



STATISTICAL ANALYSIS
01/01/18-12/31/18

Population Health

Why is this important? Important insight regarding issues that membership.

Key chronic conditions	Value	Change	Aetna BoB
Hypertension	16.5%	4.1	8.4%
Hyperlipidemia	15.8%	4.1	7.5%
Gastritis	7.9%	1.9	4.0%
Diabetes	9.7%	2.5	3.3%
Depression	2.2%	0.7	4.4%
Low back pain	4.2%	1.0	3.9%

Preventive services	% of Eligible	HEDIS Benchmarks	
Breast cancer screen	58.6%		>65%
Cervical cancer screen	61.1%		>71%
Colon cancer screen	26.4%		>51%
		Aetna BoB	
Child immunizations under age 2	47.9%	-5.4	64%
Child preventive visits under age 2	57.7%	-6.7	71%
Child preventive visits age 2-19	42.4%	5.5	26%
Adult preventive visits	23.8%	4.7	11%

Emergency Room Use

WEBB COUNTY

01-01-2018 - 12-31-2018

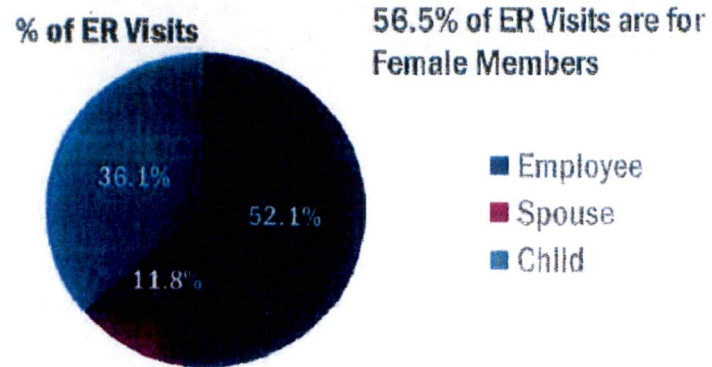
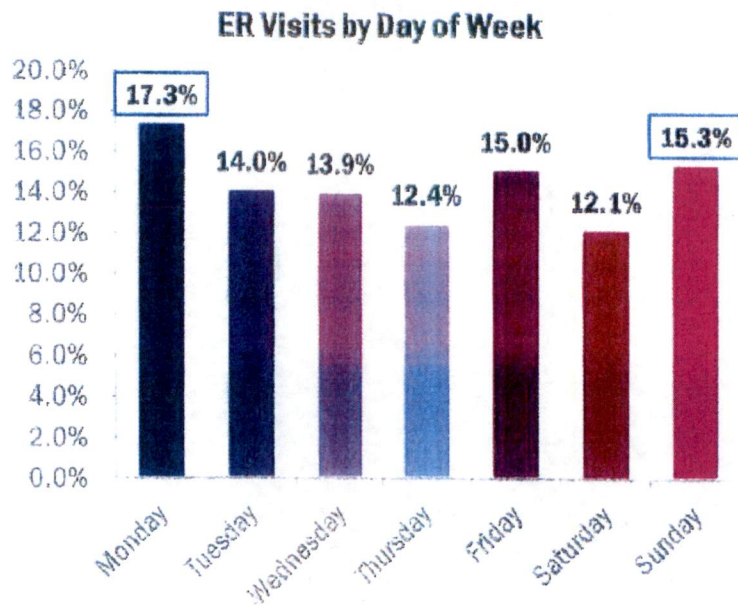
Why is this important? Results can determine if benefits, plan design, and communications are achieving goals related to utilization.

Metric	Value	% Change	Aetna BoB
ER visits/1,000	302.8	-0.8%	201.1
Avg allowed/visit	\$2,411	-30.0%	\$2,306
Avg paid/visit	\$1,381	-58.1%	\$1,743
Employee cost sharing	42.3%	0.4	24.0%
Paid PMPY	\$418	-58.4%	\$363
Total ER visits	678	-22.2%	N/A
Utilizing members	384	-25.0%	N/A
Avg visits/utilizing member	1.8	3.7%	1.5
PCP to ER visit ratio	5.8	-5.8%	8.7

ER results are defined by place of service which may include additional services that are not included in the Financial & Utilization chapter that is based upon medical cost category.

Top diagnosis groups			
Age 0-19	Allowed	Visits	% of Total
Throat Disorders	\$1.3K	27	13.4%
Otitis Media	\$268	12	6.0%
Gastroenteritis	\$1.6K	12	6.0%
Viral Infections	\$556	12	6.0%
Accidental Injury	\$2.0K	11	5.5%
Age >20	Allowed	Visits	% of Total
Angina/Chest Pain	\$2.6K	37	7.8%
Abdominal Pain	\$3.5K	31	6.5%
Urologic Infection	\$2.8K	27	5.7%
Sprains/Strains	\$1.4K	24	5.0%
Throat Disorders	\$1.8K	21	4.4%

Misuse metrics	Value	% of Total	% Change	Aetna BoB
Non-Urgent ER visits	304	44.8%	2.1%	37.4%
Members with ≥ 4 ER visits	36	9.4%	2.9%	3.2%



Notes

- ER visits/1000 decreased, above BoB
- Avg. paid per visit decreased, below BoB
- Total ER visits decreased
- PCP to ER visit ratio below 8-13
- Members can call & speak with 24/7 RN *Informed Health Line* to impact Non-Urgent ER visits

Top 5 facilities utilized

Facility name	City, State	% of ER visits
Doctors Hospital of Laredo	Laredo, TX	36.1%
STAT Emergency Center LLC	Laredo, TX	19.0%
Laredo Medical Center	Laredo, TX	17.3%
Laredo Emergency Room	Laredo, TX	12.7%
Laredo Emergency Center	Laredo, TX	9.7%

Notes

- New Aetna flyers to promote urgent & retail clinics
- 3 out of network ER facilities utilized

HUB



Webb County Health Plan Recommendations

Presented to: Webb County Commissioners Court
September 18, 2019



Financial Forecasts



Expenses	2019 Projected	2020 Projected
Fixed Costs	\$1,550,725.89	\$1,916,085.69
Claims Expense	\$11,993,968.14	\$11,746,352.53
Total	\$13,544,694.03	\$13,662,438.22
Revenue Sources		
Assumed Fund Balance 01/01/19	\$0.00	\$1,198,793.63
Plan Contributions	\$15,727,432.60	\$15,986,432.60
Total	\$15,727,432.60	\$17,185,226.23
Projected Surplus/Deficit 12/31/19	\$2,182,738.57	\$3,522,788.01
Target Fund Balance	\$2,398,793.63	\$2,349,270.51
Offset Prior Deficit	-\$1,200,000.00	\$0.00
Projected max funding for Benefit improvements, lower deductions, clinic access in 2020		\$1,173,517.51

On a budget neutral basis, the plan has excess resources that can be utilized to make improvements to the benefit offerings and deduction costs. Projections assume current enrollment and plan elections. If enrollment increases, costs will increase proportionately.



Recommended Benefit and Deduction Summary



Changes in deductions are not proportional in each tier due to “rebalancing” of the rate factors to industry standard practices. Overall benefits are being improved under each plan.

PLAN SUMMARY	BASE	NEW BASE	BUY UP	NEW BUY UP
Individual Deductible	\$1,500	\$1,000	\$1,250	\$750
Family Deductible	\$3,000	\$2,000	\$2,500	\$1,875
Benefit Percentage	60%	80%	80%	80%
Individual OOP Max (includes Ded and Cost Share)	\$6,000	\$5,000	\$6,000	\$4,500
Family OOP Max (includes Ded and Cost Share)	\$12,000	\$12,500	\$12,000	\$11,250
Primary Care Physician Co-Pay	\$40	\$40	\$25	\$30
Specialty Physician Care Co-Pay	\$45	\$50	\$35	\$40
Urgent Care Co-Pay	\$45	\$50	\$35	\$40
Emergency Room Co-Pay	\$500	\$500	\$500	\$500
Retail Rx Co-Pay				
G - 30 / G 31-90 / PB - 30 / PB 31 - 90 / PBS / NPBS	\$10 / \$20 / \$30 / \$60 / \$50 / \$100 / \$40 / \$60	\$10 / \$20 / \$30 / \$60 / \$50 / \$100 / \$40 / \$60	\$10 / \$20 / \$30 / \$60 / \$50 / \$100 / \$40 / \$60	\$5 / \$15 / \$25 / \$55 / \$45 / \$90 / \$35 / \$60
Monthly Deductions	Plan Year 2019	Plan Year 2020	Plan Year 2019	Plan Year 2020
Emp Only	\$79.82	\$49.60	\$235.50	\$235.60
Emp & Spouse	\$464.08	\$451.98	\$1,059.88	\$842.58
Emp & Child(ren)	\$392.44	\$188.48	\$942.52	\$523.28
Emp , Spouse & Children	\$511.88	\$499.10	\$1,343.50	\$1,224.50
Change over Current Offering				
Emp Only		(\$30.22)		\$0.10
Emp & Spouse		(\$12.10)		(\$217.30)
Emp & Child(ren)		(\$203.96)		(\$419.24)
Emp , Spouse & Children		(\$12.78)		(\$119.00)



Additional changes will be incorporated
into the RFP process in 2020.

Thank you.