IN PERSON & VIRTUAL BOARD MEETING

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



TO VIEW VIA WEB



TO PROVIDE PUBLIC COMMENT

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

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

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

AGENDA

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

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

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

8:30 A.M., WEDNESDAY, SEPTEMBER 3, 2025

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

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

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

COMMITTEE TRUSTEES:

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

- 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 August 6, 2025

IV. PUBLIC COMMENT

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

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

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

V. REPORTS

A. Engagement Report for August 2025 Barry W. Lew, Legislative Affairs Officer (For Information Only)

B. Staff Activities Report for August 2025
Cassandra Smith, Director, Retiree Healthcare
(For Information Only)

C. LACERA Claims Experience Michael Szeto, Segal Consulting

(Presentation)

D. Federal Legislation

Stephen Murphy, Segal Consulting (For Discussion Purposes)

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 agendized 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, <u>Board Meetings | LACERA</u>.

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

MINUTES OF THE 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

8:05 A.M. - 8:47 A.M., WEDNESDAY, AUGUST 6, 2025

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

Ronald Okum, Vice Chair

Aleen Langton, Trustee

Wayne Moore, Trustee (Teleconference under CA Govt. Code Section 54953(b))

Shawn R. Kehoe, Alternate Trustee (arrived 8:27 a.m.)

OTHER BOARD OF RETIREMENT TRUSTEES

JP Harris, Trustee

Lisa Proft, Alternate Ex-Officio (arrived 8:16 a.m.)

STAFF, ADVISORS AND PARTICIPANTS

Cassandra Smith, Director, Retiree Healthcare

Luis A. Lugo, Acting Chief Executive Officer

August 6, 2025 Page 2

STAFF, ADVISORS AND PARTICIPANTS (Continued)

JJ Popowich, Assistant Executive Officer

Laura Guglielmo, Assistant Executive Officer

Steven P. Rice, Chief Counsel

Barry W. Lew, Legislative Affairs Officer

Segal Consulting
Stephen Murphy, Sr. Vice President
Michael Szeto, Sr. Actuarial Associate
Amber Turner, Senior Consultant, Audits

I. CALL TO ORDER

This meeting was called to order by Chair Robbins at 8:05 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 July 10, 2025

Trustee Okum made a motion, Trustee Robbins seconded, to approve the minutes of the regular meeting of July 10, 2025. The motion passed by the following roll call vote:

Yes: Okum, Langton, Moore, Robbins

No: None

IV. PUBLIC COMMENT

There were no requests from the public to speak.

V. REPORTS

A. Engagement Report for July 2025

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

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

B. Staff Activities Report for July 2025

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

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

C. Annual Anthem Blue Cross and Cigna Audits

Cassandra Smith, Director, Retiree Healthcare Amber Turner, Segal Consulting (Presentation) (Memo dated July 17, 2025)

Ms. Turner presented the results of the annual Cigna Dental Plan and Anthem Blue Cross Medical Plan audits and answered questions from the Committee. This item was received and filed.

D. LACERA Claims Experience

Michael Szeto, Segal Consulting (Presentation)

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

E. Federal Legislation

Stephen Murphy, Segal Consulting (For Information Only)

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

VI. ITEMS FOR STAFF REVIEW

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

There was nothing to report.

VII. ITEMS FOR FUTURE AGENDAS

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

There was nothing to report.

VIII. GOOD OF THE ORDER

(For Information Purposes Only)

There was nothing to report.

IX. ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at 8:47 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 AUGUST 2025 FOR INFORMATION ONLY

Chicago Safety Retirement Enhancements

About 10 years ago, in response to the state's pension crisis, Illinois state legislators created a Tier II pension formula, which meant that some younger employees would receive slightly lower benefits than their older peers. Governor JB Pritzker recently signed a bill boosting pension benefits for Chicago police officers and firefighters hired after 2010, aligning them with downstate counterparts. The measure addresses disparities in Tier II retirement benefits but is projected to increase the city's pension liabilities by over \$11 billion in its Police and Fire pension funds, which were 25% funded before the passage of the bill dropped them to less than 18% funded.

Key changes include raising the salary cap used to calculate pensions, tying its growth to full inflation instead of the lesser of half the rate of inflation or 3%. Now it's the lesser of 3% or the full rate of inflation. It also allows a more favorable salary averaging method by changing it from the highest 8 years of the last 10 years to the highest 4 years of the last 5 years, although retirees would get the higher of the two averages.

While praised by first responder unions, the Civic Federation and city officials warn of long-term financial strain. The bill does not resolve Tier II issues for other city workers, such as whether Tier II plans meet Social Security's "safe harbor" rule for employees who do not participate in Social Security. (Source) (Source)

Social Security Adding Measures to Mitigate Fraud

The Social Security Administration (SSA) is introducing two key changes to enhance security and reduce fraud. Starting in August, recipients can opt into a new PIN-based phone authentication system, designed to make identity verification faster and more secure. This feature could reduce call times by about 30%. In addition, beginning September 30, the SSA will phase out paper checks for benefit payments, transitioning fully to electronic payments. While fewer than 1% of recipients—around 700,000 people—still receive paper checks, they can apply for a waiver. The SSA cites cost savings and improved security, noting that paper checks are significantly more prone to loss or theft. These updates follow a recent reversal of a policy that would have ended phone-based claims processing. (Source)

Study Found That Colorado PERA is a Valuable Tool for Recruitment and Retention The Colorado Public Employees' Retirement Association performed a study (last conducted a decade ago) on the role its defined benefit plan plays in recruitment and retention. Colorado PERA administers both a defined benefit (which is a hybrid DB plan)

Engagement Report (August 2025) Insurance, Benefits and Legislative Committee Page 2 of 3

and a defined contribution plan. Certain employees are eligible to choose between participating in one plan or the other.

The following are key findings from the study:

- The PERA hybrid DB plan provides income replacement ratios for career employees that are similar to, or higher than, alternative plan designs.
- Although some alternative plan designs provide higher income replacement ratios
 or have more stable costs, they might provide lower income replacement to some
 employees and require employees and retirees to bear a greater share of risk.
- The PERA hybrid DB plan is expected to provide a higher income replacement ratio than the PERA DC plan for career employees. The hybrid plan provides predictable income replacement, whereas the DC plan depends significantly on investment returns.
- The PERA DC plan is expected to provide higher income replacement ratios for members who terminate employment before age 55.
- The PERA hybrid DB plan has lower expected cost than the PERA DC plan for new members.
- Most state employees prefer the PERA hybrid DB plan over the PERA DC plan and reported valuing the guaranteed lifetime income benefits.
- For those who chose the PERA DC plan, the primary benefit cited was its portability if they leave PERA.

(Source) (Source)

Oregon PERS Economic Impact Study

Oregon PERS covers about 95% of public workers in Oregon, including all state and school district employees and most local government employees. It released an economic impact study and found that its benefit payments have a significant and positive impact on Oregon's economy.

- \$4.88 billion in annual benefit payments to PERS retirees living in Oregon provides \$5.55 billion in total value to Oregon's economy.
- PERS benefit payments support an estimated 32,126 Oregon jobs and \$1.60 billion wages from those jobs.
- The state of Oregon collects about \$302 million in taxes from PERS benefit payments.

Engagement Report (August 2025) Insurance, Benefits and Legislative Committee Page 3 of 3

More than 80% of Oregon PERS retirees live in Oregon, and the benefits they receive are largely spent locally. (Coincidentally, about 82% of LACERA's retirees continue to reside in the state of California based on LACERA's 2022 economic impact study.)

The National Association of State Retirement Administrators (NASRA) maintains a list of state and local public sector pension plans that have conducted economic impact studies: Alabama, California (CalPERS, CalSTRS, and LACERA), Colorado, Illinois, Indiana, Louisiana, Minnesota, Mississippi, Missouri, Nevada, Ohio, Oregon, South Dakota, and Texas. (Source) (Source)

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

<u>Retiree Healthcare Wellness Program Called Staying Healthy Together –</u> Fall Workshop

We are excited to share that our next retiree wellness event — the Staying Healthy Together Program — will take place on September 23 at Castaway in Burbank.

Our featured speaker will be **Lynne Chilton, BSN, RN**, representing **CVS Health and AccordantCare**. AccordantCare manages the Disease Management Program for members enrolled in Anthem Blue Cross Plans I, II and III. She will present strategies for building a healthy lifestyle and offer insights on how to take a proactive approach to care management.

Event Details:

Tuesday, September 23, 2025 8:30 a.m.–1:00 p.m. Castaway of Burbank

Activities Include:

- Health screenings
- Massage chairs
- Interactive wellness booths
- Raffle prizes
- Photo booth
- Healthy snacks

We extend our sincere thanks to our carrier and vendor partners — Anthem Blue Cross, AccordantCare, Cigna, CVS Caremark, Kaiser Permanente, SCAN Health Plan, UnitedHealthcare, and RELAC — as well as the Segal team and our staff for their invaluable support in making this event a success for our retired members.







For LACERA Retirees: **Staying Healthy Together**Fall Workshop

Whole Person Support

Join us to learn how to a create a healthy lifestyle, while being proactive on care management. Enjoy healthy snacks! Stay to win raffle prizes and reconnect with fellow retirees.

Tuesday, September 23, 2025 8:30 a.m.–1:00 p.m. Castaway of Burbank

(see other side for details)

Event Sponsors

AccordantCare
Anthem Blue Cross
Cigna
CVS Health
Kaiser Permanente
RELAC
SCAN Health Plan
UnitedHealthcare

WHEN Tuesday, September 23, 2025

8:30 a.m.-1:00 p.m.

FEATURED Whole Person Support
PRESENTATION Lynne Chilton, BSN, RN,

Clinical Advisor Supervisor

from CVS Health and AccordantCare

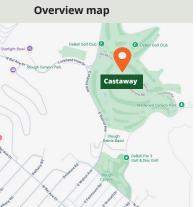
WHERE Castaway Burbank

1250 East Harvard Road Burbank, CA 91501

Free valet parking will be the only option at the event. Friendly event staff will be on hand to assist you with your vehicle.

DIRECTIONS

Castaway is located just north of downtown Burbank.

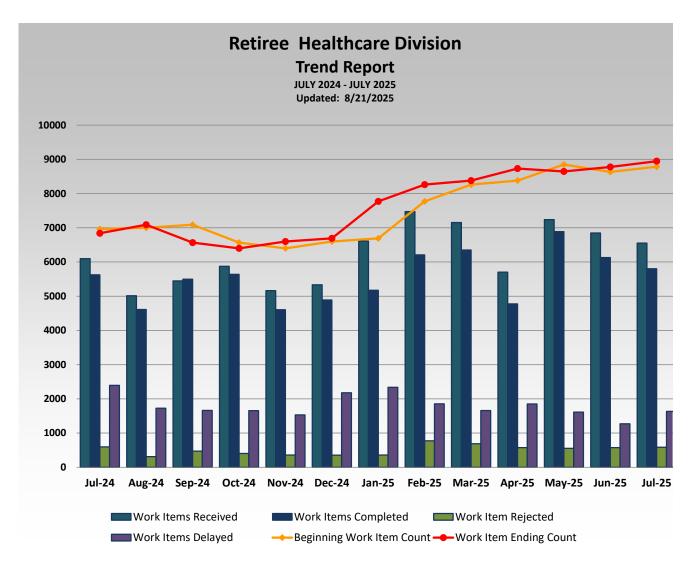






PO Box 7060 Pasadena, CA 91109-7060 Presorted Standard U.S. Postage PAID Santa Ana, CA Permit #1127

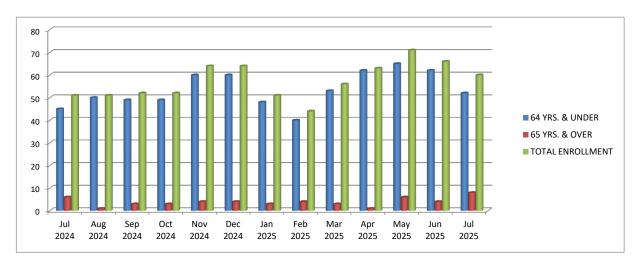
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	Beginning Work Item Count	Work Items Received	Work Items Completed	Work Item Rejected	Work Items Delayed	Work Item Ending Count
Jul-24	6961	6098	5624	596	2396	6839
Aug-24	7000	5013	4611	313	1725	7089
Sep-24	7089	5447	5498	470	1663	6568
Oct-24	6568	5873	5640	403	1654	6398
Nov-24	6398	5163	4606	358	1530	6597
Dec-24	6597	5335	4889	353	2177	6690
Jan-25	6690	6611	5173	358	2337	7770
Feb-25	7770	7474	6208	775	1854	8261
Mar-25	8261	7153	6349	687	1660	8378
Apr-25	8378	5702	4776	574	1849	8730
May-25	8849	7237	6888	553	1612	8645
Jun-25	8633	6847	6128	574	1272	8778
Jul-25	8783	6552	5803	586	1635	8946

Retirees Monthly Age Breakdown JULY 2024 - JULY 2025

	Disability Retirement								
MONTH	64 YRS. & UNDER	65 YRS. & OVER	TOTAL ENROLLMENT						
Jul 2024	45	6	51						
Aug 2024	50	1	51						
Sep 2024	49	3	52						
Oct 2024	49	3	52						
Nov 2024	60	4	64						
Dec 2024	60	4	64						
Jan 2025	48	3	51						
Feb 2025	40	4	44						
Mar 2025	53	3	56						
Apr 2025	62	1	63						
May 2025	65	6	71						
Jun 2025	62	4	66						
Jul 2025	52	8	60						

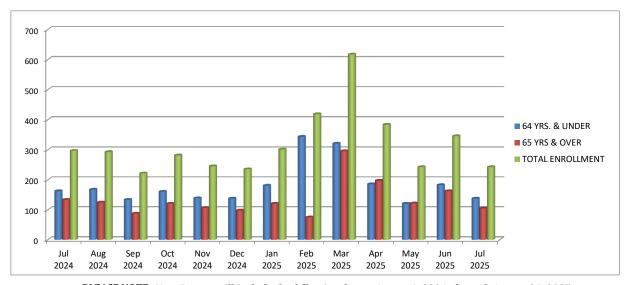


PLEASE NOTE:

 \bullet Next Report will include the following dates: August 1, 2024 through August 31, 2025

Retirees Monthly Age Breakdown JULY 2024 - JULY 2025

	Service Retirement									
MONTH	64 YRS. & UNDER	65 YRS & OVER	TOTAL ENROLLMENT							
Jul 2024	163	134	297							
Aug 2024	168	125	293							
Sep 2024	134	88	222							
Oct 2024	161	121	282							
Nov 2024	139	107	246							
Dec 2024	138	98	236							
Jan 2025	181	121	302							
Feb 2025	344	75	419							
Mar 2025	321	296	617							
Apr 2025	186	198	384							
May 2025	121	122	243							
Jun 2025	183	163	346							
Jul 2025	138	105	243							



 $PLEASE\ NOTE:\ Next\ Report\ will\ include\ the\ following\ dates:\ August\ 1,2024, through\ August\ 31,2025.$

MEDICARE NO LOCAL 1014 - 083125

	PAY PERIOD 8/31/2025								
Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount					
ANTHEM BC III									
240	7831	\$1,337,071.10	0	\$0.00					
241	132	\$21,895.10	0	\$0.00					
242	1003	\$174,449.60	0	\$0.00					
243	4737	\$1,659,357.86	0	\$0.00					
244	13	\$2,158.80	0	\$0.00					
245	61	\$12,607.90	0	\$0.00					
246	15	\$2,484.10	0	\$0.00					
247	177	\$34,722.90	0	\$0.00					
248	14	\$4,418.40	0	\$0.00					
249	92	\$34,086.10	0	\$0.00					
250	18	\$6,473.50	0	\$0.00					
Plan Total:	14,093	\$3,289,725.36	0	\$0.00					
CIGNA - PREFER	RED with RX								
324	1	\$1,459.40	0	\$0.00					
Plan Total:	1	\$1,459.40	0	\$0.00					
(AIOED OD ADV	1117105								
KAISER SR. ADV		40.700.70		40.00					
394	22	\$3,798.70	0	\$0.00					
397	2	\$329.60	0	\$0.00					
398	12	\$4,440.00	0	\$0.00					
403	12382	\$2,076,133.38	0	\$0.00					
413	1527	\$257,917.40	0	\$0.00					
418	6454	\$2,228,674.67	1	\$51.50					
419	211	\$32,594.50	0	\$0.00					
426	251	\$42,115.80	0	\$0.00					
445	2	\$370.00	0	\$0.00					
451	37	\$6,217.50	0	\$0.00					
455	7	\$1,110.00	0	\$0.00					
457	18	\$7,216.70	0	\$0.00					
459	2	\$740.00	0	\$0.00					
462	87	\$14,262.80	0	\$0.00					
465	3	\$555.00	0	\$0.00					
466	28	\$10,090.20	0	\$0.00					
472	28	\$4,903.20	0	\$0.00					
476	4	\$690.50	0	\$0.00					
478	14	\$5,067.90	0	\$0.00					
479	1	\$144.60	0	\$0.00					
482	81	\$14,026.70	0	\$0.00					
486	4	\$185.00	0	\$0.00					
488	32	\$9,716.30	0	\$0.00					
491	1	\$148.50	0	\$0.00					
492	1	\$185.00	0	\$0.00					
Plan Total:	21,211	\$4,721,633.95	1	\$51.50					

MEDICARE NO LOCAL 1014 - 083125

		IAIILMOD	0/3 1/2023	
Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	286	\$48,709.50	0	\$0.00
613	98	\$37,257.10	0	\$0.00
620	29	\$5,756.40	0	\$0.00
621	13	\$4,729.20	0	\$0.00
622	20	\$4,067.00	0	\$0.00
623	6	\$2,059.80	0	\$0.00
Plan Total:	452	\$102,579.00	0	0
UNITED HEALTH	CARE GROUP ME	DICARE ADV. HMC)	
701	2236	\$388,935.50	0	\$0.00
702	409	\$73,362.50	0	\$0.00
703	1437	\$502,987.80	0	\$0.00
704	105	\$19,922.70	0	\$0.00
705	53	\$19,360.30	0	\$0.00
Plan Total:	4,240	\$1,004,568.80	0	\$0.00
Grand Total:	39,997	\$9,119,966.51	1	\$51.50

MEDICARE - 083125

		PAT PERIOD	8/31/2025	
Deduction Code	No. of Mambars	Reimbursement	No. of	Penalty
Deduction Code	140. Of Wellibers	Amount	Penalties	Amount
ANTHEM BC III				
240	7831	\$1,337,071.10	0	\$0.00
241	132	\$21,895.10	0	\$0.00
242	1003	\$174,449.60	0	\$0.00
243	4737	\$1,659,357.86	0	\$0.00
244	13	\$2,158.80	0	\$0.00
245	61	\$12,607.90	0	\$0.00
246	15	\$2,484.10	0	\$0.00
247	177	\$34,722.90	0	\$0.00
248	14	\$4,418.40	0	\$0.00
249	92	\$34,086.10	0	\$0.00
250	18	\$6,473.50	0	\$0.00
Plan Total:	14,093	\$3,289,725.36	0	\$0.00
riali i Otal.	14,093	\$3,26 9 ,725.36		\$0.00
CIGNA - PREFER	RED with RX			
324	1	\$1,459.40	0	\$0.00
Plan Total:	1	\$1,459.40	0	\$0.00
	-	4 1,100110	-	Ţ G I G G
KAISER SR. ADV	ANTAGE			
394	22	\$3,798.70	0	\$0.00
397	2	\$329.60	0	\$0.00
398	12	\$4,440.00	0	\$0.00
403	12382	\$2,076,133.38	0	\$0.00
413	1527	\$257,917.40	0	\$0.00
418	6454	\$2,228,674.67	1	\$51.50
419	211	\$32,594.50	0	\$0.00
426	251	\$42,115.80	0	\$0.00
445	2	\$370.00	0	\$0.00
451	37	\$6,217.50	0	\$0.00
455	7	\$1,110.00	0	\$0.00
457	18	\$7,216.70	0	\$0.00
459	2	\$740.00	0	\$0.00
462	87	\$14,262.80	0	\$0.00
465	3	\$555.00	0	\$0.00
466	28	\$10,090.20	0	\$0.00
472	28	\$4,903.20	0	\$0.00
476	4	\$690.50	0	\$0.00
478	14	\$5,067.90	0	\$0.00
479	1	\$144.60	0	\$0.00
482	81	\$14,026.70	0	\$0.00
486	4	\$185.00	0	\$0.00
488	32	\$9,716.30	0	\$0.00
491	1	\$148.50	0	\$0.00
492	1	\$185.00	0	\$0.00
Plan Total:	21,211	\$4,721,633.95	1	\$51.50

MEDICARE - 083125

		PATPERIOD	8/31/2025	
Deduction Code	No. of Members	Reimbursement	No. of	Penalty
	THE ST INCINIDATE	Amount	Penalties	Amount
SCAN				
611	286	\$48,709.50	0	\$0.00
613	98	\$37,257.10	0	\$0.00
620	29	\$5,756.40	0	\$0.00
621	13	\$4,729.20	0	\$0.00
622	20	\$4,067.00	0	\$0.00
623	6	\$2,059.80	0	\$0.00
Plan Total:	452	102,579	0	\$0.00
UNITED HEALTH	CARE GROUP ME	DICARE ADV. HMC		
701	2236	\$388,935.50	0	\$0.00
702	409	\$73,362.50	0	\$0.00
703	1437	\$502,987.80	0	\$0.00
704	105	\$19,922.70	0	\$0.00
705	53	\$19,360.30	0	\$0.00
Plan Total:	4,240	\$1,004,568.80	0	\$0.00
LOCAL 1014				
804	205	\$49,799.50	0	\$0.00
805	242	\$52,612.80	0	\$0.00
806	763	\$306,873.00	0	\$0.00
807	66	\$13,319.80	0	\$0.00
808	21	\$8,953.80	0	\$0.00
812	261	\$53,760.00	0	\$0.00
813	2	\$370.00	0	\$0.00
Plan Total:	1,560	\$485,688.90	0	\$0.00
Grand Total:	41,557	\$9,605,655.41	1	\$51.50

Carrier Codes	Membe Count		Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Medical Plan							
Anthem Blue Cross Pru	dent Buy	er Plan					
201	418	\$513,779.98	\$71,931.43	\$434,629.73	\$506,561.16	\$1,220.38	\$507,781.54
202	209	\$509,317.28	\$42,667.39	\$445,027.93	\$487,695.32	\$0.00	\$487,695.32
203	82	\$225,052.01	\$33,459.52	\$189,111.73	\$222,571.25	\$2,711.47	\$225,282.72
204	24	\$37,654.08	\$9,287.99	\$26,797.17	\$36,085.16	\$1,568.92	\$37,654.08
SUBTOTAL	733	\$1,285,803.35	\$157,346.33	\$1,095,566.56	\$1,252,912.89	\$5,500.77	\$1,258,413.66
Anthem Blue Cross I							
211	515	\$819,341.60	\$50,143.09	\$777,014.83	\$827,157.92	(\$6,231.52)	\$820,926.40
212	208	\$605,874.80	\$29,353.21	\$537,094.88	\$566,448.09	\$0.00	\$566,448.09
213	79	\$266,332.70	\$24,273.36	\$242,059.34	\$266,332.70	\$0.00	\$266,332.70
214	25	\$52,428.00	\$4,361.99	\$50,163.13	\$54,525.12	\$0.00	\$54,525.12
215	2	\$1,069.92	\$171.19	\$898.73	\$1,069.92	\$0.00	\$1,069.92
SUBTOTAL	829	\$1,745,047.02	\$108,302.84	\$1,607,230.91	\$1,715,533.75	(\$6,231.52)	\$1,709,302.23
Anthem Blue Cross II							
221	2,488	\$3,962,000.00	\$187,033.36	\$3,773,782.22	\$3,960,815.58	\$6,226.52	\$3,967,042.10
222	2,050	\$5,910,137.20	\$126,833.69	\$5,663,660.97	\$5,790,494.66	(\$9,448.15)	\$5,781,046.51
223	961	\$3,270,161.00	\$133,098.87	\$2,990,177.33	\$3,123,276.20	\$0.00	\$3,123,276.20
224	251	\$528,474.24	\$51,379.78	\$490,775.61	\$542,155.39	\$0.00	\$542,155.39
SUBTOTAL	5,750	\$13,670,772.44	\$498,345.70	\$12,918,396.13	\$13,416,741.83	(\$3,221.63)	\$13,413,520.20

Carrier Codes	Member Count	r Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Anthem Blue Cros	s III						
240	7,879	\$5,069,266.50	\$636,352.95	\$4,474,472.82	\$5,110,825.77	(\$6,469.93)	\$5,104,355.84
241	130	\$271,562.28	\$18,927.01	\$250,309.84	\$269,236.85	\$0.00	\$269,236.85
242	994	\$2,081,977.48	\$115,818.68	\$1,920,392.65	\$2,036,211.33	(\$2,057.29)	\$2,034,154.04
243	4,756	\$6,104,994.88	\$622,720.89	\$5,471,249.74	\$6,093,970.63	(\$8,962.87)	\$6,085,007.76
244	13	\$14,973.79	\$1,912.04	\$13,061.75	\$14,973.79	\$0.00	\$14,973.79
245	62	\$71,413.46	\$8,102.84	\$73,377.77	\$81,480.61	\$0.00	\$81,480.61
246	15	\$38,490.75	\$4,105.68	\$34,385.07	\$38,490.75	\$0.00	\$38,490.75
247	184	\$472,153.20	\$24,491.26	\$472,820.39	\$497,311.65	\$0.00	\$497,311.65
248	14	\$25,047.12	\$2,290.03	\$22,757.09	\$25,047.12	\$0.00	\$25,047.12
249	92	\$166,384.44	\$12,952.97	\$155,104.03	\$168,057.00	\$0.00	\$168,057.00
250	18	\$36,092.16	\$2,606.65	\$35,490.63	\$38,097.28	\$0.00	\$38,097.28
SUBTOTAL	14,157	\$14,352,356.06	\$1,450,281.00	\$12,923,421.78	\$14,373,702.78	(\$17,490.09)	\$14,356,212.69
CIGNA Network M	odel Plan						
301	210	\$427,753.97	\$104,742.55	\$318,956.88	\$423,699.43	\$0.00	\$423,699.43
302	54	\$197,699.40	\$47,548.32	\$153,812.18	\$201,360.50	\$0.00	\$201,360.50
303	6	\$30,261.49	\$6,099.57	\$11,192.71	\$17,292.28	\$0.00	\$17,292.28
304	12	\$32,282.28	\$12,149.92	\$20,132.36	\$32,282.28	\$0.00	\$32,282.28
SUBTOTAL	282	\$687,997.14	\$170,540.36	\$504,094.13	\$674,634.49	\$0.00	\$674,634.49
CIGNA Preferred w	// Rx - Phoenix	, AZ					
324	1	\$685.72	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
SUBTOTAL	1	\$685.72	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Carrier Codes	Membe Count		Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
(aiser/Senior Adv	antage						
401	1,614	\$2,324,948.96	\$163,799.02	\$2,112,945.28	\$2,276,744.30	\$2,761.92	\$2,279,506.22
403	12,374	\$3,630,000.36	\$315,129.40	\$3,341,272.46	\$3,656,401.86	(\$1,787.00)	\$3,654,614.86
404	442	\$606,961.32	\$9,569.17	\$587,964.22	\$597,533.39	(\$4,101.09)	\$593,432.30
405	1,465	\$2,076,236.44	\$19,065.19	\$2,057,050.85	\$2,076,116.04	\$1,328.64	\$2,077,444.68
411	2,023	\$5,742,435.14	\$233,917.43	\$5,426,759.73	\$5,660,677.16	\$8,440.62	\$5,669,117.78
413	1,497	\$2,606,033.34	\$105,130.32	\$2,376,823.92	\$2,481,954.24	\$1,694.43	\$2,483,648.67
414	47	\$130,180.60	\$332.37	\$129,848.23	\$130,180.60	\$0.00	\$130,180.60
418	6,414	\$3,716,567.20	\$260,193.05	\$3,457,530.45	\$3,717,723.50	(\$3,451.92)	\$3,714,271.58
419	214	\$356,549.04	\$4,886.07	\$346,710.90	\$351,596.97	\$0.00	\$351,596.97
420	95	\$258,975.70	\$1,308.50	\$257,667.20	\$258,975.70	\$0.00	\$258,975.70
421	9	\$12,696.93	\$1,015.75	\$11,681.18	\$12,696.93	\$4,113.07	\$16,810.00
422	278	\$788,788.00	\$1,577.57	\$761,976.35	\$763,553.92	\$0.00	\$763,553.92
426	251	\$429,591.47	\$4,007.28	\$417,233.16	\$421,240.44	\$0.00	\$421,240.44
428	41	\$113,707.76	\$554.67	\$113,153.09	\$113,707.76	\$0.00	\$113,707.76
430	144	\$406,175.04	\$3,102.74	\$411,413.88	\$414,516.62	\$0.00	\$414,516.62
SUBTOTAL	26,908	\$23,199,847.30	\$1,123,588.53	\$21,810,030.90	\$22,933,619.43	\$8,998.67	\$22,942,618.10
(aiser - Colorado							
450	4	\$5,687.20	\$568.72	\$5,118.48	\$5,687.20	\$0.00	\$5,687.20
451	38	\$11,320.20	\$1,412.04	\$9,908.16	\$11,320.20	\$0.00	\$11,320.20
453	8	\$25,174.32	\$2,654.07	\$22,520.25	\$25,174.32	\$0.00	\$25,174.32
455	6	\$11,981.90	\$924.32	\$9,345.88	\$10,270.20	\$0.00	\$10,270.20
457	18	\$10,580.40	\$1,034.53	\$10,721.47	\$11,756.00	\$0.00	\$11,756.00
459	2	\$4,003.20	\$80.06	\$3,923.14	\$4,003.20	\$0.00	\$4,003.20
SUBTOTAL	76	\$68,747.22	\$6,673.74	\$61,537.38	\$68,211.12	\$0.00	\$68,211.12

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Georgia							
441	3	\$5,342.61	\$588.21	\$4,754.40	\$5,342.61	\$0.00	\$5,342.61
442	7	\$12,466.09	\$1,372.49	\$11,093.60	\$12,466.09	\$0.00	\$12,466.09
445	2	\$4,373.48	\$0.00	\$4,373.48	\$4,373.48	\$0.00	\$4,373.48
461	16	\$28,493.92	\$4,817.01	\$23,676.91	\$28,493.92	\$6,682.78	\$35,176.70
462	85	\$36,006.69	\$4,478.02	\$30,287.06	\$34,765.08	\$0.00	\$34,765.08
463	5	\$17,768.70	\$4,908.15	\$12,860.55	\$17,768.70	\$0.00	\$17,768.70
465	3	\$6,560.22	\$349.88	\$6,210.34	\$6,560.22	\$0.00	\$6,560.22
466	28	\$22,952.72	\$1,623.09	\$22,149.37	\$23,772.46	\$0.00	\$23,772.46
SUBTOTAL	149	\$133,964.43	\$18,136.85	\$115,405.71	\$133,542.56	\$6,682.78	\$140,225.34
Caiser - Hawaii							
471	5	\$4,814.20	\$577.71	\$4,236.49	\$4,814.20	\$0.00	\$4,814.20
472	28	\$12,523.00	\$2,039.46	\$10,483.54	\$12,523.00	\$0.00	\$12,523.00
473	1	\$2,222.50	\$637.70	\$1,584.80	\$2,222.50	\$0.00	\$2,222.50
474	4	\$7,670.72	\$0.00	\$7,670.72	\$7,670.72	\$0.00	\$7,670.72
475	2	\$5,745.04	\$0.00	\$5,745.04	\$5,745.04	\$0.00	\$5,745.04
476	4	\$5,608.36	\$1,233.84	\$4,374.52	\$5,608.36	\$0.00	\$5,608.36
477	1	\$3,177.34	\$319.44	\$2,857.90	\$3,177.34	\$0.00	\$3,177.34
478	14	\$12,411.00	\$602.82	\$11,808.18	\$12,411.00	\$0.00	\$12,411.00
479	1	\$2,661.75	\$0.00	\$2,661.75	\$2,661.75	\$0.00	\$2,661.75
SUBTOTAL	60	\$56,833.91	\$5,410.97	\$51,422.94	\$56,833.91	\$0.00	\$56,833.91

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Oregon							
481	2	\$2,829.92	\$707.48	\$7,565.66	\$8,273.14	\$0.00	\$8,273.14
482	82	\$46,911.60	\$6,973.08	\$41,018.67	\$47,991.75	\$0.00	\$47,991.75
483	5	\$8,661.05	\$1,117.40	\$7,543.65	\$8,661.05	\$0.00	\$8,661.05
484	4	\$11,287.68	\$0.00	\$11,287.68	\$11,287.68	\$0.00	\$11,287.68
486	3	\$7,888.64	\$0.00	\$1,972.16	\$1,972.16	\$0.00	\$1,972.16
488	31	\$35,916.80	\$2,158.35	\$29,369.35	\$31,527.70	\$0.00	\$31,527.70
491	1	\$1,930.86	\$0.00	\$1,930.86	\$1,930.86	\$0.00	\$1,930.86
492	1	\$2,289.41	\$0.00	\$2,289.41	\$2,289.41	\$0.00	\$2,289.41
SUBTOTAL	129	\$117,715.96	\$10,956.31	\$102,977.44	\$113,933.75	\$0.00	\$113,933.75
CAN Health Plan							
611	285	\$83,032.59	\$16,206.21	\$66,867.00	\$83,073.21	\$0.00	\$83,073.21
613	97	\$56,095.38	\$12,675.69	\$46,932.51	\$59,608.20	\$0.00	\$59,608.20
SUBTOTAL	382	\$139,127.97	\$28,881.90	\$113,799.51	\$142,681.41	\$0.00	\$142,681.41
CAN Health Plan, AZ							
620	29	\$8,331.99	\$1,154.98	\$8,900.87	\$10,055.85	\$0.00	\$10,055.85
621	13	\$7,366.06	\$1,167.24	\$6,198.82	\$7,366.06	\$0.00	\$7,366.06
SUBTOTAL	42	\$15,698.05	\$2,322.22	\$15,099.69	\$17,421.91	\$0.00	\$17,421.91
CAN Health Plan, NV							
622	22	\$6,320.82	\$787.23	\$6,108.21	\$6,895.44	\$0.00	\$6,895.44
623	6	\$3,399.72	\$249.31	\$3,150.41	\$3,399.72	\$0.00	\$3,399.72
SUBTOTAL	28	\$9,720.54	\$1,036.54	\$9,258.62	\$10,295.16	\$0.00	\$10,295.16

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
UHC Medicare Adv.							
701	2,235	\$869,437.80	\$96,763.12	\$778,600.88	\$875,364.00	(\$1,549.80)	\$873,814.20
702	403	\$853,297.65	\$44,184.81	\$798,267.05	\$842,451.86	\$0.00	\$842,451.86
703	1,429	\$1,103,569.10	\$102,390.46	\$991,208.94	\$1,093,599.40	\$0.00	\$1,093,599.40
704	105	\$255,641.40	\$9,599.57	\$247,611.30	\$257,210.87	\$0.00	\$257,210.87
705	53	\$56,063.40	\$3,384.96	\$54,794.04	\$58,179.00	\$0.00	\$58,179.00
706	1	\$483.66	\$19.35	\$464.31	\$483.66	\$0.00	\$483.66
SUBTOTAL	4,226	\$3,138,493.01	\$256,342.27	\$2,870,946.52	\$3,127,288.79	(\$1,549.80)	\$3,125,738.99
United Healthcare							
707	548	\$968,815.70	\$122,301.10	\$766,540.46	\$888,841.56	\$0.00	\$888,841.56
708	465	\$1,494,330.14	\$142,632.86	\$1,235,658.87	\$1,378,291.73	\$0.00	\$1,378,291.73
709	362	\$1,363,907.30	\$160,330.47	\$1,127,215.29	\$1,287,545.76	\$0.00	\$1,287,545.76
SUBTOTAL	1,375	\$3,827,053.14	\$425,264.43	\$3,129,414.62	\$3,554,679.05	\$0.00	\$3,554,679.05

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
ocal 1014 Firefighters							
801	83	\$120,496.08	\$4,732.71	\$112,859.85	\$117,592.56	\$0.00	\$117,592.56
802	341	\$892,611.83	\$27,956.35	\$864,655.48	\$892,611.83	\$0.00	\$892,611.83
803	422	\$1,303,026.28	\$45,822.18	\$1,251,028.62	\$1,296,850.80	\$6,175.48	\$1,303,026.28
804	207	\$300,514.32	\$10,597.80	\$289,916.52	\$300,514.32	(\$99,599.00)	\$200,915.32
805	244	\$638,701.72	\$15,077.55	\$631,398.35	\$646,475.90	(\$107,288.23)	\$539,187.67
806	763	\$1,997,251.69	\$41,358.55	\$1,958,510.77	\$1,999,869.32	(\$626,210.60)	\$1,373,658.72
807	69	\$213,054.06	\$3,581.79	\$191,038.67	\$194,620.46	(\$27,046.50)	\$167,573.96
808	22	\$67,930.28	\$1,976.16	\$59,778.64	\$61,754.80	(\$19,017.60)	\$42,737.20
809	17	\$24,679.92	\$2,032.45	\$25,550.98	\$27,583.43	\$0.00	\$27,583.43
810	10	\$26,176.30	\$3,088.80	\$23,087.50	\$26,176.30	\$0.00	\$26,176.30
811	6	\$18,526.44	\$2,840.73	\$15,685.71	\$18,526.44	\$0.00	\$18,526.44
812	261	\$378,909.36	\$22,531.23	\$359,281.65	\$381,812.88	(\$107,705.00)	\$274,107.88
813	2	\$5,235.26	\$0.00	\$5,235.26	\$5,235.26	(\$740.00)	\$4,495.26
SUBTOTAL	2,447	\$5,987,113.54	\$181,596.30	\$5,788,028.00	\$5,969,624.30	(\$981,431.45)	\$4,988,192.85
Caiser - Washington							
393	5	\$10,062.65	\$2,138.65	\$7,924.00	\$10,062.65	\$0.00	\$10,062.65
394	22	\$9,194.02	\$1,078.20	\$8,115.82	\$9,194.02	\$0.00	\$9,194.02
395	3	\$11,253.78	\$2,680.08	\$8,573.70	\$11,253.78	\$0.00	\$11,253.78
397	2	\$4,313.28	\$0.00	\$4,313.28	\$4,313.28	\$0.00	\$4,313.28
398	12	\$9,933.84	\$1,192.07	\$8,741.77	\$9,933.84	\$0.00	\$9,933.84
SUBTOTAL	44	\$44,757.57	\$7,089.00	\$37,668.57	\$44,757.57	\$0.00	\$44,757.57
edical Plan Total	57,618	\$68,481,734.37	\$4,452,115.29	\$63,154,299.41	\$67,606,414.70	(\$988,742.27)	\$66,617,672.43

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Dental/Vision Plan							
CIGNA Indemnity Denta	I/Vision						
501	27,252	\$1,532,236.80	\$152,339.00	\$1,394,960.65	\$1,547,299.65	(\$1,030.41)	\$1,546,269.24
502	24,981	\$2,949,092.92	\$215,115.77	\$2,730,457.89	\$2,945,573.66	(\$2,247.75)	\$2,943,325.91
503	10	\$693.00	\$22.17	\$670.83	\$693.00	\$202.56	\$895.56
SUBTOTAL	52,243	\$4,482,022.72	\$367,476.94	\$4,126,089.37	\$4,493,566.31	(\$3,075.60)	\$4,490,490.71
CIGNA Dental HMO/Visi	on						
901	4,390	\$204,853.60	\$20,726.34	\$185,219.68	\$205,946.02	\$279.44	\$206,225.46
902	3,291	\$314,889.55	\$22,044.71	\$293,323.18	\$315,367.89	(\$488.84)	\$314,879.05
903	3	\$141.63	\$35.88	\$105.75	\$141.63	\$0.00	\$141.63
SUBTOTAL	7,684	\$519,884.78	\$42,806.93	\$478,648.61	\$521,455.54	(\$209.40)	\$521,246.14
Dental/Vision Plan Total	59,927	\$5,001,907.50	\$410,283.87	\$4,604,737.98	\$5,015,021.85	(\$3,285.00)	\$5,011,736.85
GRAND TOTALS	117,545	\$73,483,641.87	\$4,862,399.16	\$67,759,037.39	\$72,621,436.55	(\$992,027.27)	\$71,629,409.28

CARRIER DEDUCTION

PREMIUMS* CODES

DEDUCTION CODE DEFINITIONS

Anthem Bl	ue Cross	Prudent	Buy	yer	Plan
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\$1,220.38	201	Retiree Only
\$2,402.44	202	Retiree and Spouse/Domestic Partner
\$2,711.47	203	Retiree, Spouse/Domestic Partner and Children
\$1,568.92	204	Retiree and Children
\$331.92	205	Survivor Children Only Rates

Anthem Blue Cross Plan I

\$1,584.80	211	Retiree Only
\$2,857.90	212	Retiree and Spouse/Domestic Partner
\$3,371.30	213	Retiree, Spouse/Domestic Partner and Children
\$2,097.12	214	Retiree and Children
\$534.96	215	Survivor Children Only Rates

Anthem Blue Cross Plan II

\$1,584.80	221	Retiree Only
\$2,857.90	222	Retiree and Spouse/Domestic Partner
\$3,371.30	223	Retiree, Spouse/Domestic Partner and Children
\$2,097.12	224	Retiree and Children
\$534.96	225	Survivor Children Only Rates

Anthem Blue Cross Plan III

\$642.90	240	Retiree Only with Medicare
\$2,057.29	241	Retiree and Spouse/Domestic Partner - One with Medicare (Non-Medicare has Anthem Blue Cross I)
\$2,057.29	242	Retiree and Spouse/Domestic Partner - One with Medicare (Non-Medicare has Anthem Blue Cross II)
\$1,280.41	243	Retiree and Spouse/Domestic Partner - Both with Medicare
\$1,151.83	244	Retiree and Children (Retiree has Medicare; Children have Anthem Blue Cross I)
\$1,151.83	245	Retiree and Children (Retiree has Medicare; Children have Anthem Blue Cross II)
\$2,566.05	246	Retiree, Spouse/Domestic Partner and Children - One with Medicare (Non-Medicare has Anthem Blue Cross I)
\$2,566.05	247	Retiree, Spouse/Domestic Partner and Children - One with Medicare (Non-Medicare has Anthem Blue Cross II)
\$1,789.08	248	Retiree, Spouse/Domestic Partner and Children - Two with Medicare (Children have Anthem Blue Cross I)
\$1,789.08	249	Retiree, Spouse/Domestic Partner and Children - Two with Medicare (Children have Anthem Blue Cross II)
\$2,005.12	250	Member, Spouse/Domestic Partner, Child (3 with Medicare)

^{*}Benchmark premiums are bolded.

	CARRIER
	DEDUCTION
PREMIUMS*	CODES

DEDUCTION CODE DEFINITIONS

CIGNA Network Model Plan

\$2,027.27	301	Retiree Only
\$3,661.10	302	Retiree and Spouse/Domestic Partner
\$4,323.07	303	Retiree, Spouse/Domestic Partner and Children
\$2,690.19	304	Retiree and Children
\$670.42	305	Survivor Children Only Rates

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

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

Kaiser

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

^{*}Benchmark premiums are bolded.

(aiser (continued)			
PREMIUMS*	CODES		
	DEDUCTION		
	CARRIER		

DEDUCTION CODE DEFINITIONS

Kaiser (continued)		
NI/A	404	Detines and Family (One family records as in 110) male month of the control of 111)
N/A N/A	424 425	Retiree and Family (One family member is "Supplement"; others are "Excess II") Retiree and Family (One family member is "Supplement"; others are "Excess III")
\$1,697.99	425 426	Retiree and Family (One family member is "Senior Advantage"; others are "Excess II")
\$1,097.99 \$N/A	420 427	Retiree and Family (One family member is "Senior Advantage", others are "Excess III")
\$2,773.36	428	Retiree and Family (One family member is "Excess I"; others are "Excess II")
\$N/A	429	Retiree and Family One family member is "Excess I"; others are "Excess III")
\$2,820.66	430	Retiree and Family (Two or more family members are "Excess II")
\$N/A	431	Retiree and Family (One family member is "Excess II"; others are "Excess III")
\$N/A	432	Retiree and Family (Two or more family members are "Excess III")
Kaiser Colorado		
\$1,421.80	450	Retiree Only ("Basic" under age 65)
\$297.90	451	Retiree Only ("Senior Advantage")
\$3,146.79	453	Retiree and Family (Two family members are "Basic")
\$4,249.55	454	Retiree and Family (Three or more family members are "Basic")
\$1,711.70	455	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic")
\$587.80	457	Retiree and Family (Two family members are "Senior Advantage")
\$3,043.28	458	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$2,001.60	459	Retiree and Family (Two family members are "Senior Advantage"; one or more are "Basic")
Kaiser Georgia		
\$1,780.87	440	Retiree Only ("Basic" over age 65 with Medicare Part B only
\$1,780.87	441	Retiree Only ("Basic over age 65 with Medicare Part A only)
\$1,780.87	442	Retiree Only ("Basic over age 65 without Medicare Part A or Medicare Part B)
\$413.87	443	Retiree Only ("Basic" over age 65 - Medicare eligible who is classified as having renal failure)
\$2,186.74	444	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with
\$2,186.74	445	Medicare Part B only) Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with
φ2,100. <i>14</i>	445	Medicare Part A only)
\$2,186.74	446	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 without
		Medicare Part A and B)
\$1,780.87	461	Retiree Only ("Basic" under age 65)
\$413.87	462	Retiree Only ("Senior Advantage")

^{*}Benchmark premiums are bolded.

	DEDUCTION			
PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS		
TILLIMOMO		DEDUCTION CODE DEL MITTORIO		
Kaiser Georgia	(continued)			
	_			
\$3,553.74	463	Retiree and Family (Two family members are "Basic")		
\$5,326.61	464	Retiree and Family (Three or more family members are "Basic)		
\$2,186.74	465	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")		
\$819.74	466	Retiree and Family (Two family members are "Senior Advantage")		
\$3,959.61	467	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")		
\$2,592.61	468	Retiree and Family (Two family members are "Senior Advantage"; one is "Basic")		
\$1,225.61	469	Retiree and Family (Three or more family members are "Senior Advantage"; one is "Basic")		
\$3,959.61	470	Retiree and Family (Three or more family members are "Basic"; one is "Senior Advantage"		
Kaiser Hawaii				
\$962.84	471	Retiree Only ("Basic" under age 65)		
\$447.25	472	Retiree Only ("Senior Advantage")		
\$2,222.50	473	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)		
\$1,917.68	474	Retiree and Family (Two family members are "Basic")		
\$2,872.52	475	Retiree and Family (Three or more family members are "Basic")		
\$1,402.09	476	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")		
\$3,177.34	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)		
\$886.50	478	Retiree and Family (Two family members are "Senior Advantage"		
\$2,661.75	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				
\$1,414.96	481	Retiree Only ("Basic" under age 65)		
\$565.20	482	Retiree Only ("Senior Advantage")		
\$1,732.21	483	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)		
\$2,821.92	484	Retiree and Family (Two family members are "Basic")		
\$4,228.88	485	Retiree and Family (Three or more family members are "Basic")		
\$1,972.16	486	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")		
N/A	487	Retiree Only (Medicare Cost "Supplement" program)		
\$1,122.40	488	Retiree and Family (Two family members are "Senior Advantage")		
\$1,373.66	489	Retiree Only (Over age 65 with Medicare Part A only)		
\$1,732.21	490	Retiree Only (Over age 65 with Medicare Part B only)		

^{*}Benchmark premiums are bolded.

CARRIER

	CARRIER DEDUCTION	
PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS
Kaiser Oregon	(continued)	
\$1,930.86	491	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 with Medicare Par A only)
\$2,289.41	492	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 without Medicare Part A or Medicare Part B)
\$3,379.12	493	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$2,529.36	494	Retiree and Family (Two family members are "Senior Advantage"; one is "Basic")
\$3,456.42	495	Retiree and Family (Two family members are over age 65 without Medicare Part A or Medicare Part B)
\$2,739.32	496	Retiree and Family (Two family members are over age 65 with Medicare Part A only)
\$2,780.62	497	Retiree and Family (One family member is "Basic"; one is over age 65 with Medicare Part A only)
\$3,139.17	498	Retiree and Family (One family member is "Basic"; one is over age 65 without Medicare Part A or Medicare Part B)
Kaiser Washing	<u>ıton</u>	
\$2,012.53	393	Retiree and Family ("Basic" under age 65)
\$417.92	394	Retiree Only ("Senior Advantage")
\$3,751.26	395	Retiree and Family (Two family members are "Basic")
\$6,275.96	396	Retiree and Family (Three or more family members are "Basic")
\$2,156.64	397	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic")
\$827.82	398	Retiree and Family (Two family members are "Senior Advantage")
\$4,681.34	399	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$3,352.52	400	Retiree and Family (Two family members are "Senior Advantage"; one or more are "Basic")

^{*}Benchmark premiums are bolded.

CARRIER DEDUCTION CODES

PREMIUMS*

DEDUCTION CODE DEFINITIONS

Kaiser Rate Category Definitions

"Basic" - includes those who are under age 65

Medicare Cost ("Supplement")

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

"Senior Advantage"

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

"Excess I"

-Is for participants who have Medicare Part A only.

"Excess II"

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

"Excess III"

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

^{*}Benchmark premiums are bolded.

	CARRIER
	DEDUCTION
DDEMILIME*	CODES

REMIUMS*	CODES	DEDUCTION CODE DEFINITIONS

SCAN Health Plan

\$287.31	611	Retiree Only with SCAN
\$566.62	613	Retiree and 1 Dependent - Both with SCAN (Retiree and 1 Dependent = Retiree and Spouse/Domestic Partner OR
		Retiree and 1 Child. Both Retiree and Dependent must have Medicare.)

United Healthcare Medicare Advantage (UHCMA)

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

\$387.45	701	Retiree Only with Secure Horizons
\$2,076.15	702	Retiree and 1 Dependent - One with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic
		Partner OR Retiree and 1 Child)
\$766.90	703	Retiree and 1 Dependent - Both with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic
		Partner OR Retiree and 1 Child)
\$2,367.05	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)
\$1,057.80	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)
\$483.66	706	Survivor Children Only Rates

United Healthcare (UHC)

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

\$1,696.70	707	Retiree Only
\$3,100.27	708	Retiree and 1 Dependent
\$3,676.30	709	Retiree and 2 Or More Dependents

Local 1014 Firefighters

\$1,451.76	801	Member Under 65
\$2,617.63	802	Member + 1 Under 65
\$3,087.74	803	Member + 2 Under 65
\$1,451.76	804	Member with Medicare
\$2,617.63	805	Member + 1; 1 Medicare
\$2,617.63	806	Member + 1; 2 Medicare
\$3,087.74	807	Member + 2; 1 Medicare
\$3,087.74	808	Member + 2; 2 Medicare

^{*}Benchmark premiums are bolded.

CARRIER DEDUCTION CODES

PREMIUMS*

DEDUCTION CODE DEFINITIONS

Local 1014 Firefighters (continued)

\$1,451.76	809	Surviving Spouse Under 65
\$2,617.63	810	Surviving Spouse + 1; Under 65
\$3,087.74	811	Surviving Spouse + 2 Under 65
\$1,451.76	812	Surviving Spouse with Medicare
\$2,617.63	813	Surviving Spouse + 1; 1 Medicare
\$3,087.74	814	Spouse + 1; 1 Medicare
\$2,617.63	815	Surviving Spouse + 1; 2 Medicare

CIGNA Indemnity - Dental/Vision

\$56.20	501	Retiree Only
\$117.86	502	Retiree and Dependent(s)
\$69.30	503	Survivor Children Only Rates

CIGNA HMO - Dental/Vision

\$46.60	901	Retiree Only
\$95.45	902	Retiree and Dependent(s)
\$47.21	903	Survivor Children Only Rates

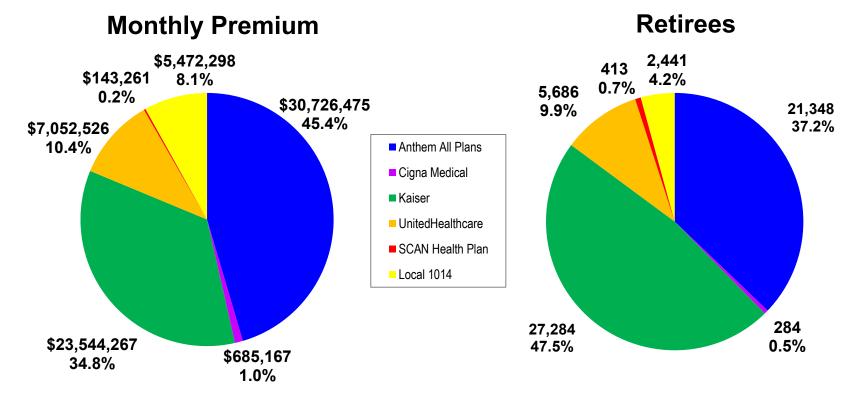
^{*}Benchmark premiums are bolded.



Premium & Enrollment
Coverage Month Ending July 2025

Carrier / Plan	Monthly Premium	Percent of Total	Retirees	Percent of Total
Anthem All Plans	\$30,726,475	45.5%	21,348	37.2%
Cigna Medical	\$685,167	1.0%	284	0.5%
Kaiser	\$23,544,267	34.8%	27,284	47.5%
UnitedHealthcare	\$7,052,526	10.4%	5,686	9.9%
SCAN Health Plan	\$143,261	0.2%	413	0.7%
Local 1014	\$5,472,298	8.1%	2,441	4.2%
Combined Medical	\$67,623,993	100.0%	57,456	100.0%

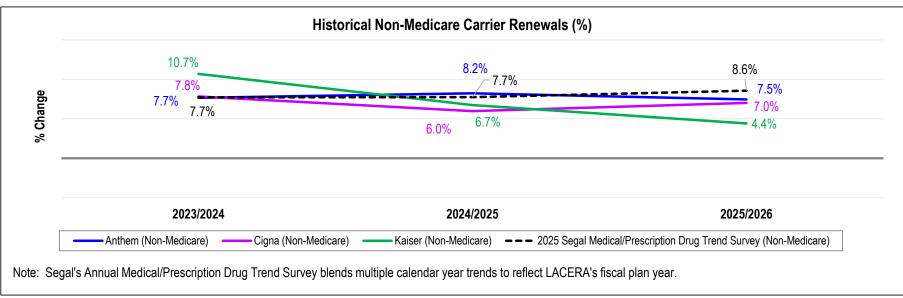
Cigna Dental & Vision	¢5 025 442	E0 770
(PPO and HMO)	\$5,025,142	59,779

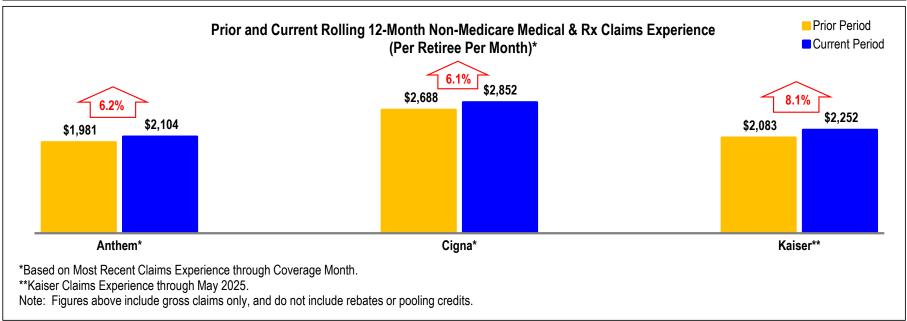


Note: Premiums <u>include</u> LACERA's Administrative Fee of \$8.00 per member, per plan, per month. **Segal | Premium & Enrollment Exhibit**



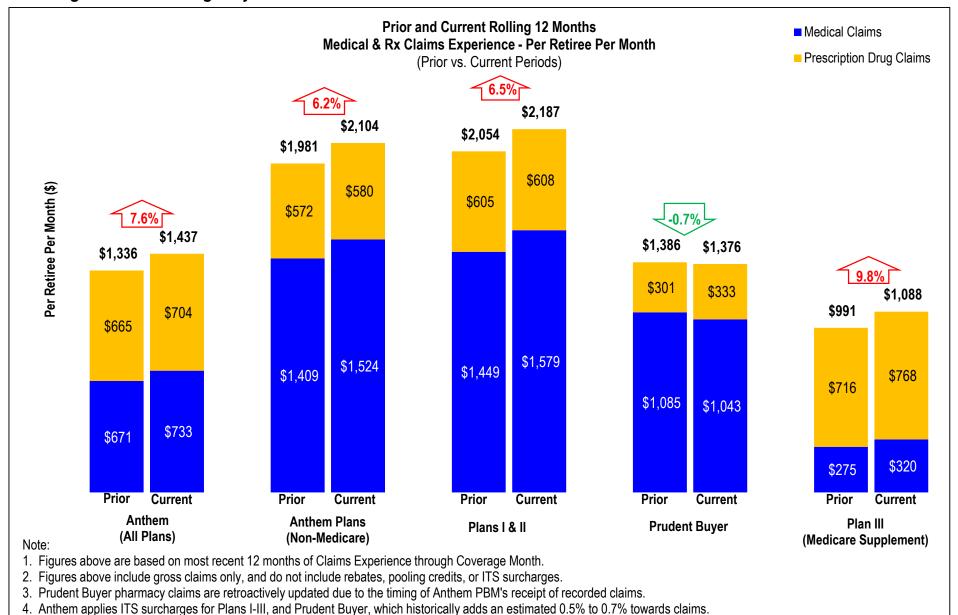
Claims Experience by Carrier Coverage Month Ending July 2025







Anthem Claims Experience By Plan Coverage Month Ending July 2025





Kaiser Utilization Coverage Month Ending July 2025

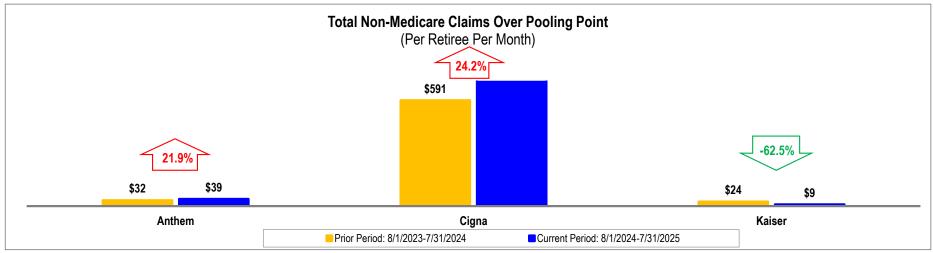
- Kaiser insures approximately 26,500 LACERA retirees with the majority enrolled in Medicare Advantage plans.
- Kaiser's Periodic Utilization Report (PUR) monitors utilization patterns of LACERA's non-Medicare population in California.

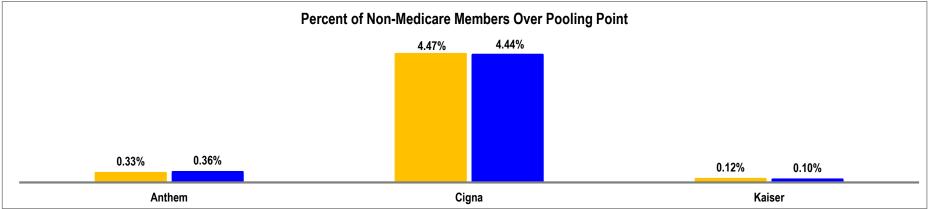
Category	Current Period 6/1/2024 - 5/31/2025	Prior Period 6/1/2023 - 5/31/2024	Change	
Average Contract Size	1.82	1.83	-0.55%	
Average Members	12,606	12,560	0.37%	
Inpatient Claims Per Member Per Month	\$308.30	\$325.17	-5.19%	
Outpatient Claims Per Member Per Month	\$545.74	\$472.63	15.47%	
Pharmacy Per Member Per Month	\$171.38	\$154.34	11.04%	
Other Per Member Per Month	\$212.53	\$189.24	12.31%	
Total Claims Per Member Per Month	\$1,237.95	\$1,141.38	8.46%	
Total Paid Claims	\$187,271,687	\$171,935,220	8.92%	
Large Claims over \$600,000 Pooling Point				
Number of Claims over Pooling Point	7	8		
Amount over Pooling Point	\$718,600	\$1,988,505	-63.86%	
% of Total Paid Claims	0.38%	1.16%		
Inpatient Days / 1000	683.3	733.9	-6.89%	
Inpatient Admits / 1000	96.0	90.4	6.19%	
Outpatient Visits / 1000	16,634.7	15,877.7	4.77%	
Pharmacy Scripts Per Member Per Year	14.2	13.4	5.97%	



High Cost Claimants (Anthem, Cigna, & Kaiser)

Coverage Month Ending July 2025





Stop-Loss & Pooling Points Overview:

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

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

Pooling Points by Carrier:

- 1. Anthem's pooling points are \$400,000 for Plans I & II, and \$300,000 for Prudent Buyer.
- 2. Cigna's pooling point is \$100,000.
- 3. Kaiser's pooling point is \$600,000.



Anthem Lifetime Max Accumulation Status By Plan Coverage Month Ending July 2025

	Prior Calen	Prior Calendar Year: December 2023 ^{1,2}			Current Calendar Year: December 2024 ^{1,3}		
Lifetime Claim Amount ⁴	Plans I & II	Prudent Buyer	Combined	Plans I & II	Prudent Buyer	Combined	
\$900K-\$999K	19	1	20	15	1	16	
\$800K-\$899K	27	2	29	18	1	19	
\$700K-\$799K	29	3	32	27	2	29	
\$600-\$699K	53	2	55	61	0	61	
\$500-\$599K	82	4	86	78	8	86	
Total	210	12	222	199	12	211	
	Prior	Prior Month: June 2025 ^{5,7}			Most Recent Month: July 2025 ^{6,7}		
Lifetime Claim Amount ⁴	Plans I & II	Prudent Buyer	Combined	Plans I & II	Prudent Buyer	Combined	
\$900K-\$999K	9	0	9	9	0	9	
\$800K-\$899K	14	1	15	15	1	16	
\$700K-\$799K	29	2	31	30	3	33	
\$600-\$699K	49	2	51	44	1	45	
\$500-\$599K	82	8	90	84	8	92	
Total	183	13	196	182	13	195	

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

¹ Includes two years of historical data.

² Based on data provided by Anthem on September 17, 2024.

³ Based on data provided by Anthem on January 22, 2025.

⁴ Members identified by Anthem as terminated were excluded from the counts above.

⁵ Based on data provided by Anthem on July 17, 2025.

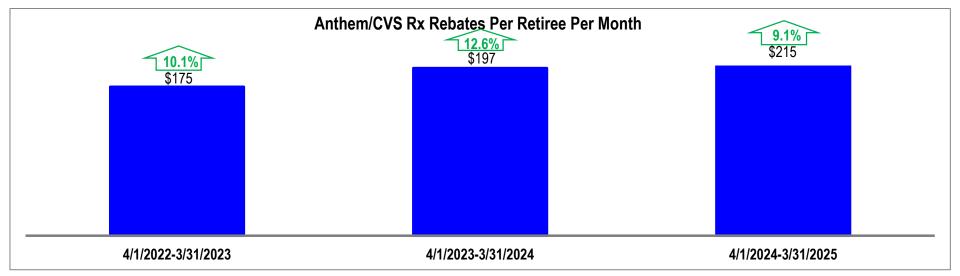
⁶ Based on data provided by Anthem on August 19, 2025.

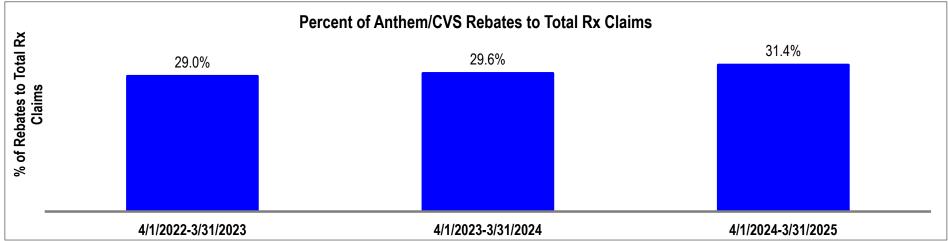
⁷ Includes two months of historical data.



Prescription Drug Rebates (Anthem)

Coverage Month Ending July 2025





Rebates Overview:

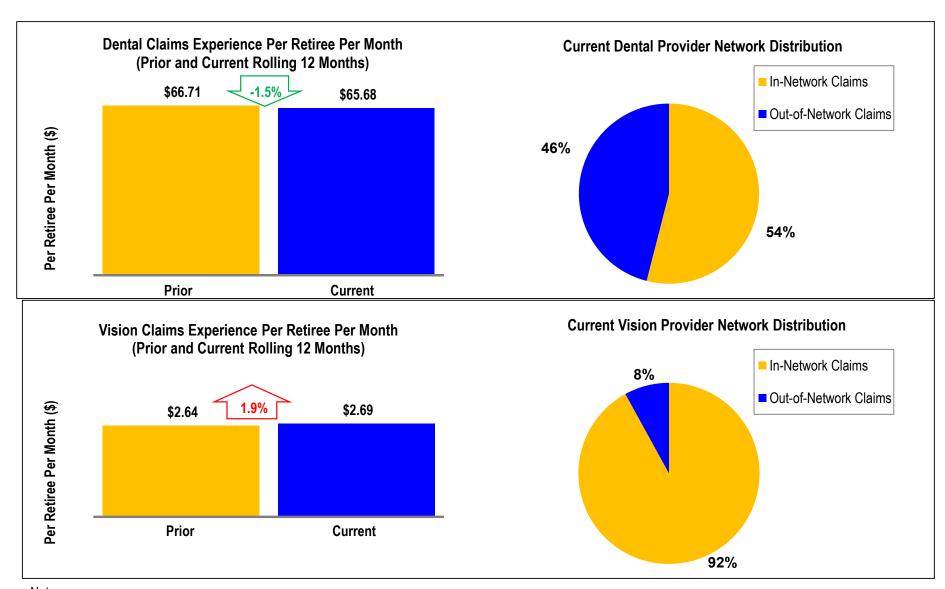
Pharmacy Benefit Managers negotiate volume-based rebates with drug manufacturers of brand medications. Manufacturer rebates are passed on to plan sponsors and are used to offset pharmaceutical claims expenses.

Note:

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



Cigna Dental & Vision Claims Experience Coverage Month Ending July 2025



Notes

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