

IN PERSON & VIRTUAL BOARD MEETING

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



TO VIEW VIA WEB



TO PROVIDE PUBLIC COMMENT

Members of the public may address the Committee orally and in writing. To provide Public Comment, you should visit the above link and complete the request form by selecting whether you will provide oral or written comment from the options located under Options next to the Committee meeting.

Attention: If you have any questions, you may email PublicComment@lacera.com. If you would like to make a public comment during the committee meeting, review the [Public Comment instructions](#).

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

AGENDA

A REGULAR MEETING OF THE INSURANCE, BENEFITS & LEGISLATIVE

COMMITTEE AND BOARD OF RETIREMENT*

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

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

8:30 A.M., WEDNESDAY, AUGUST 2, 2023

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

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

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

COMMITTEE TRUSTEES:

Les Robbins, Chair
Vivian H. Gray, Vice Chair
Shawn R. Kehoe, Trustee
Ronald Okum, Trustee
JP Harris, Alternate Trustee

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

III. APPROVAL OF MINUTES

- A. Approval of the Minutes of the Regular Meeting of July 6, 2023

IV. PUBLIC COMMENT

(Members of the public may address the Committee orally and in writing. To provide Public Comment, you should visit <https://LACERA.com/leadership/board-meetings> and complete the request form by selecting whether you will provide oral or written comment from the options located under Options next to the Committee meeting.

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

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

V. REPORTS

- A. **Engagement Report for July 2023**
Barry W. Lew, Legislative Affairs Officer
(For Information Only)
- B. **Staff Activities Report for July 2023**
Cassandra Smith, Director, Retiree Healthcare
(For Information Only)
- C. **LACERA Claims Experience**
Michael Szeto, Segal Consulting
(Presentation)
- D. **Federal Legislation**
Stephen Murphy, Segal Consulting
(For Information Only)

VI. ITEMS FOR STAFF REVIEW

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

VII. ITEMS FOR FUTURE AGENDAS

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

VIII. GOOD OF THE ORDER

(For Information Purposes Only)

IX. ADJOURNMENT

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

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

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

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

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

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

8:30 A.M. – 8:58 A.M., THURSDAY, JULY 6, 2023

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

COMMITTEE TRUSTEES

PRESENT: Les Robbins, Chair (In-Person)

Vivian H. Gray, Vice Chair (In-Person)

JP Harris, Alternate Trustee (In-Person)

ABSENT: Shawn R. Kehoe, Trustee

Ronald Okum, Trustee

OTHER BOARD OF RETIREMENT TRUSTEES

Alan Bernstein, Trustee (Teleconference Due to Just
Cause under Section 54953(f))

Keith Knox, Trustee (In-Person)

Antonio Sanchez, Trustee (In-Person) (*arrived at 8:36 a.m.*)

Herman B. Santos, Trustee (In-Person)

STAFF, ADVISORS AND 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

Segal Consulting

Stephen Murphy, Sr. Vice President

Debbie Donaldson, Sr. Vice President

Michael Szeto, Sr. Actuarial Associate

I. CALL TO ORDER

This meeting was called to order by Chair Robbins at 8:30 a.m. In the absence of Trustees Kehoe and Okum, the Chair announced that Trustee Harris, as the alternate, would be a voting member of the Committee.

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

A. Just Cause

B. Action on Emergency Circumstance Requests

C. Statement of Persons Present at AB 2449 Teleconference Locations

A physical quorum was present at the noticed meeting location. There was one request received from Trustee Bernstein related to Just Cause (A) due to caregiving needs of a designated person. Trustee Bernstein confirmed there were no individuals 18 years or older present at the teleconference location. No requests were received for Emergency Circumstances (B).

III. APPROVAL OF MINUTES

A. Approval of the Minutes of the Regular Meeting of June 7, 2023

Trustee Harris made a motion, Trustee Gray seconded, to approve the minutes of the regular meeting of June 7, 2023. The motion passed by the following roll call vote:

Yes: Gray, Harris, Robbins

No: None

Absent: Kehoe, Okum

IV. PUBLIC COMMENT

There were no requests from the public to speak.

V. NON-CONSENT ITEMS

A. **Legislative Proposal-Prepaid Cards**

Recommendation as submitted by Barry W. Lew, Legislative Affairs Officer: That the Committee recommend the Board of Retirement approve submission of a legislative proposal for inclusion in the SACRS 2024 Legislative Platform that would clarify the use of prepaid accounts for the disbursement of retirement benefits. (Memo dated June 23, 2023)

Trustee Harris made a motion, Trustee Robbins seconded, to approve staff recommendation. The motion passed by the following roll call vote:

Yes: Gray, Harris, Robbins

No: None

Absent: Kehoe, Okum

VI. REPORTS

A. **Semi-Annual Report on Approved Engagements**

Barry W. Lew, Legislative Affairs Officer

(For Information Only) (Memo dated June 27, 2023)

The semi-annual report on approved engagements was discussed. This item was received and filed.

B. **Engagement Report for June 2023**

Barry W. Lew, Legislative Affairs Officer

(For Information Only)

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

C. **Staff Activities Report for June 2023**

Cassandra Smith, Director, Retiree Healthcare

(For Information Only)

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

D. **LACERA Claims Experience**

Michael Szeto, Segal Consulting

(For Information Only)

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

E. **Federal Legislation**

Stephen Murphy, Segal Consulting

(For Discussion Purposes)

Segal Consulting gave an update on federal legislation.

VII. ITEMS FOR STAFF REVIEW

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

There was nothing to report.

VIII. ITEMS FOR FUTURE AGENDAS

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

There was nothing to report.

IX. GOOD OF THE ORDER

(For Information Purposes Only)

There was nothing to report.

X. ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at 8:58 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 2023
FOR INFORMATION ONLY**

New Orleans Police Exodus Triggers Unfunded Liability Payments

The City of New Orleans has been experiencing significant attrition in its police department. The city had 1,600 officers before Hurricane Katrina and dropped below 1,200 over the next decade. In 2010, it had about 1,500 officers; since 2020, it is down to 944. As a result of losing so many police officers, the city faces a major fine to cover police pension losses that could total \$38 million over the next 15 years.

The City of New Orleans Municipal Police Employee Retirement System considers the police department as being “partially dissolved” for 2021 and 2022. That triggered a state law that requires the city to pay back the police pension fund for unfunded liabilities, that is, the money the city would have been paying into the system if it had not lost any officers.

The city made its first payment of \$50,314 in June. The city can avoid future payments if it can restore staffing to the 1,119 employees that participated in the pension system in June 2021.

Three small towns in Louisiana also experienced a partial dissolution of their police forces. These were departments with five or fewer officers, so the loss of one or two employees also triggered a fine. [\(Source\)](#) [\(Source\)](#)

Generation X Approaches Retirement

A recent report from the National Institute on Retirement Security (NIRS) examines the retirement preparedness of Generation X, which finds itself sandwiched between the large and culturally powerful Baby Boomers and Millennial generations. Gen Xers were known as the “latch-key kids,” who had less adult supervision during their youth, and this generation tends to garner less attention from the media and researchers.

Generation X is defined as those born between 1965 and 1980. As of December 2020, Gen X represents almost 64 million Americans (20 percent of the population). Some of the social and economic forces that impacted Gen X distinguish them from the Baby Boomers, but these same forces have intensified for Millennials:

- Gen X earned four-year degrees at higher rates than Boomers but at the cost of increased college debt.
- More Gen X women are in the workforce, and this is important for dual-income households where wages have been flat.
- More Gen Xers have had to plan their own retirements since fewer are participating in pension plans.

The report finds relies on data from the U.S. Census' Survey of Income and Program Participation (SIPP), which is longitudinal survey on income, employment, household composition, and government program participation. The following are key findings from the report:

- About 62% of Gen Xers work for an employer who sponsor a plan, and slightly more than half (55%) of Gen Xers are participating in an employer-sponsored retirement savings plan.
- Fourteen percent of Gen Xers are covered by a defined benefit plan, and this coverage level is consistent across gender and race.
- There is a large discrepancy between average and median amount of retirement savings, and the discrepancy holds across gender, race, income, and other measures.
- The typical Gen X household has \$40,000 in retirement savings in private accounts.
- Only a third (35%) of Hispanic Gen Xers are participating in an employer-sponsored retirement savings plan.
- Most Gen Xers, regardless of race, gender, marital status, or income are failing to meet retirement savings targets.
- Shoring up the Social Security trust fund is critical for assuring Gen X of retirement security. Other measures such as increasing plan access for part-time workers and establishing state-run retirement savings programs can help boost Gen X's retirement prospects.

[\(Source\)](#) [\(Source\)](#)

Gen X, the First 401(k) Generation, Is Least Prepared for Retirement

The Transamerica Center for Retirement Studies and Transamerica Institute released a study entitled *Post-Pandemic Realities: The Retirement Outlook of the Multigenerational Workforce*, which covers the Baby Boomers, Gen X, Millennials, and Gen Z.

Of the four generations, members of Gen X feel the least prepared for retirement. One reason may be that Gen X entered the workforce in the 1980s and 1990s when pensions were fading from the retirement landscape and 401(k)s became more prevalent. However, few employers were offering 401(k)s, there was a lack of awareness among workers, and Gen Xers began saving later (age 30) compared to Millennials (age 25) and Gen Z (age 19). Although Boomers started saving later at age 35, they were working during the heyday of pensions.

Only 17% of Gen Xers feel very confident they will be able to retire with a comfortable lifestyle, compared to Millennials (27%), Gen Z (23%), and Baby Boomers (21%). Gen X has a median household retirement savings of \$82,000, compared to \$289,000 for Baby Boomers, \$49,000 for Millennials, and \$29,000 for Gen Z. [\(Source\)](#) [\(Source\)](#)

Retirees Underestimate How Long They Will Live

Although most people know that the average American lives to an age between 75 and 80, less well-known is the fact that life expectancy rises with age. For example, at age 60, an American man can expect to reach 82; a woman, 85. According to a survey by the TIAA Institute, most people do not have longevity literacy, which can lead to underestimating how long one's retirement will be.

According to the survey, one-quarter of Americans underestimated life expectancy of a 60-year-old; another 28% did not know. Even among Baby Boomers, the youngest of which are nearing 60, more than two-fifths underestimated or did not know.

Life spans have increased steadily over the past century. An American born in 1900 could expect to reach age 47. By 1950, it had risen to 68. Lifespan in the U.S. peaked at 79 in 2019 and then dropped during the pandemic.

The lack of longevity literacy can complicate planning for retirement since the biggest financial risk facing retirees is outliving their savings, particularly for those who do not have the lifetime benefits of a pension plan. Many people approaching retirement age wrongly assume that stock market volatility is their biggest financial risk.

People with greater longevity literacy are more likely to save for retirement, more likely to have calculated how much money they will need, and more likely to be satisfied in retirement. Otherwise, people tend to overestimate how much money they have, for instance, by focusing on the rising value of their homes instead of how much they still owe on the mortgage. Other overestimates include how far the funds in a retirement account will go or having only one partner saving for retirement in a two-wage earner household. [\(Source\)](#) [\(Source\)](#)

Harry Markowitz, Nobel-Winning Pioneer of Modern Portfolio Theory Dies at 95

Dr. Harry Markowitz, who won a Nobel Prize in 1990 for his revolutionary approach to investing, died recently at age 95. His 1952 dissertation, "Portfolio Selection," was later expanded into his best-known work in 1959 in *The Journal of Finance*: "Portfolio Selection: Efficient Diversification of Investments."

Until he came along, the common strategy to stock investing was to choose the companies that were thought to have the best prospects. Dr. Markowitz's approach, which came to be known as modern portfolio theory (M.P.T.), was grounded in the basic relationship between risk and reward. He codified the benefits of diversification by using advanced mathematics to calculate correlations and variations from the mean. He was also regarded as a pioneer of behavioral finance based on other investment-related work.

He was interviewed for this obituary in the *New York Times* in 2014 when he was 87. At that time, he was working on an analysis of securities risk and return. ([Source](#))

**INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE
RETIREE HEALTHCARE BENEFITS PROGRAM
STAFF ACTIVITIES REPORT
JULY 2023
FOR INFORMATION ONLY**

Retiree Healthcare Benefits Program Carrier Meeting Kick-off

During the week of July 10-14, 2023, staff and our healthcare consultants, Segal, conducted carrier meetings with the following health plans:

- United Healthcare
- Kaiser Permanente

The above carrier Account Managers provided LACERA's group utilization and performance over the last nine months to a year. Discussions included were on LACERA's:

- In-patient and Outpatient hospitalization costs
- Prescription drug costs
- Top fifty drugs
- Top medical diagnosis

State of the Union Meeting

On July 14, 2023, Cigna provided their State of the Union presentation to staff and Segal consultants. Every year, staff requests to meet with our carriers to have them provide a State of the Union regarding their respective plans. The purpose of the State of the Union discussions are so our carriers can share with staff and our consultants what their respective health plans are doing to address upcoming changes within the healthcare landscape. Our carriers usually invite their Medicare and Legislative experts to provide insight on what their plan is doing and how any upcoming changes within the industry may impact our group plan specifically.

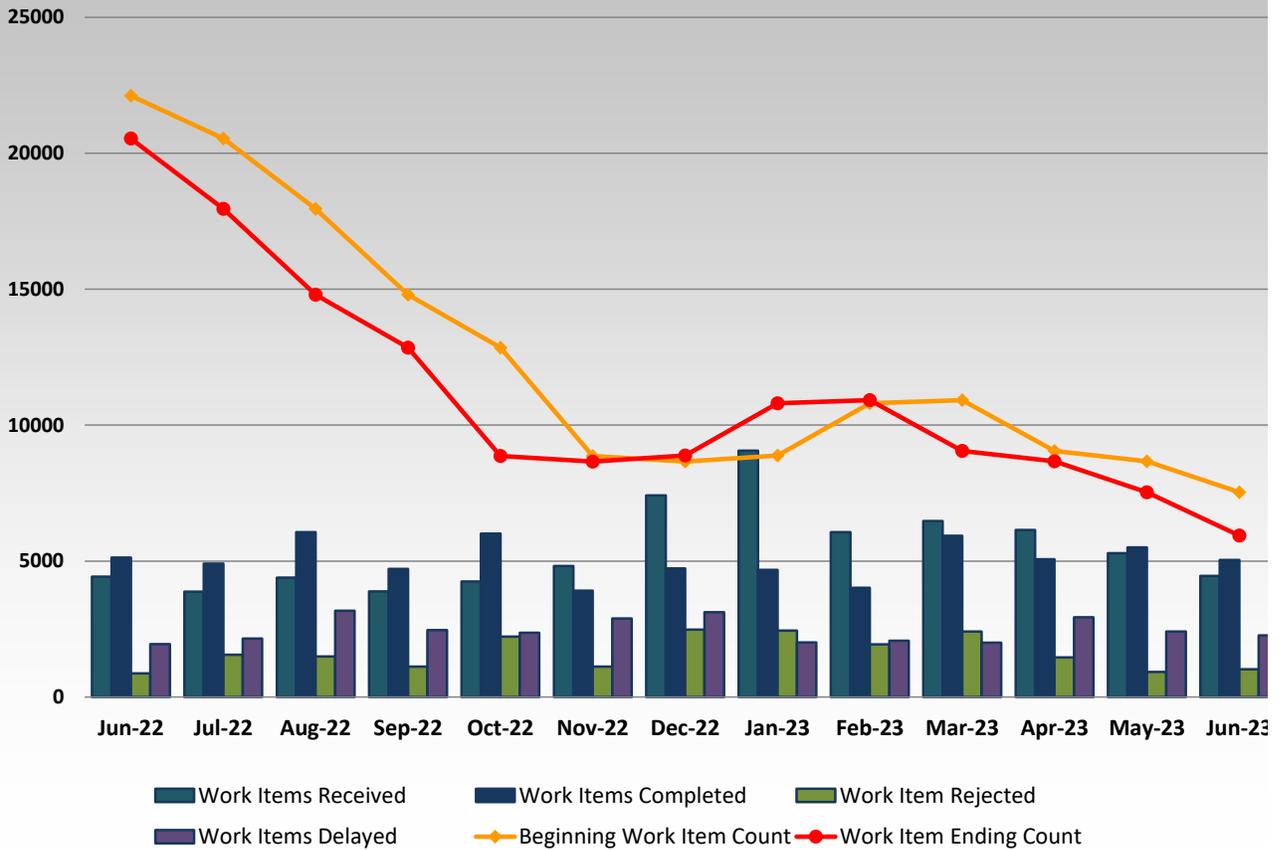
Staff is currently in the process of setting up these same State of the Union presentations with United Healthcare, Kaiser Permanente, and Anthem Blue Cross.

Retiree Healthcare Division

Trend Report

JUNE 2022 - JUNE 2023

Updated 7/21/2023

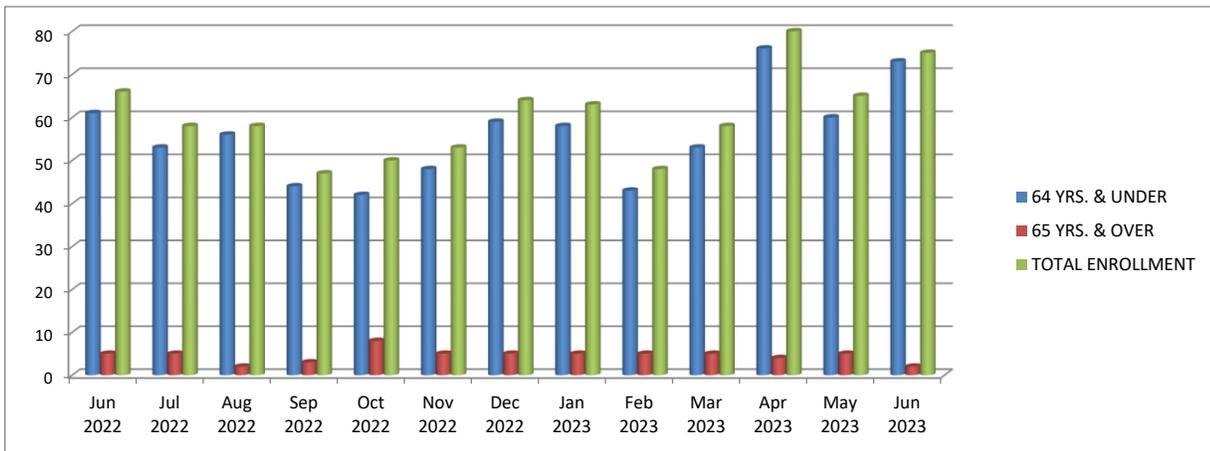


	Beginning Work Item Count	Work Items Received	Work Items Completed	Work Item Rejected	Work Items Delayed	Work Item Ending Count
Jun-22	22115	4423	5128	870	1950	20540
Jul-22	20540	3880	4911	1552	2154	17957
Aug-22	17957	4394	6060	1496	3171	14795
Sep-22	14795	3885	4712	1121	2464	12847
Oct-22	12847	4252	6013	2218	2361	8868
Nov-22	8868	4822	3911	1114	2884	8665
Dec-22	8665	7418	4728	2476	3116	8879
Jan-23	8879	9057	4680	2448	2010	10808
Feb-23	10808	6067	4019	1934	2070	10922
Mar-23	10922	6472	5934	2411	1999	9049
Apr-23	9049	6144	5065	1458	2930	8670
May-23	8670	5294	5503	926	2412	7535
Jun-23	7535	4458	5039	1018	2263	5939

Retirees Monthly Age Breakdown JUNE 2022 - JUNE 2023

Disability Retirement

MONTH	64 YRS. & UNDER	65 YRS. & OVER	TOTAL ENROLLMENT
Jun 2022	61	5	66
Jul 2022	53	5	58
Aug 2022	56	2	58
Sep 2022	44	3	47
Oct 2022	42	8	50
Nov 2022	48	5	53
Dec 2022	59	5	64
Jan 2023	58	5	63
Feb 2023	43	5	48
Mar 2023	53	5	58
Apr 2023	76	4	80
May 2023	60	5	65
Jun 2023	73	2	75



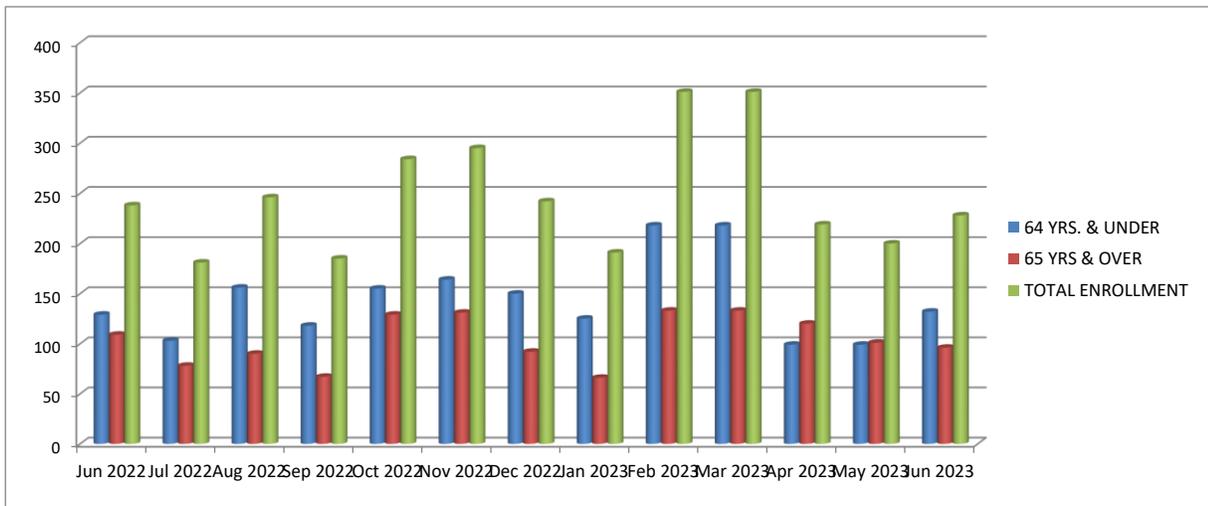
PLEASE NOTE:

- Next Report will include the following dates: July 1, 2022, through July 31, 2023.

Retirees Monthly Age Breakdown JUNE 2022 - JUNE 2023

Service Retirement

MONTH	64 YRS. & UNDER	65 YRS & OVER	TOTAL ENROLLMENT
Jun 2022	129	109	238
Jul 2022	103	78	181
Aug 2022	156	90	246
Sep 2022	118	67	185
Oct 2022	155	129	284
Nov 2022	164	131	295
Dec 2022	150	92	242
Jan 2023	125	66	191
Feb 2023	218	133	351
Mar 2023	218	133	351
Apr 2023	99	120	219
May 2023	99	101	200
Jun 2023	132	96	228



PLEASE NOTE:

- Next Report will include the following dates: July 1, 2022, through July 31, 2023.

Medicare Part B Reimbursement and Penalty Report
PAY PERIOD 1/31/2023

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
ANTHEM BC III				
240	7435	\$1,133,130.85	2	\$129.57
241	142	\$17,815.60	0	\$0.00
242	946	\$146,343.14	0	\$0.00
243	4455	\$1,383,869.01	0	\$0.00
244	17	\$2,587.20	0	\$0.00
245	60	\$10,073.70	0	\$0.00
246	16	\$2,475.80	0	\$0.00
247	150	\$24,699.80	0	\$0.00
248	13	\$3,684.10	1	\$43.00
249	69	\$22,721.50	0	\$0.00
250	16	\$4,922.30	0	\$0.00
Plan Total:	13,319	\$2,752,323.00	3	\$172.57
CIGNA - PREFERRED with RX				
321	32	\$4,488.60	0	\$0.00
322	7	\$997.60	0	\$0.00
324	22	\$6,775.90	0	\$0.00
327	1	\$104.90	0	\$0.00
Plan Total:	62	\$12,367.00	0	\$0.00
KAISER SR. ADVANTAGE				
394	18	\$2,967.50	0	\$0.00
397	4	\$639.30	0	\$0.00
398	8	\$2,535.60	0	\$0.00
403	11846	\$1,766,523.20	1	\$17.00
413	1596	\$240,419.44	0	\$0.00
418	6235	\$1,925,932.19	0	\$0.00
419	230	\$31,646.60	0	\$0.00
426	248	\$37,453.30	0	\$0.00
427	2	(\$409.60)	0	\$0.00
445	2	\$329.80	0	\$0.00
446	1	\$145.10	0	\$0.00
451	35	\$5,282.10	0	\$0.00
455	6	\$1,154.30	0	\$0.00
457	14	\$4,343.70	0	\$0.00
459	2	\$659.60	0	\$0.00
462	86	\$12,776.50	0	\$0.00
465	4	\$659.60	0	\$0.00
466	29	\$8,787.90	0	\$0.00
472	28	\$3,948.10	0	\$0.00
476	2	\$259.00	0	\$0.00
478	16	\$4,921.70	0	\$0.00
479	1	\$144.60	0	\$0.00
482	82	\$12,504.90	0	\$0.00
486	1	\$164.90	0	\$0.00
488	41	\$12,030.30	0	\$0.00
491	1	\$148.50	0	\$0.00
Plan Total:	20,538	\$4,075,968.13	1	\$17.00

Medicare Part B Reimbursement and Penalty Report
PAY PERIOD 1/31/2023

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	287	\$42,862.60	0	\$0.00
613	88	\$27,258.80	0	\$0.00
620	3	\$783.90	0	\$0.00
622	6	\$1,151.50	0	\$0.00
623	2	\$539.60	0	\$0.00
Plan Total:	375	\$70,121.40	0	\$0.00
UNITED HEALTHCARE GROUP MEDICARE ADV. HMO				
701	2006	\$308,164.50	1	\$36.50
702	410	\$64,162.90	0	\$0.00
703	1334	\$419,260.30	0	\$0.00
704	93	\$14,385.00	0	\$0.00
705	48	\$16,039.80	0	\$0.00
Plan Total:	3,891	\$822,012.50	1	\$36.50
Grand Total:	38,185	\$7,732,792.03	5	\$226.07

Medicare Part B Reimbursement and Penalty Report
PAY PERIOD 7/31/2023

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
ANTHEM BC III				
240	7435	\$1,133,130.85	2	\$129.57
241	142	\$17,815.60	0	\$0.00
242	946	\$146,343.14	0	\$0.00
243	4455	\$1,383,869.01	0	\$0.00
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426	248	\$37,453.30	0	\$0.00
427	2	(\$409.60)	0	\$0.00
445	2	\$329.80	0	\$0.00
446	1	\$145.10	0	\$0.00
451	35	\$5,282.10	0	\$0.00
455	6	\$1,154.30	0	\$0.00
457	14	\$4,343.70	0	\$0.00
459	2	\$659.60	0	\$0.00
462	86	\$12,776.50	0	\$0.00
465	4	\$659.60	0	\$0.00
466	29	\$8,787.90	0	\$0.00
472	28	\$3,948.10	0	\$0.00
476	2	\$259.00	0	\$0.00
478	16	\$4,921.70	0	\$0.00
479	1	\$144.60	0	\$0.00
482	82	\$12,504.90	0	\$0.00
486	1	\$164.90	0	\$0.00
488	41	\$12,030.30	0	\$0.00
491	1	\$148.50	0	\$0.00
Plan Total:	20,538	\$4,075,968.13	1	\$17.00

Medicare Part B Reimbursement and Penalty Report
PAY PERIOD 7/31/2023

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	287	\$42,862.60	0	\$0.00
613	88	\$27,258.80	0	\$0.00
620	3	\$783.90	0	\$0.00
622	6	\$1,151.50	0	\$0.00
623	2	\$539.60	0	\$0.00
Plan Total:	375	\$70,121.40	0	\$0.00
UNITED HEALTHCARE GROUP MEDICARE ADV. HMO				
701	2006	\$308,164.50	1	\$36.50
702	410	\$64,162.90	0	\$0.00
703	1334	\$419,260.30	0	\$0.00
704	93	\$14,385.00	0	\$0.00
705	48	\$16,039.80	0	\$0.00
Plan Total:	3,891	\$822,012.50	1	\$36.50
LOCAL 1014				
804	177	\$38,218.90	0	\$0.00
805	221	\$42,342.90	0	\$0.00
806	698	\$259,271.60	0	\$0.00
807	40	\$8,573.70	0	\$0.00
808	15	\$4,947.00	0	\$0.00
812	253	\$45,477.30	0	\$0.00
813	1	\$164.90	0	\$0.00
Plan Total:	1,405	\$398,996.30	0	\$0.00
Grand Total:	39,590	\$8,131,788.33	5	\$226.07

Medical and Dental Vision Insurance Premiums August 2023

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Medical Plan							
Anthem Blue Cross Prudent Buyer Plan							
201	470	\$450,182.48	\$66,918.94	\$374,746.89	\$441,665.83	(\$951.76)	\$440,714.07
202	245	\$462,364.24	\$41,613.43	\$416,808.77	\$458,422.20	(\$3,644.74)	\$454,777.46
203	75	\$158,436.00	\$25,476.50	\$132,959.50	\$158,436.00	\$0.00	\$158,436.00
204	28	\$34,245.96	\$10,053.60	\$24,192.36	\$34,245.96	\$0.00	\$34,245.96
SUBTOTAL	818	\$1,105,228.68	\$144,062.47	\$948,707.52	\$1,092,769.99	(\$4,596.50)	\$1,088,173.49
Anthem Blue Cross I							
211	576	\$798,654.22	\$51,998.63	\$752,337.93	\$804,336.56	(\$6,575.41)	\$797,761.15
212	233	\$587,290.74	\$26,897.85	\$530,169.19	\$557,067.04	\$0.00	\$557,067.04
213	74	\$227,992.44	\$18,163.86	\$156,859.00	\$175,022.86	\$0.00	\$175,022.86
214	20	\$38,191.65	\$7,078.37	\$51,351.64	\$58,430.01	\$0.00	\$58,430.01
215	1	\$464.72	\$18.59	\$446.13	\$464.72	\$0.00	\$464.72
SUBTOTAL	904	\$1,652,593.77	\$104,157.30	\$1,491,163.89	\$1,595,321.19	(\$6,575.41)	\$1,588,745.78
Anthem Blue Cross II							
221	2,339	\$3,249,601.68	\$173,359.69	\$3,004,885.04	\$3,178,244.73	(\$4,024.63)	\$3,174,220.10
222	2,039	\$5,097,287.14	\$115,865.85	\$4,870,815.19	\$4,986,681.04	\$0.00	\$4,986,681.04
223	932	\$2,753,447.16	\$97,450.66	\$2,559,182.22	\$2,656,632.88	\$0.00	\$2,656,632.88
224	220	\$407,377.60	\$37,434.31	\$353,839.68	\$391,273.99	\$0.00	\$391,273.99
SUBTOTAL	5,530	\$11,507,713.58	\$424,110.51	\$10,788,722.13	\$11,212,832.64	(\$4,024.63)	\$11,208,808.01

Medical and Dental Vision Insurance Premiums August 2023

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Anthem Blue Cross III							
240	7,484	\$4,195,295.24	\$560,160.85	\$3,707,572.38	\$4,267,733.23	(\$16,082.67)	\$4,251,650.56
241	138	\$255,912.80	\$14,728.07	\$200,703.76	\$215,431.83	(\$1,789.60)	\$213,642.23
242	938	\$1,712,647.20	\$100,877.99	\$1,578,231.16	\$1,679,109.15	(\$1,489.60)	\$1,677,619.55
243	4,456	\$4,990,501.80	\$531,409.80	\$4,395,162.44	\$4,926,572.24	(\$11,936.44)	\$4,914,635.80
244	17	\$17,041.14	\$1,984.78	\$15,056.36	\$17,041.14	\$0.00	\$17,041.14
245	60	\$62,150.04	\$6,192.06	\$59,752.68	\$65,944.74	\$0.00	\$65,944.74
246	16	\$35,710.56	\$2,231.91	\$35,710.56	\$37,942.47	\$0.00	\$37,942.47
247	152	\$341,482.23	\$22,095.90	\$323,361.96	\$345,457.86	(\$2,069.18)	\$343,388.68
248	13	\$20,233.59	\$1,992.22	\$18,241.37	\$20,233.59	\$0.00	\$20,233.59
249	71	\$110,506.53	\$5,229.60	\$106,607.96	\$111,837.56	\$0.00	\$111,837.56
250	16	\$27,908.00	\$1,395.40	\$26,512.60	\$27,908.00	\$0.00	\$27,908.00
SUBTOTAL	13,361	\$11,769,389.13	\$1,248,298.58	\$10,466,913.23	\$11,715,211.81	(\$33,367.49)	\$11,681,844.32
CIGNA Network Model Plan							
301	235	\$420,081.30	\$110,243.68	\$313,283.01	\$423,526.69	\$1,657.81	\$425,184.50
302	61	\$200,103.76	\$47,891.66	\$145,757.14	\$193,648.80	\$0.00	\$193,648.80
303	8	\$30,487.92	\$7,034.51	\$19,642.42	\$26,676.93	\$0.00	\$26,676.93
304	15	\$35,578.35	\$15,609.55	\$19,968.80	\$35,578.35	\$0.00	\$35,578.35
SUBTOTAL	319	\$686,251.33	\$180,779.40	\$498,651.37	\$679,430.77	\$1,657.81	\$681,088.58
CIGNA Preferred w/ Rx - Phoenix, AZ							
321	33	\$11,446.38	\$1,748.18	\$10,045.06	\$11,793.24	\$0.00	\$11,793.24
322	7	\$12,507.32	\$714.70	\$11,792.62	\$12,507.32	\$0.00	\$12,507.32
324	22	\$15,085.84	\$1,645.74	\$13,440.10	\$15,085.84	\$0.00	\$15,085.84
327	1	\$2,370.95	\$474.19	\$1,896.76	\$2,370.95	\$0.00	\$2,370.95
SUBTOTAL	63	\$41,410.49	\$4,582.81	\$37,174.54	\$41,757.35	\$0.00	\$41,757.35

Medical and Dental Vision Insurance Premiums August 2023

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser/Senior Advantage							
401	1,573	\$2,034,156.67	\$157,644.61	\$1,831,719.75	\$1,989,364.36	\$0.00	\$1,989,364.36
403	11,861	\$2,985,089.56	\$269,156.30	\$2,715,575.39	\$2,984,731.69	(\$6,096.39)	\$2,978,635.30
404	502	\$596,859.80	\$11,818.53	\$588,585.81	\$600,404.34	\$0.00	\$600,404.34
405	1,346	\$1,709,857.12	\$19,559.45	\$1,685,464.43	\$1,705,023.88	\$9,065.18	\$1,714,089.06
411	1,946	\$4,969,007.78	\$216,201.22	\$4,637,459.48	\$4,853,660.70	\$0.00	\$4,853,660.70
413	1,563	\$2,428,024.90	\$116,231.07	\$2,199,853.31	\$2,316,084.38	\$0.00	\$2,316,084.38
414	56	\$139,331.37	\$1,271.09	\$133,171.46	\$134,442.55	\$0.00	\$134,442.55
418	6,203	\$3,074,559.52	\$222,637.67	\$2,836,794.21	\$3,059,431.88	(\$985.12)	\$3,058,446.76
419	229	\$331,500.16	\$4,115.24	\$311,644.98	\$315,760.22	\$0.00	\$315,760.22
420	109	\$257,806.80	\$1,135.30	\$256,671.50	\$257,806.80	\$0.00	\$257,806.80
421	6	\$7,594.86	\$911.38	\$6,683.48	\$7,594.86	\$0.00	\$7,594.86
422	259	\$659,351.25	\$2,627.30	\$658,516.70	\$661,144.00	\$0.00	\$661,144.00
423	0	\$2,312.54	\$0.00	\$2,312.54	\$2,312.54	\$0.00	\$2,312.54
426	248	\$376,169.28	\$3,202.74	\$371,565.27	\$374,768.01	(\$15,413.97)	\$359,354.04
427	0	\$2,864.12	\$0.00	(\$1,432.06)	(\$1,432.06)	\$0.00	(\$1,432.06)
428	45	\$110,116.80	\$489.40	\$109,627.40	\$110,116.80	\$0.00	\$110,116.80
430	142	\$359,100.96	\$3,692.20	\$355,408.76	\$359,100.96	\$0.00	\$359,100.96
SUBTOTAL	26,088	\$20,043,703.49	\$1,030,693.50	\$18,699,622.41	\$19,730,315.91	(\$13,430.30)	\$19,716,885.61

Medical and Dental Vision Insurance Premiums August 2023

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Colorado							
450	4	\$4,413.00	\$441.30	\$3,971.70	\$4,413.00	\$0.00	\$4,413.00
451	35	\$10,426.50	\$1,441.82	\$8,984.68	\$10,426.50	\$0.00	\$10,426.50
453	8	\$21,956.04	(\$47.00)	\$17,219.42	\$17,172.42	\$0.00	\$17,172.42
455	6	\$8,358.90	\$0.00	\$9,710.13	\$9,710.13	\$0.00	\$9,710.13
457	14	\$8,229.20	\$1,234.38	\$6,994.82	\$8,229.20	\$0.00	\$8,229.20
459	2	\$3,366.10	\$67.32	\$3,298.78	\$3,366.10	\$0.00	\$3,366.10
SUBTOTAL	69	\$56,749.74	\$3,137.82	\$50,179.53	\$53,317.35	\$0.00	\$53,317.35
Kaiser - Georgia							
441	4	\$5,182.00	\$0.00	\$5,182.00	\$5,182.00	\$0.00	\$5,182.00
442	7	\$9,068.50	\$0.00	\$9,068.50	\$9,068.50	\$0.00	\$9,068.50
445	2	\$3,363.78	\$0.00	\$3,363.78	\$3,363.78	\$0.00	\$3,363.78
446	1	\$1,681.89	\$0.00	\$1,681.89	\$1,681.89	\$0.00	\$1,681.89
461	12	\$15,546.00	\$2,228.26	\$12,022.24	\$14,250.50	\$0.00	\$14,250.50
462	85	\$33,917.54	\$4,716.87	\$28,806.28	\$33,523.15	\$0.00	\$33,523.15
463	3	\$7,748.97	\$1,553.92	\$6,195.05	\$7,748.97	\$0.00	\$7,748.97
465	4	\$6,727.56	\$0.00	\$6,727.56	\$6,727.56	\$0.00	\$6,727.56
466	29	\$22,642.62	\$1,639.63	\$21,002.99	\$22,642.62	\$0.00	\$22,642.62
SUBTOTAL	147	\$105,878.86	\$10,138.68	\$94,050.29	\$104,188.97	\$0.00	\$104,188.97

Medical and Dental Vision Insurance Premiums August 2023

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Hawaii							
471	6	\$5,727.84	\$267.30	\$5,460.54	\$5,727.84	\$0.00	\$5,727.84
472	27	\$12,185.60	\$1,705.96	\$9,609.24	\$11,315.20	\$0.00	\$11,315.20
473	1	\$1,982.56	\$607.94	\$1,374.62	\$1,982.56	\$0.00	\$1,982.56
474	4	\$9,506.40	\$0.00	(\$5,294.46)	(\$5,294.46)	\$0.00	(\$5,294.46)
475	3	\$8,543.76	\$213.12	\$27,646.04	\$27,859.16	\$0.00	\$27,859.16
476	2	\$2,763.68	\$1,216.02	\$1,547.66	\$2,763.68	\$0.00	\$2,763.68
477	2	\$5,858.40	\$902.36	\$4,956.04	\$5,858.40	\$0.00	\$5,858.40
478	16	\$13,798.40	\$1,966.27	\$11,832.13	\$13,798.40	\$0.00	\$13,798.40
479	1	\$2,409.76	\$0.00	\$2,409.76	\$2,409.76	\$0.00	\$2,409.76
SUBTOTAL	62	\$62,776.40	\$6,878.97	\$59,541.57	\$66,420.54	\$0.00	\$66,420.54
Kaiser - Oregon							
481	2	\$2,336.86	\$584.21	\$1,752.65	\$2,336.86	\$0.00	\$2,336.86
482	81	\$40,834.36	\$6,600.34	\$34,699.88	\$41,300.22	\$0.00	\$41,300.22
483	2	\$2,914.32	\$494.99	\$2,419.33	\$2,914.32	\$0.00	\$2,914.32
484	5	\$11,644.30	\$0.00	\$11,644.30	\$11,644.30	\$0.00	\$11,644.30
486	1	\$1,658.41	\$0.00	\$1,658.41	\$1,658.41	\$0.00	\$1,658.41
488	40	\$40,506.36	\$4,077.94	\$33,532.78	\$37,610.72	\$0.00	\$37,610.72
491	1	\$1,682.42	\$0.00	\$1,682.42	\$1,682.42	\$0.00	\$1,682.42
498	2	\$5,235.18	\$279.14	\$4,956.04	\$5,235.18	\$0.00	\$5,235.18
SUBTOTAL	134	\$106,812.21	\$12,036.62	\$92,345.81	\$104,382.43	\$0.00	\$104,382.43
SCAN Health Plan							
611	285	\$71,842.51	\$15,286.44	\$54,207.73	\$69,494.17	(\$497.18)	\$68,996.99
613	87	\$43,047.84	\$9,421.61	\$33,554.21	\$42,975.82	\$0.00	\$42,975.82
SUBTOTAL	372	\$114,890.35	\$24,708.05	\$87,761.94	\$112,469.99	(\$497.18)	\$111,972.81

Medical and Dental Vision Insurance Premiums August 2023

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
SCAN Health Plan, AZ							
620	3	\$745.77	\$0.00	\$1,242.95	\$1,242.95	\$0.00	\$1,242.95
SUBTOTAL	3	\$745.77	\$0.00	\$1,242.95	\$1,242.95	\$0.00	\$1,242.95
SCAN Health Plan, NV							
622	6	\$1,491.54	\$0.00	\$2,025.73	\$2,025.73	\$0.00	\$2,025.73
623	2	\$978.36	\$0.00	\$978.36	\$978.36	\$0.00	\$978.36
SUBTOTAL	8	\$2,469.90	\$0.00	\$3,004.09	\$3,004.09	\$0.00	\$3,004.09
UHC Medicare Adv.							
701	2,000	\$650,499.72	\$75,624.16	\$580,304.08	\$655,928.24	\$45.42	\$655,973.66
702	399	\$702,479.34	\$34,902.85	\$647,069.37	\$681,972.22	\$0.00	\$681,972.22
703	1,324	\$854,473.56	\$81,875.78	\$769,404.68	\$851,280.46	\$666.90	\$851,947.36
704	96	\$191,408.58	\$13,765.95	\$167,975.53	\$181,741.48	(\$1,933.42)	\$179,808.06
705	48	\$42,011.04	\$2,870.79	\$41,779.08	\$44,649.87	\$0.00	\$44,649.87
706	2	\$789.74	\$47.38	\$742.36	\$789.74	\$0.00	\$789.74
SUBTOTAL	3,869	\$2,441,661.98	\$209,086.91	\$2,207,275.10	\$2,416,362.01	(\$1,221.10)	\$2,415,140.91
United Healthcare							
707	524	\$736,339.50	\$60,339.09	\$661,810.61	\$722,149.70	\$0.00	\$722,149.70
708	451	\$1,190,898.48	\$54,230.96	\$998,861.76	\$1,053,092.72	\$0.00	\$1,053,092.72
709	385	\$1,172,711.12	\$80,332.85	\$1,073,106.87	\$1,153,439.72	\$0.00	\$1,153,439.72
SUBTOTAL	1,360	\$3,099,949.10	\$194,902.90	\$2,733,779.24	\$2,928,682.14	\$0.00	\$2,928,682.14

Medical and Dental Vision Insurance Premiums August 2023

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Local 1014 Firefighters							
801	86	\$114,784.20	\$3,897.35	\$108,217.45	\$112,114.80	\$0.00	\$112,114.80
802	337	\$811,010.72	\$26,712.81	\$779,484.79	\$806,197.60	\$2,406.56	\$808,604.16
803	382	\$1,084,410.14	\$27,819.90	\$1,054,546.33	\$1,082,366.23	\$2,838.77	\$1,085,205.00
804	184	\$245,584.80	\$7,928.11	\$261,889.67	\$269,817.78	(\$39,553.60)	\$230,264.18
805	224	\$539,069.44	\$15,266.37	\$526,209.63	\$541,476.00	(\$42,342.90)	\$499,133.10
806	701	\$1,686,998.56	\$36,964.72	\$1,628,914.39	\$1,665,879.11	(\$263,564.09)	\$1,402,315.02
807	43	\$122,067.11	\$1,589.70	\$79,655.09	\$81,244.79	(\$8,573.70)	\$72,671.09
808	15	\$42,581.55	\$227.10	\$42,354.45	\$42,581.55	(\$4,947.00)	\$37,634.55
809	16	\$21,355.20	\$3,523.61	\$17,831.59	\$21,355.20	\$0.00	\$21,355.20
810	9	\$21,659.04	\$2,839.73	\$18,819.31	\$21,659.04	\$0.00	\$21,659.04
811	3	\$8,516.31	\$2,043.92	\$6,472.39	\$8,516.31	\$0.00	\$8,516.31
812	253	\$337,679.10	\$22,769.98	\$314,909.12	\$337,679.10	(\$44,142.60)	\$293,536.50
813	1	\$2,406.56	\$0.00	\$2,406.56	\$2,406.56	(\$164.90)	\$2,241.66
SUBTOTAL	2,254	\$5,038,122.73	\$151,583.30	\$4,841,710.77	\$4,993,294.07	(\$398,043.46)	\$4,595,250.61
Kaiser - Washington							
393	7	\$11,482.87	\$2,025.48	\$9,457.39	\$11,482.87	\$0.00	\$11,482.87
394	18	\$8,055.36	\$1,566.62	\$7,385.72	\$8,952.34	\$0.00	\$8,952.34
395	3	\$9,169.11	\$1,735.05	\$7,434.06	\$9,169.11	\$0.00	\$9,169.11
397	4	\$7,453.92	\$670.85	\$6,783.07	\$7,453.92	\$0.00	\$7,453.92
398	8	\$7,096.32	\$1,028.96	\$6,067.36	\$7,096.32	\$0.00	\$7,096.32
SUBTOTAL	40	\$43,257.58	\$7,026.96	\$37,127.60	\$44,154.56	\$0.00	\$44,154.56
Medical Plan Total	55,401	\$57,879,605.09	\$3,756,184.78	\$53,138,973.98	\$56,895,158.76	(\$460,098.26)	\$56,435,060.50

Medical and Dental Vision Insurance Premiums August 2023

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Dental/Vision Plan							
CIGNA Indemnity Dental/Vision							
501	26,106	\$1,376,001.60	\$144,593.30	\$1,247,591.18	\$1,392,184.48	(\$3,244.74)	\$1,388,939.74
502	24,207	\$2,664,429.84	\$198,782.62	\$2,449,849.97	\$2,648,632.59	(\$2,386.12)	\$2,646,246.47
503	7	\$453.74	\$23.33	\$430.41	\$453.74	\$0.00	\$453.74
SUBTOTAL	50,320	\$4,040,885.18	\$343,399.25	\$3,697,871.56	\$4,041,270.81	(\$5,630.86)	\$4,035,639.95
CIGNA Dental HMO/Vision							
901	3,980	\$185,475.24	\$20,848.61	\$166,164.88	\$187,013.49	(\$277.21)	\$186,736.28
902	3,052	\$292,033.20	\$22,574.62	\$268,588.36	\$291,162.98	(\$95.28)	\$291,067.70
903	2	\$94.22	\$24.50	\$69.72	\$94.22	\$0.00	\$94.22
SUBTOTAL	7,034	\$477,602.66	\$43,447.73	\$434,822.96	\$478,270.69	(\$372.49)	\$477,898.20
Dental/Vision Plan Total	57,354	\$4,518,487.84	\$386,846.98	\$4,132,694.52	\$4,519,541.50	(\$6,003.35)	\$4,513,538.15
GRAND TOTALS	112,755	\$62,398,092.93	\$4,143,031.76	\$57,271,668.50	\$61,414,700.26	(\$466,101.61)	\$60,948,598.65

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

*Benchmark premiums are bolded.

CARRIER DEDUCTION PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS
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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

Kaiser

\$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.

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

*Benchmark premiums are bolded.

CARRIER DEDUCTION PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS
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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.

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
<u>Kaiser Oregon (continued)</u>		
\$1,571.76	491	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 with Medicare 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.

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

*Benchmark premiums are bolded.

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

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

CIGNA Indemnity - Dental/Vision

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

CIGNA HMO - Dental/Vision

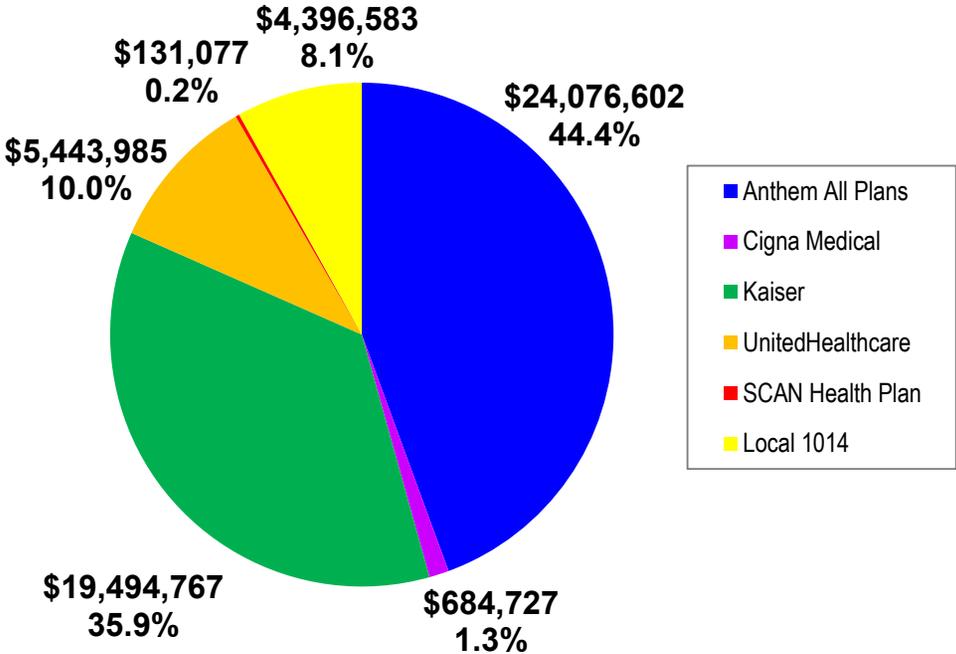
\$39.02	901	Retiree Only
\$81.07	902	Retiree and Dependent(s)
\$39.56	903	Survivor Children Only Rates

Los Angeles County Employees Retirement Association
Premium & Enrollment
Coverage Month Ending June 2023

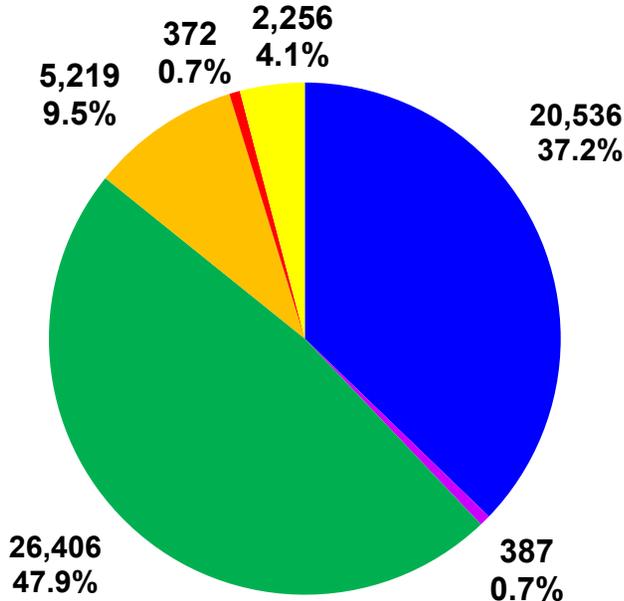
Carrier / Plan	Monthly Premium	Percent of Total	Retirees	Percent of Total
Anthem All Plans	\$24,076,602	44.5%	20,536	37.1%
Cigna Medical	\$684,727	1.3%	387	0.7%
Kaiser	\$19,494,767	35.9%	26,406	47.9%
UnitedHealthcare	\$5,443,985	10.0%	5,219	9.5%
SCAN Health Plan	\$131,077	0.2%	372	0.7%
Local 1014	\$4,396,583	8.1%	2,256	4.1%
Combined Medical	\$54,227,742	100.0%	55,176	100.0%

Cigna Dental & Vision (PPO and HMO)	\$4,388,556	57,044
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Monthly Premium

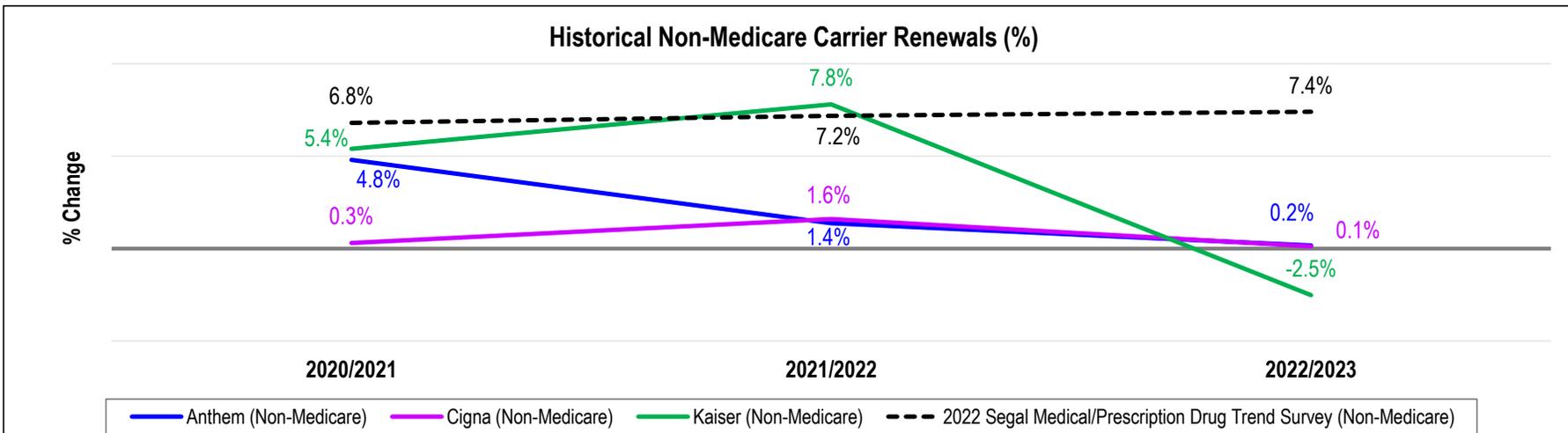


Retirees

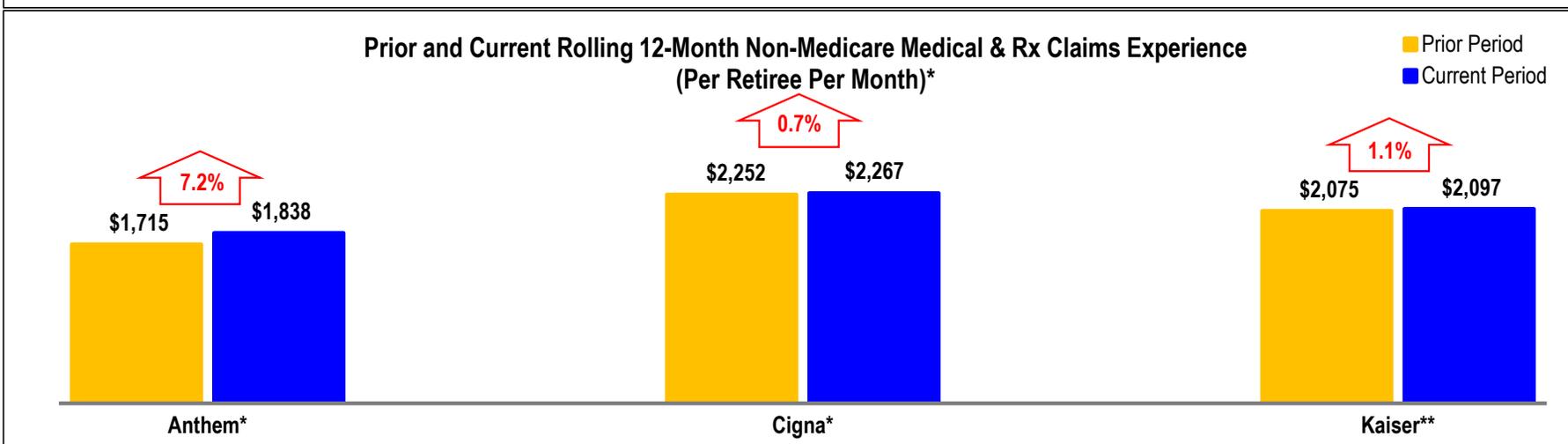


Note: Premiums **include** LACERA's Administrative Fee of \$10.00 per member, per plan, per month.

Los Angeles County Employees Retirement Association
Claims Experience by Carrier
Coverage Month Ending June 2023



Note: Segal's Annual Medical/Prescription Drug Trend Survey blends multiple calendar year trends to reflect LACERA's fiscal plan year.

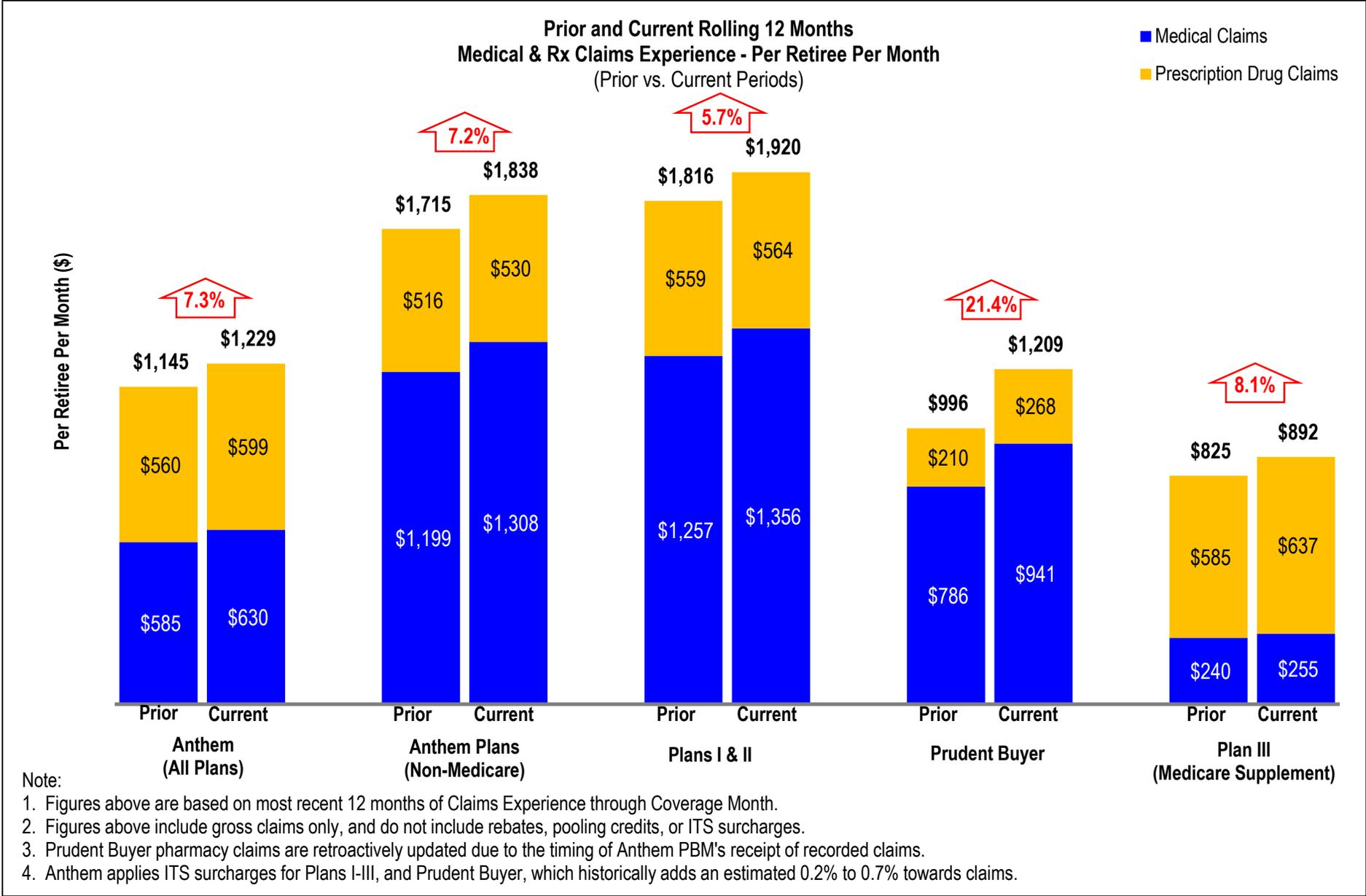


*Based on Most Recent Claims Experience through Coverage Month.
 **Kaiser Claims Experience through April 2023.
 Note: Figures above include gross claims only, and do not include rebates or pooling credits.

Los Angeles County Employees Retirement Association

Anthem Claims Experience By Plan

Coverage Month Ending June 2023



Los Angeles County Employees Retirement Association

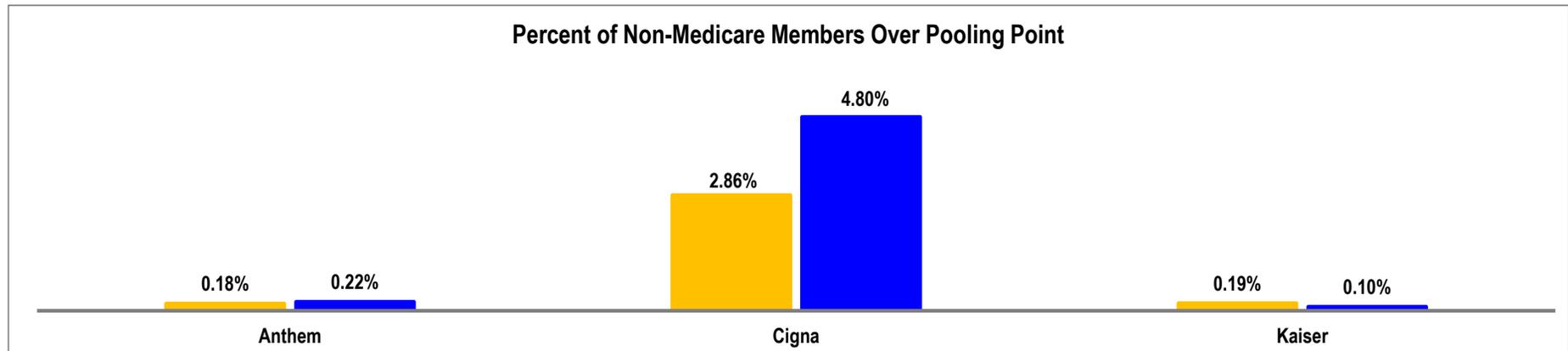
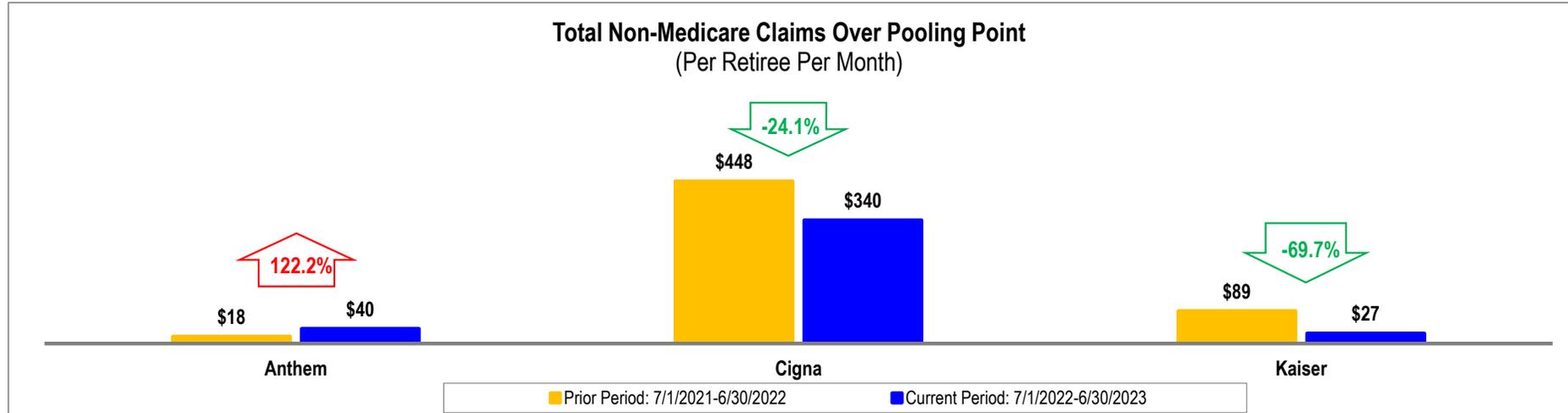
Kaiser Utilization

Coverage Month Ending June 2023

- Kaiser insures approximately 26,000 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 5/1/2022 - 4/30/2023	Prior Period 5/1/2021 - 4/30/2022	Change
Average Contract Size	2.37	2.37	0.00%
Average Members	9,041	8,805	2.68%
Inpatient Claims Per Member Per Month	\$268.84	\$257.65	4.34%
Outpatient Claims Per Member Per Month	\$348.47	\$365.51	-4.66%
Pharmacy Per Member Per Month	\$129.51	\$117.05	10.65%
Other Per Member Per Month	\$137.67	\$135.58	1.54%
Total Claims Per Member Per Month	\$884.49	\$875.79	0.99%
Total Paid Claims	\$95,957,865	\$92,536,072	3.70%
Large Claims over \$525,000 Pooling Point			
Number of Claims over Pooling Point	4	7	
Amount over Pooling Point	\$1,231,160	\$3,969,412	-68.98%
% of Total Paid Claims	1.28%	4.29%	
Inpatient Days / 1000	425.0	400.5	6.12%
Inpatient Admits / 1000	54.1	53.9	0.37%
Outpatient Visits / 1000	14,277.3	14,526.7	-1.72%
Pharmacy Scripts Per Member Per Year	10.4	10.2	1.96%

Los Angeles County Employees Retirement Association
 High Cost Claimants (Anthem, Cigna, & Kaiser)
 Coverage Month Ending June 2023



Stop-Loss & Pooling Points Overview:

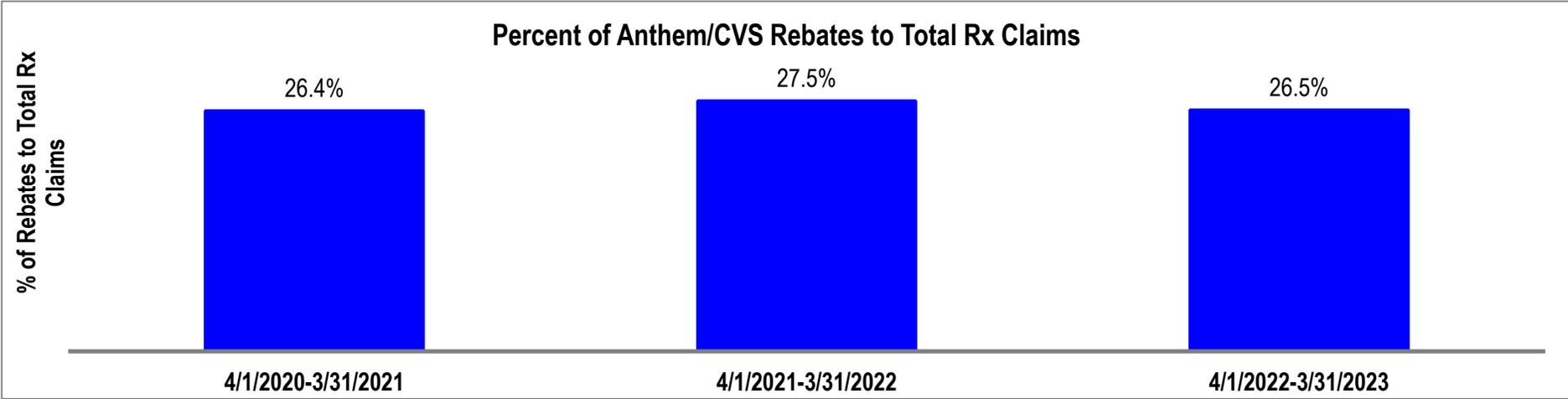
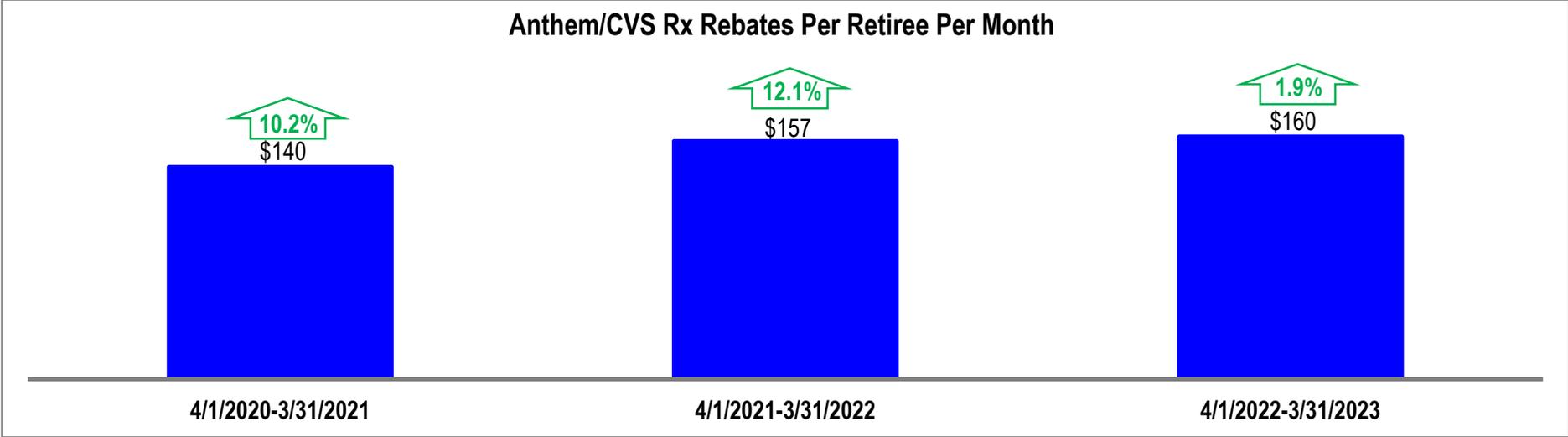
Plan sponsors mitigate the financial risk associated with individual large claimants through reinsurance. Claims exceeding the specified individual pooling threshold are deducted from the carrier's renewal calculation. The pooling credit is offset by the carrier's pooling expense, which is applied to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

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 \$525,000.

Los Angeles County Employees Retirement Association
Prescription Drug Rebates (Anthem)
Coverage Month Ending June 2023



Rebates Overview:

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

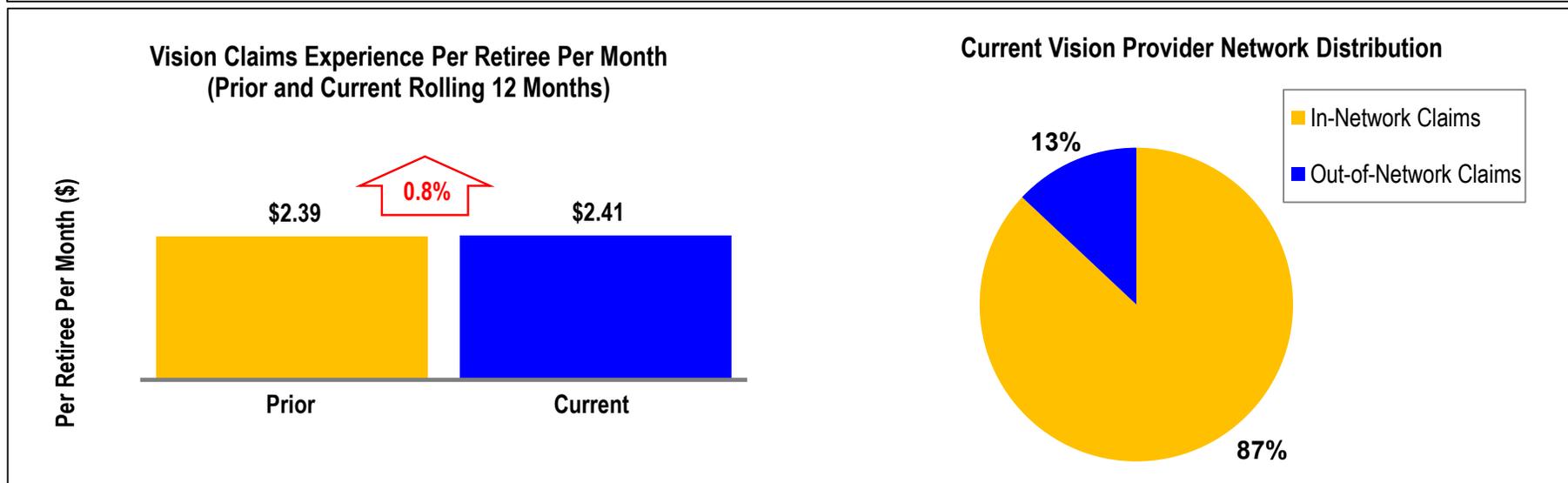
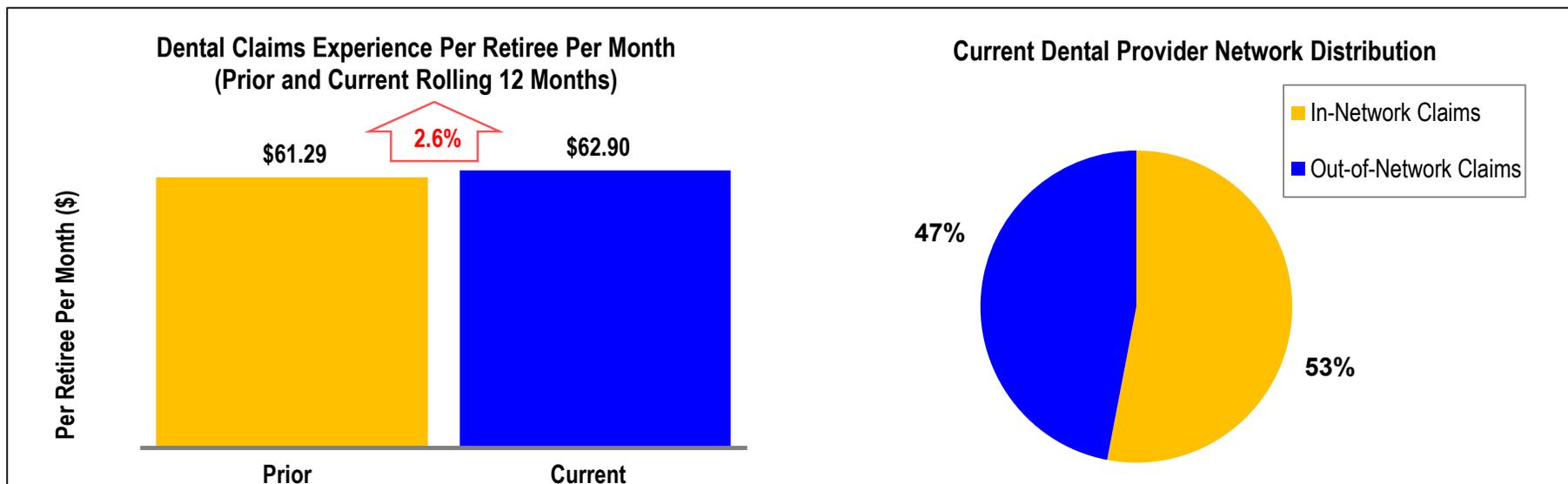
Note:

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

Los Angeles County Employees Retirement Association

Cigna Dental & Vision Claims Experience

Coverage Month Ending June 2023



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.

Compliance News | July 19, 2023

Executive Order Strengthens Access to Contraception

President Biden recently issued another Executive Order to strengthen access to affordable, high-quality contraception and family planning services. The order intends to increase ways for women to access contraception and lower out-of-pocket costs.



Additionally, the order directs the Secretaries of the Treasury, Labor, and Health and Human Services to consider issuing guidance to further improve access contraception, without out-of-pocket expenses, under the ACA.

Under this Executive Order, President Biden is expected to announce a wide range of actions to improve access to contraception.

Background

In the wake of the Supreme Court's decision in *Dobbs v. Jackson Women's Health Organization*, which overturned *Roe v. Wade* (discussed in our [June 24, 2022 insight](#)), access to high-quality contraception continues to vary based on income, location, health insurance coverage and the availability of healthcare providers.

Access to high-quality contraception improves health outcomes, advances economic stability, and promotes women's overall well-being. Recent state law restrictions threaten women's ability to make decisions about their own bodies, families and futures.

To protect access to contraception in the wake of the *Dobbs* decision, the Biden Administration issued Executive Order #14076, "[Protecting Access to Reproductive Healthcare Services](#)," in July 2022, and #14079, "[Securing Access to Reproductive and Other Healthcare Services](#)," in August 2022, which directed actions to safeguard access to reproductive care services, including clarifying protections for women under private health insurance and expanding access under the ACA.

The new Executive Order

Noting that millions of people continue to face barriers to obtaining the contraception they need, the new Executive Order #14101, "[Strengthening Access to Affordable, High-Quality Contraception and Family Planning Services](#)," which was issued on June 23, 2023, seeks to establish a contemporary set of guidelines to afford coverage of Food and Drug Administration (FDA)-approved contraception for all Americans.

Generally, through the Order, President Biden directed his Administration to further strengthen and bolster access to affordable, high-quality contraception. Biden stated that "it remains the policy of my Administration to support access to reproductive healthcare services and to protect and defend reproductive rights in the face of ongoing efforts to strip Americans of their fundamental freedoms."

Key objectives of Executive Order #14101

Citing contraception as an essential component of reproductive healthcare, under Executive Order #14101, President Biden is expected to announce a wide range of actions to:

- Improve contraception access and affordability for women with private health insurance
- Promote increased access to over-the-counter contraception
- Support access to affordable contraception for employees and college students
- Support access to contraception for service members, veterans and federal employees
- Bolster contraception access across federally supported healthcare programs
- Promote research and data analysis on contraception access
- Improve the coverage of contraception through the Medicaid
- Support family planning services and supplies through the Medicaid program

Implications for group health plans

Under the ACA, most group health plans and insurers must cover, without cost sharing, at least one form of contraception in each of the [18 categories](#) specified by the Health Resources and Services Administration (HRSA). Generally, the ACA mandate covers the full range of FDA-approved contraceptives that prevent fertilization.

In [FAQs Part 51](#), issued in January 2022, the Departments of Labor, Health and Human Services, and the Treasury made clear that if an individual and their attending provider determine that a particular service or FDA-approved, cleared or granted contraceptive product is medically appropriate for the individual, a plan or issuer subject to ACA's contraceptive mandate must cover that service or product without cost sharing (whether or not the item or service is identified in the current FDA [Birth Control Guide](#)).

For additional guidance on coverage of FDA-approved, cleared or granted contraceptive products under HRSA-supported guidelines, plan sponsors can consult [FAQs Part 54](#).

Guidance may be forthcoming

Executive Order #14101 directs the Secretaries of the Treasury, Labor, and Health and Human Services (Secretaries) to consider issuing guidance, consistent with applicable law, to further improve Americans' ability to access contraception, without out-of-pocket expenses, under the ACA.

In doing so, the Secretaries must consider, to the greatest extent permitted by law, actions that would:

- Ensure coverage of comprehensive contraceptive care, including all contraceptives approved, granted or cleared by the FDA, without cost sharing for enrollees, participants and beneficiaries.
- Streamline the process for patients and healthcare providers to request coverage, without cost sharing, of medically necessary contraception.

The Secretaries also are directed to consider additional actions, as appropriate and consistent with applicable law, to promote increased access to affordable over-the-counter contraception, including emergency contraception.

In addition, the Executive Order directs the Secretary of Labor to identify best practices for making affordable, high-quality contraception available to health plan enrollees, participants and beneficiaries to share with employers and organizations that sponsor private health coverage.

Consequently, Executive Order #14101 may result in new guidelines for group health plans.

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