**SUSD FINANCIAL PERFORMANCE**

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Gross Contributions</td>
<td>$14,448,795</td>
<td>$15,608,988</td>
<td>$16,656,561</td>
<td>$8,544,963</td>
</tr>
<tr>
<td>Cost of Primary and Excess Insurance</td>
<td>($1,279,724)</td>
<td>($1,558,535)</td>
<td>($1,945,824)</td>
<td>($1,091,259)</td>
</tr>
<tr>
<td>Loss Expense</td>
<td>($13,156,280)</td>
<td>($12,347,559)</td>
<td>($12,216,375)</td>
<td>($6,975,588)</td>
</tr>
<tr>
<td>Administration</td>
<td>($132,750)</td>
<td>($167,468)</td>
<td>($184,208)</td>
<td>($139,356)</td>
</tr>
<tr>
<td>Non-Operating Income</td>
<td>$53,472</td>
<td>$118,592</td>
<td>$53,328</td>
<td>($2,028)</td>
</tr>
<tr>
<td>Surplus/(Deficit) Total</td>
<td>($66,487)</td>
<td>$1,654,018</td>
<td>$2,363,481</td>
<td>$336,732</td>
</tr>
</tbody>
</table>

*Although SUSD does not budget for investment income, 100% of the investment income of SUSD’s self-funded account accrues to the district.*
OUTPATIENT SPEND

Per Member Per Month (PMPM) Spend

- **2018–2019**: $126
- **2019–2020**: $174

Injectable Medications

- **2018–2019**: 376 claimants, $3,112 avg. cost, $1.2M total cost
- **2019–2020**: 422 claimants, $7,967 avg. cost, $3.4M total cost

*Reporting period:* Incurred July 2019 through June 2020, valued as of December 2020
*Comparison period:* Incurred July 2018 through June 2019, valued as of December 2020
TRADITIONAL Rx SPEND

Diabetes accounts for 32%

Diabetes average cost/script $542
10 of top 20 drugs used for diabetes treatment

Generic drug avg. cost $22
(member copay $12)

Brand drug avg. cost $407
(member copay $36)

Reporting period: Incurred July 2019 through June 2020, valued as of December 2020
Comparison period: Incurred July 2018 through June 2019, valued as of December 2020
SPECIALTY Rx SPEND

Spend is $2.1M of $4.3M, or 49%

Other 51%

Specialty 49%

Average cost increased 26% from 18-19 to 19-20

$3,630

$4,554

Reporting period: Incurred July 2019 through June 2020, valued as of December 2020
Comparison period: Incurred July 2018 through June 2019, valued as of December 2020
CHRONIC CONDITIONS

Top 10 Chronic Conditions: Prevalence*

- Asthma: 120 (2019-20)
- Cancer: 139 (2019-20)
- Low back pain: 146 (2019-20)
- Diabetes: 151 (2019-20)
- Depression: 170 (2019-20)
- High blood pressure: 332 (2019-20)
- High cholesterol: 347 (2019-20)
- Metabolic (obesity): 447 (2019-20)

*Figures represent number of members with each chronic condition

Reporting period: Incurred July 2019 through June 2020, valued as of December 2020
Comparison period: Incurred July 2018 through June 2019, valued as of December 2020
CHRONIC CONDITION IMPACT

PMPM Spend

0 Chronic Conditions: $115
1-2 Chronic Conditions: $430
3-4 Chronic Conditions: $826
5+ Chronic Conditions: $2,216

Reporting period: Incurred July 2019 through June 2020, valued as of December 2020
Comparison period: Incurred July 2018 through June 2019, valued as of December 2020
# PLAN SUMMARY

<table>
<thead>
<tr>
<th>Plan Features</th>
<th>PPO</th>
<th>HDHP 1500</th>
<th>HDHP 2800</th>
<th>HDHP 5000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss Ratio</td>
<td>85%</td>
<td>92%</td>
<td>60%</td>
<td>60%</td>
</tr>
<tr>
<td>Average Enrolled</td>
<td>550</td>
<td>523</td>
<td>763</td>
<td>88</td>
</tr>
<tr>
<td>% Enrolled</td>
<td>28%</td>
<td>27%</td>
<td>40%</td>
<td>5%</td>
</tr>
<tr>
<td>Annual Deductible*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$1,000</td>
<td>$1,500</td>
<td>$2,800</td>
<td>$5,000</td>
</tr>
<tr>
<td>Family</td>
<td>$2,000</td>
<td>$3,000</td>
<td>$5,600</td>
<td>$10,000</td>
</tr>
<tr>
<td>Out-of-Pocket Maximum (OOP)*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individual</td>
<td>$5,000</td>
<td>$3,000</td>
<td>$5,000</td>
<td>$6,450</td>
</tr>
<tr>
<td>Family</td>
<td>$10,000</td>
<td>$6,000</td>
<td>$10,000</td>
<td>$12,900</td>
</tr>
</tbody>
</table>

*In-network costs

**Reporting period:** Incurred July 2019 through June 2020
EFFORTS MADE TO DATE
WHAT WE’VE DONE

Recovered $421K from Rx rebates

Recovered $306K from over-billing

Enhanced ancillary plan offerings

Recovered $43K from audits

Changed and consolidated PBM (58K)

Changed stop loss carrier

Expanded audits

Implemented data warehouse and analytics tool

Implemented clinical advocacy program

Implemented Rx strategies

Conducted partner assessment
UNITED HEALTH AND UMR

- Dedicated service model, 24/7 coverage
- Access to a strong network (less than 1% disruption)
- Increased focus on member health and engagement
- Less confusion with ID cards
- Improved clinical and claims management programs
- Enhanced telehealth services
- Better technology and tools
- Remain with HealthEquity for HSA
CONTINUING EFFORTS

- Engage clinical care advocate
- Increase biometric screenings
- Focus on preventive health adherence
- Telehealth at no cost-share
- Continue employee benefit education
QUESTIONS?