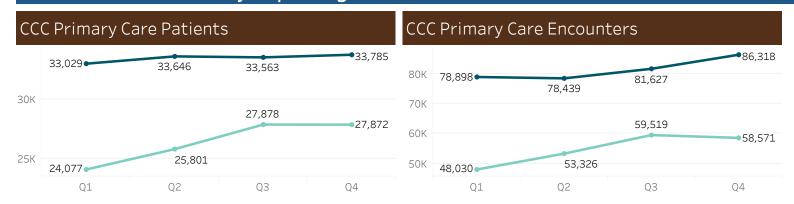
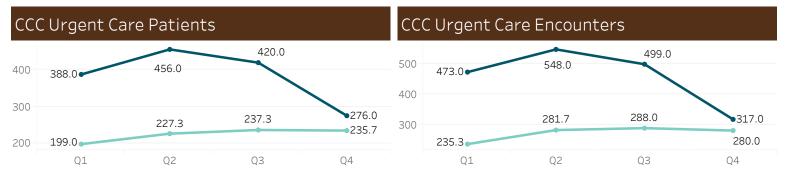
FY2018 CCC Preliminary Reporting



*Primary care summary: The preliminary patient count for Q4, FY 2018, exceeded the three-year average by 5,913. Encounters for Q4, FY 2018 exceeded the three-year average by 27,747. FY 2018, particularly the most recent quarter, may represent an undercount due to billing cycle lags.





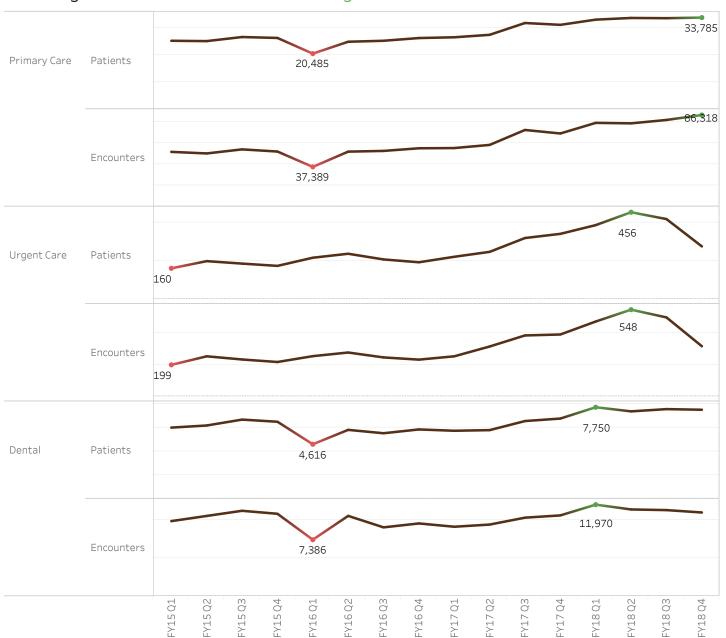
**Urgent care summary: The preliminary patient count for Q4, FY 2018 exceeded the three-year average by 40.3. Encounters for Q3, FY 2018 exceeded the three-year average by 37. Q4, FY 2018 represents an undercount of urgent care patients and encounters due to a typical 95-day billing cycle lag as well as the recent Third Party Administrator (TPA) transition.



***Primary care dental summary: The preliminary patient count for Q4, FY 2018 exceeded the three-year average by 1,143. Encounters for Q4, FY 2018 exceeded the three-year average by 662. FY 2018, particularly the most recent quarter, may represent an undercount due to billing cycle lags.

Community Care Collaborative, Longitudinal Trends

CCC Longitudinal Trends with Historical Highs and Lows



- *Primary care notes: When multiple services are provided on the same day, each service is counted separately. Additionally, due to a change in billing practice, labs and radiological services were reported as separate encounters starting in Q1 FY18. FY 2018, particularly the most recent quarter, may represent an undercount due to billing cycle lags.
- **Urgent care notes: Includes the following providers: FastMed, Nextcare, RediClinic and Benchmark. Q4 FY18 represents an undercount of urgent care patients and encounters due to a typical 95-day billing cycle lag as well as the recent Third Party Administrator (TPA) transition from ABS to Mediview.
- ***Dental care notes: Dental encounters were identified by billing procedure codes that indicated a dental intervention or by place of service that indicated a dental office. Specialty dental is not included. FY 2018, particularly the most recent quarter, may represent an undercount due to billing cycle lags.