VIRTUAL COMMITTEE MEETING





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

AGENDA

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, AUGUST 3, 2022 - 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 Wayne Moore Herman B. Santos, Alternate

I. APPROVAL OF THE MINUTES

A. Approval of the minutes of the regular meeting of July 6, 2022

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 at PublicComment@lacera.com before and during the meeting at any time up to the end of the Public Comment item. 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. FOR INFORMATION

- A. <u>Engagement Report for July 2022</u>
 Barry W. Lew, Legislative Affairs Officer
- B. <u>Staff Activities Report for July 2022</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)
- IV. ITEMS FOR STAFF REVIEW
- V. GOOD OF THE ORDER(For information purposes only)
- VI. 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@lacera.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

WEDNESDAY, JULY 6, 2022, 8:00 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: Les Robbins, Chair

Vivian H. Gray, Vice Chair

Shawn R. Kehoe

Wayne Moore (arrived at 8:08 a.m.)

Herman B. Santos, Alternate

ALSO ATTENDING:

BOARD MEMBERS AT LARGE

JP Harris Keith Knox William Pryor Antonio Sanchez

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 Laura Guglielmo, Assistant Executive Officer Steven P. Rice, Chief Counsel

Barry W. Lew, Legislative Affairs Officer

STAFF, ADVISORS, PARTICIPANTS (continued)

Stephen Murphy, Vice President Segal Consulting

Richard Ward, Sr. Vice President Segal Consulting

Stephanie Messier, Vice President Segal Consulting

Michael Szeto, Senior Actuarial Associate Segal Consulting

The meeting was called to order by Chair Robbins at 8:00 a.m. As Mr. Moore had not yet joined the meeting, the Chair announced that Mr. Santos, as the alternate, would be a voting member of the Committee.

- APPROVAL OF THE MINUTES
 - A. Approval of the minutes of the regular meeting of June 1, 2022

Mr. Kehoe made a motion, Mr. Robbins seconded, to approve the minutes of the regular meeting of June 1, 2022. The motion passed unanimously.

- II. PUBLIC COMMENT
- III. NON-CONSENT ITEMS
 - A. Recommendation as submitted by Steven P. Rice, Chief Counsel: That, under AB 361 and Government Code Section 54953(e)(3) of the Brown Act, the Insurance, Benefits and Legislative Committee separately consider whether to find that the Governor's COVID-19 State of Emergency continues to directly impact the ability of the Committee to meet safely in person and that the County of Los Angeles and other agencies still recommend social distancing such that the Committee shall hold teleconference meetings for the next 30 days, so long as the State of Emergency remains in effect, and direct staff to comply with the agenda and public comment requirements of the statute. (Memorandum dated June 27, 2022)

Mr. Santos made a motion, Ms. Gray seconded, to approve the recommendation. The motion passed unanimously.

IV. FOR INFORMATION

A. <u>Semi-Annual Report on Approved Engagements</u> Barry W. Lew, Legislative Affairs Officer

The semi-annual report on approved engagements was discussed.

B. <u>Engagement Report for June 2022</u>
Barry W. Lew, Legislative Affairs Officer

The engagement report was discussed.

C. <u>Staff Activities Report for June 2022</u>
Cassandra Smith, Director, Retiree Healthcare

The staff activities report was discussed.

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

The LACERA Claims Experience reports through May 2022 were discussed.

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

(for discussion purposes)

Segal Consulting gave an update on federal legislation.

V. ITEMS FOR STAFF REVIEW

There was nothing to report.

VI. GOOD OF THE ORDER

(For information purposes only)

VII. 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.

INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE ENGAGEMENT REPORT JULY 2022 FOR INFORMATION ONLY

"True Cost of Aging" Index

The Elder Index is a measure of the cost of living for older adults and was developed at the Gerontology Institute at the University of Massachusetts-Boston. The Equity in Aging Collaborative is a coalition of 25 aging organizations that plan to use the index to influence policies affecting older adults. The index uses public databases to calculate the cost of health care, housing, food, transportation, and miscellaneous expenses for seniors. It represents a bare-bones budget that is adjusted for whether older adults live alone or as a couple; whether they are in poor, good, or excellent health; and whether they rent or own their homes with or without a mortgage.

The Elder Index shows that in 2020 nearly 5 million older women living alone, 2 million older men living alone, and more than 2 million couples had incomes that were economically insecure. The index shows that its minimum cost of living for older adults exceeds federal poverty thresholds. For example, the index shows that a single older adult in good health paying rent needed \$27,096, on average, for basic expenses in 2021, which is \$14,100 more than the federal poverty threshold of \$12,996. However, eligibility for Medicaid, food stamps, housing assistance, and other safety net programs for older adults rely on federal poverty standards, which do not account for geographical variations.

Organizations across the country have been using the Elder Index to advocate in front of policymakers that older adults need more assistance. By law, California's Area Agencies on Aging use the Elder Index in their planning process. (Source) (Source)

State of Connecticut Employee Retirements and COLAs

More than 4,400 Connecticut state employees have either retired or are expected to retire before July 1, which is double the number of average retirements over the previous three calendar years. The catalyst for this surge was a 2017 concessions deal that the state negotiated to avert budget deficits. One of those concessions related to cost-of-living adjustment rules is sparking the current retirements.

Employees who retire before July 1 are subject to the old rules where the first COLA payment occurs within 9 to 15 months. They also receive COLAs of at least 2 percent up to 7.5 percent. Those who retire on or after July 1 receive their first COLA payment 30 months after retirement, whereas under the old rule they could have received at least 2 COLA payments in the same period. Post-July 1 retirees may receive COLAs under 2 percent, if the CPI does not exceed 2 percent.

The surge in retirements also coincides with a 17-percent job vacancy rate, almost double compared to two years ago when it was 9.4 percent. The decreased staffing has also

Engagement Report (July 2022) Insurance, Benefits and Legislative Committee Page 2 of 2

made it more difficult for the state to control overtime expenses, which went up 11 percent to \$20.4 million and totals \$207 million. (Source) (Source)

Milliman Forecast of 2023 IRS Limits

The Internal Revenue Service limits of retirement plan contributions and benefits are adjusted annually based on cost-of-living adjustments. As of June 30, 2022, inflation was reported by the Bureau of Labor Statistics to be 9.1 percent.

The two limits that are important for defined benefit plans include the compensation limit and the benefit limitation. For 2023, Milliman forecasts the compensation limit to be \$335,000 (\$30,000 increase from 2022) and the annual benefit limitation to be \$265,000 (\$20,000 increase from 2022). (Source)

Recognition Payment Plan for Former ABA Players

The board of governors of the National Basketball Association (NBA) recently voted to pay \$24.5 million to former American Basketball Association (ABA) players, many of whom struggled to pay for rent, medical bills, and other basic necessities. The money will be equally funded by the NBA and National Basketball Players Association. When the ABA merged with the NBA in 1976, only four ABA teams (Indiana Pacers, Denver Nuggets, New York Nets, and San Antonio Spurs) were absorbed by the NBA. That left many ABA players without paychecks, health insurance, and pensions.

The former ABA players are now in their late 60s, 70s, and 80s. About 115 former players are eligible for the payments, which the NBA is calling "recognition payments" and not pensions. The players have a minimum of 3 years in the ABA or 3 years combined in the ABA and NBA. The payments will average \$3,828 for each year of service (\$957 a month). One player with the most years of service of 9 will receive \$35,452. The payment agreement was the result of years-long advocacy by the nonprofit Dropping Dimes Foundation, which was founded in 2014 to help struggling former ABA players. (Source) (Source)

INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE RETIREE HEALTHCARE BENEFITS PROGRAM STAFF ACTIVITIES REPORT JULY 2022 FOR INFORMATION ONLY

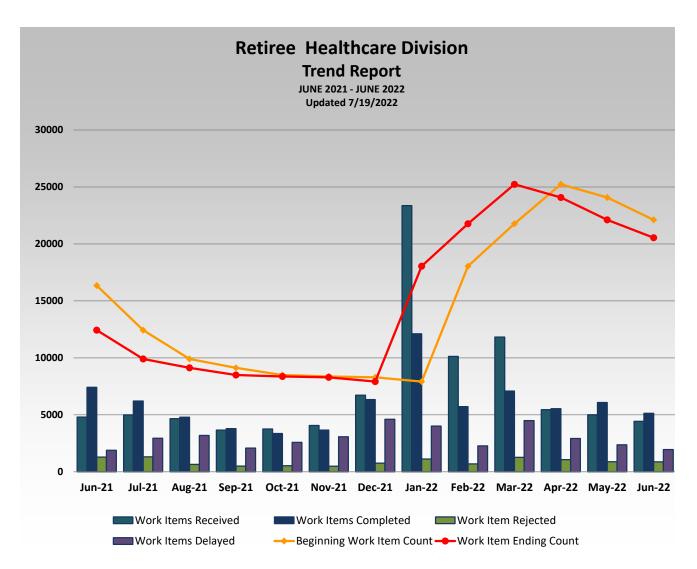
Centers for Medicare and Medicaid Services (CMS) Medicare Part D Retiree Drug Subsidy (RDS) Reconciliation Plan Year 7/1/2020 – 6/30/2021

In collaboration with our carriers, staff began the subsidy payment request process for the following RDS applications for Fiscal Year 2020/2021:

- Anthem Blue Cross
- Cigna Medical HMO
- Kaiser Permanente
- LACFF Local 1014 Firefighters

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

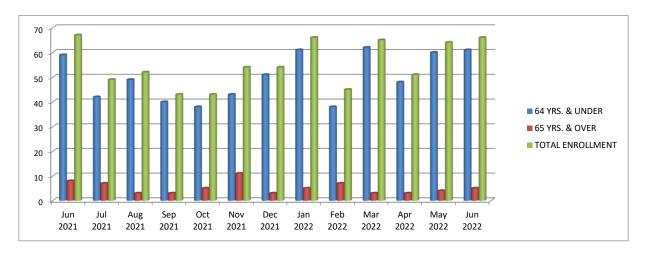
We will continue to keep the Board apprised of this.



	Beginning Work Item Count	Work Items Received	Work Items Completed	Work Item Rejected	Work Items Delayed	Work Item Ending Count
Jun-21	16348	4797	7421	1289	1884	12435
Jul-21	12435	4989	6205	1315	2940	9904
Aug-21	9904	4663	4790	649	3193	9128
Sep-21	9128	3659	3789	504	2079	8494
Oct-21	8494	3758	3355	529	2579	8368
Nov-21	8368	4064	3655	487	3068	8290
Dec-21	8290	6721	6335	758	4606	7918
Jan-22	7918	23364	12115	1117	4012	18050
Feb-22	18050	10131	5715	691	2272	21775
Mar-22	21775	11821	7090	1271	4489	25235
Apr-22	25235	5451	5542	1067	2922	24077
May-22	24077	4999	6078	883	2364	22115
Jun-22	22115	4423	5128	870	1950	20540

Retirees Monthly Age Breakdown JUNE 2021 - JUNE 2022

	Disability R	Retirement	
MONTH	64 YRS. & UNDER	65 YRS. & OVER	TOTAL ENROLLMENT
Jun 2021	59	8	67
Jul 2021	42	7	49
Aug 2021	49	3	52
Sep 2021	40	3	43
Oct 2021	38	5	43
Nov 2021	43	11	54
Dec 2021	51	3	54
Jan 2022	61	5	66
Feb 2022	38	7	45
Mar 2022	62	3	65
Apr 2022	48	3	51
May 2022	60	4	64
Jun 2022	61	5	66

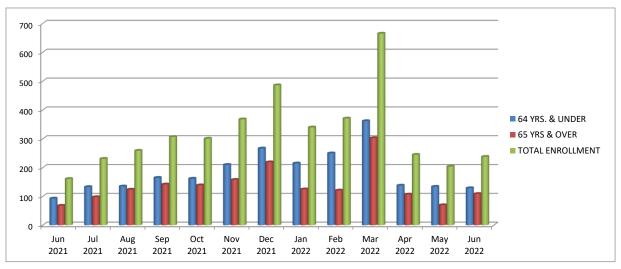


PLEASE NOTE:

• Next Report will include the following dates: July 1, 2021, throught July 31, 2022.

Retirees Monthly Age Breakdown JUNE 2021 - JUNE 2022

	Service Retirement									
MONTH	64 YRS. & UNDER	65 YRS & OVER	TOTAL ENROLLMENT							
Jun 2021	93	68	161							
Jul 2021	133	98	231							
Aug 2021	135	124	259							
Sep 2021	165	142	307							
Oct 2021	162	139	301							
Nov 2021	210	158	368							
Dec 2021	267	219	486							
Jan 2022	215	125	340							
Feb 2022	250	121	371							
Mar 2022	362	303	665							
Apr 2022	138	107	245							
May 2022	134	70	204							
Jun 2022	129	109	238							



PLEASE NOTE:

• Next Report will include the following dates: July 1, 2021, through July 31, 2022.

MEDICARE NO LOCAL 1014 - 73122

		PATPERIOD	113112022	
Deduction Code	No. of	Reimbursement	No. of	Penalty
Deduction Code	Members	Amount	Penalties	Amount
ANTHEM BC III				
240	7233	\$1,104,867.80	2	\$148.30
241	134	\$19,223.10	0	\$0.00
242	878	\$138,940.10	0	\$0.00
243	4303	\$1,354,579.56	1	\$59.40
244	17	\$2,536.00	0	\$0.00
245	57	\$8,466.00	0	\$0.00
246	17		0	
		\$2,370.60		\$0.00
247	149	\$24,911.40	0	\$0.00
248	11	\$2,874.50	1	\$43.00
249	56	\$17,983.40	0	\$0.00
250	17	\$4,980.00	0	\$0.00
Plan Total:	12,872	\$2,681,732.46	4	\$250.70
CIGNA - PREFER	RED with RX			
321	30	\$4,808.80	0	\$0.00
322	6	\$1,038.70	0	\$0.00
324	23	\$6,851.80	0	\$0.00
327	2	\$275.00	0	\$0.00
329	1	\$226.70	0	\$0.00
Plan Total:	62	\$13,201.00	0	\$0.00
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KAICED CD. ADV	ANTACE			
KAISER SR. ADV		¢ο οος οο		#0.00
394	15	\$2,335.60	0	\$0.00
397	3	\$424.70	0	\$0.00
398	6	\$1,890.80	0	\$0.00
403	11594	\$1,761,480.71	3	\$90.60
413	1607	\$255,941.48	0	\$0.00
418	6078	\$1,882,249.20	0	\$0.00
419	236	\$32,428.10	0	\$0.00
426	244	\$37,675.25	0	\$0.00
427	38	\$5,152.60	0	\$0.00
445	2	\$340.20	0	\$0.00
446	1	\$127.50	0	\$0.00
451	35	\$5,143.40	0	\$0.00
455	4	\$658.80	0	\$0.00
457	11	\$3,214.90	0	\$0.00
458	1	\$170.10	0	\$0.00
459	1	\$340.20	0	\$0.00
462	79	\$11,622.60	0	\$0.00
465	6	\$933.80	0	\$0.00
466	26	\$7,880.80	0	\$0.00
472	29	\$3,555.40	0	\$0.00
476	3	\$393.00	0	\$0.00
478	18	\$6,159.20	0	\$0.00
479	1	\$144.60	0	\$0.00
482	76	\$12,172.70	0	\$0.00
486	4	\$618.80	0	\$0.00
488	43	\$15,335.20	0	\$0.00
491	1	\$148.50	0	\$0.00
Plan Total:	· · · · · · · · · · · · · · · · · · ·			
FIAII I ULAI.	20,162	\$4,048,538.14	3	\$90.60

MEDICARE NO LOCAL 1014 - 73122

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	291	\$43,815.40	0	\$0.00
613	83	\$25,402.60	0	\$0.00
Plan Total:	374	\$69,218.00	0	\$0.00
UNITED HEALTH	CARE GROUP M	EDICARE ADV. HM	0	
701	1892	\$294,627.30	1	\$36.50
702	382	\$66,378.70	0	\$0.00
703	1261	\$403,265.30	0	\$0.00
704	95	\$15,787.40	0	\$0.00
705	36	\$12,552.30	0	\$0.00
Plan Total:	3,666	\$792,611.00	1	\$36.50
Grand Total:	37,136	\$7,605,300.60	8	\$377.80

MEDICARE - 73122

		PATPERIOD	7/3/1/2022	
Deduction Code	No of Members	Reimbursement	No. of	Penalty
Deduction Gode	No. of McIlibers	Amount	Penalties	Amount
ANTHEM BC III				
240	7233	\$1,104,867.80	2	\$148.30
241	134	\$19,223.10	0	\$0.00
242	878	\$138,940.10	0	\$0.00
243	4303	\$1,354,579.56	1	\$59.40
244	17	\$2,536.00	0	\$0.00
245	57	\$8,466.00	0	\$0.00
246	17	\$2,370.60	0	\$0.00
247	149	\$24,911.40	0	\$0.00
248	11	\$2,874.50	1	\$43.00
249	56	\$17,983.40	0	\$0.00
250	17	\$4,980.00	0	\$0.00
Plan Total:			4	
Piali Tolai.	12,872	\$2,681,732.46	4	\$250.70
CICNA PREEER	DEDi4k DV			
CIGNA - PREFER		#4.000.00		#0.00
321	30	\$4,808.80	0	\$0.00
322	6	\$1,038.70	0	\$0.00
324	23	\$6,851.80	0	\$0.00
327	2	\$275.00	0	\$0.00
329	1	\$226.70	0	\$0.00
Plan Total:	62	\$13,201.00	0	\$0.00
KAISER SR. ADV				
394	15	\$2,335.60	0	\$0.00
397	3	\$424.70	0	\$0.00
398	6	\$1,890.80	0	\$0.00
403	11594	\$1,761,480.71	3	\$90.60
413	1607	\$255,941.48	0	\$0.00
418	6078	\$1,882,249.20	0	\$0.00
419	236	\$32,428.10	0	\$0.00
426	244	\$37,675.25	0	\$0.00
427	38	\$5,152.60	0	\$0.00
445	2	\$340.20	0	\$0.00
446	1	\$127.50	0	\$0.00
451	35	\$5,143.40	0	\$0.00
455	4	\$658.80	0	\$0.00
457	11	\$3,214.90	0	\$0.00
458	1	\$170.10	0	\$0.00
459	1	\$340.20	0	\$0.00
462	79	\$11,622.60	0	\$0.00
465	6	\$933.80	0	\$0.00
466	26	\$7,880.80	0	\$0.00
472	29	\$3,555.40	0	\$0.00
476	3	\$393.00	0	\$0.00
478	18	\$6,159.20	0	\$0.00
479	1	\$144.60	0	\$0.00
482	76	\$12,172.70	0	\$0.00
486	4	\$618.80	0	\$0.00
488	43	\$15,335.20	0	\$0.00
491	1	\$148.50	0	\$0.00
Plan Total:	20,162	\$4,048,538.14	3	\$90.60

MEDICARE - 73122

		PATPERIOD	113112022	
Deduction Code	No. of Members	Reimbursement	No. of	Penalty
		Amount	Penalties	Amount
SCAN				
611	291	\$43,815.40	0	\$0.00
613	83	\$25,402.60	0	\$0.00
Plan Total:	374	\$69,218.00	0	\$0.00
UNITED HEALTH	CARE GROUP M	EDICARE ADV. HM	10	
701	1892	\$294,627.30	1	\$36.50
702	382	\$66,378.70	0	\$0.00
703	1261	\$403,265.30	0	\$0.00
704	95	\$15,787.40	0	\$0.00
705	36	\$12,552.30	0	\$0.00
Plan Total:	3,666	\$792,611.00	1	\$36.50
LOCAL 1014				
804	181	\$38,204.20	0	\$0.00
805	205	\$40,653.60	0	\$0.00
806	668	\$255,362.34	0	\$0.00
807	43	\$9,355.40	0	\$0.00
808	18	\$6,851.39	0	\$0.00
812	257	\$46,730.10	0	\$0.00
813	2	\$340.20	0	\$0.00
Plan Total:	1,374	\$397,497.23	0	\$0.00
Grand Total:	38,510	\$8,002,797.83	8	\$377.80

Carrier Codes	Membe Count		Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
<u>Medical Plan</u>							
Anthem Blue Cross Pro	udent Buy	er Plan					
201	496	\$449,479.86	\$66,009.08	\$394,067.62	\$460,076.70	(\$2,931.04)	\$457,145.66
202	251	\$446,750.64	\$40,243.04	\$396,053.53	\$436,296.57	(\$1,736.25)	\$434,560.32
203	76	\$152,025.08	\$28,844.74	\$127,181.00	\$156,025.74	\$0.00	\$156,025.74
204	25	\$28,979.00	\$9,087.81	\$19,891.19	\$28,979.00	\$0.00	\$28,979.00
SUBTOTAL	848	\$1,077,234.58	\$144,184.67	\$937,193.34	\$1,081,378.01	(\$4,667.29)	\$1,076,710.72
Anthem Blue Cross I							
211	610	\$779,263.29	\$46,628.24	\$737,728.61	\$784,356.85	(\$2.00)	\$784,354.85
212	240	\$553,591.46	\$30,550.83	\$527,634.75	\$558,185.58	(\$14,557.10)	\$543,628.48
213	71	\$192,343.26	\$22,485.20	\$177,981.24	\$200,466.44	\$0.00	\$200,466.44
214	22	\$37,103.66	\$4,654.80	\$32,448.86	\$37,103.66	\$0.00	\$37,103.66
215	2	\$865.78	\$34.64	\$831.14	\$865.78	\$0.00	\$865.78
SUBTOTAL	945	\$1,563,167.45	\$104,353.71	\$1,476,624.60	\$1,580,978.31	(\$14,559.10)	\$1,566,419.21
Anthem Blue Cross II							
221	2,299	\$2,939,773.95	\$156,236.88	\$2,801,335.82	\$2,957,572.70	(\$6,376.95)	\$2,951,195.75
222	2,032	\$4,692,893.58	\$114,626.01	\$4,479,590.60	\$4,594,216.61	(\$6,891.18)	\$4,587,325.43
223	895	\$2,430,026.82	\$95,250.47	\$2,309,152.81	\$2,404,403.28	(\$5,416.12)	\$2,398,987.16
224	200	\$337,306.00	\$33,292.00	\$322,545.83	\$355,837.83	\$0.00	\$355,837.83
SUBTOTAL	5,426	\$10,400,000.35	\$399,405.36	\$9,912,625.06	\$10,312,030.42	(\$18,684.25)	\$10,293,346.17

Carrier Codes	Member Count	r Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Anthem Blue Cross III							
240	7,269	\$3,789,814.84	\$521,792.83	\$3,304,268.02	\$3,826,060.85	(\$8,331.28)	\$3,817,729.57
241	134	\$225,709.68	\$21,176.85	\$192,919.42	\$214,096.27	\$0.00	\$214,096.27
242	875	\$1,467,112.92	\$92,571.41	\$1,369,550.62	\$1,462,122.03	\$0.00	\$1,462,122.03
243	4,312	\$4,476,277.28	\$486,838.34	\$3,955,753.35	\$4,442,591.69	(\$8,297.91)	\$4,434,293.78
244	17	\$15,822.92	\$2,029.05	\$13,793.87	\$15,822.92	\$0.00	\$15,822.92
245	57	\$53,984.08	\$6,459.44	\$46,593.88	\$53,053.32	\$0.00	\$53,053.32
246	17	\$35,176.06	\$3,103.77	\$32,072.29	\$35,176.06	\$0.00	\$35,176.06
247	152	\$316,584.54	\$18,291.53	\$290,018.29	\$308,309.82	\$0.00	\$308,309.82
248	11	\$15,881.03	\$1,126.11	\$14,754.92	\$15,881.03	\$0.00	\$15,881.03
249	57	\$83,736.34	\$6,005.44	\$82,054.09	\$88,059.53	\$0.00	\$88,059.53
250	17	\$27,499.88	\$841.17	\$26,658.71	\$27,499.88	\$0.00	\$27,499.88
SUBTOTAL	12,918	\$10,507,599.57	\$1,160,235.94	\$9,328,437.46	\$10,488,673.40	(\$16,629.19)	\$10,472,044.21
CIGNA Network Model	Plan						
301	251	\$416,110.31	\$107,236.36	\$308,873.95	\$416,110.31	(\$1,655.81)	\$414,454.50
302	67	\$200,403.70	\$49,808.44	\$150,595.26	\$200,403.70	(\$2,989.10)	\$197,414.60
303	6	\$21,188.94	\$5,791.77	\$11,865.68	\$17,657.45	\$0.00	\$17,657.45
304	13	\$28,585.96	\$13,339.71	\$15,246.25	\$28,585.96	\$0.00	\$28,585.96
SUBTOTAL	337	\$666,288.91	\$176,176.28	\$486,581.14	\$662,757.42	(\$4,644.91)	\$658,112.51

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
IGNA Preferred w	/ Rx - Phoenix,	AZ					
321	30	\$11,594.70	\$1,453.21	\$10,141.49	\$11,594.70	\$0.00	\$11,594.70
322	6	\$10,318.68	\$687.91	\$11,350.55	\$12,038.46	\$0.00	\$12,038.46
324	23	\$17,548.54	\$2,227.91	\$15,320.63	\$17,548.54	\$0.00	\$17,548.54
327	2	\$4,521.70	\$452.17	\$4,069.53	\$4,521.70	\$0.00	\$4,521.70
329	1	\$1,344.91	\$0.00	\$1,344.91	\$1,344.91	\$0.00	\$1,344.91
SUBTOTAL	62	\$45,328.53	\$4,821.20	\$42,227.11	\$47,048.31	\$0.00	\$47,048.31

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser/Senior Advan	tage						
401	1,540	\$1,779,394.92	\$149,219.36	\$1,676,080.71	\$1,825,300.07	(\$2,287.14)	\$1,823,012.93
403	11,620	\$3,066,050.86	\$292,792.09	\$2,804,500.69	\$3,097,292.78	(\$9,964.74)	\$3,087,328.04
404	525	\$621,317.19	\$12,309.32	\$613,715.75	\$626,025.07	(\$1,177.37)	\$624,847.70
405	1,258	\$1,445,558.62	\$18,853.14	\$1,427,911.02	\$1,446,764.16	(\$3,444.54)	\$1,443,319.62
411	1,884	\$4,310,626.02	\$199,347.60	\$4,210,146.63	\$4,409,494.23	\$0.00	\$4,409,494.23
413	1,600	\$2,259,795.88	\$106,640.52	\$2,156,607.15	\$2,263,247.67	\$0.00	\$2,263,247.67
414	74	\$171,127.96	\$2,405.04	\$168,722.92	\$171,127.96	\$0.00	\$171,127.96
418	6,041	\$3,141,471.48	\$233,656.43	\$2,888,664.31	\$3,122,320.74	(\$5,675.98)	\$3,116,644.76
419	236	\$340,830.28	\$4,181.58	\$335,215.79	\$339,397.37	\$1,431.21	\$340,828.58
420	114	\$267,665.16	\$1,127.02	\$266,538.14	\$267,665.16	(\$2,347.94)	\$265,317.22
421	9	\$10,292.13	\$1,372.29	\$8,919.84	\$10,292.13	\$0.00	\$10,292.13
422	253	\$579,564.50	\$2,281.75	\$572,719.25	\$575,001.00	\$0.00	\$575,001.00
423	2	\$4,625.08	\$0.00	\$4,625.08	\$4,625.08	\$0.00	\$4,625.08
426	242	\$341,909.88	\$2,578.33	\$337,930.28	\$340,508.61	(\$1,401.27)	\$339,107.34
427	38	\$54,418.28	\$1,374.77	\$53,043.51	\$54,418.28	\$0.00	\$54,418.28
428	46	\$106,588.90	\$834.17	\$105,754.73	\$106,588.90	\$0.00	\$106,588.90
429	3	\$7,043.82	\$0.00	\$7,043.82	\$7,043.82	\$0.00	\$7,043.82
430	148	\$340,667.64	\$3,703.88	\$332,391.04	\$336,094.92	\$0.00	\$336,094.92
431	3	\$6,951.45	\$0.00	\$6,951.45	\$6,951.45	\$0.00	\$6,951.45
SUBTOTAL	25,636	\$18,855,900.05	\$1,032,677.29	\$17,977,482.11	\$19,010,159.40	(\$24,867.77)	\$18,985,291.63

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
(aiser - Colorado							
450	4	\$4,245.32	\$806.61	\$3,438.71	\$4,245.32	\$0.00	\$4,245.32
451	35	\$10,496.50	\$1,319.54	\$9,176.96	\$10,496.50	\$0.00	\$10,496.50
453	9	\$21,096.54	\$423.00	\$20,673.54	\$21,096.54	\$0.00	\$21,096.54
454	1	\$3,164.09	\$455.03	\$2,709.06	\$3,164.09	\$0.00	\$3,164.09
455	4	\$5,404.92	\$0.00	\$5,404.92	\$5,404.92	\$0.00	\$5,404.92
457	11	\$6,487.80	\$1,238.58	\$5,249.22	\$6,487.80	\$0.00	\$6,487.80
458	1	\$2,341.41	\$0.00	\$2,341.41	\$2,341.41	\$0.00	\$2,341.41
459	1	\$1,641.13	\$65.65	\$1,575.48	\$1,641.13	\$0.00	\$1,641.13
SUBTOTAL	66	\$54,877.71	\$4,308.41	\$50,569.30	\$54,877.71	\$0.00	\$54,877.71
aiser - Georgia							
441	4	\$4,660.96	\$0.00	\$4,660.96	\$4,660.96	\$0.00	\$4,660.96
442	7	\$8,156.68	\$0.00	\$8,156.68	\$8,156.68	\$0.00	\$8,156.68
445	2	\$3,161.42	\$0.00	\$3,161.42	\$3,161.42	\$0.00	\$3,161.42
446	1	\$1,580.71	\$0.00	\$1,580.71	\$1,580.71	\$0.00	\$1,580.71
461	12	\$13,982.88	\$1,421.59	\$11,396.05	\$12,817.64	\$0.00	\$12,817.64
462	79	\$33,612.13	\$4,492.95	\$29,119.18	\$33,612.13	\$0.00	\$33,612.13
463	2	\$4,640.98	\$1,195.39	\$3,445.59	\$4,640.98	\$0.00	\$4,640.98
465	6	\$9,484.26	\$948.43	\$8,535.83	\$9,484.26	\$0.00	\$9,484.26
466	26	\$21,864.44	\$840.94	\$21,023.50	\$21,864.44	\$0.00	\$21,864.44
SUBTOTAL	139	\$101,144.46	\$8,899.30	\$91,079.92	\$99,979.22	\$0.00	\$99,979.22

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Hawaii							
471	6	\$5,529.18	\$0.00	\$5,529.18	\$5,529.18	\$0.00	\$5,529.18
472	28	\$13,033.47	\$1,815.69	\$9,381.40	\$11,197.09	\$0.00	\$11,197.09
473	1	\$1,852.78	\$577.39	\$1,275.39	\$1,852.78	\$0.00	\$1,852.78
474	4	\$7,332.20	\$0.00	\$5,499.15	\$5,499.15	\$0.00	\$5,499.15
475	2	\$5,489.16	\$71.04	\$5,418.12	\$5,489.16	\$0.00	\$5,489.16
476	3	\$4,082.88	\$1,878.12	\$2,204.76	\$4,082.88	\$0.00	\$4,082.88
477	1	\$2,764.31	\$467.25	\$2,297.06	\$2,764.31	\$0.00	\$2,764.31
478	18	\$15,999.48	\$2,168.81	\$13,830.67	\$15,999.48	\$0.00	\$15,999.48
479	1	\$2,292.21	\$0.00	\$2,292.21	\$2,292.21	\$0.00	\$2,292.21
SUBTOTAL	64	\$58,375.67	\$6,978.30	\$47,727.94	\$54,706.24	\$0.00	\$54,706.24
Kaiser - Oregon							
481	4	\$4,524.72	\$837.07	\$3,687.65	\$4,524.72	\$0.00	\$4,524.72
482	76	\$36,625.92	\$5,811.93	\$32,254.63	\$38,066.56	\$0.00	\$38,066.56
483	1	\$1,383.12	\$107.73	\$1,275.39	\$1,383.12	\$0.00	\$1,383.12
484	3	\$6,757.08	\$90.09	\$6,666.99	\$6,757.08	\$0.00	\$6,757.08
486	4	\$6,412.40	\$769.49	\$5,642.91	\$6,412.40	\$0.00	\$6,412.40
488	43	\$41,015.12	\$5,475.02	\$38,395.38	\$43,870.40	\$0.00	\$43,870.40
489	1	\$1,132.62	\$0.00	\$1,132.62	\$1,132.62	\$0.00	\$1,132.62
491	1	\$1,604.54	\$0.00	\$1,604.54	\$1,604.54	\$0.00	\$1,604.54
498	2	\$5,008.60	\$414.48	\$4,594.12	\$5,008.60	\$0.00	\$5,008.60
SUBTOTAL	135	\$104,464.12	\$13,505.81	\$95,254.23	\$108,760.04	\$0.00	\$108,760.04

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
SCAN Health Plan							
611	283	\$83,109.60	\$16,751.65	\$61,796.35	\$78,548.00	(\$850.80)	\$77,697.20
613	81	\$46,579.60	\$8,462.93	\$37,555.47	\$46,018.40	(\$561.20)	\$45,457.20
SUBTOTAL	364	\$129,689.20	\$25,214.58	\$99,351.82	\$124,566.40	(\$1,412.00)	\$123,154.40
UHC Medicare Adv.							
701	1,883	\$642,039.65	\$73,272.74	\$570,313.13	\$643,585.87	(\$1,688.25)	\$641,897.62
702	380	\$631,778.79	\$32,664.40	\$598,921.40	\$631,585.80	\$0.00	\$631,585.80
703	1,258	\$842,961.60	\$84,044.54	\$766,234.96	\$850,279.50	(\$664.90)	\$849,614.60
704	100	\$188,249.16	\$10,445.99	\$163,168.21	\$173,614.20	\$0.00	\$173,614.20
705	36	\$32,869.69	\$1,563.51	\$34,834.06	\$36,397.57	\$0.00	\$36,397.57
706	1	\$372.13	\$14.89	\$357.24	\$372.13	\$0.00	\$372.13
SUBTOTAL	3,658	\$2,338,271.02	\$202,006.07	\$2,133,829.00	\$2,335,835.07	(\$2,353.15)	\$2,333,481.92
United Healthcare							
707	514	\$681,517.16	\$67,846.41	\$606,964.94	\$674,811.35	\$1,863.28	\$676,674.63
708	484	\$1,163,206.08	\$65,965.62	\$1,052,661.64	\$1,118,627.26	\$0.00	\$1,118,627.26
709	376	\$1,062,257.41	\$80,207.40	\$973,411.48	\$1,053,618.88	\$0.00	\$1,053,618.88
SUBTOTAL	1,374	\$2,906,980.65	\$214,019.43	\$2,633,038.06	\$2,847,057.49	\$1,863.28	\$2,848,920.77

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
ocal 1014 Firefighters							
801	78	\$98,241.78	\$3,451.03	\$97,158.63	\$100,609.66	\$0.00	\$100,609.66
802	319	\$724,442.62	\$20,529.65	\$703,912.97	\$724,442.62	\$0.00	\$724,442.62
803	350	\$937,594.00	\$27,645.64	\$924,644.51	\$952,290.15	\$0.00	\$952,290.15
804	183	\$230,490.33	\$5,415.85	\$226,333.99	\$231,749.84	(\$39,438.23)	\$192,311.61
805	206	\$467,821.88	\$12,263.31	\$453,287.59	\$465,550.90	(\$40,653.60)	\$424,897.30
806	668	\$1,517,014.64	\$36,880.72	\$1,480,133.92	\$1,517,014.64	(\$257,633.32)	\$1,259,381.32
807	44	\$117,868.96	\$642.92	\$111,868.36	\$112,511.28	(\$9,355.40)	\$103,155.88
808	18	\$48,219.12	\$214.31	\$48,004.81	\$48,219.12	(\$6,851.39)	\$41,367.73
809	24	\$30,228.24	\$3,980.02	\$27,507.73	\$31,487.75	\$0.00	\$31,487.75
810	10	\$22,709.80	\$3,043.12	\$19,666.68	\$22,709.80	\$0.00	\$22,709.80
811	1	\$2,678.84	\$0.00	\$2,678.84	\$2,678.84	\$0.00	\$2,678.84
812	257	\$323,694.07	\$23,401.51	\$301,552.07	\$324,953.58	(\$45,470.59)	\$279,482.99
813	2	\$4,541.96	\$0.00	\$4,541.96	\$4,541.96	(\$340.20)	\$4,201.76
SUBTOTAL	2,160	\$4,525,546.24	\$137,468.08	\$4,401,292.06	\$4,538,760.14	(\$399,742.73)	\$4,139,017.41
aiser - Washington							
393	6	\$8,576.94	\$1,536.78	\$7,040.16	\$8,576.94	\$0.00	\$8,576.94
394	15	\$6,741.90	\$1,303.44	\$5,438.46	\$6,741.90	\$0.00	\$6,741.90
395	3	\$7,982.25	\$1,766.29	\$13,139.02	\$14,905.31	\$0.00	\$14,905.31
396	1	\$4,448.60	\$1,739.54	\$2,709.06	\$4,448.60	\$0.00	\$4,448.60
397	3	\$5,042.16	\$0.00	\$5,042.16	\$5,042.16	\$0.00	\$5,042.16
398	6	\$5,333.52	\$1,031.15	\$4,302.37	\$5,333.52	\$0.00	\$5,333.52
SUBTOTAL	34	\$38,125.37	\$7,377.20	\$37,671.23	\$45,048.43	\$0.00	\$45,048.43
dical Plan Total	54,166	\$53,372,993.88	\$3,641,631.63	\$49,750,984.38	\$53,392,616.01	(\$485,697.11)	\$52,906,918.90

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
<u>Dental/Vision Plan</u>							
CIGNA Indemnity Denta	I/Vision						
501	25,559	\$1,314,398.04	\$139,664.92	\$1,194,479.65	\$1,334,144.57	(\$4,422.53)	\$1,329,722.04
502	23,745	\$2,481,176.06	\$188,526.20	\$2,295,411.88	\$2,483,938.08	(\$3,501.00)	\$2,480,437.08
503	10	\$626.70	\$52.65	\$574.05	\$626.70	\$0.00	\$626.70
SUBTOTAL	49,314	\$3,796,200.80	\$328,243.77	\$3,490,465.58	\$3,818,709.35	(\$7,923.53)	\$3,810,785.82
CIGNA Dental HMO/Vision	on						
901	3,747	\$181,660.93	\$21,032.03	\$165,190.62	\$186,222.65	(\$537.78)	\$185,684.87
902	2,795	\$271,949.09	\$20,924.81	\$254,468.39	\$275,393.20	(\$291.27)	\$275,101.93
903	1	\$48.99	\$21.56	\$27.43	\$48.99	\$0.00	\$48.99
SUBTOTAL	6,543	\$453,659.01	\$41,978.40	\$419,686.44	\$461,664.84	(\$829.05)	\$460,835.79
Dental/Vision Plan Total	55,857	\$4,249,859.81	\$370,222.17	\$3,910,152.02	\$4,280,374.19	(\$8,752.58)	\$4,271,621.61
GRAND TOTALS	110,023	\$57,622,853.69	\$4,011,853.80	\$53,661,136.40	\$57,672,990.20	(\$494,449.69)	\$57,178,540.51

CARRIER DEDUCTION

PREMIUMS* CODES DEDUCTION CODE DEFINITIONS

Anthem Blue Cross Prudent Buyer Plan

\$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

Anthem Blue Cross Plan I

\$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

Anthem Blue Cross Plan II

\$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

Anthem Blue Cross Plan III

\$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.

DEDUCTION CODE DEFINITIONS

CIGNA Network Model Plan

\$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

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

\$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.

DEDUCTION CODE DEFINITIONS

Kaiser (continued)		
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")
Kaiser Colorado		
\$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")
Kaiser Georgia		
\$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.

DEDUCTION CODE DEFINITIONS

Kaiser Georgia	(continued)	
\$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"
Kaiser Hawaii		
\$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)
Kaiser Oregon		
\$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.

	CARRIER
	DEDUCTION
PRFMILIMS*	CODES

DEDUCTION CODE DEFINITIONS

Kaiser Oregon (continued)

\$1,571.76	491	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 with Medicare Par 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.

*Benchmark premiums are bolded.

	CARRIER
	DEDUCTION
PREMIUMS*	CODES

CODES DEDUCTION CODE DEFINITIONS

SCAN Health Plan

\$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.)

United Healthcare Medicare Advantage (UHCMA)

(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

United Healthcare (UHC)

(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

Local 1014 Firefighters

\$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.

DEDUCTION CODE DEFINITIONS

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

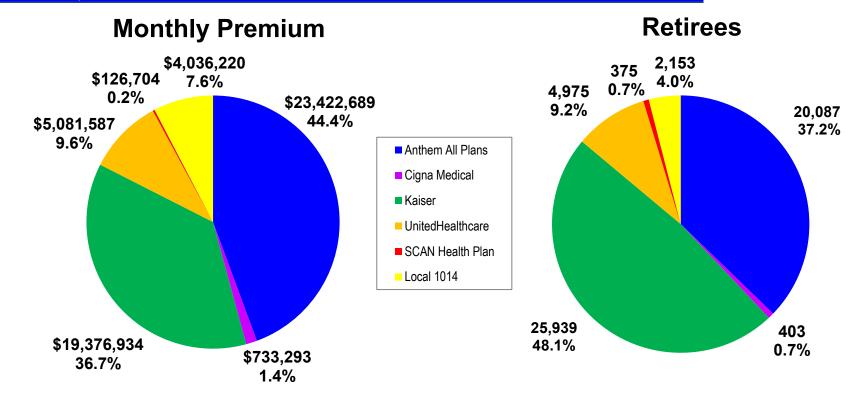


Premium & Enrollment

Coverage Month Ending June 2022

Carrier / Plan	Monthly Premium	Percent of Total	Retirees	Percent of Total
Anthem All Plans	\$23,422,689	44.4%	20,087	37.2%
Cigna Medical	\$733,293	1.4%	403	0.7%
Kaiser	\$19,376,934	36.7%	25,939	48.1%
UnitedHealthcare	\$5,081,587	9.6%	4,975	9.2%
SCAN Health Plan	\$126,704	0.2%	375	0.7%
Local 1014	\$4,036,220	7.6%	2,153	4.0%
Combined Medical	\$52,777,427	100.0%	53,932	100.0%

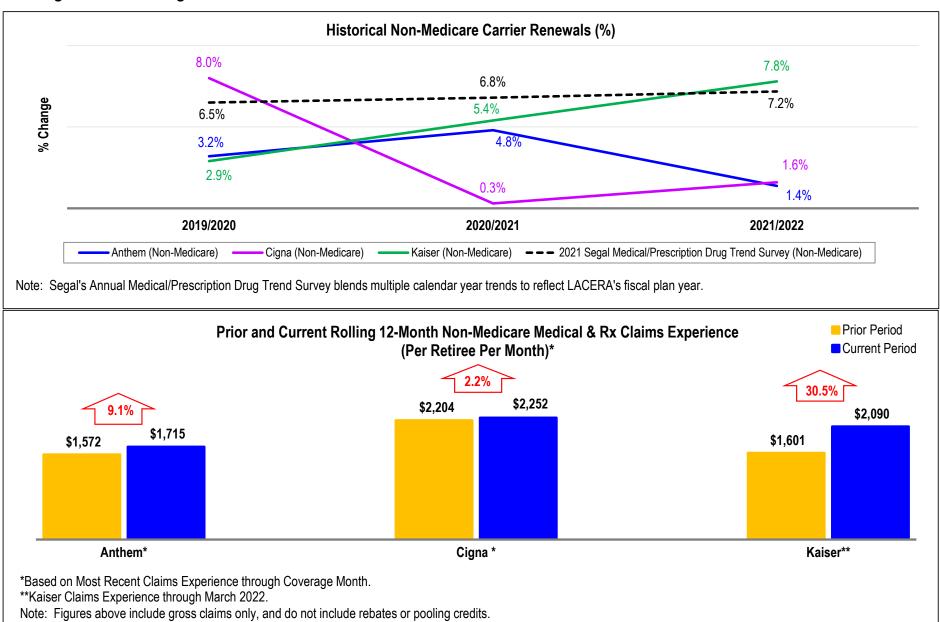
Cigna Dental & Vision	\$4,301,002	55,653
(PPO and HMO)	+ -,	



Note: Premiums <u>include</u> LACERA's Administrative Fee of \$8.00 per member, per plan, per month. **Segal | Premium & Enrollment Exhibit**

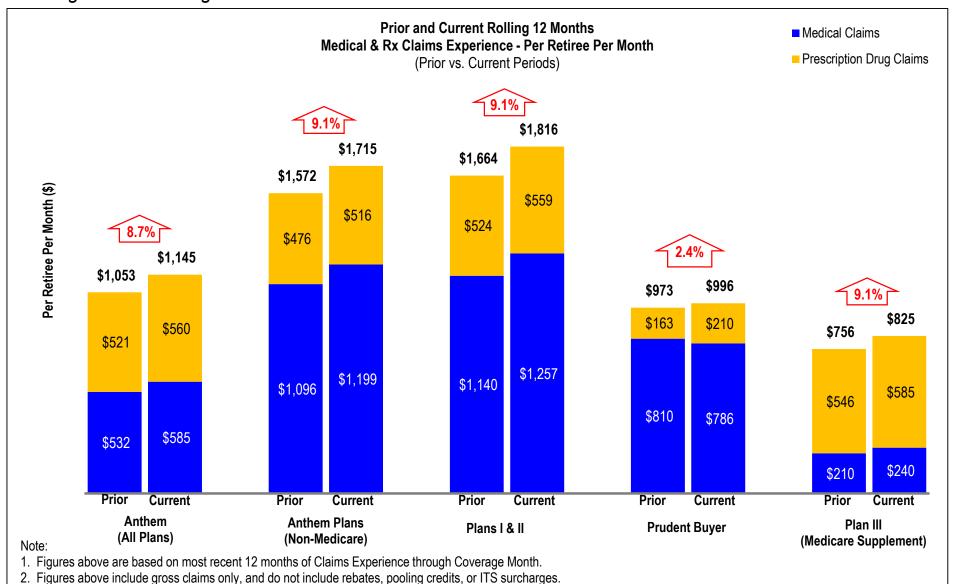


Claims Experience by Carrier Coverage Month Ending June 2022





Anthem Claims Experience By Plan Coverage Month Ending June 2022



Segal | Anthem Exhibit 5732945_1

3. Prudent Buyer pharmacy claims are retroactively updated due to the timing of Anthem PBM's receipt of recorded claims.

4. Anthem applies ITS surcharges for Plans I-III, and Prudent Buyer, which add an estimated 0.5% to claims.



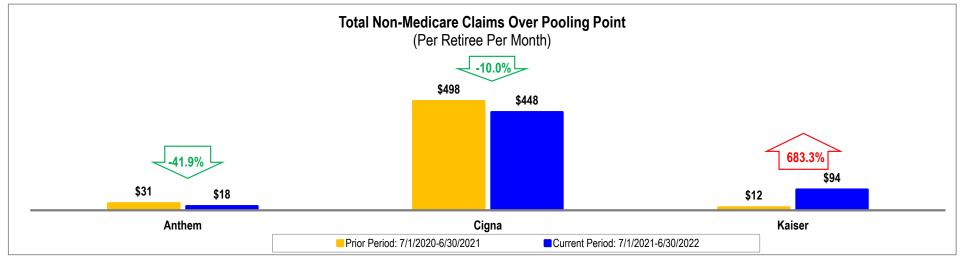
Kaiser Utilization Coverage Month Ending June 2022

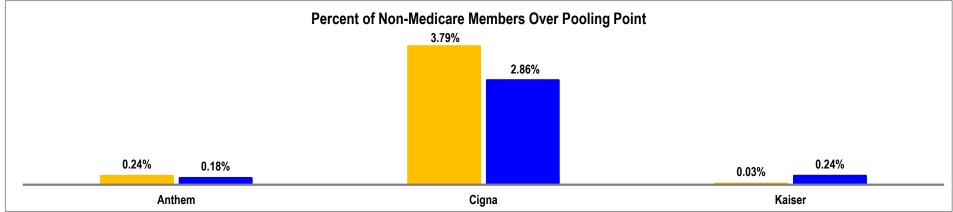
- Kaiser insures approximately 25,000 LACERA retirees with the majority enrolled in Medicare Advantage plans.
- Kaiser's Periodic Utilization Report (PUR) monitors utilization patterns of LACERA's non-Medicare population in Southern California.

Category	Current Period 4/1/2021 - 3/31/2022	Prior Period 4/1/2020 - 3/31/2021	Change
Average Contract Size	2.37	2.39	-0.84%
Average Members	8,796	8,854	-0.66%
Inpatient Claims Per Member Per Month	\$265.30	\$161.29	64.49%
Outpatient Claims Per Member Per Month	\$364.21	\$284.05	28.22%
Pharmacy Per Member Per Month	\$118.54	\$111.34	6.47%
Other Per Member Per Month	\$135.16	\$113.87	18.70%
Total Claims Per Member Per Month	\$883.21	\$670.55	31.71%
Total Paid Claims	\$93,227,904	\$71,242,911	30.86%
Large Claims over \$475,000 Pooling Point			
Number of Claims over Pooling Point	9	1	
Amount over Pooling Point	\$4,173,893	\$540,913	671.64%
% of Total Paid Claims	4.48%	0.76%	
Inpatient Days / 1000	406.4	327.7	24.02%
Inpatient Admits / 1000	52.3	49.5	5.66%
Outpatient Visits / 1000	14,666.9	11,413.6	28.50%
Pharmacy Scripts Per Member Per Year	10.3	10.1	1.98%



High Cost Claimants (Anthem, Cigna, & Kaiser) Coverage Month Ending June 2022





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 April through March.

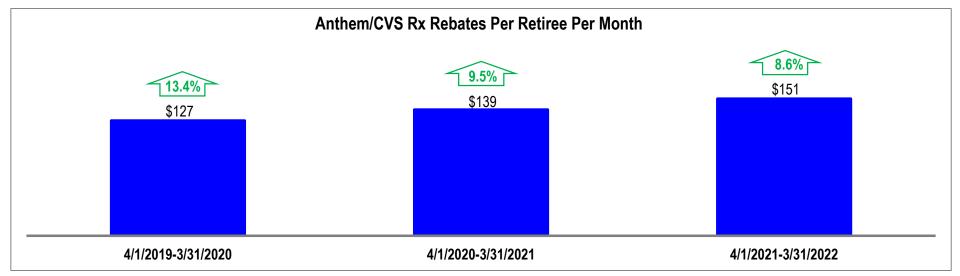
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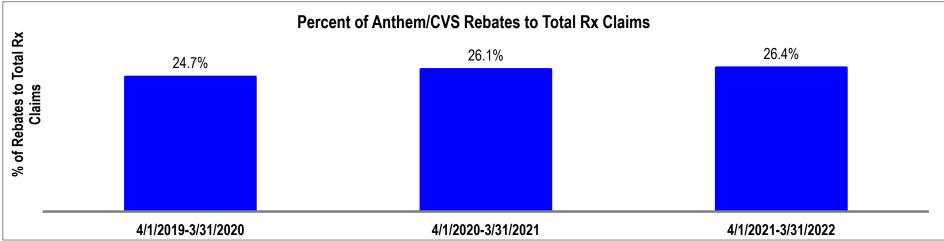
Pooling Points by Carrier:

- 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 \$500,000.



Prescription Drug Rebates (Anthem)
Coverage Month Ending June 2022





Rebates Overview:

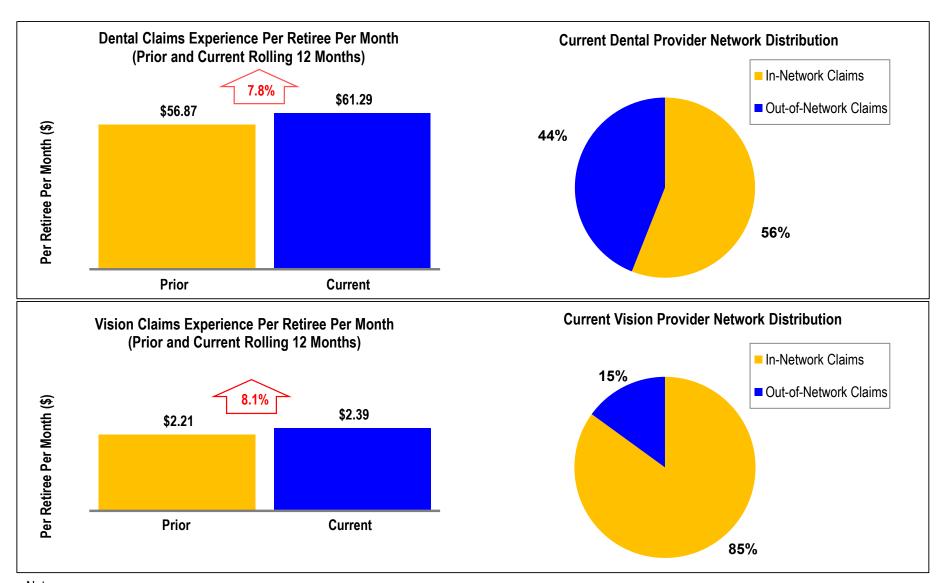
Pharmacy Benefit Managers negotiate volume-based rebates with drug manufacturers of brand medications. Manufacturer rebates are passed on to plan sponsors and are used to offset pharmaceutical claims expenses.

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 June 2022



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.