

**Douglas County School District
Board of Trustees
Agenda for the Health Advisory Committee of
Tuesday, September 23, 2025
4:30 PM
Airport Training Center
1126 Airport Road Building G-1
Minden, NV 89423**

Mission Statement

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

Board Purpose

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

Board of Trustees

**Yvonne Wagstaff, President
Melinda Gneiting, Vice President
Katherine Dickerson, Clerk
David Burns, Member
Susan Jansen, Member
Erinn Miller, Member
Markus Zinke, Member**

1638 Mono Avenue, Minden, Nevada 89423

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

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

The Board may make approval of consent items with one motion. They will be approved in total by one action unless a Trustee, individual, or organization interested in one or more consent items has questions or wishes to make a statement. In that event, the Chairperson of the Board may defer action on the particular matter or matters to the regular agenda for consideration separately.

Although each Trustee represents a geographical area of the District, Trustees are elected at large and, as such, represent all citizens of Douglas County. All actions of the Board are taken in an open meeting. It is the desire of the Board to avoid making decisions that will be detrimental to the best interests of the District, even when such decisions might please individuals or a small group. In arriving at decisions, Members of the Board attempt to be guided by the desire to provide a program that will meet the needs of every student enrolled in Douglas County schools and will best serve the interests of the entire District.

Members of the Board of Trustees are locally elected state officials and serve four-year terms of office. They are responsible for exercising their public function in accordance with the requirements of applicable law and regulations, as well as Board Policies adopted by the Board of Trustees of the Douglas County School District.

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

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

The Board limits public comment to three minutes per commenter.

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

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

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

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

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

Revised 9/10/2025



Douglas County School District
Health Advisory Committee
Airport Training Center
1126 Airport Road Building G-1
Minden, NV 89423
Tuesday, September 23, 2025
4:30 PM

AGENDA

1. Call to Order

A. Roll Call of Committee Members

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

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

2. Public Comment #1

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

3. Committee Members' Comment

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

4. Approval of Minutes of the August 26, 2025 Meeting (For Possible Action)

Attached are the minutes of the August 26, 2025 Health Advisory Committee Meeting for review and approval.

RECOMMENDATION: Approve the Minutes of the Health Advisory Committee Meeting dated August 26, 2025.

5. Review of Claims (Information and Discussion) Lloyd Barnes, Nate Kerr

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

6. Customer Service Review (Information and Discussion) Sam Bradley

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

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

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

8. DCSD Self-Funded Health Insurance Plan Review (Information, Discussion and Possible Action)

The DCSD Health Advisory Committee will review DCSD's Self-Funded Health Insurance Plan, and may provide revised plan rate projections and benefit reductions. The committee will discuss and review changes to the District's Plan for the purposes of a January 1, 2026 renewal. Changes may include, but are not limited to, premium rates, benefit reductions, participant premium contributions, expansion of HSAs, and plan design changes to medical, dental, prescription, and vision plans.

9. Stop-Loss Insurance Renewal (Information, Discussion and Possible Action)

Nate Kerr, Lloyd Barnes A representative from DCSD's broker, LP Insurance Services, Inc., will provide an overview of the District's Stop-Loss Insurance options for January 1, 2026 renewal. The Committee will discuss the information and recommendations that will be reviewed by the Board of Trustees during an upcoming School Board meeting.

10. Correspondence (Information and Discussion)

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

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

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

12. Public Comment #2

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

13. Adjournment

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

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

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

Douglas County School District, Minden, NV

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

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

**DRAFT - Minutes of the Health Advisory
Committee Meeting – August 26, 2025**

Committee Members Present

Jeannie Dwyer, Executive Director of HR
Michelle Baugh, DCPEA
Ethan Petite, DCPEA
Kerry Stack, DCPEA
Andrew Fromdahl, DCAA
Elizabeth Martin, DCSSO

Absent

Jay Jackson, Chapter #6 Bus Drivers Association

Lloyd Barnes, LP Insurance, Nate Kerr, LP Insurance, Camille Barba, LP Insurance, Lisa Schloemer-Gaub, Hometown Health, Chris Syverson, NV Business Group on Health (via phone), Melinda Gneiting, DCSD School Board Trustee, and Leeann Caires, DCSD Human Resources.

Meeting minutes are created and provided in accordance with NRS 241.035. They are not a word-for-word transcript of the meeting.

1. Call to Order

The meeting was called to order by Mrs. Dwyer at 4:30 p.m. There were several new attendees at today's meeting. All attendees introduced themselves.

2. Public Comment #1

No public comment.

3. Committee Members' Comment

No committee member comment.

4. Approval of Minutes of the May 27, 2025 meeting (For Possible Action)

Ms. Martin made a motion to approve the minutes for the May 27, 2025 meeting, Mrs. Stack seconded the motion. Motion passed 6 - 0

5. Review of Claims (Information and Discussion)

Mr. Kerr reported on the paid claims through July 2025.

Exhibit 1 – Employee and dependent enrollment were still down slightly for the plan year through July 2025 (2%). Total employee claims (Line 10) for July were \$627,358. Cost per employee (Line 11) was \$835. Total dependent claims (Line 18) for July were \$490,647. Cost per dependent unit (Line 19) was \$2,585 in July. Total claims (line 27) for the month of July were \$1,118,005. Average composite cost per employee (Line 28) was \$1,488. Line 28 continues to trend upward.

Exhibit 3 – Total Plan Costs - paid claims plus fixed costs (fees such as operating costs, admin fees for Hometown Health, consulting fees for LP Insurance, pharmacy rebates, Stop-Loss reimbursements, etc.). Net plan costs (Line 32) were \$1,216,635 in July. Average monthly composite net plan cost per employee per month was \$1,620 in July (Line 34).

Exhibit 5 – Large claims report. Large claim tracking begins when a claim reaches approximately 50% of Stop-Loss deductible (\$275,000). There were four large claims reported in July. Two of the large claims have exceeded DCSD's \$275,000 deductible and will have stop-loss reimbursement.

Exhibit 6 - Incurred but Not Reported (IBNR) is the outstanding estimated liability that DCSD carries on an on-going basis. July 2025 estimated IBNR is \$1,143,192.

6. Customer Service Review (Information and Discussion)

Ms. Schloemer-Gaub from Hometown Health reported on customer service from July 2025. Customer Service Call Volume report data shows approximately 81 member calls in July (80 were answered). For July, the Average Seconds to Answer (ASA) was 15 seconds (performance guarantee is 75 seconds). July 2025 Abandonment rate was 1% (performance guarantee is 10%). The claims report shows 1,193 claims received during the month of July. 1,573 claims were paid in July. The number of claims paid within 30 days was 98% (performance guarantee is 95%)

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

For the month of July, paid claims were \$1,188,428 and admin expenses were \$103,802. Total claims for fiscal year 25-26 are \$1,188,429. Total operating revenues for the fiscal year 24-25 are \$735,596. Estimated cash flow was negative in July.

8. Review the process and steps necessary for requests for proposals (formal or informal) for DCSD's self-funded insurance plan TPA (Third Party Administrator). Requests for proposals will be mad with the assistance of LP Insurance and can include fully funded and self-funded proposals. (Information, Discussion, and for Possible Action)

The committee reviewed the difference between self-funded and fully funded insurance and discussed the difference between a formal and an informal process. Timing for the requests was also considered – it would be a very short timeline to make a change for the 2026 plan year. DCSD has one year remaining on the contract with Hometown Health.

The committee determined that the next two HAC meetings should be held on 9/23/2025 and 10/7/2025. Moving the meeting dates will allow the committee to discuss and review possible changes and provide the information to the School Board at the October DCSD School Board meeting.

Mrs. Stack made a motion to begin an informal request for proposals during the first quarter of 2026. Proposals will include fully funded and self-funded insurance plans for possible January 2027 implementation. DCSD requests that LP Insurance assist with the proposal process. Seconded by Mr. Fromdahl. Motion passed 6 – 0.

9. Discussion and information regarding 2025 Nevada Legislative Bills that may have an impact on Douglas County School District's self-funded health insurance plan (Information, Discussion. And for Possible Action)

Mr. Barnes reviewed applicable 2025 bills impacting local government self-funded health insurance plans including dates of enactment and potential financial impacts. A list of all bills impacting DCSD's plan was provided for all committee members.

10. Correspondence (Information and Discussion)

No correspondence.

11. Future Agenda Items (For Possible Action)

- 1 – Plan review for possible benefit changes for plan year 2026.
- 2 – Stop/Loss Insurance review/proposals.

****NOTE:** HAC meeting dates for 2025-26: ~~08/26/2025~~, 09/23/2025, 10/07/2025, 11/18/2025, 01/27/2026, 02/24/2025, 03/31/2025, 04/28/2025, 05/26/2025.

12. Public Comment #2

No public comment.

13. Adjournment

The meeting was adjourned at 5:51 p.m. by Mrs. Dwyer

Submitted by,

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



Douglas County School District

August-25

**Group Health Plan
Cost Analysis Report**

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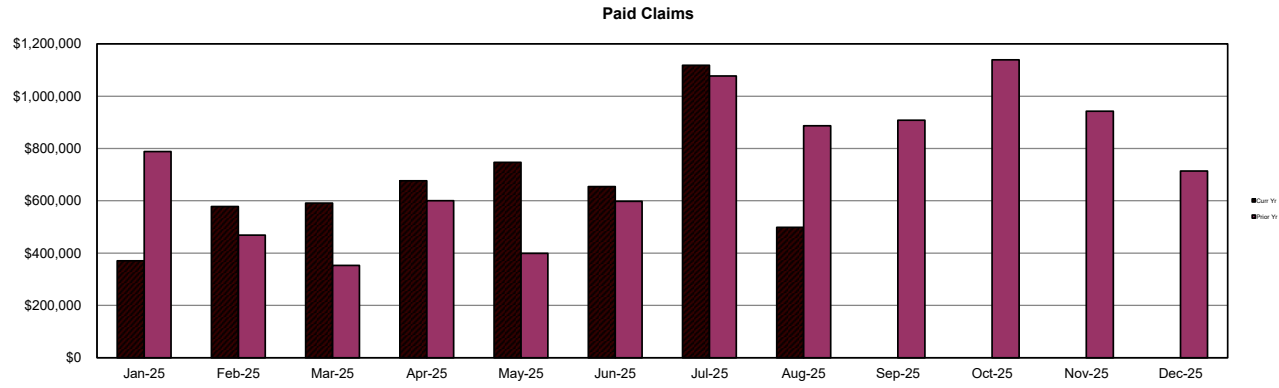
Exhibits	Description
1 & 2	Paid Claims
3 & 4	Total Plan Costs
5	Large Claim Data
6	Incurred But Not Reported Liability (IBNR)-Current
7	Incurred But Not Reported Liability (IBNR)-Previous Month



**Douglas County School District
PAID CLAIMS**

Line #		Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Totals	Current Year Mo. Average	Prior Year Mo. Average	% Difference
ENROLLMENT																	
1	Employees	748	756	757	757	758	755	751	710	0	0	0	0	5,992	749	771	-2.84%
2	Dependent Units	191	192	190	189	189	191	190	183	0	0	0	0	1,515	189	192	-1.58%
3	Total # of Dependents	354	352	352	350	354	352	352	344	0	0	0	0	2,810	351	362	-2.92%
EMPLOYEE CLAIMS																	
4	Medical	\$315,847	\$191,204	\$260,127	\$333,719	\$361,195	\$240,445	\$494,389	\$205,675	\$0	\$0	\$0	\$0	\$2,402,602	\$300,325	\$411,501	-27.02%
5	Less Stop Loss Reimbursement	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$7,121)	-100.00%
6	Net Medical Claims	\$315,847	\$191,204	\$260,127	\$333,719	\$361,195	\$240,445	\$494,389	\$205,675	\$0	\$0	\$0	\$0	\$2,402,602	\$300,325	\$404,380	-25.73%
7	Prescription	\$81,434	\$92,214	\$78,421	\$86,892	\$110,033	\$100,357	\$77,782	\$94,227	\$0	\$0	\$0	\$0	\$721,360	\$90,170	\$124,554	-27.61%
8	Dental	\$19,644	\$9,765	\$58,705	\$31,453	\$18,571	\$32,532	\$49,595	\$39,160	\$0	\$0	\$0	\$0	\$259,424	\$32,428	\$27,984	15.88%
9	Vision	\$3,112	\$3,967	\$3,538	\$4,041	\$3,229	\$4,325	\$5,592	\$5,736	\$0	\$0	\$0	\$0	\$33,541	\$4,193	\$3,980	5.36%
10	Total Employee	\$420,037	\$297,150	\$400,791	\$456,105	\$493,029	\$377,659	\$627,358	\$344,798	\$0	\$0	\$0	\$0	\$3,416,928	\$427,116	\$560,898	-23.85%
11	Cost Per Employee	\$561.55	\$393.06	\$529.45	\$602.52	\$650.43	\$500.21	\$835.36	\$485.63	\$0.00	\$0.00	\$0.00	\$0.00	\$4,561.99	\$570.25	\$727.57	-21.62%
DEPENDENT CLAIMS																	
12	Medical	\$52,049	\$207,620	\$108,955	\$164,902	\$167,124	\$210,322	\$447,697	\$83,623	\$0	\$0	\$0	\$0	\$1,442,291	\$180,286	\$150,120	20.10%
13	Less Stop Loss Reimbursement	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$162,161)	(\$20,270)	\$0	0.00%
14	Net Medical Claims	(\$108,003)	\$205,512	\$108,955	\$164,902	\$167,124	\$210,322	\$447,697	\$83,623	\$0	\$0	\$0	\$0	\$1,280,130	\$160,016	\$150,120	6.59%
15	Prescription	\$47,664	\$60,559	\$49,132	\$44,964	\$72,108	\$46,816	\$21,714	\$43,633	\$0	\$0	\$0	\$0	\$386,591	\$48,324	\$15,553	210.71%
16	Dental	\$9,851	\$14,406	\$31,004	\$9,694	\$13,843	\$18,430	\$20,438	\$24,687	\$0	\$0	\$0	\$0	\$142,353	\$17,794	\$12,291	44.77%
17	Vision	\$1,085	\$534	\$1,360	\$844	\$872	\$1,109	\$798	\$1,815	\$0	\$0	\$0	\$0	\$8,418	\$1,052	\$888	18.55%
18	Total Dependent	(\$49,404)	\$281,012	\$190,451	\$220,404	\$253,947	\$276,677	\$490,647	\$153,758	\$0	\$0	\$0	\$0	\$1,817,492	\$227,187	\$178,851	27.03%
19	Cost Per Dependent Unit	(\$258.66)	\$1,463.60	\$1,002.37	\$1,166.16	\$1,343.64	\$1,448.57	\$2,582.35	\$840.21	\$0.00	\$0.00	\$0.00	\$0.00	\$9,597.32	\$1,199.66	\$929.50	29.07%
20	Cost Per Dependent	(\$139.56)	\$798.33	\$541.05	\$629.73	\$717.37	\$786.01	\$1,393.88	\$446.97	\$0.00	\$0.00	\$0.00	\$0.00	\$5,174.36	\$646.79	\$494.29	30.85%
EMPLOYEE + DEPENDENT																	
21	Medical	\$367,896	\$398,825	\$369,082	\$498,621	\$528,319	\$450,766	\$942,085	\$289,298	\$0	\$0	\$0	\$0	\$3,844,893	\$480,612	\$561,621	-14.42%
22	Less Stop Loss Reimbursement	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$162,161)	(\$20,270)	(\$7,121)	184.65%
23	Net Medical Claims	\$207,843	\$396,716	\$369,082	\$498,621	\$528,319	\$450,766	\$942,085	\$289,298	\$0	\$0	\$0	\$0	\$3,682,732	\$460,341	\$554,500	-16.98%
24	Prescription	\$129,098	\$152,773	\$127,553	\$131,857	\$182,141	\$147,174	\$99,496	\$137,860	\$0	\$0	\$0	\$0	\$1,107,951	\$138,494	\$140,107	-1.15%
25	Dental	\$29,495	\$24,171	\$89,709	\$41,147	\$32,414	\$50,962	\$70,033	\$63,847	\$0	\$0	\$0	\$0	\$401,777	\$50,222	\$40,276	24.70%
26	Vision	\$4,197	\$4,501	\$4,898	\$4,885	\$4,102	\$5,434	\$6,390	\$7,551	\$0	\$0	\$0	\$0	\$41,960	\$5,245	\$4,867	7.76%
27	Total Claims	\$370,633	\$578,162	\$591,242	\$676,509	\$746,977	\$654,336	\$1,118,005	\$498,556	\$0	\$0	\$0	\$0	\$5,234,420	\$654,302	\$739,749	-11.55%
28	Composite Cost Per Employee	\$495.50	\$764.76	\$781.03	\$893.67	\$985.46	\$866.67	\$1,488.69	\$702.19	\$0.00	\$0.00	\$0.00	\$0.00	\$6,988.54	\$873.57	\$959.57	-8.96%
29	Composite Cost Per Member	\$336.33	\$521.81	\$533.13	\$611.12	\$671.74	\$591.09	\$1,013.60	\$473.01	\$0.00	\$0.00	\$0.00	\$0.00	\$4,757.48	\$594.69	\$653.06	-8.94%

**Douglas County School District
PAID CLAIMS**

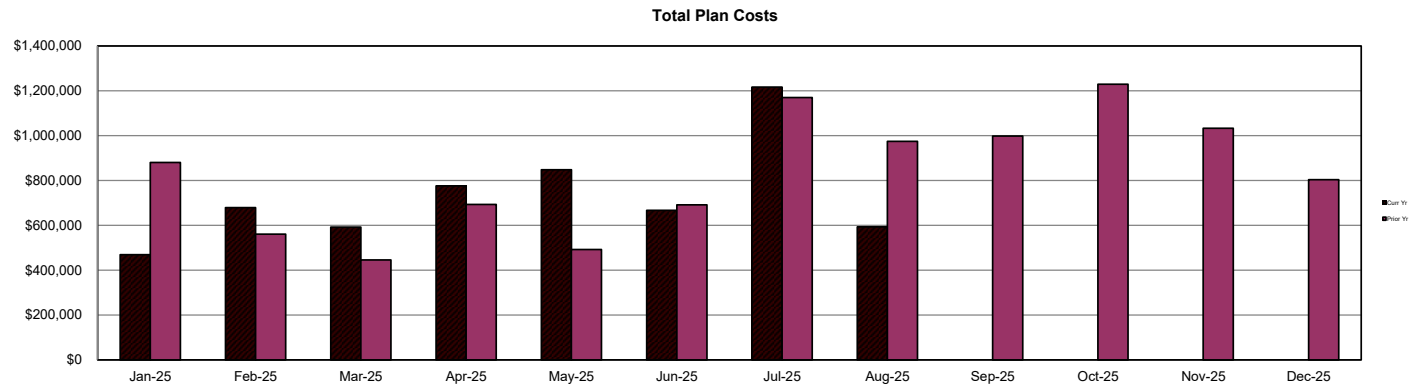


**Douglas County School District
TOTAL PLAN COSTS**

Line #	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Totals	Current Year Mo. Average	Prior Year Mo. Average	% Difference	
EMPLOYEE																	
1	TPA / UTIL REVIEW / COBRA / TELE DOC	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$29.02	\$0.00	\$0.00	\$0.00	\$0.00	\$173,888	\$21,736	\$21,509	1.06%
2	Specific Stop Loss	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$72.11	\$0.00	\$0.00	\$0.00	\$0.00	\$432,083	\$54,010	\$52,253	3.36%
3	PPO Networks (Dental)	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.70	\$0.00	\$0.00	\$0.00	\$0.00	\$4,194	\$524	\$540	-2.84%
4	VSP	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$1.68	\$0.00	\$0.00	\$0.00	\$0.00	\$10,067	\$1,258	\$1,295	-2.84%
5	Consulting Fee (Estimated)	\$2.01	\$1.98	\$1.98	\$1.98	\$1.98	\$1.99	\$2.00	\$2.11	\$0.00	\$0.00	\$0.00	\$0.00	\$12,000	\$1,500	\$1,500	0.00%
6	Total Fixed	\$105.52	\$105.49	\$105.49	\$105.49	\$105.49	\$105.50	\$105.51	\$105.62	\$0.00	\$0.00	\$0.00	\$0.00	\$632,232	\$79,029	\$77,096	2.51%
7	Exposures	748	756	757	757	758	755	751	710	0	0	0	0	5,992	749	771	-2.84%
8	Employee Fixed Costs	\$78,925	\$79,754	\$79,857	\$79,857	\$79,961	\$79,650	\$79,236	\$74,992	\$0	\$0	\$0	\$0	\$632,232	\$79,029	\$77,096	2.51%
9	Total Gross Claims	\$420,037	\$297,150	\$400,791	\$456,105	\$493,029	\$377,659	\$627,358	\$344,798	\$0	\$0	\$0	\$0	\$3,416,928	\$427,116	\$568,019	-24.81%
10	Gross Plan Costs	\$498,963	\$376,904	\$480,648	\$535,962	\$572,990	\$457,309	\$706,594	\$419,790	\$0	\$0	\$0	\$0	\$4,049,160	\$506,145	\$645,115	-21.54%
11	Stop-Loss Reimbursements	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$7,121)	-100.00%
12	Net Plan Costs	\$498,963	\$376,904	\$480,648	\$535,962	\$572,990	\$457,309	\$706,594	\$419,790	\$0	\$0	\$0	\$0	\$4,049,160	\$506,145	\$637,994	-20.67%
13	Per Employee Gross Plan Costs	\$667.06	\$498.55	\$634.94	\$708.01	\$755.92	\$605.71	\$940.87	\$591.25	\$0.00	\$0.00	\$0.00	\$0.00	\$5,406.09	\$675.76	\$836.82	-19.25%
14	Per Employee Net Plan Costs	\$667.06	\$498.55	\$634.94	\$708.01	\$755.92	\$605.71	\$940.87	\$591.25	\$0.00	\$0.00	\$0.00	\$0.00	\$5,406.09	\$675.76	\$827.58	-18.34%
DEPENDENT																	
15	Specific Stop Loss (+ 1 Dep.)	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$0.00	\$0.00	\$0.00	\$0.00	\$57,574	\$7,197	\$6,997	2.86%
16	Specific Stop Loss (+ Fam.)	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$78.76	\$0.00	\$0.00	\$0.00	\$0.00	\$61,748	\$7,718	\$7,250	6.47%
17	Dependent Units (+ 1 Dep.)	93	93	93	91	91	92	91	87	0	0	0	0	731	91	95	-3.31%
18	Dependent Units (Fam.)	98	99	97	98	98	99	99	96	0	0	0	0	784	98	98	0.09%
19	Dependent Fixed Costs	\$15,043	\$15,122	\$14,964	\$14,886	\$14,886	\$15,043	\$14,964	\$14,413	\$0	\$0	\$0	\$0	\$119,321	\$14,915	\$14,247	4.69%
20	Total Gross Claims	\$110,649	\$283,120	\$190,451	\$220,404	\$253,947	\$276,677	\$490,647	\$153,758	\$0	\$0	\$0	\$0	\$1,979,653	\$247,457	\$178,851	38.36%
21	Gross Plan Costs	\$125,692	\$298,242	\$205,416	\$235,289	\$268,833	\$291,720	\$505,612	\$168,172	\$0	\$0	\$0	\$0	\$2,098,975	\$262,372	\$193,098	35.88%
22	Stop-Loss Reimbursements	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$162,161)	(\$20,270)	\$0	0.00%
23	Net Plan Costs	(\$34,361)	\$296,133	\$205,416	\$235,289	\$268,833	\$291,720	\$505,612	\$168,172	\$0	\$0	\$0	\$0	\$1,936,814	\$242,102	\$193,098	25.38%
24	Per Dependent Unit Gross Plan Costs	\$658.07	\$1,553.34	\$1,081.13	\$1,244.92	\$1,422.40	\$1,527.33	\$2,661.11	\$918.97	\$0.00	\$0.00	\$0.00	\$0.00	\$11,067.28	\$1,383.41	\$1,003.54	37.85%
25	Per Dependent Unit Net Plan Costs	(\$179.90)	\$1,542.36	\$1,081.13	\$1,244.92	\$1,422.40	\$1,527.33	\$2,661.11	\$918.97	\$0.00	\$0.00	\$0.00	\$0.00	\$10,218.32	\$1,277.29	\$1,003.54	27.28%
26	Per Dependent Net Plan Costs	(\$97.06)	\$841.29	\$583.57	\$672.26	\$759.41	\$828.75	\$1,436.40	\$488.87	\$0.00	\$0.00	\$0.00	\$0.00	\$5,513.48	\$689.18	\$530.13	30.00%
EMPLOYEE + DEPENDENT																	
27	*Fixed Costs	\$98,579	\$100,940	\$98,319	\$99,304	\$101,011	\$98,031	\$98,630	\$94,380	\$0	\$0	\$0	\$0	\$789,194	\$98,649	\$91,343	8.00%
28	Total Claims	\$530,686	\$580,270	\$591,242	\$676,509	\$746,977	\$654,336	\$1,118,005	\$498,556	\$0	\$0	\$0	\$0	\$5,396,581	\$674,573	\$746,870	-9.68%
29	Gross Plan Costs	\$629,265	\$681,210	\$689,561	\$775,813	\$847,988	\$752,367	\$1,216,635	\$592,936	\$0	\$0	\$0	\$0	\$6,185,775	\$773,222	\$838,213	-7.75%
30	Stop-Loss Reimbursements	(\$160,053)	(\$2,108)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	(\$162,161)	(\$20,270)	(\$7,121)	184.65%
31	Pharmacy Rebates	\$0	\$0	(\$97,430)	\$0	\$0	(\$85,376)	\$0	\$0	\$0	\$0	\$0	\$0	(\$182,806)	(\$22,851)	(\$38,008)	-39.88%
32	Net Plan Costs	\$469,213	\$679,102	\$592,131	\$775,813	\$847,988	\$666,991	\$1,216,635	\$592,936	\$0	\$0	\$0	\$0	\$5,840,808	\$730,101	\$793,084	-7.94%
33	Composite Gross Plan Cost Per Employee	\$841.26	\$901.07	\$910.91	\$1,024.85	\$1,118.72	\$996.51	\$1,620.02	\$835.12	\$0.00	\$0.00	\$0.00	\$0.00	\$8,258.71	\$1,032.34	\$1,087.29	-5.05%
34	Composite Net Plan Cost Per Employee	\$627.29	\$898.28	\$782.21	\$1,024.85	\$1,118.72	\$883.43	\$1,620.02	\$835.12	\$0.00	\$0.00	\$0.00	\$0.00	\$7,798.14	\$974.77	\$1,028.75	-5.25%
35	Composite Net Plan Cost Per Member	\$425.78	\$612.91	\$533.93	\$700.82	\$762.58	\$602.52	\$1,103.02	\$562.56	\$0.00	\$0.00	\$0.00	\$0.00	\$5,258.04	\$657.26	\$733.69	-10.42%

*MAXOR Admin Fee Added to Employee & Dependent Fixed Costs

Douglas County School District
TOTAL PLAN COSTS



Douglas County School District

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

		CLAIMANT											
		Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25
Claim #	<u>Total Amount of Claim Year to Date</u>												
1	Dependent	\$0	\$0	\$0	\$155,339	\$199,066	\$223,101	\$275,461	\$315,415				
2	Subscriber	\$0	\$0	\$0	\$0	\$251,502	\$255,108	\$257,466	\$263,114				
3	Subscriber	\$0	\$0	\$0	\$0	\$0	\$0	\$290,379	\$291,361				
4	Dependent	\$0	\$0	\$0	\$0	\$0	\$0	\$160,018	\$162,501				
5		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
6		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
7		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
8		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
9		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
10		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Total		\$0	\$0	\$0	\$155,339	\$450,568	\$478,209	\$983,323	\$1,032,391	\$0	\$0	\$0	\$0
Increase Over Previous Month:			\$0	\$0	\$155,339	\$295,229	\$27,642	\$505,114	\$49,068	\$0	\$0	\$0	\$0

Claim #	<u>Amount Over Specific Stop-Loss (\$275,000)</u>												
1	Dependent	\$0	\$0	\$0	\$0	\$0	\$0	\$461	\$40,415				
2	Subscriber	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
3	Subscriber	\$0	\$0	\$0	\$0	\$0	\$0	\$15,379	\$16,361				
4	Dependent	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
5		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
6		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
7		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
8		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
9		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
10		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0				
Total		\$0	\$0	\$0	\$0	\$0	\$0	\$15,840	\$56,776	\$0	\$0	\$0	\$0
Increase Over Previous Month:			\$0	\$0	\$0	\$0	\$0	\$15,840	\$40,936	\$0	\$0	\$0	\$0

Douglas County School District

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

Based on claims from September 01, 2024 through August 31, 2025

FORMULA

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

Net Paid Claims from September 01, 2024 through August 31, 2025

Medical	\$ 6,548,846
Dental	\$ 627,281
Prescription Drugs	\$ 1,704,861
Vision	<u>\$ 57,336</u>
Total Claims	\$ 8,938,323

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 = 710 : 60 day lagged enrollment = 756

Current enrollment all Dental Plans = 710 : 60 day lagged enrollment = 756

Current enrollment all Rx Plans = 710 : 60 day lagged enrollment = 756

Current enrollment all Vision Plans = 710 : 60 day lagged enrollment = 756

Estimated IBNR Calculation

Medical	\$6,548,846 X (55/365) X (710/756) =	\$ 927,075	14.2%
+			
Dental	\$627,281 X (30/365) X (710/756) =	\$ 48,436	7.7%
+			
Rx	\$1,704,861 X (11/365) X (710/756) =	\$ 48,269	2.8%
+			
Vision	\$57,336 X (22/365) X (710/756) =	<u>\$ 3,247</u>	5.7%
=			
Total estimated IBNR as of August 31, 2025 =		\$ 1,027,027	11.5%

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

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

Douglas County School District

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

Based on claims from August 01, 2024 through July 31, 2025

FORMULA

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

Net Paid Claims from August 01, 2024 through July 31, 2025

Medical	\$ 6,975,099
Dental	\$ 598,436
Prescription Drugs	\$ 1,697,497
Vision	<u>\$ 55,566</u>
Total Claims	\$ 9,326,597

Average Estimated Lag Days

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

Number of employees covered:

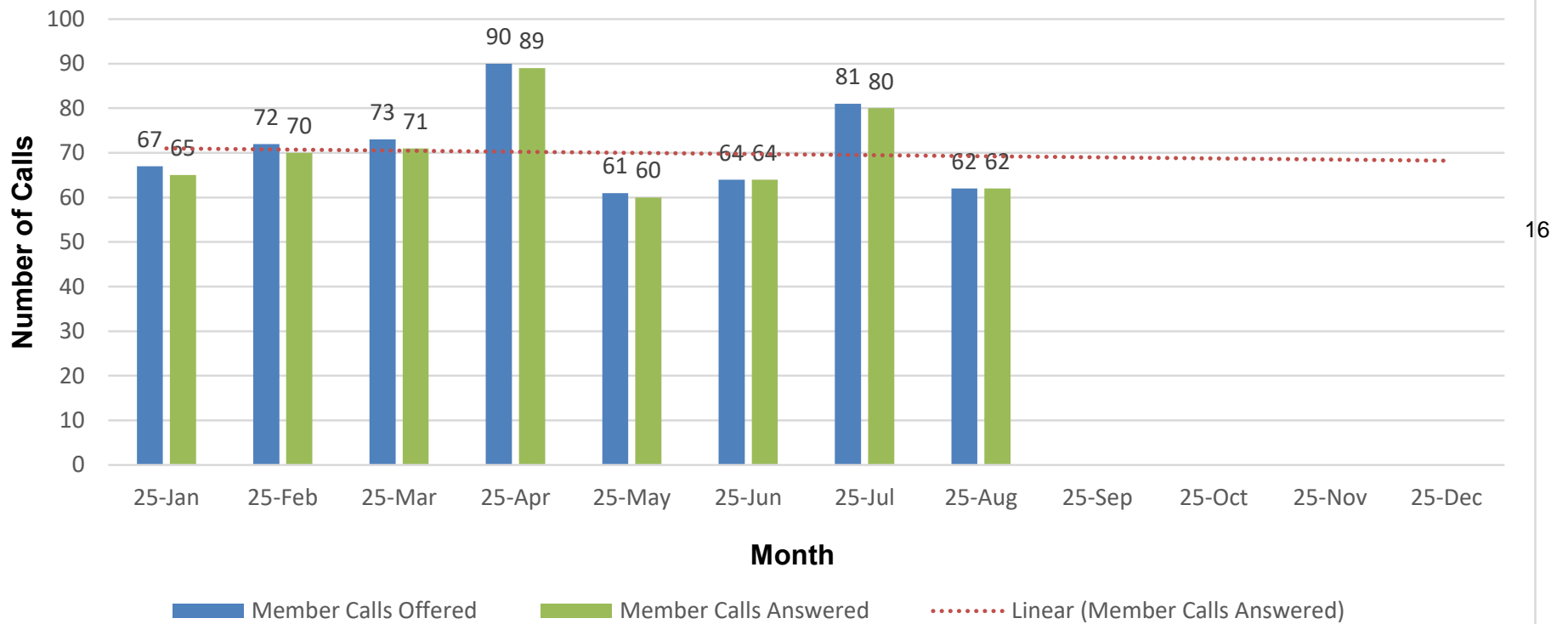
Current enrollment all Medical Plans = 751 : 60 day lagged enrollment = 759
 Current enrollment all Dental Plans = 751 : 60 day lagged enrollment = 759
 Current enrollment all Rx Plans = 751 : 60 day lagged enrollment = 759
 Current enrollment all Vision Plans = 751 : 60 day lagged enrollment = 759

Estimated IBNR Calculation

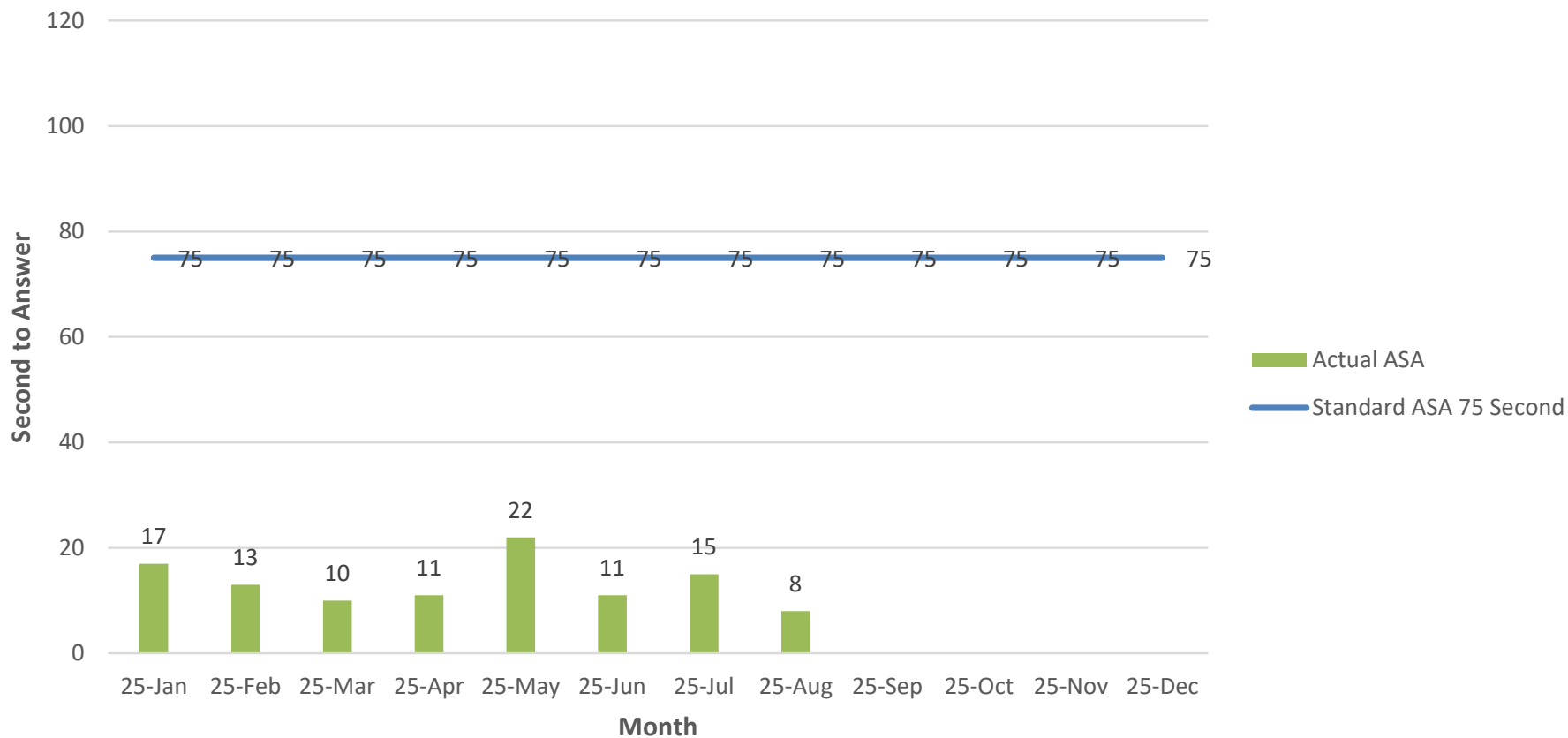
Medical	\$6,975,099 X (55/365) X (751/759) =	\$ 1,040,535	14.9%
+			
Dental	\$598,436 X (30/365) X (751/759) =	\$ 48,695	8.1%
+			
Rx	\$1,697,497 X (11/365) X (751/759) =	\$ 50,646	3.0%
+			
Vision	\$55,566 X (22/365) X (751/759) =	<u>\$ 3,316</u>	6.0%
=			
Total estimated IBNR as of July 31, 2025 =		\$ 1,143,192	12.3%

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

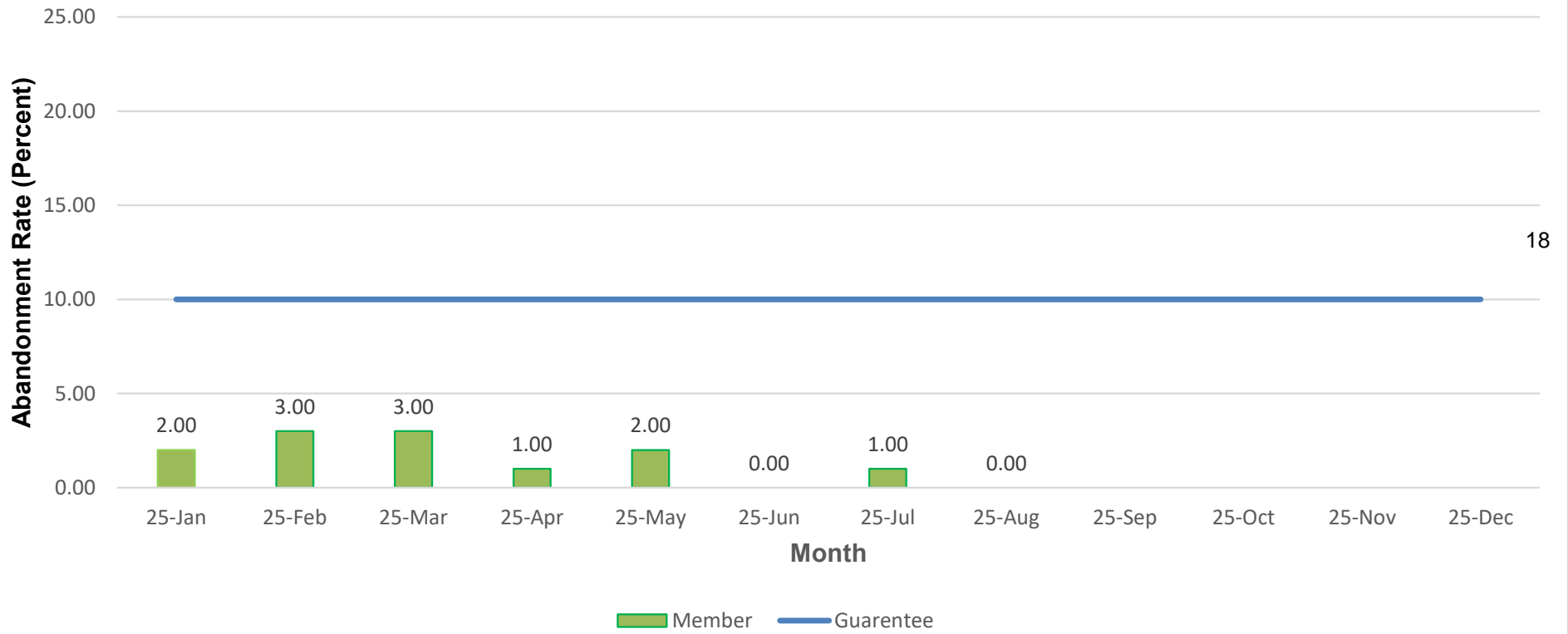
Hometown Health - DCSD Dedicated Phone Number Customer Services Department Call Volume



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



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





Claims Turnaround Time
Excludes Non-Business Days
332 - DOUGLAS COUNTY SCHOOL DISTRICT

	2025	January	February	March	April	May	June	July	August
Total									
Total Claims Received During Month	1,282	1,423	1,229	1,364	1,317	1,290	1,085	1,246	1,301
Total Claims Paid During Month	1,493	1,584	1,284	1,736	1,577	1,384	1,283	1,573	1,526
Claims Open at End of Month	259	244	241	248	258	252	259	274	298
Percentage of Claims Paid Within 30 Days	98.0%	96.7%	96.9%	98.2%	97.9%	97.8%	97.9%	98.5%	99.7%
Number of Claims Paid Over 30 Days	30	52	40	32	33	30	27	23	5
Medical									
Total Claims Received During Month	1,080	1,285	974	1,154	1,162	1,061	911	1,007	1,083
Total Claims Paid During Month	1,282	1,430	1,129	1,349	1,511	1,249	1,062	1,245	1,281
Claims Open at End of Month	35	42	36	30	38	28	32	33	41
Percentage of Claims Paid Within 30 Days	98.9%	99.0%	98.0%	99.8%	98.5%	99.0%	97.9%	99.0%	99.8%
Number of Claims Paid Over 30 Days	14	15	23	3	22	12	22	12	3
Dental									
Total Claims Received During Month	202	138	255	210	155	229	174	238	218
Total Claims Paid During Month	211	154	155	387	66	135	221	327	245
Claims Open at End of Month	151	129	132	145	147	151	154	168	184
Percentage of Claims Paid Within 30 Days	92.3%	76.0%	89.0%	92.5%	83.3%	86.7%	97.7%	96.6%	99.2%
Number of Claims Paid Over 30 Days	16	37	17	29	11	18	5	11	2

Unaudited											
2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025	2025-26	2025-26				
Actuals to date	Actuals to date	Actuals to date	Actuals to date	Actuals to date	Actuals to date	Actuals to date	Operating Revenues	Admin Expenses	Claims Expenses	Est Cash Flows	
\$707,103	\$593,957	\$1,047,051	\$649,873	\$1,008,996	\$818,800	\$1,188,429	July	\$735,596.12	(\$103,802.31)	(\$1,188,428.96)	(\$556,635.15)
\$504,522	\$533,442	\$801,080	\$937,616	\$1,112,051	\$1,140,749	\$477,214	August	\$705,215.07	(\$102,886.13)	(\$477,213.91)	\$125,115.03
\$419,473	\$922,103	\$709,220	\$540,995	\$735,590	\$867,924		September				\$0.00
\$575,237	\$580,104	\$758,601	\$993,427	\$993,999	\$1,171,815		October				\$0.00
\$751,140	\$974,578	\$820,396	\$214,398	\$762,960	\$879,124		November				\$0.00
\$409,511	\$606,620	\$1,754,598	\$919,954	\$689,212	\$630,192		December				\$0.00
\$585,200	\$508,567	\$211,099	\$520,765	\$685,625	\$509,134		January				\$0.00
\$425,889	\$454,486	-\$155,452	\$553,752	\$624,971	\$430,184		February				\$0.00
\$463,808	-\$63,850	\$1,124,963	\$642,894	\$352,799	\$590,875		March				\$0.00
\$590,274	\$581,293	\$116,358	\$561,828	\$491,344	\$699,843		April				\$0.00
\$386,887	\$735,299	\$610,376	\$872,626	\$507,389	\$710,831		May				\$0.00
\$690,699	\$833,568	\$997,886	\$728,608	\$598,594	\$623,455		June				\$0.00
\$6,509,743	\$7,260,167	\$8,796,176	\$8,136,736	\$7,969,530	\$9,072,926	\$1,665,643	TOTAL CLAIMS	\$1,440,811.19	(\$206,688.44)	(\$1,665,642.87)	(\$431,520.12)
\$542,478.58	\$605,013.95	\$733,014.69	\$678,061.33	\$664,127.54	\$756,077.17	\$832,821.50					
0.70%	11.53%	21.16%	(7.50%)	(2.05%)	13.85%	10.15%					
(8.00%)	5.05%	(3.29%)	(4.56%)	0.00%	(1.13%)	0.00%					
768	795	763	773	773	779	779					
423	452	443	378	378	359	359					
1,191	1,247	1,206	1,151	1,151	1,138	1,138					
\$ 5,466	\$ 5,822	\$ 7,294	\$ 7,069	\$ 6,924	\$ 7,973	\$ 8,782					
ACTUAL	ACTUAL	ACTUAL	ACTUAL	ACTUAL	DEC AMEND	DEC AMEND					
\$ 2,900,257	\$ 3,055,107	\$ 1,713,523	\$ 659,909	\$ 322,101	\$ 962,908	\$ 962,908	Fund Balance - 6/30:				
\$7,339,180	\$7,564,729	\$8,007,604	\$7,888,920	\$8,328,096	\$8,810,000	\$8,810,000	Premium Pmts				
\$452,484	\$657,098	\$1,979	\$0	\$0	\$1,000,000	\$1,000,000	Transfer from GF				
(\$3,890)	(\$3,955)	(\$3,845)	(\$31,030)	(\$9,030)	(\$9,030)	(\$9,030)	Insurance Proceeds				
(\$6,731,736)	(\$8,541,210)	(\$9,067,362)	(\$7,950,000)	(\$8,100,000)	(\$8,100,000)	(\$8,100,000)	Other Payments				
							Claims Expense				
							PEBP Payments				
(\$271,441)	(\$284,913)	(\$287,536)	(\$330,000)	(\$325,000)	(\$325,000)	(\$325,000)	Fixed Costs - Admin Payments				
(\$669,791)	(\$742,720)	(\$707,462)	(\$793,000)	(\$900,000)	(\$930,000)	(\$930,000)	Fixed Costs - Third-Party Payments				
\$40,044	\$9,387	\$3,008	\$5,000	\$10,000	\$10,000	\$10,000	Interest on Inv / Ck Acct				
\$3,055,107	\$1,713,523	\$659,909	\$449,799	\$326,167	\$1,418,878	\$1,418,878	Est. Ending Fund Balance - 7/1:				

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

Breakdown by month for insurance revenue & expense												
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
REVENUE												
Premiums	643,473.51	591,319.68										
Exp Ins	23,398.21	39,430.48										
PERS Ins	66,100.77	72,232.69										
Interest	2,623.63	2,232.22										
Rx Rebates	0.00	0.00										
Transfers in	0.00	0.00										
Totals	735,596.12	705,215.07	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EXPENSE												
Claims	1,014,706.25	352,629.71										
Rx Claims	173,635.93	124,470.55										
Rx Fees	0.00	0.00										
Other Fees	86.78	113.65										
Stop-loss Reimb.	0.00	0.00										
Accts Payable	8,030.13	8,204.10										
Admin Fees	95,772.18	94,682.03										
Totals	1,292,231.27	580,100.04	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00