



The School District of Osceola County Employee Benefits Committee Meeting

Agenda

February 15, 2023

- I. **Welcome (2 minutes)**
 - a. Speaking order volunteer
 - b. Timekeeper volunteer
- II. **Health Services Plan 2023 (40 minutes)**
- III. **Member concerns, tracking, and brainstorming solutions (25 minutes)**
- IV. **Other concerns and updates (18 minutes)**

The next meeting will be held on **March 22, 2023 at 4:30 pm** in the **Multipurpose Room** located at The Center for Employee Health 831 Simpson Road, in Kissimmee.

Employee Benefits Committee Meeting

2022-2023 Membership

OCEA

Judi Crowell – St Cloud HS (v)
Kim Castro-Stevens – HTES(v)
Janet Moody -- NCES (v)
Ruth Nelson – Osceola HS (v)
Lare Allen – OCEA/ESP Pres (v)
Vacant (Alternate)

Teamsters

Vacant (v)
Carlos Martinez – Teamsters (v)

Provider Representatives

Kelly Johnson – Lincoln Financial Group
Mark Tafuri- VSP
Belinda Gonzalez – Humana (Dental)
Tom Remus - MetLife Life Ins.
Cindy McCormick -- EBMS
Mike Trent -- EBMS
Jennifer Pabon -- EBMS
Jay Weingart – Trustmark

Risk & Benefits Management/SDOC

Lauren M. Haddox – Director
LaTasha Aponte – Employee Benefits Supervisor
Megan Arencibia – Wellness Specialist
Vacant – Benefits Education Specialist
Iris Hernandez - Secretary
Sarah Graber – Chief Business & Finance Officer
John Boyd – Chief Negotiator
Vacant – Chief Negotiator

Prof. Support Council

Felicia Smith – School Operations (v)

ESP

Barb Gleason – OCSA (v)
Susan Compton – Custodial Servs. (v)

Retirees

Ray Lackey – Retired Teacher

Benefits Consultant

Ashley Bacot - RosenSure
Carolyn Grant - RosenSure
Barry Murphy – RosenSure

Center for Employee Health

Kenneth Aldridge - RosenCare
Frank Malatesta - RosenCare

Health Plan Analysis 02/02/2023

Summary

Plan	ENROLLMENT		%
	TALLIES	Total	
Healthy Essentials	1629	7601	21.43%
Healthy Essentials Wellness	1914	7601	25.18%
Healthy Advantage Plus	1115	7601	14.67%
Healthy Advantage Plus Wellness	1868	7601	24.58%
Opt Out Credit Plan	1074	7601	14.13%

PROJECTED REVENUE BASED ON CURRENT ENROLLMENT MINUS ADMIN FEES

Board Paid	\$51,253,021.00
Employee Premium	\$7,464,620.00
Retiree Premium	\$769,458.96
SubTotal	\$59,487,099.96
Administration Fees	(5,469,415.68)
Total	54,017,684.28

DESCRIPTION	OPTION	TALLIES	Board Share		Employee Premium			Retiree Premium			
			Per Pay	Per Year	Per Pay	Per Year	Per Month	Per Year			
Healthy Advantage Plus	1	907	341.30	309,559.10	6,191,182.00	50.00	45,350.00	907,000.00			
Healthy Advantage Plus	2	21	341.30	7,167.30	143,346.00	435.00	9,135.00	182,700.00			
Healthy Advantage Plus	3	132	341.30	45,051.60	901,032.00	245.00	32,340.00	646,800.00			
Healthy Advantage Plus	4	27	341.30	9,215.10	184,302.00	580.00	15,660.00	313,200.00			
Healthy Advantage Plus	5	28	341.30	9,556.40	191,128.00	220.00	6,160.00	123,200.00			
Healthy Advantage Plus	6	0	341.30	0.00	0.00	0.00	0.00	0.00			
Healthy Advantage Plus Wellness	1	1366	341.30	466,215.80	9,324,316.00	25.00	34,150.00	683,000.00			
Healthy Advantage Plus Wellness	2	42	341.30	14,334.60	286,692.00	385.00	16,170.00	323,400.00			
Healthy Advantage Plus Wellness	3	210	341.30	71,673.00	1,433,460.00	195.00	40,950.00	819,000.00			
Healthy Advantage Plus Wellness	4	40	341.30	13,652.00	273,040.00	530.00	21,200.00	424,000.00			
Healthy Advantage Plus Wellness	5	64	341.30	21,843.20	436,864.00	170.00	10,880.00	217,600.00			
Healthy Advantage Plus Wellness	6	64	341.30	21,843.20	436,864.00	0.00	0.00	0.00			
Healthy Advantage Plus Wellness	7	6	341.30	2,047.80	40,956.00	385.00	2,310.00	46,200.00			
Healthy Advantage Plus Wellness	8	1	341.30	341.30	6,826.00	530.00	530.00	10,600.00			
Healthy Advantage Plus Wellness (JS)	1	0	170.65	0.00	0.00	195.65	0.00	0.00			
Healthy Advantage Plus Wellness Retiree	1	66							629.83	41,568.78	498,825.36
Healthy Advantage Plus Wellness Retiree	2	6							1,322.58	7,935.48	95,225.76
Healthy Advantage Plus Wellness Retiree	3	1							973.85	973.85	11,686.20
Healthy Advantage Plus Wellness Retiree	4	1							1,703.64	1,703.64	20,443.68
Healthy Essentials Wellness	1	1507	341.30	514,339.10	10,286,782.00	0.00	0.00	0.00			
Healthy Essentials Wellness	2	31	341.30	10,580.30	211,606.00	325.00	10,075.00	201,500.00			
Healthy Essentials Wellness	3	162	341.30	55,290.60	1,105,812.00	152.00	24,624.00	492,480.00			
Healthy Essentials Wellness	4	56	341.30	19,112.80	382,256.00	452.00	25,312.00	506,240.00			
Healthy Essentials Wellness	5	68	341.30	23,208.40	464,168.00	20.00	1,360.00	27,200.00			
Healthy Essentials Wellness	6	68	341.30	23,208.40	464,168.00	0.00	0.00	0.00			
Healthy Essentials Wellness	7	5	341.30	1,706.50	34,130.00	325.00	1,625.00	32,500.00			
Healthy Essentials	1	1409	341.30	480,891.70	9,617,834.00	25.00	35,225.00	704,500.00			
Healthy Essentials	2	23	341.30	7,849.90	156,998.00	375.00	8,625.00	172,500.00			
Healthy Essentials	3	110	341.30	37,543.00	750,860.00	202.00	22,220.00	444,400.00			
Healthy Essentials	4	15	341.30	5,119.50	102,390.00	502.00	7,530.00	150,600.00			
Healthy Essentials	5	36	341.30	12,286.80	245,736.00	50.00	1,800.00	36,000.00			
Healthy Essentials	6	36	341.30	12,286.80	245,736.00	0.00	0.00	0.00			
Healthy Essentials Wellness Retiree	1	14							588.17	8,234.38	98,812.56
Healthy Essentials Wellness Retiree	2	3							1,235.15	3,705.45	44,465.40
Healthy Essentials Wellness Retiree	3	0							906.57	0.00	0.00
Opt Out Credit Plan	1	1074	341.30	366,556.20	7,331,124.00	0.00	0.00	0.00			
Job Share Declined Benefits	0	1	170.65	170.65	3,413.00						
FSA Extra \$250	1	1182	250.00		295,500.00						
Total Employees and Retirees		7601		2,562,651.05	51,253,021.00		373,231.00	7,464,620.00	64,121.58	769,458.96	

Option Legend	
Single	1
Spouse	2
Child(ren)	3
Family	4
Half Family Primary	5
Half Family Secondary	6
Domestic Partner	7
Child(ren) +DP	8
DP +DP Child(ren)	9
Child(ren) + DP + DP Child(ren)	10

Revenue Totals Per Year

Board Paid	\$51,253,021.00
Employee Premium	\$7,464,620.00
Retiree Premium	\$769,458.96
Total	\$59,487,099.96

Center for Employee Health and Advisor **Update**

February 21, 2023

Plan year: 10/1/2022 – 9/30/2023

Quarterly Board Workshop

People Helping People

Every Child, Every Chance, Every Day!



Every Child, Every Chance, Every Day!



AGENDA

I.	Opening Remarks	Dr Pace
II.	SDOC Center for Employee Health	
	A. <i>On Spot Dermatology</i> roll out	Kenneth Aldridge
	B. Transition to <i>People One</i>	
	C. Opportunities with Proposed Health Center only plan	
III.	Financial Update	Ashley Bacot
IV.	Orlando Health Telehealth	Carolyn Grant
VI.	Actuarial Information for Benefits Committee meeting	Carolyn Grant
VII.	Questions / Discussion	

Every Child, Every Chance, Every Day!



Health Center Update

“People Helping People”

Center for Employee Health

UTILIZATION OVERVIEW



Service Type	Scheduled	Late Cancel	No-Show	Completed Encounters	Unique Patients	Patients Per Day (Average)
Medical	1,540	8	46	1,486	980	65
Chiropractor	174	1	3	170	113	10
Physical Therapy	347	6	12	329	104	16
Wellness Coaching	93	0	5	88	87	8
Disease Management	1	0	0	1	1	1
Occupational Health	20	0	1	19	19	2
Workers Comp	54	0	4	50	14	3
Overall - Total	2,229	15	71	2,143		

**December 1 to
December 31, 2022**

**MAIN
LOCATION**

Overall – Total

2,293

Additional Services	Completed	**These numbers are included under the medical category above
Mental Health / Counseling**	70	
Ophthalmologist / Eye Exam **	13	
X-Ray	150	

Service Type	1-2 Times	3-5 Times	6+ Times
Medical	887	90	3
Chiropractor	99	14	0
Physical Therapy	54	34	16
Wellness Coaching	87	0	0
Disease Management	1	0	0
Occupational Health	19	0	0
Workers Comp	5	7	2

Individuals that have accessed the Center for Employee Health 1-2 times, 3-5, 6+ times in the selected time frame.

Center for Employee Health



UTILIZATION OVERVIEW

December 1 to December 31, 2022

Service Type	Scheduled	Late Cancel	No-Show	Completed Encounters	Unique Patients	Patients Per Day (Average)
Medical	40	0	2	38	35	6
Wellness Coaching	1	0	0	1	1	1
Disease Management	1	0	0	1	1	1
Overall - Total	42	0	2	40		

**POINCIANA
LOCATION**

Individuals that have accessed the Center for Employee Health 1-2 times, 3-5, 6+ times in the selected time frame.

Service Type	1-2 Times	3-5 Times	6+ Times
Medical	34	1	0
Wellness Coaching	1	0	0
Disease Management	1	0	0

Center for Employee Health



TRENDING INFORMATION: December 2021 – December 2022

Completed Encounters	2021	2022												Total		
	Dec	Jan	Feb	Mar	Apr	Medical Encounters				May	Jun	Jul	Aug		Sept	Oct
ANN VISIT				95	139	172	226	291	182	114	124	127	138	1,608		
EYE EXAM	41	12	20	20	18	17	21	25	6	9		13	13	215		
MED EST	316	266	264	299	242	256	293	251	286	248	313	305	354	3,693		
MED EST 60	130	98	150	100	40	42	37	38	45	31	43	47	40	841		
MED NEW	41	36	38	29	6	9	4	6	4	4	17	22	17	233		
MED URGEST	59	37	48	89	77	98	103	85	110	123	81	76	105	1,091		
MED URGNEW	22	14	17	26	20	9	20	8	18	28	24	19	21	246		
MNTLHEALTH	82	86	98	99	99	97	85	78	82	61	73	67	70	1,077		
NV LAB	238	184	203	295	248	220	356	328	285	236	317	298	307	3,515		
TELEHEALTH	243	331	226	315	276	267	283	221	320	250	266	225	231	3,454		
TeleVisit	5	12	5	15	18	28	20	10	26	14	16	31	40	240		
X-Ray 30	90	99	82	108	86	93	72	114	109	92	93	109	150	1,297		
Total	1,267	1,175	1,151	1,490	1,269	1,308	1,520	1,455	1,473	1,210	1,367	1,339	1,486	17,510		

Center for Employee Health



TRENDING INFORMATION: December 2021 – December 2022

Count	Telephone Interaction												Total	
	2021	2022												
	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	
Lab Results	34	41	63	49	65	47	44	35	48	30	23	23	50	552
Lab Results, Medical - Outreach						1	1		4		1		3	10
Lab Results, Medical - Outreach, Professional Collaboration											1			1
Lab Results, Professional Collaboration						2	4	3	4	1	1		1	16
Lab Results, Question for Provider							3	2		2	1	1		9
Lab Results, Question for Provider, Professional Collaboration									1					1
Lab Results, Question for Provider, Rx					1	1	1							3
Lab Results, Rx						10	3	5	2	1	5	1	1	28
Lab Results, Rx, Professional Collaboration								1			1	1		3
Medical - Outreach	10	6	7	2	5	1	4	8	6	4	10	3	8	74
Medical - Outreach, Professional Collaboration							2				1		1	4
Professional Collaboration	54	44	75	69	54	43	40	36	47	26	48	37	29	602
Question for Provider	24	13	29	17	17	21	13	15	13	10	14	17	5	208
Question for Provider, Medical - Outreach											1			1
Question for Provider, Professional Collaboration			1			3	3	2	2	1	1	2		15
Question for Provider, Rx						2	4	4	4		1	1	1	17
Rx	53	51	55	71	59	66	49	48	36	14	32	41	29	604
Rx, Medical - Outreach							1	1	1	1				4
Rx, Professional Collaboration						7	10	1	4	3	3	2	6	36
Total	175	155	230	208	201	204	182	161	172	93	144	129	134	2,188

Center for Employee Health



TRENDING INFORMATION: December 2021 – December 2022

Completed Encounters	2021	Physical Therapy												Total
	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	
PT ESTPT	244	188	236	245	211	229	283	290	220	147	114	192	227	2,826
PT ESTPT45	6	2	4	5	7	2	2	17	32	21	48	44	46	236
PT NEWPT	48	33	41	53	41	41	57	43	35	27	38	57	56	570
Total	298	223	281	303	259	272	342	350	287	195	200	293	329	3,632

Completed Encounters	2021	Wellness Coaching												Total
	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	
COACH GRP		1			2	2								5
NUTR EST	44	15	33	34	42	34	27	36	32	26	31	22	14	390
NUTR NEW	28	9	17	29	24	19	20	34	29	13	24	25	15	286
NUTRTELEST	60	90	66	85	83	60	51	61	64	49	52	50	46	817
NUTRTELNEW	11	15	11	10	4	6	7	8	9	6	9	14	13	123
Total	143	130	127	158	155	121	105	139	134	94	116	111	88	1,621

Center for Employee Health



TRENDING INFORMATION: December 2021 – December 2022

Completed Encounters	2021	2022												Total
	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	
MED WCEST	58				50	69	33	15	15		1	2		243
MED WCNEW	23			9	47	51	16	5		2	3			156
PT WCEST	119	63	53	67	99	77	77	37	30	54	34	42	45	797
PT WCNEW	16	1	9	15	11	9	10	2	6	3	4	8	5	99
WC Chiro45	1	1								1				3
WC ChPT	9	2												11
Total	226	67	62	91	207	206	136	59	51	60	42	52	50	1,309

Center for Employee Health



TRENDING INFORMATION: December 2021 – December 2022

Completed Encounters	2021	2022												Total
	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	
OCC	134	174	168	122	114	66	126	176	140	35	14	25	2	1,296
OCC 60	15				17	19	20	14	9	12	9	18	17	150
Total	149	174	168	122	131	85	146	190	149	47	23	43	19	1,446

Completed Encounters	2021	2022												Total
	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	
CHPT EST	151	110	155	156	144	164	169	159	163	132	161	146	147	1,957
CHPT NP	38	17	24	26	21	21	31	26	24	19	21	19	23	310
CHPT URG					1		1							2
Total	189	127	179	182	166	185	201	185	187	151	182	165	170	2,269

Satisfaction Survey for December 2022:

4.88 / 5

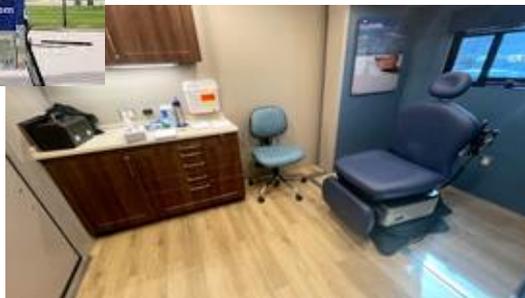


In **December 2022**
524 surveys completed

Number of surveys completed in past few months:

Jan 21	Feb 21	Mar 21	Apr 21	May 21	June 21	July 21	Aug 21	Sept 21	Oct 21	Nov 21	Dec 21
385	388	559	652	643	799	718	715	776	188	760	794
Jan 22	Feb 22	Mar 22	Apr 22	May 22	June 22	July 22	Aug 22	Sept 22	Oct 22	Nov 22	Dec 22
635	663	842	756	732	783	734	751	557	652	552	524

Roll-out of mobile dermatology program



First day onsite was January 24th

Scheduled future dates:

- February 17
- February 28
- March 4 (*Wellness 5k*)
- March 16
- March 28
- April 11
- April 25

- Acne
- Actinic Keratosis
- Alopecia
- Atopic Dermatitis
- Cosmetic Dermatology
- Cysts
- Dry Skin
- Eczema
- Folliculitis
- Fungal Infections
- Hair and Nail Conditions
- Hives
- Impetigo
- Keloids
- Lipomas
- Melanoma
- Mohs Surgery
- Moles
- Poison Ivy
- Psoriasis
- Rashes
- Rosacea
- Scalp Conditions
- Shingles
- Skin Cancer (Basal Cell & Squamous Cell Carcinomas)
- Skin Growths
- Skin Lesions
- Skin Rashes
- Warts

We offer all dermatology services that a traditional dermatology office offers.

Transition to *PeopleOne Health* Effective 1/1/2023

During the transitions, we were able to maintain 100% of the employees in the ***Center for Employee Health!***



Opportunities with Proposed Health Center only plan

Every Child, Every Chance, Every Day!



Advisor / Financial Update

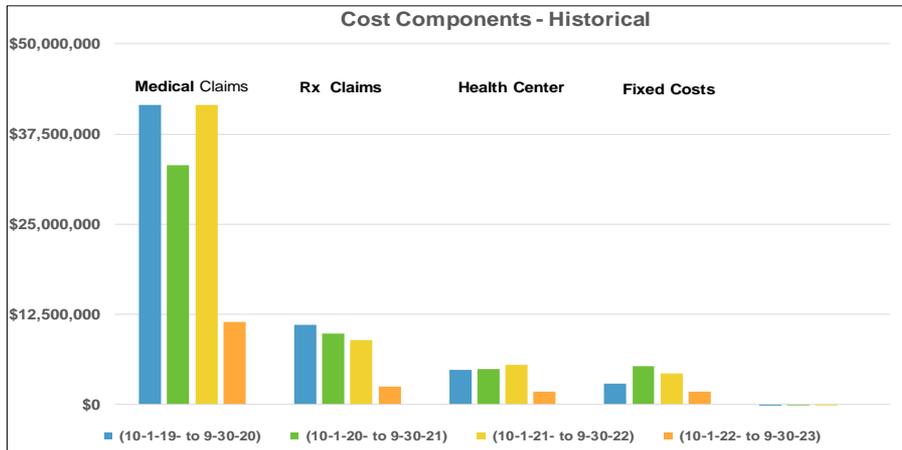
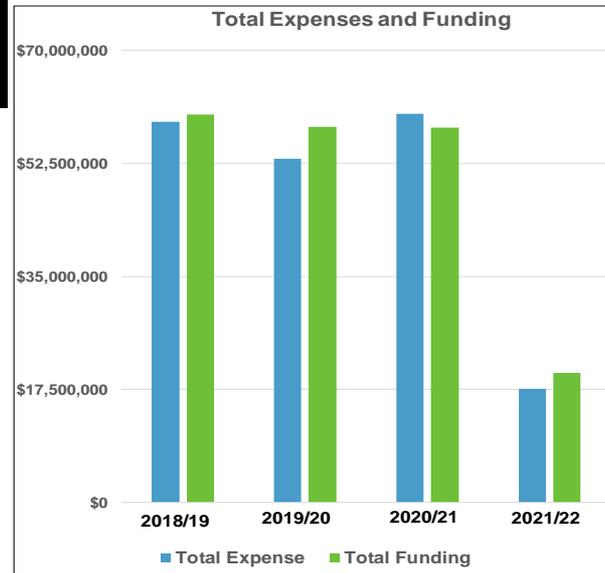
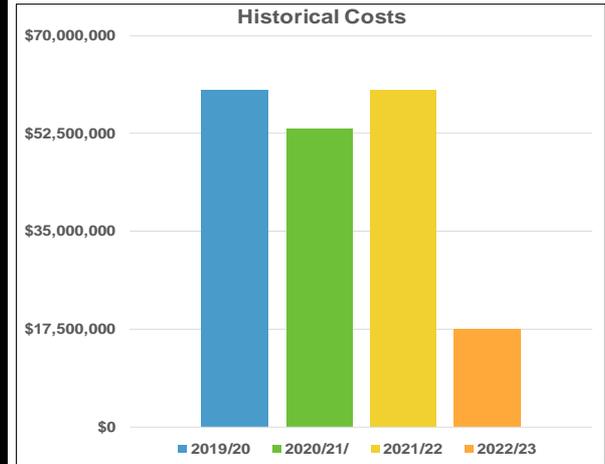
Financial Dashboard as of 1-31-23



Historical Costs / Plan Year School District of Osceola County

Oct 22 - Jan 23

Date Range:	10/1/19 to 9/30/20	10/1/20 to 9/30/21	10/1/21 to 9/30/22	10/1/22 to 12/31/22
Cost Component	2019/20 Plan	2020/21 Plan	2021/22 Plan	2022/23 Plan
Medical Claims	\$41,566,112	\$33,140,969	\$41,500,297	\$11,456,280
Rx Claims	\$11,049,021	\$9,844,133	\$8,966,174	\$2,499,324
Health Center	\$4,835,823	\$4,916,176	\$5,507,701	\$1,762,976
Fixed Costs	\$2,860,047	\$5,347,984	\$4,321,131	\$1,821,389
Claims over Specific Stop Loss	(\$1,418,812)	(\$212)	(\$62,006)	\$0
Total Expenses	\$58,992,191	\$53,249,050	\$60,233,297	\$17,539,969
Average Medical Enrollment	6,464	6,330	6,182	6,412
PEPM Total Expenses	\$761	\$701	\$812	\$684
PEPM Claims vs Previous Year	N/A	92%	116%	84%
Medical Claims PEPM	\$536	\$436	\$559	\$447
Rx Claims PEPM	\$142	\$130	\$121	\$97
Health Center PEPM	\$62	\$65	\$74	\$69
Fixed Costs PEPM	\$37	\$70	\$58	\$71
Total Funding	\$60,116,719	\$58,205,032	\$58,041,431	\$20,030,878
Difference	\$1,124,528	\$4,955,982	-\$2,191,866	N/A
Additional Funded - COVID Relief	N/A	\$2,765,331	\$2,497,405	N/A
Additional Funding Needed	\$0	\$0	\$3,000,000	





School District of Osceola County Health Plan

Rolling 12 months: Expenses vs Revenue

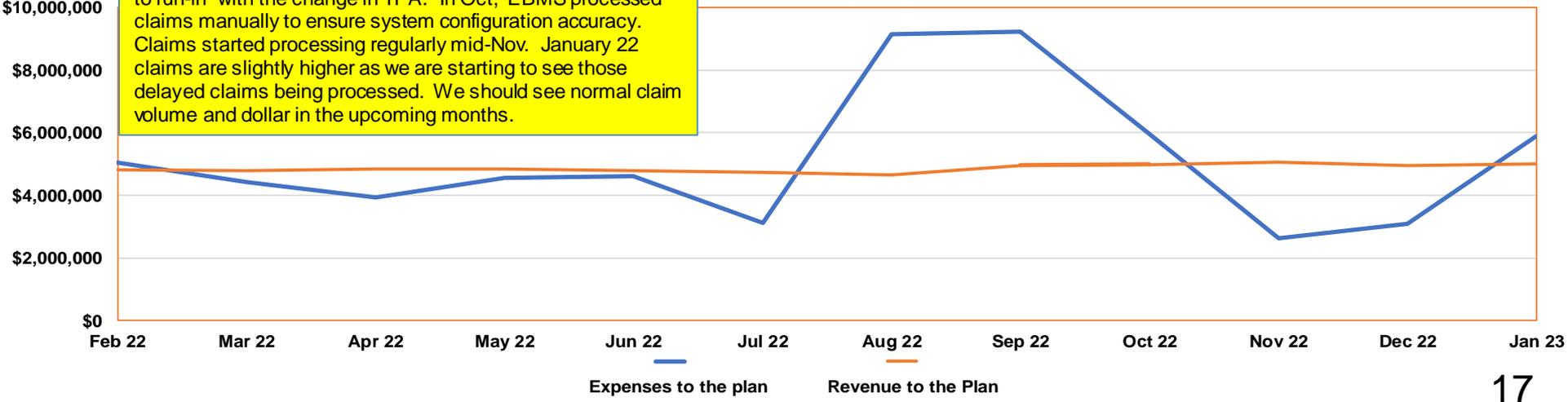
Plan Years: 10/1/2021 – 9/30/2022 and 10/1/2022 – 9/30/2023

School District of Osceola County Health Plan - Expenses to Budget Rolling 12 Months 2021/2022 and 2022/2023 Plan Years

Month	Enrolled Employees and Retirees	Medical Claims (A)	Rx Claims (B)	Health Center (C)	Paid Claims (D: Sum A-C)	Fixed Costs (E)	Total Expenses (F: Sum A-D)	Monthly Revenue to the Plan (G: Sum H-J)	Board Contribution (H)	Opt out Subsidy (I)	Employee and Retiree Contribution (J)	Budget Ratio F / G
Feb-22	6,210	\$3,708,152	\$570,760	\$418,745	\$4,697,657	\$360,673	\$5,058,330	\$4,814,226	\$3,634,845	\$513,087	\$666,294	105%
Mar-22	6,198	\$3,005,485	\$592,408	\$458,927	\$4,056,820	\$364,758	\$4,421,578	\$4,797,776	\$3,621,763	\$513,657	\$662,356	92%
Apr-22	6,274	\$2,470,770	\$654,317	\$446,817	\$3,571,904	\$365,927	\$3,937,831	\$4,840,291	\$3,655,323	\$523,895	\$661,073	81%
May-22	6,273	\$2,995,091	\$751,357	\$457,393	\$4,196,952	\$359,972	\$4,556,924	\$4,836,094	\$3,658,735	\$524,465	\$652,894	94%
Jun-22	6,218	\$3,056,966	\$646,119	\$495,038	\$4,250,106	\$364,469	\$4,614,575	\$4,799,305	\$3,627,450	\$525,601	\$646,254	96%
Jul-22	6,066	\$1,638,012	\$644,235	\$469,226	\$2,751,473	\$358,668	\$3,110,141	\$4,725,148	\$3,543,832	\$524,464	\$656,852	66%
Aug-22	5,900	\$7,664,029	\$681,227	\$471,657	\$8,816,913	\$343,790	\$9,160,703	\$4,650,659	\$3,448,268	\$523,896	\$678,495	197%
Sep-22	6,433	\$7,664,029	\$723,850	\$497,415	\$8,885,294	\$350,017	\$9,235,311	\$4,966,960	\$3,773,822	\$541,529	\$651,609	186%
Oct-22	6,405	\$4,342,470	\$708,190	\$468,314	\$5,518,974	\$451,072	\$5,970,046	\$4,992,376	\$3,702,821	\$604,670	\$684,885	120%
Nov-22	6,488	\$1,176,936	\$618,840	\$351,347	\$2,147,123	\$431,859	\$2,631,782	\$5,055,322	\$3,744,345	\$606,945	\$705,032	52%
Dec-22	6,437	\$1,586,122	\$605,527	\$455,453	\$2,647,102	\$444,062	\$3,091,164	\$4,965,941	\$3,716,473	\$610,359	\$639,109	62%
Jan-23	6,318	\$4,350,752	\$566,767	\$487,862	\$5,405,381	\$494,406	\$5,899,787	\$5,017,239	\$3,708,509	\$695,528	\$613,202	118%
YTD	75,220	\$43,658,814	\$7,763,597	\$5,478,194	\$56,945,699	\$4,257,814	\$61,688,172	\$58,461,337	\$43,836,186	\$6,708,096	\$7,213,023	106%

Claims for Nov and Dec 22 are lower than normal months due to run-in with the change in TPA. In Oct, EBMS processed claims manually to ensure system configuration accuracy. Claims started processing regularly mid-Nov. January 22 claims are slightly higher as we are starting to see those delayed claims being processed. We should see normal claim volume and dollar in the upcoming months.

Total Monthly Expenses vs Revenue



School District of Osceola County Health Plan

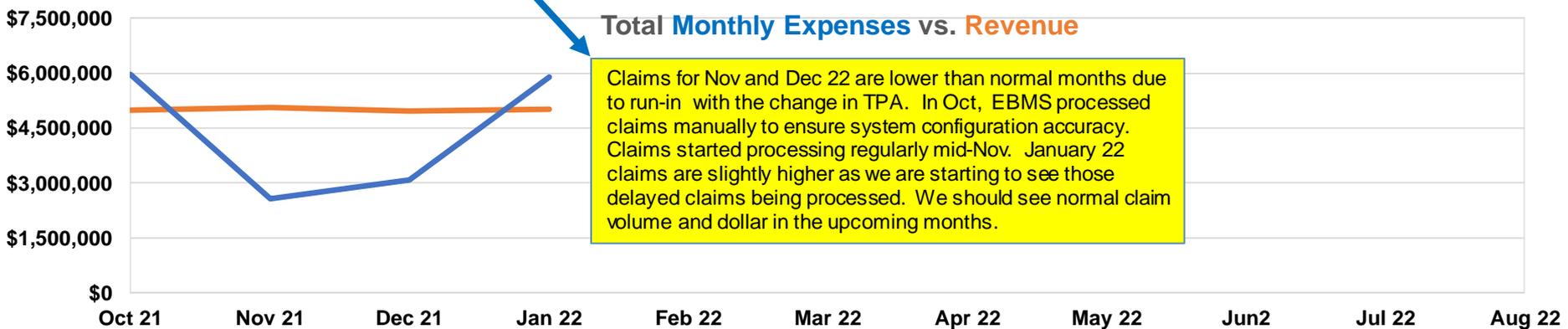
Medical Plan PAID Expenses vs Budget/Revenue – Plan Year to Date

Plan Year: 2022-2023



School District of Osceola County Medical Plan - Expenses to Budget 2022-2023 Plan Year to Date

Month	Enrolled Employees and Retirees	Medical Claims	Rx Claims	Health Center	Paid Claims	Fixed Costs	Total Costs	Monthly Revenue to the Plan	Board Contribution	Opt out Subsidy	Employee and Retiree Contribution	Budget Ratio
Oct-22	6,405	\$4,342,470	\$708,190	\$468,314	\$5,518,974	\$451,072	\$5,970,046	\$4,992,376	\$3,702,821	\$604,670	\$684,885	120%
Nov-22	6,488	\$1,176,936	\$618,840	\$351,347	\$2,147,123	\$431,859	\$2,578,982	\$5,055,322	\$3,744,345	\$605,945	\$705,032	51%
Dec-22	6,437	\$1,586,122	\$605,527	\$455,453	\$2,647,102	\$444,062	\$3,091,164	\$4,965,941	\$3,716,473	\$610,359	\$639,109	62%
Jan-23	6,318	\$4,350,752	\$566,767	\$487,862	\$5,405,381	\$494,406	\$5,899,787	\$5,017,239	\$3,708,509	\$695,528	\$613,202	118%
YTD	25,648	\$11,456,280	\$2,499,324	\$1,732,976	\$15,718,580	\$1,821,399	\$17,539,979	\$20,030,878	\$14,872,148	\$2,516,502	\$2,642,228	88%

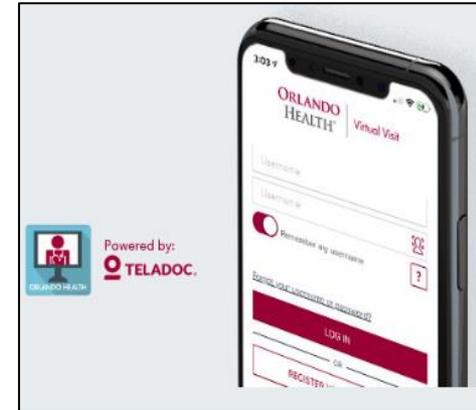


Orlando Health - TeleHealth



Orlando Health's On-Demand Virtual Visits have been very successful within our program.

- Members have access to a doctor **24/7**, from anywhere.
- Can be conducted via phone, video chat or mobile app.
- If prescription is needed, it can be called into member's pharmacy.



On-demand virtual care doctors can treat many medical conditions including:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Abrasions | <input checked="" type="checkbox"/> Respiratory Infections |
| <input checked="" type="checkbox"/> Allergies | <input checked="" type="checkbox"/> Skin Rashes |
| <input checked="" type="checkbox"/> Cold and Flu Symptoms | <input checked="" type="checkbox"/> Sore Throats |
| <input checked="" type="checkbox"/> Diarrhea | <input checked="" type="checkbox"/> Sprains and Strains |
| <input checked="" type="checkbox"/> Insect Bites | <input checked="" type="checkbox"/> And More! |
| <input checked="" type="checkbox"/> Pink Eye | |

Download the App

Click here for instructions on how to use.

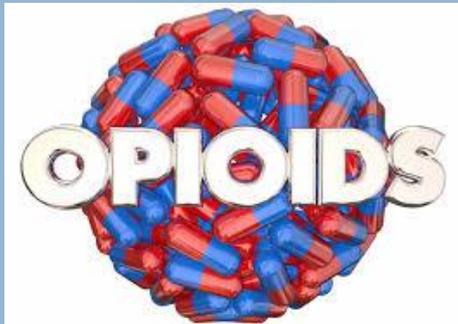
Available in the Apple App Store or Google Play Store

Download for Android

Download for iPhone or iPad

- **We have been averaging between 150-220 TeleHealth visits per month.**
- No cost to the members and provides immediate access to care.
- Steers claims away from urgent care and emergency room.

This was a \$25 copay with the former plan – increased benefit for SDOC members.



Opioid use and addiction is a national crisis.

It does not discriminate from race, occupation, gender, nor age.

These people did not go out and seek drugs...they were given a prescription by their provider. It is not their fault.

- In 2018, more than 2 million Americans were addicted to opioids. In 2021, 3 million!
- **Prescriptions are often automatically written in association with episode of “pain”, ex. Post-surgery or dental procedure.**
- Addiction can start as little as 72 hours after the first pill. Of the long-term users, more than 90 days, 75% continue using to avoid withdrawal, not the original pain.
- **Opioid addiction can have a huge effect on a member’s life and their family life. We want help each member from losing their quality of life and even losing their life.**

To help members, SDOC began working with *Opioid Clinical Management*. Their predictive analytics and healthcare data identifies opioid dependency.

- THEY DO NOT IDENTIFY THE INDIVIDUAL MEMBERS.
- They identify the physicians who are overprescribing, and work with them to adopt CDC practices.

Identify provider → Correct → Protect current and future members.

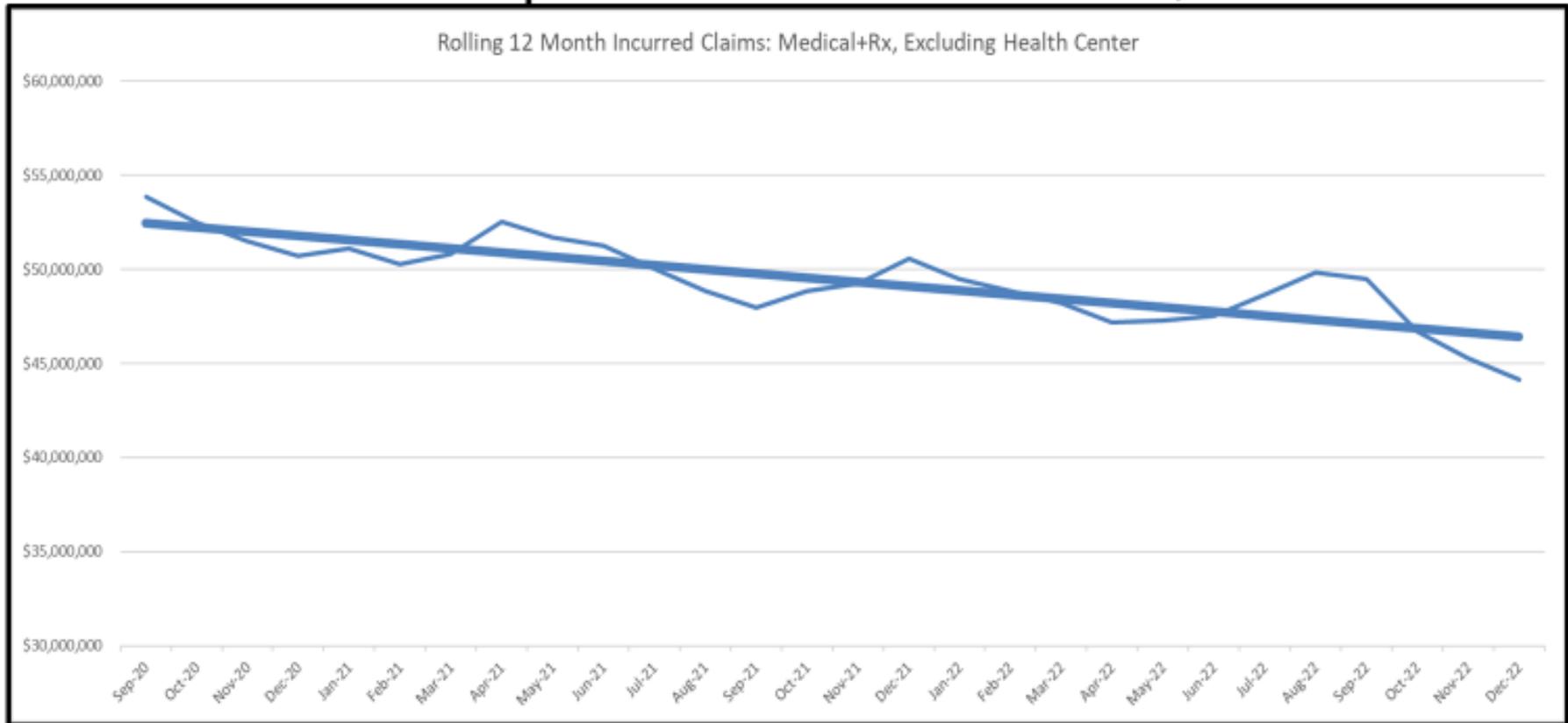
Results of the OCM program since inception:

		School District of Osceola County (SDOC)		
		End of 1st Year	End of 2 nd Year	End of 3 rd Year
Original Contract		(1/20/20)	12/ 2021	Q3' 2022
Members:	371	254	38	24
Providers:	262	234	41	32

Actuarial Information from Benefit Committee meeting



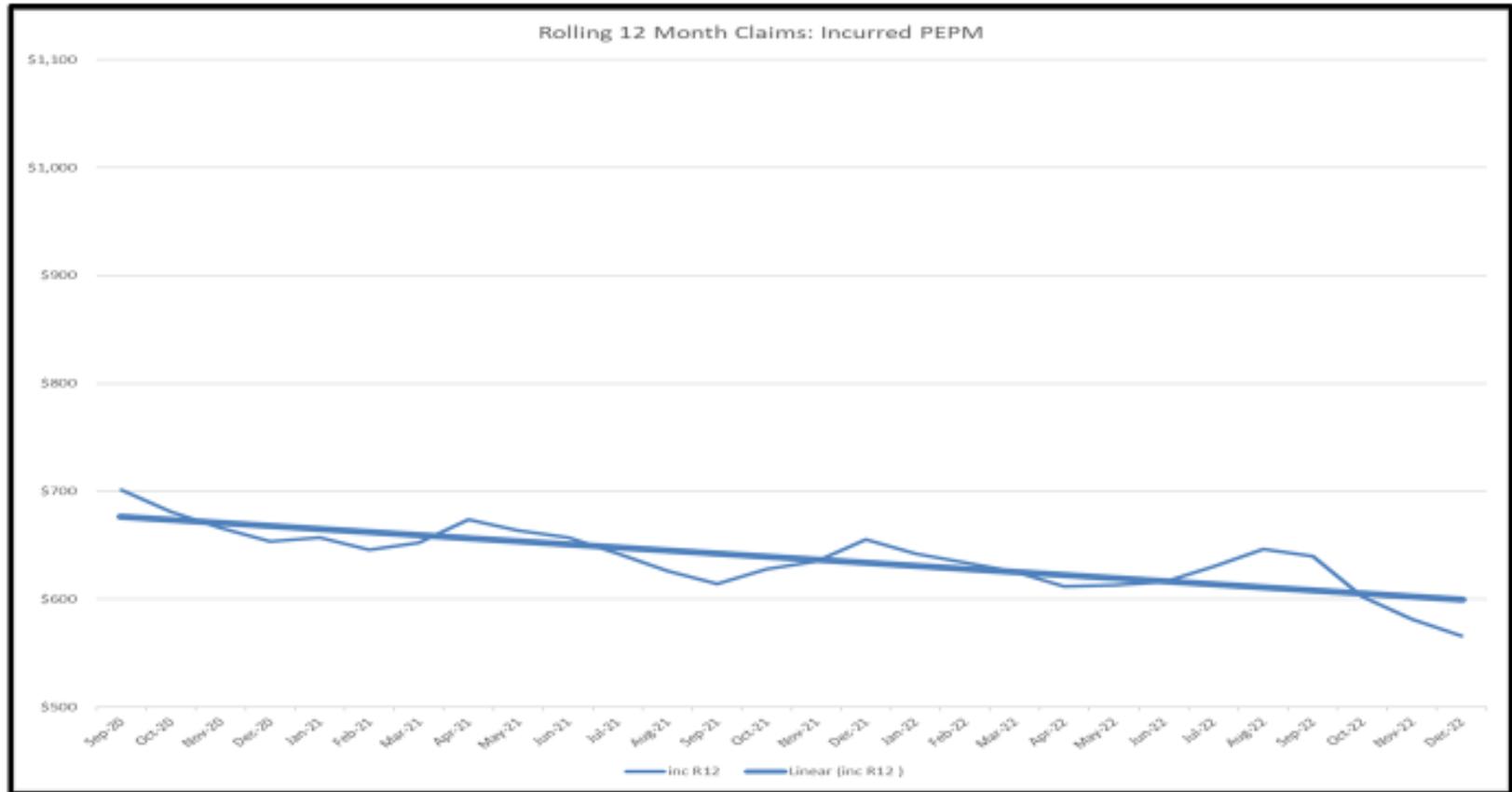
SDOC Claim experience since 2019-20, Dollars



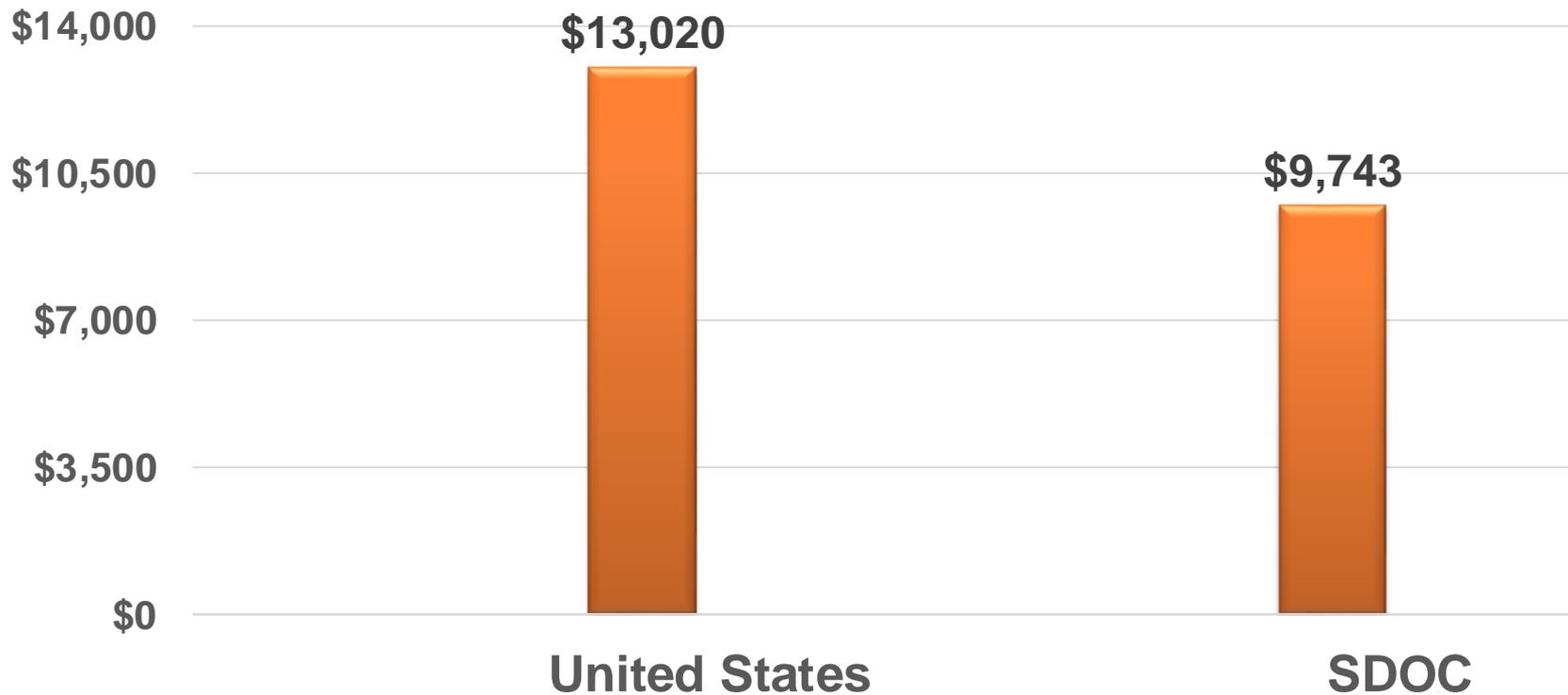
Actuarial Information from Benefit Committee meeting



SDOC Claim experience since 2019-20, PEPM



Average Total Healthcare Costs Per Employee Per Month



** Based upon a 2022 study by AON*

Actuarial Information from Benefit Committee meeting



What is Actuarial Value Calculator Methodology? CMS created the calculator www.cms.gov.

The ratio of total paid plan costs to total allowed plan costs.

Here is a clip of what the calculator looks like:

User Inputs for Plan Parameters

Use Integrated Medical and Drug Deductible?

Apply Inpatient Copay per Day?

Apply Skilled Nursing Facility Copay per Day?

Use Separate OOP Maximum for Medical and Drug Spending?

Indicate if Plan Meets CSR Standard?

Desired Metal Tier: Platinum

HSA/HRA Options		Narrow Network Options	
HSA/HRA Employer Contribution?	<input type="checkbox"/>	Blended Network/POS Plan?	<input type="checkbox"/>
Annual Contribution Amount:		1st Tier Utilization:	
		2nd Tier Utilization:	

	Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
	Medical	Drug	Combined	Medical	Drug	Combined
Deductible (\$)						
Coinsurance (%; Insurer's Cost Share)						
OOP Maximum (\$)						
OOP Maximum if Separate (\$)						

[Click Here for Important Instructions](#)

Type of Benefit	Tier 1				Tier 2			
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate
Medical	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All		
Emergency Room Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
All Inpatient Hospital Services (inc. MHSA)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Specialist Visit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Mental/Behavioral Health and Substance Abuse Disorder Outpatient Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
Rehabilitative Speech Therapy	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		

User Guide | **AV Calculator** | Platinum Cont. Table - Medical | Gold Cont. Table - Medical | Silver C ...

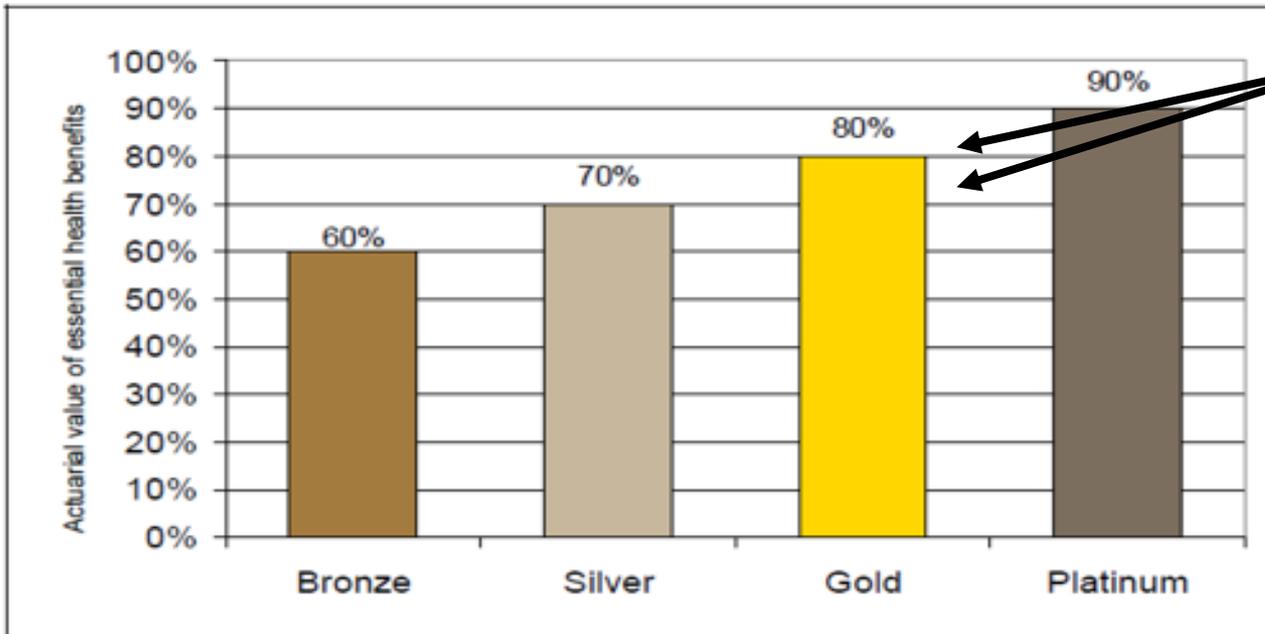
Actuarial Information from Benefit Committee meeting



Actuarial Value

A measure of the “richness” of a benefit plan, or how much is covered.

Figure 1. Actuarial Values for Levels of Coverage Provided by Qualified Health Plans



Source: CRS analysis of the Patient Protection and Affordable Care Act.



AV of SDOC plans:

- Essentials (*Base*):

.838

- Advantage (*Buy Up*):

.866

SDOC has GOLD level health plans

Every Child, Every Chance, Every Day!



Questions / Comments

Milliman **SkySail Monitoring Report**

School District of Osceola County

Timeframe: 10/1/2021-9/30/2022

Contract Type: Pass-Through

Caveats and Limitations

1. In performing analyses, we relied on data and other information provided by the PBM and Plan Sponsor. We have not audited this data and other information provided. If the underlying data or information is inaccurate or incomplete, the results of our analyses may likewise be inaccurate or incomplete.
2. Differences between our projections and actual amounts depend on the extent to which future experience conforms to the assumptions made for this analysis. It is certain that actual experience will not conform exactly to the assumptions used in these analyses. Actual amounts will differ from projected amounts to the extent that actual experience deviates from expected experience.
3. Dollar values/percentages may not sum to displayed total as a result of not rounding raw data.
4. Pharmacy information such as names and chain affiliation are based upon the most recently reviewed NCPDP pharmacy data files, which are not audited or otherwise reviewed.
5. Analyses do not include rebates/admin fees, or alternative funding programs unless explicitly stated.
6. Slide layouts may have been updated from previous reports.
7. Net Paid Claims/Net Rx Count is defined as the sum of paid (1) and reversed (-1) claims.
8. Total Gross Cost is defined as Total Drug Cost before rebates, administration fees, manufacturer assistance, and other fees/programs. Total Drug Cost is generally calculated as: (ingredient cost + dispensing fees + tax [when provided]), (plan paid + member paid), or best available evidence.
9. AWP Discount is calculated as total Ingredient Cost divided by total Medispan AWP. For positive expression, the formula is $1 - (\text{total Ingredient Cost} / \text{total AWP})$. For negative expression, the formula is $(\text{total Ingredient Cost} / \text{total AWP}) - 1$.

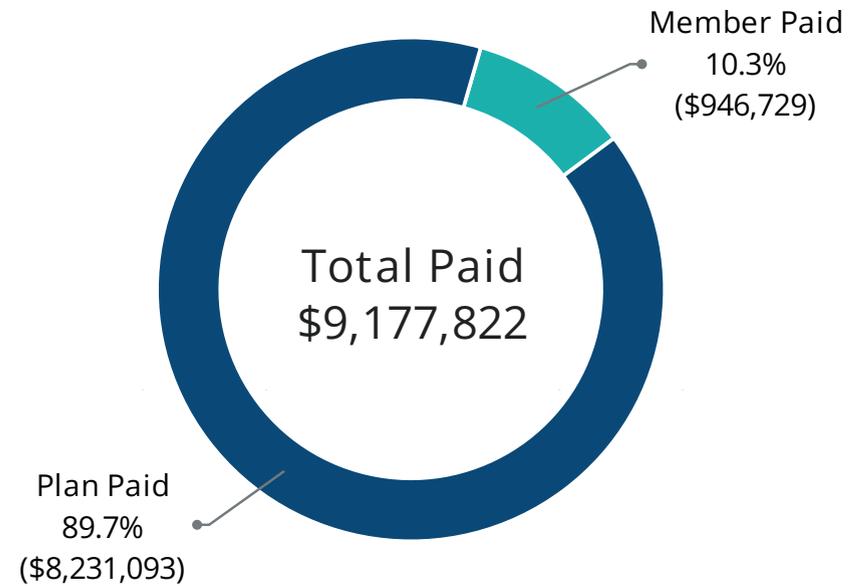
Network Costs

(Total Cost, Plan, and Member Costs)

Range Details	Statistics
Total Records	142,780
Paid Claims	109,752
Reversed Claims	-33,028
Net Paid Claims	76,724

Cost Share	Avg. Cost per Rx
Member	[REDACTED]
Plan	[REDACTED]
Total Cost	[REDACTED]

Drug Type	Avg. Cost per Rx
Brand	[REDACTED]
Generic	[REDACTED]
Specialty	[REDACTED]



The average cost per Brand Rx is 23.7 times that of Generics, while the average cost per Specialty Rx is 12.1 times that of Standard Brands.

Plan Utilization Details

Plan Details	Plan Statistics
Generic Dispensing Rate	84.3%
Member Count	8,763
Net Rx PMPM	0.73
Number of Utilizing Members	6,907
Estimated Percent of Utilizers	78.8%

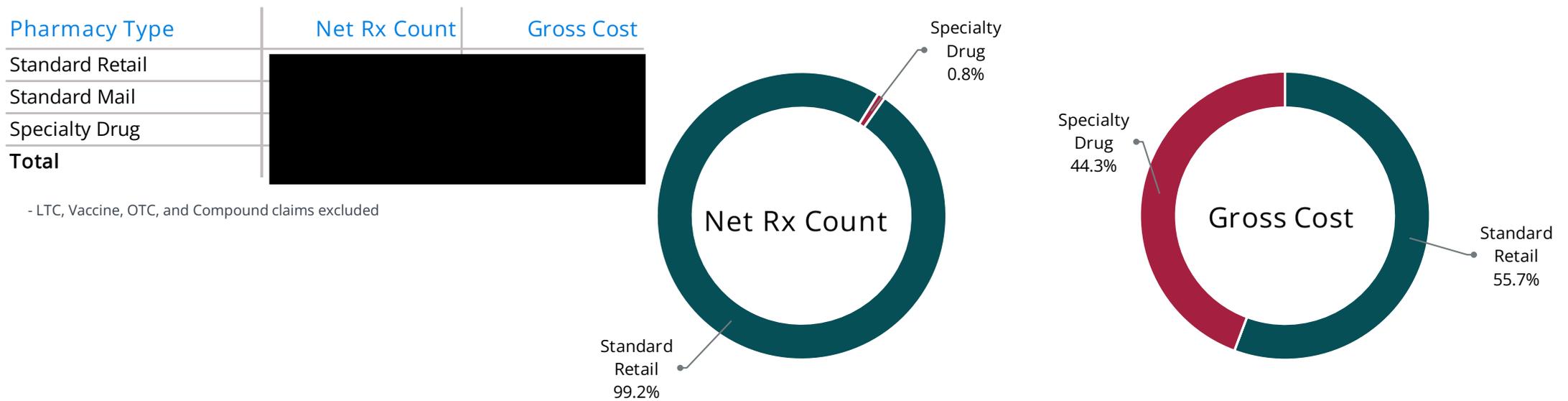
PMPM Breakout	Current Value
Non-Specialty Plan PMPM	[REDACTED]
Specialty Plan PMPM	
Total Plan PMPM	
Total Member PMPM	
Total PMPM (Plan + Member)	



- Member count is an average of information provided by the PBM from Q4 2021 - Q3 2022.
 - Please note Elect Rx information is not included.

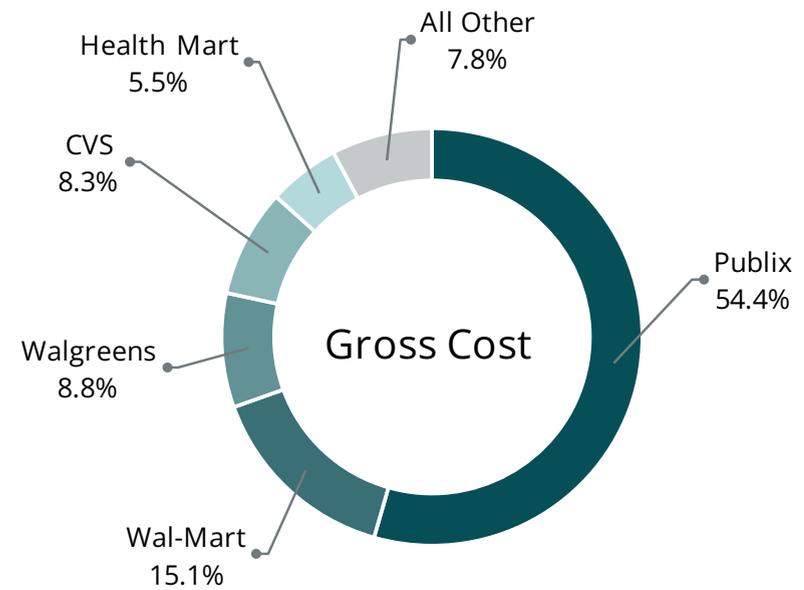
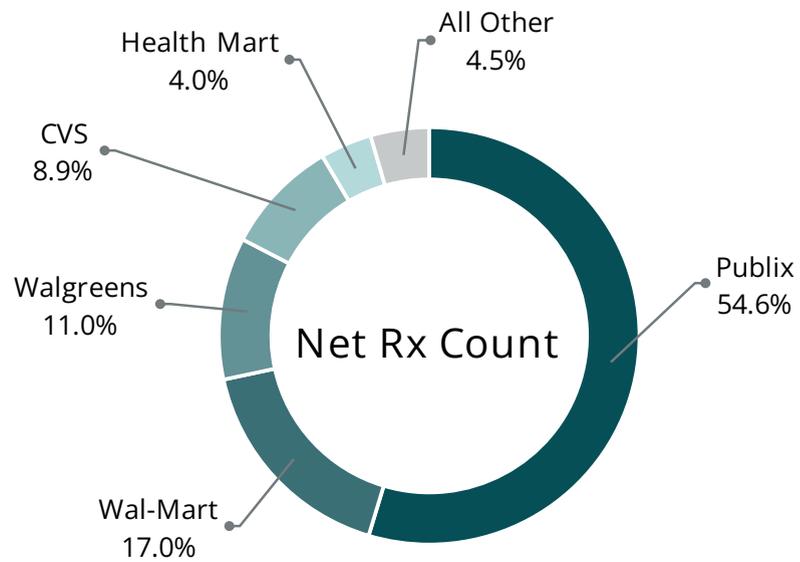
Plan PMPM increased slightly from the previous report. Based on Q1 2022 report, Elect Rx PMPM is approximately \$12.39.

Network Cost By Channel/Drug Type



Specialty claims account for 0.8% of scripts and 44.3% of the overall drug spend.

Retail Pharmacy Mix



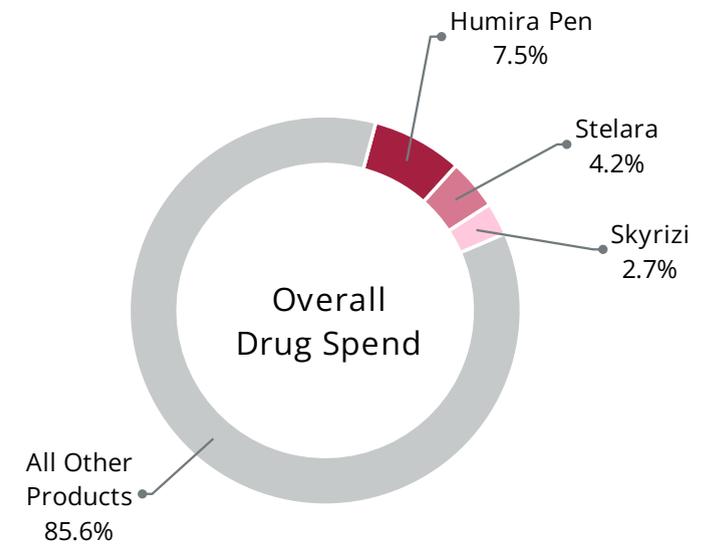
- LTC, Vaccine, OTC, Compound, and Specialty claims excluded

The chain with the most net paid claims and highest gross cost is Publix.

Specialty Drug Rate Performance

Product Name	Brand/Generic	Net Rx Count	Gross Cost	AWP Discount
Humira Pen	Brand	[REDACTED]	[REDACTED]	[REDACTED]
Stelara	Brand			
Skyrizi	Brand			
Lupkynis	Brand			
Norditropin Flexpro	Brand			
Revlimid	Brand			
Biktarvy	Brand			
Tasigna	Brand			
Calquence	Brand			
Rebif	Brand			
All Other	Combined			
Total				

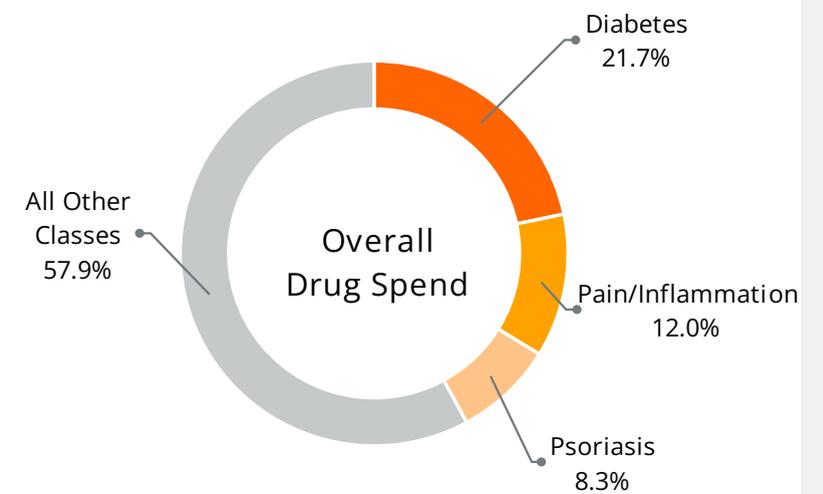
- Includes all channels
 - Claims filled through Prescription Unlimited have a \$150 dispense fee.



The three following specialty products account for 14.4% of the overall drug spend:
 Humira Pen, Stelara, and Skyrizi.

Therapy Class Summary by Cost

Therapy Class	Member Cost per Rx	Plan Cost per Rx	AWP Discount	Net Rx Count	Gross Cost
Diabetes					
Pain/Inflammation					
Psoriasis					
Oncology					
HIV/AIDS					
Asthma/COPD					
Contraceptives					
Transplant					
Anticoagulants					
Multiple Sclerosis					
All Other					
Total					



The three following therapeutic classes account for 42.07% of the overall drug spend:
 Diabetes, Pain/Inflammation, and Psoriasis.

PBM Contracted Discount vs. Actual Performance

Channel	Brand/Generic	Contracted Discount	Current Discount	Current Ing Cost	Current AWP	Discount Variance	Cost Variance
Retail30	Brand					1.48%	
Retail30	Generic					6.62%	
Retail90	Brand					1.74%	
Retail90	Generic					4.06%	
Mail	Brand					0.00%	
Mail	Generic					0.00%	
Specialty	Brand					2.49%	
Specialty	Generic					0.00%	
				Total			\$843,106

- LTC, Vaccine, OTC, Compound, COB, DMR, VA, Tribal, and 340b Claims Excluded

Across all utilized channels, current AWP discounts appear to be overperforming when compared to the PBM contract rates.

Retail 30 & 90 Generic, and specialty channels are driving most of the overperformance. Specialty discounts continue to improve due to members using Prescription Unlimited (Local provider with improved AWP discounts).

Takeaways and Opportunities

- The PBM appears to be performing well in most pricing channels resulting in a network overperformance of \$843,106 for the most recent 12-month period reviewed. After dispense fees, the total overperformance is just under **\$806,000**.
- For international utilization details, please refer the report from Elect Rx.
- Current total plan PMPM is up slightly from the previous period, however, remains within the industry average.
- Due to the plan design changes on 1/1, the use of low value products continue to trend down.
 - No Restasis utilization since Q4 2021.
 - No Dexilant utilization since Q1 2022.
- The plan implemented the copay coupon maximizer program on 10/1/2022. **Once we gather more information, we will report on the program performance.**

Milliman **SkySail** Monitoring Report

School District of Osceola County

Timeframe: 10/1/2022-12/31/2022

Contract Type: Pass-Through

Caveats and Limitations

1. In performing analyses, we relied on data and other information provided by the PBM and Plan Sponsor. We have not audited this data and other information provided. If the underlying data or information is inaccurate or incomplete, the results of our analyses may likewise be inaccurate or incomplete.
2. Differences between our projections and actual amounts depend on the extent to which future experience conforms to the assumptions made for this analysis. It is certain that actual experience will not conform exactly to the assumptions used in these analyses. Actual amounts will differ from projected amounts to the extent that actual experience deviates from expected experience.
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8. Total Gross Cost is defined as Total Drug Cost before rebates, administration fees, manufacturer assistance, and other fees/programs. Total Drug Cost is generally calculated as: (ingredient cost + dispensing fees + tax [when provided]), (plan paid + member paid), or best available evidence.
9. AWP Discount is calculated as total Ingredient Cost divided by total Medispan AWP. For positive expression, the formula is $1 - (\text{total Ingredient Cost} / \text{total AWP})$. For negative expression, the formula is $(\text{total Ingredient Cost} / \text{total AWP}) - 1$.

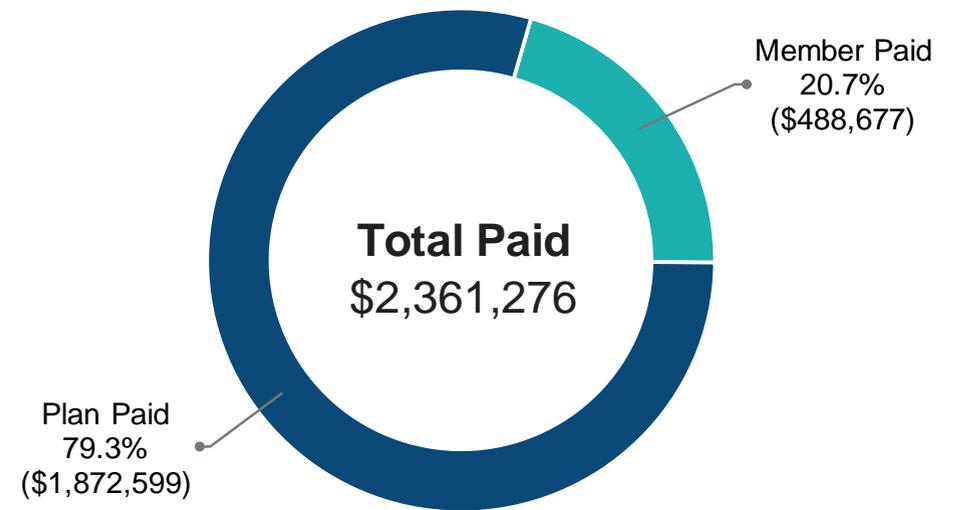
Network Costs

(Total Cost, Plan, and Member Costs)

Range Details	Statistics
Total Records	41,666
Paid Claims	31,387
Reversed Claims	-10,279
Net Paid Claims	21,108

Cost Share	Avg. Cost per Rx
Member	
Plan	
Total Cost	

Drug Type	Avg. Cost per Rx
Brand	
Generic	
Specialty	

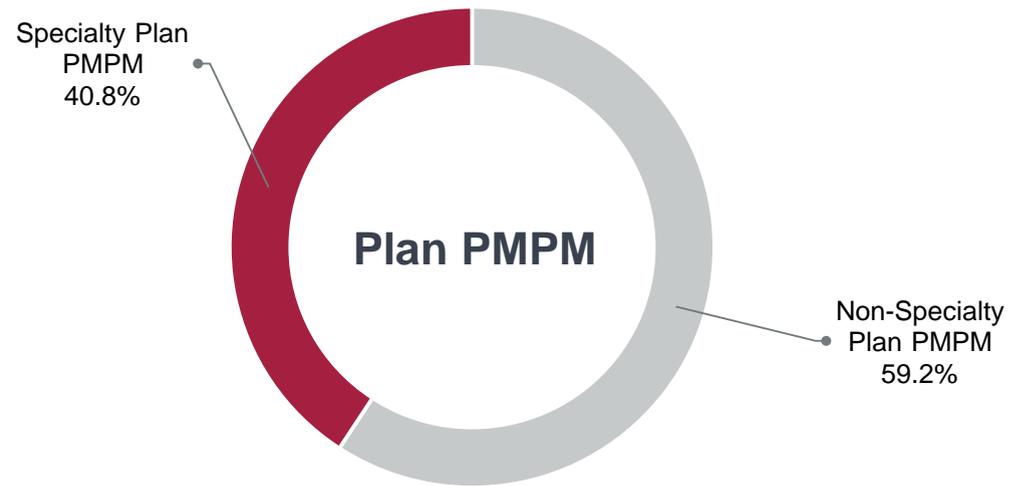


The average cost per Brand Rx is 26.9 times that of Generics, while the average cost per Specialty Rx is 12 times that of Standard Brands.

Plan Utilization Details

Plan Details	Plan Statistics
Generic Dispensing Rate	81.7%
Member Count	8,886
Net Rx PMPM	0.79
Number of Utilizing Members	5,869
Estimated Percent of Utilizers	66.0%

PMPM Breakout	Current Value
Non-Specialty Plan PMPM	
Specialty Plan PMPM	
Total Plan PMPM	
Total Member PMPM	
Total PMPM (Plan + Member)	

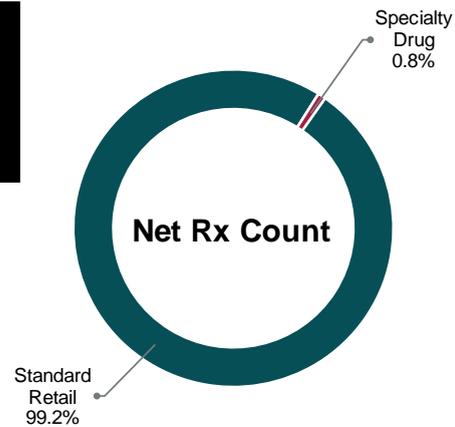


- Member Count was provided by PBM.
 - Please note Elect Rx information is not included.

Network Cost By Channel/Drug Type

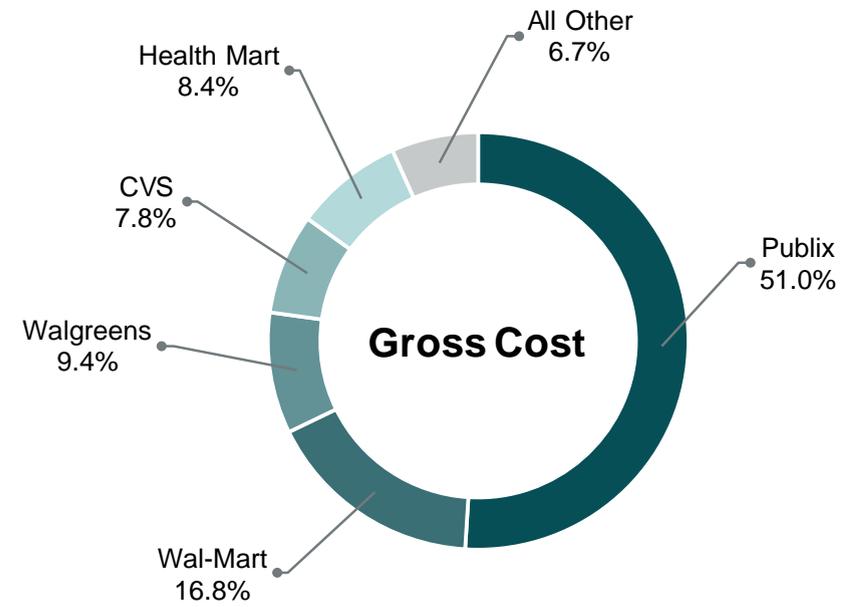
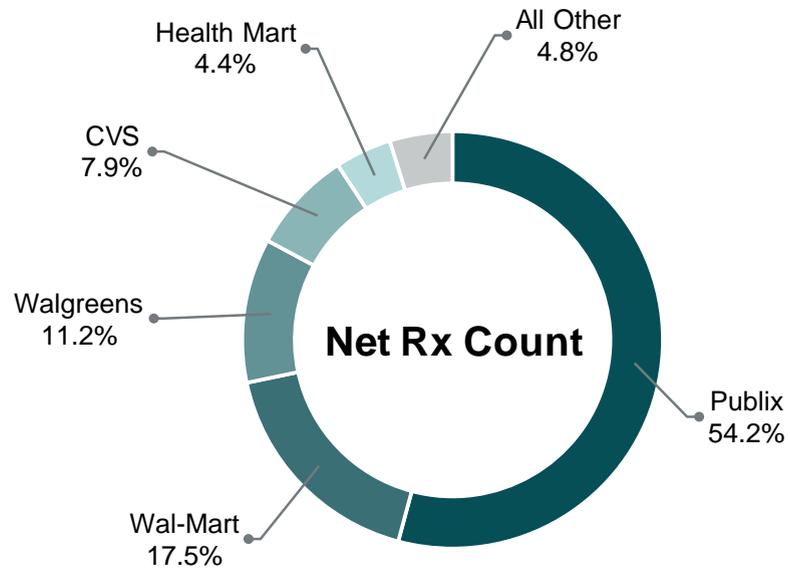
Pharmacy Type	Net Rx Count	Gross Cost
Standard Retail		
Standard Mail		
Specialty Drug		
Total		

- LTC, Vaccine, OTC, and Compound claims excluded



Specialty claims account for 0.8% of scripts and 45.5% of the overall drug spend.

Retail Pharmacy Mix

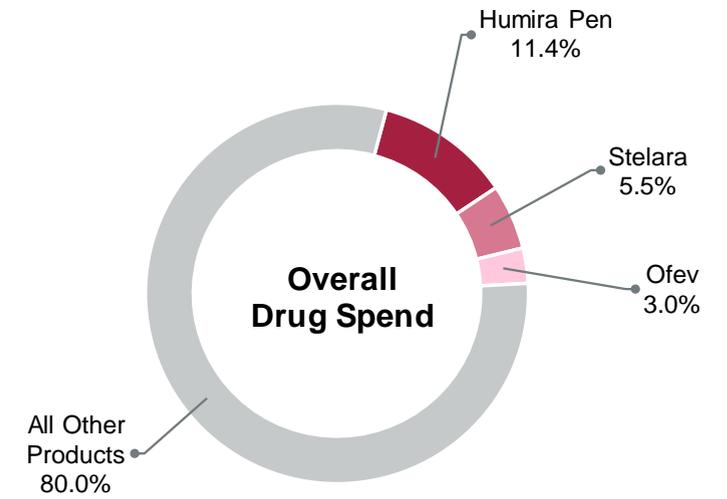


- LTC, Vaccine, OTC, Compound, and Specialty claims excluded

The chain with the most net paid claims and highest gross cost is Publix.

Specialty Drug Rate Performance

Product Name	Brand/Generic	Net Rx Count	Gross Cost	AWP Discount
Humira Pen	Brand			
Stelara	Brand			
Ofev	Brand			
Revlimid	Brand			
Biktarvy	Brand			
Lupkynis	Brand			
Rebif	Brand			
Tasigna	Brand			
Sprycel	Brand			
Norditropin Flexpro	Brand			
All Other	Combined			
Total				



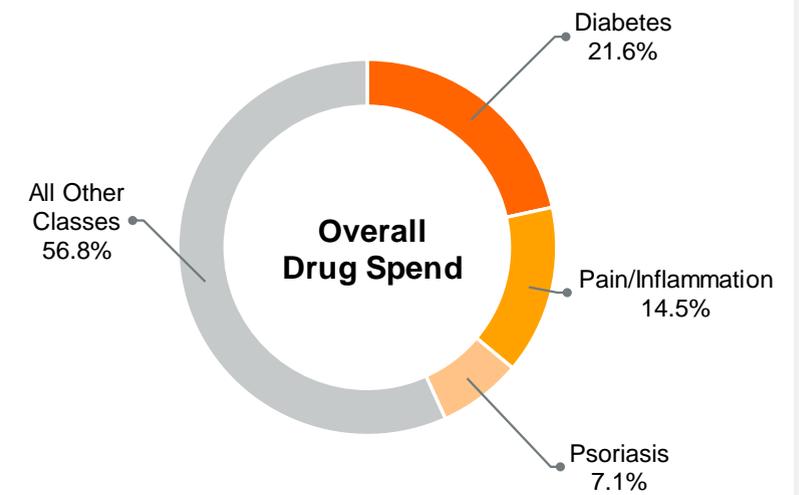
- Includes all channels
- Claims filled through Prescription Unlimited have a \$150 dispense fee.

The three following specialty products account for 20% of the overall drug spend: Humira Pen, Stelara, and Ofev.

Humira biosimilar launch expected in 2023.

Therapy Class Summary by Cost

Therapy Class	Member Cost per Rx	Plan Cost per Rx	AWP Discount	Net Rx Count	Gross Cost
Diabetes					
Pain/Inflammation					
Psoriasis					
Oncology					
Asthma/COPD					
HIV/AIDS					
Vaccines					
Pulmonary Fibrosis					
Multiple Sclerosis					
Contraceptives					
All Other					
Total					



The three following therapeutic classes account for 43.23% of the overall drug spend: Diabetes, Pain/Inflammation, and Psoriasis.

PBM Contracted Discount vs. Actual Performance

Channel	Brand/Generic	Contracted Discount	Current Discount	Current Ing Cost	Current AWP	Discount Variance	Cost Variance
Retail30	Brand	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	2.29%	[REDACTED]
Retail30	Generic					7.67%	
Retail90	Brand					1.69%	
Retail90	Generic					4.74%	
Mail	Brand					0.00%	
Mail	Generic					0.00%	
Specialty	Brand					2.94%	
Specialty	Generic					0.00%	

- LTC, Vaccine, OTC, Compound, COB, DMR, VA, Tribal, and 340b Claims Excluded

Total

[REDACTED]

\$260,514

Across all utilized channels, current AWP discounts appear to be overperforming when compared to the PBM contracted rates.

Retail 30 & 90 Generic, and specialty channels are driving most of the overperformance. Specialty discounts continue to improve due to members using Prescription Unlimited (Local provider with improved AWP discounts).

Takeaways and Opportunities

- The PBM appears to be performing well in all pricing channels resulting in an overperformance of \$263,556 for the most recent 3-month period reviewed. After dispense fees, the total overperformance is just under **\$231,000**.
- For international utilization details, please refer the report from Elect Rx.
- It appears total plan PMPM decreased due to the use of the copay maximizer program implemented on 10/1/2022.
 - As reported by the PBM, the copay assistance program has saved approximately \$267,122 in total gross cost over 3 months.
- Due to plan design changes in the previous plan year, the use of low value products continue to trend down.