

San Francisco Health Service System Health Service Board

Rates & Benefits

Health Value Initiative (“HVI”) Benchmarking Study

April 14, 2022

Aon Health Value Initiative (HVI)™

The Aon Health Value Initiative (HVI)™ Database, launched in 1996, captures active employee medical and prescription drug cost and benefit data on health plans for:

- 5.3 million health plan employees;
- 591 employer organizations; [1]
- 2,500+ health plans; and
- \$71.8 billion in health care expenditures.

This benchmarking study captures medical and prescription drug data for active employees only.

- Dental and vision plans are not measured in the study.
- Retirees are not measured in this study.

[1] Total number of employers is dynamic and changes as clients are added or removed from the baseline.

Aon HVI Benchmarking for SFHSS

Executive Summary

Similar to prior years, San Francisco Health Service System (SFHSS) active employee health plans demonstrate a purchasing efficiency score that remains among the best in our study — SFHSS receives a higher level of value for every dollar spent in health care than most other employers participating in Aon's HVI study.

Financial efficiency is gauged by normalizing plan cost differences caused by plan design, demographic, and geographic differences among populations.

Aon HVI Benchmarking for SFHSS

Executive Summary

Overall medical/prescription drug spend per employee is higher for SFHSS than for average benchmarked organizations — three key factors drive this result:

- Higher average population age for SFHSS than other benchmarks (though similar to Public Sector benchmark average age) — SFHSS population is 3 years older on average than overall study employee average age.
- Higher cost of health care overall in Bay Area versus U.S. averages.
- Higher percentage of allowed costs paid by SFHSS plans versus other benchmarks after applying member plan design elements (e.g., SFHSS plan deductibles and copayments are less, on average, than those for plan designs of benchmark employers).

Aon HVI Benchmarking for SFHSS

Executive Summary (continued)

From an employee perspective for plan cost sharing benchmarking:

- SFHSS is slightly lower versus other benchmarks for average out-of-paycheck contribution amounts.
- SFHSS is substantially lower versus other benchmarks for average member plan design cost sharing at time of service (e.g., deductibles, copayments, and coinsurance).

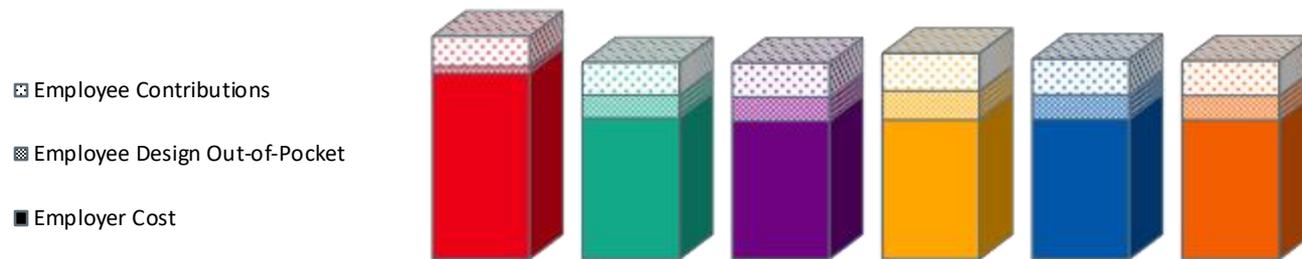
Aon Health Value Initiative (HVI)™ Benchmarks

-  **San Francisco Health Service System (SFHSS)**
SFHSS fully-insured plan costs are based on actual 2022 premium rates; SFHSS self-insured/flex-funded plan costs are based on the medical, prescription drug, and administrative cost portions of total cost rates; all costs exclude Basic Vision rates, SFHSS sustainability fees, and rate stabilization adjustments.
-  **Public Sector Industry (Public) — 56 Organizations**
Public employer subset (primarily states, municipalities, and universities).
-  **Organization Size (25,000+) — 44 Organizations**
Subset of study employers with 25,000 and more employees covered by plans.
-  **Fortune 500 Subset in Database — 48 Organizations**
Subset of study employers that are in the Fortune 500.
-  **Labor Market — 582 Organizations**
Weighted average of all participating organizations operating in same geographies as SFHSS employees. This comparison group is helpful in analyzing the impact of employee location on costs.
-  **HVI Entire Database — 591 Organizations**
Entire Aon database of 591 participating organizations.

2022 Annual Health Plan Costs Per Employee

- SFHSS employers pay 83% of overall health care spend (allowed charges plus fees), compared to a range of 68% to 72% for benchmark averages.
- Member design out-of-pocket cost in SFHSS plans (for deductibles, copayments, coinsurance, etc.) is substantially lower than for other benchmarks, including public sector.

Health Plan Costs Per Employee—Overall



	SFHSS	Public Sector	Jumbo (>25k)	Fortune 500	Labor Market	HVI
Employee Contributions	\$2,319	\$2,517	\$2,623	\$2,904	\$2,753	\$2,696
Employee Design Out-of-Pocket	\$558	\$1,796	\$1,867	\$2,232	\$1,882	\$1,903
Employer Cost	\$14,375	\$10,907	\$10,688	\$10,789	\$10,844	\$10,760
Total Health Plan Cost	\$17,252	\$15,220	\$15,178	\$15,925	\$15,479	\$15,359
Employer Portion Percent	83%	72%	70%	68%	70%	70%

2022 Health Plan Financial Purchasing Efficiency

- The Financial Index (FI) is a measure of financial efficiency of plans offered by SFHSS and other database organizations. It normalizes for cost differences driven by demographic, geographic, and plan design variations among organizations. Plan administrative costs and care management is reflected in the FI measure.
- An FI greater than 100% reflects better-than-average financial efficiency.
- The SFHSS FI exceeds all comparators at 118.2%.
- Thus, SFHSS health plan purchasing efficiency significantly exceeds averages for other benchmarks in the study.

Financial Efficiency—Overall



	SFHSS	Public Sector	Jumbo (>25k)	Fortune 500	Labor Market	HVI
Financial Index	118.2%	103.6%	99.0%	101.4%	99.7%	100.0%
Enrollment	39,557	1,044,507	3,168,393	1,330,870	1,943,643	5,332,715

Detailed Profile — 2022 Costs and Demographics

Annual Amounts (Page 1 of 2)

Category	SFHSS	Public Sector	25,000+	Fortune 500	Labor Market	HVI
Overall Profile						
Number of Employees	39,557	1,044,507	3,168,393	1,330,870	1,943,643	5,332,715
Total Health Plan Costs (\$B) [1]	\$0.7B	\$14.0B	\$42.2B	\$18.2B	\$26.4B	\$71.8B
Total Employer Health Plan Costs (\$B)	\$0.6B	\$11.4B	\$33.9B	\$14.4B	\$21.1B	\$57.4B
Average Age	46.8	46.6	43.3	44.2	43.7	43.8
Average Family Size	2.1	2.0	2.0	2.1	2.1	2.0
Percent Females	49%	65%	53%	49%	49%	49%

[1] Net of plan design cost sharing by plan participants (deductibles, copayments, coinsurance, etc.)

Detailed Profile — 2022 Costs and Demographics

Annual Amounts (Page 2 of 2)

Category	SFHSS	Public Sector	25,000+	Fortune 500	Labor Market	HVI
Competitive Medical/Prescription Drug Active Employee Cost Benchmarks						
Total Health Plan Costs Per Employee [1]	\$16,694	\$13,424	\$13,311	\$13,693	\$13,597	\$13,457
Employer Health Plan Costs Per Employee	\$14,375	\$10,907	\$10,688	\$10,789	\$10,844	\$10,760
Financial Index	118.2%	103.6%	99.1%	101.4%	99.7%	100.0%
Member Medical/Prescription Drug Active Employee Cost Sharing Benchmarks						
Employee Contribution	\$2,319	\$2,517	\$2,623	\$2,904	\$2,753	\$2,696
Plan Design Out-of-Pocket Expense	\$558	\$1,796	\$1,867	\$2,232	\$1,882	\$1,903

[1] Net of plan design cost sharing by plan participants (deductibles, copayments, coinsurance, etc.)