



# Spending And Use Among Maryland's Privately Insured 2019 Report

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Commission Meeting, April 2021

Center for Analysis and Information Systems

# Background



This report examines health care spending and utilization patterns for privately-insured individual, small employer, and large employer markets.



The analysis relies on 2017, 2018, and 2019 data from Maryland's Medical Care Database (MCDB), and all reports are limited to Maryland residents under 65 years of age who are enrolled in fully insured and self-insured non-ERISA health plans.



The analysis excludes ERISA and FEHBP data resulting in a loss of about 44% (1.68 million ) of privately insured enrollees.



Study conducted by HSCRC using the 2019 MCDB and Hospital Case-mix (hospital discharge) data showed that despite the exclusion of the self-insured ERISA and FEHB plans, the MCDB represents the larger privately insured population.

# Annual Spending All Markets, 2019

**\$5,603\*** per capita, 2019

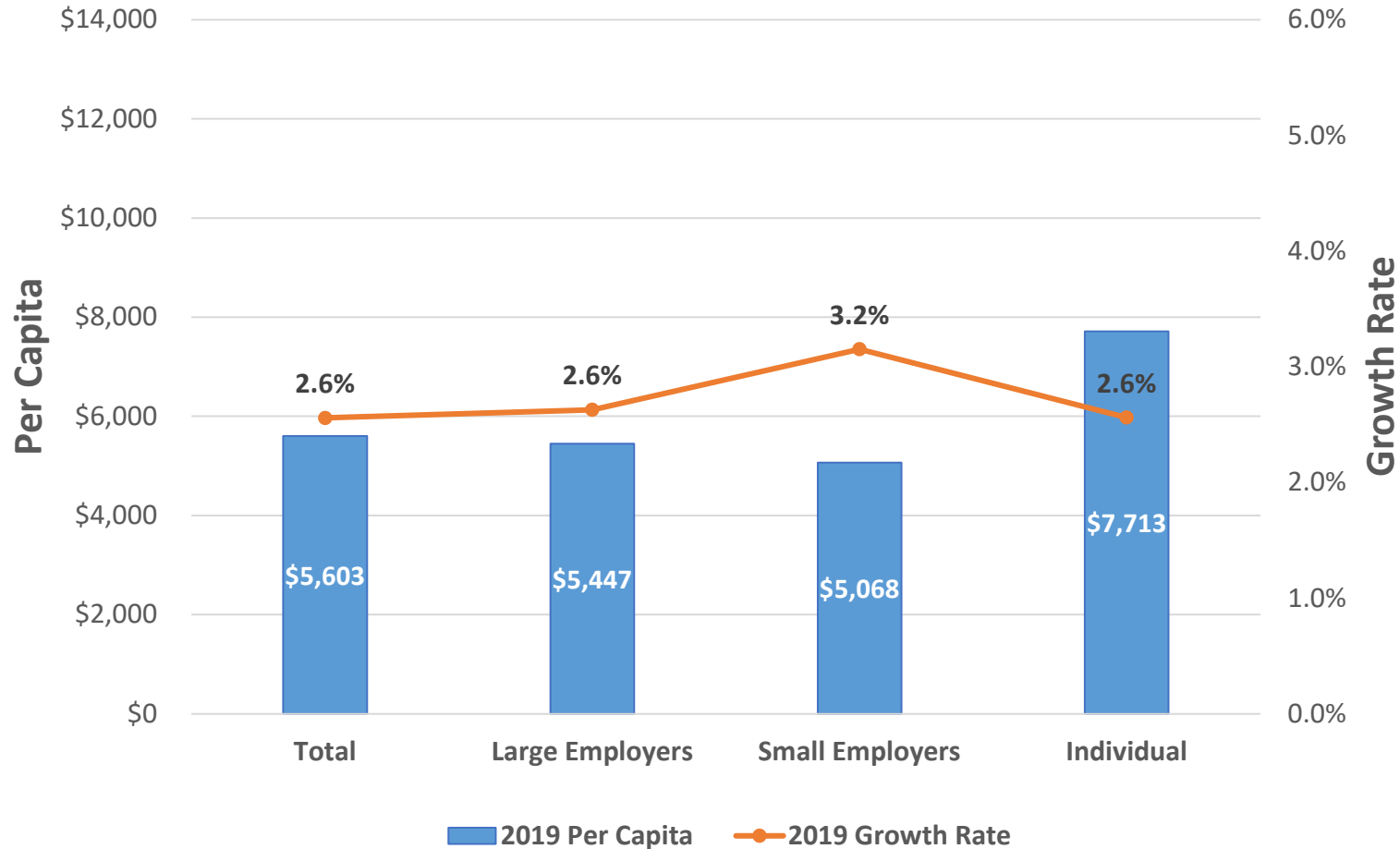
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**2.6%** Growth rate per capita, 2019

National Health Expenditures (CMS) reported privately insured healthcare per capita spending of **\$6,128**, growth rate of **5.2%** (excluding net cost of private health insurance (NCPHI), Medigap, and Dental) among the privately insured in 2019

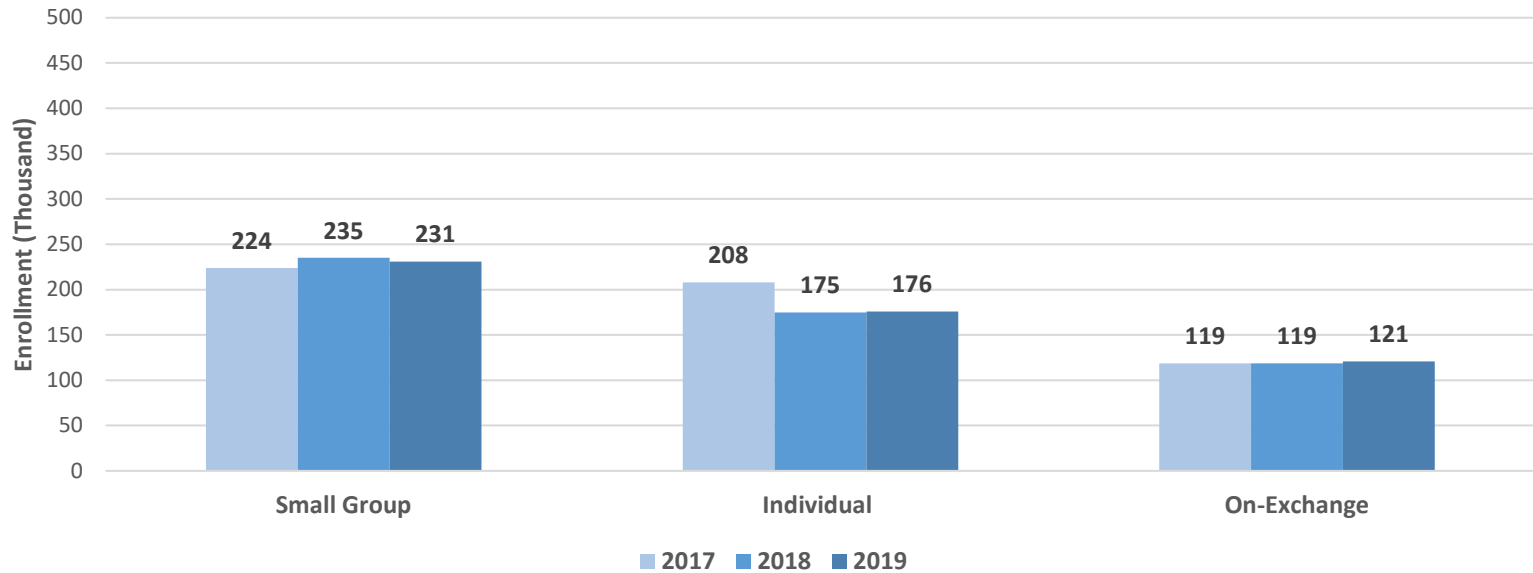
*\*Excludes Kaiser, ERISA and FEHB data.*

# Spending Growth Rate By Market Type, 2019



# Enrollment Trend, 2017-2019

## MCDB Enrollment \*



## MCDB v. SHADAC Enrollment Comparison, 2018 V. 2019

Privately Insured	2018	2019	%Δ
MCDB	1,361	1,347	-1.0%
SHADAC-MD	3,806	3,762	-1.2%
Uninsured-MD	352.3	351.7	-0.2%

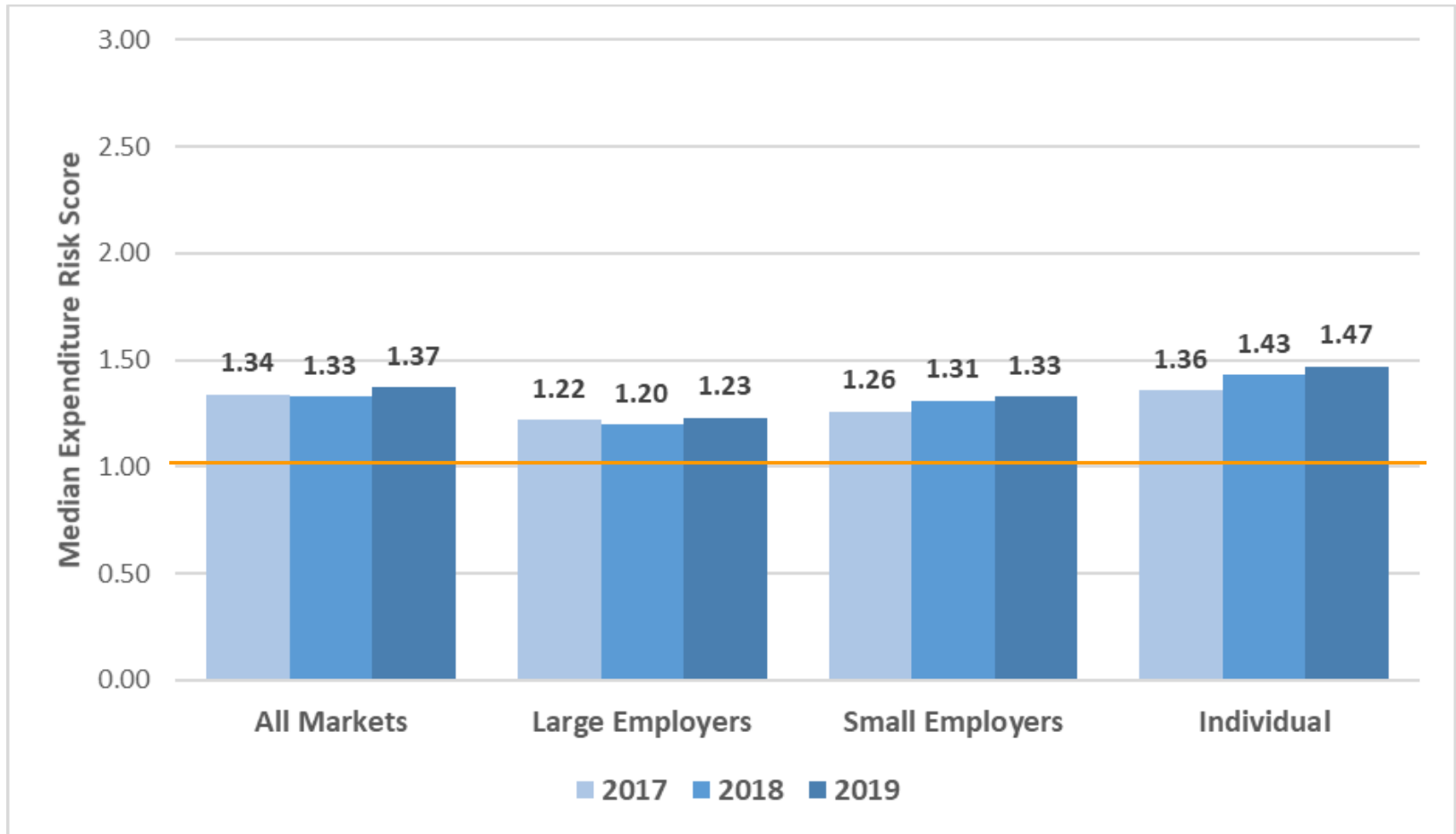
*(000 omitted)*

\* Enrollment as of December 31st

State Health Access Data Assistance Center ([shadac.org](http://shadac.org))

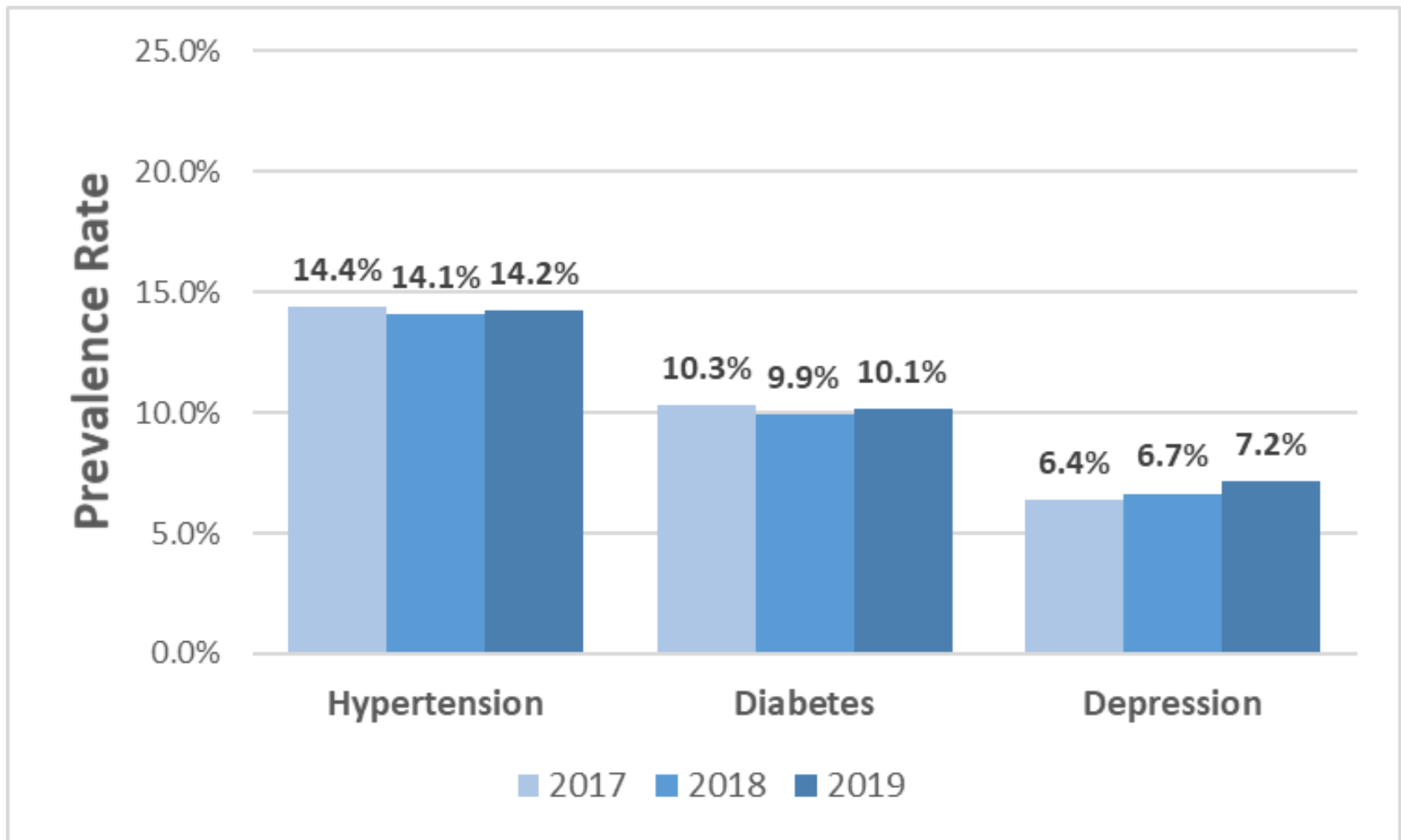
MCDB excludes ERISA and FEHB plans

# Median Illness Burden, 2017-2019

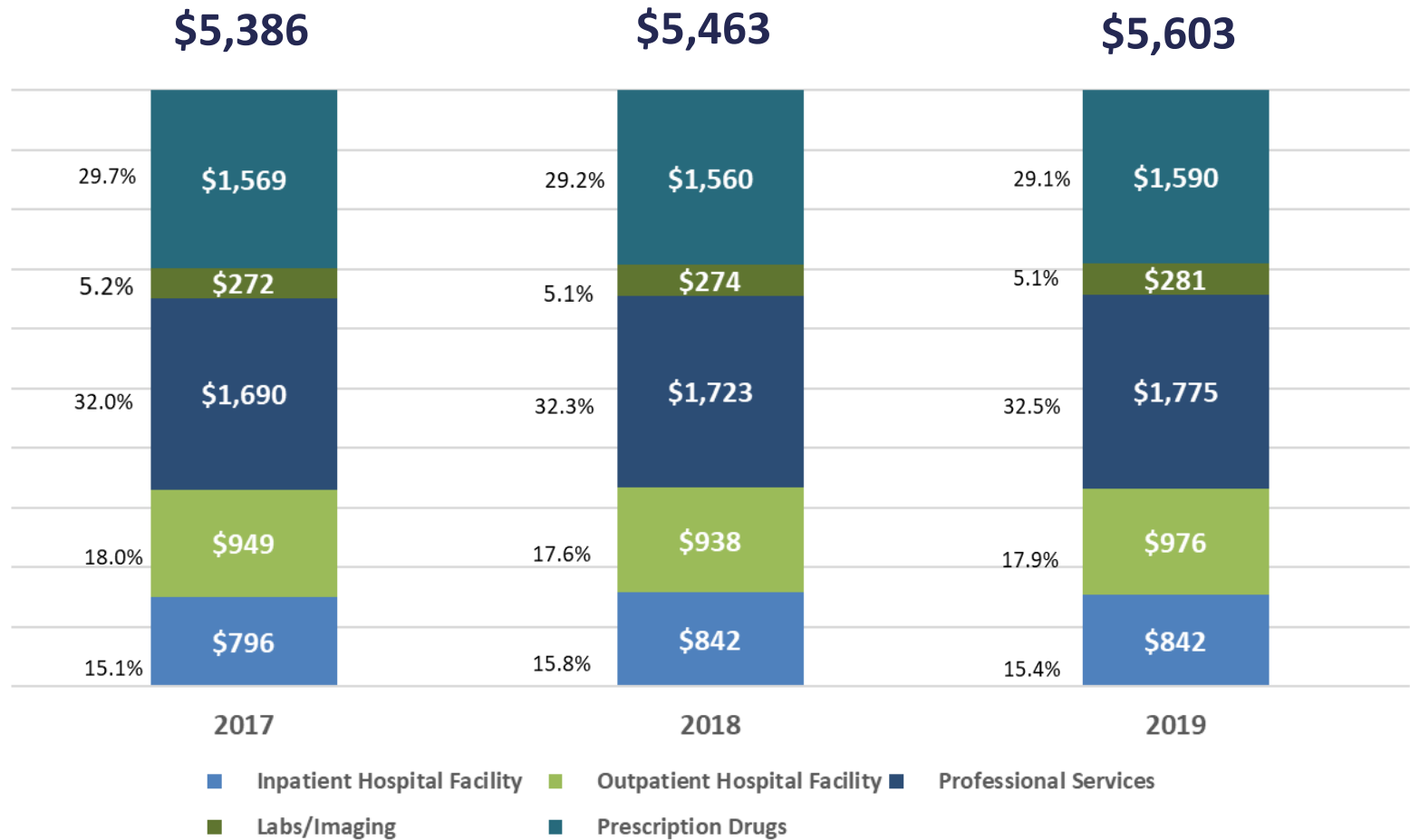


Excludes Kaiser data. Results generated using the Johns Hopkins ACG® System Version 12, All Rights Reserved

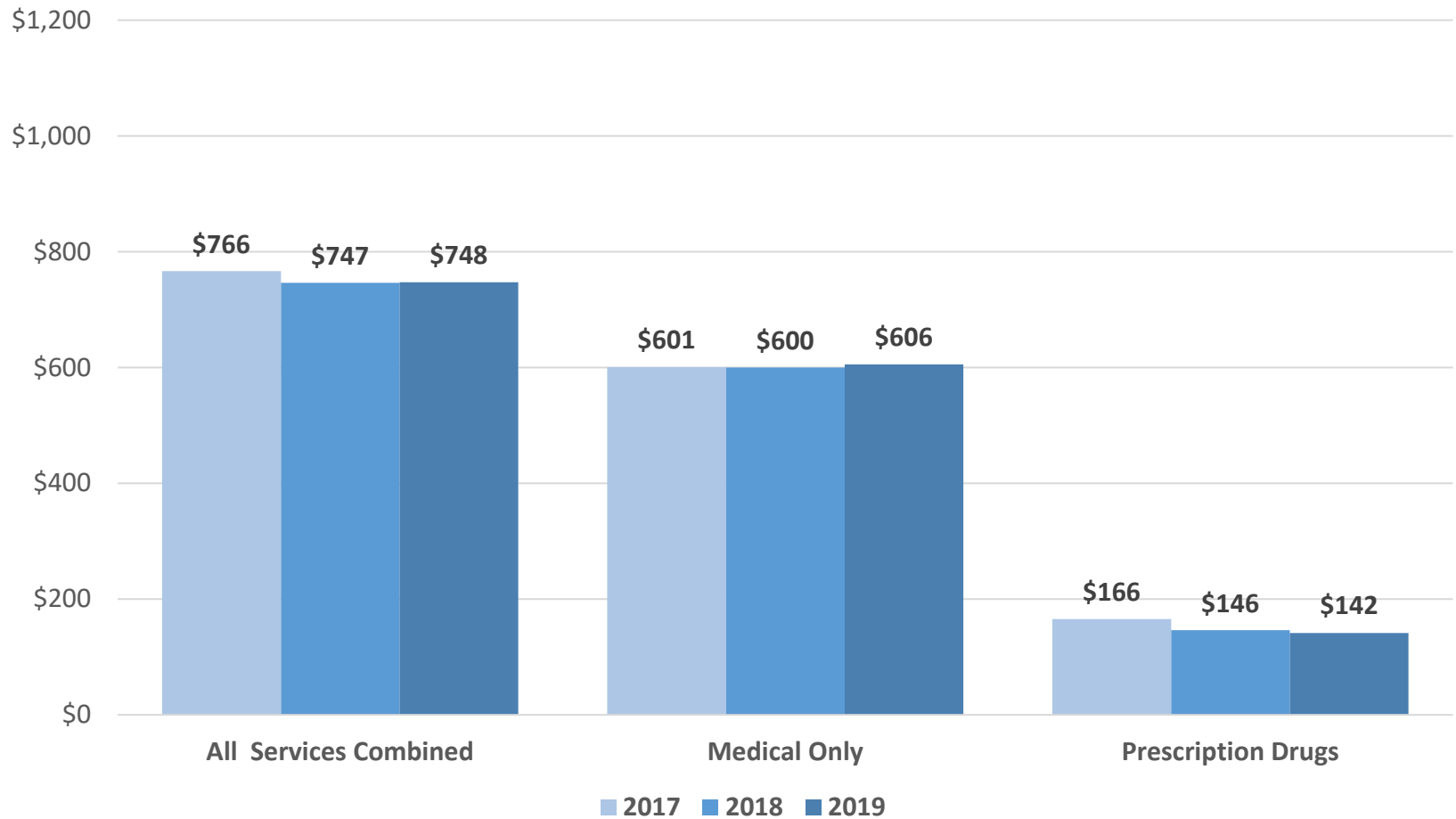
# Prevalence of Select Chronic Conditions, All Markets Combined, 2017-2019



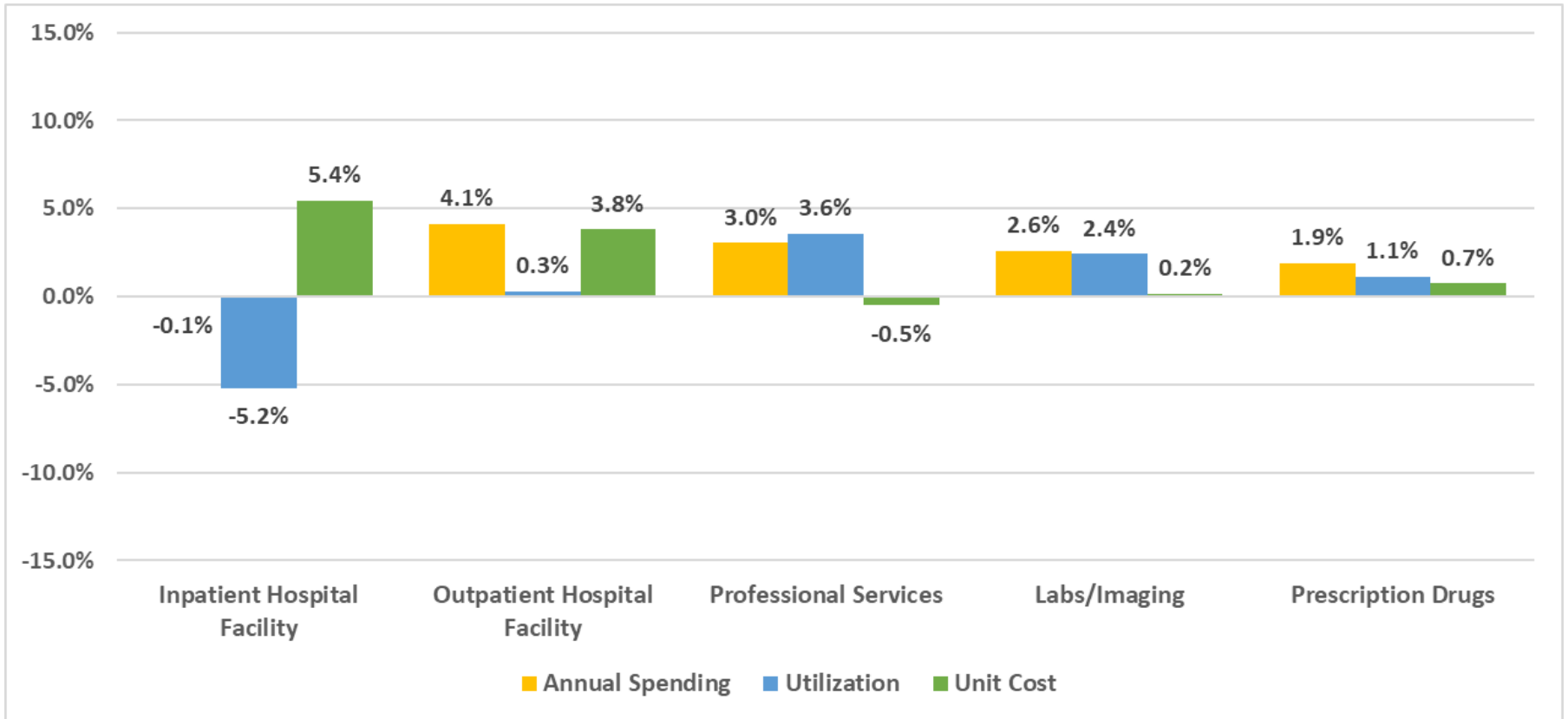
# Spending Per Capita By Service Type, 2017-2019



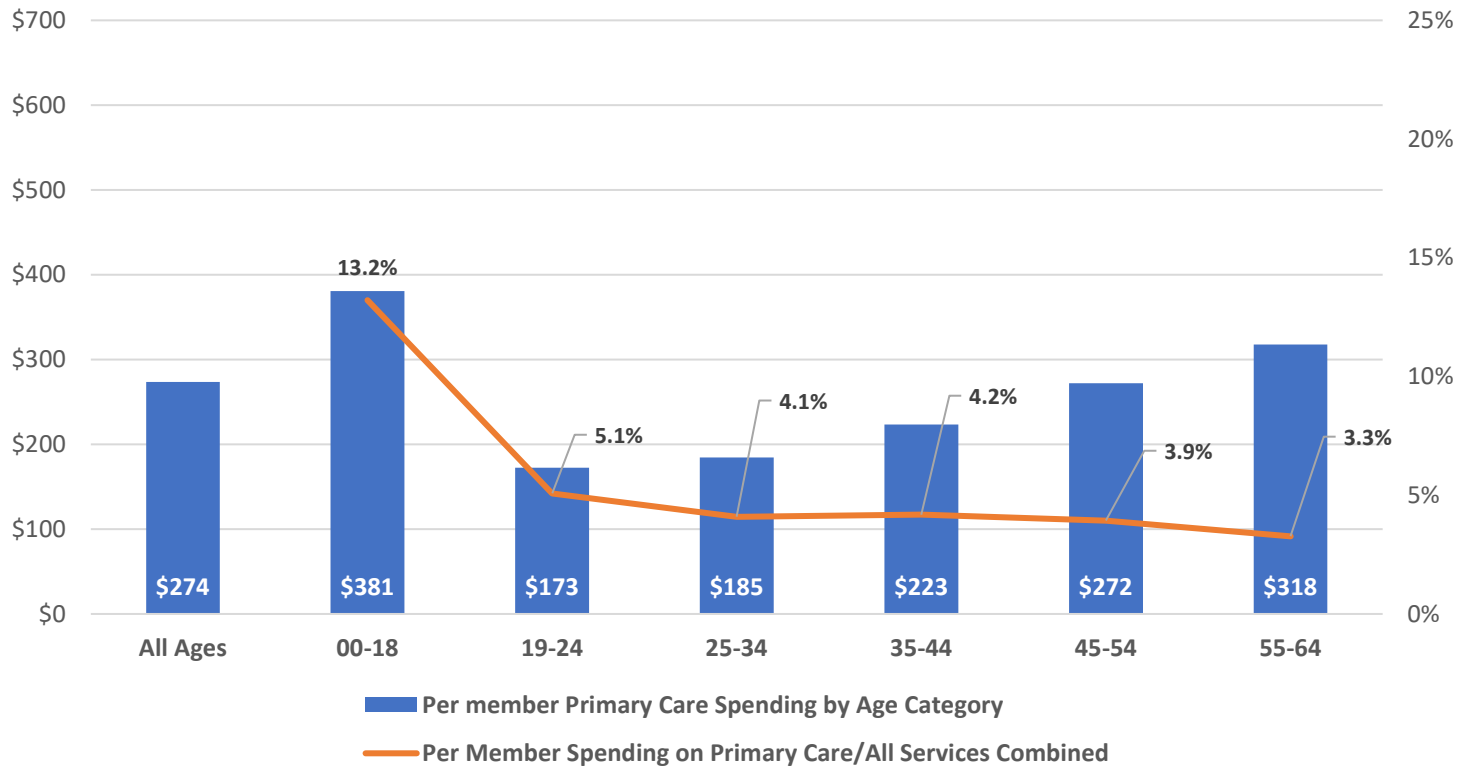
# Out Of Pocket Spending Per Capita, 2017-2019



# Healthcare Spend Drivers By Service Category, 2018 V. 2019



# Per Member Spending, All Services Vs. % Per Member Spending On Primary Care, By Age Group, 2019

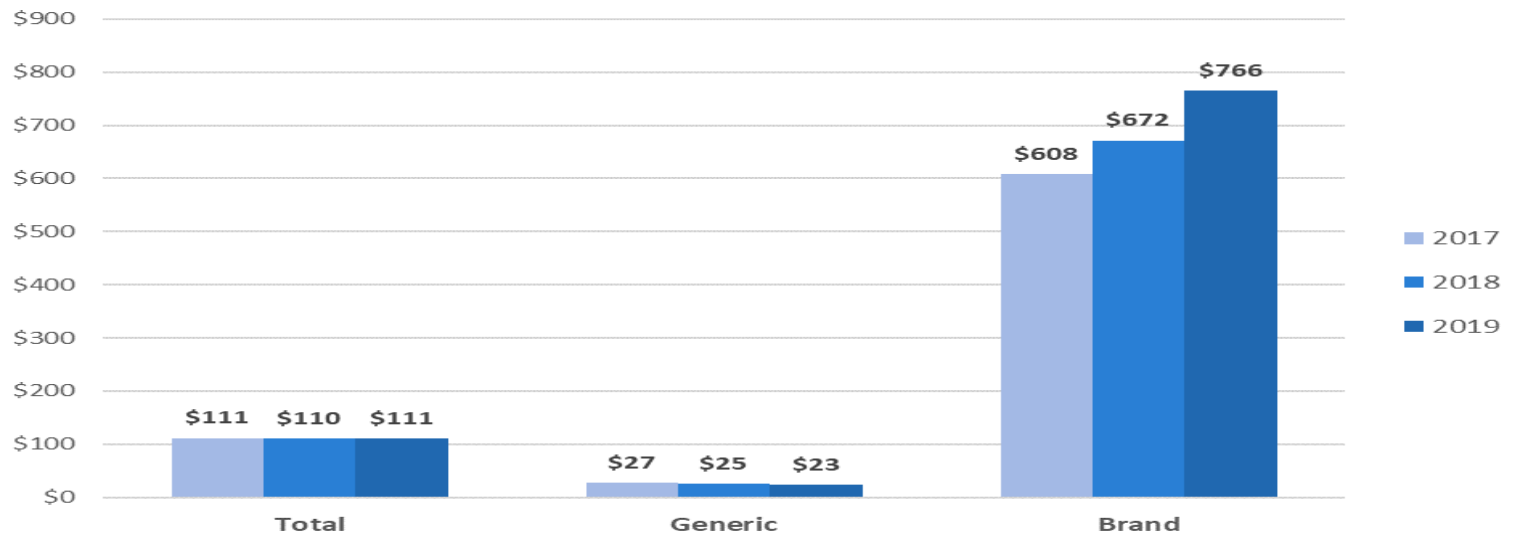
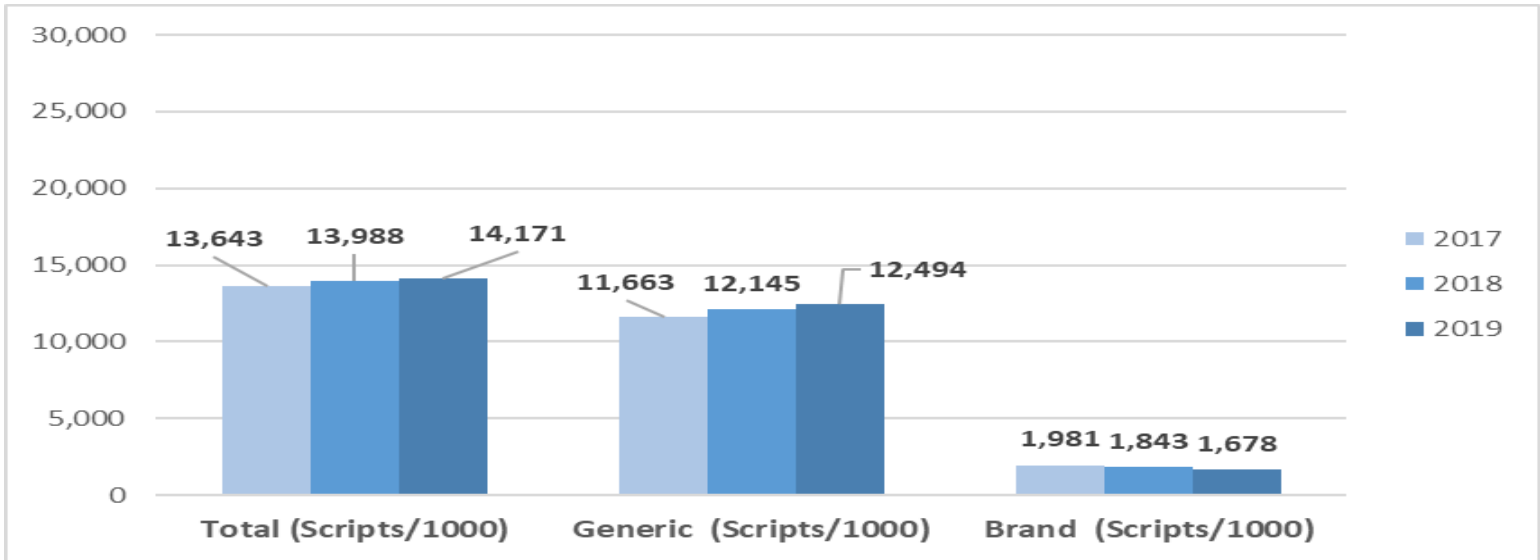


Increased from \$246 in 2017 to \$274 in 2019.



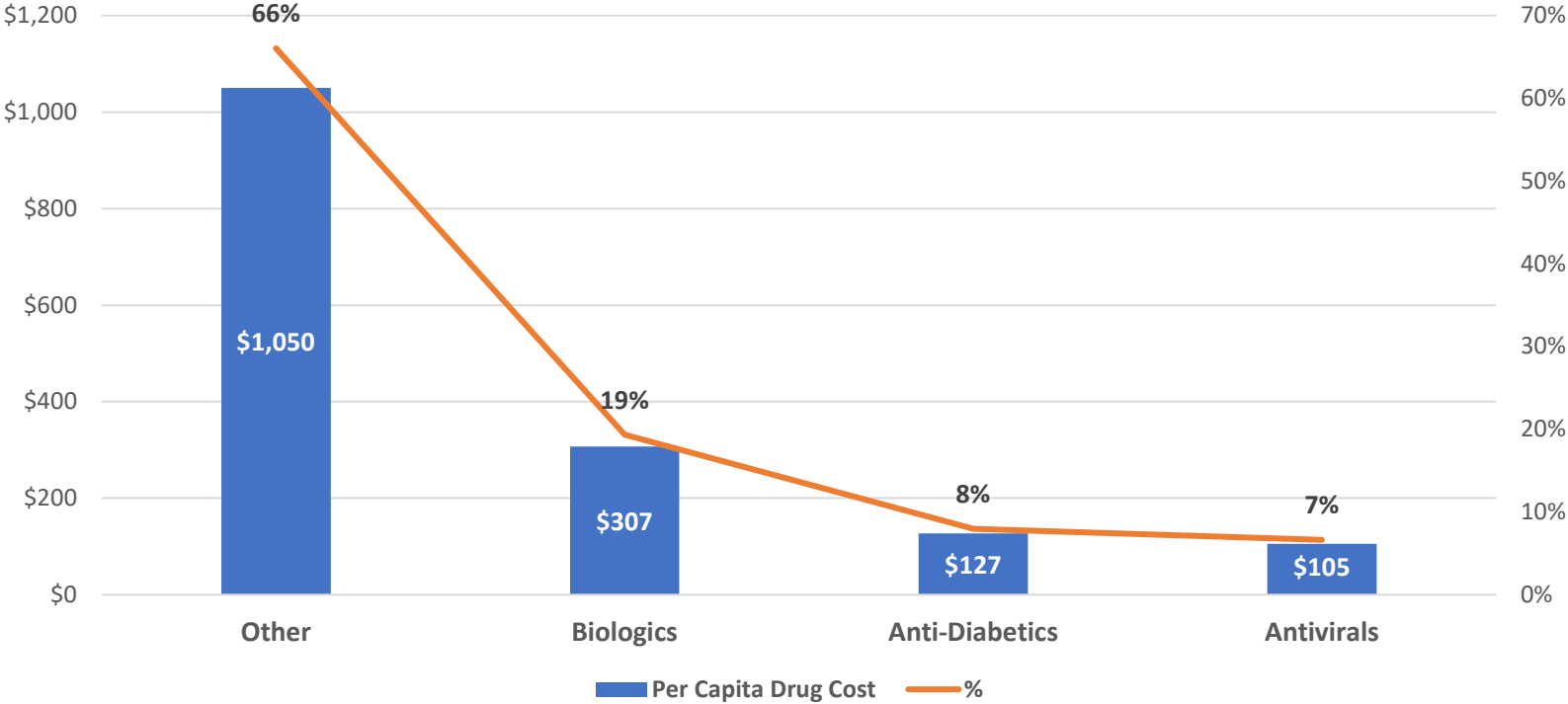
Primary care alone constituted **4.9%** of all spending in 2019.

# Prescription Drug Use and Unit Cost By Drug Type, All Markets Combined, 2017-2019



# Per Capita Most Expensive Drugs\* Class: All Markets, 2019

**\$1,590** per capita drug cost



\*Includes both Generic and Brand type drugs.

# State Employees Prescription Drug Use Overview, 2019

**210,984** total members enrolled, 2019

**155,097\* (72.5%)**  
below age <65yrs

**5,350 (2.5%)**  
Kaiser plan

**50,537 (25%)**  
above 65yrs

**1.50**  
median risk score

**350K** Scripts filled, 2019

**\$111.3 million** Total Drug  
Spend, 2019

## Top 5 most expensive brand drugs

1. Humira Pen (\$104 per capita),
2. Trulicity (\$52 per capita),
3. Tresiba FlexTouch (\$30 per capita),
4. Cosentyx (\$25 per capita), and
5. Januvia (\$23 per capita)

\* *population used in the analysis*

# TAKEAWAYS

- ❖ Overall per capita spending (all services combined) across all markets was \$5603 , an increase of 2.6% in 2019 .
  - ❖ Outpatient hospital facility services and professional services were the primary contributors to the overall 2.6% increase in spending for 2019.
- ❖ Overall illness burden increased marginally from 2018 to 2019 (1.37)
- ❖ Overall enrollment as of December 31<sup>st</sup> decreased in 2019 by 1.0% among privately insured in Maryland. This change is consistent with the SHADAC national reporting on Maryland which show a 1.2% decrease.
- ❖ Primary care alone constituted an average of 4.9% of all medical and prescription drug spending in 2019.