

DOUGLAS COUNTY SCHOOL DISTRICT
Claims Cost - Self-Insured Plan
(On paid Claims Basis)

	2011-2012	2012-2013	2013-2014	2014-2015	UNAUDITED
	12 Months	12 Months	12 Months	Actuals to date	2015-2016 Actuals to date
July	\$367,533	\$250,490	\$343,250	\$490,916	\$765,568
August	\$328,349	\$382,886	\$633,457	\$637,609	\$615,143
September	\$277,965	\$344,273	\$924,228	\$302,040	\$681,124
October	\$515,727	\$499,193	\$1,378,594	\$437,435	\$378,422
November	\$616,858	\$688,639	\$233,569	\$437,712	\$394,537
December	\$664,411	\$491,868	\$1,300,302	\$748,042	\$0
January	\$360,062	\$676,989	\$423,707	\$442,699	\$0
February	\$364,881	\$368,631	\$422,713	\$701,880	\$0
March	\$373,253	\$341,900	\$487,853	\$589,844	\$0
April	\$450,477	\$784,657	\$546,521	\$588,712	\$0
May	\$360,352	\$520,198	\$239,748	\$350,630	\$0
June	\$654,055	\$163,675	\$582,323	\$491,002	\$0
TOTAL CLAIMS	\$5,333,923	\$5,513,399	\$7,516,265	\$6,218,521	\$2,834,794
Average Monthly Claims	\$444,494	\$459,449.92	\$939,533.08	\$518,210.05	\$566,958.76
YOY Monthly Claims % change	(13.93%)	3.36%	104.49%	(44.84%)	9.41%
YOY % change in TOTAL Participants	(1.27%)	(0.73%)	0.03%	9.72%	(0.75%)
# of Employee Participants	766	770	787	814	808
# of Spouse / Dependent Participants	323	311	304	383	380
Total # of Participants	1,089	1,081	1,091	1,197	1,188
Avg \$ / Participant	\$ 4,898	\$ 5,100	\$ 6,889	\$ 5,195	\$ 5,727

	ACTUALS	ACTUALS	ACTUALS	ACTUALS	Dec Amend 2016
Fund Balance - 6/30:	\$ 3,487,332	\$ 3,838,282	\$ 3,645,823	\$ 4,359,625	\$ 3,024,455
Premium Pmts	\$6,043,083	\$6,129,444	\$6,236,638	\$6,537,778	\$6,557,778
Insurance Proceeds	\$120,249	\$101,051	\$2,704,896	\$14,800	\$350,000
State Subsidy Payments/Other				\$14,636	(\$56,000)
Claims Expense	(\$5,054,391)	(\$5,704,781)	(\$7,413,868)	(\$6,311,875)	(\$7,320,771)
PEBP Payments					
Fixed Costs - Admin Payments	(\$172,171)	(\$181,090)	(\$234,693)	(\$282,246)	(\$292,125)
Fixed Costs - Third-Party Payments	(\$592,171)	(\$545,733)	(\$585,096)	(\$514,265)	(\$539,978)
Interest on Inv / Ck Acct	\$6,351	\$8,650	\$4,925	\$7,002	\$7,000
Ending Fund Balance - 7/1:	\$3,838,282	\$3,648,823	\$4,388,828	\$3,824,488	\$2,530,359

CASH - 7/1:	\$4,483,021	\$4,559,359	\$4,371,166	\$5,059,304
Insurance Premiums	\$6,043,083	\$6,112,599	\$6,236,709	\$6,544,482
Insurance Proceeds	\$120,168	\$83,834	\$2,722,248	\$29,436
State Assisted (PEBP)				
Claims	(\$5,333,922)	(\$5,661,454)	(\$7,516,264)	(\$6,143,979)
Services / Supplies	(\$759,342)	(\$731,822)	(\$759,542)	(\$856,758)
Interest on Inv / Ck Acct	\$6,351	\$8,650	\$4,987	\$7,002
CASH - 6/30:	\$4,559,359	\$4,371,166	\$5,059,304	\$4,639,487

Rates:					
Employee	\$575.00	\$585.00	\$585.00	\$585.00	\$585.00
One dep./child	\$310.50	\$360.50	\$360.50	\$360.50	\$360.50
One dep./spouse	\$348.14	\$398.14	\$398.14	\$398.14	\$398.14
Two or more	\$624.62	\$674.62	\$674.62	\$674.62	\$674.62
Medicare/Emp.	\$383.40	\$393.40	\$393.40	\$393.40	\$393.40
Medicare/1 dep.	\$257.68	\$307.68	\$307.68	\$307.68	\$307.68
% Change in Rates: Employer Paid	0.0%	1.7%	0.0%	0.0%	0.0%
% Change in Rates: Employee Paid	0.0%	16.1%	0.0%	0.0%	0.0%

UNAUDITED DATA AS OF 12-15-15

	2015-2016	2015-2016	2015-2016	2015-2016
	Operating Revenues	Admin Expenses	Claims Expenses	Est Cash Flows
July	\$123,566.99	(\$66,509.28)	(\$765,568.17)	(\$708,510.46)
August	\$364,919.42	(\$64,640.84)	(\$615,142.78)	(\$314,864.20)
September	\$552,841.14	(\$64,768.22)	(\$681,123.70)	(\$193,050.78)
October	\$532,650.38	(\$65,317.22)	(\$378,422.28)	\$88,910.88
November	\$532,007.82	(\$74,525.11)	(\$394,536.89)	\$62,945.82
December	\$22,139.44			\$22,139.44
January				\$0.00
February				\$0.00
March				\$0.00
April				\$0.00
May				\$0.00
June				\$0.00
TOTAL CLAIMS	\$2,128,125.19	(\$335,760.67)	(\$2,834,793.82)	(\$1,042,429.30)

Notes:

July & August Premiums reflect the 'wrap-around' effect of the multiple salary schedules. Revenues associated with premiums that are attributable to FY16/16 but paid out in Jul / Aug 2016 are reflected above.

	Rolling Estimate	May Final 2016
Fund Balance - 6/30:	\$3,824,455	\$ 4,002,769
Premium Pmts	\$6,557,778	\$5,779,868
Insurance Proceeds	\$350,000	\$0
State Subsidy Payments/Other	\$0	\$0
Claims Expense	(\$6,803,505)	(\$6,280,705)
PEBP Payments		
Fixed Costs - Admin Payments	(\$222,698)	(\$290,518)
Fixed Costs - Third-Party Payments	(\$559,036)	(\$514,265)
Interest on Inv / Ck Acct	\$7,000	\$4,000
Ending Fund Balance - 7/1:	\$ 3,153,993	\$2,701,149
CASH - 7/1:	\$4,639,487	
Insurance Premiums	\$6,557,778	
Insurance Proceeds	0	
State Assisted (PEBP)	0	
Claims	(\$6,803,505)	
Services / Supplies	(\$781,734)	
Interest on Inv / Ck Acct	\$7,000	
CASH - 6/30:	\$3,619,025	



Douglas County School District

November-15

Group Health Plan Cost Analysis Report

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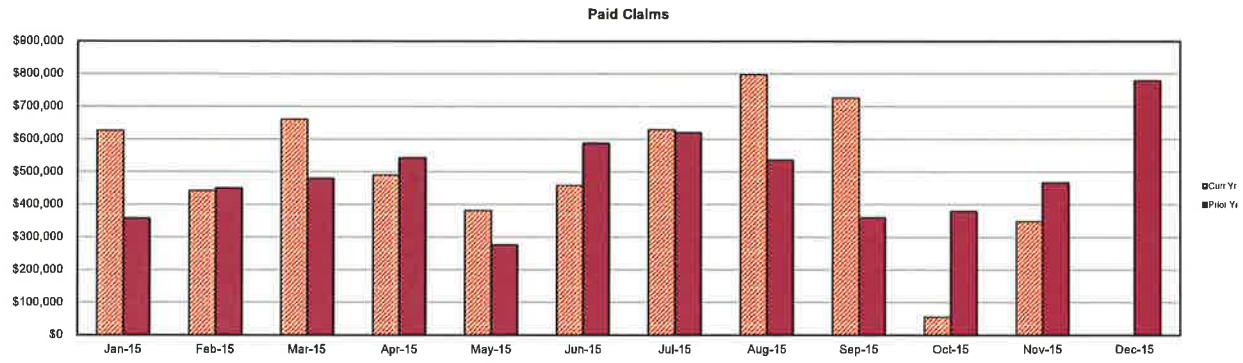
Exhibits	Description
1 & 2	Paid Claims
3 & 4	Total Plan Costs
5	Claim Utilization
6	Large Claim Data
7	Incurred But Not Reported Liability (IBNR)-Current
8	Incurred But Not Reported Liability (IBNR)-Previous Month



Douglas County School District
PAID CLAIMS

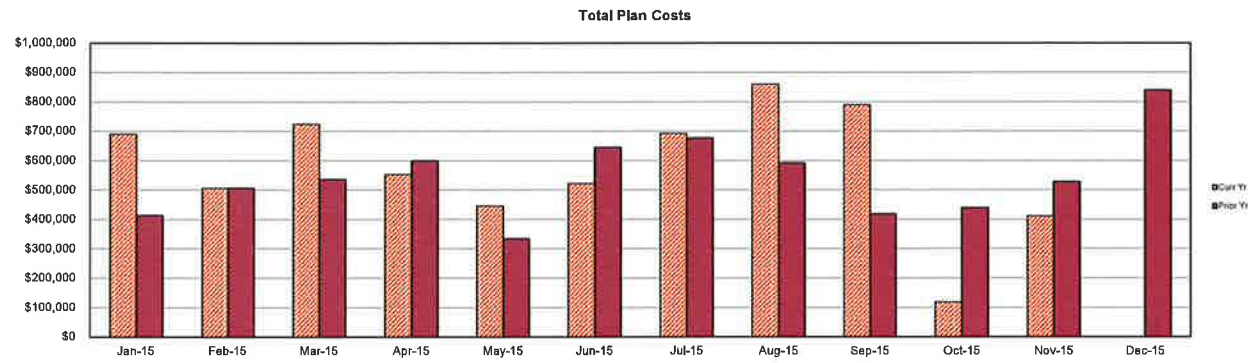
Exhibit 1

Line #		Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Totals	Current Year Mo. Average	Prior Year Mo. Average	% Difference
ENROLLMENT																	
1	Employees	816	814	815	817	817	817	817	799	808	805	806	0	8,931	812	787	3.22%
2	Dependent Units	195	194	192	190	192	192	192	189	187	184	181	0	2,088	190	164	15.57%
3	Total # of Dependents	387	383	388	387	383	387	384	380	380	377	371	0	4,207	382	313	22.03%
EMPLOYEE CLAIMS																	
4	Medical	\$478,768	\$247,913	\$412,274	\$314,698	\$238,638	\$261,778	\$395,109	\$225,893	\$347,711	\$202,518	\$168,770	\$0	\$3,294,070	\$299,461	\$286,104	4.67%
5	Less Stop Loss Reimbursement	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$345,081)	\$0	\$0	(\$345,081)	(\$31,371)	\$0	0.00%
6	Net Medical Claims	\$478,768	\$247,913	\$412,274	\$314,698	\$238,638	\$261,778	\$395,109	\$225,893	\$347,711	(\$142,563)	\$168,770	\$0	\$2,948,989	\$268,090	\$286,104	-6.30%
7	Prescription	\$47,876	\$36,737	\$35,012	\$51,309	\$50,515	\$60,555	\$48,217	\$74,319	\$58,260	\$52,959	\$63,365	\$0	\$579,125	\$52,648	\$42,960	22.55%
8	Dental	\$15,276	\$25,965	\$43,618	\$32,021	\$26,514	\$39,065	\$26,277	\$45,081	\$35,245	\$29,817	\$29,367	\$0	\$348,247	\$31,659	\$27,796	13.90%
9	Vision	\$2,658	\$2,740	\$5,354	\$3,236	\$4,673	\$3,931	\$5,595	\$2,957	\$2,769	\$2,960	\$2,955	\$0	\$39,828	\$3,621	\$1,885	92.04%
10	Total Employee	\$544,577	\$313,356	\$496,259	\$401,264	\$320,341	\$365,330	\$475,198	\$348,249	\$443,984	(\$56,827)	\$264,457	\$0	\$3,916,188	\$356,017	\$358,745	-0.76%
11	Cost Per Employee	\$667.37	\$384.96	\$608.91	\$491.14	\$392.09	\$447.16	\$581.64	\$435.86	\$549.49	(\$70.59)	\$328.11	\$0.00	\$4,823.43	\$438.49	\$456.08	-3.86%
DEPENDENT CLAIMS																	
12	Medical	\$59,962	\$95,885	\$131,709	\$49,373	\$39,764	\$68,960	\$131,925	\$415,769	\$251,723	\$79,977	\$55,861	\$0	\$1,380,908	\$125,537	\$100,005	25.53%
13	Less Stop Loss Reimbursement	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.00%
14	Net Medical Claims	\$59,962	\$95,885	\$131,709	\$49,373	\$39,764	\$68,960	\$131,925	\$415,769	\$251,723	\$79,977	\$55,861	\$0	\$1,380,908	\$125,537	\$100,005	25.53%
15	Prescription	\$13,420	\$19,251	\$9,934	\$21,452	\$11,477	\$12,051	\$11,721	\$13,217	\$13,227	\$17,171	\$15,865	\$0	\$158,786	\$14,435	\$15,316	-5.75%
16	Dental	\$8,368	\$13,039	\$20,594	\$16,404	\$9,164	\$11,140	\$8,332	\$19,110	\$16,869	\$14,323	\$11,731	\$0	\$149,075	\$13,552	\$11,748	15.35%
17	Vision	\$251	\$947	\$2,504	\$918	\$1,134	\$855	\$1,575	\$1,083	\$974	\$874	\$498	\$0	\$11,615	\$1,056	\$565	86.73%
18	Total Dependent	\$82,001	\$129,122	\$164,741	\$88,148	\$61,540	\$93,006	\$153,555	\$449,179	\$282,793	\$112,345	\$83,956	\$0	\$1,700,384	\$154,580	\$127,635	21.11%
19	Cost Per Dependent Unit	\$420.52	\$665.58	\$858.03	\$463.94	\$320.52	\$484.41	\$799.76	\$2,376.61	\$1,512.26	\$610.57	\$463.84	\$0.00	\$8,957.96	\$814.36	\$777.08	-4.80%
20	Cost Per Dependent	\$211.89	\$337.13	\$424.59	\$227.77	\$160.68	\$240.33	\$399.88	\$1,182.05	\$744.19	\$298.00	\$226.30	\$0.00	\$4,445.98	\$404.18	\$407.24	-0.75%
EMPLOYEE + DEPENDENT																	
21	Medical	\$538,730	\$343,798	\$543,983	\$364,072	\$278,403	\$330,737	\$527,034	\$641,661	\$599,434	\$282,495	\$224,632	\$0	\$4,674,978	\$424,998	\$386,110	10.07%
22	Less Stop Loss Reimbursement	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$345,081)	\$0	\$0	(\$345,081)	(\$31,371)	\$0	0.00%
23	Net Medical Claims	\$538,730	\$343,798	\$543,983	\$364,072	\$278,403	\$330,737	\$527,034	\$641,661	\$599,434	(\$62,587)	\$224,632	\$0	\$4,329,897	\$393,627	\$386,110	1.95%
24	Prescription	\$61,296	\$55,988	\$44,946	\$72,761	\$61,992	\$72,606	\$59,939	\$87,536	\$71,487	\$70,130	\$79,230	\$0	\$737,911	\$67,083	\$58,276	15.11%
25	Dental	\$23,644	\$39,005	\$64,212	\$48,425	\$35,678	\$50,205	\$34,610	\$64,190	\$52,114	\$44,140	\$41,099	\$0	\$497,322	\$45,211	\$39,544	14.33%
26	Vision	\$2,909	\$3,687	\$7,858	\$4,154	\$5,808	\$4,787	\$7,170	\$4,040	\$3,742	\$3,835	\$3,453	\$0	\$51,443	\$4,677	\$2,451	90.81%
27	Total Claims	\$626,578	\$442,478	\$661,000	\$489,412	\$381,881	\$458,336	\$628,753	\$797,428	\$726,777	\$55,518	\$348,413	\$0	\$5,616,572	\$510,597	\$486,380	4.98%
28	Composite Cost Per Employee	\$767.87	\$543.58	\$811.04	\$599.04	\$467.42	\$561.00	\$769.59	\$998.03	\$899.48	\$68.97	\$432.27	\$0.00	\$6,917.74	\$628.89	\$618.35	1.70%
29	Composite Cost Per Member	\$520.85	\$369.66	\$549.46	\$406.49	\$318.23	\$380.68	\$523.52	\$676.36	\$611.77	\$46.97	\$296.02	\$0.00	\$4,702.56	\$427.51	\$442.16	-3.32%



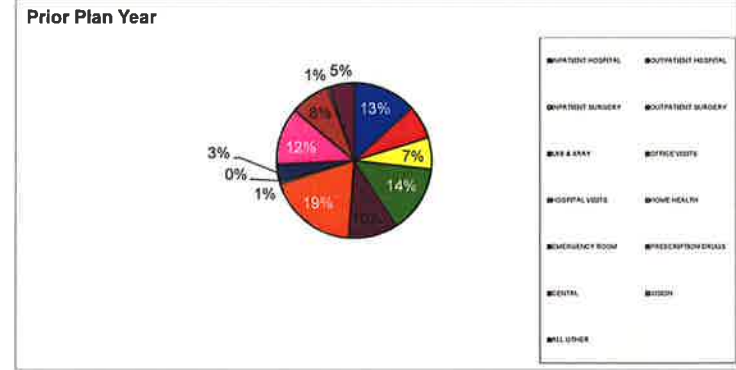
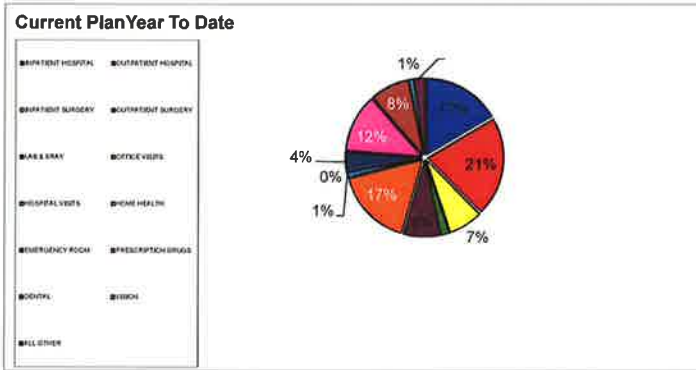
Douglas County School District
TOTAL PLAN COSTS

Line #		Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Totals	Current Year Mo. Average	Prior Year Mo. Average	% Difference
EMPLOYEE																	
1	Claims Admin (Hometown Health)	\$16.81	\$16.81	\$16.81	\$16.81	\$16.81	\$16.81	\$16.81	\$16.81	\$16.81	\$16.81	\$16.81	\$0.00	\$150,130	\$13,648	\$12,027	13.48%
2	Specific Stop Loss	\$34.60	\$34.60	\$34.60	\$34.60	\$34.60	\$34.60	\$34.60	\$34.60	\$34.60	\$34.60	\$34.60	\$0.00	\$309,013	\$28,092	\$27,743	1.26%
3	PPO Networks (Medical & Dental)	\$4.55	\$4.55	\$4.55	\$4.55	\$4.55	\$4.55	\$4.55	\$4.55	\$4.55	\$4.55	\$4.55	\$0.00	\$40,636	\$3,694	\$3,241	13.99%
4	Consulting Fee (Estimated)	\$1.84	\$1.84	\$1.84	\$1.84	\$1.84	\$1.84	\$1.84	\$1.88	\$1.86	\$1.86	\$1.86	\$0.00	\$16,500	\$1,500	\$1,500	0.00%
5	Aggregate Stop Loss	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0	\$0	\$0	0.00%
6	Total Fixed	\$57.80	\$57.80	\$57.80	\$57.80	\$57.80	\$57.80	\$57.80	\$57.84	\$57.82	\$57.82	\$57.82	\$0.00	\$516,279	\$46,934	\$44,510	5.45%
7	Exposures	816	814	815	817	817	817	817	799	808	805	806	0	8,931	812	787	3.22%
8	Employee Fixed Costs	\$47,163	\$47,051	\$47,107	\$47,219	\$47,219	\$47,219	\$47,219	\$46,212	\$46,716	\$46,548	\$46,604	\$0	\$516,279	\$46,934	\$44,510	5.45%
9	Total Gross Claims	\$544,577	\$313,356	\$496,259	\$401,264	\$320,341	\$365,330	\$475,198	\$348,249	\$443,984	\$288,255	\$264,457	\$0	\$4,261,269	\$387,388	\$358,745	7.98%
10	Gross Plan Costs	\$591,741	\$360,407	\$543,366	\$448,483	\$367,560	\$412,549	\$522,417	\$394,461	\$490,700	\$334,803	\$311,061	\$0	\$4,777,548	\$434,323	\$403,256	7.70%
11	Stop-Loss Reimbursements	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$345,081)	\$0	\$0	(\$345,081)	(\$31,371)	\$0	0.00%
12	Net Plan Costs	\$591,741	\$360,407	\$543,366	\$448,483	\$367,560	\$412,549	\$522,417	\$394,461	\$490,700	(\$10,279)	\$311,061	\$0	\$4,432,467	\$402,952	\$403,256	-0.08%
13	Per Employee Gross Plan Costs	\$725.17	\$442.76	\$666.71	\$548.94	\$449.89	\$504.96	\$639.43	\$493.69	\$607.30	\$415.90	\$385.93	\$0.00	\$5,884.34	\$534.94	\$512.67	4.34%
14	Per Employee Net Plan Costs	\$725.17	\$442.76	\$666.71	\$548.94	\$449.89	\$504.96	\$639.43	\$493.69	\$607.30	(\$12.77)	\$385.93	\$0.00	\$5,459.31	\$496.30	\$512.67	-3.19%
DEPENDENT																	
15	Specific Stop Loss (+ 1 Dep.)	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$0.00	\$95,863	\$8,715	\$7,861	10.85%
16	Specific Stop Loss (+ Fam.)	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$85.06	\$0.00	\$81,743	\$7,431	\$5,589	32.96%
17	Dependent Units (+ 1 Dep.)	108	107	103	102	104	105	105	103	100	96	94	0	1,127	102	96	6.72%
18	Dependent Units (Fam.)	87	87	89	88	88	87	87	86	87	88	87	0	961	87	68	28.01%
19	Dependent Fixed Costs	\$16,587	\$16,502	\$16,332	\$16,161	\$16,332	\$16,332	\$16,332	\$16,076	\$15,906	\$15,651	\$15,396	\$0	\$177,605	\$16,146	\$13,450	20.04%
20	Total Gross Claims	\$82,001	\$129,122	\$164,741	\$88,148	\$61,540	\$93,006	\$153,555	\$449,179	\$282,793	\$112,345	\$83,956	\$0	\$1,700,384	\$154,580	\$127,635	21.11%
21	Gross Plan Costs	\$98,588	\$145,624	\$181,072	\$104,309	\$77,871	\$109,338	\$169,886	\$465,255	\$298,699	\$127,996	\$99,352	\$0	\$1,877,990	\$170,726	\$141,085	21.01%
22	Stop-Loss Reimbursements	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	0.00%
23	Net Plan Costs	\$98,588	\$145,624	\$181,072	\$104,309	\$77,871	\$109,338	\$169,886	\$465,255	\$298,699	\$127,996	\$99,352	\$0	\$1,877,990	\$170,726	\$141,085	21.01%
24	Per Dependent Unit Gross Plan Costs	\$505.58	\$750.64	\$943.09	\$549.00	\$405.58	\$569.47	\$884.82	\$2,461.67	\$1,597.32	\$695.63	\$548.90	\$0.00	\$9,911.69	\$901.06	\$858.97	4.90%
25	Per Dependent Unit Net Plan Costs	\$505.58	\$750.64	\$943.09	\$549.00	\$405.58	\$569.47	\$884.82	\$2,461.67	\$1,597.32	\$695.63	\$548.90	\$0.00	\$9,911.69	\$901.06	\$858.97	4.90%
26	Per Dependent Net Plan Costs	\$254.75	\$380.22	\$466.68	\$269.53	\$203.32	\$282.53	\$442.41	\$1,224.36	\$786.05	\$339.51	\$267.79	\$0.00	\$4,917.15	\$447.01	\$447.99	-0.22%
EMPLOYEE + DEPENDENT																	
27	Total Fixed Costs	\$63,750	\$63,553	\$63,439	\$63,381	\$63,551	\$63,551	\$63,551	\$62,288	\$62,622	\$62,199	\$62,000	\$0	\$693,884	\$63,080	\$57,961	8.83%
28	Total Claims	\$626,578	\$442,478	\$661,000	\$489,412	\$381,881	\$458,336	\$628,753	\$797,428	\$726,777	\$400,599	\$348,413	\$0	\$5,961,654	\$541,969	\$486,380	11.43%
29	Gross Plan Costs	\$690,328	\$506,031	\$724,438	\$552,793	\$445,431	\$521,887	\$692,303	\$859,716	\$789,399	\$462,798	\$410,413	\$0	\$6,655,538	\$605,049	\$544,341	11.15%
30	Stop-Loss Reimbursements	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$345,081)	\$0	\$0	(\$345,081)	(\$31,371)	\$0	0.00%
31	Net Plan Costs	\$690,328	\$506,031	\$724,438	\$552,793	\$445,431	\$521,887	\$692,303	\$859,716	\$789,399	\$117,717	\$410,413	\$0	\$6,310,456	\$573,678	\$544,341	5.39%
32	Composite Gross Plan Cost Per Employee	\$845.99	\$621.66	\$888.88	\$676.61	\$545.20	\$638.78	\$847.37	\$1,075.99	\$976.98	\$574.90	\$509.20	\$0.00	\$8,197.39	\$745.22	\$692.03	7.69%
33	Composite Net Plan Cost Per Employee	\$845.99	\$621.66	\$888.88	\$676.61	\$545.20	\$638.78	\$847.37	\$1,075.99	\$976.98	\$146.23	\$509.20	\$0.00	\$7,772.37	\$706.58	\$692.03	2.10%
34	Composite Net Plan Cost Per Member	\$373.84	\$422.75	\$602.19	\$459.13	\$371.19	\$433.46	\$376.44	\$729.19	\$664.48	\$99.59	\$348.69	\$0.00	\$5,607.67	\$509.79	\$494.86	3.02%



Claim Utilization

Line #		Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total	Current Yr. Monthly Average	Current Year % of Total	Prior Yr. Monthly Average	Prior Year % of Total
1	HOSPITAL ADMITS	5	4	11	6	7	5	6	4	12	5	2	0	67	6.09		6.67	
2	HOSPITAL DAYS	13	8	19	21	4	7	41	9	32	10	4	0	168	15.27		16.75	
3	Average Length of Stay	2.60	2.00	1.73	3.50	0.57	1.40	6.83	2.25	2.67	2.00	2.00	0.00		2.51		2.51	
4	Cost Per Stay	\$16,567	\$14,617	\$6,921	\$3,712	\$1,426	\$2,645	\$17,556	\$84,666	\$21,372	\$2,657	\$5,767	\$0		\$14,749		\$9,620	
5	Cost Per Day	\$6,372	\$7,309	\$4,007	\$1,061	\$2,496	\$1,889	\$2,569	\$37,629	\$8,014	\$1,328	\$2,884	\$0		\$5,882		\$3,829	
6	INPATIENT HOSPITAL	\$82,833	\$58,469	\$76,136	\$22,275	\$9,985	\$13,224	\$105,335	\$338,663	\$256,463	\$13,283	\$11,535	\$0	\$988,201	\$89,836	17%	\$64,132	13%
7	OUTPATIENT HOSPITAL	\$127,991	\$97,931	\$83,071	\$192,003	\$127,019	\$129,515	\$123,234	\$137,511	\$95,468	\$87,416	\$52,382	\$0	\$1,253,541	\$113,958	21%	\$34,149	7%
8	INPATIENT SURGERY	\$74,516	\$28,319	\$48,162	\$17,392	\$13,174	\$39,112	\$74,271	\$42,227	\$30,378	\$38,482	\$29,303	\$0	\$435,335	\$39,576	7%	\$31,773	7%
9	OUTPATIENT SURGERY	\$10,338	\$12,115	\$14,713	\$14,224	\$4,963	\$11,786	\$4,085	\$11,935	\$6,812	\$7,202	\$10,054	\$0	\$108,228	\$9,839	2%	\$68,293	14%
10	LAB & XRAY	\$55,314	\$40,136	\$114,202	\$28,446	\$29,416	\$24,880	\$63,271	\$15,986	\$32,805	\$33,305	\$25,301	\$0	\$463,062	\$42,097	8%	\$50,674	10%
11	OFFICE VISITS	\$73,359	\$94,292	\$127,889	\$71,598	\$75,444	\$101,575	\$96,646	\$80,531	\$107,689	\$82,820	\$80,913	\$0	\$992,756	\$90,251	17%	\$91,931	19%
12	HOSPITAL VISITS	\$8,368	\$2,636	\$5,641	\$2,573	\$1,427	\$1,529	\$4,284	\$1,498	\$19,255	\$1,450	\$637	\$0	\$49,299	\$4,482	1%	\$2,847	1%
13	HOME HEALTH	\$0	\$416	\$982	\$209	\$0	\$0	\$163	\$0	\$1,846	\$1,677	\$0	\$0	\$5,293	\$481	0%	\$539	0%
14	EMERGENCY ROOM	\$29,687	\$9,147	\$31,243	\$15,278	\$1,254	\$8,316	\$56,100	\$12,393	\$52,460	\$20,571	\$17,483	\$0	\$253,933	\$23,085	4%	\$16,745	3%
15	PRESCRIPTION DRUGS	\$61,296	\$55,988	\$44,946	\$72,761	\$61,992	\$72,606	\$59,939	\$87,536	\$71,487	\$70,130	\$79,230	\$0	\$737,911	\$67,083	12%	\$58,276	12%
16	DENTAL	\$23,644	\$39,005	\$64,212	\$48,425	\$35,678	\$50,205	\$34,610	\$64,190	\$52,114	\$44,140	\$41,099	\$0	\$497,322	\$45,211	8%	\$39,544	8%
17	VISION	\$2,909	\$3,687	\$7,858	\$4,154	\$5,808	\$4,787	\$7,170	\$4,040	\$3,742	\$3,835	\$3,453	\$0	\$51,443	\$4,677	1%	\$2,451	1%
18	ALL OTHER	\$76,324	\$335	\$41,944	\$73	\$15,721	\$799	(\$355)	\$918	\$0	\$123	\$478	\$0	\$136,360	\$12,396	2%	\$25,025	5%
20	TOTAL CLAIM COST	\$626,578	\$442,478	\$661,000	\$489,412	\$381,881	\$458,336	\$628,753	\$797,428	\$730,519	\$404,434	\$351,866	\$0	\$5,972,683	\$542,971	100%	\$486,380	100%



Douglas County School District
MEDICAL CLAIMS ONLY IN EXCESS OF \$87,500 (Accumulative Paid Amounts Year to Date)

CLAIMANT		Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15
Claim #	<i>Total Amount of Claim Year to Date</i>												
1	Employee	\$0	\$0	\$116,271	\$133,807	\$149,146	\$165,624	\$174,253	\$174,335	\$184,536	\$201,083	\$206,377	
2	Employee	\$0	\$0	\$101,758	\$101,758	\$101,790	\$101,790	\$101,790	\$101,790	\$101,790	\$101,790	\$101,790	
3	Employee	\$0	\$0	\$0	\$109,842	\$109,842	\$109,842	\$112,668	\$112,980	\$113,497	\$113,497	\$114,566	
4	Employee	\$0	\$0	\$0	\$0	\$0	\$0	\$125,575	\$454,014	\$456,811	\$457,393	\$457,393	
5	Employee	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$165,106	\$167,270	\$169,084	\$168,632	
6	Dependent	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$138,037	\$140,429	\$140,524	
7	Employee	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$84,002	
Total		\$0	\$0	\$218,029	\$345,406	\$360,778	\$377,255	\$514,285	\$1,008,224	\$1,161,941	\$1,183,275	\$1,189,282	\$0
Increase Over Previous Month:			\$0	\$218,029	\$127,378	\$15,371	\$16,478	\$137,030	\$493,939	\$153,717	\$21,334	\$6,006	\$0

Claim #	<i>Amount Over Specific Stop-Loss (\$175,000)</i>												
1	Employee	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$9,536	\$26,083	\$31,377	
2	Employee	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
3	Employee	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
4	Employee	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$279,014	\$281,811	\$282,393	\$282,393	
5	Employee	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
6		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
7		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Total		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$279,014	\$291,347	\$308,476	\$313,769	\$0
Increase Over Previous Month:			\$0	\$0	\$0	\$0	\$0	\$0	\$279,014	\$12,333	\$17,129	\$5,294	\$0

Douglas County School District

Hometown Health self-funded health plan reserve as of November 30, 2015

Based on claims from December 01, 2014 through November 30, 2015

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, 2014 through November 30, 2015

Medical	\$ 5,016,027
Dental	\$ 529,919
Prescription Drugs	\$ 794,932
Vision	<u>\$ 54,755</u>
Total Claims	\$ 6,395,633

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 = 806 : 60 day lagged enrollment = 812
 Current enrollment all Dental Plans = 806 : 60 day lagged enrollment = 812
 Current enrollment all Rx Plans = 806 : 60 day lagged enrollment = 812
 Current enrollment all Vision Plans = 806 : 60 day lagged enrollment = 812

Estimated IBNR Calculation

Medical	$\$5,016,027 \times (55/365) \times (806/812) =$	\$ 749,947	15.0%
+			
Dental	$\$529,919 \times (30/365) \times (806/812) =$	\$ 43,215	8.2%
+			
Rx	$\$794,932 \times (11/365) \times (806/812) =$	\$ 23,770	3.0%
+			
Vision	$\$54,755 \times (22/365) \times (806/812) =$	<u>\$ 3,275</u>	6.0%
=			
Total estimated IBNR as of November 30, 2015 =		\$ 820,207	12.8%

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.
 EIT: 7/1/2011 the IBNR methodology was revised downward by approximately 3.1% based on actuarial recommendations.

Douglas County School District

Hometown Health self-funded health plan reserve as of October 31, 2015

Based on claims from November 01, 2014 through October 31, 2015

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 November 01, 2014 through October 31, 2015

Medical	\$ 5,167,623
Dental	\$ 517,202
Prescription Drugs	\$ 776,580
Vision	<u>\$ 53,174</u>
Total Claims	\$ 6,514,578

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 = 805 : 60 day lagged enrollment = 811
 Current enrollment all Dental Plans = 805 : 60 day lagged enrollment = 811
 Current enrollment all Rx Plans = 805 : 60 day lagged enrollment = 811
 Current enrollment all Vision Plans = 805 : 60 day lagged enrollment = 811

Estimated IBNR Calculation

Medical	\$5,167,623 X (55/365) X (805/811) =	\$ 772,843	15.0%
+			
Dental	\$517,202 X (30/365) X (805/811) =	\$ 42,191	8.2%
+			
Rx	\$776,580 X (11/365) X (805/811) =	\$ 23,228	3.0%
+			
Vision	\$53,174 X (22/365) X (805/811) =	<u>\$ 3,181</u>	6.0%
=			
Total estimated IBNR as of October 31, 2015 =		\$ 841,443	12.9%

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.
 Eff: 7/1/2011 the IBNR methodology was revised downward by approximately 3.1% based on actuarial recommendations.