



SCHOOL BOARD OF HENDRY COUNTY FLORIDA

Group/Control#: 00109695

Experience Exhibit

- Claims displayed are incurred and completed through December 2021.
- Claims displayed are based on a rolling 12 months of data.
- Claims paid through February 2022.

Monthly Claims:

Month	Subscribers	Members	Monthly Billed Premium	Total Medical FFS/Caps	Total Rx Claims	AHF Fund Payments (Included in Totals)	
						Medical	Pharmacy
January 2021	934	1,085	\$740,238	\$535,107	\$194,094	\$6,535	\$892
February 2021	920	1,072	\$730,053	\$350,882	\$181,860	\$3,135	\$417
March 2021	934	1,086	\$740,218	\$374,160	\$164,673	\$1,623	\$505
April 2021	948	1,099	\$752,227	\$344,532	\$193,979	\$2,422	\$92
May 2021	942	1,096	\$748,212	\$605,024	\$196,259	\$3,994	\$473
June 2021	899	1,055	\$716,426	\$442,541	\$235,905	\$3,280	\$152
July 2021	877	1,024	\$698,924	\$583,660	\$193,244	\$933	\$759
August 2021	824	969	\$658,857	\$501,453	\$189,768	\$1,976	\$52
September 2021	820	961	\$655,303	\$453,749	\$186,153	\$495	\$38
October 2021	872	1,013	\$693,108	\$465,119	\$224,939	\$190	\$701
November 2021	866	1,005	\$687,890	\$301,704	\$199,160	\$343	\$264
December 2021	874	1,015	\$694,133	\$713,854	\$247,657	\$540	\$52

Aggregate Premium Billed	\$8,515,589
Aggregate Incurred Claims	\$8,079,475
Cost Ratio	94.88%

Premium amounts and lives counts displayed on this report are unaudited

For purposes of this report, the Premium amount may include broker commissions and/or Service Fees. If you have elected to compensate your broker a Service Fee and have also elected for Aetna to serve as a billing and collection agent for such fee, then the Premium amount identified in this report also includes the Service Fee as identified in your Billing and Collection Agreement. For clarification, the Service Fee is not a component of your Premium but is reflected in the "Total Amount Due" identified in your monthly invoice.

SCHOOL BOARD OF HENDRY COUNTY FLORIDA
Plan Sponsor ID 0000000100252625

SB Hendry County Level B

Current Data For Claims January 01, 2021 - December 31, 2021

SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 0000000100252625

Current Data For Claims January 01, 2021 - December 31, 2021

SB Hendry County Level B

Funding Category:

Fully Insured

Product:

ALL

Account Structure:

ALL

Admission Type:

ALL

Aetna\External Indicator:

Aetna

Age Band:

ALL

Copay Tier:

ALL

Exclude Claimants above Threshold:

\$0

Formulary Indicator:

ALL

Gender:

ALL

Generic Indicator:

ALL

GPI Type:

GPI Class

Large Claimant Threshold:

\$50,000

Major Diagnostic Category:

ALL

MDC Exclusion:

None

Member Network Service Area:

ALL

Not Covered Claims:

Exclude

Number of Top Providers:

50

Par Indicator:

ALL

Place of Service:

ALL



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SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 0000000100252625

Current Data For Claims January 01, 2021 - December 31, 2021

SB Hendry County Level B

Place of Service:

Inpatient

Include Par Status:

No

Place of Service:

Non-Inpatient

Primary Payer:

ALL

Provider Class:

Facility

Provider Class:

ALL

Region:

ALL

Relationship:

ALL

Retail/Mail Order/Specialty:

ALL

Include Billed Amount:

Yes

When running a bundle, the excluding high cost claimants parameter only applies to the Executive Summary, Provider Network Experience, Utilization Detail, Utilization and Unit Cost, Catastrophic Claimant Detail and Provider Services Profile reports.



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SB Hendry County Level B

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SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 0000000100252625

Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag

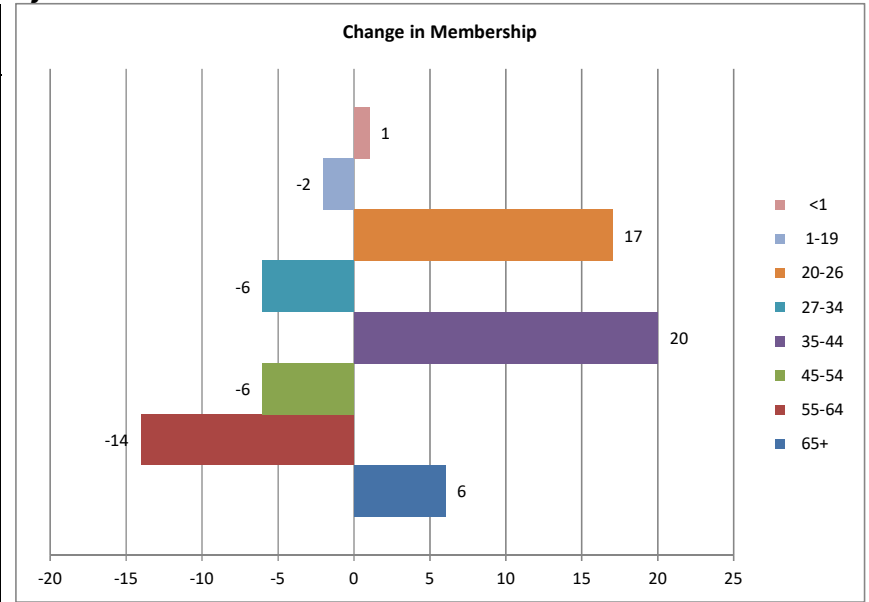
Catastrophic Claimant Detail by Medical by Diagnosis Code

Claimant	Total Medical Paid Amount	Inpatient Paid Amount	Ambulatory Paid Amount	Diagnosis Code	Description	Service Rendered in Last Quarter
1	\$209,956	\$41	\$209,916	C34.81	MALIGNANT NEOPLASM OF OVRLP SITES OF RIGHT BRONCHUS AND LUNG	Yes
2	\$204,795	\$194,241	\$10,554	M41.124	ADOLESCENT IDIOPATHIC SCOLIOSIS, THORACIC REGION	Yes
3	\$179,410	\$0	\$179,410	N18.6	END STAGE RENAL DISEASE	Yes
4	\$163,599	\$13,818	\$149,781	N18.6	END STAGE RENAL DISEASE	Yes
5	\$153,323	\$142,176	\$11,147	S82.841A	DISPLACED BIMALLEOLAR FRACTURE OF RIGHT LOWER LEG, INIT	Yes
6	\$140,250	\$103,609	\$36,641	I48.4	ATYPICAL ATRIAL FLUTTER	Yes
7	\$104,540	\$84,766	\$19,775	T81.42XA	INFCT FOL A PROCEDURE, DEEP INCISIONAL SURGICAL SITE, INIT	Yes
8	\$99,016	\$39,946	\$59,071	K59.1	FUNCTIONAL DIARRHEA	Yes
9	\$87,411	\$31,580	\$55,832	C48.1	MALIGNANT NEOPLASM OF SPECIFIED PARTS OF PERITONEUM	No
10	\$85,358	\$0	\$85,358	G61.81	CHRONIC INFLAMMATORY DEMYELINATING POLYNEURITIS	Yes
11	\$80,542	\$0	\$80,542	G35	MULTIPLE SCLEROSIS	Yes
12	\$78,389	\$0	\$78,389	C50.812	MALIGNANT NEOPLASM OF OVRLP SITES OF LEFT FEMALE BREAST	Yes
13	\$70,293	\$30,810	\$39,483	R69	ILLNESS, UNSPECIFIED	Yes
14	\$68,276	\$49,167	\$19,110	L02.612	CUTANEOUS ABSCESS OF LEFT FOOT	Yes
15	\$67,484	\$0	\$67,484	M17.12	UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE	Yes
16	\$60,622	\$44,554	\$16,067	A41.51	SEPSIS DUE TO ESCHERICHIA COLI (E. COLI)	Yes
17	\$55,180	\$27,264	\$27,916	K80.30	CALCULUS OF BILE DUCT W CHOLANGITIS, UNSP, W/O OBSTRUCTION	Yes
18	\$54,200	\$0	\$54,200	M54.5	LOW BACK PAIN	No
19	\$52,275	\$18,408	\$33,867	K50.118	CROHN'S DISEASE OF LARGE INTESTINE WITH OTHER COMPLICATION	No
20	\$51,756	\$40,563	\$11,193	I48.0	PAROXYSMAL ATRIAL FIBRILLATION	Yes
21	\$51,604	\$0	\$51,604	N18.6	END STAGE RENAL DISEASE	Yes
22	\$50,094	\$42,832	\$7,261	I21.4	NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION	No
23	\$50,031	\$37,496	\$12,535	U07.1	COVID-19	Yes
Total	\$2,218,403	\$901,271	\$1,317,133			

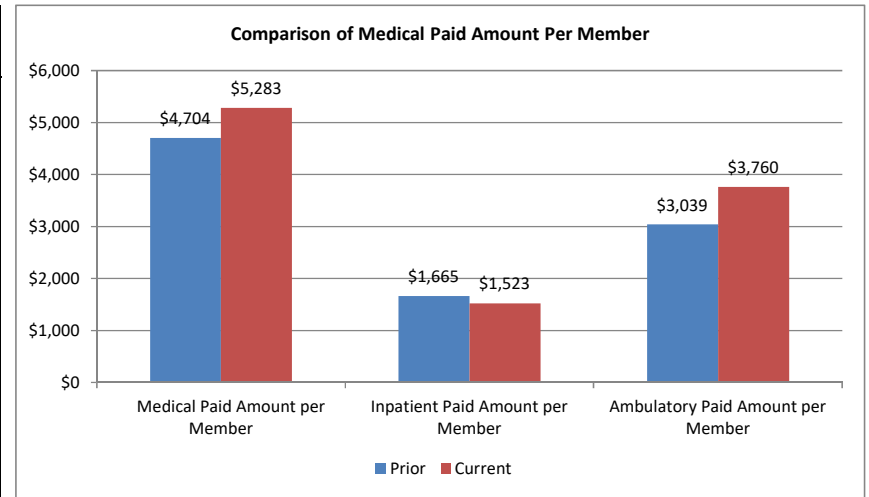
SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 0000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag
 Prior Data For Claims Incurred January 01, 2020 - December 31, 2020 with 2 months lag

Executive Summary

DEMOGRAPHICS				
	Prior	Current	%Change	Aetna BOB
Number of Employees	869	893	2.7%	N/A
Number of Members	1,024	1,040	1.5%	N/A
Percent Male Members	27.1%	25.5%	-1.6%	48.6%
Percent Female Members	72.9%	74.5%	1.6%	51.4%
Average Age of Membership	41.5	41.3	-0.6%	35.0
Members by Age Band				
<1	5	6	24.1%	N/A
1-19	76	74	-2.1%	N/A
20-26	117	134	14.7%	N/A
27-34	195	189	-3.0%	N/A
35-44	146	166	13.3%	N/A
45-54	195	189	-3.3%	N/A
55-64	256	242	-5.4%	N/A
65+	34	40	17.5%	N/A



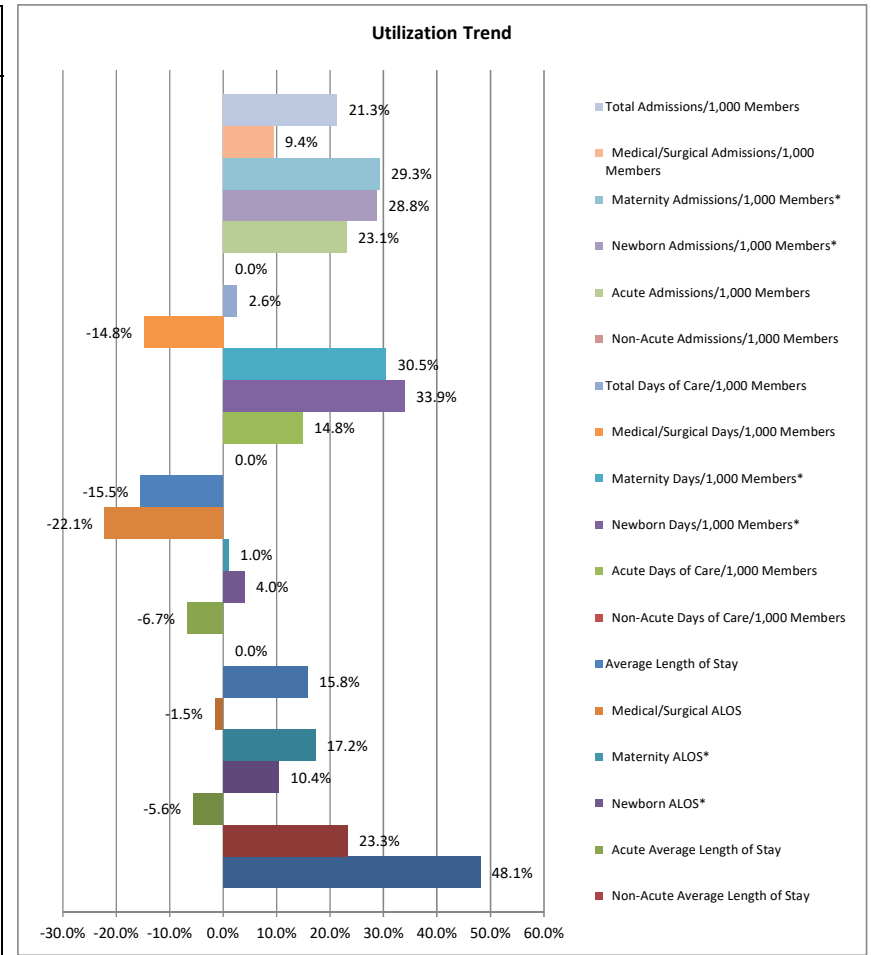
FINANCIAL				
	Prior	Current	%Change	Aetna BOB
Total Medical and Pharmacy Paid Amount	\$6,987,914	\$7,902,183	13.1%	N/A
Total Pharmacy Paid Amount	\$2,170,318	\$2,407,691	10.9%	N/A
Pharmacy Paid Amount per Member	\$2,119	\$2,315	9.2%	N/A
Total Medical Paid Amount	\$4,817,596	\$5,494,493	14.1%	N/A
Medical Paid Amount per Member	\$4,704	\$5,283	12.3%	N/A
Medical Paid Amount per Employee	\$5,543	\$6,156	11.1%	N/A
Total Medical Capitation Payments	\$0	\$0	N/A	N/A
Medical Capitation Paid per Member	\$0	\$0	N/A	N/A
Total Medical Paid (Claims and Capitation)	\$4,817,596	\$5,494,493	14.1%	N/A
Medical Paid per Member (Claims and Capitation)	\$4,704	\$5,283	12.3%	N/A
Inpatient Paid Amount per Member	\$1,665	\$1,523	-8.5%	N/A
Ambulatory Paid Amount per Member	\$3,039	\$3,760	23.7%	N/A



SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag
 Prior Data For Claims Incurred January 01, 2020 - December 31, 2020 with 2 months lag

Executive Summary

UTILIZATION	Prior	Current	%Change	Aetna BOB
Total Admissions/1,000 Members	67	82	21.3%	61
Medical/Surgical Admissions/1,000 Members	35	38	9.4%	N/A
Maternity Admissions/1,000 Members*	16	20	29.3%	N/A
Newborn Admissions/1,000 Members*	13	16	28.8%	N/A
Acute Admissions/1,000 Members	66	82	23.1%	N/A
Non-Acute Admissions/1,000 Members	1	0	N/A	N/A
Total Days of Care/1,000 Members	329	338	2.6%	299
Medical/Surgical Days/1,000 Members	225	191	-14.8%	N/A
Maternity Days/1,000 Members*	39	51	30.5%	N/A
Newborn Days/1,000 Members*	24	33	33.9%	N/A
Acute Days of Care/1,000 Members	294	338	14.8%	N/A
Non-Acute Days of Care/1,000 Members	35	0	N/A	N/A
Average Length of Stay	4.9	4.1	-15.5%	4.9
Medical/Surgical ALOS	6.4	5.0	-22.1%	N/A
Maternity ALOS*	2.5	2.5	1.0%	N/A
Newborn ALOS*	1.9	2.0	4.0%	N/A
Acute Average Length of Stay	4.4	4.1	-6.7%	N/A
Non-Acute Average Length of Stay	36.0	N/A	N/A	N/A
Total Surgeries/1,000 Members	706	817	15.8%	756
Inpatient Surgeries/1,000 Members	57	56	-1.5%	52
Ambulatory Surgeries/1,000 Members	651	763	17.2%	704
Office Visits/1,000 Members	3,971	4,384	10.4%	4,547
PCP Office Visits/1,000 Members	1,770	1,671	-5.6%	N/A
Specialist Office Visits/1,000 Members	2,202	2,714	23.3%	N/A
ER Visits/1,000 Members	236	350	48.1% <td>239</td>	239



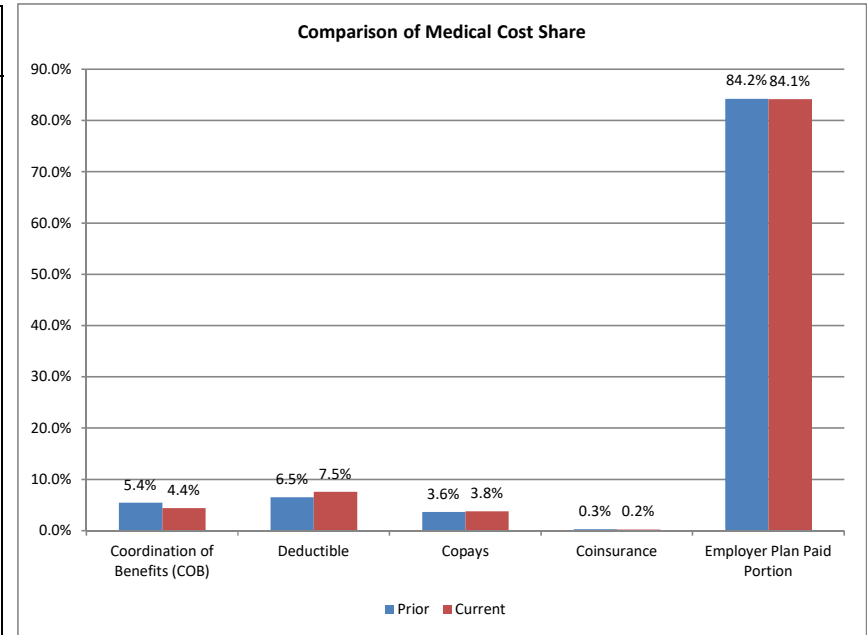
SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 0000000100252625

Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag

Prior Data For Claims Incurred January 01, 2020 - December 31, 2020 with 2 months lag

Executive Summary

MEDICAL COST SHARE				
	Prior	Current	%Change	Aetna BOB
Coordination of Benefits (COB)	\$308,776	\$287,110	-7.0%	N/A
Deductible	\$371,219	\$491,921	32.5%	N/A
Copays	\$207,413	\$246,015	18.6%	N/A
Coinsurance	\$15,262	\$13,438	-12.0%	N/A
Member Paid Portion	\$593,895	\$751,374	26.5%	N/A
Member Paid Portion per Member	\$580	\$722	24.6%	N/A
Employer Plan Paid Portion	\$4,817,596	\$5,494,493	14.1%	N/A
Employer Plan Paid Portion per Member	\$4,704	\$5,283	12.3%	N/A
Deductible-w/o Fund payment**	\$10,908	\$23,495	115.4%	N/A
Copays-w/o Fund payment**	N/A	\$1,128	N/A	N/A
Coinsurance-w/o Fund payment**	\$1,893	\$6,476	242.2%	N/A
Member Paid Portion-w/o Fund payment	\$12,800	\$31,099	143.0%	N/A
Member Paid Portion/Member-w/o Fund Pmt	\$13	\$30	139.2%	N/A
Employer % Share Medical	84.4%	84.4%	0.0%	83.0%
Member % Share Medical	10.2%	11.2%	1.0%	13.8%
COB % Share Medical	5.4%	4.4%	-1.0%	3.2%



* For HMO platform products, Well Newborns are not counted. For PPO platform products, Well Newborns are included in the Newborn category.

** This represents the true amount paid by the employee less the AHF amount paid by the employer.

SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 0000000100252625

Health Profile Reporting End Period: February 28, 2022

Health Profile - Top 25 Diseases by Paid Amount¹

Disease Description	Number of Unique Claimants with Disease	Prevalence	BOB Prevalence ²	Total Paid Amount for		
				Claimants with Disease ³	Total Paid Amount Per Claimant with Disease ³	Total Paid Amount Per Member for Population
Hypertension	216	26.3%	12.6%	\$1,903,492	\$8,812	\$2,319
Obesity	154	18.8%	5.9%	\$1,437,404	\$9,334	\$1,751
Hyperlipidemia	196	23.9%	12.7%	\$1,432,376	\$7,308	\$1,745
Low Back Pain	95	11.6%	5.7%	\$1,035,693	\$10,902	\$1,262
Nonspecific Gastritis/Dyspepsia	87	10.6%	6.4%	\$735,520	\$8,454	\$896
Ischemic Heart Disease	33	4.0%	1.6%	\$660,516	\$20,016	\$805
Diabetes Mellitus	69	8.4%	4.6%	\$608,483	\$8,819	\$741
COVID-19	31	3.8%	1.8%	\$575,246	\$18,556	\$701
Depression	85	10.4%	7.7%	\$544,803	\$6,409	\$664
Anxiety	76	9.3%	8.3%	\$497,916	\$6,552	\$606
Chronic Thyroid Disorders	86	10.5%	5.8%	\$429,675	\$4,996	\$523
Metabolic Syndrome	50	6.1%	2.2%	\$418,364	\$8,367	\$510
Migraine and Other Headaches	39	4.8%	3.5%	\$403,676	\$10,351	\$492
Osteoarthritis	24	2.9%	1.9%	\$392,041	\$16,335	\$478
Atrial Fibrillation	11	1.3%	0.7%	\$349,991	\$31,817	\$426
Chronic Renal Failure	10	1.2%	0.5%	\$340,668	\$34,067	\$415
Chronic Obstructive Pulmonary Disease	11	1.3%	0.6%	\$303,670	\$27,606	\$370
Heart Failure	8	1.0%	0.6%	\$302,246	\$37,781	\$368
Cataract	30	3.7%	1.2%	\$300,103	\$10,003	\$366
Allergy	41	5.0%	4.0%	\$267,683	\$6,529	\$326
Asthma	36	4.4%	3.7%	\$200,067	\$5,557	\$244
Iron Deficiency Anemia	13	1.6%	0.7%	\$193,427	\$14,879	\$236
Cerebrovascular Disease	11	1.3%	0.5%	\$183,242	\$16,658	\$223
Otitis Media	5	0.6%	1.1%	\$176,467	\$35,293	\$215
Breast Cancer	10	1.2%	0.6%	\$147,014	\$14,701	\$179
Total All Claimants (with or without disease)	746	N/A	N/A	\$3,814,843	\$5,114	\$4,647

Plan ID filter value selection does not apply to this report. A value of ALL is assumed.

¹The time period for this report is independent of the overall report package and will always reflect at least 12 months of incurred services for the most recent data available.

²Aetna BOB norms are generated by product category, but are not adjusted for demographics. BOB includes populations both with and without Rx benefits. Reported prevalence rates are generally higher when Rx data is available.

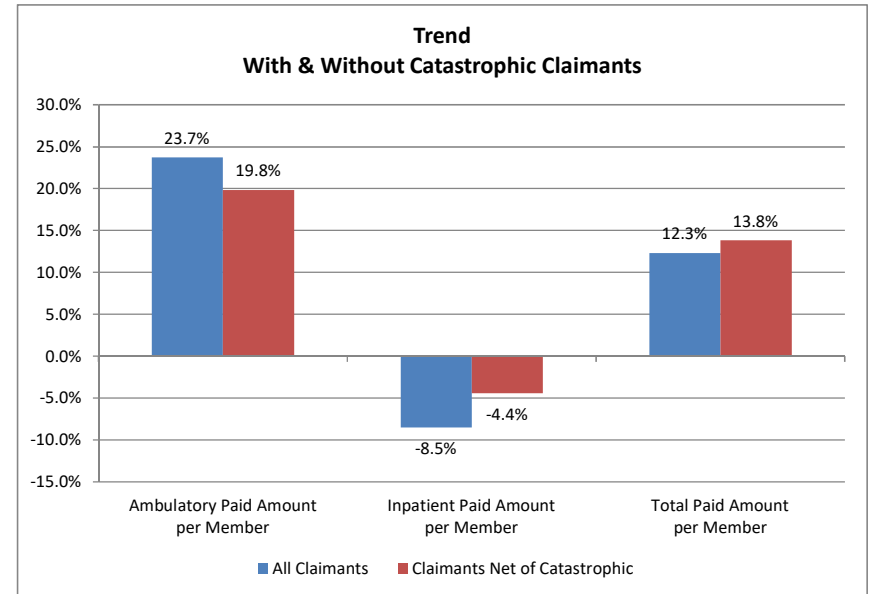
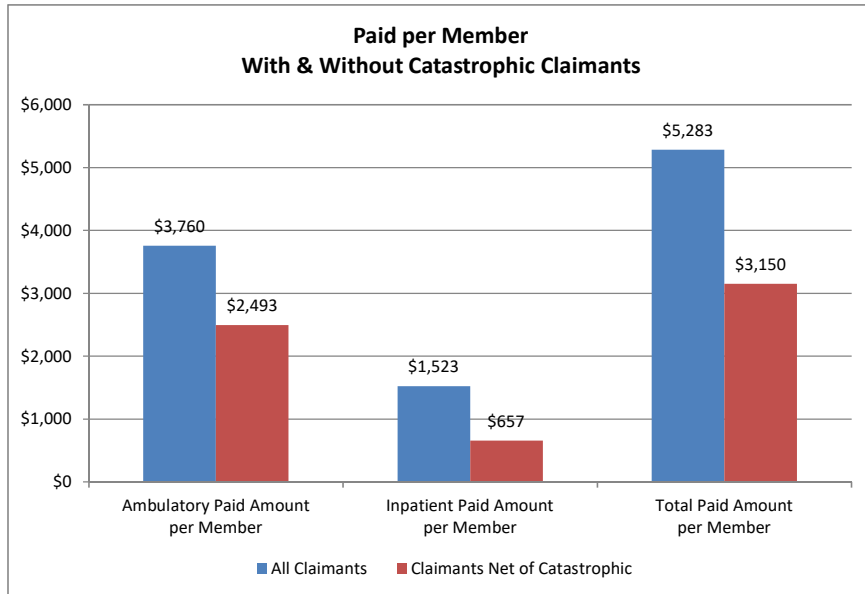
³Total paid amounts are not limited to disease-specific claims, but also include any claims incurred by that claimant with the disease during the reporting period.



SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag

Impact of Medical Catastrophic Claimant Experience

	All Claimants			Claimants Above Threshold		
	Prior	Current	% Change	Prior	Current	% Change
Number Of Claimants	974	1,034	6.2%	16	23	43.8%
Claimants Per 1,000 Members	951.0	994.2	4.5%	15.6	22.1	N/A
Medical Paid Amount for these Claimants	\$4,817,596	\$5,494,493	14.1%	\$1,983,146	\$2,218,403	11.9%
Average Paid Per Catastrophic Claimant	N/A	N/A	N/A	\$123,947	\$96,452	-22.2%
% of Total Paid Amount	N/A	N/A	N/A	41.2%	40.4%	-0.8%
Net of Catastrophic Claimants						
Medical Paid Amount per Member	\$4,704	\$5,283	12.3%	\$2,768	\$3,150	13.8%
Inpatient Paid Amount per Member	\$1,665	\$1,523	-8.5%	\$687	\$657	-4.4%
Ambulatory Paid Amount per Member	\$3,039	\$3,760	23.7%	\$2,081	\$2,493	19.8%

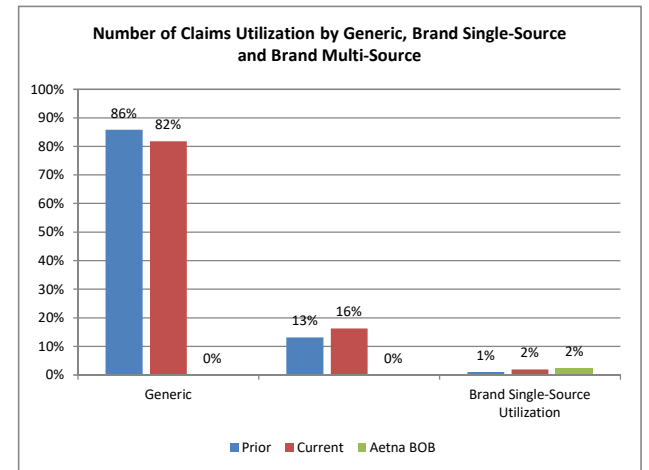
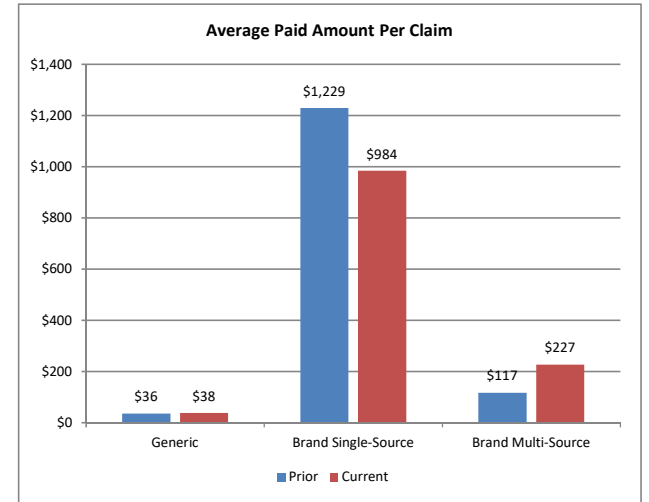


SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625

Current Data For Claims January 01, 2021 - December 31, 2021

Key Statistics by Generic, Brand Single-Source & Brand Multi-Source

Generic	Prior	Current	% Change	Aetna BOB
Generic Pharmacy Paid Amount	\$342,934	\$379,239	10.6%	N/A
Generic Pharmacy Paid Amount per Eligible Member	\$335	\$365	8.9%	N/A
Generic Pharmacy Paid Amount per Utilizing Member	\$415	\$395	-4.6%	N/A
Average Generic Paid Amount Per Claim	\$35.68	\$37.68	5.6%	\$29.16
Number of Generic Claims	9,611	10,065	4.7%	N/A
Number of Generic Pharmacy Claims Per Eligible Member	9.4	9.7	3.1%	9.7
Calculated Ingredient Cost	\$426,786	\$470,467	10.2%	N/A
Total Copay Amount	\$87,947	\$95,075	8.1%	N/A
Generic Utilization	85.8%	81.8%	-4.0%	N/A
Brand Single-Source				
Brand Single-Source	Prior	Current	% Change	Aetna BOB
Brand Single-Source Pharmacy Paid Amount	\$1,813,149	\$1,974,688	8.9%	N/A
Brand Single-Source Pharmacy Paid Amount per Eligible Member	\$1,770	\$1,899	7.3%	N/A
Brand Single-Source Pharmacy Paid Amount per Utilizing Member	\$2,192	\$2,059	-6.1%	\$1,427
Average Brand Single-Source Paid Amount Per Claim	\$1,229.25	\$983.90	-20.0%	\$717.28
Number of Brand Single-Source Claims	1,475	2,007	36.1%	N/A
Number of Brand Single-Source Pharmacy Claims Per Eligible Member	1.4	1.9	34.0%	2.1
Calculated Ingredient Cost	\$1,873,776	\$2,006,477	7.1%	N/A
Total Copay Amount	\$61,122	\$48,175	-21.2%	N/A
Brand Single-Source Utilization	13.2%	16.3%	3.1%	N/A
Brand Multi-Source				
Brand Multi-Source	Prior	Current	% Change	Aetna BOB²
Brand Multi-Source Pharmacy Paid Amount	\$14,235	\$53,763	277.7%	N/A
Brand Multi-Source Pharmacy Paid Amount per Eligible Member	\$14	\$52	271.9%	\$95
Brand Multi-Source Pharmacy Paid Amount per Utilizing Member	\$17	\$56	225.7%	\$90
Average Brand Multi-Source Paid Amount Per Claim	\$116.68	\$226.85	94.4%	\$329.25
Number of Brand Multi-Source Claims	122	237	94.3%	N/A
Number of Brand Multi-Source Pharmacy Claims Per Eligible Member	0.1	0.2	91.3%	0.3
Calculated Ingredient Cost	\$20,196	\$64,366	218.7%	N/A
Total Copay Amount	\$6,029	\$10,697	77.4%	N/A
Brand Multi-Source Utilization	1.1%	1.9%	0.8%	2.4%

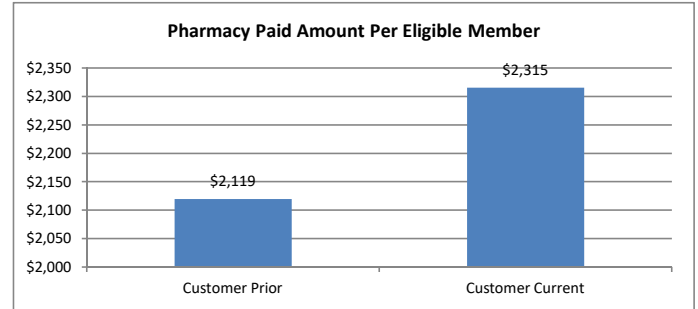


SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625

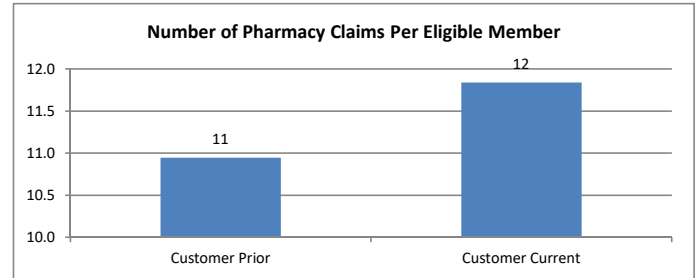
Current Data For Claims January 01, 2021 - December 31, 2021

Key Statistics Pharmacy

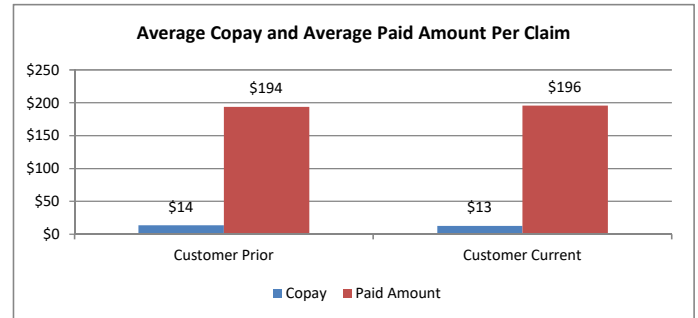
Demographics Summary	Prior	Current	% Change	Aetna BOB¹
Number of Employees	869	893	2.7%	N/A
Number of Members	1,024	1,040	1.5%	N/A
Ratio of Members to Employees	1.2	1.2	-1.1%	1.8
Percent Male Members	27.1%	25.5%	-1.6%	49.6%
Percent Female Members	72.9%	74.5%	1.6%	50.4%
Average Age of Membership	41.5	41.3	-0.6%	34.4
Number of Utilizing Members	827	959	16.0%	N/A



Key Statistics	Prior	Current	% Change	BOB²
Total Pharmacy Paid Amount	\$2,170,318	\$2,407,691	10.9%	N/A
Pharmacy Paid Amount per Eligible Member	\$2,119	\$2,315	9.2%	N/A
Pharmacy Paid Amount per Utilizing Member	\$2,624	\$2,511	-4.3%	N/A
Average Paid Amount per Claim	\$193.64	\$195.60	1.0%	N/A
Number of Pharmacy Claims	11,208	12,309	9.8%	N/A
Number of Pharmacy Claims Per Eligible Member	10.9	11.8	8.2%	N/A
Number of Pharmacy Claims Per Utilizing Member	13.6	12.8	-5.3%	N/A



Calculated Ingredient Cost	\$2,320,757	\$2,541,310	9.5%	N/A
Total Copay Amount	\$155,098	\$153,947	-0.7%	N/A
Average Copay Amount per Claim	\$13.84	\$12.51	-9.6%	N/A
Generic Utilization	85.8%	81.8%	-4.0%	80.3%
Generic Substitution	98.7%	97.7%	-1.0%	97.1%
Brand Utilization	14.2%	18.2%	4.0%	19.7%
Formulary Utilization	99.7%	90.8%	-8.9%	89.5%



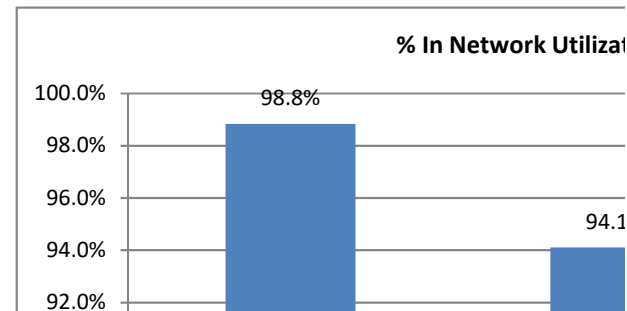
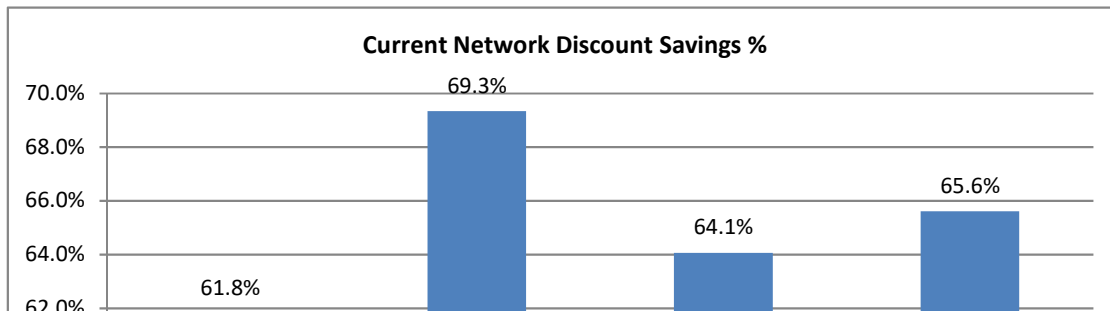
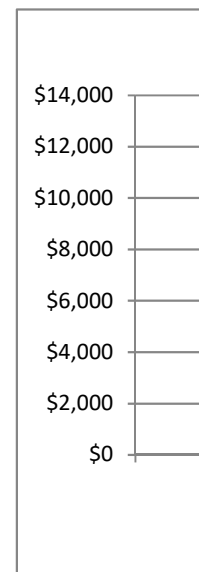
¹ Aetna BOB demographic metrics are specific to the product and to the plan sponsor's region(s).

² Aetna BOB financial and utilization metrics are further adjusted for the plan sponsor's age and gender mix. All BOB metrics are based on a 12 month incurred time period.

SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 month
 Prior Data For Claims Incurred January 01, 2020 - December 31, 2020 with 2 months

Provider Network Experience - Medical

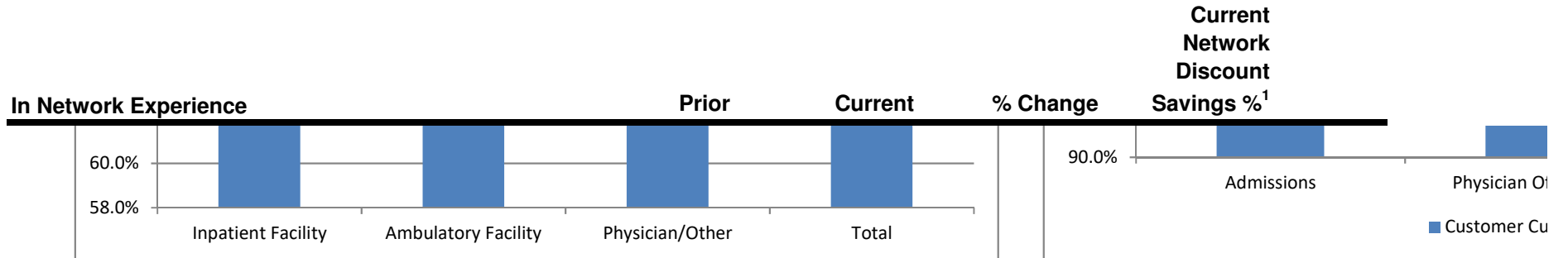
In Network Experience	Prior	Current	% Change	Current Network Discount Savings %¹
Billed Network Charges (before discount)	\$13,066,987	\$16,410,176	25.6%	
Network Discount Savings:				
Inpatient Facility	\$2,478,829	\$2,311,167	-6.8%	61.8%
Ambulatory Facility	\$2,317,291	\$4,443,524	91.8%	69.3%
Physician/Other	\$3,558,268	\$4,011,948	12.8%	64.1%
Total	\$8,354,387	\$10,766,639	28.9%	65.6%
Network Discount Savings per Employee	\$9,612	\$12,063	25.5%	
Network Discount Savings per Member	\$8,157	\$10,353	26.9%	
Avg Discount Savings per Network Admission	\$36,997	\$27,514	-25.6%	
Network Utilization Metrics				
% Admissions In Network	97.1%	98.8%	1.7%	
% Physician Office Visits In Network	98.1%	94.1%	-4.0%	
% Claims Paid In Network	95.6%	97.8%	2.2%	



SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625

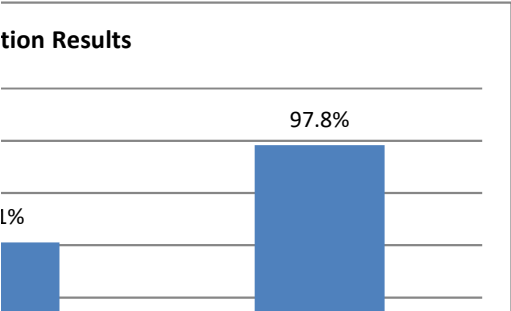
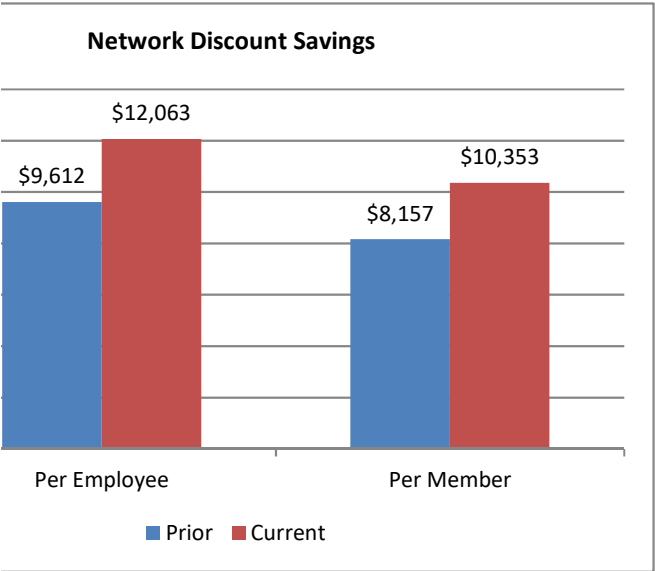
Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 month
 Prior Data For Claims Incurred January 01, 2020 - December 31, 2020 with 2 months

Provider Network Experience - Medical



¹ The calculation for Physician/Other excludes claims where the physician's billed amount is equal to the allowed amount (discounted charge).

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SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag

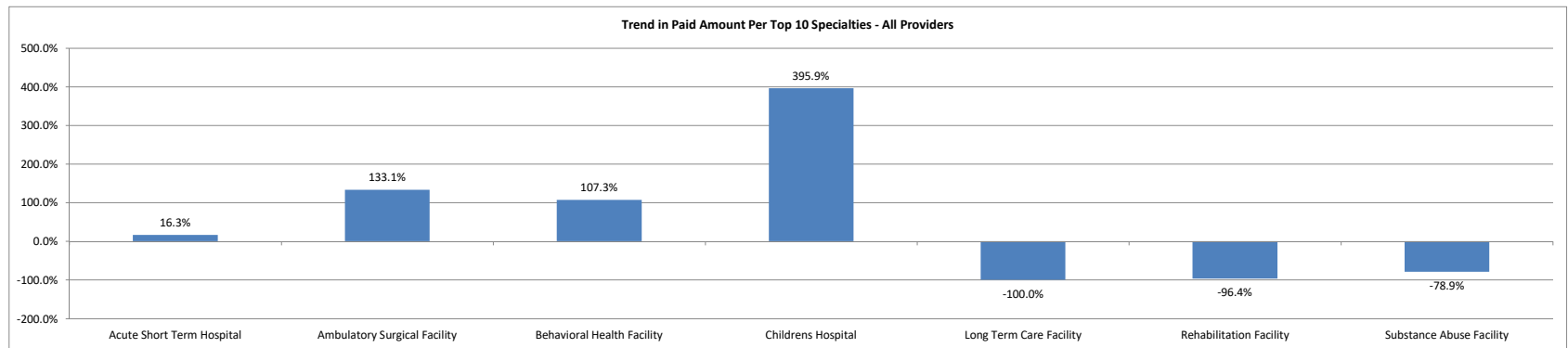
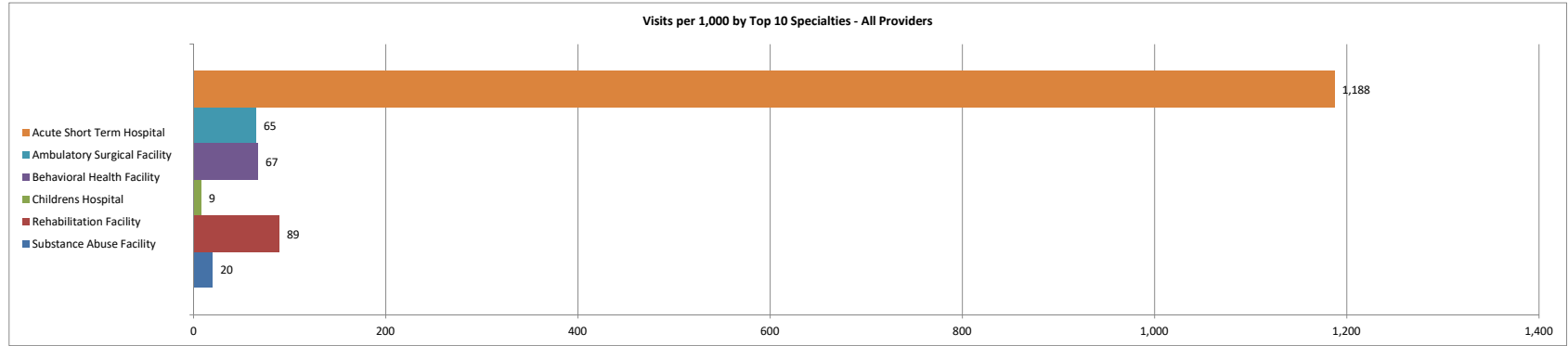
Provider Services Profile by Paid Amount

Provider Name	City	State	Zip Code	Provider Number	Specialist	Number of Claimants	Visits	Visits Per	Admissions	Number of Services	Paid Amount	Paid Amount	Paid Amount	% of Total Paid Amount
								1000 Members				Per Member	Per Claimant	
Healthpark Medical Center	Fort Myers	FL	33908	620683009	Acute Short Term Hospital	60	92	88.5	32	998	\$753,004	\$724	\$12,550	24.1%
Gulf Coast Medical Center	Fort Myers	FL	33912	620283509	Acute Short Term Hospital	45	79	76.0	9	881	\$483,403	\$465	\$10,742	15.5%
Hendry Regional Medical Center	Clewiston	FL	33440	620023009	Acute Short Term Hospital	185	440	423.1	5	2,642	\$425,635	\$409	\$2,301	13.6%
Lee Memorial Hospital	Fort Myers	FL	33901	620039009	Acute Short Term Hospital	81	176	169.2	2	781	\$272,772	\$262	\$3,368	8.7%
Lehigh Regional Medical Center	Lehigh Acres	FL	33936	620070009	Acute Short Term Hospital	19	36	34.6	2	395	\$161,576	\$155	\$8,504	5.2%
Palms West Hospital - HCA Affiliate	Loxahatchee	FL	33470	620151009	Acute Short Term Hospital	19	47	45.2	2	625	\$139,245	\$134	\$7,329	4.5%
St. Mary's Medical Center	West Palm Beach	FL	33407	620136009	Acute Short Term Hospital	2	3	2.9	1	81	\$133,473	\$128	\$66,736	4.3%
Delray Medical Center	Delray Beach	FL	33484	620140009	Acute Short Term Hospital	1	2	1.9	1	47	\$82,553	\$79	\$82,553	2.6%
Wellington Regional Medical Center	Wellington	FL	33414	620153009	Acute Short Term Hospital	17	24	23.1	9	284	\$63,311	\$61	\$3,724	2.0%
Riverwalk Surgery Center	Fort Myers	FL	33919	512154009	Ambulatory Surgical Facility	2	2	1.9	0	7	\$50,560	\$49	\$25,280	1.6%
Cleveland Clinic Hospital	Weston	FL	33331	703624509	Acute Short Term Hospital	3	14	13.5	3	204	\$44,552	\$43	\$14,851	1.4%
Cape Coral Hospital	Cape Coral	FL	33990	620019009	Acute Short Term Hospital	46	96	92.3	3	251	\$39,180	\$38	\$852	4.3%
Sanford Medical Center Fargo	Fargo	ND	58103	993816809	Acute Short Term Hospital	2	4	3.8	0	71	\$36,582	\$35	\$18,291	1.2%
Colonial Outpatient Surgery Center LLC	Fort Myers	FL	33966	682416209	Ambulatory Surgical Facility	3	3	2.9	0	17	\$33,088	\$32	\$11,029	1.1%
AdventHealth Ocala	Ocala	FL	34471	620090009	Acute Short Term Hospital	1	2	1.9	0	19	\$32,848	\$32	\$32,848	1.1%
La Amistad Residential Treatment Center	Winter Park	FL	32792	767528109	Behavioral Health Facility	1	39	37.5	2	39	\$27,300	\$26	\$27,300	0.9%
Golisano Childrens Hospital of SWFL	Fort Myers	FL	33908	489461709	Childrens Hospital	8	9	8.7	2	49	\$25,202	\$24	\$3,150	0.8%
Naples Community Hospital	Naples	FL	34102	620089509	Acute Short Term Hospital	3	5	4.8	0	185	\$20,993	\$20	\$6,998	0.7%
Bethesda Hospital, Inc.	Boynton Beach	FL	33435	620016509	Acute Short Term Hospital	1	7	6.7	0	144	\$18,338	\$18	\$18,338	0.6%
Lakeside Medical Center	Belle Glade	FL	33430	620014509	Acute Short Term Hospital	13	21	20.2	1	250	\$16,309	\$16	\$1,255	0.5%
Sanford USD Medical Center	Sioux Falls	SD	57105	652035009	Acute Short Term Hospital	1	1	1.0	0	23	\$15,842	\$15	\$15,842	0.5%
Physicians Regional Medical Center (Pine)	Naples	FL	34119	738001609	Acute Short Term Hospital	3	7	6.7	0	64	\$13,879	\$13	\$4,626	0.4%
AdventHealth Winter Park	Winter Park	FL	32792	620138009	Acute Short Term Hospital	1	3	2.9	0	93	\$13,875	\$13	\$13,875	0.4%
5 Palms	Ormond Beach	FL	32174	527192709	Behavioral Health Facility	1	18	17.3	1	40	\$13,450	\$13	\$13,450	0.4%
Palm Beach Gardens Medical Center	Palm Beach Gardens	FL	33410	620098509	Acute Short Term Hospital	1	3	2.9	1	41	\$12,631	\$12	\$12,631	0.4%
Bayfront Health Port Charlotte	Port Charlotte	FL	33952	620108509	Acute Short Term Hospital	2	5	4.8	0	16	\$11,740	\$11	\$5,870	0.4%
Murdock Ambulatory Surgery Center, LLC	Port Charlotte	FL	33948	767590909	Ambulatory Surgical Facility	3	3	2.9	0	9	\$10,997	\$11	\$3,666	0.4%
Jackson Memorial Hospital	Miami	FL	33136	620080509	Acute Short Term Hospital	2	16	15.4	0	87	\$10,988	\$11	\$5,494	0.4%
St. Joseph East	Lexington	KY	40509	563856309	Acute Short Term Hospital	1	2	1.9	0	16	\$10,544	\$10	\$10,544	0.3%
St. Luke's Hospital	Columbus	NC	28722	638083509	Acute Short Term Hospital	1	4	3.8	0	20	\$10,074	\$10	\$10,074	0.3%
Park Royal Hospital	Fort Myers	FL	33908	961687309	Behavioral Health Facility	2	11	10.6	1	11	\$9,537	\$9	\$4,768	0.3%
HMS FL AHCA	Dallas	TX	75267	982489709	Acute Short Term Hospital	2	52	50.0	0	162	\$8,358	\$8	\$4,179	0.3%
Shoals Hospital	Muscle Shoals	AL	35661	612070509	Acute Short Term Hospital	1	2	1.9	0	32	\$8,329	\$8	\$8,329	0.3%
Tampa General Hospital	Tampa	FL	33606	620128509	Acute Short Term Hospital	1	2	1.9	0	2	\$7,110	\$7	\$7,110	0.2%
JFK Medical Center	Atlantis	FL	33462	620068009	Acute Short Term Hospital	2	2	1.9	0	20	\$7,069	\$7	\$3,535	0.2%
Bay Pines VAMC	Bay Pines	FL	33744	620287009	Acute Short Term Hospital	6	27	26.0	0	61	\$6,853	\$7	\$1,142	0.2%
Jupiter Medical Center	Jupiter	FL	33458	620138509	Acute Short Term Hospital	1	2	1.9	0	32	\$6,426	\$6	\$6,426	0.2%
Georgetown Community Hospital	Georgetown	KY	40324	628025509	Acute Short Term Hospital	1	1	1.0	0	14	\$6,261	\$6	\$6,261	0.2%
White Sands Outpatient Services	Fort Myers	FL	33912	682326109	Substance Abuse Facility	1	20	19.2	1	20	\$6,208	\$6	\$6,208	0.2%
Barkley Surgicenter Inc	Fort Myers	FL	33907	872011409	Ambulatory Surgical Facility	14	17	16.3	0	69	\$5,712	\$5	\$408	0.2%
Cape Health Surgery Center	Cape Coral	FL	33990	990296309	Ambulatory Surgical Facility	3	3	2.9	0	3	\$4,377	\$4	\$1,459	0.1%
Cleveland Clinic	Cleveland	OH	44195	646038509	Acute Short Term Hospital	2	4	3.8	0	32	\$4,356	\$4	\$2,178	0.1%
Physicians Regional Medical Center (Coll)	Naples	FL	34114	966246809	Acute Short Term Hospital	1	1	1.0	0	8	\$4,120	\$4	\$4,120	0.1%
AdventHealth Lake Placid	Lake Placid	FL	33852	448935109	Acute Short Term Hospital	2	2	1.9	0	4	\$3,393	\$3	\$1,697	0.1%
Fort Myers Surgery Center	Fort Myers	FL	33907	788039609	Ambulatory Surgical Facility	2	2	1.9	0	3	\$3,225	\$3	\$1,613	0.1%
Johns Hopkins All Children's Hospital	St. Petersburg	FL	33701	620112509	Acute Short Term Hospital	1	1	1.0	0	4	\$2,640	\$3	\$2,640	0.1%
Palms West Surgicenter - HCA Affiliate	Loxahatchee	FL	33470	700480509	Ambulatory Surgical Facility	2	2	1.9	0	5	\$2,608	\$3	\$1,304	0.1%
Centennial Medical Center - HCA Affiliat	Nashville	TN	37203	653072509	Acute Short Term Hospital	1	1	1.0	0	3	\$2,573	\$2	\$2,573	0.1%
Baptist Surgery and Endoscopy Centers, L	Miami	FL	33143	732579309	Ambulatory Surgical Facility	1	1	1.0	0	2	\$2,550	\$2	\$2,550	0.1%
Kendall Regional Medical Center - HCA Af	Miami	FL	33175	620076509	Acute Short Term Hospital	1	2	1.9	1	25	\$2,524	\$2	\$2,524	0.1%
All Other Providers						54	178	171.2	6	845	\$36,289	\$35	\$672	1.2%
Total All Providers						442	1,496	1,438.5	85	9,736	\$3,124,462	\$3,004	\$7,069	

Report excludes encounter utilization data for HMO based products.

Provider Services Profile by Paid Amount

Provider Name	City	State	Zip Code	Provider Number	Specialist	Number of Claimants	Visits	Visits Per 1000 Members	Admissions	Number of Services	Paid Amount	Paid Amount Per Member	Paid Amount Per Claimant	% of Total Paid Amount
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SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625

Current Data For Claims January 01, 2021 - December 31, 2021

Pharmacy GPI Roll-Up Categories

GPI Class	Number of Utilizing Members	Percent Formulary Compliance	Number of Claims	Percent of All Claims	Calculated Ingredient Cost	Paid Amount	Percent of Paid Amount	Average Paid Amount per Claim	Paid Amount per Utilizing Member
Cardiovascular Agents	352	99.7%	2,835	23.0%	\$206,509	\$173,882	7.2%	\$61.33	\$493.98
Endocrine and Metabolic Drugs	434	94.6%	2,111	17.2%	\$582,317	\$543,287	22.6%	\$257.36	\$1,251.81
Central Nervous System Drugs	249	99.3%	1,287	10.5%	\$67,241	\$54,815	2.3%	\$42.59	\$220.14
Anti-Infective Agents	477	100.0%	1,097	8.9%	\$91,598	\$84,245	3.5%	\$76.80	\$176.61
Analgesics and Anesthetics	278	97.9%	1,041	8.5%	\$588,498	\$577,463	24.0%	\$554.72	\$2,077.20
Biologicals	424	1.6%	756	6.1%	\$92,025	\$107,466	4.5%	\$142.15	\$253.46
Respiratory Agents	222	90.2%	755	6.1%	\$102,347	\$90,512	3.8%	\$119.88	\$407.71
Neuromuscular Drugs	145	100.0%	583	4.7%	\$68,133	\$62,883	2.6%	\$107.86	\$433.68
Topical Products	243	98.0%	500	4.1%	\$162,559	\$154,718	6.4%	\$309.44	\$636.70
Gastrointestinal Agents	173	94.6%	389	3.2%	\$51,151	\$46,950	1.9%	\$120.69	\$271.39
Stimulants/Anti-Obesity/Aorexients	50	70.2%	325	2.6%	\$64,497	\$59,389	2.5%	\$182.73	\$1,187.77
Hematological Agents	51	100.0%	175	1.4%	\$59,268	\$54,002	2.2%	\$308.58	\$1,058.86
Nutritional Products	61	98.0%	148	1.2%	\$2,929	\$1,289	0.1%	\$8.71	\$21.14
Miscellaneous Products	36	78.2%	124	1.0%	\$16,985	\$13,836	0.6%	\$111.58	\$384.34
Genitourinary Products	39	96.8%	95	0.8%	\$13,788	\$11,880	0.5%	\$125.05	\$304.61
Antineoplastic Agents	21	100.0%	84	0.7%	\$367,256	\$367,263	15.3%	\$4,372.18	\$17,488.70
Misc. Psychotherapeutic and Neurolog	1	100.0%	4	0.0%	\$4,210	\$3,810	0.2%	\$952.41	\$3,809.64
Total All Claims	959	90.8%	12,309	100.0%	\$2,541,310	\$2,407,691	100.0%	\$195.60	\$2,510.63

Effective with Rx claims incurred in 2011, Rx Claims are calculated by applying discounts from Average Wholesale Prices to enrollees' utilization, rather than using actual amounts paid.

SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 0000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag

Utilization and Unit Cost by Medical Cost Category*

	<u>Paid Amount Per Member</u>			<u>Utilization Per 1,000</u>			<u>Unit Cost</u>		
	<u>Prior</u>	<u>Current</u>	<u>%Change</u>	<u>Prior</u>	<u>Current</u>	<u>%Change</u>	<u>Prior</u>	<u>Current</u>	<u>%Change</u>
Facility									
Inpatient Days	\$1,472	\$1,347	-8.5%	329	338	2.6%	\$4,472	\$3,992	-10.7%
Ambulatory Visits	\$434	\$608	40.2%	490	607	23.8%	\$885	\$1,003	13.3%
Emergency Room Visits	\$552	\$851	54.2%	236	350	48.1%	\$2,337	\$2,432	4.1%
Subtotal Facility:	\$2,458	\$2,807	14.2%						
Professional									
Specialist Office Visits	\$161	\$194	20.1%	2,191	2,694	23.0%	\$74	\$72	-2.3%
Primary Office Visits	\$120	\$114	-4.8%	1,749	1,640	-6.2%	\$69	\$70	1.4%
Surgeries - Inpatient	\$71	\$66	-6.9%	57	56	-1.5%	\$1,257	\$1,188	-5.5%
Surgeries Ambulatory Facility	\$99	\$86	-12.7%	121	168	39.0%	\$815	\$512	-37.2%
Surgeries - Office	\$101	\$106	4.9%	532	597	12.2%	\$190	\$177	-6.5%
Medical Service Visits	\$617	\$701	13.6%	3,273	3,953	20.8%	\$189	\$177	-6.0%
Subtotal Professional:	\$1,169	\$1,267	8.4%						
Ancillary									
Radiology Services	\$219	\$249	14.1%	2,699	3,363	24.6%	\$81	\$74	-8.5%
Lab Services	\$186	\$222	19.5%	9,262	11,063	19.4%	\$20	\$20	0.1%
Home Health Visits	\$10	\$68	601.3%	201	410	103.6%	\$48	\$166	244.4%
Mental Health Visits	\$46	\$49	7.1%	539	611	13.3%	\$86	\$81	-5.5%
Medical Pharmacy	\$616	\$620	0.5%	61,280	52,390	-14.5%	\$10	\$12	17.6%
Misc. Medical (State Assessments)	\$0	\$0	N/A	0	0	N/A	\$0	\$0	N/A
Subtotal Ancillary:	\$1,077	\$1,209	12.3%						
Grand Total:	\$4,704	\$5,283	12.3%						
Encounter**									
Primary Physician				0	0	N/A			
Specialist Physician				0	0	N/A			
Other				0	0	N/A			
Total Encounter:				0	0	N/A			

* Plan design changes from year to year may affect utilization and unit cost patterns.

**Encounter data: Category "Other" includes lab/Radiology as well as anything not identified as Primary or Specialist.

SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag

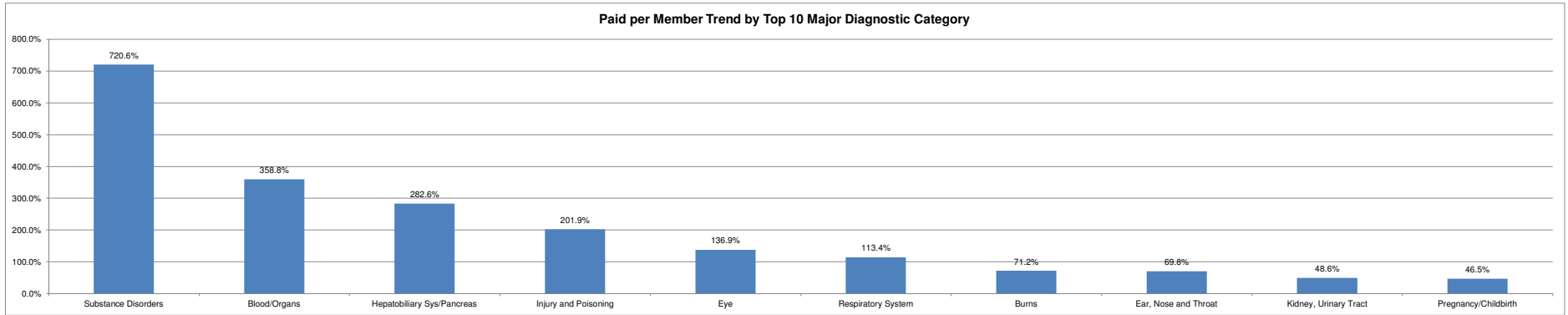
Utilization Detail by Major Diagnostic Category*

MDC	Description	Claimants per 1,000	Claims per 1,000	Admissions per 1,000	Days of Care per 1,000	ALOS	Average Paid per Admission	Billed Amount	Allowed Amount	Inpatient Paid	Inpatient Paid per Member	Ambulatory Paid	Ambulatory Paid per Member	Paid Amount	Paid Amount per Claimant	Paid Amount per Member
00	Unclassifiable	1.9	11.5	0.0	0	N/A	N/A	\$3,214	\$707	\$0	\$0	\$607	\$1	\$607	\$303	\$1
01	Nervous System	146.2	703.8	3.8	7	1.8	\$96,735	\$1,958,160	\$482,927	\$71,275	\$69	\$315,665	\$304	\$386,940	\$2,546	\$372
02	Eye	151.9	299.0	0.0	0	N/A	N/A	\$159,474	\$88,827	\$0	\$0	\$64,982	\$62	\$64,982	\$411	\$62
03	Ear, Nose and Throat	269.2	565.4	1.0	1	1.0	\$105,316	\$295,186	\$133,388	\$10,445	\$10	\$94,871	\$91	\$105,316	\$376	\$101
04	Respiratory System	147.1	444.2	1.0	7	7.0	\$322,722	\$770,116	\$340,208	\$15,148	\$15	\$307,574	\$296	\$322,722	\$2,109	\$310
05	Circulatory System	253.8	1,153.8	6.7	32	4.7	\$82,713	\$2,027,470	\$629,701	\$233,369	\$224	\$345,621	\$332	\$578,989	\$2,193	\$557
06	Digestive System	165.4	679.8	4.8	10	2.0	\$65,293	\$1,083,375	\$416,248	\$52,714	\$51	\$273,751	\$263	\$326,465	\$1,898	\$314
07	Hepatobiliary Sys/Pancreas	36.5	141.3	2.9	8	2.7	\$52,524	\$348,771	\$166,480	\$80,355	\$77	\$77,218	\$74	\$157,573	\$4,147	\$152
08	Musculoskeletal/Connective	367.3	2,041.3	3.8	39	10.3	\$221,439	\$3,082,429	\$1,072,189	\$335,573	\$323	\$550,182	\$529	\$885,755	\$2,319	\$852
09	Skin, Subcutaneous, Breast	315.4	1,171.2	1.9	21	11.0	\$173,995	\$1,215,645	\$412,952	\$57,419	\$55	\$290,571	\$279	\$347,991	\$1,061	\$335
10	Endocrine, Metabolic	350.0	1,224.0	2.9	11	3.7	\$34,457	\$712,819	\$168,472	\$16,648	\$16	\$86,723	\$83	\$103,371	\$284	\$99
11	Kidney, Urinary Tract	125.0	669.2	1.0	4	4.0	\$491,303	\$3,969,688	\$643,135	\$14,101	\$14	\$477,202	\$459	\$491,303	\$3,779	\$472
12	Male Reproductive	19.2	58.7	0.0	0	N/A	N/A	\$19,971	\$4,920	\$0	\$0	\$3,558	\$3	\$3,558	\$178	\$3
13	Female Reproductive	279.8	844.2	0.0	0	N/A	N/A	\$665,100	\$207,789	\$109	\$0	\$176,357	\$170	\$176,466	\$606	\$170
14	Pregnancy/Childbirth	45.2	697.1	20.2	51	2.5	\$20,889	\$1,288,059	\$507,618	\$294,297	\$283	\$144,370	\$139	\$438,667	\$9,333	\$422
15	Newborns	20.2	77.9	16.3	33	2.0	\$2,965	\$127,204	\$84,949	\$49,725	\$48	\$688	\$1	\$50,413	\$2,401	\$48
16	Blood/Organs	67.3	183.7	1.0	1	1.0	\$47,640	\$188,771	\$58,031	\$9,299	\$9	\$38,340	\$37	\$47,640	\$681	\$46
17	Other Neoplasms	43.3	109.6	1.0	5	5.0	\$74,913	\$302,818	\$78,401	\$18,434	\$18	\$56,479	\$54	\$74,913	\$1,665	\$72
18	Infectious-Parasitic	207.7	514.4	5.8	38	6.7	\$49,669	\$659,491	\$311,132	\$193,283	\$186	\$104,729	\$101	\$298,013	\$1,380	\$287
19	Mental Disorders	151.0	787.5	5.8	57	9.8	\$24,118	\$340,057	\$158,096	\$44,262	\$43	\$100,447	\$97	\$144,709	\$922	\$139
20	Substance Disorders	8.7	37.5	1.0	6	6.0	\$26,559	\$106,183	\$35,273	\$2,736	\$3	\$23,823	\$23	\$26,559	\$2,951	\$26
21	Injury and Poisoning	74.0	184.6	1.0	9	9.0	\$154,858	\$479,033	\$166,311	\$83,413	\$80	\$71,445	\$69	\$154,858	\$2,011	\$149
22	Burns	1.9	11.5	0.0	0	N/A	N/A	\$2,977	\$1,253	\$0	\$0	\$1,063	\$1	\$1,063	\$532	\$1
23	Selected Factors**	660.6	2,107.7	0.0	0	N/A	N/A	\$902,860	\$332,637	\$1,569	\$2	\$304,052	\$292	\$305,621	\$445	\$294
	Grand Total	994.2	14,719.2	81.7	338	4.1	\$64,641	\$20,708,875	\$6,501,643	\$1,584,174	\$1,523	\$3,910,319	\$3,760	\$5,494,493	\$5,314	\$5,283

* Includes Facility and Professional claims.

** Includes Miscellaneous factors related to health status, illness or injury (preventive services, undiagnosed conditions, family history of disease, etc.).

Utilization Detail by Major Diagnostic Category*

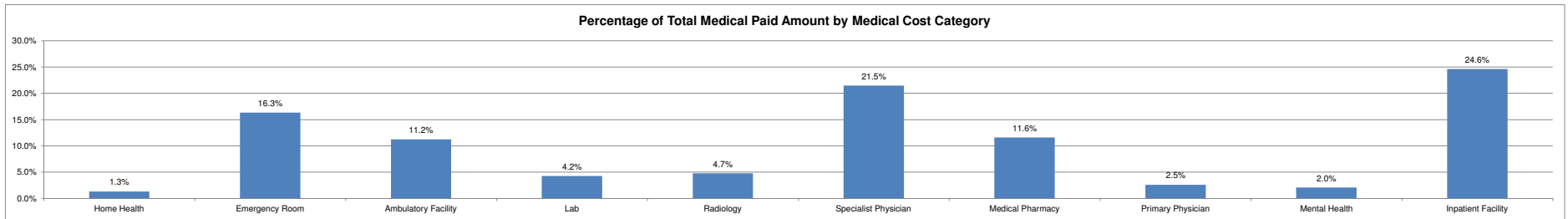
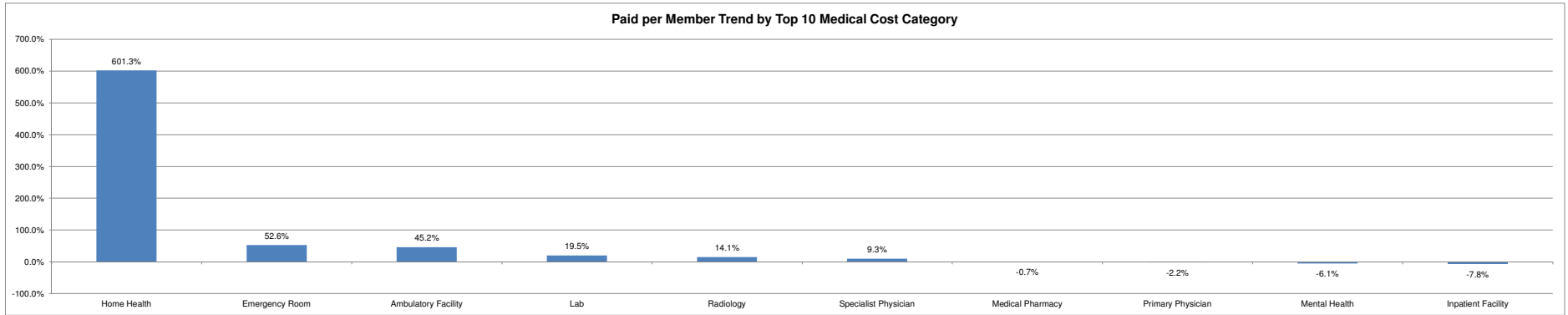


SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag

Utilization Detail by Medical Cost Category

MCC	Description	Claimants per 1,000	Claims per 1,000	Admissions per 1,000	Days of Care per 1,000	ALOS	Average Paid per Admission	Billed Amount	Allowed Amount	Inpatient Paid	Inpatient Paid per Member	Ambulatory Paid	Ambulatory Paid per Member	Paid Amount	Paid Amount per Claimant	Paid Amount per Member
001	Inpatient Facility	66.3	110.6	75.0	275	3.7	\$17,349	\$3,668,488	\$1,496,264	\$1,353,254	\$1,301	\$0	\$0	\$1,353,254	\$19,612	\$1,301
002	Ambulatory Facility	158.7	449.0	0.0	0	N/A	N/A	\$2,746,915	\$785,481	\$0	\$0	\$617,142	\$593	\$617,142	\$3,740	\$593
003	Emergency Room	207.7	473.1	0.0	0	N/A	N/A	\$2,300,317	\$954,927	\$10,099	\$10	\$885,346	\$851	\$895,445	\$4,146	\$861
004	Specialist Physician	841.3	6,101.0	0.0	0	N/A	N/A	\$6,380,232	\$1,606,595	\$150,301	\$145	\$1,028,363	\$989	\$1,178,664	\$1,347	\$1,133
005	Primary Physician	628.8	2,117.3	0.0	0	N/A	N/A	\$408,288	\$198,540	\$14,321	\$14	\$125,201	\$120	\$139,522	\$213	\$134
006	Radiology	488.5	1,467.3	0.0	0	N/A	N/A	\$896,950	\$317,120	\$3,594	\$3	\$255,787	\$246	\$259,380	\$511	\$249
007	Lab	780.8	3,927.9	0.0	0	N/A	N/A	\$1,209,217	\$245,907	\$5,985	\$6	\$225,364	\$217	\$231,349	\$285	\$222
008	Home Health	66.3	347.1	0.0	0	N/A	N/A	\$256,214	\$94,640	\$0	\$0	\$70,832	\$68	\$70,832	\$1,027	\$68
009	Mental Health	75.0	585.6	6.7	63	9.3	\$16,045	\$303,001	\$124,144	\$46,619	\$45	\$65,697	\$63	\$112,316	\$1,440	\$108
010	Medical Pharmacy	279.8	929.8	0.0	0	N/A	N/A	\$2,539,253	\$678,024	\$0	\$0	\$636,589	\$612	\$636,589	\$2,188	\$612
	Grand Total	994.2	14,719.2	81.7	338	4.1	\$64,641	\$20,708,875	\$6,501,643	\$1,584,174	\$1,523	\$3,910,319	\$3,760	\$5,494,493	\$5,314	\$5,283

Utilization Detail by Medical Cost Category



SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag

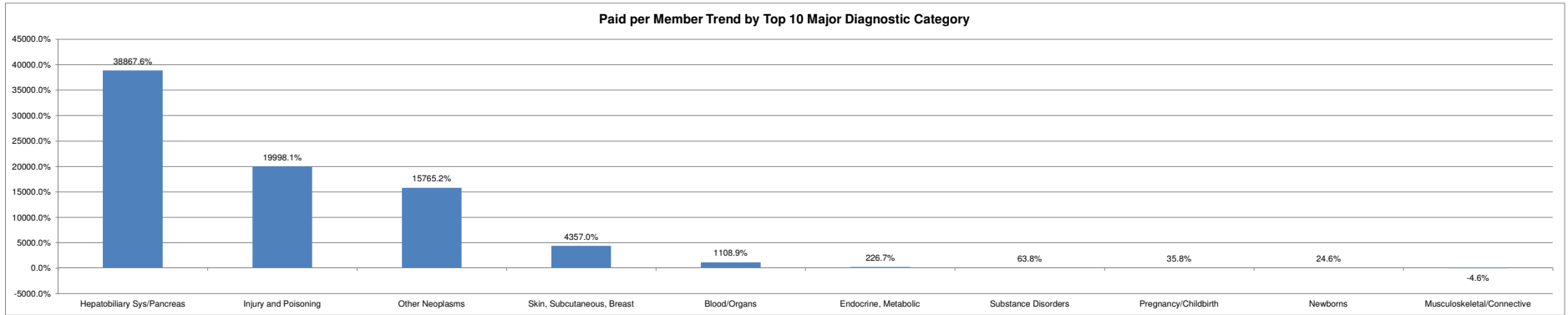
Utilization Detail by Major Diagnostic Category*

MDC	Description	Claimants per 1,000	Claims per 1,000	Admissions per 1,000	Days of Care per 1,000	Average Paid per Admission ALOS	Billed Amount	Allowed Amount	Inpatient Paid	Inpatient Paid per Member	Ambulatory Paid	Ambulatory Paid per Member	Paid Amount	Paid Amount per Claimant	Paid Amount per Member
01	Nervous System	11.5	52.9	3.8	7	1.8	\$17,819	\$325,425	\$83,816	\$71,275	\$69	\$0	\$71,275	\$5,940	\$69
03	Ear, Nose and Throat	1.0	1.9	1.0	1	1.0	\$10,445	\$16,014	\$12,010	\$10,445	\$0	\$0	\$10,445	\$10,445	\$10
04	Respiratory System	12.5	39.4	1.0	7	7.0	\$15,148	\$77,728	\$17,242	\$15,148	\$15	\$0	\$15,148	\$1,165	\$15
05	Circulatory System	24.0	117.3	6.7	32	4.7	\$33,338	\$748,491	\$238,368	\$233,369	\$224	\$0	\$233,369	\$9,335	\$224
06	Digestive System	11.5	48.1	4.8	10	2.0	\$10,543	\$151,843	\$66,253	\$52,714	\$51	\$0	\$52,714	\$4,393	\$51
07	Hepatobiliary Sys/Pancreas	3.8	22.1	2.9	8	2.7	\$26,785	\$123,038	\$82,112	\$80,355	\$77	\$0	\$80,355	\$20,089	\$77
08	Musculoskeletal/Connective	12.5	108.7	3.8	39	10.3	\$83,893	\$990,524	\$388,629	\$335,573	\$323	\$0	\$335,573	\$25,813	\$323
09	Skin, Subcutaneous, Breast	3.8	68.3	1.9	21	11.0	\$28,710	\$203,815	\$62,421	\$57,419	\$55	\$0	\$57,419	\$14,355	\$55
10	Endocrine, Metabolic	10.6	52.9	2.9	11	3.7	\$5,549	\$301,241	\$52,498	\$16,648	\$16	\$0	\$16,648	\$1,513	\$16
11	Kidney, Urinary Tract	6.7	31.7	1.0	4	4.0	\$14,101	\$25,672	\$20,422	\$14,101	\$14	\$0	\$14,101	\$2,014	\$14
13	Female Reproductive	3.8	6.7	0.0	0	N/A	N/A	\$1,471	\$626	\$109	\$0	\$0	\$109	\$27	\$0
14	Pregnancy/Childbirth	22.1	115.4	20.2	51	2.5	\$14,014	\$812,891	\$337,962	\$294,297	\$283	\$0	\$294,297	\$12,796	\$283
15	Newborns	19.2	67.3	16.3	33	2.0	\$2,925	\$125,440	\$84,061	\$49,725	\$48	\$0	\$49,725	\$2,486	\$48
16	Blood/Organs	8.7	20.2	1.0	1	1.0	\$9,299	\$19,282	\$10,320	\$9,299	\$9	\$0	\$9,299	\$1,033	\$9
17	Other Neoplasms	1.0	1.9	1.0	5	5.0	\$18,434	\$41,862	\$18,260	\$18,434	\$18	\$0	\$18,434	\$18,434	\$18
18	Infectious-Parasitic	9.6	64.4	5.8	38	6.7	\$32,214	\$364,323	\$194,898	\$193,283	\$186	\$0	\$193,283	\$19,328	\$186
19	Mental Disorders	2.9	24.0	5.8	57	9.8	\$7,377	\$102,678	\$45,352	\$44,262	\$43	\$0	\$44,262	\$14,754	\$43
20	Substance Disorders	4.8	6.7	1.0	6	6.0	\$2,736	\$22,777	\$5,588	\$2,736	\$3	\$0	\$2,736	\$547	\$3
21	Injury and Poisoning	6.7	28.8	1.0	9	9.0	\$83,413	\$185,192	\$85,176	\$83,413	\$80	\$0	\$83,413	\$11,916	\$80
23	Selected Factors**	17.3	28.8	0.0	0	N/A	N/A	\$8,038	\$2,267	\$1,569	\$2	\$0	\$1,569	\$87	\$2
	Grand Total	97.1	907.7	81.7	338	4.1	\$18,637	\$4,647,745	\$1,808,281	\$1,584,174	\$1,523	\$0	\$1,584,174	\$15,685	\$1,523

* Includes Facility and Professional claims.

** Includes Miscellaneous factors related to health status, illness or injury (preventive services, undiagnosed conditions, family history of disease, etc.).

Utilization Detail by Major Diagnostic Category*



SCHOOL BOARD OF HENDRY COUNTY FLORIDA - 000000100252625
 Current Data For Claims Incurred January 01, 2021 - December 31, 2021 with 2 months lag

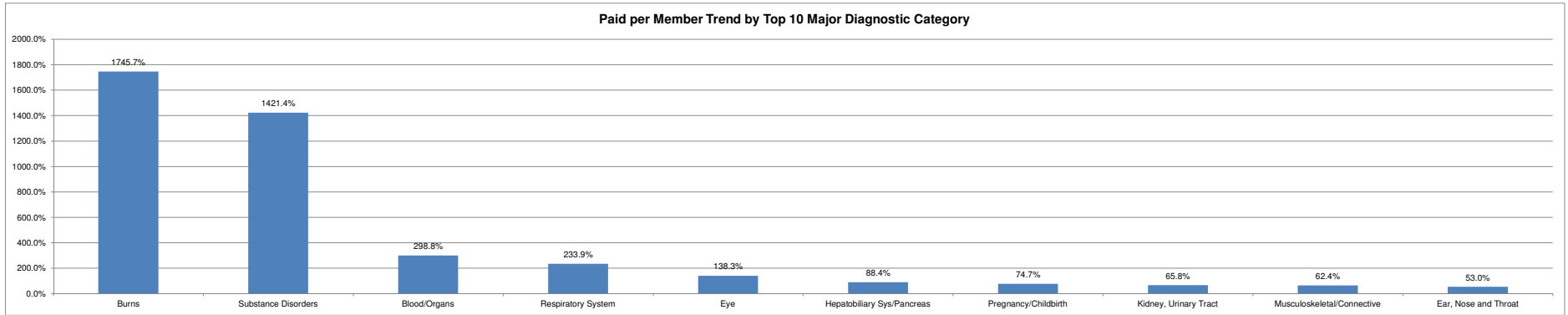
Utilization Detail by Major Diagnostic Category*

MDC	Description	Claimants per 1,000	Claims per 1,000	Admissions per 1,000	Days of Care per 1,000	ALOS	Average Paid per Admission	Billed Amount	Allowed Amount	Inpatient Paid	Inpatient Paid per Member	Ambulatory Paid	Ambulatory Paid per Member	Paid Amount	Paid Amount per Claimant	Paid Amount per Member
00	Unclassifiable	1.9	11.5	0.0	0	N/A	N/A	\$3,214	\$707	\$0	\$0	\$607	\$1	\$607	\$303	\$1
01	Nervous System	142.3	651.0	0.0	0	N/A	N/A	\$1,632,735	\$399,111	\$0	\$0	\$315,665	\$304	\$315,665	\$2,133	\$304
02	Eye	151.9	299.0	0.0	0	N/A	N/A	\$159,474	\$88,827	\$0	\$0	\$64,982	\$62	\$64,982	\$411	\$62
03	Ear, Nose and Throat	268.3	563.5	0.0	0	N/A	N/A	\$279,172	\$121,378	\$0	\$0	\$94,871	\$91	\$94,871	\$340	\$91
04	Respiratory System	142.3	404.8	0.0	0	N/A	N/A	\$692,388	\$322,965	\$0	\$0	\$307,574	\$296	\$307,574	\$2,078	\$296
05	Circulatory System	248.1	1,036.5	0.0	0	N/A	N/A	\$1,278,979	\$391,334	\$0	\$0	\$345,621	\$332	\$345,621	\$1,340	\$332
06	Digestive System	162.5	631.7	0.0	0	N/A	N/A	\$931,533	\$349,995	\$0	\$0	\$273,751	\$263	\$273,751	\$1,620	\$263
07	Hepatobiliary Sys/Pancreas	36.5	119.2	0.0	0	N/A	N/A	\$225,733	\$84,368	\$0	\$0	\$77,218	\$74	\$77,218	\$2,032	\$74
08	Musculoskeletal/Connective	364.4	1,932.7	0.0	0	N/A	N/A	\$2,091,905	\$683,560	\$0	\$0	\$550,182	\$529	\$550,182	\$1,452	\$529
09	Skin, Subcutaneous, Breast	315.4	1,104.8	0.0	0	N/A	N/A	\$1,011,830	\$350,531	\$0	\$0	\$290,571	\$279	\$290,571	\$886	\$279
10	Endocrine, Metabolic	345.2	1,171.2	0.0	0	N/A	N/A	\$411,578	\$115,974	\$0	\$0	\$86,723	\$83	\$86,723	\$242	\$83
11	Kidney, Urinary Tract	124.0	637.5	0.0	0	N/A	N/A	\$3,944,016	\$622,713	\$0	\$0	\$477,202	\$459	\$477,202	\$3,699	\$459
12	Male Reproductive	19.2	58.7	0.0	0	N/A	N/A	\$19,971	\$4,920	\$0	\$0	\$3,558	\$3	\$3,558	\$178	\$3
13	Female Reproductive	278.8	837.5	0.0	0	N/A	N/A	\$663,629	\$207,163	\$0	\$0	\$176,357	\$170	\$176,357	\$608	\$170
14	Pregnancy/Childbirth	45.2	581.7	0.0	0	N/A	N/A	\$475,169	\$169,656	\$0	\$0	\$144,370	\$139	\$144,370	\$3,072	\$139
15	Newborns	6.7	10.6	0.0	0	N/A	N/A	\$1,764	\$888	\$0	\$0	\$688	\$1	\$688	\$98	\$1
16	Blood/Organs	63.5	163.5	0.0	0	N/A	N/A	\$169,489	\$47,711	\$0	\$0	\$38,340	\$37	\$38,340	\$581	\$37
17	Other Neoplasms	43.3	107.7	0.0	0	N/A	N/A	\$260,956	\$60,141	\$0	\$0	\$56,479	\$54	\$56,479	\$1,255	\$54
18	Infectious-Parasitic	204.8	450.0	0.0	0	N/A	N/A	\$295,169	\$116,234	\$0	\$0	\$104,729	\$101	\$104,729	\$492	\$101
19	Mental Disorders	151.0	763.5	0.0	0	N/A	N/A	\$237,379	\$112,744	\$0	\$0	\$100,447	\$97	\$100,447	\$640	\$97
20	Substance Disorders	6.7	30.8	0.0	0	N/A	N/A	\$83,406	\$29,685	\$0	\$0	\$23,823	\$23	\$23,823	\$3,403	\$23
21	Injury and Poisoning	73.1	155.8	0.0	0	N/A	N/A	\$293,841	\$81,135	\$0	\$0	\$71,445	\$69	\$71,445	\$940	\$69
22	Burns	1.9	11.5	0.0	0	N/A	N/A	\$2,977	\$1,253	\$0	\$0	\$1,063	\$1	\$1,063	\$532	\$1
23	Selected Factors**	657.7	2,078.8	0.0	0	N/A	N/A	\$894,822	\$330,369	\$0	\$0	\$304,052	\$292	\$304,052	\$445	\$292
	Grand Total	986.5	13,813.5	0.0	0	N/A	N/A	\$16,061,130	\$4,693,361	\$0	\$0	\$3,910,319	\$3,760	\$3,910,319	\$3,811	\$3,760

* Includes Facility and Professional claims.

** Includes Miscellaneous factors related to health status, illness or injury (preventive services, undiagnosed conditions, family history of disease, etc.).

Utilization Detail by Major Diagnostic Category*



SCHOOL BOARD OF HENDRY COUNTY FLORIDA

Large Claim Listing

Effective Date: January 1, 2023

Policyholder Number - 109695

Group Number - 109695

- This report is designed to meet your need for data in evaluating your benefit plan. We have removed individual member ID number, etc.) because most plan sponsors find that their needs can be met without identifiers and also to comply with information privacy regulations.
- Amounts below reflect medical costs only. Pharmacy costs not paid under the medical benefit are excluded.

Total Group

Claimants with over \$25,000 in claims for - 1/31/2021

Claimant	Amount	ICD-10 Code Description	Claimant Status
Claimant 1	\$209,940	Malignant Neoplasm Of Overlapping Sites Of Right Bronchus And Lung	
Claimant 2	\$204,795	Restricted Diagnosis	
Claimant 3	\$179,389	Hypertensive Chronic Kidney Disease With Stage 5 Chronic Kidney Disease Or End Stage Renal	
Claimant 4	\$162,937	Hypertensive Emergency	
Claimant 5	\$152,526	Displaced Bimalleolar Fracture Of Right Lower Leg, Initial Encounter For Closed Fracture	
Claimant 6	\$145,226	Atypical Atrial Flutter	
Claimant 7	\$104,491	Infection Following A Procedure, Deep Incisional Surgical Site, Initial Encounter	
Claimant 8	\$98,947	Functional Diarrhea	
Claimant 9	\$87,313	Secondary Malignant Neoplasm Of Retroperitoneum And Peritoneum	
Claimant 10	\$85,358	Chronic Inflammatory Demyelinating Polyneuritis	
Claimant 11	\$80,504	Multiple Sclerosis	
Claimant 12	\$78,384	Malignant Neoplasm Of Overlapping Sites Of Left Female Breast	
Claimant 13	\$73,688	Cutaneous Abscess Of Left Foot	
Claimant 14	\$70,238	Restricted Diagnosis	
Claimant 15	\$67,484	Unilateral Primary Osteoarthritis, Left Hip	



SCHOOL BOARD OF HENDRY COUNTY FLORIDA

Large Claim Listing

Effective Date: January 1, 2023

Policyholder Number - 109695

Group Number - 109695

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- Amounts below reflect medical costs only. Pharmacy costs not paid under the medical benefit are excluded.

Total Group

Claimants with over \$25,000 in claims for - 1/31/2021

Claimant	Amount	ICD-10 Code Description	Claimant Status
Claimant 16	\$60,604	Sepsis Due To Escherichia Coli (e. Coli)	
Claimant 17	\$57,606	Radiculopathy, Lumbar Region	
Claimant 18	\$55,146	Restricted Diagnosis	
Claimant 19	\$52,137	Crohn's Disease Of Large Intestine With Other Complication	
Claimant 20	\$51,719	Paroxysmal Atrial Fibrillation	
Claimant 21	\$51,599	Hypertensive Chronic Kidney Disease With Stage 5 Chronic Kidney Disease Or End Stage Renal	
Claimant 22	\$49,933	Non-st Elevation (nSTEMI) Myocardial Infarction	
Claimant 23	\$49,070	Covid-19	
Claimant 24	\$48,370	Multiple Sclerosis	
Claimant 25	\$47,149	Other Specified Sepsis	
Claimant 26	\$46,264	Hepatic Failure, Unspecified Without Coma	
Claimant 27	\$45,514	Acquired Absence Of Right Leg Above Knee	
Claimant 28	\$45,058	Supraventricular Tachycardia	
Claimant 29	\$44,297	Cerebral Infarction, Unspecified	
Claimant 30	\$41,645	Calculus Of Gallbladder Without Cholecystitis Without Obstruction	
Claimant 31	\$39,608	Sepsis, Unspecified Organism	



SCHOOL BOARD OF HENDRY COUNTY FLORIDA

Large Claim Listing

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Total Group

Claimants with over \$25,000 in claims for - 1/31/2021

Claimant	Amount	ICD-10 Code Description	Claimant Status
Claimant 32	\$39,425	Restricted Diagnosis	
Claimant 33	\$37,700	Other Synovitis And Tenosynovitis, Left Hand	
Claimant 34	\$36,718	Restricted Diagnosis	
Claimant 35	\$34,759	Unilateral Primary Osteoarthritis, Right Knee	
Claimant 36	\$34,278	Migraine With Aura, Not Intractable, Without Status Migrainosus	
Claimant 37	\$33,773	Serous Retinal Detachment, Right Eye	
Claimant 38	\$32,826	Unilateral Primary Osteoarthritis, Left Knee	
Claimant 39	\$32,617	Restricted Diagnosis	
Claimant 40	\$30,867	Restricted Diagnosis	
Claimant 41	\$29,996	Restricted Diagnosis	
Claimant 42	\$29,860	Covid-19	
Claimant 43	\$29,732	Idiopathic Urticaria	
Claimant 44	\$28,032	Restricted Diagnosis	
Claimant 45	\$27,023	Complete Rotator Cuff Tear Or Rupture Of Right Shoulder, Not Specified As Traumatic	
Claimant 46	\$26,388	Restricted Diagnosis	
Claimant 47	\$26,314	Restricted Diagnosis	

