LIVE VIRTUAL COMMITTEE MEETING



*The Committee meeting will be held following the Committee meeting scheduled prior.



TO VIEW VIA WEB



TO PROVIDE PUBLIC COMMENT

You may submit a request to speak during Public Comment or provide a written comment by emailing PublicComment@lacera.com. If you would like to remain anonymous at the meeting without stating your name, please let us know.

Attention: Public comment requests must be submitted via email to PublicComment@lacera.com.

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

NOTICE OF MEETING AND AGENDA

SPECIAL MEETING OF THE INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE and BOARD OF RETIREMENT*

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

300 NORTH LAKE AVENUE, SUITE 810 PASADENA, CA 91101

WEDNESDAY, OCTOBER 6, 2021 - 8:30 A.M.

This meeting will be conducted by the Insurance, Benefits and Legislative Committee by teleconference under California Government Code Section 54953(e).

Any person may view the meeting online at http://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 MEMBERS:

Les Robbins, Chair Vivian H. Gray, Vice Chair Shawn R. Kehoe Ronald A. Okum Wayne Moore, Alternate

I. APPROVAL OF THE MINUTES

A. Approval of the minutes of the special meeting of September 1, 2021

II. PUBLIC COMMENT

(Written Public Comment – You may submit written public comments by email to PublicComment@lacera.com. Correspondence will be made part of the official record of the meeting. Please submit your written public comments or documentation as soon as possible and up to the close of the meeting.

Verbal Public Comment – You may also request to address the Committee. A request to speak must be submitted via email to PublicComment@lacera.com. We will contact you with information and instructions as to how to access the meeting as a speaker. If you would like to remain anonymous at the meeting without stating your name, please let us know.)

III. ACTION ITEMS

- A. Recommendation as submitted by Barry W. Lew, Legislative Affairs Officer: That the Committee recommend the Board of Retirement authorize a one-year extension of the current contract—
 - 1. With Ackler & Associates and McHugh, Koepke & Associates commencing on January 1, 2022 and ending on December 31, 2022 to provide state legislative advocacy services; and
 - 2. With Williams & Jensen and Doucet Consulting Solutions commencing on February 1, 2022 and ending on January 31, 2023 to provide federal legislative advocacy services.

(Memorandum dated September 23, 2021)

IV. FOR INFORMATION

- A. <u>Engagement Report for September 2021</u> Barry W. Lew, Legislative Affairs Officer
- B. <u>Staff Activities Report for September 2021</u>
 Cassandra Smith, Director, Retiree Healthcare
- C. <u>LACERA Claims Experience</u> Stephen Murphy, Segal Consulting
- D. <u>Federal Legislation</u>
 Stephen Murphy, Segal Consulting

 (for discussion purposes)
- V. ITEMS FOR STAFF REVIEW
- VI. GOOD OF THE ORDER

(For information purposes only)

VII. 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.

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@Jacera.com, but no later than 48 hours prior to the time the meeting is to commence.

MINUTES OF THE MEETING OF THE

INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE and BOARD OF RETIREMENT*

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

GATEWAY PLAZA - 300 N. LAKE AVENUE, SUITE 810, PASADENA, CA 91101

SEPTEMBER 1, 2021, 8:01 A.M. – 8:16 A.M.

This meeting was conducted by the Insurance, Benefits & Legislative Committee by teleconference under the Governor's Executive Order No. N-29-20.

COMMITTEE MEMBERS

PRESENT: Vivian H. Gray, Vice Chair

Shawn R. Kehoe Ronald Okum

Wayne Moore, Alternate

ABSENT: Les Robbins, Chair

ALSO ATTENDING:

BOARD MEMBERS AT LARGE

Alan Bernstein JP Harris Keith Knox

Herman B. Santos

STAFF, ADVISORS, PARTICIPANTS

Cassandra Smith, Director, Retiree Healthcare Santos H. Kreimann, Chief Executive Officer Luis Lugo, Deputy Chief Executive Officer JJ Popowich, Assistant Executive Officer

Steven Rice, Chief Counsel

Barry W. Lew, Legislative Affairs Officer

Stephen Murphy, Vice President

Segal Consulting

Richard Ward, Segal Consulting The meeting was called to order by Vice Chair Gray at 8:01 a.m. Due to the absence of Chair Robbins, the Vice Chair announced that Mr. Moore, as the alternate, would be a voting member of the Committee.

I. APPROVAL OF THE MINUTES

A. Approval of the minutes of the regular meeting of August 12, 2021

Mr. Okum made a motion, Ms. Gray seconded, to approve the minutes of the regular meeting of August 12, 2021. The motion passed unanimously.

- II. PUBLIC COMMENT
- III. FOR INFORMATION
 - A. <u>Engagement Report for August 2021</u> Barry W. Lew, Legislative Affairs Officer

The engagement report was discussed.

B. <u>Staff Activities Report for August 2021</u>
Cassandra Smith, Director, Retiree Healthcare

The staff activities report was discussed.

C. <u>LACERA Claims Experience</u> Stephen Murphy, Segal Consulting

The LACERA Claims Experience reports through July 2021 were discussed.

D. <u>Federal Legislation</u>
Stephen Murphy, Segal Consulting

(for discussion purposes)

Segal Consulting gave an update on federal legislation.

IV. ITEMS FOR STAFF REVIEW

There was nothing to report.

V. GOOD OF THE ORDER

(For information purposes only)

September 1, 2021 Page 3

VI. ADJOURNMENT

The meeting adjourned at 8:16 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.



September 23, 2021

TO: Insurance, Benefits and Legislative Committee

Les Robbins, Chair

Vivian H. Gray, Vice Chair

Shawn R. Kehoe Ronald A. Okum

Wayne Moore, Alternate

FROM: Barry W. Lew &--

Legislative Affairs Officer

FOR: October 6, 2021 Insurance, Benefits and Legislative Committee Meeting

SUBJECT: EXTENSION OF LEGISLATIVE ADVOCACY SERVICES CONTRACT

RECOMMENDATION

That the Insurance, Benefits and Legislative Committee recommend that the Board of Retirement authorize a one-year extension of the current contract—

- With Ackler & Associates and McHugh, Koepke & Associates commencing on January 1, 2022 and ending on December 31, 2022 to provide state legislative advocacy services; and
- 2. With Williams & Jensen and Doucet Consulting Solutions commencing on February 1, 2022 and ending on January 31, 2023 to provide federal legislative advocacy services.

LEGAL AUTHORITY

The Board of Retirement's (BOR) oversight of legislative affairs and legislative advocacy on pension, health, and plan administration issues is within the plenary authority and fiduciary of the BOR under Section 17 of Article XVI of the California Constitution to administer the plan, giving precedence to the interest of members and their beneficiaries. Board oversight concerning these legislative issues is consistent with the BOR's Legislative Policy and Engagement Policy. The BOR has the authority to select such vendors as are needed to assist in the performance of its duties.

BACKGROUND

On November 9, 2017, the BOR approved Ackler & Associates and McHugh Koepke & Associates as LACERA's state legislative advocacy services providers. On December 14, 2017, the BOR approved Williams & Jensen and Doucet Consulting Solutions as LACERA' federal legislative advocacy services providers. The engagements were the result of Requests For Proposals (RFP) to support LACERA's legislative affairs in advocating LACERA's position and interests on state and federal legislation related to pension and retirement-related matters.

Legislative Advocacy Services Insurance, Benefits and Legislative Committee September 23, 2021 Page 2

The contracts for each engagement provided for an initial three-year term with the option to renew for two additional one-year terms by LACERA. The initial term of the contract for Ackler & Associates and McHugh Koepke & Associates was set to terminate on December 31, 2020 and the contract for Williams & Jensen and Doucet Consulting Solutions on January 31, 2021. On December 2, 2020, the BOR approved the first one-year extension to both contracts.

With the impending expiration of the contract for Ackler & Associates and McHugh Koepke & Associates on December 31, 2021 and the contract for Williams & Jensen and Doucet Consulting Solutions on January 31, 2022, the contracts may be approved for a second and final one-year extension. Both contracts provide that the contract term may be terminated by LACERA with 30 days written notice or by the legislative advocates with 90 days written notice. No termination notice has been given by either LACERA or the legislative advocates.

DISCUSSION

Staff has worked with the state and federal legislative advocates on a variety of engagements since contracting their services. The legislative advocates have advised and assisted with arranging meetings with legislators, aides, and committee staff to provide education on LACERA's history and function, foster relationships, and promote visibility. Although the pandemic had adversely affected the ability to travel for in-person meetings during 2020, new public health guidelines and the advent of vaccinations have lessened restrictions in 2021 on in-person meetings. Ackler & Associates was able to arrange in-person meetings on August 17, 2021 between state legislators and LACERA's Chief Executive Officer in Sacramento.

The legislative advocates have also advised and advocated on positions of support and opposition adopted by the BOR. At the federal level, the legislative advocates continue to advocate for the repeal of the Windfall Elimination Provision and Government Pension Offset and to monitor changes to tax laws and regulations that affect retirement security and benefits. More recently, the federal advocates worked with staff on the reintroduction of the repeal of the direct payment requirement for public safety officers, which the BOR supported in 2020 under H.R. 6436, the "Police and Fire Health Care Protection Act of 2020."

At the state level, the legislative advocates have assisted LACERA in monitoring legislation on the County Employee Retirement Law of 1937 (CERL) and has kept staff updated on developments related to the pandemic, the Governor's executive orders, the Brown Act, and the COVID-19 presumption for disability retirement. Additionally, the state advocates can assist with a potential CERL amendment that staff is considering next year related to expanding new executive and managerial positions that are not subject to civil service rules.

Legislative Advocacy Services Insurance, Benefits and Legislative Committee September 23, 2021 Page 3

Staff has maintained an effective working relationship with the legislative advocates and believes that they have provided quality service to LACERA. Earlier this year in January, the legislative advocates provided an informative educational presentation of legislative updates and the legislative process. In light of the fact that 2022 is the second year of the two-year session (2021-22) for the U.S. Congress and the California State Legislature and a new two-year session begins in 2023, an extension to the contracts would coincide with the end of the current two-year session and staff can begin a new RFP process for services going forward in 2023.

IT IS THEREFORE RECOMMENDED THAT THE COMMITTEE recommend that the Board of Retirement authorize a one-year extension of the current contract—

- With Ackler & Associates and McHugh, Koepke & Associates commencing on January 1, 2022 and ending on December 31, 2022 to provide state legislative advocacy services; and
- 2. With Williams & Jensen and Doucet Consulting Solutions commencing on February 1, 2022 and ending on January 31, 2023 to provide federal legislative advocacy services.

Reviewed and Approved:

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Steven P. Rice, Chief Counsel

cc: Santos H. Kreimann
Luis Lugo
JJ Popowich
Laura Guglielmo
Steven P. Rice
John Harrington
Cassandra Smith
Tony Roda, Williams & Jensen
Joe Ackler, Ackler & Associates

INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE ENGAGEMENT REPORT SEPTEMBER 2021 FOR INFORMATION ONLY

Pandemic Haves and Have-Nots: 401(k) Millionaires

Fidelity Investments' recent quarterly analysis of 30 million 401(k) and 403(b) retirement accounts shows an upward trend for the third straight quarter. Amongst the backdrop of pandemic-related unemployment, 38 percent of 401(k) savers increased their savings rate, and 85 percent of account balance growth came from stock market performance.

The average 401(k) balance increased to a high of \$129,300 in second quarter 2021, up 24 percent compared to the same period last year. The average 403(b) balance also increased 24 percent to \$113,300. The average IRA balance increased 21 percent to \$134,900.

A record number of workers with account of at least \$1 million increased to 412,000, up 84 percent from last year. This represents about 2 percent of 401(k) plan participants.

The overall average balance for people who have been in a 401(k) plan for at least 10 years crossed the \$400,000 threshold for the first time at \$402,700 in the second quarter, up from \$83,900 in 2011.

The flip side is that lower-income adults, according to a Pew Research Center report, are among the most likely to say they or someone in their household has lost a job or taken a pay cut as well as take on debt and defer payment of bills. The report also found that 51 percent of adults in the workforce said the pandemic would make it harder to reach their long-term financial goals. This could place more strain on state and federal safety nets as is occurring during the pandemic as people waited for unemployment benefits and child tax credit payments. Less individual retirement savings may also cause people to rely even more on Social Security as a source of retirement income. (Source)

Stark Inequality: Financial Asset Inequality Undermines Retirement Security

The National Institute on Retirement Security released a recent report that examined financial asset ownership by net worth, generation, and race based on data from the Federal Reserve's Survey of Consumer Finances. The report considers three generational cohorts: Millennials, Generation X, and Baby Boomers.

Key findings from the report include—

Inequality in the ownership of financial assets persists and deepens over time. The
top five percent of Baby Boomers by net worth owned a greater percentage of that
generation's assets in 2019 (58 percent) than in 2004 (52 percent).

- Inequality in asset ownership is consistent across generations. In 2019, the top 25
 percent by net worth of Millennials, Generation X, and Baby Boomers owned threequarters of more of their generation's financial assets.
- Financial asset ownership is also highly concentrated among white households. In 2019, white households in all three generations owned three-quarters or more of their generation financial assets.
- Both mean and median financial assets were significantly higher for white households in 2019 than Black or Hispanic households.
- Potential solutions to address this issue include strengthening and expanding Social Security, protecting pensions, increasing access to plans for low-income workers, and reforming retirement tax incentives. (Source) (Source)

Social Security and Medicare Trustees 2021 Report

The Trustees of the Social Security and Medicare trust funds report annually on the current and projected financial status of each program. The 2021 report takes into account the Covid-19 pandemic and the 2020 recession, which were not reflected in last year's report. However, the Trustees do not have a consensus on the pandemic's lasting effect on long-term experience of the programs.

Key findings in the report include—

- The Old-Age and Survivors Insurance (OASI) Trust Fund, which pays retirement and survivor benefits, can pay scheduled benefits until 2033, one year earlier than last year's report. At that time, the fund's reserves will become depleted and continuing tax income will be sufficient to pay 76 percent of benefits.
- The Disability Insurance (DI) Trust Fund, which pays disability benefits, can pay scheduled benefits to 2057, 8 years earlier than last year's report. At that time, the reserves will become depleted and continuing tax income will be sufficient to pya 91 percent of scheduled benefits.
- Although OASI and DI are separate entities, the report combines the two to illustrate the actuarial status of Social Security as a whole. The hypothetical combined funds can pay scheduled benefits until 2034. After that, it can pay 78 percent of scheduled benefits.
- The Hospital Insurance (HI) Trust Fund, or Medicare Part A, which pays for services such as inpatient hospital care, can pay scheduled benefits to 2026. After that, it can pay 91 percent of scheduled benefits.
- The Supplemental Medical Insurance (SMI) Trust Fund has two accounts: Part B, which pays for physician and outpatient hospital care, and Part D, which covers prescription drugs. SMI is adequately financed into the indefinite future because current law provides financing from general revenues and beneficiary premiums each year to meet next year's expected costs. (Source) (Source)

Engagement Report (September 2021) Insurance, Benefits and Legislative Committee Page 3 of 3

North Dakota Pension Reform

The North Dakota Legislature has convened an interim legislative committee to change the retirement plan for state employees from a defined benefit to a defined contribution plan to address an unfunded liability of \$1.5 billion. The Legislature's resolution calls for the current system to end new enrollments in 2024. New employees would enroll in a defined contribution plan while existing employees remain in the current plan. Testimony to the committee by a representative of the National Conference of State Legislatures said that options could range from defined contribution to hybrid plans. The committee plans to engage a consultant to review various options. (Source)

<u>Staff Note:</u> The National Conference of State Legislatures is part of the "Big Seven" group of organizations that represents state and local governments, which includes the National Governors Association and United States Conference of Mayors.

Appeals Courts Upholds City's Right to Raise Retirement Age for Baltimore Police and Firefighters

The Maryland Court of Appeals, which is that state's Supreme Court, upheld changes to Baltimore's pension plan that required first responders to serve an additional five years before being eligible for benefits. The case originated from a 2010 City Council decision to amend eligibility provisions in the plan. Facing a budget shortfall from the 2008 financial crisis, the council increased the required years of service from 20 to 25 to receive benefits.

The court ruled that the city had the right to change the rules for those who had not yet qualified to retire but breached its union contract with those employees who were fully vested. It said that the city ordinance changes were reasonable and necessary prospective changes in light of the financial pressures on the plan. It also affirmed a lower court ruling that provided \$31 million in damages to those who were vested. (Source)

INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE RETIREE HEALTHCARE BENEFITS PROGRAM STAFF ACTIVITIES REPORT SEPTEMBER 2021 FOR INFORMATION ONLY

<u>Centers for Medicare and Medicaid Services (CMS) Medicare Part D Retiree Drug</u> Subsidy (RDS) Reconciliation Plan Year 7/1/2019 – 6/30/2020 - UPDATE

In collaboration with our carriers, staff began the payment subsidy request process for the following RDS applications for plan year 2019/2020. This will provide an update on the subsidy payment requests received thus far:

Plan	Subsidy Amount Received
Anthem Blue Cross	
Cigna Medical	\$271,985
Kaiser Permanente	
Local 1014	\$1,011,048

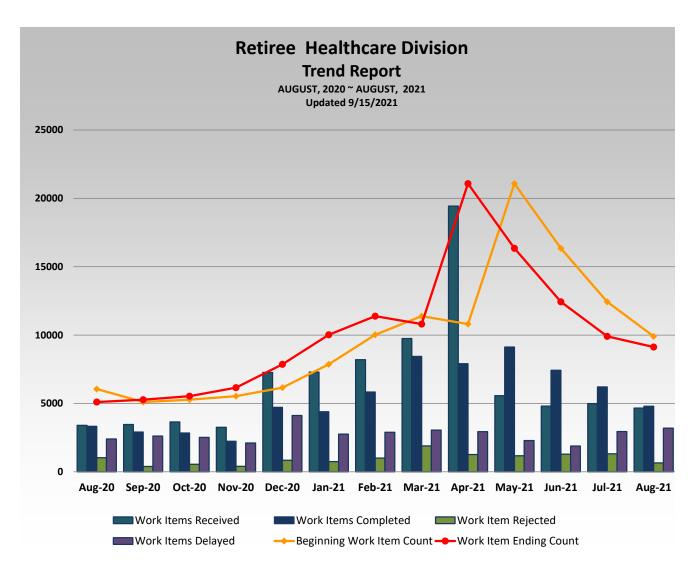
We will continue to keep the Board apprised as we receive additional approvals and subsidy payments.

As a background, the Retiree Drug Subsidy (RDS) program was authorized by Medicare Part D of the Medicare Modernization Act and permits employers and unions with qualifying prescription drug plans to receive retiree drug subsidy payments from the federal government

<u>United Healthcare Performance Review Virtual Meeting</u>

On September 16, 2021, staff and representatives from United Healthcare and Segal participated in a virtual meeting to discuss United Healthcare's Performance Review (January 2020 – December 20200). The following topics were discussed:

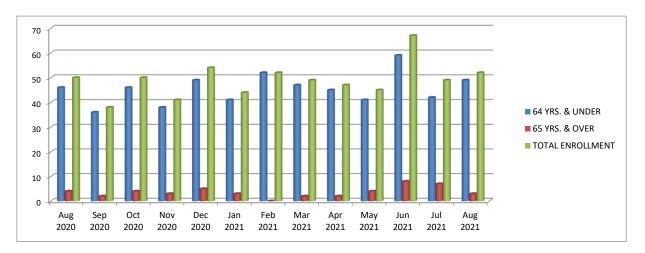
- Membership overview
- Medical utilization overview
- Disease prevalence
- Pharmacy costs and utilization



	Beginning Work Item Count	Work Items Received	Work Items Completed	Work Item Rejected	Work Items Delayed	Work Item Ending Count
Aug-20	6056	3397	3324	1027	2400	5102
Sep-20	5102	3458	2903	386	2612	5271
Oct-20	5271	3648	2837	549	2514	5533
Nov-20	5533	3250	2235	396	2110	6152
Dec-20	6152	7263	4709	842	4117	7864
Jan-21	7864	7289	4388	746	2760	10019
Feb-21	10019	8195	5830	999	2885	11385
Mar-21	11385	9749	8436	1890	3046	10808
Apr-21	10808	19437	7902	1262	2932	21081
May-21	21081	5563	9121	1175	2288	16348
Jun-21	16348	4797	7421	1289	1884	12435
Jul-21	12435	4989	6205	1315	2940	9904
Aug-21	9904	4663	4790	649	3193	9128

Retirees Monthly Age Breakdown AUGUST, 2020 ~ AUGUST, 2021

Disability Retirement								
MONTH	64 YRS. & UNDER	65 YRS. & OVER	TOTAL ENROLLMENT					
Aug 2020	46	4	50					
Sep 2020 Oct 2020	36 46	2 4	38 50					
Nov 2020	38	3	41					
Dec 2020	49	5	54					
Jan 2021	41	3	44					
Feb 2021	52	0	52					
Mar 2021	47	2	49					
Apr 2021	45	2	47					
May 2021	41	4	45					
Jun 2021	59	8	67					
Jul 2021	42	7	49					
Aug 2021	49	3	52					

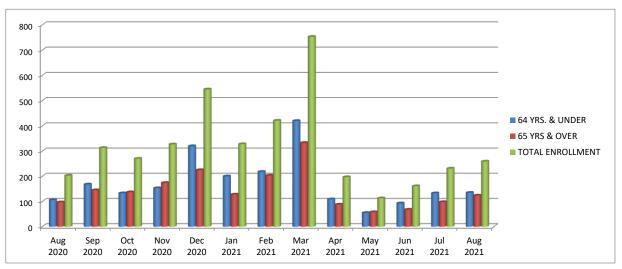


PLEASE NOTE:

• Next Report will include the following dates: September 1, 2021 throught September 30, 2021.

Retirees Monthly Age Breakdown AUGUST, 2020 ~AUGUST, 2021

Service Retirement								
MONTH	64 YRS. & UNDER	65 YRS & OVER	TOTAL ENROLLMENT					
Aug 2020	106	97	203					
Sep 2020	168	145	313					
Oct 2020	133	137	270					
Nov 2020	153	174	327					
Dec 2020	320	225	545					
Jan 2021	200	128	328					
Feb 2021	218	203	421					
Mar 2021	420	333	753					
Apr 2021	109	88	197					
May 2021	55	58	113					
Jun 2021	93	68	161					
Jul 2021	133	98	231					
Aug 2021	135	124	259					



PLEASE NOTE:

• Next Report will include the following dates: September 1, 2021 through September 30, 2021.

		PAY PERIOD	9/30/2021	
Deduction Code	No. of Members	Reimbursement	No. of	Penalty
	NO. OI MICHIBOIS	Amount	Penalties	Amount
ANTHEM BC III				
240	7088	\$972,629.20	2	\$148.30
241	141	\$18,550.60	0	\$0.00
242	849	\$115,923.70	0	\$0.00
243	4232	\$1,197,034.49	2	\$106.20
244	16	\$2,145.10	0	\$0.00
245	55	\$7,930.10	0	\$0.00
246	19	\$2,530.20	0	\$0.00
247	143	\$21,121.20	0	\$0.00
248	12	\$3,128.30	1	\$43.00
249	52	\$15,963.60	0	\$0.00
250	17	\$4,653.60	0	\$0.00
Plan Total:	12,624	\$2,361,610.09	5	\$297.50
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CIONA PREEE	DED:41- DV			
CIGNA - PREFER	1	#0.004.40		40.00
321	28	\$3,801.10	0	\$0.00
322	5	\$651.40	0	\$0.00
324	20	\$5,419.60	0	\$0.00
327	3	\$401.90	0	\$0.00
329	1	\$226.70	0	\$0.00
Plan Total:	57	\$10,500.70	0	\$0.00
KAISER SR. ADV	ANTAGE			
394	13	\$2,588.70	0	\$0.00
397	3	\$424.70	0	\$0.00
398	5	\$1,460.30	0	\$0.00
403	11418	\$1,535,929.93	6	\$111.50
413	1611	\$230,867.60	0	\$0.00
418	5954	\$1,655,721.10	0	\$0.00
419	260	\$30,293.00	0	\$0.00
426	234	\$33,108.40	0	\$0.00
427	48	\$6,207.40	0	\$0.00
445	3	(\$136.50)	0	\$0.00
446	2	\$276.00	0	\$0.00
451	40	\$5,569.70	0	\$0.00
455	4	\$590.10	0	\$0.00
457	9	\$2,267.30	0	\$0.00
458	2	\$297.00	0	\$0.00
462	74	\$11,140.00	0	\$0.00
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465	8		0	
466	8	\$1,427.40 \$7,888.20		\$0.00 \$0.00
		\$1,427.40	0	\$0.00
466	8 29	\$1,427.40 \$7,888.20	0	\$0.00 \$0.00
466 472	8 29 32	\$1,427.40 \$7,888.20 \$4,316.00	0 0 0	\$0.00 \$0.00 \$0.00
466 472 476	8 29 32 4	\$1,427.40 \$7,888.20 \$4,316.00 \$244.50 \$5,363.80	0 0 0	\$0.00 \$0.00 \$0.00 \$0.00
466 472 476 478	8 29 32 4 18	\$1,427.40 \$7,888.20 \$4,316.00 \$244.50 \$5,363.80 \$144.60	0 0 0 0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
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466 472 476 478 479 482 486	8 29 32 4 18 1 77	\$1,427.40 \$7,888.20 \$4,316.00 \$244.50 \$5,363.80 \$144.60 \$10,553.50	0 0 0 0 0 0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

MEDICARE NO LOCAL 1014 093021.xls

Deduction Code	No. of Members	Reimbursement	No. of	Penalty					
		Amount	Penalties	Amount					
SCAN									
611	317	\$42,563.80	0	\$0.00					
613	88	\$24,332.80	0	\$0.00					
Plan Total:	405	\$66,896.60	0	\$0.00					
UNITED HEALTH	CARE GROUP ME	DICARE ADV. HMC)						
701	1831	\$257,071.30	1	\$36.50					
702	390	\$53,849.20	0	\$0.00					
703	1203	\$343,898.80	0	\$0.00					
704	91	\$13,880.20	0	\$0.00					
705	37	\$10,558.40	0	\$0.00					
Plan Total:	3,552	\$679,257.90	1	\$36.50					
Grand Total:	36,535	\$6,677,193.82	12	\$445.50					

MEDICARE 093021.xls

		PAY PERIOD	9/30/2021	
Deduction Code	No. of	Reimbursement	No. of	Penalty
Members		Amount	Penalties	Amount
ANTHEM BC III				
240	7088	\$972,629.20	2	\$148.30
241	141	\$18,550.60	0	\$0.00
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244	16	\$2,145.10	0	\$0.00
245	55	\$7,930.10	0	\$0.00
246	19	\$2,530.20	0	\$0.00
247	143	\$21,121.20	0	\$0.00
248	12	\$3,128.30	1	\$43.00
249	52	\$15,963.60	0	\$0.00
250	17	\$4,653.60	0	\$0.00
Plan Total:	12,624	\$2,361,610.09	5	\$297.50
i iaii iotai.	12,024	\$2,361,610.09	<u> </u>	\$297.50
CICNA PREEER	DED with DV			
CIGNA - PREFER 321		¢2 004 40		\$0.00
	28	\$3,801.10 \$651.40	0	\$0.00
322	5	, , , , , , , , , , , , , , , , , , ,	0 0	\$0.00
324	20 3	\$5,419.60		\$0.00
327	<u> </u>	\$401.90	0	\$0.00 \$0.00
329 Plan Total:		\$226.70	0 0	
Piaii Iolai.	57	\$10,500.70	U	\$0.00
1/410ED 0D 4DV	ANTA 05			
KAISER SR. ADV		40 500 70		#0.00
394	13	\$2,588.70	0	\$0.00
397	<u>3</u> 5	\$424.70	0	\$0.00
398		\$1,460.30	0	\$0.00
403 413	11418 1611	\$1,535,929.93	<u>6</u> 0	\$111.50
		\$230,867.60		\$0.00
418	5954	\$1,655,721.10	0	\$0.00
419	260	\$30,293.00	0	\$0.00
426 427	234 48	\$33,108.40	0	\$0.00 \$0.00
445	3	\$6,207.40 (\$136.50)	0	\$0.00
446	2	\$276.00	0	\$0.00
451	40	\$5,569.70	0	\$0.00
455	4	\$590.10	0	\$0.00
457	9	\$2,267.30	0	\$0.00
458	2	\$297.00	0	\$0.00
462	74	\$11,140.00	0	\$0.00
465	8	\$1,427.40	0	\$0.00
466	29	\$7,888.20	0	\$0.00
472	32	\$4,316.00	0	\$0.00
476	4	\$244.50	0	\$0.00
478	18	\$5,363.80	0	\$0.00
479	1	\$144.60	0	\$0.00
482	77	\$10,553.50	0	\$0.00
486	3	\$427.10	0	\$0.00
488	43	\$12,078.20	0	\$0.00
491	2	(\$119.50)	0	\$0.00
Plan Total:	19,897	\$3,558,928.53	6	\$111.50

MEDICARE 093021.xls

	PATPERIOD	9/30/2021	
No. of	Reimbursement	No. of	Penalty
wembers	Amount	Penaities	Amount
317	\$42,563.80	0	\$0.00
88	\$24,332.80	0	\$0.00
405	\$66,896.60	0	\$0.00
		_	
CARE GROUP N		0	
1831	\$257,071.30	1	\$36.50
390	\$53,849.20	0	\$0.00
1203	\$343,898.80	0	\$0.00
91	\$13,880.20	0	\$0.00
37	\$10,558.40	0	\$0.00
3,552	\$679,257.90	1	\$36.50
183	\$33,438.30	0	\$0.00
189	\$31,274.10	0	\$0.00
651	\$215,915.10	0	\$0.00
53	\$9,741.60	0	\$0.00
15	\$5,227.20	0	\$0.00
243	\$39,887.10	0	\$0.00
1	\$148.50	0	\$0.00
1,335	\$335,631.90	0	\$0.00
37,870	\$7,012,825.72	12	\$445.50
	Members 317 88 405 CARE GROUP N 1831 390 1203 91 37 3,552 183 189 651 53 15 243 1 1,335	No. of Members Reimbursement Amount 317 \$42,563.80 88 \$24,332.80 405 \$66,896.60 CARE GROUP MEDICARE ADV. HM 1831 \$257,071.30 390 \$53,849.20 1203 \$343,898.80 91 \$13,880.20 37 \$10,558.40 3,552 \$679,257.90 183 \$33,438.30 189 \$31,274.10 651 \$215,915.10 53 \$9,741.60 15 \$5,227.20 243 \$39,887.10 1 \$148.50 1,335 \$335,631.90	No. of Members Reimbursement Amount No. of Penalties 317 \$42,563.80 0 88 \$24,332.80 0 405 \$66,896.60 0 CARE GROUP MEDICARE ADV. HMO 1831 \$257,071.30 1 390 \$53,849.20 0 0 1203 \$343,898.80 0 0 91 \$13,880.20 0 0 37 \$10,558.40 0 0 3,552 \$679,257.90 1 183 \$33,438.30 0 0 189 \$31,274.10 0 0 651 \$215,915.10 0 0 53 \$9,741.60 0 0 15 \$5,227.20 0 0 243 \$339,887.10 0 0 1,335 \$335,631.90 0

Carrier Codes	Membe Count		Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Medical Plan	Count	Amount	Amount	Amount	iotai	Adjustifients	i Otal Palu
Anthem Blue Cross Pru	ident Buy	er Plan					
201	516	\$460,079.47	\$71,422.44	\$412,508.31	\$483,930.75	(\$2,449.21)	\$481,481.54
202	274	\$484,413.75	\$45,177.12	\$372,336.05	\$417,513.17	(\$1,974.83)	\$415,538.34
203	73	\$144,988.20	\$32,563.56	\$106,277.37	\$138,840.93	\$0.00	\$138,840.93
204	26	\$29,500.38	\$10,098.17	\$19,402.21	\$29,500.38	\$0.00	\$29,500.38
SUBTOTAL	889	\$1,118,981.80	\$159,261.29	\$910,523.94	\$1,069,785.23	(\$4,424.04)	\$1,065,361.19
Anthem Blue Cross I							
211	631	\$813,696.21	\$47,692.29	\$744,282.57	\$791,974.86	(\$3,783.31)	\$788,191.55
212	238	\$548,519.34	\$33,521.75	\$508,045.80	\$541,567.55	\$0.00	\$541,567.55
213	63	\$170,544.78	\$21,818.90	\$154,140.00	\$175,958.90	\$0.00	\$175,958.90
214	19	\$32,006.07	\$3,807.02	\$28,199.05	\$32,006.07	\$0.00	\$32,006.07
215	2	\$861.78	\$34.48	\$827.30	\$861.78	\$0.00	\$861.78
SUBTOTAL	953	\$1,565,628.18	\$106,874.44	\$1,435,494.72	\$1,542,369.16	(\$3,783.31)	\$1,538,585.85
Anthem Blue Cross II							
221	2,237	\$2,867,674.28	\$155,990.16	\$2,703,712.04	\$2,859,702.20	(\$21,072.81)	\$2,838,629.39
222	2,008	\$4,636,021.20	\$117,093.69	\$4,463,646.24	\$4,580,739.93	(\$2,295.06)	\$4,578,444.87
223	851	\$2,319,950.42	\$99,461.11	\$2,221,388.82	\$2,320,849.93	\$0.00	\$2,320,849.93
224	187	\$321,745.23	\$28,634.51	\$272,994.02	\$301,628.53	\$0.00	\$301,628.53
SUBTOTAL	5,283	\$10,145,391.13	\$401,179.47	\$9,661,741.12	\$10,062,920.59	(\$23,367.87)	\$10,039,552.72

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Anthem Blue Cross	III						
240	7,114	\$3,695,849.60	\$520,743.52	\$3,217,002.66	\$3,737,746.18	(\$3,832.96)	\$3,733,913.22
241	140	\$235,383.46	\$20,587.73	\$209,822.84	\$230,410.57	(\$1,657.63)	\$228,752.94
242	838	\$1,425,561.80	\$81,844.72	\$1,251,322.25	\$1,333,166.97	(\$1,657.63)	\$1,331,509.34
243	4,247	\$4,392,266.30	\$494,152.65	\$3,931,175.80	\$4,425,328.45	(\$21,292.97)	\$4,404,035.48
244	16	\$14,860.16	\$2,489.07	\$12,371.09	\$14,860.16	\$0.00	\$14,860.16
245	55	\$52,010.56	\$5,999.76	\$48,770.26	\$54,770.02	\$0.00	\$54,770.02
246	19	\$39,276.42	\$3,348.83	\$35,927.59	\$39,276.42	\$0.00	\$39,276.42
247	144	\$301,808.28	\$17,901.77	\$285,973.69	\$303,875.46	\$0.00	\$303,875.46
248	12	\$17,300.76	\$403.69	\$16,897.07	\$17,300.76	\$0.00	\$17,300.76
249	54	\$77,853.42	\$5,824.58	\$74,912.30	\$80,736.88	\$0.00	\$80,736.88
250	17	\$27,465.88	\$840.13	\$26,625.75	\$27,465.88	\$0.00	\$27,465.88
SUBTOTAL	12,656	\$10,279,636.64	\$1,154,136.45	\$9,110,801.30	\$10,264,937.75	(\$28,441.19)	\$10,236,496.56
CIGNA Network Mod	del Plan						
301	262	\$433,822.22	\$114,003.19	\$326,356.27	\$440,359.46	\$0.00	\$440,359.46
302	77	\$230,160.70	\$57,663.99	\$172,496.71	\$230,160.70	\$0.00	\$230,160.70
303	6	\$21,176.94	\$5,790.53	\$11,856.92	\$17,647.45	\$0.00	\$17,647.45
304	13	\$28,559.96	\$12,860.12	\$15,699.84	\$28,559.96	\$0.00	\$28,559.96
SUBTOTAL	358	\$713,719.82	\$190,317.83	\$526,409.74	\$716,727.57	\$0.00	\$716,727.57

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
IGNA Preferred w	/ Rx - Phoenix,	AZ					
321	29	\$11,150.21	\$1,507.21	\$10,027.49	\$11,534.70	\$0.00	\$11,534.70
322	6	\$10,306.68	\$687.11	\$7,901.79	\$8,588.90	\$0.00	\$8,588.90
324	20	\$15,219.60	\$1,917.68	\$13,301.92	\$15,219.60	\$0.00	\$15,219.60
327	3	\$6,776.55	\$451.77	\$6,324.78	\$6,776.55	\$0.00	\$6,776.55
329	1	\$1,342.91	\$0.00	\$1,342.91	\$1,342.91	\$0.00	\$1,342.91
SUBTOTAL	59	\$44,795.95	\$4,563.77	\$38,898.89	\$43,462.66	\$0.00	\$43,462.66

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
(aiser/Senior Advantag	je						
401	1,545	\$1,844,160.36	\$158,727.58	\$1,662,716.91	\$1,821,444.49	(\$1,228.80)	\$1,820,215.69
403	11,428	\$3,008,017.92	\$290,350.05	\$2,720,934.43	\$3,011,284.48	(\$8,635.22)	\$3,002,649.26
404	548	\$648,730.87	\$14,858.39	\$642,114.91	\$656,973.30	\$0.00	\$656,973.30
405	1,180	\$1,389,871.66	\$19,888.91	\$1,373,419.15	\$1,393,308.06	(\$1,176.86)	\$1,392,131.20
411	1,822	\$4,325,781.00	\$187,557.20	\$4,038,019.74	\$4,225,576.94	(\$2,338.26)	\$4,223,238.68
413	1,596	\$2,321,680.19	\$117,753.43	\$2,209,630.21	\$2,327,383.64	\$0.00	\$2,327,383.64
414	84	\$199,112.50	\$2,436.20	\$191,991.30	\$194,427.50	\$0.00	\$194,427.50
418	5,936	\$3,072,421.44	\$232,160.06	\$2,840,640.39	\$3,072,800.45	(\$5,972.67)	\$3,066,827.78
419	253	\$374,977.02	\$3,392.71	\$313,528.08	\$316,920.79	\$0.00	\$316,920.79
420	121	\$286,302.28	\$1,126.44	\$280,482.36	\$281,608.80	\$0.00	\$281,608.80
421	9	\$10,558.17	\$1,126.21	\$17,302.75	\$18,428.96	\$0.00	\$18,428.96
422	247	\$597,207.45	\$1,686.24	\$551,023.40	\$552,709.64	\$0.00	\$552,709.64
423	4	\$9,370.00	\$0.00	\$9,370.00	\$9,370.00	\$0.00	\$9,370.00
426	234	\$334,783.80	\$2,518.05	\$342,239.13	\$344,757.18	\$686.74	\$345,443.92
427	47	\$71,560.50	\$2,118.20	\$42,391.60	\$44,509.80	\$0.00	\$44,509.80
428	53	\$124,350.19	\$844.65	\$123,505.54	\$124,350.19	\$0.00	\$124,350.19
429	3	\$7,040.22	\$0.00	\$7,040.22	\$7,040.22	\$0.00	\$7,040.22
430	147	\$344,820.84	\$3,800.07	\$341,020.77	\$344,820.84	\$0.00	\$344,820.84
431	5	\$11,731.15	\$0.00	\$11,731.15	\$11,731.15	\$0.00	\$11,731.15
432	0	\$4,047.52	(\$1,340.46)	(\$2,707.06)	(\$4,047.52)	\$0.00	(\$4,047.52)
SUBTOTAL	25,262	\$18,986,525.08	\$1,039,003.93	\$17,716,394.98	\$18,755,398.91	(\$18,665.07)	\$18,736,733.84

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Colorado							
450	4	\$4,112.68	\$781.41	\$3,331.27	\$4,112.68	\$0.00	\$4,112.68
451	39	\$12,278.40	\$1,559.36	\$11,026.00	\$12,585.36	\$0.00	\$12,585.36
453	6	\$13,637.34	\$0.00	\$13,637.34	\$13,637.34	\$0.00	\$13,637.34
454	2	\$6,137.24	\$2,076.65	\$4,060.59	\$6,137.24	\$0.00	\$6,137.24
455	4	\$5,308.52	\$0.00	\$5,308.52	\$5,308.52	\$0.00	\$5,308.52
457	9	\$5,453.28	\$1,272.44	\$4,180.84	\$5,453.28	\$0.00	\$5,453.28
458	2	\$4,575.94	\$91.52	\$4,484.42	\$4,575.94	\$0.00	\$4,575.94
SUBTOTAL	66	\$51,503.40	\$5,781.38	\$46,028.98	\$51,810.36	\$0.00	\$51,810.36
Kaiser - Georgia							
441	3	\$3,396.99	\$0.00	\$3,396.99	\$3,396.99	\$0.00	\$3,396.99
442	7	\$7,926.31	\$0.00	\$7,926.31	\$7,926.31	\$0.00	\$7,926.31
445	2	\$4,643.40	\$0.00	(\$1,547.80)	(\$1,547.80)	\$0.00	(\$1,547.80)
446	2	\$3,095.60	\$0.00	\$3,095.60	\$3,095.60	\$0.00	\$3,095.60
461	14	\$16,984.95	\$1,834.36	\$8,380.27	\$10,214.63	\$0.00	\$10,214.63
462	75	\$31,760.25	\$4,048.36	\$31,523.12	\$35,571.48	\$0.00	\$35,571.48
463	2	\$4,513.34	\$1,128.33	\$3,385.01	\$4,513.34	\$0.00	\$4,513.34
465	8	\$12,382.40	\$928.68	\$14,549.32	\$15,478.00	\$0.00	\$15,478.00
466	29	\$24,329.26	\$872.50	\$23,456.76	\$24,329.26	\$0.00	\$24,329.26
SUBTOTAL	142	\$109,032.50	\$8,812.23	\$94,165.58	\$102,977.81	\$0.00	\$102,977.81

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Hawaii							
471	5	\$4,708.05	\$263.65	\$6,327.62	\$6,591.27	\$0.00	\$6,591.27
472	32	\$15,000.32	\$2,212.54	\$12,787.78	\$15,000.32	\$0.00	\$15,000.32
473	1	\$1,819.99	\$546.60	\$1,273.39	\$1,819.99	\$0.00	\$1,819.99
474	4	\$7,500.92	\$0.00	\$5,625.69	\$5,625.69	\$0.00	\$5,625.69
475	1	\$2,808.84	\$101.78	\$2,707.06	\$2,808.84	\$0.00	\$2,808.84
476	3	\$5,609.48	\$1,374.31	\$1,430.43	\$2,804.74	\$0.00	\$2,804.74
477	1	\$2,753.60	\$458.54	\$2,295.06	\$2,753.60	\$0.00	\$2,753.60
478	18	\$16,731.36	\$2,379.58	\$15,281.30	\$17,660.88	\$0.00	\$17,660.88
479	1	\$2,280.75	\$0.00	\$2,280.75	\$2,280.75	\$0.00	\$2,280.75
SUBTOTAL	66	\$59,213.31	\$7,337.00	\$50,009.08	\$57,346.08	\$0.00	\$57,346.08
Kaiser - Oregon							
481	4	\$4,618.64	\$854.45	\$3,764.19	\$4,618.64	\$0.00	\$4,618.64
482	78	\$37,390.08	\$6,615.15	\$30,774.93	\$37,390.08	\$0.00	\$37,390.08
484	4	\$9,205.28	\$300.44	\$8,904.84	\$9,205.28	\$0.00	\$9,205.28
486	3	\$4,878.06	\$650.41	\$4,227.65	\$4,878.06	\$0.00	\$4,878.06
488	43	\$40,880.96	\$5,723.36	\$35,157.60	\$40,880.96	(\$950.72)	\$39,930.24
489	1	\$1,096.82	\$0.00	\$1,096.82	\$1,096.82	\$0.00	\$1,096.82
491	1	\$3,136.36	\$0.00	(\$1,568.18)	(\$1,568.18)	\$0.00	(\$1,568.18)
498	2	\$4,987.96	\$397.84	\$4,590.12	\$4,987.96	\$0.00	\$4,987.96
SUBTOTAL	136	\$106,194.16	\$14,541.65	\$86,947.97	\$101,489.62	(\$950.72)	\$100,538.90
SCAN Health Plan							
611	315	\$89,901.20	\$19,698.94	\$69,351.46	\$89,050.40	(\$283.60)	\$88,766.80
613	88	\$49,209.60	\$8,141.98	\$41,067.62	\$49,209.60	\$0.00	\$49,209.60
SUBTOTAL	403	\$139,110.80	\$27,840.92	\$110,419.08	\$138,260.00	(\$283.60)	\$137,976.40

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
UHC Medicare Adv.							
701	1,829	\$618,058.65	\$74,993.93	\$551,658.69	\$626,652.62	(\$1,339.10)	\$625,313.52
702	383	\$629,036.76	\$38,955.52	\$573,890.08	\$612,845.60	\$0.00	\$612,845.60
703	1,201	\$801,204.50	\$82,381.03	\$725,378.67	\$807,759.70	(\$1,329.80)	\$806,429.90
704	93	\$172,292.95	\$10,954.20	\$164,965.52	\$175,919.72	\$0.00	\$175,919.72
705	37	\$32,632.89	\$2,046.17	\$30,586.72	\$32,632.89	\$0.00	\$32,632.89
706	1	\$362.92	\$14.52	\$348.40	\$362.92	\$0.00	\$362.92
SUBTOTAL	3,544	\$2,253,588.67	\$209,345.37	\$2,046,828.08	\$2,256,173.45	(\$2,668.90)	\$2,253,504.55
United Healthcare							
707	472	\$612,487.47	\$53,253.38	\$543,837.73	\$597,091.11	\$0.00	\$597,091.11
708	448	\$1,053,516.10	\$46,204.59	\$977,123.54	\$1,023,328.13	(\$2,315.42)	\$1,021,012.71
709	367	\$1,037,704.50	\$57,599.83	\$903,237.67	\$960,837.50	\$0.00	\$960,837.50
SUBTOTAL	1,287	\$2,703,708.07	\$157,057.80	\$2,424,198.94	\$2,581,256.74	(\$2,315.42)	\$2,578,941.32

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
ocal 1014 Firefighters							
801	70	\$86,382.10	\$3,652.71	\$89,319.65	\$92,972.36	\$0.00	\$92,972.36
802	321	\$714,234.63	\$20,737.25	\$693,497.38	\$714,234.63	\$0.00	\$714,234.63
803	322	\$845,134.08	\$24,251.68	\$831,380.96	\$855,632.64	\$2,624.64	\$858,257.28
804	183	\$225,827.49	\$6,540.32	\$219,287.17	\$225,827.49	(\$37,140.39)	\$188,687.10
805	189	\$420,530.67	\$12,638.13	\$407,892.54	\$420,530.67	(\$31,274.10)	\$389,256.57
806	651	\$1,448,494.53	\$34,710.35	\$1,411,603.42	\$1,446,313.77	(\$215,915.10)	\$1,230,398.67
807	53	\$139,105.92	\$1,942.24	\$137,163.68	\$139,105.92	(\$9,741.60)	\$129,364.32
808	15	\$39,369.60	\$209.97	\$39,159.63	\$39,369.60	(\$5,227.20)	\$34,142.40
809	22	\$27,148.66	\$3,159.11	\$23,989.55	\$27,148.66	\$0.00	\$27,148.66
810	10	\$22,250.30	\$3,337.53	\$18,912.77	\$22,250.30	\$0.00	\$22,250.30
811	3	\$7,873.92	\$0.00	\$7,873.92	\$7,873.92	\$0.00	\$7,873.92
812	243	\$299,869.29	\$22,582.61	\$279,557.30	\$302,139.91	(\$39,887.10)	\$262,252.81
813	1	\$2,225.03	\$0.00	\$2,225.03	\$2,225.03	(\$148.50)	\$2,076.53
SUBTOTAL	2,083	\$4,278,446.22	\$133,761.90	\$4,161,863.00	\$4,295,624.90	(\$336,709.35)	\$3,958,915.55
aiser - Washington							
393	6	\$7,454.04	\$397.55	\$11,945.62	\$12,343.17	\$0.00	\$12,343.17
394	13	\$5,664.10	\$2,867.73	\$4,975.69	\$7,843.42	\$0.00	\$7,843.42
395	3	\$6,939.00	\$512.83	\$6,426.17	\$6,939.00	\$0.00	\$6,939.00
396	1	\$3,867.64	\$1,160.58	\$2,707.06	\$3,867.64	\$0.00	\$3,867.64
397	4	\$6,025.44	\$0.00	\$4,519.08	\$4,519.08	\$0.00	\$4,519.08
398	5	\$4,317.00	\$552.57	\$3,764.43	\$4,317.00	\$0.00	\$4,317.00
SUBTOTAL	32	\$34,267.22	\$5,491.26	\$34,338.05	\$39,829.31	\$0.00	\$39,829.31
dical Plan Total	53,219	\$52,589,742.95	\$3,625,306.69	\$48,455,063.45	\$52,080,370.14	(\$421,609.47)	\$51,658,760.67

RAND TOTALS	108,034	\$56,812,569.90	\$3,999,147.85	\$52,327,527.47	\$56,326,675.32	(\$429,189.91)	\$55,897,485.41
ental/Vision Plan Total	54,815	\$4,222,826.95	\$373,841.16	\$3,872,464.02	\$4,246,305.18	(\$7,580.44)	\$4,238,724.74
SUBTOTAL	6,152	\$412,310.40	\$40,472.70	\$374,888.00	\$415,360.70	(\$1,305.34)	\$414,055.36
903	2	\$93.82	\$20.64	\$402.27	\$422.91	\$0.00	\$422.91
902	2,588	\$246,490.20	\$20,391.25	\$227,617.84	\$248,009.09	(\$98.60)	\$247,910.49
901	3,562	\$165,726.38	\$20,060.81	\$146,867.89	\$166,928.70	(\$1,206.74)	\$165,721.96
CIGNA Dental HMO/Visi	on						
SUBTOTAL	48,663	\$3,810,516.55	\$333,368.46	\$3,497,576.02	\$3,830,944.48	(\$6,275.10)	\$3,824,669.38
503	10	\$632.20	\$58.17	\$574.03	\$632.20	\$0.00	\$632.20
502	23,493	\$2,515,442.68	\$191,931.59	\$2,326,072.14	\$2,518,003.73	(\$4,637.74)	\$2,513,365.99
501	25,160	\$1,294,441.67	\$141,378.70	\$1,170,929.85	\$1,312,308.55	(\$1,637.36)	\$1,310,671.19
CIGNA Indemnity Denta	I/Vision						
ental/Vision Plan							
Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid

DEDUCTION CODE DEFINITIONS

Anthem Blue Cross Prudent Buyer Plan

201	Retiree Only
202	Retiree and Spouse/Domestic Partner
203	Retiree, Spouse/Domestic Partner and Children
204	Retiree and Children
205	Survivor Children Only Rates

Anthem Blue Cross Plan I

211	Retiree Only
212	Retiree and Spouse/Domestic Partner
213	Retiree, Spouse/Domestic Partner and Children
214	Retiree and Children
215	Survivor Children Only Rates

Anthem Blue Cross Plan II

221	Retiree Only
222	Retiree and Spouse/Domestic Partner
223	Retiree, Spouse/Domestic Partner and Children
224	Retiree and Children
225	Survivor Children Only Rates

Anthem Blue Cross Plan III

240	Retiree Only with Medicare
241	Retiree and Spouse/Domestic Partner - One with Medicare (Non-Medicare has Anthem Blue Cross I)
242	Retiree and Spouse/Domestic Partner - One with Medicare (Non-Medicare has Anthem Blue Cross II)
243	Retiree and Spouse/Domestic Partner - Both with Medicare
244	Retiree and Children (Retiree has Medicare; Children have Anthem Blue Cross I)
245	Retiree and Children (Retiree has Medicare; Children have Anthem Blue Cross II)
246	Retiree, Spouse/Domestic Partner and Children - One with Medicare (Non-Medicare has Anthem Blue Cross I)
247	Retiree, Spouse/Domestic Partner and Children - One with Medicare (Non-Medicare has Anthem Blue Cross II)
248	Retiree, Spouse/Domestic Partner and Children - Two with Medicare (Children have Anthem Blue Cross I)
249	Retiree, Spouse/Domestic Partner and Children - Two with Medicare (Children have Anthem Blue Cross II)
250	Member, Spouse/Domestic Partner, Child (3 with Medicare)

DEDUCTION CODE DEFINITIONS

CIGNA Network Model Plan

301	Retiree Only
302	Retiree and Spouse/Domestic Partner
303	Retiree, Spouse/Domestic Partner and Children
304	Retiree and Children
305	Survivor Children Only Rates

CIGNA Medicare Select Plus Rx (Available in the Phoenix, AZ area only)

321	Retiree Only with Medicare
322	Retiree and Spouse/Domestic Partner/Domestic Partner - One with Medicare
324	Retiree and Spouse/Domestic Partner -Both with Medicare
325	Retiree and Children
327	Retiree, Spouse/Domestic Partner and Children - One with Medicare
329	Retiree, Spouse/Domestic Partner and Children - Two with Medicare

Kaiser

401	Retiree Only ("Basic")
402	Retiree Only ("Supplement")
403	Retiree Only ("Senior Advantage")
404	Retiree Only ("Excess I")
405	Retiree Only - ("Excess II")
406	Retiree Only ("Excess III")
411	Retiree and Family (All family members are "Basic")
412	Retiree and Family (One family member is "Supplement"; others are "Basic")
413	Retiree and Family (One family member is "Senior Advantage"; others are "Basic")
414	Retiree and Family (One family member is "Excess I"; others are "Basic")
415	Retiree and Family (Two or more family members are "Supplement")
416	Retiree and Family (One family member is "Senior Advantage"; others are "Supplement")
417	Retiree and Family (One family member is "Excess I"; others are "Supplement")
418	Retiree and Family (Two or more family members are "Senior Advantage")
419	Retiree and Family (One family member is "Excess I"; others are "Senior Advantage"
420	Retiree and Family (Two or more family members are "Excess I")
421	Survivor Children Only Rates
422	Retiree and Family (One family member is "Excess II"; others are "Basic")
423	Retiree and Family (One family member is "Excess III"; others are "Basic")

DEDUCTION CODE DEFINITIONS

Kaiser (continued)

424	Retiree and Family (One family member is "Supplement'; others are "Excess II")
425	Retiree and Family (One family member is "Supplement"; others are "Excess III")
426	Retiree and Family (One family member is "Senior Advantage"; others are "Excess II")
427	Retiree and Family (One family member is "Senior Advantage; others are "Excess III")
428	Retiree and Family (One family member is "Excess I"; others are "Excess II")
429	Retiree and Family One family member is "Excess I"; others are "Excess III")
430	Retiree and Family (Two or more family members are "Excess II")
431	Retiree and Family (One family member is "Excess II"; others are "Excess III")
432	Retiree and Family (Two or more family members are "Excess III")

Kaiser Colorado

450	Retiree Only ("Basic" under age 65)
451	Retiree Only ("Senior Advantage")
453	Retiree and Family (Two family members are "Basic")
454	Retiree and Family (Three or more family members are "Basic")
455	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic")
457	Retiree and Family (Two family members are "Senior Advantage")
458	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
459	Retiree and Family (Two family members are "Senior Advantage"; one or more are "Basic")

Kaiser Georgia

440	Retiree Only ("Basic" over age 65 with Medicare Part B only
441	Retiree Only ("Basic over age 65 with Medicare Part A only)
442	Retiree Only ("Basic over age 65 without Medicare Part A or Medicare Part B)
443	Retiree Only ("Basic" over age 65 - Medicare eligible who is classified as having renal failure)
444	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with
	Medicare Part B only)
445	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with
	Medicare Part A only)
446	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 without
	Medicare Part A and B)
461	Retiree Only ("Basic" under age 65)
462	Retiree Only ("Senior Advantage")

DEDUCTION CODE DEFINITIONS

Kaiser Georgia (continued)

463	Retiree and Family (Two family members are "Basic")
464	Retiree and Family (Three or more family members are "Basic)
465	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")
466	Retiree and Family (Two family members are "Senior Advantage")
467	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
468	Retiree and Family (Two family members are "Senior Advantage"; one is "Basic")
469	Retiree and Family (Three or more family members are "Senior Advantage"; one is "Basic")
470	Retiree and Family (Three or more family members are "Basic"; one is "Senior Advantage"

Kaiser Hawaii

471	Retiree Only ("Basic" under age 65)
472	Retiree Only ("Senior Advantage")
473	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)
474	Retiree and Family (Two family members are "Basic")
475	Retiree and Family (Three or more family members are "Basic")
476	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")
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)
478	Retiree and Family (Two family members are "Senior Advantage"
479	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 without Medicare Part A or
	Medicare Part B)

Kaiser Oregon

481	Retiree Only ("Basic" under age 65)
482	Retiree Only ("Senior Advantage")
483	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)
484	Retiree and Family (Two family members are "Basic")
485	Retiree and Family (Three or more family members are "Basic")
486	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")
487	Retiree Only (Medicare Cost "Supplement" program)
488	Retiree and Family (Two family members are "Senior Advantage")
489	Retiree Only (Over age 65 with Medicare Part A only)
490	Retiree Only (Over age 65 with Medicare Part B only)

DEDUCTION CODE DEFINITIONS

Kaiser Oregon (continued)

491	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 with Medicare Par A only)
492	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 without Medicare Part A or
	Medicare Part B)
493	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
494	Retiree and Family (Two family members are "Senior Advantage"; one is "Basic")
495	Retiree and Family (Two family members are over age 65 without Medicare Part A or Medicare Part B)
496	Retiree and Family (Two family members are over age 65 with Medicare Part A only)
497	Retiree and Family (One family member is "Basic"; one is over age 65 with Medicare Part A only)
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.

DEDUCTION CODE DEFINITIONS

SCAN Health Plan

611	Retiree Only with SCAN
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)

United Healthcare Group Medicare Advantage Plan (UHCMA)

(For both members and dependents who are enrolled in UHCMA, or a family combination of UHCMA/UHC)

701	Retiree Only with Secure Horizons
702	Retiree and 1 Dependent - One with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic
	Partner OR Retiree and 1 Child)
703	Retiree and 1 Dependent - Both with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic
	Partner OR Retiree and 1 Child)
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)
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)

United Healthcare (UHC)

(For members and dependents under age 65 [no Medicare])

707	Retiree Only
708	Retiree and 1 Dependent
709	Retiree and 2 Or More Dependents

Local 1014 Firefighters

801	Member Under 65
802	Member + 1 Under 65
803	Member + 2 Under 65
804	Member with Medicare
805	Member + 1; 1 Medicare
806	Member + 1; 2 Medicare
807	Member + 2; 1 Medicare
808	Member + 2; 2 Medicare
809	Surviving Spouse Under 65

DEDUCTION CODE DEFINITIONS

Local 1014 Firefighters (continued)

810	Surviving Spouse + 1; Under 65
811	Surviving Spouse + 2 Under 65
812	Surviving Spouse with Medicare
814	Spouse + 1; 1 Medicare
815	Surviving Spouse + 1; 2 Medicare

CIGNA Indemnity - Dental/Vision

50 I	Retiree Only
502	Retiree and Dependent(s)
503	Survivor Children Only Rates

CIGNA HMO - Dental/Vision

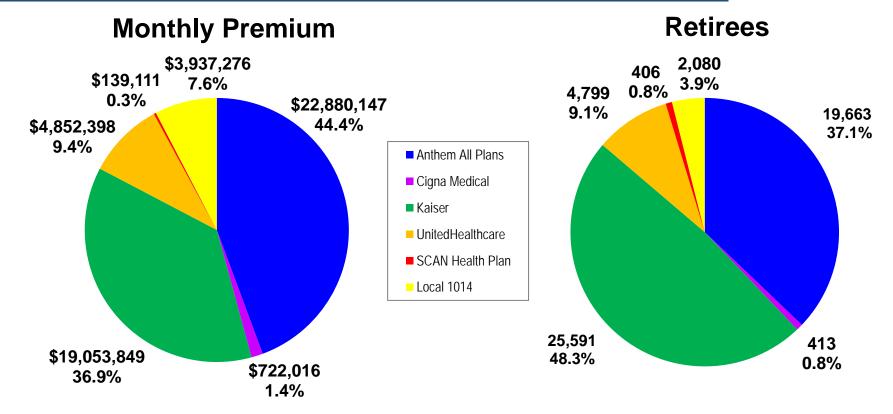
901	Retiree Only
902	Retiree and Dependent(s)
903	Survivor Children Only Rates



Premium & Enrollment
Coverage Month Ending August 2021

Carrier / Plan	Monthly Premium	Percent of Total	Retirees	Percent of Total
Anthem All Plans	\$22,880,147	44.4%	19,663	37.1%
Cigna Medical	\$722,016	1.4%	413	0.8%
Kaiser	\$19,053,849	36.9%	25,591	48.3%
UnitedHealthcare	\$4,852,398	9.4%	4,799	9.1%
SCAN Health Plan	\$139,111	0.3%	406	0.8%
Local 1014	\$3,937,276	7.6%	2,080	3.9%
Combined Medical	\$51,584,797	100.0%	52,952	100.0%

Cigna Dental & Vision	\$4,226,665	E4 444
(PPO and HMO)	\$4,220,000	54,414

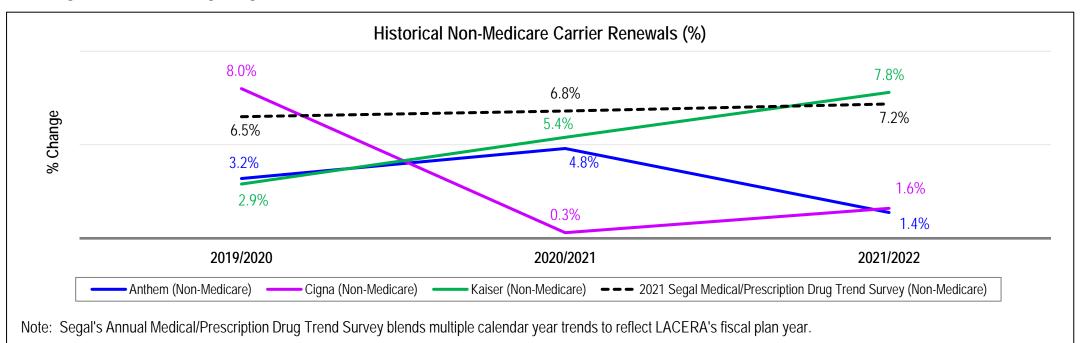


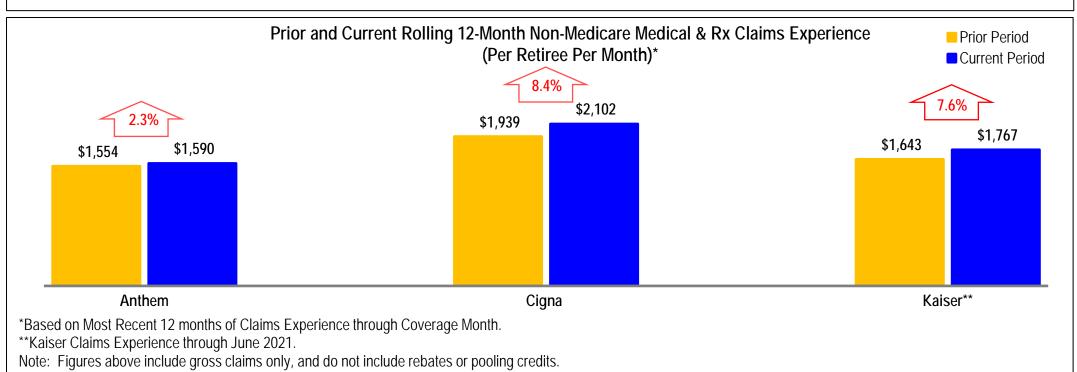
Note: Premiums include LACERA's Administrative Fee of \$8.00 per member, per plan, per month.



Claims Experience by Carrier

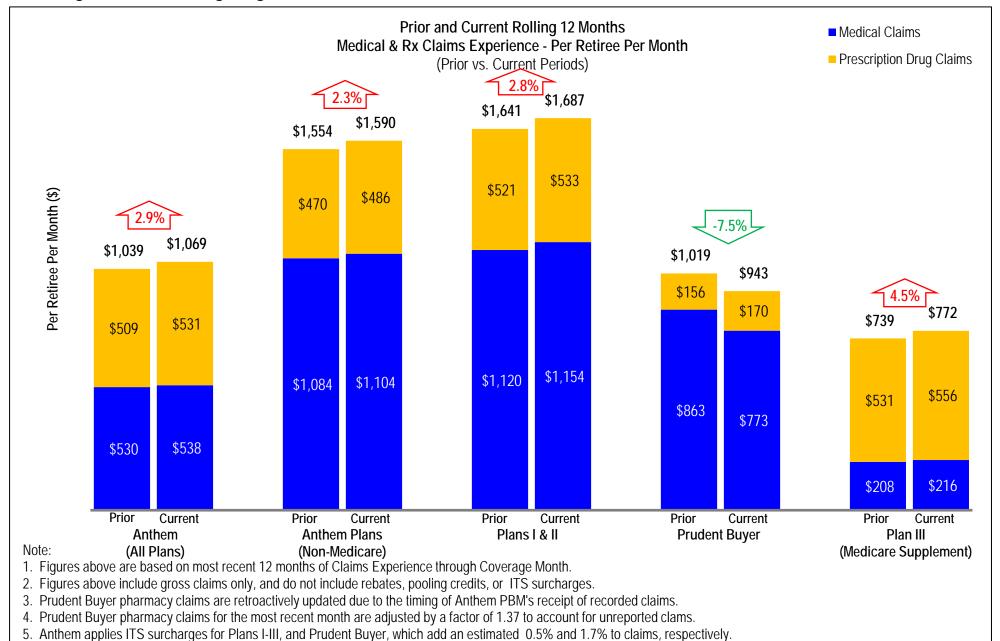
Coverage Month Ending August 2021







Anthem Claims Experience By Plan Coverage Month Ending August 2021





Kaiser Utilization Coverage Month Ending August 2021

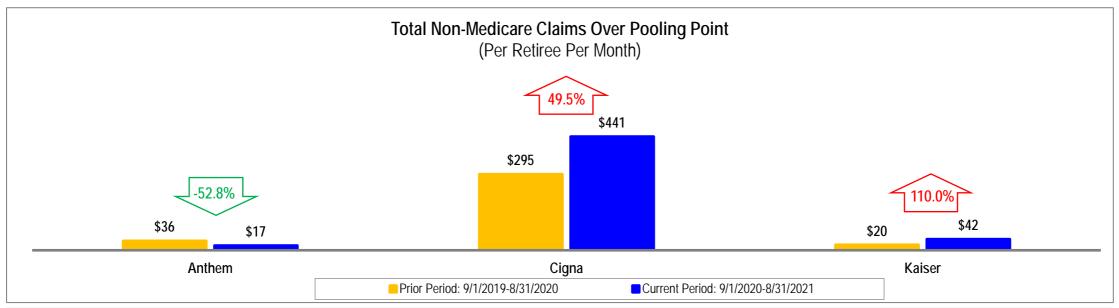
- Kaiser insures approximately 25,000 LACERA retirees with the majority enrolled in Medicare Advantage plans.
- Kaiser's Periodic Utilization Report (PUR) monitors utilization patterns of LACERA's non-Medicare population in Southern California.

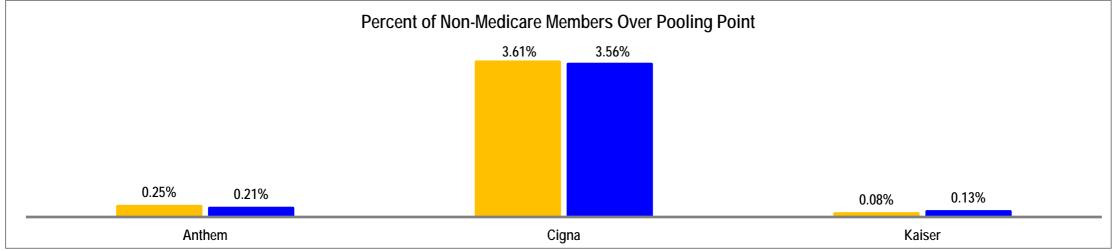
Category	Current Period 7/1/2020 - 6/30/2021	Prior Period 7/1/2019 - 6/30/2020	Change
Average Contract Size	2.38	2.38	0.00%
Average Members	8,833	8,850	-0.19%
Inpatient Claims Per Member Per Month	\$187.92	\$147.08	27.77%
Outpatient Claims Per Member Per Month	\$320.37	\$324.35	-1.23%
Pharmacy Per Member Per Month	\$112.92	\$106.38	6.15%
Other Per Member Per Month	\$121.56	\$112.18	8.36%
Total Claims Per Member Per Month	\$742.77	\$689.99	7.65%
Total Paid Claims	\$78,726,221	\$73,280,565	7.43%
Large Claims over \$475,000 Pooling Point			
Number of Claims over Pooling Point	5	3	
Amount over Pooling Point	\$1,866,469	\$900,021	107.38%
% of Total Paid Claims	2.37%	1.23%	
Inpatient Days / 1000	356.2	308.2	15.57%
Inpatient Admits / 1000	52.8	44.6	18.39%
Outpatient Visits / 1000	13,485.3	11,370.7	18.60%
Pharmacy Scripts Per Member Per Year	10.0	10.4	-3.85%



High Cost Claimants (Anthem, Cigna, & Kaiser)

Coverage Month Ending August 2021





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's figures are based on most recent 12 months of Claims Experience through Coverage Month. Kaiser's figures are based on claims experience period between July through June.

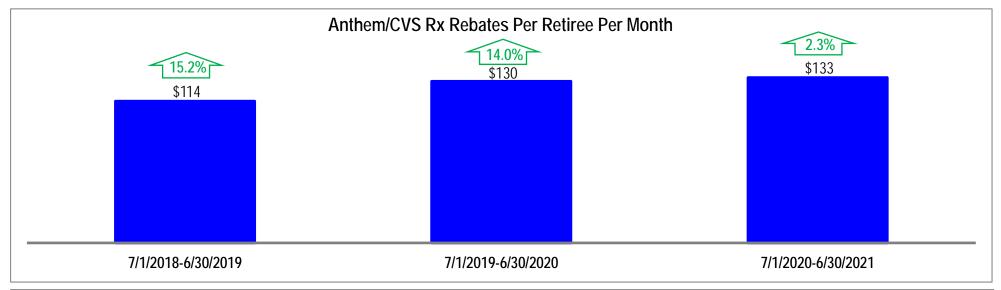
Pooling Points by Carrier:

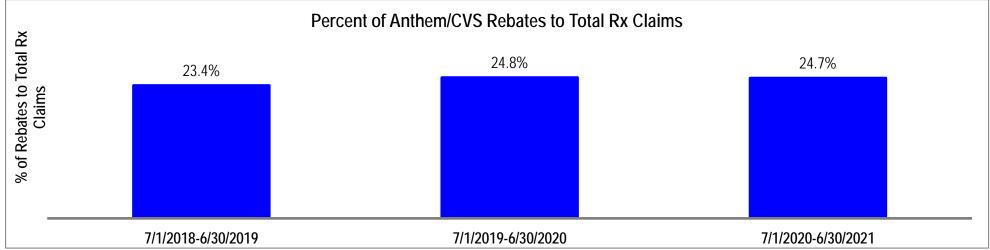
- 1. Anthem's pooling points are \$350,000 for Plans I & II, and \$300,000 for Prudent Buyer.
- 2. Cigna's pooling point is \$100,000.
- 3. Kaiser's pooling point is \$475,000.



Prescription Drug Rebates (Anthem)

Coverage Month Ending August 2021





Rebates Overview:

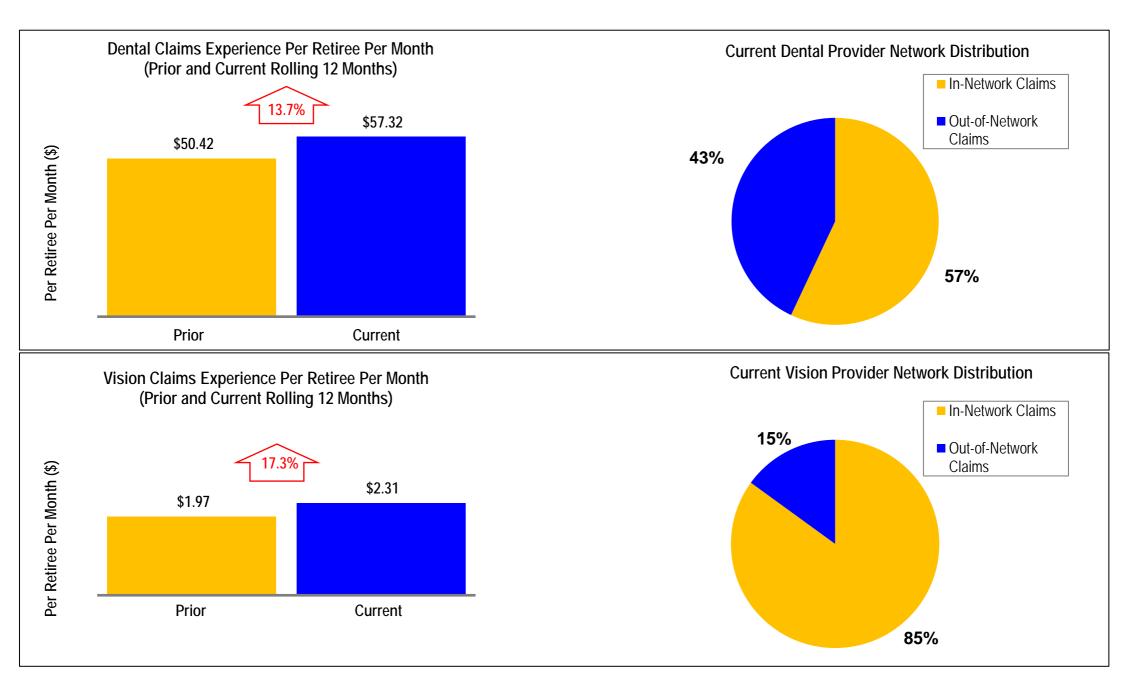
Pharmacy Benefit Managers negotiate volume-based rebates with drug manufacturers of brand medications. Manufacturer rebates are passed on to plan sponsors and are used to offset pharmaceutical claims expenses.

Note:

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



Cigna Dental & Vision Claims Experience Coverage Month Ending August 2021



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.