

Douglas County School District Health Advisory Committee

District Office
1638 Mono Avenue
Minden, NV 89423
Tuesday, May 27, 2025
4:30 PM

Agenda

1. Call to Order

A. Roll Call of Committee Members

B. Adoption of Agenda as Submitted (For Possible Action)

Note: The Board reserves the right to (1) take items in a different order, (2) combine two or more Agenda items for consideration, and (3) to remove an item from the Agenda or delay discussion relating to an item on the Agenda at any time, in or to accomplish the business on the Agenda in the most efficient manner.

2. Public Comment #1

Public comment will be taken during this agenda item regarding any item appearing on the agenda. A sign-up sheet is provided and individuals may address the committee by indicating their desire to speak and the topic about which they will speak. The committee reserves the right to limit the amount of time that will be allowed for each individual to speak. (The time allotted is nontransferable for each speaker.) The committee is precluded from acting on items raised during Public Comment that are not already on the agenda. No action may be taken on a matter discussed under this item until the matter is included on an agenda as an item on which action may be taken. Public Comment #2 will provide an opportunity for public comment on any matter within the Committee's jurisdiction, control, or advisory authority.

3. Committee Members' Comment

Comments from committee members are invited at this time for any item not specifically addressed elsewhere in the agenda. The intent of this standing item is to allow committee members to provide feedback to the committee as a whole regarding membership questions and comments. Committee members should limit the amount of time and be respectful of time constraints and not be repetitive of other committee members' comments.

4. Approval of Minutes of the March 25, 2025 Meeting (For Possible Action) 3

Attached are the minutes of the March 25, 2025 Health Advisory Committee Meeting for review and approval.

RECOMMENDATION: Approve the Minutes of the Health Advisory Committee Meeting dated March 25, 2025.

5. Review of Claims (Information and Discussion) 5

Lloyd Barnes, Nate Kerr

A representative from DCSD's broker, LP Insurance Services, Inc., will review claims expenses for Douglas County School District's self-funded health insurance.

6. Customer Service Review (Information and Discussion) 13

Sam Bradley

A representative from Douglas County School District's Third Party Administrator, Hometown Health, will review customer service statistics.

7. Self-Insurance Fund Projected Financials (Information and Discussion)

17

The Executive Director of Human Resources, will provide an update on the projected financials of the district's self-insured health insurance fund.

8. Correspondence (Information and Discussion)

Committee members will discuss or review any correspondence received pertaining to the Advisory Health Insurance Committee.

9. Future Agenda Items (Discussion and for Possible Action)

Committee members will discuss or propose upcoming items for future agenda items in addition to setting the next meeting date(s) and times.

10. Public Comment #2

Public comment will be taken during this agenda item on any matter within the committee's jurisdiction, control, or advisory authority. No action may be taken on a matter discussed under this item until the matter is included on an agenda as an item on which action may be taken. A sign-up sheet is provided and individuals may address the committee by indicating their desire to speak and the topic about which they will speak. The committee reserves the right to limit the amount of time that will be allowed for each individual to speak. (The time allotted is nontransferable for each speaker.) The committee is precluded from acting on items raised during Public Comment that are not already on the agenda. No action may be taken on a matter discussed under this item until the matter is included on an agenda as an item on which action may be taken.

11. Adjournment

(*) Times are estimated. Items on the Agenda may be taken out of order. The Health Advisory Committee may combine two or more agenda items for consideration, and may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. Generally speaking, the item will be heard no earlier than the time indicated.

If copies of the complete agenda (and supporting materials) are desired in advance, they may be obtained at the District Office on the Friday or Monday preceding a regular Tuesday meeting of the Committee. Please contact Leeann Caires at 775-782-5134 or lcaires@dcsd.k12.nv.us.

Notice to Individuals with Disabilities: Members of the public who require special assistance or accommodations are asked to notify the District Administration at 1638 Mono Avenue, Minden, Nevada, 89423, or by calling 782-5134, so that such notification is received at least twenty-four (24) hours prior to the meeting. In conformance with the Open Meeting Law, it is hereby noted that the agenda for the meeting of the Douglas County School District Health Advisory Committee has been posted at the following locations:

Douglas County School District, Minden, NV

District website: www.dcsd.k12.nv.us

State of Nevada website: <https://notice.nv.gov>

**DRAFT - Minutes of the Health Advisory
Committee Meeting – March 25, 2025**

Committee Members Present

Jeannie Dwyer, Executive Director of HR
Darcy McInnis, DCPEA
Lin Falkner, DCPEA
Kerry Stack, DCPEA
Susan McNeall, DCAA
Elizabeth Martin, DCSSO
Jay Jackson, Chapter #6 Bus Drivers Association (arrived at 4:48 p.m.)

Absent

Lloyd Barnes, LP Insurance (via Google Meets), Sam Bradley, Hometown Health (via Google Meets), and Leeann Caires, DCSD Human Resources.

Meeting minutes are created and provided in accordance with NRS 241.035. They are not a word-for-word transcript of the meeting. **Recording started late due to recorder malfunction**

1. Call to Order

The meeting was called to order by Mrs. Dwyer at 4:34 p.m. Mrs. Stack made a motion to adopt a flexible agenda, Mrs. Falkner seconded the motion. Motion passed 6 - 0

2. Public Comment #1

No public comment.

3. Committee Members' Comment

Ms. Martin asked about physicians charging patients for surgery/procedures prior to the procedure actually being performed. Several committee members commented that this practice seems to be more common. This practice is allowable and is attributable to doctor's offices, not Hometown Health. Concerns about affordability were expressed. Members should be reimbursed if they have met the deductible and should not be charged at all if their out-of-pocket maximum has been met. Members can deny this request but the doctor can decline service (not in an emergency room though).

Mrs. Dwyer thanked Sam Bradley and Madison Babcock for attending the School District forum day.

4. Approval of Minutes of the February 25, 2025 meeting (For Possible Action)

Ms. McNeall made a motion to approve the minutes for the February 25, 2025 meeting, Ms. Martin seconded the motion. Motion passed 6 - 0

5. Review of Claims (Information and Discussion)

Mr. Barnes reported on the paid claims through February 2025.

Exhibit 1 – Employee and dependent enrollment were still down slightly in February 2025. Total employee claims (Line 10) for February were \$297,150. Cost per employee (Line 11) was \$393. Total dependent claims (Line 18) for February were \$281,012. Cost per dependent unit (Line 19) was \$1,463 in February. Total claims (line 27) for the month of February were \$578,162. Average composite cost per employee (Line 28) was \$764. Claims costs for 2025 are down compared to 2024 (so far).

Exhibit 3 – Total Plan Costs - paid claims plus fixed costs (fees such as operating costs, admin fees for Hometown Health, consulting fees for LP Insurance, pharmacy rebates, Stop-Loss reimbursements, etc.).

Net plan costs (Line 32) were \$679,102 in February. Average monthly composite net plan cost per employee per month was \$763 in February (Line 34).

Exhibit 5 – Large claims report. Large claim tracking begins when a claim reaches approximately 50% of Stop-Loss deductible (\$275,000). There were no large claims reported in February.

Exhibit 6 - Incurred but Not Reported (IBNR) is the outstanding estimated liability that DCSD carries on an on-going basis. February 2025 estimated IBNR is \$1,030,672.

6. Customer Service Review (Information and Discussion)

Ms. Bradley from Hometown Health reported on customer service from February 2025. Customer Service Call Volume report data shows approximately 72 member calls in February (70 were answered). For February, the Average Seconds to Answer (ASA) was 13 seconds (performance guarantee is 75 seconds). February 2025 Abandonment rate was 3% (performance guarantee is 10%). The claims report shows 1,115 claims received during the month of February. 1,284 claims were paid in February. The number of claims paid within 30 days was at 97% (performance guarantee is 95%)

7. Self-Insurance Fund Projected Financials (Information and Discussion)

For the month of February, paid claims were \$430,184 and admin expenses were \$101,344. Total claims for fiscal year 24-25 are \$6,447,922. Total operating revenues for the fiscal year 24-25 are \$6,000,857. Estimated cash flow was positive \$210,533 in February.

Ms. McInnis asked a question about the revenue and expense report – why are prescription rebates in revenue? Quarterly rebates are revenue and not an expense. However, Stop-Loss is included in the expense category (as a subtraction). The committee is unsure why Sue provides the data for Stop-Loss in the expense category.

8. Correspondence (Information and Discussion)

No correspondence.

9. Future Agenda Items (For Possible Action)

- 1 – Legislature updates provided by LP Insurance (add to August agenda).
- 2 – Review Dates for 2025-26 HAC Meetings (keep current on last Tuesday of the month? Or move to 2nd Tuesday of the month? Other options?).

**NOTE: HAC meeting dates for 2024-25: 4/29/2025, 5/27/2025.

10. Public Comment #2

Sam Bradley commented that, during the forum, staff members asked about changes to DCSD's plan. She encouraged those staff members to attend Health Advisory Committee meetings.

11. Adjournment

The meeting was adjourned at 4:58 p.m. by Mrs. Dwyer

Submitted by,

Leeann Caires,
Benefits & Risk Management Coordinator
Douglas County School District
(775) 782-7177



Douglas County School District

April-25

Group Health Plan Cost Analysis Report

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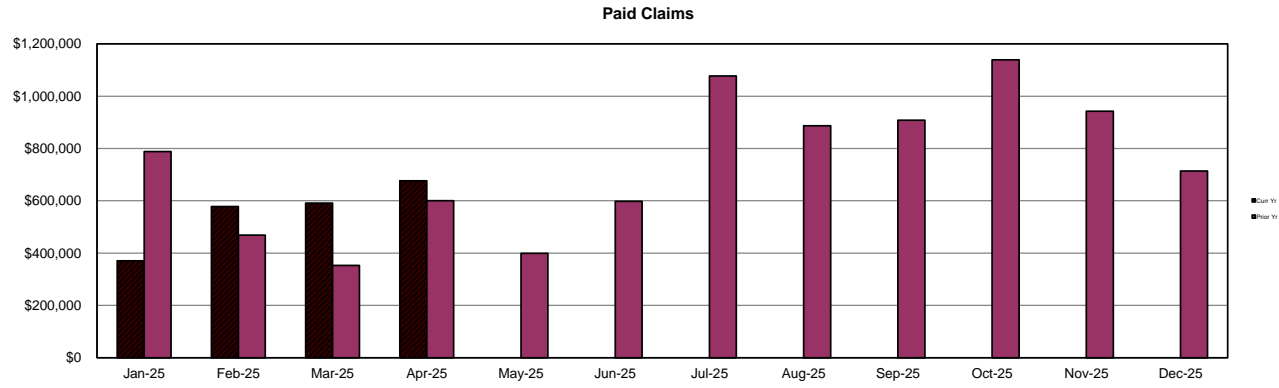
Exhibits	Description
1 & 2	Paid Claims
3 & 4	Total Plan Costs
5	Large Claim Data
6	Incurred But Not Reported Liability (IBNR)-Current
7	Incurred But Not Reported Liability (IBNR)-Previous Month



**Douglas County School District
PAID CLAIMS**

Line #		Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Totals	Current Year Mo. Average	Prior Year Mo. Average	% Difference
ENROLLMENT																	
1	Employees	748	756	757	757	0	0	0	0	0	0	0	0	3,018	755	771	-2.13%
2	Dependent Units	191	192	190	189	0	0	0	0	0	0	0	0	762	191	192	-1.00%
3	Total # of Dependents	354	352	352	350	0	0	0	0	0	0	0	0	1,408	352	362	-2.72%
EMPLOYEE CLAIMS																	
4	Medical	\$315,847	\$191,204	\$260,127	\$333,719	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,100,897	\$275,224	\$411,501	-33.12%
5	Less Stop Loss Reimbursement	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$7,121)	-100.00%
6	Net Medical Claims	\$315,847	\$191,204	\$260,127	\$333,719	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,100,897	\$275,224	\$404,380	-31.94%
7	Prescription	\$81,434	\$92,214	\$78,421	\$86,892	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$338,961	\$84,740	\$124,554	-31.97%
8	Dental	\$19,644	\$9,765	\$58,705	\$31,453	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$119,567	\$29,892	\$27,984	6.82%
9	Vision	\$3,112	\$3,967	\$3,538	\$4,041	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$14,659	\$3,665	\$3,980	-7.91%
10	Total Employee	\$420,037	\$297,150	\$400,791	\$456,105	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,574,083	\$393,521	\$560,898	-29.84%
11	<i>Cost Per Employee</i>	<i>\$561.55</i>	<i>\$393.06</i>	<i>\$529.45</i>	<i>\$602.52</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$2,086.26</i>	<i>\$521.57</i>	<i>\$727.57</i>	<i>-28.31%</i>
DEPENDENT CLAIMS																	
12	Medical	\$52,049	\$207,620	\$108,955	\$164,902	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$533,526	\$133,381	\$150,120	-11.15%
13	Less Stop Loss Reimbursement	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$162,161)	(\$40,540)	\$0	0.00%
14	Net Medical Claims	(\$108,003)	\$205,512	\$108,955	\$164,902	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$371,365	\$92,841	\$150,120	-38.16%
15	Prescription	\$47,664	\$60,559	\$49,132	\$44,964	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$202,320	\$50,580	\$15,553	225.21%
16	Dental	\$9,851	\$14,406	\$31,004	\$9,694	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$64,954	\$16,239	\$12,291	32.12%
17	Vision	\$1,085	\$534	\$1,360	\$844	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$3,824	\$956	\$888	7.69%
18	Total Dependent	(\$49,404)	\$281,012	\$190,451	\$220,404	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$642,462	\$160,616	\$178,851	-10.20%
19	<i>Cost Per Dependent Unit</i>	<i>(\$258.66)</i>	<i>\$1,463.60</i>	<i>\$1,002.37</i>	<i>\$1,166.16</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$3,372.51</i>	<i>\$843.13</i>	<i>\$929.50</i>	<i>-9.29%</i>
20	<i>Cost Per Dependent</i>	<i>(\$139.56)</i>	<i>\$798.33</i>	<i>\$541.05</i>	<i>\$629.73</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$1,825.18</i>	<i>\$456.29</i>	<i>\$494.29</i>	<i>-7.69%</i>
EMPLOYEE + DEPENDENT																	
21	Medical	\$367,896	\$398,825	\$369,082	\$498,621	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,634,423	\$408,606	\$561,621	-27.25%
22	Less Stop Loss Reimbursement	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$162,161)	(\$40,540)	(\$7,121)	469.30%
23	Net Medical Claims	\$207,843	\$396,716	\$369,082	\$498,621	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,472,262	\$368,066	\$554,500	-33.62%
24	Prescription	\$129,098	\$152,773	\$127,553	\$131,857	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$541,280	\$135,320	\$140,107	-3.42%
25	Dental	\$29,495	\$24,171	\$89,709	\$41,147	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$184,521	\$46,130	\$40,276	14.54%
26	Vision	\$4,197	\$4,501	\$4,898	\$4,885	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$18,482	\$4,621	\$4,867	-5.07%
27	Total Claims	\$370,633	\$578,162	\$591,242	\$676,509	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,216,546	\$554,136	\$739,749	-25.09%
28	<i>Composite Cost Per Employee</i>	<i>\$495.50</i>	<i>\$764.76</i>	<i>\$781.03</i>	<i>\$893.67</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$2,937.77</i>	<i>\$734.44</i>	<i>\$959.57</i>	<i>-23.46%</i>
29	Composite Cost Per Member	\$336.33	\$521.81	\$533.13	\$611.12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,003.20	\$500.80	\$653.06	-23.31%

**Douglas County School District
PAID CLAIMS**

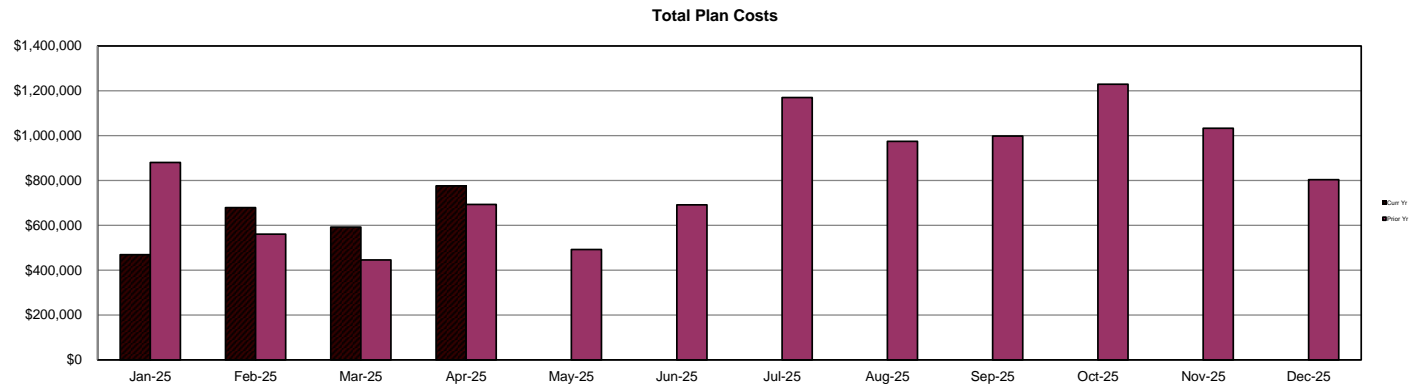


**Douglas County School District
TOTAL PLAN COSTS**

Line #	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Totals	Current Year Mo. Average	Prior Year Mo. Average	% Difference
EMPLOYEE																
1	TPA / UTIL REVIEW / COBRA / TELE DOC	\$29.02	\$29.02	\$29.02	\$29.02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$87,582	\$21,896	\$21,509	1.80%
2	Specific Stop Loss	\$72.11	\$72.11	\$72.11	\$72.11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$217,628	\$54,407	\$52,253	4.12%
3	PPO Networks (Dental)	\$0.70	\$0.70	\$0.70	\$0.70	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,113	\$528	\$540	-2.13%
4	VSP	\$1.68	\$1.68	\$1.68	\$1.68	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,070	\$1,268	\$1,295	-2.13%
5	Consulting Fee (Estimated)	\$2.01	\$1.98	\$1.98	\$1.98	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6,000	\$1,500	\$1,500	0.00%
6	Total Fixed	\$105.52	\$105.49	\$105.49	\$105.49	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$318,393	\$79,598	\$77,096	3.25%
7	Exposures	748	756	757	757	0	0	0	0	0	0	0	3,018	755	771	-2.13%
8	Employee Fixed Costs	\$78,925	\$79,754	\$79,857	\$79,857	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$318,393	\$79,598	\$77,096	3.25%
9	Total Gross Claims	\$420,037	\$297,150	\$400,791	\$456,105	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,574,083	\$393,521	\$568,019	-30.72%
10	Gross Plan Costs	\$498,963	\$376,904	\$480,648	\$535,962	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,892,477	\$473,119	\$645,115	-26.66%
11	Stop-Loss Reimbursements	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$7,121)	-100.00%
12	Net Plan Costs	\$498,963	\$376,904	\$480,648	\$535,962	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,892,477	\$473,119	\$637,994	-25.84%
13	Per Employee Gross Plan Costs	\$667.06	\$498.55	\$634.94	\$708.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,508.25	\$627.06	\$836.82	-25.07%
14	Per Employee Net Plan Costs	\$667.06	\$498.55	\$634.94	\$708.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,508.25	\$627.06	\$827.58	-24.23%
DEPENDENT																
15	Specific Stop Loss (+ 1 Dep.)	\$78.76	\$78.76	\$78.76	\$78.76	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$29,141	\$7,285	\$6,997	4.12%
16	Specific Stop Loss (+ Fam.)	\$78.76	\$78.76	\$78.76	\$78.76	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$30,874	\$7,718	\$7,250	6.47%
17	Dependent Units (+ 1 Dep.)	93	93	93	91	0	0	0	0	0	0	0	370	93	95	-2.12%
18	Dependent Units (Fam.)	98	99	97	98	0	0	0	0	0	0	0	392	98	98	0.09%
19	Dependent Fixed Costs	\$15,043	\$15,122	\$14,964	\$14,886	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$60,015	\$15,004	\$14,247	5.32%
20	Total Gross Claims	\$110,649	\$283,120	\$190,451	\$220,404	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$804,623	\$201,156	\$178,851	12.47%
21	Gross Plan Costs	\$125,692	\$298,242	\$205,416	\$235,289	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$864,638	\$216,160	\$193,098	11.94%
22	Stop-Loss Reimbursements	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$162,161)	(\$40,540)	\$0	0.00%
23	Net Plan Costs	(\$34,361)	\$296,133	\$205,416	\$235,289	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$702,477	\$175,619	\$193,098	-9.05%
24	Per Dependent Unit Gross Plan Costs	\$658.07	\$1,553.34	\$1,081.13	\$1,244.92	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,537.47	\$1,134.37	\$1,003.54	13.04%
25	Per Dependent Unit Net Plan Costs	(\$179.90)	\$1,542.36	\$1,081.13	\$1,244.92	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,688.51	\$922.13	\$1,003.54	-8.11%
26	Per Dependent Net Plan Costs	(\$97.06)	\$841.29	\$583.57	\$672.26	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,000.05	\$500.01	\$530.13	-5.68%
EMPLOYEE + DEPENDENT																
27	*Fixed Costs	\$98,579	\$100,940	\$98,319	\$99,304	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$397,142	\$99,286	\$91,343	8.70%
28	Total Claims	\$530,686	\$580,270	\$591,242	\$676,509	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,378,707	\$594,677	\$746,870	-20.38%
29	Gross Plan Costs	\$629,265	\$681,210	\$689,561	\$775,813	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,775,849	\$693,962	\$838,213	-17.21%
30	Stop-Loss Reimbursements	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$162,161)	(\$40,540)	(\$7,121)	469.30%
31	Pharmacy Rebates	\$0	\$0	(\$97,430)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$97,430)	(\$24,357)	(\$38,008)	-35.92%
32	Net Plan Costs	\$469,213	\$679,102	\$592,131	\$775,813	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,516,258	\$629,065	\$793,084	-20.68%
33	Composite Gross Plan Cost Per Employee	\$841.26	\$901.07	\$910.91	\$1,024.85	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,679.06	\$919.76	\$1,087.29	-15.41%
34	Composite Net Plan Cost Per Employee	\$627.29	\$898.28	\$782.21	\$1,024.85	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,335.00	\$833.75	\$1,028.75	-18.96%
35	Composite Net Plan Cost Per Member	\$425.78	\$612.91	\$533.93	\$700.82	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,254.04	\$563.51	\$733.69	-23.20%

*MAXOR Admin Fee Added to Employee & Dependent Fixed Costs

Douglas County School District
TOTAL PLAN COSTS



Douglas County School District

MEDICAL CLAIMS ONLY IN EXCESS OF \$137,500 (Accumulative Paid Amounts Year to Date)

CLAIMANT		Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25
Claim #	<u>Total Amount of Claim Year to Date</u>												
1	Dependent	\$0	\$0	\$0	\$155,339								
2		\$0	\$0	\$0	\$0								
3		\$0	\$0	\$0	\$0								
4		\$0	\$0	\$0	\$0								
5		\$0	\$0	\$0	\$0								
6		\$0	\$0	\$0	\$0								
7		\$0	\$0	\$0	\$0								
8		\$0	\$0	\$0	\$0								
9		\$0	\$0	\$0	\$0								
10		\$0	\$0	\$0	\$0								
Total		\$0	\$0	\$0	\$155,339	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Increase Over Previous Month:			\$0	\$0	\$155,339	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Claim #	<u>Amount Over Specific Stop-Loss (\$275,000)</u>												
1	Dependent	\$0	\$0	\$0	\$0								
2		\$0	\$0	\$0	\$0								
3		\$0	\$0	\$0	\$0								
4		\$0	\$0	\$0	\$0								
5		\$0	\$0	\$0	\$0								
6		\$0	\$0	\$0	\$0								
7		\$0	\$0	\$0	\$0								
8		\$0	\$0	\$0	\$0								
9		\$0	\$0	\$0	\$0								
10		\$0	\$0	\$0	\$0								
Total		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Increase Over Previous Month:			\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	

Douglas County School District

Hometown Health self-funded health plan reserve as of April 30, 2025

Based on claims from May 01, 2024 through April 30, 2025

FORMULA

Estimated IBNR = (Most recent 12 months of Actual Net Paid Claims) x (Lag Days/365)
 x (Current Employee Count / Average 12 month Lagged Employee Count)

Net Paid Claims from May 01, 2024 through April 30, 2025

Medical	\$ 6,563,098
Dental	\$ 569,764
Prescription Drugs	\$ 1,695,031
Vision	<u>\$ 54,494</u>
Total Claims	\$ 8,882,386

Average Estimated Lag Days

Medical	55 Days
Dental	30 Days
Rx	11 Days
Vision	22 Days

Number of employees covered:

Current enrollment all Medical Plans = 757 : 60 day lagged enrollment = 766

Current enrollment all Dental Plans = 757 : 60 day lagged enrollment = 766

Current enrollment all Rx Plans = 757 : 60 day lagged enrollment = 766

Current enrollment all Vision Plans = 757 : 60 day lagged enrollment = 766

Estimated IBNR Calculation

Medical	\$6,563,098 X (55/365) X (757/766) =	\$ 977,766	14.9%
+			
Dental	\$569,764 X (30/365) X (757/766) =	\$ 46,300	8.1%
+			
Rx	\$1,695,031 X (11/365) X (757/766) =	\$ 50,505	3.0%
+			
Vision	\$54,494 X (22/365) X (757/766) =	<u>\$ 3,247</u>	6.0%
=			
Total estimated IBNR as of April 30, 2025 =		\$ 1,077,818	12.1%

Note: Above reserve estimate excludes experience period claim(s) which have exceeded specific stop specific stop loss level. Any large ongoing claims or claim anomalies at termination may cause great fluctuations in actual runout numbers.

These reserve estimates are calculated based on claims for the period stated above.

Douglas County School District

Hometown Health self-funded health plan reserve as of March 31, 2025

Based on claims from April 01, 2024 through March 31, 2025

FORMULA

Estimated IBNR = (Most recent 12 months of Actual Net Paid Claims) x (Lag Days/365)
 x (Current Employee Count / Average 12 month Lagged Employee Count)

Net Paid Claims from April 01, 2024 through March 31, 2025

Medical	\$ 6,518,274
Dental	\$ 543,389
Prescription Drugs	\$ 1,687,267
Vision	<u>\$ 57,169</u>
Total Claims	\$ 8,806,099

Average Estimated Lag Days

Medical	55 Days
Dental	30 Days
Rx	11 Days
Vision	22 Days

Number of employees covered:

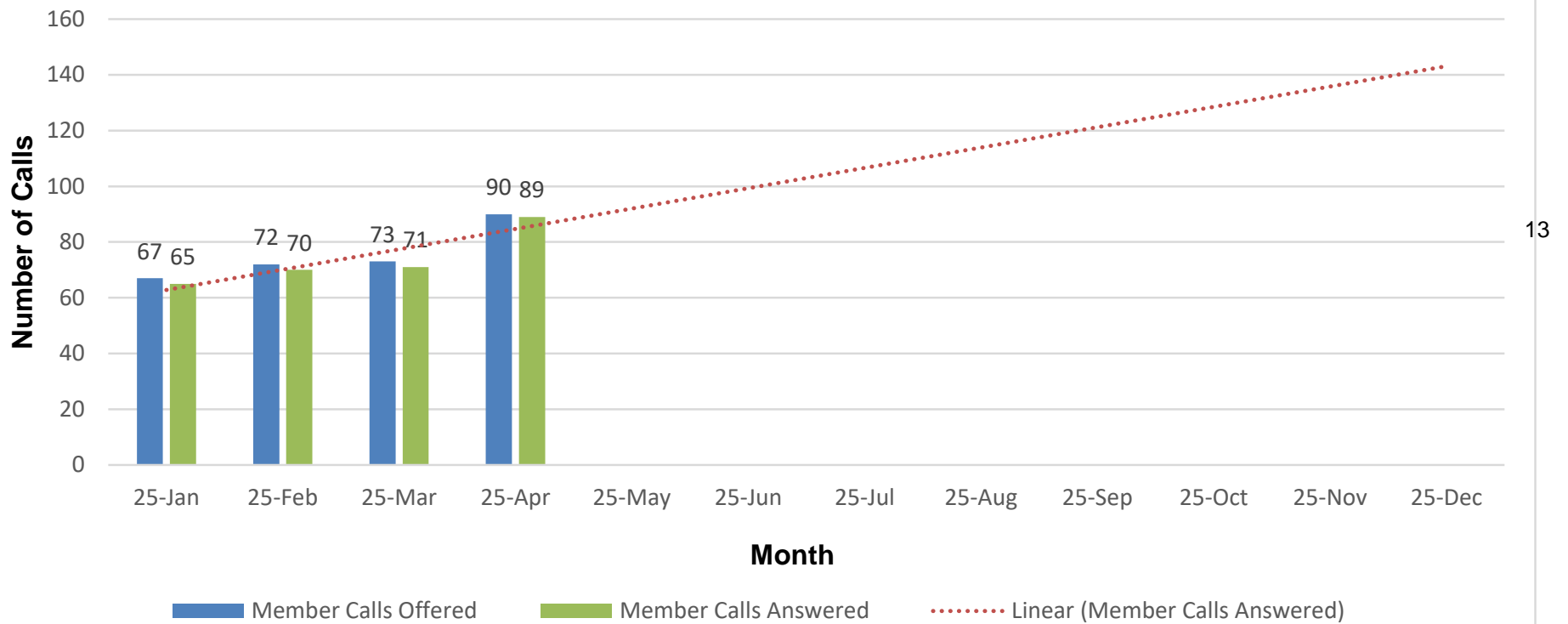
Current enrollment all Medical Plans = 757 : 60 day lagged enrollment = 768
 Current enrollment all Dental Plans = 757 : 60 day lagged enrollment = 768
 Current enrollment all Rx Plans = 757 : 60 day lagged enrollment = 768
 Current enrollment all Vision Plans = 757 : 60 day lagged enrollment = 768

Estimated IBNR Calculation

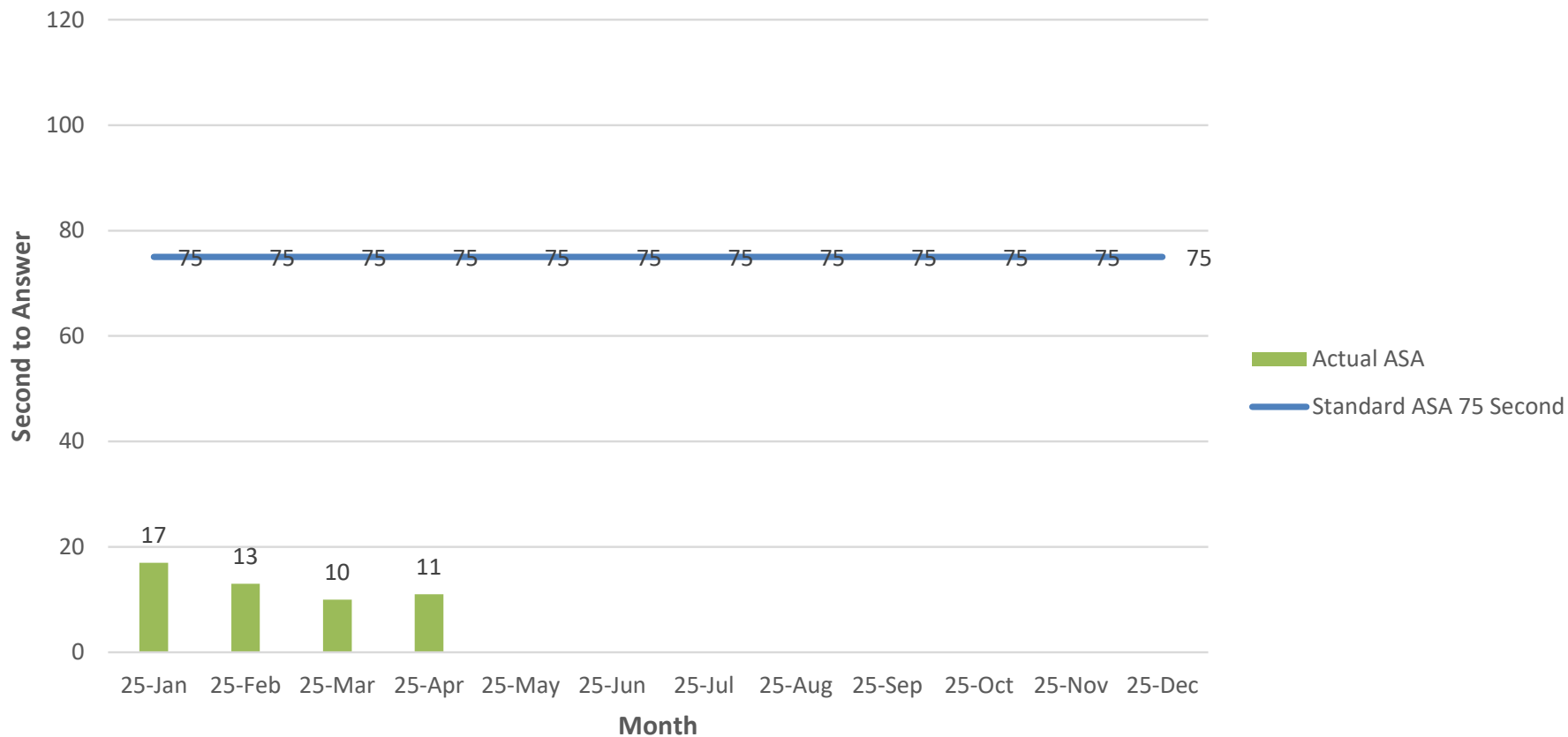
Medical	\$6,518,274 X (55/365) X (757/768) =	\$ 968,243	14.9%
+			
Dental	\$543,389 X (30/365) X (757/768) =	\$ 44,027	8.1%
+			
Rx	\$1,687,267 X (11/365) X (757/768) =	\$ 50,126	3.0%
+			
Vision	\$57,169 X (22/365) X (757/768) =	<u>\$ 3,397</u>	5.9%
=			
Total estimated IBNR as of March 31, 2025 =		\$ 1,065,793	12.1%

Note: Above reserve estimate excludes experience period claim(s) which have exceeded specific stop specific stop loss level. Any large ongoing claims or claim anomalies at termination may cause great fluctuations in actual runout numbers.
 These reserve estimates are calculated based on claims for the period stated above.

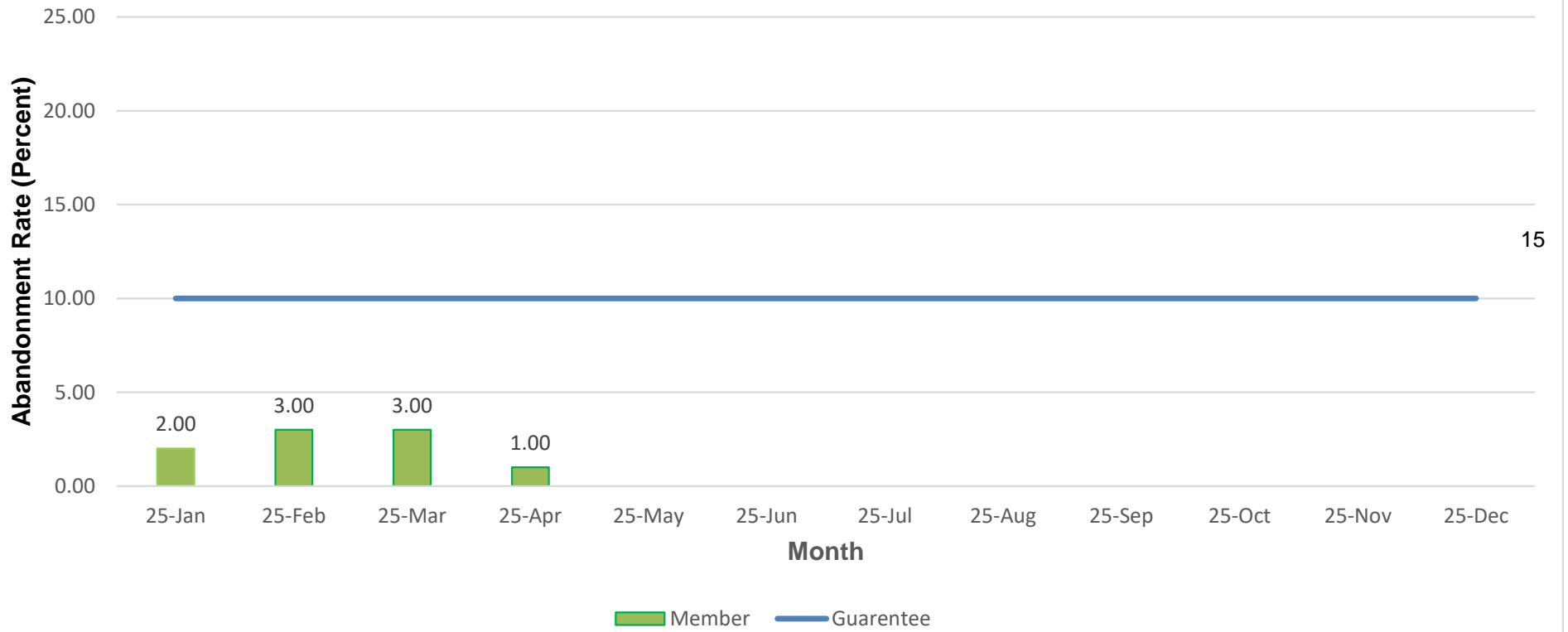
Hometown Health - DCSD Dedicated Phone Number Customer Services Department Call Volume



Hometown Health - DCSD Dedicated Phone Number Customer Services Department Average Seconds to Answer



Hometown Health - DCSD Dedicated Phone Number Customer Services Department Abandonment Rate



Breakdown by month for insurance revenue & expense												
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
REVENUE												
Premiums	660,513.83	607,437.41	621,332.92	622,412.87	626,857.20	626,557.44	642,354.20	647,496.77	648,965.73	650,003.12		
Exp Ins	26,780.42	33,856.13	25,983.38	25,466.24	27,982.46	29,408.14	26,257.89	25,312.58	24,588.59	27,441.78		
PERS Ins	61,473.79	66,346.36	67,562.03	65,416.86	64,591.86	64,591.86	66,694.97	67,519.97	66,694.97	66,694.97		
Interest	4,220.05	4,446.91	3,786.44	2,257.84	1,951.90	486.22	0.00	1,732.26	690.80	2,662.28		
Rx Rebates	74,629.06	0.00	0.00	104,646.97	0.00	0.00	2,491.88	127,165.57	0.00	97,429.76		
Transfers in	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1,000,000.00	0.00		
Totals	827,617.15	712,086.81	718,664.77	820,200.78	721,383.42	721,043.66	737,798.94	869,227.15	1,740,940.09	844,231.91	0.00	0.00
EXPENSE												
Claims	713,454.64	954,356.11	733,694.13	957,471.07	794,091.83	473,039.25	508,940.87	422,699.37	443,441.66	550,031.40		
Rx Claims	105,340.90	186,360.84	134,214.23	211,136.86	84,830.94	157,137.31	159,486.65	136,692.05	147,261.50	149,731.02		
Rx Fees	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		17
Other Fees	4.40	31.75	15.84	3,206.61	388.77	14.96	758.96	66.88	172.29	81.00		
Stop-loss Reimb.	0.00	0.00	0.00	0.00	-187.50	0.00	-160,052.71	-2,108.30	0.00	0.00		
Accts Payable	6,767.68	7,071.82	7,641.90	6,744.79	8,861.19	4,834.23	7,667.58	9,559.11	10,019.36	7,905.07		
Admin Fees	95,029.80	94,700.38	85,606.55	92,655.61	92,993.45	91,668.64	94,802.51	91,785.01	94,119.51	96,413.93		
Totals	920,597.42	1,242,520.90	961,172.65	1,271,214.94	980,978.68	726,694.39	611,603.86	658,694.12	695,014.32	804,162.42	0.00	0.00

Unaudited data as of 8/9/23

Unaudited 2018-2019	Unaudited 2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025	
Actuals to date	Actuals to date	Actuals to date	Actuals to date	Actuals to date	Actuals to date	Actuals to date	
\$433,914	\$707,103	\$593,957	\$1,047,051	\$649,873	\$1,008,996	\$818,800	July
\$567,057	\$504,522	\$533,442	\$801,080	\$937,616	\$1,112,051	\$1,140,749	August
\$411,577	\$419,473	\$922,103	\$709,220	\$540,995	\$735,590	\$867,924	September
\$942,438	\$575,237	\$580,104	\$758,601	\$993,427	\$399,999	\$1,171,815	October
\$365,469	\$751,140	\$974,578	\$820,396	\$214,398	\$762,960	\$879,124	November
\$577,289	\$409,511	\$606,620	\$1,754,598	\$919,954	\$689,212	\$630,192	December
\$842,303	\$585,200	\$508,567	\$211,099	\$520,765	\$685,625	\$509,134	January
\$342,650	\$425,889	\$454,486	-\$155,452	\$553,752	\$624,971	\$430,184	February
\$298,929	\$463,808	-\$63,850	\$1,124,963	\$642,894	\$352,799	\$590,875	March
\$580,877	\$590,274	\$581,293	\$116,358	\$561,828	\$491,344	\$699,843	April
\$595,059	\$386,887	\$735,299	\$610,376	\$872,626	\$507,389		May
\$506,841	\$690,699	\$833,568	\$997,886	\$728,608	\$598,594		June
\$6,464,403	\$6,509,743	\$7,260,167	\$8,796,176	\$8,136,736	\$7,969,530	\$7,738,640	TOTAL CLAIMS

\$538,700.25	\$542,478.58	\$605,013.95	\$733,014.69	\$678,061.33	\$664,127.54	\$773,863.97
10.55%	0.70%	11.53%	21.16%	(7.50%)	(2.05%)	16.52%
(0.42%)	(0.08%)	5.05%	(3.29%)	(4.56%)	0.00%	(1.13%)
771	768	795	763	773	773	779
416	423	452	443	378	378	359
1,187	1,191	1,247	1,206	1,151	1,151	1,138
\$ 5,446	\$ 5,466	\$ 5,822	\$ 7,294	\$ 7,069	\$ 6,924	\$ 8,160

ACTUALS	ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	DEC AMEND
\$ 3,485,417	\$ 2,900,257	\$ 3,055,107	\$ 1,713,523	\$ 659,909	\$ 322,101	\$ 962,908
\$6,827,457	\$7,339,180	\$7,564,729	\$8,007,604	\$7,888,920	\$8,328,096	\$8,810,000
\$491,801	\$452,484	\$657,098	\$1,979	\$0	\$0	\$0
(\$7,306)	(\$3,890)	(\$3,955)	(\$3,845)	(\$31,030)	(\$9,030)	(\$9,030)
(\$6,966,774)	(\$6,731,736)	(\$8,541,210)	(\$9,067,362)	(\$7,950,000)	(\$8,100,000)	(\$8,100,000)
(\$306,856)	(\$271,441)	(\$284,913)	(\$287,536)	(\$330,000)	(\$325,000)	(\$325,000)
(\$679,916)	(\$669,791)	(\$742,720)	(\$707,462)	(\$793,000)	(\$900,000)	(\$930,000)
\$56,434	\$40,044	\$9,387	\$3,008	\$5,000	\$10,000	\$10,000
\$2,900,257	\$3,055,107	\$1,713,523	\$659,909	\$449,799	\$326,167	\$1,418,878

Fund Balance - 6/30:
 Premium Pmts
 Transfer from GF
 Insurance Proceeds
 Other Payments
 Claims Expense
 PEBP Payments
 Fixed Costs - Admin Payments
 Fixed Costs - Third-Party Payments
 Interest on Inv / Ck Acct
 Est. Ending Fund Balance - 7/1:

2024-25	2024-25	2024-25	2024-25
Operating Revenues	Admin Expenses	Claims Expenses	Est Cash Flows
\$827,617.15	(\$101,797.48)	(\$818,799.94)	(\$92,980.27)
\$712,086.81	(\$101,772.20)	(\$1,140,748.70)	(\$530,434.09)
\$718,664.77	(\$93,248.45)	(\$867,924.20)	(\$242,507.88)
\$820,200.78	(\$99,400.40)	(\$1,171,814.54)	(\$451,014.16)
\$721,383.42	(\$101,854.64)	(\$879,124.04)	(\$259,595.26)
\$721,043.66	(\$96,502.87)	(\$630,191.52)	(\$5,650.73)
\$737,798.94	(\$102,470.09)	(\$509,133.77)	\$126,195.08
\$742,061.58	(\$101,344.12)	(\$430,184.43)	\$210,533.03
\$1,740,940.09	(\$104,138.87)	(\$590,875.45)	\$1,045,925.77
\$844,231.91	(\$104,319.00)	(\$699,843.42)	\$40,069.49
			\$0.00
			\$0.00
\$8,586,029.11	(\$1,006,848.12)	(\$7,738,640.01)	(\$159,459.02)

Notes:
 July Premiums reflect the 'wrap-around' effect of the multiple salary schedules.
 Revenues associated with premiums that are attributable to FY24/25 but paid out in Jul 2024 are reflected above.
 Transfer from GF effective 3-12-25