

Center for Employee Health and Advisor **Update**

SEPTEMBER 2023

Plan year: 10/1/2022 – 9/30/2023

Monthly Health Services Plan Benefits Committee Meeting

People Helping People

Every Child, Every Chance, Every Day!



Every Child, Every Chance, Every Day!



— WELCOME —
NEW &
RETURNING
BENEFIT COMMITTEE MEMBERS!!!

OUR PARTNERSHIP HAS AN ALIGNED MISSION



LASER FOCUS:

Better access to quality health care at a fair price to members and the SDOC Health Services Plan.



PASSIVE TO ACTIVE MANAGEMENT



Employees and dependent
medical conditions
worsened year after year.

SDOC Center for Employee Health
was operating as an Urgent Care
Center and not as a population
health model as desired.

SDOC had to fund Health
Trust Fund with additional
monies due to increase in
claims cost.

Limited solutions presented
by partners were narrow
networks and high deductible
health plans with HSA's.

10/2020 SDOC HEALTH SERVICES PLAN

- Primary Care Services
- Diabetes Mgmt program**
- Physical Therapy
- Nutritional Counseling
- Labwork
- X-ray
- Chiropractor**

**ONSITE
HEALTH
CENTER**



Focus on
Population Health

- Administer the overall SDOC health services plan.
- Assist with member questions

**Independent
Third Party
Administrator**

Independent Network
Custom built for SDOC

Specialty contracts for
organ transplants

Independent IMAGING
Contracting Company

**Chronic Kidney Disease
(CKD) Program**

Medical Management

Navigates members to the
best quality providers with
the best outcomes at the
best cost.

Mobile Dermatology**

Mammogram Bus

OnSite Counseling**

OnSite Ophthalmology**

OnSite Pharmacy**

International Rx Program

Opioid Management Program

Independent Pharmacy Consultants

**Independent
Pharmacy
Benefit
Manager**

**Medical
Advocacy
Program**

Independent Actuary

**SDOC Risk and Benefits Dept &
Independent Advisory Team**

Independent Data Analytics

EMPLOYER CUSTOM BUILT

NOTE: ** Programs added after 10/2020



CENTER FOR
Employee
Health

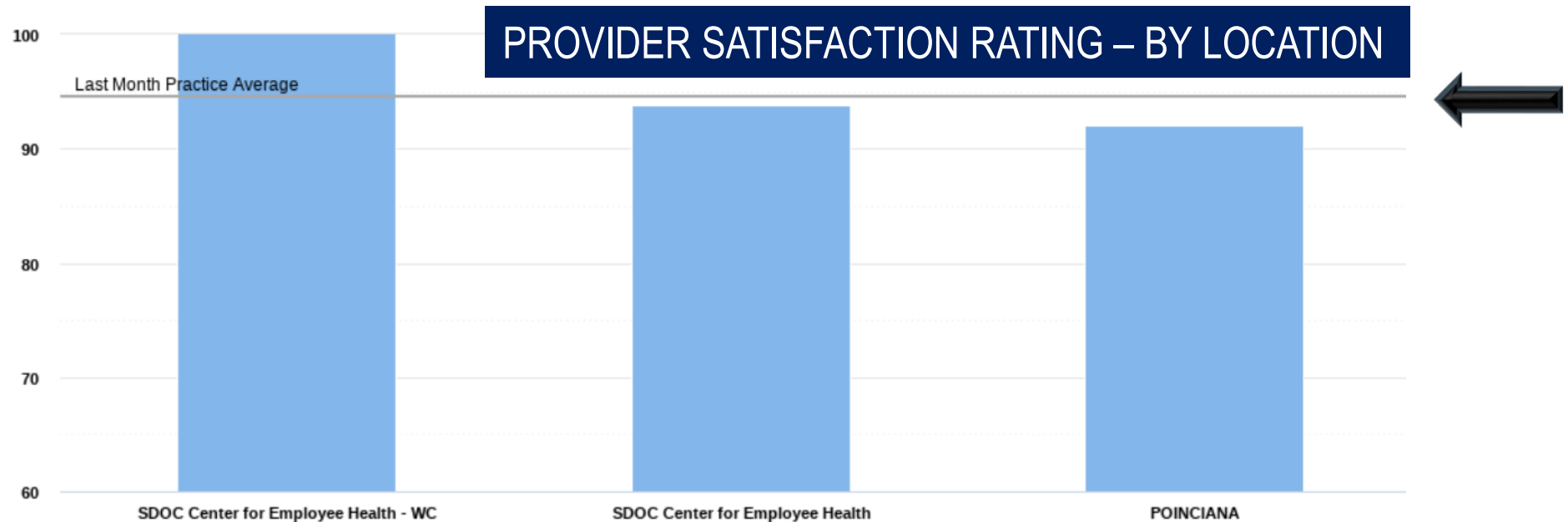
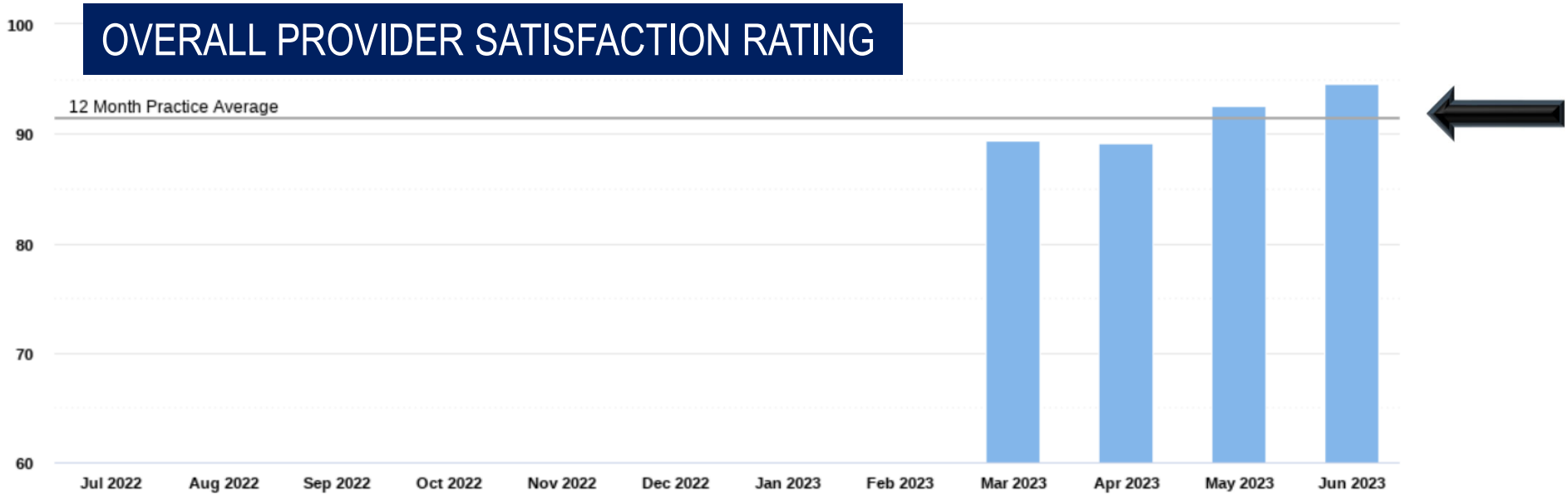
In Partnership with  ROSEN CARE™

OPENED OCTOBER 2019 WITH A FOCUS ON POPULATION HEALTH

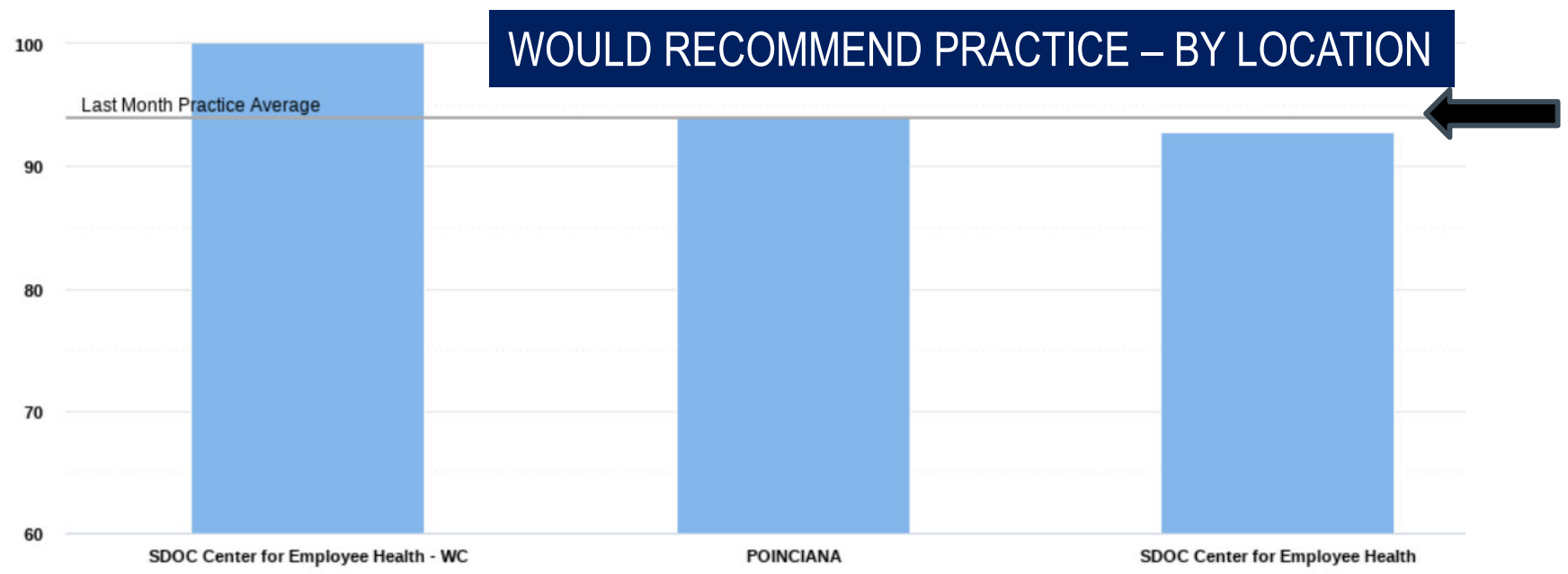
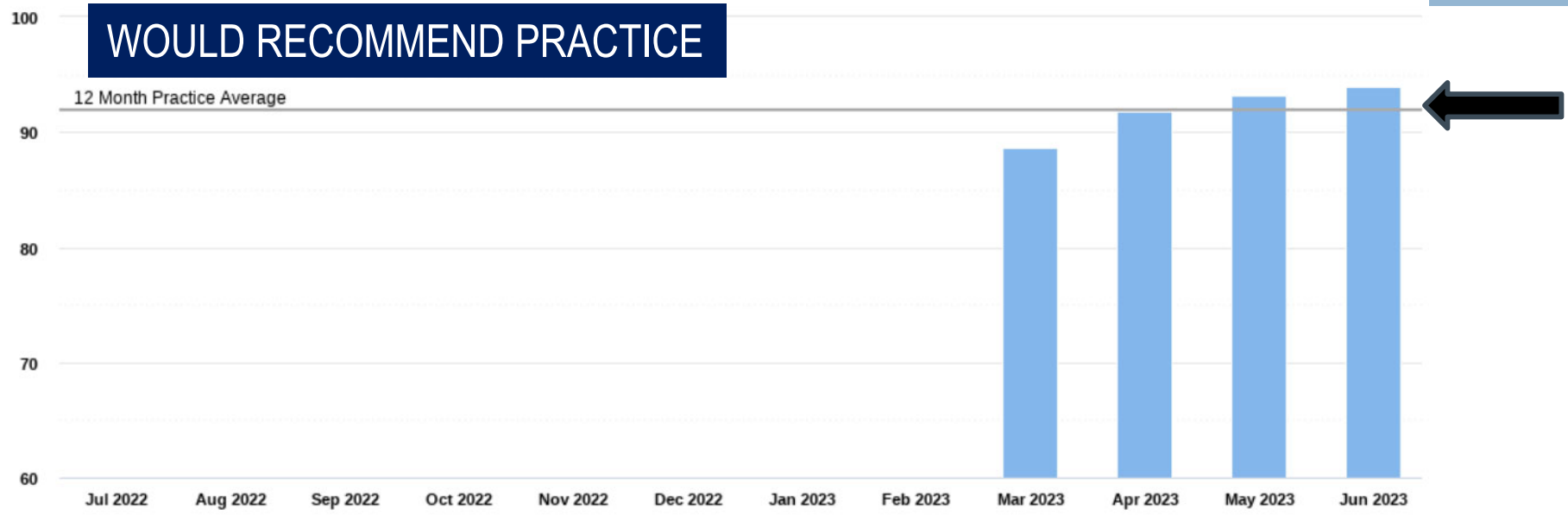
“People Helping People”

CENTER FOR EMPLOYEE HEALTH RECENT SURVEY BY INDEPENDENT FIRM + 800 RESPONSES

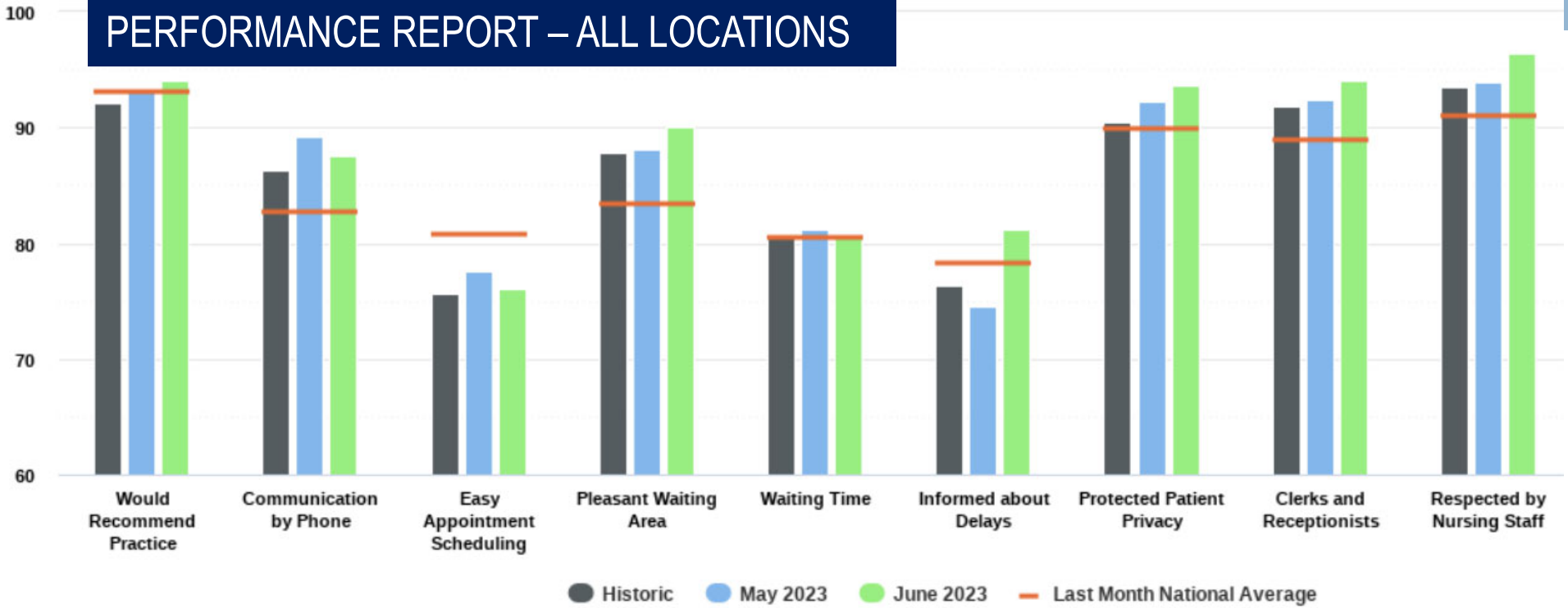
**ADDITIONAL SURVEY
RECENTLY
CONDUCTED**



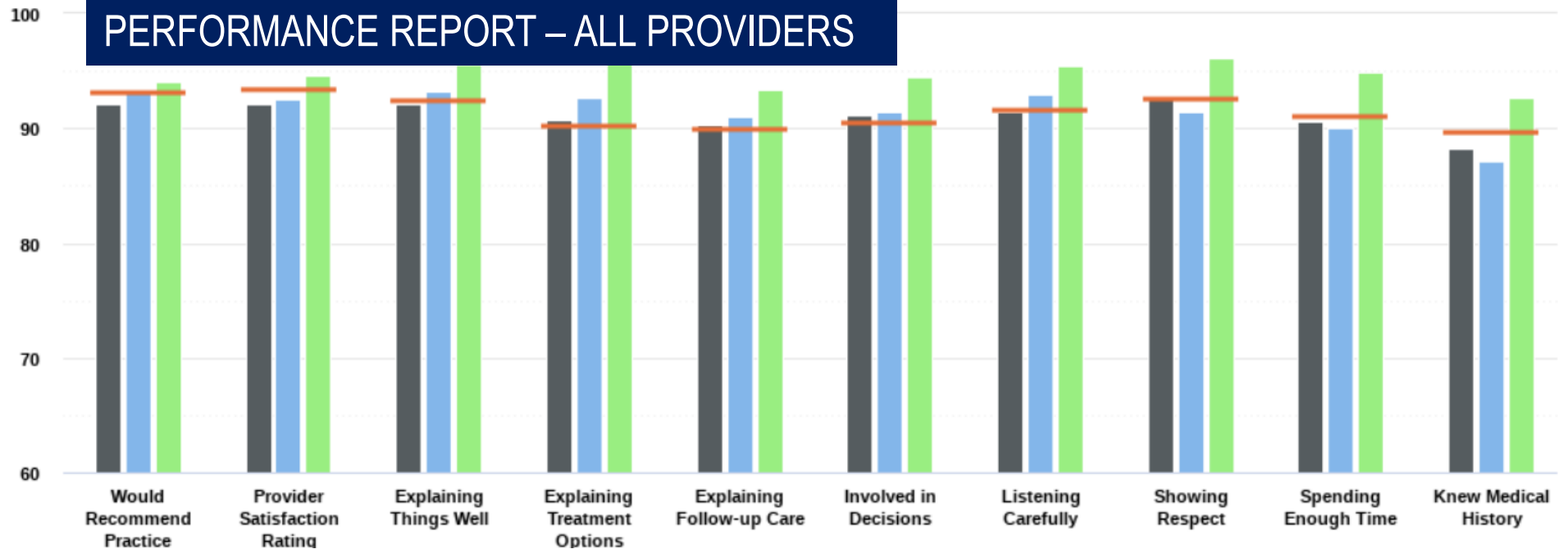
CENTER FOR EMPLOYEE HEALTH RECENT SURVEY BY INDEPENDENT FIRM + 800 RESPONSES



PERFORMANCE REPORT – ALL LOCATIONS



PERFORMANCE REPORT – ALL PROVIDERS



CENTER FOR EMPLOYEE HEALTH

RECENT SURVEY BY INDEPENDENT FIRM

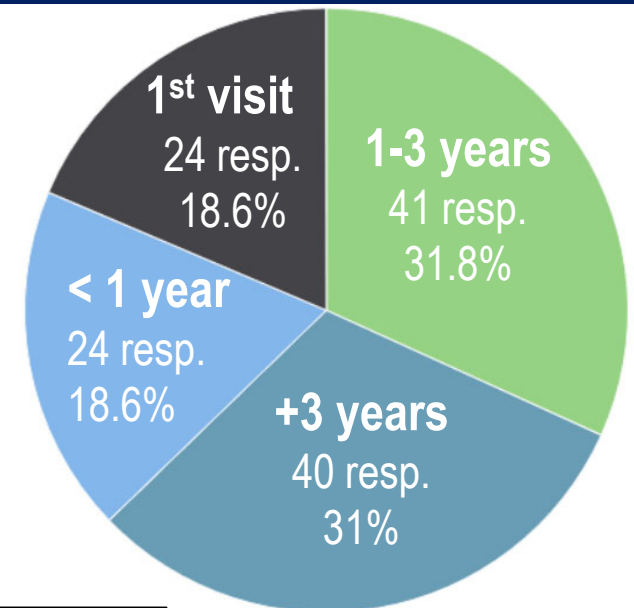
+ 800 RESPONSES



PROVIDER COMMUNICATION

	SDOC Health Center	National Average	# Resp
Explaining Things Well	98.51%	92.39%	674
Explaining Treatment Options	95.78%	90.21%	674
Explain Follow-up Care	95.67%	89.83%	671
Listening Carefully	97.28%	91.81%	654
Spending Enough Time	97.91%	91.02%	682

“HOW LONG HAVE YOU BEEN GOING TO THE HEALTH CENTER?”
(129 responses)



PRACTICE OPERATIONS

	SDOC Health Center	National Average	# Resp
Easy Appointment Scheduling	77.96%	80.82%	688
Communication by Phone	91.50%	82.76%	651
Waiting Time	90.56%	80.49%	642
Informed About Delays	88.50%	78.20%	542
Clerks and Receptionists	92.60%	88.94%	670
Respected by Nursing Staff	94.62%	91.05%	656

Identified area of improvement needed

Every Child, Every Chance, Every Day!



ADVISOR / FINANCIAL UPDATE

FINANCIAL DASHBOARD as of 7-31-2023



Historical Health Plan Costs / Plan Year School District of Osceola County

Oct 22 - Jul 23
(10 Months)

DATE RANGE	10/1/18 to 9/30/19	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 7/30/23
COST COMPONENT	2018/19 Plan Year	2019/20 Plan Year	2020/21 Plan Year	2021/22 Plan Year	2022/23 Plan Year
Medical Claims	\$45,967,272	\$41,566,112	\$33,140,969	\$41,500,297	\$29,791,691
Rx Claims	\$12,307,935	\$11,049,021	\$9,844,133	\$8,966,174	\$7,654,173
Health Center	\$3,000,000	\$4,835,823	\$4,916,176	\$5,507,701	\$4,861,117
Fixed Costs	\$2,906,857	\$2,860,047	\$5,347,984	\$4,321,131	\$4,145,178
Claims over Specific Stop Loss	(\$328,850)	(\$1,418,812)	(\$212)	(\$62,006)	\$0
TOTAL EXPENSES	\$63,853,214	\$58,992,191	\$53,249,050	\$60,233,297	\$46,452,159
TOTAL REVENUE/ FUNDING	\$56,092,962	\$60,116,719	\$58,205,032	\$58,041,431	\$49,934,987
\$ Difference Revenue/Expenses	-\$7,760,252	\$1,124,528	\$4,955,982	-\$2,191,866	\$3,482,828
Ratio - Expenses to Revenue	113.83%	98.13%	91.49%	103.78%	93.03%
Additional Funded - COVID Relief	N/A	N/A	\$2,765,331	\$2,497,405	N/A
Additional Funding Needed	\$10,000,000	\$0	\$0	\$3,000,000	-
Average Medical Enrollment	6,563	6,464	6,330	6,182	6,353
PEPM TOTAL EXPENSES	\$811	\$761	\$701	\$812	\$731
PEPM Claims vs Previous Year	105%	N/A	92%	116%	90%
Medical Claims PEPM	\$584	\$536	\$436	\$559	\$469
Rx Claims PEPM	\$156	\$142	\$130	\$121	\$120
Health Center PEPM	\$38	\$62	\$65	\$74	\$77
Fixed Costs PEPM	\$37	\$37	\$70	\$58	\$65

SCHOOL DISTRICT OF OSCEOLA COUNTY HEALTH PLAN

MEDICAL PLAN PAID EXPENSES VS BUDGET/REVENUE – PLAN YEAR TO DATE

PLAN YEAR: 2022-2023



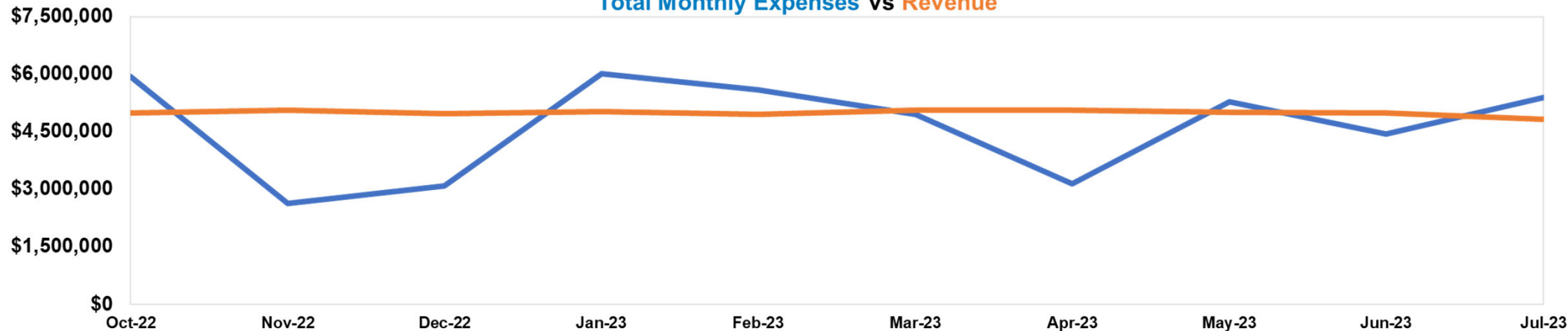
School District of Osceola County

Medical Plan - Expenses to Revenue

2022-2023 Plan Year to Date

Month	Enrolled Employees and Retirees	Medical Claims	Rx Claims	Health Center	Paid Claims	Fixed Costs	Total Costs / Expenses	Monthly Revenue to the Plan	Board Contribution	Opt out Subsidy	Employee and Retiree Contribution	Budget Ratio
Oct-22	6,405	\$4,342,470	\$675,383	\$468,314	\$5,486,167	\$451,072	\$5,937,239	\$4,992,376	\$3,702,821	\$604,670	\$684,885	119%
Nov-22	6,488	\$1,176,936	\$671,640	\$351,347	\$2,199,923	\$431,859	\$2,631,782	\$5,055,322	\$3,744,345	\$605,945	\$705,032	52%
Dec-22	6,437	\$1,586,122	\$600,906	\$455,453	\$2,642,481	\$444,062	\$3,086,543	\$4,965,941	\$3,716,473	\$610,359	\$639,109	62%
Jan-23	6,318	\$4,350,752	\$670,010	\$487,862	\$5,508,624	\$494,406	\$6,003,030	\$5,017,239	\$3,708,509	\$695,528	\$613,202	120%
Feb-23	6,359	\$4,062,815	\$605,592	\$474,176	\$5,142,583	\$450,387	\$5,592,970	\$4,957,288	\$3,660,141	\$610,944	\$686,203	113%
Mar-23	6,397	\$3,106,470	\$1,013,659	\$480,198	\$4,600,327	\$350,441	\$4,950,768	\$5,063,371	\$3,767,099	\$605,808	\$690,464	98%
Apr-23	6,396	\$1,457,186	\$856,135	\$473,462	\$2,786,783	\$349,496	\$3,136,279	\$5,063,375	\$3,767,099	\$605,807	\$690,469	62%
May-23	6,305	\$3,514,892	\$799,967	\$619,848	\$4,934,707	\$350,509	\$5,285,216	\$5,012,385	\$3,719,317	\$602,394	\$690,674	105%
Jun-23	6,269	\$2,455,235	\$960,918	\$527,956	\$3,944,109	\$496,092	\$4,440,201	\$4,986,525	\$3,700,545	\$599,550	\$686,430	89%
Jul-23	6,154	\$3,738,813	\$799,943	\$522,501	\$5,061,257	\$326,854	\$5,388,111	\$4,820,265	\$3,579,952	\$579,072	\$661,241	112%
YTD	63,528	\$29,791,691	\$7,654,153	\$4,861,117	\$42,306,961	\$4,145,178	\$46,452,139	\$49,934,087	\$37,066,301	\$6,120,077	\$6,747,709	93%

Total Monthly Expenses vs Revenue





SCHOOL DISTRICT OF OSCEOLA COUNTY HEALTH PLAN

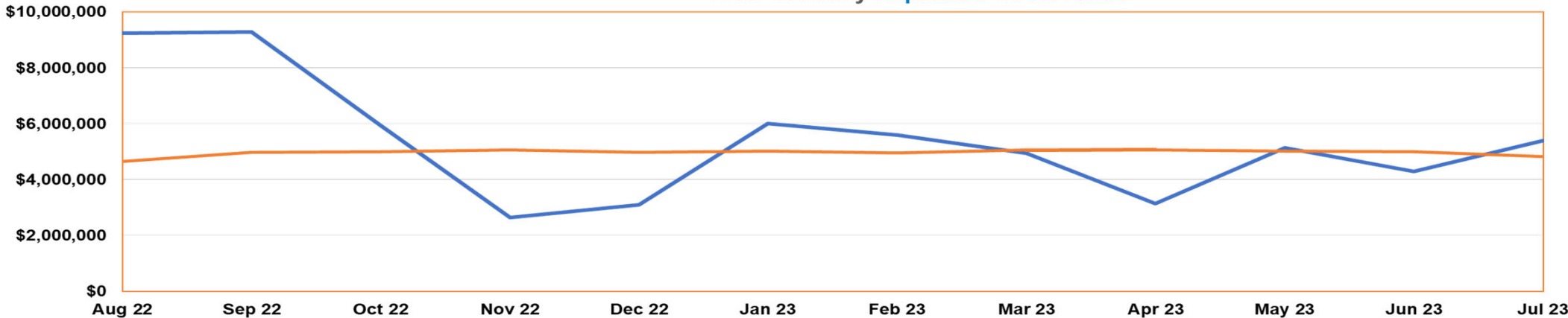
ROLLING 12 MONTHS: EXPENSES VS REVENUE

PLAN YEARS: 10/1/2021 – 9/30/2022 AND 10/1/2022 – 9/30/2023

School District of Osceola County Health Plan - Expenses to Revenue 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
Aug-22	5,900	\$7,664,029	\$764,735	\$471,657	\$8,900,421	\$343,790	\$9,244,211	\$4,650,659	\$3,448,268	\$523,896	\$678,495	199%
Sep-22	6,433	\$7,664,029	\$768,963	\$497,415	\$8,930,407	\$350,017	\$9,280,424	\$4,966,960	\$3,773,822	\$541,529	\$651,609	187%
Oct-22	6,405	\$4,342,470	\$675,383	\$468,314	\$5,486,167	\$451,072	\$5,937,239	\$4,992,376	\$3,702,821	\$604,670	\$684,885	119%
Nov-22	6,488	\$1,176,936	\$671,640	\$351,347	\$2,199,923	\$431,859	\$2,631,782	\$5,055,322	\$3,744,345	\$606,945	\$705,032	52%
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Apr-23	6,396	\$1,457,186	\$856,135	\$473,462	\$2,786,783	\$350,408	\$3,137,191	\$5,063,375	\$3,767,099	\$605,807	\$690,469	98%
May-23	6,305	\$3,514,892	\$799,967	\$619,848	\$4,789,859	\$350,509	\$5,139,859	\$5,012,385	\$3,719,317	\$602,394	\$690,674	103%
Jun-23	6,269	\$2,455,235	\$960,918	\$527,956	\$3,944,109	\$496,092	\$4,293,012	\$4,986,525	\$3,700,545	\$599,550	\$686,430	86%
Jul-23	6,154	\$3,738,813	\$799,943	\$522,501	\$5,061,257	\$326,854	\$5,388,111	\$4,820,445	\$3,579,952	\$579,072	\$661,421	112%
YTD	75,861	\$45,119,749	\$9,187,851	\$5,830,189	\$59,992,941	\$4,408,038	\$59,297,029	\$54,731,441	\$44,288,391	\$7,186,502	\$7,372,961	103%

Total Monthly Expenses vs Revenue



SCHOOL DISTRICT OF OSCEOLA COUNTY HEALTH PLAN

LARGE CLAIMS \$200,000– PLAN YEAR TO DATE

PLAN YEAR: 2022-2023



School District of Osceola County					
Plan Year 10/1/2022 to 9/30/2023					
Large Claimants Plan Year to Date					
Specific Deductible \$1,500,000 + \$135,000 aggregating deductible			Medical / Rx Claims < \$200,000		
#	Relationship	Diagnosis	Medical Claims Paid	Rx Claims Paid	Total Paid
1	Employee	Protein-Calorie Malnutrition / ESRD	\$916,465	\$8,457	\$924,922
2	Employee/Deceased	Lung Cancer / Sepsis	\$621,231	\$10,902	\$632,133
3	Employee	Thyrotoxicosis and Goiter	\$615,899	\$7,428	\$623,327
4	Dependent	ESRD and Chrohn's Disease	\$396,855	\$9,688	\$406,543
5	Employee	Heart Failure	\$351,068	\$10,716	\$361,784
6	Dependent	Hemophilia	\$343,999	\$0	\$343,999
7	Employee	Toxic Shock Syndrome/Acute Kidney Failure	\$279,913	\$10,837	\$290,750
8	Spouse	Bladder Cancer	\$287,052	\$95	\$287,147
9	Employee	Cerebrovascular Disease	\$286,641	\$70	\$286,711
10	Employee	Liver Cancer	\$263,900	\$81	\$263,981
11	Employee	Dermatopolymyositis	\$250,789	\$415	\$251,204
12	Dependent	Crohns Disease	\$1,256	\$245,195	\$246,451
13	Employee	Congestive Heart Failure	\$233,108	\$5,523	\$238,631
14	Dependent	Preterm Newborn	\$232,917	\$0	\$232,917
15	Employee	End Stage Renal Disease	\$200,817	\$297	\$201,114
					\$5,591,614

New to List **\$1,373,276**

Every Child, Every Chance, Every Day!



EMPLOYEE / MEMBER SAVINGS



EMPLOYEE / MEMBER SAVINGS



PMPM = Per Member Per Month	2018 – 2019 Previous ASO Plan	2019 – 2020 RosenSure under ASO Plan	2020 – 2021 RosenSure / Aither / Evolutions	2021 – 2022 RosenSure / Aither / Evolutions	10 Months October 2022 – July 2023 RosenSure / EBMS / Evolutions
Member Deductible PMPM	\$ 22.58	\$ 26.89	\$ 13.14	\$ 16.06	\$16.71
Co-insurance PMPM	\$ 45.70	\$ 38.63	\$ 17.25	\$ 26.29	\$29.23
Copay PMPM	\$ 11.06	\$ 10.56	\$ 8.70	\$ 16.24	\$22.64
Total Employee / Member Expense Burden for year	\$8,675,353	\$8,080,609	\$4,216,091	\$6,116,796	\$7,072,518
		<\$594,744> Savings over prior year	<\$3,864,518> Savings over prior year	\$1,900,705 Increase over prior year	\$955,722 (10 Month) Increase over prior year

EMPLOYEE / MEMBER SAVINGS

OCTOBER 2022- JULY 2023 YEAR – 10 MONTHS



Since **October 2022**, The Center for Employee Health had 21,543 member encounters and over half a million, **\$545,123**, in Member Savings.

HEALTH CENTER COPAY MEMBER SAVINGS – 10 MONTHS		ESSENTIALS PLAN TIER 1 COPAY	ADVANTAGE PLAN TIER 1 COPAY
		PCP: \$20 Specialist: \$40	PCP: \$15 Specialist: \$40
VISIT TYPE	Number of Encounters	FOR THIS EXERCISE, WE WILL ASSUME 50 / 50 ENROLLMENT IN THE PLANS	
Medical Encounters	6,895	\$120,663	
Mental Health	705	\$28,200	
Chiropractor Visits	3,596	\$143,840	
Physical Therapy	3,171	\$126,840	
Lab/X-Ray	4,227	\$73,792	
TeleHealth/TeleVisit	2,949	\$51,608	
TOTAL ENCOUNTERS	21,543		
ESTIMATED MEMBER SAVINGS HEALTH CENTER \$0 COPAY		\$545,123	

EMPLOYEE / MEMBER SAVINGS



PRESCRIPTIONS UNLIMITED

On December 19th, 2022, Prescriptions Unlimited opened its doors.



SDOC launched **\$0 Copay** for scripts transferred to Prescriptions Unlimited within first 3 months of opening. Members saved **\$20,678** in Copays for brand name scripts.

**ONSITE RX CENTER
TOTAL MEMBER SAVINGS
\$108,802**

- Generic formulary expanded to include all generic medication at a **\$0 Member Copay**.

Members saved an estimated **\$98,802** at Health Center & Prescriptions Unlimited assuming *average \$6 copay* for Generic Rx.

MONTH/ YEAR	# GENERIC SCRIPTS @ ONSITE CLINIC	ESTIMATED COST @ \$6 COPAY
Jan 2023	1,712	\$10,272
Feb 2023	1,588	\$9,528
Mar 2023	2,123	\$12,738
Apr 2023	2,069	\$12,414
May 2023	2,258	\$13,548
June 2023	2,427	\$14,562
July 2023	2,147	\$12,882
Aug 2023	2,143	\$12,858
TOTALS	16,467	\$98,802

EMPLOYEE / MEMBER SAVINGS

OCTOBER 2022- JUNE 2023 YEAR - 9 MONTHS



ELECTRX: INTERNATIONAL PHARMACY

ElectRx is a \$0 Copay for Members. Essentials & Advantage Plan Specialty Rx Benefit is subject to **50% up to \$200 Copay** all medications filled with ElectRx exceed Plan Copay maximum.

DATE RANGE	NUMBER OF PRESCRIPTIONS FILLED	DOLLAR AMOUNT OF COPAYS MEMBERS SAVED
Q1: Oct 2022 – Dec 2022	315	\$63,000
Q2: Jan 2023 – Mar 2023	317	\$63,400
Q3: April 2023 – June 2023	300	\$60,000
Q4: July 2023 – Sept 2023	Pending	
ESTIMATED 9 MONTH TOTAL	932	\$186,400

Members saved \$186,400 in 9 Months of copays / co-insurance by utilizing ElectRx since October 2022 through June 2023.

EMPLOYEE / MEMBER SAVINGS



IMAGING SAVINGS WITH GREEN IMAGING

OCTOBER 2022- JULY 2023 YEAR:

Members pay deductible and coinsurance for major imaging unless they engage with **GREEN IMAGING**, they pay \$0 (no deductible, no copay).

SDOC GREEN IMAGING EXAMS OCTOBER 2022 - JULY 2023						
PROCEDURE	TOTAL # SCANS	SDOC GREEN IMAGING AVERAGE \$	NATIONAL AVERAGE \$	TOTAL SPEND @ NATIONAL AVERAGE \$	GREEN IMAGING MEMBER DEDUCTIBLE INCENTIVE SAVINGS	MEMBER SAVINGS OVER NATIONAL AVERAGE \$
MRI	850	\$430	\$2,850	\$2,422,500	\$365,500	\$2,057,000
CT	539	\$430	\$3,000	\$1,617,000	\$231,770	\$1,385,230
Ultrasound	1,276	\$245	\$420	\$535,920	\$312,620	\$223,300
X-Ray	513	\$85	\$125	\$64,125	\$43,605	\$20,520
Mammogram	1,077	\$215	\$290	\$312,330	\$231,555	\$80,775
Nuclear Bone Scan	41	\$940	\$1,286	\$52,726	\$38,540	\$14,186
Totals	4,296				\$1,223,590	\$3,781,011

Members with Non-Green Imaging claims spent **\$292,979** out of pocket since October 2022.

GRAND SAVINGS TOTAL

EMPLOYEE / MEMBER SAVINGS – ALL PROGRAMS



SDOC Employees / Members have saved **\$2,063,915** in out-of-pocket copays, deductibles & coinsurance since October 2022!

SDOC BENEFIT PROGRAM	ENCOUNTERS	MEMBER SAVINGS
Center for Employee Health 10/1/22-7/31/23	21,543	\$545,123
Prescriptions Unlimited Onsite Rx Clinic 1/1/23-8/30/23	16467	\$108,802
ElectRx International Pharmacy 10/1/22- 6/30/22	932	\$186,400
Green Imaging 10/1/23 - 7/31/23	4,296	\$1,223,590
Deductible Incentive 10/1/23- 7/1/23	<i>Pending EBMS Report</i>	
GRAND SAVINGS TOTAL	43,238	\$2,063,915



APPENDIX



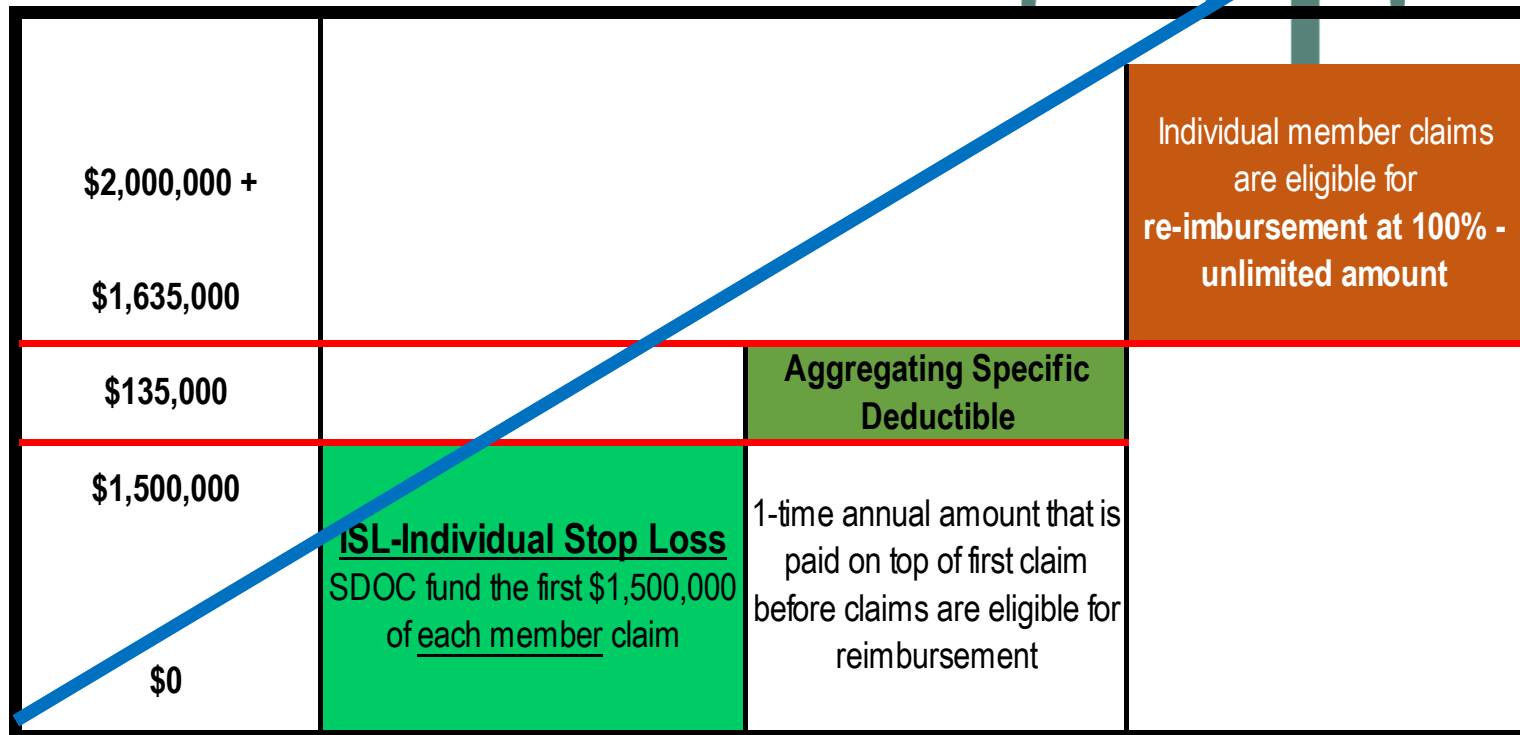
APPENDIX CONTENTS

- Stop Loss Insurance Infographic
- Green Imaging Employee/ Member Savings Example
- 2023-2024 Plan Year & Beyond New Health Plan
- 2022 Plan Year Tier 3 Claim Review
- Center for Employee Health Levels of Engagement
- Health Center Referral Process Communication materials



APPENDIX – STOP LOSS

STOP LOSS INSURANCE/ RE-INSURANCE 2023-2024 PLAN YEAR



APPENDIX - EMPLOYEE / MEMBER SAVINGS

OCTOBER 2022- JULY 2023 YEAR – 10 MONTHS



GREEN IMAGING

We negotiated a direct contract with Green Imaging using excess capacity from local imaging centers.

MEMBER SAVINGS EXAMPLE

Data suggests the average cost for a CT scan in 2022-2023 was **\$3,000** per scan with some scans costing in excess of \$30,000.

National Benchmark for a CT scan is \$3,275.

HOW MUCH ARE WE PAYING FOR A CT SCAN WITH GREEN IMAGING?

Average Member Billed Cost to Plan \$430

Employees pay \$0 – TOTAL SAVED ON AVERAGE
\$2,570 per scan (using \$430 as average cost)

Similar results for MRIs and other imaging.



NEW - "HEALTH CENTER" BASED HEALTH SERVICES PLAN

- SDOC Center for Employee Health will be member's MEDICAL HOME
- Specialist Referrals Required, **except** for the following:
 - OB-GYN / GYN
 - Pediatrician
 - Urgent Care
 - Pediatrician
 - Mental Health
 - Emergency Room

FOR THE EMPLOYEES AND MEMBERS:

- Richer benefits & lower costs to the members
- Lowest Payroll Deduction Option, competitive with OCPS

SDOC HEALTH SERVICES PLAN:

- Population Health, as modeled under the Rosen Hotels & Resorts plan
 - Better outcomes / results
 - Better overall cost PEPM for cohort population
 - INCREASED costs to the Health Center → Continued REDUCTION in cost of overall health spend.

APPENDIX - 2023-2024 PLAN YEAR- 10/1/23

Pending Ratification



		School District of Osceola County Plan Benefits for 10-1-2023					
		New Plan		PLAN 2 (BASE PLAN)		PLAN 3	
MEDICAL BENEFITS	PLAN 1	ESSENTIAL PLAN			ADVANTAGE PLAN		
	HEALTH CENTER PLAN						
Network	with Tiers 1 & 2 Only	Tier 1	Tier 2	Tier 3	Tier 1	Tier 2	Tier 3
PCP - Health Center	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Telemedicine	\$0	\$0	\$0	Not Covered	\$0	\$0	Not Covered
PCP	N/A - see above	\$20	\$40	Ded/Co-Ins	\$15	\$25	\$30
Specialist	\$30	\$40	\$80	Ded/Co-Ins	\$40	\$50	\$60
Referral Needed to Specialist?	Yes	No	No	No	No	No	No
Urgent Care	\$45	\$45	\$45	Ded/Co-Ins	\$45	\$45	\$100 copay
Convenient Care (<i>Minute Clinic</i>)	\$0 - PCP copay	\$20	\$40	Ded/Co-Ins	\$15	\$25	Ded/Co-Ins
Emergency Room	\$400 copay (waived if admitted)	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins
	any facility	any facility	any facility	any facility	any facility	any facility	any facility
Labwork at independent lab	\$0 (Health Center, Quest or LabCorp)	\$10 (Ex. Quest Diagnostics)	30% no Deductible	30% no Deductible	\$5 (Ex. Quest Diagnostics)	25% no Deductible	25% no Deductible
Labwork all other facilities	80% No Deductible	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins
Advanced Imaging	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins
Advanced Imaging through Green Imaging	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Deductible	\$500 / \$1,000	\$900 / \$1,800	\$1,250/\$2,500	\$1,250/\$2,500	\$600/\$1,200	\$950/\$1,900	\$950/\$1,900
Co-Insurance	20%	30%	30%	30%	25%	25%	25%
Maximum Out of Pocket	\$4,000/\$8,000	\$5,000/\$10,000	\$6,300/\$13,600	\$6,300/\$13,600	\$4,000/\$8,000	\$6,700 / \$12,400	\$6,700 / \$12,400
RX	Prescriptions Unlimited, Publix, Walmart only	Preferred Pharmacy	Non-Preferred Pharmacy		Preferred Pharmacy	Non-Preferred Pharmacy	
Deductible	No Deductible	No Deductible	\$300 waived for preferred generics		No Deductible	\$75 waived for preferred generics	
Generics Obtained at Health Center	\$0	\$0	\$0		\$0	\$0	
Preferred Generic	\$0	\$6	\$10		\$5	\$10	
Preferred Brand	\$45	\$45	20% up to \$75		\$40	20% up to \$50	
Non-Preferred Brand	50% up to \$150	50% up to \$150	50% up to \$200		50% up to \$125	50% up to \$150	
Specialty	\$75	50% up to \$200	Not Covered		50% up to \$200	Not Covered	
International Program with Elect Rx	\$0	\$0	\$0		\$0	\$0	

NOTE: Advent Health being removed from Tier 3 – available for Emergency only.

APPENDIX - 2022 PLAN YEAR - TIER 3 CLAIM REVIEW



TOTAL TIER 3 (including Advent Health) claims since 10/1/2022 – 5/3/2023 (8 mo.):

	Member Count	Claim Count	Total Billed Amount	Total Paid (Plan + Member)
Facility Claims	174	339	\$5,369,660	\$1,598,761
Professional Claims <i>(Doctors)</i>	1,043	3,259	\$4,151,384	\$1,072,993
Total	1,217	3,598	\$9,511,045	\$2,671,754

Advent Health claims broken out
of Tier 3 totals

28.09%

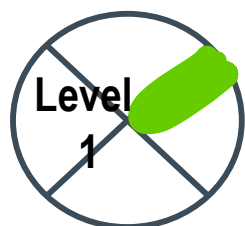
ADVENT HEALTH claims 10/1/2022 – 5/31/2023 (8 mo.)

	Member Count	Claim Count	Billed Amount	Total Paid (Plan + Member)
Facility Claims	226 <i>187 are Hospital (IN or OUT-PATIENT)</i>	1,049	\$6,507,462	\$731,063
Professional Claims	178 <i>97 are ER related</i>	772	\$150,644	\$52,339
	272 unique members**	1,821	\$6,658,106	\$783,402

**Letters being sent to these member homes regarding Advent Health

11.77%

Different “levels of engagement” of Health Center members:



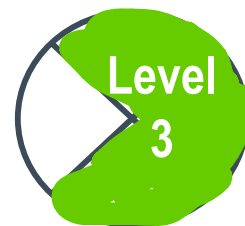
“Seldom”

May see once
a year – if ever.



“On Occasion”

May access care a
few times each year.



“Mostly In”

Use for PCP, but MAY still
have outside providers



“All In”

Use Health Center for
ALL services, appts.
several times/month


Interesting information on the Health Center population:

- Members have higher RISK scores and more conditions than “outside” population → members who are using the HC have:
 - More comorbidities, more medical needs, need more attention
- Members “comply” / follow treatment plans more
- Overall members health is improving

APPENDIX - HEALTH CENTER REFERRAL PROCESS



MEMBER & PROVIDER COMMUNICATION



REFERRAL INSTRUCTIONS

a step-by-step guide for Health Center Plan enrollees

REFERRAL ORDERED BY HEALTH CENTER PCP

- 1 **REFERRAL ORDERED BY HEALTH CENTER PCP**
Your referral will be ordered by your Health Center PCP and submitted to SentryHealth (Formerly Known as MAP (Medical Advocate Program)).
- 2 **CHECK YOUR MAIL & TAKE OUR CALL:**
SentryHealth will email you a letter with their recommendations once their research is completed. SentryHealth will call to advise that the research has been completed.
- 3 **CONTACT & SCHEDULE:**
Contact the SentryHealth recommended Specialist to schedule an appointment. Please note, your claim will be denied without the proper referral in place, or by going to a different provider other than the one on the referral.
- 4 **VANESSA, YOUR PATIENT NAVIGATOR:**
Vanessa, your Health Center Patient Navigator will fax your referral, medical records, copy of your health insurance card, and your signed medical records release form.

SPECIALIST-TO-SPECIALIST REFERRAL

- 1 **SPECIALIST MUST CONTACT SENTRY HEALTH:**
As stated on your ID Card, the Specialist office must contact SentryHealth to request a specialist referral if referring you to another specialist. Please remind the Specialist office of this if they are telling you you must see another specialist.
- 2 **CHECK THE MAIL & TAKE OUR CALL:**
SentryHealth will email you a letter with their recommendations once their research is completed. SentryHealth will call to advise that the research has been completed.
- 3 **CONTACT & SCHEDULE:**
Contact the SentryHealth recommended Specialist to schedule an appointment. Please note, your claim will be denied without the proper referral in place, or by going to a different provider other than the one on the referral.
- 4 **CONFIRM:**
Before your appointment contact SentryHealth to make certain your specialist referral is complete. Contact your new specialist and make sure they have received the referral as well. A few minutes by phone can save you potential frustration down the road!

IMPORTANT NOTE!

If you have seen a Pediatrician, OB-GYN, Mental Health or referred Specialist who now wants to refer you to another specialist: Under the Health Center Plan, a specialist-to-specialist referral requires a new hard referral, or those claims will be denied. Before seeing a specialist, you have a member responsibility to verify your referral has been completed. Prior to your specialist appointment contact SentryHealth & your Specialist to confirm your referral is received.


DEDUCTIBLE INCENTIVE:

If you are seen by a SentryHealth recommended Specialist, your deductible will be waived, when applicable. You will still be responsible for any copays, coinsurance and out-of-pocket maximums per your plan benefits.

Vanessa M., Patient Navigator | (407) 483-5408
SDOCReferrals@peopleonehealthfl.com

SentryHealth 1.844.297.0747

Billing or Benefits Questions? Please contact your EBMS Benefits Specialist at (407) 870-4900



ATTENTION SPECIALIST OFFICE:
YOUR NEW PATIENT IS ENROLLED IN THE OSCEOLA COUNTY SCHOOL DISTRICT HEALTH CENTER PLAN WHICH REQUIRES A HARD REFERRAL FOR EACH SPECIALIST-TO-SPECIALIST REFERRAL.

**SCHOOL DISTRICT OSCEOLA COUNTY
HEALTH CENTER PLAN**

SPECIALIST-TO-SPECIALIST REFERRAL PROCESS

STEP ONE

To initiate a new specialist referral your office will need to:
Contact SentryHealth at 1-844-297-0747
If the specialist referral is not done through SentryHealth the member's claim will be **DENIED**.

STEP TWO

When contacting SentryHealth please provide the following information:

1. Specialist type
2. Procedure code/diagnosis (if there is a surgery or procedure possible)
3. Facility the Specialist uses? For surgery or procedure.
4. Is the Specialist accepting new patients?
5. When is the Specialist's first available apt? (FAA)
6. Does the Specialist recognize the Evolutions Network?

SentryHealth 1-844-297-0747

CENTER FOR EMPLOYEE HEALTH PHONE NUMBER: (407) 483-5757

HEALTH CENTER REFERRAL PROCESS

A STEP-BY-STEP GUIDE FOR SDOC ESSENTIALS PLAN & SDOC ADVANTAGE PLAN ENROLLEES

REFERRAL ORDERED BY HEALTH CENTER PCP
Your referral will be ordered by your Health Center PCP and submitted to SentryHealth (Formerly Known as MAP (Medical Advocate Program)).

VERIFY YOUR ADDRESS
Please confirm your current email and home address is on file at checkout. We will need this information for your referral.

CHECK MAIL & ANSWER PHONE
SentryHealth will call and email you a letter with the referral recommendation once their research is completed.

SCHEDULE APPOINTMENT
Call the SentryHealth referred specialist's office to schedule an appointment.

DEDUCTIBLE INCENTIVE
When seen by a SentryHealth recommended Specialist, your deductible is waived, when applicable. You are responsible for any copays, coinsurance and out-of-pocket maximums per your plan benefits.

VANESSA, YOUR PATIENT NAVIGATOR
Vanessa, your Patient Navigator will fax your referral, medical records, copy of your health insurance card, and your signed medical records release form to your SentryHealth referred Specialist.

VANESSA, YOUR PATIENT NAVIGATOR

Contact us
(407) 483-5408
SDOCReferrals@peopleonehealthfl.com
SentryHealth (844) 297-0747
Billing or Benefits Questions? Please contact your EBMS Benefits Specialist at (407) 870-4900.





DO I NEED A REFERRAL?

YES. The SDOC Health Center Plan requires a *specialist referral from your Health Center PCP. Should your specialist want to refer you to another specialist, they will need to work with SentryHealth to get a new hard referral or your claim(s) will be denied.*

**You and your enrolled dependents do not need a referral to see a Pediatrician, OB-GYN, Mental Health, Urgent Care, Convenient Care (Minute Clinic), or to go to the Emergency Room.*

Employee Health Center Patient Navigator
(407) 483-5408 | SDOCReferrals@peopleonehealthfl.com

SentryHealth 1-844-297-0747

HOW DOES THE REFERRAL PROCESS WORK?

Health Center Benefit Plan

- 01. VISIT YOUR HEALTH CENTER PCP.**
If enrolled in the Health Center plan the Health Center will serve as your PCP. Enrolled children may see a Tier 1 or Tier 2 Pediatrician.
- 02. YOUR PCP WILL ORDER YOUR SPECIALIST REFERRAL THROUGH SENTRYHEALTH.**
If your Specialist, Pediatrician, or OB/GYN needs to refer you to another Specialist they must work directly with SentryHealth for a new specialist, "hard" referral.
- 03. SENTRYHEALTH WILL CONTACT YOU WITH YOUR SPECIALIST REFERRAL.**
SentryHealth 1-844-297-0747
- 04. CONTACT THE SENTRYHEALTH REFERRED SPECIALIST AND SCHEDULE YOUR APPOINTMENT.**

Employee Center for Health Patient Navigator
(407) 483-5408
SDOCReferrals@peopleonehealthfl.com



The School District of Osceola County Employee Benefits Committee Meeting

Agenda

September 20, 2023

- I. **Welcome (2 minutes)**
 - a. Speaking order volunteer
 - b. Timekeeper volunteer
- II. **Monthly Reports (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 **October 18th, 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

2023-2024 Membership

OCEA

Judi Crowell – St Cloud HS (v)
Ann Glover – OSVS (v)
Janet Moody -- OCEA/ESP Pres (v)
Laura Wassum – Narcoossee MS (v)
Rob Hainlen – Harmony HS (v)
Dylan Reinsel – St Cloud HS (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
LaToyia Edwards – Benefits Education Specialist
Iris Hernandez - Secretary
Sarah Graber – Chief Business & Finance Officer
John Boyd – Chief Negotiator
Scott Knoebel – Chief Negotiator

Prof. Support Council

Felicia Smith – School Operations (v)

ESP

LaShanna Ward – Denn John MS (v)
Susan Compton – Custodial Servs. (v)

Retirees

Ray Lackey – Retired Teacher

Benefits Consultant

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

Center for Employee Health

Kenneth Aldridge -- RosenCare
Dr. Jader Harlow -- RosenCare

Health Plan Analysis 09/13/2023 (23-24)

Summary

Plan	ENROLLMENT		
	TALLIES	Total	%
Healthy Advantage Plus	743	7783	9.55%
Healthy Advantage Plus Wellness	940	7783	12.08%
Health Center	299	7783	3.84%
Health Center Wellness	746	7783	9.58%
Healthy Essentials	1700	7783	21.84%
Healthy Essentials Wellness	2272	7783	29.19%
Opt Out Credit Plan	1083	7783	13.91%

PROJECTED REVENUE BASED ON CURRENT ENROLLMENT MINUS ADMIN FEES

Board Paid	\$57,674,616.00
Employee Premium	\$6,989,400.00
Retiree Premium	\$988,290.36
SubTotal	\$65,652,306.36
Administration Fees	(5,578,530.36)
Total	60,073,776.00

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	625	374.9	234,312.50	4,686,250.00	75.00	46,875.00	937,500.00			
Healthy Advantage Plus	2	10	374.9	3,749.00	74,980.00	500.00	5,000.00	100,000.00			
Healthy Advantage Plus	3	64	374.9	23,993.60	479,872.00	325.00	20,800.00	416,000.00			
Healthy Advantage Plus	4	18	374.9	6,748.20	134,964.00	625.00	11,250.00	225,000.00			
Healthy Advantage Plus	5	13	374.9	4,873.70	97,474.00	350.00	4,550.00	91,000.00			
Healthy Advantage Plus	6	13	374.9	4,873.70	97,474.00	0.00	0.00	0.00			
Healthy Advantage Plus Wellness	1	733	374.9	274,801.70	5,496,034.00	50.00	36,650.00	733,000.00			
Healthy Advantage Plus Wellness	2	19	374.9	7,123.10	142,462.00	450.00	8,550.00	171,000.00			
Healthy Advantage Plus Wellness	3	73	374.9	27,367.70	547,354.00	275.00	20,075.00	401,500.00			
Healthy Advantage Plus Wellness	4	24	374.9	8,997.60	179,952.00	575.00	13,800.00	276,000.00			
Healthy Advantage Plus Wellness	5	16	374.9	5,998.40	119,968.00	300.00	4,800.00	96,000.00			
Healthy Advantage Plus Wellness	6	16	374.9	5,998.40	119,968.00	0.00	0.00	0.00			
Healthy Advantage Plus Wellness	7	4	374.9	1,499.60	29,992.00	450.00	1,800.00	36,000.00			
Healthy Advantage Plus Wellness	8	0	374.9	0.00	0.00	575.00	0.00	0.00			
Healthy Advantage Plus Wellness (IS)	1	0	187.45	0.00	0.00	237.45	0.00	0.00			
Healthy Advantage Plus Wellness Retiree	1	46							821.47	37,787.62	453,451.44
Healthy Advantage Plus Wellness Retiree	2	7							1,725.22	12,076.54	144,918.48
Healthy Advantage Plus Wellness Retiree	3	1							1,273.27	1,273.27	15,279.24
Healthy Advantage Plus Wellness Retiree	4	1							2,218.14	2,218.14	26,617.68
Health Center Wellness	1	380	374.9	142,462.00	2,849,240.00	0.00	0.00	0.00			
Health Center Wellness	2	35	374.9	13,121.50	262,430.00	175.00	6,125.00	122,500.00			
Health Center Wellness	3	182	374.9	68,231.80	1,364,636.00	25.00	4,550.00	91,000.00			
Health Center Wellness	4	67	374.9	25,118.30	502,366.00	200.00	13,400.00	268,000.00			
Health Center Wellness	5	31	374.9	11,621.90	232,438.00	0.00	0.00	0.00			
Health Center Wellness	6	31	374.9	11,621.90	232,438.00	0.00	0.00	0.00			
Health Center Wellness	7	6	374.9	2,249.40	44,988.00	175.00	1,050.00	21,000.00			
Health Center	1	181	374.9	67,856.90	1,357,138.00	25.00	4,525.00	90,500.00			
Health Center	2	13	374.9	4,873.70	97,474.00	225.00	2,925.00	58,500.00			
Health Center	3	65	374.9	24,368.50	487,370.00	75.00	4,875.00	97,500.00			
Health Center	4	25	374.9	9,372.50	187,450.00	250.00	6,250.00	125,000.00			
Health Center	5	6	374.9	2,249.40	44,988.00	50.00	300.00	6,000.00			
Health Center	6	6	374.9	2,249.40	44,988.00	0.00	0.00	0.00			
Health Center	7	2	374.9	749.80	14,996.00	225.00	450.00	9,000.00			
Health Center	8	1	374.9	374.90	7,498.00	250.00	250.00	5,000.00			
Health Center Wellness Retiree	1	12							568.54	6,822.48	81,869.76
Health Center Wellness Retiree	2	2							1,193.95	2,387.90	28,654.80
Health Center Wellness Retiree	3	0							881.23	0.00	0.00
Healthy Essentials Wellness	1	1810	374.9	678,569.00	13,571,380.00	0.00	0.00	0.00			
Healthy Essentials Wellness	2	29	374.9	10,872.10	217,442.00	325.00	9,425.00	188,500.00			
Healthy Essentials Wellness	3	155	374.9	58,109.50	1,162,190.00	152.00	23,560.00	471,200.00			
Healthy Essentials Wellness	4	33	374.9	12,371.70	247,434.00	452.00	14,916.00	298,320.00			
Healthy Essentials Wellness	5	105	374.9	39,364.50	787,290.00	20.00	2,100.00	42,000.00			
Healthy Essentials Wellness	6	105	374.9	39,364.50	787,290.00	0.00	0.00	0.00			
Healthy Essentials Wellness	7	13	374.9	4,873.70	97,474.00	325.00	4,225.00	84,500.00			
Healthy Essentials	1	1506	374.9	564,599.40	11,291,988.00	25.00	37,650.00	753,000.00			
Healthy Essentials	2	18	374.9	6,748.20	134,964.00	375.00	6,750.00	135,000.00			
Healthy Essentials	3	102	374.9	38,239.80	764,796.00	202.00	20,604.00	412,080.00			
Healthy Essentials	4	20	374.9	7,498.00	149,960.00	502.00	10,040.00	200,800.00			
Healthy Essentials	5	27	374.9	10,122.30	202,446.00	50.00	1,350.00	27,000.00			
Healthy Essentials	6	27	374.9	10,122.30	202,446.00	0.00	0.00	0.00			
Healthy Essentials Wellness Retiree	1	16							705.80	11,292.80	135,513.60
Healthy Essentials Wellness Retiree	2	5							1,482.18	7,410.90	88,930.80
Healthy Essentials Wellness Retiree	3	1							1,087.88	1,087.88	13,054.56
Opt Out Credit Plan (23-24)	1	1083	374.9	406,016.70	8,120,334.00	0.00	0.00	0.00			
Job Share Declined Benefits (IS PT)	0	0	187.45	0.00	0.00						
FSA Extra \$250	1	1145	250.00		286,250.00						
Total Employees and Retirees		7783		2,883,730.80	57,674,616.00		349,470.00	6,989,400.00	82,357.53	988,290.36	

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	\$57,674,616.00
Employee Premium	\$6,989,400.00
Retiree Premium	\$988,290.36
Total	\$65,652,306.36