

IN PERSON & VIRTUAL BOARD MEETING

*The Committee meeting will be held prior to the Board of Retirement meeting scheduled prior.



TO VIEW VIA WEB



TO PROVIDE PUBLIC COMMENT

Members of the public may address the Board orally and in writing. To provide Public Comment, please visit the above link and complete the request form.

Attention: If you have any questions, you may email PublicComment@lacera.com.

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION
300 N. LAKE AVENUE, SUITE 650, PASADENA, CA

AGENDA

A REGULAR MEETING OF THE INSURANCE, BENEFITS & LEGISLATIVE

COMMITTEE AND BOARD OF RETIREMENT*

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

300 N. LAKE AVENUE, SUITE 810, PASADENA, CA 91101

8:30 A.M., WEDNESDAY, JUNE 4, 2025

This meeting will be conducted by the Insurance, Benefits and Legislative Committee and Board of Retirement both in person and by teleconference under California Government Code Sections 54953(f).

Any person may view the meeting in person at LACERA's offices or online at <https://LACERA.com/leadership/board-meetings>.

The Committee may take action on any item on the agenda, and agenda items may be taken out of order.

COMMITTEE TRUSTEES:

Les Robbins, Chair
Ronald Okum, Vice Chair
Aleen Langton, Trustee
Wayne Moore, Trustee
Shawn R. Kehoe, Alternate Trustee

- I. CALL TO ORDER
- II. PROCEDURE FOR TELECONFERENCE MEETING ATTENDANCE UNDER AB 2449, California Government Code Section 54953(f)
 - A. Just Cause
 - B. Action on Emergency Circumstance Requests
 - C. Statement of Persons Present at AB 2449 Teleconference Locations

III. APPROVAL OF MINUTES

- A. Approval of the Minutes of the Regular Meeting of May 7, 2025

IV. PUBLIC COMMENT

(Members of the public may address the Committee orally and in writing. To provide Public Comment, you should visit <https://LACERA.com/leadership/board-meetings> and complete the request [form](#).

If you select oral comment, we will contact you via email with information and instructions as to how to access the meeting as a speaker. You will have up to 3 minutes to address the Committee. Oral comment requests will be accepted up to the close of the Public Comment item on the agenda.

If you select written comment, please input your written public comment within the form as soon as possible and up to the close of the meeting. Written comment will be made part of the official record of the meeting. If you would like to remain anonymous at the meeting without stating your name, please leave the name field blank in the request form. If you have any questions, you may email PublicComment@lacera.com.)

V. REPORTS

- A. **Engagement Report for May 2025**

Barry W. Lew, Legislative Affairs Officer
(For Information Only)

- B. **Staff Activities Report for May 2025**

Cassandra Smith, Director, Retiree Healthcare
(For Information Only)

- C. **LACERA Claims Experience**

Michael Szeto, Segal Consulting
(Presentation)

- D. **Federal Legislation**

Stephen Murphy, Segal Consulting
(For Information Only)

VI. ITEMS FOR STAFF REVIEW

(This item summarizes requests and suggestions by individual trustees during the meeting for consideration by staff. These requests and suggestions do not constitute approval or formal action by the Board, which can only be made separately by motion on an agenda item at a future meeting.)

VII. ITEMS FOR FUTURE AGENDAS

(This item provides an opportunity for trustees to identify items to be included on a future agenda as permitted under the Board's Regulations.)

VIII. GOOD OF THE ORDER

(For Information Purposes Only)

IX. ADJOURNMENT

The Board of Retirement has adopted a policy permitting any member of the Board to attend a standing committee meeting open to the public. In the event five or more members of the Board of Retirement (including members appointed to the Committee) are in attendance, the meeting shall constitute a joint meeting of the Committee and the Board of Retirement. Members of the Board of Retirement who are not members of the Committee may attend and participate in a meeting of a Board Committee but may not vote on any matter discussed at the meeting. The only action the Committee may take at the meeting is approval of a recommendation to take further action at a subsequent meeting of the Board.

Any documents subject to public disclosure that relate to an agenda item for an open session of the Committee, that are distributed to members of the Committee less than 72 hours prior to the meeting, will be available for public inspection at the time they are distributed to a majority of the Committee, at LACERA's offices at 300 North Lake Avenue, Suite 820, Pasadena, California during normal business hours from 9:00 a.m. to 5:00 p.m. Monday through Friday and will also be posted on lacera.com at the same time, [Board Meetings | LACERA](#).

Requests for reasonable modification or accommodation of the telephone public access and Public Comments procedures stated in this agenda from individuals with disabilities, consistent with the Americans with Disabilities Act of 1990, may call the Board Offices at (626) 564-6000, Ext. 4401/4402 from 8:30 a.m. to 5:00 p.m. Monday through Friday or email PublicComment@lacera.com, but no later than 48 hours prior to the time the meeting is to commence.

MINUTES OF THE REGULAR MEETING OF THE INSURANCE, BENEFITS &
LEGISLATIVE COMMITTEE AND BOARD OF RETIREMENT*

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

300 N. LAKE AVENUE, SUITE 810, PASADENA, CA 91101

8:31 A.M. – 8:53 A.M., WEDNESDAY, MAY 7, 2025

This meeting was conducted by the Insurance, Benefits & Legislative
Committee both in person and by teleconference under California
Government Code Section 54953(f)

COMMITTEE TRUSTEES

PRESENT: Les Robbins, Chair
Ronald Okum, Vice Chair
Aleen Langton, Trustee
Wayne Moore, Trustee
Shawn R. Kehoe, Alternate Trustee

OTHER BOARD OF RETIREMENT TRUSTEES

Bobbie Fesler, Trustee
JP Harris, Trustee

STAFF, ADVISORS AND PARTICIPANTS

Cassandra Smith, Director, Retiree Healthcare
Luis A. Lugo, Deputy Chief Executive Officer

STAFF, ADVISORS AND PARTICIPANTS (Continued)

JJ Popowich, Assistant Executive Officer

Laura Guglielmo, Assistant Executive Officer

Steven P. Rice, Chief Counsel

Barry W. Lew, Legislative Affairs Officer

Segal Consulting

Stephen Murphy, Sr. Vice President

Michael Szeto, Sr. Actuarial Associate

I. CALL TO ORDER

This meeting was called to order by Chair Robbins at 8:31 a.m.

II. PROCEDURE FOR TELECONFERENCE MEETING ATTENDANCE
UNDER AB 2449, California Government Code Section 54953(f)

A. Just Cause

B. Action on Emergency Circumstance Requests

C. Statement of Persons Present at AB 2449 Teleconference Locations

There were no requests received.

III. APPROVAL OF MINUTES

A. Approval of the Minutes of the Regular Meeting of April 2, 2025

Trustee Okum made a motion, Trustee Robbins seconded, to approve the minutes of the regular meeting of April 2, 2025. The motion passed by the following roll call vote:

Yes: Okum, Langton, Moore, Robbins

No: None

IV. PUBLIC COMMENT

There were no requests from the public to speak.

V. REPORTS

A. **Engagement Report for April 2025**

Barry W. Lew, Legislative Affairs Officer
(For Information Only)

The engagement report was discussed. This item was received and filed.

B. **Staff Activities Report for April 2025**

Cassandra Smith, Director, Retiree Healthcare
(For Information Only)

The staff activities report was discussed. This item was received and filed.

C. **LACERA Claims Experience**

Michael Szeto, Segal Consulting
(Presentation)

The LACERA Claims Experience reports through March 2025 were discussed. This item was received and filed.

D. **Federal Legislation**

Stephen Murphy, Segal Consulting
(For Information Only)

Segal Consulting gave an update on federal legislation. This item was received and filed.

VI. ITEMS FOR STAFF REVIEW

(This item summarizes requests and suggestions by individual trustees during the meeting for consideration by staff. These requests and suggestions do not constitute approval or formal action by the Board, which can only be made separately by motion on an agenda item at a future meeting.)

There was nothing to report.

VII. ITEMS FOR FUTURE AGENDAS

(This item provides an opportunity for trustees to identify items to be included on a future agenda as permitted under the Board's Regulations.)

There was nothing to report.

VIII. GOOD OF THE ORDER

(For Information Purposes Only)

There was nothing to report.

IX. ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at 8:53 a.m.

***The Board of Retirement has adopted a policy permitting any member of the Board to attend a standing committee meeting open to the public. In the event five or more members of the Board of Retirement (including members appointed to the Committee) are in attendance, the meeting shall constitute a joint meeting of the Committee and the Board of Retirement. Members of the Board of Retirement who are not members of the Committee may attend and participate in a meeting of a Board Committee but may not vote on any matter discussed at the meeting. The only action the Committee may take at the meeting is approval of a recommendation to take further action at a subsequent meeting of the Board.**

INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE
ENGAGEMENT REPORT
MAY 2025
FOR INFORMATION ONLY

Assets, Debt, and Wealth in California

The Public Policy Institute of California released a report on household wealth—the value of what you own versus what you owe—in California. Household wealth is the foundation for economic security and mobility, in particular long-term security for retirement. Although Californians have higher wealth than those in other states, they are also burdened with higher costs of living and the uneven distribution of wealth. The following are key findings in the report:

- Household wealth: Estimated median household net worth in California is \$288,000, compared to \$180,000 elsewhere. Median household assets in California are \$494,000, compared to \$311,000 in other states. Household debt is estimated at \$103,000 in California, compared to \$74,000 in other states. About 7 percent of California households have negative net worth with debts outweighing their assets. The distributions also vary widely among some key characteristics:
 - Older households (over 65) have a median net worth of \$614,000 compared to \$54,000 in households under age 35.
 - Households with bachelor's degrees have \$582,000, compared to \$76,000 for those without.
 - US-born households have \$379,000, while immigrant households have \$149,000.
- Substantial variation and uneven distribution: Those at the top of the wealth distribution (80th percentile) have an estimated net worth of \$1.3 million, which is over 100 times higher than those at the bottom (20th percentile), estimated at \$12,000.
- Asset portfolios: Checking and savings accounts, retirement accounts, home equity, and vehicle equity are the most common assets and are larger and more common with age and higher levels of education. About half of households have home equity, which is typically their highest value asset.
- Debt: Credit card debt is the most common type of unsecured debt (compared to tangible assets such as houses or cars). About 4 in 10 households report carrying balances on credit cards. One in six households have educational debt, but student loans are the largest amount of unsecured debt.

The report concludes with examples of how California encourages wealth-building with state and local policies such as first-time home buyer assistance, seeding savings

accounts, increasing financial literacy, expanding access to credit, and reducing unsecured debt. It notes that these programs show promise but require more robust evaluation of their effectiveness in supporting long-term wealth-building. ([Source](#))

Will the Average Retirement Age Keep Rising?

After a century-long decline, older men's workforce participation stabilized in the 1980s and began rising in the 1990s, increasing the average retirement age by about three years. The decline began in the 1880s and was attributed to the pensions that became available for Civil War veterans, which led to higher retirement rates. Continued decreases to workforce participation was due to growth of workers' incomes, mandatory retirement ages, the advent of Social Security benefits in 1940, and the post-war expansion of employer pensions.

The turnaround in workforce participation of men began in the mid-1980s/early-1990s due to the following factors:

- Social Security changes: Increase in the earnings test allowed continued work, increase in Full Retirement Age reduced benefits for those claiming early, and enhanced delayed retirement credit encouraged work up to age 70.
- Pension type: The shift from pensions to 401(k) plans eliminated incentives to retire early. 401(k) participants also worked longer to accumulate a buffer against investment risk prematurely exhausting their balances. Studies show 401(k) participants on average retiring one or two years later than pension participants.
- Education: Better-educated workers have less physically demanding jobs, more employment opportunities, higher incomes, and work longer. Workers with college degrees rose sharply between 1985 and 2015. More education led to more worker participation.
- Improved health and longevity: There is a strong correlation between health and labor force activity. The increase in disability-free life expectancy contributed to increased labor force activity.
- Decline of retiree health insurance: The rise in health care costs and decline in provision of retiree health insurance led to people working longer to continue receiving health coverage before age 65.
- Less physically demanding jobs: Decline of manufacturing jobs and the rise of service sector knowledge-based work has led to longer employment.
- Joint decision-making of spouses: Coordination of retirement timing among couples where the wife is younger has resulted in men retiring at an older age.

However, these drivers have largely run their course. Social Security reforms are complete, pension transitions have stabilized, educational gains have plateaued, and

improvements in healthy life expectancy have stalled. With fewer new incentives emerging, further increases in the average retirement age are unlikely. While current conditions may sustain today's retirement patterns, significant future gains in working longer will likely require new policy or economic shifts. [\(Source\)](#)

Cuts to Federal Employee Pensions

A Republican budget proposal in Congress could significantly reduce federal employees' pension benefits. Spearheaded by Representative James Comer, the plan aims to cut over \$50 billion from the federal deficit by altering how benefits are calculated. Key changes include raising employee contribution rates to 4.4% for all federal and postal workers, regardless of hire date, which would generate an estimated \$30.7 billion. Currently, the contribution rates are 0.8% if hired on or before 2012, 3.1% if hired in 2013, and 4.4% if hired on or after 2014.

The proposal also eliminates the supplemental annuity for those retiring before age 62, saving \$10.1 billion, and changes the benefit calculation from the highest three years of salary to the highest five, saving \$4.75 billion. Additionally, it introduces an option for employees to "serve at will" in exchange for higher take-home pay, projected to save \$4.54 billion.

These changes target the Federal Employees Retirement System (FERS), which, along with Social Security and the Thrift Savings Plan, supports federal retirees. The proposals are part of a broader GOP effort to find \$2 trillion in savings to help extend the 2017 Trump tax cuts and introduce new tax reductions. [\(Source\)](#) [\(Source\)](#) [\(Source\)](#)

Nevada Joins Interstate Auto-IRA Consortium

Nevada has joined Colorado's interstate alliance of state-run auto-IRA programs, expanding the consortium to five states: Colorado, Delaware, Maine, Nevada, and Vermont. This collaboration, known as the Partnership for a Dignified Retirement, now manages nearly \$130 million in assets and aims to reduce costs and expand access to Roth IRAs for private sector workers lacking employer-sponsored retirement plans. Nevada's program, the Nevada Employee Savings Trust, will adopt Colorado SecureSavings' framework. As of March, state auto-IRA programs nationwide held \$1.93 billion in assets.

According to the Center for Retirement Initiatives at Georgetown University, there are 20 states with retirement savings programs for private sector workers who do not have access to retirement savings in their workplace. Seventeen of those states have auto-IRA programs. Besides the aforementioned five states in partnership agreements, Rhode Island has announced its intent to partner with Connecticut on the latter's already established program. [\(Source\)](#) [\(Source\)](#)

**INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE
RETIREE HEALTHCARE BENEFITS PROGRAM
STAFF ACTIVITIES REPORT
MAY 2025
FOR INFORMATION ONLY**

7/1/2025-6/30/2026 Retiree Healthcare Annual Letter Packet and Rate Booklet Mailing

On May 23, 2025, staff completed the Retiree Healthcare Annual Letter packet mass mailing mailed to all members/survivors currently enrolled in a LACERA-administered healthcare plan (60,000). In the packet are the following information:

- Cover Letter
- Benefits Update
- Benefits Guide
- Monthly Premium Rates Booklet (CA), Effective July 1, 2025

The purpose of this annual mailing is to communicate to our members the monthly premium rates and any mandated benefit changes for the applicable healthcare plans.

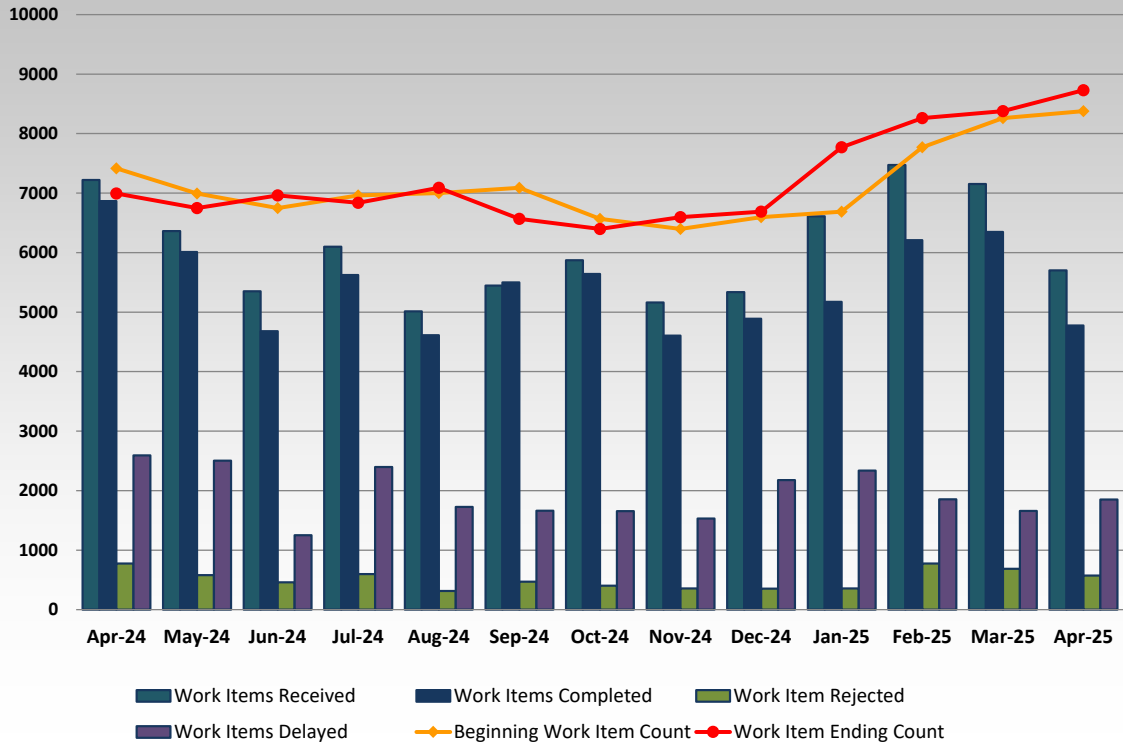
Kudos to RHC staff, Segal, Systems Division and Communications Division for their assistance with this annual project.

Retiree Healthcare Division

Trend Report

APRIL 2024 - APRIL 2025

Updated 5/21/2025

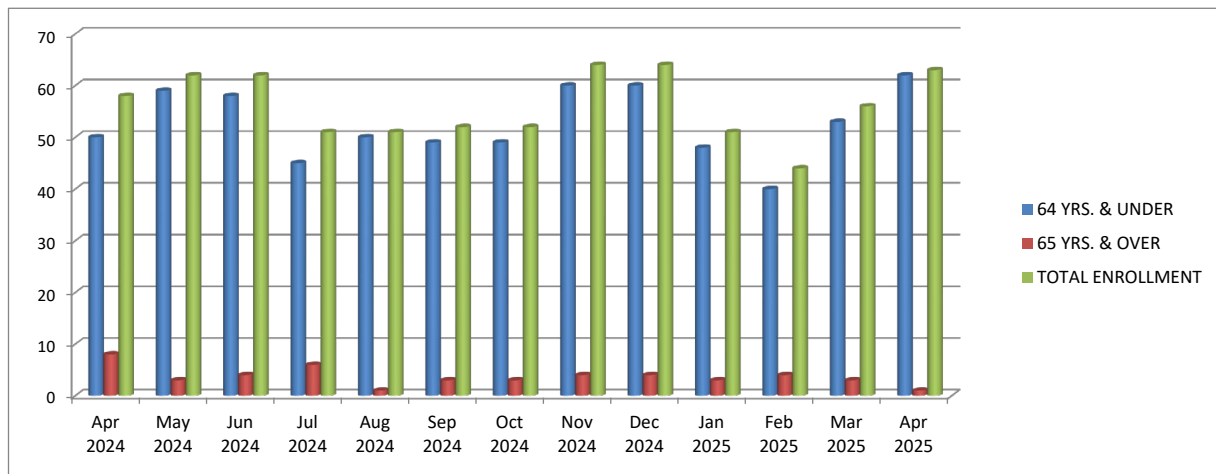


	Beginning Work Item Count	Work Items Received	Work Items Completed	Work Item Rejected	Work Items Delayed	Work Item Ending Count
Apr-24	7417	7221	6865	775	2593	6994
May-24	6994	6363	6012	579	2504	6749
Jun-24	6749	5351	4681	458	1252	6961
Jul-24	6961	6098	5624	596	2396	6839
Aug-24	7000	5013	4611	313	1725	7089
Sep-24	7089	5447	5498	470	1663	6568
Oct-24	6568	5873	5640	403	1654	6398
Nov-24	6398	5163	4606	358	1530	6597
Dec-24	6597	5335	4889	353	2177	6690
Jan-25	6690	6611	5173	358	2337	7770
Feb-25	7770	7474	6208	775	1854	8261
Mar-25	8261	7153	6349	687	1660	8378
Apr-25	8378	5702	4776	574	1849	8730

Retirees Monthly Age Breakdown APRIL 2024 - APRIL 2025

Disability Retirement

MONTH	64 YRS. & UNDER	65 YRS. & OVER	TOTAL ENROLLMENT
Apr 2024	50	8	58
May 2024	59	3	62
Jun 2024	58	4	62
Jul 2024	45	6	51
Aug 2024	50	1	51
Sep 2024	49	3	52
Oct 2024	49	3	52
Nov 2024	60	4	64
Dec 2024	60	4	64
Jan 2025	48	3	51
Feb 2025	40	4	44
Mar 2025	53	3	56
Apr 2025	62	1	63



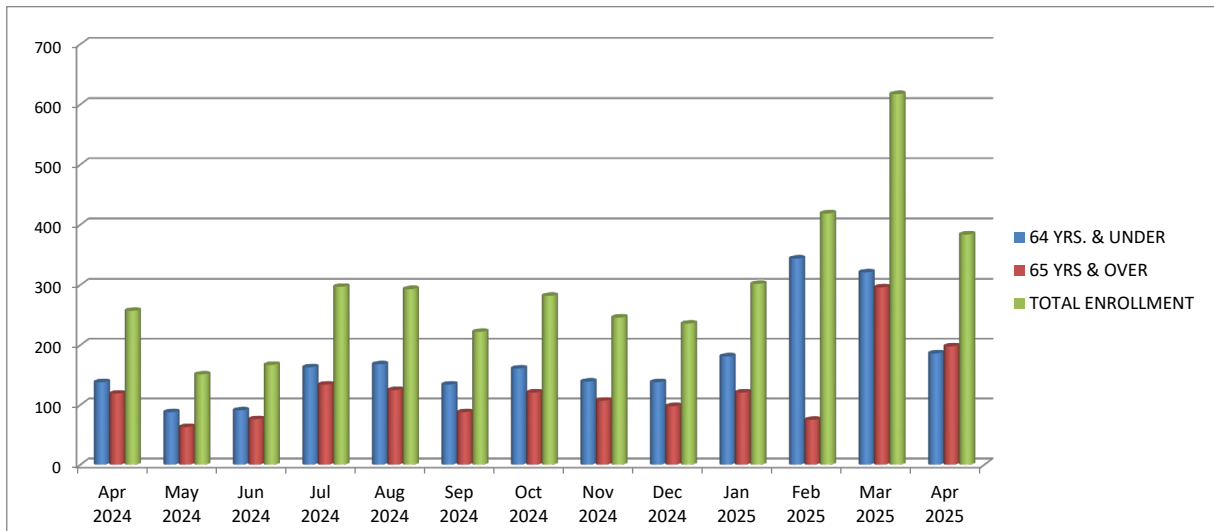
PLEASE NOTE:

- Next Report will include the following dates: May 1, 2024 through May 31, 2025

Retirees Monthly Age Breakdown ARRIL 2024 - APRIL 2025

Service Retirement

MONTH	64 YRS. & UNDER	65 YRS & OVER	TOTAL ENROLLMENT
Apr 2024	138	119	257
May 2024	88	63	151
Jun 2024	91	76	167
Jul 2024	163	134	297
Aug 2024	168	125	293
Sep 2024	134	88	222
Oct 2024	161	121	282
Nov 2024	139	107	246
Dec 2024	138	98	236
Jan 2025	181	121	302
Feb 2025	344	75	419
Mar 2025	321	296	617
Apr 2025	186	198	384



PLEASE NOTE:

- Next Report will include the following dates: May 1, 2024, through May 31, 2025.

Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 5/31/2025

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
ANTHEM BC III				
240	7761	\$1,321,474.80	0	\$0.00
241	130	\$21,610.40	0	\$0.00
242	972	\$173,849.90	0	\$0.00
243	4709	\$1,650,400.06	0	\$0.00
244	13	\$2,158.80	0	\$0.00
245	56	\$10,202.90	0	\$0.00
246	15	\$1,744.10	0	\$0.00
247	171	\$31,623.30	0	\$0.00
248	15	\$4,788.40	0	\$0.00
249	91	\$33,007.00	0	\$0.00
250	17	\$5,733.50	0	\$0.00
Plan Total:	13,950	\$3,256,593.16	0	\$0.00
CIGNA - PREFERRED with RX				
321	35	\$5,438.00	0	\$0.00
322	7	\$1,057.90	0	\$0.00
324	22	\$7,265.50	0	\$0.00
Plan Total:	64	\$13,761.40	0	\$0.00
KAISER SR. ADVANTAGE				
394	22	\$3,983.70	0	\$0.00
397	2	\$329.60	0	\$0.00
398	11	\$4,070.00	0	\$0.00
403	12349	\$2,045,014.68	0	\$0.00
413	1540	\$270,847.10	0	\$0.00
418	6447	\$2,204,491.57	0	\$0.00
419	204	\$31,661.60	0	\$0.00
426	256	\$43,772.30	0	\$0.00
445	2	\$370.00	0	\$0.00
451	35	\$5,927.60	0	\$0.00
455	6	\$1,110.00	0	\$0.00
457	18	\$6,393.40	0	\$0.00
459	2	\$740.00	0	\$0.00
462	85	\$14,357.60	0	\$0.00
465	3	\$555.00	0	\$0.00
466	28	\$9,220.20	0	\$0.00
472	28	\$5,356.20	0	\$0.00
476	4	\$690.50	0	\$0.00
478	14	\$5,057.60	0	\$0.00
479	1	\$144.60	0	\$0.00
482	83	\$14,146.70	0	\$0.00
486	3	\$555.00	0	\$0.00
488	33	\$11,062.80	0	\$0.00
491	1	\$148.50	0	\$0.00
492	1	\$185.00	0	\$0.00
Plan Total:	21,178	\$4,680,191.25	0	\$0.00

Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 5/31/2025

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	279	\$48,389.50	0	\$0.00
613	99	\$35,401.00	0	\$0.00
620	6	\$1,018.60	0	\$0.00
621	1	\$370.00	0	\$0.00
622	15	\$2,402.00	0	\$0.00
623	4	\$1,319.80	0	\$0.00
Plan Total:	404	\$88,900.90	0	\$0.00
UNITED HEALTHCARE GROUP MEDICARE ADV. HMO				
701	2208	\$381,750.20	0	\$0.00
702	403	\$71,383.80	0	\$0.00
703	1424	\$504,686.50	0	\$0.00
704	97	\$17,702.70	0	\$0.00
705	49	\$17,895.30	0	\$0.00
Plan Total:	4,181	\$993,418.50	0	\$0.00
Grand Total:	39,777	\$9,032,865.21	0	\$0.00

Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 5/31/2025

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478	14	\$5,057.60	0	\$0.00
479	1	\$144.60	0	\$0.00
482	83	\$14,146.70	0	\$0.00
486	3	\$555.00	0	\$0.00
488	33	\$11,062.80	0	\$0.00
491	1	\$148.50	0	\$0.00
492	1	\$185.00	0	\$0.00
Plan Total:	21,178	\$4,680,191.25	0	\$0.00

Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 5/31/2025

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613	99	\$35,401.00	0	\$0.00
620	6	\$1,018.60	0	\$0.00
621	1	\$370.00	0	\$0.00
622	15	\$2,402.00	0	\$0.00
623	4	\$1,319.80	0	\$0.00
Plan Total:	404	88,901	0	0
UNITED HEALTHCARE GROUP MEDICARE ADV. HMO				
701	2208	\$381,750.20	0	\$0.00
702	403	\$71,383.80	0	\$0.00
703	1424	\$504,686.50	0	\$0.00
704	97	\$17,702.70	0	\$0.00
705	49	\$17,895.30	0	\$0.00
Plan Total:	4,181	\$993,418.50	0	\$0.00
LOCAL 1014				
804	205	\$49,429.60	0	\$0.00
805	235	\$51,206.60	0	\$0.00
806	753	\$301,582.40	0	\$0.00
807	61	\$12,394.80	0	\$0.00
808	24	\$10,063.80	0	\$0.00
812	260	\$53,649.00	0	\$0.00
813	2	\$370.00	0	\$0.00
Plan Total:	1,540	\$478,696.20	0	\$0.00
Grand Total:	41,317	\$9,511,561.41	0	\$0.00

Medical and Dental Vision Insurance Premiums June 2025

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Medical Plan							
Anthem Blue Cross Prudent Buyer Plan							
201	418	\$467,989.48	\$69,137.23	\$402,203.01	\$471,340.24	\$8,439.88	\$479,780.12
202	213	\$472,591.50	\$42,906.95	\$420,892.15	\$463,799.10	\$0.00	\$463,799.10
203	75	\$186,057.00	\$29,520.98	\$161,497.54	\$191,018.52	\$0.00	\$191,018.52
204	27	\$38,764.17	\$9,935.11	\$27,393.35	\$37,328.46	\$0.00	\$37,328.46
SUBTOTAL	733	\$1,165,402.15	\$151,500.27	\$1,011,986.05	\$1,163,486.32	\$8,439.88	\$1,171,926.20
Anthem Blue Cross I							
211	514	\$759,239.68	\$46,233.63	\$717,437.41	\$763,671.04	(\$5,908.48)	\$757,762.56
212	216	\$575,266.32	\$30,094.83	\$547,834.76	\$577,929.59	(\$2,663.27)	\$575,266.32
213	80	\$254,469.60	\$25,321.29	\$232,289.91	\$257,611.20	\$0.00	\$257,611.20
214	23	\$44,952.35	\$3,518.00	\$41,434.35	\$44,952.35	\$0.00	\$44,952.35
215	2	\$997.94	\$159.67	\$838.27	\$997.94	\$0.00	\$997.94
SUBTOTAL	835	\$1,634,925.89	\$105,327.42	\$1,539,834.70	\$1,645,162.12	(\$8,571.75)	\$1,636,590.37
Anthem Blue Cross II							
221	2,446	\$3,624,852.48	\$179,203.56	\$3,486,803.28	\$3,666,006.84	\$4,436.36	\$3,670,443.20
222	2,059	\$5,536,938.33	\$126,291.92	\$5,317,617.21	\$5,443,909.13	\$0.00	\$5,443,909.13
223	961	\$3,025,360.80	\$127,611.75	\$2,948,014.65	\$3,075,626.40	\$0.00	\$3,075,626.40
224	245	\$480,794.70	\$49,920.75	\$446,509.55	\$496,430.30	(\$1,954.45)	\$494,475.85
SUBTOTAL	5,711	\$12,667,946.31	\$483,027.98	\$12,198,944.69	\$12,681,972.67	\$2,481.91	\$12,684,454.58

Medical and Dental Vision Insurance Premiums

June 2025

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Anthem Blue Cross III							
240	7,805	\$4,698,503.81	\$593,030.09	\$4,148,730.96	\$4,741,761.05	(\$1,604.80)	\$4,740,156.25
241	129	\$250,018.60	\$20,886.20	\$229,132.40	\$250,018.60	\$0.00	\$250,018.60
242	969	\$1,880,909.16	\$115,092.64	\$1,773,509.40	\$1,888,602.04	(\$13,836.76)	\$1,874,765.28
243	4,720	\$5,669,797.12	\$573,439.95	\$5,059,327.87	\$5,632,767.82	(\$5,985.85)	\$5,626,781.97
244	13	\$14,001.00	\$1,787.82	\$12,213.18	\$14,001.00	\$0.00	\$14,001.00
245	57	\$61,389.00	\$5,806.07	\$56,659.93	\$62,466.00	\$2,154.00	\$64,620.00
246	14	\$35,980.50	\$3,646.02	\$29,935.78	\$33,581.80	\$0.00	\$33,581.80
247	175	\$422,171.20	\$20,436.93	\$408,930.37	\$429,367.30	\$0.00	\$429,367.30
248	15	\$25,088.40	\$2,140.87	\$22,947.53	\$25,088.40	\$0.00	\$25,088.40
249	92	\$153,875.52	\$11,373.43	\$142,502.09	\$153,875.52	\$0.00	\$153,875.52
250	17	\$31,865.99	\$2,436.81	\$29,429.18	\$31,865.99	\$0.00	\$31,865.99
SUBTOTAL	14,006	\$13,243,600.30	\$1,350,076.83	\$11,913,318.69	\$13,263,395.52	(\$19,273.41)	\$13,244,122.11
CIGNA Network Model Plan							
301	212	\$403,492.29	\$97,514.40	\$302,189.23	\$399,703.63	\$0.00	\$399,703.63
302	54	\$184,712.94	\$44,252.07	\$140,460.87	\$184,712.94	\$0.00	\$184,712.94
303	6	\$24,234.48	\$5,367.05	\$14,828.35	\$20,195.40	\$0.00	\$20,195.40
304	12	\$30,164.04	\$11,401.31	\$18,762.73	\$30,164.04	\$0.00	\$30,164.04
SUBTOTAL	284	\$642,603.75	\$158,534.83	\$476,241.18	\$634,776.01	\$0.00	\$634,776.01
CIGNA Preferred w/ Rx - Phoenix, AZ							
321	35	\$12,140.10	\$1,429.07	\$10,711.03	\$12,140.10	\$0.00	\$12,140.10
322	7	\$13,111.98	\$749.25	\$12,362.73	\$13,111.98	\$0.00	\$13,111.98
324	22	\$15,085.84	\$2,194.32	\$12,891.52	\$15,085.84	\$0.00	\$15,085.84
SUBTOTAL	64	\$40,337.92	\$4,372.64	\$35,965.28	\$40,337.92	\$0.00	\$40,337.92

Medical and Dental Vision Insurance Premiums June 2025

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser/Senior Advantage							
401	1,600	\$2,178,053.80	\$157,388.40	\$2,069,306.80	\$2,226,695.20	\$4,053.45	\$2,230,748.65
403	12,297	\$3,504,866.40	\$309,365.97	\$3,190,539.03	\$3,499,905.00	(\$9,355.77)	\$3,490,549.23
404	436	\$566,522.43	\$8,608.07	\$559,210.75	\$567,818.82	(\$7,778.34)	\$560,040.48
405	1,474	\$1,997,341.75	\$17,928.78	\$1,979,412.97	\$1,997,341.75	\$4,062.39	\$2,001,404.14
411	1,989	\$5,404,765.80	\$217,212.18	\$5,259,446.32	\$5,476,658.50	\$8,082.90	\$5,484,741.40
413	1,513	\$2,513,100.30	\$114,894.14	\$2,383,576.21	\$2,498,470.35	\$1,625.55	\$2,500,095.90
414	45	\$118,779.30	\$316.74	\$121,102.10	\$121,418.84	\$0.00	\$121,418.84
418	6,383	\$3,590,803.20	\$247,898.42	\$3,317,017.58	\$3,564,916.00	(\$6,198.60)	\$3,558,717.40
419	206	\$326,724.32	\$3,769.89	\$315,100.48	\$318,870.37	\$0.00	\$318,870.37
420	94	\$242,969.32	\$1,240.69	\$241,728.63	\$242,969.32	\$0.00	\$242,969.32
421	9	\$12,160.35	\$972.83	\$11,187.52	\$12,160.35	\$0.00	\$12,160.35
422	283	\$766,027.52	\$2,265.71	\$763,761.81	\$766,027.52	\$0.00	\$766,027.52
426	257	\$420,160.74	\$3,973.60	\$411,301.55	\$415,275.15	\$0.00	\$415,275.15
428	40	\$105,700.80	\$528.50	\$105,172.30	\$105,700.80	\$0.00	\$105,700.80
430	146	\$394,237.96	\$3,510.33	\$390,727.63	\$394,237.96	\$0.00	\$394,237.96
SUBTOTAL	26,772	\$22,142,213.99	\$1,089,874.25	\$21,118,591.68	\$22,208,465.93	(\$5,508.42)	\$22,202,957.51
Kaiser - Colorado							
450	5	\$6,571.75	\$525.74	\$6,046.01	\$6,571.75	\$0.00	\$6,571.75
451	36	\$10,724.40	\$1,412.04	\$9,312.36	\$10,724.40	\$0.00	\$10,724.40
453	8	\$23,265.76	\$2,279.19	\$20,986.57	\$23,265.76	\$0.00	\$23,265.76
455	6	\$9,625.50	\$866.29	\$8,759.21	\$9,625.50	\$0.00	\$9,625.50
457	18	\$10,580.40	\$1,058.04	\$9,522.36	\$10,580.40	\$0.00	\$10,580.40
459	2	\$3,788.30	\$75.77	\$3,712.53	\$3,788.30	\$0.00	\$3,788.30
SUBTOTAL	75	\$64,556.11	\$6,217.07	\$58,339.04	\$64,556.11	\$0.00	\$64,556.11

Medical and Dental Vision Insurance Premiums June 2025

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Georgia							
441	4	\$6,242.08	\$333.60	\$5,908.48	\$6,242.08	\$0.00	\$6,242.08
442	8	\$12,484.16	\$667.20	\$11,816.96	\$12,484.16	\$0.00	\$12,484.16
445	2	\$3,924.74	\$0.00	\$3,924.74	\$3,924.74	\$0.00	\$3,924.74
461	14	\$23,407.80	\$2,649.94	\$17,636.82	\$20,286.76	\$0.00	\$20,286.76
462	84	\$34,837.25	\$4,434.56	\$30,402.69	\$34,837.25	\$0.00	\$34,837.25
463	4	\$12,452.16	\$3,130.71	\$9,321.45	\$12,452.16	\$0.00	\$12,452.16
465	3	\$5,887.11	\$313.98	\$5,573.13	\$5,887.11	\$0.00	\$5,887.11
466	27	\$22,727.60	\$1,607.17	\$20,308.73	\$21,915.90	\$0.00	\$21,915.90
SUBTOTAL	146	\$121,962.90	\$13,137.16	\$104,893.00	\$118,030.16	\$0.00	\$118,030.16
Kaiser - Hawaii							
471	5	\$4,773.20	\$572.78	\$4,200.42	\$4,773.20	\$0.00	\$4,773.20
472	28	\$12,514.32	\$2,484.99	\$11,370.15	\$13,855.14	\$0.00	\$13,855.14
473	1	\$2,147.75	\$670.63	\$1,477.12	\$2,147.75	\$0.00	\$2,147.75
474	4	\$7,605.12	\$0.00	\$9,506.40	\$9,506.40	\$0.00	\$9,506.40
475	3	\$8,543.76	\$0.00	\$8,543.76	\$8,543.76	\$0.00	\$8,543.76
476	4	\$5,574.32	\$1,226.36	\$4,347.96	\$5,574.32	\$0.00	\$5,574.32
478	14	\$12,402.32	\$602.40	\$11,799.92	\$12,402.32	\$0.00	\$12,402.32
479	1	\$2,586.69	\$0.00	\$2,586.69	\$2,586.69	\$0.00	\$2,586.69
SUBTOTAL	60	\$56,147.48	\$5,557.16	\$53,832.42	\$59,389.58	\$0.00	\$59,389.58

Medical and Dental Vision Insurance Premiums June 2025

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Oregon							
481	1	\$1,306.65	\$653.32	\$653.33	\$1,306.65	\$0.00	\$1,306.65
482	84	\$46,069.80	\$6,241.36	\$40,376.89	\$46,618.25	(\$1,645.35)	\$44,972.90
483	5	\$8,178.50	\$1,147.41	\$7,031.09	\$8,178.50	\$0.00	\$8,178.50
484	5	\$13,026.50	\$0.00	\$13,026.50	\$13,026.50	\$0.00	\$13,026.50
486	3	\$5,541.30	\$0.00	\$5,541.30	\$5,541.30	\$0.00	\$5,541.30
488	32	\$35,933.70	\$5,313.82	\$28,442.08	\$33,755.90	\$0.00	\$33,755.90
491	1	\$1,848.38	\$0.00	\$1,848.38	\$1,848.38	\$0.00	\$1,848.38
492	1	\$2,176.15	\$0.00	\$2,176.15	\$2,176.15	\$0.00	\$2,176.15
SUBTOTAL	132	\$114,080.98	\$13,355.91	\$99,095.72	\$112,451.63	(\$1,645.35)	\$110,806.28
SCAN Health Plan							
611	282	\$75,294.00	\$14,952.00	\$61,143.00	\$76,095.00	\$0.00	\$76,095.00
613	99	\$52,074.00	\$10,698.84	\$42,953.16	\$53,652.00	(\$526.00)	\$53,126.00
SUBTOTAL	381	\$127,368.00	\$25,650.84	\$104,096.16	\$129,747.00	(\$526.00)	\$129,221.00
SCAN Health Plan, AZ							
620	6	\$1,602.00	\$389.82	\$1,212.18	\$1,602.00	\$0.00	\$1,602.00
621	1	\$526.00	\$0.00	\$526.00	\$526.00	\$0.00	\$526.00
SUBTOTAL	7	\$2,128.00	\$389.82	\$1,738.18	\$2,128.00	\$0.00	\$2,128.00
SCAN Health Plan, NV							
622	16	\$4,539.00	\$501.96	\$3,770.04	\$4,272.00	\$0.00	\$4,272.00
623	5	\$2,630.00	\$189.36	\$2,440.64	\$2,630.00	\$0.00	\$2,630.00
SUBTOTAL	21	\$7,169.00	\$691.32	\$6,210.68	\$6,902.00	\$0.00	\$6,902.00

Medical and Dental Vision Insurance Premiums June 2025

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
UHC Medicare Adv.							
701	2,205	\$772,165.20	\$85,607.17	\$690,042.56	\$775,649.73	(\$2,439.15)	\$773,210.58
702	398	\$746,670.15	\$41,334.28	\$688,743.20	\$730,077.48	\$0.00	\$730,077.48
703	1,424	\$981,682.50	\$92,145.07	\$895,048.63	\$987,193.70	(\$2,066.70)	\$985,127.00
704	100	\$210,119.00	\$11,136.28	\$196,881.53	\$208,017.81	\$0.00	\$208,017.81
705	49	\$46,376.54	\$1,779.35	\$45,543.65	\$47,323.00	\$0.00	\$47,323.00
706	2	\$858.30	\$51.50	\$806.80	\$858.30	\$0.00	\$858.30
SUBTOTAL	4,178	\$2,757,871.69	\$232,053.65	\$2,517,066.37	\$2,749,120.02	(\$4,505.85)	\$2,744,614.17
United Healthcare							
707	589	\$894,392.10	\$82,207.71	\$831,604.05	\$913,811.76	\$0.00	\$913,811.76
708	506	\$1,403,154.90	\$84,209.91	\$1,305,215.49	\$1,389,425.40	\$0.00	\$1,389,425.40
709	408	\$1,331,671.28	\$94,638.90	\$1,263,079.74	\$1,357,718.64	\$0.00	\$1,357,718.64
SUBTOTAL	1,503	\$3,629,218.28	\$261,056.52	\$3,399,899.28	\$3,660,955.80	\$0.00	\$3,660,955.80

Medical and Dental Vision Insurance Premiums June 2025

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Local 1014 Firefighters							
801	87	\$122,505.57	\$4,759.40	\$111,888.43	\$116,647.83	\$1,408.11	\$118,055.94
802	344	\$873,388.48	\$25,896.96	\$844,952.60	\$870,849.56	\$0.00	\$870,849.56
803	434	\$1,299,786.60	\$45,282.91	\$1,270,676.15	\$1,315,959.06	\$11,979.60	\$1,327,938.66
804	206	\$290,070.66	\$10,279.17	\$281,199.60	\$291,478.77	(\$49,429.60)	\$242,049.17
805	239	\$606,801.88	\$13,913.28	\$595,427.52	\$609,340.80	(\$51,206.60)	\$558,134.20
806	754	\$1,914,345.68	\$40,825.80	\$1,868,442.04	\$1,909,267.84	(\$301,582.40)	\$1,607,685.44
807	63	\$188,678.70	\$3,474.09	\$185,204.61	\$188,678.70	(\$12,394.80)	\$176,283.90
808	24	\$71,877.60	\$1,916.74	\$69,960.86	\$71,877.60	(\$10,063.80)	\$61,813.80
809	15	\$21,121.65	\$2,365.62	\$18,756.03	\$21,121.65	\$0.00	\$21,121.65
810	10	\$25,389.20	\$2,995.92	\$22,393.28	\$25,389.20	\$0.00	\$25,389.20
811	6	\$17,969.40	\$2,755.31	\$18,208.99	\$20,964.30	\$0.00	\$20,964.30
812	260	\$366,108.60	\$21,797.47	\$344,311.13	\$366,108.60	(\$54,353.06)	\$311,755.54
813	2	\$5,077.84	\$0.00	\$5,077.84	\$5,077.84	(\$370.00)	\$4,707.84
SUBTOTAL	2,444	\$5,803,121.86	\$176,262.67	\$5,636,499.08	\$5,812,761.75	(\$466,012.55)	\$5,346,749.20
Kaiser - Washington							
393	7	\$12,870.34	\$2,796.29	\$11,714.46	\$14,510.75	\$0.00	\$14,510.75
394	22	\$9,685.50	\$1,241.50	\$8,884.25	\$10,125.75	\$0.00	\$10,125.75
395	3	\$10,279.47	\$2,289.66	\$7,989.81	\$10,279.47	\$0.00	\$10,279.47
397	2	\$4,056.24	\$0.00	\$4,056.24	\$4,056.24	\$0.00	\$4,056.24
398	11	\$9,597.50	\$907.40	\$8,690.10	\$9,597.50	\$0.00	\$9,597.50
SUBTOTAL	45	\$46,489.05	\$7,234.85	\$41,334.86	\$48,569.71	\$0.00	\$48,569.71
Medical Plan Total	57,397	\$64,267,143.66	\$4,084,321.19	\$60,317,887.06	\$64,402,208.25	(\$495,121.54)	\$63,907,086.71

Medical and Dental Vision Insurance Premiums

June 2025

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
<u>Dental/Vision Plan</u>							
CIGNA Indemnity Dental/Vision							
501	27,117	\$1,467,625.53	\$146,707.40	\$1,339,144.67	\$1,485,852.07	(\$1,514.29)	\$1,484,337.78
502	24,894	\$2,819,151.10	\$208,237.24	\$2,621,990.49	\$2,830,227.73	(\$3,705.16)	\$2,826,522.57
503	10	\$666.30	\$21.33	\$644.97	\$666.30	\$0.00	\$666.30
SUBTOTAL	52,021	\$4,287,442.93	\$354,965.97	\$3,961,780.13	\$4,316,746.10	(\$5,219.45)	\$4,311,526.65
CIGNA Dental HMO/Vision							
901	4,341	\$202,036.36	\$20,788.20	\$183,775.42	\$204,563.62	\$46.52	\$204,610.14
902	3,261	\$311,470.32	\$22,288.26	\$291,087.36	\$313,375.62	(\$190.56)	\$313,185.06
903	4	\$188.44	\$39.57	\$148.87	\$188.44	\$0.00	\$188.44
SUBTOTAL	7,606	\$513,695.12	\$43,116.03	\$475,011.65	\$518,127.68	(\$144.04)	\$517,983.64
Dental/Vision Plan Total	59,627	\$4,801,138.05	\$398,082.00	\$4,436,791.78	\$4,834,873.78	(\$5,363.49)	\$4,829,510.29
GRAND TOTALS	117,024	\$69,068,281.71	\$4,482,403.19	\$64,754,678.84	\$69,237,082.03	(\$500,485.03)	\$68,736,597.00

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
<u>Anthem Blue Cross Prudent Buyer Plan</u>		
\$630.26	201	Retiree Only
\$1,239.88	202	Retiree and Spouse/Domestic Partner
\$1,399.26	203	Retiree, Spouse/Domestic Partner and Children
\$810.01	204	Retiree and Children
\$172.06	205	Survivor Children Only Rates
<u>Anthem Blue Cross Plan I</u>		
\$904.25	211	Retiree Only
\$1,630.31	212	Retiree and Spouse/Domestic Partner
\$1,923.10	213	Retiree, Spouse/Domestic Partner and Children
\$1,196.44	214	Retiree and Children
\$299.58	215	Survivor Children Only Rates
<u>Anthem Blue Cross Plan II</u>		
\$904.25	221	Retiree Only
\$1,630.31	222	Retiree and Spouse/Domestic Partner
\$1,923.10	223	Retiree, Spouse/Domestic Partner and Children
\$1,196.44	224	Retiree and Children
\$299.58	225	Survivor Children Only Rates
<u>Anthem Blue Cross Plan III</u>		
\$365.20	240	Retiree Only with Medicare
\$1,167.61	241	Retiree and Spouse/Domestic Partner - One with Medicare (Non-Medicare has Anthem Blue Cross I)
\$1,167.61	242	Retiree and Spouse/Domestic Partner - One with Medicare (Non-Medicare has Anthem Blue Cross II)
\$726.87	243	Retiree and Spouse/Domestic Partner - Both with Medicare
\$653.93	244	Retiree and Children (Retiree has Medicare; Children have Anthem Blue Cross I)
\$653.93	245	Retiree and Children (Retiree has Medicare; Children have Anthem Blue Cross II)
\$1,456.25	246	Retiree, Spouse/Domestic Partner and Children - One with Medicare (Non-Medicare has Anthem Blue Cross I)
\$1,456.25	247	Retiree, Spouse/Domestic Partner and Children - One with Medicare (Non-Medicare has Anthem Blue Cross II)
\$1,015.45	248	Retiree, Spouse/Domestic Partner and Children - Two with Medicare (Children have Anthem Blue Cross I)
\$1,015.45	249	Retiree, Spouse/Domestic Partner and Children - Two with Medicare (Children have Anthem Blue Cross II)
\$1,138.02	250	Member, Spouse/Domestic Partner, Child (3 with Medicare)

*Benchmark premiums are bolded.

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
<u>CIGNA Network Model Plan</u>		
\$1,143.49	301	Retiree Only
\$2,064.71	302	Retiree and Spouse/Domestic Partner
\$2,438.35	303	Retiree, Spouse/Domestic Partner and Children
\$1,517.57	304	Retiree and Children
\$378.87	305	Survivor Children Only Rates
<u>CIGNA Medicare Select Plus Rx (Available in the Phoenix, AZ area only)</u>		
\$328.00	321	Retiree Only with Medicare
\$1,249.22	322	Retiree and Spouse/Domestic Partner/Domestic Partner - One with Medicare
\$651.00	324	Retiree and Spouse/Domestic Partner -Both with Medicare
\$702.09	325	Retiree and Children
\$1,622.87	327	Retiree, Spouse/Domestic Partner and Children - One with Medicare
\$1,025.09	329	Retiree, Spouse/Domestic Partner and Children - Two with Medicare
<u>Kaiser</u>		
\$774.10	401	Retiree Only ("Basic")
N/A	402	Retiree Only ("Supplement")
\$235.64	403	Retiree Only ("Senior Advantage")
\$894.95	404	Retiree Only ("Excess I")
\$795.39	405	Retiree Only - ("Excess II")
\$1,408.39	406	Retiree Only ("Excess III")
\$1,543.20	411	Retiree and Family (All family members are "Basic")
N/A	412	Retiree and Family (One family member is "Supplement"; others are "Basic")
\$1,004.74	413	Retiree and Family (One family member is "Senior Advantage"; others are "Basic")
\$1,664.05	414	Retiree and Family (One family member is "Excess I"; others are "Basic")
N/A	415	Retiree and Family (Two or more family members are "Supplement")
N/A	416	Retiree and Family (One family member is "Senior Advantage"; others are "Supplement")
N/A	417	Retiree and Family (One family member is "Excess I"; others are "Supplement")
\$466.28	418	Retiree and Family (Two or more family members are "Senior Advantage")
\$1,125.59	419	Retiree and Family (One family member is "Excess I"; others are "Senior Advantage")
\$1,784.90	420	Retiree and Family (Two or more family members are "Excess I")
N/A	421	Survivor Children Only Rates
\$1,564.49	422	Retiree and Family (One family member is "Excess II"; others are "Basic")
\$2,177.49	423	Retiree and Family (One family member is "Excess III"; others are "Basic")

*Benchmark premiums are bolded.

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
<u>Kaiser (continued)</u>		
N/A	424	Retiree and Family (One family member is "Supplement"; others are "Excess II")
N/A	425	Retiree and Family (One family member is "Supplement"; others are "Excess III")
\$1,026.03	426	Retiree and Family (One family member is "Senior Advantage"; others are "Excess II")
\$1,639.03	427	Retiree and Family (One family member is "Senior Advantage"; others are "Excess III")
\$1,685.34	428	Retiree and Family (One family member is "Excess I"; others are "Excess II")
\$2,298.34	429	Retiree and Family One family member is "Excess I"; others are "Excess III")
\$1,585.78	430	Retiree and Family (Two or more family members are "Excess II")
\$2,198.78	431	Retiree and Family (One family member is "Excess II"; others are "Excess III")
\$2,811.78	432	Retiree and Family (Two or more family members are "Excess III")
<u>Kaiser Colorado</u>		
\$793.06	450	Retiree Only ("Basic" under age 65)
\$327.27	451	Retiree Only ("Senior Advantage")
\$1,754.57	453	Retiree and Family (Two family members are "Basic")
\$2,369.25	454	Retiree and Family (Three or more family members are "Basic")
\$1,115.33	455	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic")
\$649.55	457	Retiree and Family (Two family members are "Senior Advantage")
\$1,857.56	458	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$1,437.60	459	Retiree and Family (Two family members are "Senior Advantage"; one or more are "Basic")
<u>Kaiser Georgia</u>		
\$847.24	440	Retiree Only ("Basic" over age 65 with Medicare Part B only)
\$847.24	441	Retiree Only ("Basic over age 65 with Medicare Part A only)
\$847.24	442	Retiree Only ("Basic over age 65 without Medicare Part A or Medicare Part B)
\$361.11	443	Retiree Only ("Basic" over age 65 - Medicare eligible who is classified as having renal failure)
\$1,203.35	444	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with Medicare Part B only)
\$1,203.35	445	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with Medicare Part A only)
\$1,203.35	446	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 without Medicare Part A and B)
\$847.24	461	Retiree Only ("Basic" under age 65)
\$361.11	462	Retiree Only ("Senior Advantage")

*Benchmark premiums are bolded.

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
<u>Kaiser Georgia (continued)</u>		
\$1,689.48	463	Retiree and Family (Two family members are "Basic")
\$2,531.72	464	Retiree and Family (Three or more family members are "Basic")
\$1,203.35	465	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")
\$717.22	466	Retiree and Family (Two family members are "Senior Advantage")
\$2,045.59	467	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$1,559.46	468	Retiree and Family (Two family members are "Senior Advantage"; one is "Basic")
\$1,915.57	469	Retiree and Family (Three or more family members are "Senior Advantage"; one is "Basic")
\$2,045.59	470	Retiree and Family (Three or more family members are "Basic"; one is "Senior Advantage")
<u>Kaiser Hawaii</u>		
\$795.16	471	Retiree Only ("Basic" under age 65)
\$346.45	472	Retiree Only ("Senior Advantage")
\$1,381.42	473	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)
\$1,585.31	474	Retiree and Family (Two family members are "Basic")
\$2,375.47	475	Retiree and Family (Three or more family members are "Basic")
\$1,136.61	476	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")
\$2,171.58	477	Retiree and Family (One family member is "Basic" under age 65; one is over age 65 without Medicare Part A or Medicare Part B)
\$687.90	478	Retiree and Family (Two family members are "Senior Advantage")
\$1,722.87	479	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 without Medicare Part A or Medicare Part B)
<u>Kaiser Oregon</u>		
\$806.67	481	Retiree Only ("Basic" under age 65)
\$465.92	482	Retiree Only ("Senior Advantage")
\$1,205.27	483	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)
\$1,608.34	484	Retiree and Family (Two family members are "Basic")
\$2,410.01	485	Retiree and Family (Three or more family members are "Basic")
\$1,267.59	486	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")
N/A	487	Retiree Only (Medicare Cost "Supplement" program)
\$926.84	488	Retiree and Family (Two family members are "Senior Advantage")
\$1,110.84	489	Retiree Only (Over age 65 with Medicare Part A only)
\$1,205.27	490	Retiree Only (Over age 65 with Medicare Part B only)

*Benchmark premiums are bolded.

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
<u>Kaiser Oregon (continued)</u>		
\$1,571.76	491	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 with Medicare Part A only)
\$1,666.19	492	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 without Medicare Part A or Medicare Part B)
\$2,069.26	493	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$1,728.51	494	Retiree and Family (Two family members are "Senior Advantage"; one is "Basic")
\$2,405.54	495	Retiree and Family (Two family members are over age 65 without Medicare Part A or Medicare Part B)
\$2,216.68	496	Retiree and Family (Two family members are over age 65 with Medicare Part A only)
\$2,216.68	497	Retiree and Family (One family member is "Basic"; one is over age 65 with Medicare Part A only)
\$2,006.94	498	Retiree and Family (One family member is "Basic"; one is over age 65 without Medicare Part A or Medicare Part B)

Kaiser Rate Category Definitions

"Basic" - includes those who are under age 65

Medicare Cost ("Supplement")

- Includes people who have both Part A and Part B of Medicare, who were enrolled in Kaiser's Medicare supplement ("M" coverage) before July 1, 1987, and who chose to stay in that Kaiser arrangement.
- It is not open to new enrollments.
- People who have left it cannot return to it.

"Senior Advantage"

- Includes participants who are age 65 or older and who have assigned both Medicare Part A and Part B to Kaiser.

"Excess I"

- Is for participants who have Medicare Part A only.

"Excess II"

- Is for participants in the Excess Plan who either have Medicare Part B only or are not eligible for Medicare.

"Excess III"

- Is for participants in the Excess Plan who either have Medicare Parts A and B and have not assigned their Medicare benefits to Kaiser or have not provided their Medicare status to LACERA. Premium is above the Anthem Blue Cross I and II Benchmark rate and II Benchmark.

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
<u>SCAN Health Plan</u>		
\$304.00	611	Retiree Only with SCAN
\$603.00	613	Retiree and 1 Dependent - Both with SCAN (Retiree and 1 Dependent = Retiree and Spouse/Domestic Partner OR Retiree and 1 Child. Both Retiree and Dependent must have Medicare.)
<u>United Healthcare Medicare Advantage (UHCMA)</u>		
(For both members and dependents who are enrolled in UHCMA, or a family combination of UHCMA/UHC)		
\$293.62	701	Retiree Only with Secure Horizons
\$1,203.81	702	Retiree and 1 Dependent - One with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic Partner OR Retiree and 1 Child)
\$582.24	703	Retiree and 1 Dependent - Both with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic Partner OR Retiree and 1 Child)
\$1,360.59	704	Retiree and 2 or More Dependents - One with Secure Horizons (Retiree and 2 or More Dependents = Retiree, Spouse/Domestic Partner and 1 or More Children OR Retiree and 2 or More Children)
\$739.02	705	Retiree and 2 or More Dependents - Two with Secure Horizons (Retiree and 2 or More Dependents = Retiree, Spouse/Domestic Partner and 1 or More Children OR Retiree and 2 or More Children)
\$261.24	706	Survivor Children Only Rates
<u>United Healthcare (UHC)</u>		
(For members and dependents under age 65 [no Medicare])		
\$915.18	707	Retiree Only
\$1,671.68	708	Retiree and 1 Dependent
\$1,982.16	709	Retiree and 2 Or More Dependents
<u>Local 1014 Firefighters</u>		
\$914.03	801	Member Under 65
\$1,648.06	802	Member + 1 Under 65
\$1,944.04	803	Member + 2 Under 65
\$914.03	804	Member with Medicare
\$1,648.06	805	Member + 1; 1 Medicare
\$1,648.06	806	Member + 1; 2 Medicare
\$1,944.04	807	Member + 2; 1 Medicare
\$1,944.04	808	Member + 2; 2 Medicare

*Benchmark premiums are bolded.

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
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Local 1014 Firefighters (continued)

\$914.03	809	Surviving Spouse Under 65
\$1,648.06	810	Surviving Spouse + 1; Under 65
\$1,944.04	811	Surviving Spouse + 2 Under 65
\$914.03	812	Surviving Spouse with Medicare
\$1,648.06	813	Surviving Spouse + 1; 1 Medicare
\$1,944.04	814	Spouse + 1; 1 Medicare
\$1,648.06	815	Surviving Spouse + 1; 2 Medicare

CIGNA Indemnity - Dental/Vision

\$46.55	501	Retiree Only
\$99.61	502	Retiree and Dependent(s)
\$57.81	503	Survivor Children Only Rates

CIGNA HMO - Dental/Vision

\$39.02	901	Retiree Only
\$81.07	902	Retiree and Dependent(s)
\$39.56	903	Survivor Children Only Rates

Los Angeles County Employees Retirement Association

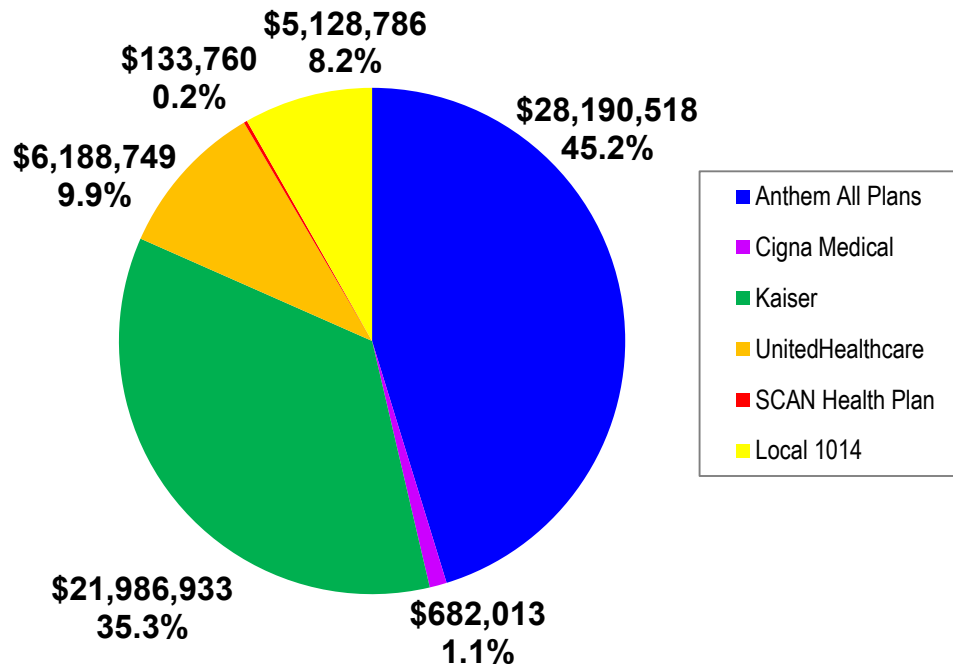
Premium & Enrollment

Coverage Month Ending April 2025

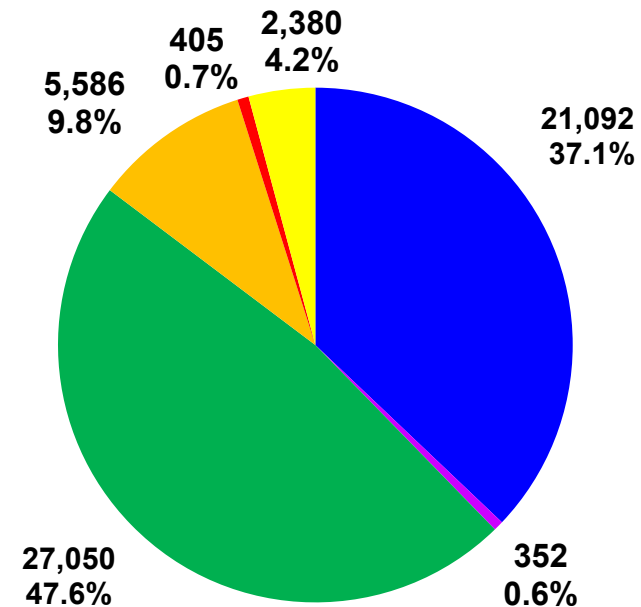
Carrier / Plan	Monthly Premium	Percent of Total	Retirees	Percent of Total
Anthem All Plans	\$28,190,518	45.3%	21,092	37.1%
Cigna Medical	\$682,013	1.1%	352	0.6%
Kaiser	\$21,986,933	35.3%	27,050	47.6%
UnitedHealthcare	\$6,188,749	9.9%	5,586	9.8%
SCAN Health Plan	\$133,760	0.2%	405	0.7%
Local 1014	\$5,128,786	8.2%	2,380	4.2%
Combined Medical	\$62,310,759	100.0%	56,865	100.0%

Cigna Dental & Vision (PPO and HMO)	\$4,754,183	59,082
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Monthly Premium



Retirees

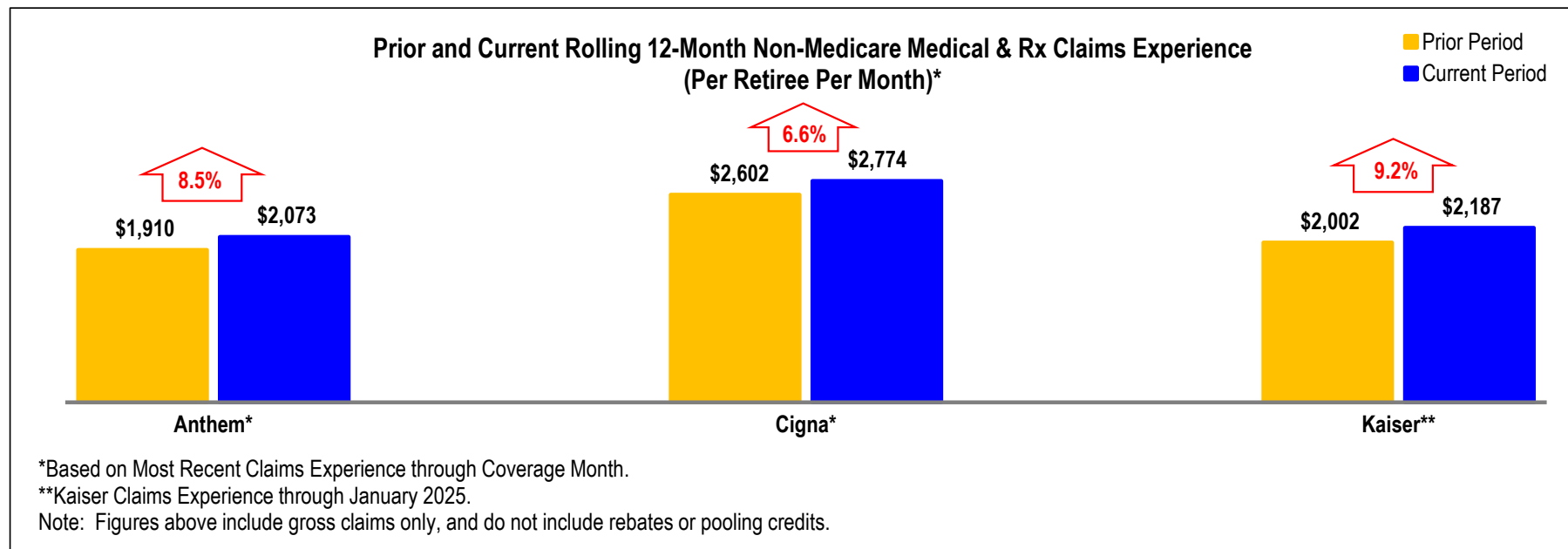
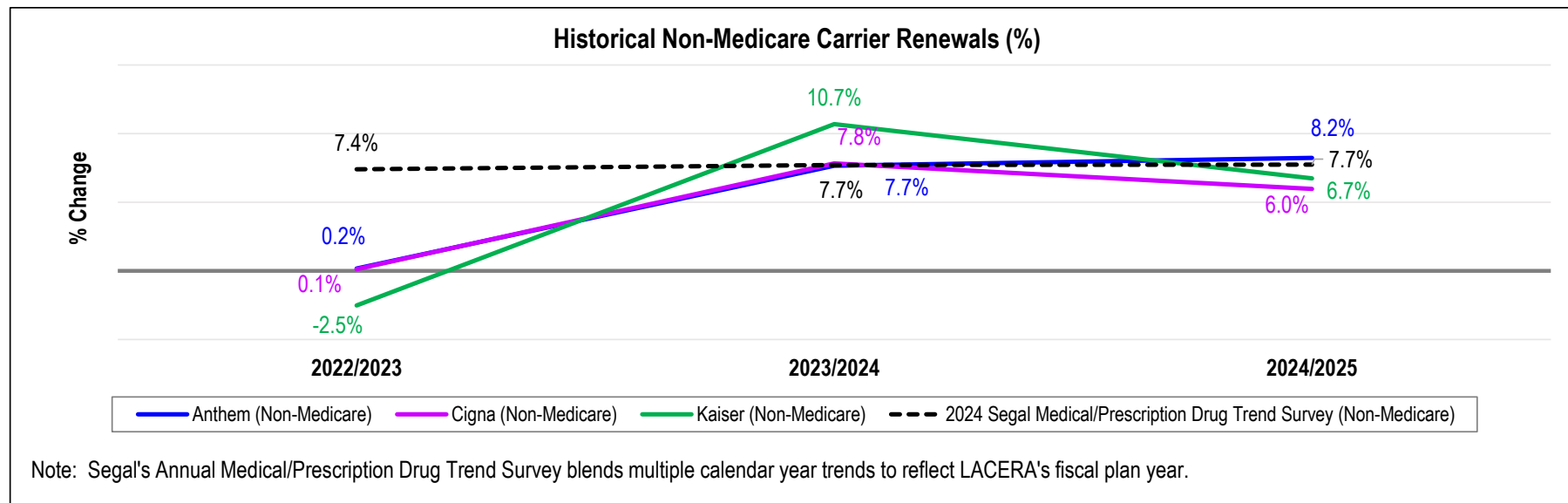


Note: Premiums include LACERA's Administrative Fee of \$8.00 per member, per plan, per month.

Los Angeles County Employees Retirement Association

Claims Experience by Carrier

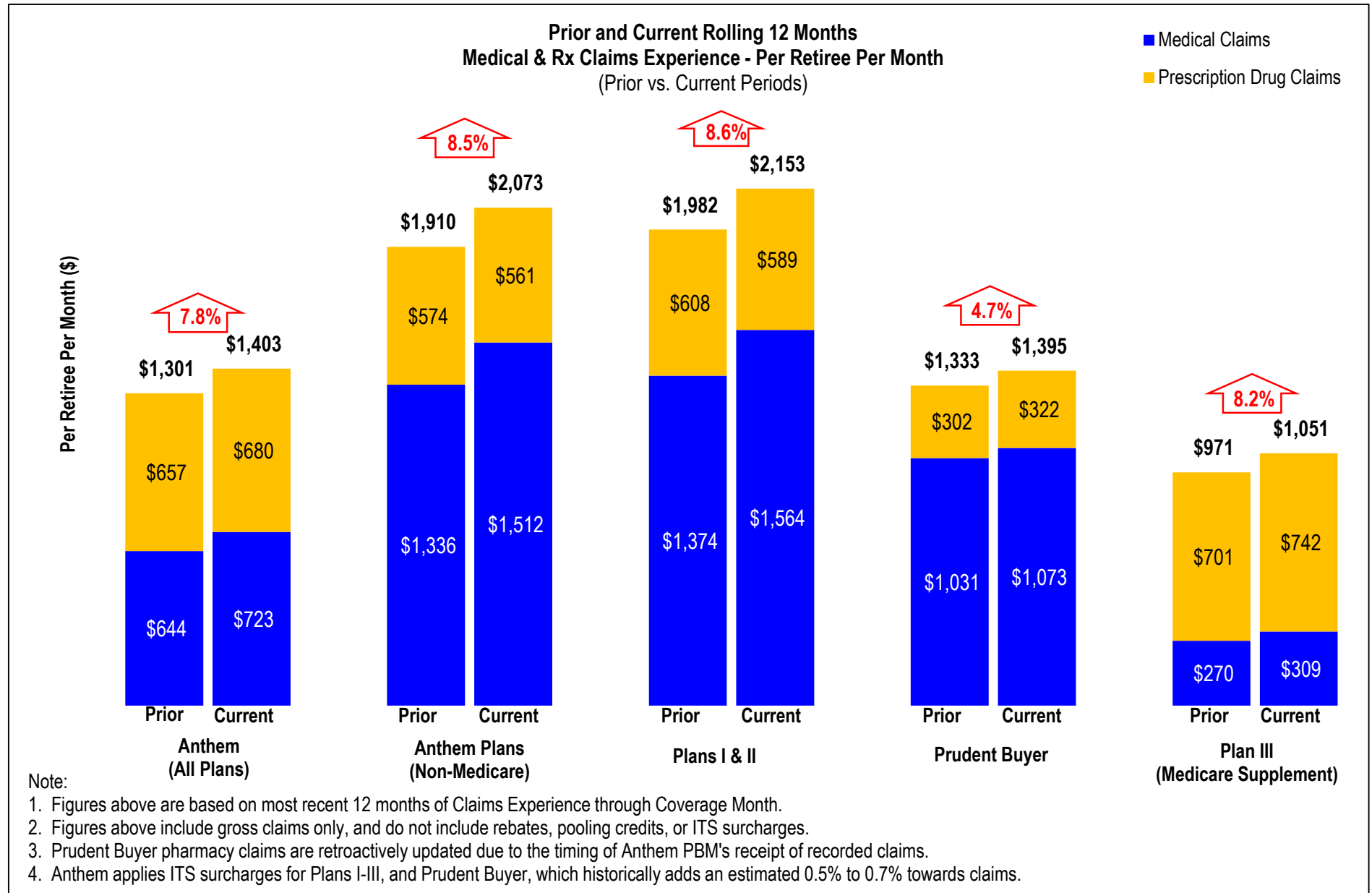
Coverage Month Ending April 2025



Los Angeles County Employees Retirement Association

Anthem Claims Experience By Plan

Coverage Month Ending April 2025



Los Angeles County Employees Retirement Association

Kaiser Utilization

Coverage Month Ending April 2025

- Kaiser insures approximately 26,500 LACERA retirees with the majority enrolled in Medicare Advantage plans.
- Kaiser's Periodic Utilization Report (PUR) monitors utilization patterns of LACERA's non-Medicare population in California.

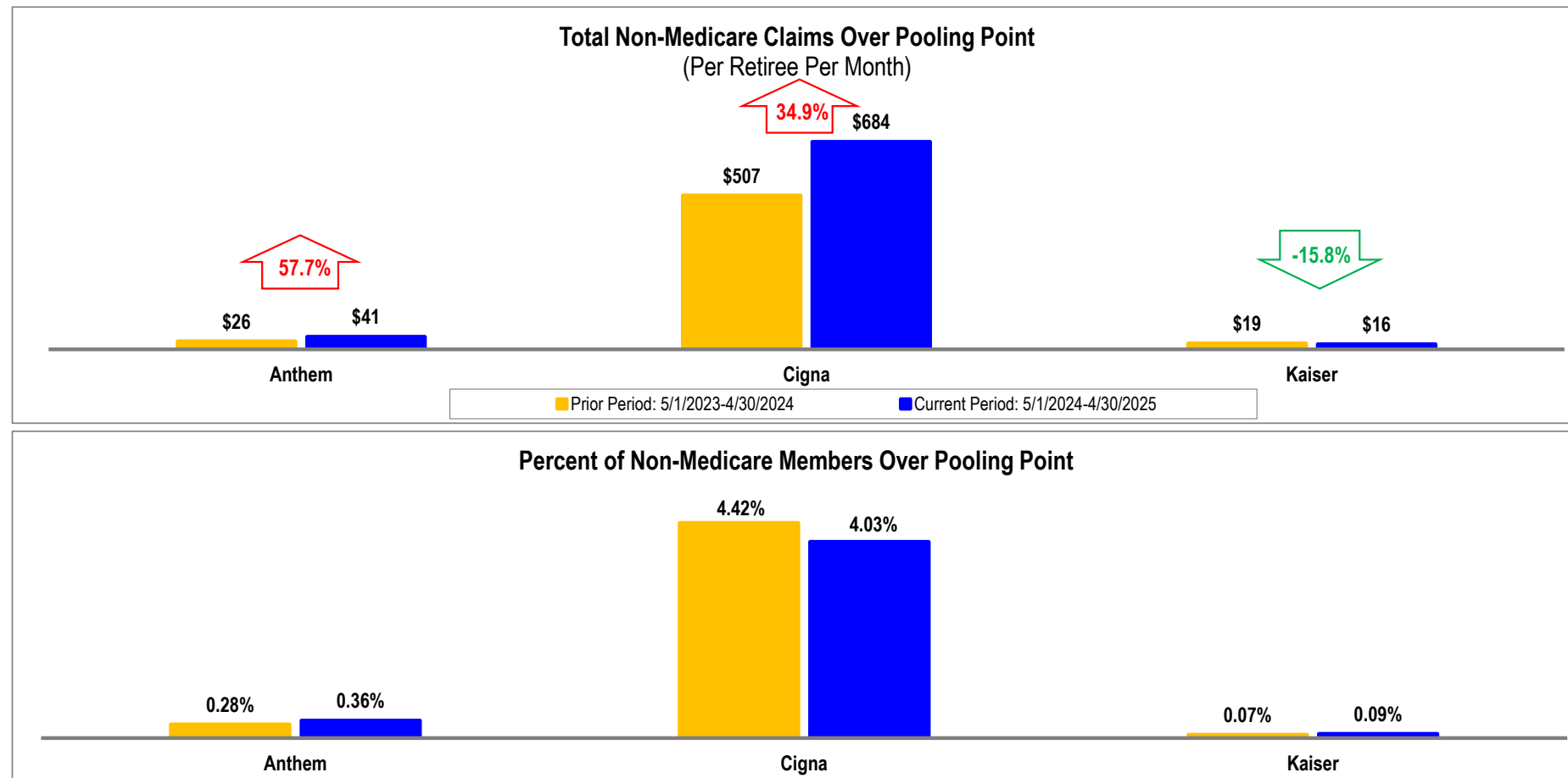
Category	Current Period 2/1/2024 - 1/31/2025	Prior Period 2/1/2023 - 1/31/2024	Change
Average Contract Size	1.82	1.84	-1.09%
Average Members	12,573	12,613	-0.32%
Inpatient Claims Per Member Per Month	\$300.86	\$315.99	-4.79%
Outpatient Claims Per Member Per Month	\$533.87	\$445.73	19.77%
Pharmacy Per Member Per Month	\$165.20	\$149.09	10.81%
Other Per Member Per Month	\$201.66	\$180.25	11.88%
Total Claims Per Member Per Month	\$1,201.59	\$1,091.06	10.13%
Total Paid Claims	\$181,293,893	\$164,694,949	10.08%
Large Claims over \$550,000 Pooling Point ¹			
Number of Claims over Pooling Point	6	5	
Amount over Pooling Point	\$1,324,791	\$1,575,781	-15.93%
% of Total Paid Claims	0.73%	0.96%	
Inpatient Days / 1000	641.4	758.1	-15.39%
Inpatient Admits / 1000	92.0	90.5	1.66%
Outpatient Visits / 1000	16,273.1	15,814.3	2.90%
Pharmacy Scripts Per Member Per Year	14.0	13.1	6.87%

¹ The pooling threshold is \$575,000 for the plan year beginning 7/1/2025 through 6/30/2026 .

Los Angeles County Employees Retirement Association

High Cost Claimants (Anthem, Cigna, & Kaiser)

Coverage Month Ending April 2025



Stop-Loss & Pooling Points Overview:

Plan sponsors mitigate the financial risk associated with individual large claimants through reinsurance. Claims exceeding the specified individual pooling threshold are deducted from the carrier's renewal calculation. The pooling credit is offset by the carrier's pooling expense, which is applied to all policyholders.

Anthem and Cigna figures are based on the most recent Claims Experience through Coverage Month. Kaiser's figures are based on Claims Experience period between February through January.

Pooling Points by Carrier:

1. Anthem's pooling points are \$400,000 for Plans I & II, and \$300,000 for Prudent Buyer.
2. Cigna's pooling point is \$100,000.
3. Kaiser's pooling point is \$550,000.

Los Angeles County Employees Retirement Association
Anthem Lifetime Max Accumulation Status By Plan
Coverage Month Ending April 2025

Prior Calendar Year: December 2023 ¹				Current Calendar Year: December 2024 ²		
Lifetime Claim Amount ³	Plans I & II	Prudent Buyer	Combined	Plans I & II	Prudent Buyer	Combined
\$900K-\$999K	19	1	20	15	1	16
\$800K-\$899K	27	2	29	18	1	19
\$700K-\$799K	29	3	32	27	2	29
\$600-\$699K	53	2	55	61	0	61
\$500-\$599K	82	4	86	78	8	86
Total	210	12	222	199	12	211
Prior Month: March 2025 ⁴				Most Recent Month: April 2025 ⁵		
Lifetime Claim Amount ³	Plans I & II	Prudent Buyer	Combined	Plans I & II	Prudent Buyer	Combined
\$900K-\$999K	7	0	7	9	0	9
\$800K-\$899K	15	1	16	13	1	14
\$700K-\$799K	28	2	30	30	2	32
\$600-\$699K	46	2	48	48	2	50
\$500-\$599K	83	7	90	81	7	88
Total	179	12	191	181	12	193

The number of members reported will fluctuate period to period due to multiple factors including migration from an Anthem plan to another LACERA-administered plan or members passing away.

¹ Based on data provided by Anthem on September 17, 2024.

² Based on data provided by Anthem on January 22, 2025.

³ Members identified by Anthem as terminated were excluded from the counts above.

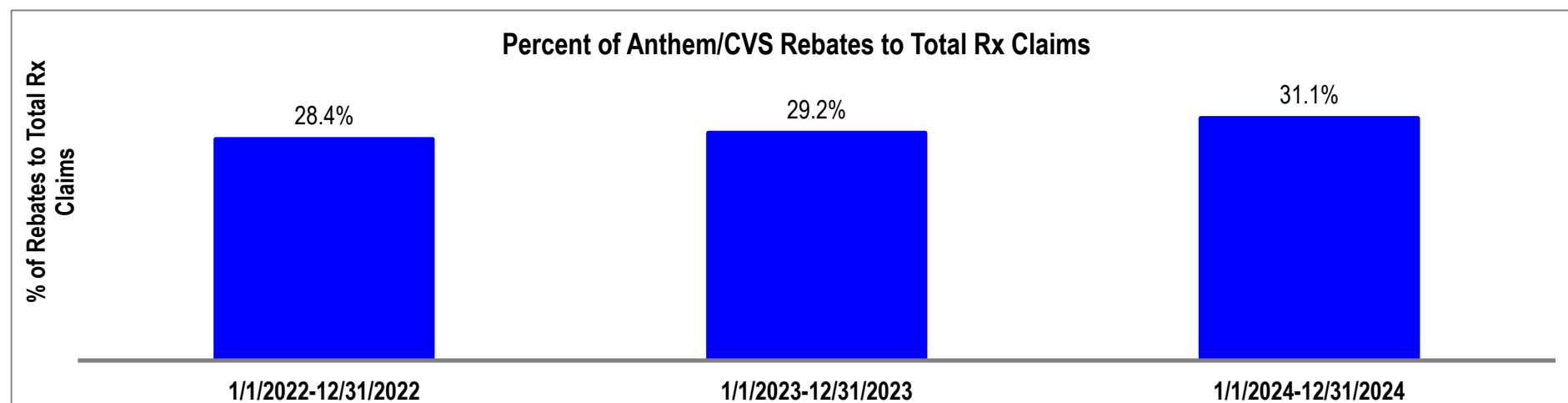
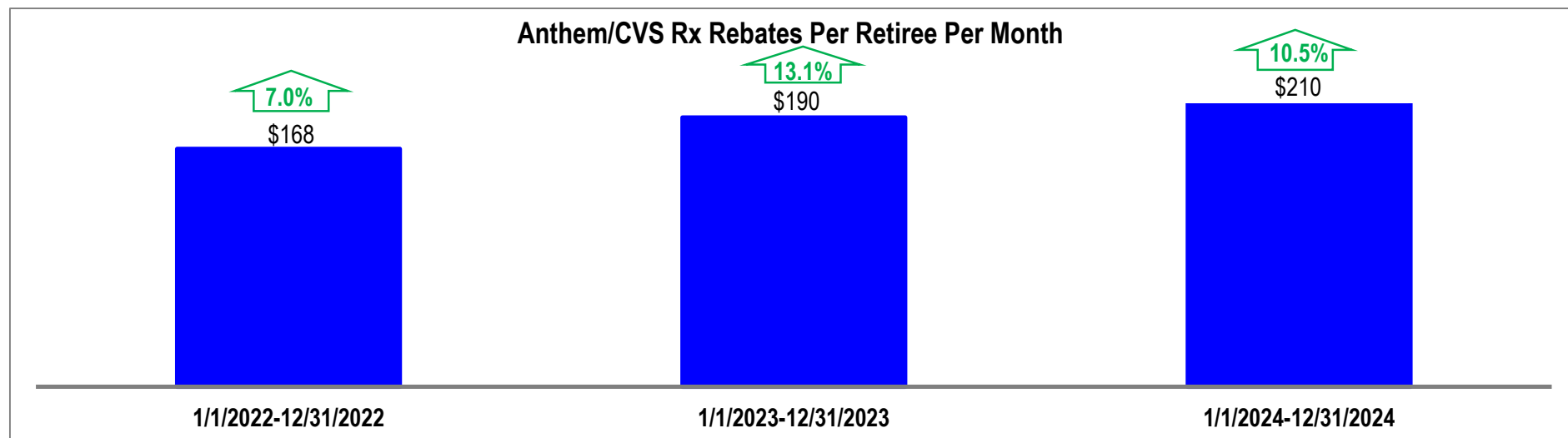
⁴ Based on data provided by Anthem on April 21, 2025.

⁵ Based on data provided by Anthem on May 19, 2025.

Los Angeles County Employees Retirement Association

Prescription Drug Rebates (Anthem)

Coverage Month Ending April 2025



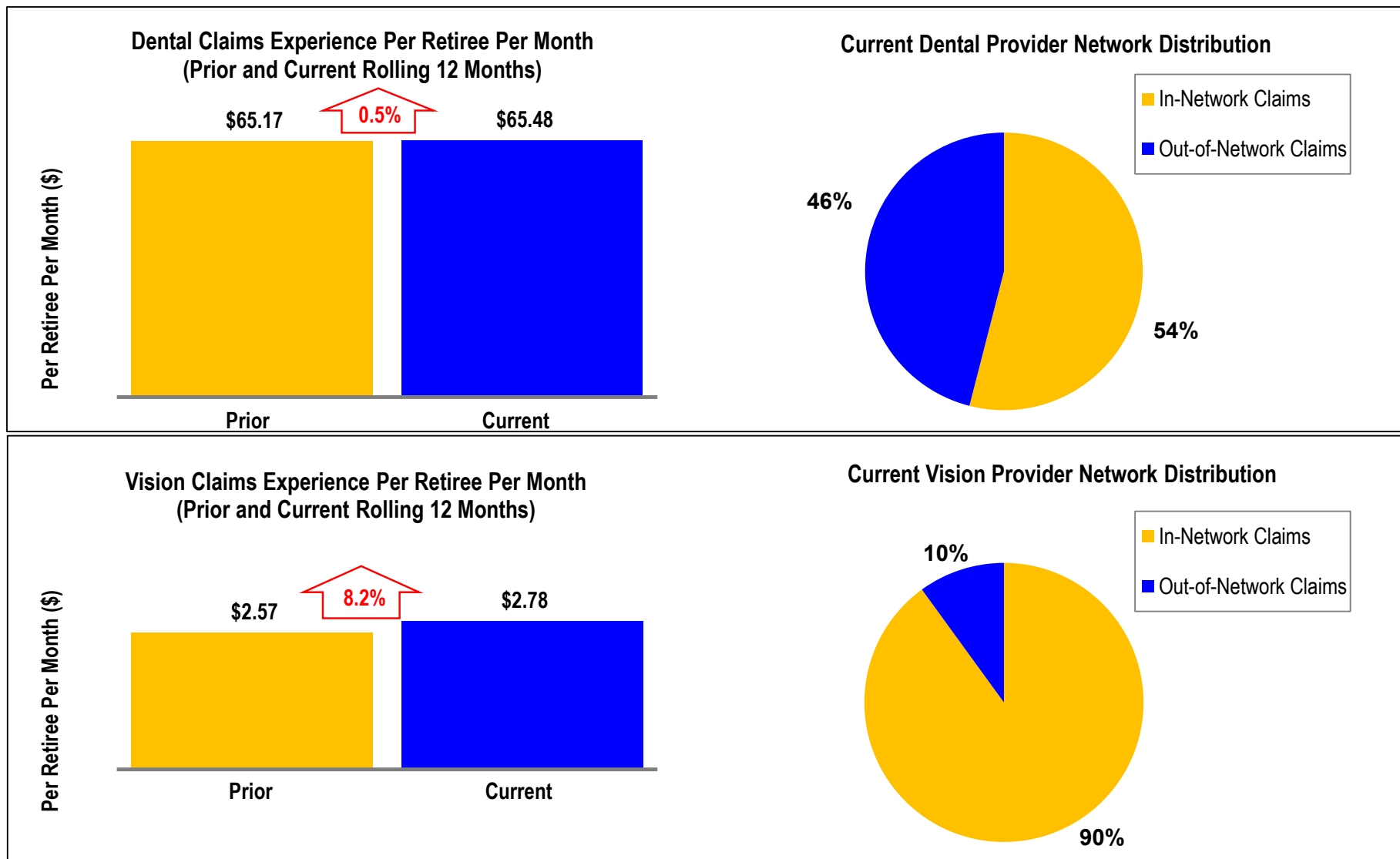
Rebates Overview:

Pharmacy Benefit Managers negotiate volume-based rebates with drug manufacturers of brand medications. Manufacturer rebates are passed on to plan sponsors and are used to offset pharmaceutical claims expenses.

Note:

1. Prescription Claims and Rebates Data were provided by CVS.
2. Anthem Prudent Buyer prescription drugs are provided by CarelonRx and are not included in the charts above.

Los Angeles County Employees Retirement Association
Cigna Dental & Vision Claims Experience
Coverage Month Ending April 2025



Notes:

1. Figures above are based on most recent 12 months of Claims Experience through Coverage Month.
2. Dental Claims Experience reflects passive use of Cigna's PPO Dental Network.

MHPAEA Litigation and Enforcement News

The U.S. Court of Appeals for the DC Circuit has granted a stay (a hold) on the lawsuit filed earlier this year by the ERISA Industry Committee (ERIC) against the Departments of Labor, Health and Human Services (HHS) and the Treasury (collectively the Departments) asking the court to invalidate the 2024 final MHPAEA rules or key provisions.



The Departments have issued a statement regarding their enforcement of the MHPAEA final regulations indicating that they will not enforce certain provisions of the 2024 Final Rule.

Although the litigation is on hold, sponsors of group health plans are reminded that MHPAEA's statutory requirements and the 2013 regulations implementing the law are still in effect. Moreover, continued enforcement is anticipated.

Background

On December 27, 2020, Congress enacted the Consolidated Appropriations Act, 2021 (CAA), which amended MHPAEA, in part, to require group health plans and health insurers that offer both medical/surgical benefits and mental health/substance use disorder (MH/SUD) benefits and impose nonquantitative treatment limitations (NQTLs) on MH/SUD benefits to perform and document comparative analyses of the design and application of their NQTLs. (We discussed these requirements in our [January 14, 2021 insight](#), which includes examples of NQTLs.)

Final MHPAEA rules were published on September 23, 2024, amending the longstanding 2013 final MHPAEA rules and establishing new standards for NQTLs, including implementing the additional documented comparative analyses requirements that were added through the CAA of 2020. We discussed the 2024 final rules in our [September 26, 2024 insight](#). They include staggered applicability dates, with some provisions taking effect for plan years beginning on or after January 1, 2025, and others for plan years beginning on or after January 1, 2026.

ERIC filed suit against the MHPAEA regulations on January 17, 2025. The case asserts that the regulations are unlawful because they violate the Administrative Procedure Act, exceed the Departments' statutory authority under MHPAEA, including the amendments enacted through the CAA, violate the Fifth Amendment's due process clause and are "arbitrary and capricious." The suit also alleges that the 2024 final regulations "threaten the ability of plan sponsors to offer quality, affordable benefits in compliance with the law." (We discussed the litigation in our [January 24, 2025 insight](#).)

MHPAEA litigation on hold

In the federal government's response to the MHPAEA litigation, filed on May 9, 2025, the Department of Justice requested an abeyance (a suspension of the case) and indicated that the Departments intend to reconsider the final regulations, including potentially issuing a proposed rulemaking rescinding or modifying the current regulations. Further, the Departments informed the court of their intent to issue a non-enforcement policy covering the portions of the new regulations that are applicable in 2025 and 2026. The Departments also said they will reexamine the MHPAEA enforcement program more broadly.

On May 12, 2025, the court granted a stay, pausing the litigation while Departments undertake their review. Meanwhile, ERIC can ask the court to resume the litigation at any time during the stay. The Departments must provide the court with status updates every 90 days.

Enforcement considerations

On May 15, 2025, two days after the court agreed to suspend the MHPAEA litigation, the Departments issued a statement formally announcing nonenforcement of the 2024 MHPAEA regulatory provisions that are newly applicable in 2025 and 2026. The Departments say they will not otherwise pursue enforcement actions, based on a failure to comply with those provisions that occurs prior to a final decision in the litigation, plus an additional 18 months.

This means that the Departments will not take enforcement action against plan sponsors with respect to portions of the 2024 Final Rule that are new in relation to the 2013 final rule. However, generally, requirements with respect to quantitative treatment limits (QTLs) and nonquantitative treatment limitations (NQTLs), including those that require a comparative analysis, under the statute and 2013 final regulations, remain in effect.

Action items for plan sponsors

Sponsors of group health plans should monitor upcoming federal MHPAEA guidance and this litigation. Meanwhile, the statutory requirements and the 2013 regulations implementing MHPAEA regulations remain applicable and continued enforcement is anticipated.

Plan sponsors should continue to work with their service providers to maintain a current version of documented comparative analysis. If they have not already done so, sponsors should ensure their plan has been reviewed for compliance with provisions of MHPAEA that are not in flux, such as the quantitative treatment limitation rules and certain NQTL concepts that have remained consistent.

Meanwhile, plan sponsors seeking to prioritize MH/SUD benefits can continue to do so despite debates around MHPAEA compliance considerations. Reviewing MH/SUD benefits and updating them with modern designs, adding benefits that may be valuable and/or removing unnecessary restrictions are positive steps plan sponsors can take.

This page is for informational purposes only and does not constitute legal, tax or investment advice. You are encouraged to discuss the issues raised here with your legal, tax and other advisors before determining how the issues apply to your specific situations.