

## **Travis County Commissioners Court Agenda Request**

Meeting Date: July 17, 2012

Prepared By/Phone Number: Norman McRee/854-4821

Elected/Appointed Official/Dept. Head: Leslie Browder, County

Executive, Planning & Budget

Commissioners Court Sponsor: Samuel T. Biscoe, County Judge

#### **AGENDA LANGUAGE:**

Review and approve the immediate release of reimbursement payment to United Health Care for claims paid for participants in the Travis County Employee Health Care Fund for payment of \$668,392.54, for the period of June 29 to July 5, 2012.

#### BACKGROUND/SUMMARY OF REQUEST AND ATTACHMENTS:

See attached.

#### STAFF RECOMMENDATIONS:

The Director or Risk Manager has reviewed the reimbursement submitted and concurs with the findings of the audits by the Financial Analyst and the Benefits Contract Administrator and therefore recommends reimbursement of \$668,392.54.

#### ISSUES AND OPPORTUNITIES:

See attached.

#### FISCAL IMPACT AND SOURCE OF FUNDING:

Employee Health Benefit Fund (8956) – \$668,392.54

#### **REQUIRED AUTHORIZATIONS:**

Dan Mansour, 854-9499 Diane Blankenship, 854-9170 Leroy Nellis, 854-9106

AGENDA REQUEST DEADLINE: All agenda requests and supporting materials must be submitted as a pdf to Cheryl Aker in the County Judge's office, <a href="mailto:Cheryl.Aker@co.travis.tx.us">Cheryl.Aker@co.travis.tx.us</a> by Tuesdays at 5:00 p.m. for the next week's meeting.

# TRAVIS COUNTY RECOMMENDATION FOR TRANSFER OF FUNDS

DATE:

July 17, 2012

TO:

Members of the Travis County Commissioners Court

FROM:

Dan Mansour, Risk Manager

COUNTY DEPT.

Human Resources Management Department (HRMD)

**DESCRIPTION:** 

United Health Care (UHC) (The Third Party Administrator for

Travis County's Hospital and Self Insurance Fund) has

requested reimbursement for health care claims paid on behalf

of Travis County employees and their dependents.

PERIOD OF PAYMENTS MADE:

June 29, 2012 to July 5, 2012

REIMBURSEMENT REQUESTED

FOR THIS PERIOD:

\$668,392.54

HRMD RECOMMENDATION:

The Director or Risk Manager has reviewed the reimbursement submitted and concurs with the findings

of the audits by the Financial Analyst and the Benefits
Contract Administrator and therefore recommends

reimbursement of \$668,392.54.

Please see the attached reports for supporting detail information.

#### TRAVIS COUNTY

# HOSPITAL AND INSURANCE FUND

#### SUPPORTING DETAIL FOR THE

#### WEEKLY REIMBURSEMENT REQUEST TO

#### **COMMISSIONERS COURT**

#### FOR THE PAYMENT PERIOD

#### JUNE 29, 2012 TO JULY 5, 2012

Page 1.	Detailed Recommendation to Travis County Auditor for transfer of funds.
Page 2.	Chart of Weekly Reimbursements Compared to Budget.
Page 3.	Paid Claims Compared to Budgeted Claims.
Page 4.	FY Comparison of Paid Claims to Budget.
Page 5.	Notification of amount of request from United Health Care (UHC).
Page 6.	Last page of the UHC Check Register for the Week.
Page 7.	List of payments deemed not reimbursable.

Journal Entry for the reimbursement.

Page 8.

#### TRAVIS COUNTY RECOMMENDATION FOR TRANSFER OF FUNDS

DATE:

July 17, 2012

TO:

Susan Spataro, County Auditor

FROM:

Dan Mansour, Risk Manager

COUNTY DEPT.

Human Resources Management Department (HRMD)

United Health Care (UHC) (Travis County's Third Party Administrator for our Self Insured Health Care Fund) has requested reimbursement for health care claim payments made on behalf of Travis County employees and their dependents as follows:

PERIOD OF PAYMENTS PAID:

FROM: TO:

June 29, 2012 July 05, 2012

#### REIMBURSEMENT REQUESTED:

668,392.54

SUPPORTING DETAIL FOR REIMBURSEMENT REQUESTED:

NOTIFICATION OF AMOUNT OF REQUEST FROM UHC*:	\$	2,576,975.35
bank withdrawal correction LESS: REIMBURSEMENTS PREVIOUSLY APPROVED BY	\$	(2,850.00)
COMMISSIONERS COURT: July 10, 2012 July 3, 2012	\$ \$	(755,828.07) (1,166,906.80)
October 5, 2010 adj Adjust to balance per UHC AJE Correction - Vision Payment 6/1/2012	\$ \$	135.10 0.17
TOTAL CLAIMS REIMBURSEMENT REQUESTED BY UHC FO	R THIS WEEK**: \$	16,866.79 <b>668,392.54</b>
PAYMENTS DEEMED NOT REIMBURSABLE	\$	-
TRANSFER OF FUNDS REQUESTED:	\$	668,392.54

The claims have been audited for eligibility and all were eligible in the period covered by the claim.

All claims over \$25,000 (2 this week totaling \$60,757.76) have been audited for data entry accuracy and the following information is correct for each claim audited: date of service, eligibility, nature of service, name of and amount billed by provider, amount billed by date and amount paid by UHC.

Fifteen percent (15%) of all claims under \$25,000 (\$95,790.71) have been audited for data entry accuracy and the following information is correct for each claim identified for this random review; date of service, eligibility, nature of service, name of and amount billed by provider, date and amount paid by UHC. Claims in this random audit met the above requirements but may qualify for more detailed analysis through other resources.

All claims have been reviewed to determine if they have exceeded the \$225,000 stop loss limit. Claims that have exceeded the limit will be reimbursed by Sun Life effective November 1, 2011. Cumulative fiscal year stop loss reimbursements from Sun Life total \$103,772.67.

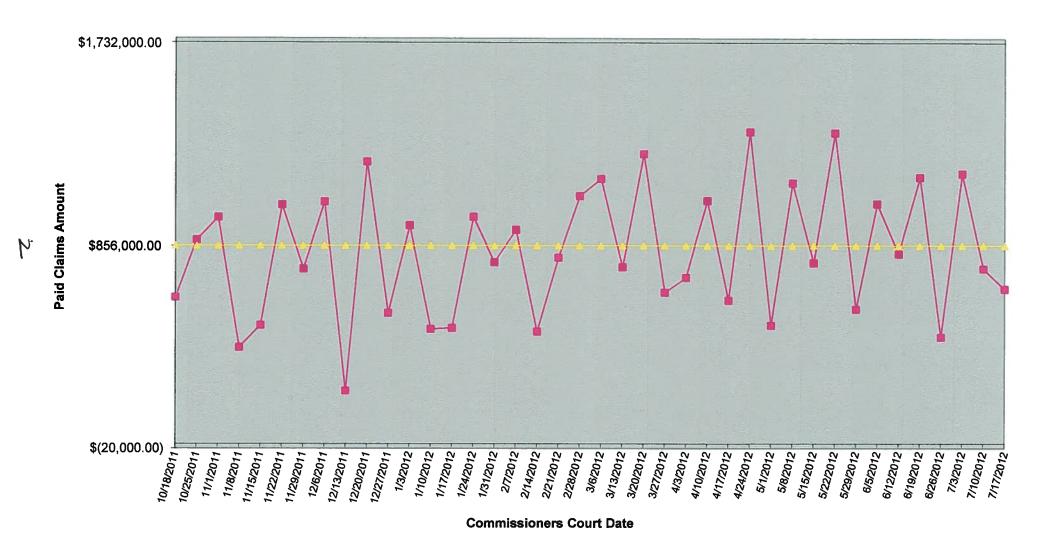
All claims submitted in this transfer have been audited to confirm accuracy of billing and legitimacy of claim under the service provisions of the health care contract and all are contractually legitimate, legally incurred and accurately billed claims.

I certify that all data listed on this recommendation for transfer of funds is correct and that the payments shown have been made solely for the purpose of health insurance claims.

Date

<sup>\*\*</sup> Agrees to the total payments for this period per the check register received from UHC. See the final page of this period's check register attached.

# Travis County Employee Benefit Plan FY12 Paid Claims vs Weekly Claims Budget of \$856,615.23



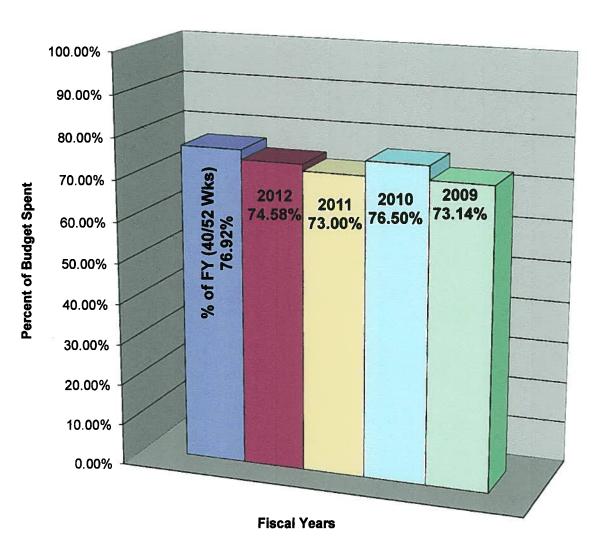
# Travis County Employee Benefit Plan FY12 Weekly Paid Claims VS Weekly Budgeted Amount

					Pd Claims			# of			FY 2012 %	FY 2011 %
W	Period from	Period To	Voting		Request		Budgeted	Large	To	tal of Large	of Budget	of Budget
k		1 01100 10	Session Date		Amount	W	eekly Claims	Claims		Claims	Spent	Spent
1	9/30/2011	10/6/2011	10/18/2011	\$	633,677.95	\$	856,615.23	2	\$	84,383.56	1.42%	1.14%
2	10/7/2011	10/13/2011	10/25/2011	\$	882,462.44	\$	856,615.23	1	\$	34,434.26	3.40%	3.65%
3	10/14/2011	10/20/2011	11/1/2011	\$	978,780.20	\$	856,615.23	1	\$	85,633.00	5.60%	4.76%
4	10/21/2011	10/27/2011	11/8/2011	\$	417,495.82	\$	856,615.23	0	\$	-	6.54%	7.22%
5	10/28/2011	11/3/2011	11/15/2011	\$	513,031.56	\$	856,615.23	1	\$	25,354.52	7.69%	8.28%
6	11/4/2011	11/10/2011	11/22/2011	\$	1,031,570.27	\$	856,615.23	0	\$	-	10.01%	10.69%
7	11/11/2011	11/17/2011	11/29/2011	\$	757,171.26	\$	856,615.23	2	\$	166,108.32	11.71%	12.20%
8	11/18/2011	11/24/2011	12/6/2011	\$	1,045,944.29	\$	856,615.23	1	\$	29,029.81	14.05%	14.23%
9	11/25/2011	12/1/2011	12/13/2011	\$	229,111.51	\$	856,615.23	0	\$	- I	14.57%	15.77%
10	12/2/2011	12/8/2011	12/20/2011	\$	1,217,952.91	\$	856,615.23	4	\$	166,327.24	17.30%	17.99%
11	12/9/2011	12/15/2011	12/27/2011	\$	565,509.10	\$	856,615.23	1	\$	30,240.78	18.57%	19.10%
12	12/16/2011	12/22/2011	1/3/2012	\$	942,710.54	\$	856,615.23	0	\$		20.69%	21.81%
13	12/23/2011	12/29/2011	1/10/2012	\$	497,081.54	\$	856,615.23	3	\$	90,452.62	21.80%	22.62%
14	12/30/2011	1/5/2012	1/17/2012	\$	501,307.66	\$	856,615.23	1	\$	33,103.70	22.93%	24.21%
15	1/6/2012	1/12/2012	1/24/2012	\$	980,234.49	\$	856,615.23	0	\$	-	25.13%	25.75%
16	1/13/2012	1/19/2012	1/31/2012	\$	784,679.34	\$	856,615.23	5	\$	247,915.57	26.89%	28.64%
17	1/20/2012	1/26/2012	2/7/2012	\$	923,174.33	\$	856,615.23	1	\$	43,848.52	28.96%	29.97%
18	1/27/2012	2/2/2012	2/14/2012	\$	485,429.02	\$	856,615.23	0	\$		30.05%	32.22%
19	2/3/2012	2/9/2012	2/21/2012	\$	804,332.61	\$	856,615.23	5	\$	239,340.91	31.86%	33.66%
20	2/10/2012	2/16/2012	2/28/2012	\$	1,070,701.34	\$	856,615.23	□ 1	\$	112,390.12	34.26%	35.74%
21	2/17/2012	2/23/2012	3/6/2012	\$	1,144,590.00	\$	856,615.23	3	\$	269,470.27	36.83%	37.01%
22	2/24/2012	3/1/2012	3/13/2012	\$	763,227.16	\$	856,615.23	2	\$	152,289.82	38.55%	39.34%
23	3/2/2012	3/8/2012	3/20/2012	<u>\$</u>	1,251,959.32	\$	856,615.23	4	\$	222,757.96	41.36%	41.06%
24	3/9/2012	3/15/2012	3/27/2012	<u>\$</u>	654,180.98	\$	856,615.23	1	\$	27,512.35	42.83%	43.45%
25	3/16/2012	3/22/2012	4/3/2012	\$	718,070.63	\$	856,615.23	4	\$	147,348.72	44.44%	45.18%
26	3/23/2012	3/29/2012	4/10/2012	\$	1,049,553.56	\$	856,615.23	2	\$	65,033.32	46.79%	47.71%
27	3/30/2012	4/5/2012	4/17/2012	\$	620,075.83	\$	856,615.23	1	\$	52,789.64	48.19%	49.31%
28	4/6/2012	4/12/2012	4/24/2012	\$	1,347,518.33	\$	856,615.23	4	\$	251,686.20	51.21%	52.13%
29	4/13/2012	4/19/2012	5/1/2012	\$	512,438.99	\$	856,615.23	1	\$	28,723.77	52.36%	53.14%
30 31	4/20/2012 4/27/2012	4/26/2012	5/8/2012	\$	1,126,915.90	\$	856,615.23	2	\$	93,065.85	54.89%	55.40%
32		5/3/2012	5/15/2012	\$	782,524.92	\$	856,615.23	4	\$	272,823.44	56.65%	56.70%
33	5/4/2012 5/11/2012	5/10/2012	5/22/2012	\$	1,343,226.16	\$	856,615.23	4	\$	169,781.89	59.66%	59.04%
34	5/11/2012	5/17/2012 5/24/2012	5/29/2012 6/5/2012	<u>\$</u>	581,500.19 1,036,119.69	\$	856,615.23	1	\$	30,230.00	60.97%	60.53%
35	5/25/2012	5/31/2012	6/12/2012	\$	821,261.32	\$ \$	856,615.23 856,615.23	3	\$	25,818.58 278,532.72	63.30% 65.14%	62.68%
36	6/1/2012	6/7/2012	6/19/2012	\$	1.150.995.87	\$	856,615.23	2	\$	113,030.61	67.72%	63.69%
37	6/8/2012	6/14/2012	6/26/2012	\$	461,241.76	\$	856,615.23	0	\$	113,030.01	68.76%	66.11% 67.17%
38	6/15/2012	6/21/2012	7/3/2012	\$	1,166,906.80	\$	856,615.23	3	\$	179,252.35	71.38%	70.70%
	6/22/2012			\$			856,615.23			168,237.16		71.07%
		7/5/2012	7/17/2012	\$				2	\$			73.00%
H.	G/20/2012	77072012	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	000,002.0-i	*	000,010.20		Ψ-	30,730.71	74.5070	73.0070
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Paid & Budgeted Claims to Date	\$ 33,218,886.20	\$ 34,264,609.23
Paid Claims less Total W	eekly Budget	\$ (1,045,723.03)

note: Not predictive of impact on reserve, intended to show relationship of weekly claims cost to weekly budget.

### Comparison of Claims to FY Budgets Week 40



1

#### **Norman McRee**

From:

SIFSFAX@UHC.COM

Sent:

Friday, July 06, 2012 12:48 AM

To:

Norman McRee

**Subject:** 

**UHG FUNDING NOTIFICATION** 

TO: NORMAN MCREE

FROM: UNITEDHEALTH GROUP

FAX NUMBER: (512) 854-3128

AB5

PHONE: (512) 854-3828

NOTIFICATION OF AMOUNT OF REQUEST FOR: TRAVIS COUNTY

DATE: 2012-07-06

REQUEST AMOUNT: \$2,576,975.35

CUSTOMER ID: 00000701254

CONTRACT NUMBER: 00701254 00709445

BANK ACCOUNT NUMBER: 0475012038

ABA NUMBER: 021000021

**FUNDING** 

ADVICE FREQUENCY: DAILY

FREQUENCY: FRIDAY

INITIATOR: CUST METHOD: ACH BASIS: BALANCE

**CALCULATION OF REQUEST AMOUNT** 

+ ENDING BANK ACCOUNT BALANCE FROM: 2012-07-05

\$136,367.98

- REQUIRED BALANCE TO BE MAINTAINED:

\$2,668,041.00

+ PRIOR DAY REQUEST:

\$00.00

= UNDER DEPOSIT:

\$2,531,673.02

+ CURRENT DAY NET CHARGE:

\$45,302.33

+ FUNDING ADJUSTMENTS:

\$00.00

**REQUEST AMOUNT:** 

\$2,576,975.35

**ACTIVITY FOR WORK DAY: 2012-06-29** 

**CUST** 

NON

NET

PLAN 0632 CLAIM \$31,616.74 \$00.00

CHARGE \$31,616.74

TOTAL:

\$31,616.74

\$00.00

\$31,616.74

UNITED HEALTHCARE CHECK REGISTER FOR TRAVIS COUNTY SUBMITTED 2012\_07\_05

CONTR_NBR	PLN_ID	TRANS_AMT	SRS_DESG_NBR	CHK_NBR	GRP ID	CLM ACCT NBR	ISS DT	TRANS TYP CD	TRANS DT	WK END DT
701254	632	\$1.65	PH	83729307	ΑĒ	6	4/10/2012		7/6/2012	7/5/2012
701254	632	\$1.65	QG	91489434	AA	11	6/29/2012	100	7/3/2012	7/5/2012
701254	632	\$1.42	<sup>©</sup> QG	11007115	AH	8	7/2/2012	100	7/5/2012	7/5/2012
701254	632	\$1.41	QG	11007115	AA	1	7/2/2012	100	7/5/2012	7/5/2012
701254	632	\$1.40	PH	36159722	AA	3	6/22/2012	20	7/6/2012	7/5/2012
701254	632	\$1.28	QG	11005005	AH	9	7/2/2012	100	7/5/2012	7/5/2012
701254	632	\$0.50	PH	73243268	AA	5	6/25/2012	20	7/6/2012	7/5/2012
701254	632	\$0.29	QG	40997899	AH	1	7/2/2012	100	7/5/2012	7/5/2012
701254	632	\$0.22	PH	84227772	AA	3	6/19/2012	20	7/5/2012	7/5/2012
701254	632	\$0.20	PH	36142214	AH	11	6/21/2012	20	7/6/2012	7/5/2012
701254	632	\$0.10	QG	31022669	AH	3	7/3/2012	100	7/6/2012	7/5/2012
701254	632	\$0.01	QG	11007115	AA	8	7/2/2012	100	7/5/2012	7/5/2012
701254	632	\$0.01	QG	11007115	AH	1	7/2/2012	100	7/5/2012	7/5/2012
701254	632	\$0.01	QG	11007115	AH	8	7/2/2012	100	7/5/2012	7/5/2012
701254	632	\$0.01	QG	11007115	AH	16	7/2/2012	100	7/5/2012	7/5/2012
701254	632	-\$3.32	QG	1732212	AE	3	6/29/2012	50	7/6/2012	7/5/2012
701254	632	-\$30.00	QG	91248828	AA	5	4/2/2012	50	7/6/2012	7/5/2012
701254	632	-\$288.49	QG	40762933	ΑE	8	6/28/2012	50	7/5/2012	7/5/2012
701254	632	-\$1,369.50	QG	91396710	AE	3	6/27/2012	50	7/3/2012	7/5/2012

668,392.54

# Travis County Hospital and Insurance Fund - County Employees UHC Payments Deemed Not Reimbursable

For the payment week ending:

07/05/2012

CLAIM

**TRANS** 

CONTR\_# TRANS\_AMT SRS CHK\_#

GRP ACCT# ISS\_DATE

CODE TRANS\_DATE

Total:

\$0.00

## **Travis County - Employee Health Benefits Fund (526)**

#### Journal Entry for the Reimbursement to United Health Care

For the payment week ending: 7/05/2012

Туре	EE/RR	Cost Center	G/L Account	Transaction Amount		
СЕРО	EE	1110068956	516010	\$	60,287.08	
	RR	1110068956	516110	\$	4,771.51	
			Total CEPO			\$ 65,058.59
EPO	EE	1110068956	516030	\$	149,734.59	
	RR	1110068956	516130	\$	15,945.84	
			Total EPO			\$ 165,680.43
PPO	EE	1110068956	516020	\$	422,492.30	
	RR	1110068956	516120	\$	15,161.22	
			Total PPO			\$ 437,653.52
			Grand Total			\$ 668,392.54