

**Douglas County School District  
Board of Trustees  
Agenda for the Board Workshop of  
Tuesday, April 7, 2026  
9:00 AM  
Airport Training Center  
1126 Airport Road Building G-1  
Minden, NV 89423**

**Mission Statement**

**We will inspire, empower, and prepare each learner to  
achieve his/her life aspirations.**

**Board Purpose**

**The DCSD Board of Education will govern and oversee a  
well-functioning school district where children and staff are  
thriving!**

**Board of Trustees**

**Yvonne Wagstaff, President**

**Melinda Gneiting, Vice President**

**Erinn Miller, Legislative Representative**

**David Brady, Member**

**Heather Jackson, Member**

**Susan Jansen, Member**

**Markus Zinke, Member**

**DOUGLAS COUNTY SCHOOL DISTRICT**  
Information Concerning Board Policy and Procedures  
For Communication with the Board of Trustees

The Douglas County School District (“DCSD”) welcomes visitors at our meetings and appreciate constructive suggestions and comments, which help to meet the educational needs of the District. The Board has a scheduled order of business to follow. The agenda has been available for study by the Members of the Board since published. The Board may only take action items agendized for possible action, unless it finds that the need to discuss or act upon an un-agendized item was truly unforeseen at the time the meeting agenda was posted, the matter requires immediate action, and is to be an emergency as defined by Nevada Revised Statutes.

The Board may act on the consent items with one motion unless a Trustee requests that a consent item be pulled for individual consideration, in which case the Chairperson of the Board will defer action on the particular consent item or items to the regular agenda for consideration separately.

Although each Trustee represents a geographical area of the District, Trustees are elected at large and, as such, represent all citizens of Douglas County. It is the desire of the Board to make decisions that in the best interests of the District. In making decisions, Members of the Board strive to meet the needs of every student enrolled in DCSD schools and will best serve the interests of the entire District.

Members of the Board of Trustees are responsible for exercising their public function in accordance with the requirements of applicable law and regulations, as well as Board Policies adopted by the Board of Trustees of DCSD.

If copies of the complete agenda (and supporting materials) are desired in advance, they may be obtained at the District Office on the Monday preceding a regular meeting of the Board. Please contact DCSD at 775-782-5134 or [suptoffice@dcsd.k12.nv.us](mailto:suptoffice@dcsd.k12.nv.us). Communication with the Board of Trustees as a unit may be either in writing, by personal appearance at a meeting of the Board, or by verbal communication through the District Superintendent.

**Public Comment:** During regular Board meetings, there will be a general period of public comment for any matter that is not specifically agendized for possible action, and on each item listed on the agenda for possible action.

The Board limits public comment to three minutes per commenter.

**Written Communication:** Written communication to the Board of Trustees, related to an action item on the agenda, can be emailed to the Board, the District Superintendent, or the Board Secretary, prior to the meeting. Although this communication will not be read during the meeting, it will be added to the minutes of the meeting upon request.

**Personal Appearance at a Board Meeting:** When an individual or group desires to communicate with the Board of Trustees by means of placing an item on the agenda, at a meeting of the Board, the District Superintendent shall be notified no later than 12:00 noon two weeks prior to the scheduled regular meeting, and the Board President and Superintendent, in their discretion, will determine whether the subject of the communication will be placed on the agenda. When a holiday observed by the District falls on a meeting date, the deadline shall be two weeks prior to the meeting.

- At the time of the meeting, the public can add their name to a sign-up sheet and they will be called upon during the allocated public comment time.
- The Board may set a reasonable time limit for each speaker and for answering questions.
- Extensive formal statements addressing specific items for consideration by the Board should be submitted in writing.

Although the Board may impose reasonable restrictions on the time, place and manner of public comments, it may not restrict comments based on viewpoint. No action may be taken on a matter raised during public comment that is unrelated to any agenda item.

**Non-discrimination/Notice to Individuals with Disabilities:** The Douglas County School District does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. Members of the public who require special assistance or accommodations at a meeting of the Board of Trustees are asked to notify the District Administration at 1638 Mono Ave., Minden, Nevada 89423, or by calling 775-782-5134, so that such notification is received at least twenty-four hours prior to the meeting.

Revised 11/6/2025



**Douglas County School District**  
Board Workshop  
**Airport Training Center**  
**1126 Airport Road Building G-1**  
**Minden, NV 89423**  
Tuesday, April 7, 2026  
9:00 AM

## **AGENDA**

### **1. Call to Order**

#### **A. Adoption of the Agenda, as submitted (*For Possible Action*) (*Public Comment will be taken prior to any action*)**

Please 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 order to accomplish the business on the Agenda in the most efficient manner.

#### **B. Pledge of Allegiance**

### **2. Public Comment (*For Discussion Only*)**

Comments will be accepted in person, or through virtual participation via email; [suptoffice@dcsd.k12.nv.us](mailto:suptoffice@dcsd.k12.nv.us) no later than 12:30 p.m. the day of the meeting. Email for public comment must include the submitting party's full name. Email for public comment will be posted as a supplemental document and copies will be provided to the board members. The names of those who have provided virtual public comment will be read during public comment and the emails will be included in the record, but the virtual public comment will not be read during the meeting. Comments may be made by members of the public on any matter within the authority of this Board. Please note that public comment will be taken on items marked "for possible action" before action is taken on such items, and members of the public are encouraged to comment on such items at the time they are being considered. Although members of the Board may respond to questions and discuss issues raised during public comment, no action may be taken on such a matter until the matter is placed on an agenda for action at a meeting of the Board. In making public comment, speakers are asked to come to the table or podium, sign in, speak into the microphone, and identify themselves for the record. Commenters are instructed to limit their comments to no more than three (3) minutes, and not simply repeat comments made by others.

### **3. DCSD Board of Trustees & Superintendent Workshop — Insurance Program Professional Learning (For Information and Discussion)**

**5**

Members of the Douglas County School District Board of Trustees, along with the Superintendent, will participate in a workshop facilitated by DCSD's insurance brokers, LP Insurance. The session will provide an overview of the district's insurance programs and related considerations, with topics including, but not limited to, coverage structures, stop loss program, risk management strategies, claims history, and upcoming renewal timelines. The workshop will also address key factors districts evaluate when considering a transition from a self-funded to a fully insured model, such as financial predictability, plan design flexibility, regulatory implications, data transparency, employee impact, and the logistics of managing run-out claims and reserves.

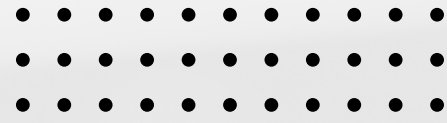
### **4. Adjournment**

(\*) Times are estimated. Items on the Agenda may be taken out of order. The Board of Trustees 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 Monday preceding a regular meeting of the Board. Please contact the District Office at 775-782-5134 or Suptoffice@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 Board of Trustees has been posted at the following locations:

Douglas County School District, Minden, NV  
District website: [www.dcsd.k12.nv.us](http://www.dcsd.k12.nv.us)  
State of Nevada website: <https://notice.nv.gov>



# SELF INSURED VS. FULLY INSURED

Professional Development Meeting



**Presented By:**



**Date:**

**April 7<sup>th</sup>, 2026**

# INTRODUCTION

As a Nevada local government employer, Douglas County School District (DCSD) operates in a health care market that presents unique challenges—limited vendor competition, limited provider access, retiree coverage requirements, and collective bargaining. Within that environment, the District’s self-insured plan has prioritized benefit richness and stability for employees.

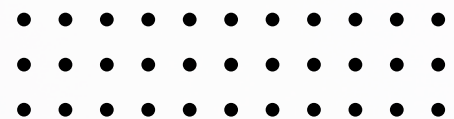


DCSD has maintained a self-insured health plan for more than 20 years. That longevity reflects a thoughtful and disciplined approach to managing healthcare—one that prioritizes local control, transparency, and the ability to tailor benefits to meet the unique needs of your workforce.

Over time, this approach has provided meaningful advantages. However, like many employers of similar size, the District has experienced some volatility in claims, especially in the past five years. With a population of approximately 740 employees, even a small number of high-cost claims or increase in utilization can materially impact year-to-year financial performance. This is not uncommon in self-funded plans of this size, but it does reinforce the importance of strategy, structure, and proactive management.

# AGENDA

- Funding types and strategies
- Self-insured plan core components
- NVBGH/NHP Coalition
- Stop loss insurance
- Review of LP's monthly report
- Advantages and disadvantages of self funding
- Self insured to fully insured considerations
- Renewal and marketing timelines
- Considerations



# FUNDING TYPES AND STRATEGIES

- **Self Insured** - A funding arrangement in which the employer assumes direct financial responsibility for the cost of enrollees claims and cost of administration of the plan (“variable cost” and “fixed cost”).
  - Three common types of self insuring
    - Level and Balance Funding
    - Bundled Administrative Services Only (ASO)
    - Unbundled Administrative Services
- **Fully Insured** - A funding arrangement in which an insurance company assumes direct financial responsibility for the cost of enrollees claims and charges a monthly premium to the Employer.

# SELF INSURED ADVANTAGES AND DISADVANTAGES

## Advantages

- No Premium Tax - 3.5%
- No Carrier profit - approx. 2-4%
- Potential increase in cash flow
- Do not have to pre-pay coverage
- Increased employer control and flexibility
- Opportunity to outperform trend in good years
- Vendor choice and flexibility

## Disadvantages

- Risk of higher than expected claims
- Stop Loss cost and Lasers
- Poor performance can make it difficult to transition to fully insured
- Employer's assets may be exposed to liability if legal action is taken against the plan
- Aditonal administrative responsibility



# SELF INSURED TO FULLY INSURED CONSIDERATIONS

- **Transitional cost**
  - Claims run out
  - Stop Loss coverage (TLO)
  - Premium payments on day 1
- **Sustainability**
  - First fully insured renewal
  - Impact to benefit structure
  - Discretion of the insurance marketplace
- **Provider Disruption**
  - Provider changes for members
- **Formulary Disruption**
  - Rx changes for members
  - Formulary edits (PA, QL, Step Therapy)
- **Administrative processes**
  - Implementation materials
  - Billing and Eligibility
  - Carrier portals



# Core Components of DCSD's self insured plan



**Plan Sponsor** - The employer sponsoring the group health plan who is responsible for enrollees claims, administrative cost, and plan design.



**Third Party Administrator (TPA)** - A vendor who administers the self insured medical, dental and vision plans according to the plan document.



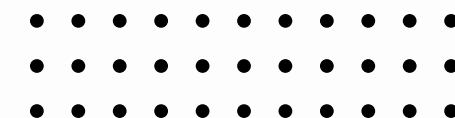
**Prescription Benefit Manager (PBM)** - A vendor who administers the prescription drug plan according to the plan sponsor's plan document.



**Preferred Provider Network (PPO)** - A list of contracted providers and facilities which have agreed to a negotiated rate for care.



**Stop Loss Insurance** - Insurance protection for the group health plan to protect the plan from catastrophic losses.



# Nevada Business Group on Health (NVBGH)



## Nevada Health Partners (NHP)

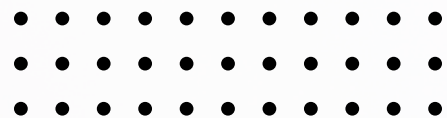
Direct  
Hospital  
Contracts

Physician &  
Urgent Care  
Contracts

Ambulatory  
Surgical  
Centers

Dental PPO  
Network

Employee  
Assistance  
Program



# Stop Loss Insurance

- Insurance coverage purchased by a self insured employer to cap financial risk from high cost medical and pharmacy claims.
- Three most common types of stop loss coverage
  - **Individual Specific Stop Loss (Severity)** - Coverage protection for each individual covered on the plan. DCSD's deductible (attachment point) is \$300,000 per person per calendar year.
  - **Aggregate Stop Loss (Frequency)** - Coverage protection for all claims under the specific deductible. Attachment point is usually 120-125% of expected claims. DCSD does not purchase this type of coverage.
  - **Aggregating Specific Stop Loss** - An additional layer of risk (deductible) over the Specific attachment point.
- **Lasers** - A higher Specific deductible for a known high cost individual. Can only be applied at renewal. DCSD has a No New Laser provision in the current stop loss contract.
- **Contract Basis** - Run in vs. Run out. DCSD has a Run in contract of 24/12



Inflationary pressures run very high in the stop loss space. LP recommends taking out to market every year regardless of proposed renewal

# Cost Management Considerations

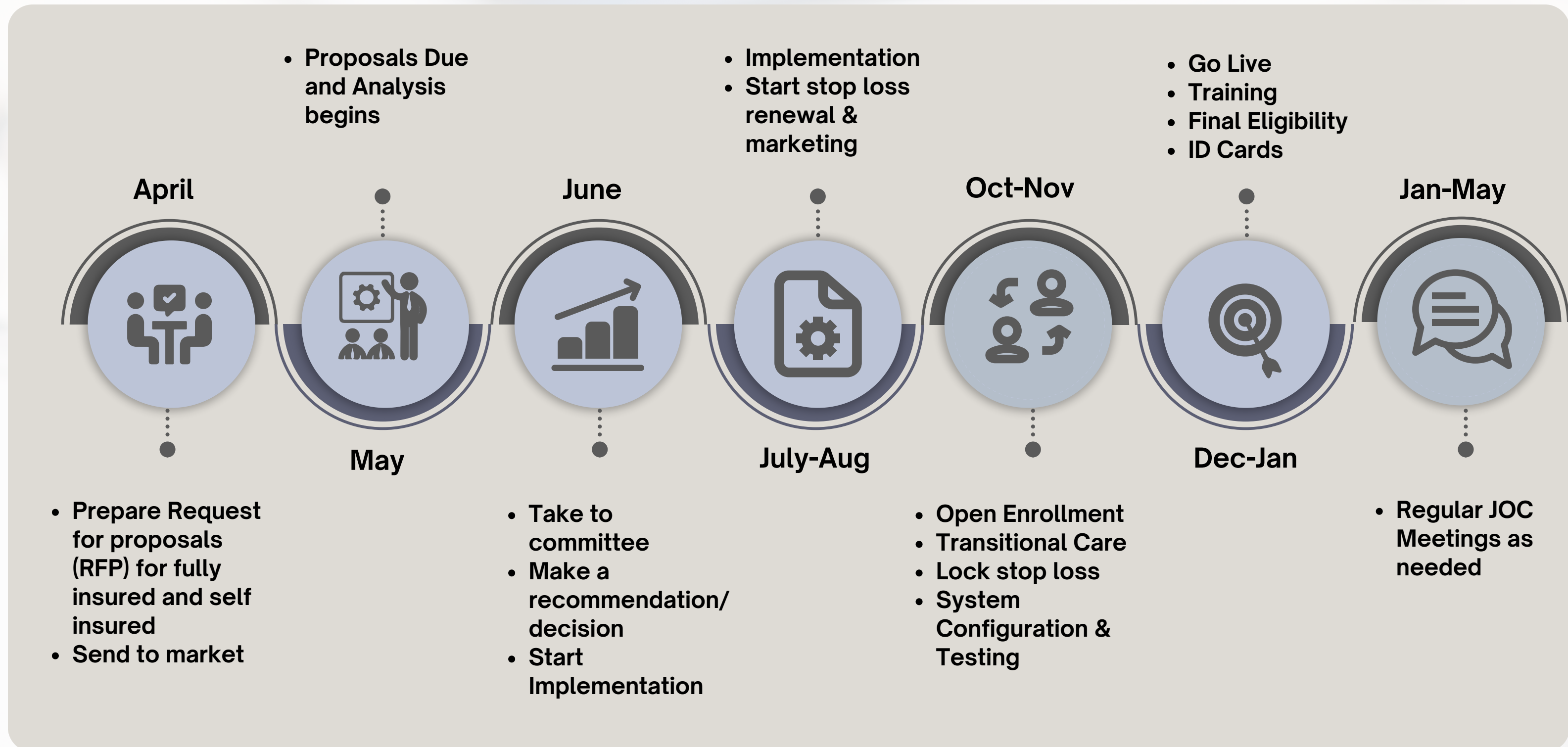
- **Components**

- Fixed Cost = approx. 10-12% of total spend
  - Admin contracts
  - Network access
  - Stop Loss Premium = approx. 30-50% of fixed cost
- Claim Cost = approx. 90% of total spend
  - Provider contracts
  - Utilization
    - Population health status
    - Care management
- Benefit Design & Contribution Structure

- **Whether self insured or fully insured, “the claims are the claims”**



# Marketing & Implementation Timeline













**INSURANCE**

## Questions

### Lloyd Barnes

-  775-996-6005
-  Lloyd.Barnes@lpins.net
-  www.lpins.net
-  300 E. 2nd Street, Suite 1300  
Reno, NV, 89501

### Nate Kerr

-  775-996-6018
-  Nate.kerr@lpins.net
-  www.lpins.net
-  300 E. 2nd Street, Suite 1300  
Reno, NV, 89501



# Douglas County School District

**December-25**

**Group Health Plan  
Cost Analysis Report**

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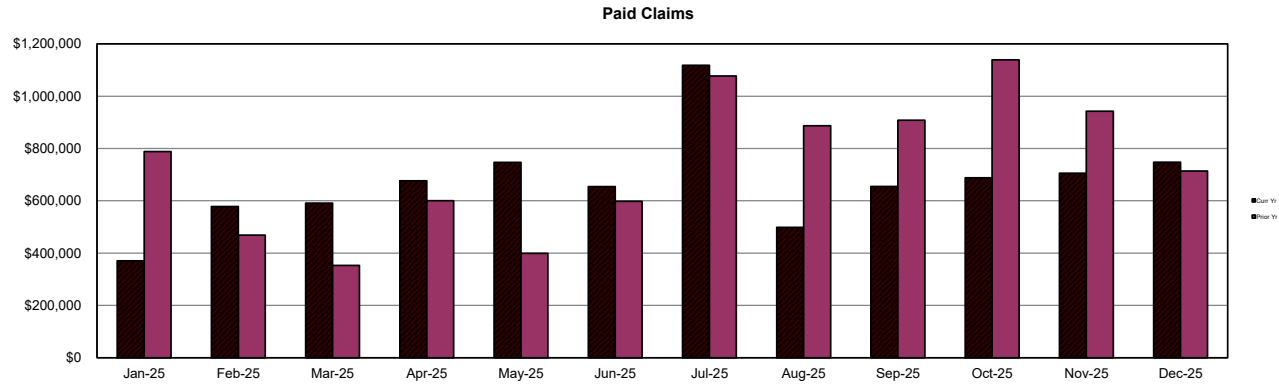
<b>Exhibits</b>	<b>Description</b>
1 & 2	Paid Claims
3 & 4	Total Plan Costs
5	Utilization Report
6	Top 20 Providers
7	Large Claim Data
8	Incurred But Not Reported Liability (IBNR)-Current
9	Incurred But Not Reported Liability (IBNR)-Previous Month



**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
<b>ENROLLMENT</b>																	
1	Employees	748	756	757	757	758	755	751	710	727	729	739	734	8,921	743	771	-3.57%
2	Dependent Units	191	192	190	189	189	191	190	183	190	187	186	184	2,262	189	192	-2.04%
3	Total # of Dependents	354	352	352	350	354	352	352	344	350	346	343	340	4,189	349	362	-3.52%
<b>EMPLOYEE CLAIMS</b>																	
4	Medical	\$315,847	\$191,204	\$260,127	\$333,719	\$361,195	\$240,445	\$494,389	\$205,675	\$357,952	\$323,523	\$419,324	\$404,901	\$3,908,300	\$325,692	\$411,501	-20.85%
5	Less Stop Loss Reimbursement	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$15,840)	(\$40,936)	(\$1,535)	(\$1,688)	(\$60,000)	(\$5,000)	(\$7,121)	-29.79%
6	Net Medical Claims	\$315,847	\$191,204	\$260,127	\$333,719	\$361,195	\$240,445	\$494,389	\$205,675	\$342,112	\$282,586	\$417,788	\$403,213	\$3,848,301	\$320,692	\$404,380	-20.70%
7	Prescription	\$81,434	\$92,214	\$78,421	\$86,892	\$110,033	\$100,357	\$77,782	\$94,227	\$105,518	\$185,930	\$133,270	\$121,622	\$1,267,700	\$105,642	\$124,554	-15.18%
8	Dental	\$19,644	\$9,765	\$58,705	\$31,453	\$18,571	\$32,532	\$49,595	\$39,160	\$32,680	\$19,000	\$14,516	\$22,003	\$347,623	\$28,969	\$27,984	3.52%
9	Vision	\$3,112	\$3,967	\$3,538	\$4,041	\$3,229	\$4,325	\$5,592	\$5,736	\$2,693	\$2,414	\$2,136	\$3,923	\$44,707	\$3,726	\$3,980	-6.38%
10	Total Employee	\$420,037	\$297,150	\$400,791	\$456,105	\$493,029	\$377,659	\$627,358	\$344,798	\$483,002	\$489,930	\$567,710	\$550,760	\$5,508,331	\$459,028	\$560,898	-18.16%
11	Cost Per Employee	\$561.55	\$393.06	\$529.45	\$602.52	\$650.43	\$500.21	\$835.36	\$485.63	\$664.38	\$672.06	\$768.21	\$750.35	\$7,409.48	\$617.46	\$727.57	-15.13%
<b>DEPENDENT CLAIMS</b>																	
12	Medical	\$52,049	\$207,620	\$108,955	\$164,902	\$167,124	\$210,322	\$447,697	\$83,623	\$106,829	\$140,409	\$147,440	\$180,750	\$2,017,719	\$168,143	\$150,120	12.01%
13	Less Stop Loss Reimbursement	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$41,961)	(\$41,524)	(\$245,646)	(\$20,471)	\$0	0.00%
14	Net Medical Claims	(\$108,003)	\$205,512	\$108,955	\$164,902	\$167,124	\$210,322	\$447,697	\$83,623	\$106,829	\$140,409	\$105,479	\$139,226	\$1,772,073	\$147,673	\$150,120	-1.63%
15	Prescription	\$47,664	\$60,559	\$49,132	\$44,964	\$72,108	\$46,816	\$21,714	\$43,633	\$49,318	\$42,045	\$22,392	\$31,178	\$531,524	\$44,294	\$15,553	184.79%
16	Dental	\$9,851	\$14,406	\$31,004	\$9,694	\$13,843	\$18,430	\$20,438	\$24,687	\$14,616	\$15,216	\$8,062	\$25,804	\$206,051	\$17,171	\$12,291	39.70%
17	Vision	\$1,085	\$534	\$1,360	\$844	\$872	\$1,109	\$798	\$1,815	\$1,115	\$405	\$1,881	\$617	\$12,435	\$1,036	\$888	16.74%
18	Total Dependent	(\$49,404)	\$281,012	\$190,451	\$220,404	\$253,947	\$276,677	\$490,647	\$153,758	\$171,877	\$198,075	\$137,813	\$196,825	\$2,522,083	\$210,174	\$178,851	17.51%
19	Cost Per Dependent Unit	(\$258.66)	\$1,463.60	\$1,002.37	\$1,166.16	\$1,343.64	\$1,448.57	\$2,582.35	\$840.21	\$904.61	\$1,059.23	\$740.93	\$1,069.70	\$13,379.75	\$1,114.98	\$929.50	19.95%
20	Cost Per Dependent	(\$139.56)	\$798.33	\$541.05	\$629.73	\$717.37	\$786.01	\$1,393.88	\$446.97	\$491.08	\$572.47	\$401.79	\$578.90	\$7,224.87	\$602.07	\$494.29	21.81%
<b>EMPLOYEE + DEPENDENT</b>																	
21	Medical	\$367,896	\$398,825	\$369,082	\$498,621	\$528,319	\$450,766	\$942,085	\$289,298	\$464,780	\$463,931	\$566,763	\$585,651	\$5,926,019	\$493,835	\$561,621	-12.07%
22	Less Stop Loss Reimbursement	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	(\$15,840)	(\$40,936)	(\$43,496)	(\$43,212)	(\$305,646)	(\$25,470)	(\$7,121)	257.68%
23	Net Medical Claims	\$207,843	\$396,716	\$369,082	\$498,621	\$528,319	\$450,766	\$942,085	\$289,298	\$448,940	\$422,995	\$523,267	\$542,439	\$5,620,373	\$468,364	\$554,500	-15.53%
24	Prescription	\$129,098	\$152,773	\$127,553	\$131,857	\$182,141	\$147,174	\$99,496	\$137,860	\$154,835	\$227,976	\$155,661	\$152,800	\$1,799,224	\$149,935	\$140,107	7.01%
25	Dental	\$29,495	\$24,171	\$89,709	\$41,147	\$32,414	\$50,962	\$70,033	\$63,847	\$47,296	\$34,216	\$22,577	\$47,807	\$553,674	\$46,139	\$40,276	14.56%
26	Vision	\$4,197	\$4,501	\$4,898	\$4,885	\$4,102	\$5,434	\$6,390	\$7,551	\$3,807	\$2,819	\$4,017	\$4,540	\$57,143	\$4,762	\$4,867	-2.16%
27	Total Claims	\$370,633	\$578,162	\$591,242	\$676,509	\$746,977	\$654,336	\$1,118,005	\$498,556	\$654,879	\$688,006	\$705,523	\$747,586	\$8,030,414	\$669,201	\$739,749	-9.54%
28	Composite Cost Per Employee	\$495.50	\$764.76	\$781.03	\$893.67	\$985.46	\$866.67	\$1,488.69	\$702.19	\$900.80	\$943.77	\$954.70	\$1,018.51	\$10,802.04	\$900.17	\$959.57	-6.19%
29	Composite Cost Per Member	\$336.33	\$521.81	\$533.13	\$611.12	\$671.74	\$591.09	\$1,013.60	\$473.01	\$608.06	\$640.01	\$652.05	\$696.08	\$7,350.49	\$612.54	\$653.06	-6.20%

**Douglas County School District  
PAID CLAIMS**

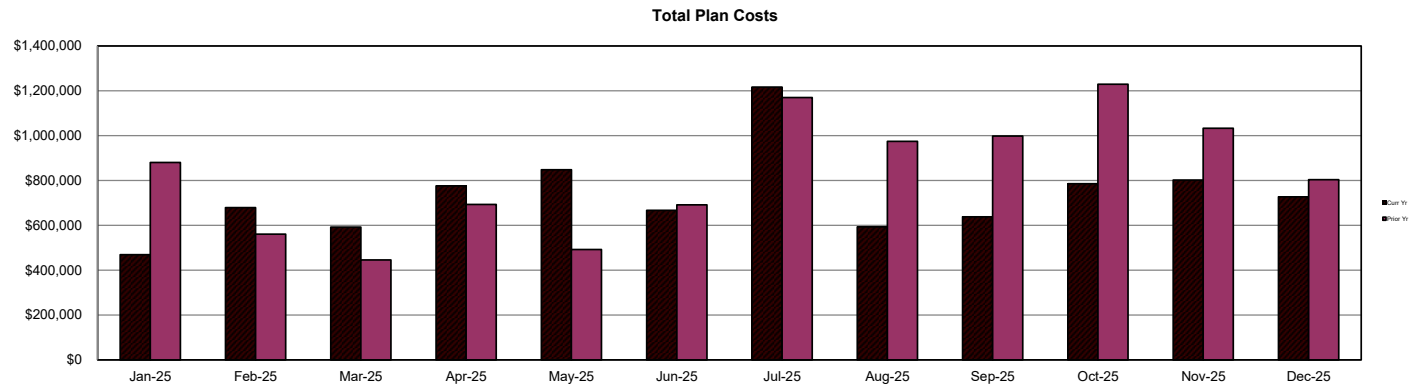


**Douglas County School District  
TOTAL PLAN COSTS**

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
<b>EMPLOYEE</b>																	
1	TPA / UTIL REVIEW / COBRA / TELE DOC	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$258,887	\$21,574	\$21,509	0.30%
2	Specific Stop Loss	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$643,293	\$53,608	\$52,253	2.59%
3	PPO Networks (Dental)	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$6,245	\$520	\$540	-3.57%
4	VSP	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$14,987	\$1,249	\$1,295	-3.57%
5	Consulting Fee (Estimated)	\$2.01	\$1.98	\$1.98	\$1.98	\$1.98	\$1.99	\$2.00	\$2.11	\$2.06	\$2.06	\$2.03	\$2.04	\$18,000	\$1,500	\$1,500	0.00%
6	Total Fixed	\$105.52	\$105.49	\$105.49	\$105.49	\$105.49	\$105.50	\$105.51	\$105.62	\$105.57	\$105.57	\$105.54	\$105.55	\$941,413	\$78,451	\$77,096	1.76%
7	Exposures	748	756	757	757	758	755	751	710	727	729	739	734	8,921	743	771	-3.57%
8	Employee Fixed Costs	\$78,925	\$79,754	\$79,857	\$79,857	\$79,961	\$79,650	\$79,236	\$74,992	\$76,752	\$76,959	\$77,994	\$77,476	\$941,413	\$78,451	\$77,096	1.76%
9	Total Gross Claims	\$420,037	\$297,150	\$400,791	\$456,105	\$493,029	\$377,659	\$627,358	\$344,798	\$498,842	\$530,867	\$569,245	\$552,449	\$5,568,330	\$464,028	\$568,019	-18.31%
10	Gross Plan Costs	\$498,963	\$376,904	\$480,648	\$535,962	\$572,990	\$457,309	\$706,594	\$419,790	\$575,594	\$607,825	\$647,239	\$629,925	\$6,509,743	\$542,479	\$645,115	-15.91%
11	Stop-Loss Reimbursements	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$15,840)	(\$40,936)	(\$1,535)	(\$1,688)	(\$60,000)	(\$5,000)	(\$7,121)	-29.79%
12	Net Plan Costs	\$498,963	\$376,904	\$480,648	\$535,962	\$572,990	\$457,309	\$706,594	\$419,790	\$559,754	\$566,889	\$645,704	\$628,237	\$6,449,743	\$537,479	\$637,994	-15.75%
13	Per Employee Gross Plan Costs	\$667.06	\$498.55	\$634.94	\$708.01	\$755.92	\$605.71	\$940.87	\$591.25	\$791.74	\$833.78	\$875.83	\$858.21	\$8,756.52	\$729.71	\$836.82	-12.80%
14	Per Employee Net Plan Costs	\$667.06	\$498.55	\$634.94	\$708.01	\$755.92	\$605.71	\$940.87	\$591.25	\$769.95	\$777.63	\$873.75	\$855.91	\$8,675.81	\$722.98	\$827.58	-12.64%
<b>DEPENDENT</b>																	
15	Specific Stop Loss (+ 1 Dep.)	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$86,085	\$7,174	\$6,997	2.53%
16	Specific Stop Loss (+ Fam.)	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$92,070	\$7,673	\$7,250	5.83%
17	Dependent Units (+ 1 Dep.)	93	93	93	91	91	92	91	87	92	90	91	89	1,093	91	95	-3.62%
18	Dependent Units (Fam.)	98	99	97	98	98	99	99	96	98	97	95	95	1,169	97	98	-0.51%
19	Dependent Fixed Costs	\$15,043	\$15,122	\$14,964	\$14,886	\$14,886	\$15,043	\$14,964	\$14,413	\$14,964	\$14,728	\$14,649	\$14,492	\$178,155	\$14,846	\$14,247	4.21%
20	Total Gross Claims	\$110,649	\$283,120	\$190,451	\$220,404	\$253,947	\$276,677	\$490,647	\$153,758	\$171,877	\$198,075	\$179,774	\$238,349	\$2,767,729	\$230,644	\$178,851	28.96%
21	Gross Plan Costs	\$125,692	\$298,242	\$205,416	\$235,289	\$268,833	\$291,720	\$505,612	\$168,172	\$186,841	\$212,804	\$194,424	\$252,841	\$2,945,884	\$245,490	\$193,098	27.13%
22	Stop-Loss Reimbursements	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$41,961)	(\$41,524)	(\$245,646)	(\$20,471)	\$0	0.00%
23	Net Plan Costs	(\$34,361)	\$296,133	\$205,416	\$235,289	\$268,833	\$291,720	\$505,612	\$168,172	\$186,841	\$212,804	\$152,462	\$211,317	\$2,700,238	\$225,020	\$193,098	16.53%
24	Per Dependent Unit Gross Plan Costs	\$658.07	\$1,553.34	\$1,081.13	\$1,244.92	\$1,422.40	\$1,527.33	\$2,661.11	\$918.97	\$983.37	\$1,137.99	\$1,045.29	\$1,374.14	\$15,608.06	\$1,300.67	\$1,003.54	29.61%
25	Per Dependent Unit Net Plan Costs	(\$179.90)	\$1,542.36	\$1,081.13	\$1,244.92	\$1,422.40	\$1,527.33	\$2,661.11	\$918.97	\$983.37	\$1,137.99	\$819.69	\$1,148.46	\$14,307.84	\$1,192.32	\$1,003.54	20.81%
26	Per Dependent Net Plan Costs	(\$97.06)	\$841.29	\$583.57	\$672.26	\$759.41	\$828.75	\$1,436.40	\$488.87	\$533.83	\$615.04	\$444.50	\$621.52	\$7,728.37	\$644.03	\$530.13	21.49%
<b>EMPLOYEE + DEPENDENT</b>																	
27	*Fixed Costs	\$98,579	\$100,940	\$98,319	\$99,304	\$101,011	\$98,031	\$98,630	\$94,380	\$94,970	\$97,667	\$96,473	\$98,169	\$1,176,473	\$98,039	\$91,343	7.33%
28	Total Claims	\$530,686	\$580,270	\$591,242	\$676,509	\$746,977	\$654,336	\$1,118,005	\$498,556	\$670,719	\$728,942	\$749,019	\$790,798	\$8,336,059	\$694,672	\$746,870	-6.99%
29	Gross Plan Costs	\$629,265	\$681,210	\$689,561	\$775,813	\$847,988	\$752,367	\$1,216,635	\$592,936	\$765,689	\$826,610	\$845,492	\$888,966	\$9,512,532	\$792,711	\$838,213	-5.43%
30	Stop-Loss Reimbursements	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	(\$15,840)	(\$40,936)	(\$43,496)	(\$43,212)	(\$305,646)	(\$25,470)	(\$7,121)	257.68%
31	Pharmacy Rebates	\$0	\$0	(\$97,430)	\$0	\$0	(\$85,376)	\$0	\$0	(\$111,876)	\$0	\$0	(\$118,740)	(\$413,422)	(\$34,452)	(\$38,008)	-9.36%
32	Net Plan Costs	\$469,213	\$679,102	\$592,131	\$775,813	\$847,988	\$666,991	\$1,216,635	\$592,936	\$637,974	\$785,673	\$801,996	\$727,014	\$8,793,465	\$732,789	\$793,084	-7.60%
33	Composite Gross Plan Cost Per Employee	\$841.26	\$901.07	\$910.91	\$1,024.85	\$1,118.72	\$996.51	\$1,620.02	\$835.12	\$1,053.22	\$1,133.90	\$1,144.10	\$1,211.13	\$12,795.69	\$1,066.31	\$1,087.29	-1.93%
34	Composite Net Plan Cost Per Employee	\$627.29	\$898.28	\$782.21	\$1,024.85	\$1,118.72	\$883.43	\$1,620.02	\$835.12	\$877.54	\$1,077.74	\$1,085.24	\$990.48	\$11,828.45	\$985.70	\$1,028.75	-4.18%
35	Composite Net Plan Cost Per Member	\$425.78	\$612.91	\$533.93	\$700.82	\$762.58	\$602.52	\$1,103.02	\$562.56	\$592.36	\$730.86	\$741.22	\$676.92	\$7,956.09	\$663.01	\$733.69	-9.63%

\*MAXOR Admin Fee Added to Employee & Dependent Fixed Costs

**Douglas County School District**  
**TOTAL PLAN COSTS**



Douglas County School District

Top 20 Providers  
Paid Claims Between

1/1/2025 thru 12/1/2025

Plan Paid Row Labels	Period													Grand Total	Percent of Medical
	01/01/25	02/01/25	03/01/25	04/01/25	05/01/25	06/01/25	07/01/25	08/01/25	09/01/25	10/01/25	11/01/25	12/01/25			
<b>Dental</b>															
<b>Professional</b>															
OFFICE	\$29,451	\$24,171	\$89,520	\$41,147	\$32,414	\$50,962	\$70,033	\$63,847	\$47,296	\$34,216	\$22,577	\$47,807	\$553,441		
WALK-IN RETAIL HEALTH CLINIC			\$189										\$189		
<b>Professional Total</b>	<b>\$29,451</b>	<b>\$24,171</b>	<b>\$89,709</b>	<b>\$41,147</b>	<b>\$32,414</b>	<b>\$50,962</b>	<b>\$70,033</b>	<b>\$63,847</b>	<b>\$47,296</b>	<b>\$34,216</b>	<b>\$22,577</b>	<b>\$47,807</b>	<b>\$553,630</b>		
<b>Dental Total</b>	<b>\$29,451</b>	<b>\$24,171</b>	<b>\$89,709</b>	<b>\$41,147</b>	<b>\$32,414</b>	<b>\$50,962</b>	<b>\$70,033</b>	<b>\$63,847</b>	<b>\$47,296</b>	<b>\$34,216</b>	<b>\$22,577</b>	<b>\$47,807</b>	<b>\$553,630</b>		
<b>Medical</b>															
<b>Institutional</b>															
ON CAMPUS - OUTPATIENT HOSPITAL	\$144,693	\$63,565	\$47,411	\$96,476	\$106,057	\$99,337	\$101,062	\$69,828	\$97,476	\$117,083	\$145,874	\$199,796	\$1,288,659	22%	
AMBULATORY SURGICAL CENTER	\$5,198	\$103,810	\$80,699	\$14,266	\$22,226	\$132,123	\$414,721	\$33,249	\$39,691	\$24,597	\$71,357	\$60,047	\$1,001,983	17%	
INPATIENT HOSPITAL	\$26,793	\$45,191	\$792	\$110,310	\$216,839	\$22,150	\$165,350	\$19,082	\$62,207	\$50,859	\$24,108	\$3,571	\$747,250	13%	
EMERGENCY ROOM - HOSPITAL	\$29,791	\$19,459	\$28,423	\$47,827	\$20,197	\$30,908	\$33,064	\$28,336	\$32,953	\$35,859	\$47,211	\$39,155	\$393,183	7%	
URGENT CARE FACILITY	\$986	\$120	\$178	\$321	\$260	\$119	\$179		\$131	\$933	\$453	\$177	\$3,856	0%	
TELEHEALTH - PROVIDED OTHER THAN IN PATIENT'S HOME	\$409						\$108						\$517	0%	
OFF CAMPUS - OUTPATIENT HOSPITAL			\$0										\$0	0%	
<b>Institutional Total</b>	<b>\$207,870</b>	<b>\$232,145</b>	<b>\$157,504</b>	<b>\$269,199</b>	<b>\$365,579</b>	<b>\$284,637</b>	<b>\$714,484</b>	<b>\$150,495</b>	<b>\$232,458</b>	<b>\$229,330</b>	<b>\$289,002</b>	<b>\$302,746</b>	<b>\$3,435,448</b>	<b>58%</b>	
<b>Professional</b>															
OFFICE	\$68,754	\$66,070	\$71,902	\$90,192	\$68,891	\$64,968	\$94,189	\$86,591	\$101,667	\$77,668	\$124,510	\$103,398	\$1,018,799	17%	
ON CAMPUS - OUTPATIENT HOSPITAL	\$15,279	\$27,021	\$18,460	\$10,999	\$18,409	\$29,952	\$64,778	\$14,753	\$21,184	\$20,362	\$28,318	\$39,535	\$309,050	5%	
EMERGENCY ROOM - HOSPITAL	\$6,253	\$7,106	\$12,263	\$14,650	\$10,908	\$12,221	\$9,688	\$7,320	\$41,235	\$10,367	\$8,983	\$11,536	\$152,531	3%	
INPATIENT HOSPITAL	(\$4,527)	\$11,543	\$15,712	\$5,651	\$4,924	\$6,208	\$9,783	\$1,336	\$4,794	\$57,402	\$8,037	\$29,458	\$150,323	2%	
HOME	\$4,273	\$4,005	\$4,382	\$8,508	\$6,441	\$10,796	\$12,275	\$5,536	\$11,185	\$7,044	\$6,639	\$10,981	\$92,066	3%	
INDEPENDENT LABORATORY	\$4,719	\$5,339	\$4,911	\$4,087	\$3,807	\$1,843	\$6,358	\$5,598	\$7,204	\$8,664	\$14,646	\$3,710	\$70,885	1%	
END-STAGE RENAL DISEASE TREATMENT FACILITY	\$15,512	\$11,527	\$12,829	\$8,944	\$0	\$0							\$48,811	1%	
TELEHEALTH - PROVIDED IN PATIENT'S HOME	\$3,165	\$2,912	\$4,079	\$5,371	\$4,014	\$4,452	\$4,712	\$4,009	\$3,876	\$3,708	\$4,393	\$3,225	\$47,917	1%	
RURAL HEALTH CLINIC	\$2,707	\$2,035	\$3,981	\$4,009	\$3,031	\$2,418	\$2,475	\$3,222	\$4,443	\$3,942	\$2,061	\$3,325	\$37,648	1%	
AMBULANCE - LAND	\$942	\$777	\$1,567	\$3,787	\$1,928	\$0	\$2,345	\$517	\$7,013	\$6,135	\$3,667	\$5,777	\$34,455	1%	
HOSPICE	\$4,929	\$3,059	\$3,339	\$3,697	\$994	\$4,452		\$2,022		\$0	\$3,776	\$4,134	\$30,402	0%	
URGENT CARE FACILITY	\$2,350	\$2,139	\$2,366	\$2,588	\$2,199	\$2,450	\$2,273	\$1,257	\$2,192	\$1,426	\$2,809	\$4,463	\$28,513	0%	
TELEHEALTH - PROVIDED OTHER THAN IN PATIENT'S HOME	(\$1,965)	\$1,715	\$2,516	\$2,383	\$2,523	\$2,288	\$3,061	\$2,015	\$2,369	\$3,474	\$2,456	\$3,543	\$26,377	0%	
AMBULANCE - AIR OR WATER					\$17,476					\$4,395			\$21,871	1%	
OFF CAMPUS - OUTPATIENT HOSPITAL	\$116	\$73	\$1,282	\$273	\$286	\$724	\$367	\$256	\$931	\$427	\$808	\$101	\$5,645	0%	
SKILLED NURSING FACILITY				\$1,307	\$4,125							\$0	\$5,432	0%	
PSYCHIATRIC RESIDENTIAL TREATMENT CENTER		\$4,200											\$4,200	0%	
INPATIENT PSYCHIATRIC FACILITY				\$3,825									\$3,825	0%	
PUBLIC HEALTH CLINIC	\$122	\$138	\$238	\$17	\$186		\$348	\$106		\$33			\$1,188	0%	
FEDERALLY QUALIFIED HEALTH CENTER	\$283	\$212		\$268									\$0	\$763	0%
COMPREHENSIVE INPATIENT REHABILITATION FACILITY	\$26	\$146											\$172	0%	
INDEPENDENT CLINIC				\$109				\$0			\$0	\$0	\$109	22%	
OTHER PLACE OF SERVICE	\$0						\$0	\$94					\$94	0%	
RESIDENTIAL SUBSTANCE ABUSE TREATMENT FACILITY											\$0	\$0	\$0	0%	
COMMUNITY MENTAL HEALTH CENTER										\$0			\$0	0%	
MOBILE UNIT												\$0	\$0	42%	
<b>Professional Total</b>	<b>\$159,757</b>	<b>\$166,680</b>	<b>\$212,797</b>	<b>\$229,422</b>	<b>\$162,740</b>	<b>\$166,129</b>	<b>\$227,602</b>	<b>\$138,804</b>	<b>\$232,322</b>	<b>\$234,601</b>	<b>\$277,761</b>	<b>\$282,905</b>	<b>\$2,491,520</b>	100%	
<b>Medical Total</b>	<b>\$367,626</b>	<b>\$398,825</b>	<b>\$370,300</b>	<b>\$498,621</b>	<b>\$528,319</b>	<b>\$450,766</b>	<b>\$942,086</b>	<b>\$289,298</b>	<b>\$464,780</b>	<b>\$463,931</b>	<b>\$566,763</b>	<b>\$585,651</b>	<b>\$5,926,968</b>		
<b>Vision</b>															
<b>Professional</b>															
OFFICE							\$217		\$114				\$330		
<b>Professional Total</b>							<b>\$217</b>		<b>\$114</b>				<b>\$330</b>		
<b>Vision Total</b>							<b>\$217</b>		<b>\$114</b>				<b>\$330</b>		
<b>Grand Total</b>	<b>\$397,077</b>	<b>\$422,996</b>	<b>\$460,009</b>	<b>\$539,767</b>	<b>\$560,734</b>	<b>\$501,728</b>	<b>\$1,012,335</b>	<b>\$353,145</b>	<b>\$512,190</b>	<b>\$498,147</b>	<b>\$589,341</b>	<b>\$633,458</b>	<b>\$6,480,928</b>		

# Douglas County School District

Top 20 Providers

Paid Claims Between

1/1/2025

thru

12/1/2025

Provider	Members	Claims	MemberPaid	PlanPaid
CARSON VALLEY MEDICAL CENTER	331	1176	\$259,916	\$1,045,067
CARSON TAHOE REGIONAL HEALTHCARE	372	940	\$340,589	\$888,805
BARTON MEMORIAL HOSPITAL	37	119	\$88,645	\$421,798
RENOWN REGIONAL MEDICAL CENTER	105	240	\$59,012	\$399,494
STANFORD MEDICAL CENTER	5	14	\$8,757	\$255,735
RENO ORTHOPAEDIC SURGERY CENTER	16	26	\$34,690	\$224,162
UNIVERSITY OF UTAH HOSPITALS AND CLINICS	5	28	\$2,550	\$212,178
LUCILE SALTER PACKARD CHILDRENS HOSPITAL	1	1	\$5,795	\$119,714
UNIVERSITY OF NEW MEXICO HOSPITAL	1	19	\$3,581	\$59,162
ORD, CELINE B	2	26	\$56	\$50,297
OPTION CARE ENTERPRISES INC - LAS VEGAS	1	13	\$3,413	\$46,945
MAMMOTH HOSPITAL	1	1	\$4,260	\$42,296
DIALYSIS CLINIC INC - CARSON CITY	1	5	\$2,685	\$41,376
CARSON ENDOSCOPY CENTER	47	52	\$5,365	\$39,395
BUDD, DANIEL B	78	195	\$4,153	\$35,652
RENOWN SOUTH MEADOWS MEDICAL CENTER	36	49	\$16,365	\$33,730
1CARE,	1	12	\$4,215	\$30,402
PINTHER, TIMOTHY T	75	156	\$3,291	\$29,553
LABCORP PHOENIX	334	685	\$27,763	\$28,211
EAST FORK FIRE & PARAMEDIC DISTRICTS	18	26	\$11,297	\$27,838

*Note: Members may be represented within multiple providers*

**Douglas County School District**

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

		<b>CLAIMANT</b>											
		<b>Jan-25</b>	<b>Feb-25</b>	<b>Mar-25</b>	<b>Apr-25</b>	<b>May-25</b>	<b>Jun-25</b>	<b>Jul-25</b>	<b>Aug-25</b>	<b>Sep-25</b>	<b>Oct-25</b>	<b>Nov-25</b>	<b>Dec-25</b>
Claim #	<b><u>Total Amount of Claim Year to Date</u></b>												
1	Dependent	\$0	\$0	\$0	\$155,339	\$199,066	\$223,101	\$275,461	\$315,415	\$357,377	\$398,900	\$460,677	\$485,151
2	Subscriber	\$0	\$0	\$0	\$0	\$251,502	\$255,108	\$257,466	\$263,114	\$264,864	\$269,192	\$270,569	\$272,320
3	Subscriber	\$0	\$0	\$0	\$0	\$0	\$0	\$290,379	\$291,361	\$292,896	\$294,584	\$295,551	\$302,934
4	Dependent	\$0	\$0	\$0	\$0	\$0	\$0	\$160,018	\$162,501	\$163,155	\$163,826	\$168,314	\$172,448
5	Subscriber	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$206,119
6		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
7		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
8		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
9		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
10		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Total</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$155,339</b>	<b>\$450,568</b>	<b>\$478,209</b>	<b>\$983,323</b>	<b>\$1,032,391</b>	<b>\$1,078,292</b>	<b>\$1,126,503</b>	<b>\$1,195,112</b>	<b>\$1,438,972</b>
<b>Increase Over Previous Month:</b>			<b>\$0</b>	<b>\$0</b>	<b>\$155,339</b>	<b>\$295,229</b>	<b>\$27,642</b>	<b>\$505,114</b>	<b>\$49,068</b>	<b>\$45,901</b>	<b>\$48,211</b>	<b>\$68,609</b>	<b>\$243,860</b>

Claim #	<b><u>Amount Over Specific Stop-Loss (\$275,000)</u></b>												
1	Dependent	\$0	\$0	\$0	\$0	\$0	\$0	\$461	\$40,415	\$82,377	\$123,900	\$185,677	\$210,151
2	Subscriber	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
3	Subscriber	\$0	\$0	\$0	\$0	\$0	\$0	\$15,379	\$16,361	\$17,896	\$19,584	\$20,551	\$27,934
4	Dependent	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
5	Subscriber	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
6		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$24,000
7		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
8		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
9		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
10		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Total</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$15,840</b>	<b>\$56,776</b>	<b>\$100,273</b>	<b>\$143,485</b>	<b>\$206,229</b>	<b>\$238,084</b>
<b>Increase Over Previous Month:</b>			<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$15,840</b>	<b>\$40,936</b>	<b>\$43,496</b>	<b>\$43,212</b>	<b>\$62,744</b>	<b>\$31,855</b>

## Douglas County School District

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

Based on claims from January 01, 2025 through December 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 January 01, 2025 through December 31, 2025

<b>Medical</b>	\$ 5,620,373
<b>Dental</b>	\$ 553,674
<b>Prescription Drugs</b>	\$ 1,799,224
<b>Vision</b>	<u>\$ 57,143</u>
<b>Total Claims</b>	<b>\$ 8,030,414</b>

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 = 734 : 60 day lagged enrollment = 747

Current enrollment all Dental Plans = 734 : 60 day lagged enrollment = 747

Current enrollment all Rx Plans = 734 : 60 day lagged enrollment = 747

Current enrollment all Vision Plans = 734 : 60 day lagged enrollment = 747

### Estimated IBNR Calculation

Medical	\$5,620,373 X (55/365) X (734/747) =	\$ 832,167	14.8%
+			
Dental	\$553,674 X (30/365) X (734/747) =	\$ 44,715	8.1%
+			
Rx	\$1,799,224 X (11/365) X (734/747) =	\$ 53,280	3.0%
+			
Vision	\$57,143 X (22/365) X (734/747) =	<u>\$ 3,384</u>	5.9%
=			
<b>Total estimated IBNR as of December 31, 2025 =</b>		<b>\$ 933,546</b>	<b>11.6%</b>

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 November 30, 2025

Based on claims from December 01, 2024 through November 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 December 01, 2024 through November 30, 2025

<b>Medical</b>	\$ 5,598,387
<b>Dental</b>	\$ 573,072
<b>Prescription Drugs</b>	\$ 1,769,052
<b>Vision</b>	<u>\$ 55,995</u>
<b>Total Claims</b>	\$ 7,996,506

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 = 739 : 60 day lagged enrollment = 749  
 Current enrollment all Dental Plans = 739 : 60 day lagged enrollment = 749  
 Current enrollment all Rx Plans = 739 : 60 day lagged enrollment = 749  
 Current enrollment all Vision Plans = 739 : 60 day lagged enrollment = 749

**Estimated IBNR Calculation**

Medical	\$5,598,387 X (55/365) X (739/749) =	\$ 832,330	14.9%
+			
Dental	\$573,072 X (30/365) X (739/749) =	\$ 46,473	8.1%
+			
Rx	\$1,769,052 X (11/365) X (739/749) =	\$ 52,602	3.0%
+			
Vision	\$55,995 X (22/365) X (739/749) =	<u>\$ 3,330</u>	5.9%
=			
<b>Total estimated IBNR as of November 30, 2025 =</b>		<b>\$ 934,735</b>	<b>11.7%</b>

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.

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## Excess Loss Renewal & Marketing Analysis

Prepared for

# Douglas County School District

Presented By

LP Insurance Services  
Employee Benefits Division


Effective: January 1, 2026

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# **Douglas County School District**

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# Douglas County School District

## Response to Bid Summary

<u>CARRIERS CONTACTED</u>	<u>BID RESPONSE</u>	<u>% OVER/UNDER CURRENT</u>
<b>EXCESS LOSS</b>		
Granular/Wellpoint	Current/Renewal - Presented	6%
IISI Companion	Quoted - Presented	5%
Voya	Quoted - Not Presented	28%
Sun Life	Declined to Quote - Not Competitive	-
Berkley A&H	Declined to Quote -Adverse Claims	-
Berkshire Hathaway	Declined to Quote - Not Competitive	-
ISU Companion	Declined to Quote - Not Competitive	-
QBE A&H	Declined to Quote - Not Competitive	-
AccuRisk Solutions	Declined to Quote - Not Competitive	-
Tokio Marine HCC	Declined to Quote - Not Competitive	-
Swiss Re	Declined to Quote - Not Competitive	-
Symetra	Declined to Quote - Not Competitive	-

# Douglas County School District

STOP LOSS - Benefit & Cost Comparison

Specific Deductible Levels - \$275K, \$300K

CARRIER	Current Granular	Renewal Wellpoint	Option 1 IISI Companion	Option 2 IISI Companion
<b>EXPOSURES:</b>				
Employee Only	526	526	526	526
Employee + Family	180	180	180	180
TOTAL EMPLOYEES	706	706	706	706
<b>SPECIFIC STOP LOSS:</b>				
Stop Loss Level	\$275,000	\$275,000	\$275,000	<b>\$300,000</b>
Contract Basis	Paid	Paid	24/12	24/12
Benefits Covered	Medical/Rx	Medical/Rx	Medical/Rx	Medical/Rx
Limit of Liability (Annual Maximum)	Unlimited	Unlimited	Unlimited	Unlimited
Limit of Liability (Lifetime Maximum)	Unlimited	Unlimited	Unlimited	Unlimited
Reimbursement Percent	100%	100%	100%	100%
Specific Advancement	Yes	Yes	Yes	Yes
Actively at Worked Waived	Waived w/disclosure	Waived w/disclosure	Waived w/disclosure	Waived w/disclosure
No New Laser Provision	Included (40% cap)	<b>Included (50% cap)</b>	<b>Included (50% cap)</b>	<b>Included (50% cap)</b>
Plan Mirroring	Included	Included	Included	Included
Retirees	Included	Included	Included	Included
<b>SPECIFIC RATES:</b>				
Employee Only	\$72.11	\$76.44	\$64.97	\$58.15
Employee + Family	\$150.87	\$159.92	\$189.83	\$169.91
<b>ESTIMATED ANNUAL FIXED COST</b>				
Single Specific Stop Loss	\$455,158	\$482,489	\$410,091	\$367,043
Family Specific Stop Loss	\$325,879	\$345,427	\$410,033	\$367,006
<b>TOTAL ANNUAL FIXED EXPENSES</b>	<b>\$781,038</b>	<b>\$827,916</b>	<b>\$820,123</b>	<b>\$734,048</b>
% over/(under) current	-	<b>6.0%</b>	<b>5.0%</b>	<b>-6.0%</b>
\$ over/(under) current	-	<b>\$46,879</b>	<b>\$39,086</b>	<b>-\$46,989</b>
<b>LASERS</b>				
Claimant 1 - Current	\$500K	<b>None</b>	<b>None</b>	<b>None</b>
<b>Contingencies</b>				
Firm and Final	-	Yes	Yes	Yes
Acceptance Requirement	-	Signed Confirmation	Signed Confirmation	Signed Confirmation
Proposal Expiration Date	-	11/21/25	11/21/25	11/21/25

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## Historical Data

Plan Year	Specific Ded	Renewal	Carrier	Lasers	Approx. Premium	Claims over Spec	Total \$ Over Spec
2018	\$175,000	4%	Voya	None	\$ 555,000	1	\$484,768
2019	\$175,000	10%	Voya	None	\$ 625,000	2	\$127,683
2020	<b>\$200,000</b>	-1%	Voya	None	\$ 643,000	3	\$977,120
2021	<b>\$250,000</b>	9%	Voya	\$1.5M	\$ 660,000	3	\$1,686,541
2022	\$250,000	-3%	Granular	\$500K	\$ 665,000	5	\$915,245
2023	\$250,000	7%	Granular	\$500K	\$ 687,000	2	\$218,357
2024	<b>\$275,000</b>	6%	Granular	\$500K	\$ 800,000	2	\$162,161
7 years						18 (avg. 2.6 claims/yr)	\$4,409,714 (avg. \$734,942/yr)