIPLE SCLEROSIS
PLEGRIDY*	MULTIPLE SCLEROSIS
REBF	MULTIPLE SCLEROSIS
TECFIDERA*	MULTIPLE SCLEROSIS
TYSABRI*	MULTIPLE SCLEROSIS
FULPHILA	NEUTROPENIA
GRANIX	NEUTROPENIA
LEUKINE	NEUTROPENIA
NEULASTA	NEUTROPENIA
NEUPOGEN	NEUTROPENIA
NIVESTYM	NEUTROPENIA
ZARXO	NEUTROPENIA
BAVENCO*	ONCOLOGY-INJECTABLE
BELEODAQ*	ONCOLOGY-INJECTABLE
BENDAMUSTINE	ONCOLOGY-INJECTABLE
HYDROCHLORIDE	ONCOLOGY-INJECTABLE
BENDEKA*	ONCOLOGY-INJECTABLE
BLINCYTO*	ONCOLOGY-INJECTABLE
CYRAMZA*	ONCOLOGY-INJECTABLE
DARZALEX*	ONCOLOGY-INJECTABLE
EMPLICITI*	ONCOLOGY-INJECTABLE
EVOMELA*	ONCOLOGY-INJECTABLE
IMFINZI*	ONCOLOGY-INJECTABLE
KEYTRUDA*	ONCOLOGY-INJECTABLE
KYPROLIS*	ONCOLOGY-INJECTABLE
OPDIVO*	ONCOLOGY-INJECTABLE
PORTRAZZA*	ONCOLOGY-INJECTABLE
POTELKEGO*	ONCOLOGY-INJECTABLE
RITUXAN HYCELA*	ONCOLOGY-INJECTABLE
SYLVANT*	ONCOLOGY-INJECTABLE
TECENTRIQ*	ONCOLOGY-INJECTABLE
TEPADINA	ONCOLOGY-INJECTABLE
THYROIDGEN*	ONCOLOGY-INJECTABLE
XISEYA	ONCOLOGY-INJECTABLE
YONDELIS*	ONCOLOGY-INJECTABLE
ZOMETA	ONCOLOGY-INJECTABLE
AFNITOR	ONCOLOGY-ORAL/TOPICAL
ALECENSA*	ONCOLOGY-ORAL/TOPICAL
ALUNBRIG*	ONCOLOGY-ORAL/TOPICAL
TARGRETIN	ONCOLOGY-ORAL/TOPICAL
BOSULIF	ONCOLOGY-ORAL/TOPICAL
CABOMETYX*	ONCOLOGY-ORAL/TOPICAL
XELODA	ONCOLOGY-ORAL/TOPICAL
COTELLIC*	ONCOLOGY-ORAL/TOPICAL
ERIVEDGE*	ONCOLOGY-ORAL/TOPICAL
ERLEADA*	ONCOLOGY-ORAL/TOPICAL
FARYDAK*	ONCOLOGY-ORAL/TOPICAL
HYCAMTIN	ONCOLOGY-ORAL/TOPICAL
IBRANCE*	ONCOLOGY-ORAL/TOPICAL
IDHIFA*	ONCOLOGY-ORAL/TOPICAL
GLEEVEC	ONCOLOGY-ORAL/TOPICAL
INLYTA*	ONCOLOGY-ORAL/TOPICAL
IRESSA*	ONCOLOGY-ORAL/TOPICAL
JAKAFI*	ONCOLOGY-ORAL/TOPICAL
KISQALI	ONCOLOGY-ORAL/TOPICAL
KISQALI FEMARA CO-PACK	ONCOLOGY-ORAL/TOPICAL
LONSURF*	ONCOLOGY-ORAL/TOPICAL
MEKINIST*	ONCOLOGY-ORAL/TOPICAL
NERLYNX*	ONCOLOGY-ORAL/TOPICAL
NEXAVAR*	ONCOLOGY-ORAL/TOPICAL
NNLARO*	ONCOLOGY-ORAL/TOPICAL
ODDOMZO*	ONCOLOGY-ORAL/TOPICAL
FORMALYST*	ONCOLOGY-ORAL/TOPICAL
PURIXAN*	ONCOLOGY-ORAL/TOPICAL
REVLIMID*	ONCOLOGY-ORAL/TOPICAL
RUBRACA*	ONCOLOGY-ORAL/TOPICAL
RYDAPT	ONCOLOGY-ORAL/TOPICAL
SPRYCEL	ONCOLOGY-ORAL/TOPICAL
STIVARGA*	ONCOLOGY-ORAL/TOPICAL
SUTENT	ONCOLOGY-ORAL/TOPICAL
TAFINLAR*	ONCOLOGY-ORAL/TOPICAL
TAGRISSO*	ONCOLOGY-ORAL/TOPICAL
TARCEVA*	ONCOLOGY-ORAL/TOPICAL
TARGRETIN	ONCOLOGY-ORAL/TOPICAL
TASIGNA	ONCOLOGY-ORAL/TOPICAL
TEMODAR	ONCOLOGY-ORAL/TOPICAL
THALOMID	ONCOLOGY-ORAL/TOPICAL
TYKERB*	ONCOLOGY-ORAL/TOPICAL
VERZENIO*	ONCOLOGY-ORAL/TOPICAL
VOTRIENT*	ONCOLOGY-ORAL/TOPICAL
XALKORI*	ONCOLOGY-ORAL/TOPICAL

XTANDI*	ONCOLOGY-ORAL/TOPICAL
ZELBORAF*	ONCOLOGY-ORAL/TOPICAL
ZOLINZA	ONCOLOGY-ORAL/TOPICAL
ZYDELIG*	ONCOLOGY-ORAL/TOPICAL
ZYKADIA*	ONCOLOGY-ORAL/TOPICAL
ZYTIGA*	ONCOLOGY-ORAL/TOPICAL
FORTEO	OSTEOPOROSIS
PROLIA	OSTEOPOROSIS
TYMLOS	OSTEOPOROSIS
RECLAST	OSTEOPOROSIS
SOLIRIS*	PAROXYSMAL NOCTURNAL HEMOGLOBINURIA
KUVAN*	PHENYLKETONURIA
MAKENA*	PRE-TERM BIRTH
CMZIA	PSORIASIS
COSENTYX*	PSORIASIS
ENBREL	PSORIASIS
HUMIRA	PSORIASIS
ILIMYA*	PSORIASIS
INFLECTRA	PSORIASIS
OTEZLA	PSORIASIS
OTREXUP	PSORIASIS
RASUVO	PSORIASIS
REMICADE	PSORIASIS
RENFLIXIS*	PSORIASIS
SILIO	PSORIASIS
STELARA	PSORIASIS
TALTZ*	PSORIASIS
TREMFYA	PSORIASIS
XELJANZ	PSORIASIS
ADEMPAS*	PULMONARY ARTERIAL HYPERTENSION
FLOLAN	PULMONARY ARTERIAL HYPERTENSION
VELETRI	PULMONARY ARTERIAL HYPERTENSION
LETARIS*	PULMONARY ARTERIAL HYPERTENSION
OPSUMIT*	PULMONARY ARTERIAL HYPERTENSION
ORENTRAM*	PULMONARY ARTERIAL HYPERTENSION
REMOBOLIN*	PULMONARY ARTERIAL HYPERTENSION
REVATIO	PULMONARY ARTERIAL HYPERTENSION
ADCIRCA	PULMONARY ARTERIAL HYPERTENSION
TRACLEER*	PULMONARY ARTERIAL HYPERTENSION
TYVASO*	PULMONARY ARTERIAL HYPERTENSION
UPTRAVI*	PULMONARY ARTERIAL HYPERTENSION
VENTAVIS*	PULMONARY ARTERIAL HYPERTENSION
ESBRIET*	PULMONARY DISORDERS-OTHER
OFEV*	PULMONARY DISORDERS-OTHER
CRYSVITA*	RARE DISORDERS - OTHER
PARSABIV*	RENAL DISEASE
SENSIPAR	RENAL DISEASE
SYNAGIS	RESPIRATORY SYNCYTIAL VIRUS
EYLEA*	RETINAL DISORDERS
ILUVIEN*	RETINAL DISORDERS
LUCENTIS*	RETINAL DISORDERS
MACUGEN*	RETINAL DISORDERS
VISUDYNE*	RETINAL DISORDERS
ACTEMRA*	RHEUMATOID ARTHRITIS
CMZIA	RHEUMATOID ARTHRITIS
ENBREL	RHEUMATOID ARTHRITIS
HUMIRA	RHEUMATOID ARTHRITIS
INFLECTRA	RHEUMATOID ARTHRITIS
KEZVARA*	RHEUMATOID ARTHRITIS
OLUMIANT*	RHEUMATOID ARTHRITIS
ORENCIA	RHEUMATOID ARTHRITIS
OTREXUP	RHEUMATOID ARTHRITIS
RASUVO	RHEUMATOID ARTHRITIS
REMICADE	RHEUMATOID ARTHRITIS
RENFLIXIS*	RHEUMATOID ARTHRITIS
SIMPONI	RHEUMATOID ARTHRITIS
SIMPONI ARIA	RHEUMATOID ARTHRITIS
XELJANZ	RHEUMATOID ARTHRITIS
H. P. ACTHAN GEL*	SEIZURE DISORDERS
SABRIL TABS	SEIZURE DISORDERS
SABRIL PWD	SEIZURE DISORDERS
BENLYSTA	SYSTEMIC LUPUS ERYTHEMATOSUS
DOPTELET*	THROMBOCYTOPENIA
MULPLETA	THROMBOCYTOPENIA
INPLATE	THROMBOCYTOPENIA
PROMACTA*	THROMBOCYTOPENIA
RAVICTI*	UREA CYCLE DISORDERS
BUPHENYL*	UREA CYCLE DISORDERS

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Percent of Premium Attributable To Drugs Administered in a Doctor's Office
(Subsection (c)(4)(B))

Company Legal Name: National Health Insurance Company
Calendar Year: 2018

Benefits Categories	Paid Dollar Amount (PMPM)	Percent of Paid Premium
(1) Drug Benefits Covered as Part of Medical Benefits Administered in Doctor's Office, if available	\$27.74	3.5%
(2) Total Medical/Pharmacy Benefits	\$713.03	89.9%
Total Health Care Paid Premiums with pharmacy benefits carved-in (PMPM)	\$793.26	

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(Subsection (c)(4)(C)(i) & (c)(4)(C)(ii))

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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).			
Name(s) of PBM(s)	Functions Delegated to PBM(s)		
	Utilization management	Claim processing and provider dispute resolutions	Enrollee grievances
Scrip World empowered by CVS	Yes	Yes	Yes