RESOLUTION NO. 2023-192

A RESOLUTION BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, APPROVING AMENDMENTS TO THE CURRENT ADMINISTRATIVE SERVICES AGREEMENT WITH BLUE CROSS AND BLUE SHIELD OF FLORIDA, INC. D/B/A FLORIDA BLUE.

RECITALS:

WHEREAS, the current Administrative Services Agreement with Blue Cross and Blue Shield of Florida, Inc. D/B/A Florida Blue, is set to expire on December 31, 2023; and

WHEREAS, Florida Blue will extend the term to December 31, 2028 unless the Agreement is terminated earlier in accordance with the terms of the Agreement; and

WHEREAS, the proposed Amendment also includes modifications to Exhibit B: Financial Arrangements which outlines the administrative fee and annual wellness program stipend for 2024 through 2028; and

WHEREAS, the proposed administrative fee per member per month through December 31, 2026 is \$46.62 which is \$0.75 less than the current rate, and capped at \$47.88 for years 2027 and 2028 of the Agreement.

WHEREAS, the St. Johns County Insurance Committee has determined the modifications are acceptable and therefore recommends approval of the proposed amendments through December 31, 2026; and

WHEREAS, the proposed amendments will go into effect January 1, 2024 until December 31, 2028.

NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of St. Johns County, Florida, that:

Section 1. The above recitals are incorporated into the body of this Resolution and such Recitals are adopted as findings of fact.

Section 2. The attached modifications reviewed and recommended for approval by the St. Johns County Insurance Committee are hereby approved and adopted by the Board of County Commissioners of St. Johns County Florida.

Section 3. The County Administrator or designee is hereby authorized to execute the amendment on behalf of the County, and said changes shall be adopted and effective as of January 1, 2024 until December 31, 2028.

Section 4. To the extent that there are typographical and/or administrative errors that do not change the tone, tenor, or concept of this Resolution, then this Resolution may be revised without subsequent approval of the Board of County Commissioners.

By:

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, State of Florida, this (2th_ Day of June_ 2023.

BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA

Rendition Date JUN 0 6 2023

Christian Whitehurst, Chair

ATTEST: Brandon J. Patty, Clerk of the Circuit Court & Comptroller

By: Cupstal Snith Deputy Clerk



2024 Medical ASO RFP Results

 St. Johns County
 01/01/24

 Description
 01/01/23

 Month Used for Enrollment Counts
 01/01/23

 Subscribers During Enrollment Month
 2,466

Carriers/Administrators	Florida Blue Current		Florida Blue 1/1/2024			UHC	
PEPM Rates						FRANK!	
Base Administrative Service Fee	\$	48.63	\$	46.62	\$	42.18	
Fees for Services Not Included in Base ASO Fee	\$	-	\$	-	\$	4.44	
Disease Management		included		included			
Case Management		included		included	\$	-	
Utilization Management (Radiology, Musculoskeletal, etc.)		included		included	\$	0.94	
TelaDoc Administration Fee		included		included	\$	-	
Claims Fiduciary Services		included		included	\$	-	
Web-Based Wellness Platform		included		included	\$	-	
Stop Loss Reporting to External Vendors		included		included	\$	3.50	
Standard Claims and Utilization Reporting		included		included	\$	-	
ASO Fee PEPM	\$	48.63	\$	46.62	\$	46.62	
Enrollment (as of January 2023)		2,466		2,466		2,468	
Total Monthly ASO Fee	\$	119,922	\$	114,965	\$	114,965	
Total Annual ASO Fee	\$	1,439,059	\$	1,379,579	\$	1,379,579	
Annual Difference from Current			\$	(59,480)	\$	(59,480)	
Rate Guarantee		12/31/2024		12/31/2026		12/31/2026	

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	Current	1/1/2024		
Network Savings - Claims Repricing	 	 	199.000	8
Billed				
Inpatient	\$ 11,392,408	\$ 11,392,408	\$	11,392,408
Outpatient	\$ 21,134,825	\$ 21,134,825	\$	21,134,825
Professional	\$ 27,628,965	\$ 27,628,965	\$	27,628,965
Allowed				
Inpatient	\$ 4,335,400	\$ 4,335,400	\$	5,175,444
Outpatient	\$ 6,638,024	\$ 6,638,024	\$	7,383,086
Professional	\$ 10,475,495	\$ 10,475,495	\$	10,867,680
Savings				
Inpatient	\$ 7,057,008	\$ 7,057,008	\$	6,216,964
Outpatient	\$ 14,496,602	\$ 14,496,802	\$	13,751,739
Professional	\$ 17,153,470	\$ 17,153,470	\$	16,761,265
Average Discounts				
Inpatient	61.9%	61.9%		54.6%
Outpatient	68.6%	68.6%		65.1%
Professional	62.1%	62.1%		60.7%
Total	64.2%	64.2%		60.1%
Estimated (Savings)/Cost from Current				
Inpatient	-	\$ -	\$	840,044
Outpatient	-	\$ -	\$	745,062
Professional	\$ -	\$ 	\$	392,185
Total	\$ -	\$ -	\$	1,977,291
Network Disruption Analysis				
% of Match to Current Utlized Providers	n/a	100%		99%
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Carriers/Administrators	Florida Blue Current	Florida Blue 1/1/2024	UHC	
Additional Charges/Credits				
Wellness Program Stipend - Year 1	\$ (50,000)	\$ (200,000)	\$ (200,000)	
Wellness Program Stipend - Annual		\$ (100,000)	\$ (200,000)	
Wellness Bonus on signing of contract	s -	\$ (150,000)	\$ -	
Total 3-Year Wellness Program Stipend		\$ (550,000)	\$ (600,000)	
Biometric Screenings (Per Participant)	Included in ASO FEE	Included in ASO FEE	Not Available	
Claims Shared Savings (% of Recoveries)				
Naviguard Program		25%	n/a	
Subrogation Services		33%	33%	
Misc.				
Run-out fee at Termination of Agreement		15% of paid claims 12 Monthe	\$ - 12 Months	
Totais				
Estimated Annual increase/Savings - Fees		\$ (59,480)	\$ (59,480)	
Estimated Annual Increase/Savings - Claims		s -	\$ 1,977,291	
Total Increase/ Savings Over Current		\$ (59,480)	\$ 1,917,811	
Vendor Questionnaire Points Total		88.25	71.5	
Administrative Fees		17.5	17.5	
Average Inpatient/Outpatient/Professional Discounts		25	13.0	
Network		9	7	
Value Added Services		12.25	14	
Claims Administration / Data Management		11	11	
Administration/ Customer Service / Reporting		13.5	9	

Note: UHC Includes Onsite Nurse Liaison. This position focuses on health education, behavior modification, health care consumerism with UHC and Optum products, and engagement in the wellness program offerings. General Medicine services are included in the UHC 24/7 Telehealth Service Dermatology virtual services are available through virtual-care-center of excellence accessed via the UHC app Amwell and Doc on Demand virtual providers are part of the United Behaviorial Network for mental health servicas

<u>Declined to Quote</u> Cigna Aetna

AMENDMENT TO ADMINISTRATIVE SERVICES AGREEMENT

THIS AMENDMENT, entered into on ______, 2023 is by and between Blue Cross and Blue Shield of Florida, Inc. d/b/a Florida Blue, (hereinafter called "Florida Blue") and St. Johns County Board of County Commissioners (hereinafter called the "Employer"). In consideration of the mutual and reciprocal promises herein contained, the Administrative Services Agreement between Florida Blue and the Employer (hereinafter "Agreement") effective October 1, 1992 is amended as follows:

- 1. Section I, subsection 1.1 is hereby amended to extend the term of the Agreement until December 31, 2028 unless the Agreement is terminated earlier in accordance with the terms of the Agreement.
- 2. Exhibit B to the Agreement is hereby amended, effective January 1, 2024.
- The revised Exhibit B is attached to this Amendment and replaces the Exhibit B previously attached to the Agreement.
- Except as otherwise specifically noted in this Amendment, all other terms and conditions of the Agreement shall remain unchanged and in full force and effect.

BLUE CROSS AND BLUE SHIELD OF FLORIDA, INC. D/B/A FLORIDA BLUE	ST. JOHNS COUNTY BOARD OF COUNTY COMMISSIONERS					
Ву:	Ву:					
Title:	Title:					
Date:	Date:					

EXHIBIT "B"

to the

ADMINISTRATIVE SERVICES AGREEMENT

between

BLUE CROSS AND BLUE SHIELD OF FLORIDA, INC. D/B/A FLORIDA BLUE

and

ST. JOHNS COUNTY BOARD OF COUNTY COMMISSIONERS

FINANCIAL ARRANGEMENTS

I. Effective Date

The effective date of this Exhibit is January 1, 2024.

II. Monthly Payments.

- A. Each month, Florida Blue will notify Employer of the amount due to satisfy the previous month's paid claims liability. Florida Blue also will provide Employer with a detailed printout of the previous month's claims payments. Employer agrees to pay the full amount of the bill within ten (10) days of the written notification. If the payment is not received by Florida Blue by the payment due date, the payment will be considered past due and subject to a late payment charge, as set forth below. Additionally, Florida Blue will immediately suspend claims until payment is received by Florida Blue.
- B. Employer agrees to pay to Florida Blue, each month during and after the term of this Agreement, an administrative fee, as set forth below. Employer agrees to pay to Florida Blue, each month, the administrative fee within ten (10) days of the written notification of the amount due. If payment is not received by Florida Blue by the due date, the payment will be considered past due and subject to a late payment charge, as set forth below. Additionally, Florida Blue will immediately suspend claims until payment is received by Florida Blue.
- III. Funding Information
 - A. Method of Funding Transfer: ACH
- IV. Administrative Fees:
 - A. Administrative fees during the term of the Agreement:

\$46.62 per employee per month from January 1, 2024 through December 31, 2026. Teladoc Services are included in this fee.

\$47.88 per employee per month from January 1, 2027 through December 31, 2028. Teladoc Services are included in this fee.

- B. Florida Blue will pay Employer a \$150,000 wellness contribution upon Board approval of the Agreement in 2023. Also, Florida Blue will pay Employer a \$200,000 wellness contribution in 2024 and Florida Blue will pay Employer a \$100,000 wellness contribution in 2025 through 2028. The amounts will be predicated upon Employer maintaining their Agreement with Florida Blue through December 31, 2028.
- C. Administrative fees after the termination of the Agreement: 15% of claims paid.
- Access fees of up to 2.02% (2023) of Network Savings for PPO provider D. claims and 3.62% of Network savings for Traditional provider claims may be assessed for claims incurred in states under the BlueCard program as explained in more detail under Section 3.9. This access fee will not exceed two thousand dollars (\$2,000) for any one claim and will not apply in Florida, Alabama or in Consortium Plan service areas where enrolled members reside as long as enrollment continues to be equal to or greater than one thousand (1,000) contracts. On the first anniversary date after enrollment falls below one thousand (1,000) contracts, access fees will apply in those Consortium Plan service areas where enrolled members reside and Consortium fees were not previously established. Access fees will also apply in Consortium Plan service areas where no enrolled members reside. A determination of the Consortium Plan service areas that will not apply access fees for services rendered to members will be made on the basis of enrollment on each subsequent anniversary of this Agreement's effective date. Access fees will be applied on the basis of where the service was incurred, and not where the member resides.

Network Savings is defined as the total of the amounts computed by subtracting each "allowed amount" for a particular service under the terms of a participating provider's written agreement from each "billed amount" for such service. In no event shall the term "Network Savings" include duplicate charges or billed amounts for services or supplies not covered under the Employer's Plan. The term "allowed amount" means the amount received as payment in full by a participating provider, under that provider's written agreement, from both BCBSF and covered individuals under Employer's Plan for claims submitted to, and paid by BCBSF for a particular covered service, and the term "billed amount" means the amount which would be received by such provider for the same covered service utilizing that provider's charges.

- V. Late Payment Penalty
 - A. A daily charge of .00038 times the amount of overdue payment.

VI. Expected Enrollment

- A. The administrative fees referenced above are based on an expected enrollment of: 2,180.
- B. If the actual enrollment is materially different from this expected enrollment, Florida Blue reserves the right to adjust the administrative fees as set forth in the Agreement. Administrative fees will be charged based on actual enrollment.

VII. Telemedicine Services

Telemedicine Services include access to licensed physicians associated with Teladoc's Physician Network, Teladoc Physicians, PA.("Teladoc"). Teladoc can also accommodate physician services within specialized group healthcare networks.

 The primary care physicians are selected by Teladoc to provide patient and physician interaction, whereby the physician diagnoses the patient's ailment, recommends an appropriate therapy, and if necessary writes a prescription. Teladoc sends prescriptions electronically through Superscripts (if available). Follow up with the patient and/or pharmacy is available on behalf of the physician for three days if required. Teladoc does not prescribe DEA controlled substances, lifestyle drugs, pain medications, or psychotropic drugs. Florida Blue members who speak with physicians using the Teladoc platform will have access to immediate and scheduled consultations 24/7/365. The member cost share will be based on current group plan benefits. The Teladoc Telemedicine Services are designed to provide physician access in the states where Florida Blue members live and travel. Each physician within Teladoc's Physician Network shall be licensed to practice medicine in the state where the patient appointment is initiated. The Teladoc Physicians Network consists of internal medicine, family practice, emergency medicine, and pediatric physicians. All physicians are U.S. trained, NPDB and AMA verified, as well as credentialed and verified by NCQA. Physicians are also subject to Teladoc's Quality Audit process, which continually reviews physician clinical practice quidelines. Ten (10) percent of all consults are audited to ensure prescribing guidelines and clinical protocols are met.

The members' e-visit cost share will be determined by the current plan benefits, and shall be payable if necessary, by the member at the time of the on-line or telephonic visit. Member payment may be made by credit card or debit card; and, subject to the exceptions and adjustments described in the above paragraph.