**Milliman OPEB Actuarial Valuation** 



# Los Angeles County Other Postemployment Benefits Program

### **Actuarial Valuation of Other Postemployment Benefits**

July 1, 2022

Prepared by:

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July 14, 2023

Board of Retirement Los Angeles County Employees Retirement Association 300 North Lake Avenue, Suite 820 Pasadena, CA 91101

Re: July 1, 2022 Other Postemployment Benefits (OPEB) Actuarial Valuation

Dear Trustees of the Board:

As requested, we have prepared an actuarial valuation of the retiree medical, dental/vision, and death benefits covering the retired Los Angeles County (County) workers who also participate in the Los Angeles County Employees Retirement Association (LACERA) retirement benefits plan. These health-related benefits are collectively referred to in this report as the Los Angeles County (County) Other Postemployment Benefits (OPEB) Program, or the "OPEB program". The major findings of the valuation are contained in this report. This report reflects the benefit provisions in effect as of July 1, 2022, and the retiree health plan premium rates in effect as of July 1, 2022 and July 1, 2023 received from Segal (LACERA's Health Care Benefits Consultant).

Milliman has developed certain models to estimate the values included in this report. The intent of the models was to estimate the assumed investment earnings, analysis of OPEB demographic assumptions, retiree health claim costs, and annual trends for retiree health benefits. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP). In addition, the valuation results were developed using models intended for valuations that use standard actuarial techniques.

The models rely on data and information as input to the models. We have relied upon certain data and information listed below for this purpose and accepted it without audit. To the extent that the data and information provided is not accurate, or is not complete, the values provided in this report may likewise be inaccurate or incomplete.

In preparing this report, we relied, without audit, on information (some oral and some in writing) supplied by the County, LACERA, the Los Angeles County Superior Court (Superior Court), and Segal. This information includes, but is not limited to, benefit descriptions, membership data, and financial information. We found this information to be reasonably consistent and comparable with data used for other purposes. In some cases, where the census data was incomplete, we made assumptions as noted in Table C-10 of Appendix C. The valuation results depend on the integrity of this information. If any of this information is inaccurate or incomplete, our results may be different, and our calculations may need to be revised.

In developing these recommendations, we have reflected an estimate of fees associated with the Affordable Care Act (ACA), which was signed into law in March 2010 and subsequent regulations and acts. The OPEB assumptions will reflect changes in future valuations as regulations are released.

This work product was prepared solely for LACERA for the purposes described herein and may not be appropriate to use for other purposes. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. Milliman recommends that third parties be aided by their own actuary or other qualified professional when reviewing the Milliman work product.



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All costs, liabilities, rates of interest, health cost trend rates, and other factors under the OPEB program have been determined on the basis of actuarial assumptions and methods which are individually reasonable (taking into account the experience of the OPEB program and reasonable expectations); and which, in combination, offer a reasonable estimate of anticipated experience affecting the OPEB program. Further, in our opinion, the actuarial assumptions in the aggregate are reasonable and are related to the experience of the OPEB program and to reasonable expectations and represent a reasonable estimate of anticipated experience under the OPEB program.

We further certify that the assumptions and methods developed in this report satisfy Actuarial Standards Board (ASB) Standards of Practice, in particular, No. 6 (Measuring Retiree Group Benefit Obligations). The retirement benefit related to demographic and economic assumptions used in this report are based on those developed as a result of the 2022 Retirement Investigation of Experience study, dated January 6, 2023, and approved by LACERA's Board of Investments. The OPEB demographic and economic assumptions are based on the results of our 2020 OPEB Investigation of Experience, dated July 8, 2021. The assumptions used in the OPEB Investigation of Experience were identified, evaluated, and agreed upon collaboratively by the actuaries and consultants representing the OPEB program stakeholders at the time including: Milliman, LACERA's actuary; Cavanaugh Macdonald, LACERA's reviewing actuary; Segal, LACERA's Health Care Benefits Consultant; Cheiron, Los Angeles County's actuary; and Rael & Letson, actuary for SEIU Local 721. Types of OPEB specific assumptions include initial enrollment, healthcare plan and tier selection, spouse age difference, and re-enrollment assumptions. These OPEB assumptions are combined for all of LACERA's agents. The investment rate of return assumptions differs by agent. The investment earnings assumption for the agents that are prefunding through LACERA's OPEB Trust is the expected return for the OPEB Trust. The investment earnings assumption for the agents that are not prefunding through LACERA's OPEB Trust have an investment earnings assumption of the County's general funds' expected return. The 2020 OPEB Investigation of Experience was reviewed and approved during LACERA's March 3, 2021 Board of Retirement Meeting.

OPEB specific assumptions that have been updated since the 2020 OPEB Investigation of Experience study include health cost trend rates updated with information from the July 1, 2023 renewals. These assumptions have been identified, evaluated, and agreed upon collaboratively by the actuaries and consultants currently representing the OPEB program stakeholders at the time including: Milliman, LACERA's actuary; Segal, LACERA's Health Care Benefits Consultant; Cheiron, Los Angeles County's actuary; and Rael & Letson, actuary for SEIU Local 721. LACERA's Board of Retirement has the final decision regarding the appropriateness of the assumptions. The assumptions and methods are summarized in Appendix A.

Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: OPEB program experience differing from that anticipated by the economic or demographic assumptions; changes in economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for these measurements (such as the end of an amortization period); and changes in OPEB program provisions or applicable law. Due to the limited scope of our assignment, we did not perform an analysis of the potential range of future measurements.

Given the substantial uncertainty regarding the impact of COVID-19 on plan costs, including whether the pandemic will increase or decrease costs during the term of our projections, we have chosen not to make an adjustment in the expected plan costs aside from what was included in the Segal July 1, 2022 and July 1, 2023 renewals. It is possible that the COVID-19 pandemic could have a material impact on the projected costs.



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This July 1, 2022 OPEB valuation is for funding purposes. The data, assumptions and methods, OPEB program provisions as described in Appendix B of this report, and the funding goals serve as a basis for the separate GASB 75 disclosure report. Actuarial computations under Government Accounting Standards Board (GASB) Statement Numbers 74 and 75 are for purposes of fulfilling financial accounting requirements for LACERA, Los Angeles County, Superior Court, and SCAQMD (the agents) respectively. The GASB 75 disclosure report needs to meet the requirements of these standards which include but are not limited to a different discount rate and actuarial cost methodology. A discussion of GASB OPEB Statement 75 applicable to OPEB reporting is in Section 8. Determinations for purposes other than funding purposes may be significantly different from the results contained in this report. Accordingly, additional determinations may be needed for other purposes.

Milliman's work is prepared solely for the internal business use of LACERA. To the extent that Milliman's work is not subject to disclosure under applicable public records laws, Milliman's work may not be provided to third parties without Milliman's prior written consent. Milliman does not intend to benefit or create a legal duty to any third-party recipient of its work product.

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- (b) LACERA may provide a copy of Milliman's work, in its entirety, to other governmental entities, as required by law.

No third-party recipient of Milliman's work product should rely upon Milliman's work product. Any thirdparty recipient of Milliman's work product, including Los Angeles County, Superior Court, or the Outside Districts, who desires professional guidance should not rely upon Milliman's work product but should engage qualified professionals for advice appropriate to their own specific needs.

The consultants who worked on this assignment are employee benefit actuaries. Milliman's advice is not intended to be a substitute for qualified legal or accounting counsel.

On the basis of the foregoing, we hereby certify that, to the best of our knowledge and belief, this report is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices. We are members of the American Academy of Actuaries and meet the Qualification Standards to render the actuarial opinion contained herein.

We would like to express our appreciation to LACERA staff members, Los Angeles County, SEIU Local 721, Segal, Rael & Letson, and Cheiron who gave substantial assistance on which this report is based.



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We respectfully submit the following report and we look forward to discussing it with you.

Sincerely,

Ro hung Schridd

Robert L. Schmidt, FSA, EA, MAAA Principal and Consulting Actuary

RLS/JOJ/bh

Janet Gennings

Janet O. Jennings, ASA, MAAA Consulting Actuary

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### Section 1: Executive Summary

### **2022 Valuation Results**

Exhibit 1	Jul	y 1, 2022	Jul	y 1, 2021
Actuarial Accrued Liability (\$ billions)	\$	23.10	\$	21.16
Less Assets		2.39		2.31
Unfunded Actuarial Accrued Liability	\$	20.71	\$	18.85
Normal Cost Rate		7.26%		6.78%
ADC as a Percentage of Payroll		18.27%		16.76%

### Overview

We are pleased to present the results of the July 1, 2022 annual actuarial valuation. Several key points from Exhibit 1 are summarized as follows:

- The Unfunded Actuarial Accrued Liability (UAAL) increased due to a combination of several factors, some of which were offsetting. These included increases due to the passage of time since our July 1, 2021 valuation, retirement demographic assumption losses, claim cost experience gains, trend assumption losses, other experience gains, and asset losses measured as of July 1, 2022.
- The Normal Cost and Actuarially Determined Contribution (ADC) increased as dollar amounts due to the factors mentioned above. These amounts also increased as a percentage of payroll because Normal Cost and ADC dollar amounts increased and payroll decreased.

### Analysis of Change

Exhibit 2 illustrates the sources of change between the July 1, 2021 and July 1, 2022 valuations. The dollar figures are expressed in billions of dollars.

**Section A:** The expected one-year change represents expected changes in the UAAL and Normal Cost Rate (NCR) due to interest and benefit accruals, net of employer contributions in excess of benefits paid and expected investment return. The cost percentages are based on the assumed July 1, 2021 valuation payroll of \$8,981.7 million, increased by 3.25% per year (the payroll increase assumed at the time of the July 1, 2021 valuation) for one year to \$9,273.6 million (projected as of July 1, 2022).

**Section B:** The retirement experience study changes loss is a result of the updated retirement related assumptions from the 2022 Retirement Investigation of Experience study. The claim cost experience gain includes the impact of updated aging and morbidity factors. The trend assumption loss includes the impact of the July 1, 2023 premiums and the trend assumption changes which include inflation related adjustments. The July 1, 2023 premiums are based on premiums approved by the Board of Retirement on March 1, 2023 and received from Segal as of March 1, 2023. The "Other Experience" gain includes the impact of all other demographic and economic experience. Note there was a loss in the NC and ADC percentage of payroll because the payroll was less than expected and the Actuarial Accrued Liability (AAL) gain is more influenced by inactive members. There is an asset loss due to the actual investment returns being lower than assumed. The cost percentages in this section are based on the July 1, 2022 valuation payroll of \$8,939.4 million.

### Exhibit 2: Analysis of Change

(All Dollar Amounts in Billions)

Sources of Change	A	ctuarial ccrued iability	(A	ssets)	Ac Ac	funded ctuarial ccrued iability	Normal Cost Rate	ADC Percentage
A. July 1, 2021 Valuation	\$	21.16	\$	(2.31)	\$	18.85	6.78%	16.76%
Expected One-year Change		1.14		(0.52)		0.62	0.00%	0.00%
B. July 1, 2022 Valuation Expected	\$	22.30	\$	(2.83)	\$	19.47	6.78%	16.76%
Retirement Experience Study Changes		0.57		-		0.57	0.29%	0.60%
Claim Cost Experience Trend Assumption (Gain)/Loss <sup>(1)</sup>		(0.52) 0.81		-		(0.52) 0.81	(0.15%) 0.24%	(0.43%) 0.67%
Other Experience (Gain)/Loss		(0.06)		-		(0.06)	0.24%	0.44%
Asset (Gain)/Loss		-		0.44		0.44	0.00%	0.23%
C. July 1, 2022 Valuation	\$	23.10	\$	(2.39)	\$	20.71	7.26%	18.27%

<sup>1</sup> Includes impact of July 1, 2023 renewals

### **Summary Valuation Results**

Exhibit 3 provides a summary of the valuation results for the County, Superior Court, LACERA and the Outside Districts. The following key results are included in the table:

- The total Present Value of Future Benefits (PVB). The PVB is based on a projection of all benefits that are expected to be received in the future for all current members (active, vested, and retired) discounted to the valuation date. The projected benefit payments are discounted using the investment earnings assumption. For the agents that are prefunding into the OPEB Trust (County, Superior Court and LACERA) the investment earnings assumption is 6.00%. This is OPEB Trust's expected return. The Outside Districts are not prefunding into the OPEB Trust. Their investment earnings assumption is 2.30% based on the County's general fund expected return.
- The Present Value of Future Normal Costs (PVFNC). This is the value of the liability attributable to
  periods after the valuation date, according to the actuarial cost method which is Entry Age Normal
  (EAN). The PVFNC is the difference between the PVB and the Actuarial Accrued Liability.
- The Actuarial Accrued Liability (AAL). This amount represents the value of the liability that is accrued for periods prior to the valuation date, according to the EAN actuarial cost method.
- Assets. Since the OPEB program is partially funded, this is the asset balance as of July 1, 2022.
- The Actuarially Determined Contribution (ADC). At the direction of the plan sponsors, the ADC is based on the County Normal Cost Rate plus an open 30-year level percentage of payroll amortization of the Unfunded Actuarial Accrued Liability (UAAL). It should be noted that the amortization does not cover interest on the UAAL; in other words, the UAAL will be expected to increase in the following year if all assumptions are met.

#### Exhibit 3: OPEB Benefit Liabilities and Costs<sup>1</sup> Summary of July 1, 2022 Valuation Results (All Dollar Amounts in Millions)

	 Superior County Court			L	ACERA	Outside Districts		Total
<ol> <li>Present Value of Future Benefits</li> <li>Present Value of Future Normal Costs</li> </ol>	\$ 29,579.2 7,580.1	\$	1,271.1 257.9	\$	103.6 28.7	\$ 12.3 1.7	\$	30,966.2 7,868.4
3. Actuarial Accrued Liability (1-2)	\$ 21,999.1	\$	1,013.2	\$	74.9	\$ 10.6	\$	23,097.8
4. Assets	 2,327.4		55.9		10.8	-		2,394.1
5. Unfunded Actuarial Accrued Liability (3-4)	\$ 19,671.7	\$	957.3	\$	64.1	\$ 10.6	\$	20,703.7
6. ADC <sup>2</sup>	\$ 1,559.6	\$	67.9	\$	5.4	\$ 0.5	\$	1,633.4
<ol> <li>ADC expressed as a percentage of payroll Normal Cost UAAL payment Total</li> </ol>	 7.28% 10.91% 18.19%		6.92% <u>14.06%</u> 20.98%		5.54% <u>6.93%</u> 12.47%	14.29% 57.14% 71.43%		7.26% <u>11.01%</u> 18.27%

<sup>1</sup> Net of Retiree Paid Premiums. May not match other Tables due to rounding.

<sup>2</sup> Normal cost and 30 year level percentage of payroll amortization of the Unfunded Actuarial Accrued Liability (UAAL).

### **Comparison of Results to Prior Valuation**

Exhibit 4 provides a summary of key valuation results as of July 1, 2022 and July 1, 2021. The July 1, 2022 and July 1, 2021 results are based on an assumed 6.00% investment rate of return (discount rate) for the agents that are prefunding through the LACERA OPEB Trust (County, Superior Court, and LACERA) and an assumed 2.30% investment rate of return for the Outside Districts who are not prefunding through the LACERA OPEB Trust. The investment rate of return reflects the investment policy assumptions described in our 2020 OPEB Investigation of Experience study.

The following key results are included in Exhibit 4:

- A summary of total membership by type of member as of the valuation date.
- Total payroll as of the valuation date. The one-year decrease of 0.5% is lower than the anticipated one-year increase of 3.25%.
- The expected paid benefits for the first year following the valuation date. The one-year increase of 2.5% is less than the previously expected one-year increase of 4.0% due largely to lower than anticipated health care premiums. This is based on Table 6 in Section 7 of the July 1, 2021 valuation, which expected the 2021-2022 payment level of \$746.61 million to increase to \$776.50 million in 2022-2023 (as compared to the new expected 2022-2023 amount of \$765.0 million).
- The total Present Value of Future Benefits (PVB).
- The Actuarial Accrued Liability (AAL). The changes in AAL varied by member status and benefit type. The 9.2% overall increase is a result of the factors outlined in Exhibit 2.
- The Actuarially Determined Contribution (ADC). The ADC increased by 8.5% from \$1,505.1 to \$1,633.4 million. Since the ADC increased and payroll decreased, the ratio of ADC to payroll increased from 16.76% to 18.27%. As seen in the Analysis of Change in Exhibit 2, this percent-of-payroll increase is primarily due to the higher-than-expected health care trend and retirement experience study changes.
- Over fiscal year 2021/2022 the OPEB trust assets were assumed to increase with 6% investment returns increasing from \$2.31 billion on July 1, 2021 to an expected \$2.83 billion on July 1, 2022. The trust actually experienced a 2021/2022 investment return of about negative 12%, decreasing the actual July 1, 2022 assets to \$2.39 billion. This asset reduction played a part in the 9.8% increase in the Unfunded Actuarial Accrued Liability over 2021/2022.

## Exhibit 4: July 1, 2022 Summary of Liabilities and Cost (All Dollar Amounts in Millions)

	Ju	ıly 1, 2022	Ju	ıly 1, 2021	Percentage Change
A. Total Membership					
<ol> <li>Active Members</li> <li>Vested Terminated Members</li> <li>Retirees and Survivors (Medical Coverage)</li> <li>Total</li> </ol>		96,490 9,222 54,795 160,507		99,044 8,752 53,529 161,325	(2.6%) 5.4% 2.4% (0.5%)
B. Valuation Payroll	\$	8,939.4	\$	8,981.7	(0.5%)
C. Projected Paid First-Year Benefits	\$	765.0	\$	746.6	2.5%
D. Present Value of Future Benefits (PVB) <sup>1</sup>	\$	30,966.2	\$	28,804.8	7.5%
E. Actuarial Accrued Liability by Member Group <sup>1</sup>					
<ol> <li>LA County Members</li> <li>Superior Court Members</li> <li>LACERA Members</li> <li>Outside District Members</li> <li>Total</li> </ol>	\$	21,999.1 1,013.2 74.9 10.6 23,097.8	\$	20,153.0 925.4 66.0 13.0 21,157.4	9.2% 9.5% 13.5% (18.5%) 9.2%
F. Actuarial Accrued Liability by Member Status <sup>1</sup>					
<ol> <li>Active Members</li> <li>Vested Terminated Members</li> <li>Retired Members</li> <li>Total</li> </ol>	\$	11,555.1 548.7 10,994.0 23,097.8	\$	10,406.0 511.1 10,240.3 21,157.4	11.0% 7.4% 7.4% 9.2%
G. Actuarial Accrued Liability by Benefit Type <sup>1</sup>					
<ol> <li>Retiree Medical</li> <li>Retiree Dental/Vision</li> <li>Medicare Part B</li> <li>Retiree Death Benefit</li> <li>Total</li> </ol>	\$	17,643.2 1,121.7 4,152.7 180.2 23,097.8	\$	16,112.4 1,070.2 3,799.3 175.5 21,157.4	9.5% 4.8% 9.3% 2.7% 9.2%
H. Assets	\$	2,394.1	\$	2,306.8	3.8%
I. Unfunded Actuarial Accrued Liability	\$	20,703.7	\$	18,850.6	9.8%
<ul> <li>J. Actuarially Determined Contribution (ADC)</li> <li>1. Normal Cost</li> <li>2. UAAL payment<sup>2</sup></li> <li>3. Total</li> </ul>	\$	649.0 <u>984.4</u> 1,633.4	\$	608.7 <u>896.4</u> 1,505.1	6.6% 9.8% 8.5%
<ul><li>K. ADC expressed as a percentage of payroll</li><li>1. Normal Cost</li><li>2. UAAL payment</li><li>3. Total</li></ul>		7.26% <u>11.01%</u> 18.27%		6.78% 9.98% 16.76%	7.1% 10.3% 9.0%

<sup>1</sup> Net of Retiree Paid Premiums

<sup>2</sup> 30 year level percentage of payroll amortization of the Unfunded Actuarial Accrued Liability (UAAL)

#### **Funding Progress**

The commitment to prefunding is based on the June 22, 2015 County budget policy, the November 20, 2015 LACERA funding policy, and the Superior Court funding policy communicated to LACERA on November 14, 2022. The County's policy is to increase the contributions by \$56 million each year until the ADC is reached and then the ADC would be contributed. The funded ratio is expected to increase gradually over time. However, the UAAL is expected to continue to increase due to the open 30-year amortization and not paying down the principal. The ADC is also expected to increase over time. The increases in the ADC are projected to be lower than what they would have been absent the ramp up of the OPEB trust contributions.

The funded status is not appropriate for assessing the sufficiency of plan assets to cover the potential costs of settling the liabilities. It is appropriate for calculating the amount of future ADCs.

### Section 2: Actuarial Valuation as of July 1, 2022

### A. Valuation Methodology

This is a valuation of the retiree medical, dental/vision, and death benefits covering the retired Los Angeles County, Superior Court, LACERA, and Outside District workers who also participate in the Los Angeles County Employees Retirement Association (LACERA) retirement benefits plan. This valuation is performed annually.

In analyzing the GASB liabilities and ADC, we were asked to divide the results into the following agents and agent groupings:

- LA County
- Superior Court
- LACERA
- LA County, Superior Court, and LACERA
- LA County, Superior Court, LACERA, and Outside Districts

The tables in this report present the unfunded liabilities, ADC, and projected benefit payments under the Entry Age Normal (EAN) cost method separately for each of the agents and agent groupings identified above. This method is described further in Appendix A. Due to the low number of members who have service with more than one agent, at the direction of the plan sponsors, the results do not reflect bifurcation of service between agents.

The tables are as follows:

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

The actuarial assumptions and methods used in the valuation are summarized in Appendix A. The retirement benefit related demographic and economic assumptions used in this report are based on those developed for the June 30, 2022 valuation of the LACERA retirement benefit plan. The OPEB demographic and economic assumptions and methods are based on the results of our 2020 OPEB Investigation of Experience, dated July 8, 2021. These assumptions were identified, evaluated, and agreed upon collaboratively by the actuaries and consultants at the time representing the OPEB program stakeholders including: Milliman, LACERA's actuary; Segal, LACERA's Health Care Benefits Consultant; Cavanaugh Macdonald, LACERA's reviewing actuary; Cheiron, Los Angeles County's actuary; and Rael & Letson, actuary for SEIU Local 721.

The health-related assumptions used in the report were also agreed upon collaboratively by the following actuaries and consultants: Cheiron, Milliman, Rael & Letson, and Segal, and approved by the Board of

Retirement. Thus, the assumptions were the result of a collaborative effort by these various stakeholder groups.

Comprehensive medical benefits, dental/vision benefits, and death benefits are provided to all members, who retire and satisfy the eligibility requirements outlined in Appendix B. Retired Local 1014 members are eligible for the Local 1014 Firefighters' retiree medical plan as outlined in Appendix F. Eligibility for the County OPEB program is tied to benefit eligibility under the LACERA retirement benefits plan. Thus, all former employees receiving OPEB program benefits are also members in the retirement benefits plan.

Appendix B includes a description of healthcare Tier 1 and Tier 2.

The active and vested terminated member census data for each of the OPEB program member groups is summarized by the LACERA retirement benefit plan levels in Appendix C. The retiree and dependent data for each health plan and benefit group is also summarized in Appendix C.

A glossary of terms is provided in Appendix D. Summaries of health benefits are provided in Appendices E, F, G, and H.

Appendix I provides historical statistical information on LACERA's membership, liabilities, assets, and costs. There is also a history of changes.

### **B. Liabilities and Costs**

### **Key Liability Descriptions**

A discussion of GASB Statements No. 74 and 75 is in Section 8, Accounting and Annual Comprehensive Financial Report (ACFR) Information.

There are two measures of OPEB program liabilities, the Actuarial Present Value of Projected Total Benefits (PVB) and the Actuarial Accrued Liability (AAL).

The PVB is the present value of the future postemployment benefits payable to current active members and retirees. This value is net of future retiree contributions. The PVB is shown in Exhibit 4 above.

The AAL is the most important measure of liability because it is used to derive the Actuarially Determined Contribution (ADC) and disclosure values. The AAL is the portion of the PVB attributed to periods up to the measurement date. For this report, the AAL is determined under the Entry Age Normal actuarial cost method.

Table 1 in each agent's section below shows the membership as of July 1, 2021 and July 1, 2022. The AAL is summarized by member status and coverage (Medical, dental/vision, Medicare Part B, and Death benefit).

The AAL is shown in more detail in Table 2 of each agent's section subtotaled by benefit type and member status.

Post-employment benefits are accrued during employment. Therefore, the costs are spread over the period from the date of hire to the date of termination or retirement. For current retirees and terminated vested members, the AAL is equal to the PVB since there is no future service to be rendered. For active members, the AAL is based on the portion of the PVB that is allocated to prior years based on the actuarial cost method. For the EAN method, the actuarial present value of the projected benefits of each individual is allocated as a level percentage of the individual's projected compensation between entry age and assumed exit.

The portion of the PVB that is anticipated to be earned in the year following the valuation date is the Normal Cost (NC). The NC is shown in Table 2 of each agent's section.

### **Actuarially Determined Contribution**

The ADC is made up of two components: Normal Cost (NC) and amortization of the Unfunded Actuarial Accrued Liability (UAAL). The UAAL is the AAL net of assets. For purposes of this valuation, the UAAL is amortized on an open basis over 30 years as a level percentage of payroll. The amortization under this methodology is not sufficient to cover the interest on the UAAL which implies the amount of the UAAL is expected to increase over time. Even if the full ADC is contributed, it would not be sufficient to cover interest and the expected increase in the UAAL. Note this term, the ADC, is a calculated amount, and may or may not reflect the actual employer contributions towards funding the OPEB program benefits.

Table 3 of each agent's section details the ADC results as of July 1, 2022, the beginning of the 2022/2023 fiscal year.

### **Fiduciary Net Position**

Table 4 in each agent's section provides the statement of changes in Fiduciary Net Position (FNP) or assets. OPEB Trust and Agency Fund activity is included.

### Analysis of Change

Table 5 in each agent's section illustrates the source of change between the July 1, 2021 and the July 1, 2022 valuation.

#### Estimated Pay-As-You-Go Costs

Table 6 in each agent's section projects the estimated annual OPEB benefit pay-as-you-go costs, net of expected retiree paid premiums for the next ten years. The total projected pay-as-you-go costs are shown separately for medical, dental/vision, Medicare Part B, and retiree death benefits. The medical and dental/vision retiree contributions are also summarized. Finally, the net County paid benefits are shown. These are the total projected pay-as-you-go costs minus the retiree contributions.

#### **Background on Accounting Requirements**

GASB issued Statement No. 74 in June of 2015. This statement replaced GASB Statement No. 43. GASB also issued Statement No. 75 in June of 2015. This statement replaced GASB Statement No. 45. LACERA was required to adopt Statement No. 74 for the fiscal year ended June 30, 2017. For the County, LACERA, Superior Court, and Outside Districts, Statement No. 75 was required to be adopted for the fiscal year ended June 30, 2018. The requirements under GASB 74 and 75 necessitate separate disclosure reports from this funding valuation. Parts of this valuation, including the ADC, census, assumptions, and methods are utilized in the separate GASB 75 disclosure report.

The information in this report was prepared for the purpose of presenting OPEB funding and ACFR information. The actual funding of the OPEB program benefits may differ from the amounts used for accounting disclosure purposes. The investment return for the County, Superior Court and LACERA who are prefunding through the OPEB Trust, is the OPEB Trust expected return of 6.00%. The expected return for the Outside Districts is the investment earnings assumption of the County's general funds expected return of 2.30%.

### Section 3: County Liabilities and Costs

The following tables show key results of the July 1, 2022 OPEB funding valuation for the County.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

### Los Angeles County Other Post Employment Benefits Program

# Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: County (All Dollar Amounts in Millions)

(					Percentage
1. Membership	Ju	ly 1, 2022	Ju	ıly 1, 2021	Change
Active Members		91,900		94,435	(2.7%)
Vested Terminated Members		8,576		8,107	5.8%
Retirees (Death Benefit)		58,011		56,268	3.1%
Total		158,487		158,810	(0.2%)
Retirees and Survivors (Medical Coverage)		52,007		50,814	2.3%
Retirees and Survivors (Dental/Vision Coverage)		53,659		52,211	2.8%
Retirees and Survivors (Medicare Part B Coverage)		35,980		35,131	2.4%
2. AAL Summary - Total Paid Benefits by Member Status					
Retirees and Survivors	\$	10,486.5	\$	9,765.2	7.4%
Vested Terminated Members		493.1		457.7	7.7%
Active Members		11,019.5		9,930.1	11.0%
Total	\$	21,999.1	\$	20,153.0	9.2%
3. AAL Summary - Total Paid Benefits by Coverage					
Medical	\$	16,829.9	\$	15,371.2	9.5%
Dental/Vision		1,064.8		1,016.2	4.8%
Medicare Part B		3,934.2		3,599.9	9.3%
Death Benefit		170.2	_	165.7	2.7%
Total	\$	21,999.1	\$	20,153.0	9.2%

# Table 2: July 1, 2022 Actuarial Accrued Liability (AAL) and Normal Cost (NC): County(All Dollar Amounts in Millions)

	Medical		Dental		Part B		Death		Total
1. AAL - Total Benefits Retirees and Survivors	\$	8,596.1	\$ 621.8	\$	1,779.0	\$	129.3	\$	11,126.2
Vested Terminated Members		576.4	33.5		117.1		5.6		732.6
Active Members		8,777.8	495.0		2,038.1		35.3		11,346.2
Total	\$	17,950.3	\$ 1,150.3	\$	3,934.2	\$	170.2	\$	23,205.0
2. AAL - Retiree Paid Premiums									
Retirees and Survivors	\$	588.9	\$ 50.8	\$	-	\$	-	\$	639.7
Vested Terminated Members		226.0	13.5		-		-		239.5
Active Members		305.5	 21.2		-		-		326.7
Total	\$	1,120.4	\$ 85.5	\$	-	\$	-	\$	1,205.9
3. AAL - Agent Paid Benefits (1) - (2)									
Retirees and Survivors	\$	8,007.2	\$ 571.0	\$	1,779.0	\$	129.3	\$	10,486.5
Vested Terminated Members		350.4	20.0		117.1		5.6		493.1
Active Members		8,472.3	 473.8		2,038.1		35.3		11,019.5
Total	\$	16,829.9	\$ 1,064.8	\$	3,934.2	\$	170.2	\$	21,999.1
4. NC									
Total Benefits	\$	598.2	\$ 30.3	\$	120.2	\$	2.1	\$	750.8
Retiree Paid Premiums		120.4	6.3		-		-		126.7
Net Agent Paid Benefits	\$	477.8	\$ 24.0	\$	120.2	\$	2.1	\$	624.1

## Table 3: 2022-2023 Actuarially Determined Contribution (ADC): County (All Dollar Amounts in Millions)

	County			
1. Unfunded Actuarial Accrued Liability (UAAL)				
Present Value of Benefits (PVB) Present Value of Future Normal Cost (PVFNC)	\$	29,579.2 7,580.1		
Actuarial Accrued Liability as of July 1, 2022 Fund Balance at July 1, 2022	\$	21,999.1 2,327.4		
Unfunded Actuarial Accrued Liability	\$	19,671.7		
2. Amortization of UAAL (Level % of Pay)				
Amortization Period (years)		30.0		
Amortization Factor		21.027		
UAAL Amortization Payment	\$	935.5		
3. 2022 - 2023 Actuarially Determined Contribution (ADC) on July 1, 2022				
Amortization of UAAL	\$	935.5		
Normal Cost		624.1		
Actuarially Determined Contribution (ADC) as of July 1, 2022	\$	1,559.6		
4. July 1, 2022 Valuation Payroll	\$	8,571.8		
5. ADC as a Percentage of Valuation Payroll		18.19%		

### **Table 4: Statement of Changes in Fiduciary Net Position: County** (All Dollar Amounts in Millions)

1. Fund Balance as of July 1, 2021	\$	2,235.8
2. Additions: Employer Contributions	\$	1,071.0
Investment and Miscellaneous Income	¥	(279.0)
Investment Expenses		(1.4)
Total Additions	\$	790.6
3. Deductions:		
Administrative Expenses <sup>(1)</sup>	\$	(0.3)
Benefit Payments <sup>(2)</sup>		(698.7)
Total Deductions	\$	(699.0)
4. Fund Balance as of June 30, 2022	\$	2,327.4

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ended 2022) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

#### Table 5: Analysis of Change: County

	Actuarial	Infunded Actuarial					
Sources of Change	Accrued Liability <sup>(1)</sup>		(Assets) <sup>(1)</sup>		Accrued .iability <sup>(1)</sup>	Normal Cost Rate <sup>(2)</sup>	ADC Percentage <sup>(2)</sup>
A. July 1, 2021 Valuation	\$ 20,153.0	\$	(2,235.8)	\$	17,917.2	6.81%	16.72%
Expected One-year Change	 1,097.4		(517.0)		580.4	0.00%	0.00%
B. July 1, 2022 Valuation Expected	\$ 21,250.4	\$	(2,752.8)	\$	18,497.6	6.81%	16.72%
Retirement Experience Study Changes	\$ 527.8	\$	-		527.8	0.29%	0.59%
Claim Cost Experience	(490.3)		-		(490.3)	(0.15%)	(0.43%)
Trend Assumption (Gain)/Loss <sup>(3)</sup>	768.4		-		768.4	0.24%	0.67%
Other Experience (Gain)/Loss	(57.2)		-		(57.2)	0.09%	0.41%
Asset (Gain)/Loss	 -		425.4		425.4	0.00%	0.23%
C. July 1, 2022 Valuation	\$ 21,999.1	\$	(2,327.4)	\$	19,671.7	7.28%	18.19%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

(3) Includes impact of July 1, 2023 renewals

## Table 6: Projected Paid Benefits by Type: County(All Dollar Amounts in Millions)

Fiscal Year Ending	Мес	dical Total	Den	tal/Vision Total		ledicare Part B	Death Benefit		F	<i>l</i> edical Retiree ntribution	Dental/Vision Retiree Contribution		-	otal Paid 3enefits
6/30/2023	\$	628.15	\$	50.88	\$	90.78	\$	8.53	\$	(44.83)	\$	(4.40)	\$	729.11
6/30/2024	Ψ	684.74	Ψ	54.18	Ψ	101.50	Ψ	8.78	Ψ	(50.30)	Ψ	(4.70)	Ψ	794.20
6/30/2025		746.57		56.98		111.84		9.04		(56.12)		(4.96)		863.35
6/30/2026		814.65		60.00		124.57		9.31		(62.48)		(5.23)		940.82
6/30/2027		879.22		62.95		138.69		9.59		(68.34)		(5.49)		1,016.62
6/30/2028		944.73		66.06		152.58		9.87		(74.24)		(5.77)		1,093.23
6/30/2029		1,003.42		69.23		165.93		10.15		(79.99)		(6.05)		1,162.69
6/30/2030		1,067.52		72.45		179.57		10.44		(86.23)		(6.34)		1,237.41
6/30/2031		1,133.33		75.65		194.19		10.74		(92.48)		(6.63)		1,314.80
6/30/2032		1,200.30		78.92		210.45		11.03		(98.63)		(6.93)		1,395.14

Projection Basis:

All assumptions are met

No future members are reflected

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### Section 4: Superior Court Liabilities and Costs

The following tables show key results of the July 1, 2022 OPEB funding valuation for Superior Court.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

# Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: Superior Court (All Dollar Amounts in Millions)

					Percentage
1. Membership	July	1, 2022	July	/ 1, 2021	Change
Active Members		4,200		4,202	(0.0%)
Vested Terminated Members		607		608	(0.2%)
Retirees (Death Benefit)		3,172		3,061	3.6%
Total		7,979		7,871	1.4%
Retirees and Survivors (Medical Coverage)		2,556		2,468	3.6%
Retirees and Survivors (Dental/Vision Coverage)		2,628		2,528	4.0%
Retirees and Survivors (Medicare Part B Coverage)		1,793		1,707	5.0%
2. AAL Summary - Total Paid Benefits by Member Status					
Retirees and Survivors	\$	463.2	\$	432.2	7.2%
Vested Terminated Members		53.3		51.0	4.5%
Active Members		496.7		442.2	12.3%
Total	\$	1,013.2	\$	925.4	9.5%
3. AAL Summary - Total Paid Benefits by Coverage					
Medical	\$	748.6	\$	681.7	9.8%
Dental/Vision		52.7		50.0	5.4%
Medicare Part B		202.7		184.8	9.7%
Death Benefit		9.2		8.9	3.4%
Total	\$	1,013.2	\$	925.4	9.5%

# Table 2: July 1, 2022 Actuarial Accrued Liability (AAL) and Normal Cost (NC): Superior Court (All Dollar Amounts in Millions)

	Ν	Medical		Dental		Part B		Death		Total	
1. AAL - Total Benefits											
Retirees and Survivors	\$	373.1	\$	29.1	\$	87.2	\$	6.8	\$	496.2	
Vested Terminated Members		56.7		3.4		12.0		0.5		72.6	
Active Members		375.4		24.8		103.5		1.9		505.6	
Total	\$	805.2	\$	57.3	\$	202.7	\$	9.2	\$	1,074.4	
2. AAL - Retiree Paid Premiums											
Retirees and Survivors	\$	30.3	\$	2.7	\$	-	\$	-	\$	33.0	
Vested Terminated Members		18.2		1.1		-		-		19.3	
Active Members		8.1		0.8		-		-		8.9	
Total	\$	56.6	\$	4.6	\$	-	\$	-	\$	61.2	
3. AAL - Agent Paid Benefits (1) - (2)											
Retirees and Survivors	\$	342.8	\$	26.4	\$	87.2	\$	6.8	\$	463.2	
Vested Terminated Members		38.5		2.3		12.0		0.5		53.3	
Active Members		367.3		24.0		103.5		1.9		496.7	
Total	\$	748.6	\$	52.7	\$	202.7	\$	9.2	\$	1,013.2	
4. NC											
Total Benefits	\$	20.3	\$	1.2	\$	4.8	\$	0.1	\$	26.4	
Retiree Paid Premiums		3.7		0.3		-		-		4.0	
Net Agent Paid Benefits	\$	16.6	\$	0.9	\$	4.8	\$	0.1	\$	22.4	

## Table 3: 2022-2023 Actuarially Determined Contribution (ADC): Superior Court (All Dollar Amounts in Millions)

	Supe	erior Court
1. Unfunded Actuarial Accrued Liability (UAAL)		
Present Value of Benefits (PVB) Present Value of Future Normal Cost (PVFNC)	\$	1,271.1 257.9
Actuarial Accrued Liability as of July 1, 2022 Fund Balance at July 1, 2022	\$	1,013.2 55.9
Unfunded Actuarial Accrued Liability	\$	957.3
2. Amortization of UAAL (Level % of Pay)		
Amortization Period (years)		30.0
Amortization Factor	<u>,</u>	21.027
UAAL Amortization Payment	\$	45.5
3. 2022 - 2023 Actuarially Determined Contribution (ADC) on July 1, 2022		
Amortization of UAAL	\$	45.5
Normal Cost		22.4
Actuarially Determined Contribution (ADC) as of July 1, 2022	\$	67.9
4. July 1, 2022 Valuation Payroll	\$	323.6
5. ADC as a Percentage of Valuation Payroll		20.98%

# Table 4: Statement of Changes in Fiduciary Net Position: Superior Court (All Dollar Amounts in Millions)

1. Fund Balance as of July 1, 2021	\$ 62.2
2. Additions: Employer Contributions Investment and Miscellaneous Income Investment Expenses	\$ 30.6 (7.2) (0.1)
Total Additions	\$ 23.3
3. Deductions:	
Administrative Expenses <sup>(1)</sup>	\$ (0.1)
Benefit Payments <sup>(2)</sup>	(29.5)
Total Deductions	\$ (29.6)
4. Fund Balance as of June 30, 2022	\$ 55.9

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ended 2022) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

#### Table 5: Analysis of Change: Superior Court

Sources of Change	A	ctuarial ccrued ability <sup>(1)</sup>	(As	ssets) <sup>(1)</sup>	Ac	funded ctuarial ccrued ability <sup>(1)</sup>	Normal Cost Rate <sup>(2)</sup>	ADC Percentage <sup>(2)</sup>
A. July 1, 2021 Valuation	\$	925.4	\$	(62.2)	\$	863.2	6.12%	18.39%
Expected One-year Change		44.6		(4.7)		39.9	(0.02%)	0.12%
B. July 1, 2022 Valuation Expected	\$	970.0	\$	(66.9)	\$	903.1	6.10%	18.51%
Retirement Experience Study Changes Claim Cost Experience Trend Assumption (Gain)/Loss <sup>(3)</sup> Other Experience (Gain)/Loss Asset (Gain)/Loss		36.5 (27.7) 35.6 (1.2)		- - - 11.0		36.5 (27.7) 35.6 (1.2) 11.0	0.40% (0.18%) 0.18% 0.42% 0.00%	0.92% (0.58%) 0.71% 1.27% 0.15%
C. July 1, 2022 Valuation	\$	1,013.2	\$	(55.9)	\$	957.3	6.92%	20.98%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

(3) Includes impact of July 1, 2023 renewals

### Table 6: Projected Paid Benefits by Type: Superior Court (All Dollar Amounts in Millions)

Fiscal Year Ending	Med	ical Total	 tal/Vision Total	Medicare Part B		Death Benefit		Medical Retiree Contribution		Dental/Vision Retiree Contribution		al Paid enefits
6/30/2023	\$	28.09	\$ 2.40	\$	4.45	\$	0.41	\$	(2.35)	\$	(0.24)	\$ 32.76
6/30/2024		30.89	2.56		4.98		0.43		(2.60)		(0.26)	36.00
6/30/2025		33.62	2.71		5.53		0.44		(2.85)		(0.27)	39.18
6/30/2026		36.71	2.88		6.23		0.46		(3.15)		(0.28)	42.85
6/30/2027		40.02	3.05		7.00		0.48		(3.39)		(0.29)	46.87
6/30/2028		43.38	3.24		7.77		0.49		(3.67)		(0.31)	50.90
6/30/2029		46.36	3.44		8.58		0.51		(3.91)		(0.32)	54.66
6/30/2030		49.50	3.63		9.37		0.53		(4.14)		(0.33)	58.56
6/30/2031		52.72	3.83		10.27		0.55		(4.41)		(0.35)	62.61
6/30/2032		55.92	4.03		11.25		0.57		(4.64)		(0.36)	66.77

Projection Basis:

All assumptions are met

No future members are reflected

### Section 5: LACERA Liabilities and Costs

The following tables show key results of the July 1, 2022 OPEB funding valuation for LACERA.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

# Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: LACERA (All Dollar Amounts in Millions)

(					Percentage
1. Membership	July 1,	2022	July 1,	2021	Change
Active Members		384		400	(4.0%)
Vested Terminated Members		38		37	2.7%
Retirees (Death Benefit)		204		190	7.4%
Total		626		627	(0.2%)
Retirees and Survivors (Medical Coverage)		177		166	6.6%
Retirees and Survivors (Dental/Vision Coverage)		177		166	6.6%
Retirees and Survivors (Medicare Part B Coverage)		107		100	7.0%
2. AAL Summary - Total Paid Benefits by Member Status					
Retirees and Survivors	\$	35.5	\$	31.6	12.3%
Vested Terminated Members		2.3		2.4	(4.2%)
Active Members		37.1		32.0	15.9%
Total	\$	74.9	\$	66.0	13.5%
3. AAL Summary - Total Paid Benefits by Coverage					
Medical	\$	56.7	\$	49.9	13.6%
Dental/Vision		3.7		3.4	8.8%
Medicare Part B		14.0		12.2	14.8%
Death Benefit		0.5		0.5	0.0%
Total	\$	74.9	\$	66.0	13.5%

# Table 2: July 1, 2022 Actuarial Accrued Liability (AAL) and Normal Cost (NC): LACERA (All Dollar Amounts in Millions)

	Medical		De	Dental		Part B		Death		Total	
1. AAL - Total Benefits											
Retirees and Survivors	\$	30.5	\$	2.1	\$	5.9	\$	0.4	\$	38.9	
Vested Terminated Members		2.7		0.2		0.5		-		3.4	
Active Members		29.2		1.8		7.6		0.1		38.7	
Total	\$	62.4	\$	4.1	\$	14.0	\$	0.5	\$	81.0	
2. AAL - Retiree Paid Premiums											
Retirees and Survivors	\$	3.2	\$	0.2	\$	-	\$	-	\$	3.4	
Vested Terminated Members		1.0		0.1		-		-		1.1	
Active Members		1.5		0.1		-		-		1.6	
Total	\$	5.7	\$	0.4	\$	-	\$	-	\$	6.1	
3. AAL - Agent Paid Benefits (1) - (2)											
Retirees and Survivors	\$	27.3	\$	1.9	\$	5.9	\$	0.4	\$	35.5	
Vested Terminated Members		1.7		0.1		0.5		-		2.3	
Active Members		27.7		1.7		7.6		0.1		37.1	
Total	\$	56.7	\$	3.7	\$	14.0	\$	0.5	\$	74.9	
4. NC											
Total Benefits	\$	2.2	\$	0.1	\$	0.5	\$	-	\$	2.8	
Retiree Paid Premiums		0.4		-		-		-		0.4	
Net Agent Paid Benefits	\$	1.8	\$	0.1	\$	0.5	\$	-	\$	2.4	

## Table 3: 2022-2023 Actuarially Determined Contribution (ADC): LACERA (All Dollar Amounts in Millions)

	LACERA			
1. Unfunded Actuarial Accrued Liability (UAAL)				
Present Value of Benefits (PVB) Present Value of Future Normal Cost (PVFNC)	\$	103.6 28.7		
Actuarial Accrued Liability as of July 1, 2022 Fund Balance at July 1, 2022	\$	74.9 10.8		
Unfunded Actuarial Accrued Liability	\$	64.1		
2. Amortization of UAAL (Level % of Pay)				
Amortization Period (years)		30.0		
Amortization Factor	\$	21.027 3.0		
UAAL Amortization Payment	Φ	5.0		
3. 2022 - 2023 Actuarially Determined Contribution (ADC) on July 1, 2022				
Amortization of UAAL	\$	3.0		
Normal Cost		2.4		
Actuarially Determined Contribution (ADC) as of July 1, 2022	\$	5.4		
4. July 1, 2022 Valuation Payroll	\$	43.3		
5. ADC as a Percentage of Valuation Payroll		12.47%		

### Table 4: Statement of Changes in Fiduciary Net Position: LACERA (All Dollar Amounts in Millions)

1. Fund Balance as of July 1, 2021	\$ 8.8
2. Additions: Employer Contributions Investment and Miscellaneous Income Investment Expenses	\$ 5.4 (1.1) -
Total Additions	\$ 4.3
3. Deductions:	
Administrative Expenses <sup>(1)</sup>	\$ -
Benefit Payments <sup>(2)</sup>	(2.3)
Total Deductions	\$ (2.3)
4. Fund Balance as of June 30, 2022	\$ 10.8

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ended 2022) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

Note: LACERA's investment expenses are \$17,091 and administrative expenses are \$17,591 which fall below the rounding.

#### Table 5: Analysis of Change: LACERA

					Unt	funded		
	Ac	tuarial			Ac	tuarial		
Sources of Change	Accrued Liability <sup>(1)</sup>		(Assets) <sup>(1)</sup>		Accrued Liability <sup>(1)</sup>		Normal Cost Rate <sup>(2)</sup>	ADC Percentage <sup>(2)</sup>
A. July 1, 2021 Valuation	\$	66.0	\$	(8.8)	\$	57.2	5.18%	11.26%
Expected One-year Change		4.1		(3.7)		0.4	0.06%	(0.14%)
B. July 1, 2022 Valuation Expected	\$	70.1	\$	(12.5)	\$	57.6	5.24%	11.12%
Retirement Experience Study Changes		2.5		-		2.5	0.23%	0.46%
Claim Cost Experience		(2.1)		-		(2.1)	0.00%	(0.23%)
Trend Assumption (Gain)/Loss <sup>(3)</sup>		2.6		-		2.6	0.23%	0.69%
Other Experience (Gain)/Loss		1.8		-		1.8	(0.16%)	0.43%
Asset (Gain)/Loss		-		1.7		1.7	0.00%	0.00%
C. July 1, 2022 Valuation	\$	74.9	\$	(10.8)	\$	64.1	5.54%	12.47%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

(3) Includes impact of July 1, 2023 renewals

## Table 6: Projected Paid Benefits by Type: LACERA (All Dollar Amounts in Millions)

Fiscal Year Ending	Medi	Dental/Vision ledical Total Total		Medicare Part B Death Benefit		Medical Retiree Contribution		Dental/Vision Retiree Contribution		Total Paid Benefits			
6/30/2023	\$	2.22	\$	0.16	\$	0.27	\$ 0.02	\$	(0.23)	\$	(0.02)	\$	2.42
6/30/2024		2.43		0.17		0.30	0.03		(0.27)		(0.02)		2.64
6/30/2025		2.59		0.18		0.35	0.03		(0.30)		(0.02)		2.83
6/30/2026		2.78		0.20		0.39	0.03		(0.33)		(0.02)		3.05
6/30/2027		3.00		0.21		0.44	0.03		(0.36)		(0.03)		3.29
6/30/2028		3.23		0.22		0.50	0.03		(0.40)		(0.03)		3.55
6/30/2029		3.45		0.23		0.55	0.03		(0.43)		(0.03)		3.80
6/30/2030		3.72		0.25		0.60	0.04		(0.47)		(0.03)		4.11
6/30/2031		3.98		0.26		0.65	0.04		(0.50)		(0.04)		4.39
6/30/2032		4.31		0.28		0.70	0.04		(0.54)		(0.04)		4.75

Projection Basis:

All assumptions are met

No future members are reflected

### Section 6: County, Superior Court, and LACERA Liabilities and Costs

The following tables show key results of the July 1, 2022 OPEB funding valuation for the County, Superior Court, and LACERA.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

# Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: County, Superior Court, and LACERA (All Dollar Amounts in Millions) Descentage

					Percentage
1. Membership	Ju	ly 1, 2022	Ju	ıly 1, 2021	Change
Active Members		96,484		99,037	(2.6%)
Vested Terminated Members		9,221		8,752	5.4%
Retirees (Death Benefit)		61,387		59,519	3.1%
Total		167,092		167,308	(0.1%)
Retirees and Survivors (Medical Coverage)		54,740		53,448	2.4%
Retirees and Survivors (Dental/Vision Coverage)		56,464		54,905	2.8%
Retirees and Survivors (Medicare Part B Coverage)		37,880		36,938	2.6%
2. AAL Summary - Total Paid Benefits by Member Status					
Retirees and Survivors	\$	10,985.2	\$	10,229.0	7.4%
Vested Terminated Members		548.7		511.1	7.4%
Active Members		11,553.3		10,404.3	11.0%
Total	\$	23,087.2	\$	21,144.4	9.2%
3. AAL Summary - Total Paid Benefits by Coverage					
Medical	\$	17,635.2	\$	16,102.8	9.5%
Dental/Vision		1,121.2		1,069.6	4.8%
Medicare Part B		4,150.9		3,796.9	9.3%
Death Benefit		179.9		175.1	2.7%
Total	\$	23,087.2	\$	21,144.4	9.2%

# Table 2: July 1, 2022 Actuarial Accrued Liability (AAL) and Normal Cost (NC): County, Superior Court, and LACERA (All Dollar Amounts in Millions)

	Medical		Dental		Part B		Death		Total
1. AAL - Total Benefits									
Retirees and Survivors	\$	8,999.7	\$ 653.0	\$	1,872.1	\$	136.5	\$	11,661.3
Vested Terminated Members		635.8	37.1		129.6		6.1		808.6
Active Members		9,182.4	521.6		2,149.2		37.3		11,890.5
Total	\$	18,817.9	\$ 1,211.7	\$	4,150.9	\$	179.9	\$	24,360.4
2. AAL - Retiree Paid Premiums									
Retirees and Survivors	\$	622.4	\$ 53.7	\$	-	\$	-	\$	676.1
Vested Terminated Members		245.2	14.7		-		-		259.9
Active Members		315.1	22.1		-		-		337.2
Total	\$	1,182.7	\$ 90.5	\$	-	\$	-	\$	1,273.2
3. AAL - Agent Paid Benefits (1) - (2)									
Retirees and Survivors	\$	8,377.3	\$ 599.3	\$	1,872.1	\$	136.5	\$	10,985.2
Vested Terminated Members		390.6	22.4		129.6		6.1		548.7
Active Members		8,867.3	499.5		2,149.2		37.3		11,553.3
Total	\$	17,635.2	\$ 1,121.2	\$	4,150.9	\$	179.9	\$	23,087.2
4. NC									
Total Benefits	\$	620.7	\$ 31.6	\$	125.5	\$	2.2	\$	780.0
Retiree Paid Premiums		124.5	6.6		-		-		131.1
Net Agent Paid Benefits	\$	496.2	\$ 25.0	\$	125.5	\$	2.2	\$	648.9

(All Dollar Amounts in Millions)	
	ourt, and ERA Subtotal
1. Unfunded Actuarial Accrued Liability (UAAL)	
Present Value of Benefits (PVB) Present Value of Future Normal Cost (PVFNC)	\$ 30,953.9 7,866.7
Actuarial Accrued Liability as of July 1, 2022 Fund Balance at July 1, 2022	\$ 23,087.2 2,394.1
Unfunded Actuarial Accrued Liability	\$ 20,693.1
2. Amortization of UAAL (Level % of Pay)	
Amortization Period (years)	30.0
Amortization Factor	21.027
UAAL Amortization Payment	\$ 984.0
3. 2022 - 2023 Actuarially Determined Contribution (ADC) on July 1, 2022	
Amortization of UAAL	\$ 984.0
Normal Cost	 648.9
Actuarially Determined Contribution (ADC) as of July 1, 2022	\$ 1,632.9
4. July 1, 2022 Valuation Payroll	\$ 8,938.7
5. ADC as a Percentage of Valuation Payroll	18.27%

## Table 3: 2022-2023 Actuarially Determined Contribution (ADC): County, Superior Court, and LACERA (All Dollar Amounts in Millions)

# Table 4: Statement of Changes in Fiduciary Net Position: County, Superior Court, and LACERA (All Dollar Amounts in Millions)

1. Fund Balance as of July 1, 2021	\$	2,306.8
2. Additions: Employer Contributions Investment and Miscellaneous Income Investment Expenses	\$	1,107.0 (287.3) (1.5)
Total Additions	\$	818.2
3. Deductions: Administrative Expenses <sup>(1)</sup>	¢	(0,4)
Benefit Payments <sup>(2)</sup>	\$	(0.4) (730.5)
Total Deductions	\$	(730.9)
4. Fund Balance as of June 30, 2022	\$	2,394.1

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ended 2022) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

#### Table 5: Analysis of Change: County, Superior Court, and LACERA

Sources of Change	Actuarial Accrued .iability <sup>(1)</sup>	(/	Assets) <sup>(1)</sup>	Infunded Actuarial Accrued .iability <sup>(1)</sup>	Normal Cost Rate <sup>(2)</sup>	ADC Percentage <sup>(2)</sup>
A. July 1, 2021 Valuation	\$ 21,144.4	\$	(2,306.8)	\$ 18,837.6	6.78%	16.75%
Expected One-year Change	 1,146.1		(525.4)	 620.7	0.00%	0.01%
B. July 1, 2022 Valuation Expected	\$ 22,290.5	\$	(2,832.2)	\$ 19,458.3	6.78%	16.76%
Retirement Experience Study Changes	566.8		-	566.8	0.29%	0.60%
Claim Cost Experience	(520.1)		-	(520.1)	(0.15%)	(0.43%)
Trend Assumption (Gain)/Loss <sup>(3)</sup>	806.6		-	806.6	0.24%	0.67%
Other Experience (Gain)/Loss	(56.6)		-	(56.6)	0.10%	0.44%
Asset (Gain)/Loss	 -		438.1	 438.1	0.00%	0.23%
C. July 1, 2022 Valuation	\$ 23,087.2	\$	(2,394.1)	\$ 20,693.1	7.26%	18.27%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

(3) Includes impact of July 1, 2023 renewals

# Table 6: Projected Paid Benefits by Type: County, Superior Court, and LACERA (All Dollar Amounts in Millions)

Fiscal Year Ending	Мес	dical Total	Den	ital/Vision Total	Medicare Part B		Death Benefit		Medical Retiree Contribution		Dental/Vision Retiree Contribution		otal Paid Benefits
6/30/2023	\$	658.45	\$	53.45	\$ 95.50	\$	8.96	\$	(47.41)	\$	(4.66)	\$	764.29
6/30/2024		718.04		56.92	106.78		9.24		(53.17)		(4.97)		832.84
6/30/2025		782.78		59.88	117.72		9.51		(59.28)		(5.25)		905.36
6/30/2026		854.18		63.07	131.18		9.80		(65.97)		(5.54)		986.72
6/30/2027		922.25		66.21	146.13		10.09		(72.09)		(5.81)		1,066.78
6/30/2028		991.33		69.53	160.85		10.39		(78.31)		(6.11)		1,147.68
6/30/2029		1,053.23		72.90	175.06		10.70		(84.33)		(6.41)		1,221.15
6/30/2030		1,120.75		76.33	189.54		11.01		(90.84)		(6.71)		1,300.08
6/30/2031		1,190.01		79.75	205.12		11.32		(97.39)		(7.01)		1,381.80
6/30/2032		1,260.52		83.23	222.41		11.64		(103.82)		(7.32)		1,466.66

Projection Basis:

All assumptions are met

No future members are reflected

## Section 7: Total of All Agents Liabilities and Costs

The following tables show key results of the July 1, 2022 OPEB funding valuation for all the agents combined.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

The following agents are included in this section:

Agencies that are prefunding the liability utilize a 6.00% investment earnings assumption, which is based on the projected return on the assets in the OPEB Trust.

- County
- Superior Court
- LACERA

Agencies that are not prefunding the liability utilize a 2.30% investment earnings assumption, which is based on the projected return on County general assets.

- South Coast Air Quality Management District (SCAQMD)
- Los Angeles County Office of Education (LACOE)
- Local Agency Formation Commission (LAFCO)
- Little Lake Cemetery District (LLCD)

The agencies not prefunding the liability represent 0.05% of the total Actuarial Accrued Liability.

# Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: Total (All Dollar Amounts in Millions)

					Percentage
1. Membership	Ju	ly 1, 2022	Ju	ıly 1, 2021	Change
Active Members		96,490		99,044	(2.6%)
Vested Terminated Members		9,222		8,752	5.4%
Retirees (Death Benefit)		61,460		59,613	3.1%
Total		167,172		167,409	(0.1%)
Retirees and Survivors (Medical Coverage)		54,795		53,529	2.4%
Retirees and Survivors (Dental/Vision Coverage)		56,519		54,981	2.8%
Retirees and Survivors (Medicare Part B Coverage)		37,918		36,998	2.5%
2. AAL Summary - Total Paid Benefits by Member Status					
Retirees and Survivors	\$	10,994.0	\$	10,240.3	7.4%
Vested Terminated Members		548.7		511.1	7.4%
Active Members		11,555.1		10,406.0	11.0%
Total	\$	23,097.8	\$	21,157.4	9.2%
3. AAL Summary - Total Paid Benefits by Coverage					
Medical	\$	17,643.2	\$	16,112.4	9.5%
Dental/Vision		1,121.7		1,070.2	4.8%
Medicare Part B		4,152.7		3,799.3	9.3%
Death Benefit		180.2		175.5	2.7%
Total	\$	23,097.8	\$	21,157.4	9.2%

# Table 2: July 1, 2022 Actuarial Accrued Liability (AAL) and Normal Cost (NC): Total (All Dollar Amounts in Millions)

	Medical		Dental		Part B		Death		Total
1. AAL - Total Benefits									
Retirees and Survivors	\$ 9,007.8	\$	653.5	\$	1,873.5	\$	136.8	\$	11,671.6
Vested Terminated Members	635.8		37.1		129.6		6.1		808.6
Active Members	 9,183.6		521.7		2,149.6		37.3		11,892.2
Total	\$ 18,827.2	\$	1,212.3	\$	4,152.7	\$	180.2	\$	24,372.4
2. AAL - Retiree Paid Premiums									
Retirees and Survivors	\$ 623.8	\$	53.8	\$	-	\$	-	\$	677.6
Vested Terminated Members	245.2		14.7		-		-		259.9
Active Members	315.0		22.1		-		-		337.1
Total	\$ 1,184.0	\$	90.6	\$	-	\$	-	\$	1,274.6
3. AAL - Agent Paid Benefits (1) - (2)									
Retirees and Survivors	\$ 8,384.0	\$	599.7	\$	1,873.5	\$	136.8	\$	10,994.0
Vested Terminated Members	390.6		22.4		129.6		6.1		548.7
Active Members	8,868.6		499.6		2,149.6		37.3		11,555.1
Total	\$ 17,643.2	\$	1,121.7	\$	4,152.7	\$	180.2	\$	23,097.8
4. NC									
Total Benefits	\$ 620.8	\$	31.6	\$	125.5	\$	2.2	\$	780.1
Retiree Paid Premiums	124.5		6.6		-		-		131.1
Net Agent Paid Benefits	\$ 496.3	\$	25.0	\$	125.5	\$	2.2	\$	649.0

# Table 3: 2022-2023 Actuarially Determined Contribution (ADC): Total (All Dollar Amounts in Millions)

		Total
1. Unfunded Actuarial Accrued Liability (UAAL)		
Present Value of Benefits (PVB) Present Value of Future Normal Cost (PVFNC)	\$	30,966.2 7,868.4
Actuarial Accrued Liability as of July 1, 2022 Fund Balance at July 1, 2022	\$	23,097.8 2,394.1
Unfunded Actuarial Accrued Liability	\$	20,703.7
2. Amortization of UAAL (Level % of Pay)		
Amortization Period (years)		30.0
Amortization Factor	•	21.032
UAAL Amortization Payment	\$	984.4
3. 2022 - 2023 Actuarially Determined Contribution (ADC) on July 1, 2022		
Amortization of UAAL	\$	984.4
Normal Cost		649.0
Actuarially Determined Contribution (ADC) as of July 1, 2022	\$	1,633.4
4. July 1, 2022 Valuation Payroll	\$	8,939.4
5. ADC as a Percentage of Valuation Payroll		18.27%

### Table 4: Statement of Changes in Fiduciary Net Position: Total (All Dollar Amounts in Millions)

1. Fund Balance as of July 1, 2021	\$	2,306.8
2. Additions: Employer Contributions Investment and Miscellaneous Income Investment Expenses	\$	1,107.4 (287.3) (1.5)
Total Additions	\$	818.6
3. Deductions: Administrative Expenses <sup>(1)</sup>	\$	(0.4)
Benefit Payments <sup>(2)</sup>	Ŧ	(730.9)
Total Deductions	\$	(731.3)
4. Fund Balance as of June 30, 2022	\$	2,394.1

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ended 2022) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

#### Milliman July 1, 2022 OPEB Actuarial Valuation Los Angeles County Employees Retirement Association

#### Table 5: Analysis of Change: Total

#### (All Dollar Amounts in Billions)

Sources of Change	Actuarial Accrued Liability <sup>(1)</sup>			Assets) <sup>(1)</sup>	Infunded Actuarial Accrued .iability <sup>(1)</sup>	Normal Cost Rate <sup>(2)</sup>	ADC Percentage <sup>(2)</sup>
A. July 1, 2021 Valuation	\$	21,157.4	\$	(2,306.8)	\$ 18,850.6	6.78%	16.76%
Expected One-year Change		1,146.0		(525.4)	 620.6	0.00%	0.00%
B. July 1, 2022 Valuation Expected	\$	22,303.4	\$	(2,832.2)	\$ 19,471.2	6.78%	16.76%
Retirement Experience Study Changes Claim Cost Experience Trend Assumption (Gain)/Loss <sup>(3)</sup> Other Experience (Gain)/Loss Asset (Gain)/Loss		566.5 (520.4) 806.9 (58.6) -		- - - 438.1	 566.5 (520.4) 806.9 (58.6) 438.1	0.29% (0.15%) 0.24% 0.10% 0.00%	0.60% (0.43%) 0.67% 0.44% 0.23%
C. July 1, 2022 Valuation	\$	23,097.8	\$	(2,394.1)	\$ 20,703.7	7.26%	18.27%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

(3) Includes impact of July 1, 2023 renewals

### Table 6: Projected Paid Benefits by Type: Total (All Dollar Amounts in Millions)

Fiscal Year Ending	Мес	dical Total	Den	ital/Vision Total	 Medicare Part B		Death Benefit		Medical Retiree Contribution		Dental/Vision Retiree Contribution		otal Paid Benefits
6/30/2023	\$	659.05	\$	53.50	\$ 95.59	\$	8.99	\$	(47.50)	\$	(4.67)	\$	764.96
6/30/2024		718.62		56.96	106.87		9.26		(53.25)		(4.98)		833.48
6/30/2025		783.34		59.92	117.81		9.53		(59.36)		(5.26)		905.98
6/30/2026		854.72		63.11	131.28		9.82		(66.05)		(5.55)		987.33
6/30/2027		922.78		66.25	146.22		10.11		(72.17)		(5.82)		1,067.37
6/30/2028		991.84		69.57	160.94		10.41		(78.38)		(6.12)		1,148.26
6/30/2029		1,053.72		72.94	175.15		10.72		(84.41)		(6.41)		1,221.71
6/30/2030		1,121.21		76.37	189.63		11.03		(90.91)		(6.72)		1,300.61
6/30/2031		1,190.48		79.78	205.20		11.34		(97.46)		(7.02)		1,382.32
6/30/2032		1,260.97		83.26	222.49		11.65		(103.88)		(7.33)		1,467.16

Projection Basis:

All assumptions are met

No future members are reflected

### Section 8: ACFR Information

### Los Angeles County Other Post Employment Benefits Program Schedule of Funding Progress

### (Dollars in Thousands)

Valuation Date	Actuarial Value of Assets	Actuarial Accrued Liabilities	Unfunded Actuarial Accrued Liabilities (UAAL)	Funded Ratio	Covered Employee Payroll	UAAL as a Percentage of Covered Employee Payroll
July 1, 2014	\$483,800	\$28,546,600	\$28,062,800	1.7%	N/A	N/A
July 1, 2016	560,800	25,912,600	25,351,800	2.2%	N/A	N/A
July 1, 2017	742,900	26,300,800	25,557,900	2.8%	\$8,544,140	299.1%
July 1, 2018	941,010	21,066,800	20,125,790	4.5%	8,954,417	224.8%
July 1, 2019	1,238,480	20,752,600	19,514,120	6.0%	9,471,632	206.0%
July 1, 2020	1,492,600	21,302,700	19,810,100	7.0%	9,813,912	201.9%
July 1, 2021	2,306,800	21,157,400	18,850,600	10.9%	10,065,113	187.3%
July 1, 2022	2,394,100	23,097,800	20,703,700	10.4%	10,269,429	201.6%

### Los Angeles County Other Post Employment Benefits Program Demographic Activity of Retired Members and Beneficiaries<sup>1</sup>

### (Dollars in Thousands)

	Addeo	to Rolls	Removed	From Rolls	Rolls at E	End of Year		
Valuation Date	Member Count	Annual Allowance <sup>2</sup>	Member Count	Annual Allowance	Member Count	Annual Allowance	Percentage Increase in Retiree Allowance	Average Annual Allowance
July 1, 2010	-	\$-	-	\$ -	43,936	\$ 391,979	-	\$ 8,922
July 1, 2012	5,336	56,982	(3,070)	(25,497)	46,202	423,464	8.03%	9,165
July 1, 2014	5,335	89,205	(3,369)	(29,925)	48,168	482,744	14.00%	10,022
July 1, 2016	5,710	103,373	(3,514)	(30,745)	50,364	555,372	15.04%	11,027
July 1, 2017	3,229	41,266	(1,839)	(18,052)	51,754	578,586	4.18%	11,180
July 1, 2018	3,028	61,697	(1,977)	(20,530)	52,805	619,753	7.12%	11,737
July 1, 2019	3,259	71,970	(1,996)	(22,487)	54,068	669,237	7.98%	12,378
July 1, 2020	3,216	53,933	(2,077)	(23,865)	55,207	699,305	4.49%	12,667
July 1, 2021	3,431	53,821	(2,353)	(28,386)	56,285	724,740	3.64%	12,876
July 1, 2022	3,815	42,812	(2,331)	(27,823)	57,769	739,729	2.07%	12,805

<sup>1</sup>Includes medical, dental/vision, and Part B benefits

<sup>2</sup> Includes changes for continuing retirees and beneficiaries

#### Los Angeles County Other Post Employment Benefits Program Actuarial Analysis of Financial Experience - OPEB Program

(Dollars in Millions)

			Val	uatic	on as of Ju	ily 1			
	 <u>2016</u>	<u>2017</u>	<u>2018</u>		<u>2019</u>		<u>2020</u>	<u>2021</u>	2022
Prior Valuation Unfunded Actuarial Accrued Liability	\$ 28,063	\$ 25,352	\$ 25,558	\$	20,126	\$	19,514	\$ 19,810	\$ 18,851
Expected Increase (Decrease) from Prior Valuation	3,240	1,462	1,170		1,005		911	747	621
Claim Costs Greater (Less) than Expected <sup>1</sup>	(2,322)	(1,213)	(1,067)		(1,589)		(1,000)	(1,202)	287
Change in Assumptions <sup>2</sup>	(3,385)	-	(6,936)		(35)		314	-	567
Change in Assets	78	(54)	(28)		1		76	(352)	438
All Other Experience <sup>3</sup>	 (322)	11	1,429		6		(5)	(152)	(60)
Ending Unfunded Actuarial Accrued Liability	\$ 25,352	\$ 25,558	\$ 20,126	\$	19,514	\$	19,810	\$ 18,851	\$ 20,704

<sup>1</sup> This amount Includes the trend assumption change.

 $^{2}$  In 2016, this amount includes the impact from Tier 2.

<sup>3</sup> In 2018, this amount is mostly the impact of the Excise Tax.

## Los Angeles County Other Post Employment Benefits Program Actuary Solvency Test - OPEB Program

(Dollars in Millions)

Actuarial Accrued Liabilities for

Actuarial	Active M	ember		rees and	(Er	e Members nployer nanced	Actua Value			of Actuarial / Covered by	
Valuation Date	Contribu (A)		Bene	ficiaries <sup>1</sup> (B)	P0	ortion) (C)	Valua Ass		(A)	(B)	(C)
July 1, 2012	\$	-	\$	10,681	\$	16,272	\$	-	N/A	0%	0%
July 1, 2014		-		11,791		16,756		484	N/A	4%	0%
July 1, 2016		-		11,365		14,548		561	N/A	5%	0%
July 1, 2017		-		11,640		14,661		743	N/A	6%	0%
July 1, 2018		-		10,108		10,959		941	N/A	9%	0%
July 1, 2019		-		10,260		10,493		1,239	N/A	12%	0%
July 1, 2020		-		10,597		10,706		1,493	N/A	14%	0%
July 1, 2021		-		10,751		10,406		2,307	N/A	21%	0%
July 1, 2022		-		11,543		11,555		2,394	N/A	21%	0%

<sup>1</sup> Includes vested former members.

#### Discussion of the Transition from Cost Sharing to Agent

There are two types of plan structures: Cost Sharing and Agent. LACERA began funding and accounting reporting under a Cost Sharing plan in 2006. In the cost sharing structure, there is no attribution of liabilities, costs, and assets to individual employers for funding purposes. This was appropriate while the employers were not prefunding.

An OPEB Trust was established so that the County, Superior Court, and LACERA could prefund the OPEB costs. Separate accounts are maintained for each employer. This OPEB Trust meets the three GASB requirements:

- 1. Contributions are irrevocable
- 2. Assets are dedicated to retiree benefits
- 3. Assets are legally protected from creditors

Each employer may have a different prefunding schedule where employers could prefund different amounts at different times. To ensure assets are designated to each employer's costs and liabilities, the decision was made to change from a cost sharing structure to an agent plan structure. Under this arrangement the assets are partitioned according to each employer's funding actions.

The Transition timeline is as follows where the GASB Disclosure dates are the reporting dates:

LACERA OPEB Report	Last Year with Cost Sharing Structure	First Year with Agent Structure
LAGERA OF EB REPOIL	Sharing Structure	Agent Structure
Funding Valuation	July 1, 2017	July 1, 2018
GASB 74 Disclosure Report	June 30, 2018	N/A
GASB 75 Disclosure Report	June 30, 2019	June 30, 2020

#### Discussion of GASB Statements No. 74 and 75

On June 2, 2015, GASB approved Statement Numbers 74 and 75.

GASB Statement Number 74, *Financial Reporting for Postemployment Benefit Plans Other Than Pension Plans,* addresses reporting by OPEB plans that administer benefits on behalf of governments and replaces GASB Statement Number 43.

The effective date for this statement is applicable to LACERA's fiscal year reporting period ending June 30, 2017. Milliman prepared LACERA's first GASB 74 disclosure report issued on September 27, 2017 and was based on the July 1, 2016 OPEB valuation, measurement date of June 30, 2017 and reporting date of June 30, 2017. The second GASB 74 disclosure report was based on the July 1, 2017 OPEB valuation, measurement date of June 30, 2018. Due to the change from cost sharing to agent, the GASB 74 report with a reporting date of June 30, 2019 and thereafter no longer includes actuarial information. LACERA has determined an actuarial GASB 74 report under an agent structure is not necessary.

GASB Statement Number 75, *Accounting and Financial Reporting for Postemployment Benefits Other Than Pensions*, addresses reporting by governments that provide OPEB to their employees and for governments that finance OPEB for employees of other governments and replaces GASB Statement Number 45. Though the effective date is one year later than GASB Statement Number 74, the first GASB 75 disclosure report was based on the July 1, 2016 OPEB valuation with a measurement date of June 30, 2017 and a reporting date of June 30, 2018. This timing pattern is maintained for the GASB 75 disclosure reports. This June 30, 2022 valuation will be the basis for the GASB 75 disclosure report with a measurement date of June 30, 2023 and a reporting date of June 30, 2024.

Some of the highlights of the GASB Statements 74 and 75 are as follows:

- The balance sheet liability is the full Net OPEB Liability (NOL) rather than the Net OPEB Obligation. The NOL is more closely aligned with the UAAL.
- The annual OPEB expense is likely to be more volatile from year to year than the ADC because there
  will be faster recognition of OPEB expenses.
- The discount rate development is based on a blended rate equivalent of the long-term expected rate of return on assets and a 20-year tax-exempt municipal bond yield or index rate.
- The Entry Age Normal actuarial cost method is required.

### **Appendix A: Actuarial Procedures and Assumptions**

The actuarial procedures and assumptions used in this valuation are described in this section. Where applicable, the same assumptions are used for the LACERA postemployment health and death benefit program as for the LACERA retirement benefits. The assumptions that overlap with the LACERA retirement benefits plan assumptions were reviewed and changed June 30, 2022, as a result of the 2022 triennial Retirement Benefit Investigation of Experience Study, approved by the Board of Investments in December 2022. These assumptions are consistent with the June 30, 2022 retirement funding valuation. The investment earnings assumptions are OPEB-specific and were reviewed and changed June 30, 2020 as a result of the 2020 OPEB Experience Study. For agents that are prefunding into LACERA's OPEB Trust, the expected return of the assets of the OPEB Trust is based on the asset allocation approved in the December 2017 Board of Investments meeting, which is a different asset allocation from the one used for the retirement benefits plan. LACERA conducts an asset allocation study every three years, and a new one was completed in 2021 and is being implemented. Milliman reviewed the new investment policy and decided a change in the target allocation did not require a change in the investment earnings assumption for this funding valuation. The investment earnings assumption for agents that are not prefunding into LACERA's OPEB Trust is based on the expected return from the County's general assets in the 2020 OPEB Experience Study. The OPEB-specific assumptions other than premiums, claim costs, aging, and trend were changed as a result of the 2020 OPEB Investigation of Experience Study approved in the March 2021 Board of Retirement meeting. The premiums, claim costs, aging, and trend updated with the 2023-2024 annual medical and dental plan rate renewals are updated in this Appendix A.

The actuarial assumptions used in both the retirement benefits plan and OPEB program actuarial valuation are intended to estimate the future experience of the members eligible for benefit payments and the projected benefit flow and anticipated investment earnings. Any variations in future experience from that expected from these assumptions will result in corresponding changes in the estimated costs of the benefits.

Table A-1 summarizes the assumptions. The general wage increase, inflation, and retirement specific demographic assumptions were developed in the 2022 retirement benefits experience study. Nearly all of the OPEB specific demographic and investment earnings assumptions were developed in the 2020 OPEB experience study report. The claim costs and health cost trend assumptions with the 2023-2024 annual medical and dental plan rate renewals were updated in the July 1, 2022 OPEB funding valuation.

#### **Retirement Benefit Assumptions**

Tables A-2 and A-3 show how members are expected to leave retired status due to death. These were developed from the experience as measured by the 2022 Retirement Benefit Investigation of Experience Study.

Table A-4 presents the probability of a refund of retirement benefit contributions upon termination of employment while vested. These were developed from the experience as measured by the 2022 Retirement Benefit Investigation of Experience Study.

Table A-5 presents the general wage increase of 3.25% per annum. This was developed from the experience as measured by the 2022 Retirement Benefit Investigation of Experience Study.

Tables A-6 to A-13 present the probabilities of separation of active service. These were developed from the experience as measured by the 2022 Retirement Benefit Investigation of Experience Study. These are the probabilities a member will leave active employment for various reasons.

#### **OPEB** Assumptions

Tables A-14 to A-19 present enrollment assumptions. These were developed from the 2020 OPEB Investigation of Experience Study to estimate health eligibility and enrollment.

Tables A-20 to A-21 present premium and claim cost assumptions developed from the OPEB program's July 1, 2022 premium and claim information.

Table A-22 presents the health cost trend rates for the July 1, 2022 OPEB valuation. These rates reflect the final July 1, 2023 annual medical and dental plan rate renewals.

Table A-23 presents the assumed retirement rates for vested terminated members developed from the 2020 OPEB Investigation of Experience study.

#### **Actuarial Cost Method**

Effective with the July 1, 2018 OPEB funding valuation, the Entry Age Normal (EAN) actuarial cost method is being used. Under the principles of this method, the actuarial present value of the projected benefits of each individual included in the valuation is allocated as a level percentage of the individual's projected compensation between entry age and assumed exit (until maximum retirement age). For members who transferred between plans, entry age is based on original entry into the system.

The portion of this actuarial present value allocated to a valuation year is called the Normal Cost (NC). The portion of this actuarial present value not provided for at a valuation date by the sum of (a) the actuarial value of the assets, and (b) the actuarial present value of future Normal Costs is called the Unfunded Actuarial Accrued Liability (UAAL). The UAAL is amortized as a level percentage of the projected salaries of the active members, both present and future, covered by the LACERA retirement benefits plan over a 30-year period from the valuation date; this is commonly referred to as a "rolling 30-year amortization method". This method does not cover interest on the UAAL. We will consider reviewing and making a recommendation regarding the amortization method in the 2023 OPEB Investigation of Experience.

#### **Records and Data**

The data used in this valuation consist of medical and dental/vision premiums, financial information, and the age, service, and salary records for active and inactive members and their survivors. All of the information was supplied by LACERA, Segal, and Meketa Investment Group and was accepted for valuation purposes without audit.

#### **Growth in Membership**

For benefit determination purposes, no growth in the membership of LACERA is assumed. For funding purposes, if amortization is required, the total payroll of covered members is assumed to grow due to the combined effects of future wage increases of current active members and the replacement of the current active members by new employees. No growth in the total number of active members is assumed.

#### Valuation of Assets

The asset valuation method is market value.

#### **Investment Earnings and Expenses**

The investment earnings assumption is used to discount all the projected benefits that are expected to be received in the future for all current members. This OPEB program utilizes two investment earnings assumptions depending on whether the agent is prefunding into the OPEB Trust or not. For this funding valuation, we have chosen to utilize the same criteria for a qualified prefunding trust as GASB 74 and 75. The criteria include: (1) irrevocable trust contributions, (2) assets are dedicated to providing OPEB to plan members, and (3) assets are legally protected from creditors of employers and plan members.

The investment earnings assumption for agents that are prefunding through the OPEB Trust is the OPEB Trust expected return of 6.00%. The investment earnings assumption for agents that are not prefunding through the OPEB Trust is the County's general funds expected return of 2.30%. These rates were adopted from the 2020 OPEB Investigation of Experience Study.

The change from cost sharing to agent began with the July 1, 2018 OPEB funding valuation. The investment earnings assumption approach for this funding valuation is intended to reflect the earnings associated with each agent. The separate GASB 75 disclosure report, which is different from this funding valuation, follows a prescribed discount rate for accounting disclosures.

#### **Health Cost Trend**

The health cost trend is the projected increase in per person health costs from one year to the next. The trend assumptions vary by benefit type and by future fiscal year as illustrated in Table A-22. The first-year trends reflect the final July 1, 2023 annual medical and dental plan rate renewals in the July 1, 2022 OPEB Valuation. See the discussion in Table A-22 for more details about the trend assumptions. These trend rates were adopted July 1, 2022.

#### **Future Salaries**

The rates of annual salary increase assumed for the purpose of the valuation are illustrated in Table A-5. In addition to increases in salary due to promotions and longevity, this scale includes an assumed 3.25% per annum rate of increase in the general wage level of the membership. These rates were adopted June 30, 2022.

Increases are assumed to occur mid-year (i.e., January 1st) and only apply to base salary. The mid-year timing reflects that salary increases occur throughout the year, or on average mid-year.

#### Retirement

Members in General Plans A-D may retire at age 50 with 10 years of service, or any age with 30 years of service, or age 70 regardless of the number of years of service. General Plan G members are eligible to retire at age 52 with 5 years of service, or age 70 regardless of the number of years of service. Non-contributory Plan E members may retire at age 55 with 10 years of service. Members of Safety Plans A and B may retire at age 50 with 10 years of service, or any age with 20 years of service. Safety Plan C members are eligible to retire at age 50 with 5 years of County service.

The retirement probabilities for active members vary by age and service and are shown by plan in Tables A-6 through A-13.

All general members who attain or who have attained age 75 in active service and all safety members who have attained age 65 in active service are assumed to retire immediately (except for Safety Plan C members who have not yet attained 5 years of service). All deferred vested members are assumed to retire according to Table A-23.

The assumptions regarding termination of employment, early retirement, and unreduced service retirement are treated as a single set of decrements in regard to a particular member. For example, a general member hired at age 30 has a probability to withdraw from LACERA due to death, disability, or other termination of employment until age 50. After age 50, the member could still withdraw due to death, disability, or retirement. Thus, in no year during the member's projected employment would they be eligible for both a probability of other termination of employment and a probability of retirement.

The active members' retirement probabilities were adopted June 30, 2022. The terminated vested member's retirement probabilities were adopted July 1, 2020, for purposes of the OPEB program valuation.

#### Disability

The probabilities of disability used in the valuation are illustrated in Tables A-6 through A-13. These probabilities were adopted June 30, 2019.

#### Postretirement Mortality – Other Than Disabled Members

The same postretirement mortality probabilities are used in the valuation for members retired for service and beneficiaries. These probabilities are illustrated in Table A-2. Current beneficiary mortality is assumed to be the same assumption as healthy members of the same gender. Future beneficiaries are assumed to be of the opposite gender and have the same mortality as General members. The amountweighted Pub-2010 mortality tables are used. These probabilities were adopted June 30, 2019.

Note that these assumptions include a projection for expected future mortality improvement. The new projection scale was adopted June 30, 2022.

Males	General members: PubG-2010 Healthy Retiree Mortality Table for Males, with MP-2021 Ultimate Projection Scale.
	Safety members: PubS-2010 Healthy Retiree Mortality Table for Males multiplied by 85%, with MP- 2021 Ultimate Projection Scale.
Females	General members: PubG-2010 Healthy Retiree Mortality Table for Females multiplied by 110%, with MP-2021 Ultimate Projection Scale.
	Safety members: PubS-2010 Healthy Retiree Mortality Table for Females, with MP-2021 Ultimate Projection Scale.

#### **Postretirement Mortality – Disabled Members**

For disabled members, the mortality probabilities used in the valuation are illustrated in Table A-3. Note that these assumptions directly reflect the expected future mortality improvement. The amount-weighted Pub-2010 mortality tables are used. These probabilities were adopted June 30, 2019.

Note that these assumptions include a projection for expected future mortality improvement. The new projection scale was adopted June 30, 2022.

Males General members: Average of PubG-2010 Healthy Retiree Mortality Table for Males and PubG-2010 Disabled Retiree Mortality Table for Males, both projected with MP-2021 Ultimate Projection Scale.

> Safety members: PubS-2010 Healthy Retiree Mortality Table for Males, with MP-2021 Ultimate Projection Scale.

General members: Average of PubG-2010 Healthy Retiree Mortality Table for Females and Females PubG-2010 Disabled Retiree Mortality Table for Females, both projected with MP-2021 Ultimate Projection Scale.

> Safety members: PubS-2010 Healthy Retiree Mortality Table for Females, with MP-2021 Ultimate Projection Scale.

### **Mortality While in Active Status**

For active members, the mortality probabilities used in the valuation are illustrated in Tables A-6 through A-13. The amount-weighted Pub-2010 mortality tables are used. These mortality tables were adopted June 30, 2019.

Class	Gender	Mortality Table
General	Male	PubG-2010 (120%) Employee Male <sup>(1)</sup>
General	Female	PubG-2010 (130%) Employee Female <sup>(1)</sup>
Safety	Male	PubS-2010 (100%) Employee Male <sup>(1)</sup>
Safety	Female	PubS-2010 (100%) Employee Female <sup>(1)</sup>

1. Projection using the MP-2021 Ultimate projection scale.

These assumptions include a projection for expected future mortality improvement, which was adopted June 30, 2022.

Note that Safety members have an additional service-connected mortality probability of 0.01% per year.

#### **Other Employment Terminations**

Tables A-6 to A-13 show, for all ages, the probabilities assumed in this valuation for future termination from active service other than for death, disability, or retirement. These probabilities do not apply to members eligible for service retirement. These probabilities were adopted June 30, 2022.

Terminating employees may withdraw their contributions immediately upon termination of employment and forfeit the right to further retirement, medical, dental/vision, and death benefits, or they may leave their contributions with LACERA. Former contributing members whose contributions are on deposit may later elect to receive a refund, may return to work, or may remain inactive until becoming eligible to receive a retirement benefit under either LACERA or a reciprocal retirement system. All terminating members who are not eligible for vested benefits are assumed to withdraw their contributions immediately. All terminating members are assumed not to be rehired in the future.

Table A-4 gives the assumed probabilities that vested members will withdraw their contributions and elect a refund immediately upon termination and the probability that remaining members will elect a deferred retirement allowance. All non-vested members are assumed to elect a refund and withdraw their contributions. These probabilities in Table A-4 were adopted June 30, 2022.

#### **Future Transfers**

Though a few active members may change pension plans, this valuation assumes the active members remain in the plan they are enrolled in at the time of the valuation. Specifically, we assume there will be no future transfers between retirement benefit plans.

This work product was prepared solely for LACERA for the purposes described herein and may not be appropriate to use for other purposes. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. Milliman recommends that third parties be aided by their own actuary or other qualified professional when reviewing the Milliman work product.

#### **Retiree Medical and Dental/Vision Eligibility and Enrollment Assumptions**

Any retired or vested terminated members who have not yet elected a refund of their member contributions and will receive a pension benefit other than a refund are eligible for retiree medical and dental/vision enrollment.

The 2020 OPEB Investigation of Experience report was used to set the following assumptions:

Age difference for future retirees and spouses	Table A-1
Probability of initial medical enrollment upon retirement	Table A-14
Probability of medical plan and coverage tier selection upon retirement for Tier 1	Table A-15A
Probability of medical plan and coverage tier selection upon retirement for Tier 2	Table A-15B
Probability of medical plan and coverage tier selection for Pre 65 retirees who	
become eligible for a Post 65 Plan	Table A-16
Probability of survivor and new dependent enrollment	Table A-17
Probability of dental/vision enrollment upon retirement	Table A-18
Probability of dental/vision plan and coverage tier selection upon retirement	Table A-19
Retirement of vested terminated members	Table A-23
Probability of retirees in group plans who elect Medicare Part D	0%

### Table A-1

Summary of Valuation Assumptions as of July 1, 2022

I.	<ul> <li>Economic Assumptions</li> <li>A. General wage increases</li> <li>B1. Investment earnings (prefunding in OPEB Trust)</li> <li>B2. Investment earnings (no prefunding in OPEB Trust)</li> <li>C. Growth in membership</li> <li>D. CPI inflation assumption</li> <li>E. Medical cost trend</li> </ul>	3.25% 6.00% 2.30% 0.00% 2.75% Table A-22
	F. Dental and vision cost trend	Table A-22
П.	Demographic Assumptions	

Α.	Salary increases due to Service	Table A-5
В.	Retirement	Tables A-6 to A-13
C.	Disability	Tables A-6 to A-13
D.	Mortality during active employment	Tables A-6 to A-13
Ε.	Mortality for active members after termination and	
	service retired members <sup>(1)</sup> .	Table A-2

Table A-2

Class	Gender	
General	Male	PubG-2010 (100%) Healthy Retiree Male
General	Female	PubG-2010 (110%) Healthy Retiree Female
Safety	Male	PubS-2010 (85%) Healthy Retiree Male
Safety	Female	PubS-2010 (100%) Healthy Retiree Female

#### F. Mortality among disabled members<sup>(1)</sup>

Table A-3

Class	Gender	
General	Male	Avg of: PubG-2010 (100%) Healthy Retiree Male
		PubG-2010 (100%) Disabled Retiree Male
General	Female	Avg of: PubG-2010 (100%) Healthy Retiree Female
		PubG-2010 (100%) Disabled Retiree Female
Safety	Male	PubS-2010 (100%) Healthy Retiree Male
Safety	Female	PubS-2010 (100%) Healthy Retiree Female

G. Mortality for Beneficiaries<sup>(1)</sup>

Table A-2

Basis - Current beneficiary mortality is assumed to be the same as for healthy members of the same gender. Future beneficiaries are assumed to be of the opposite gender and have the same mortality as General members.

1. All mortality probabilities are projected using the MP-2021 Ultimate projection scale.

III.

IV.

V.

VI.

Η.	Other Terminations of Employment	Tables A-6 to A-13
I.	Refund of Contributions on Vested Termination	Table A-4
J.	Future male retirees are assumed to be four years older than their female spouses. Assumption adopted July 1, 2008. Future female retirees are assumed to be one year younger than their male spouses. Assumption adopted July 1, 2020.	
Re	tiree Medical and Dental/Vision Enrollment Assumptions	
Α.	Probability of Initial Medical Enrollment upon Retirement	Table A-14
B.	Probability of Medical Plan and Coverage Tier Selection Upon Retirement (Pre 65 Male, Pre 65 Female, Post 65 Male, Post 65 Female)	Table A-15
C.	Probability of Medical Plan and Coverage Tier Selection for Pre 65 Retirees Who become Eligible for a Post 65 Plan	Table A-16
D.	Probability of Medical Survivor and New Dependent Enrollment	Table A-17
E.	Probability of Retirees in Group Plans Who Elect Medicare Part D. We have assumed there is no cost impact due to retirees and dependents enrolling in Part D.	0%
F.	Probability of Dental/Vision Enrollment upon Retirement	Table A-18
G.	Probability of Dental/Vision Plan and Coverage Tier Selection Upon Retirement	Table A-19
Pre	emium and Claim Cost Analysis	Tables A-20 to A-21
Me	dical and Dental/Vision Trend	Table A-22
Re	tirement of Vested Terminated Members	Table A-23

	Safety	Safety	General	General
Age	Male	Female	Male	Female
20	0.0520%	0.0210%	0.0740%	0.0380%
25	0.0470%	0.0260%	0.0560%	0.0260%
30	0.0520%	0.0350%	0.0720%	0.0440%
35	0.0590%	0.0470%	0.0940%	0.0680%
40	0.0750%	0.0640%	0.1320%	0.1060%
45	0.1037%	0.0870%	0.1960%	0.1650%
50	0.1632%	0.1490%	0.2980%	0.2442%
55	0.2601%	0.2580%	0.4310%	0.3146%
60	0.4318%	0.4460%	0.6150%	0.4224%
65	0.7489%	0.7700%	0.9130%	0.6743%
70	1.3328%	1.3290%	1.5260%	1.1693%
75	2.4021%	2.2950%	2.6710%	2.0713%
80	4.3376%	3.9620%	4.7740%	3.6960%
85	7.7648%	6.8420%	8.5910%	6.8255%
90	13.4810%	11.8150%	14.6720%	12.6357%

# Table A-2 Mortality for Members Retired for Service<sup>(1)</sup>

#### **Annual Projected Mortality Improvement**

Age	All Groups
60 & Less	1.350%
61	1.350%
62	1.350%
63	1.340%
64	1.320%
65	1.310%
70	1.240%
75	1.170%
80	1.100%
85	0.870%
90	0.630%
95	0.400%
100	0.300%
105	0.200%
110	0.100%
115	0.000%

 Mortality probabilities are those applicable for the fiscal year beginning in 2010. Annual projected improvements are assumed in the following years under the schedule shown. For example, the annual mortality probability for an 85-year old Safety male in fiscal year beginning in 2022 is 6.9918% calculated as follows:

Age 85 probability in 2022 = Age 85 probability in 2010 with 12 years improvement = 7.7648% x (100.0% - 0.87%) ^ 12= 6.9918%

Age	Safety Male	Safety Female	General Male	General Female
20	0.0610%	0.0210%	0.2430%	0.1340%
25	0.0550%	0.0260%	0.1670%	0.0940%
30	0.0610%	0.0350%	0.2130%	0.1485%
35	0.0700%	0.0470%	0.2760%	0.2315%
40	0.0880%	0.0640%	0.3885%	0.3625%
45	0.1220%	0.0870%	0.6015%	0.5675%
50	0.1920%	0.1490%	0.9515%	0.8525%
55	0.3060%	0.2580%	1.2725%	1.0140%
60	0.5080%	0.4460%	1.5590%	1.1700%
65	0.8810%	0.7700%	1.9785%	1.4345%
70	1.5680%	1.3290%	2.7135%	1.9625%
75	2.8260%	2.2950%	3.9315%	2.9430%
80	5.1030%	3.9620%	6.0610%	4.6835%
85	9.1350%	6.8420%	9.7030%	7.7680%
90	15.8600%	11.8150%	15.4625%	12.5760%

## Table A-3 Mortality for Members Retired for Disability<sup>(1)</sup>

1. Mortality probabilities are those applicable for the fiscal year beginning in 2010. Annual projected improvements are assumed in the following years under the schedule shown on the preceding page.

#### Appendix A

Years of		
Service	General	Safety
0	100%	100%
1	100%	100%
2	100%	100%
3	100%	100%
4	100%	100%
5	30%	30%
6	30%	30%
7	30%	30%
8	29%	28%
9	28%	26%
10	28%	24%
11	28%	22%
12	28%	20%
13	27%	18%
14	26%	16%
15	26%	14%
16	25%	12%
17	24%	10%
18	22%	9%
19	21%	8%
20	19%	7%
21	18%	6%
22	16%	5%
23	14%	4%
24	12%	3%
25	10%	2%
26	8%	2%
27	6%	2%
28	4%	2%
29	2%	2%
30 & Up	0%	0%

#### Table A-4 Immediate Refund of Contributions upon Termination of Employment (Excludes Plan E)

## Table A-5Annual Increase in Salary

Payroll is assumed to increase with the general wage increase of 3.25% per annum in addition to individual annual increases from promotion and longevity. The promotion and longevity increases shown in the table below are combined with the general wage increase on a compound basis and are used for the Entry Age Normal cost method. General wage increases and individual salary increases due to promotion and longevity do not affect the amount of the OPEB program's benefits.

Years of		
Service	General	Safety
<1	6.00%	9.00%
1	5.25%	8.50%
2	4.75%	7.50%
3	4.10%	5.75%
4	3.50%	4.25%
5	3.00%	3.00%
6	2.50%	2.50%
7	2.00%	2.10%
8	1.60%	1.70%
9	1.45%	1.45%
10	1.30%	1.30%
11	1.15%	1.20%
12	1.00%	1.10%
13	0.90%	1.00%
14	0.85%	0.90%
15	0.80%	0.90%
16	0.75%	0.90%
17	0.70%	0.90%
18	0.65%	0.90%
19	0.60%	2.25%
20	0.55%	0.90%
21	0.50%	0.90%
22	0.45%	0.90%
23	0.40%	0.90%
24	0.40%	3.00%
25	0.40%	0.90%
26	0.40%	0.90%
27	0.40%	0.90%
28	0.40%	0.90%
29	0.40%	3.00%
30 or More	0.40%	0.90%

#### Appendix A: Probabilities of Separation from Active Service Tables A-6 to A-13

A schedule of the probabilities of termination of employment due to the following causes can be found on the following pages:

Service Retirement:	Member retires after meeting age and service requirements for reasons other than disability.
Other Terminations:	Member terminates and elects a refund of member contributions or a deferred vested retirement benefit.
Service Disability:	Member receives disability retirement; disability is service related.
Ordinary Disability:	Member receives disability retirement; disability is not service related.
Service Death:	Member dies before retirement; death is service related.
Ordinary Death:	Member dies before retirement; death is not service related.

Each of these represents the probability that a member will separate from service at each age due to the particular cause. For example, a probability of 0.0300 for a member's service retirement at age 50 means we assume that 30 out of 1,000 members who are age 50 will retire at that age.

Each table represents the detailed probabilities needed for each LACERA plan by gender:

- TableA-6: General Plans A, B, & C MalesA-7: General Plans A, B, & C FemalesA-8: General Plans D & G MalesA-9: General Plans D & G Females
- A-10: General Plan E Males A-11: General Plan E Females A-12: Safety Plans A, B, & C Males A-13: Safety Plans A, B, & C Females

# Table A-6 Probability of Separation from Active Service for General Members Plans A, B, & C – Male

Age	Service Retirement	Other Terminations	Service Disability	Ordinary Disability	Service Death	Ordinary Death
18	0.00000	0.00500	0.00010	0.00010	N/A	0.00043
19	0.00000	0.00500	0.00010	0.00010	N/A	0.00046
20	0.00000	0.00500	0.00010	0.00010	N/A	0.00044
21	0.00000	0.00500	0.00010	0.00010	N/A	0.00043
22	0.00000	0.00500	0.00010	0.00010	N/A	0.00040
23	0.00000	0.00500	0.00010	0.00010	N/A	0.00037
24	0.00000	0.00500	0.00010	0.00010	N/A	0.00035
25	0.00000	0.00500	0.00010	0.00010	N/A	0.00034
26	0.00000	0.00500	0.00010	0.00010	N/A	0.00036
27	0.00000	0.00500	0.00010	0.00010	N/A	0.00037
28	0.00000	0.00500	0.00010	0.00010	N/A	0.00040
29	0.00000	0.00500	0.00010	0.00010	N/A	0.00041
30	0.00000	0.00500	0.00010	0.00020	N/A	0.00043
31	0.00000	0.00500 0.00500	0.00010	0.00020	N/A	0.00046
32 33	0.00000 0.00000	0.00500	0.00010 0.00016	0.00020 0.00020	N/A N/A	0.00048 0.00050
33 34	0.00000	0.00500	0.00018	0.00020	N/A N/A	0.00053
34 35	0.00000	0.00500	0.00022	0.00020	N/A N/A	0.00055
36	0.00000	0.00500	0.00028	0.00020	N/A N/A	0.00060
37	0.00000	0.00500	0.00040	0.00020	N/A	0.00064
38	0.00000	0.00500	0.00048	0.00020	N/A	0.00068
39	0.00000	0.00500	0.00056	0.00020	N/A	0.00073
40	0.03000	0.00500	0.00064	0.00020	N/A	0.00079
41	0.03000	0.00500	0.00072	0.00020	N/A	0.00085
42	0.03000	0.00500	0.00080	0.00020	N/A	0.00092
43	0.03000	0.00500	0.00084	0.00024	N/A	0.00100
44	0.03000	0.00500	0.00088	0.00028	N/A	0.00108
45	0.03000	0.00500	0.00092	0.00032	N/A	0.00118
46	0.03000	0.00500	0.00096	0.00036	N/A	0.00128
47	0.03000	0.00500	0.00100	0.00040	N/A	0.00139
48	0.03000	0.00500	0.00104	0.00044	N/A	0.00152
49	0.03000	0.00500	0.00108	0.00048	N/A	0.00166
50	0.03000	0.00500	0.00112	0.00052	N/A	0.00179
51	0.03000	0.00500	0.00116	0.00056	N/A	0.00194
52	0.03000	0.00500	0.00120	0.00060	N/A	0.00210
53	0.03000	0.00500	0.00156	0.00064	N/A	0.00227
54	0.06000	0.00500	0.00192	0.00068	N/A	0.00244
55	0.10000	0.00500	0.00228	0.00072	N/A	0.00263
56	0.12000	0.00500	0.00264	0.00076	N/A	0.00283
57	0.17000	0.00500	0.00300	0.00080	N/A	0.00306
58	0.26000	0.00500	0.00330	0.00084	N/A	0.00330
59	0.26000	0.00500	0.00360	0.00088	N/A	0.00355
60 61	0.30000	0.00500	0.00390	0.00092	N/A	0.00383
61 62	0.30000 0.30000	0.00500 0.00500	0.00420 0.00450	0.00096 0.00100	N/A N/A	0.00413 0.00445
63	0.30000	0.00500	0.00450	0.00100	N/A N/A	0.00445
63 64					N/A N/A	0.00481
65	0.30000 0.30000	0.00500 0.00500	0.00450 0.00450	0.00108 0.00112	N/A N/A	0.00520
66	0.22000	0.00500	0.00450	0.00112	N/A	0.00607
67	0.22000	0.00500	0.00450	0.00120	N/A	0.00658
68	0.22000	0.00500	0.00450	0.00120	N/A	0.00713
69	0.22000	0.00500	0.00450	0.00124	N/A	0.00775
70	0.22000	0.00500	0.00450	0.00132	N/A	0.00844
70	0.22000	0.00500	0.00450	0.00136	N/A	0.00920
72	0.22000	0.00500	0.00450	0.00140	N/A	0.01004
73	0.22000	0.00500	0.00450	0.00144	N/A	0.01098
74	0.22000	0.00500	0.00450	0.00148	N/A	0.01201
75	1.00000	0.00000	0.00000	0.00000	N/A	0.01315

# Table A-7 Probability of Separation from Active Service for General Members Plans A, B, & C – Female

Age	Service Retirement	Other Terminations	Service Disability	Ordinary Disability	Service Death	Ordinary Death
18	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
19	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
20	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
21	0.00000	0.00500	0.00015	0.00010	N/A	0.00016
22	0.00000	0.00500	0.00015	0.00010	N/A	0.00014
23	0.00000	0.00500	0.00015	0.00010	N/A	0.00013
24	0.00000	0.00500	0.00015	0.00010	N/A	0.00012
25	0.00000	0.00500	0.00015	0.00010	N/A	0.00012
26	0.00000	0.00500	0.00015	0.00010	N/A	0.00013
27	0.00000	0.00500	0.00015	0.00010	N/A	0.00014
28	0.00000	0.00500	0.00015	0.00010	N/A	0.00016
29	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
30	0.00000	0.00500	0.00015	0.00010	N/A	0.00020
31	0.00000	0.00500	0.00015	0.00010	N/A	0.00021
32	0.00000	0.00500	0.00015	0.00010	N/A	0.00023
33	0.00000	0.00500	0.00020	0.00010	N/A	0.00025
34	0.00000	0.00500	0.00025	0.00010	N/A	0.00027
35	0.00000	0.00500	0.00030	0.00010	N/A	0.00030
36	0.00000	0.00500	0.00035	0.00010	N/A	0.00033
37	0.00000	0.00500 0.00500	0.00040 0.00042	0.00010 0.00014	N/A	0.00036
38 39	0.00000 0.00000	0.00500	0.00042	0.00014	N/A N/A	0.00039 0.00043
39 40	0.03000	0.00500	0.00044	0.00022	N/A N/A	0.00043
40	0.03000	0.00500	0.00048	0.00022	N/A	0.00052
41	0.03000	0.00500	0.00048	0.00030	N/A	0.00056
43	0.03000	0.00500	0.00060	0.00032	N/A	0.00061
44	0.03000	0.00500	0.00070	0.00034	N/A	0.00066
45	0.03000	0.00500	0.00080	0.00036	N/A	0.00073
46	0.03000	0.00500	0.00090	0.00038	N/A	0.00079
47	0.03000	0.00500	0.00100	0.00040	N/A	0.00086
48	0.03000	0.00500	0.00110	0.00042	N/A	0.00092
49	0.03000	0.00500	0.00120	0.00044	N/A	0.00100
50	0.03000	0.00500	0.00130	0.00046	N/A	0.00108
51	0.03000	0.00500	0.00140	0.00048	N/A	0.00117
52	0.03000	0.00500	0.00150	0.00050	N/A	0.00126
53	0.03000	0.00500	0.00156	0.00052	N/A	0.00137
54	0.06000	0.00500	0.00162	0.00054	N/A	0.00147
55	0.10000	0.00500	0.00168	0.00056	N/A	0.00160
56	0.12000	0.00500	0.00174	0.00058	N/A	0.00173
57	0.17000	0.00500	0.00180	0.00060	N/A	0.00187
58	0.26000	0.00500	0.00194	0.00064	N/A	0.00203
59	0.26000	0.00500	0.00208	0.00068	N/A	0.00221
60	0.30000	0.00500	0.00222	0.00072	N/A	0.00242
61	0.30000	0.00500	0.00236	0.00076	N/A	0.00264
62	0.30000	0.00500	0.00250	0.00080	N/A	0.00289
63	0.30000	0.00500	0.00250	0.00084	N/A	0.00317
64	0.30000	0.00500	0.00250	0.00088	N/A	0.00350
65	0.30000	0.00500	0.00250	0.00092	N/A	0.00385
66	0.22000	0.00500	0.00250	0.00096	N/A	0.00425
67	0.22000	0.00500	0.00250	0.00100	N/A	0.00471
68 60	0.22000	0.00500	0.00250	0.00104	N/A	0.00520
69 70	0.22000	0.00500	0.00250	0.00108	N/A	0.00575
70 71	0.22000	0.00500	0.00250	0.00112	N/A	0.00636
71 72	0.22000	0.00500	0.00250	0.00116	N/A N/A	0.00703 0.00777
72	0.22000 0.22000	0.00500 0.00500	0.00250 0.00250	0.00120 0.00124	N/A N/A	
73	0.22000	0.00500	0.00250	0.00124	N/A N/A	0.00859 0.00950
74	1.00000	0.00000	0.00250	0.00000	N/A N/A	0.01050
10	1.00000	0.00000	0.00000	0.00000	11/7	0.01000

# Table A-8 Probability of Separation from Active Service for General Members Plan D & G – Male

-	Service Re	etirement <sup>(1)</sup>	_						Retirement
Age	Plan D	Plan G	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations	Rate Loading <sup>(2)</sup>
18	0.00000	0.00000	0.00010	0.00010	N/A	0.00043	0	0.08000	80%
19	0.00000	0.00000	0.00010	0.00010	N/A	0.00046	1	0.06500	80%
20	0.00000	0.00000	0.00010	0.00010	N/A	0.00044	2	0.05000	80%
21	0.00000	0.00000	0.00010	0.00010	N/A	0.00043	3	0.04250	80%
22	0.00000	0.00000	0.00010	0.00010	N/A	0.00040	4	0.03500	80%
23	0.00000	0.00000	0.00010	0.00010	N/A	0.00037	5	0.03100	80%
24	0.00000	0.00000	0.00010	0.00010	N/A	0.00035	6	0.02900	80%
25	0.00000	0.00000	0.00010	0.00010	N/A	0.00034	7	0.02700	80%
26	0.00000	0.00000	0.00010	0.00010	N/A	0.00036	8	0.02500	80%
27	0.00000	0.00000	0.00010	0.00010	N/A	0.00037	9	0.02000	80%
28	0.00000	0.00000	0.00010	0.00010	N/A	0.00040	10	0.01700	80%
29	0.00000	0.00000	0.00010	0.00010	N/A	0.00041	11	0.01500	80%
30	0.00000	0.00000	0.00010	0.00020	N/A	0.00043	12	0.01350	80%
31	0.00000	0.00000	0.00010	0.00020	N/A	0.00046	13	0.01200	80%
32	0.00000	0.00000	0.00010	0.00020	N/A	0.00048	14	0.01100	80%
33	0.00000	0.00000	0.00016	0.00020	N/A	0.00050	15	0.01000	80%
34	0.00000	0.00000	0.00022	0.00020	N/A	0.00053	16	0.00950	80%
35	0.00000	0.00000	0.00028	0.00020	N/A	0.00056	17	0.00900	80%
36	0.00000	0.00000	0.00034	0.00020	N/A	0.00060	18	0.00850	80%
37	0.00000	0.00000	0.00040	0.00020	N/A	0.00064	19	0.00800	80%
38	0.00000	0.00000	0.00048	0.00020	N/A	0.00068	20	0.00750	90%
39	0.00000	0.00000	0.00056	0.00020	N/A	0.00073	21	0.00700	90%
40	0.01500	0.00000	0.00064	0.00020	N/A	0.00079	22	0.00650	90%
41	0.01500	0.00000	0.00072	0.00020	N/A	0.00085	23	0.00600	90%
42	0.01500	0.00000	0.00080	0.00020	N/A	0.00092	24	0.00550	90%
43	0.01500	0.00000	0.00084	0.00024	N/A	0.00100	25	0.00500	110%
44	0.01500	0.00000	0.00088	0.00028	N/A	0.00108	26	0.00450	110%
45 46	0.01500	0.00000 0.00000	0.00092 0.00096	0.00032 0.00036	N/A N/A	0.00118	27 28	0.00400 0.00400	110% 110%
40 47	0.01500 0.01500	0.00000	0.00090	0.00030	N/A N/A	0.00128 0.00139	20	0.00400	110%
47	0.01500	0.00000	0.00100	0.00040	N/A N/A	0.00159	29 30 & Above	0.00000	160%
48 49	0.01500	0.00000	0.00104	0.00044	N/A	0.00166	30 & ADOVE	0.00000	100 /0
49 50	0.01500	0.01200	0.00108	0.00048	N/A	0.00179			
50 51	0.01200	0.00960	0.00112	0.00052	N/A	0.00194			
52	0.01200	0.00960	0.00110	0.00060	N/A	0.00210			
53	0.01500	0.01200	0.00156	0.00064	N/A	0.00227			
54	0.02000	0.01600	0.00192	0.00068	N/A	0.00244			
55	0.03000	0.02400	0.00228	0.00072	N/A	0.00263			
56	0.03000	0.02400	0.00264	0.00076	N/A	0.00283			
57	0.03000	0.02400	0.00300	0.00080	N/A	0.00306			
58	0.04000	0.03200	0.00330	0.00084	N/A	0.00330			
59	0.05000	0.04000	0.00360	0.00088	N/A	0.00355			
60	0.07000	0.05600	0.00390	0.00092	N/A	0.00383			
61	0.07000	0.05600	0.00420	0.00096	N/A	0.00413			
62	0.10000	0.10000	0.00450	0.00100	N/A	0.00445			
63	0.12000	0.12000	0.00450	0.00104	N/A	0.00481			
64	0.17000	0.17000	0.00450	0.00108	N/A	0.00520			
65	0.23000	0.18400	0.00450	0.00112	N/A	0.00562			
66	0.19000	0.15200	0.00450	0.00116	N/A	0.00607			
67	0.19000	0.30000	0.00450	0.00120	N/A	0.00658			
68	0.19000	0.19000	0.00450	0.00124	N/A	0.00713			
69	0.19000	0.19000	0.00450	0.00128	N/A	0.00775			
70	0.24000	0.24000	0.00450	0.00132	N/A	0.00844			
71	0.19000	0.19000	0.00450	0.00136	N/A	0.00920			
72	0.19000	0.19000	0.00450	0.00140	N/A	0.01004			
73	0.19000	0.19000	0.00450	0.00144	N/A	0.01098			
74	0.19000	0.19000	0.00450	0.00148	N/A	0.01201			
75	1.00000	1.00000	0.00000	0.00000	N/A	0.01315			

1. Service retirement probabilities vary by years of service. The applicable retirement probability loading that varies by years of service is shown on this page in a separate column.

2. The retirement probability loading is applied to the service retirement probability at each member's applicable age and years of service.

# Table A-9 Probability of Separation from Active Service for General Members Plan D & G – Female

-	Service Re	etirement <sup>(1)</sup>	_						Potiromont
Age	Plan D	Plan G	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations	Retirement Rate Loading <sup>(2)</sup>
18	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	0	0.08000	80%
19	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	1	0.06500	80%
20	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	2	0.05000	80%
21	0.00000	0.00000	0.00015	0.00010	N/A	0.00016	3	0.04250	80%
22	0.00000	0.00000	0.00015	0.00010	N/A	0.00014	4	0.03500	80%
23	0.00000	0.00000	0.00015	0.00010	N/A	0.00013	5	0.03100	80%
24	0.00000	0.00000	0.00015	0.00010	N/A	0.00012	6	0.02900	80%
25	0.00000	0.00000	0.00015	0.00010	N/A	0.00012	7	0.02700	80%
26	0.00000	0.00000	0.00015	0.00010	N/A	0.00013	8	0.02500	80%
27	0.00000	0.00000	0.00015	0.00010	N/A	0.00014	9	0.02000	80%
28	0.00000	0.00000	0.00015	0.00010	N/A	0.00016	10	0.01700	80%
29	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	11	0.01500	80%
30	0.00000	0.00000	0.00015	0.00010	N/A	0.00020	12	0.01350	80%
31	0.00000	0.00000	0.00015	0.00010	N/A	0.00021	13	0.01200	80%
32	0.00000	0.00000	0.00015	0.00010	N/A	0.00023	14	0.01100	80%
33	0.00000	0.00000	0.00020	0.00010	N/A	0.00025	15	0.01000	80%
34	0.00000	0.00000	0.00025	0.00010	N/A	0.00027	16	0.00950	80%
35	0.00000	0.00000	0.00030	0.00010	N/A	0.00030	17	0.00900	80%
36	0.00000	0.00000	0.00035	0.00010	N/A	0.00033	18	0.00850	80%
37	0.00000	0.00000	0.00040	0.00010	N/A	0.00036	19	0.00800	80%
38	0.00000	0.00000	0.00042	0.00014	N/A	0.00039	20	0.00750	90%
39	0.00000	0.00000	0.00044	0.00018	N/A	0.00043	21	0.00700	90%
40	0.01500	0.00000	0.00046	0.00022	N/A	0.00047	22	0.00650	90%
41	0.01500	0.00000	0.00048	0.00026	N/A	0.00052	23	0.00600	90%
42	0.01500	0.00000	0.00050	0.00030	N/A	0.00056	24	0.00550	90%
43	0.01500	0.00000	0.00060	0.00032	N/A	0.00061	25	0.00500	110%
44	0.01500	0.00000	0.00070 0.00080	0.00034	N/A	0.00066	26	0.00450	110%
45	0.01500	0.00000		0.00036	N/A	0.00073	27	0.00400	110%
46	0.01500	0.00000	0.00090	0.00038	N/A	0.00079	28 29	0.00400	110%
47 48	0.01500 0.01500	0.00000 0.00000	0.00100 0.00110	0.00040 0.00042	N/A N/A	0.00086 0.00092	30 & Above	0.00400 0.00000	110% 160%
40 49	0.01500	0.00000	0.00110	0.00042	N/A N/A	0.00092	30 & ADOVE	0.00000	100%
49 50	0.01500	0.01200	0.00120	0.00044	N/A N/A	0.00108			
50 51	0.01200	0.00960	0.00130	0.00040	N/A	0.00117			
52	0.01200	0.00960	0.00140	0.00048	N/A	0.00126			
53	0.01200	0.01200	0.00156	0.00052	N/A	0.00137			
54	0.02000	0.01600	0.00162	0.00054	N/A	0.00147			
55	0.03000	0.02400	0.00168	0.00056	N/A	0.00160			
56	0.03000	0.02400	0.00174	0.00058	N/A	0.00173			
57	0.03000	0.02400	0.00180	0.00060	N/A	0.00187			
58	0.04000	0.03200	0.00194	0.00064	N/A	0.00203			
59	0.05000	0.04000	0.00208	0.00068	N/A	0.00221			
60	0.07000	0.05600	0.00222	0.00072	N/A	0.00242			
61	0.07000	0.05600	0.00236	0.00076	N/A	0.00264			
62	0.10000	0.10000	0.00250	0.00080	N/A	0.00289			
63	0.12000	0.12000	0.00250	0.00084	N/A	0.00317			
64	0.17000	0.17000	0.00250	0.00088	N/A	0.00350			
65	0.23000	0.18400	0.00250	0.00092	N/A	0.00385			
66	0.19000	0.15200	0.00250	0.00096	N/A	0.00425			
67	0.19000	0.30000	0.00250	0.00100	N/A	0.00471			
68	0.19000	0.19000	0.00250	0.00104	N/A	0.00520			
69	0.19000	0.19000	0.00250	0.00108	N/A	0.00575			
70	0.24000	0.24000	0.00250	0.00112	N/A	0.00636			
71	0.19000	0.19000	0.00250	0.00116	N/A	0.00703			
72	0.19000	0.19000	0.00250	0.00120	N/A	0.00777			
73	0.19000	0.19000	0.00250	0.00124	N/A	0.00859			
74	0.19000	0.19000	0.00250	0.00128	N/A	0.00950			
75	1.00000	1.00000	0.00000	0.00000	N/A	0.01050			

1. Service retirement probabilities vary by years of service. The applicable retirement probability loading that varies by years of service is shown on this page in a separate column.

2. The retirement probability loading is applied to the service retirement probability at each member's applicable age and years of service.

# Table A-10 Probability of Separation from Active Service for General Members Plan E – Male

Age	Service Retirement <sup>(1)</sup>	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations	Retirement Rate Loading <sup>(2)</sup>
								<b>_</b>
18	0.00000	N/A	N/A	N/A	0.00043	0	0.08000	70%
19	0.00000	N/A	N/A	N/A	0.00046	1	0.06500	70%
20 21	0.00000	N/A	N/A	N/A	0.00044	2	0.05000	70% 70%
21	0.00000	N/A N/A	N/A N/A	N/A N/A	0.00043 0.00040	3 4	0.04250 0.03500	70%
22	0.00000	N/A N/A	N/A N/A					70%
23 24	0.00000 0.00000	N/A N/A	N/A N/A	N/A N/A	0.00037 0.00035	5 6	0.03100 0.02700	70%
24 25	0.00000	N/A	N/A	N/A	0.00034	7	0.02300	70%
26	0.00000	N/A	N/A	N/A	0.00034	8	0.02300	70%
20	0.00000	N/A	N/A	N/A	0.00037	9	0.02300	70%
28	0.00000	N/A	N/A	N/A	0.00040	10	0.02300	70%
29	0.00000	N/A	N/A	N/A	0.00041	10	0.01900	70%
30	0.00000	N/A	N/A	N/A	0.00043	12	0.01800	70%
31	0.00000	N/A	N/A	N/A	0.00046	13	0.01680	70%
32	0.00000	N/A	N/A	N/A	0.00048	14	0.01560	70%
33	0.00000	N/A	N/A	N/A	0.00050	15	0.01440	70%
34	0.00000	N/A	N/A	N/A	0.00053	16	0.01320	70%
35	0.00000	N/A	N/A	N/A	0.00056	17	0.01200	70%
36	0.00000	N/A	N/A	N/A	0.00060	18	0.01160	70%
37	0.00000	N/A	N/A	N/A	0.00064	19	0.01120	70%
38	0.00000	N/A	N/A	N/A	0.00068	20	0.01080	70%
39	0.00000	N/A	N/A	N/A	0.00073	21	0.01040	70%
40	0.00000	N/A	N/A	N/A	0.00079	22	0.01000	70%
41	0.00000	N/A	N/A	N/A	0.00085	23	0.01000	70%
42	0.00000	N/A	N/A	N/A	0.00092	24	0.01000	70%
43	0.00000	N/A	N/A	N/A	0.00100	25	0.01000	100%
44	0.00000	N/A	N/A	N/A	0.00108	26	0.01000	100%
45	0.00000	N/A	N/A	N/A	0.00118	27	0.01000	100%
46	0.00000	N/A	N/A	N/A	0.00128	28	0.01000	100%
47	0.00000	N/A	N/A	N/A	0.00139	29	0.01000	100%
48	0.00000	N/A	N/A	N/A	0.00152	30 & Above	0.01000	130%
49	0.00000	N/A	N/A	N/A	0.00166			
50	0.00000	N/A	N/A	N/A	0.00179			
51	0.00000	N/A	N/A	N/A	0.00194			
52	0.00000	N/A	N/A	N/A	0.00210			
53	0.00000	N/A	N/A	N/A	0.00227			
54	0.00000	N/A	N/A	N/A	0.00244			
55	0.02000	N/A	N/A	N/A	0.00263			
56	0.02000	N/A	N/A	N/A	0.00283			
57	0.02500	N/A	N/A	N/A	0.00306			
58 59	0.02500	N/A N/A	N/A N/A	N/A	0.00330			
59 60	0.03000 0.04000	N/A N/A	N/A N/A	N/A N/A	0.00355 0.00383			
61	0.06000	N/A N/A	N/A N/A	N/A N/A	0.00383			
62	0.09000	N/A N/A	N/A N/A	N/A N/A	0.00413			
63	0.09000	N/A	N/A	N/A	0.00443			
64	0.19000	N/A	N/A	N/A	0.00520			
65	0.27000	N/A	N/A	N/A	0.00562			
66	0.20000	N/A	N/A	N/A	0.00607			
67	0.20000	N/A	N/A	N/A	0.00658			
68	0.20000	N/A	N/A	N/A	0.00713			
69	0.20000	N/A	N/A	N/A	0.00775			
70	0.20000	N/A	N/A	N/A	0.00844			
71	0.20000	N/A	N/A	N/A	0.00920			
72	0.20000	N/A	N/A	N/A	0.01004			
73	0.20000	N/A	N/A	N/A	0.01098			
74	0.20000	N/A	N/A	N/A	0.01201			
75	1.00000	N/A	N/A	N/A	0.01315			

1. Service retirement probabilities vary by years of service. The applicable retirement probability loading that varies by years of service is shown on this page in a separate column.

2. The retirement probability loading is applied to the service retirement probability at each member's applicable age and years of service.

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# Table A-11 Probability of Separation from Active Service for General Members Plan E – Female

Age	Service Retirement <sup>(1)</sup>	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations	Retirement Rate Loading <sup>(2)</sup>
18	0.00000	N/A	N/A	N/A	0.00017	0	0.08000	70%
19	0.00000	N/A	N/A	N/A	0.00017	1	0.06500	70%
20	0.00000	N/A	N/A	N/A	0.00017	2	0.05000	70%
21	0.00000	N/A	N/A	N/A	0.00016	3	0.04250	70%
22	0.00000	N/A	N/A	N/A	0.00014	4	0.03500	70%
23	0.00000	N/A	N/A	N/A	0.00013	5	0.03100	70%
24	0.00000	N/A	N/A	N/A	0.00012	6	0.02700	70%
25	0.00000	N/A	N/A	N/A	0.00012	7	0.02300	70%
26	0.00000	N/A	N/A	N/A	0.00013	8	0.02300	70%
27	0.00000	N/A	N/A	N/A	0.00014	9	0.02300	70%
28	0.00000	N/A	N/A	N/A	0.00016	10	0.02300	70%
29	0.00000	N/A	N/A	N/A	0.00017	11	0.01900	70%
30	0.00000	N/A	N/A	N/A	0.00020	12	0.01800	70%
31 32	0.00000	N/A N/A	N/A N/A	N/A N/A	0.00021	13	0.01680	70% 70%
32	0.00000 0.00000	N/A N/A	N/A N/A	N/A N/A	0.00023 0.00025	14 15	0.01560 0.01440	70%
34	0.00000	N/A	N/A	N/A	0.00023	16	0.01320	70%
35	0.00000	N/A	N/A	N/A	0.00030	10	0.01200	70%
36	0.00000	N/A	N/A	N/A	0.00033	18	0.01160	70%
37	0.00000	N/A	N/A	N/A	0.00036	19	0.01120	70%
38	0.00000	N/A	N/A	N/A	0.00039	20	0.01080	70%
39	0.00000	N/A	N/A	N/A	0.00043	21	0.01040	70%
40	0.00000	N/A	N/A	N/A	0.00047	22	0.01000	70%
41	0.00000	N/A	N/A	N/A	0.00052	23	0.01000	70%
42	0.00000	N/A	N/A	N/A	0.00056	24	0.01000	70%
43	0.00000	N/A	N/A	N/A	0.00061	25	0.01000	100%
44	0.00000	N/A	N/A	N/A	0.00066	26	0.01000	100%
45	0.00000	N/A	N/A	N/A	0.00073	27	0.01000	100%
46	0.00000	N/A	N/A	N/A	0.00079	28	0.01000	100%
47	0.00000	N/A	N/A	N/A	0.00086	29	0.01000	100%
48	0.00000	N/A	N/A	N/A	0.00092	30 & Above	0.01000	130%
49	0.00000	N/A N/A	N/A N/A	N/A	0.00100			
50 51	0.00000 0.00000	N/A N/A	N/A N/A	N/A N/A	0.00108 0.00117			
52	0.00000	N/A N/A	N/A N/A	N/A N/A	0.00126			
53	0.00000	N/A	N/A	N/A	0.00120			
54	0.00000	N/A	N/A	N/A	0.00147			
55	0.02000	N/A	N/A	N/A	0.00160			
56	0.02000	N/A	N/A	N/A	0.00173			
57	0.02500	N/A	N/A	N/A	0.00187			
58	0.02500	N/A	N/A	N/A	0.00203			
59	0.03000	N/A	N/A	N/A	0.00221			
60	0.04000	N/A	N/A	N/A	0.00242			
61	0.06000	N/A	N/A	N/A	0.00264			
62	0.09000	N/A	N/A	N/A	0.00289			
63	0.09000	N/A	N/A	N/A	0.00317			
64	0.19000	N/A	N/A	N/A	0.00350			
65	0.27000	N/A	N/A	N/A	0.00385			
66 67	0.20000	N/A	N/A	N/A	0.00425			
67 68	0.20000 0.20000	N/A N/A	N/A N/A	N/A N/A	0.00471 0.00520			
69	0.20000	N/A N/A	N/A N/A	N/A N/A	0.00520			
70	0.20000	N/A N/A	N/A N/A	N/A N/A	0.00636			
70	0.20000	N/A	N/A	N/A	0.00703			
72	0.20000	N/A	N/A	N/A	0.00777			
73	0.20000	N/A	N/A	N/A	0.00859			
74	0.20000	N/A	N/A	N/A	0.00950			
75	1.00000	N/A	N/A	N/A	0.01050			

1. Service retirement probabilities vary by years of service. The applicable retirement probability loading that varies by years of service is shown on this page in a separate column.

2. The retirement probability loading is applied to the service retirement probability at each member's applicable age and years of service.

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#### Table A-12 Probability of Separation from Active Service for Safety Members Plans A, B, & C – Male

Service Retirement <sup>(1)</sup>									Potiromont
Age	Plans A & B	Plan C	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations	Retirement Rate Loading <sup>(2)</sup>
18	0.00000	0.00000	0.00200	0.00000	0.00010	0.00037	0	0.05000	30%
19	0.00000	0.00000	0.00200	0.00000	0.00010	0.00040	1	0.03750	30%
20	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	2	0.02000	30%
21	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	3	0.01500	30%
22	0.00000	0.00000	0.00200	0.00000	0.00010	0.00040	4	0.01200	30%
23	0.00000	0.00000	0.00200	0.00000	0.00010	0.00039	5	0.01130	30%
24	0.00000	0.00000	0.00200	0.00000	0.00010	0.00038	6	0.01070	30%
25	0.00000	0.00000	0.00200	0.00000	0.00010	0.00037	7	0.01000	30%
26	0.00000	0.00000	0.00200	0.00000	0.00010	0.00038	8	0.00920	30%
27	0.00000	0.00000	0.00200	0.00000	0.00010	0.00039	9	0.00840	30%
28	0.00000	0.00000	0.00200	0.00000	0.00010	0.00040	10	0.00760	30%
29	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	11	0.00680	30%
30	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	12	0.00600	30%
31	0.00000	0.00000	0.00200	0.00000	0.00010	0.00042	13	0.00560	30%
32	0.00000	0.00000	0.00200	0.00000	0.00010	0.00043	14	0.00520	30%
33	0.00000	0.00000	0.00210	0.00000	0.00010	0.00044	15	0.00480	40%
34	0.00000	0.00000	0.00220	0.00000	0.00010	0.00045	16	0.00440	40%
35	0.00000	0.00000	0.00230	0.00000	0.00010	0.00047	17	0.00400	40%
36	0.00000	0.00000	0.00240	0.00000	0.00010	0.00049	18	0.00360	40%
37	0.00000	0.00000	0.00250	0.00000	0.00010	0.00050	19	0.00320	40%
38	0.00000	0.00000	0.00260	0.00000	0.00010	0.00053	20	0.00280	70%
39	0.00000	0.00000	0.00270	0.00000	0.00010	0.00056	21	0.00240	70%
40	0.00750	0.00000	0.00280	0.00000	0.00010	0.00059	22	0.00200	70%
41	0.00750	0.00000	0.00290	0.00000	0.00010	0.00062	23	0.00200	70%
42	0.00750	0.00000	0.00300	0.00000	0.00010	0.00067	24	0.00200	70%
43	0.00750	0.00000	0.00310	0.00000	0.00010	0.00071	25	0.00200	110%
44	0.00750	0.00000	0.00320	0.00000	0.00010	0.00076	26	0.00200	110%
45	0.00750	0.00000	0.00330	0.00000	0.00010	0.00082	27	0.00200	110%
46	0.00750	0.00000	0.00340	0.00000	0.00010	0.00088	28	0.00200	110%
47	0.00750	0.00000	0.00350	0.00000	0.00010	0.00095	29	0.00200	110%
48	0.00750	0.00000	0.00400	0.00000	0.00010	0.00102	30 & Above	0.00000	170%
49	0.00750	0.00000	0.00500	0.00000	0.00010	0.00111			
50	0.02000	0.02000	0.00750	0.00000	0.00010	0.00120			
51	0.02000	0.02000	0.00750	0.00000	0.00010	0.00129			
52	0.02000	0.02000	0.00750	0.00000	0.00010	0.00140			
53	0.03000	0.03000	0.02000	0.00000	0.00010	0.00151			
54	0.12000	0.08000	0.02000	0.00000	0.00010	0.00162			
55	0.22000	0.15000	0.07500	0.00000	0.00010	0.00175			
56	0.18000	0.15000	0.07500	0.00000	0.00010	0.00190			
57	0.14000	0.23000	0.10000	0.00000	0.00010	0.00205			
58	0.15000	0.15000	0.10000	0.00000	0.00010	0.00223			
59	0.22000	0.22000	0.10000	0.00000	0.00010	0.00243			
60	0.21000	0.21000	0.10000	0.00000	0.00010	0.00264			
61	0.20000	0.20000	0.05000	0.00000	0.00010	0.00288			
62	0.20000	0.20000	0.05000	0.00000	0.00010	0.00315			
63	0.20000	0.20000	0.05000	0.00000	0.00010	0.00344			
64	0.23000	0.23000	0.05000	0.00000	0.00010	0.00375			
65	1.00000	1.00000	0.00000	0.00000	0.00000	0.00410			

1. Service retirement probabilities vary by years of service. The applicable retirement probability loading that varies by years of service is shown on this page in a separate column.

2. The retirement probability loading is applied to the service retirement probability at each member's applicable age and years of service.

#### Table A-13 Probability of Separation from Active Service for Safety Members Plans A, B, & C – Female

	Service Retirement <sup>(1)</sup>								Retirement
Age	Plans A & B	Plan C	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations	Rate Loading <sup>(2)</sup>
18	0.00000	0.00000	0.00300	0.00000	0.00010	0.00014	0	0.05000	30%
19	0.00000	0.00000	0.00300	0.00000	0.00010	0.00015	1	0.03750	30%
20	0.00000	0.00000	0.00300	0.00000	0.00010	0.00016	2	0.02000	30%
21	0.00000	0.00000	0.00300	0.00000	0.00010	0.00017	3	0.01500	30%
22	0.00000	0.00000	0.00300	0.00000	0.00010	0.00017	4	0.01200	30%
23	0.00000	0.00000	0.00300	0.00000	0.00010	0.00018	5	0.01130	30%
24	0.00000	0.00000	0.00300	0.00000	0.00010	0.00019	6	0.01070	30%
25	0.00000	0.00000	0.00300	0.00000	0.00010	0.00020	7	0.01000	30%
26	0.00000	0.00000	0.00300	0.00000	0.00010	0.00021	8	0.00920	30%
27	0.00000	0.00000	0.00300	0.00000	0.00010	0.00022	9	0.00840	30%
28	0.00000	0.00000	0.00340	0.00000	0.00010	0.00024	10	0.00760	30%
29	0.00000	0.00000	0.00380	0.00000	0.00010	0.00025	11	0.00680	30%
30	0.00000	0.00000	0.00420	0.00000	0.00010	0.00027	12	0.00600	30%
31	0.00000	0.00000	0.00460	0.00000	0.00010	0.00028	13	0.00560	30%
32	0.00000	0.00000	0.00500	0.00000	0.00010	0.00030	14	0.00520	30%
33	0.00000	0.00000	0.00560	0.00000	0.00010	0.00032	15	0.00480	40%
34	0.00000	0.00000	0.00620	0.00000	0.00010	0.00034	16	0.00440	40%
35	0.00000	0.00000	0.00680	0.00000	0.00010	0.00036	17	0.00400	40%
36	0.00000	0.00000	0.00740	0.00000	0.00010	0.00038	18	0.00360	40%
37	0.00000	0.00000	0.00800	0.00000	0.00010	0.00041	19	0.00320	40%
38	0.00000	0.00000	0.00840	0.00000	0.00010	0.00043	20	0.00280	70%
39	0.00000	0.00000	0.00880	0.00000	0.00010	0.00046	21	0.00240	70%
40	0.00750	0.00000	0.00920	0.00000	0.00010	0.00049	22	0.00200	70%
41	0.00750	0.00000	0.00960	0.00000	0.00010	0.00052	23	0.00200	70%
42	0.00750	0.00000	0.01000	0.00000	0.00010	0.00056	24	0.00200	70%
43	0.00750	0.00000	0.01040	0.00000	0.00010	0.00059	25	0.00200	110%
44	0.00750	0.00000	0.01080	0.00000	0.00010	0.00063	26	0.00200	110%
45	0.00750	0.00000	0.01120	0.00000	0.00010	0.00067	27	0.00200	110%
46	0.00750	0.00000	0.01160	0.00000	0.00010	0.00071	28	0.00200	110%
47	0.00750	0.00000	0.01200	0.00000	0.00010	0.00076	29	0.00200	110%
48	0.00750	0.00000	0.01300	0.00000	0.00010	0.00080	30 & Above	0.00000	170%
49	0.00750	0.00000	0.01500	0.00000	0.00010	0.00085			
50	0.02000	0.02000	0.01800	0.00000	0.00010	0.00091			
51	0.02000	0.02000	0.02000	0.00000	0.00010	0.00097			
52	0.02000	0.02000	0.02400	0.00000	0.00010	0.00103			
53	0.03000	0.03000	0.02800	0.00000	0.00010	0.00109			
54	0.12000	0.08000	0.03200	0.00000	0.00010	0.00116			
55	0.22000	0.15000	0.11000	0.00000	0.00010	0.00123			
56	0.18000	0.15000	0.06000	0.00000	0.00010	0.00131			
57	0.14000	0.23000	0.06000	0.00000	0.00010	0.00140			
58	0.15000	0.15000	0.06000	0.00000	0.00010	0.00148			
59	0.22000	0.22000	0.06000	0.00000	0.00010	0.00158			
60	0.21000	0.21000	0.06000	0.00000	0.00010	0.00168			
61	0.20000	0.20000	0.06000	0.00000	0.00010	0.00178			
62	0.20000	0.20000	0.06000	0.00000	0.00010	0.00190			
63	0.20000	0.20000	0.06000	0.00000	0.00010	0.00202			
64	0.23000	0.23000	0.06000	0.00000	0.00010	0.00215			
65	1.00000	1.00000	0.00000	0.00000	0.00000	0.00228			

1. Service retirement probabilities vary by years of service. The applicable retirement probability loading that varies by years of service is shown on this page in a separate column.

2. The retirement probability loading is applied to the service retirement probability at each member's applicable age and years of service.

# Table A-14 Probability of Initial Medical Enrollment

Males and Females:

Assumed
Enrollment %
7%
43%
64%
74%
95%
95%

This applies to the medical and Medicare Part B premium reimbursement benefits.

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# Table A-15A Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 1

# Non-Local 1014 Firefighters Retirees

Deduction			Pr	e 65	Post 65		
Code	Plan	Tier	Male	Female	Male	Female	
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only	0.3%	0.5%			
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse	0.3%	0.1%			
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family	0.9%	0.1%			
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children		0.1%			
205	Anthem Blue Cross Prudent Buyer Plan	Minor Survivor					
211	Anthem Blue Cross I	Retiree Only	0.5%	0.4%	0.3%	0.2%	
212	Anthem Blue Cross I	Retiree and Spouse		0.3%			
213	Anthem Blue Cross I	Retiree, Spouse and Children	0.5%	0.2%			
214 215	Anthem Blue Cross I Anthem Blue Cross I	Retiree and Children Minor Survivor		0.1%			
			4.5%	7.7%	0.8%	4.00/	
221 222	Anthem Blue Cross II Anthem Blue Cross II	Retiree Only Retiree and Spouse	4.5%	7.0%	2.3%	1.3% 0.9%	
222	Anthem Blue Cross II	Retiree, Spouse and Children	14.9%	3.0%	0.8%	0.9%	
224	Anthem Blue Cross II	Retiree and Children	1.5%	1.3%	0.3%		
225	Anthem Blue Cross II	Minor Survivor	1.070	1.070	0.070		
240	Anthem Blue Cross III	One Medicare		0.3%	7.1%	11.5%	
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare		0.1%	0.2%	11.070	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare		0.170	5.5%	1.0%	
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare		0.2%	7.1%	5.1%	
244	Anthem Blue Cross III	Retiree and Children 1 Medicare					
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			0.4%	0.1%	
246	Anthem Blue Cross III	Retiree and Family 1 Medicare				-	
247	Anthem Blue Cross III	Retiree and Family 1 Medicare		0.3%	1.3%	0.1%	
248	Anthem Blue Cross III	Retiree and Family 2 Medicare					
249	Anthem Blue Cross III	Retiree and Family 2 Medicare			0.6%	0.1%	
250	Anthem Blue Cross III	Retiree and Family 3 Medicare			0.3%		
301	Cigna Network Model Plan	Retiree Only	0.1%				
302	Cigna Network Model Plan	Retiree and Spouse	0.2%				
303	Cigna Network Model Plan	Retiree and Family	0.1%				
304	Cigna Network Model Plan	Retiree and Children					
305	Cigna Network Model Plan	Minor Survivor					
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only					
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse					
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)					
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children					
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)					
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)					
393	Kaiser (WA)	Retiree and Family					
394	Kaiser (WA)	Retiree and Family					
395	Kaiser (WA)	Retiree and Family					
396	Kaiser (WA)	Retiree and Family					
397	Kaiser (WA)	Retiree and Family					
398 399	Kaiser (WA)	Retiree and Family					
399 400	Kaiser (WA) Kaiser (WA)	Retiree and Family Retiree and Family					
400		Retiree Basic (Under 65)	11.0%	26.2%			
401	Kaiser (CA) Kaiser (CA)	Retiree Cost ("M" Coverage)	11.0%	20.2%			
402 403	Kaiser (CA) Kaiser (CA)	Retiree Risk (Senior Advantage)		0.6%	18.0%	38.2%	
403	Kaiser (CA) Kaiser (CA)	Retiree Excess I		0.070	0.4%	1.0%	
404	Kaiser (CA)	Retiree Excess I - Part B			1.3%	2.5%	
405	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)				2.070	
400	Kaiser (CA)	Family Basic	33.0%	32.0%			
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic	00.070	02.070			
413	Kaiser (CA)	One Advantage, Others Basic			20.8%	5.0%	
414	Kaiser (CA)	One Excess I, Others Basic			0.5%		
415	Kaiser (CA)	Two+ Cost ("M" Coverage)					
416	Kaiser (CA)	One Advantage, One Cost ("M" Coverage)					
417	Kaiser (CA)	One Excess I, One Cost ("M" Coverage)					
418	Kaiser (CA)	Two+ Advantage			15.9%	16.5%	
419	Kaiser (CA)	One Excess I, One Advantage			0.2%		
420	Kaiser (CA)	Two+ Excess I					
421	Kaiser (CA)	Survivor					
422	Kaiser (CA)	One Excess II - Part B, One Basic			1.2%	0.5%	
423	Kaiser (CA)	One Excess III (MNP), One Basic					
424	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B					
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess III (MNP)					
426	Kaiser (CA)	One Risk, One Excess II - Part B				0.4%	
427	Kaiser (CA)	One Risk, One Excess III (MNP)					
428	Kaiser (CA)	One Excess I, One Excess II - Part B					
429	Kaiser (CA)	One Excess I, One Excess III (MNP)					
430	Kaiser (CA)	Two Excess II - Part B					
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)			0.1%		
432	Kaiser (CA)	Two Excess III - Both (MNP)					

#### Table A-15A Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 1 (continued)

#### **Non-Local 1014 Firefighters Retirees**

Deduction			P	re 65	Post 65		
Code	Plan	Tier	Male	Female	Male	Female	
450	Kaiser - Colorado Basic	Retiree Basic					
	Kaiser - Colorado	Retiree Risk					
	Kaiser (Other) Kaiser - Colorado	Retiree Only Retiree Basic (Two Party)					
	Kaiser - Colorado	Retiree Basic Family					
	Kaiser - Colorado	One Risk. One Basic					
	Kaiser (Other)	Retiree and Spouse					
457	Kaiser - Colorado	Two Retiree Risk					
	Kaiser - Colorado	One Risk, Two or More Dependents					
	Kaiser - Colorado	Two Risk, Two or More Dependents					
	Kaiser (Other)	Retiree and Spouse					
	Kaiser - Georgia	One Medicare Member with Part B only					
	Kaiser - Georgia	One Medicare Member with Part A only					
	Kaiser - Georgia	One Member without Medicare Part A&B One Medicare Member (Renal Failure)					
	Kaiser - Georgia Kaiser - Georgia	One Medicare Member + One Medicare with Part B only					
	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only					
	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only One Medicare Member + One Medicare without Part A&B					
	Kaiser - Georgia Basic	Basic					
	Kaiser - Georgia	Retiree Risk					
463	Kaiser - Georgia	Retiree (Two Party)					
464	Kaiser - Georgia	Retiree Basic Family					
	Kaiser - Georgia	One Retiree Risk, One Basic					
	Kaiser - Georgia	Two Retiree Risk					
	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic					
	Kaiser - Georgia	Two Retiree Risk, One Basic					
	Kaiser - Georgia	Three Retiree Risk, One Basic					
	Kaiser - Georgia Kaiser - Hawaii	Any other Family, at least one Retiree Risk Retiree Basic (Under 65)					
	Kaiser - Hawaii	Retiree Basic (Under 65) Retiree Risk					
	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B					
	Kaiser - Hawaii Basic	Retiree Basic (Two Party)					
	Kaiser - Hawaii	Retiree Basic Family (Under 65)					
	Kaiser - Hawaii	One Retiree Risk, One Basic					
	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic					
	Kaiser - Hawaii	Two Retiree Risk					
	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B					
	Kaiser - Oregon	Retiree Basic (Under 65)					
	Kaiser - Oregon	Retiree Risk					
	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B					
	Kaiser - Oregon	Retiree Basic (Two Party)					
	Kaiser - Oregon Basic Kaiser - Oregon	Retiree Basic Family (Under 65) One Retiree Risk, One Basic					
	Kaiser - Oregon	Retiree Cost					
	Kaiser - Oregon	Two Retiree Risk					
	Kaiser - Oregon	Retiree w/ Part A only					
490	Kaiser - Oregon	Retiree w/ Part B only					
491	Kaiser - Oregon	One Risk, One Medicare Part A only					
	Kaiser - Oregon	One Risk, One Over 65 No Medicare					
	Kaiser - Oregon	One Risk, Two Basic					
	Kaiser - Oregon	Two Risk, One Basic					
	Kaiser - Oregon	Two Over 65 unassigned Medicare					
	Kaiser - Oregon	Two Medicare Part A only					
	Kaiser - Oregon Kaiser - Oregon	One Basic, One Medicare Part A only One Basic, One over 65 unassigned Medicare A&B					
	SCAN Health Plan	One Basic, One over 65 unassigned Medicare A&B Retiree Only			0.5%	0.8%	
	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)			0.5%	0.8%	
	United Healthcare Medicare Advantage	Retiree Only		0.2%	3.8%	9.2%	
	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	0.6%	2.0%	3.9%	1.0%	
	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)	0.070	2.070	3.7%	4.1%	
	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (1 Medicare)	0.1%	0.5%	1.7%	0.1%	
	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (2 Medicare)	-		0.5%	-	
706	United Healthcare Medicare Advantage	Minor Survivor					
	United Healthcare	Single	3.5%	8.6%			
	United Healthcare	Two-Party	7.0%	5.5%			
	United Healthcare	Family	8.5%	2.7%			
Total			100.0%	100.0%	100.0%	100.0%	
		Probability of enrolling at least one dependent	80.1%	55.5%	67.8%	35.3%	

# Table A-15A Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 1 (continued)

# Firefighters Local 1014 Retirees

Deduction			Pre 65		Pos	st 65
Code	Plan	Tier	Male	Female	Male	Female
801	Firefighters Local 1014	Med-Member under 65	6.5%	6.5%		
802	Firefighters Local 1014	Med-Member +1 under 65	35.0%	35.0%		
803	Firefighters Local 1014	Med-Member +2 under 65	58.5%	58.5%		
804	Firefighters Local 1014	Med-Member with Medicare			12.0%	12.0%
805	Firefighters Local 1014	Med-Member +1; 1 MDC				
806	Firefighters Local 1014	Med-Member +1; 2 MDC			28.0%	28.0%
807	Firefighters Local 1014	Med-Member +2; 1 MDC				
808	Firefighters Local 1014	Med-Member +2; 2 MDC			60.0%	60.0%
809	Firefighters Local 1014	Med-Surv. Sp. Under 65				
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65				
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65				
812	Firefighters Local 1014	Med-Surv. Sp. With MDC				
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC				
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC				
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC				
Total			100.0%	100.0%	100.0%	100.0%
		Probability of enrolling at least one dependent	93.5%	93.5%	88.0%	88.0%

# Table A-15B Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 2

#### Non-Local 1014 Firefighters Retirees

			P	re 65	Post 65	
Deduction Code	Plan	Tier	Male	Female	Male	Female
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only	0.3%	0.5%	wate	remaie
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse	0.3%	0.1%		
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family	0.9%	0.1%		
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children Minor Survivor		0.1%		
205 211	Anthem Blue Cross Prudent Buyer Plan Anthem Blue Cross I	Retiree Only	0.5%	0.4%		
212	Anthem Blue Cross I	Retiree and Spouse	0.576	0.3%		
213	Anthem Blue Cross I	Retiree, Spouse and Children	0.5%	0.2%		
214	Anthem Blue Cross I	Retiree and Children		0.1%		
215	Anthem Blue Cross I Anthem Blue Cross II	Minor Survivor	4.50/	7.7%		
221 222	Anthem Blue Cross II Anthem Blue Cross II	Retiree Only Retiree and Spouse	4.5% 12.5%	7.7%		
223	Anthem Blue Cross II	Retiree, Spouse and Children	14.9%	3.0%		
224	Anthem Blue Cross II	Retiree and Children	1.5%	1.3%		
225	Anthem Blue Cross II	Minor Survivor				
240	Anthem Blue Cross III	One Medicare		0.3%	8.2%	13.0%
241 242	Anthem Blue Cross III Anthem Blue Cross III	Retiree and Spouse 1 Medicare Retiree and Spouse 1 Medicare		0.1%	0.2% 7.8%	1.9%
242	Anthem Blue Cross III	Retiree and Spouse 2 Medicare		0.2%	7.0%	5.1%
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		0.270	1.170	0.170
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			0.7%	0.1%
246	Anthem Blue Cross III	Retiree and Family 1 Medicare				
247	Anthem Blue Cross III	Retiree and Family 1 Medicare		0.3%	2.1%	0.1%
248 249	Anthem Blue Cross III Anthem Blue Cross III	Retiree and Family 2 Medicare Retiree and Family 2 Medicare			0.6%	0.1%
250	Anthem Blue Cross III	Retiree and Family 3 Medicare			0.3%	0.176
301	Cigna Network Model Plan	Retiree Only	0.1%		0.070	
302	Cigna Network Model Plan	Retiree and Spouse	0.2%			
303	Cigna Network Model Plan	Retiree and Family	0.1%			
304	Cigna Network Model Plan	Retiree and Children Minor Survivor				
305 321	Cigna Network Model Plan Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only	-			
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse				
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)				
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children				
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)				
329 393	Cigna Medicare Select Plus Rx (AZ) Kaiser (WA)	Risk-Retiree & Family (2 Medicare)	-			
393 394	Kaiser (WA) Kaiser (WA)	Retiree and Family Retiree and Family				
395	Kaiser (WA)	Retiree and Family				
396	Kaiser (WA)	Retiree and Family				
397	Kaiser (WA)	Retiree and Family				
398	Kaiser (WA)	Retiree and Family				
399 400	Kaiser (WA) Kaiser (WA)	Retiree and Family Retiree and Family				
400	Kaiser (CA)	Retiree Basic (Under 65)	11.0%	26.2%		
402	Kaiser (CA)	Retiree Cost ("M" Coverage)		20.270		
403	Kaiser (CA)	Retiree Risk (Senior Advantage)		0.6%	19.7%	41.7%
404	Kaiser (CA)	Retiree Excess I				
405	Kaiser (CA)	Retiree Excess II - Part B				
406 411	Kaiser (CA) Kaiser (CA)	Excess III - Medicare Not Provided (MNP) Family Basic	33.0%	32.0%		
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic	55.070	02.070		
413	Kaiser (CA)	One Advantage, Others Basic			22.6%	5.5%
414	Kaiser (CA)	One Excess I, Others Basic				
415	Kaiser (CA)	Two+ Cost ("M" Coverage)	1			
416 417	Kaiser (CA) Kaiser (CA)	One Advantage, One Cost ("M" Coverage) One Excess I, One Cost ("M" Coverage)				
417	Kaiser (CA)	Two+ Advantage	1		16.1%	16.9%
419	Kaiser (CA)	One Excess I, One Advantage				
420	Kaiser (CA)	Two+ Excess I	1			
421	Kaiser (CA)	Survivor				
422	Kaiser (CA)	One Excess II - Part B, One Basic				
423 424	Kaiser (CA) Kaiser (CA)	One Excess III (MNP), One Basic One Cost ("M" Coverage), One Excess II - Part B				
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B One Cost ("M" Coverage), One Excess III (MNP)				
426	Kaiser (CA)	One Risk, One Excess II - Part B				
427	Kaiser (CA)	One Risk, One Excess III (MNP)				
428	Kaiser (CA)	One Excess I, One Excess II - Part B	1			
429	Kaiser (CA)	One Excess I, One Excess III (MNP)				
430	Kaiser (CA) Kaiser (CA)	Two Excess II - Part B One Excess II - Part B, One Excess III (MNP)	1			
431						

#### Table A-15B Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 2 (continued)

### **Non-Local 1014 Firefighters Retirees**

			Pr	e 65	Post 65	
Deduction Code	Plan	Tier	Male	Female	Male	Female
50	Kaiser - Colorado Basic	Retiree Basic				
51	Kaiser - Colorado	Retiree Risk				
52	Kaiser (Other)	Retiree Only				
53 54	Kaiser - Colorado Kaiser - Colorado	Retiree Basic (Two Party) Retiree Basic Family				
55	Kaiser - Colorado Kaiser - Colorado	One Risk. One Basic				
56	Kaiser (Other)	Retiree and Spouse				
57	Kaiser - Colorado	Two Retiree Risk				
58	Kaiser - Colorado	One Risk, Two or More Dependents				
59	Kaiser - Colorado	Two Risk, Two or More Dependents				
60	Kaiser (Other)	Retiree and Spouse				
40	Kaiser - Georgia	One Medicare Member with Part B only				
41	Kaiser - Georgia	One Medicare Member with Part A only				
42	Kaiser - Georgia	One Member without Medicare Part A&B				
43 44	Kaiser - Georgia	One Medicare Member (Renal Failure)				
44 45	Kaiser - Georgia	One Medicare Member + One Medicare with Part B only One Medicare Member + One Medicare with Part A only				
45 46	Kaiser - Georgia Kaiser - Georgia	One Medicare Member + One Medicare with Part A only One Medicare Member + One Medicare without Part A&B				
40 61	Kaiser - Georgia Basic	Basic				
62	Kaiser - Georgia Dasic	Retiree Risk				
63	Kaiser - Georgia	Retiree (Two Party)				
64	Kaiser - Georgia	Retiree Basic Family				
65	Kaiser - Georgia	One Retiree Risk, One Basic				
66	Kaiser - Georgia	Two Retiree Risk				
67	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic				
68	Kaiser - Georgia	Two Retiree Risk, One Basic				
69	Kaiser - Georgia	Three Retiree Risk, One Basic				
70	Kaiser - Georgia	Any other Family, at least one Retiree Risk				
71	Kaiser - Hawaii	Retiree Basic (Under 65)				
72	Kaiser - Hawaii	Retiree Risk				
73	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B				
74	Kaiser - Hawaii Basic	Retiree Basic (Two Party)				
175 176	Kaiser - Hawaii Kaiser - Hawaii	Retiree Basic Family (Under 65) One Retiree Risk, One Basic				
77	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic				
78	Kaiser - Hawaii	Two Retiree Risk				
79	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B				
81	Kaiser - Oregon	Retiree Basic (Under 65)				
182	Kaiser - Oregon	Retiree Risk				
83	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B				
84	Kaiser - Oregon	Retiree Basic (Two Party)				
85	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)				
86	Kaiser - Oregon	One Retiree Risk, One Basic				
87	Kaiser - Oregon	Retiree Cost				
88	Kaiser - Oregon	Two Retiree Risk				
89	Kaiser - Oregon	Retiree w/ Part A only				
90 91	Kaiser - Oregon	Retiree w/ Part B only				
92	Kaiser - Oregon Kaiser - Oregon	One Risk, One Medicare Part A only One Risk, One Over 65 No Medicare				
93	Kaiser - Oregon	One Risk, Two Basic				
94	Kaiser - Oregon	Two Risk, One Basic				
95	Kaiser - Oregon	Two Over 65 unassigned Medicare				
96	Kaiser - Oregon	Two Medicare Part A only				
97	Kaiser - Oregon	One Basic, One Medicare Part A only				
98	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B				
511	SCAN Health Plan	Retiree Only			0.5%	0.8%
i13	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)			0.5%	0.4%
01	United Healthcare Medicare Advantage	Retiree Only		0.2%	3.8%	9.2%
02	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	0.6%	2.0%	3.9%	1.0%
03	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)	o	0.5%	3.7%	4.1%
04	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (1 Medicare)	0.1%	0.5%	1.7%	0.1%
05	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (2 Medicare)			0.5%	
06	United Healthcare Medicare Advantage	Minor Survivor	0.50/	0.001		
07	United Healthcare	Single	3.5%	8.6%		
	United Healthcare	Two-Party	7.0%	5.5%		
08	Lipited Healtheare					
08 09 <b>otal</b>	United Healthcare	Family	8.5% 100.0%	2.7%	100.0%	100.0%

# Table A-15B Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 2 (continued)

# Firefighters Local 1014 Retirees

			Pi	Pre 65		st 65
Deduction Code	Plan	Tier	Male	Female	Male	Female
801	Firefighters Local 1014	Med-Member under 65	6.5%	6.5%		
802	Firefighters Local 1014	Med-Member +1 under 65	35.0%	35.0%		
803	Firefighters Local 1014	Med-Member +2 under 65	58.5%	58.5%		
804	Firefighters Local 1014	Med-Member with Medicare			12.0%	12.0%
805	Firefighters Local 1014	Med-Member +1; 1 MDC				
806	Firefighters Local 1014	Med-Member +1; 2 MDC			28.0%	28.0%
807	Firefighters Local 1014	Med-Member +2; 1 MDC				
808	Firefighters Local 1014	Med-Member +2; 2 MDC			60.0%	60.0%
809	Firefighters Local 1014	Med-Surv. Sp. Under 65				
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65				
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65				
812	Firefighters Local 1014	Med-Surv. Sp. With MDC				
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC				
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC				
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC				
Total			100.0%	100.0%	100.0%	100.0%

Probability of enrolling at least one dependent 93.5% 93.5% 88.0% 88.0%

# Table A-16Probability of Medical Plan and Coverage Tier Selection for Pre 65 RetireesWho Become Eligible for a Post 65 Plan

We assume that Pre 65 retirees and dependents will choose Post 65 plans at age 65 according to the following table:

From Pre Age 65	To Post Age 65		
Eligible Plan	Eligible Plan	Tier 1	Tier 2
Anthem Blue Cross I	Anthem Blue Cross I	45.0%	0.0%
	Anthem Blue Cross III	55.0%	100.0%
Anthem Blue Cross II	Anthem Blue Cross II	44.0%	0.0%
	Anthem Blue Cross III	56.0%	100.0%
Anthem Blue Cross	Anthem Blue Cross Prudent Buyer	47.0%	0.0%
Prudent Buyer	Anthem Blue Cross II	4.0%	0.0%
	Anthem Blue Cross III	49.0%	100.0%
Cigna Network Model	Cigna Network Model Plan	36.5%	0.0%
_	Cigna Medicare Select Plus Rx (AZ)	6.0%	0.0%
	Anthem Blue Cross II	2.5%	0.0%
	Anthem Blue Cross III	25.0%	25.0%
	UnitedHealthcare Medicare Advantage	18.0%	75.0%
	Senior Advantage	2.0%	0.0%
	SCAN Health Plan	10.0%	0.0%
UnitedHealthcare	UnitedHealthcare Medicare Advantage	80.0%	81.0%
	Cigna Network Model Plan	1.0%	0.0%
	Anthem Blue Cross II	2.0%	0.0%
	Anthem Blue Cross III	9.0%	11.0%
	SCAN Health Plan	2.0%	2.0%
	Senior Advantage	2.0%	6.0%
	Excess II	3.0%	0.0%
	One Excess II, One Basic	1.0%	0.0%
Kaiser Retiree Basic	Senior Advantage	77.5%	98.0%
	Retiree Excess I	3.0%	0.0%
	Retiree Excess II	14.5%	0.0%
	Excess III (MNP)	3.0%	0.0%
	Anthem Blue Cross III	2.0%	2.0%
Kaiser Family Basic	2+ Advantage	80.0%	99.0%
	One Excess I, One Advantage	4.1%	0.0%
	One Advantage, One Excess II	9.0%	0.0%
	One Advantage, One Excess III (MNP)	3.1%	0.0%
	Two+ Excess II - Part B	0.5%	0.0%
	Anthem Blue Cross III	1.6%	1.0%
	UnitedHealthcare Medicare Advantage	0.2%	0.0%
	Senior Advantage	1.5%	0.0%
Firefighters Local 1014	Firefighters Local 1014	100.0%	100.0%

We assume that 100% of the retirees are eligible for Medicare with Part B Premium Reimbursement for the plans listed below. We assume these Post Medicare Only Plans are for enrollees who are entitled for Medicare Parts A and B:

- Anthem Blue Cross III
- Cigna Medicare Select Plus Rx (AZ)
- Firefighters Local 1014 Post Medicare Plan
- Kaiser Senior Advantage
- SCAN
- UnitedHealthcare Medicare Advantage

We assume all other plans' retirees do not receive Part B Premium Reimbursement.

The Part B reimbursement for Tier 1 is for retiree and any spouse or child(ren), while the Part B reimbursement for Tier 2 is only for retirees and surviving spouses. Tier 2 retirees are required to enroll in Medicare when eligible.

Effective January 1, 2007, Medicare Part B premiums vary depending on income status. The County places a cap on the per member monthly Part B reimbursement amount at the standard amount (e.g., \$164.90 for calendar year 2023).

For purposes of this valuation, we assume the average Medicare Part B premium reimbursement from July 1, 2022 through July 1, 2023 is \$157.49 per member per month. This is based on our average of 2022 calendar year Medicare Part B premium rates provided in the census from LACERA of \$150.08 per member per month and the 2023 calendar year Medicare Part B standard premium rate of \$164.90.

# Table A-17 Survivor and New Dependent Enrollment

The valuation methods and assumptions are adjusted with the following considerations from LACERA discussions:

# Scenario I

If a dependent or spouse dies, the retiree may enroll a new spouse/domestic partner and/or a new dependent.

- We assume 1.0% will enroll a new spouse/domestic partner.
- We assume 2.5% of the retirees will enroll a new dependent.

#### Scenario II

If a retiree who has a retirement plan option which qualifies as eligible for continuing retirement benefits to the survivor dies and the spouse has retiree medical, Part B, or dental/vision coverage, the existing spouse or dependent may continue to be enrolled and may also enroll a new spouse/domestic partner and/or a new dependent.

- We assume 90% of the retirees with spouses have a spouse continuance option.
- We assume 2.2% of the surviving spouse/domestic partners with a continuance option will enroll a new spouse.
- Therefore, we assume 2.0% (or 90% of the 2.2%) of the surviving spouses' new spouses will enroll and receive the County subsidy.
- We assume 2.5% of the surviving spouse/domestic partners will enroll a new dependent.

#### Scenario III

If a retiree who has a retirement plan option which qualifies as eligible for continuing retirement benefits to the survivor dies and the spouse does NOT have retiree medical coverage, we assume no additional spouse/domestic partner or dependent will be enrolled.

# Table A-18 Probability of Initial Dental/Vision Enrollment

#### Males and Females

Years of Service	Assumed Enrollment %					
< 10	9%					
10-14	48%					
15-19	70%					
20-24	76%					
25+	95%					
Disabled	93%					

# Table A-19 Probability of Dental/Vision Plan and Coverage Tier Selection Upon Dental/Vision Retirement Enrollment

	Cigna Indemnity Dental/Vision			Cigna HMO Dental/Vision			
Tier	Retiree Only	Retiree and Dependents	Minor Survivor	Retiree Only	Retiree and Dependents	Minor Survivor	
Deduction Code	501	502	503	901	902	903	
Percentage Male Female	18.5% 45.0%	70.5% 42.7%	0% 0%	3.0% 7.5%	8.0% 4.8%	0% 0%	

# Table A-20Premium Information

The following premium information is for retirees living in California who have less than 10 years of service and must pay the full amount. Members who have more than 10 years of service receive a subsidy from the County. Details can be found in this table below. The premium rates in Table A-20 include the carriers' administration fees and LACERA's per contract monthly administration fee. The per contract monthly administration fee was \$10.00 effective July 1, 2022 and \$8.00 effective July 1, 2023 and is included in the premium rates.

Tier	Anthem Blue Cross - Plan I	Anthem Blue Cross - Plan II	Anthem Blue Cross - Prudent Buyer	Cigna	United Healthcare
Retiree Only	\$ 1,275.39	\$ 1,275.39	\$ 902.57	\$ 1,657.81	
Retiree & Spouse	\$ 2,297.06	\$ 2,297.06	\$ 1,772.82	\$ 2,991.10	
Retiree & Family	\$ 2,709.06	\$ 2,709.06	\$ 2,000.33	\$ 3,531.49	
Retiree & Children	\$ 1,686.53	\$ 1,686.53	\$ 1,159.16	\$ 2,198.42	
Minor Survivor	\$ 424.51	\$ 432.89	\$ 248.48	\$ 525.62	\$ 372.13
UnitedHealthcare Single					\$ 1,295.66
UnitedHealthcare Two- Party					\$ 2,364.24
UnitedHealthcare Family					\$ 2,802.79

## Pre and Post Age 65 Monthly Rates Effective July 1, 2022 Cigna and UnitedHealthcare are Pre Age 65 Only

# Pre and Post Age 65 Monthly Rates Effective July 1, 2023 Cigna and UnitedHealthcare are Pre Age 65 Only

Tier	Anthem Blue Cross - Plan I	Anthem Blue Cross - Plan II	Anthem Blue Cross - Prudent Buyer	Cigna	United Healthcare
Retiree Only	\$ 1,374.62	\$ 1,374.62	\$ 951.76	\$ 1,787.58	
Retiree & Spouse	\$ 2,478.02	\$ 2,478.02	\$ 1,871.92	\$ 3,227.48	
Retiree & Family	\$ 2,922.98	\$ 2,922.98	\$ 2,112.48	\$ 3,810.99	
Retiree & Children	\$ 1,818.65	\$ 1,818.65	\$ 1,223.07	\$ 2,371.89	
Minor Survivor	\$ 455.67	\$ 464.72	\$ 260.15	\$ 564.82	\$ 394.87
UnitedHealthcare Single					\$ 1,381.50
UnitedHealthcare Two-					\$ 2,523.09
Party					
UnitedHealthcare Family					\$ 2,991.61

				United Healthcare
	Anthem Blue			Medicare
Tier	Cross - Plan III	SCAN	Cigna	Advantage
One Medicare	\$ 521.08		\$ 386.49	
Retiree & Spouse- 1 Medicare	\$ 1,659.63		\$ 1,719.78	
Retiree & Spouse- 2 Medicare	\$ 1,034.26		\$ 762.98	
Retiree & Children- 1 Medicare	\$ 930.76		\$ 928.28	
Retiree & Family- 1 Medicare	\$ 2,069.18		\$ 2,260.85	
Retiree & Family- 2 Medicare	\$ 1,443.73		\$ 1,344.91	
Retiree & Family- 3 Medicare	\$ 1,617.64			
Retiree Only		\$ 285.60		\$ 338.45
Retiree & 1 Dependent (1 Medicare)				\$ 1,624.11
Retiree & 1 Dependent (2 Medicare)		\$ 561.20		\$ 666.90
Retiree & 2 + Deps. (1 Medicare)				\$ 1,845.58
Retiree & 2 + Deps. (2 Medicare)				\$ 888.37

# Post Age 65 Monthly Rates Effective July 1, 2022

# Post Age 65 Monthly Rates Effective July 1, 2023

	Anthem Blue			United Healthcare Medicare
Tier	Cross - Plan III	SCAN	Cigna	Advantage
One Medicare	\$ 559.97		\$ 346.86	
Retiree & Spouse- 1 Medicare	\$ 1,789.60		\$ 1,786.76	
Retiree & Spouse- 2 Medicare	\$ 1,114.20		\$ 685.72	
Retiree & Children- 1 Medicare	\$ 1,002.42		\$ 931.85	
Retiree & Family- 1 Medicare	\$ 2,231.91		\$ 2,730.95	
Retiree & Family- 2 Medicare	\$ 1,556.43		\$ 1,325.84	
Retiree & Family- 3 Medicare	\$ 1,744.25			
Retiree Only		\$ 248.59		\$ 323.31
Retiree & 1 Dependent (1 Medicare)				\$ 1,696.81
Retiree & 1 Dependent (2 Medicare)		\$ 489.18		\$ 638.62
Retiree & 2 + Deps. (1 Medicare)				\$ 1,933.42
Retiree & 2 + Deps. (2 Medicare)				\$ 875.23

Effective Date	July 1, 2022	July 1, 2023
Retiree Basic (Under 65)	\$ 1,143.57	\$ 1,265.81
Retiree Risk (Senior Advantage)	\$ 263.09	\$ 250.28
Retiree Excess I	\$ 1,178.97	\$ 1,186.60
Retiree Excess II - Part B	\$ 1,148.18	\$ 1,268.44
Excess III - Medicare Not Provided (MNP)	\$ 1,178.97	N/A
Family Basic	\$ 2,277.14	\$ 2,523.62
One Advantage, One Basic	\$ 1,396.66	\$ 1,508.09
One Excess I, One Basic	\$ 2,312.54	\$ 2,444.41
One Excess II - Part B, One Basic	\$ 2,281.75	\$ 2,526.25
One Excess III (MNP), One Basic	\$ 2,312.54	N/A
Two+ Advantage	\$ 516.18	\$ 492.56
One Excess I, One Advantage	\$ 1,432.06	\$ 1,428.88
One Advantage, One Excess II - Part B	\$ 1,401.27	\$ 1,510.72
One Advantage, One Excess III (MNP)	\$ 1,432.06	N/A
Two+ Excess I	\$ 2,347.94	\$ 2,365.20
One Excess I, One Excess II - Part B	\$ 2,317.15	\$ 2,447.04
One Excess I, One Excess III (MNP)	\$ 2,347.94	N/A
Two Excess II - Part B	\$ 2,286.36	\$ 2,528.88
One Excess II - Part B, One Excess III (MNP)	\$ 2,317.15	N/A
Two Excess III - Both (MNP)	\$ 2,347.94	N/A
Survivor	\$ 1,143.57	\$ 1,265.81

#### Kaiser California Monthly Rates

This work product was prepared solely for LACERA for the purposes described herein and may not be appropriate to use for other purposes. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. Milliman recommends that third parties be aided by their own actuary or other qualified professional when reviewing the Milliman work product.

Effective Date	July 1, 2022
Medical Member Under 65	\$ 1,259.51
Medical Member + 1 Under 65	\$ 2,270.98
Medical Member + 2 Under 65	\$ 2,678.84
Medical Member with Medicare	\$ 1,259.51
Medical Member + 1: 1 Medicare (MDC)	\$ 2,270.98
Medical Member + 1; 2 MDC	\$ 2,270.98
Medical Member + 2; 1 MDC	\$ 2,678.84
Medical Member + 2; 2 MDC	\$ 2,678.84
Medical Surviving Spouse Under 65	\$ 1,259.51
Medical Surviving Spouse + 1 Under 65	\$ 2,270.98
Medical Surviving Spouse + 2 Under 65	\$ 2,678.84
Medical Surviving Spouse with MDC	\$ 1,259.51
Medical Surviving Spouse + 1; 1 MDC	\$ 2,270.98
Medical Surviving Spouse + 2; 1 MDC	\$ 2,678.84
Medical Surviving Spouse + 1; 2 MDC	\$ 2,270.98

#### Firefighters Local 1014 Monthly Rates

July 1, 2023 Firefighter Local 1014 rates were not available in time to include in the valuation.

#### **Dental/Vision Monthly Rates**

Effective Date	July ′	1, 2022	July 1, 2023			
<u>Tier</u>	Cigna Dental <u>HMO/Vision</u>	Cigna Indemnity <u>Dental/Vision</u>	Cigna Dental <u>HMO/Vision</u>	Cigna Indemnity <u>Dental/Vision</u>		
Retiree Only	\$ 48.43	\$ 51.42	\$ 46.52	\$ 52.68		
Retiree & Dependents	\$ 97.09	\$ 104.33	\$ 95.28	\$ 109.81		
Minor Survivor	\$ 48.99	\$ 62.67	\$ 47.11	\$ 64.82		

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## COUNTY CONTRIBUTIONS TOWARDS RETIREE HEALTH BENEFITS

#### Medical

Tier 1 is for employees who are hired before July 1, 2014 and are eligible for LACERA membership. If a retiree has 10 years of retirement service credit, the County contributes 40% of the health care plan premium or 40% of the benchmark plan rate, whichever is less. For each year of retirement service credit beyond 10 years, the County contributes an additional 4% per year, up to a maximum of 100% for a member with 25 years of service credit.

Tier 2 is for employees who are hired after June 30, 2014 and are eligible for LACERA membership. The Tier 2 subsidy is the same as Tier 1 except that the benchmark plan is different. The table below shows the benchmark plans for Tier 1 and Tier 2.

<u>Tier</u>	Pre / Post <u>Medicare</u>	Benchmark Plan	Benchmark Amount
1	Pre	Anthem Blue Cross I & II	Same tier that member selects
1	Post	Anthem Blue Cross I & II	Same tier that member selects
2	Pre	Anthem Blue Cross I & II	Retiree-only tier
2	Post	Anthem Blue Cross III	Retiree-only tier

If a Tier 2 retiree selects a family tier for a plan where the premium for the retiree-only tier is less than the Tier 2 benchmark, there is a spouse subsidy equal to the Tier 2 benchmark less the premium for the retiree-only tier. The Tier 2 non Local 1014 spouse subsidy varies depending on the plan selected and the retiree's years of service, so we developed weighted average factors of the County's contribution for the spouse's portion. On average, we assume that if the retiree has 10 years of service, the County will contribute 8% of the spouse's portion. This assumption grades linearly to 20% of the spouse's portion for a retiree with 25+ years of service.

The pre 65 and post 65 retirees of Local 1014 are on the same plan and pay the same rates. The pre 65 premium for the retiree-only tier is approximately equal to the Tier 2 benchmark so we valued no spouse subsidy. Since the post 65 premium for the retiree-only tier is greater than the Tier 2 benchmark, we assume the County contribution is 15% with 10 years of service grading linearly to 40% with 25+ years of service. Post 65 spouses are assumed to receive no subsidy.

The County contribution can never exceed the premium of the benchmark plan; this means that if the premium for the chosen plan and coverage option exceeds the benchmark premium, the retiree is required to pay the difference, even if the retiree has 25 years of service. We adjust the retiree's contributions by the difference between the premium of the chosen deduction code and the benchmark plan. Likewise, if the retiree has 25 years of service and the plan premium is less than the benchmark rate, the County contributes 100% of the plan premium only, not the benchmark plan rate. Reciprocal service is not included in contribution calculations.

## **Dental/Vision**

The contribution percentages follow the same contribution proportions based on years of service (excluding reciprocal service) as the medical plans. The Tier 1 benchmark is the indemnity plan premium for the tier that the member selects. The Tier 2 benchmark is the indemnity plan premium for the retiree-only tier.

# Service-Connected Disability

Any retiree with a service-connected disability retirement with less than 13 years of service will receive a different County contribution for both medical and dental/vision plans. The County contributes 50% of the lesser of the benchmark plan rate or the premium of the plan the retiree is enrolled in. If a retiree with service-connected disability retirement has 13 or more years of service, the County subsidy is the same as a retiree with service retirement. Reciprocal service is not included in contribution calculations.

# FIREFIGHTERS LOCAL 1014 CONTRIBUTIONS TOWARDS RETIREE HEALTH BENEFITS

# Medical, Dental/Vision, and Service-Connected Disability

Contributions are the same as for the County employees.

# Table A-21 Claim Cost Analysis

All of the plans' premium rates have been determined based on retiree only information. Active premium rates are established independently. Therefore, no implicit subsidy exists between active and retiree rates. However, some plans pooled the Medicare enrolled and non-Medicare enrolled retirees to determine the rates. The following plans did not pool Medicare and non-Medicare retirees (or have an insignificant Medicare enrollment), so we can assume the premium rates are representative of the average claim costs used to develop the age and gender adjusted claim costs:

- Anthem Blue Cross I and II (Combined)
- Anthem Blue Cross III
- Anthem Blue Cross Prudent Buyer
- Cigna Network Model Plan
- Cigna Medicare Select Plus Rx (AZ)
- UnitedHealthcare
- UnitedHealthcare Medicare Advantage
- SCAN Health Plan
- Kaiser and Kaiser Interregional
  - Basic
  - Senior Advantage
  - Medicare Cost Supplement
  - Excess I
  - Excess II
  - Excess III
- Cigna Indemnity Dental/Vision
- Cigna HMO Dental/Vision

The Firefighters Local 1014 Plan pooled Medicare and non-Medicare retirees to determine premium rates. Therefore, we adjusted the premium rates to compensate for the coordination with Medicare in making our claim cost assumption.

For current active members projected to retire in the future, we used the enrollment assumptions in Table A-15A (Tier 1), Table A-15B (Tier 2), and Table A-16 (pre 65 to post 65 election) to develop weighted average claim costs as of July 1, 2021. The monthly weighted average claim costs used for future retirees and dependents are shown in the following tables.

The medical claim costs for pre 65 retirees are different than for post 65 retirees due to different plan selection assumptions.

Current vested terminated members post 65 claim costs are based on their earliest retirement eligibility age.

In the following tables, when shown, child costs are at age 65. The costs for children are assumed to be 28% of the age 65 child costs for males and 22% of the age 65 child costs for females.

#### Tier 1

# A. Future Retirees Retiring Before Age 65

<u>Age</u>	Age		Retiree			se/Surv Spo	use	+ Dependents
-		<u>Male</u>		Female		Male		Female
25	\$	398.84	\$	644.16	\$	433.01	\$	331.33
30	\$	491.37	\$	788.48	\$	397.38	\$	741.90
35	\$	609.59	\$	848.45	\$	492.99	\$	737.83
40	\$	747.48	\$	1,077.18	\$	590.78	\$	803.55
45	\$	852.21	\$	1,299.15	\$	689.06	\$	913.73
50	\$	969.54	\$	1,236.27	\$	831.96	\$	1,032.09
55	\$	1,103.00	\$	1,196.29	\$	1,006.74	\$	1,142.73
60	\$	1,147.67	\$	1,174.14	\$	1,254.51	\$	1,296.64
65 (Pre 65)	\$	1,284.25	\$	1,260.08	\$	1,555.93	\$	1,512.01
65 (Post 65)	\$	473.27	\$	402.05	\$	368.48	\$	444.13
70	\$	573.87	\$	467.46	\$	446.81	\$	516.38
75	\$	658.03	\$	514.03	\$	512.33	\$	567.83
80	\$	706.55	\$	538.82	\$	550.11	\$	595.20
85	\$	725.40	\$	547.67	\$	564.78	\$	604.96
90	\$	730.69	\$	547.91	\$	568.90	\$	605.20
95	\$	730.69	\$	547.91	\$	568.90	\$	605.20

#### B. Future Retirees Retiring After Age 65

<u>Age</u>	Retiree			Spous	se/Surv Spor	use ·	+ Dependents
-	<u>Male</u>		Female		<u>Male</u>		<u>Female</u>
25	N/A		N/A	\$	434.00	\$	332.80
30	N/A		N/A	\$	398.30	\$	745.19
35	N/A		N/A	\$	494.12	\$	741.12
40	N/A		N/A	\$	592.13	\$	807.13
45	N/A		N/A	\$	690.65	\$	917.80
50	N/A		N/A	\$	833.89	\$	1,036.68
55	N/A		N/A	\$	1,009.06	\$	1,147.81
60	N/A		N/A	\$	1,257.38	\$	1,302.41
65 (Pre 65)	N/A		N/A	\$	1,559.50	\$	1,518.73
65 (Post 65)	\$ 335.53	\$	301.46	\$	291.81	\$	322.80
70	\$ 406.86	\$	350.50	\$	353.85	\$	375.30
75	\$ 466.53	\$	385.42	\$	405.74	\$	412.69
80	\$ 500.93	\$	403.99	\$	435.66	\$	432.58
85	\$ 514.29	\$	410.61	\$	447.28	\$	439.70
90	\$ 518.04	\$	410.77	\$	450.54	\$	439.90
95	\$ 518.04	\$	410.77	\$	450.54	\$	439.90

The Firefighters Local 1014 and dental/vision claim costs are shown in the tables on the following page.

#### Tier 1

#### Firefighters Local 1014 Plan Monthly Medical Claim Costs

<u>Age</u>	Re	etire	e	Spoι	use/Surv Spo	use	+ Dependents
-	<u>Male</u>		<u>Female</u>		<u>Male</u>		Female
25	\$ 639.73	\$	1,023.04	\$	653.93	\$	500.26
30	\$ 788.12	\$	1,252.24	\$	600.13	\$	1,120.16
35	\$ 977.74	\$	1,347.49	\$	744.52	\$	1,114.02
40	\$ 1,198.90	\$	1,710.75	\$	892.20	\$	1,213.24
45	\$ 1,366.90	\$	2,063.25	\$	1,040.64	\$	1,379.57
50	\$ 1,555.12	\$	1,963.40	\$	1,256.48	\$	1,558.28
55	\$ 1,769.19	\$	1,899.89	\$	1,520.44	\$	1,725.31
60	\$ 1,840.84	\$	1,864.72	\$	1,894.61	\$	1,957.68
65 (Pre 65)	\$ 2,059.92	\$	2,001.20	\$	2,349.83	\$	2,282.85
65 (Post 65)	\$ 554.50	\$	538.70	\$	554.50	\$	538.70
70	\$ 672.39	\$	626.33	\$	672.39	\$	626.33
75	\$ 771.00	\$	688.71	\$	771.00	\$	688.71
80	\$ 827.85	\$	721.91	\$	827.85	\$	721.91
85	\$ 849.94	\$	733.77	\$	849.94	\$	733.77
90	\$ 856.13	\$	734.09	\$	856.13	\$	734.09
95	\$ 856.13	\$	734.09	\$	856.13	\$	734.09

#### **Future Retirees Monthly Dental/Vision Claim Costs**

<u>Age</u>	Ret	iree		Spou	ise/Surv Spoi	use	+ Dependents
-	<u>Male</u>		Female		<u>Male</u>		Female
25	\$ 22.04	\$	27.43	\$	24.79	\$	25.04
30	\$ 25.13	\$	29.65	\$	27.63	\$	32.63
35	\$ 27.20	\$	31.55	\$	29.91	\$	34.72
40	\$ 28.74	\$	33.51	\$	31.61	\$	36.88
45	\$ 30.67	\$	35.59	\$	33.73	\$	39.16
50	\$ 33.38	\$	38.19	\$	36.71	\$	42.03
55	\$ 37.59	\$	41.73	\$	41.33	\$	45.92
60	\$ 43.51	\$	46.38	\$	47.85	\$	51.04
65	\$ 50.46	\$	50.08	\$	55.49	\$	55.10
70	\$ 56.66	\$	52.29	\$	62.30	\$	57.54
75	\$ 56.66	\$	52.29	\$	62.30	\$	57.54
80	\$ 56.66	\$	52.29	\$	62.30	\$	57.54
85	\$ 56.66	\$	52.29	\$	62.30	\$	57.54
90	\$ 56.66	\$	52.29	\$	62.30	\$	57.54
95	\$ 56.66	\$	52.29	\$	62.30	\$	57.54

For current retired members, spouses, and dependents, the claim costs are based on the actual premiums by deduction code, adjusted for age and gender. The tables that follow show the age 65 adjusted monthly claim costs. Adjustments by age and gender are based on the same methodology used in the tables above.

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#### Tier 1

#### Non Local 1014 Fire Fighters Male Retirees

Deduct					Pre 65 Cla	aim C	osts		Pos	st 65 Clain	n Cos	sts for Pos	t 65 F	Retirees	Post	65 Cla	im Co	osts fo	r Pre 6	5 Retir	ees
Code	Plan	Tier	Retiree	;	Spouse		Child	Surv	R	tetiree	S	pouse	:	Surv	Ret	iree		Spouse	Ð	Sur	v
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$ 772.14						\$	772.14					\$	615.41					
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$ 772.14	\$	772.14	\$	595.39		\$	772.14	\$	772.14			\$	615.41	\$	615	i.41		
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$ 772.14	\$	772.14	\$	595.39		\$	772.14	\$	772.14			\$	615.41	\$	615	5.41		
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$ 772.14	\$	772.14	\$	595.39		\$	772.14					\$	615.41					
205	Anthem Blue Cross Prudent Buyer	Minor Survivor						\$ 595.39					\$	595.39							
211	Anthem Blue Cross I	Retiree Only	\$ 634.59						\$	634.59					\$	514.36					
212	Anthem Blue Cross I	Retiree and Spouse	\$ 634.59	\$	634.59	\$	489.32		\$	634.59	\$	634.59			\$	514.36	\$	514	.36		
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$ 634.59	\$	634.59	\$	489.32		\$	634.59	\$	634.59			\$	514.36	\$	514	.36		
214	Anthem Blue Cross I	Retiree and Children	\$ 634.59	\$	634.59	\$	489.32		\$	634.59					\$	514.36					
215	Anthem Blue Cross I	Minor Survivor						\$ 489.32					\$	489.32					\$	5 48	89.32
221	Anthem Blue Cross II	Retiree Only	\$ 1,216.88						\$	1,216.88					\$	768.38					
222	Anthem Blue Cross II	Retiree and Spouse	\$ 1,216.88	\$	1,216.88	\$	938.32		\$	1,216.88	\$	1,216.88			\$	768.38	\$	768	.38		
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$ 1,216.88	\$	1,216.88	\$	938.32		\$	1,216.88	\$	1,216.88			\$	768.38	\$	768	.38		
224	Anthem Blue Cross II	Retiree and Children	\$ 1,216.88	\$	1,216.88	\$	938.32		\$	1,216.88					\$	768.38					
225	Anthem Blue Cross II	Minor Survivor						\$ 938.32					\$	938.32					\$	93	38.32
240	Anthem Blue Cross III	One Medicare							\$	415.98					\$	415.98					
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,292.50	\$	1,292.50	\$	996.63		\$	415.98	\$	415.98			\$	415.98	\$	415	5.98		
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,292.50	\$	1,292.50	\$	996.63		\$	415.98	\$	415.98			\$	415.98	\$	415	5.98		
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare							\$	415.98	\$	415.98			\$	415.98	\$	415	5.98		
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$	1,292.50	\$	996.63		\$	415.98					\$	415.98	\$	415	5.98		
245	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$	1,292.50	\$	996.63		\$	415.98					\$	415.98	\$	415	5.98		
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,292.50	\$	1,292.50	\$	996.63		\$	415.98	\$	415.98			\$	415.98	\$	415	5.98		
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,292.50	\$	1,292.50	\$	996.63		\$	415.98	\$	415.98			\$	415.98	\$	415	5.98		
248	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$	1,292.50	\$	996.63		\$	415.98	\$	415.98			\$	415.98	\$	415	5.98		
249	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$	1,292.50	\$	996.63		\$	415.98	\$	415.98			\$	415.98	\$	415	5.98		
250	Anthem Blue Cross III	Retiree and Family 3 Medicare		\$	1,292.50	\$	996.63		\$	415.98	\$	415.98			\$	415.98	\$	415	5.98		
301	Cigna Network Model Plan	Retiree Only	\$ 1,266.98						\$	1,266.98					\$	693.78					
302	Cigna Network Model Plan	Retiree and Spouse	\$ 1,266.98	\$	1,266.98	\$	976.95		\$	1,266.98	\$	1,266.98			\$	693.78	\$	693	60		
303	Cigna Network Model Plan	Retiree and Family	\$ 1,266.98	\$	1,266.98	\$	976.95		\$	1,266.98	\$	1,266.98			\$	693.78	\$	693	.60		
304	Cigna Network Model Plan	Retiree and Children	\$ 1,266.98	\$	1,266.98	\$	976.95		\$	1,266.98					\$	693.78					
305	Cigna Network Model Plan	Minor Survivor						\$ 976.95					\$	976.95							
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only							\$	323.37											
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse							\$	323.37	\$	323.37			\$	323.37	\$	323	3.37		
	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)							\$	323.37	\$	323.37									
	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children							\$	323.37	\$	323.37			\$	323.37	\$	323	3.37		
	0 ()	Risk-Retiree & Family (1 Medicare)							\$	323.37		323.37			\$	323.37	\$	323			
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)							\$	323.37	\$	323.37									
401	Kaiser (CA)	Retiree Basic (Under 65)	\$ 1,300.67												\$	359.45					
	Kaiser (CA)	Retiree Risk (Senior Advantage)							\$	209.42											
	Kaiser (CA)	Retiree Excess I							\$	938.47											
	Kaiser (CA)	Retiree Excess II - Part B							\$	913.96											
	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)							\$	938.47											
	Kaiser (CA)	Family Basic			1,300.67										\$	274.35			2.41		

#### Tier 1

#### Non Local 1014 Fire Fighters Male Retirees

Deduct						Pre 65 Cl	laim					 ts for Post						osts for Pre	 
	Plan	Tier		Retiree		Spouse		Child	Surv		Retiree	pouse	Sur			letiree		Spouse	Surv
413	Kaiser (CA)	One Advantage, One Basic	•	1,300.67	•	1,300.67		1,002.93		\$	209.42	200.59			\$	209.42	•	262.41	l
	Kaiser (CA)	One Excess I, One Basic	\$	1,300.67	\$	1,300.67	\$	1,002.93		\$	938.47	926.49			\$	938.47	\$	262.41	ł
	Kaiser (CA)	Two+ Advantage								\$	209.42	200.59							l
	Kaiser (CA)	One Excess I, One Advantage								\$	573.95	\$ 563.54							ł
	Kaiser (CA)	Two+ Excess I								\$	938.47	\$ 926.49							ł
	Kaiser (CA)	Survivor							\$ 1,002.93				\$ 1,0	02.93					\$ 1,002.93
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$	1,300.67		1,300.67	\$	1,002.93		\$	913.96	\$ 902.09			\$	913.96		262.41	ł
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$	1,300.67	\$	1,300.67	\$	1,002.93		\$	938.47	\$ 926.49			\$	938.47	\$	262.41	ł
426	Kaiser (CA)	One Advantage, One Excess II - Part B								\$	561.69	\$ 551.34							1
427	Kaiser (CA)	One Advantage, One Excess III (MNP)								\$	573.95	\$ 563.54							1
428	Kaiser (CA)	One Excess, One Excess II - Part B								\$	926.22	\$ 914.29							ł
429	Kaiser (CA)	One Excess, One Excess III (MNP)								\$	938.47	\$ 926.49							ł
430	Kaiser (CA)	Two Excess II - Part B								\$	913.96	\$ 902.09							ł
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)								\$	926.22	\$ 914.29							ł
432	Kaiser (CA)	Two Excess III - Both (MNP)								\$	938.47	\$ 926.49							
450	Kaiser - Colorado Basic	Retiree Basic	\$	1,178.87											\$	232.54			
451	Kaiser - Colorado	Retiree Risk								\$	232.54								ł
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$	1,178.87	\$	1,550.61									\$	232.54	\$	230.03	ł
454	Kaiser - Colorado	Retiree Basic Family	\$	1,178.87	\$	1,550.61	\$	2,946.68							\$	232.54	\$	230.03	ł
455	Kaiser - Colorado	One Risk, One Basic	\$	1,178.87	\$	1,270.89				\$	232.54	\$ 230.03			\$	232.54	\$	230.03	1
457	Kaiser - Colorado	Two Retiree Risk								\$	232.54	\$ 230.03							ł
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$	1,178.87	\$	1,270.89	\$	3,558.09		\$	232.54	\$ 230.03			\$	232.54	\$	230.03	ł
459	Kaiser - Colorado	Two Risk, Two or More Dependents					\$	3,777.83		\$	232.54	\$ 230.03			\$	232.54	\$	230.03	1
440	Kaiser - Georgia	One Medicare Member with Part B only								\$	903.53								
441	Kaiser - Georgia	One Medicare Member with Part A only								\$	903.53								ł
442	Kaiser - Georgia	One Member without Medicare Part A&B								\$	903.53								ł
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only	,							\$	903.53	\$ 329.67							1
461	Kaiser - Georgia Basic	Basic	\$	1,294.28											\$	329.91			ł
462	Kaiser - Georgia	Retiree Risk								\$	329.91								ł
463	Kaiser - Georgia	Retiree (Two Party)	\$	1,294.28	\$	1,396.51	\$	4,151.25		\$	329.91	\$ 329.67			\$	329.91	\$	329.67	1
464	Kaiser - Georgia	Retiree Basic Family	\$	1,294.28	\$	1,396.51	\$	4,151.22							\$	329.91	\$	329.67	ł
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$	472.59	\$	1,396.50	\$	4,151.22		\$	329.91	\$ 329.67			\$	329.91	\$	329.67	ł
466	Kaiser - Georgia	Two Retiree Risk								\$	329.91	\$ 329.67							ł
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$	1,023.58											\$	348.49			
472	Kaiser - Hawaii	Retiree Risk								\$	348.49								ł
	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B								\$	1,436.65								
	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$	1,023.58	\$	1,101.88				-	-				\$	348.49	\$	348.69	
	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$	1,023.58		1,101.88	\$	3,275.47							\$	348.49		348.69	
	Kaiser - Hawaii	One Retiree Risk. One Basic	\$	1.023.58		1.101.89		3.275.47		\$	348.49	\$ 348.69			\$	348.49		348.69	
-			•		•	,		- / -		-					-		•		
			Ť	1,020.00	Ŷ	.,	Ŷ	-, 0. 11			,	· ·			*	.,	¥	.,	
477 478	Kaiser - Hawaii Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic Two Retiree Risk	\$	1,023.58	\$	1,101.88	\$	3,275.47		\$ \$	1,436.65 348.49	1,462.24 348.69			\$	1,436.65	\$	1,462.24	

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#### Tier 1

#### Non Local 1014 Fire Fighters Male Retirees

Deduct				Pre 65 C	laim	Costs			Р	ost 65 Claim	1 Ca	sts for Pos	t 65	Retirees	P	ost 65 Cla	im C	osts for Pre	65 R	etirees
Code	Plan	Tier	Retiree	Spouse		Child		Surv		Retiree	:	Spouse		Surv	1	Retiree		Spouse	ş	Surv
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,256.45				•								\$	373.68				
482	Kaiser - Oregon	Retiree Risk							\$	373.68										
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B							\$	1,072.47										
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,256.45	\$ 1,355.32	2										\$	373.68	\$	374.47		
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,256.45	\$ 1,355.32	2 \$	4,028.82									\$	373.68	\$	374.47		
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,256.45	\$ 1,355.32	2 \$	4,028.82			\$	373.68	\$	374.47			\$	373.68	\$	374.47		
488	Kaiser - Oregon	Two Retiree Risk							\$	373.68	\$	374.47								
489	Kaiser - Oregon	Retiree w/ Part A only							\$	878.24										
491	Kaiser - Oregon	One Risk, One Medicare Part A only							\$	878.24	\$	374.47								
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,536.29	\$ 570.47	,				\$	1,072.47	\$	374.47			\$	373.68	\$	374.47		
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,256.45	\$ 1,355.32	2				\$	373.68	\$	374.47			\$	373.68	\$	374.47		
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,256.45	\$ 1,355.32	2 \$	4,028.82			\$	373.68	\$	374.47			\$	373.68	\$	374.47		
495	Kaiser - Oregon	Two Over 65 unassigned Medicare							\$	1,072.47	\$	1,089.56								
496	Kaiser - Oregon	Two Medicare Part A only							\$	878.24	\$	890.79								
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,256.45	\$ 1,355.32	2				\$	878.24	\$	890.79			\$	878.24	\$	890.79		
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,256.45	\$ 1,355.32	2				\$	1,072.47	\$	1,089.56			\$	1,072.47	\$	1,089.56		
393	Kaiser - Washington	Retiree Basic	\$ 1,587.80				\$	1,587.80							\$	348.51			\$	348.51
394	Kaiser - Washington	Retiree Risk (Senior Advantage)							\$	348.51			\$	348.51						
395	Kaiser - Washington	Retiree Basic (Two Party)	\$ 1,587.80	\$ 1,488.39	)										\$	348.51	\$	348.71		
396	Kaiser - Washington	Retiree Basic Family	\$ 1,587.80	\$ 1,488.39	\$	6,424.42									\$	348.51	\$	348.71		
397	Kaiser - Washington	One Risk, One Basic	\$ 1,587.80	\$ 1,488.39	\$	4,424.38			\$	348.51	\$	348.71			\$	348.51	\$	348.71		
398	Kaiser - Washington	Two Retiree Risk							\$	348.51	\$	348.71								
399	Kaiser - Washington	One Risk, Two or More Dependents	\$ 1,587.80	\$ 1,488.39	\$	5,748.04			\$	348.51	\$	348.71			\$	348.51	\$	348.71		
400	Kaiser - Washington	Two Risk, Two or More Dependents			\$	6,424.42			\$	348.51	\$	348.71			\$	348.51	\$	348.71		
611	SCAN Health Plan	Retiree Only							\$	219.57										
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)							\$	219.57	\$	219.57								
620	SCAN Health Plan AZ	Retiree Only							\$	219.57										
621	SCAN Health Plan AZ	Retiree & 1 Dependent (2 Medicare)							\$	219.57	\$	219.57								
622	SCAN Health Plan NV	Retiree Only							\$	219.57										
623	SCAN Health Plan NV	Retiree & 1 Dependent (2 Medicare)							\$	219.57	\$	219.57								
701	United Healthcare	Retiree Only	\$ 1,439.64						\$	285.35					\$	285.35				
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,439.64	\$ 1,439.64	\$	1,110.09			\$	285.35	\$	285.35			\$	285.35	\$	285.35		
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)							\$	285.35	\$	285.35			\$	285.35	\$	285.35		
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,439.64	\$ 1,439.64	\$	1,110.09			\$	285.35	\$	285.35			\$	285.35	\$	285.35		
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,439.64	\$ 1,439.64	\$	1,110.09			\$	285.35	\$	285.35			\$	285.35	\$	285.35		
706	United Healthcare	Minor Survivor					\$	1,110.09					\$	1,110.09						
707	United Healthcare	Single	\$ 1,439.64												\$	347.86				
708	United Healthcare	Two-Party	\$ 1,439.64	\$ 1,439.64	\$	1,110.09									\$	347.86	\$	347.21		
709	United Healthcare	Family	\$ 1,439.64	\$ 1,439.64	\$	1,110.09									\$	347.86	\$	347.21		

#### Tier 1

#### Fire Fighters Local 1014 Male Retirees

Deduct					Pre 65 Cla	aim (	Costs		Por	st 65 Clair	n Cos	ts for Pos	st 65	Retirees	Po	st 65 Cla	im C	osts for Pr	e 65 i	Retirees
	Plan	Tier	Retir	ree	 pouse		Child	 Surv	-	letiree		ouse		Surv		etiree		Spouse		Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2,0	59.92					\$	554.50					\$	554.50				
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 2,0	59.92	\$ 2,059.92	\$	1,588.38		\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 2,0	59.92	\$ 2,059.92	\$	1,588.38		\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare							\$	554.50			\$	554.50	\$	554.50			\$	554.50
805	Firefighters' Local 1014	Med-Member +1; 1 MDC			\$ 2,059.92	\$	1,588.38		\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
806	Firefighters' Local 1014	Med-Member +1; 2 MDC							\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
807	Firefighters' Local 1014	Med-Member +2; 1 MDC			\$ 2,059.92	\$	1,588.38		\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
808	Firefighters' Local 1014	Med-Member +2; 2 MDC							\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65						\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65			\$ 2,059.92	\$	1,588.38	\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65			\$ 2,059.92	\$	1,588.38	\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC									\$	554.50	\$	554.50			\$	554.50	\$	554.50
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC			\$ 2,059.92	\$	1,588.38	\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC			\$ 2,059.92	\$	1,588.38	\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC									\$	554.50	\$	554.50			\$	554.50	\$	554.50

#### **Dental/Vision Male Retirees**

Ded	uction				Age 65 A	۱dju	sted Claim	Со	sts
C	ode	Plan	Tier	R	etiree		Sp/Dep		Surv
	501	Cigna Indemnity Dental/Vision	Retiree Only	\$	50.77				
	502	Cigna Indemnity Dental/Vision	Family	\$	50.77	\$	55.35		
	503	Cigna Indemnity Dental/Vision	Minor Survivor					\$	52.54
	901	Cigna Dental HMO/Vision	Retiree Only	\$	47.98				
	902	Cigna Dental HMO/Vision	Family	\$	47.98	\$	56.74		
	903	Cigna Dental HMO/Vision	Minor Survivor					\$	49.65

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### Tier 1

#### Non Local 1014 Fire Fighters Female Retirees

											_						_		_		
Deduct					-	Pre 65 Cla				-	_	ost 65 Clain								osts for Pr	 
Code	Plan	Tier		Retiree	1	Spouse		Child		Surv		Retiree		Spouse		Surv		letiree		Spouse	 Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$	750.13							\$	750.13					\$	597.87			
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$	750.13		750.13		756.11			\$	750.13		750.13			\$	597.87		597.87	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$	750.13		750.13	\$	756.11			\$	750.13	\$	750.13			\$	597.87	\$	597.87	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$	750.13	\$	750.13	\$	756.11			\$	750.13					\$	597.87			
205	Anthem Blue Cross Prudent Buyer	Minor Survivor							\$	756.11					\$	756.11					
211	Anthem Blue Cross I	Retiree Only	\$	616.50							\$	616.50					\$	499.69			
212	Anthem Blue Cross I	Retiree and Spouse	\$	616.50			\$	621.41			\$		\$	616.50			\$	499.69		499.69	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$	616.50	\$	616.50	\$	621.41			\$	616.50	\$	616.50			\$	499.69	\$	499.69	
214	Anthem Blue Cross I	Retiree and Children	\$	616.50	\$	616.50	\$	621.41			\$	616.50					\$	499.69			
215	Anthem Blue Cross I	Minor Survivor							\$	621.41					\$	621.41					\$ 621.41
221	Anthem Blue Cross II	Retiree Only	\$	1,182.19							\$	1,182.19					\$	746.47			
222	Anthem Blue Cross II	Retiree and Spouse	\$	1,182.19	\$	1,182.19	\$	1,191.61			\$	1,182.19	\$	1,182.19			\$	746.47	\$	746.47	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$	1,182.19	\$	1,182.19	\$	1,191.61			\$	1,182.19	\$	1,182.19			\$	746.47	\$	746.47	
224	Anthem Blue Cross II	Retiree and Children	\$	1,182.19	\$	1,182.19	\$	1,191.61			\$	1,182.19					\$	746.47			
225	Anthem Blue Cross II	Minor Survivor							\$	1,191.61					\$	1,191.61					\$ 1,191.61
240	Anthem Blue Cross III	One Medicare									\$	404.12					\$	404.12			
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$	1,255.66	\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404.12	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$	1,255.66	\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404.12	
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare									\$	404.12	\$	404.12			\$	404.12	\$	404.12	
244	Anthem Blue Cross III	Retiree and Children 1 Medicare			\$	1,255.66	\$	1,265.66			\$	404.12					\$	404.12	\$	404.12	
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			\$	1,255.66	\$	1,265.66			\$	404.12					\$	404.12	\$	404.12	
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$	1,255.66	\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404.12	
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$	1,255.66	\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404.12	
248	Anthem Blue Cross III	Retiree and Family 2 Medicare			\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404.12	
249	Anthem Blue Cross III	Retiree and Family 2 Medicare			\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404.12	
250	Anthem Blue Cross III	Retiree and Family 3 Medicare			\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404.12	
301	Cigna Network Model Plan	Retiree Only	\$	1.230.86							\$	1.230.86					\$	674.00			
302	Cigna Network Model Plan	Retiree and Spouse	\$	1.230.86	\$	1,230.86	\$	1.240.67			\$	1.230.86	\$	1.230.86			\$	674.00	\$	673.83	
303	Cigna Network Model Plan	Retiree and Family	\$	1.230.86	\$	1.230.86	\$	1.240.67			\$	1.230.86	\$	1.230.86			\$	674.00	\$	673.83	
304	Cigna Network Model Plan	Retiree and Children	ŝ	1,230.86		1,230.86					\$	1,230.86	•	.,			ŝ	674.00	•		
305	Cigna Network Model Plan	Minor Survivor	•	.,	*	.,	Ŧ	.,	\$	1,240.67	*	.,			\$	1,240.67	•				
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only							Ť	.,	\$	314.15			Ŧ	· j= · • · • ·					
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse									\$	314.15	\$	314.15			\$	314.15	\$	314.15	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)									\$		\$	314.15			Ŷ	014.10	Ψ	014.10	
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children									φ \$	314.15		314.15			¢	314.15	¢	314.15	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)									Ψ \$	314.15		314.15			\$	314.15		314.15	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)									ф \$	314.15		314.15			Ψ	514.15	Ψ	514.15	
401	Kaiser (CA)	Retiree Basic (Under 65)	¢	1.263.60							Ψ	014.10	Ψ	014.10			\$	349.21			
401	Kaiser (CA)	Retiree Risk (Senior Advantage)	φ	1,200.00							\$	203.45					Ψ	J <del>4</del> 8.21			
403 404	Kaiser (CA)	Retiree Excess I									ֆ Տ	203.45 911.72									
404 405	Kaiser (CA)	Retiree Excess I									э \$	887.91									
405 406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)									э \$	911.72									
406 411	Kaiser (CA)	Family Basic	•	1 262 60	¢	1,263.60	¢	1 272 67			φ	911.72					\$	266.53	¢	254.93	
411	Naisei (UA)	rainiiy dasiC	\$	1,203.00	φ	1,203.00	φ	1,213.07									ð	200.03	φ	204.93	

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#### Tier 1

#### Non Local 1014 Fire Fighters Female Retirees

Deduct						Pre 65 Cl	aim	Costs			Po	ost 65 Clain	n Co:	sts for Pos	st 65 R	letirees	Р	ost 65 Cla	m C	osts for Pr	e 65 F	Retirees
	Plan	Tier	-	Retiree	:	Spouse	Ī	Child	1	Surv		Retiree		pouse		Surv	_	Retiree	_	Spouse		Surv
413	Kaiser (CA)	One Advantage, One Basic	\$	1,263.60	\$	1,263.60	\$	1,273.67			\$	203.45	\$	194.87			\$	203.45	\$	254.93		
414	Kaiser (CA)	One Excess I, One Basic	\$	1,263.60	\$	1,263.60	\$	1,273.67			\$	911.72	\$	900.08			\$	911.72	\$	254.93		
418	Kaiser (CA)	Two+ Advantage									\$	203.45	\$	194.87								
419	Kaiser (CA)	One Excess I, One Advantage									\$	557.58	\$	547.48								
420	Kaiser (CA)	Two+ Excess I									\$	911.72	\$	900.08								
421	Kaiser (CA)	Survivor							\$	1,273.67					\$	1,273.67					\$	1,273.67
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$	1,263.60	\$	1,263.60	\$	1,273.67			\$	887.91	\$	876.37			\$	887.91	\$	254.93		
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$	1,263.60	\$	1,263.60	\$	1,273.67			\$	911.72	\$	900.08			\$	911.72	\$	254.93		
426	Kaiser (CA)	One Advantage, One Excess II - Part B									\$	545.68	\$	535.62								
427	Kaiser (CA)	One Advantage, One Excess III (MNP)									\$	557.58	\$	547.48								
428	Kaiser (CA)	One Excess, One Excess II - Part B									\$	899.81	\$	888.22								
429	Kaiser (CA)	One Excess, One Excess III (MNP)									\$	911.72	\$	900.08								
430	Kaiser (CA)	Two Excess II - Part B									\$	887.91	\$	876.37								
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)									\$	899.81	\$	888.22								
432	Kaiser (CA)	Two Excess III - Both (MNP)									\$	911.72	\$	900.08								
450	Kaiser - Colorado Basic	Retiree Basic	\$	1,145.26													\$	225.91				
451	Kaiser - Colorado	Retiree Risk									\$	225.91										
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$	1,145.26	\$	1,506.40											\$	225.91	\$	223.48		
454	Kaiser - Colorado	Retiree Basic Family	\$	1,145.26	\$	1,506.40	\$	3,742.11									\$	225.91	\$	223.48		
455	Kaiser - Colorado	One Risk, One Basic	\$	1,145.26	\$	1,234.65					\$	225.91	\$	223.48			\$	225.91	\$	223.48		
457	Kaiser - Colorado	Two Retiree Risk									\$	225.91	\$	223.48								
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$	1,145.26	\$	1,234.65	\$	4,518.57			\$	225.91	\$	223.48			\$	225.91	\$	223.48		
459	Kaiser - Colorado	Two Risk, Two or More Dependents					\$	4,797.62			\$	225.91	\$	223.48			\$	225.91	\$	223.48		
440	Kaiser - Georgia	One Medicare Member with Part B only									\$	877.77										
441	Kaiser - Georgia	One Medicare Member with Part A only									\$	877.77										
442	Kaiser - Georgia	One Member without Medicare Part A&B									\$	877.77										
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only									\$	877.77	\$	320.28								
461	Kaiser - Georgia Basic	Basic	\$	1,257.39													\$	320.51				
462	Kaiser - Georgia	Retiree Risk									\$	320.51										
	Kaiser - Georgia	Retiree (Two Party)	\$	1,257.39	\$	1,356.70	\$	5,271.85			\$	320.51	\$	320.28			\$	320.51	\$	320.28		
464	Kaiser - Georgia	Retiree Basic Family	\$	1,257.39	\$	1,356.70	\$	5,271.81									\$	320.51	\$	320.28		
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$	459.12	\$	1,356.68	\$	5,271.81			\$	320.51	\$	320.28			\$	320.51	\$	320.28		
466	Kaiser - Georgia	Two Retiree Risk									\$	320.51	\$	320.28								
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$	994.40													\$	338.55				
	Kaiser - Hawaii	Retiree Risk									\$	338.55										
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B									\$	1,395.69										
	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$	994.40	\$	1,070.47											\$	338.55		338.75		
	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$	994.40	\$	1,070.47	\$	4,159.66									\$	338.55		338.75		
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$	994.40	\$	1,070.48	\$	4,159.66			\$	338.55	\$	338.75			\$	338.55	\$	338.75		
	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$	994.40	\$	1,070.47	\$	4,159.66			\$	1,395.69		1,420.55			\$	1,395.69	\$	1,420.55		
478	Kaiser - Hawaii	Two Retiree Risk									\$	338.55	\$	338.75								

#### Tier 1

#### Non Local 1014 Fire Fighters Female Retirees

Deduct				Pre 65 Cl	aim	Costs		Po	ost 65 Claim	Costs	for Pos	st 65 I	Retirees	Po	ost 65 Clai	m Co	osts for Pre	65 Re	etirees
Code	Plan	Tier	Retiree	Spouse		Child	Surv		Retiree	Spo	use		Surv	F	Retiree	S	Spouse	S	Burv
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,220.63											\$	363.03				
482	Kaiser - Oregon	Retiree Risk						\$	363.03										
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B						\$	1,041.90										
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,220.63	\$ 1,316.68										\$	363.03	\$	363.79		
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,220.63	\$ 1,316.68	\$	5,116.38								\$	363.03	\$	363.79		
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,220.63	\$ 1,316.68	\$	5,116.38		\$	363.03	\$	363.79			\$	363.03	\$	363.79		
488	Kaiser - Oregon	Two Retiree Risk						\$	363.03	\$	363.79								
489	Kaiser - Oregon	Retiree w/ Part A only						\$	853.20										
491	Kaiser - Oregon	One Risk, One Medicare Part A only						\$	853.20 \$	\$	363.79								
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,492.50	\$ 554.21				\$	1,041.90	\$	363.79			\$	363.03	\$	363.79		
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,220.63	\$ 1,316.68				\$	363.03	\$	363.79			\$	363.03	\$	363.79		
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,220.63	\$ 1,316.68	\$	5,116.38		\$	363.03	\$	363.79			\$	363.03	\$	363.79		
495	Kaiser - Oregon	Two Over 65 unassigned Medicare						\$	1,041.90	\$1,	058.50								
496	Kaiser - Oregon	Two Medicare Part A only						\$	853.20	\$	865.40								
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,220.63	\$ 1,316.68				\$	853.20	\$	865.40			\$	853.20	\$	865.40		
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,220.63	\$ 1,316.68				\$	1,041.90	\$1,	058.50			\$	1,041.90	\$	1,058.50		
393	Kaiser - Washington	Retiree Basic	\$ 1,542.53				\$ 1,542.53							\$	338.58			\$	338.58
394	Kaiser - Washington	Retiree Risk (Senior Advantage)						\$	338.58			\$	338.58						
395	Kaiser - Washington	Retiree Basic (Two Party)	\$ 1,542.53	\$ 1,445.96										\$	338.58	\$	338.77		
396	Kaiser - Washington	Retiree Basic Family	\$ 1,542.53	\$ 1,445.96	\$	8,158.65								\$	338.58	\$	338.77		
397	Kaiser - Washington	One Risk, One Basic	\$ 1,542.53	\$ 1,445.96	\$	5,618.71		\$	338.58	\$	338.77			\$	338.58	\$	338.77		
398	Kaiser - Washington	Two Retiree Risk						\$	338.58	\$	338.77								
399	Kaiser - Washington	One Risk, Two or More Dependents	\$ 1,542.53	\$ 1,445.96	\$	7,299.68		\$	338.58	\$	338.77			\$	338.58	\$	338.77		
400	Kaiser - Washington	Two Risk, Two or More Dependents			\$	8,158.65		\$	338.58	\$	338.77			\$	338.58	\$	338.77		
611	SCAN Health Plan	Retiree Only						\$	213.31										
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)						\$	213.31	\$	213.31								
620	SCAN Health Plan AZ	Retiree Only						\$	213.31										
621	SCAN Health Plan AZ	Retiree & 1 Dependent (2 Medicare)						\$	213.31	\$	213.31								
622	SCAN Health Plan NV	Retiree Only						\$	213.31										
623	SCAN Health Plan NV	Retiree & 1 Dependent (2 Medicare)						\$	213.31	\$ :	213.31								
701	United Healthcare	Retiree Only	\$ 1,398.60					\$	277.21					\$	277.21				
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,398.60	\$ 1,398.60	\$	1,409.75		\$	277.21	\$	277.21			\$	277.21	\$	277.21		
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)						\$	277.21	\$	277.21			\$	277.21	\$	277.21		
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,398.60	\$ 1,398.60	\$	1,409.75		\$	277.21	\$	277.21			\$	277.21	\$	277.21		
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,398.60	\$ 1,398.60	\$	1,409.75		\$	277.21	\$	277.21			\$	277.21	\$	277.21		
706	United Healthcare	Minor Survivor					\$ 1,409.75					\$	1,409.75						
707	United Healthcare	Single	\$ 1,398.60											\$	337.95				
708	United Healthcare	Two-Party	\$ 1,398.60	\$ 1,398.60	\$	1,409.75								\$	337.95	\$	337.31		
709	United Healthcare	Family	\$ 1,398.60	\$ 1,398.60	\$	1,409.75								\$	337.95	\$	337.31		

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#### Tier 1

#### Fire Fighters Local 1014 Female Retirees

Deduct					Pre 65 Cla	aim (	Costs		Po	st 65 Clair	n Cost	s for Pos	at 65	Retirees	Po	et 65 Cla	im C	osts for Pre	a 65 F	Retirees
	Plan	Tier	Reti	iree	 pouse		Child	 Surv	-	etiree		ouse		Surv		letiree		Spouse		Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2,0	001.20					\$	538.70					\$	538.70				
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 2,0	001.20	\$ 2,001.20	\$	2,017.15		\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 2,0	001.20	\$ 2,001.20	\$	2,017.15		\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare							\$	538.70			\$	538.70	\$	538.70			\$	538.70
805	Firefighters' Local 1014	Med-Member +1; 1 MDC			\$ 2,001.20	\$	2,017.15		\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
806	Firefighters' Local 1014	Med-Member +1; 2 MDC							\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
807	Firefighters' Local 1014	Med-Member +2; 1 MDC			\$ 2,001.20	\$	2,017.15		\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
808	Firefighters' Local 1014	Med-Member +2; 2 MDC							\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65						\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65			\$ 2,001.20	\$	2,017.15	\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65			\$ 2,001.20	\$	2,017.15	\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC									\$	538.70	\$	538.70			\$	538.70	\$	538.70
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC			\$ 2,001.20	\$	2,017.15	\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC			\$ 2,001.20	\$	2,017.15	\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC									\$	538.70	\$	538.70			\$	538.70	\$	538.70

#### **Dental/Vision Female Retirees**

Deduction				Age 65 A	١dju	isted Claim	Со	sts
Code	Plan	Tier	R	etiree		Sp/Dep		Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$	50.42				
502	Cigna Indemnity Dental/Vision	Family	\$	50.42	\$	54.96		
503	Cigna Indemnity Dental/Vision	Minor Survivor					\$	51.65
901	Cigna Dental HMO/Vision	Retiree Only	\$	47.64				
902	Cigna Dental HMO/Vision	Family	\$	47.64	\$	56.35		
903	Cigna Dental HMO/Vision	Minor Survivor					\$	48.81

## Tier 2

#### A. Future Retirees Retiring Before Age 65

Age		Ret	iree		Spou	Spouse/Surv Spouse + Dependents							
-		<u>Male</u>		Female		<u>Male</u>		<u>Female</u>					
25	\$	398.84	\$	644.16	\$	433.01	\$	331.33					
30	\$	491.37	\$	788.48	\$	397.38	\$	741.90					
35	\$	609.59	\$	848.45	\$	492.99	\$	737.83					
40	\$	747.48	\$	1,077.18	\$	590.78	\$	803.55					
45	\$	852.21	\$	1,299.15	\$	689.06	\$	913.73					
50	\$	969.54	\$	1,236.27	\$	831.96	\$	1,032.09					
55	\$	1,103.00	\$	1,196.29	\$	1,006.74	\$	1,142.73					
60	\$	1,147.67	\$	1,174.14	\$	1,254.51	\$	1,296.64					
65 (Pre 65)	\$	1,284.25	\$	1,260.08	\$	1,555.93	\$	1,512.01					
65 (Post 65)	\$	301.83	\$	263.17	\$	254.66	\$	286.77					
70	\$	366.00	\$	305.99	\$	308.80	\$	333.41					
75	\$	419.67	\$	336.47	\$	354.08	\$	366.62					
80	\$	450.61	\$	352.68	\$	380.19	\$	384.29					
85	\$	462.64	\$	358.48	\$	390.34	\$	390.60					
90	\$	466.01	\$	358.64	\$	393.18	\$	390.76					
95	\$	466.01	\$	358.64	\$	393.18	\$	390.76					

#### **B. Future Retirees Retiring After Age 65**

Age	Ret	iree		Spous	Spouse/Surv Spouse + Dependent							
-	<u>Male</u>		<u>Female</u>		<u>Male</u>		<u>Female</u>					
25	N/A		N/A	\$	434.01	\$	332.81					
30	N/A		N/A	\$	398.32	\$	745.21					
35	N/A		N/A	\$	494.15	\$	741.14					
40	N/A		N/A	\$	592.16	\$	807.15					
45	N/A		N/A	\$	690.68	\$	917.82					
50	N/A		N/A	\$	833.92	\$	1,036.70					
55	N/A		N/A	\$	1,009.11	\$	1,147.84					
60	N/A		N/A	\$	1,257.47	\$	1,302.44					
65 (Pre 65)	N/A		N/A	\$	1,559.60	\$	1,518.77					
65 (Post 65)	\$ 275.62	\$	254.93	\$	257.38	\$	263.48					
70	\$ 334.21	\$	296.40	\$	312.10	\$	306.34					
75	\$ 383.22	\$	325.93	\$	357.87	\$	336.86					
80	\$ 411.48	\$	341.64	\$	384.26	\$	353.10					
85	\$ 422.45	\$	347.26	\$	394.51	\$	358.90					
90	\$ 425.53	\$	347.42	\$	397.39	\$	359.06					
95	\$ 425.53	\$	347.42	\$	397.39	\$	359.06					

The Firefighters Local 1014 and dental/vision monthly claim costs are shown in the tables on the following page.

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# Tier 2

# Firefighters Local 1014 Plan Monthly Medical Claim Costs

<u>Age</u>	Re	etire	e	Spoι	+ Dependents		
-	<u>Male</u>		<u>Female</u>		<u>Male</u>		Female
25	\$ 639.73	\$	1,023.04	\$	653.93	\$	500.26
30	\$ 788.12	\$	1,252.24	\$	600.13	\$	1,120.16
35	\$ 977.74	\$	1,347.49	\$	744.52	\$	1,114.02
40	\$ 1,198.90	\$	1,710.75	\$	892.20	\$	1,213.24
45	\$ 1,366.90	\$	2,063.25	\$	1,040.64	\$	1,379.57
50	\$ 1,555.12	\$	1,963.40	\$	1,256.48	\$	1,558.28
55	\$ 1,769.19	\$	1,899.89	\$	1,520.44	\$	1,725.31
60	\$ 1,840.84	\$	1,864.72	\$	1,894.61	\$	1,957.68
65 (Pre 65)	\$ 2,059.92	\$	2,001.20	\$	2,349.83	\$	2,282.85
65 (Post 65)	\$ 554.50	\$	538.70	\$	554.50	\$	538.70
70	\$ 672.39	\$	626.33	\$	672.39	\$	626.33
75	\$ 771.00	\$	688.71	\$	771.00	\$	688.71
80	\$ 827.85	\$	721.91	\$	827.85	\$	721.91
85	\$ 849.94	\$	733.77	\$	849.94	\$	733.77
90	\$ 856.13	\$	734.09	\$	856.13	\$	734.09
95	\$ 856.13	\$	734.09	\$	856.13	\$	734.09

#### **Future Retirees Monthly Dental/Vision Claim Costs**

<u>Age</u>	Ret	iree		Spou	Spouse/Surv Spouse + Dependen									
	<u>Male</u>		<u>Female</u>		<u>Male</u>		<u>Female</u>							
25	\$ 22.04	\$	27.43	\$	24.79	\$	25.04							
30	\$ 25.13	\$	29.65	\$	27.63	\$	32.63							
35	\$ 27.20	\$	31.55	\$	29.91	\$	34.72							
40	\$ 28.74	\$	33.51	\$	31.61	\$	36.88							
45	\$ 30.67	\$	35.59	\$	33.73	\$	39.16							
50	\$ 33.38	\$	38.19	\$	36.71	\$	42.03							
55	\$ 37.59	\$	41.73	\$	41.33	\$	45.92							
60	\$ 43.51	\$	46.38	\$	47.85	\$	51.04							
65	\$ 50.46	\$	50.08	\$	55.49	\$	55.10							
70	\$ 56.66	\$	52.29	\$	62.30	\$	57.54							
75	\$ 56.66	\$	52.29	\$	62.30	\$	57.54							
80	\$ 56.66	\$	52.29	\$	62.30	\$	57.54							
85	\$ 56.66	\$	52.29	\$	62.30	\$	57.54							
90	\$ 56.66	\$	52.29	\$	62.30	\$	57.54							
95	\$ 56.66	\$	52.29	\$	62.30	\$	57.54							

For current retired members, spouses, and dependents, the claim costs are based on the actual premiums by deduction code, adjusted for age and gender. The tables that follow show the age 65 adjusted monthly claim costs. Adjustments by age and gender are based on the same methodology used in the tables above.

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#### Tier 2

#### Non Local 1014 Fire Fighters Male Retirees

Deduct										Post 65 Claim Costs for Post 65 Retirees						Post 65 Claim Costs for Pre 65 Retirees						
Code	Plan	Tier		Retiree	:	Spouse		Child		Surv		Retiree	S	spouse		Surv	R	etiree	:	Spouse	3	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$	772.14							\$	772.14					\$	415.98				
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$	772.14	\$	772.14	\$	595.39			\$	772.14	\$	772.14			\$	415.98	\$	415.98		
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$	772.14	\$	772.14	\$	595.39			\$	772.14	\$	772.14			\$	415.98	\$	415.98		
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$	772.14	\$	772.14	\$	595.39			\$	772.14					\$	415.98				
205	Anthem Blue Cross Prudent Buyer	Minor Survivor							\$	595.39					\$	595.39						
211	Anthem Blue Cross I	Retiree Only	\$	634.59							\$	634.59					\$	415.98				
212	Anthem Blue Cross I	Retiree and Spouse	\$	634.59	\$	634.59	\$	489.32			\$	634.59	\$	634.59			\$	415.98	\$	415.98		
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$	634.59	\$	634.59	\$	489.32			\$	634.59	\$	634.59			\$	415.98	\$	415.98		
214	Anthem Blue Cross I	Retiree and Children	\$	634.59	\$	634.59	\$	489.32			\$	634.59					\$	415.98				
215	Anthem Blue Cross I	Minor Survivor							\$	489.32					\$	489.32					\$	489.32
221	Anthem Blue Cross II	Retiree Only	\$	1,216.88							\$	1,216.88					\$	415.98				
222	Anthem Blue Cross II	Retiree and Spouse	\$	1,216.88	\$	1,216.88	\$	938.32			\$	1,216.88	\$	1,216.88			\$	415.98	\$	415.98		
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$	1,216.88	\$	1,216.88	\$	938.32			\$	1,216.88	\$	1,216.88			\$	415.98	\$	415.98		
224	Anthem Blue Cross II	Retiree and Children	\$	1,216.88	\$	1,216.88	\$	938.32			\$	1,216.88					\$	415.98				
225	Anthem Blue Cross II	Minor Survivor							\$	938.32					\$	938.32					\$	938.32
240	Anthem Blue Cross III	One Medicare									\$	415.98					\$	415.98				
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$	1,292.50	\$	1,292.50	\$	996.63			\$	415.98	\$	415.98			\$	415.98	\$	415.98		l
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$	1.292.50	\$		\$	996.63			\$	415.98		415.98			\$	415.98		415.98		
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare	Ŷ	1,202.00	Ŷ	1,202.00	Ŷ	000.00			\$	415.98		415.98			\$	415.98		415.98		l
244	Anthem Blue Cross III	Retiree and Children 1 Medicare			\$	1.292.50	\$	996.63			\$	415.98	Ŷ	110.00			\$	415.98	•	415.98		l
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			\$		\$	996.63			\$	415.98					\$	415.98		415.98		l
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$	1,292.50	\$		\$	996.63			\$	415.98	\$	415.98			¢ ¢	415.98		415.98		
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	¢ \$	1,292.50	\$	1,292.50		996.63			\$	415.98		415.98			\$	415.98		415.98		l
248	Anthem Blue Cross III	Retiree and Family 2 Medicare	Ψ	1,232.50	\$ \$		Ψ \$	996.63			\$	415.98		415.98			φ ¢	415.98		415.98		
249	Anthem Blue Cross III	Retiree and Family 2 Medicare			\$	,	\$	996.63			\$	415.98		415.98			\$	415.98	•	415.98		
250	Anthem Blue Cross III	Retiree and Family 3 Medicare			\$	1,292.50	\$	996.63			\$	415.98		415.98			\$	415.98	•	415.98		
301	Cigna Network Model Plan	Retiree Only	\$	1,266.98	Ψ	1,232.50	Ψ	330.03			џ \$	1,266.98	Ψ	415.50			\$	318.01	Ψ	413.30		
301	U U	5	э \$		¢	4 000 00	¢	976.95			ֆ Տ	1,266.98	¢	4 000 00			э \$	318.01	¢	318.01		
	Cigna Network Model Plan	Retiree and Spouse	\$ \$	1,266.98	ծ Տ	,	\$	976.95 976.95			ծ Տ			1,266.98			ծ Տ	318.01		318.01		
303	Cigna Network Model Plan	Retiree and Family	Ŷ	1,266.98	•	1,266.98	\$				-		\$	1,200.98			-		\$	318.01		
304 305	Cigna Network Model Plan	Retiree and Children	\$	1,266.98	\$	1,266.98	\$	976.95	\$	976.95	\$	1,266.98			¢	976.95	\$	318.01				
	Cigna Network Model Plan	Minor Survivor							\$						\$	976.95						
321	Cigna Medicare Select Plus Rx (AZ)										\$	323.37										l
322	Cigna Medicare Select Plus Rx (AZ)										\$	323.37		323.37			\$	323.37	\$	323.37		
324	Cigna Medicare Select Plus Rx (AZ)										\$	323.37		323.37								
325	Cigna Medicare Select Plus Rx (AZ)										\$	323.37		323.37			\$	323.37		323.37		
327	Cigna Medicare Select Plus Rx (AZ)	, , , , , , , , , , , , , , , , , , ,									\$	323.37		323.37			\$	323.37	\$	323.37		
329	Cigna Medicare Select Plus Rx (AZ)										\$	323.37	\$	323.37								
401	Kaiser (CA)	Retiree Basic (Under 65)	\$	1,300.67													\$	213.55				ļ
403	Kaiser (CA)	Retiree Risk (Senior Advantage)									\$	209.42										
404	Kaiser (CA)	Retiree Excess I									\$	938.47										
405	Kaiser (CA)	Retiree Excess II - Part B									\$	913.96										
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)									\$	938.47										
411	Kaiser (CA)	Family Basic	\$	1,300.67	\$	1,300.67	\$	1,002.93									\$	211.49	\$	202.75		

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#### Tier 2

#### Non Local 1014 Fire Fighters Male Retirees

Deduct		<b>_</b> .		Retiree	Pre 65 Claim Costs Spouse Child Su					Surv		st 65 Claim Retiree			St 65 Retirees		Retiree		osts for Pre	Surv	
		Tier		1.300.67	\$		\$	1.002.93			\$	209.42		200.59	Surv	\$			202.75		Surv
	aiser (CA)	One Advantage, One Basic	•		•						ծ Տ					ֆ Տ		•			
	aiser (CA)	One Excess I, One Basic	\$	1,300.67	\$	1,300.67	Э	1,002.93			ծ Տ	938.47 209.42		926.49 200.59		Э	938.47	\$	202.75		
	aiser (CA)	Two+ Advantage									ծ Տ										
	( )	One Excess I, One Advantage									-	573.95		563.54							
	aiser (CA)	Two+ Excess I							¢		\$	938.47	\$	926.49	¢ 4.000.0	~~				¢	4 000 00
	(-)	Survivor	•	4 000 07	•	4 000 07	•	1 000 00	\$	1,002.93	•	040.00	•		\$ 1,002.9		040.00	•	000 75	\$	1,002.93
	(- )	One Excess II - Part B, One Basic	\$	1,300.67	\$			1,002.93			\$	913.96		902.09		\$	913.96		202.75		
	( )	One Excess III (MNP), One Basic	\$	1,300.67	\$	1,300.67	\$	1,002.93			\$	938.47		926.49		\$	938.47	\$	202.75		
	aiser (CA)	One Advantage, One Excess II - Part B									\$	561.69		551.34							
		One Advantage, One Excess III (MNP)									\$	573.95		563.54							
	aiser (CA)	One Excess, One Excess II - Part B									\$	926.22		914.29							
	aiser (CA)	One Excess, One Excess III (MNP)									\$	938.47		926.49							
	(-)	Two Excess II - Part B									\$	913.96		902.09							
		One Excess II - Part B, One Excess III (MNP)									\$	926.22		914.29							
		Two Excess III - Both (MNP)									\$	938.47	\$	926.49							
	aiser - Colorado Basic	Retiree Basic	\$	1,178.87												\$	232.54				
	aiser - Colorado	Retiree Risk									\$	232.54									
	aiser - Colorado	Retiree Basic (Two Party)	\$	1,178.87	\$	1,550.61										\$	232.54	\$	230.03		
454 Ka	aiser - Colorado	Retiree Basic Family	\$	1,178.87	\$	1,550.61	\$	2,946.68								\$	232.54	\$	230.03		
455 Ka	aiser - Colorado	One Risk, One Basic	\$	1,178.87	\$	1,270.89					\$	232.54	\$	230.03		\$	232.54	\$	230.03		
457 Ka	aiser - Colorado	Two Retiree Risk									\$	232.54	\$	230.03							
458 Ka	aiser - Colorado	One Risk, Two or More Dependents	\$	1,178.87	\$	1,270.89	\$	3,558.09			\$	232.54	\$	230.03		\$	232.54	\$	230.03		
459 Ka	aiser - Colorado	Two Risk, Two or More Dependents					\$	3,777.83			\$	232.54	\$	230.03		\$	232.54	\$	230.03		
440 Ka	aiser - Georgia	One Medicare Member with Part B only									\$	903.53									
441 Ka	aiser - Georgia	One Medicare Member with Part A only									\$	903.53									
442 Ka	aiser - Georgia	One Member without Medicare Part A&B									\$	903.53									
445 Ka	aiser - Georgia	One Medicare Member + One Medicare with Part A only									\$	903.53	\$	329.67							
461 Ka	aiser - Georgia Basic	Basic	\$	1,294.28												\$	329.91				
462 Ka	aiser - Georgia	Retiree Risk									\$	329.91									
463 Ka	aiser - Georgia	Retiree (Two Party)	\$	1,294.28	\$	1,396.51	\$	4,151.25			\$	329.91	\$	329.67		\$	329.91	\$	329.67		
464 Ka	aiser - Georgia	Retiree Basic Family	\$	1,294.28	\$	1,396.51	\$	4,151.22								\$	329.91	\$	329.67		
465 Ka	aiser - Georgia	One Retiree Risk, One Basic	\$	472.59	\$	1,396.50	\$	4,151.22			\$	329.91	\$	329.67		\$	329.91	\$	329.67		
466 Ka	aiser - Georgia	Two Retiree Risk									\$	329.91	\$	329.67							
471 Ka	aiser - Hawaii	Retiree Basic (Under 65)	\$	1,023.58												\$	348.49				
472 Ka	aiser - Hawaii	Retiree Risk									\$	348.49									
473 Ka	aiser - Hawaii	Retiree Over 65 without Medicare A&B									\$	1,436.65									
474 Ka	aiser - Hawaii Basic	Retiree Basic (Two Party)	\$	1,023.58	\$	1,101.88										\$	348.49	\$	348.69		
475 Ka	aiser - Hawaii	Retiree Basic Family (Under 65)	\$	1,023.58	\$	1,101.88	\$	3,275.47								\$	348.49	\$	348.69		
	aiser - Hawaii	One Retiree Risk, One Basic	\$	1,023.58	\$	1,101.89	\$	3,275.47			\$	348.49	\$	348.69		\$	348.49		348.69		
		Over 65 without Medicare A&B, One Basic	•	1,023.58	•	,		., .			\$	1,436.65		1,462.24		\$			1,462.24		
	aiser - Hawaii	Two Retiree Risk						,			\$	348.49		348.69		•	,				

# Tier 2

#### Non Local 1014 Fire Fighters Male Retirees

Deduct				Pre 65 C	laim	Costs		Р	ost 65 Claim	Cos	ts for Post	t 65	Retirees	Р	ost 65 Clai	m Co	osts for Pre	65 R	etirees
Code	Plan	Tier	Retiree	Spouse		Child	Surv	1	Retiree	S	pouse		Surv	F	Retiree	5	Spouse	5	Surv
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,256.45											\$	373.68				
482	Kaiser - Oregon	Retiree Risk						\$	373.68										
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B						\$	1,072.47										
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,256.45	\$ 1,355.32										\$	373.68	\$	374.47		
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,256.45	\$ 1,355.32	\$	4,028.82								\$	373.68	\$	374.47		
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,256.45	\$ 1,355.32	\$	4,028.82		\$	373.68	\$	374.47			\$	373.68	\$	374.47		
488	Kaiser - Oregon	Two Retiree Risk						\$	373.68	\$	374.47								
489	Kaiser - Oregon	Retiree w/ Part A only						\$	878.24										
491	Kaiser - Oregon	One Risk, One Medicare Part A only						\$	878.24	\$	374.47								
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,536.29	\$ 570.47				\$	1,072.47	\$	374.47			\$	373.68	\$	374.47		I
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,256.45	\$ 1,355.32				\$	373.68	\$	374.47			\$	373.68	\$	374.47		I
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,256.45	\$ 1,355.32	\$	4,028.82		\$	373.68	\$	374.47			\$	373.68	\$	374.47		I
495	Kaiser - Oregon	Two Over 65 unassigned Medicare						\$	1,072.47	\$	1,089.56								
496	Kaiser - Oregon	Two Medicare Part A only						\$	878.24	\$	890.79								
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,256.45	\$ 1,355.32				\$	878.24	\$	890.79			\$	878.24	\$	890.79		
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,256.45	\$ 1,355.32				\$	1,072.47	\$	1,089.56			\$	1,072.47	\$	1,089.56		
393	Kaiser - Washington	Retiree Basic	\$ 1,587.80				\$ 1,587.80							\$	348.51			\$	348.51
394	Kaiser - Washington	Retiree Risk (Senior Advantage)						\$	348.51			\$	348.51						l
395	Kaiser - Washington	Retiree Basic (Two Party)	\$ 1,587.80	\$ 1,488.39										\$	348.51	\$	348.71		
396	Kaiser - Washington	Retiree Basic Family	\$ 1,587.80	\$ 1,488.39	\$	6,424.42								\$	348.51	\$	348.71		l
397	Kaiser - Washington	One Risk, One Basic	\$ 1,587.80	\$ 1,488.39	\$	4,424.38		\$	348.51	\$	348.71			\$	348.51	\$	348.71		
398	Kaiser - Washington	Two Retiree Risk						\$	348.51	\$	348.71								
399	Kaiser - Washington	One Risk, Two or More Dependents	\$ 1,587.80	\$ 1,488.39	\$	5,748.04		\$	348.51	\$	348.71			\$	348.51		348.71		
400	Kaiser - Washington	Two Risk, Two or More Dependents			\$	6,424.42		\$	348.51	\$	348.71			\$	348.51	\$	348.71		
611	SCAN Health Plan	Retiree Only						\$	219.57										
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)						\$	219.57	\$	219.57								
620	SCAN Health Plan AZ	Retiree Only						\$	219.57										
621	SCAN Health Plan AZ	Retiree & 1 Dependent (2 Medicare)						\$	219.57	\$	219.57								
622	SCAN Health Plan NV	Retiree Only						\$	219.57										
623	SCAN Health Plan NV	Retiree & 1 Dependent (2 Medicare)						\$	219.57	\$	219.57								
701	United Healthcare	Retiree Only	\$ 1,439.64					\$	285.35					\$	285.35				
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,439.64	\$ 1,439.64	\$	1,110.09		\$	285.35	\$	285.35			\$	285.35	\$	285.35		
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)						\$	285.35	\$	285.35			\$	285.35	\$	285.35		
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,439.64	\$ 1,439.64	\$	1,110.09		\$	285.35	\$	285.35			\$	285.35	\$	285.35		
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,439.64	\$ 1,439.64	\$	1,110.09		\$	285.35	\$	285.35			\$	285.35	\$	285.35		
706	United Healthcare	Minor Survivor					\$ 1,110.09					\$	1,110.09						
707	United Healthcare	Single	\$ 1,439.64											\$	293.85				
708	United Healthcare	Two-Party	\$ 1,439.64	\$ 1,439.64	\$	1,110.09								\$	293.85	\$	293.32		ļ
709	United Healthcare	Family	\$ 1,439.64	\$ 1,439.64	\$	1,110.09								\$	293.85	\$	293.32		

# Tier 2

#### Fire Fighters Local 1014 Male Retirees

Deduct						Pre 65 Cla	aim (	Costs		Pos	st 65 Clain	n Cost	ts for Pos	st 65 l	Retirees	Po	st 65 Cla	im C	osts for Pr	e 65 I	Retirees
Code	Plan	Tier	Re	etiree	5	Spouse		Child	Surv	R	etiree	Sp	ouse		Surv	R	etiree		Spouse		Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2	2,059.92						\$	554.50					\$	554.50				
802	Firefighters' Local 1014	Med-Member +1 under 65	\$2	2,059.92	\$	2,059.92	\$	1,588.38		\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
803	Firefighters' Local 1014	Med-Member +2 under 65	\$2	2,059.92	\$	2,059.92	\$	1,588.38		\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare								\$	554.50			\$	554.50	\$	554.50			\$	554.50
805	Firefighters' Local 1014	Med-Member +1; 1 MDC			\$	2,059.92	\$	1,588.38		\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
806	Firefighters' Local 1014	Med-Member +1; 2 MDC								\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
807	Firefighters' Local 1014	Med-Member +2; 1 MDC			\$	2,059.92	\$	1,588.38		\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
808	Firefighters' Local 1014	Med-Member +2; 2 MDC								\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50	\$	554.50
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65							\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65			\$	2,059.92	\$	1,588.38	\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65			\$	2,059.92	\$	1,588.38	\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC										\$	554.50	\$	554.50			\$	554.50	\$	554.50
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC			\$	2,059.92	\$	1,588.38	\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC			\$	2,059.92	\$	1,588.38	\$ 2,059.92			\$	554.50	\$	554.50			\$	554.50	\$	554.50
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC										\$	554.50	\$	554.50			\$	554.50	\$	554.50

# **Dental/Vision Male Retirees**

	Deduction				Age 65 A	١dju	sted Claim	Со	sts
	Code	Plan	Tier	R	etiree		Sp/Dep		Surv
ſ	501	Cigna Indemnity Dental/Vision	Retiree Only	\$	50.77				
	502	Cigna Indemnity Dental/Vision	Family	\$	50.77	\$	55.35		
	503	Cigna Indemnity Dental/Vision	Minor Survivor					\$	52.54
	901	Cigna Dental HMO/Vision	Retiree Only	\$	47.98				
	902	Cigna Dental HMO/Vision	Family	\$	47.98	\$	56.74		
	903	Cigna Dental HMO/Vision	Minor Survivor					\$	49.65

This work product was prepared solely for LACERA for the purposes described herein and may not be appropriate to use for other purposes. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. Milliman recommends that third parties be aided by their own actuary or other qualified professional when reviewing the Milliman work product.

# Tier 2

### Non Local 1014 Fire Fighters Female Retirees

											_		_				_					
Deduct						Pre 65 Cla	_		-	-	_	st 65 Clair			St 65							65 Retirees
Code	Plan	Tier		Retiree		Spouse		Child		Surv		Retiree		Spouse		Surv		etiree		Spouse	e	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$	750.13							\$	750.13					\$	404.12				
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$	750.13		750.13		756.11			\$	750.13		750.13			\$	404.12			1.12	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$	750.13	•	750.13		756.11			\$	750.13	\$	750.13			\$	404.12	\$	404	1.12	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$	750.13	\$	750.13	\$	756.11			\$	750.13					\$	404.12				
205	Anthem Blue Cross Prudent Buyer	Minor Survivor							\$	756.11					\$	756.11						
211	Anthem Blue Cross I	Retiree Only	\$	616.50							\$	616.50					\$	404.12				
212	Anthem Blue Cross I	Retiree and Spouse	\$	616.50		616.50	\$	621.41			\$		\$	616.50			\$	404.12			1.12	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$	616.50		616.50	\$	621.41			\$	616.50	\$	616.50			\$	404.12	\$	404	1.12	
214	Anthem Blue Cross I	Retiree and Children	\$	616.50	\$	616.50	\$	621.41			\$	616.50					\$	404.12				
215	Anthem Blue Cross I	Minor Survivor							\$	621.41					\$	621.41					9	\$ 621.4
221	Anthem Blue Cross II	Retiree Only	\$	1,182.19							\$	1,182.19					\$	404.12				
222	Anthem Blue Cross II	Retiree and Spouse	\$	1,182.19	\$	1,182.19	\$	1,191.61			\$	1,182.19	\$	1,182.19			\$	404.12	\$	404	1.12	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$	1,182.19	\$	1,182.19	\$	1,191.61			\$	1,182.19	\$	1,182.19			\$	404.12	\$	404	1.12	
224	Anthem Blue Cross II	Retiree and Children	\$	1,182.19	\$	1,182.19	\$	1,191.61			\$	1,182.19					\$	404.12				
225	Anthem Blue Cross II	Minor Survivor							\$	1,191.61					\$	1,191.61					9	\$ 1,191.6
240	Anthem Blue Cross III	One Medicare									\$	404.12					\$	404.12				
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$	1,255.66	\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404	1.12	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$	1,255.66	\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404	1.12	
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare									\$	404.12	\$	404.12			\$	404.12	\$	404	1.12	
244	Anthem Blue Cross III	Retiree and Children 1 Medicare			\$	1,255.66	\$	1,265.66			\$	404.12					\$	404.12	\$	404	1.12	
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			\$	1,255.66	\$	1,265.66			\$	404.12					\$	404.12	\$	404	1.12	
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$	1,255.66	\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404	1.12	
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$	1,255.66	\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404	1.12	
248	Anthem Blue Cross III	Retiree and Family 2 Medicare			\$	1,255.66	\$	1,265.66			\$	404.12	\$	404.12			\$	404.12	\$	404	1.12	
249	Anthem Blue Cross III	Retiree and Family 2 Medicare			\$	1.255.66	\$	1.265.66			\$	404.12	\$	404.12			\$	404.12	\$	404	1.12	
250	Anthem Blue Cross III	Retiree and Family 3 Medicare			\$	1,255.66	\$	1,265.66			\$	404.12		404.12			\$	404.12	\$	404	1.12	
301	Cigna Network Model Plan	Retiree Only	\$	1.230.86							\$	1.230.86					\$	308.94				
302	Cigna Network Model Plan	Retiree and Spouse	s.	1,230.86	\$	1,230.86	\$	1,240.67			\$	1,230.86	\$	1,230,86			ŝ	308.94	\$	308	3.94	
303	Cigna Network Model Plan	Retiree and Family	s	1,230.86	\$	1,230.86	\$	1,240.67			\$			1,230.86			\$	308.94	\$	308	3.94	
304	Cigna Network Model Plan	Retiree and Children	ŝ	1,230.86		1,230.86						1,230.86	*	.,			ŝ	308.94	Ŧ			
305	Cigna Network Model Plan	Minor Survivor	•	.,	Ť	.,	•	.,	\$	1,240.67	Ŧ	.,			\$	1,240.67	*					
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only									\$	314.15				,						
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse									\$	314.15	\$	314.15			\$	314.15	\$	314	1.15	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)									\$	314.15		314.15			Ψ	014.10	Ψ	014		
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children									\$	314.15		314.15			\$	314.15	\$	314	1.15	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)									Ψ \$	314.15		314.15			\$	314.15			l.15	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)									φ \$	314.15		314.15			Ψ	514.15	Ψ	514		
401	Kaiser (CA)	Retiree Basic (Under 65)	¢	1.263.60							¥	0.4.10	Ŷ	0.4.10			\$	207.47				
401	Kaiser (CA)	Retiree Risk (Senior Advantage)	ę	1,200.00							\$	203.45					Ψ	201.41				
403 404	Kaiser (CA)	Retiree Excess I									ֆ \$	203.45 911.72										
404 405	Kaiser (CA)	Retiree Excess II - Part B									ֆ \$	887.91										
405	( )	Excess III - Medicare Not Provided (MNP)									ֆ Տ	911.72										
406 411	Kaiser (CA) Kaiser (CA)	Excess III - Medicare Not Provided (MNP) Family Basic	¢	1 262 60	¢	1,263.60	¢	1 272 67			φ	911.72					\$	205.46	¢	196	: 07	
411	Naisei (UA)	Family DasiC	\$	1,203.00	Ф	1,203.00	Э	1,2/3.0/									Ş	205.46	Ф	196	0.97	

# Tier 2

### Non Local 1014 Fire Fighters Female Retirees

								_			_											
Deduct	Disc	Ting		Retiree	_	Pre 65 Cl	aim	Costs Child	-	Surv		st 65 Clain Retiree		sts for Pos		etirees urv	_	Post 65 Clai Retiree	_			Surv
Code 413	Plan	Tier		1.263.60		Spouse 1.263.60		1.273.67		Surv	\$	203.45		194.87	3	urv	\$			Spouse 196.97		Surv
413	Kaiser (CA)	One Advantage, One Basic One Excess I. One Basic	ծ Տ	1,263.60	\$	,	•				ֆ Տ	203.45 911.72		900.08			ծ Տ	203.45 911.72	\$	196.97		
414	Kaiser (CA)		Þ	1,203.00	Þ	1,203.00	\$	1,273.07			ֆ Տ	203.45		900.08 194.87			Þ	911.72	Ф	196.97		
	Kaiser (CA)	Two+ Advantage									-											
419 420	Kaiser (CA)	One Excess I, One Advantage									\$ \$	557.58 911.72		547.48 900.08								
	Kaiser (CA)	Two+ Excess I								4 070 07	\$	911.72	\$	900.08	¢ 4	070.07					¢	4 070 07
421	Kaiser (CA)	Survivor		4 000 00	¢	4 000 00	¢	4 070 07	\$	1,273.67	¢	007.04	¢	070 07	\$ 1	,273.67	¢	007.04	¢	400.07	\$	1,273.67
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$	1,263.60	\$	1,263.60	•	1,273.67			\$	887.91		876.37			\$	887.91		196.97		
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$	1,263.60	\$	1,263.60	\$	1,273.67			\$	911.72		900.08			\$	911.72	\$	196.97		
426	Kaiser (CA)	One Advantage, One Excess II - Part B									\$	545.68		535.62								
427	Kaiser (CA)	One Advantage, One Excess III (MNP)									\$	557.58		547.48								
428	Kaiser (CA)	One Excess, One Excess II - Part B									\$	899.81		888.22								
429	Kaiser (CA)	One Excess, One Excess III (MNP)									\$	911.72		900.08								
430	Kaiser (CA)	Two Excess II - Part B									\$	887.91		876.37								
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)									\$	899.81		888.22								
432	Kaiser (CA)	Two Excess III - Both (MNP)									\$	911.72	\$	900.08								
450	Kaiser - Colorado Basic	Retiree Basic	\$	1,145.26													\$	225.91				
451	Kaiser - Colorado	Retiree Risk									\$	225.91										
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$	1,145.26	\$	1,506.40											\$	225.91		223.48		
454	Kaiser - Colorado	Retiree Basic Family	\$	1,145.26	\$	1,506.40	\$	3,742.11									\$	225.91	\$	223.48		
455	Kaiser - Colorado	One Risk, One Basic	\$	1,145.26	\$	1,234.65					\$	225.91	\$	223.48			\$	225.91	\$	223.48		
457	Kaiser - Colorado	Two Retiree Risk									\$	225.91	\$	223.48								
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$	1,145.26	\$	1,234.65	\$	4,518.57			\$	225.91	\$	223.48			\$	225.91	\$	223.48		
459	Kaiser - Colorado	Two Risk, Two or More Dependents					\$	4,797.62			\$	225.91	\$	223.48			\$	225.91	\$	223.48		
440	Kaiser - Georgia	One Medicare Member with Part B only									\$	877.77										
441	Kaiser - Georgia	One Medicare Member with Part A only									\$	877.77										
442	Kaiser - Georgia	One Member without Medicare Part A&B									\$	877.77										
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only									\$	877.77	\$	320.28								
461	Kaiser - Georgia Basic	Basic	\$	1,257.39													\$	320.51				
462	Kaiser - Georgia	Retiree Risk									\$	320.51										
463	Kaiser - Georgia	Retiree (Two Party)	\$	1,257.39	\$	1,356.70	\$	5,271.85			\$	320.51	\$	320.28			\$	320.51	\$	320.28		
464	Kaiser - Georgia	Retiree Basic Family	\$	1,257.39	\$	1,356.70	\$	5,271.81									\$	320.51	\$	320.28		
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$	459.12	\$	1,356.68	\$	5,271.81			\$	320.51	\$	320.28			\$	320.51	\$	320.28		
466	Kaiser - Georgia	Two Retiree Risk									\$	320.51	\$	320.28								
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$	994.40													\$	338.55				
472	Kaiser - Hawaii	Retiree Risk									\$	338.55										
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B									\$	1,395.69										
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$	994.40	\$	1,070.47											\$	338.55	\$	338.75		
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$	994.40	\$	1,070.47	\$	4,159.66									\$	338.55		338.75		
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$	994.40	\$	1,070.48	\$	4,159.66			\$	338.55	\$	338.75			\$		\$	338.75		
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$	994.40		1,070.47					\$	1,395.69		1,420.55			\$	1,395.69		1,420.55		
478	Kaiser - Hawaii	Two Retiree Risk	Ψ	00-1.40	Ψ	.,010.41	Ψ	7,100.00			Ψ \$	338.55		338.75			Ψ	.,000.00	Ψ	.,+20.00		
4/0	Naisei - Hawali										φ	330.35	φ	330.75								

# Tier 2

#### Non Local 1014 Fire Fighters Female Retirees

	<b>.</b>																	
Deduct				Pre 65 C	laim	Costs		Po	ost 65 Claim C	osts for P	ost 65	5 Retirees	Р	ost 65 Clai	m Co	osts for Pre	65 R	etirees
	Plan	Tier	Retiree	Spouse	Ì	Child	Surv	I	Retiree	Spouse		Surv	F	Retiree	5	Spouse	S	Surv
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,220.63										\$	363.03				
482	Kaiser - Oregon	Retiree Risk						\$	363.03									
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B						\$	1,041.90									
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,220.63	\$ 1,316.68									\$	363.03	\$	363.79		
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,220.63	\$ 1,316.68	\$	5,116.38							\$	363.03	\$	363.79		
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,220.63	\$ 1,316.68	\$	5,116.38		\$	363.03 \$	363.79	9		\$	363.03	\$	363.79		
488	Kaiser - Oregon	Two Retiree Risk						\$	363.03 \$	363.79	9							
489	Kaiser - Oregon	Retiree w/ Part A only						\$	853.20									
491	Kaiser - Oregon	One Risk, One Medicare Part A only						\$	853.20 \$	363.79	Ð							
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,492.50	\$ 554.21				\$	1,041.90 \$	363.79	9		\$	363.03	\$	363.79		
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,220.63	\$ 1,316.68				\$	363.03 \$	363.79	9		\$	363.03	\$	363.79		
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,220.63	\$ 1,316.68	\$	5,116.38		\$	363.03 \$	363.79	9		\$	363.03	\$	363.79		
495	Kaiser - Oregon	Two Over 65 unassigned Medicare						\$	1,041.90 \$	1,058.50	)							
496	Kaiser - Oregon	Two Medicare Part A only						\$	853.20 \$	865.40	)							
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,220.63	\$ 1,316.68				\$	853.20 \$	865.40	)		\$	853.20	\$	865.40		
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,220.63	\$ 1,316.68				\$	1,041.90 \$	1,058.50	)		\$	1,041.90	\$	1,058.50		
393	Kaiser - Washington	Retiree Basic	\$ 1,542.53				\$ 1,542.53						\$	338.58			\$	338.58
394	Kaiser - Washington	Retiree Risk (Senior Advantage)						\$	338.58		\$	338.58						
395	Kaiser - Washington	Retiree Basic (Two Party)	\$ 1,542.53	\$ 1,445.96									\$	338.58	\$	338.77		
396	Kaiser - Washington	Retiree Basic Family	\$ 1,542.53	\$ 1,445.96	\$	8,158.65							\$	338.58	\$	338.77		
397	Kaiser - Washington	One Risk, One Basic	\$ 1,542.53	\$ 1,445.96	\$	5,618.71		\$	338.58 \$	338.7	7		\$	338.58	\$	338.77		
398	Kaiser - Washington	Two Retiree Risk						\$	338.58 \$	338.77	7							
399	Kaiser - Washington	One Risk, Two or More Dependents	\$ 1,542.53	\$ 1,445.96	\$	7,299.68		\$	338.58 \$	338.77	7		\$	338.58	\$	338.77		
400	Kaiser - Washington	Two Risk, Two or More Dependents			\$	8,158.65		\$	338.58 \$	338.7	7		\$	338.58	\$	338.77		
611	SCAN Health Plan	Retiree Only						\$	213.31									
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)						\$	213.31 \$	213.3	1							
620	SCAN Health Plan AZ	Retiree Only						\$	213.31									
621	SCAN Health Plan AZ	Retiree & 1 Dependent (2 Medicare)						\$	213.31 \$	213.3	1							
622	SCAN Health Plan NV	Retiree Only						\$	213.31									
623	SCAN Health Plan NV	Retiree & 1 Dependent (2 Medicare)						\$	213.31 \$	213.3	1							
701	United Healthcare	Retiree Only	\$ 1.398.60					\$	277.21				\$	277.21				
	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,398.60	\$ 1,398.60	\$	1,409.75		\$	277.21 \$	277.2	1		\$	277.21	\$	277.21		
	United Healthcare	Retiree & 1 Dependent (2 Medicare)						\$	277.21 \$	277.2	1		\$	277.21	\$	277.21		
	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,398.60	\$ 1,398.60	\$	1,409.75		\$	277.21 \$	277.2	1		\$	277.21	\$	277.21		
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,398.60	\$ 1,398.60	\$	1,409.75		\$	277.21 \$	277.2	1		\$	277.21	\$	277.21		
706	United Healthcare	Minor Survivor					\$ 1,409.75				\$	1,409.75						
	United Healthcare	Single	\$ 1,398.60										\$	285.47				
	United Healthcare	Two-Party	\$ 1,398.60	\$ 1,398.60	\$	1,409.75							\$	285.47	\$	284.96		
	United Healthcare	Family	\$ 1,398.60	\$ 1.398.60	\$	1.409.75							\$	285.47	\$	284.96		

# Tier 2

#### Fire Fighters Local 1014 Female Retirees

Deduct					Pre 65 Cla	aim (	Costs		Pos	st 65 Clair	n Cost	s for Pos	st 65 I	Retirees	Po	st 65 Cla	im Co	osts for Pr	e 65 F	Retirees
	Plan	Tier	Retire	ee	pouse		Child	 Surv		etiree		ouse		Surv		etiree	-	Spouse		Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2,00	01.20					\$	538.70					\$	538.70				
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 2,00	01.20	\$ 2,001.20	\$	2,017.15		\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 2,00	01.20	\$ 2,001.20	\$	2,017.15		\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare							\$	538.70			\$	538.70	\$	538.70			\$	538.70
805	Firefighters' Local 1014	Med-Member +1; 1 MDC			\$ 2,001.20	\$	2,017.15		\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
806	Firefighters' Local 1014	Med-Member +1; 2 MDC							\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
807	Firefighters' Local 1014	Med-Member +2; 1 MDC			\$ 2,001.20	\$	2,017.15		\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
808	Firefighters' Local 1014	Med-Member +2; 2 MDC							\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70	\$	538.70
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65						\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65			\$ 2,001.20	\$	2,017.15	\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65			\$ 2,001.20	\$	2,017.15	\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC									\$	538.70	\$	538.70			\$	538.70	\$	538.70
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC			\$ 2,001.20	\$	2,017.15	\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC			\$ 2,001.20	\$	2,017.15	\$ 2,001.20			\$	538.70	\$	538.70			\$	538.70	\$	538.70
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC									\$	538.70	\$	538.70			\$	538.70	\$	538.70

## **Dental/Vision Female Retirees**

Deduction				Age 65 A	∖dju	isted Claim	Со	sts
Code	Plan	Tier	R	etiree		Sp/Dep		Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$	50.42				
	Cigna Indemnity Dental/Vision	Family	\$	50.42	\$	54.96		
503	Cigna Indemnity Dental/Vision	Minor Survivor					\$	51.65
901	Cigna Dental HMO/Vision	Retiree Only	\$	47.64				
902	Cigna Dental HMO/Vision	Family	\$	47.64	\$	56.35		
903	Cigna Dental HMO/Vision	Minor Survivor					\$	48.81

# Table A-22Health Cost Trend Assumptions

The health cost trend assumptions are shown in the following table. These trends have changed from the July 1, 2021 valuation, due to updates in the trend models that we use. The medical trend model is based on the Society of Actuaries' (SOA) published report on long-term medical trend. That report includes detailed research performed by a committee of economists and actuaries that uses the "Getzen Model," named after the professor who developed the model, updated in November of 2022. The following website provides more information: <u>https://www.soa.org/resources/research-reports/2022/2023-gretzen-model-update/</u>. We believe that the research and the model are fundamentally and technically sound and advance the body of knowledge available to actuaries to accurately project long-term medical trends. Milliman uses this model as the foundation for the trend that it recommends to our clients for OPEB valuations.

The first-year trend rates for LACERA non-Local 1014 firefighters' medical and dental/vision plans have been adjusted to reflect the final July 1, 2023 annual medical and dental plan rate renewals. The remaining short-term trends are based on Milliman's *Health Cost Guidelines*<sup>™</sup>.

The trend assumption for Medicare Part B premiums was updated based on the long-term projected Medicare Part B costs from the 2022 Medicare Trustees Report from the Centers for Medicare and Medicaid Service (CMS) dated June 2, 2022. The dental trend assumption was updated based on the same methodology we used in our 2020 OPEB Investigation of Experience Study except than no adjustment for the health insurer fee was necessary.

The following table presents the trend assumptions. The weighted average trends are based on the expected payouts from each of the coverages (medical under 65, medical over 65, Part B, and Dental) for the July 1, 2022 valuation.

After fiscal year ending June 30, 2033, selected years are shown in the table. The trend rates for the years not shown generally grade ratably into the next value shown in the table. The medical trend for both under and over 65 remains at 4.20% beginning with the medical trend from fiscal year ending June 30, 2073 to fiscal year ending June 30, 2074.

Given the substantial uncertainty regarding the impact of COVID-19 on plan costs, including whether the pandemic will increase or decrease costs during the term of our projections, we have chosen not to make an adjustment in the expected plan costs. It is possible that the COVID-19 pandemic could have a material impact on the projected costs.

# Milliman July 1, 2022 OPEB Actuarial Valuation Los Angeles County Employees Retirement Association

Appendix A

Fiscal Year	Ending	LACERA	Medical	Part B	Dental Under	Weighted Average
From	To	Under 65	Over 65	Premiums	and Over 65	Trend
6/30/2023 6/30/2024	6/30/2024 6/30/2025	8.50% 6.80%	3.70% 6.50%	8.50% 7.50%	3.70% 2.90%	5.92% 6.51%
6/30/2025	6/30/2026	6.60%	6.50%	8.40%	2.90%	6.56%
6/30/2026	6/30/2027	6.00%	6.00%	8.60%	2.90%	6.17%
6/30/2027	6/30/2028	5.50%	5.50%	7.10%	2.90%	5.57%
6/30/2028	6/30/2029	5.10%	5.10%	6.00%	2.90%	5.10%
6/30/2029	6/30/2030	5.00%	5.00%	5.60%	2.90%	4.97%
6/30/2030	6/30/2031	4.90%	4.90%	5.70%	2.80%	4.90%
6/30/2031	6/30/2032	4.80%	4.80%	6.10%	2.80%	4.89%
6/30/2032	6/30/2033	4.60%	4.60%	6.10%	2.80%	4.74%
6/30/2042	6/30/2043	4.50%	4.50%	4.60%	2.70%	4.44%
6/30/2052	6/30/2053	4.60%	4.60%	4.30%	2.60%	4.46%
6/30/2062	6/30/2063	4.60%	4.60%	4.20%	2.50%	4.43%
6/30/2072	6/30/2073	4.30%	4.30%	4.20%	2.70%	4.23%
6/30/2082	6/30/2083	4.20%	4.20%	4.20%	3.00%	4.17%
6/30/2092	6/30/2093	4.20%	4.20%	4.00%	3.30%	4.12%
6/30/2102	6/30/2103	4.20%	4.20%	4.00%	3.60%	4.13%
6/30/2105	6/30/2106	4.20%	4.20%	4.00%	3.60%	4.13%

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# Table A-23 Retirement of Vested Terminated Members

Annual Rates

	Ann	ual Rates	
	General Plans	General	Safety
Age	A, B, C, D & G	Plan E	Plans A, B & C
<40	0.00%	0.00%	0.00%
40	0.00%	0.00%	10.00%
41	0.00%	0.00%	10.00%
42	0.00%	0.00%	10.00%
43	0.00%	0.00%	10.00%
44	0.00%	0.00%	10.00%
45	0.00%	0.00%	10.00%
46	0.00%	0.00%	10.00%
47	0.00%	0.00%	10.00%
48	0.00%	0.00%	10.00%
49	0.00%	0.00%	10.00%
50	18.00%	0.00%	29.00%
51	5.00%	0.00%	13.00%
52	6.00%	0.00%	13.00%
53	6.00%	0.00%	13.00%
54	5.00%	0.00%	13.00%
55	10.00%	25.00%	20.00%
56	7.00%	6.00%	20.00%
57	8.00%	4.00%	20.00%
58	7.00%	5.00%	20.00%
59	10.00%	5.00%	20.00%
60	11.00%	6.00%	33.00%
61	12.00%	7.00%	33.00%
62	15.00%	8.00%	33.00%
63	19.00%	7.00%	33.00%
64	20.00%	23.00%	33.00%
65	32.00%	37.00%	100.00%
66	26.00%	12.00%	100.00%
67	22.00%	8.00%	100.00%
68	22.00%	9.00%	100.00%
69	29.00%	10.00%	100.00%
70	35.00%	12.00%	100.00%
71	35.00%	18.00%	100.00%
72	35.00%	18.00%	100.00%
73	35.00%	18.00%	100.00%
74	35.00%	18.00%	100.00%
75	100.00%	100.00%	100.00%
75 or older	100.00%	100.00%	100.00%

These factors were used for current vested terminated members. For retirement of future vested terminated members (i.e., members that are currently active and may become vested terminated in the future), these factors were simplified into five-year factors for ease of application in the valuation system. Spouses of future vested terminated members were assumed to commence benefits at age 60.

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# **Appendix B: Summary of Program Provisions**

The following description of retiree healthcare and death benefits is intended to be only a brief summary. For details, reference should be made to the County and LACERA agreements, and employee booklets.

All actuarial calculations are based on our understanding of the statutes governing LACERA as contained in the County Employees Retirement Law (CERL) of 1937 and the California Public Employees' Pension Reform Act of 2013 (PEPRA), with provisions adopted by the LACERA Board of Retirement, effective through July 1, 2013. The benefit and contribution provisions of this law are summarized briefly below. This summary does not attempt to cover all the detailed provisions of the law.

# ELIGIBILITY FOR RETIREE HEALTHCARE AND DEATH BENEFITS

Employees are eligible for the LACERA administered Retiree Healthcare Benefits Program if they are a member of LACERA and retire from the County of Los Angeles or Participating agencies of the County of Los Angeles. Healthcare benefits are also offered to qualifying survivors of deceased active employees who are eligible to retire at the time of death and to qualifying survivors of retired members. Since eligibility for retiree qualifying healthcare and death benefits is dependent on eligibility to receive a retirement benefit, the eligibility and other aspects of the retirement benefits are applicable for retirement healthcare and death benefits. Participation in the Retiree Healthcare Benefits Program is for life in most instances.

New retirees have 60 days from the date of retirement or 60 days from the date the retiree's name appears on the Board of Retirement agenda, to sign up for medical and dental/vision coverage. If a retiree applies for coverage after the 60 day window, there is a waiting period of 6 months for medical enrollment and 1 year for dental/vision enrollment.

If a retiree's spouse or domestic partner is also a LACERA retiree there cannot be dual coverage. If the spouse or domestic partner is covering the retiree under medical or dental/vision, the retiree may not also enroll as a retiree in medical or dental/vision.

# LACERA MEMBERSHIP

Permanent employees of Los Angeles County (County) and participating districts who work <sup>3</sup>/<sub>4</sub> time or more are eligible for membership in LACERA.

Employees eligible for safety membership (sheriff, fire, and other personnel as defined by law) become safety members on the first day of the month after date of hire. Employees who become members on or after January 1, 2013, will enter into Safety Plan C.

All other employees become general members on the first day of the month after date of hire, or the first day of the month after they make an election of either Plan D or Plan E, depending on the law in effect at that time. Employees who become members on or after January 1, 2013 will enter into General Plan G.

Elective officers become members on the first day of the month after filing a declaration with the Board of Retirement.

# TIER 2 EMPLOYEES

New County employees hired after June 30, 2014 who are eligible for LACERA membership may enroll in the Los Angeles County Retiree Healthcare Benefits Program – Tier 2. The County retiree medical and dental/vision subsidy applies to retiree-only coverage for Tier 2 employees, and new benchmark plans also apply. Additional provisions and details can be found at the end of this Appendix B and on the following link of the LACERA website:

https://www.lacera.com/sites/default/files/assets/documents/rhc/exploring your healthcare benefits 09 15 21.pdf

New claims costs and new probabilities of medical plan and tier selection upon initial enrollment were developed for Tier 2 employees. These can be found in Appendix A.

Tier 2 provisions apply to employees hired since June 30, 2014. Most active, vested terminated and retiree members are currently in Tier 1. In the future, the impact of the Tier 2 benefit provisions and assumptions will grow as the Tier 2 population increases and the Tier 1 population decreases.

# **RETIREMENT PLANS**

The County has established nine defined benefit plans. The following outlines the dates these plans were available, based on a member's date of entry into LACERA:

# Safety Member Plans:

Plan A: Inception to August 1977

- Plan B: September 1977 through December 2012
- Plan C: January 2013 to present

# **General Member Plans:**

- **Plan A:** Inception through August 1977
- Plan B: September 1977 through September 1978
- Plan C: October 1978 through May 1979
- Plan D: June 1979 through December 2012
- Plan E: January 1982 through December 2012
- Plan G: January 2013 to present

NOTE: After review of a new member's account, a member with prior membership or reciprocity may be enrolled into one of the pre-PEPRA plans, if they meet eligibility requirements.

# SERVICE RETIREMENT ELIGIBILITY

	Plans A-D:	General Members:
		Age 50 with 10 years of County service;
		Any age with 30 years of service; or
		Age 70 regardless of service.
	Non-Contributory	
	Plan E:	Age 55 with 10 years of service.
	Plan G:	Age 52 with 5 years of service, or age 70 regardless of service.
	Plans A-B:	Safety Members:
		Age 50 with 10 years of County service;
		Any age with 20 years of service.
	Plan C:	Safety Members:
		Age 50 with 5 years of service.
VESTI	NG REQUIREMENT	
	Plans A-D, G:	5 years of County and reciprocal service. Member contributions must be left on deposit.
	Plan E:	10 years of County and reciprocal service.
SERVI	CE-CONNECTED DISA	BILITY RETIREMENT ELIGIBILITY
	Plans A-D, G:	Any age or years of service; disability must result from occupational injury or disease, and member must be permanently incapacitated for the performance of duty.
	Plan E:	Not available under Plan E.
NONS		DISABILITY RETIREMENT ELIGIBILITY
	Plans A-D, G:	Any age with 5 years of service and permanently incapacitated for the performance of duty.

Plan E: Not available under Plan E.

# SERVICE-CONNECTED PRE-RETIREMENT DEATH ELIGIBILITY

Plans A-D, G:	Active members who die in service as a result of injury or disease arising out of and in the course of employment.
Plan E:	Not available under Plan E.

# NONSERVICE-CONNECTED PRE-RETIREMENT DEATH ELIGIBILITY

Plans A-D, G:	Active members who die while in service or while physically or
	mentally incapacitated for the performance of duty.

Plan E: Not available under Plan E.

# ELIGIBLE SURVIVING DEPENDENTS

In order for a survivor of a LACERA active member to receive healthcare benefits, the LACERA active member has to be eligible for retirement at date of death. In order for a survivor of a retired LACERA member to be eligible to receive healthcare benefits, the retired member needed to have had a retirement plan option which qualified as eligible for continuing retirement benefits to the survivor. If one of these requirements is met, the following survivors are eligible for healthcare benefits:

- An eligible surviving spouse or surviving domestic partner, who is eligible to continue to receive retirement benefits and to whom the member was married or registered as a domestic partner for at least one year prior to member's retirement date. If the member was granted a service-connected disability, the one-year rule does not apply. However, the date of marriage or domestic partner registration must precede the date of retirement.
- Surviving unmarried natural children, legally adopted children or stepchildren, up to age 26, if there is also a surviving spouse/eligible domestic partner.
- Surviving unmarried natural children, legally adopted children, or stepchildren, up to age 18 or if a full time student, up to age 22, and receiving retirement pension benefits, without a surviving spouse/domestic partner.
- An eligible surviving spouse or surviving domestic partner who is receiving retiree healthcare, may enroll a new spouse or domestic partner and/or new unmarried natural children, legally adopted children, or stepchildren who are eligible up to age 26.

# COUNTY CONTRIBUTIONS TOWARDS RETIREE HEALTHCARE BENEFITS

# Medical

Tier 1 is for employees who are hired before July 1, 2014 and are eligible for LACERA membership. If a retiree has 10 years of retirement service credit, the County contributes 40% of the healthcare plan premium or 40% of the benchmark plan rate, whichever is less. For each year of retirement service credit beyond 10 years, the County contributes an additional 4% per year, up to a maximum of 100% for a member with 25 years of service credit.

Tier 2 is for employees who are hired after June 30, 2014 and are eligible for LACERA membership. The Tier 2 subsidy is the same as Tier 1 except that the benchmark plan is different. The table below shows the benchmark plans for Tier 1 and Tier 2.

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	<u>Pre / Post</u>		
<u>Tier</u>	<u>Medicare</u>	Benchmark Plan	<b>Benchmark Amount</b>
1	Pre	Anthem Blue Cross I & II	Same tier that member selects
1	Post	Anthem Blue Cross I & II	Same tier that member selects
2	Pre	Anthem Blue Cross I & II	Retiree-only tier
2	Post	Anthem Blue Cross III	Retiree-only tier

If a Tier 2 retiree selects a family tier for a plan where the premium for the retiree-only tier is less than the Tier 2 benchmark, there is a spouse subsidy equal to the Tier 2 benchmark less the premium for the retiree-only tier. If the Tier 2 benchmark is less than the premium for the retiree-only tier, the retiree subsidy would be lower and there would be no spouse subsidy.

The County contribution can never exceed the premium of the benchmark plan; this means that if the premium for the chosen plan and coverage option exceeds the benchmark premium, the retiree is required to pay the difference, even if the retiree has 25 years of service. Likewise, if the retiree has 25 years of service and the plan premium is less than the benchmark rate, the County contributes 100% of the plan premium only, not the benchmark plan rate. Reciprocal service is not included in contribution calculations.

# **Dental / Vision**

The contribution percentages follow the same contribution proportions based on years of service (excluding reciprocal service) as the medical plans. The Tier 1 benchmark is the indemnity plan premium for the tier that the member selects. The Tier 2 benchmark is the indemnity plan premium for the retiree-only tier.

# Disability

Any retiree with a service connected disability retirement with less than 13 years of service will receive a different County contribution for both medical and dental / vision plans. The County contributes 50% of the lesser of the benchmark plan rate or the premium of the plan the retiree is enrolled in. If a retiree with service connected disability retirement has 13 or more years of service, the County subsidy is the same as a non-disabled retiree. Reciprocal service is not included in contribution calculations.

# FIREFIGHTERS LOCAL 1014 CONTRIBUTIONS TOWARDS RETIREE HEALTHCARE BENEFITS

# Medical, Dental / Vision, and Disability

Contributions are the same as for the County employees.

# DEATH/BURIAL BENEFIT

There is a one-time lump sum \$5,000 death benefit payable to the designated beneficiary upon the death of retirees. Actives and Vested Terminated Inactives are eligible for this benefit once they retire. Spouses and Dependents are not eligible for this death benefit upon their death. This benefit does not go through the 401(h) or any other funding vehicle; rather, is paid by LACERA and billed directly to the County on a monthly basis.

# RETIREE HEALTHCARE BENEFIT PLAN DESCRIPTIONS ARE IN APPENDIX E, F, G and H

Appendix E

Medical Plan Descriptions:

https://www.lacera.com/sites/default/files/assets/documents/rhc/rhc\_forms\_pub/brochure\_rate\_tables/Pla n\_Comparison\_2022.pdf

https://www.lacera.com/sites/default/files/assets/documents/rhc/rhc\_forms\_pub/brochure\_rate\_tables/Pla n\_Comparison\_Out-of-Area\_2022.pdf

https://www.lacera.com/sites/default/files/assets/documents/rhc/rhc\_forms\_pub/brochure\_rate\_tables/Pla n\_Comparison\_Medicare\_2022.pdf

# Appendix F

Fire Fighters Local 1014 Medical Description: Selected pages from:

https://www.local1014medical.org/docs/SPD%202019.pdf

Appendix G

Dental and Vision Plan Description:

https://www.lacera.com/sites/default/files/assets/documents/rhc/rhc\_forms\_pub/brochure\_rate\_tables/Den tal\_Vision\_Chart\_2022.pdf

Appendix H

Medicare Part B Reimbursement Plan Description:

https://www.lacera.com/program-basics/parts-and-b

# **Appendix C: Valuation Data and Schedules**

Data on LACERA's retirement benefit program membership as of June 30, 2022 was supplied to us by LACERA's Systems Division staff. Active and vested terminated data is used from the 2022 retirement benefits program valuation. Data for retired members, survivors, and dependents was provided separately for this OPEB valuation. On the following tables, we present a summary of LACERA membership at June 30, 2022 for active, vested terminated, and retired members.

- Exhibit C-1: Summary of Active Members
- Exhibit C-2: Summary of Vested Terminated Members
- Exhibit C-3: Summary of Retired Members, Spouses, and Dependents
- Exhibit C-4: Age and Service Distribution of Active Members
- Exhibit C-5: Age and Service Distribution of Vested Terminated Members
- Exhibit C-6: Age and Service Distributions of Retired Members, Spouses, and Dependents in Medical Plans
- Exhibit C-7: Age and Service Distributions of Retired Members, Spouses, and Dependents in Dental/Vision Plans
- Exhibit C-8: Medical and Dental/Vision Plan Distributions of Retired Members, Survivors, Spouses, and Dependents Pre and Post Age 65 for Tier 1
- Exhibit C-9: Medical and Dental/Vision Plan Distributions of Retired Members, Survivors, Spouses, and Dependents Pre and Post Age 65 for Tier 2
- Exhibit C-10: Treatment of Incomplete Data

Note that Exhibits C-1 through C-7 were prepared using an "age nearest birthday" basis for calculating ages as used by our valuation system. Exhibit C-8 and C-9 were prepared using an "attained age" basis to reflect when someone becomes 65.

# Milliman July 1, 2022 OPEB Actuarial Valuation Los Angeles County Employees Retirement Association

#### Exhibit C-1: Summary of Active Members

	Memb	oers_		Average	Average Credited
	Tier 1	Tier 2	Annual Salary	Age	Service
County					
General	51,019	28,038	\$ 6,904,028,628	47.6	14.6
Safety	8,549	4,294	1,625,956,740	41.6	14.3
Total	59,568	32,332	\$ 8,529,985,368	46.7	14.5
Superior Court					
General Safety	2,763	1,437	\$ 382,536,756	48.9	17.5
Total	2,763	1,437	\$ 382,536,756	48.9	17.5
LACERA					
General Safety	239	145	\$ 44,086,116	48.6	13.6
Total	239	145	\$ 44,086,116	48.6	13.6
Outside Districts					
General	6	-	\$ -	51.7	16.8
Safety		-	-	-	-
Total	6	-	\$ -	51.7	16.8
Grand Total					
General	54,027	29,620	\$ 7,330,651,500	47.6	14.7
Safety	8,549	4,294	1,625,956,740	41.6	14.3
Total	62,576	33,914	\$ 8,956,608,240	46.8	14.7
Grand Total (Tiers Combined)	96,490				

This excludes 49 active pension members who are receiving retiree healthcare benefits.

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# Exhibit C-2: Summary of Vested Terminated Members

	Mem	bers	Average
	Tier 1	Tier 2	Age
County			
General Safety Total	7,224 576 7,800	705 71 776	49.5 42.6 48.9
Superior Court			
General Safety	559 -	48	52.8
Total	559	48	52.8
LACERA			
General Safety	34 -	4	56.5 -
Total	34	4	56.5
Outside Districts			
General Safety	1 -	-	44.0 -
Total	1	-	44.0
Grand Total	8,394	828	49.2
Grand Total (Tiers Combined)	9,222		

Pension data includes 9,794 non vested terminated members.

This excludes 28 vested terminated pension members who are receiving retiree healthcare benefits.

#### Exhibit C-3: Summary of Current Retirees, Survivors, Spouses, and Dependents

Medical

		С	ount			Average Age					
	Retirees and Survivors Spouses and Depen		Dependents		Retirees and	Spouses and					
	Tier 1	Tier 2	Tier 1	Tier 2	Total	Survivors	Dependents	Total			
County	51,996	11	29,192	5	81,204	73.6	59.0	68.4			
Superior Court	2,556	-	1,125	-	3,681	73.0	62.6	69.8			
LACERA	177	-	82	-	259	71.9	62.8	69.0			
Outside Districts	55	-	21	-	76	84.0	74.3	81.3			
Total Medical	54,784	11	30,420	5	85,220	73.6	59.2	68.4			
Tiers Combined	54,795		30,425								

#### Dental/Vision

		C	ount			Average Age					
	Retirees and	tirees and Survivors Spouses and Dependents		Dependents		Retirees and	Spouses and				
	Tier 1	Tier 2	Tier 1	Tier 2	Total	Survivors	Dependents	Total			
County	53,639	20	31,253	10	84,922	73.6	59.2	68.3			
Superior Court	2,628	-	1,230	-	3,858	72.9	63.2	69.8			
LACERA	177	-	83	-	260	71.8	63.6	69.2			
Outside Districts	55	-	25	-	80	83.7	71.9	80.0			
Total Dental/Vision	56,499	20	32,591	10	89,120	73.5	59.3	68.3			
Tiers Combined	56,519		32,601								

#### **Death Benefit\***

		C	ount			Average Age				
	Retire	ees	Spouses and	Dependents			Spouses and			
	Tier 1	Tier 2	Tier 1	Tier 2	Total	Retirees	Dependents	Total		
County	57,918	93	NA	NA	58,011	72.4	NA	72.4		
Superior Court	3,169	3	NA	NA	3,172	71.7	NA	71.7		
LACERA	204	-	NA	NA	204	71.3	NA	71.3		
Outside Districts	73	-	NA	NA	73	80.6	NA	80.6		
Total Death Benefit	61,364	96	NA	NA	61,460	72.4	NA	72.4		
Tiers Combined	61,460		NA							

\* Totals do not include 490 people that are both a Retiree and a Survivor, but have elected their Retiree Medical benefits as a Survivor.

	Members' Years of Service										
Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35 & Above	Count		
Under 18	-	-	-	-	-	-	-	-	-		
18-19	3	-	-	-	-	-	-	-	3		
20-24	551	2	-	-	-	-	-	-	553		
25-29	4,381	613	2	-	-	-	-	-	4,996		
30-34	5,922	4,321	415	8	1	-	-	-	10,667		
35-39	4,052	4,833	2,599	1,083	49	-	-	-	12,616		
40-44	2,575	3,094	2,890	3,418	1,202	67	1	-	13,247		
45-49	1,748	1,957	2,050	3,044	3,780	808	61	1	13,449		
50-54	1,214	1,447	1,459	2,268	3,784	2,246	1,652	114	14,184		
55-59	842	1,047	998	1,632	2,543	1,717	2,520	1,014	12,313		
60-64	438	722	804	1,239	1,838	906	1,512	1,493	8,952		
65-69	136	305	412	612	941	402	446	571	3,825		
70-74	35	85	123	195	342	127	139	215	1,261		
75-79	4	7	28	59	92	44	32	67	333		
80-84	2	2	-	10	12	16	8	19	69		
85 & Over	1			3	4	2	4	8	22		
Total Count	21,904	18,435	11,780	13,571	14,588	6,335	6,375	3,502	96,490		

# Exhibit C-4: Age and Service Distribution of Active Members

This excludes 49 active retirement program members who are receiving retiree healthcare benefits.

	Members' Years of Service										
Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35 & Above	Count		
Under 18	-	-	-	-	-	-	-	-	-		
18-19	-	-	-	-	-	-	-	-	-		
20-24	-	-	-	-	-	-	-	-	-		
25-29	11	29	-	-	-	-	-	-	40		
30-34	134	300	15	-	-	-	-	-	449		
35-39	194	521	210	31	2	-	-	-	958		
40-44	243	628	369	111	14	-	-	-	1,365		
45-49	281	627	386	180	68	15	1	-	1,558		
50-54	215	572	466	218	94	56	13	-	1,634		
55-59	148	356	489	197	103	51	35	15	1,394		
60-64	88	174	362	161	77	40	61	54	1,017		
65-69	42	107	218	71	22	17	9	17	503		
70-74	20	31	126	42	12	5	2	2	240		
75-79	2	8	21	11	6	1	1	-	50		
80-84	-	1	4	2	2	1	1	-	11		
85 & Over	2					1			3		
Total Count	1,380	3,354	2,666	1,024	400	187	123	88	9,222		

# Exhibit C-5: Age and Service Distribution of Vested Terminated Members

Retirement program data includes 9,794 non vested terminated members.

This excludes 28 vested terminated pension members who are receiving retiree healthcare benefits.

#### Milliman July 1, 2022 OPEB Actuarial Valuation

#### Los Angeles County Employees Retirement Association

# Exhibit C-6: Age and Service Medical Distributions for Current Retirees, Survivors, Spouses, and Dependents All Members

**Retirees and Survivors with Medical Coverage** 

Retirees' Years of Service									
Age	0-4	5-9	10-14	15-19	20-24	25-29	30 & Above	Disableds	Count
Under 35	-	-	-	1	2	2	2	15	22
35-39	-	-	-	-	-	-	-	21	21
40-44	-	-	-	-	1	-	1	41	43
45-49	-	-	-	-	7	13	3	106	129
50-54	-	-	24	40	60	112	85	297	618
55-59	1	-	47	89	176	564	894	1,108	2,879
60-64	-	5	107	184	367	1,081	2,084	1,622	5,450
65-69	3	19	367	512	808	1,947	4,399	1,357	9,412
70-74	5	38	554	793	951	2,207	5,514	1,399	11,461
75-79	8	26	505	718	939	1,998	4,573	1,675	10,442
80-84	6	17	387	532	657	1,591	2,716	1,159	7,065
85-89	5	17	251	358	511	1,052	1,381	708	4,283
90-94	3	17	149	227	321	528	612	321	2,178
95-99	-	5	58	85	116	137	203	83	687
100 & Over	<u> </u>	-	15	19	13	17	29	12	105
Total Count	31	144	2,464	3,558	4,929	11,249	22,496	9,924	54,795

#### All Members

#### Spouses and Dependents with Medical Coverage

	Retirees' Years of Service										
Age	0-4	5-9	10-14	15-19	20-24	25-29	30 & Above	Disableds	Count		
Under 35	1	2	115	174	374	1,231	2,006	2,238	6,141		
35-39	-	-	2	2	11	30	55	42	142		
40-44	-	-	3	7	13	41	62	74	200		
45-49	-	-	5	11	28	65	109	141	359		
50-54	-	-	15	35	56	199	377	437	1,119		
55-59	-	-	36	59	134	509	857	858	2,453		
60-64	1	1	75	98	219	751	1,461	937	3,543		
65-69	-	16	141	211	323	943	2,038	766	4,438		
70-74	4	20	228	295	372	948	2,223	731	4,821		
75-79	2	7	170	290	344	705	1,590	675	3,783		
80-84	1	4	116	173	239	511	871	306	2,221		
85-89	-	3	34	72	114	219	289	117	848		
90-94	-	1	9	29	40	81	92	34	286		
95-99	-	1	3	10	7	19	19	3	62		
100 & Over	<u> </u>		3	<u> </u>	2	3	1		9		
Total Count	9	55	955	1,466	2,276	6,255	12,050	7,359	30,425		

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#### Milliman July 1, 2022 OPEB Actuarial Valuation

#### Los Angeles County Employees Retirement Association

# Exhibit C-7: Age and Service Dental/Vision Distributions for Current Retirees, Survivors, Spouses, and Dependents All Members

Retirees and Survivors with Dental/Vision Coverage

	Retirees' Years of Service										
Age	0-4	5-9	10-14	15-19	20-24	25-29	30 & Above	Disableds	Count		
Under 35	-	-	-	1	2	2	1	13	19		
35-39	-	-	-	-	-	-	-	25	25		
40-44	-	-	-	-	1	-	1	57	59		
45-49	-	-	1	-	7	12	3	138	161		
50-54	-	-	29	42	62	108	84	324	649		
55-59	4	3	61	111	177	566	890	1,183	2,995		
60-64	4	10	136	226	376	1,083	2,075	1,695	5,605		
65-69	5	32	439	569	850	2,005	4,456	1,440	9,796		
70-74	7	51	611	843	1,004	2,246	5,563	1,462	11,787		
75-79	10	39	547	754	979	2,021	4,637	1,740	10,727		
80-84	7	21	401	575	689	1,623	2,740	1,203	7,259		
85-89	3	29	251	380	537	1,076	1,417	707	4,400		
90-94	4	14	162	236	325	536	628	325	2,230		
95-99	1	2	59	88	121	142	208	82	703		
100 & Over	<u> </u>	1	18	14	14	15	31	11	104		
Total Count	45	202	2,715	3,839	5,144	11,435	22,734	10,405	56,519		

#### All Members

#### Spouses and Dependents with Dental/Vision Coverage

				Retirees' Year	s of Service				Total
Age	0-4	5-9	10-14	15-19	20-24	25-29	30 & Above	Disableds	Count
Under 35	2	7	163	198	382	1,232	1,988	2,571	6,543
35-39	-	1	2	4	11	27	54	57	156
40-44	-	2	5	8	11	42	65	92	225
45-49	-	1	8	15	28	68	115	159	394
50-54	-	1	21	40	60	205	373	462	1,162
55-59	-	2	44	65	148	513	864	902	2,538
60-64	3	6	89	119	229	781	1,476	979	3,682
65-69	3	16	166	250	368	1,000	2,165	820	4,788
70-74	5	22	247	342	421	1,020	2,387	784	5,228
75-79	2	10	194	321	377	768	1,710	712	4,094
80-84	-	2	129	189	263	562	932	327	2,404
85-89	1	4	43	87	137	257	320	127	976
90-94	-	1	15	38	43	87	111	37	332
95-99	-	1	4	9	11	18	21	4	68
100 & Over	<u> </u>	-	2	1	2	4	2		11
Total Count	16	76	1,132	1,686	2,491	6,584	12,583	8,033	32,601

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	Retirees and Survivors		Spouses and Dependents			Total			
	Pre 65	Post 65	Total	Pre 65	Post 65	Total	Pre 65	Post 65	Total
Medical Plans									
Blue Cross I	223	739	962	319	163	482	542	902	1,444
Blue Cross II	2,696	2,821	5,517	3,801	978	4,779	6,497	3,799	10,296
Blue Cross III	263	12,702	12,965	1,092	4,910	6,002	1,355	17,612	18,967
Blue Cross Prudent Buyer Plan	261	598	859	326	181	507	587	779	1,366
CIGNA Healthcare for Seniors	1	61	62	6	28	34	7	89	96
CIGNA Network Model Plan	41	300	341	44	59	103	85	359	444
Kaiser (Other)	59	380	439	61	113	174	120	493	613
Kaiser (CA)	3,969	22,015	25,984	5,333	7,353	12,686	9,302	29,368	38,670
United Healthcare	1,554	3,560	5,114	2,078	1,441	3,519	3,632	5,001	8,633
SCAN Health Plan	5	372	377	-	84	84	5	456	461
Firefighters' Local 1014	821	1,343	2,164	1,310	740	2,050	2,131	2,083	4,214
Total	9,893	44,891	54,784	14,370	16,050	30,420	24,263	60,941	85,204
Medicare Part B Coverage									
All Members									
Receiving Reimbursement	292	37,619	37,911	341	13,163	13,504	633	50,782	51,415
Not Receiving Reimbursement	9,601	7,272	16,873	14,029	2,887	16,916	23,630	10,159	33,789
Total	9,893	44,891	54,784	14,370	16,050	30,420	24,263	60,941	85,204
Dental/Vision Plans									
All Members									
Cigna Indemnity Dental/Vision	8,434	41.344	49,778	13.541	15,187	28,728	21.975	56,531	78,506
Cigna Dental HMO/Vision	1,834	4,887	6,721	2,502	1,361	3,863	4,336	6,248	10,584
Total	10,268	46,231	56,499	16,043	16,548	32,591	26,311	62,779	89,090
Death Benefit*									
Total	12,966	48,398	61,364	NA	NA	NA	12,966	48,398	61,364

# Exhibit C-8: Summary of Data for Current Retirees, Survivors, Spouses, and Dependents for Tier 1

\* Totals do not include 490 people that are both a Retiree and a Survivor, but have elected their Retiree Medical benefits as a Survivor.

# Exhibit C-9: Summary of Data for Current Retirees, Survivors, Spouses, and Dependents for Tier 2

	Retire	Retirees and Survivors		Spouses and Dependents			Total		
	<u>Pre 65</u>	<u>Post 65</u>	<u>Total</u>	Pre 65	Post 65	<u>Total</u>	Pre 65	<u>Post 65</u>	<u>Total</u>
Medical Plans									
Blue Cross I	1	-	1	2	-	2	3	-	3
Blue Cross II	-	-	-	-	-	-	-	-	-
Blue Cross III	-	1	1	-	-	-	-	1	1
Blue Cross Prudent Buyer Plan	1	-	1	-	-	-	1	-	1
CIGNA Healthcare for Seniors	-	-	-	-	-	-	-	-	-
CIGNA Network Model Plan	-	-	-	-	-	-	-	-	-
Kaiser (Other)	1	-	1	-	-	-	1	-	1
Kaiser (CA)	2	5	7	-	3	3	2	8	10
United Healthcare	-	-	-	-	-	-	-	-	-
SCAN Health Plan	-	-	-	-	-	-	-	-	-
Firefighters' Local 1014						-			
Total	5	6	11	2	3	5	7	9	16
Medicare Part B Coverage									
All Members									
Receiving Reimbursement	1	6	7	-	-	-	1	6	7
Not Receiving Reimbursement	4		4	2	3	5	6	3	9
Total	5	6	11	2	3	5	7	9	16
Dental/Vision Plans									
All Members									
Cigna Indemnity Dental/Vision	7	10	17	6	3	9	13	13	26
Cigna Dental HMO/Vision	1	2	3	1		1	2	2	4
Total	8	12	20	7	3	10	15	15	30
Death Benefit									
Total	49	47	96	NA	NA	NA	49	47	96

# Exhibit C-10: Treatment of Incomplete Data

ID	Size	Situation	Assumption and Resolution
1	520 medical N/A dental	There were no children listed in Retiree and Family or Retiree and Children deduction codes.	To be consistent with the tier, children were added. Children were designated as 20 years old since the average age of LACERA children under 26 is 20; half were listed as male and half as female. Children were not added for Kaiser plans, based on previous discussions with LACERA.
2	304 medical 246 dental	There was no spouse listed in Retiree and Spouse, Retiree & Family, or Retiree +1 deduction codes.	To be consistent with the tier, spouses were added. Even in the Retiree+1 case, a spouse was added rather than a child as this is a more conservative addition. Spouses were given a gender opposite of the retiree and date of birth was determined according to the marriage age difference assumption.
3	172 medical 175 dental 65 death benefit only	Members were deceased before 7/1/2022.	Removed records from data.
4	2 medical 2 dental	Missing date of birth	The date of birth was replaced with the average of the date of birth for all the records that had this field populated.
5	6 medical 7 dental	These records had gender of blank, "X" or "B".	Three of these records were assigned Female and the four were assigned Male to align with our Valuation System.
6	11 death benefit only	These records had no service.	These records had their service field replaced with the average of the service among all the other records.

# Appendix D: Glossary

The following definitions are excerpts from other actuarial organizations in the United States. In some cases, the definitions have been modified for specific applicability to LACERA. Defined terms are capitalized throughout this Appendix.

# **Actuarial Accrued Liability**

That portion, as determined by a particular Actuarial Cost Method, of the Actuarial Present Value of postemployment plan benefits and expenses which is not provided for by future Normal Costs.

# **Actuarial Assumptions**

Assumptions as to the occurrence of future events affecting OPEB costs, such as: mortality, termination of employment, disability, retirement; changes in medical costs; and other relevant items.

# **Actuarial Cost Method**

A procedure for determining the Actuarial Present Value of OPEB program benefits and expenses and for developing an actuarially equivalent allocation of such value to time periods, usually in the form of a Normal Cost and an Actuarial Accrued Liability.

# Actuarial Gain (Loss)

A measure of the difference between actual experience and that expected based on a set of Actuarial Assumptions during the period between two Actuarial Valuation dates, as determined in accordance with a particular Actuarial Cost Method.

# **Actuarial Present Value**

The value of an amount or series of amounts payable or receivable at various times, determined as of a given date by the application of a particular set of Actuarial Assumptions.

# **Actuarial Valuation**

The determination, as of a valuation date, of the Normal Cost, Actuarial Accrued Liability, Actuarial Value of Assets, and related Actuarial Present Values for an OPEB plan.

# Actuarial Value of Assets

The value of cash, investments and other property belonging to an OPEB plan, as used by the actuary for the purpose of an Actuarial Valuation.

# **Amortization Payment**

That portion of the ADC that is designed to recognize interest on and to amortize the Unfunded Actuarial Accrued Liability.

# Actuarially Determined Contributions ("ADC")

This is the employer's periodic required contribution to a defined benefit OPEB plan, calculated in accordance with the set of requirements for calculating actuarially determined OPEB information included in financial reports.

# **Attribution Period**

The period of an employee's service to which the expected postretirement benefit obligation for that employee is assigned. The beginning of the attribution period is the employee's date of hire. The end of the attribution period is the time of assumed exit from OPEB active member status.

# **Benefit Payments**

The monetary or in-kind benefits or benefit coverage to which participants may be entitled under a post employment benefit plan, including health care benefits and life insurance not provided through a retirement program.

# GASB 74

The statement that establishes financial reporting standards for postemployment benefit <u>plans</u> other than retirement programs.

# GASB 75

The statement that establishes financial reporting standards for <u>employers</u> that sponsor postemployment benefits other than retirement programs.

# **Net OPEB Obligation**

This is the cumulative difference since the effective date of this statement between annual OPEB cost and the employer's contributions to the plan, including the OPEB liability (asset) at transition, if any, and excluding (a) short-term differences and (b) unpaid contributions that have been converted to OPEB related debt.

## **Normal Cost**

That portion of the Actuarial Present Value of OPEB plan benefits and expenses which is allocated to a valuation year by the Actuarial Cost Method.

## **Other Postemployment Benefits ("OPEB")**

This refers to postemployment benefits other than retirement program benefits, including healthcare benefits regardless of the type of plan that provides them, and all other postemployment benefits provided separately from a retirement program, excluding benefits defined as termination benefits or offers.

# Present Value of Future Benefits

This is the value, as of the applicable date, of future payments for benefits and expenses under the Plan, where each payment is:

- (a) Multiplied by the probability of the event occurring on which the payment is conditioned, such as the probability of survival, death, disability, termination of employment, etc.; and
- (b) Discounted at the assumed discount rate.

# **Projected Benefits**

Those OPEB plan benefit amounts which are expected to be paid at various future times under a particular set of Actuarial Assumptions, taking into account such items as the effect of advancement in age and past and anticipated future compensation and service credits.

## **Substantive Plan**

The terms of the OPEB plan as understood by an employer that provides postretirement benefits and the employees who render services in exchange for those benefits. The substantive plan is the basis for the accounting for the plan.

# **Trend Rate**

The rate of increase in per person health costs paid by a plan as a result of factors such as price increases, utilization of healthcare services, plan design, and technological developments.

# **Unfunded Actuarial Accrued Liability**

The excess of the Actuarial Accrued Liability over the Actuarial Value of Assets.

# **Appendix E: Medical Plan Comparisons**

Comparisons are from the following areas of the LACERA website:

https://www.lacera.com/sites/default/files/assets/documents/rhc/rhc\_forms\_pub/brochure\_rate\_tables/Plan\_Comparis on\_2022.pdf

https://www.lacera.com/sites/default/files/assets/documents/rhc/rhc\_forms\_pub/brochure\_rate\_tables/Plan\_Comparis on\_Out-of-Area\_2022.pdf

https://www.lacera.com/sites/default/files/assets/documents/rhc/rhc\_forms\_pub/brochure\_rate\_tables/Plan\_Comparis on\_Medicare\_2022.pdf

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# COMPARISON OF MEDICAL PLANS

Effective July 1, 2022

# **Indemnity Medical Plans**

- Anthem Blue Cross I
- Anthem Blue Cross II
- Anthem Blue Cross Prudent Buyer Plan

# Health Maintenance Organizations (HMOs)

- Cigna Network Model Plan (Arizona and California only)
- Kaiser Permanente (California only)
- UnitedHealthcare

This chart represents a summary of benefits only. Additional benefit information is provided by each insurance carrier. This chart does not replace or modify the official documents that legally govern each plan's operation.

The benefits offered by all LACERA-administered health plans change when an enrolled member permanently moves outside the provider network area. Moving to a location outside the coverage area can impact your plan's rates and coverage levels.

	Indemnity Insurance Plans	
	Anthem Blue Cross I	Anthem Blue Cross II
Calendar Year Deductibles/Copayments	\$100 – individual; \$100 – family	\$500 – individual; \$1,500 – family
Annual Maximum Out-of-Pocket Expenses	N/A	\$2,500, including deductible (Does not include
(for most services)		amounts over allowable charges)
Lifetime Maximum Benefits	\$1,000,000	\$1,000,000
Hospital Benefits		
Room and Board	\$75 per day maximum <sup>1</sup> ; \$150 per day maximum special care unit <sup>1</sup>	90% for PPO hospital <sup>2</sup> ; 80% non-PPO for semi-private room; special care unit up to 2.5 times semi-private room rate
Surgical Services Hospital Services and Supplies	80%1 100%1	80% 90% PPO hospital <sup>2</sup> ; 80% non-PPO hospital
nospital services and supplies	100 %.	
Hospital Admission Authorization Requirements	Preadmission authorization required in advance (on first business day following emergency admission) unless covered by Medicare Part A. \$200 deductible for unauthorized hospital admission or late notice	Preadmission authorization required in advance (on first business day following emergency admission) unless covered by Medicare Part A. \$200 deductible for unauthorized hospital admission or late notice
Nursing Benefits		
Skilled Nursing Facility Care	70% (in-network) or 50% (out-of-network) up to \$150 per day for up to 100 days per calendar year <sup>1</sup>	70% (in-network) or 50% (out-of-network) up to 100 days per calendar year <sup>1</sup>
Private Duty Nurses	80% in accordance with requirements	80% in accordance with requirements
Home Healthcare	100% in accordance with requirements <sup>1</sup>	100% in accordance with requirements <sup>1</sup>
Hospice Care	100% up to plan limitations, in accordance with requirements <sup>1</sup>	100% in accordance with requirements <sup>1</sup>
Emergency Benefits		
Inpatient	\$75 per day <sup>1</sup> maximum; \$150 per day maximum special care unit <sup>1</sup>	90% PPO hospital <sup>2</sup> ; 80% non-PPO hospital
Outpatient	100% at a hospital only <sup>1</sup>	80%
Ambulance	80% for transportation to first hospital where care is given	80% for transportation to first hospital where care is given
Outpatient Benefits		
Doctor's Office Visits	80%	80%
Preadmission X-Ray and Lab Tests	100% <sup>1</sup>	100%1
Routine Checkups, CA only —Adult —Children Under 17	\$25 copay; covered in-network only; maximum of \$250 \$25 copay in-network; 80% out-of-network	\$25 copay; covered in-network only; maximum of \$250 \$25 copay in-network; 80% out-of-network
Immunizations	Not covered except for children under age 17	Not covered except for children under age 17
Outpatient Surgical Services	100%1	100% <sup>1</sup> (80% hospital facility fees)
Physical Therapy	80% in accordance with requirements	80% in accordance with requirements
Speech Therapy	80% in accordance with requirements	80% in accordance with requirements
Maternity	80% in accordance with requirements	80% in accordance with requirements
Prescription Drug Benefits		
Prescription Drugs	Retail: 80% in-network; 60% out-of-network Mail order: \$10 generic/\$30 brand/\$50 non-preferred brand/ \$150 specialty copay for 90-day supply (Copay prorated for less than 90-day supply)	Retail: 80% in-network; 60% out-of-network Mail order: \$10 generic/\$30 brand/\$50 non-preferred brand/ \$150 specialty copay for 90-day supply (Copay prorated for less than 90-day supply)
Mental Health and Substance Abuse Benefit	ts	
Inpatient	\$75 per day <sup>1</sup> maximum; \$150 per day maximum intensive care <sup>1</sup>	90% PPO; 80% non-PPO
Outpatient	80% of covered expenses	80% of covered expenses
Vision Benefits		
Vision Benefits Eye Exams	Covered after accident only <sup>3</sup>	Covered after accident only <sup>3</sup>
	Covered after accident only <sup>3</sup> Covered after accident <sup>3</sup> and after eye surgery	Covered after accident only <sup>3</sup> Covered after accident <sup>3</sup> and after eye surgery
Eye Exams	•	Covered after accident <sup>3</sup> and after eye surgery
Eye Exams Lenses Frames	Covered after accident <sup>3</sup> and after eye surgery	•
Eye Exams Lenses	Covered after accident <sup>3</sup> and after eye surgery	Covered after accident <sup>3</sup> and after eye surgery

# **Comparison of Medical Plans**

Comparison of Medical	
	HMOs
Anthem Blue Cross Prudent Buyer Plan	Cigna Network Model Plan
\$100 – individual; \$200 – family	None
N/A	\$1,500 – individual; \$3,000 – family
\$1,000,000	Unlimited
80% Prudent Buyer; 70% non–Prudent Buyer with \$75 per day maximum; \$150 per day intensive care (for non–Prudent Buyer)	No charge
80% Prudent Buyer; 70% non–Prudent Buyer	No charge for inpatient or outpatient
80% Prudent Buyer; 70% non–Prudent Buyer (up to \$250 per day for non–Prudent Buyer)	No charge
Authorization by a Prudent Buyer physician required. Non–Prudent Buyer physicians must contact Anthem Blue Cross	Authorization by a Cigna HealthCare physician required within 48 hours in case of emergency outside service area
80% of semi-private room rate for up to 100 days per confinement period	No charge; CA limited to 100 days per contract year; AZ limited to 60 days per
	contract year
80% in accordance with requirements	No charge if authorized by a Cigna HealthCare physician (100 visits per contract year together with Home Healthcare)
100% in accordance with requirements	No charge; CA limited to 100 days per contract year; AZ limited to 60 days per contract year. Includes outpatient Private Duty Nursing subject to medical necessity.
100% up to plan limitations, in accordance with requirements <sup>1</sup>	No charge
80% Prudent Buyer; 70% non–Prudent Buyer	No charge
80% Prudent Buyer; 70% non–Prudent Buyer	\$50 copay; waived if admitted; \$25 copay for urgent care center
80%	No charge when true emergency authorized by a Cigna HealthCare physician
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80% Prudent Buyer; 70% non–Prudent Buyer 100% Prudent Buyer; 70% non–Prudent Buyer	\$5 copay No charge
100% Prudent Buyer, 70% non-Prudent Buyer	No charge
\$25 copay; covered in-network only; maximum of \$250 \$25 copay in-network; out-of-network covered up to \$20	\$5 сорау
Not covered except for children under age 17	No charge (after \$5 office visit copay, if applicable)
100% <sup>1</sup> Prudent Buyer (Hospital facility fees: 80% Prudent Buyer; 70% non–Prudent Buyer)	No charge
80% Prudent Buyer; 70% non–Prudent Buyer	\$20 copay; limited 20 days for all therapies combined (unlimited days based on medical necessity for CA only)
80% in accordance with requirements	\$20 copay; limited 20 days for all therapies combined (unlimited days based on medical necessity for CA only)
80% Prudent Buyer; 70% Non-Prudent Buyer; in accordance with requirements	\$5 copay for initial visit to confirm pregnancy; no charge for subsequent maternity visits
Details 200/ is not used, but of not used, course	Detail \$7 consultar 20 day supply
Retail: 80% in-network; out-of network coverage may vary. Contact Anthem Blue Cross for more information. Mail order: \$10 generic/\$30 brand/\$50 non-preferred brand/ \$150 specialty for a 90-day supply /specialty copay prorated for less than 90-day supply	Retail: \$7 copay for 30-day supply; Mail order: \$14 copay for 90-day supply
80% Prudent Buyer; 70% non–Prudent Buyer	No charge for an unlimited number of days
80% Prudent Buyer; 70% non–Prudent Buyer	No charge for an unlimited number of visits

Not covered	\$10 copay; limit one exam every 12 months through Cigna Vision
One pair, after eye surgery	Covered after cataract surgery
Not covered	Not covered
Not covered	Not covered
Not covered	Not covered

Kaisar Parmananta	
Kaiser Permanente	UnitedHealthcare <sup>4</sup>
None Maximum copays of \$1,500 per individual, \$3,000 per family	None Maximum copays of \$2,000 per individual, \$6,000 per family
Maximum copays of \$1,500 per individual, \$5,000 per family	Maximum copays of \$2,000 per individual, \$6,000 per family
Unlimited	Unlimited
No charge	No charge
No charge for inpatient; \$5 copay for outpatient	No charge for inpatient or outpatient
No charge	No charge
Authorization by a Kaiser Permanente physician required within 24 hours or as soon as reasonably possible in case of emergency outside service area	Authorization by a participating UnitedHealthcare medical group or physician required. Within 24 hours in case of emergency
No charge; limit 100 days per benefit period	No charge; up to 100 days per benefit period
No charge if authorized by Kaiser Permanente physician	No charge (if medically necessary)
No charge (up to 100 visits per Accumulation Period)	No charge; 100 visits maximum per calendar year
No charge if authorized by Kaiser Permanente physician (up to 100 2-hour visits per calendar year)	No charge when authorized by a UnitedHealthcare participating physician or medical group. Prognosis of life expectancy of one year or less.
No charge	No charge
\$5 at Kaiser Permanente facility; waived if admitted directly to the hospital	\$50; waived on admission
No charge if emergency	No charge when medically necessary
\$5 copay	\$5 copay
No charge	No charge with an office visit
\$5 copay	\$5 copay; no charge for age 2 and under
No charge if generally available	\$5 copay; no charge for age 2 and under
\$5 copay	No charge
\$5 copay	Inpatient: no charge; outpatient: \$5 copay
\$5 copay	Inpatient: no charge; outpatient: \$5 copay
\$5 copay	No charge; office visit copays are waived after initial office visit copay
Generic and Brand Drugs: \$7 copay for 100-day supply Specialty Drugs: \$7 copay for 30-day supply	Retail: \$7 copay for 30-day supply; Mail order: \$7 copay for 90-day supply
No charge; for an unlimited number of days	No charge; for an unlimited number of days (both Mental Health and Substance Abuse)
\$5 copay per visit; for an unlimited number of visits	Mental Health: \$5 copay; for an unlimited number of visits, must be authorized through UnitedHealthcare Behavioral Health
	Substance Abuse: No charge; for an unlimited number of visits (Includes Partial Hospitalization/Day Treatment and Intensive Outpatient Treatment)
\$5 copay	\$5 copay through PCP <sup>5</sup>
Not covered	Not covered
Not covered	Not covered
€E conov	¢E coppy
\$5 copay Not covered	<ul> <li>\$5 copay</li> <li>\$5,000 annual benefit maximum per calendar year. Limited to one hearing aid (including repair and replacement) per hearing impaired ear every three years.</li> </ul>

# **Carrier Notes:**

#### **Anthem Blue Cross Plans** I, II, and Prudent Buyer

Coinsurance payment is the percentage of eligible charges after you meet the plan deductible, unless otherwise noted. All plan reimbursements are based on negotiated rates or usual and customary charges. Usual and Customary charges are the maximum amounts the plan will pay for a service based on what providers in that geographic area charge for similar services or supplies.

<sup>1</sup> Indicates deductible waived.

# **Anthem Blue Cross II**

<sup>2</sup> For non–Medicare members only.

# **Anthem Blue Cross I** and II

<sup>3</sup> Treatment must be due to an accidental injury while insured and treatment must be received within two years of accident.

# **HMOs**

Medical care must be received from HMO or contracted provider, physician or facility.

Mental Health Benefits for California Base Contracts: refer to evidence of coverage.

# UnitedHealthcare

- <sup>4</sup> Refer to UnitedHealthcare HMO Schedule of Benefits and Evidence of Coverage for detailed plan information.
- <sup>5</sup> Your PCP is your Preferred Care Provider in the UnitedHealthcare HMO.

Effective July 1, 2022

LERA

# Health Maintenance Organizations (HMOs) and

Medicare Advantage Prescription Drug (MA-PD) HMOs

- Kaiser Permanente Colorado
- Kaiser Permanente Georgia
- Kaiser Permanente Hawaii
- Kaiser Permanente Oregon
- Kaiser Permanente Washington
- Cigna Preferred with Rx Phoenix, Arizona
- SCAN Desert Health Plan Arizona (Service areas available in Maricopa, Pima, and Pinal Counties)
- SCAN Health Plan Nevada Nevada (Service areas available in Clark County)

This chart represents a summary of benefits only. Additional benefit information is provided by each insurance carrier. This chart does not replace or modify the official documents, which legally govern each plan's operation.

The health plans and benefit designs available from the LACERA-administered options change when an enrolled member permanently moves outside the provider network area. Moving to a location outside the coverage area will impact your eligibility to be enrolled in the health plan, the benefit designs available and the rates you pay.

**Note:** The benefit levels contained in this booklet are subject to approval by the Centers for Medicare and Medicaid Services (CMS) and may be adjusted during the plan year.

# **BASIC (UNDER 65 OR OVER 65 WITHOUT MEDICARE COVERAGE) HMOs**

	Kaiser Permanente – Colorado	Kaiser Permanente – Georgia
Calendar Year Deductible/Copayment	None	None
Annual Maximum Out-of-Pocket	Individual – \$2,000	Individual – \$2,000
Expenses (for most services)	Family – \$4,500	Family – \$4,000
Lifetime Maximum Benefits	None	None
Hospital Benefits		
Room and Board	\$250 copay per admission	\$250 copay per admission
Surgical Services	Inpatient – no charge Outpatient – \$50 copay	Inpatient – no charge Outpatient – \$100 copay
Hospital Services and Supplies	Durable medical equipment covered at 80%	Durable medical equipment covered at 80%
Hospital Admission Authorization Requirements	No authorization needed when referred by a Kaiser Permanente physician	Authorization required for hospital admissions
Nursing Benefits		
Skilled Nursing Facility Care	No charge; 100 days per period	\$250 copay per admission; 100 days per year
Private Duty Nurses	No charge if in service area only and referred by a network provider	No charge if authorized
Home Health Care	No charge if authorized	No charge up to 120 visits per calendar year (private duty nursing excluded)
Hospice Care	No charge	No charge if authorized
Emergency Benefits		
Inpatient	\$100 copay (waived if admitted)	\$100 (waived if admitted)
Outpatient	\$100 copay	\$100 (waived if admitted)
Ambulance	20% copay; max. of \$500 per trip	\$100 copay
Outpatient Benefits		
Doctor's Office Visits	\$5 copay (\$25 copay for after-hours care; \$15 copay for specialist visit)	\$15 copay
Preadmission Diagnostic X-ray and Lab Tests	Included in office visit copay	No charge
Routine Checkups		
– Adults	No charge	No charge
– Children Under 17	No charge	No charge
Immunizations	\$5 copay; no charge if preventive	\$15 copay; no charge if preventive
Outpatient Surgical Services	\$50 copay	\$100 copay
Physical Therapy	\$250 copay inpatient; \$5 copay outpatient; limited to 20 visits per year	\$15 copay; limited to 20 visits per year
Speech Therapy	\$250 copay inpatient; \$5 copay outpatient; limited to 20 visits per year	\$15 copay; limited to 20 visits per year
Maternity	No charge	\$15 copay for 1st visit; no charge thereafter
Prescription Drug Benefits		
Prescription Drugs	\$10 copay for up to 60-day supply	\$15 generic/\$30 brand copay for up to 30-day supply at Kaiser Permanente; \$25 generic/\$40 brand copay for up to 30-day supply at Walgreens
Mental Health Benefits		
Inpatient	\$250 per admission	\$250 copay
Outpatient	\$5 copay	\$15 copay
Substance Abuse Benefits		
Inpatient	\$250 per admission	\$250 copay per admission (detox only)
Outpatient	\$5 copay	\$15 copay
Residential Day	\$250/admission	Not covered
Vision/Hearing Care Benefits		
Eye Exams		
	\$5 copay	\$15 copay
Lenses Frames	\$150 (adults) or 50% (children) credit toward lenses, contact lenses or frames combined every 2	\$100 credit toward lenses, contact lenses
Frames	\$150 (adults) or 50% (children) credit toward lenses, contact lenses or frames combined every 2 years	\$100 credit toward lenses, contact lenses or frames combined every 2 years
	\$150 (adults) or 50% (children) credit toward lenses, contact lenses or frames combined every 2	\$100 credit toward lenses, contact lenses

Kaiser Permanente – Hawaii	Kaiser Permanente – Oregon	Kaiser Permanente – Washington
None	None	None
Individual – \$2,500 (including prescription drugs) Family (3 or more) – \$7,500 (including prescription drugs)	Individual – \$600 Family – \$1,200	Individual – \$1,500 Family – \$3,000
Unlimited	None	Unlimited
\$50/day	No charge	No charge
Inpatient - no charge Outpatient - \$15 copay	Inpatient – no charge Outpatient – \$5 copay	Inpatient – no charge Outpatient – \$10 copay
No charge	No charge	No charge
Authorization required by a Kaiser Permanente Medical Group physician	Authorization required by a Kaiser Permanente physician	Authorization required by a Kaiser Permanente physician
No charge; 120 days per accumulated period Not covered	No charge; 100 days per year Not covered	No charge; 100 days per year Not covered
Not covered	Not covered	Not covered
No charge if authorized	No charge if authorized; limited to 130 days	No charge up to 130 visits per calendar year
No charge if authorized	No charge	No charge
\$50/visit within service area; 20% copay outside of service area (waived if admitted)	\$75 copay (waived if admitted)	\$75 copay (waived if admitted)
\$50/visit within service area; 20% copay outside of service area	\$75 copay (waived if admitted)	\$75 copay (waived if admitted)
No charge	\$75 copay	No charge
\$15 copay	\$5 copay	\$10 copay
No charge	No charge	No charge
No charge	No charge	No charge
No charge	No charge	No charge
No charge	No charge for routine care	No charge
\$15 copay	\$5 copay	\$10 copay
\$15 copay	\$5 copay; up to 20 visits per therapy, per calendar year	No charge inpatient, \$10 copay outpatient; limited to 60 inpatient days/60 outpatient visits
\$15 copay	\$5 copay; up to 20 visits per therapy, per calendar year	per calendar year (physical and speech therapy combined)
No charge (after confirmation of pregnancy)	Hospitalization – no charge; doctor's office visit – no charge	No charge inpatient; \$10 copay outpatient; no charge for routine care
\$10 copay for up to 30-day supply	\$5 copay for up to 30-day supply	\$10 copay for up to 30-day supply, preferred generic and/or brand
\$50/day*	No charge	No charge
\$15 copay*	\$5 copay	No charge
\$50/day	No charge	No charge
\$15 copay	\$5 copay	No charge
No charge	No charge	No charge
\$15 copay	\$5 copay	\$10 copay
Not covered	Not covered	Not covered
Not covered	Not covered	Not covered
\$15 copay	\$5 copay	\$10 copay
60% of applicable charges per ear, once every three years	Covered for children only	Not covered

\*When prescribed by a physician, services for serious mental illness will be provided in accordance with state law.

# **RETIREE WITH MEDICARE MA-PD HMOs**

	Kaiser Permanente – Colorado	Kaiser Permanente – Georgia
Calendar Year Deductible/Copayment	None	None
Annual Maximum Out-of-Pocket Expenses (for most services)	Individual – \$2,500	Individual – \$2,000
Lifetime Maximum Benefits	None	None
Hospital Benefits		
Room and Board	\$250 copay per admission	\$250 copay per admission
Surgical Services	Inpatient – no charge Outpatient – \$50 copay	Inpatient – no charge Outpatient – \$100 copay
Hospital Services and Supplies	Durable medical equipment covered at 80%	No charge
Hospital Admission Authorization Requirements	No authorization needed when referred by a Kaiser Permanente physician	Authorization required for hospital admissions
Nursing Benefits		
Skilled Nursing Facility Care	No charge; 100 days per period	\$250 copay per admission; 100 days per period
Private Duty Nurses	No charge in service area	No charge if authorized
Home Health Care	No charge in service area	No charge, unlimited visits (private duty nursing excluded)
Hospice Care	No charge (only home-based hospice care)	No charge
Emergency Benefits		
Inpatient	\$50 copay (waived if admitted)	\$50 copay (waived if admitted)
Outpatient	\$50 сорау	\$50 copay (waived if admitted)
Ambulance	20% copay; max. of \$195 per trip	\$100 copay
Outpatient Benefits		
Doctor's Office Visits	\$5 copay (\$15 copay for specialist visit)*	\$15 copay
Preadmission Diagnostic X-ray and Lab Tests	Included in office visit copay	Copay varies
Routine Checkups	No charge	No charge
Immunizations	\$5 copay; no charge if preventive	\$15 copay; no charge if preventive
Outpatient Surgical Services	\$50 copay	\$100 copay
Physical Therapy	\$250 copay inpatient; \$5 copay outpatient	\$15 copay outpatient
Speech Therapy	\$250 copay inpatient; \$5 copay outpatient	\$15 copay outpatient
Maternity	No charge	No charge
Prescription Drug Benefits		
Prescription Drugs	\$10 copay for up to 60-day supply	\$15 generic/\$30 brand copay for up to 30-day supply at Kaiser Permanente; \$25 generic/\$40 brand copay for 30-day supply at Rite Aid or Walgreens
Mental Health Benefits		
Inpatient	\$250 per admission	\$250 per admission
Outpatient	\$5 copay	\$15 copay
Substance Abuse Benefits		
Inpatient	\$250 per admission	\$250 per admission; detox and rehab
Outpatient	\$5 copay	\$15 copay
Vision/Hearing Care Benefits		
Eye Exams	\$5 copay	\$15 copay
Lenses	—— \$150 credit toward lenses, contact lenses or	\$100 credit toward lenses and/or frames
Frames	frames combined every 2 years	combined every 2 years
	¢E somer	\$15 copay
Hearing Exam	\$5 copay	\$15 COpay

\*All office-administered prescription drugs covered by Medicare Part B (except preventive immunizations and diagnostic drugs) will be subject to 20% coinsurance. This coinsurance will apply to the annual maximum out-of-pocket expenses.

Kaiser Permanente – Hawaii	Kaiser Permanente – Oregon	Kaiser Permanente – Washington
None	None	None
Individual – \$2,500	Individual – \$600	Individual – \$2,500
Unlimited	None	Unlimited
\$50/day	No charge	No charge
Inpatient – no charge	Inpatient - no charge	Inpatient – no charge
Outpatient – \$15 copay	Outpatient – \$5 copay	Outpatient – \$10 copay
No charge	No charge	No Charge
Authorization required by a Kaiser Permanente Medical Group physician	Authorization required by a Kaiser Permanente physician	Authorization required by a Kaiser Permanente physician
No charge for days 1-20; \$50 copay per day for days 21-100 (per benefit period)	No charge; 100 days for Medicare benefits period	No charge; 100 days per Medicare benefit period
Not covered	Not covered	Not covered
No charge if authorized	No charge; unlimited visits	No charge
No charge if authorized	No charge	No charge
	¢FO comparison difficulty in the	
\$50 copay (waived if admitted) \$50 per visit	\$50 copay (waived if admitted) \$50 copay (waived if admitted)	\$75 copay (waived if admitted)
No charge	\$50 copay (waived if admitted) \$50 copay	\$75 copay (waived if admitted) \$0 – \$150 per one-way trip
	\$50 COpay	\$0 – \$150 per one-way trip
\$15 copay	\$5 copay	\$10 copay
No charge	No charge	No charge
No charge	No charge	No charge
No charge	No charge	No charge; annual routine physical exam/ annual wellness visit covered once every 12 months
No charge	No charge	No charge
\$15 copay	\$5 copay	\$10 copay
\$15 copay	\$5 copay; unlimited visits	\$10 copay
\$15 copay	\$5 copay; unlimited visits	\$10 copay
No charge (after confirmation of pregnancy)	No charge	Covered at applicable cost shares
\$10 copay for up to 30-day supply	\$5 copay for a 30-day supply	\$3 preferred generic/\$40 preferred brand copay for up to 30-day supply
\$50/day**	No charge	No charge
\$15 copay**	\$5 copay	\$10 copay
\$50/day	No charge	No charge
\$15 copay	\$5 copay	No charge
\$15 copay	\$5 copay	\$10 copay; one routine exam per calendar year
Not covered	\$150 credit toward the purchase of lenses,	
Not covered	frames, and/or contact lenses every 24 months	\$250 combined allowance per calendar year
¢1E copay	\$5 copay (adults/children)	\$10 copay
\$15 copay		

\*\*When prescribed by a physician, services for serious mental illness will be provided in accordance with state law.

# **RETIREE WITH MEDICARE MA-PD HMOs**

	SCAN Desert Health Plan –	SCAN Health Plan Nevada –
	Arizona	Nevada
Calendar Year Deductible/Copayment	None	None
Annual Maximum Out-of-Pocket Expenses (for most services)	\$3,400	\$3,400
Lifetime Maximum Benefits	Unlimited	Unlimited
Hospital Benefits		
Room and Board	No charge	No charge
Surgical Services	No charge	No charge
Hospital Services and Supplies	No charge	No charge
Hospital Admission Authorization Requirements	No charge	No charge
Nursing Benefits		
Skilled Nursing Facility Care	No charge; 100 days per benefit period in a Medicare-certified facility	No charge; 100 days per benefit period in a Medicare-certified facility
Private Duty Nurses	No charge when medically necessary only, per Medicare guidelines	No charge when medically necessary only, per Medicare guidelines
Home Health Care	No charge for Medicare-covered Home Health	No charge for Medicare-covered Home Health
Hospice Care	No charge, provided care is in accordance with Medicare guidelines	No charge, provided care is in accordance with Medicare guidelines
Emergency Benefits		
Inpatient	No charge	No charge
Outpatient	\$25 copay (waived if admitted)	\$25 copay (waived if admitted)
Ambulance	No charge	No charge
Outpatient Benefits	AF	**
Doctor's Office Visits Proadmission Diagnostic X ray	\$5 copay	\$5 copay
Preadmission Diagnostic X-ray and Lab Tests	No charge	No charge
Routine Checkups	\$5 copay	\$5 copay
Immunizations	No charge	No charge
Outpatient Surgical Services	No charge	No charge
Physical Therapy	\$5 copay	\$5 copay
Speech Therapy	\$5 copay	\$5 copay
Maternity	Covered in accordance with Medicare guidelines	Covered in accordance with Medicare guidelines
Prescription Drug Benefits		
Prescription Drugs	Retail: \$7 generic/\$15 brand for 30-day supply; Mail order: \$7 generic/ \$15 brand for 100-day supply; Generic drug discounts at Preferred Network Pharmacies (CVS, Rite-Aid, Costco, Vons, Ralphs): \$2 Retail/\$4 Mail Order	Retail: \$7 generic/\$15 brand for 30-day supply; Mail order: \$7 generic/ \$15 brand for 100-day supply; Generic drug discounts at Preferred Network Pharmacies (CVS, Rite-Aid, Costco, Vons, Ralphs): \$2 Retail/\$4 Mail Order
Mental Health Benefits		
Inpatient	No charge; 90 days per benefit period. 190-day lifetime maximum in Medicare facility	lifetime maximum in Medicare facility
Outpatient	\$5 copay for each visit per calendar year. No charge for severe mental illness	\$5 copay for each visit per calendar year. No charge for severe mental illness
Substance Abuse Benefits		
Inpatient	No charge	No charge
Outpatient	\$5 copay; unlimited visits	\$5 copay; unlimited visits
Vision/Hearing Care Benefits		
Eye Exams	\$5 copay for Medicare-covered, medically- necessary eye exam	\$5 copay for Medicare-covered, medically- necessary eye exam
Lenses	Not covered	Not covered
Frames	Not covered	Not covered
Hearing Exam	\$5 copay	\$5 copay
Hearing Aids	\$600 allowance, every 24 months by Medicare Part B (except preventive immunizations and dia	\$600 allowance, every 24 months

\* All office-administered prescription drugs covered by Medicare Part B (except preventive immunizations and diagnostic drugs) will be subject to 20% coinsurance. This coinsurance will apply to the annual maximum out-of-pocket expenses.

Cigna Preferred with Rx –
Phoenix, Arizona
\$0
\$5,550 which applies to in network
\$3,330 which applies to in network
None
\$0
\$0 for inpatient stays; outpatient surgery \$12
*o
\$0
\$0 • • • • • • • • •
Authorization required
\$0 benefit period 1-20 days
Not covered
¢0
\$0
Covered by original Medicare
***
\$90
\$12
\$0
\$0
\$12
*
\$0
\$0
\$12
\$12
\$12
Same as any other medical service
Tier 1 preferred generic drugs \$0
Tier 2 generic drugs \$10
Tier 3 preferred brand drugs \$45
Tier 1 preferred generic drugs \$0 Tier 2 generic drugs \$10 Tier 3 preferred brand drugs \$45 Tier 4 non-preferred drugs \$95 Tier 5 33%
¢10
\$12
\$12
<i>↓</i>
\$0
\$12
۲۴ 
Diabetic retinal exams \$0; all other Medicare-covered \$12
1 evenues
1 every year
1 every year
\$0 copay for 1 exam every year
\$700 per ear per device every 3 years
** When prescribed by a physician, services for serious mental illness will be provided in accordance with state law.

# COMPARISON OF MEDICAL PLANS

# For those enrolled in Medicare Parts A and B

Effective July 1, 2022

# Medicare Supplement Plan

Anthem Blue Cross III

# Medicare Advantage Prescription Drug (MA-PD) HMOs

- Kaiser Permanente Senior Advantage
- UnitedHealthcare Medicare Advantage HMO
- SCAN Health Plan

This chart represents a summary of benefits only. Additional benefit information is provided by each insurance carrier. This chart does not replace or modify the official documents that legally govern each plan's operation. The benefits offered by all LACERA-administered health plans change when an enrolled member permanently moves outside the provider network area. Moving to a location outside the coverage area can impact your plan's rates and coverage levels.

# **Comparison of Medical Plans** (For Medicare-Eligible Members Enrolled in Medicare Parts A and B)

	Medicare Supplement	Medicare Advantage Prescription Drug (MA-PD) HMOs		
	Anthem Blue Cross III	Kaiser Permanente Senior Advantage¹	SCAN <sup>2</sup>	UnitedHealthcare Medicare Advantage HMO³
<b>Outpatient Benefit</b>	S			
Doctor's Office Visit	20% of Medicare-approved charges	\$5 copay	\$5 copay	\$5 copay
Preadmission X-ray and Lab Tests	20% of Medicare-approved charges	No charge	No charge	No charge with an office visit copay
Routine Checkups	Not covered	No charge	\$5 copay	No charge
Immunizations	Not covered	No charge	No charge	No charge with an office visit copay
Outpatient Surgical Services	20% of Medicare-approved charges	\$5 copay per procedure	No charge	No charge
Physical Therapy	20% of Medicare-approved charges	\$5 copay	\$5 copay	No charge with an office visit copay
Speech Therapy	20% of Medicare-approved charges	\$5 copay	\$5 copay	No charge with an office visit copay
Maternity	Covered the same as an illness for services covered by Medicare	\$5 copay	Covered in accordance with Medicare guidelines	Covered in accordance with Medicare guidelines
Chiropractic Care	20% of Medicare-approved charges	\$5 copay for Medicare- covered services <sup>4</sup>	\$5 copay for Medicare-covered services <sup>4</sup>	\$5 copay for Medicare- covered services⁴
Transportation	Not covered	Not covered	No charge for unlimited number of rides to medical or dental appointments	12 one-way rides to medically-related appointments, up to 30 days following discharge <sup>3</sup>
Prescription Drug	Benefits			
Prescription Drugs	<b>Retail:</b> 80% in-network, 60% out-of-network <b>Mail order:</b> \$10 generic/ \$30 brand/\$50 non-preferred brand/\$150 specialty copay for mail order for 90-day supply <sup>5</sup>	\$7 copay for up to 100- day supply; covers dental prescriptions	Retail: \$7 generic/\$15 brand for 30-day supply Mail order: \$7 generic/ \$15 brand for 100-day supply Generic drug discounts at Preferred Network Pharmacies (CVS, Rite-Aid, Costco, Vons, Ralphs): \$2 Retail/\$4 Mail- Order	\$7 copay for 30-day supply (or for 90-day mail order supply for maintenance medications only)
Mental Health and	Substance Abuse Benefits			
Inpatient	Plan pays all Medicare inpatient deductibles for approved Medicare days; 190-day lifetime maximum	No charge; for unlimited number of days	No charge; 90 days per benefit period. 190-day lifetime maximum in Medicare facility. <sup>6</sup>	No charge; 190-day lifetime maximum if admitted to Medicare-approved psychiatric hospital
Outpatient	20% of Medicare-approved charges; up to 50 professional visits per year	\$5 copay for each visit per calendar year for an unlimited number of visits	\$5 copay for each visit per calendar year. No charge for severe mental illness	\$5 copay; unlimited visits
Substance Abuse	20% of Medicare-approved charges	Inpatient: No charge as per plan limitations; Outpatient: \$5 per individual visit; \$2 per group visit	\$5 copay; unlimited visits	Same as Mental Health Inpatient and Outpatient
Vision Benefits				
Eye Exams	Not covered	\$5 copay	\$5 copay for Medicare-covered, medically-necessary eye exam	\$5 copay
Lenses	Not covered unless 1st lens after eye surgery	Eyewear (frames/lenses/ contacts) purchased from	Not covered	Not covered
Frames	Not covered unless after eye surgery	plan optical sales every 24 months; \$150 allowance	Not covered	Not covered
Hearing Care Bene	fits			
Hearing Exams	One per calendar year; 80%	\$5 copay	\$5 copay	\$5 copay
Hearing Aids	50% up to \$300 lifetime maximum	Not covered	\$600 allowance, every 24 months	Not covered

# **Comparison of Medical Plans** (For Medicare-Eligible Members Enrolled in Medicare Parts A and B)

	Medicare Supplement	Medicare Adva	ntage Prescription Dru	ıg (MA-PD) HMOs
	Anthem Blue Cross III	Kaiser Permanente Senior Advantage <sup>1</sup>	SCAN <sup>2</sup>	UnitedHealthcare Medicare Advantage HMO <sup>3</sup>
Calendar Year Deductibles	None	None	None	None
Annual Maximum Out-Of-Pocket Expenses (for most services)	None	Maximum copayments of \$1,500 – individual \$3,000 – family	\$3,400	\$6,700
Lifetime Maximum Benefits	Unlimited	Unlimited	Unlimited	Unlimited
Hospital Benefits				
Room and Board	Plan pays all Medicare inpatient deductibles for approved Medicare days	No charge	No charge	No charge
Surgical Services	Plan pays all Medicare inpatient deductibles for approved Medicare days	No charge	No charge	No charge
Hospital Services and Supplies	Plan pays all Medicare inpatient deductibles for approved Medicare days	No charge	No charge	No charge
Nursing Benefits				
Skilled Nursing Facility Care	Plan pays Medicare daily deductible for days 21–100; no coverage beyond 100 days	No charge; 100 days per benefit period in a Medicare-certified facility	No charge; 100 days per benefit period in a Medicare-certified facility	No charge; 100 days per benefit period in a Medicare-certified facility
Private Duty Nurses	Not covered	No charge if authorized by a Kaiser Permanente physician	No charge when medically necessary only, per Medicare guidelines	No charge when medically necessary only, per Medicare guidelines
Home Healthcare	Plan pays nothing except 20% of the Medicare- approved amount for durable medical equipment only	No charge for Medicare- covered Home Health and no charge for part- time intermittent care if authorized by a Kaiser Permanente physician	No charge for Medicare- covered Home Health. See (1) below for expanded coverage info	No charge when medically necessary only, per Medicare guidelines
Hospice Care	100% of all remaining costs not covered by Medicare	No charge if authorized by a Kaiser Permanente physician	No charge, provided care is in accordance with Medicare guidelines	No charge, provided care is in accordance with Medicare guidelines
Emergency Benefits		·		
Inpatient	Plan pays all Medicare inpatient deductibles for approved Medicare days	\$5 copay; waived if admitted	No charge	No charge
Outpatient	20% of Medicare-approved charges	\$5 copay; waived if admitted	\$25 copay; waived if admitted	\$50 copay; waived if admitted
Ambulance	20% of Medicare-approved charges	No charge for emergency	No charge	No charge (if medically necessary)

<sup>1</sup> Kaiser Senior Advantage - Supplemental benefits with meals and transportation, as well as the Silver&Fit Exercise & Healthy Aging program are available. Contact Kaiser at (877) 750-2746.

<sup>2</sup> SCAN includes expanded coverage for Independent Living Power<sup>™</sup> services, which are only available in Los Angeles, Orange, Riverside, San Bernardino, and San Diego Counties. Qualifying members are eligible for up to \$650 per month for these additional services:

- No charge for personal care coordination via phone

- No copay for emergency response system

- \$15 copay per visit for alternative caregiver visit to a member's home when his or her regular caregiver is not available

- \$15 copay per visit for adult day care to provide relief for regular caregiver

- No copay for up to five days in a facility when regular caregiver is unavailable

- \$15 copay per visit for transportation escort to medical, dental, optometric or other necessary appointments

- \$15 copay per visit for personal care such as assistance with bathing, dressing, eating, getting in and out of bed, moving about/walking and grooming

- \$15 copay per visit for homemaker services such as light cleaning, grocery shopping, laundry and meal preparation

- No copay for bathroom durable medical equipment

No copay for home-delivered meals

No copay for inpatient custodial care up to 5 days in a facility. Medicare will not pay for a stay in a facility if the services received are primarily for those purposes
 SilverSneakers by Tivity Health Fitness Program available at no extra cost

<sup>3</sup> UnitedHealthcare's Healthy at Home program includes 28 home-delivered meals, 12 one-way rides to medically-related appointments and pharmacy, and 6 hours of in-home personal care for up to 30 days following discharge from inpatient and skilled nursing facilities. Referral is required. UnitedHealthcare also includes the Renew Active<sup>®</sup> fitness program (which replaces Silver Sneakers), and PERS.

<sup>4</sup> Manual manipulation of the spine to correct subluxation that can be demonstrated by X-ray, when the manipulation is prescribed by plan physician and performed by plan provider.

<sup>5</sup> Copayment for specialty drugs will be prorated if you receive less than a 90-day supply.

<sup>6</sup> Note: Visit or day limits do not apply to certain mental healthcare described in the evidence of coverage.

## Appendix F: Firefighters Local 1014 Medical Plan

The description of the Firefighters Local 1014 Medical Plan is from selected pages of the following website:

https://www.local1014medical.org/docs/SPD%202019.pdf

This work product was prepared solely for LACERA for the purposes described herein and may not be appropriate to use for other purposes. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. Milliman recommends that third parties be aided by their own actuary or other qualified professional when reviewing the Milliman work product.

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# Medical Benefits at a Glance

The "*Benefits at a Glance*" chart below is an outline of what the **Plan** covers and how costs are shared for covered services. Coverage for services by an **out-of-network** provider is limited to **Reasonable and Customary charges** as determined by Local 1014. For more detailed information about what the **Plan** does and does not cover, refer to the sections of this SPD: **What the Medical Plan Covers** and **What the Medical Plan Does Not Cover**.

Covered Expense	In-Network	Out-of-Network	
Lifetime plan maximum	Unlimited		
Annual deductible	First \$200 of <i>allowable expenses</i> pe	r person; \$600 maximum per family	
Coinsurance	Once you meet the annual deductible, the <i>Plan</i> pays 90% and you pay 10% of most <i>allowable</i> <i>expenses</i> , up to the annual out-of- pocket limit. Once the annual out- of-pocket limit is reached, the <i>Plan</i> generally pays 100% of <i>allowable</i> <i>expenses</i> .	Once you meet the annual deductible, the <i>Plan</i> pays 70% and you pay 30% of most <i>allowable</i> <i>expenses</i> , up to the annual out- of-pocket limit. Once the annual out-of-pocket limit is reached, the <i>Plan</i> generally pays 100% of <i>allowable expenses</i> . You also remain responsible for all amounts that exceed <i>Reasonable and Customary</i> <i>charges</i> .	
Annual Out-of-Pocket Limit The combined In-Network and <i>Out-</i> <i>of-Network</i> limit is \$1,500.	\$1,000 per person or family per year (after you pay the deductible)	\$1,500 per person or family per year <sup>1</sup> (after you pay the deductible). You remain responsible for all	
(Does not include annual deductibles, prescription drug or other <i>copayments</i> , non-covered expenses and amounts that exceed <i>Reasonable</i> <i>and Customary</i> )		amounts that exceed <b>Reasonable and</b> <b>Customary charges</b> after the out-of- pocket limit is met.	

<sup>1</sup> Allowable expenses for out-of-network services are limited to Reasonable and Customary charges, which are defined as the fees and charges customarily accepted as payment for Medically Necessary health care services and supplies in a specific geographical area.





Covered Expense	In-Network	Out-of-Network	
Well-baby care (up to age 2, including immunizations)	100%; deductible does not apply	100%; deductible does not apply <sup>1</sup>	
Immunizations (age 2 and older)	100%; deductible does not apply	100%; deductible does not apply <sup>1</sup>	
Wellness benefit (age 2 and older)	100%; annual preventive exam and screenings, including "fit for life" exam, and immunizations; deductible does not apply	100%; annual preventive exam and screenings, including "fit for life" exam, and immunizations; deductible does not apply <sup>1</sup>	
Cancer screenings	100% for Pap smear, mammogram, PSA test and colonoscopy covered according to American Cancer Society guidelines; deductible does not apply	100% for Pap smear, mammogram, PSA test and colonoscopy covered according to American Cancer Society guidelines; deductible does not apply <sup>1</sup>	
Accidents	100% of allowable expenses for the first \$5,000 incurred within 180 days of the accident <sup>1</sup> (deductible and emergency room copay do not apply)		
Ambulance	90% after deductible <sup>1</sup>		
Doctor's office visits	90% after deductible	70% after deductible <sup>1</sup>	
Emergency room	90% after deductible and \$50 copay per visit (copay waived in certain circumstances)	70% after deductible <sup>1</sup> and \$50 copay per visit (copay waived in certain circumstances)	
<b>Hospital care</b> (Providers must request pre-authorization from Anthem Blue Cross)	90% after deductible	70% after deductible <sup>1</sup>	
<b>Maternity</b> (No pre-authorization required for uncomplicated obstetrical care)	90% after deductible	70% after deductible <sup>1</sup>	

<sup>1</sup> Allowable expenses for out-of-network services are limited to Reasonable and Customary charges, which are defined as the fees and charges customarily accepted as payment for Medically Necessary health care services and supplies in a specific geographical area.



Photo by Dave Mills



Covered Expense	In-Network	Out-of-Network
<b>Surgery</b> [Providers must request pre-authorization from Anthem Blue Cross for all <i>inpatient</i> surgery and any outpatient procedure that might be considered experimental, investigational or cosmetic. Organ and tissue transplants, and weight loss surgery are covered only when performed at an Anthem Blue Cross Center of Expertise (COE)].	90% after deductible	70% after deductible <sup>1</sup>
X-rays and lab tests (excludes periodic preventive exams)	90% after deductible	70% after deductible <sup>1</sup>
Mental health/substance abuse care		
• <b>Outpatient care</b> (All day or partial day treatment requires pre- authorization from Anthem Blue Cross)	90% after deductible	70% after deductible <sup>1</sup>
<ul> <li>Inpatient care (All inpatient care requires pre-authorization from Anthem Blue Cross)</li> </ul>	90% after deductible	70% after deductible <sup>1</sup>
Acupuncture	90% after deductible (up to 30 visits per year)	70% after deductible (up to 30 visits per year)
Chiropractic care	90% after deductible (up to 30 visits per year)	70% after deductible (up to 30 visits per year)
<i>Physical therapy</i> (Requires referral by a <i>physician</i> ; additional visits require prior approval by Local 1014's Patient Care Coordinator)	90% after deductible (up to 30 visits per year)	70% after deductible (up to 30 visits per year) <sup>1</sup>

<sup>1</sup> Allowable expenses for out-of-network services are limited to Reasonable and Customary charges, which are defined as the fees and charges customarily accepted as payment for Medically Necessary health care services and supplies in a specific geographical area.

Photo by Juan Guerra





Covered Expense	In-Network	Out-of-Network
<b>Occupational therapy</b> (Requires referral by a <i>physician</i> ; additional visits require prior approval by Local 1014's Patient Care Coordinator)	90% after deductible (up to 12 visits per year)	70% after deductible (up to 12 visits per year) <sup>1</sup>
<b>Home health care</b> (Requires pre-authorization by Local 1014's Patient Care Coordinator)	90% after deductible (up to 100 visits per year) <sup>1</sup>	
<i>Hospice care</i> (Requires pre- authorization by Local 1014's Patient Care Coordinator)	90% after o	deductible <sup>1</sup>
<i>Extended care facility</i> (Providers must request pre-authorization from Anthem Blue Cross)	90% after deductible (up to	o 70 days per occurrence) <sup>1</sup>
<b>Transitional nursing benefit</b> (Requires pre-authorization by Local 1014's Patient Care Coordinator)	90% after deductible (up to 400 hours per lifetime)	70% after deductible (up to \$100 per hour; up to 400 hours per lifetime) <sup>1</sup>
<b>Diabetes self care</b> (Requires pre- authorization by Local 1014's Patient Care Coordinator)	90% after deductible	70% after deductible <sup>1</sup>
<i>Infertility</i> (includes only diagnostic tests and office visits to determine the existence and underlying cause of <i>Infertility</i> )	90% after deductible (benefit limited to \$3,000 per lifetime)	70% after deductible (benefit limited to \$3,000 per lifetime) <sup>1</sup>
<i>Intrauterine Insemination (IUI)</i> (Requires pre-authorization by Local 1014's Patient Care Coordinator)	90% after deductible (benefit limited to \$10,000 per lifetime)	70% after deductible (benefit limited to \$10,000 per lifetime) <sup>1</sup>
<i>Intrauterine Insemination</i> ( <i>IUI</i> ) <i>Pharmacy</i> (Requires pre- authorization by Local 1014's Patient Care Coordinator)	100% (benefit limited to \$10,000 per lifetime)	
Temporomandibular Joint (TMJ) Disorders	90% after deductible (benefit for non- surgical treatment limited to \$4,000 per lifetime; this limit does not apply to surgical treatment)	70% after deductible <sup>1</sup> (benefit for non-surgical treatment limited to \$4,000 per lifetime; this limit does not apply to surgical treatment)
<b>Refractive eye surgery</b> (e.g., radial keratotomy, LASIK)	90% after deductible (benefit limited to \$1,500 per eye, \$3,000 per lifetime)	70% after deductible <sup>1</sup> (benefit limited to \$1,500 per eye, \$3,000 per lifetime)
Medical weight loss program	90% after deductible	70% after deductible <sup>1</sup>
Shoe orthotics	90% after deductible (benefit limited to \$4,000 per lifetime)	70% after deductible <sup>1</sup> (benefit limited to 4,000 per lifetime)
LiveHealth Online <sup>®</sup>	100% after \$15 <i>copayment</i>	Not covered
Preventive Body Scan	100% for one scan of the torso region by <b>BSI Scan</b> (not affiliated with Anthem Blue Cross). Repeat preventive body scans are covered no more frequently than once every two years; deductible does not apply	Not covered

<sup>1</sup> Allowable expenses for out-of-network services are limited to Reasonable and Customary charges, which are defined as the fees and charges customarily accepted as payment for Medically Necessary health care services and supplies in a specific geographical area.

## Appendix G: Dental and Vision Plan Description

The dental and vision plan description is from the following area of the LACERA website:

https://www.lacera.com/sites/default/files/assets/documents/rhc/rhc\_forms\_pub/brochure\_rate\_tables/Dental\_Vision\_ Chart\_2022.pdf This page intentionally left blank

# L//.CERA

Effective July 1, 2022

# DENTAL PLAN

DENTAL PLAN				
	Cigna Indemnity Dental	Cigna Dental HMO		
Individual annual deductible	\$25	None		
Family annual deductible	\$50	None		
Individual annual maximum benefit	\$1,500 Unlimited			
Exams & Cleanings:				
Two exams and cleanings per year, not subject to the plan deductible	20%	\$O**		
Additional two cleanings are subject to the plan deductible/co-pay	20%*	\$45**		
Amalgam – 1 surface, permanent	20%*	\$O**		
Amalgam – 2 surface, permanent	20%*	\$O**		
Amalgam – 3 surface, permanent	20%*	\$O**		
Amalgam – 4 surface, permanent	20%*	\$0**		
Resin or composite – anterior	20%*	\$O**		
Anterior root canal – permanent	20%*	\$10**		
Scaling/root planing – per quad	20%*	\$35**		
Simple extraction	20%*	\$10**		
Surgical extraction	20%*	\$15 – \$50**		
Crown – porcelain to high noble metal	20%*	\$220**		
Crown – stainless steel	20%*	\$10**		
Post – prefab or crown buildup	20%*	\$40/\$55/\$65*		
Orthodontic therapy – child	Not covered	\$2,240**		
Orthodontic therapy – adult	Not covered	\$2,840**		

\* Cigna network dentists are reimbursed according to a Fee Schedule or Discount Schedule. For non-network dentist, plan will reimburse according to the Maximum Reimbursable Charge for the procedure, in the geographic area. The dentist may balance bill up to their usual fees. Procedure with high noble metal are covered at 50%. Services are subject to the plan deductible and plan maximum.

\*\* Member pays this amount, plus additional charges specified in the plan brochure. For post/crown buildup work, the copay amounts apply to different steps in the procedure.

VISION PLAN				
Benefit	In-Network Benefits	<b>Out-of-Network Benefits</b>		
Spectacle exam*** (Once every 12 months)	\$20 copay; then covered in full. For contact lens fitting and professional services, member pays additional charges	\$25 reimbursement maximum		
Lenses (Once every 12 months)				
Single vision	\$40 copay; then covered in full	\$35 reimbursement maximum		
Bifocal	\$40 copay; then covered in full	\$45 reimbursement maximum		
Trifocal	\$40 copay; then covered in full	\$70 reimbursement maximum		
Lenticular	\$40 copay; then covered in full	\$130 reimbursement maximum		
Progressive	\$40 copay; then up to \$70 allowance	\$70 reimbursement maximum		
Frames (Once every 24 months)	\$50 allowance	\$35 reimbursement maximum		
Contact lenses (one pair or single purchase up to allowed amount with one lifetime maximum)				
Hard lenses	\$180 allowance	\$150 reimbursement maximum		
Soft lenses	\$230 allowance	\$225 reimbursement maximum		
*** Spectacle exam includes routine exam, including dilation and refraction.				



## Appendix H: Medicare Part B Reimbursement Plan Description

The Medicare Part B reimbursement plan description is from the following area of the LACERA website:

https://www.lacera.com/program-basics/parts-and-b

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#### L*III.*CERA

About LACERA Active Members Retirees and Families Retiree Healthcare

#### Medicare Parts A and B

Program Basics	Part A: Hospital Coverage, Cost, and Eligibility
Healthcare Eligibility Paying for Coverage	Medicare Part A is hospital insurance. It covers inpatient hospital care and surgery as well as skilled nursing facility, hospice, and home healthcare.
Manage Your Enrollment	Medicare Part A is free to any person age 65 or older who is either: <ul> <li>Eligible to receive a monthly Social Security benefit, or</li> </ul>
Medicare	Eligible based on wages in which sufficient Medicare payroll taxes were paid.
Eligibility and Enrollment Parts A and B Premium Reimbursement Part D Solicitations	You automatically apply for Medicare Part A when you apply for Social Security benefits. Your spouse may also qualify for Part A coverage at age 65, based on your eligibility for Social Security. If you are not eligible for free Part A coverage, you may purchase it.
COBRA Healthcare Resources Healthcare Legislation	For those not eligible for free coverage, the 2023 Medicare Part A premium amount is \$506 per month, depending on credits. See current income limits and premium amounts on the Medicare website.

Medicare Part A is free to any person under age 65 who is disabled and has either:

- Received Social Security disability benefits for 24 months as a worker, surviving spouse, or adult child of a retired, disabled, or deceased worker; or
- Accumulated a sufficient number of Social Security credits to be insured for Medicare and meets the requirements of the Social Security disability program.

For questions about eligibility for enrollment in Medicare Part A, <u>contact Social Security</u> directly.

#### Part B: Healthcare Coverage and Premium Structure

Part B Supplemental Medicare Insurance covers physician, lab, testing, and other costs. When you enroll in Medicare Part A, you are automatically enrolled in Medicare Part B unless you decline it. This rule applies to people age 65 or older and to those who are disabled under age 65.

If you pay a premium for Plan A, you must enroll in Part B if you also desire that coverage. Part B coverage is ordinarily deducted from your Social Security benefit.

The standard Medicare Part B monthly premium amount for 2023 is \$164.90.

If you select a LACERA-administered Medicare plan, the County may reimburse you for the Part B premium amount. This <u>reimbursement program</u> is subject to annual review by the Board of Supervisors.

If your modified adjusted gross income (MAGI) as reported on your IRS tax return from the previous two years is above a certain amount, you'll pay the standard premium amount plus an income-related monthly adjustment amount (IRMAA), an extra charge added to your premium. See a chart with <u>current income limits and premium amounts</u> on the Medicare website to see if you are subject to an IRMAA, or <u>contact Social Security</u> for more information.

#### **Combination Coverage**

If you are currently enrolled in Medicare Part A and Part B and your dependent is not, or vice versa, you will need to enroll in corresponding LACERA-administered health plans. See more below.

#### Medicare Advantage Prescription Drug Plans (MA-PD)

LACERA-Administered Medicare Plan	Corresponding Non-Medicare Plan
Cigna-HealthSpring Preferred with Rx (available in Maricopa County and Apache Junction, Pinal County, Arizona only)	Cigna Network Model Plan
Kaiser Senior Advantage	Kaiser
UnitedHealthcare Medicare Advantage	UnitedHealthcare
SCAN Health Plan	NONE

#### Medicare Supplement Plan

Anthem Blue Cross Plan III

Anthem Blue Cross Plan I OR Anthem Blue Cross Plan II

#### Appointment Reservations

### 🙆 LACERA

Los Angeles County Employees Retirement Association

#### MEMBER SERVICE CENTER M-F, 7 a.m.-5 p.m. PT

Holiday Schedule

## 300 N. Lake Ave.

Pasadena, CA 91101

Contact Us

#### MEMBER SERVICES CALL CENTER M-F, 7 a.m.-5:30 p.m. PT

800-786-6464 RETIREE HEALTHCARE

800-786-6464

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#### BUSINESS

M-F, 8 a.m.-5 p.m. PT PO Box 7060 Pasadena, CA 91109-7060 Phone 626-564-6000 Fax 626-564-6155

#### Contact Retiree

Healthcare

Operating Hours: M-F, 7 a.m.-5:30 p.m.

#### Call

Toll-free 800-786-6464 Local 626-564-6132

Email Secure/Document Upload <u>My LACERA</u> General <u>healthcare@lacera.com</u>

#### Fax

General 626-564-6155 Urgent Cases Only 626-564-6799

#### Mail

LACERA Attn: Retiree Healthcare P.O. Box 7060 Pasadena, CA 91109-7060

Mondays and Fridays are our busiest call days; for faster service, call us Tuesday through Thursday.

## **Appendix I: Historical Information**

This section presents historical statistical information on LACERA's membership, liabilities, assets, and costs. There is also a history of changes.

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## Table I-1: Membership Data

		Membership		
Valuation			Retirees and	
Date		Vested	Survivors	Payroll
(July 1)	Actives	Terminateds	with Medical	(Millions)
2006	88,581	7,450	39,078	\$5,307.2
2008	94,415	8,074	40,444	\$6,259.2
2010	94,343	7,917	41,786	\$6,732.7
2012	91,898	7,835	43,897	\$6,630.0
2014	92,393	8,069	45,825	\$6,764.0
2016	95,295	8,207	47,903	\$7,268.6
2017	97,149	8,302	49,109	\$7,743.0
2018	98,415	8,434	50,271	\$7,880.3
2019	99,128	8,593	51,499	\$8,215.4
2020	100,051	8,631	52,589	\$8,682.2
2021	99,044	8,752	53,529	\$8,981.7
2022	96,490	9,222	54,795	\$8,939.4

## Table I-2: Liabilities, Assets, and Costs (All Dollar Amounts in Millions)

			Unfunded			
	Actuarial		Actuarial			
	Accrued		Accrued		Funded	ARC/ADC as
Valuation Year	Liability	Assets	Liability	ARC/ADC <sup>1</sup>	Ratio	a % of Pay
2006	\$ 21,215.8	\$ -	\$21,215.8	\$ 1,630.7	0.00%	30.73%
2008	\$ 21,863.6	\$-	\$21,863.6	\$ 1,737.0	0.00%	27.75%
2010	\$ 24,031.0	\$-	\$24,031.0	\$ 1,938.4	0.00%	28.79%
2012	\$ 26,952.7	\$-	\$26,952.7	\$ 2,126.1	0.00%	32.07%
2014	\$ 28,546.6	\$ 483.8	\$28,062.8	\$ 2,152.3	1.69%	31.82%
2016	\$ 25,912.6	\$ 560.8	\$ 25,351.8	\$ 1,964.4	2.16%	27.03%
2017	\$ 26,300.8	\$ 742.9	\$ 25,557.9	\$ 1,979.8	2.82%	25.57%
2018	\$ 21,066.8	\$ 941.0	\$ 20,125.8	\$ 1,620.2	4.47%	20.56%
2019	\$ 20,752.6	\$ 1,238.5	\$19,514.1	\$ 1,551.0	5.97%	18.87%
2020	\$ 21,302.7	\$ 1,492.6	\$ 19,810.1	\$ 1,578.6	7.01%	18.18%
2021	\$ 21,157.4	\$ 2,306.8	\$ 18,850.6	\$ 1,505.1	10.90%	16.76%
2022	\$ 23,097.8	\$ 2,394.1	\$ 20,703.7	\$ 1,633.4	10.37%	18.27%

<sup>1</sup> Annual Required Contribution (ARC) through 2017 and Actuarially Determined Contribution (ADC) thereafter.

#### Table I-3: Change History

	Investmer Assum		
Valuation	Prefunding	Outside	
Year	Agents	Districts	Changes
2006	5.00%	5.00%	Initial OPEB Valuation and Segal actuarial review
2008	5.00%	5.00%	Investigation of Experience Study
2010	5.00%	5.00%	Investigation of Experience Study and Segal actuarial review
2012	4.35%	4.35%	2013 Investigation of Experience Study
2014	3.75%	3.75%	Initial Valuation with OPEB Trust assets
2016	4.50%	4.50%	Initial Valuation reflecting Tier 2, Investigation of Experience Study and Segal actuarial review
2017	4.50%	4.50%	Beginning of annual valuations
2018	6.00%	3.69%	Initial agent Valuation, 2018 Investigation of Experience Study and Cavanaugh Macdonald actuarial review
2019	6.00%	3.69%	ACA Excise Tax and Health Insurer Fee repealed
2020	6.00%	2.30%	2020 Investigation of Experience Study and Cavanaugh Macdonald actuarial review
2021	6.00%	2.30%	There were no changes in this valuation year
2022	6.00%	2.30%	There were no changes in this valuation year