

Kenai Peninsula Borough School District
 Projected Self-Funded Costs

Annual Cost			
July 2018 - June 2019 Projected Rates	Traditional Plan	HDHP	Total
Average Monthly Enrollment	547	577	1,124
Net Claims	\$14,243,359	\$12,134,159	\$26,377,519
Administration (Rehn)	\$93,444	\$99,774	\$193,218
Administration (Rx)	\$4,033	\$4,334	\$8,367
Specific Stop Loss Premium	\$1,476,054	\$1,610,024	\$3,086,078
Aggregate Stop Loss Premium	\$17,649	\$18,932	\$36,580
Broker Fees	\$28,831	\$30,369	\$59,200
HRA Administration Fee	\$0	\$24,185	\$24,185
HRA Fund	\$0	\$432,688	\$432,688
Variable Costs	\$31,041	\$32,733	\$63,774
Total	\$15,894,411	\$14,387,198	\$30,281,609

PEPM		
Traditional Plan	HDHP	Total
547	577	1,124
\$2,169.59	\$1,752.73	\$1,955.63
\$14.23	\$14.41	\$14.33
\$0.61	\$0.63	\$0.62
\$224.84	\$232.56	\$228.80
\$2.69	\$2.73	\$2.71
\$4.39	\$4.39	\$4.39
\$0.00	\$3.49	\$1.79
\$0.00	\$62.50	\$32.08
\$4.73	\$4.73	\$4.73
\$2,421.08	\$2,078.17	\$2,245.08

Annual Cost			
July 2019 - June 2020 Projected Costs	Traditional Plan	HDHP	Total
Average Monthly Enrollment	526	568	1,094
Net Claims	\$16,929,951	\$10,929,446	\$27,859,397
Administration (Rehn)	\$95,588	\$103,220	\$198,808
Administration (Rx)	\$3,854	\$4,162	\$8,017
Aetna / Coalition Fees	\$140,178	\$151,371	\$291,549
Specific Stop Loss Premium	\$1,930,696	\$2,084,858	\$4,015,553
Aggregate Stop Loss Premium	\$26,510	\$28,627	\$55,138
Broker Fees	\$28,464	\$30,736	\$59,200
HRA Administration Fee	\$0	\$23,856	\$23,856
HRA Fund	\$0	\$426,000	\$426,000
Variable Costs	\$27,768	\$29,985	\$57,753
Total	\$19,183,008	\$13,812,262	\$32,995,270

PEPM		
Traditional Plan	HDHP	Total
526	568	1,094
\$2,682.18	\$1,603.50	\$2,122.14
\$15.14	\$15.14	\$15.14
\$0.61	\$0.61	\$0.61
\$22.21	\$22.21	\$22.21
\$305.88	\$305.88	\$305.88
\$4.20	\$4.20	\$4.20
\$4.51	\$4.51	\$4.51
\$0.00	\$3.50	\$1.82
\$0.00	\$62.50	\$32.45
\$4.40	\$4.40	\$4.40
\$3,039.13	\$2,026.45	\$2,513.35

Assumptions:

1. Projected enrollment based on November 2018 counts.
2. Net Claims are based on 30% weight on January - December 2017 claims and 70% weight on January - November 2018 claims with 8% annual trend.
3. 2019/20 Fixed costs are estimated based on 6 months of the 2019 rates and 6 months of projected 2020 rate increases.
4. 2019/20 Fixed costs are estimated based on 6 months of the 2019 rates and 6 months of projected 2020 rate increases.
5. HRA fund of \$750 per year
6. Variable costs by plan are based on total variable costs pro-rated based on enrollment.
7. Projections assume no changes to the current plans.

1.Cap Related Information

	FY19 Cap Amount <u>Traditional</u>	FY19 Cap Amount <u>HDHP</u>
District (85% Traditional - 90% HDHP)	\$ 1,731.45	\$ 1,645.61
Employee (15% Traditional - 10% HDHP)	<u>\$ 305.55</u>	<u>\$ 182.85</u>
Monthly Total	\$ 2,037.00	\$ 1,828.46

2. FY20 Contributions Status Quo For FY20 Budget

	FY20 Contributions <u>Traditional</u>	FY20 Contributions <u>HDHP</u>
FY20 Broker Recommended Amount Monthly	\$ 3,039.13	\$ 2,026.45
Amount above/below Cap	\$ 1,002.13	\$ 197.99
50% of Excess/Reduction	\$ 501.07	\$ 99.00
District	\$ 2,232.52	\$ 1,744.61
Employee	<u>\$ 806.62</u>	<u>\$ 281.84</u>
Total FY20 Amounts Per Broker Rec	\$ 3,039.13	\$ 2,026.45

*Based on Broker Recommended Rates

	\$ 26,790.18	\$ 20,935.29
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Kenai Peninsula Borough School District (PSU 96560493)

Claims Processed Jan-Dec 2018

Procedure codes for selected providers only (Providence, AK Regional, Central Peninsula, Kenai Surgery)

Procedure Code	Procedure Code Description	Number of Services	Billed Amount	Allowed Amount
C1713	ANCHOR/SCREW FOR OPPOSING	101	\$237,798	\$123,503
J1300	ECULIZUMAB INJECTION	840	\$230,588	\$175,000
99284	EMERGENCY DEPT VISIT	181	\$206,756	\$150,606
99285	EMERGENCY DEPT VISIT	88	\$156,903	\$115,912
99283	EMERGENCY DEPT VISIT	204	\$152,771	\$108,680
73721	MRI; ANY LOWER EXTREMITY JNT	40	\$134,578	\$98,700
74177	CT ABD&PELV W/CONTRAST	28	\$119,005	\$85,897
C1776	JOINT DEVICE (IMPLANTABLE)	14	\$110,422	\$82,816
97110	THERAPEUTIC EXERCISES	714	\$102,719	\$76,964
27447	TOTAL KNEE ARTHROPLASTY	18	\$98,953	\$69,883
45378	DIAGNOSTIC COLONOSCOPY	34	\$90,154	\$67,106
J9035	INJECTION, BEVACIZUMAB 10 MG	520	\$83,246	\$62,434
93306	TTE W/DOPPLER, COMPLETE	29	\$82,689	\$54,759
70553	MRI OF BRAIN W/O & W/ CONTRA	20	\$78,624	\$54,250
85025	AUTOMAT HEMOGRAM-COMPLET DIF	462	\$76,099	\$57,043
99213	OFFICE/OUTPATIENT VISIT EST	354	\$75,294	\$66,850
G0378	HOSPITAL OBSERVATION PER HR	597	\$73,993	\$52,396
72148	MAGNETIC RESONANCE IMAGING	21	\$71,781	\$49,054
47563	LAPARO CHOLECYSTECTOMY/GRAPH	9	\$67,246	\$51,047
74176	CT ABD & PELVIS	15	\$58,798	\$42,668
73630	X-RAY EXAM OF FOOT	84	\$56,739	\$41,805
41899	UNLISTED PROC, DENTOALEOLAR	4	\$56,605	\$43,815
80053	COMPREHEN METABOLIC PANEL	384	\$53,840	\$39,224
52356	CYSTO/URETERO W/LITHOTRIPSY	7	\$53,833	\$45,853
28296	CORRECTION HALLUX VALGUS	7	\$52,144	\$38,170

Kenai Peninsula Borough School District	<u>Reserve Account</u>	<u>As of 6-30-17</u>	<u>As of 6-30-18</u>	<u>FY19 Monthly Contribution - Traditional</u>
	Employee Share	701,399.69	471,065.27	Employee Share * 498.00
Health Care Committee Monthly recap as of February 28, 2019	Employer Share	1,353,713.48	1,572,408.17	Employer Share <u>1,923.49</u>
				2,421.49

	<u>FY19 Monthly Contribution - HDHP</u>
	Employee Share * 308.00
	Employer Share <u>1,770.47</u>
	2,078.47

This document is provided to the Health Care Committee as a work paper to recap the contributions to and expenditures from the Health Care Plan each month. It is to be used primarily as an aid in estimating costs of the plan to determine if changes should be made in employee contribution amounts. Every effort is made to provide current and accurate information, but this information is not audited until after the end of the fiscal year.

	Number of Employees	YTD Employees	Current Month Obligations	YTD Obligations	Contributions Current Month Collected	Contributions YTD Collected
Employees						
KPEA Employees	301	2,848	149,898.00	1,418,304.00	197,165.62	1,206,408.12
KPEA Employees - HDHP	302	1,978	93,016.00	609,224.00	134,168.00	794,038.14
KPEA Repay EE Reserve					16,651.29	100,997.94
KPESA Employees	186	1,833	92,628.00	912,834.00	118,893.71	766,042.58
KPESA Employees - HDHP	206	1,301	63,448.00	400,708.00	87,727.55	515,351.05
KPESA Repay EE Reserve					10,663.50	64,829.70
Administrators	20	226	9,960.00	112,548.00	12,831.57	89,150.03
Administrators - HDHP	38	235	11,704.00	72,380.00	16,171.31	92,406.30
Admin Repay EE Reserve					1,600.80	9,604.80
Board Members	1	15	498.00	7,470.00	275.00	5,345.48
Board Members - HDHP	3	22	924.00	6,776.00	825.00	7,339.39
Board Repay EE Reserve					-	476.10
Exempt Employees	10	93	4,980.00	46,314.00	5,158.46	43,222.90
Exempt Employees - HDHP	15	105	4,620.00	32,340.00	5,089.38	33,154.69
Exempt Repay EE Reserve					690.00	4,112.40
Affordable Care Act **	-	-	0.00	0.00		
ACA Empl Repay EE Reserve						
Total Employees on Payroll	1,082	8,656	431,676.00	3,618,898.00	607,911.19	3,732,479.62
COBRA Payers (FY19 = \$2215.88)	1	14	2,215.88	31,022.32	5,068.16	32,295.12
COBRA HD Payers (FY19 = \$1960.28)	-	6	-	11,761.68	-	11,687.46
Total Employees	1,083	8,676	433,891.88 *	3,661,682.00	612,979.35	3,776,462.20

* Current month employee obligations are a calculation of "Number of Employees" eligible for health care coverage during that month times the "Employee Share" (shown in the upper right corner of the sheet).

** Affordable Care Act (ACA) coverage is offered to employees once eligibility is determined. Eligibility is based on number of hours worked during the measurement period.

Employer						
Employer share	519	5,029	998,291.31	9,673,231.21	1,300,284.98	8,141,569.35
Employer share - HDHP	564	3,646	998,545.08	6,455,133.62	1,305,747.75	7,872,337.49
Total			2,430,728.27	19,790,046.83	3,219,012.08	19,790,369.04

+ Employee Share Split	FY19 Contribution Traditional	498.00	Subtotal	334,324.36	2,110,169.11
	Cobra	2,215.88	Subtotal	5,068.16	32,295.12
				339,392.52	2,142,464.23
	FY19 Contribution HDHP	308.00	Subtotal	243,981.24	1,442,289.57
	Cobra HD	1,960.28	Subtotal	-	11,687.46
				243,981.24	1,453,977.03
	Prior Year Reserve Repayment	20.70	Subtotal	29,605.59	180,020.94

Expenditures

Since the health care plan is self-funded, both employee and employer contributions are collected and bills are paid from the accumulated funds.

	TRADITIONAL		HDHP	
	Current Month	Year-To-Date	Current Month	Year-To-Date
Claims				
Health Care Claims paid by TPA (Rehn)	1,412,061.23	11,846,263.03	463,640.22	2,414,899.84
Prescription Claims paid by Caremark	463,990.12	3,376,149.74	51,750.68	460,146.39
HRA	-	-	27,930.40	157,163.76
Total Claims Paid	1,876,051.35	15,222,412.77	543,321.30	3,032,209.99
Administration				
TPA (Rehn) fees and costs	13,726.28	151,328.76	-	-
TPA (Rehn) HRA fees and costs	-	-	18,877.94	94,995.00
Aetna Administration Fees	11,292.81	96,873.86	12,271.95	71,414.61
Consultant Fees	2,364.17	18,843.00	2,569.16	20,623.64
Stop Loss Premiums	146,944.12	1,060,093.48	159,684.94	811,347.77
Affordable Care Act Fee	-	46,691.32	-	20,266.51
Total Administration	174,327.38	1,373,830.42	193,403.99	1,018,647.53
Total Claims plus Administration	2,050,378.73	16,596,243.19	736,725.29	4,050,857.52
Adjustments				
Stop Loss reimbursements	(532,072.80)	(2,866,363.82)	-	-
Prescription Rebates	(110,588.78)	(408,732.37)	(36,311.03)	(99,992.00)
Health Care Claims refund	-	-	-	-
Claims reimbursements	(50.00)	(350.00)	-	-
Other adjustments	-	(25.00)	-	-
Total Adjustments	(642,711.58)	(3,275,471.19)	(36,311.03)	(99,992.00)
Total Expenditures	1,407,667.15	13,320,772.00	700,414.26	3,950,865.52

Obligations/Contributions

Health care obligations and contributions provide employee and employer amounts of health care contributions using different calculation methods.

Obligations are estimates of funds that employees and the district will be obligated to contribute, based on the plan year (July through June).

Returning employees are covered by the health care plan for the entire plan year, meaning the 12 month period July through June; both employee and employer are obligated to pay for 12 months of coverage. New employees pay for coverage from date of hire through June, the end of the plan year. If an employee works at all during a month, both employee and employer pay for the entire month of coverage.

Actual Contributions made by employees and benefits paid by the employer during the payroll process are shown on the sheet in the columns labeled "Collected." The division of payments is governed by the Collective Bargaining Agreements and Memorandums of Understanding between the district and the employee groups.

Employee-paid contributions are deductions from payroll checks. Employees who work 12 months make contributions each pay period. Many school district employees do not work 12 months, so contributions are collected for those employees during the 9 month period from September through May.

For this reason, contributions are generally larger than obligations for September through May and contributions are generally smaller than obligations for June, July and August.

The "Collected" columns show what is actually available for paying health care costs. The "Obligations" show what is estimated to be available by month, based on number of employees at the current rate of contributions.

**Kenai Peninsula Borough School District
Healthcare Expenditures Split
as of February 28, 2019**

Traditional Plan				HDHP			
YTD Participants	5,029			YTD Participants	3,646		
Net Expenditures	13,320,772.00			Net Expenditures	3,950,865.52		
ER - Employer Cap \$1731.45	8,707,462.05			ER - Employer Cap \$1645.61	5,999,894.06		
EE - Employee Cap \$305.55	<u>1,536,610.95</u>			EE - Employee Cap \$182.85	<u>666,671.10</u>		
Total Cap Expenditure EE/ER	10,244,073.00			Total Cap Expenditure EE/ER	6,666,565.16		
Expenditures over Cap	3,076,699.00			Expenditures over Cap	-		
50/50 Split of Expenditures over Cap	<u>1,538,349.50</u>			50/50 Split of Expenditures over Cap	-		
ER Expenditures Up To Cap	8,707,462.05			ER Expenditures Up To Cap	3,555,778.97		
ER Expenditures Above Cap	<u>1,538,349.50</u>			ER Expenditures Above Cap	-		
Total ER Expenditures	10,245,811.55			Total ER Expenditures	3,555,778.97		
EE Expenditures Up To Cap	1,536,610.95			EE Expenditures Up To Cap	395,086.55		
EE Expenditures Above Cap	<u>1,538,349.50</u>			EE Expenditures Above Cap	-		
Total EE Expenditures	3,074,960.45			Total EE Expenditures	395,086.55		
Total ER & EE Expenditures	13,320,772.00			Total ER & EE Expenditures	3,950,865.52		
Traditional Summary				HDHP Summary			
Through	YTD	YTD	REV Less	Through	YTD	YTD	REV Less
January 2019	EXP	REV	EXP	January 2019	EXP	REV	EXP
Employer	10,245,811.55	8,141,569.35	(2,104,242.20)	Employer	3,555,778.97	7,872,337.49	4,316,558.52
Employee	<u>3,074,960.45</u>	<u>2,142,464.23</u>	<u>(932,496.22)</u>	Employee	<u>395,086.55</u>	<u>1,453,977.03</u>	<u>1,058,890.48</u>
Totals	13,320,772.00	10,284,033.58	(3,036,738.42)	Totals	3,950,865.52	9,326,314.52	5,375,449.00
Obligation per Employee FY19				Obligation per Employee FY19			
498.00 EE/1923.49 ER Split	<u>2,421.49</u>	<u>2,421.49</u>		308.00 EE/1770.47 ER Split	<u>2,078.47</u>	<u>2,078.47</u>	
Monthly Cost per Employee - ER		2037.35		Monthly Cost per Employee - ER		975.25	
Monthly Cost per Employee - EE + Cobra		<u>611.45</u>		Monthly Cost per Employee - EE + Cobra		<u>108.36</u>	
		2648.79				1083.62	
Current Variance		(227.30)		Current Variance		994.85	

Obligations indicate the funds that will be accumulated per employee per month. Expenditures are amounts that have been paid through the plan.

A positive number for "current variance" represents the amount per employee per month that is estimated to be collected above the amount spent year-to-date. A negative number represents the amount of expenditures (per employee per month) that are more than what is estimated to be collected for payment of those expenditures.

Stacey Cockroft

To: Health Committee Members
Subject: RE: Specific Stop Loss 12/31/2018

Below is the Specific Stop loss Report through 12/31/2018.

Subscriber	Total Amt	Amt over Spec	Amt Requested	Amt Reimbursed	Non Reimbursed Expenses	Amt Open
1	\$1,715,448.92	\$1,495,448.92	\$1,495,448.92	\$1,492,964.38	\$2,484.54	\$0.00
2	\$1,665,354.99	\$1,445,354.99	\$1,445,354.99	\$1,445,354.99		\$0.00
3	\$283,764.81	\$63,764.81	\$63,764.81	\$63,764.81		\$0.00
4	\$330,121.85	\$110,548.41	\$110,548.41	\$110,548.41		\$0.00
5	\$492,007.71	\$272,007.71	\$272,007.71	\$272,007.71		\$0.00
6	\$327,383.64	\$107,383.64	\$107,383.64	\$107,383.64		\$0.00
7	\$271,810.93	\$51,810.93	\$51,810.93	\$51,810.93		\$0.00
8	\$226,206.93	\$6,206.93	\$6,206.93	\$6,206.93		\$0.00
	\$5,312,099.78	\$3,552,526.34	\$3,552,526.34	\$3,550,041.80	\$2,484.54	\$0.00

Thank you,

Stacey Cockroft

Kenai Peninsula Borough School District
Employee Benefits Manager
148 N. Binkley St. Soldotna, AK 99669
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Stacey Cockroft

To: Health Committee Members
Subject: Specific Stop Loss 2/28/19

Below is the Specific Stop loss Report through 2/28/2019.

Subscriber	Total Amt	Amt over Spec	Amt Requested	Amt Reimbursed	Non Reimbursed Expenses	Amt Open
1	\$276,277.17	\$56,277.17	\$56,277.17			\$56,277.17
2	\$274,853.20	\$54,853.20	\$54,853.20			\$54,853.20
3	\$210,884.65					
	\$762,015.02	\$111,130.37	\$111,130.37	\$0.00	\$0.00	\$111,130.37

Thank you,

Stacey Cockroft

Kenai Peninsula Borough School District
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Telehealth Utilization Report

January 2019

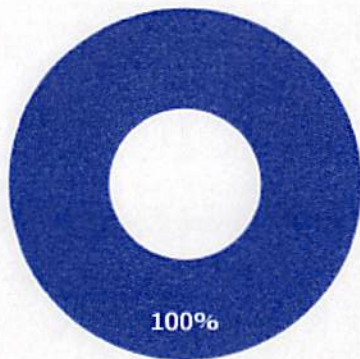
Kenai Peninsula Borough School District

	Visits		Utilization*
	Report Period	YTD	Annualized
Total General Medical	58	58	64.4%
Total Behavioral Health	N/A	N/A	N/A
Total Dermatology	N/A	N/A	N/A

Total Net Claim Savings



Overall member satisfaction



Good

Number of Respondents: 2

Gender

General Medical

71% Female

29% Male

Behavioral Health

Product not included in plan design

Dermatology

Product not included in plan design

* Behavioral Health utilization is calculated assuming 20% of the population needs care in a given year. This is in accordance to a Kaiser Family Foundation Analysis of the 2015 National Survey on Drug Use and Health. Dermatology utilization is calculated assuming a 25% portion of the population needs care. This is in accordance to the American Academy of Dermatology in a 2013 report, Burden of Skin Disease



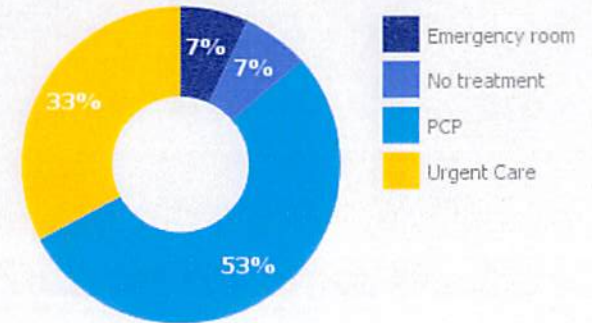
General Medical

Annualized Utilization

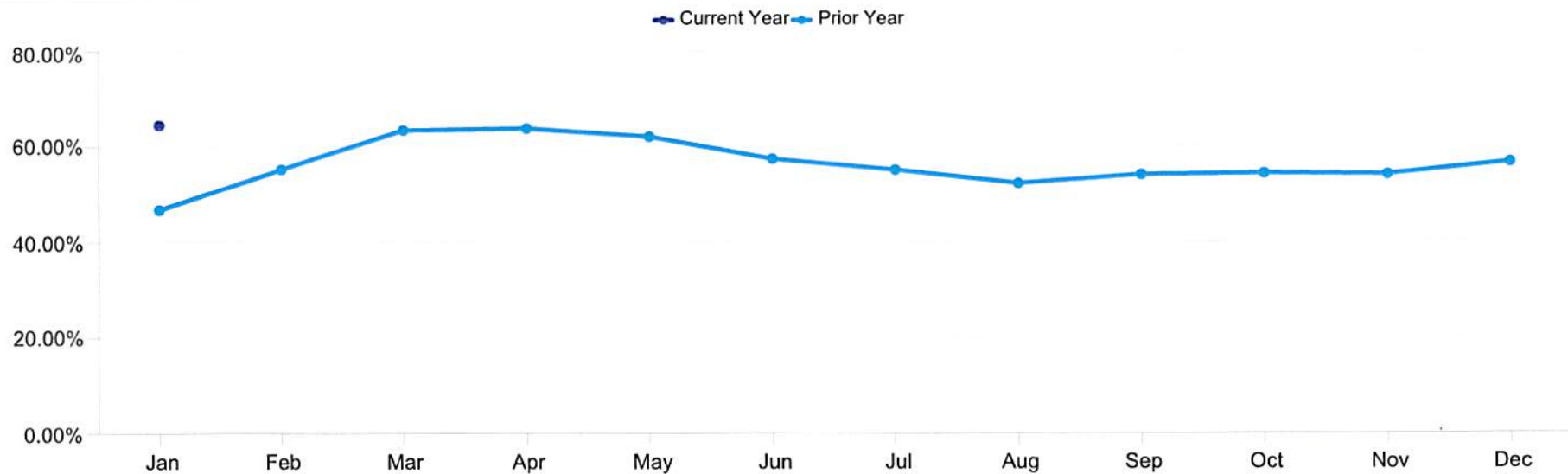
64.4%

(YTD total consults x 12 / # months accrued) / YTD average subscribers.
The denominator for per member per month annualized utilization is YTD average eligible lives.

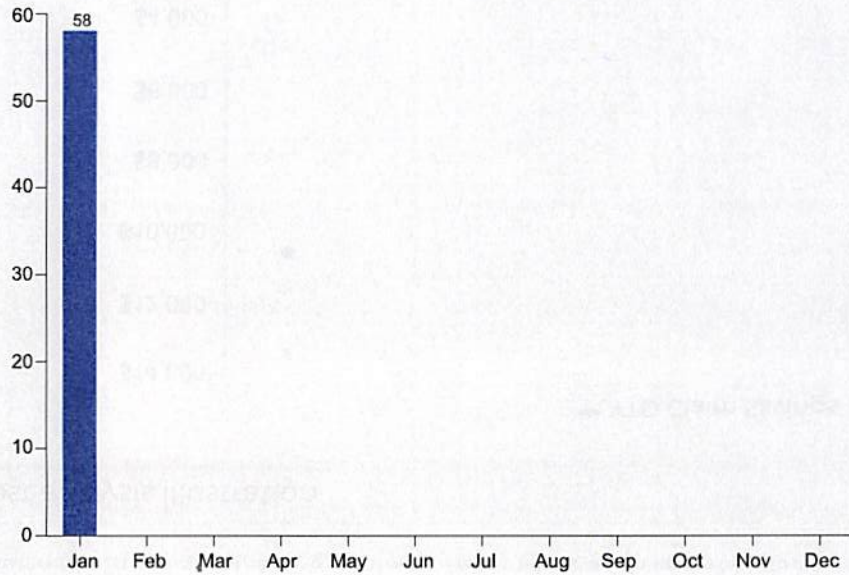
Where member would have gone if Teladoc were not available



Annualized utilization trend

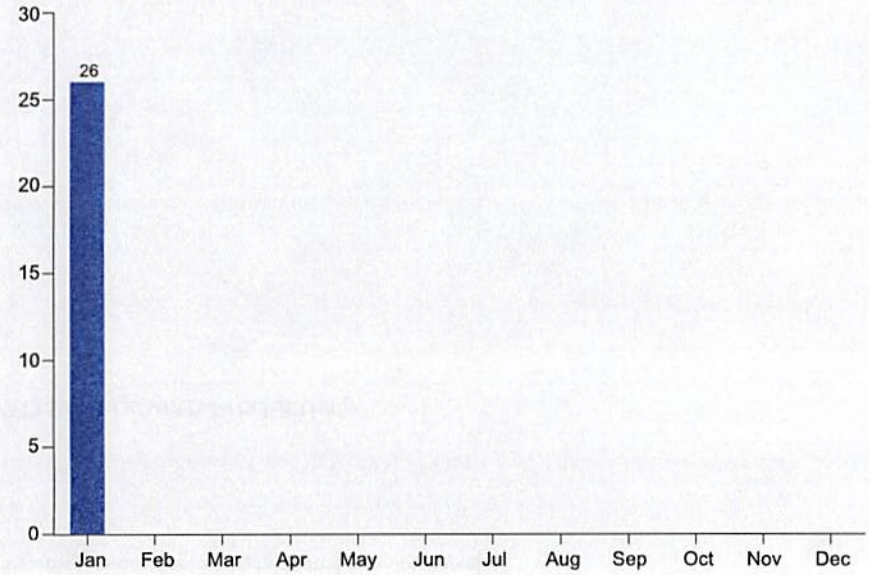


Visits this period **58**



YTD **58**

Registrations this period **26**



YTD **26**

	VISITS		MEMBERSHIP		REGISTRATIONS		MEDICAL HISTORY COMPLETIONS	
	Report Period	YTD	Report Period	YTD AVG	Report Period	Since Inception	Med History Completed	Since Inception
Primaries	33	33	1,080	1,080	7	488	8	382
Dependents	25	25	2,197	2,197	19	394	18	349
Eligible Lives	58	58	3,277	3,277	26	882	26	731

* YTD Average: Sum of each month's eligible lives divided by the number of calendar months the account is effective. Eligible Lives: All members with access to the service (primaries & dependents).
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Redirection claim savings

YTD alternative care options

Alternative Name	Your YTD Consult Count	Average Industry Cost	Teladoc Consult Cost	Net Claim Savings per Consult	Total Net Claim Savings
Primary Care Physician	31	\$129	\$40	\$89	\$2,759
Specialist					
Urgent Care Clinic	19	\$161	\$40	\$121	\$2,299
Emergency Room	4	\$1,456	\$40	\$1,416	\$5,664
No Treatment	4	\$0	\$40	(\$40)	(\$160)
Total	58		\$40		\$10,562

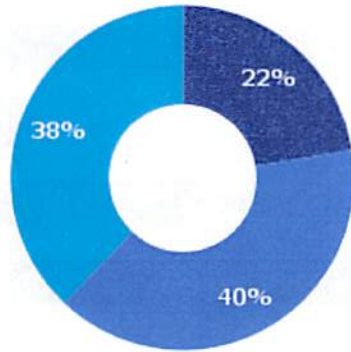
*Savings calculation based on claims impact only using average healthcare blue book values and your specific employee redirection statistics; does not include monthly Teladoc Administrative fees. Please refer to your ROI statement for cost-savings analysis using your specific monthly Teladoc Administrative fees. (To obtain a current ROI statement, request through your Aetna Account Manager.)

Cost analysis illustration



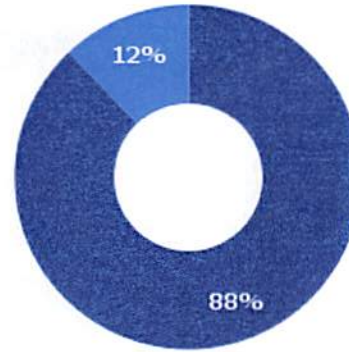
How your members received care YTD

Visit request method



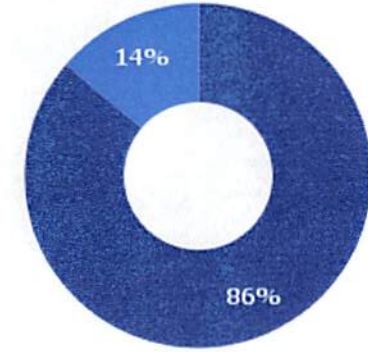
Website Mobile app Call center

Visit method



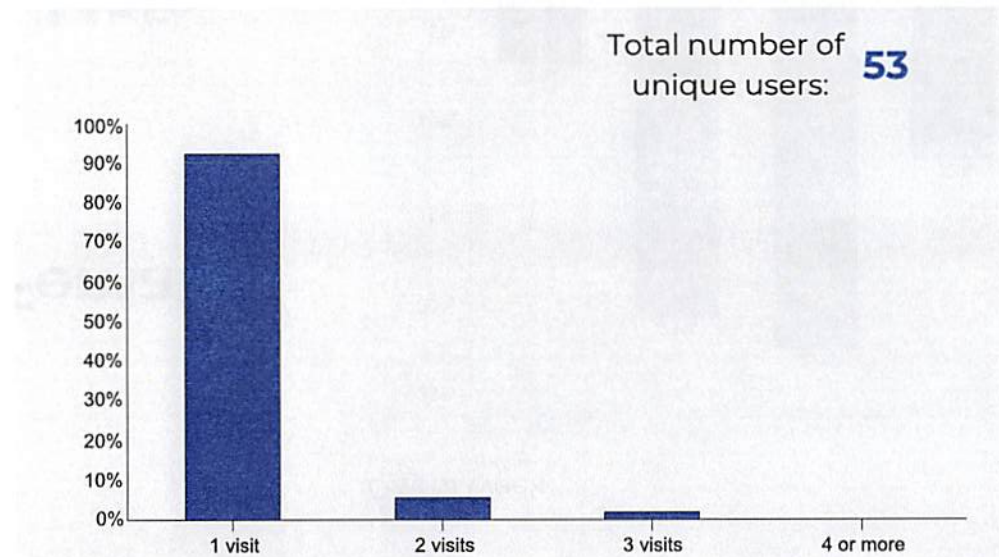
Phone Visualized

On demand vs scheduled



On demand Scheduled

Visit frequency



Who received care and when YTD

Gender

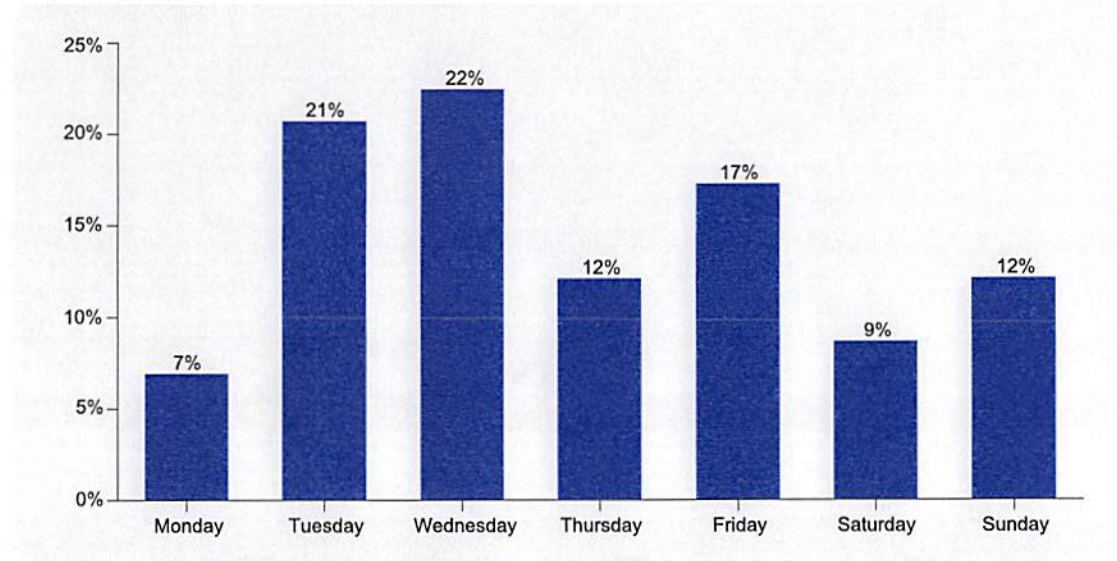


71% Female

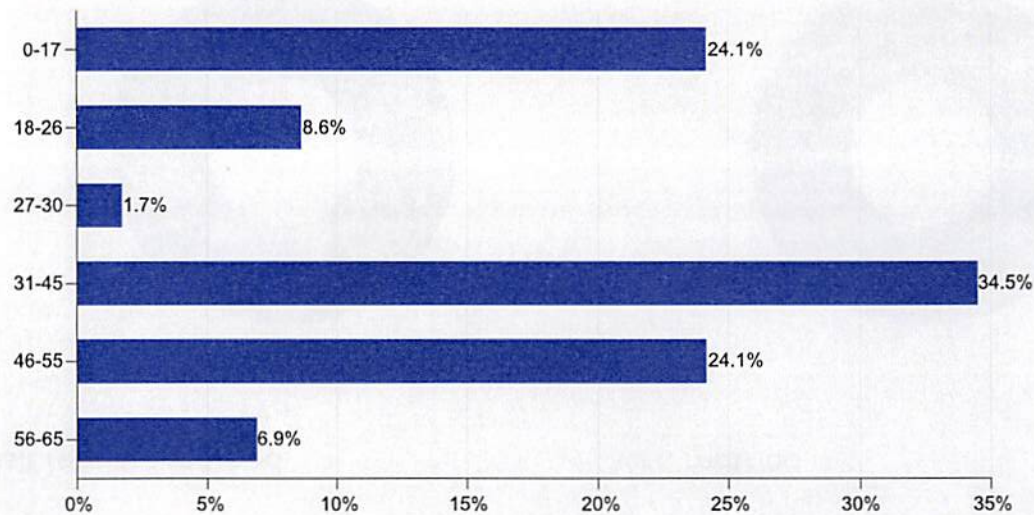


29% Male

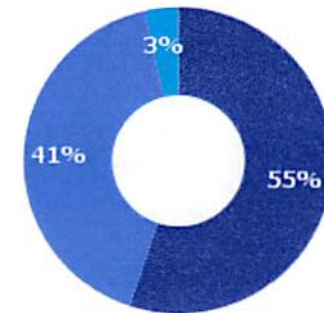
Day of week



Utilization by age



Time of day*



8am - 4pm 4pm - 12am 12am - 8am

* Times in CST

Where your members received care YTD



AVERAGE RESPONSE TIME YTD

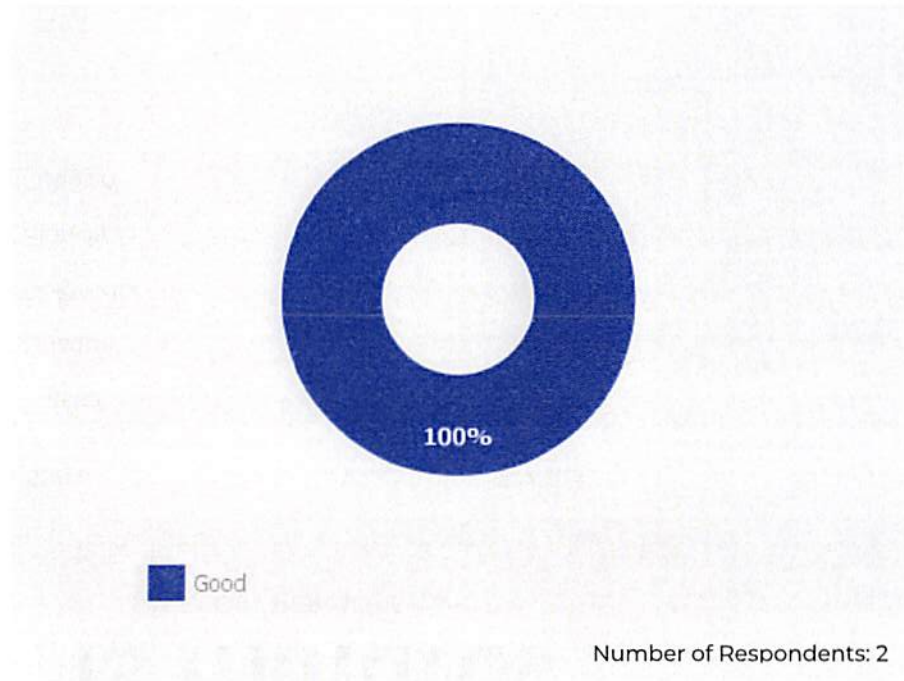
The time between the visit request and when the physician contacted the member

15 minutes

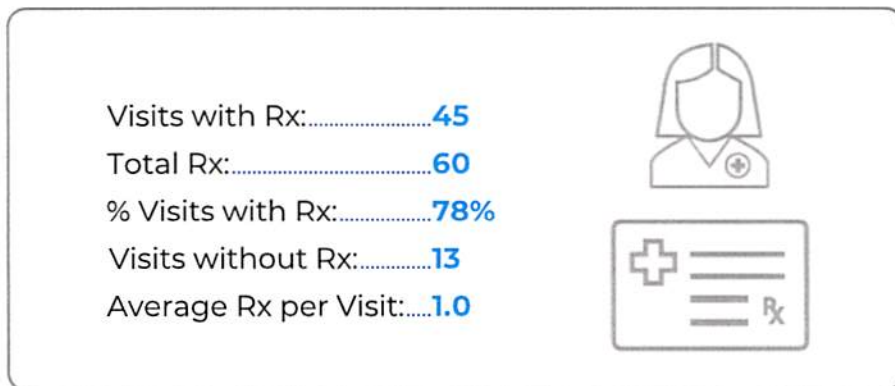
REPORT PERIOD: 15 min

<u>State</u>	<u>Visits</u>	<u>% Visits</u>
Alaska	54	93.1%
Arizona	1	1.7%
Colorado	1	1.7%
Florida	1	1.7%
Oregon	1	1.7%

Member satisfaction



Prescriptions by visit



Top diagnoses

Acute maxillary sinusitis, unspecified	14%
Cough	9%
Acute upper respiratory infection, unspecified	7%
Acute sinusitis, unspecified	5%
Herpesviral gingivostomatitis and pharyngotonsillitis	5%
Acute nasopharyngitis [common cold]	3%
Acute recurrent sinusitis, unspecified	3%
Acute vaginitis	3%
Rash and other nonspecific skin eruption	3%
Acute bronchitis due to other specified organisms	2%

Top prescriptions

Tessalon Perles 100 mg oral capsule	12%
Augmentin 875 mg-125 mg oral tablet	9%
Amoxicillin 875 mg oral tablet	5%
benzonatate 100 mg oral capsule	5%
Diflucan 150 mg oral tablet	5%
amoxicillin-clavulanate 500 mg-125 mg oral tablet	3%
Delsym 12 Hour Cough Children & Adults 30 mg/5 mL oral	3%
PredniSONE 20 mg oral tablet	3%
Singulair 10 mg oral tablet	3%
valACYclovir 1 g oral tablet	3%

Member Satisfaction

Member Satisfaction YTD



January 2019

About the Teladoc Service

How would you rate the Teladoc service overall?

Good 100% Responses 2

How long have you had access to Teladoc?

More than a year 100% Responses 2

In that time, how many consultations with a Teladoc physician have you had?

1-3 100% Responses 2

Was the Teladoc medical consultation for you or for a family member?

Self 100% Responses 1

How often when you have requested a Teladoc consultation did you get a call from the Teladoc physician as soon as you thought you needed it?

Always 50% Responses 1

Usually 50% Responses 1

When you have requested a visit, how often has the Teladoc service made it easier to get the care or treatment you thought you needed?

Always 50% Responses 1

Usually 50% Responses 1

Overall, how would you compare your experience with your Teladoc consultation to your usual face-to-face experience with doctor consultations in terms of how useful the consultation was?

More useful 100% Responses 2

Member Satisfaction YTD



January 2019

Overall, how would you compare your experience with your Teladoc consultation to your usual face-to-face experience with doctor consultations in terms of how much time it took away from work or other activities?

Less time away 100% Responses 2

Would you use the Teladoc service again?

Yes 100% Responses 2

Did your Teladoc consultation resolve your immediate problem?

Yes 50% Responses 1

No 50% Responses 1

Did you get further care for the same problem during the week after your Teladoc consultation (other than filling a prescription)?

Yes 50% Responses 1

No 50% Responses 1

How likely are you to recommend Teladoc to a friend (Where 10=Extremely Likely and 1=Not Likely At All)

8 50% Responses 1

6 50% Responses 1

Access Method

How easy was it for you to schedule your visit?

Very easy 100% Responses 2

Member Satisfaction YTD

How easy was it for you to find the information you wanted?

Very easy	50%	Responses	1
Fairly easy	50%	Responses	1

Tell Us About the Teladoc Physician

Did the physician listen and understand your problem?

Yes	100%	Responses	2
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Did you feel comfortable asking the physician questions?

Yes	100%	Responses	2
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Overall, how would you rate the service provided by the Teladoc physician?

Good	50%	Responses	1
Poor	50%	Responses	1

Tell Us About The Teladoc Prescription Service

Did the pharmacy fill the prescription in a timely manner?

Yes	50%	Responses	1
No	50%	Responses	1

Did you encounter any other problems filling the prescription (other than timeliness)?

Yes	100%	Responses	2
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