

California 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.	62825
3.	Legal Name	Anthem Blue Cross Life and 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

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Percent of Premium Attributable to Prescription Drug Costs
(Subsection (c)(4)(A)(i))

Company Legal Name: Anthem Blue Cross Life and 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	\$19.65	3.7%
2. Brand Name Drugs - Excluding Specialty Brand Name Drugs	\$22.19	4.2%
3. Generic and Brand Name Specialty Drugs	\$67.42	12.7%
Total (= 1+2+3)	\$109.26	20.5%
4. Pharmacy Manufacturer Rebate Amount (negative)	(\$12.28)	-2.3%

	2018
Total Health Care Paid Premiums with pharmacy benefits carve-in (PMPM)	\$532.17

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Year-Over-Year Increase, as a Percentage, in Per Member Per Month, Total Health Plan Spending
(Subsection (c)(4)(A)(ii))

Company Legal Name: Anthem Blue Cross Life and 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	\$27.03	\$26.04	3.8%
2. Brand Name Drugs - Excluding Specialty Brand Name Drugs	\$25.28	\$25.14	0.6%
3. Generic and Brand Name Specialty Drugs	\$70.11	\$67.90	3.3%
Total = (1+2+3)	\$122.42	\$119.08	2.8%
Pharmacy Manufacturer Rebate Amount (negative)	(\$12.28)	(\$14.44)	-15.0%

	2018	2017	Year-Over-Year Increase (%)
Total Health Care Paid Premiums with pharmacy benefits carve-in (PMPM)	\$532.17	\$487.25	9.2%

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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: Anthem Blue Cross Life and 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)	\$109.26	\$105.26	\$3.99
2) Paid Plan Cost - Prescription Drugs, if available (administered in doctor's office)	\$23.10	\$22.60	\$0.50
3) Pharmacy Manufacturer Rebate (Negative)	(\$15.56)	(\$18.31)	\$2.75
4) Paid Plan Cost - Medical Benefits Excludes Prescription Drugs above (1) & (2)	\$315.33	\$288.84	\$26.50
5) Administration Cost Excluding Total Commission Expenses	\$38.41	\$33.49	\$4.92
6) Total Commission Expenses	\$10.94	\$10.30	\$0.64
7) Taxes and Fees	\$48.96	\$35.21	\$13.74
8) Profit/Other	\$1.73	\$9.86	-\$8.12
9) Total Health Care Premium with pharmacy benefits carve-in	\$532.17	\$487.25	\$44.92
Total Member Months	2018	2017	
Prescription Drugs Coverage	1,059,476	1,215,266	
Medical Coverage (regardless of pharmacy benefits carve-in coverage)	1,273,049	1,424,250	

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

Company Legal Name: Anthem Blue Cross Life and 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	\$23.10	4.3%
(2) Total Medical/Pharmacy Benefits	\$447.69	84.1%
Total Health Care Paid Premiums with pharmacy benefits carved-in (PMPM)	\$532.17	

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Health Plan/Insurer Uses of Prescription Drug Benefit Manager
(Subsection (c)(4)(C)(I) & (c)(4)(C)(ii))

Company Legal Name: Anthem Blue Cross Life and Health Insurance Company
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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
Express Scripts	No	Yes	No