



# Children's Health Spending: 2009-2012 Appendix

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[www.healthcostinstitute.org](http://www.healthcostinstitute.org)

**Table A1: Out-of-pocket expenditures per child, all children, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Out-of-Pocket Per Capita</b>						
National, all Children	\$378	\$403	\$427	7.3%	6.7%	5.9%
Share of Expenditures	17.4%	17.2%	17.5%	N/A	N/A	N/A
<b>Out-of-Pocket Per Capita by Age</b>						
0-3	\$498	\$522	\$548	6.9%	4.8%	5.1%
4-8	\$305	\$330	\$345	5.5%	8.2%	4.5%
9-13	\$307	\$332	\$354	7.2%	8.0%	6.6%
14-18	\$441	\$470	\$502	9.0%	6.5%	6.9%
<b>Out-of-Pocket Per Capita by Geographic Region</b>						
Northeast	\$366	\$388	\$410	9.1%	6.0%	5.7%
Midwest	\$417	\$449	\$477	6.9%	7.7%	6.3%
South	\$396	\$423	\$454	6.0%	7.0%	7.2%
West	\$324	\$343	\$353	9.0%	5.7%	3.0%
<b>Out-of-Pocket Per Capita by Gender</b>						
Boys	\$390	\$416	\$440	7.5%	6.7%	5.8%
Girls	\$366	\$390	\$414	7.2%	6.7%	6.0%
<b>Out-of-Pocket Per Capita by Service Category</b>						
Inpatient	\$23	\$25	\$26	9.2%	9.5%	3.6%
Inpatient Subset <sup>1</sup>	\$23	\$25	\$26	9.2%	10.0%	3.8%
Outpatient	\$96	\$107	\$118	11.8%	11.6%	9.7%
Visits	\$62	\$69	\$76	11.0%	11.4%	9.9%
Other	\$34	\$38	\$42	13.3%	12.1%	9.4%
Professional Procedures	\$184	\$195	\$205	7.2%	5.8%	5.2%
Prescriptions <sup>2</sup>	\$75	\$76	\$78	1.9%	1.6%	3.0%
Brand	\$40	\$39	\$36	6.4%	-4.0%	-6.1%
Generics	\$35	\$37	\$42	-2.7%	8.1%	12.3%

Source: HCCI, 2013.

Notes: All data to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts.

**Table A2: Payer expenditures per child, all children, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Payer Per Capita</b>						
National, all Children	\$1,791	\$1,936	\$2,010	4.0%	8.1%	3.8%
Share of Expenditures	82.6%	82.8%	82.5%	N/A	N/A	N/A
<b>Payer Per Capita by Age</b>						
0-3	\$3,513	\$3,811	\$3,898	7.1%	8.5%	2.3%
4-8	\$1,180	\$1,273	\$1,308	1.5%	7.9%	2.8%
9-13	\$1,228	\$1,360	\$1,422	2.0%	10.8%	4.6%
14-18	\$1,871	\$1,998	\$2,114	3.8%	6.8%	5.8%
<b>Payer Per Capita by Geographic Region</b>						
Northeast	\$1,970	\$2,104	\$2,185	5.4%	6.8%	3.9%
Midwest	\$1,824	\$1,977	\$2,064	4.1%	8.4%	4.4%
South	\$1,736	\$1,875	\$1,967	2.5%	8.1%	4.9%
West	\$1,696	\$1,850	\$1,878	4.9%	9.1%	1.5%
<b>Payer Per Capita by Gender</b>						
Boys	\$1,893	\$2,046	\$2,132	4.5%	8.1%	4.2%
Girls	\$1,684	\$1,820	\$1,882	3.4%	8.1%	3.4%
<b>Payer Per Capita by Service Category</b>						
Inpatient	\$468	\$519	\$522	7.6%	10.8%	0.7%
Inpatient Subset <sup>1</sup>	\$463	\$517	\$520	7.2%	11.5%	0.7%
Outpatient	\$421	\$449	\$475	3.3%	6.7%	5.8%
Visits	\$271	\$289	\$306	3.7%	6.6%	5.7%
Other	\$149	\$160	\$169	2.7%	7.0%	5.9%
Professional Procedures	\$678	\$730	\$755	1.5%	7.7%	3.4%
Prescriptions <sup>2</sup>	\$224	\$237	\$257	5.8%	6.1%	8.4%
Brand	\$153	\$161	\$170	11.4%	5.6%	5.5%
Generics	\$71	\$76	\$87	-4.4%	7.1%	14.4%

Source: HCCI, 2013.

Notes: All data to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategoryable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts.

**Table A3: Summary, all children, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Utilization per 1,000 insureds by service category</b>						
Inpatient	40	41	40	-0.4%	2.4%	-1.5%
Inpatient Subset <sup>1</sup>	39	40	39	-0.6%	2.7%	-1.6%
Outpatient	1,305	1,334	1,359	-2.3%	2.2%	1.9%
Visits	229	234	234	-6.6%	1.8%	0.0%
Other	1,076	1,101	1,126	-1.3%	2.3%	2.2%
Professional Procedures	10,840	11,181	11,329	-3.0%	3.2%	1.3%
Prescriptions <sup>2</sup>	72,789	73,301	74,064	0.9%	0.7%	1.0%
Brand	26,884	23,063	19,474	4.2%	-14.2%	-15.6%
Generics	45,892	50,227	54,560	-0.8%	9.4%	8.6%
<b>Average price paid per service by service category</b>						
Inpatient	\$12,299	\$13,294	\$13,608	8.1%	8.1%	2.4%
Inpatient Subset <sup>1</sup>	\$12,474	\$13,537	\$13,862	7.9%	8.5%	2.4%
Outpatient	\$396	\$417	\$436	7.2%	5.3%	4.6%
Visits	\$1,453	\$1,534	\$1,635	12.4%	5.6%	6.5%
Other	\$170	\$180	\$187	5.9%	5.5%	4.2%
Professional Procedures	\$80	\$83	\$85	5.8%	4.0%	2.4%
Prescriptions <sup>2</sup>	\$4	\$4	\$5	3.8%	4.2%	6.0%
Brand	\$7	\$9	\$11	5.9%	20.8%	22.3%
Generics	\$2	\$2	\$2	-3.1%	-1.8%	4.7%
<b>Average intensity per service by service category</b>						
Inpatient Subset <sup>1</sup>	1.07	1.06	1.06	1.0%	-0.7%	-0.1%
Outpatient	2.70	2.68	2.64	0.9%	-0.9%	-1.5%
Visits	9.68	9.47	9.35	4.8%	-2.2%	-1.2%
Other	1.21	1.24	1.24	1.1%	2.0%	0.6%
Professional Procedures	1.54	1.63	1.63	0.7%	5.5%	0.2%
<b>Average intensity-adjusted price per service by service category</b>						
Inpatient Subset <sup>1</sup>	\$11,666	\$12,752	\$13,078	6.8%	9.3%	2.6%
Outpatient	\$147	\$156	\$165	6.3%	6.2%	6.2%
Visits	\$150	\$162	\$175	7.2%	8.0%	7.8%
Other	\$141	\$145	\$151	4.7%	3.4%	3.6%
Professional Procedures	\$52	\$51	\$52	5.1%	-1.4%	2.3%

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.

**Table A4: Summary, infants and toddlers, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Utilization per 1,000 insureds by service category</b>						
Inpatient	145	151	150	1.4%	3.6%	-0.3%
Inpatient Subset <sup>1</sup>	144	149	148	1.6%	3.5%	-0.3%
Outpatient	1,736	1,747	1,737	-3.3%	0.6%	-0.6%
Visits	358	362	359	-6.2%	1.1%	-0.8%
Other	1,378	1,385	1,378	-2.6%	0.5%	-0.5%
Professional Procedures	19,971	20,180	20,118	-0.4%	1.0%	-0.3%
Prescriptions <sup>2</sup>	53,837	53,016	50,504	-1.1%	-1.5%	-4.7%
Brand	12,322	8,764	7,300	3.3%	-28.9%	-16.7%
Generics	41,508	44,245	43,126	-2.3%	6.6%	-2.5%
<b>Average price paid per service by service category</b>						
Inpatient	\$10,956	\$11,609	\$11,732	10.5%	6.0%	1.1%
Inpatient Subset <sup>1</sup>	\$11,015	\$11,707	\$11,840	10.4%	6.3%	1.1%
Outpatient	\$379	\$401	\$423	6.9%	5.9%	5.5%
Visits	\$1,241	\$1,307	\$1,388	10.8%	5.3%	6.3%
Other	\$154	\$164	\$171	4.9%	6.5%	4.3%
Professional Procedures	\$80	\$85	\$89	5.4%	6.4%	4.0%
Prescriptions <sup>2</sup>	\$3	\$3	\$3	-0.9%	3.1%	6.7%
Brand	\$6	\$9	\$11	-2.5%	44.1%	24.3%
Generics	\$2	\$2	\$2	-1.9%	-5.7%	2.3%
<b>Average intensity per service by service category</b>						
Inpatient Subset <sup>1</sup>	1.03	1.01	1.00	1.3%	-2.1%	-0.5%
Outpatient	2.61	2.61	2.57	-1.4%	0.0%	-1.5%
Visits	8.62	8.48	8.33	1.4%	-1.6%	-1.8%
Other	1.04	1.07	1.06	-1.7%	2.6%	-0.5%
Professional Procedures	1.56	1.71	1.72	1.1%	9.7%	0.4%
<b>Average intensity-adjusted price per service by service category</b>						
Inpatient Subset <sup>1</sup>	\$10,675	\$11,591	\$11,784	9.0%	8.6%	1.7%
Outpatient	\$145	\$154	\$165	8.4%	5.9%	7.1%
Visits	\$144	\$154	\$161	9.3%	7.0%	8.2%
Other	\$148	\$154	\$161	6.7%	3.7%	4.9%
Professional Procedures	\$51	\$50	\$52	4.3%	-3.1%	3.6%

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.

**Table A5: Detailed expenditures per infant or toddler, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Inpatient</b>						
Labor and Delivery	\$910	\$1,005	\$1,033	12.2%	10.5%	2.8%
Medical	\$318	\$347	\$353	5.4%	9.2%	1.4%
MHSU	\$1	\$2	\$1	**	**	**
SNF and Hospice	\$1	\$1	\$1	**	**	**
Surgery	\$356	\$389	\$371	18.6%	9.2%	-4.5%
Ungroupable	\$6	\$2	\$2	**	**	**
<b>Outpatient Visits</b>						
Emergency Room	\$204	\$224	\$240	-0.5%	9.6%	7.3%
Observation	\$14	\$14	\$15	7.3%	-0.8%	8.5%
Outpatient Surgery	\$226	\$235	\$243	7.9%	4.0%	3.3%
<b>Outpatient Other</b>						
Ancillary Services	\$53	\$57	\$59	0.1%	8.7%	2.8%
Lab/Pathology	\$32	\$33	\$33	2.6%	4.3%	1.2%
Other Services	\$82	\$91	\$97	3.6%	10.7%	6.5%
Radiology Services	\$46	\$46	\$47	2.2%	0.4%	1.5%
<b>Professional Procedures</b>						
Administered Drugs	\$8	\$7	\$8	-45.0%	-7.3%	17.9%
Anesthesia	\$55	\$57	\$56	4.9%	2.8%	-0.3%
Office Visits - PCP	\$265	\$276	\$277	1.0%	3.9%	0.5%
Office Visits - Specialist	\$61	\$67	\$71	9.3%	9.8%	6.9%
Other	\$824	\$912	\$956	7.6%	10.7%	4.8%
Pathology/Lab	\$31	\$33	\$32	-3.8%	6.1%	-1.2%
Preventive Visits - PCP	\$213	\$223	\$235	4.7%	4.8%	5.0%
Preventive Visit - Specialist	\$11	\$12	\$13	16.1%	10.0%	10.2%
Radiology	\$22	\$22	\$21	-1.4%	-0.6%	-4.3%
Surgery	\$108	\$110	\$111	4.4%	1.2%	0.7%

**Table A5: (Continued)**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Brand Prescriptions</b>						
Anti-Infective Agents	\$12	\$19	\$21	7.9%	58.6%	12.5%
Antihistamine Drugs	\$1	\$0	\$0	**	**	**
Cardiovascular Drugs	\$1	\$1	\$1	**	**	**
CNS Agents	\$2	\$2	\$3	16.4%	-11.1%	59.4%
Gastrointestinal Drugs	\$8	\$2	\$3	-18.6%	**	**
Hormones and Synthetic Substitutes	\$7	\$8	\$3	-5.2%	7.5%	-59.6%
Other Therapeutic Classes	\$47	\$49	\$52	3.3%	4.1%	5.5%
Vaccines, Serums, and Toxoids	\$0	\$0	\$0	**	**	**
<b>Generic Prescriptions</b>						
Anti-Infective Agents	\$35	\$32	\$29	-9.5%	-7.4%	-8.0%
Antihistamine Drugs	\$1	\$1	\$1	**	**	**
Cardiovascular Drugs	\$0	\$0	\$0	**	**	**
CNS Agents	\$3	\$3	\$3	28.8%	3.2%	-8.0%
Gastrointestinal Drugs	\$7	\$12	\$9	21.8%	58.4%	-22.0%
Hormones and Synthetic Substitutes	\$21	\$19	\$3	1.0%	-7.8%	-85.1%
Other Therapeutic Classes	\$19	\$20	\$41	-9.5%	1.6%	108.6%
Vaccines, Serums, and Toxoids	\$0	\$0	\$0	**	**	**

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded. Some percent change numbers are not presented due to difficulty of their interpretability because of low values in these fields, these are designated with asterisks. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.

**Table A6: Detailed utilization, infants and toddlers, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Inpatient Admissions per 1,000 insureds</b>						
Labor and Delivery	111	116	118	4.2%	4.5%	1.1%
Medical	26	26	25	-7.6%	0.4%	-5.3%
MHSU	0	0	0	**	**	**
SNF and Hospice	0	0	0	**	**	**
Surgery	6	6	6	-1.7%	-0.9%	-6.4%
Ungroupable	1	1	1	**	**	**
<b>Outpatient Visits per 1,000 insureds</b>						
Emergency Room	277	282	283	-8.2%	1.8%	0.2%
Observation	11	11	11	5.7%	-1.0%	-1.8%
Outpatient Surgery	70	68	65	0.5%	-1.6%	-4.8%
<b>Outpatient Other per 1,000 insureds</b>						
Ancillary Services	315	310	298	-3.7%	-1.6%	-3.9%
Lab/Pathology	507	510	508	-2.5%	0.6%	-0.3%
Other Services	444	456	464	-1.6%	2.5%	1.9%
Radiology Services	112	110	108	-3.3%	-1.9%	-2.0%
<b>Professional Procedures per 1,000 insureds</b>						
Administered Drugs	136	136	134	-2.7%	0.1%	-1.7%
Anesthesia	100	99	97	1.1%	-1.0%	-2.0%
Office Visits - PCP	3,344	3,337	3,236	-4.0%	-0.2%	-3.0%
Office Visits - Specialist	586	619	638	3.2%	5.6%	3.0%
Other	10,961	11,020	11,032	1.3%	0.5%	0.1%
Pathology/Lab	1,829	1,921	1,917	-5.7%	5.0%	-0.2%
Preventive Visits - PCP	2,166	2,202	2,232	1.7%	1.7%	1.4%
Preventive Visit - Specialist	79	88	94	10.1%	11.1%	7.4%
Radiology	455	447	432	-4.3%	-1.9%	-3.2%
Surgery	314	312	306	-3.2%	-0.7%	-1.8%



**Table A6: (Continued)**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Brand Prescription Filled Days per 1,000 insureds</b>						
Anti-Infective Agents	666	742	678	-32.1%	11.5%	-8.7%
Antihistamine Drugs	626	250	29	20.8%	-60.0%	-88.3%
Cardiovascular Drugs	159	179	205	14.9%	13.2%	14.0%
CNS Agents	109	82	94	-45.0%	-24.8%	14.4%
Gastrointestinal Drugs	1,405	162	409	-34.0%	-88.5%	152.7%
Hormones and Synthetic Substitutes	1,300	1,387	341	3.1%	6.7%	-75.4%
Other Therapeutic Classes	8,058	5,959	5,540	20.2%	-26.0%	-7.0%
Vaccines, Serums, and Toxoids	0	1	3	**	**	**
<b>Generic Prescription Filled Days per 1,000 insureds</b>						
Anti-Infective Agents	14,109	14,205	13,243	0.0%	0.7%	-6.8%
Antihistamine Drugs	770	786	828	-9.5%	2.0%	5.3%
Cardiovascular Drugs	293	311	223	-1.5%	6.1%	-28.3%
CNS Agents	1,254	1,283	1,238	13.2%	2.3%	-3.5%
Gastrointestinal Drugs	4,664	6,130	5,508	22.6%	31.4%	-10.1%
Hormones and Synthetic Substitutes	3,145	3,064	1,438	1.0%	-2.6%	-53.1%
Other Therapeutic Classes	17,273	18,466	20,647	-10.0%	6.9%	11.8%
Vaccines, Serums, and Toxoids	0	0	1	**	**	**

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded. Some percent change numbers are not presented due to difficulty of their interpretability because of low values in these fields, these are designated with asterisks. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.

**Table A7: Summary, younger children, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Utilization per 1,000 insureds by service category</b>						
Inpatient	13	13	12	-8.5%	3.9%	-5.4%
Inpatient Subset <sup>1</sup>	12	13	12	-8.8%	3.1%	-5.7%
Outpatient	1,052	1,078	1,088	-3.8%	2.5%	0.9%
Visits	199	207	207	-8.4%	3.9%	0.1%
Other	853	872	881	-2.7%	2.2%	1.1%
Professional Procedures	9,025	9,344	9,266	-4.7%	3.5%	-0.8%
Prescriptions <sup>2</sup>	55,964	55,907	55,314	-1.2%	-0.1%	-1.1%
Brand	23,635	19,499	16,076	7.7%	-17.5%	-17.6%
Generics	32,319	36,400	39,213	-6.7%	12.6%	7.7%
<b>Average price paid per service by service category</b>						
Inpatient	\$15,168	\$16,330	\$17,079	11.1%	7.7%	4.6%
Inpatient Subset <sup>1</sup>	\$15,607	\$17,014	\$17,857	11.5%	9.0%	5.0%
Outpatient	\$395	\$415	\$435	8.3%	5.0%	4.8%
Visits	\$1,383	\$1,442	\$1,527	13.9%	4.2%	5.9%
Other	\$165	\$172	\$179	6.4%	4.1%	4.3%
Professional Procedures	\$74	\$77	\$79	7.1%	4.4%	2.8%
Prescriptions <sup>2</sup>	\$4	\$4	\$4	1.3%	4.9%	6.8%
Brand	\$6	\$7	\$9	-1.2%	24.9%	24.9%
Generics	\$2	\$2	\$2	-1.9%	-4.5%	1.9%
<b>Average intensity per service by service category</b>						
Inpatient Subset <sup>1</sup>	1.15	1.18	1.19	1.5%	3.0%	0.3%
Outpatient	2.60	2.56	2.53	1.3%	-1.5%	-1.1%
Visits	9.23	8.88	8.74	5.6%	-3.7%	-1.6%
Other	1.05	1.06	1.07	1.3%	0.6%	1.4%
Professional Procedures	1.45	1.52	1.52	0.7%	4.8%	0.1%
<b>Average intensity-adjusted price per service by service category</b>						
Inpatient Subset <sup>1</sup>	\$13,570	\$14,369	\$15,041	9.8%	5.9%	4.7%
Outpatient	\$152	\$162	\$172	6.9%	6.6%	6.0%
Visits	\$150	\$162	\$175	7.9%	8.3%	7.7%
Other	\$157	\$162	\$167	5.0%	3.4%	2.8%
Professional Procedures	\$51	\$50	\$52	6.4%	-0.4%	2.7%

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.

**Table A8: Detailed utilization, younger children, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Inpatient Admissions per 1,000 insureds</b>						
Labor and Delivery	0	0	0	**	**	**
Medical	9	9	9	-10.1%	3.1%	-5.5%
MHSU	0	0	0	**	**	**
SNF and Hospice	0	0	0	**	**	**
Surgery	3	3	3	-6.7%	3.8%	-6.7%
Ungroupable	0	0	0	**	**	**
<b>Outpatient Visits per 1,000 insureds</b>						
Emergency Room	151	159	160	-11.5%	5.2%	0.7%
Observation	5	5	6	6.7%	6.1%	4.2%
Outpatient Surgery	43	42	41	2.7%	-1.1%	-2.9%
<b>Outpatient Other per 1,000 insureds</b>						
Ancillary Services	147	144	145	-5.0%	-1.8%	0.9%
Lab/Pathology	329	344	341	-2.7%	4.6%	-1.0%
Other Services	297	303	313	-1.1%	1.9%	3.5%
Radiology Services	80	81	81	-4.4%	0.5%	0.8%
<b>Professional Procedures per 1,000 insureds</b>						
Administered Drugs	66	67	68	0.1%	0.3%	1.5%
Anesthesia	54	55	55	0.5%	1.6%	-0.7%
Office Visits - PCP	1,745	1,794	1,708	-10.7%	2.8%	-4.8%
Office Visits - Specialist	533	568	586	3.7%	6.6%	3.1%
Other	4,111	4,221	4,265	-1.6%	2.7%	1.1%
Pathology/Lab	1,472	1,587	1,523	-11.5%	7.8%	-4.0%
Preventive Visits - PCP	548	557	562	3.6%	1.7%	1.0%
Preventive Visit - Specialist	12	14	16	17.9%	12.3%	11.0%
Radiology	282	280	282	-6.9%	-0.5%	0.6%
Surgery	202	202	201	-0.1%	-0.2%	-0.2%

**Table A8: (Continued)**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Brand Prescriptions Filled Days per 1,000 insureds</b>						
Anti-Infective Agents	433	584	499	-53.5%	35.0%	-14.6%
Antihistamine Drugs	913	328	43	16.7%	-64.1%	-86.8%
Cardiovascular Drugs	194	66	99	157.6%	-66.2%	50.3%
CNS Agents	5,199	4,835	4,291	3.5%	-7.0%	-11.3%
Gastrointestinal Drugs	538	154	243	-23.1%	-71.3%	57.7%
Hormones and Synthetic Substitutes	3,252	3,674	781	14.6%	13.0%	-78.8%
Other Therapeutic Classes	13,105	9,857	10,118	13.1%	-24.8%	2.7%
Vaccines, Serums, and Toxoids	1	1	2	**	**	**
<b>Generic Prescriptions Filled Days per 1,000 insureds</b>						
Anti-Infective Agents	8,845	9,077	8,355	-2.2%	2.6%	-8.0%
Antihistamine Drugs	882	812	878	-12.2%	-1.2%	8.1%
Cardiovascular Drugs	1,054	1,083	1,124	3.0%	2.7%	3.8%
CNS Agents	5,253	6,315	7,101	3.5%	20.2%	12.5%
Gastrointestinal Drugs	1,124	1,529	1,389	1.6%	36.0%	-9.2%
Hormones and Synthetic Substitutes	2,272	2,262	1,475	-8.1%	-0.5%	-34.8%
Other Therapeutic Classes	12,948	15,321	18,889	-13.6%	18.3%	23.3%
Vaccines, Serums, and Toxoids	1	1	1	**	**	**

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded. Some percent change numbers are not presented due to difficulty of their interpretability because of low values in these fields, these are designated with asterisks. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.

**Table A9: Summary, pre-teens, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Utilization per 1,000 insureds by service category</b>						
Inpatient	13	14	13	-2.2%	1.3%	-2.7%
Inpatient Subset <sup>1</sup>	13	13	13	-2.7%	2.2%	-3.3%
Outpatient	1,028	1,066	1,094	-2.5%	3.7%	2.6%
Visits	169	173	174	-7.5%	2.0%	0.7%
Other	859	893	920	-1.4%	4.0%	3.0%
Professional Procedures	8,149	8,600	8,806	-4.3%	5.5%	2.4%
Prescriptions <sup>2</sup>	67,754	68,715	70,019	1.4%	1.4%	1.9%
Brand	30,553	26,869	22,706	7.4%	-12.1%	-15.5%
Generics	37,182	41,832	47,294	-2.9%	12.5%	13.1%
<b>Average price paid per service by service category</b>						
Inpatient	\$15,561	\$18,474	\$18,886	5.7%	18.7%	2.2%
Inpatient Subset <sup>1</sup>	\$16,197	\$19,143	\$19,661	6.1%	18.2%	2.7%
Outpatient	\$374	\$395	\$411	6.8%	5.4%	4.2%
Visits	\$1,386	\$1,489	\$1,583	12.3%	7.4%	6.3%
Other	\$175	\$183	\$190	6.0%	4.8%	3.6%
Professional Procedures	\$78	\$80	\$81	5.5%	2.6%	2.0%
Prescriptions <sup>2</sup>	\$5	\$5	\$5	4.0%	7.0%	5.7%
Brand	\$7	\$9	\$10	4.9%	18.9%	21.4%
Generics	\$2	\$3	\$3	-5.8%	5.1%	5.1%
<b>Average intensity per service by service category</b>						
Inpatient Subset <sup>1</sup>	1.21	1.23	1.23	1.8%	1.5%	-0.1%
Outpatient	2.50	2.48	2.44	1.8%	-0.7%	-1.7%
Visits	8.49	8.38	8.29	5.6%	-1.3%	-1.1%
Other	1.31	1.34	1.33	2.8%	1.7%	-0.4%
Professional Procedures	1.52	1.59	1.60	0.4%	4.3%	0.4%
<b>Average intensity-adjusted price per service by service category</b>						
Inpatient Subset <sup>1</sup>	\$13,362	\$15,553	\$15,986	4.2%	16.4%	2.8%
Outpatient	\$150	\$159	\$169	4.9%	6.2%	6.0%
Visits	\$163	\$178	\$191	6.3%	8.8%	7.5%
Other	\$133	\$137	\$143	3.1%	3.0%	4.1%
Professional Procedures	\$51	\$50	\$51	5.1%	-1.6%	1.7%

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization.

**Table A10: Detailed utilization, pre-teens, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Inpatient Admissions per 1,000 insureds</b>						
Labor and Delivery	0	0	0	**	**	**
Medical	7	7	7	-8.4%	3.2%	-4.2%
MHSU	2	3	3	13.4%	6.7%	3.5%
SNF and Hospice	0	0	0	**	**	**
Surgery	4	4	3	-1.1%	-2.6%	-6.3%
Ungroupable	1	0	0	**	**	**
<b>Outpatient Visits per 1,000 insureds</b>						
Emergency Room	139	142	143	-9.4%	2.0%	0.7%
Observation	4	4	5	6.9%	4.0%	8.5%
Outpatient Surgery	26	27	27	1.3%	1.4%	-0.6%
<b>Outpatient Other per 1,000 insureds</b>						
Ancillary Services	177	176	178	-3.5%	-0.8%	1.1%
Lab/Pathology	343	361	368	-2.5%	5.3%	1.8%
Other Services	229	245	260	2.1%	7.2%	5.9%
Radiology Services	110	111	114	-2.1%	0.9%	3.2%
<b>Professional Procedures per 1,000 insureds</b>						
Administered Drugs	57	58	60	-2.0%	2.0%	2.7%
Anesthesia	34	35	35	-1.1%	4.0%	-0.3%
Office Visits - PCP	1,267	1,307	1,274	-13.0%	3.2%	-2.5%
Office Visits - Specialist	601	642	674	4.4%	6.7%	5.1%
Other	3,746	3,992	4,164	-0.6%	6.6%	4.3%
Pathology/Lab	1,284	1,393	1,411	-12.8%	8.4%	1.3%
Preventive Visits - PCP	446	465	472	5.3%	4.2%	1.4%
Preventive Visit - Specialist	12	14	16	16.6%	18.0%	13.3%
Radiology	467	461	467	-3.2%	-1.4%	1.4%
Surgery	234	233	234	1.3%	-0.3%	0.3%

**Table A10: (Continued)**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Brand Prescriptions filled days per 1,000 insureds</b>						
Anti-Infective Agents	449	550	471	-44.1%	22.7%	-14.3%
Antihistamine Drugs	666	189	54	8.8%	-71.6%	-71.5%
Cardiovascular Drugs	284	78	130	228.9%	-72.5%	66.5%
CNS Agents	13,631	12,200	10,467	9.2%	-10.5%	-14.2%
Gastrointestinal Drugs	407	256	298	-32.0%	-37.2%	16.4%
Hormones and Synthetic Substitutes	3,528	4,486	1,651	22.0%	27.1%	-63.2%
Other Therapeutic Classes	11,582	9,104	9,629	5.5%	-21.4%	5.8%
Vaccines, Serums, and Toxoids	5	6	7	**	16.6%	17.9%
<b>Generic Prescriptions filled days per 1,000 insureds</b>						
Anti-Infective Agents	5,857	5,963	5,713	-5.7%	1.8%	-4.2%
Antihistamine Drugs	1,349	1,022	865	-5.3%	-24.2%	-15.4%
Cardiovascular Drugs	1,877	1,942	2,015	2.1%	3.5%	3.8%
CNS Agents	12,563	15,669	18,865	0.5%	24.7%	20.4%
Gastrointestinal Drugs	954	1,211	1,244	6.2%	26.9%	2.7%
Hormones and Synthetic Substitutes	2,463	2,561	2,513	-6.4%	4.0%	-1.9%
Other Therapeutic Classes	12,117	13,461	16,079	-5.1%	11.1%	19.4%
Vaccines, Serums, and Toxoids	1	2	1	**	**	**

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded. Some percent change numbers are not presented due to difficulty of their interpretability because of low values in these fields, these are designated with asterisks. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.

**Table A11: Summary, teenagers, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Utilization per 1,000 insureds by service category</b>						
Inpatient	28	29	28	-0.2%	1.1%	-2.8%
Inpatient Subset <sup>1</sup>	27	28	27	-1.1%	2.5%	-2.5%
Outpatient	1,542	1,583	1,640	-0.2%	2.6%	3.6%
Visits	240	243	243	-4.7%	1.2%	0.3%
Other	1,303	1,340	1,396	0.6%	2.9%	4.2%
Professional Procedures	9,746	10,126	10,542	-3.2%	3.9%	4.1%
Prescriptions <sup>2</sup>	103,500	105,002	108,556	2.3%	1.5%	3.4%
Brand	34,647	30,797	26,394	-0.1%	-11.1%	-14.3%
Generics	68,838	74,194	82,144	3.7%	7.8%	10.7%
<b>Average price paid per service by service category</b>						
Inpatient	\$13,656	\$14,767	\$15,616	4.0%	8.1%	5.8%
Inpatient Subset <sup>1</sup>	\$14,032	\$15,251	\$16,089	3.3%	8.7%	5.5%
Outpatient	\$421	\$442	\$461	7.0%	5.0%	4.1%
Visits	\$1,731	\$1,829	\$1,960	12.1%	5.7%	7.2%
Other	\$180	\$191	\$199	5.9%	6.0%	4.3%
Professional Procedures	\$85	\$87	\$88	5.3%	2.5%	0.7%
Prescriptions <sup>2</sup>	\$4	\$4	\$5	5.6%	2.0%	5.0%
Brand	\$8	\$10	\$12	12.1%	16.2%	21.4%
Generics	\$2	\$2	\$2	-2.0%	-3.8%	5.6%
<b>Average intensity per service by service category</b>						
Inpatient Subset <sup>1</sup>	1.09	1.09	1.11	-0.1%	0.7%	1.3%
Outpatient	2.95	2.92	2.87	1.3%	-1.1%	-1.7%
Visits	11.73	11.49	11.42	5.7%	-2.0%	-0.6%
Other	1.34	1.37	1.38	0.9%	2.3%	0.9%
Professional Procedures	1.62	1.66	1.65	0.2%	2.4%	-0.2%
<b>Average intensity-adjusted price per service by service category</b>						
Inpatient Subset <sup>1</sup>	\$12,903	\$13,931	\$14,513	3.4%	8.0%	4.2%
Outpatient	\$143	\$151	\$160	5.6%	6.1%	5.9%
Visits	\$148	\$159	\$172	6.0%	7.9%	7.8%
Other	\$135	\$140	\$144	4.9%	3.5%	3.3%
Professional Procedures	\$53	\$53	\$53	5.1%	0.0%	0.9%

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.



**Table A12: Detailed expenditures per teenager, 2009-2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Inpatient</b>						
Labor and Delivery	\$18	\$17	\$15	-1.1%	-4.2%	-9.2%
Medical	\$132	\$145	\$149	-4.0%	9.5%	3.1%
MHSU	\$70	\$83	\$84	25.1%	18.5%	1.4%
SNF and Hospice	\$1	\$1	\$1	**	**	**
Surgery	\$158	\$177	\$184	-0.4%	11.6%	4.4%
Ungroupable	\$10	\$3	\$2	**	**	**
<b>Outpatient Visits</b>						
Emergency Room	\$212	\$227	\$245	3.6%	7.1%	7.7%
Observation	\$11	\$11	\$13	8.7%	4.5%	18.7%
Outpatient Surgery	\$192	\$205	\$219	10.4%	7.0%	6.6%
<b>Outpatient Other</b>						
Ancillary Services	\$52	\$57	\$61	4.5%	9.0%	6.5%
Lab/Pathology	\$34	\$36	\$38	4.8%	6.4%	5.2%
Other Services	\$76	\$87	\$101	12.7%	14.4%	15.3%
Radiology Services	\$72	\$75	\$79	2.8%	4.4%	4.3%
<b>Professional Procedures</b>						
Administered Drugs	\$43	\$46	\$51	16.0%	7.2%	9.1%
Anesthesia	\$39	\$40	\$41	5.2%	2.9%	2.6%
Office Visits - PCP	\$99	\$104	\$107	-5.1%	5.6%	2.3%
Office Visits - Specialist	\$83	\$90	\$97	8.9%	8.9%	7.7%
Other	\$314	\$342	\$365	1.2%	9.2%	6.6%
Pathology/Lab	\$44	\$47	\$49	-3.7%	8.0%	3.4%
Preventive Visits - PCP	\$38	\$42	\$43	7.1%	8.3%	4.4%
Preventive Visit - Specialist	\$5	\$5	\$5	-0.3%	2.4%	2.0%
Radiology	\$60	\$59	\$60	-0.3%	-0.6%	0.6%
Surgery	\$107	\$108	\$109	2.7%	1.0%	1.3%

**Table A12: (Continued)**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Brand Prescriptions</b>						
Anti-Infective Agents	\$32	\$43	\$43	9.2%	33.7%	1.5%
Antihistamine Drugs	\$2	\$1	\$0	**	**	**
Cardiovascular Drugs	\$2	\$2	\$2	**	**	**
CNS Agents	\$85	\$84	\$75	17.8%	-0.3%	-10.6%
Gastrointestinal Drugs	\$7	\$7	\$8	-0.2%	0.2%	11.3%
Hormones and Synthetic Substitutes	\$65	\$74	\$73	11.6%	13.8%	-1.6%
Other Therapeutic Classes	\$96	\$87	\$108	8.9%	-8.6%	23.8%
Vaccines, Serums, and Toxoids	\$0	\$0	\$0	**	**	**
<b>Generic Prescriptions</b>						
Anti-Infective Agents	\$31	\$23	\$25	3.3%	-26.5%	8.6%
Antihistamine Drugs	\$3	\$1	\$1	**	**	**
Cardiovascular Drugs	\$1	\$1	\$1	**	**	**
CNS Agents	\$42	\$52	\$70	-11.4%	24.8%	32.7%
Gastrointestinal Drugs	\$3	\$3	\$3	-1.9%	-9.1%	-6.2%
Hormones and Synthetic Substitutes	\$18	\$21	\$21	-1.5%	13.6%	3.1%
Other Therapeutic Classes	\$57	\$60	\$68	14.4%	4.3%	13.8%
Vaccines, Serums, and Toxoids	\$0	\$0	\$0	**	**	**

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded. Some percent change numbers are not presented due to difficulty of their interpretability because of low values in these fields, these are designated with asterisks. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.

**Table A13: Detailed utilization, teenagers, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Inpatient admissions per 1,000 insureds</b>						
Labor and Delivery	3	3	2	-7.9%	-10.2%	-12.9%
Medical	10	10	10	-6.8%	1.7%	-4.0%
MHSU	9	10	10	9.9%	11.1%	4.1%
SNF and Hospice	0	0	0	**	**	**
Surgery	6	5	5	-2.5%	-3.3%	-6.8%
Ungroupable	1	1	1	**	**	**
<b>Outpatient Visits per 1,000 insureds</b>						
Emergency Room	188	192	192	-6.5%	1.8%	0.2%
Observation	7	7	8	2.6%	-1.1%	4.4%
Outpatient Surgery	44	44	43	2.1%	-0.8%	-0.1%
<b>Outpatient Other per 1,000 insureds</b>						
Ancillary Services	217	218	226	-2.0%	0.7%	3.6%
Lab/Pathology	566	579	588	-0.9%	2.3%	1.5%
Other Services	382	404	441	5.8%	5.6%	9.1%
Radiology Services	138	139	142	-2.2%	0.8%	2.2%
<b>Professional Procedures per 1,000 insureds</b>						
Administered Drugs	118	120	123	2.7%	1.6%	2.7%
Anesthesia	58	57	58	0.3%	-0.3%	0.9%
Office Visits - PCP	1,191	1,209	1,188	-10.4%	1.6%	-1.8%
Office Visits - Specialist	921	961	998	4.2%	4.3%	3.8%
Other	4,112	4,355	4,657	-1.7%	5.9%	6.9%
Pathology/Lab	1,993	2,072	2,167	-6.6%	3.9%	4.6%
Preventive Visits - PCP	338	353	355	4.1%	4.6%	0.6%
Preventive Visit - Specialist	43	43	43	-1.7%	1.4%	-0.7%
Radiology	647	632	633	-3.0%	-2.3%	0.2%
Surgery	326	323	321	0.1%	-0.9%	-0.7%

**Table A13: (Continued)**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Brand Prescription filled days per 1,000 insureds</b>						
Anti-Infective Agents	1,762	2,020	1,781	-9.0%	14.6%	-11.9%
Antihistamine Drugs	574	167	53	**	**	**
Cardiovascular Drugs	236	135	116	38.8%	-43.0%	-13.7%
CNS Agents	12,250	11,051	8,861	9.3%	-9.8%	-19.8%
Gastrointestinal Drugs	604	527	526	-22.7%	-12.7%	-0.2%
Hormones and Synthetic Substitutes	7,820	7,481	5,464	-4.6%	-4.3%	-27.0%
Other Therapeutic Classes	11,398	9,408	9,583	-2.8%	-17.5%	1.9%
Vaccines, Serums, and Toxoids	3	9	10	**	**	**
<b>Generic Prescription filled days per 1,000 insureds</b>						
Anti-Infective Agents	11,781	11,794	11,867	-2.3%	0.1%	0.6%
Antihistamine Drugs	1,782	1,002	707	0.8%	-43.7%	-29.4%
Cardiovascular Drugs	1,947	2,044	2,205	8.2%	4.9%	7.9%
CNS Agents	20,235	23,357	27,891	4.5%	15.4%	19.4%
Gastrointestinal Drugs	1,352	1,533	1,663	14.6%	13.4%	8.4%
Hormones and Synthetic Substitutes	15,747	17,499	18,772	9.7%	11.1%	7.3%
Other Therapeutic Classes	15,992	16,962	19,037	0.9%	6.1%	12.2%
Vaccines, Serums, and Toxoids	3	4	1	**	**	**

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded. Some percent change numbers are not presented due to difficulty of their interpretability because of low values in these fields, these are designated with asterisks. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization. All prescription data in filled days.

**Table A14: Detailed prescription utilization, infant and toddlers, 2012**

	Boys		Girls	
	Brand RX	Generic RX	Brand RX	Generic RX
<b>Prescription filled days per child</b>				
Anti-Infective Agents	0.68	13.65	0.67	12.82
Cardiovascular Drugs	0.19	0.25	0.22	0.20
Central Nervous System Agents	0.10	1.39	0.09	1.08
Gastrointestinal Drugs	0.46	5.94	0.35	5.06
Hormones and Synthetic Substitutes	0.25	1.63	0.43	1.24
Other Therapeutic Classes	6.34	22.13	4.71	19.10
All Other Drugs	0.05	0.91	0.03	0.73
<b>Total Filled RX Days Per Baby</b>	<b>8.07</b>	<b>45.90</b>	<b>6.50</b>	<b>40.23</b>

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. All figures rounded.

Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization.

**Table A15: Detailed prescription utilization, younger children, 2012**

	Boys		Girls	
	Brand RX	Generic RX	Brand RX	Generic RX
<b>Prescription filled days per child</b>				
Anti-Infective Agents	0.49	8.18	0.51	8.54
Cardiovascular Drugs	0.14	1.56	0.06	0.67
Central Nervous System Agents	6.28	9.62	2.21	4.47
Gastrointestinal Drugs	0.28	1.40	0.21	1.38
Hormones and Synthetic Substitutes	0.83	1.59	0.73	1.35
Other Therapeutic Classes	11.79	20.54	8.37	17.16
All Other Drugs	0.04	0.99	0.04	0.77
<b>Total Filled RX Days Per Younger Child</b>	<b>19.85</b>	<b>43.88</b>	<b>12.13</b>	<b>34.34</b>

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. All figures rounded.

Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization.

**Table A16: Detailed CNS prescription utilization, younger children, 2012**

	Boys		Girls	
	Brand RX	Generic RX	Brand RX	Generic RX
<b>Central Nervous System Agents filled days per child</b>				
Amphetamines	1.86	1.89	0.67	0.62
Miscellaneous Anorexigenics, Respiratory and Cerebral Stimulants	2.26	3.45	0.80	1.17
Antidepressants	0.02	1.16	0.01	0.60
Antipsychotic Agents	0.29	0.81	0.09	0.22
Miscellaneous Central Nervous System Agents	1.63	0.00	0.50	0.00
Miscellaneous Anticonvulsants	0.08	1.33	0.07	1.03
Nonsteroidal Anti-Inflammatory Agents	0.01	0.05	0.00	0.08
All Other CNS prescriptions	0.13	0.93	0.07	0.75
<b>Total Filled CNS Days Per Younger Child</b>	<b>6.28</b>	<b>9.62</b>	<b>2.21</b>	<b>4.47</b>

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. All figures rounded.

Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization.

**Table A17: Detailed prescription utilization, pre-teens, 2012**

	Boys		Girls	
	Brand RX	Generic RX	Brand RX	Generic RX
<b>Prescription filled days per child</b>				
Anti-Infective Agents	0.41	5.37	0.54	6.07
Cardiovascular Drugs	0.18	2.78	0.07	1.22
Central Nervous System Agents	14.97	24.73	5.76	12.73
Gastrointestinal Drugs	0.32	1.23	0.27	1.26
Hormones and Synthetic Substitutes	1.68	2.21	1.63	2.84
Other Therapeutic Classes	10.97	17.02	8.23	15.09
All Other Drugs	0.07	1.02	0.05	0.70
<b>Total Filled RX Days Per Pre-Teen</b>	<b>28.60</b>	<b>54.36</b>	<b>16.55</b>	<b>39.91</b>

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. All figures rounded.

Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization.

**Table A18: Detailed CNS prescription utilization, pre-teens, 2012**

	Boys		Girls	
	Brand RX	Generic RX	Brand RX	Generic RX
<b>Central Nervous System Agents filled days per child</b>				
Amphetamines	5.37	4.20	2.09	1.69
Miscellaneous Anorexigenics, Respiratory and Cerebral Stimulants	4.28	9.09	1.61	3.37
Antidepressants	0.13	5.27	0.09	3.67
Antipsychotic Agents	1.03	1.96	0.43	0.64
Miscellaneous Central Nervous System Agents	3.81	0.00	1.27	0.00
Miscellaneous Anticonvulsants	0.14	2.47	0.11	1.89
Nonsteroidal Anti-Inflammatory Agents	0.02	0.25	0.02	0.39
All Other CNS Drugs	0.19	1.49	0.14	1.08
<b>Total Filled CNS Days Per Pre-Teen</b>	<b>14.97</b>	<b>24.73</b>	<b>5.76</b>	<b>12.73</b>

Source: HCCL, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. All figures rounded.

Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization.

**Table A19: Detailed prescription utilization, teenagers, 2012**

	Boys		Girls	
	Brand RX	Generic RX	Brand RX	Generic RX
<b>Prescription filled days per child</b>				
Anti-Infective Agents	1.77	11.56	1.80	12.18
Cardiovascular Drugs	0.14	2.38	0.10	2.03
Central Nervous System Agents	11.01	27.74	6.64	28.05
Gastrointestinal Drugs	0.49	1.33	0.57	2.01
Hormones and Synthetic Substitutes	2.02	2.31	9.03	35.84
Other Therapeutic Classes	9.56	18.49	9.61	19.61
All Other Drugs	0.05	0.67	0.05	0.73
<b>Total Filled RX Days Per Teen</b>	<b>25.04</b>	<b>64.48</b>	<b>27.80</b>	<b>100.45</b>

Source: HCCL, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. All figures rounded.

Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization.

**Table A20: Detailed CNS prescription utilization, teenagers, 2012**

	Boys		Girls	
	Brand RX	Generic RX	Brand RX	Generic RX
<b>Central Nervous System Agents filled days per child</b>				
Amphetamines	4.73	4.31	2.53	2.68
Miscellaneous Anorexigenics, Respiratory and Cerebral Stimulants	1.87	5.71	0.83	2.80
Antidepressants	0.42	8.38	0.73	12.54
Antipsychotic Agents	1.44	2.00	1.14	1.03
Miscellaneous Central Nervous System Agents	2.07	0.00	0.80	0.00
Miscellaneous Anticonvulsants	0.17	3.36	0.23	3.80
Nonsteroidal Anti-Inflammatory Agents	0.06	1.18	0.10	1.90
All Other CNS Drugs	0.25	2.80	0.28	3.30
<b>Total Filled CNS Days Per Teen</b>	<b>11.01</b>	<b>27.74</b>	<b>6.64</b>	<b>28.05</b>

Source: HCCI, 2013.

Notes: All data weighted to represent the total population of insureds ages 0-18 and covered by ESI. All figures rounded.

Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts and low utilization.



**Table A21: Expenditures per child by gender, all children, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Per Capita by Gender</b>						
Boys	\$2,282	\$2,462	\$2,572	5.0%	7.9%	4.5%
Girls	\$2,050	\$2,211	\$2,296	4.1%	7.8%	3.8%
<b>Per Capita by Service Category for Boys</b>						
Inpatient	\$512	\$565	\$575	7.6%	10.4%	1.9%
Inpatient Subset <sup>1</sup>	\$506	\$562	\$572	7.3%	11.1%	1.8%
Outpatient	\$543	\$585	\$618	5.0%	7.6%	5.8%
Visits	\$356	\$382	\$404	5.3%	7.5%	5.7%
Other	\$188	\$202	\$214	4.4%	8.0%	5.9%
Professional Procedures	\$884	\$950	\$988	3.1%	7.4%	4.0%
Prescriptions <sup>2</sup>	\$344	\$363	\$391	6.0%	5.5%	7.7%
Brand	\$230	\$239	\$247	12.1%	3.8%	3.4%
Generics	\$114	\$124	\$144	-4.3%	9.0%	16.1%
<b>Per Capita by Service Category for Girls</b>						
Inpatient	\$470	\$522	\$520	7.6%	11.2%	-0.4%
Inpatient Subset <sup>1</sup>	\$465	\$520	\$518	7.3%	11.9%	-0.4%
Outpatient	\$489	\$526	\$566	4.6%	7.6%	7.5%
Visits	\$310	\$334	\$359	4.6%	7.5%	7.6%
Other	\$179	\$193	\$207	4.7%	7.8%	7.3%
Professional Procedures	\$839	\$900	\$931	2.1%	7.2%	3.5%
Prescriptions <sup>2</sup>	\$252	\$262	\$278	3.1%	4.2%	6.2%
Brand	\$155	\$160	\$165	7.7%	3.3%	3.2%
Generics	\$97	\$102	\$113	-3.3%	5.6%	10.7%

Source: HCCI, 2013.

Notes: All data to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012.

All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts.

**Table A22: Expenditures per infant or toddler by gender, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Per Capita by Gender, Babies</b>						
Boys	\$4,341	\$4,711	\$4,832	7.7%	8.5%	2.6%
Girls	\$3,667	\$3,938	\$4,042	6.4%	7.4%	2.7%
<b>Per Capita by Service Category for Boys</b>						
Inpatient	\$1,706	\$1,892	\$1,905	12.9%	10.9%	0.7%
Inpatient Subset <sup>1</sup>	\$1,699	\$1,888	\$1,901	13.0%	11.1%	0.7%
Outpatient	\$745	\$797	\$834	4.2%	6.9%	4.6%
Visits	\$515	\$547	\$575	4.9%	6.4%	5.0%
Other	\$231	\$250	\$260	2.6%	8.2%	3.8%
Professional Procedures	\$1,706	\$1,834	\$1,903	5.4%	7.5%	3.8%
Prescriptions <sup>2</sup>	\$184	\$188	\$189	-1.4%	2.3%	0.8%
Brand	\$87	\$91	\$93	1.5%	4.7%	1.3%
Generics	\$96	\$96	\$97	-3.6%	0.1%	0.2%
<b>Per Capita by Service Category for Girls</b>						
Inpatient	\$1,472	\$1,597	\$1,612	11.2%	8.4%	0.9%
Inpatient Subset <sup>1</sup>	\$1,465	\$1,594	\$1,609	11.1%	8.8%	0.9%
Outpatient	\$565	\$600	\$630	2.3%	6.1%	5.1%
Visits	\$372	\$396	\$419	2.5%	6.4%	5.9%
Other	\$193	\$204	\$212	1.8%	5.4%	3.7%
Professional Procedures	\$1,486	\$1,597	\$1,652	4.5%	7.5%	3.5%
Prescriptions <sup>2</sup>	\$144	\$144	\$148	-2.7%	0.4%	2.8%
Brand	\$69	\$69	\$73	-0.3%	-0.4%	6.6%
Generics	\$75	\$76	\$75	-4.7%	1.2%	-0.8%

Source: HCCI, 2013.

Notes: All data to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012.

All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts.

**Table A23: Expenditures per younger child by gender 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Per Capita by Gender, Younger Children</b>						
Boys	\$1,629	\$1,760	\$1,839	2.0%	8.0%	4.5%
Girls	\$1,334	\$1,438	\$1,458	2.7%	7.8%	1.4%
<b>Per Capita by Service Category for Boys</b>						
Inpatient	\$202	\$223	\$238	-1.9%	10.6%	6.8%
Inpatient Subset <sup>1</sup>	\$199	\$222	\$237	-1.7%	11.3%	6.9%
Outpatient	\$458	\$494	\$522	4.0%	7.9%	5.7%
Visits	\$303	\$329	\$347	4.5%	8.4%	5.4%
Other	\$154	\$165	\$176	2.9%	7.0%	6.3%
Professional Procedures	\$717	\$777	\$795	2.5%	8.4%	2.4%
Prescriptions <sup>2</sup>	\$252	\$266	\$283	0.2%	5.4%	6.5%
Brand	\$162	\$168	\$173	7.1%	3.5%	3.1%
Generics	\$90	\$98	\$110	-9.9%	8.7%	12.2%
<b>Per Capita by Service Category for Girls</b>						
Inpatient	\$183	\$208	\$187	6.0%	13.3%	-9.9%
Inpatient Subset <sup>1</sup>	\$182	\$207	\$186	5.9%	13.7%	-9.9%
Outpatient	\$371	\$398	\$421	4.3%	7.2%	5.8%
Visits	\$245	\$265	\$283	4.3%	8.1%	6.7%
Other	\$126	\$133	\$139	4.3%	5.6%	4.2%
Professional Procedures	\$607	\$654	\$664	1.6%	7.7%	1.4%
Prescriptions <sup>2</sup>	\$172	\$178	\$186	-0.1%	3.8%	4.3%
Brand	\$101	\$103	\$106	5.3%	2.2%	2.6%
Generics	\$71	\$75	\$80	-6.7%	6.0%	6.5%

Source: HCCI, 2013.

Notes: All data to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012.

All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts.

**Table A24: Expenditures per pre-teen by gender, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Per Capita by Gender, Pre-Teens</b>						
Boys	\$1,652	\$1,817	\$1,909	2.8%	9.9%	5.1%
Girls	\$1,411	\$1,561	\$1,637	3.2%	10.6%	4.8%
<b>Per Capita by Service Category for Boys</b>						
Inpatient	\$216	\$253	\$252	3.8%	17.0%	-0.2%
Inpatient Subset <sup>1</sup>	\$213	\$251	\$250	3.5%	17.6%	-0.4%
Outpatient	\$408	\$446	\$473	2.9%	9.4%	6.0%
Visits	\$255	\$278	\$297	3.0%	9.3%	6.5%
Other	\$153	\$168	\$177	2.7%	9.6%	5.2%
Professional Procedures	\$657	\$709	\$744	0.9%	8.0%	4.8%
Prescriptions <sup>2</sup>	\$372	\$408	\$440	5.7%	9.8%	7.7%
Brand	\$270	\$283	\$288	13.5%	4.8%	1.7%
Generics	\$101	\$125	\$151	-10.4%	23.1%	21.2%
<b>Per Capita by Service Category for Girls</b>						
Inpatient	\$200	\$248	\$246	3.1%	24.0%	-0.9%
Inpatient Subset <sup>1</sup>	\$199	\$247	\$245	2.9%	24.4%	-1.0%
Outpatient	\$361	\$394	\$425	5.6%	9.1%	7.9%
Visits	\$214	\$235	\$253	5.0%	9.8%	7.6%
Other	\$147	\$159	\$172	6.4%	8.2%	8.3%
Professional Procedures	\$609	\$662	\$689	1.1%	8.7%	4.1%
Prescriptions <sup>2</sup>	\$240	\$256	\$276	5.1%	6.6%	7.8%
Brand	\$164	\$171	\$178	11.2%	4.3%	4.1%
Generics	\$76	\$85	\$98	-5.7%	11.5%	15.2%

Source: HCCI, 2013.

Notes: All data to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts.

**Table A25: Expenditures per teenager by gender, 2009–2012**

	2010	2011	2012	Percent Change 2009/2010	Percent Change 2010/2011	Percent Change 2011/2012
<b>Per Capita by Gender, Teens</b>						
Boys	\$2,274	\$2,414	\$2,568	6.0%	6.1%	6.4%
Girls	\$2,353	\$2,524	\$2,668	3.4%	7.3%	5.7%
<b>Per Capita by Service Category for Boys</b>						
Inpatient	\$379	\$405	\$423	3.2%	6.9%	4.3%
Inpatient Subset <sup>1</sup>	\$368	\$401	\$418	1.3%	8.9%	4.2%
Outpatient	\$631	\$676	\$721	7.8%	7.3%	6.5%
Visits	\$407	\$435	\$461	7.9%	7.0%	6.0%
Other	\$224	\$242	\$260	7.8%	7.8%	7.5%
Professional Procedures	\$776	\$827	\$869	3.1%	6.6%	5.0%
Prescriptions <sup>2</sup>	\$489	\$505	\$556	10.9%	3.3%	10.1%
Brand	\$333	\$343	\$361	15.1%	3.2%	5.3%
Generics	\$156	\$162	\$195	3.2%	3.5%	20.1%
<b>Per Capita by Service Category for Girls</b>						
Inpatient	\$398	\$445	\$451	4.2%	11.7%	1.3%
Inpatient Subset <sup>1</sup>	\$388	\$441	\$448	2.9%	13.8%	1.5%
Outpatient	\$670	\$725	\$792	5.6%	8.1%	9.2%
Visits	\$424	\$453	\$494	5.7%	7.0%	8.9%
Other	\$247	\$272	\$298	5.3%	10.1%	9.7%
Professional Procedures	\$888	\$944	\$987	1.0%	6.3%	4.6%
Prescriptions <sup>2</sup>	\$396	\$411	\$438	4.6%	3.7%	6.7%
Brand	\$243	\$251	\$257	7.9%	3.6%	2.4%
Generics	\$153	\$159	\$181	0.0%	3.8%	13.5%

Source: HCCL, 2013.

Notes: All data to represent the total population of insureds ages 0-18 and covered by ESI. Actuarial completion was performed on data from 2011 and 2012. All per capita dollars calculated from allowed costs. All figures rounded.

1. Skilled nursing facility (SNF), hospice, and ungroupable claims were excluded from analysis of inpatient expenditure trends due to the lack of information about the intensity and intensity-adjusted prices of those services at the time of analysis.
2. Prescriptions uncategorizable as brand or generic were also analyzed, but they are not included in the tables due to very low dollar amounts.

## **Key Definitions and Acronyms**

### **Definitions**

Children: Individuals insured by employer sponsored health insurance between the ages of 0 and 18.

Infants and toddlers: Children ages 0 through 3.

Younger children: Children ages 4 through 8.

Pre-teens: Children ages 9 through 13.

Teenagers: Children ages 14 through 18.

### **Acronyms**

Central Nervous System (CNS)

Mental Health and Substance Use (MHSU)

Primary Care Provider (PCP)

Skilled Nursing Facility (SNF)