

School Health Data Collection Form

Section 1: District Information

This survey is required with passage of Section 5 of [H797](#), of the 2022 Legislative Session.

The survey will collect data from each school district and charter school on the revenues and expenditures for the money that is appropriated and allocated to "offset the costs of health, vision, and dental benefits or insurance offered to school employees." This requirement can be found in Section 5 of [H797](#), and in comparable appropriation bill sections since the 2018-2019 school year. To assist you, relevant sections of Idaho Code and appropriation bills have been provided throughout the survey.

Start by finding your school district or charter school number in box 1; several pieces of data will be populated for you throughout the survey based on this selection. For all other data fields, please provide as accurate of information as possible. The survey begins with questions on actual information from the 2021-2022 school year and finishes with comparable questions for the current 2022-2023 school year. Once you start the survey you will need to complete it; there is no save and return function.

Survey responses are due no later than December 1, 2022; however Early submission is appreciated. As provided in Section 5 of [H797](#), survey information will be used to determine future funding decisions. The more accurate the survey responses are, the better information the Legislature will have when making final funding and policy decisions surrounding the appropriated health insurance/benefits funding.

If you have questions - please contact Jared Tatro, Legislative Services Office at 208-334-4740 or jtatro@lso.idaho.gov. There is also a FAQ link on each page of the survey.

All submitted information is public and a copy of the survey submission will be sent to the provided email in the survey submission, as well as the Governor's budget office (DFM).

DISTRICT/CHARTER Number

Date Prepared

Name

Title

Email

Section 2: 2021-2022 Demographics

*DEMOGRAPHIC/BACKGROUND INFORMATION For the **2021-2022** School Year*

Best-28 Week Support Units For the 2021-2022 School Year

General Fund FTE Staff Allowance For the 2021-2022 School Year

Health Insurance/Benefits Options Offered to Employees For the 2021-2022 School Year - Choose ALL that apply. (Check All That Apply)

- Health Insurance (less than \$1,000 ind. deductible)
- Catastrophic Health Care Coverage
- High Deductible with funded HSA
- Dental
- Life Insurance
- Fitness Memberships/Wellness Programs
- Health Insurance (greater than \$1,000 ind. deductible)
- Direct Pay to Employees to Purchase Their Own Coverage
- High Deductible – HSA not funded but available
- Vision
- Employee Assistance Program (EAP)
- Other

Provide Additional Information for all Health Plan Options Selected as Other above.

Number of Insurance Carriers and Benefit Providers contracted with the District/Charter to provide Health Insurance/Benefits (Based on the plan option(s) selected above)

Did your District/Charter provide the exact same health benefit options for ALL eligible staff (certificated and non certificated/classified working 20 or more hours each week) for the 2021-2022 school year?

(Circle One) Yes No Unsure

Section 3: 2021-2022 Funding Received

*FUNDING RECEIVED/ALLOCATED FOR **2021-2022** School Year*

State Funds - Health Insurance Allocation at \$13,316 per Support Unit

Local Funds - Allocated for Health Insurance / Health Benefits

Federal Funds - Allocated for Health Insurance / Health Benefits

Any Other Funds Received/Allocated for Health Insurance / Health Benefits

TOTAL Funding Received/Allocated:

Section 4: 2021-2022 Health Benefit Expenditures

TOTAL Funding Received/Allocated:

HEALTH PACKAGE (ANNUAL AMOUNTS) EXPENDITURES FOR 2021-2022 School Year

Amount Expended for Medical Related Options

District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total
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District/Charter % Paid		Employee Responsible Portion % Paid	
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Amount Expended for Dental Related Options

District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total
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District/Charter % Paid		Employee Responsible Portion % Paid	
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Amount Expended for Vision Related Options

District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total
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District/Charter % Paid		Employee Responsible Portion % Paid	
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Amount Expended for Life Insurance Related Options

District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total
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District/Charter % Paid		Employee Responsible Portion % Paid	
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Amount Expended for Employee Assistance Programs (EAP)

District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total
District/Charter % Paid		Employee Responsible Portion % Paid	
<u>Amount Expended for Health Savings Accounts (HSA)</u>			
District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total
District/Charter % Paid		Employee Responsible Portion % Paid	
<u>Amount Expended for Fitness Memberships/Wellness Programs</u>			
District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total
District/Charter % Paid		Employee Responsible Portion % Paid	
<u>Amount Expended for Management/Overhead (LEA Level)</u>			
District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total
District/Charter % Paid		Employee Responsible Portion % Paid	
<u>Amount Expended for Management/Overhead (Contract/Carrier(s) Level)</u>			
District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total
District/Charter % Paid		Employee Responsible Portion % Paid	
<u>Amount Expended as a Direct Payment to the Employee to Cover own Health Expenses</u>			
District/Charter Portion	% Column Total	Employee Responsible Portion	% Column Total

District/Charter % Paid

Employee Responsible Portion % Paid

Amount Expended for OTHER Employee Benefits

**District/Charter
Portion**

% Column Total

**Employee
Responsible Portion**

% Column Total

District/Charter % Paid

Employee Responsible Portion % Paid

Provide Additional Information on Health Insurance/Benefits Expenditures that was Reported as Other

TOTAL Amount Expended for Health Packages

**District/Charter
Portion**

% Column Total

**Employee
Responsible Portion**

% Column Total

District/Charter % Paid

Employee Responsible Portion % Paid

DIFFERENCE - Revenue to Expenditures

Section 5: 2021-2022 Other Expenditures

DIFFERENCE - Revenue to Expenditures as Calculated on the Prior Page

*HEALTH BENEFIT MONEYS EXPENDED FOR OTHER PURPOSES FOR THE **2021-2022** School Year*

Personnel Costs (salaries, bonuses, etc.)

(IFARMS Object code 100)

Operating Costs (classroom supplies, utility costs, copier costs, maintenance, etc.)

(IFARMS Sub-object code 300/400)

Capital Outlay Purchases (equipment, vehicles, technology, playgrounds, etc.)

(IFARMS Object code 500)

Other

Provide Additional Information on Appropriated Health Insurance/Benefits Moneys NOT Expended for Health Insurance/Benefits Services and was Reported as Other above.

Total Non-Health Package Estimates

Not Accounted For Difference (This should be zero)

Provide Any Additional Comments to Understand the Responses on this Survey for Your District/Charter.

Section 6: 2022-2023 Demographics

*DEMOGRAPHIC/BACKGROUND INFORMATION For the **2022-2023** School Year*

Estimated Best-28 Week Support Units For the 2022-2023 School Year

Estimated General Fund FTE Staff Allowance For the 2022-2023 School Year

Health Insurance/Benefits Options Offered to Employees For the 2022-2023 School Year - Choose ALL that apply (Check All That Apply)

- Health Insurance (less than \$1,000 ind. deductible)
- Catastrophic Health Care Coverage
- High Deductible with funded HSA
- Dental
- Life Insurance
- Fitness Memberships/Wellness Programs
- Health Insurance (greater than \$1,000 ind. deductible)
- Direct Pay to Employees to Purchase Their Own Coverage
- High Deductible – HSA not funded but available
- Vision
- Employee Assistance Program (EAP)
- Other

Provide Additional Information for all Health Plan Options/Plan Changes/RFP/Etc Selected as Other above.

**Is your District/Charter Joining the State Health Insurance Plan for For the 2022-2023 School Year?
(Circle One) Yes No Unsure**

Has your District/Charter made a decision to join the State Health Insurance Plan at some point in the future?
Planning to Join

Number of Insurance Carriers and Benefit Providers contracted with the District/Charter to provide Health Insurance/Benefits (Based on the plan option(s) selected above)

**Did your District/Charter issue an RFP/RFI for health insurance/benefits for the 2022-2023 School Year?
(Circle One) Yes No Unsure**

**Did your District/Charter renegotiate with any of the carriers for better rates/options for the 2022-2023 School Year?
(Circle One) Yes No Unsure**

**Is your District/Charter planning to issue an RFP or renegotiate with current carriers in the next 1-2 years?
(Circle One) Yes No Unsure**

Did your District/Charter change carriers as a result of renegotiations or from an RFP for the 2022-2023 School Year?

(Circle One) Yes No Unsure

Will your District/Charter provide the exact same health benefit options for ALL eligible staff (certificated and non certificated/classified working 20 or more hours each week) for the 2022-2023 School year?

(Circle One) Yes No Unsure

Please Provide Additional Information for all Health Plan Options/Plan Changes/RFP/etc. to help explain your answers to the questions above.

Section 7: 2022-2023 Estimated Funding

*FUNDING ESTIMATED/ALLOCATED FOR **2022-2023** School Year*

State Funds - Health Insurance Estimated Distribution at \$19,698 per Support Unit

Local Funds - Allocated for Health Insurance / Health Benefits

Federal Funds - Allocated for Health Insurance / Health Benefits

Any Other Funds Anticipated/Allocated for Health Insurance / Health Benefits (Provide a Description Below)

TOTAL Funding Estimated/Allocated:

Section 8: 2022-2023 Estimated Health Benefit Expenditures

TOTAL Funding Estimated/Allocated:

*HEALTH PACKAGE (ANNUAL AMOUNTS) As Estimated/Allocated for the **2022-2023** School Year*

Amount Estimated for Medical Related Options

District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
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District/Charter % Paid		Employee Responsible Portion % Paid	
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Amount Estimated for Dental Related Options

District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
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District/Charter % Paid		Employee Responsible Portion % Paid	
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Amount Estimated for Vision Related Options

District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
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District/Charter % Paid		Employee Responsible Portion % Paid	
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Amount Estimated for Life Insurance Related Options

District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
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District/Charter % Paid		Employee Responsible Portion % Paid	
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Amount Estimated for Employee Assistance Programs (EAP)

District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
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District/Charter % Paid	Employee Responsible Portion % Paid
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Amount Estimated for Health Savings Accounts (HSA)

District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
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District/Charter % Paid	Employee Responsible Portion % Paid
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Amount Estimated for Fitness Memberships/Wellness Programs

District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
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District/Charter % Paid	Employee Responsible Portion % Paid
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Amount Estimated for Management/Overhead (LEA Level)

District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
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District/Charter % Paid	Employee Responsible Portion % Paid
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Amount Estimated for Management/Overhead (Contract/Carrier(s) Level)

District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
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District/Charter % Paid	Employee Responsible Portion % Paid
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Amount Estimated as a Direct Payment to the Employee to Cover own Health Expenses

District/Charter	% Total Estimated	Employee	% Total Estimated
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Portion		Responsible Portion	
District/Charter % Paid		Employee Responsible Portion % Paid	
<u>Amount Estimated for OTHER Employee Benefits</u>			
District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
District/Charter % Paid		Employee Responsible Portion % Paid	
Provide Additional Information on Anticipated Health Insurance/Benefits Expenditures That was Reported as Other			
<u>TOTAL Amount Estimated for Health Packages</u>			
District/Charter Portion	% Total Estimated	Employee Responsible Portion	% Total Estimated
District/Charter % Paid		Employee Responsible Portion % Paid	
DIFFERENCE - Revenue to Estimates			

Section 9: 2022-2023 Estimated Other Expenditures

DIFFERENCE - Revenue to Estimates as Calculated on the Prior Page

*Health Benefit Moneys Redirected for Other Purposes for the **2022-2023** School Year*

Personnel Costs (salaries, bonuses, etc.) (IFARMS Object code 100)

Operating Costs (classroom supplies, utility costs, copier costs, maintenance, etc.) (IFARMS Sub-object code 300/400)

Capital Outlay Purchases (equipment, vehicles, technology, playgrounds, etc.) (IFARMS Object code 500)

Other

Provide Additional Information on Anticipated Health Insurance/Benefits Moneys NOT Anticipated for Health Insurance/Benefits Services

Total Non-Health Package Estimates

Not Accounted For Difference (This should be zero)

Provide Any Additional Comments to Understand the Responses on this Survey for Your District/Charter.

School Health Data Collection Form - FAQs

Provided are a few questions/answers to anticipated questions on the survey

Question: What if I don't know the plan options my district/charter offers for health insurance/health benefit purposes (related to Line 7)

Answer: Provide a sentence or two describing options you are aware of in Line 34 at the bottom of the survey.

Question: What if I don't know how many contracts my district/charter has for health insurance/health benefit purposes (related to Line 8)?

Answer: Provide the number for what you know and leave a comment at the bottom.

Question: What if my district/charter doesn't track health insurance/health benefit funding (related to Lines 10-33)?

Answer: Provide a response in most appropriate category, which might be "other" and explain below.

Question: Why is the survey being conducted, I thought these moneys were "discretionary?"

Answer: Prior to 2018, these funds were true discretionary funds. Starting in the 2018-2019 school year, the appropriation bill was changed to track these health insurance/health benefit funds separate from Discretionary funds. The appropriation bill states that these funds are to be used "to offset the costs of health, vision, and dental benefits or insurance offered to school employees." The bill goes on to say that "If the distribution provided for health, vision, and dental benefits or insurance is in excess of the individual school district or charter school actual costs, the excess funds may then be used at school district or charter school discretion."

Question: I know how much was spent for the various health Insurance/Benefits offered by the district/charter, but the amounts used for other purposes is not tracked, how do I answer? (related to Lines 28-31)

Answer: Select the Other option with the remaining amount and provide a written response to why its not tracked in Line 37. otherwise provide a response showing where your district/charter spends your funding that is allocated for health insurance purposes.

Question: What if the district/charter school has a combined health package and the amounts for medical/dental/vision are not separated out? (Lines 15-25)

Answer: Provide either an estimated allocation that shows an educated split or provide the data in the dominant row and note this response below. You may need to contact your carrier(s) for more information.

Question: Can I just write a big description at the bottom on what we do?

Answer: No. The survey is being recorded and analyzed by one person (primarily) and given the deadline of 12/1/22, it does not leave much time to analyze all text responses.

Question: Can I adjust the formulas in the survey or modify the survey in another way?

Answer: No. the survey is designed to capture and analyze comparable data. The survey respondent shall complete the relevant cells highlighted a "gold" color.

Question: Where did the populated amounts come from? (Related to Lines 2, 5, 6, and 10)

Answer: The State Department of Education provided LSO with data on Best 28 weeks Support Units, Staff Allowances (as of the last Friday in September 2021), number of filled positions, numbers and names of school districts and charter schools, and allocations for health insurance/health benefit funding for the 2021-2022 school year.

Question: Do I count the employee costs for any of the health insurance/benefit programs as "Revenue"?

Answer: No. Revenue is funding received for the cost of the program. This can include funding from government entities (state, federal, locals) or non-government entities such as private grants from foundations or private donors. Funding that the employee is responsible for, whether it is withheld directly in a paycheck or submitted by the employee, is not to be counted as revenue. You will be able to count this portion in the survey section that specifically asks for employee costs (if known). Revenue can be thought of funding that is received and used to cover the employer portion of the programs.
