## **ATTACHMENT 71**



2020-2022 Incurred Claims (1) - RFP entitled: "Pharmacy Benefit Services for The Empire Plan, Excelsior Plan, Student Employee Health Plan, and NYS Insurance Fund Workers' Compensation Prescription Drug Programs"

## Empire Plan Prescription Drug Program 2020 - 2022 Incurred Claims (1)

<u>Year</u>	Type of Claim	<b>Enrollee Amount Paid</b>	Dependent Amount Paid	Total Amount Paid
2020	Direct (Enrollee Submitted)	\$22,219	\$24,895	\$47,114
	Mail Order	\$4,966,401	\$2,216,847	\$7,183,247
	Pharmacy	\$90,259,784	\$49,774,833	\$140,034,616
	Specialty Pharmacy	\$3,050,724	\$3,272,659	\$6,323,383
	Total	\$98,299,128	\$55,289,233	\$153,588,360
2021	Direct (Enrollee Submitted)	\$21,452	\$22,035	\$43,487
	Mail Order	\$5,038,235	\$2,233,529	\$7,271,763
	Pharmacy	\$90,589,292	\$49,912,772	\$140,502,065
	Specialty Pharmacy	\$3,496,588	\$3,190,075	\$6,686,663
	Total	\$99,145,567	\$55,358,410	\$154,503,977
2022	Direct (Enrollee Submitted)	\$19,687	\$36,190	\$55,877
	Mail Order	\$4,976,517	\$2,167,145	\$7,143,662
	Pharmacy	\$91,264,693	\$51,108,146	\$142,372,839
	Specialty Pharmacy	\$3,514,613	\$3,401,743	\$6,916,355
	Total	\$99,775,510	\$56,713,224	\$156,488,734

<sup>(1)</sup> Based on claims paid through February 28, 2023, and excludes COB credits and formulary rebates. Includes Student Employee Health Plan (SEHP) claims and Excelsior claims.