

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, MAY 1, 2024

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

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

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

COMMITTEE TRUSTEES:

Les Robbins, Chair
Vivian H. Gray, Vice Chair
Shawn R. Kehoe, Trustee
Ronald Okum, Trustee
David Ryu, 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 April 3, 2024

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. **State Engagement: Visit with California State Legislature**

Barry W. Lew, Legislative Affairs Officer

(For Information Only) (Memo dated April 16, 2024)

B. **Engagement Report for April 2024**

Barry W. Lew, Legislative Affairs Officer

(For Information Only)

C. **Staff Activities Report for April 2024**

Cassandra Smith, Director, Retiree Healthcare

(For Information Only)

D. **LACERA Claims Experience**

Michael Szeto, Segal Consulting

(Presentation)

V. REPORTS (Continued)

E. **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. – 8:50 A.M., WEDNESDAY, APRIL 3, 2024

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

COMMITTEE TRUSTEES

PRESENT: Les Robbins, Chair
Shawn R. Kehoe, Trustee
Vivian H. Gray, Vice Chair (*joined at 8:38 a.m.*)
Ronald Okum, Trustee
David Ryu, Alternate Trustee (*joined at 8:36 a.m.*)
(Teleconference under CA Govt. Code Section 54953(b))

OTHER BOARD OF RETIREMENT TRUSTEES

Elizabeth Ginsberg, Trustee
JP Harris, Trustee
Wayne Moore, Trustee

STAFF, ADVISORS AND PARTICIPANTS

Leilani Ignacio, Assistant Division Manager, 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

Michael Szeto, Sr. Actuarial Associate

I. CALL TO ORDER

This meeting was called to order by Chair Robbins at 8:30 a.m.

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

A. Just Cause

B. Action on Emergency Circumstance Requests

C. Statement of Persons Present at AB 2449 Teleconference Locations

There were no requests received.

III. APPROVAL OF MINUTES

A. Approval of the Minutes of the Regular Meeting of March 6, 2024

Trustee Okum made a motion, Chair Robbins seconded, to approve the minutes of the regular meeting of March 6, 2024. The motion passed by the following roll call vote:

Yes: Kehoe, Okum, Robbins

No: None

Absent: Gray, Ryu

IV. PUBLIC COMMENT

There were no requests from the public to speak

V. NON-CONSENT ITEMS

- A. **Assembly Bill 2474 – County Employees Retirement Law of 1937**
Recommendation as submitted by Barry W. Lew, Legislative Affairs Officer: That the Committee recommend the Board of Retirement 1) Adopt a “Support” position on Assembly Bill 2474, which would make administrative amendments to the County Employees Retirement Law of 1937; and 2) Co-sponsor Assembly Bill 2474 if any of its provisions are amended to apply only to LACERA. (Memo dated March 22, 2024)

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

Yes: Kehoe, Okum, Robbins

No: None

Absent: Gray, Ryu

(Trustees Gray and Ryu joined after the vote had been taken on Items III-A and V-A)

VI. REPORTS

- A. **Engagement Report for March 2024**
Barry W. Lew, Legislative Affairs Officer
(For Information Only)

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

- B. **Staff Activities Report for March 2024**
Cassandra Smith, Director, Retiree Healthcare
(For Information Only)

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

- C. **LACERA Claims Experience**
Michael Szeto, Segal Consulting
(Presentation)

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

- D. **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.)

Trustee Okum requested long term care information be available at the wellness workshops.

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 8:50 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.**

FOR INFORMATION ONLY

April 16, 2024

TO: Insurance, Benefits and Legislative Committee
Les Robbins, Chair
Vivian H. Gray, Vice Chair
Shawn R. Kehoe
Ronald A. Okum
David Ryu, Alternate

FROM: Barry W. Lew 
Legislative Affairs Officer

FOR: May 1, 2024 Insurance, Benefits and Legislative Meeting

SUBJECT: **State Engagement: Visit with California State Legislature**

On March 19-20, 2024, Chief Executive Officer Santos H. Kreimann, Deputy Chief Executive Officer Luis Lugo, and Legislative Affairs Officer Barry W. Lew visited with members of the Los Angeles County delegation of the California State Legislature. In particular, certain members hold leadership positions in the retirement policy committees: Chair Tina McKinnor and Vice-Chair Tom Lackey of the Assembly Public Employment & Retirement (PE&R) Committee and Vice-Chair Scott Wilk of the Senate Labor, Public Employment & Retirement (LPE&R) Committee.

Assembly	Senate
<ul style="list-style-type: none">• Juan Carrillo (D-Palmdale)• Mike Fong (D-Alhambra)• Mike Gipson (D-Carson)• Reggie Jones-Sawyer (D-South Los Angeles)• Tom Lackey (D-Palmdale)• Tina McKinnor (D-Inglewood)• Sharon Quirk-Silva (D-Fullerton)• Luz Rivas (D-San Fernando Valley)• Freddie Rodriguez (D-Pomona)• Blanca Rubio (D-Baldwin Park)• Pilar Schiavo (D-San Fernando Valley)	<ul style="list-style-type: none">• Bob Archuleta (D-Pico Rivera)• Scott Wilk (D-Santa Clarita)

The visits were an opportunity to foster relationships with new members of the delegation and continue to enhance LACERA's visibility in the Legislature. In addition to providing

an overview of LACERA's history and its operations, LACERA staff also highlighted the organization's economic impact study that was conducted in 2022 and emphasized that over 80% (60,503) of our retirees (73,385) remain in California while receiving their pensions. Of those in California, 70% (42,308) reside in Los Angeles County, which means over half of our total retiree population resides in Los Angeles County, which reaps the economic impact of their pensions. We also shared the \$3 billion-dollar statewide annual economic activity generated by our retirees.

Staff also highlighted AB 2474 (Lackey), which is the bill sponsored by the State Association of County Retirement Systems (SACRS) and contains the prepaid card proposal that LACERA submitted for SACRS sponsorship, in each of our visits. In particular, we met with Assemblymember Lackey (also Vice-Chair of the PE&R Committee) to express our appreciation to him for authoring the bill and that we would address any concerns regarding security. We also met with Chair Tina McKinnor of the PE&R Committee and committee consultant Michael Bolden to discuss potential amendments to the bill.

The meetings with all the legislators were overall productive and positive, and staff will continue to engage on AB 2474 to ensure its passage, which will provide an important option for LACERA to provide the promised benefit.

Reviewed and Approved:

A handwritten signature in blue ink that reads "Luis Lugo". The signature is written in a cursive style and is centered within a light gray rectangular box.

Luis Lugo, Deputy Chief Executive Officer

cc: Santos H. Kreimann
Luis Lugo
JJ Popowich
Laura Guglielmo
Steven P. Rice
Naomi Padron, MKP Government Relations

**INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE
ENGAGEMENT REPORT
APRIL 2024
FOR INFORMATION ONLY**

Amount of Money Americans Think They Need to Retire Comfortably Hits Record High

A recent study by Northwestern Mutual reveals a significant increase in the perceived amount needed for a comfortable retirement among Americans, reaching a record \$1.46 million, up 53% from the \$951,000 target in 2020. However, actual retirement savings have declined slightly, with the average amount saved dropping from \$89,300 to \$88,400, off the five-year peak of \$98,800 in 2021. This creates a sizable gap between retirement goals and savings, totaling \$1.37 million on average.

Across generations, there's a consistent pattern of individuals underestimating their retirement needs, with Gen Z, Millennials, Gen X, and even Boomers falling short in savings compared to their retirement targets:

- Gen Z expects needing \$1.63 million for retirement but has only saved \$22,800.
- Millennials expect needing \$1.65 million but have only saved \$62,600.
- Gen X expects needing \$1.56 million but has only saved \$108,600.
- Boomers expect needing \$990,000 but have only saved \$120,300.
- High-net wealth people expect needing \$3.93 million but have only saved \$172,100.

Gen Z stands out for starting to save much earlier, at age 22 on average, nearly a decade earlier than the overall average age across generations of 31, and anticipating retirement at age 60, driven by optimism for a longer life expectancy. Overall, the average age most people expect to retire is 65. Gen Z also think it will live longer. About three in 10 Gen Zers and Millennials expect to live to 100, compared to Gen X (22%) and Boomers (21%).

Despite this, only 30% of Americans have a plan to minimize taxes on their retirement savings, highlighting a crucial aspect often overlooked in financial planning. The study underscores the growing importance of early and tax-conscious retirement planning in light of increasing inflation and longevity expectations. ([Source](#))

American Adults Show Lack of “Retirement Fluency”

The 2024 TIAA Institute-GFLEC Personal Finance Index highlights ongoing concerns about U.S. adults' low financial literacy, particularly regarding retirement-related topics. The average correct response rate to financial literacy questions remains at 48%, with consistent stagnation since 2017.

The report emphasizes the need for better understanding of retirement topics like Medicare and longevity, as indicated by respondents' struggles with these areas. For example, Gen Z respondents only correctly answered 37% of the questions. Respondents struggled most with questions about Medicare's average coverage rate of healthcare expenses and life expectancy after retirement.

The survey suggests a strong correlation between retirement fluency and retirement income security, with those answering more retirement-related questions correctly expressing higher confidence in their financial future. Furthermore, the study links low financial literacy to various financial challenges, such as debt, financial fragility, and lack of emergency savings. ([Source](#))

Washington State Auto-IRA Law Signed

Washington recently introduced "Washington Saves," a state-facilitated retirement program signed into law by Governor Jay Inslee. Scheduled for launch by January 1, 2027, the program offers automatic enrollment in individual retirement accounts (IRAs) with contributions deducted from paychecks, akin to 401(k) plans.

A 15-member board will design, develop, implement, maintain, and oversee the program. Which includes features like default contribution rates ranging from 3% to 7% of wages, with gradual escalation up to 10%.

Eligible employers must meet specific criteria, while state employees with a year of continuous service will be enrolled. Notably, employees have the option to opt out. With an aim to aid 1.2 million workers, Washington joins 18 other states in expanding retirement coverage, with such programs collectively amassing over \$1.26 billion in assets, as per data from the Georgetown University Center for Retirement Initiatives. ([Source](#))

Vermont Partners with Colorado for Auto-IRA Program

Vermont is expediting its VT Saves retirement savings program for employees lacking workplace retirement plans by partnering with Colorado's established initiative. This collaboration aims to reduce costs, enhance returns, and accelerate the launch of VT Saves, according to Vermont Treasurer Mike Pieciak.

Scheduled for a year-end launch, VT Saves mandates employers with five or more employees to enroll them in the program unless a workplace plan is already in place. Structured as an automatic IRA, it facilitates enrollment through payroll deduction. Colorado's SecureSavings auto-IRA program, launched in January 2023, has already registered 14,000 employers and amassed over \$50 million in assets. Vermont will become the third state to join Colorado's interstate consortium, following Maine and Delaware. ([Source](#))

Surge in Pension Costs May Impact Future City Budgets

At a recent city committee meeting in Bakersfield, officials presented projections indicating a significant increase in pension contributions over the next decade. With more than 2.2 million current and retired public employees covered by CalPERS in California, the state's largest pension fund, rising pension costs are a growing concern.

Despite reforms implemented in 2013 under the California Public Employees' Pension Reform Act of 2013, which saved state and local governments an estimated \$55 billion, the impact on pension expenses is slow to materialize due to restrictions primarily affecting new hires. However, Bakersfield's finance director estimated that without PEPRA the city would see an annual contribution close to \$120 million.

Bakersfield officials anticipate a steady rise in pension costs, from \$59.5 million in 2021-22, \$72.5 million in 2023-24, \$78 million in 2024-25, and rising about \$5 million per year to \$96.3 million by 2031 before declining. Factors contributing to this increase include a significant portion of pre-2013 employees receiving higher benefits and insufficient investment returns by CalPERS, leaving municipalities to cover shortfalls.

Although the city has hired more people in the past three years to address vacancies, it has also increased pension costs. The city faces tough financial decisions to maintain solvency, with potential cuts to capital projects looming. Exiting the pension plan would come with a hefty price tag, leaving officials grappling with limited options to manage escalating pension costs. ([Source](#))

**INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE
RETIREE HEALTHCARE BENEFITS PROGRAM
STAFF ACTIVITIES REPORT
APRIL 2024
FOR INFORMATION ONLY**

**LACERA: Retiree Healthcare 2024 Staying Healthy Together
Workshop a Big Success**

On April 16, 2024, LACERA hosted its first Retiree Healthcare Wellness workshop since the start of the COVID pandemic. This event was held at the Almansor Court in Alhambra, and the theme for this year's workshop was "Staying Healthy Together." LACERA staff, health plan carriers, and our healthcare consultant (Segal), welcomed over 550 retirees to the event. Many retirees expressed how they enjoyed and really appreciated the event. Many stated they "already can't wait for the next one." A special thank you to all who came out and joined the staff welcoming and reconnecting with our members; for many this was their first time attending a wellness workshop.

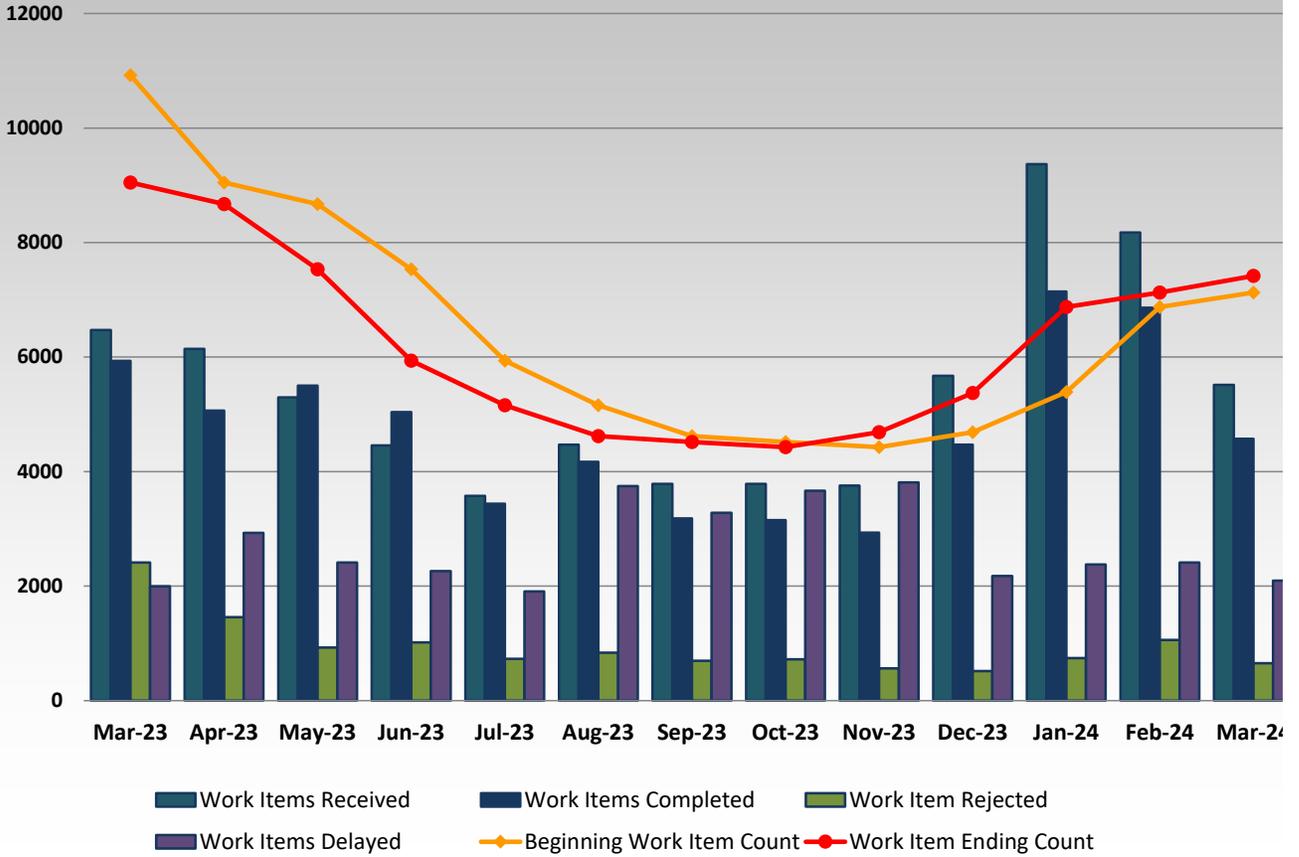
A special thanks to staff from our Retiree Healthcare and Member Services divisions who helped check-in retirees, staffed the LACERA booth, and provided overall customer service support throughout the workshop.

Retiree Healthcare Division

Trend Report

MARCH 2023 - MARCH 2024

Updated 4/18/2024

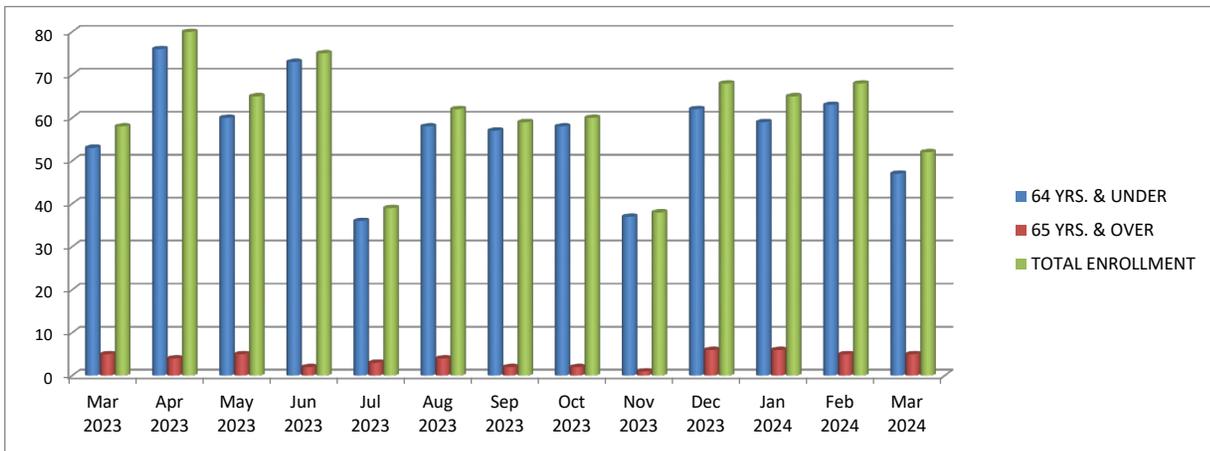


	Beginning Work Item Count	Work Items Received	Work Items Completed	Work Item Rejected	Work Items Delayed	Work Item Ending Count
Mar-23	10922	6472	5934	2411	1999	9049
Apr-23	9049	6144	5065	1458	2930	8670
May-23	8670	5294	5503	926	2412	7535
Jun-23	7535	4458	5039	1018	2263	5939
Jul-23	5939	3576	3438	730	1908	5157
Aug-23	5157	4471	4172	836	3746	4620
Sep-23	4620	3787	3181	698	3282	4515
Oct-23	4515	3784	3151	721	3665	4427
Nov-23	4427	3757	2936	565	3812	4689
Dec-23	4689	5672	4471	516	2175	5374
Jan-24	5390	9371	7145	742	2377	6874
Feb-24	6874	8174	6862	1059	2411	7127
Mar-24	7127	5516	4573	653	2097	7417

Retirees Monthly Age Breakdown MARCH 2023 - MARCH 2024

Disability Retirement

MONTH	64 YRS. & UNDER	65 YRS. & OVER	TOTAL ENROLLMENT
Mar 2023	53	5	58
Apr 2023	76	4	80
May 2023	60	5	65
Jun 2023	73	2	75
Jul 2023	36	3	39
Aug 2023	58	4	62
Sep 2023	57	2	59
Oct 2023	58	2	60
Nov 2023	37	1	38
Dec 2023	62	6	68
Jan 2024	59	6	65
Feb 2024	63	5	68
Mar 2024	47	5	52

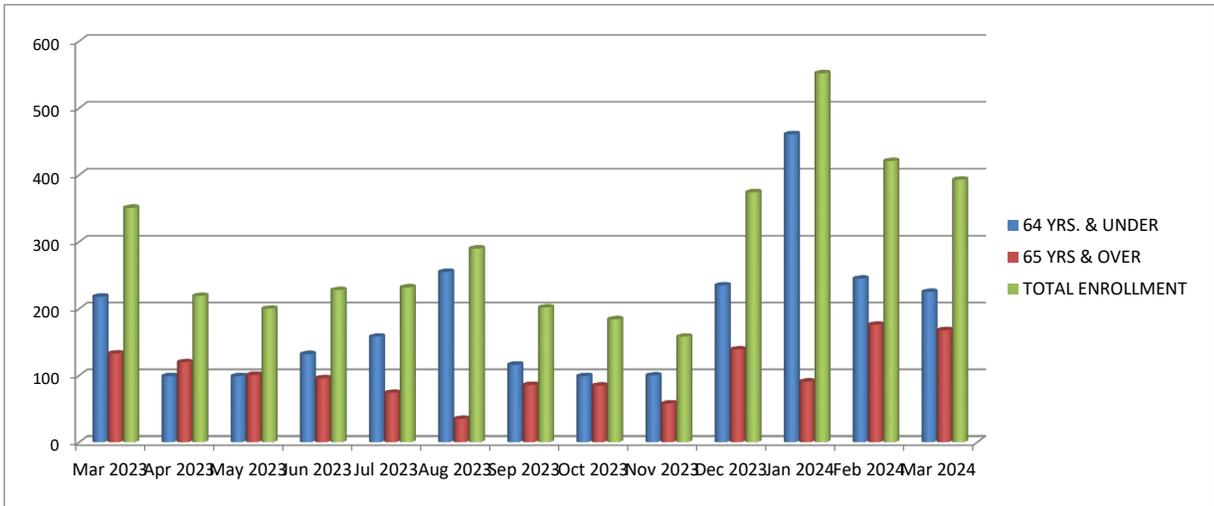


PLEASE NOTE:

- Next Report will include the following dates: April 1, 2023 - April 30, 2024

Retirees Monthly Age Breakdown MARCH 2023 - MARCH 2024

Service Retirement			
MONTH	64 YRS. & UNDER	65 YRS & OVER	TOTAL ENROLLMENT
Mar 2023	218	133	351
Apr 2023	99	120	219
May 2023	99	101	200
Jun 2023	132	96	228
Jul 2023	158	74	232
Aug 2023	255	35	290
Sep 2023	116	86	202
Oct 2023	99	85	184
Nov 2023	100	58	158
Dec 2023	235	139	374
Jan 2024	461	91	552
Feb 2024	245	176	421
Mar 2024	225	168	393



PLEASE NOTE:

- Next Report will include the following dates: April 1, 2023, through April 30, 2024.

Medicare Part B Reimbursement and Penalty Report
PAY PERIOD 4/30/2024

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
ANTHEM BC III				
240	7596	\$1,212,673.30	1	\$10.50
241	136	\$21,602.10	0	\$0.00
242	942	\$154,784.60	0	\$0.00
243	4534	\$1,485,653.71	0	\$0.00
244	14	\$2,170.90	0	\$0.00
245	56	\$9,423.40	0	\$0.00
246	14	\$2,370.80	0	\$0.00
247	161	\$28,378.10	0	\$0.00
248	15	\$4,576.80	0	\$0.00
249	67	\$21,916.40	0	\$0.00
250	17	\$5,487.30	0	\$0.00
Plan Total:	13,552	\$2,949,037.41	1	\$10.50
CIGNA - PREFERRED with RX				
321	35	\$4,824.90	0	\$0.00
322	7	\$1,027.00	0	\$0.00
324	20	\$6,380.90	0	\$0.00
327	1	\$104.90	0	\$0.00
Plan Total:	63	\$12,337.70	0	\$0.00
KAISER SR. ADVANTAGE				
394	21	\$3,403.90	0	\$0.00
397	3	\$494.00	0	\$0.00
398	8	\$2,795.20	0	\$0.00
403	12013	\$1,878,286.02	0	\$0.00
413	1574	\$256,347.74	0	\$0.00
418	6305	\$2,043,057.97	0	\$0.00
419	218	\$32,167.60	0	\$0.00
426	257	\$42,267.20	0	\$0.00
445	2	\$349.40	0	\$0.00
446	1	\$145.10	0	\$0.00
451	37	\$6,239.20	0	\$0.00
455	9	\$1,747.00	0	\$0.00
457	15	\$5,413.20	0	\$0.00
459	1	\$349.40	0	\$0.00
462	86	\$14,006.20	0	\$0.00
465	1	\$174.70	0	\$0.00
466	29	\$8,819.10	0	\$0.00
472	27	\$4,411.50	0	\$0.00
476	3	\$608.40	0	\$0.00
478	14	\$4,810.40	0	\$0.00
479	1	\$144.60	0	\$0.00
482	87	\$13,781.50	0	\$0.00
486	1	\$174.70	0	\$0.00
488	35	\$11,753.40	0	\$0.00
491	1	\$148.50	0	\$0.00
Plan Total:	20,749	\$4,331,895.93	0	\$0.00

Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 4/30/2024

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	282	\$45,332.30	0	\$0.00
613	99	\$32,119.10	0	\$0.00
620	7	\$1,151.10	0	\$0.00
622	9	\$1,496.50	0	\$0.00
623	2	\$559.20	0	\$0.00
Plan Total:	399	80,658	0	0
UNITED HEALTHCARE GROUP MEDICARE ADV. HMO				
701	2091	\$336,802.20	0	\$0.00
702	401	\$65,119.00	0	\$0.00
703	1354	\$450,510.00	0	\$0.00
704	101	\$16,076.00	0	\$0.00
705	49	\$17,101.10	0	\$0.00
Plan Total:	3,996	\$885,608.30	0	\$0.00
Grand Total:	38,759	\$8,259,537.54	1	\$10.50

Medicare Part B Reimbursement and Penalty Report
PAY PERIOD 4/30/2024

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397	3	\$494.00	0	\$0.00
398	8	\$2,795.20	0	\$0.00
403	12013	\$1,878,286.02	0	\$0.00
413	1574	\$256,347.74	0	\$0.00
418	6305	\$2,043,057.97	0	\$0.00
419	218	\$32,167.60	0	\$0.00
426	257	\$42,267.20	0	\$0.00
445	2	\$349.40	0	\$0.00
446	1	\$145.10	0	\$0.00
451	37	\$6,239.20	0	\$0.00
455	9	\$1,747.00	0	\$0.00
457	15	\$5,413.20	0	\$0.00
459	1	\$349.40	0	\$0.00
462	86	\$14,006.20	0	\$0.00
465	1	\$174.70	0	\$0.00
466	29	\$8,819.10	0	\$0.00
472	27	\$4,411.50	0	\$0.00
476	3	\$608.40	0	\$0.00
478	14	\$4,810.40	0	\$0.00
479	1	\$144.60	0	\$0.00
482	87	\$13,781.50	0	\$0.00
486	1	\$174.70	0	\$0.00
488	35	\$11,753.40	0	\$0.00
491	1	\$148.50	0	\$0.00
Plan Total:	20,749	\$4,331,895.93	0	\$0.00

Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 4/30/2024

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	282	\$45,332.30	0	\$0.00
613	99	\$32,119.10	0	\$0.00
620	7	\$1,151.10	0	\$0.00
622	9	\$1,496.50	0	\$0.00
623	2	\$559.20	0	\$0.00
Plan Total:	399	80,658	0	0
UNITED HEALTHCARE GROUP MEDICARE ADV. HMO				
701	2091	\$336,802.20	0	\$0.00
702	401	\$65,119.00	0	\$0.00
703	1354	\$450,510.00	0	\$0.00
704	101	\$16,076.00	0	\$0.00
705	49	\$17,101.10	0	\$0.00
Plan Total:	3,996	\$885,608.30	0	\$0.00
LOCAL 1014				
804	189	\$42,029.00	0	\$0.00
805	225	\$44,789.70	0	\$0.00
806	713	\$273,560.20	0	\$0.00
807	54	\$10,576.60	0	\$0.00
808	19	\$7,756.60	0	\$0.00
812	250	\$48,077.40	0	\$0.00
813	1	\$174.70	0	\$0.00
Plan Total:	1,451	\$426,964.20	0	\$0.00
Grand Total:	40,210	\$8,686,501.74	1	\$10.50

Medical and Dental Vision Insurance Premiums May 2024

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Medical Plan							
Anthem Blue Cross Prudent Buyer Plan							
201	441	\$419,726.16	\$63,729.59	\$355,044.81	\$418,774.40	(\$951.76)	\$417,822.64
202	233	\$436,157.36	\$41,786.99	\$412,891.37	\$454,678.36	(\$1,871.92)	\$452,806.44
203	79	\$168,998.40	\$24,498.36	\$121,487.06	\$145,985.42	\$0.00	\$145,985.42
204	31	\$39,138.24	\$8,390.23	\$27,078.80	\$35,469.03	\$0.00	\$35,469.03
SUBTOTAL	784	\$1,064,020.16	\$138,405.17	\$916,502.04	\$1,054,907.21	(\$2,823.68)	\$1,052,083.53
Anthem Blue Cross I							
211	537	\$740,920.18	\$48,429.31	\$695,502.99	\$743,932.30	(\$1,376.62)	\$742,555.68
212	228	\$572,422.62	\$26,490.07	\$542,537.79	\$569,027.86	\$0.00	\$569,027.86
213	71	\$213,377.54	\$24,611.50	\$177,074.12	\$201,685.62	\$0.00	\$201,685.62
214	21	\$40,010.30	\$3,273.56	\$36,736.74	\$40,010.30	\$0.00	\$40,010.30
215	1	\$464.72	\$130.12	\$334.60	\$464.72	\$0.00	\$464.72
SUBTOTAL	858	\$1,567,195.36	\$102,934.56	\$1,452,186.24	\$1,555,120.80	(\$1,376.62)	\$1,553,744.18
Anthem Blue Cross II							
221	2,396	\$3,304,586.48	\$171,222.04	\$3,142,687.09	\$3,313,909.13	(\$5,498.48)	\$3,308,410.65
222	2,044	\$5,112,155.26	\$113,939.14	\$4,874,498.08	\$4,988,437.22	\$0.00	\$4,988,437.22
223	943	\$2,770,985.04	\$106,221.20	\$2,641,380.00	\$2,747,601.20	(\$5,845.96)	\$2,741,755.24
224	244	\$447,387.90	\$42,265.40	\$401,485.20	\$443,750.60	\$5,455.95	\$449,206.55
SUBTOTAL	5,627	\$11,635,114.68	\$433,647.78	\$11,060,050.37	\$11,493,698.15	(\$5,888.49)	\$11,487,809.66

Medical and Dental Vision Insurance Premiums May 2024

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Anthem Blue Cross III							
240	7,636	\$4,277,610.83	\$564,617.51	\$3,744,312.75	\$4,308,930.26	(\$3,919.79)	\$4,305,010.47
241	136	\$246,964.80	\$22,477.33	\$220,908.27	\$243,385.60	\$0.00	\$243,385.60
242	935	\$1,700,120.00	\$103,367.24	\$1,559,171.16	\$1,662,538.40	\$0.00	\$1,662,538.40
243	4,534	\$5,077,409.40	\$533,496.13	\$4,495,167.49	\$5,028,663.62	\$5,571.00	\$5,034,234.62
244	14	\$14,033.88	\$1,664.01	\$12,369.87	\$14,033.88	\$0.00	\$14,033.88
245	57	\$57,137.94	\$5,994.48	\$52,145.88	\$58,140.36	\$0.00	\$58,140.36
246	14	\$31,246.74	\$2,231.91	\$31,246.74	\$33,478.65	\$0.00	\$33,478.65
247	166	\$372,728.97	\$19,105.16	\$355,855.72	\$374,960.88	(\$2,231.91)	\$372,728.97
248	15	\$23,346.45	\$1,992.22	\$21,354.23	\$23,346.45	(\$1,556.43)	\$21,790.02
249	68	\$107,393.67	\$4,949.45	\$99,331.36	\$104,280.81	\$0.00	\$104,280.81
250	17	\$29,652.25	\$2,267.52	\$27,384.73	\$29,652.25	\$0.00	\$29,652.25
SUBTOTAL	13,592	\$11,937,644.93	\$1,262,162.96	\$10,619,248.20	\$11,881,411.16	(\$2,137.13)	\$11,879,274.03
CIGNA Network Model Plan							
301	228	\$409,355.82	\$112,246.78	\$320,088.04	\$432,334.82	(\$1,787.58)	\$430,547.24
302	56	\$190,421.32	\$36,958.84	\$108,750.34	\$145,709.18	\$0.00	\$145,709.18
303	9	\$34,298.91	\$7,922.52	\$22,565.40	\$30,487.92	\$0.00	\$30,487.92
304	13	\$30,834.57	\$12,167.56	\$16,295.12	\$28,462.68	\$0.00	\$28,462.68
SUBTOTAL	306	\$664,910.62	\$169,295.70	\$467,698.90	\$636,994.60	(\$1,787.58)	\$635,207.02
CIGNA Preferred w/ Rx - Phoenix, AZ							
321	35	\$12,140.10	\$1,595.57	\$10,544.53	\$12,140.10	\$0.00	\$12,140.10
322	7	\$12,507.32	\$714.70	\$11,792.62	\$12,507.32	\$0.00	\$12,507.32
324	20	\$13,714.40	\$1,398.88	\$12,315.52	\$13,714.40	\$0.00	\$13,714.40
327	1	\$2,370.95	\$474.19	\$1,896.76	\$2,370.95	\$0.00	\$2,370.95
SUBTOTAL	63	\$40,732.77	\$4,183.34	\$36,549.43	\$40,732.77	\$0.00	\$40,732.77

Medical and Dental Vision Insurance Premiums May 2024

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser/Senior Advantage							
401	1,580	\$2,024,030.19	\$147,390.39	\$1,856,386.84	\$2,003,777.23	\$2,531.62	\$2,006,308.85
403	12,006	\$3,020,879.60	\$271,808.45	\$2,755,828.71	\$3,027,637.16	(\$5,242.37)	\$3,022,394.79
404	474	\$564,821.60	\$10,252.22	\$551,009.58	\$561,261.80	\$2,373.20	\$563,635.00
405	1,398	\$1,774,547.56	\$17,961.20	\$1,754,049.48	\$1,772,010.68	\$3,805.32	\$1,775,816.00
411	1,923	\$4,910,964.52	\$205,926.99	\$4,611,663.59	\$4,817,590.58	\$10,094.48	\$4,827,685.06
413	1,549	\$2,390,322.65	\$109,004.59	\$2,222,502.55	\$2,331,507.14	\$0.00	\$2,331,507.14
414	50	\$122,220.50	\$782.21	\$121,438.29	\$122,220.50	\$0.00	\$122,220.50
418	6,267	\$3,108,546.16	\$220,991.00	\$2,858,001.56	\$3,078,992.56	(\$6,895.68)	\$3,072,096.88
419	220	\$315,782.48	\$4,286.70	\$310,066.90	\$314,353.60	\$0.00	\$314,353.60
420	104	\$248,346.00	\$1,135.30	\$242,480.30	\$243,615.60	\$0.00	\$243,615.60
421	8	\$10,126.48	\$1,164.54	\$8,961.94	\$10,126.48	\$0.00	\$10,126.48
422	264	\$677,035.00	\$2,122.05	\$652,176.70	\$654,298.75	\$0.00	\$654,298.75
426	258	\$389,765.76	\$3,021.46	\$392,787.18	\$395,808.64	\$0.00	\$395,808.64
428	43	\$105,222.72	\$489.40	\$104,733.32	\$105,222.72	\$0.00	\$105,222.72
430	146	\$371,745.36	\$3,388.73	\$363,298.87	\$366,687.60	\$5,057.76	\$371,745.36
SUBTOTAL	26,290	\$20,034,356.58	\$999,725.23	\$18,805,385.81	\$19,805,111.04	\$11,724.33	\$19,816,835.37

Medical and Dental Vision Insurance Premiums May 2024

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Colorado							
450	2	\$2,206.50	\$441.30	\$1,765.20	\$2,206.50	\$0.00	\$2,206.50
451	38	\$11,320.20	\$1,733.76	\$10,182.24	\$11,916.00	\$0.00	\$11,916.00
453	8	\$21,956.04	\$0.00	\$17,076.92	\$17,076.92	\$0.00	\$17,076.92
454	1	\$3,293.85	\$721.63	\$2,572.22	\$3,293.85	\$0.00	\$3,293.85
455	9	\$12,538.35	\$55.73	\$13,875.77	\$13,931.50	\$0.00	\$13,931.50
457	15	\$8,817.00	\$940.48	\$8,464.32	\$9,404.80	\$0.00	\$9,404.80
459	1	\$1,683.05	\$67.32	\$1,615.73	\$1,683.05	\$0.00	\$1,683.05
SUBTOTAL	74	\$61,814.99	\$3,960.22	\$55,552.40	\$59,512.62	\$0.00	\$59,512.62
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	13	\$16,841.50	\$1,580.51	\$15,260.99	\$16,841.50	\$0.00	\$16,841.50
462	87	\$34,311.93	\$4,866.73	\$29,839.59	\$34,706.32	\$0.00	\$34,706.32
463	4	\$10,331.96	\$1,658.89	\$8,673.07	\$10,331.96	\$0.00	\$10,331.96
465	1	\$1,681.89	\$0.00	\$1,681.89	\$1,681.89	\$0.00	\$1,681.89
466	28	\$22,642.62	\$1,639.63	\$19,441.43	\$21,081.06	\$0.00	\$21,081.06
SUBTOTAL	147	\$105,106.07	\$9,745.76	\$94,193.14	\$103,938.90	\$0.00	\$103,938.90

Medical and Dental Vision Insurance Premiums May 2024

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Hawaii							
471	5	\$4,773.20	\$267.30	\$4,505.90	\$4,773.20	\$0.00	\$4,773.20
472	27	\$11,750.40	\$1,549.29	\$10,201.11	\$11,750.40	\$0.00	\$11,750.40
473	2	\$3,965.12	\$1,215.88	\$2,749.24	\$3,965.12	\$0.00	\$3,965.12
474	4	\$7,605.12	\$0.00	\$7,605.12	\$7,605.12	\$0.00	\$7,605.12
475	3	\$11,391.68	\$0.00	\$5,695.84	\$5,695.84	\$0.00	\$5,695.84
476	3	\$4,145.52	\$1,216.02	\$4,311.34	\$5,527.36	\$0.00	\$5,527.36
478	14	\$12,073.60	\$1,448.83	\$10,624.77	\$12,073.60	\$0.00	\$12,073.60
479	1	\$2,409.76	\$0.00	\$2,409.76	\$2,409.76	\$0.00	\$2,409.76
SUBTOTAL	59	\$58,114.40	\$5,697.32	\$48,103.08	\$53,800.40	\$0.00	\$53,800.40
Kaiser - Oregon							
481	2	\$2,336.86	\$584.21	\$1,752.65	\$2,336.86	\$0.00	\$2,336.86
482	87	\$43,324.26	\$6,314.40	\$37,009.86	\$43,324.26	\$0.00	\$43,324.26
483	3	\$4,371.48	\$577.53	\$3,793.95	\$4,371.48	\$0.00	\$4,371.48
484	7	\$16,302.02	\$0.00	\$16,302.02	\$16,302.02	\$0.00	\$16,302.02
486	1	\$1,658.41	\$0.00	\$1,658.41	\$1,658.41	\$0.00	\$1,658.41
488	35	\$34,578.60	\$5,315.24	\$29,263.36	\$34,578.60	\$0.00	\$34,578.60
491	1	\$1,682.42	\$0.00	\$1,682.42	\$1,682.42	\$0.00	\$1,682.42
498	1	\$2,617.59	\$139.57	\$2,478.02	\$2,617.59	\$0.00	\$2,617.59
SUBTOTAL	137	\$106,871.64	\$12,930.95	\$93,940.69	\$106,871.64	\$0.00	\$106,871.64
SCAN Health Plan							
611	283	\$70,599.56	\$14,905.41	\$55,694.15	\$70,599.56	(\$497.18)	\$70,102.38
613	99	\$48,428.82	\$10,223.86	\$38,204.96	\$48,428.82	\$0.00	\$48,428.82
SUBTOTAL	382	\$119,028.38	\$25,129.27	\$93,899.11	\$119,028.38	(\$497.18)	\$118,531.20

Medical and Dental Vision Insurance Premiums May 2024

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
SCAN Health Plan, AZ							
620	7	\$1,740.13	\$452.43	\$1,287.70	\$1,740.13	\$0.00	\$1,740.13
SUBTOTAL	7	\$1,740.13	\$452.43	\$1,287.70	\$1,740.13	\$0.00	\$1,740.13
SCAN Health Plan, NV							
622	10	\$2,485.90	\$308.25	\$2,177.65	\$2,485.90	\$0.00	\$2,485.90
623	2	\$978.36	\$0.00	\$978.36	\$978.36	\$0.00	\$978.36
SUBTOTAL	12	\$3,464.26	\$308.25	\$3,156.01	\$3,464.26	\$0.00	\$3,464.26
UHC Medicare Adv.							
701	2,084	\$677,657.76	\$78,214.63	\$595,563.41	\$673,778.04	(\$969.93)	\$672,808.11
702	392	\$687,208.05	\$36,379.55	\$620,285.92	\$656,665.47	(\$1,696.81)	\$654,968.66
703	1,352	\$866,607.34	\$81,975.25	\$788,787.12	\$870,762.37	(\$1,277.24)	\$869,485.13
704	102	\$203,009.10	\$9,860.43	\$175,747.89	\$185,608.32	\$0.00	\$185,608.32
705	49	\$42,886.27	\$2,170.60	\$42,466.13	\$44,636.73	\$0.00	\$44,636.73
706	2	\$789.74	\$47.38	\$742.36	\$789.74	\$0.00	\$789.74
SUBTOTAL	3,981	\$2,478,158.26	\$208,647.84	\$2,223,592.83	\$2,432,240.67	(\$3,943.98)	\$2,428,296.69
United Healthcare							
707	573	\$797,125.50	\$68,013.19	\$731,875.31	\$799,888.50	(\$1,381.50)	\$798,507.00
708	482	\$1,223,698.65	\$63,638.30	\$1,160,060.35	\$1,223,698.65	\$0.00	\$1,223,698.65
709	398	\$1,193,652.39	\$79,704.77	\$1,113,947.62	\$1,193,652.39	\$0.00	\$1,193,652.39
SUBTOTAL	1,453	\$3,214,476.54	\$211,356.26	\$3,005,883.28	\$3,217,239.54	(\$1,381.50)	\$3,215,858.04

Medical and Dental Vision Insurance Premiums May 2024

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Local 1014 Firefighters							
801	84	\$112,114.80	\$3,790.57	\$108,324.23	\$112,114.80	\$0.00	\$112,114.80
802	347	\$835,076.32	\$27,242.24	\$803,020.96	\$830,263.20	\$0.00	\$830,263.20
803	405	\$1,149,701.85	\$30,204.45	\$1,129,716.98	\$1,159,921.43	\$2,838.77	\$1,162,760.20
804	196	\$261,601.20	\$8,141.66	\$253,459.54	\$261,601.20	(\$42,029.00)	\$219,572.20
805	229	\$551,102.24	\$16,854.70	\$529,434.42	\$546,289.12	(\$44,789.70)	\$501,499.42
806	713	\$1,715,877.28	\$36,242.75	\$1,679,634.53	\$1,715,877.28	(\$275,966.76)	\$1,439,910.52
807	56	\$158,971.12	\$3,917.49	\$149,376.09	\$153,293.58	(\$10,576.60)	\$142,716.98
808	19	\$53,936.63	\$227.10	\$53,709.53	\$53,936.63	(\$7,756.60)	\$46,180.03
809	17	\$22,689.90	\$2,909.65	\$19,780.25	\$22,689.90	\$0.00	\$22,689.90
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	251	\$335,009.70	\$20,848.03	\$316,831.07	\$337,679.10	(\$42,738.60)	\$294,940.50
813	1	\$2,406.56	\$0.00	\$2,406.56	\$2,406.56	(\$174.70)	\$2,231.86
SUBTOTAL	2,330	\$5,228,662.95	\$155,262.29	\$5,070,985.86	\$5,226,248.15	(\$421,193.19)	\$4,805,054.96
Kaiser - Washington							
393	5	\$8,202.05	\$1,328.95	\$6,873.10	\$8,202.05	\$0.00	\$8,202.05
394	21	\$9,397.92	\$1,691.62	\$7,706.30	\$9,397.92	\$0.00	\$9,397.92
395	4	\$12,225.48	\$1,735.05	\$7,434.06	\$9,169.11	\$0.00	\$9,169.11
397	3	\$5,590.44	\$670.85	\$4,919.59	\$5,590.44	\$0.00	\$5,590.44
398	8	\$7,096.32	\$958.00	\$6,138.32	\$7,096.32	\$0.00	\$7,096.32
SUBTOTAL	41	\$42,512.21	\$6,384.47	\$33,071.37	\$39,455.84	\$0.00	\$39,455.84
Medical Plan Total	56,143	\$58,363,924.93	\$3,750,229.80	\$54,081,286.46	\$57,831,516.26	(\$429,305.02)	\$57,402,211.24

Medical and Dental Vision Insurance Premiums May 2024

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Dental/Vision Plan							
CIGNA Indemnity Dental/Vision							
501	26,490	\$1,395,756.60	\$143,184.66	\$1,264,513.93	\$1,407,698.59	(\$1,524.72)	\$1,406,173.87
502	24,409	\$2,684,305.45	\$201,133.60	\$2,473,508.08	\$2,674,641.68	(\$1,949.05)	\$2,672,692.63
503	8	\$518.56	\$33.71	\$484.85	\$518.56	\$0.00	\$518.56
SUBTOTAL	50,907	\$4,080,580.61	\$344,351.97	\$3,738,506.86	\$4,082,858.83	(\$3,473.77)	\$4,079,385.06
CIGNA Dental HMO/Vision							
901	4,160	\$193,755.80	\$20,970.56	\$174,791.33	\$195,761.89	\$234.51	\$195,996.40
902	3,111	\$298,131.12	\$21,383.03	\$273,407.86	\$294,790.89	\$285.84	\$295,076.73
903	3	\$141.33	\$37.69	\$103.64	\$141.33	\$0.00	\$141.33
SUBTOTAL	7,274	\$492,028.25	\$42,391.28	\$448,302.83	\$490,694.11	\$520.35	\$491,214.46
Dental/Vision Plan Total	58,181	\$4,572,608.86	\$386,743.25	\$4,186,809.69	\$4,573,552.94	(\$2,953.42)	\$4,570,599.52
GRAND TOTALS	114,324	\$62,936,533.79	\$4,136,973.05	\$58,268,096.15	\$62,405,069.20	(\$432,258.44)	\$61,972,810.76

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.

CARRIER DEDUCTION PREMIUMS*	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

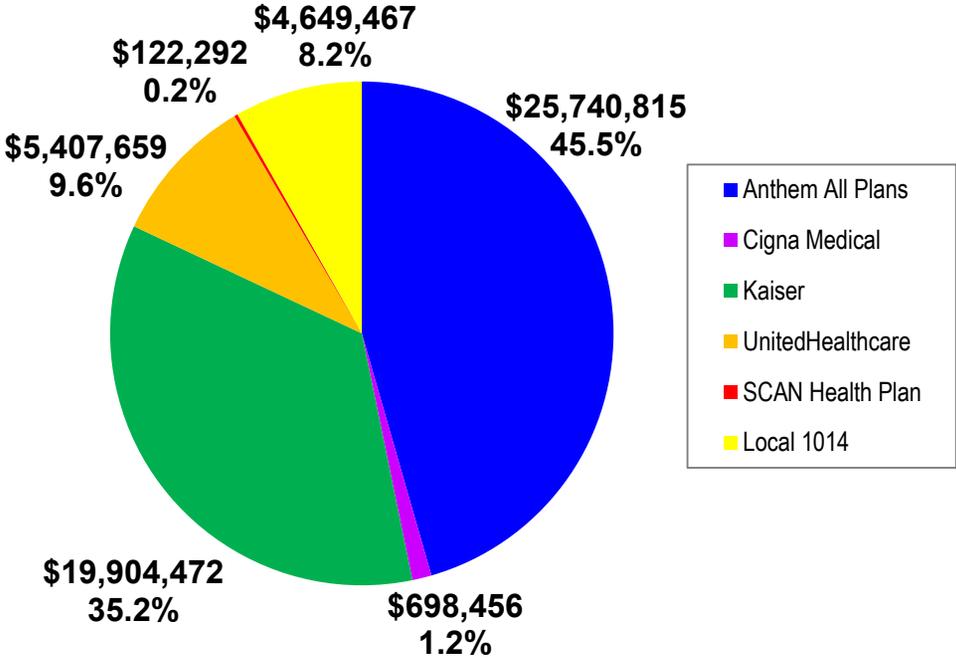
\$39.02	901	Retiree Only
\$81.07	902	Retiree and Dependent(s)
\$39.56	903	Survivor Children Only Rates

Los Angeles County Employees Retirement Association
Premium & Enrollment
Coverage Month Ending March 2024

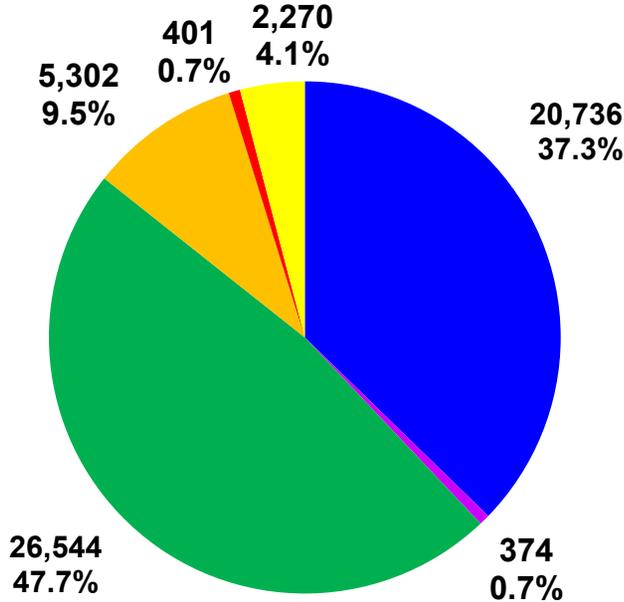
Carrier / Plan	Monthly Premium	Percent of Total	Retirees	Percent of Total
Anthem All Plans	\$25,740,815	45.6%	20,736	37.3%
Cigna Medical	\$698,456	1.2%	374	0.7%
Kaiser	\$19,904,472	35.2%	26,544	47.7%
UnitedHealthcare	\$5,407,659	9.6%	5,302	9.5%
SCAN Health Plan	\$122,292	0.2%	401	0.7%
Local 1014	\$4,649,467	8.2%	2,270	4.1%
Combined Medical	\$56,523,160	100.0%	55,627	100.0%

Cigna Dental & Vision (PPO and HMO)	\$4,531,711	57,723
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Monthly Premium

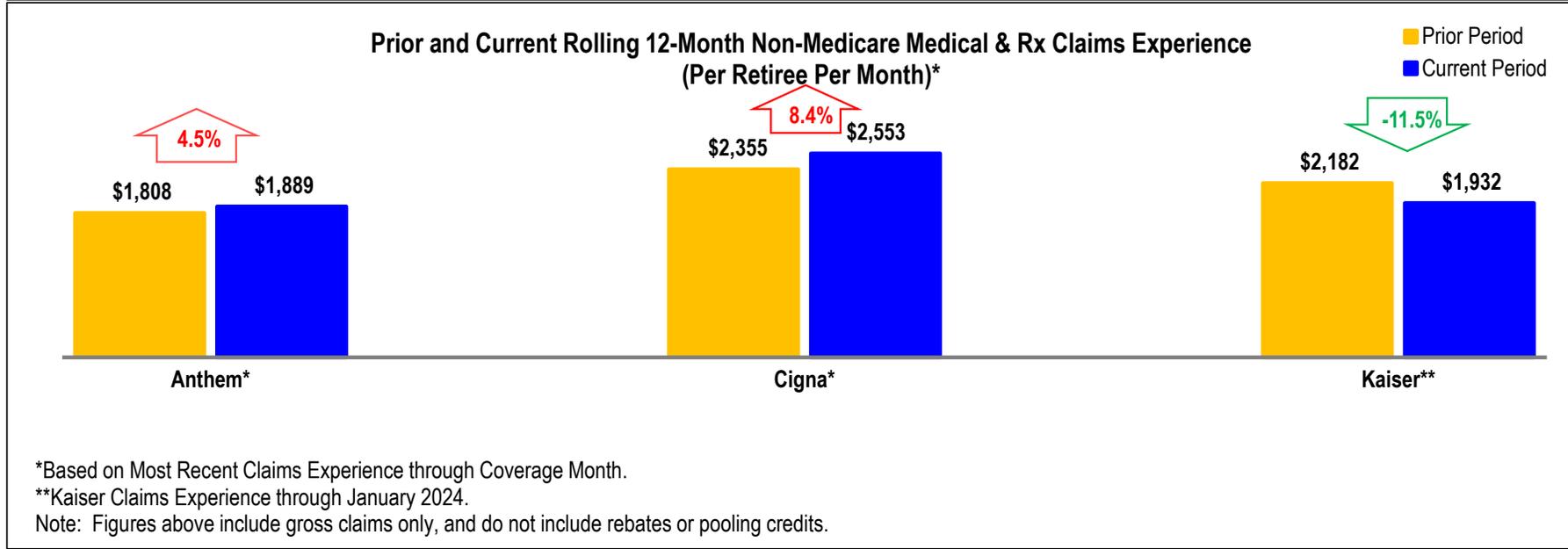
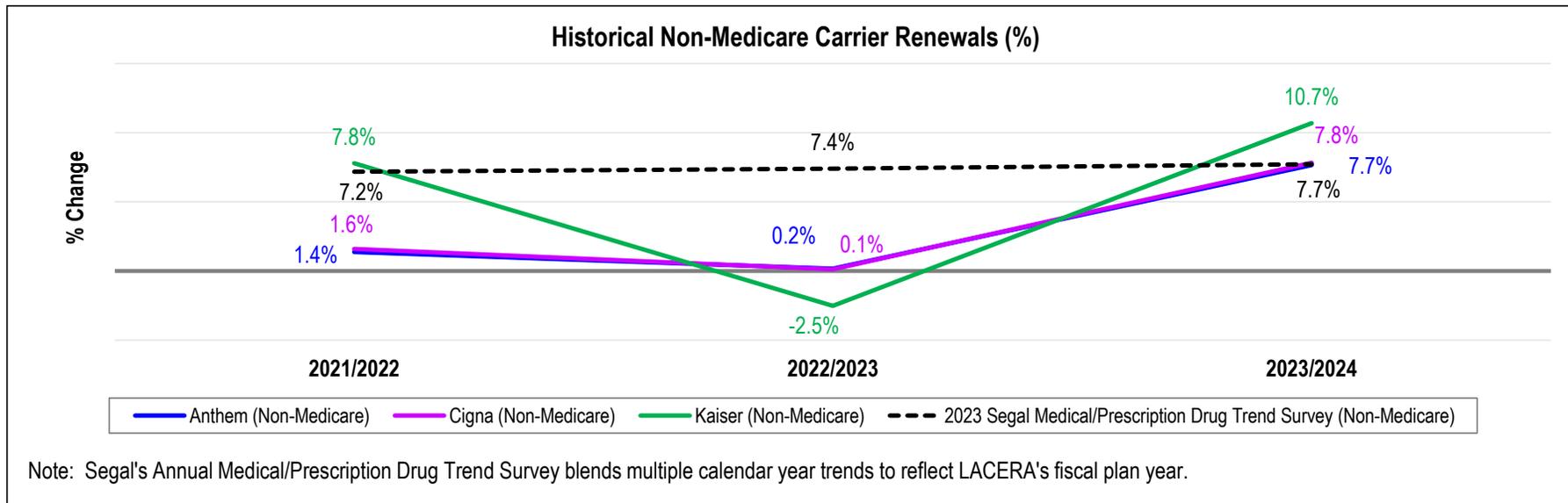


Retirees

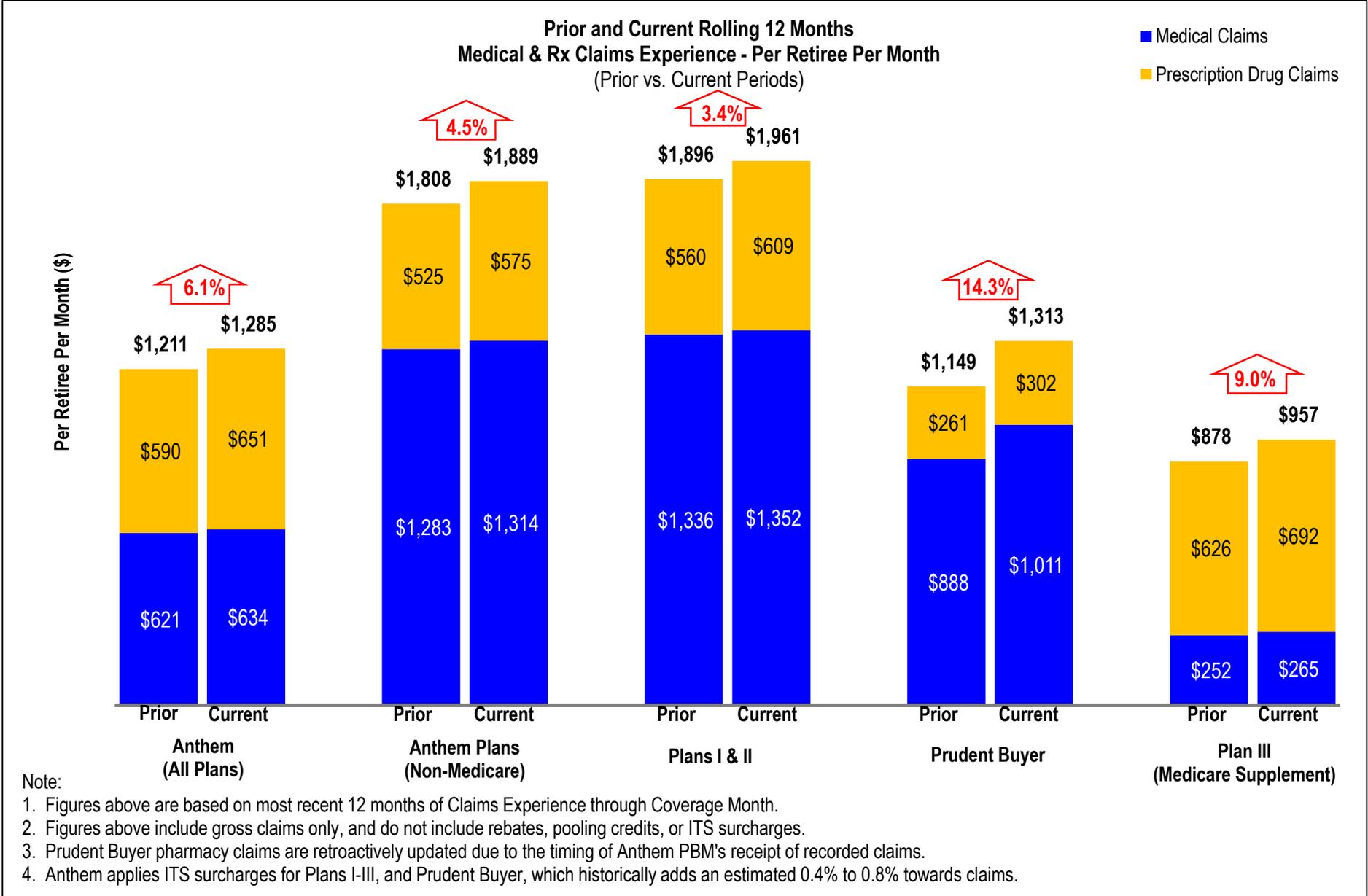


Note: Premiums include LACERA's Administrative Fee of \$8.00 per member, per plan, per month.

Los Angeles County Employees Retirement Association
Claims Experience by Carrier
Coverage Month Ending March 2024



Los Angeles County Employees Retirement Association
Anthem Claims Experience By Plan
Coverage Month Ending March 2024



Los Angeles County Employees Retirement Association

Kaiser Utilization

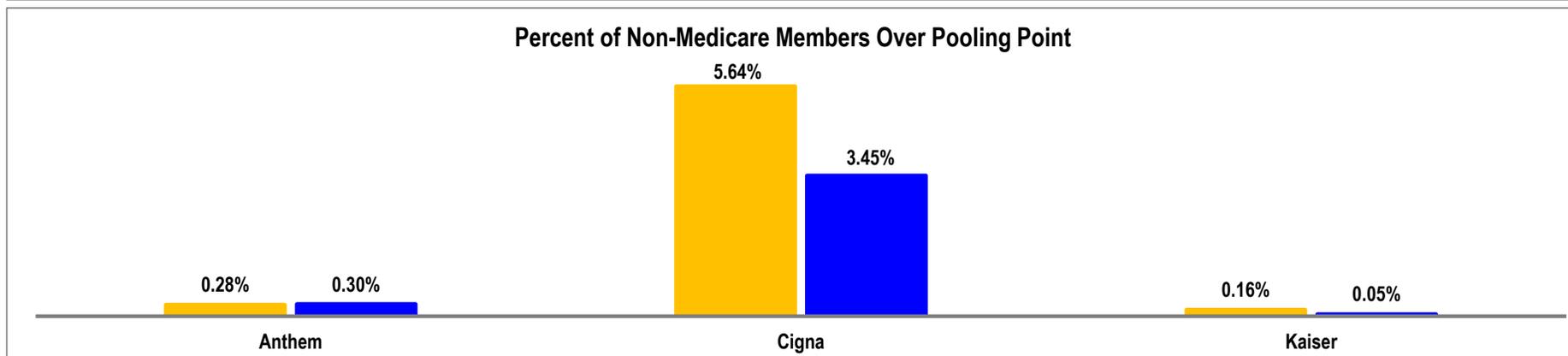
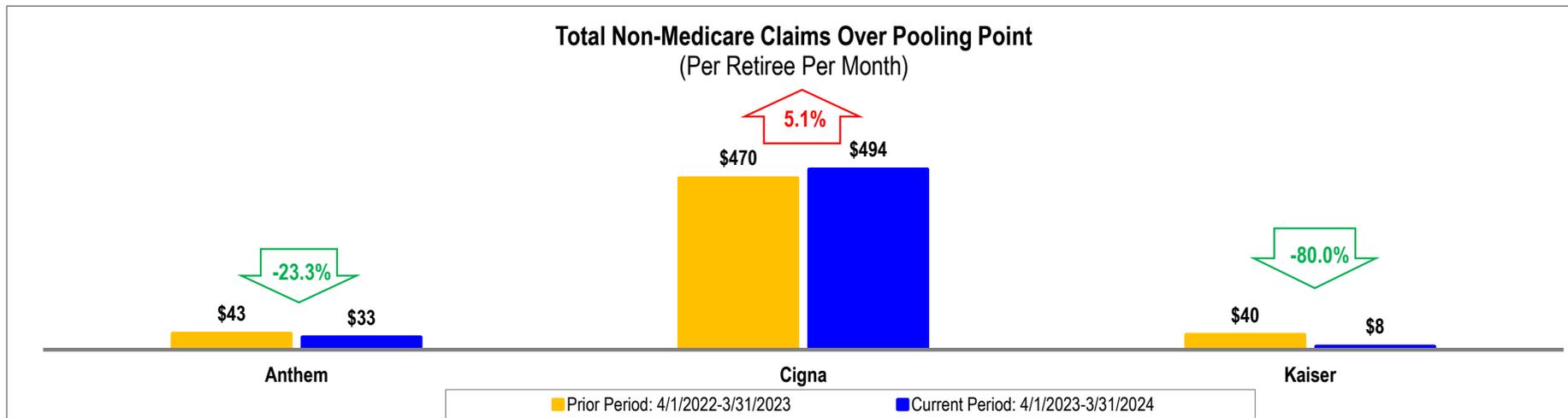
Coverage Month Ending March 2024

- 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 2/1/2023 - 1/31/2024	Prior Period 2/1/2022 - 1/31/2023	Change
Average Contract Size	2.35	2.36	-0.42%
Average Members	8,884	8,968	-0.94%
Inpatient Claims Per Member Per Month	\$183.60	\$305.22	-39.85%
Outpatient Claims Per Member Per Month	\$371.59	\$354.09	4.94%
Pharmacy Per Member Per Month	\$137.92	\$127.57	8.11%
Other Per Member Per Month	\$134.12	\$141.50	-5.22%
Total Claims Per Member Per Month	\$827.23	\$928.38	-10.90%
Total Paid Claims	\$88,184,686	\$99,912,252	-11.74%
Large Claims over \$550,000 Pooling Point ¹			
Number of Claims over Pooling Point	2	6	
Amount over Pooling Point	\$348,703	\$1,844,627	-81.10%
% of Total Paid Claims	0.40%	1.85%	
Inpatient Days / 1000	354.5	473.7	-25.16%
Inpatient Admits / 1000	51.1	58.7	-12.95%
Outpatient Visits / 1000	14,306.4	14,607.6	-2.06%
Pharmacy Scripts Per Member Per Year	10.7	10.4	2.88%

¹ The pooling threshold is \$525,000 for the plan year beginning 7/1/2023 through 6/30/2024 .

Los Angeles County Employees Retirement Association
 High Cost Claimants (Anthem, Cigna, & Kaiser)
 Coverage Month Ending March 2024



Stop-Loss & Pooling Points Overview:

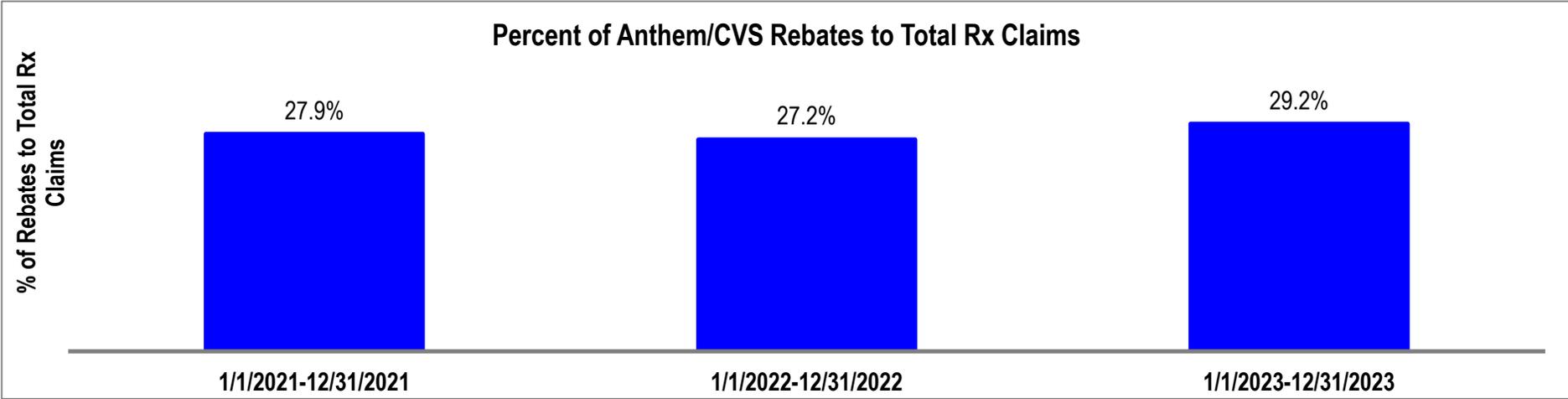
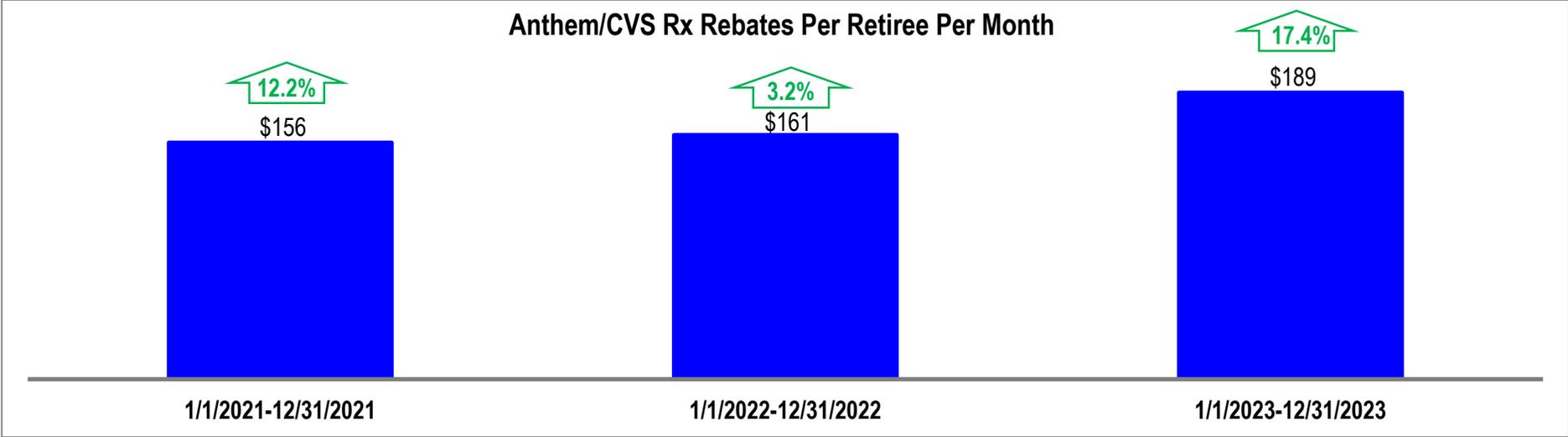
Plan sponsors mitigate the financial risk associated with individual large claimants through reinsurance. Claims exceeding the specified individual pooling threshold are deducted from the carrier's renewal calculation. The pooling credit is offset by the carrier's pooling expense, which is applied to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

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

Pooling Points by Carrier:

1. Anthem's pooling points are \$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 \$550,000.

Los Angeles County Employees Retirement Association
Prescription Drug Rebates (Anthem)
Coverage Month Ending March 2024



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.

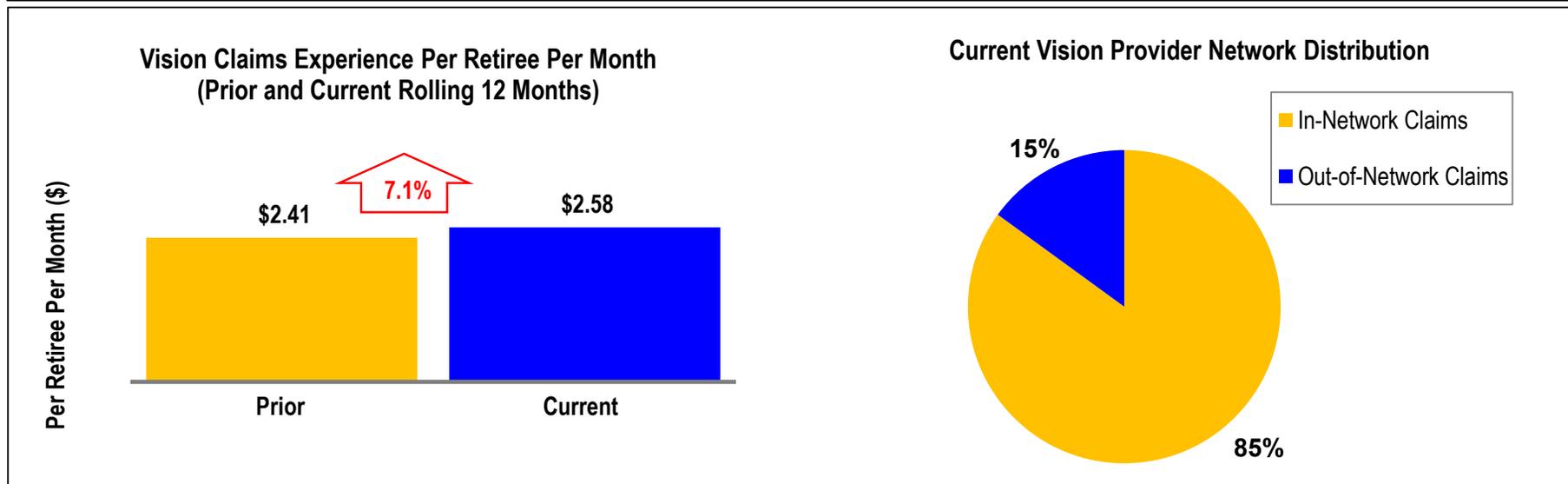
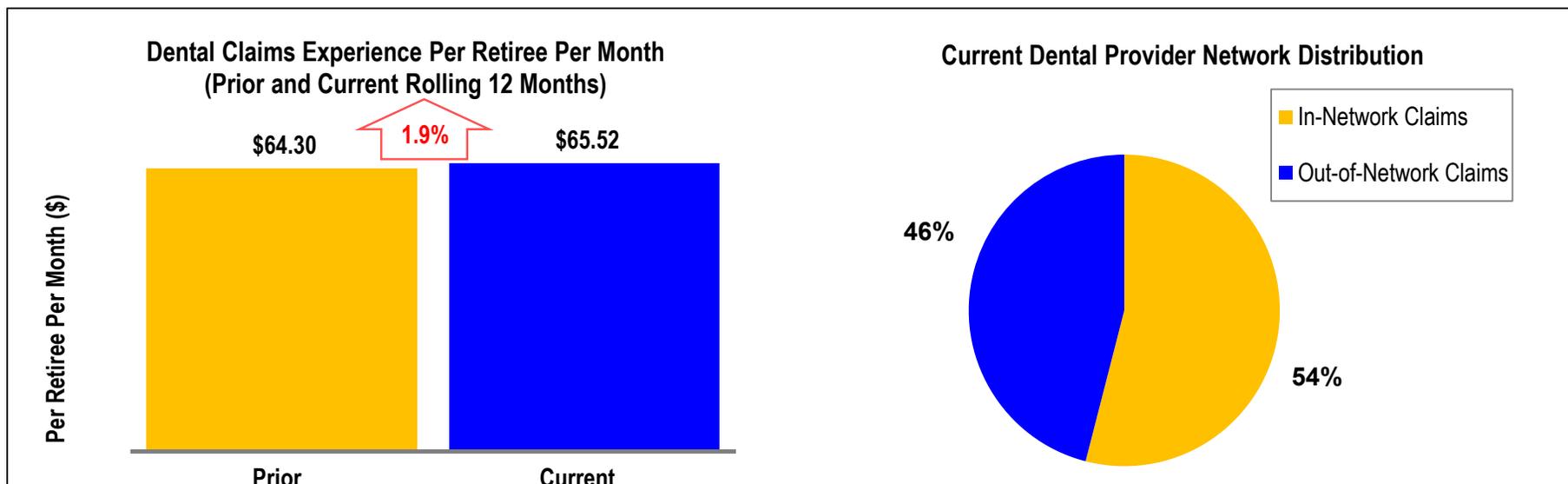
Note:

- 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 March 2024



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.

Guidance Clarifies RDS and Creditable Coverage Calculation

The Inflation Reduction Act made significant changes to the Medicare Part D prescription drug benefit, most of which will take effect in 2025 and will have implications for sponsors of retiree health plans, including standalone Medicare prescription drug plans, Medicare Advantage plans with prescription drug coverage and Employer Group Waiver Plans (EGWPs). The Centers for Medicare & Medicaid Services (CMS) has issued final guidance on how those changes will work.



This insight summarizes key aspects of the guidance that differ from the draft guidance CMS issued earlier this year. We also discuss the implications for retiree health plans.

What's changing in 2025?

In 2025, the annual out-of-pocket amount payable by retirees who have Part D coverage will be reduced to \$2,000. The coverage gap phase of the benefit will be eliminated, reducing the number of phases from four to three: the deductible phase, the initial coverage phase and the catastrophic phase.

Sponsors of EGWPs will be able to design benefits as they feel is appropriate for their group within the deductible and initial coverage phases but must maintain the same catastrophic phase as commercial Part D plans.

The Inflation Reduction Act also repealed the existing coverage gap discount program and established a new manufacturer discount program. Under the new discount program, participating manufacturers are required to provide discounts on certain drugs (e.g., brand drugs, biologics and biosimilars) both in the initial coverage phase and in the catastrophic coverage phase of the Part D benefit. Certain discounts will be given during a multi-year phase-in period.

Additionally, the Inflation Reduction Act changed the amount that Medicare beneficiaries, plan sponsors, manufacturers and the federal government pay throughout the benefit. Payments in the catastrophic phase by the federal government to Part D plans (federal reinsurance) will decrease, with plans picking up a larger share of the costs during the period after which an individual has met their out-of-pocket costs.

Further affecting plan sponsor and beneficiary costs, the Medicare Prescription Payment Plan will begin in 2025. Under this new program, Part D sponsors must give enrollees the option to pay out-of-pocket costs monthly. Finally, the Inflation Reduction Act expanded income eligibility for benefits under the Medicare Part D Low-Income Subsidy Program.

For more information about the Inflation Reduction Act changes to Medicare Part D, refer to our [chart summarizing them](#). For information on prior guidance, see our [February 20, 2024 insight](#) and our [March 19, 2024 webinar](#).

The final guidance

Plans that receive money from the federal government under the Retiree Drug Subsidy (RDS) program are required to annually attest that the actuarial value of prescription drug coverage under the plan is at least equal to the actuarial value of the standard Part D benefit. The [final guidance](#), which was published on April 1, 2024, clarifies that when determining actuarial value for the attestation plan sponsors may:

- Include federal reinsurance when calculating actuarial value
- Exclude manufacturer discounts when calculating actuarial value

The final guidance also clarifies that the “simplified determination methodology” can still be used for a 2025 creditable coverage determination.

Determining actuarial value

The final guidance confirms that actuarial value of the standard Part D benefit and a plan sponsor’s plan is based on the plan paid amount, which does include the federal reinsurance subsidy in the catastrophic phase. (CMS notes that draft guidance incorrectly stated the federal reinsurance subsidy in the catastrophic phase is not included.)

The final guidance also states that the determination of actuarial value does **not** take into account the value of discounts paid by manufacturers under the discount program.

While the guidance clarifies how the RDS actuarial determination is made, current plans should make sure to test their plan as soon as possible, because the changes in the Part D benefit mean that some plans who are currently eligible for the RDS may not pass the test for 2025.

The simplified determination methodology

In the final guidance, CMS clarifies that plans that cover active employees may continue to use the “simplified determination methodology” for determining creditable coverage for 2025. (The draft guidance suggested that methodology would no longer be available.) CMS noted in its guidance that it realized that changing the methodology for creditable coverage determination at this late date for the 2025 plan year could cause substantial disruption for both plan sponsors and participants.

Future guidance will indicate whether the creditable coverage simplified determination methodology can be used for 2026.

Implications for plan sponsors

The final guidance provides some relief for plan sponsors with active plans and helpful clarification for those who take advantage of the RDS program. Plan sponsors that offer retiree health benefits will need to take a close look at that coverage this year to ensure that it reflects new changes coming in 2025.

Plans that test for creditable coverage for active employees will be able to continue to use the current testing methodology for 2025, which means it is less likely that plans would be found to not be creditable coverage. Consequently, it is unlikely that participants could be forced to enroll in Medicare to avoid paying a late enrollment penalty.

Plan sponsors that offer an EGWP program will have several challenges for 2025, including monitoring Part D reimbursements and premium changes. Plan sponsors should begin working with their actuarial advisors on these changes. In addition, plan sponsors that offer an EGWP program should work with their PBMs, legal counsel and plan experts to ensure compliant implementation of the Medicare Prescription Payment Plan by January 1, 2025. This includes timely dissemination of communication materials notifying individuals of their rights.

Plan sponsors that participate in the RDS program must provide a benefit is equal to or better than the standard Part D benefit, which is improving under the Inflation Reduction Act. Plan sponsors in danger of losing the RDS may wish to either increase benefits or consider switching to an EGWP. They should work with their actuaries to understand the impact of the new law on their retiree health plan.

Plan sponsors also may wish to consider whether a Medicare Advantage program might be the right solution for their retirees.