

# 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](mailto: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, OCTOBER 1, 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

- 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 September 3, 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](mailto:PublicComment@lacera.com).)

### V. NON-CONSENT ITEMS

A. **Federal Engagement – Visit with Congress**

Recommendation as submitted by Barry W. Lew, Legislative Affairs Officer: That the Committee recommend the Board of Retirement: 1) Approve visits with Congress by Board trustees as designated by the Chair of the Board of Retirement and by staff as designated by the Acting Chief Executive Officer during the week of January 26, 2026, in Washington, D.C.; and 2) Approve reimbursement of all travel costs incurred in accordance with LACERA's Trustee Travel Policy. (Memo dated September 19, 2025)

### VI. REPORTS

A. **Engagement Report for September 2025**

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

B. **Staff Activities Report for September 2025**

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

VI. REPORTS (Continued)

C. **LACERA Claims Experience**

Michael Szeto, Segal Consulting  
(Presentation)

D. **Federal Legislation**

Stephen Murphy, Segal Consulting  
(For Information Only)

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.)

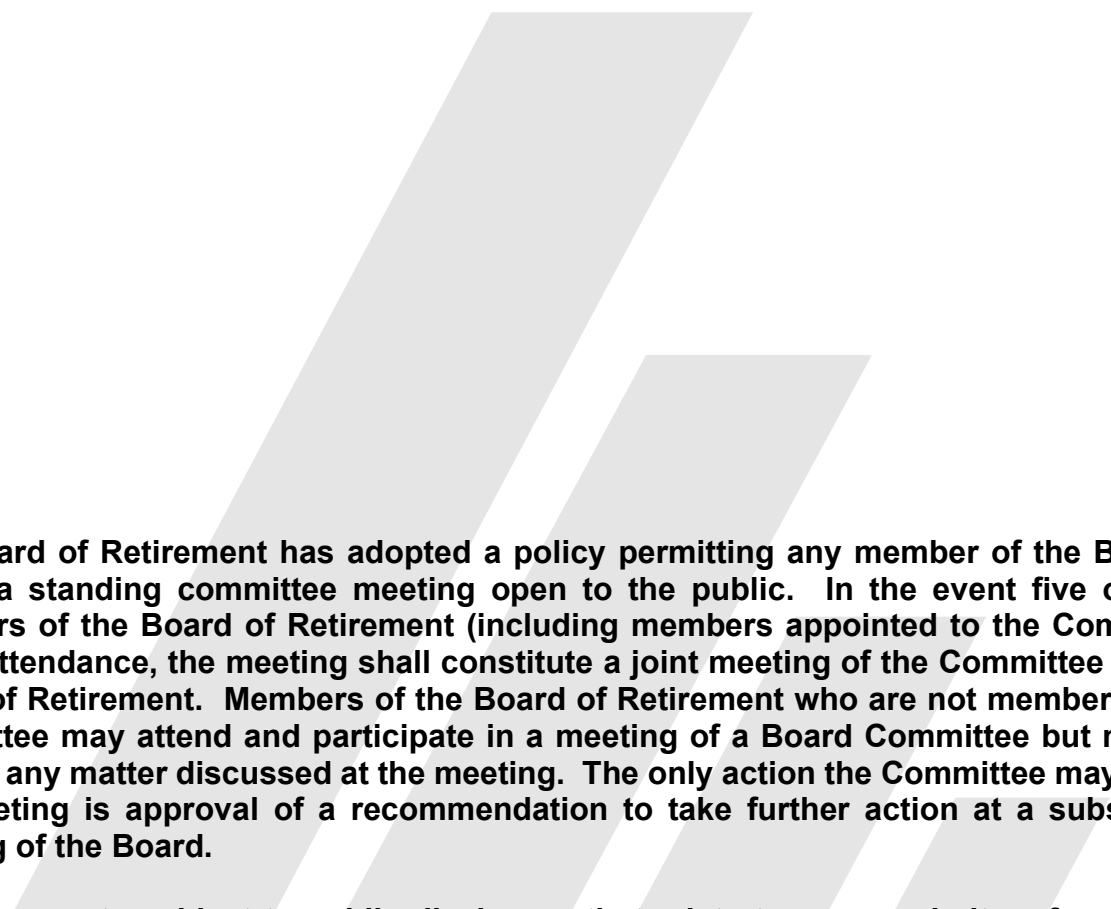
VIII. ITEMS FOR FUTURE AGENDAS

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

IX. GOOD OF THE ORDER

(For Information Purposes Only)

X. 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](http://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](mailto: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. – 8:45 A.M., WEDNESDAY, SEPTEMBER 3, 2025

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

COMMITTEE TRUSTEES

PRESENT:        Ronald Okum, Vice Chair  
                     Aleen Langton, Trustee  
                     Wayne Moore, Trustee  
                     Shawn R. Kehoe, Alternate Trustee

ABSENT: :        Les Robbins, Chair

OTHER BOARD OF RETIREMENT TRUSTEES

                     Elizabeth Ginsberg, Trustee  
                     JP Harris, Trustee

STAFF, ADVISORS AND PARTICIPANTS

                     Cassandra Smith, Director, Retiree Healthcare  
                     Luis A. Lugo, Acting Chief Executive Officer

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

I. CALL TO ORDER

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

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

A. Just Cause

B. Action on Emergency Circumstance Requests

C. Statement of Persons Present at AB 2449 Teleconference Locations

There were no requests received.

III. APPROVAL OF MINUTES

A. Approval of the Minutes of the Regular Meeting of August 6, 2025

Trustee Kehoe made a motion, Trustee Okum seconded, to approve the minutes of the regular meeting of August 6, 2025. The motion passed by the following roll call vote:

Yes: Langton, Moore, Kehoe, Okum

No: None

Absent: Robbins

#### IV. PUBLIC COMMENT

There were no requests from the public to speak.

#### V. REPORTS

##### A. **Engagement Report for August 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 August 2025**

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 July 2025 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.

#### 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.)

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 8:45 a.m.

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

September 19, 2025

TO: Insurance, Benefits and Legislative Committee  
Les Robbins, Chair  
Ronald Okum, Vice Chair  
Aleen Langton  
Wayne Moore  
Shawn Kehoe, Alternate

FROM: Barry W. Lew   
Legislative Affairs Officer

FOR: October 1, 2025 Insurance, Benefits and Legislative Committee Meeting

SUBJECT: **Federal Engagement: Visit with Congress**

## RECOMMENDATION

That the Insurance, Benefits and Legislative Committee recommend that the Board of Retirement:

1. Approve visits with Congress by Board trustees as designated by the Chair of the Board of Retirement and by staff as designated by the Acting Chief Executive Officer during the week of January 26, 2026, in Washington, D.C.; and
2. Approve reimbursement of all travel costs incurred in accordance with LACERA's Trustee Travel Policy.

## LEGAL AUTHORITY

The Board of Retirement's Policy on Engagement for Public Policy Issues Relating to Plan Administration and Retirement and Health Care Benefits provides for engagement to promote LACERA's presence and visibility with the legislative, executive, and judicial branches of state and federal governments.

## DISCUSSION

The California Delegation consisting of 52 representatives and 2 senators is the largest in Congress. Board members and staff have engaged with members of Congress and their staff on previous visits to Washington, D.C., most recently in January 2025. The visit is a continuing effort of engagement to foster relationships with members of Congress by increasing LACERA's presence and visibility among the members and providing education and information about LACERA's history, organization, and operations.

The National Conference on Public Employee Retirement Systems (NCPERS) will be holding its annual Legislative Conference on January 26-28, 2026, in Washington D.C. The last day and a half of the conference on January 27-28 will consist of group meetings with Congress arranged by NCPERS. There may be the option of further meetings the

following day to be arranged by LACERA's federal legislative advocate, Anthony Roda of Williams & Jensen.

**IT IS THEREFORE RECOMMENDED THAT THE COMMITTEE** recommend that the Board of Retirement:

1. Approve visits with Congress by Board trustees as designated by the Chair of the Board of Retirement and by staff as designated by the Acting Chief Executive Officer during the week of January 26, 2026, in Washington, D.C.; and
2. Approve reimbursement of all travel costs incurred in accordance with LACERA's Trustee Travel Policy.

**Reviewed and Approved:**



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**Luis Lugo, Deputy Chief Executive Officer**

**Attachment**

NCPERS 2026 Legislative Conference Preliminary Agenda

cc: Luis Lugo  
JJ Popowich  
Laura Guglielmo  
Steven P. Rice  
Cassandra Smith  
Anthony Roda, Williams & Jensen  
Shane Doucet, Doucet Consulting Solutions



## National Conference on Public Employee Retirement Systems

*The Voice for Public Pensions*

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[Home](#) > [Education](#) > [Legislative Conference & Policy Day](#) > [Legislative Conference Agenda](#)

[Print Page](#)

# Legislative Conference Agenda

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## 2026 PRELIMINARY AGENDA

As of 9/16/25

## 2026 KEYNOTE SPEAKER

NCPERS is pleased to welcome back **William Kristol**—renowned political analyst and founding editor of *The Weekly Standard*—as our keynote speaker. Kristol will revisit his 2024 predictions, offering fresh perspective on what unfolded and sharp commentary on the political events shaping today's headlines.

A familiar voice through his work with *FOX News* and *The Washington Post*, Kristol has long influenced American political discourse. His career includes serving as chief of staff to Vice President Dan Quayle, and he has been a strong advocate for U.S. foreign policy leadership.

The author of several New York Times bestsellers and recipient of the prestigious Bradley Prize, Kristol brings decades of experience and insight to the stage. This is a chance to hear his take on the nation's most pressing challenges and what lies ahead.



## MONDAY, JANUARY 26 – Legislative Conference

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- |                 |  |
|-----------------|--|
| 1:00 PM–6:30 PM | REGISTRATION                                 |
| 2:00 PM–5:00 PM | GENERAL SESSION I: State Policy and Pensions |
| 5:30 PM–6:30 PM | NETWORKING RECEPTION                         |

## TUESDAY, JANUARY 27 – Legislative Conference & Policy Day

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- |                  |   |
|------------------|---|
| 8:00 AM–1:00 PM  | REGISTRATION                                    |
| 8:00 AM–9:00 AM  | BREAKFAST                                       |
| 9:00 AM–12:00 PM | GENERAL SESSION II: Federal Policy and Pensions |
| 12:00 PM–1:00 PM | NETWORKING LUNCH                                |
-

## **Policy Day (Separate Registration Required)**

1:00 PM–5:00 PM      CAPITOL HILL MEETINGS

- *NCPERS will schedule your meetings with congressional offices.* Final meetings schedules will be sent to attendees one week prior to the event. [Learn more about what to expect.](#)

5:00 PM–6:00 PM      POLICY DAY HAPPY HOUR

## **WEDNESDAY, JANUARY 28 – Policy Day (Continued)**

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8:00 AM–9:00 AM      BREAKFAST

9:00 AM–12:00 PM      CAPITOL HILL MEETINGS

- *NCPERS will schedule your meetings with congressional offices.* Final meetings schedules will be sent to attendees one week prior to the event. [Learn more about what to expect.](#)

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## **CONTINUING EDUCATION (CE) CREDITS**

By attending the Legislative Conference, you can earn up to 6.5 Continuing Education (CE) hours toward your Accredited Fiduciary (AF) recertification and/or state-mandated continuing education requirements. CE credits are automatically recorded in your NCPERS membership account after the conference, where you can log in to download your CE certificate.

NCPERS is an accredited Minimum Educational Training (MET) sponsor for Texas public retirement systems, as recognized by the State Pension Review Board. This accreditation does not imply an endorsement by the Board regarding the quality of the MET program.

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Event Registration

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Annual Conference & Exhibition (ACE)

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Center for Online Learning

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Chief Officers Summit

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Communications & Member Services Summit

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FALL Conference

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Legislative Conference & Policy Day

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- » [About the Legislative Conference](#)
- » [About Policy Day](#)
- » [Legislative Conference Agenda](#)
- » [Legislative Conference Registration](#)
- » [Legislative Conference Sponsorship](#)
- » [Hotel Reservations](#)

NCPERS Accredited Fiduciary (NAF) Program

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NCPERS University

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Program for Advanced Trustee Studies (PATs)

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Public Pension Funding Forum

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Public Pension HR Summit

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Public Safety Conference

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Trustee Educational Seminar (TEDS)

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Conference Archives

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Future Conferences & Events

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National Conference on Public Employee Retirement Systems  
1201 New York Avenue, NW, Suite 850, Washington, DC 20005

☎ 202-601-2445 🖨 202-688-2387

✉ [info@ncpers.org](mailto:info@ncpers.org)

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**INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE  
ENGAGEMENT REPORT  
SEPTEMBER 2025  
FOR INFORMATION ONLY**

**Debunking the Job-Hopping Myth: A Data-Driven Look at Tenure and Turnover Among Younger Workers**

The National Institute on Retirement Security (NIRS) examined the common narrative about Millennials and Gen Z workers frequenting switching jobs. Contrary to popular belief, it found that younger workers have job retention patterns that are similar to previous generations at the same stage of career. The following are key findings of the report:

- Median job tenure is nearly identical across generations. Millennials and Gen Z (ages 25-34) in 2024 had a median tenure of 2.7 years, only slightly lower than Baby Boomers at the same age in 1983.
- Economic conditions rather than generational attitudes drive turnover. Attrition rates rise during strong economies and fall during recessions, such as during the 2008 Great Recession and the 2020 pandemic.
- Public sector benefits such as pensions and healthcare promote retention. Consequently, state and local government employees have lower attrition rates.
- Industry differences shape job stability. Manufacturing jobs, which have traditionally offered stronger benefits, have higher retention rates than retail and professional services.

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

**State and Local Public Pension Asset Increases: Federal Reserve Data**

The Federal Reserve publishes quarterly data on state and local defined benefit assets. As of the second quarter of 2025 (June 30), public pension assets were about \$6.51 trillion, an increase of 6.9% from the prior quarter's \$6.09 trillion. This is the highest quarterly increase since the fourth quarter of 2020, when public pension assets increased 10.2% from the prior quarter. The second quarter of 2025 is also higher than the second quarter of 2024 by 8.6%. [\(Source\)](#)

**Assets of Largest Pension Funds Rise to Record \$24.4T**

According to a new report from the WTW's Thinking Ahead Institute, the largest 300 pension funds in the world collectively manage \$24.4 trillion in assets in 2024. This amount surpasses the previous record of \$23.6 trillion in 2021.

These funds, however, manage both defined benefit (59.4%) and defined contribution plans (27.7%). Other funds include reserve funds (12%) and hybrid funds (0.9%). About 153 of the 300 funds are public sector pension funds or sovereign wealth funds. North



America accounted for nearly half of pension assets at 47.2%, primarily in the U.S., which has 153 of the 300 funds and accounts for 41.4% of total assets under management.

The 20 largest funds invested 53.2% of assets in equities, 28.8% in fixed income, and 18% in alternatives. The largest funds include the Government Pension Fund of Norway (\$1.77 trillion), Government Pension Investment Fund of Japan (\$1.65 trillion), the U.S. Federal Retirement Thrift (\$954 billion), the National Pension of South Korea (\$820 billion), and ABP of the Netherlands (\$560 billion). [\(Source\)](#) [\(Source\)](#)

### **Effect of Unions on Workers, Communities, and Democracy**

A recent report by the Economic Policy Institute (EPI) examines the strong correlation between higher levels of unionization and a range of economic, personal, and democratic well-being measures. In addition to giving workers a voice at work on wages and working conditions, the report's data suggests that unions also give workers a voice in shaping their communities. Following are the report's key findings:

- Between 1979-2024, median wages rose more in states where unionization declined less.
- Since 1979, the productivity-pay gap has grown more slowly in states with smaller declines in unionization.
- Median household income in 2023 was on average more than \$12,000 higher in high-union density states than low-union density states.
- High-union density states (5.7%) have a lower share of people without health insurance compared to low-union density states (9%).
- 70.6% of high-union density states have enacted sick leave legislation, compared to 11.8% of low-union density states.
- High-union density states spend more per pupil on education than low-union density states (\$22,777 per pupil vs. \$15,568).
- Since 2021, low-union density states have passed 44 voter restriction laws, compared to high-union density states, which passed 6 such laws.

[\(Source\)](#)

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

**Centers for Medicare and Medicaid Services (CMS) Medicare Part D Retiree Drug Subsidy (RDS) Program Reconciliation Plan Year 7/1/2023 – 6/30/2024**

Staff have successfully completed and submitted the RDS subsidy payment request to CMS/RDS for the 2023/2024 Plan Year. Below is a breakdown of the subsidy payments received to date, by carrier and total amount.

| <b>MEDICAL PLAN</b> | <b>SUBSIDY AMOUNT<br/>RECEIVED</b> |
|---------------------|------------------------------------|
| Anthem Blue Cross   | Pending                            |
| Cigna Medical       | <b>\$208,745.65</b>                |
| Kaiser Permanente   | Pending                            |
| LACFF Local 1014    | <b>\$962,613.90</b>                |
| <b>TOTAL</b>        | <b>\$</b>                          |

As a background, the Retiree Drug Subsidy (RDS) Program was enacted in December 2003 to reimburse Plan Sponsors for a portion of their Qualifying Covered Retirees' costs for prescription drugs otherwise covered by Medicare Part D that are attributable to drug costs between the applicable Cost Threshold and Cost Limit. To qualify for the subsidy, a Plan Sponsor must show that its coverage is "actuarially equivalent" to, or at least as generous as, the defined standard Medicare Part D coverage.

We will continue to monitor the pending payments and will report to your Board once they are received.

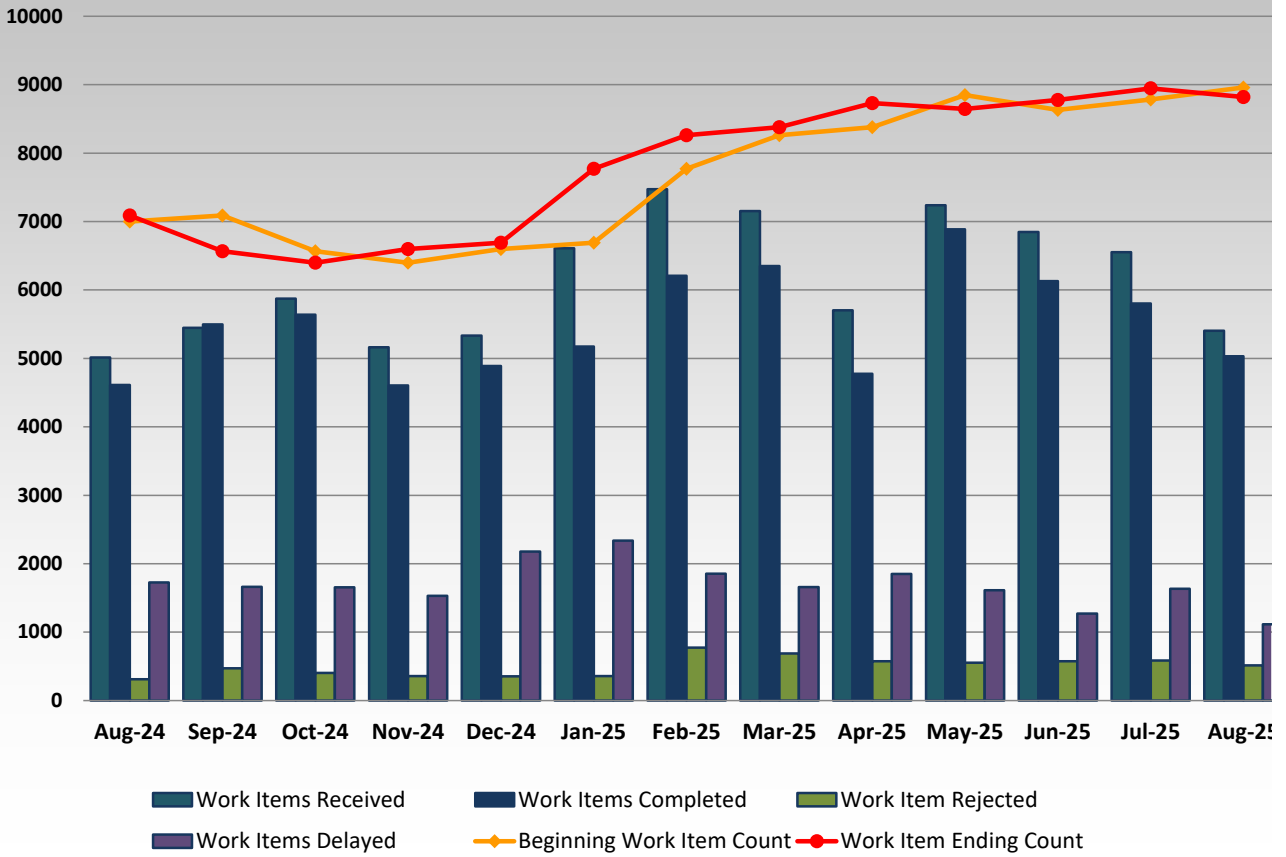
Thank you to RHC staff, carrier partners, and Segal for their support in ensuring this project was completed on time.

# Retiree Healthcare Division

## Trend Report

AUGUST 2024 - AUGUST 2025

Updated: 9/22/2025

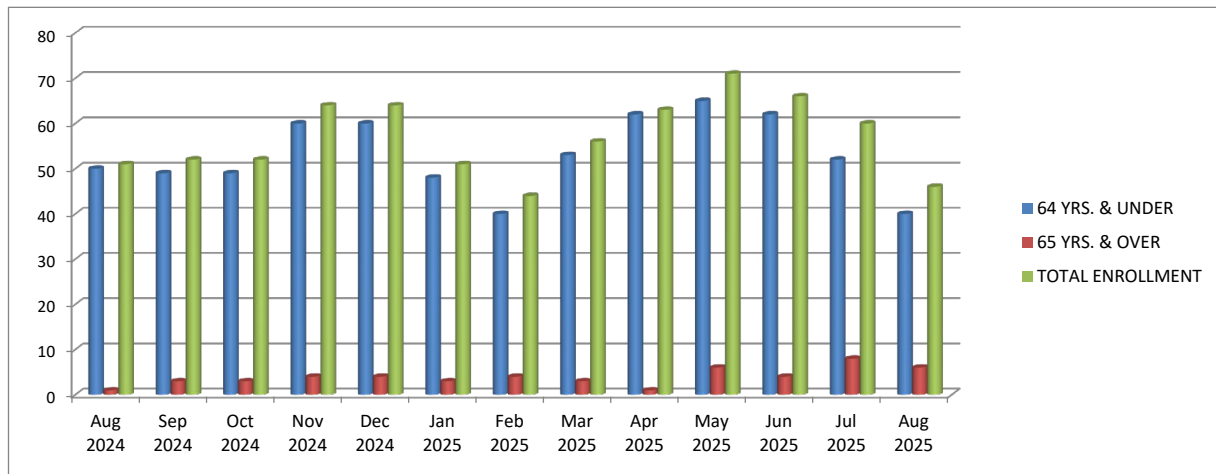


|        | Beginning<br>Work Item<br>Count | Work Items<br>Received | Work Items<br>Completed | Work Item<br>Rejected | Work Items<br>Delayed | Work Item<br>Ending Count |
|--------|---------------------------------|------------------------|-------------------------|-----------------------|-----------------------|---------------------------|
| 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                      |
| Aug-25 | 8960                            | 5405                   | 5030                    | 515                   | 1116                  | 8820                      |

## Retirees Monthly Age Breakdown AUGUST 2024 - AUGUST 2025

### Disability Retirement

| MONTH    | 64 YRS. & UNDER | 65 YRS. & OVER | TOTAL ENROLLMENT |
|----------|-----------------|----------------|------------------|
| 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               |
| Aug 2025 | 40              | 6              | 46               |

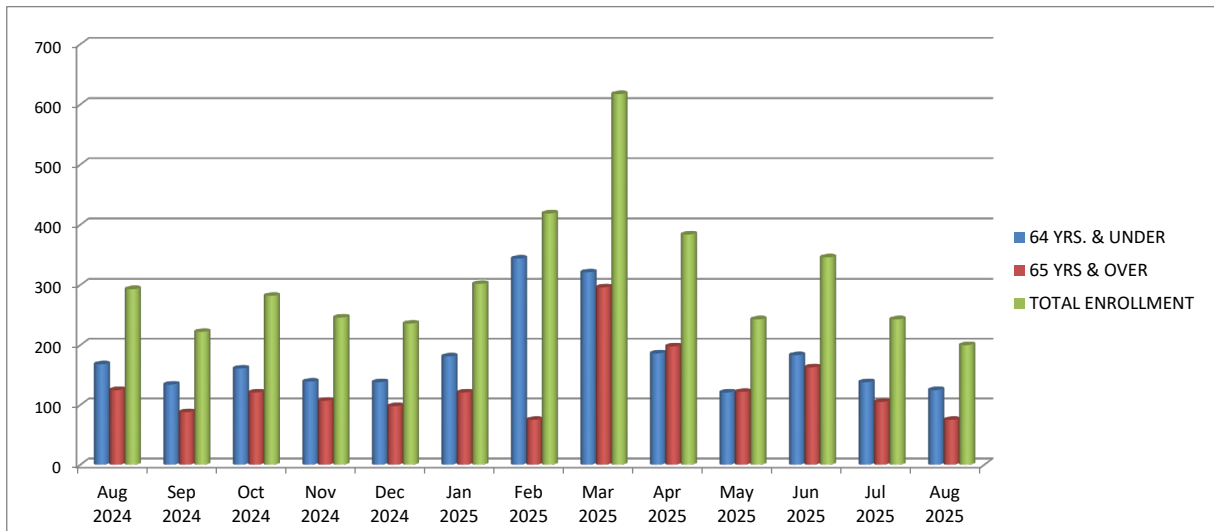


PLEASE NOTE: Next Report will include the following dates: September 1, 2024, through September 30, 2025.

## Retirees Monthly Age Breakdown AUGUST 2024 - AUGUST 2025

### Service Retirement

| MONTH    | 64 YRS. & UNDER | 65 YRS & OVER | TOTAL ENROLLMENT |
|----------|-----------------|---------------|------------------|
| 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              |
| Aug 2025 | 125             | 75            | 200              |



PLEASE NOTE: Next Report will include the following dates: September 1, 2024, through September 30, 2025.

**Medicare Part B Reimbursement and Penalty Report**

**PAY PERIOD 9/30/2025**

| <b>Deduction Code</b>            | <b>No. of Members</b> | <b>Reimbursement Amount</b> | <b>No. of Penalties</b> | <b>Penalty Amount</b> |
|----------------------------------|-----------------------|-----------------------------|-------------------------|-----------------------|
| <b>ANTHEM BC III</b>             |                       |                             |                         |                       |
| 240                              | 7865                  | 1348047.6                   | 0                       | \$0.00                |
| 241                              | 131                   | 21660.7                     | 0                       | \$0.00                |
| 242                              | 1015                  | 179075.7                    | 0                       | \$0.00                |
| 243                              | 4762                  | 1671526.56                  | 0                       | \$0.00                |
| 244                              | 13                    | 2528.8                      | 0                       | \$0.00                |
| 245                              | 62                    | 10942.9                     | 0                       | \$0.00                |
| 246                              | 15                    | 2484.1                      | 0                       | \$0.00                |
| 247                              | 178                   | 32760.9                     | 0                       | \$0.00                |
| 248                              | 14                    | 4418.4                      | 0                       | \$0.00                |
| 249                              | 92                    | 32348.1                     | 0                       | \$0.00                |
| 250                              | 18                    | 6103.5                      | 0                       | \$0.00                |
| <b>Plan Total:</b>               | <b>14,165</b>         | <b>\$3,311,897.26</b>       | <b>0</b>                | <b>\$0.00</b>         |
| <b>CIGNA - PREFERRED with RX</b> |                       |                             |                         |                       |
| 0                                | 0                     | 0                           | 0                       | \$0.00                |
| 0                                | 0                     | 0                           | 0                       | \$0.00                |
| 0                                | 0                     | 0                           | 0                       | \$0.00                |
| 0                                | 0                     | 0                           | 0                       | \$0.00                |
| <b>Plan Total:</b>               | <b>0</b>              | <b>\$0.00</b>               | <b>0</b>                | <b>\$0.00</b>         |
| <b>KAISER SR. ADVANTAGE</b>      |                       |                             |                         |                       |
| 394                              | 22                    | 3428.7                      | 0                       | \$0.00                |
| 397                              | 2                     | 329.6                       | 0                       | \$0.00                |
| 398                              | 12                    | 4440                        | 0                       | \$0.00                |
| 403                              | 12403                 | 2091954.18                  | 0                       | \$0.00                |
| 413                              | 1546                  | 276795.1                    | 0                       | \$0.00                |
| 418                              | 6472                  | 2244914.57                  | 1                       | \$51.50               |
| 419                              | 211                   | 32305.3                     | 0                       | \$0.00                |
| 426                              | 253                   | 44705.8                     | 0                       | \$0.00                |
| 445                              | 2                     | 370                         | 0                       | \$0.00                |
| 451                              | 38                    | 6402.5                      | 0                       | \$0.00                |
| 455                              | 6                     | 1110                        | 0                       | \$0.00                |
| 457                              | 18                    | 6476.7                      | 0                       | \$0.00                |
| 459                              | 2                     | 740                         | 0                       | \$0.00                |
| 462                              | 87                    | 15147.9                     | 0                       | \$0.00                |
| 465                              | 3                     | 555                         | 0                       | \$0.00                |
| 466                              | 29                    | 10500.1                     | 0                       | \$0.00                |
| 472                              | 28                    | 4903.2                      | 0                       | \$0.00                |
| 476                              | 4                     | 690.5                       | 0                       | \$0.00                |
| 478                              | 14                    | 5093.1                      | 0                       | \$0.00                |
| 479                              | 1                     | 144.6                       | 0                       | \$0.00                |
| 482                              | 81                    | 13309.6                     | 0                       | \$0.00                |
| 486                              | 3                     | 185                         | 0                       | \$0.00                |
| 488                              | 31                    | 10826.3                     | 0                       | \$0.00                |
| 491                              | 1                     | 148.5                       | 0                       | \$0.00                |
| 492                              | 1                     | 185                         | 0                       | \$0.00                |
| <b>Plan Total:</b>               | <b>21,270</b>         | <b>\$4,775,661.25</b>       | <b>1</b>                | <b>\$51.50</b>        |

**Medicare Part B Reimbursement and Penalty Report**

**PAY PERIOD 9/30/2025**

| <b>Deduction Code</b>                            | <b>No. of Members</b> | <b>Reimbursement Amount</b> | <b>No. of Penalties</b> | <b>Penalty Amount</b> |
|--|-----------------------|-----------------------------|-------------------------|-----------------------|
| <b>SCAN</b>                                      |                       |                             |                         |                       |
| 611  | 286                   | 52216.8                     | 0                       | \$0.00                |
| 613  | 98                    | 34482.1                     | 0                       | \$0.00                |
| 620  | 29                    | 4868.1                      | 0                       | \$0.00                |
| 621  | 13                    | 4729.2                      | 0                       | \$0.00                |
| 622  | 20                    | 3882                        | 0                       | \$0.00                |
| 623  | 6                     | 2059.8                      | 0                       | \$0.00                |
| <b>Plan Total:</b>                               | <b>452</b>            | <b>102,238</b>              | <b>0</b>                | <b>0</b>              |
|  |                       |                             |                         |                       |
| <b>UNITED HEALTHCARE GROUP MEDICARE ADV. HMO</b> |                       |                             |                         |                       |
| 701  | 2248                  | 390878.7                    | 0                       | \$0.00                |
| 702  | 406                   | 71924.7                     | 0                       | \$0.00                |
| 703  | 1439                  | 508177.3                    | 0                       | \$0.00                |
| 704  | 102                   | 18442.7                     | 0                       | \$0.00                |
| 705  | 55                    | 20149.3                     | 0                       | \$0.00                |
| <b>Plan Total:</b>                               | <b>4,250</b>          | <b>\$1,009,572.70</b>       | <b>0</b>                | <b>\$0.00</b>         |
| <b>Grand Total:</b>                              | <b>40,137</b>         | <b>\$9,199,369.21</b>       | <b>1</b>                | <b>\$51.50</b>        |

Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 9/30/2025

| Deduction Code                   | No. of Members | Reimbursement Amount  | No. of Penalties | Penalty Amount |
|----------------------------------|----------------|-----------------------|------------------|----------------|
| <b>ANTHEM BC III</b>             |                |                       |                  |                |
| 240                              | 7865           | \$1,348,047.60        | 0                | \$0.00         |
| 241                              | 131            | \$21,660.70           | 0                | \$0.00         |
| 242                              | 1015           | \$179,075.70          | 0                | \$0.00         |
| 243                              | 4762           | \$1,671,526.56        | 0                | \$0.00         |
| 244                              | 13             | \$2,528.80            | 0                | \$0.00         |
| 245                              | 62             | \$10,942.90           | 0                | \$0.00         |
| 246                              | 15             | \$2,484.10            | 0                | \$0.00         |
| 247                              | 178            | \$32,760.90           | 0                | \$0.00         |
| 248                              | 14             | \$4,418.40            | 0                | \$0.00         |
| 249                              | 92             | \$32,348.10           | 0                | \$0.00         |
| 250                              | 18             | \$6,103.50            | 0                | \$0.00         |
| <b>Plan Total:</b>               | <b>14,165</b>  | <b>\$3,311,897.26</b> | <b>0</b>         | <b>\$0.00</b>  |
| <b>CIGNA - PREFERRED with RX</b> |                |                       |                  |                |
| <b>Plan Total:</b>               | <b>#REF!</b>   | <b>#REF!</b>          | <b>#REF!</b>     | <b>#REF!</b>   |
| <b>KAISER SR. ADVANTAGE</b>      |                |                       |                  |                |
| 394                              | 22             | \$3,428.70            | 0                | \$0.00         |
| 397                              | 2              | \$329.60              | 0                | \$0.00         |
| 398                              | 12             | \$4,440.00            | 0                | \$0.00         |
| 403                              | 12403          | \$2,091,954.18        | 0                | \$0.00         |
| 413                              | 1546           | \$276,795.10          | 0                | \$0.00         |
| 418                              | 6472           | \$2,244,914.57        | 1                | \$51.50        |
| 419                              | 211            | \$32,305.30           | 0                | \$0.00         |
| 426                              | 253            | \$44,705.80           | 0                | \$0.00         |
| 445                              | 2              | \$370.00              | 0                | \$0.00         |
| 451                              | 38             | \$6,402.50            | 0                | \$0.00         |
| 455                              | 6              | \$1,110.00            | 0                | \$0.00         |
| 457                              | 18             | \$6,476.70            | 0                | \$0.00         |
| 459                              | 2              | \$740.00              | 0                | \$0.00         |
| 462                              | 87             | \$15,147.90           | 0                | \$0.00         |
| 465                              | 3              | \$555.00              | 0                | \$0.00         |
| 466                              | 29             | \$10,500.10           | 0                | \$0.00         |
| 472                              | 28             | \$4,903.20            | 0                | \$0.00         |
| 476                              | 4              | \$690.50              | 0                | \$0.00         |
| 478                              | 14             | \$5,093.10            | 0                | \$0.00         |
| 479                              | 1              | \$144.60              | 0                | \$0.00         |
| 482                              | 81             | \$13,309.60           | 0                | \$0.00         |
| 486                              | 3              | \$185.00              | 0                | \$0.00         |
| 488                              | 31             | \$10,826.30           | 0                | \$0.00         |
| 491                              | 1              | \$148.50              | 0                | \$0.00         |
| 492                              | 1              | \$185.00              | 0                | \$0.00         |
| <b>Plan Total:</b>               | <b>21,270</b>  | <b>\$4,775,661.25</b> | <b>1</b>         | <b>\$51.50</b> |



**Medicare Part B Reimbursement and Penalty Report**

**PAY PERIOD 9/30/2025**

| <b>Deduction Code</b>                            | <b>No. of Members</b> | <b>Reimbursement Amount</b> | <b>No. of Penalties</b> | <b>Penalty Amount</b> |
|--|-----------------------|-----------------------------|-------------------------|-----------------------|
| <b>SCAN</b>                                      |                       |                             |                         |                       |
| 611  | 286                   | \$52,216.80                 | 0                       | \$0.00                |
| 613  | 98                    | \$34,482.10                 | 0                       | \$0.00                |
| 620  | 29                    | \$4,868.10                  | 0                       | \$0.00                |
| 621  | 13                    | \$4,729.20                  | 0                       | \$0.00                |
| 622  | 20                    | \$3,882.00                  | 0                       | \$0.00                |
| 623  | 6                     | \$2,059.80                  | 0                       | \$0.00                |
| <b>Plan Total:</b>                               | <b>452</b>            | <b>102,238</b>              | <b>0</b>                | <b>\$0.00</b>         |
| <b>UNITED HEALTHCARE GROUP MEDICARE ADV. HMO</b> |                       |                             |                         |                       |
| 701  | 2248                  | \$390,878.70                | 0                       | \$0.00                |
| 702  | 406                   | \$71,924.70                 | 0                       | \$0.00                |
| 703  | 1439                  | \$508,177.30                | 0                       | \$0.00                |
| 704  | 102                   | \$18,442.70                 | 0                       | \$0.00                |
| 705  | 55                    | \$20,149.30                 | 0                       | \$0.00                |
| <b>Plan Total:</b>                               | <b>4,250</b>          | <b>\$1,009,572.70</b>       | <b>0</b>                | <b>\$0.00</b>         |
| <b>LOCAL 1014</b>                                |                       |                             |                         |                       |
| 804  | 204                   | \$49,614.50                 | 0                       | \$0.00                |
| 805  | 241                   | \$53,130.60                 | 0                       | \$0.00                |
| 806  | 767                   | \$308,538.00                | 0                       | \$0.00                |
| 807  | 66                    | \$13,319.80                 | 0                       | \$0.00                |
| 808  | 23                    | \$9,693.80                  | 0                       | \$0.00                |
| 812  | 260                   | \$53,649.00                 | 0                       | \$0.00                |
| 813  | 2                     | \$370.00                    | 0                       | \$0.00                |
| <b>Plan Total:</b>                               | <b>1,563</b>          | <b>\$488,315.70</b>         | <b>0</b>                | <b>\$0.00</b>         |
| <b>Grand Total:</b>                              | <b>#REF!</b>          | <b>#REF!</b>                | <b>#REF!</b>            | <b>#REF!</b>          |

## Medical and Dental Vision Insurance Premiums

### October 2025

| Carrier Codes                               | Member Count | Premium Amount         | Member Amount       | County Subsidy Amount  | Total                  | Adjustments          | Total Paid             |
|---|--------------|------------------------|---------------------|------------------------|------------------------|----------------------|------------------------|
| <b>Medical Plan</b>                         |              |                        |                     |                        |                        |                      |                        |
| <b>Anthem Blue Cross Prudent Buyer Plan</b> |              |                        |                     |                        |                        |                      |                        |
| 201   | 413          | \$507,678.08           | \$71,107.75         | \$423,249.61           | \$494,357.36           | (\$2,440.56)         | \$491,916.80           |
| 202   | 208          | \$506,914.84           | \$40,361.05         | \$440,126.95           | \$480,488.00           | \$0.00               | \$480,488.00           |
| 203   | 80           | \$219,629.07           | \$32,483.39         | \$181,722.74           | \$214,206.13           | \$2,711.47           | \$216,917.60           |
| 204   | 23           | \$36,085.16            | \$8,974.21          | \$25,542.03            | \$34,516.24            | \$1,568.92           | \$36,085.16            |
| <b>SUBTOTAL</b>                             | <b>724</b>   | <b>\$1,270,307.15</b>  | <b>\$152,926.40</b> | <b>\$1,070,641.33</b>  | <b>\$1,223,567.73</b>  | <b>\$1,839.83</b>    | <b>\$1,225,407.56</b>  |
| <b>Anthem Blue Cross I</b>                  |              |                        |                     |                        |                        |                      |                        |
| 211   | 512          | \$813,002.40           | \$49,255.59         | \$763,746.81           | \$813,002.40           | (\$1,584.80)         | \$811,417.60           |
| 212   | 207          | \$594,443.20           | \$30,922.48         | \$563,520.72           | \$594,443.20           | (\$16,079.45)        | \$578,363.75           |
| 213   | 78           | \$266,332.70           | \$23,464.24         | \$236,125.86           | \$259,590.10           | \$0.00               | \$259,590.10           |
| 214   | 27           | \$56,622.24            | \$4,865.29          | \$60,145.43            | \$65,010.72            | \$0.00               | \$65,010.72            |
| 215   | 2            | \$1,069.92             | \$171.19            | \$898.73               | \$1,069.92             | \$0.00               | \$1,069.92             |
| <b>SUBTOTAL</b>                             | <b>826</b>   | <b>\$1,731,470.46</b>  | <b>\$108,678.79</b> | <b>\$1,624,437.55</b>  | <b>\$1,733,116.34</b>  | <b>(\$17,664.25)</b> | <b>\$1,715,452.09</b>  |
| <b>Anthem Blue Cross II</b>                 |              |                        |                     |                        |                        |                      |                        |
| 221   | 2,498        | \$3,987,356.80         | \$197,529.30        | \$3,804,989.86         | \$4,002,519.16         | \$1,584.80           | \$4,004,103.96         |
| 222   | 2,065        | \$5,958,721.50         | \$135,064.43        | \$5,707,654.31         | \$5,842,718.74         | \$5,715.80           | \$5,848,434.54         |
| 223   | 956          | \$3,253,304.50         | \$124,266.07        | \$3,016,711.23         | \$3,140,977.30         | \$0.00               | \$3,140,977.30         |
| 224   | 254          | \$532,668.48           | \$52,390.37         | \$492,718.16           | \$545,108.53           | \$0.00               | \$545,108.53           |
| <b>SUBTOTAL</b>                             | <b>5,773</b> | <b>\$13,732,051.28</b> | <b>\$509,250.17</b> | <b>\$13,022,073.56</b> | <b>\$13,531,323.73</b> | <b>\$7,300.60</b>    | <b>\$13,538,624.33</b> |

## Medical and Dental Vision Insurance Premiums

### October 2025

| Carrier Codes                   | Member Count  | Premium Amount         | Member Amount         | County Subsidy Amount  | Total                  | Adjustments          | Total Paid             |
|---------------------------------|---------------|------------------------|-----------------------|------------------------|------------------------|----------------------|------------------------|
| <b>Anthem Blue Cross III</b>    |               |                        |                       |                        |                        |                      |                        |
| 240                             | 7,908         | \$5,089,839.30         | \$639,566.26          | \$4,501,206.68         | \$5,140,772.94         | (\$9,000.60)         | \$5,131,772.34         |
| 241                             | 128           | \$269,504.99           | \$20,578.20           | \$240,697.63           | \$261,275.83           | (\$2,057.29)         | \$259,218.54           |
| 242                             | 1,004         | \$2,106,664.96         | \$125,126.42          | \$1,958,774.28         | \$2,083,900.70         | \$0.00               | \$2,083,900.70         |
| 243                             | 4,780         | \$6,138,285.54         | \$614,849.02          | \$5,506,579.46         | \$6,121,428.48         | (\$5,753.76)         | \$6,115,674.72         |
| 244                             | 13            | \$14,973.79            | \$1,336.13            | \$15,941.32            | \$17,277.45            | \$0.00               | \$17,277.45            |
| 245                             | 61            | \$72,565.29            | \$5,748.94            | \$65,589.69            | \$71,338.63            | \$0.00               | \$71,338.63            |
| 246                             | 15            | \$38,490.75            | \$4,105.68            | \$34,385.07            | \$38,490.75            | \$0.00               | \$38,490.75            |
| 247                             | 182           | \$472,153.20           | \$22,068.02           | \$442,387.03           | \$464,455.05           | \$0.00               | \$464,455.05           |
| 248                             | 14            | \$25,047.12            | \$2,290.03            | \$22,757.09            | \$25,047.12            | \$0.00               | \$25,047.12            |
| 249                             | 92            | \$166,384.44           | \$14,026.43           | \$147,107.29           | \$161,133.72           | \$0.00               | \$161,133.72           |
| 250                             | 18            | \$36,092.16            | \$2,606.65            | \$33,485.51            | \$36,092.16            | \$0.00               | \$36,092.16            |
| <b>SUBTOTAL</b>                 | <b>14,215</b> | <b>\$14,430,001.54</b> | <b>\$1,452,301.78</b> | <b>\$12,968,911.05</b> | <b>\$14,421,212.83</b> | <b>(\$16,811.65)</b> | <b>\$14,404,401.18</b> |
| <b>CIGNA Network Model Plan</b> |               |                        |                       |                        |                        |                      |                        |
| 301                             | 212           | \$433,835.78           | \$109,167.25          | \$334,804.88           | \$443,972.13           | (\$2,027.27)         | \$441,944.86           |
| 302                             | 54            | \$197,699.40           | \$46,745.12           | \$150,954.28           | \$197,699.40           | \$0.00               | \$197,699.40           |
| 303                             | 5             | \$25,938.42            | \$2,450.76            | \$10,518.94            | \$12,969.70            | \$0.00               | \$12,969.70            |
| 304                             | 11            | \$32,282.28            | \$10,370.71           | \$13,841.00            | \$24,211.71            | \$0.00               | \$24,211.71            |
| <b>SUBTOTAL</b>                 | <b>282</b>    | <b>\$689,755.88</b>    | <b>\$168,733.84</b>   | <b>\$510,119.10</b>    | <b>\$678,852.94</b>    | <b>(\$2,027.27)</b>  | <b>\$676,825.67</b>    |

## Medical and Dental Vision Insurance Premiums

### October 2025

| Carrier Codes                  | Member Count  | Premium Amount         | Member Amount         | County Subsidy Amount  | Total                  | Adjustments         | Total Paid             |
|--------------------------------|---------------|------------------------|-----------------------|------------------------|------------------------|---------------------|------------------------|
| <b>Kaiser/Senior Advantage</b> |               |                        |                       |                        |                        |                     |                        |
| 401                            | 1,629         | \$2,354,575.13         | \$162,420.79          | \$2,139,478.89         | \$2,301,899.68         | (\$1,410.77)        | \$2,300,488.91         |
| 403                            | 12,414        | \$3,635,833.56         | \$315,556.71          | \$3,351,022.13         | \$3,666,578.84         | (\$3,828.62)        | \$3,662,750.22         |
| 404                            | 442           | \$606,961.32           | \$9,350.45            | \$594,664.89           | \$604,015.34           | (\$2,734.06)        | \$601,281.28           |
| 405                            | 1,468         | \$2,080,479.43         | \$18,499.45           | \$2,088,190.05         | \$2,106,689.50         | \$0.00              | \$2,106,689.50         |
| 411                            | 2,020         | \$5,809,960.10         | \$223,226.00          | \$5,354,329.52         | \$5,577,555.52         | \$8,440.62          | \$5,585,996.14         |
| 413                            | 1,522         | \$2,636,533.08         | \$115,595.67          | \$2,506,217.10         | \$2,621,812.77         | \$3,388.86          | \$2,625,201.63         |
| 414                            | 46            | \$132,950.40           | \$332.37              | \$92,243.37            | \$92,575.74            | \$0.00              | \$92,575.74            |
| 418                            | 6,434         | \$3,724,046.36         | \$258,340.42          | \$3,471,227.02         | \$3,729,567.44         | (\$5,177.88)        | \$3,724,389.56         |
| 419                            | 213           | \$356,549.04           | \$4,886.07            | \$341,758.83           | \$346,644.90           | (\$1,650.69)        | \$344,994.21           |
| 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            | \$0.00              | \$12,696.93            |
| 422                            | 280           | \$802,873.50           | \$1,577.57            | \$761,856.53           | \$763,434.10           | \$0.00              | \$763,434.10           |
| 426                            | 254           | \$432,987.45           | \$4,007.28            | \$432,584.53           | \$436,591.81           | \$0.00              | \$436,591.81           |
| 428                            | 41            | \$113,707.76           | \$554.67              | \$113,153.09           | \$113,707.76           | \$0.00              | \$113,707.76           |
| 430                            | 142           | \$400,533.72           | \$3,102.74            | \$397,430.98           | \$400,533.72           | (\$2,820.66)        | \$397,713.06           |
| <b>SUBTOTAL</b>                | <b>27,009</b> | <b>\$23,359,663.48</b> | <b>\$1,119,774.44</b> | <b>\$21,913,505.31</b> | <b>\$23,033,279.75</b> | <b>(\$5,793.20)</b> | <b>\$23,027,486.55</b> |
| <b>Kaiser - Colorado</b>       |               |                        |                       |                        |                        |                     |                        |
| 450                            | 4             | \$5,687.20             | \$568.72              | \$5,118.48             | \$5,687.20             | \$0.00              | \$5,687.20             |
| 451                            | 39            | \$11,618.10            | \$1,495.45            | \$10,122.65            | \$11,618.10            | \$0.00              | \$11,618.10            |
| 453                            | 9             | \$28,321.11            | \$3,231.85            | \$28,236.05            | \$31,467.90            | \$0.00              | \$31,467.90            |
| 455                            | 6             | \$10,270.20            | \$924.32              | \$9,345.88             | \$10,270.20            | \$0.00              | \$10,270.20            |
| 457                            | 18            | \$10,580.40            | \$1,034.53            | \$9,545.87             | \$10,580.40            | \$0.00              | \$10,580.40            |
| 459                            | 2             | \$4,003.20             | \$80.06               | \$3,923.14             | \$4,003.20             | \$0.00              | \$4,003.20             |
| <b>SUBTOTAL</b>                | <b>78</b>     | <b>\$70,480.21</b>     | <b>\$7,334.93</b>     | <b>\$66,292.07</b>     | <b>\$73,627.00</b>     | <b>\$0.00</b>       | <b>\$73,627.00</b>     |

## Medical and Dental Vision Insurance Premiums

### October 2025

| Carrier Codes           | Member Count | Premium Amount      | Member Amount      | County Subsidy Amount | Total               | Adjustments         | Total Paid          |
|-------------------------|--------------|---------------------|--------------------|-----------------------|---------------------|---------------------|---------------------|
| <b>Kaiser - Georgia</b> |              |                     |                    |                       |                     |                     |                     |
| 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           | \$30,274.79         | \$4,424.87         | \$20,507.31           | \$24,932.18         | \$0.00              | \$24,932.18         |
| 462                     | 86           | \$36,006.69         | \$4,478.02         | \$32,356.41           | \$36,834.43         | \$0.00              | \$36,834.43         |
| 463                     | 5            | \$17,768.70         | \$4,908.15         | \$12,860.55           | \$17,768.70         | (\$7,107.48)        | \$10,661.22         |
| 465                     | 3            | \$6,560.22          | \$349.88           | \$6,210.34            | \$6,560.22          | \$0.00              | \$6,560.22          |
| 466                     | 29           | \$23,772.46         | \$1,623.09         | \$22,969.11           | \$24,592.20         | \$0.00              | \$24,592.20         |
| <b>SUBTOTAL</b>         | <b>151</b>   | <b>\$136,565.04</b> | <b>\$17,744.71</b> | <b>\$115,125.20</b>   | <b>\$132,869.91</b> | <b>(\$7,107.48)</b> | <b>\$125,762.43</b> |
| <b>Kaiser - Hawaii</b>  |              |                     |                    |                       |                     |                     |                     |
| 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          |
| <b>SUBTOTAL</b>         | <b>60</b>    | <b>\$56,833.91</b>  | <b>\$5,410.97</b>  | <b>\$51,422.94</b>    | <b>\$56,833.91</b>  | <b>\$0.00</b>       | <b>\$56,833.91</b>  |

## Medical and Dental Vision Insurance Premiums

### October 2025

| Carrier Codes               | Member Count | Premium Amount      | Member Amount      | County Subsidy Amount | Total               | Adjustments     | Total Paid          |
|-----------------------------|--------------|---------------------|--------------------|-----------------------|---------------------|-----------------|---------------------|
| <b>Kaiser - Oregon</b>      |              |                     |                    |                       |                     |                 |                     |
| 481                         | 2            | \$2,829.92          | \$707.48           | \$2,122.44            | \$2,829.92          | \$0.00          | \$2,829.92          |
| 482                         | 82           | \$46,346.40         | \$6,183.30         | \$40,163.10           | \$46,346.40         | \$0.00          | \$46,346.40         |
| 483                         | 5            | \$8,661.05          | \$1,117.40         | \$7,543.65            | \$8,661.05          | \$0.00          | \$8,661.05          |
| 484                         | 3            | \$11,287.68         | \$0.00             | \$5,643.84            | \$5,643.84          | \$0.00          | \$5,643.84          |
| 486                         | 2            | \$5,916.48          | \$0.00             | \$1,972.16            | \$1,972.16          | \$0.00          | \$1,972.16          |
| 488                         | 31           | \$34,794.40         | \$4,803.86         | \$29,990.54           | \$34,794.40         | \$0.00          | \$34,794.40         |
| 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          |
| <b>SUBTOTAL</b>             | <b>127</b>   | <b>\$114,056.20</b> | <b>\$12,812.04</b> | <b>\$91,656.00</b>    | <b>\$104,468.04</b> | <b>\$0.00</b>   | <b>\$104,468.04</b> |
| <b>SCAN Health Plan</b>     |              |                     |                    |                       |                     |                 |                     |
| 611                         | 287          | \$83,032.59         | \$17,008.60        | \$67,173.23           | \$84,181.83         | \$744.06        | \$84,925.89         |
| 613                         | 98           | \$55,528.76         | \$11,026.37        | \$45,069.01           | \$56,095.38         | \$0.00          | \$56,095.38         |
| <b>SUBTOTAL</b>             | <b>385</b>   | <b>\$138,561.35</b> | <b>\$28,034.97</b> | <b>\$112,242.24</b>   | <b>\$140,277.21</b> | <b>\$744.06</b> | <b>\$141,021.27</b> |
| <b>SCAN Health Plan, AZ</b> |              |                     |                    |                       |                     |                 |                     |
| 620                         | 29           | \$8,331.99          | \$1,154.98         | \$7,177.01            | \$8,331.99          | \$0.00          | \$8,331.99          |
| 621                         | 13           | \$7,366.06          | \$1,167.24         | \$6,198.82            | \$7,366.06          | \$0.00          | \$7,366.06          |
| <b>SUBTOTAL</b>             | <b>42</b>    | <b>\$15,698.05</b>  | <b>\$2,322.22</b>  | <b>\$13,375.83</b>    | <b>\$15,698.05</b>  | <b>\$0.00</b>   | <b>\$15,698.05</b>  |
| <b>SCAN Health Plan, NV</b> |              |                     |                    |                       |                     |                 |                     |
| 622                         | 22           | \$6,320.82          | \$890.66           | \$5,717.47            | \$6,608.13          | \$0.00          | \$6,608.13          |
| 623                         | 6            | \$3,399.72          | \$249.31           | \$3,150.41            | \$3,399.72          | \$0.00          | \$3,399.72          |
| <b>SUBTOTAL</b>             | <b>28</b>    | <b>\$9,720.54</b>   | <b>\$1,139.97</b>  | <b>\$8,867.88</b>     | <b>\$10,007.85</b>  | <b>\$0.00</b>   | <b>\$10,007.85</b>  |

## Medical and Dental Vision Insurance Premiums

### October 2025

| Carrier Codes            | Member Count | Premium Amount        | Member Amount       | County Subsidy Amount | Total                 | Adjustments         | Total Paid            |
|--------------------------|--------------|-----------------------|---------------------|-----------------------|-----------------------|---------------------|-----------------------|
| <b>UHC Medicare Adv.</b> |              |                       |                     |                       |                       |                     |                       |
| 701                      | 2,249        | \$873,699.75          | \$97,885.33         | \$779,688.92          | \$877,574.25          | \$0.00              | \$877,574.25          |
| 702                      | 402          | \$849,145.35          | \$41,107.77         | \$783,123.77          | \$824,231.54          | \$0.00              | \$824,231.54          |
| 703                      | 1,433        | \$1,104,336.00        | \$104,062.32        | \$999,506.78          | \$1,103,569.10        | (\$2,300.70)        | \$1,101,268.40        |
| 704                      | 103          | \$246,173.20          | \$8,947.43          | \$232,491.67          | \$241,439.10          | \$0.00              | \$241,439.10          |
| 705                      | 55           | \$58,179.00           | \$3,215.71          | \$57,078.89           | \$60,294.60           | \$0.00              | \$60,294.60           |
| 706                      | 1            | \$483.66              | \$154.76            | \$1,779.88            | \$1,934.64            | \$0.00              | \$1,934.64            |
| <b>SUBTOTAL</b>          | <b>4,243</b> | <b>\$3,132,016.96</b> | <b>\$255,373.32</b> | <b>\$2,853,669.91</b> | <b>\$3,109,043.23</b> | <b>(\$2,300.70)</b> | <b>\$3,106,742.53</b> |
| <b>United Healthcare</b> |              |                       |                     |                       |                       |                     |                       |
| 707                      | 538          | \$948,455.30          | \$113,286.67        | \$760,519.27          | \$873,805.94          | (\$1,472.90)        | \$872,333.04          |
| 708                      | 450          | \$1,454,026.63        | \$145,276.70        | \$1,166,137.51        | \$1,311,414.21        | (\$3,100.27)        | \$1,308,313.94        |
| 709                      | 362          | \$1,352,878.40        | \$161,567.34        | \$1,125,137.66        | \$1,286,705.00        | \$7,352.60          | \$1,294,057.60        |
| <b>SUBTOTAL</b>          | <b>1,350</b> | <b>\$3,755,360.33</b> | <b>\$420,130.71</b> | <b>\$3,051,794.44</b> | <b>\$3,471,925.15</b> | <b>\$2,779.43</b>   | <b>\$3,474,704.58</b> |

## Medical and Dental Vision Insurance Premiums

### October 2025

| Carrier Codes                  | Member Count  | Premium Amount         | Member Amount         | County Subsidy Amount  | Total                  | Adjustments          | Total Paid             |
|--------------------------------|---------------|------------------------|-----------------------|------------------------|------------------------|----------------------|------------------------|
| <b>Local 1014 Firefighters</b> |               |                        |                       |                        |                        |                      |                        |
| 801                            | 83            | \$120,496.08           | \$4,732.71            | \$109,956.33           | \$114,689.04           | \$1,451.76           | \$116,140.80           |
| 802                            | 343           | \$897,847.09           | \$28,165.76           | \$869,681.33           | \$897,847.09           | \$0.00               | \$897,847.09           |
| 803                            | 424           | \$1,309,201.76         | \$46,439.73           | \$1,272,025.25         | \$1,318,464.98         | (\$3,087.74)         | \$1,315,377.24         |
| 804                            | 207           | \$300,514.32           | \$10,017.10           | \$287,593.70           | \$297,610.80           | \$0.00               | \$297,610.80           |
| 805                            | 243           | \$636,084.09           | \$14,344.61           | \$619,121.85           | \$633,466.46           | \$0.00               | \$633,466.46           |
| 806                            | 767           | \$2,007,722.21         | \$42,091.49           | \$1,965,630.72         | \$2,007,722.21         | (\$2,617.63)         | \$2,005,104.58         |
| 807                            | 67            | \$206,878.58           | \$3,581.79            | \$206,384.53           | \$209,966.32           | \$0.00               | \$209,966.32           |
| 808                            | 23            | \$71,018.02            | \$1,976.16            | \$69,041.86            | \$71,018.02            | \$0.00               | \$71,018.02            |
| 809                            | 18            | \$26,131.68            | \$2,438.94            | \$24,738.01            | \$27,176.95            | \$0.00               | \$27,176.95            |
| 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                            | 260           | \$377,457.60           | \$22,008.60           | \$356,900.76           | \$378,909.36           | (\$1,451.76)         | \$377,457.60           |
| 813                            | 2             | \$5,235.26             | \$0.00                | \$5,235.26             | \$5,235.26             | \$0.00               | \$5,235.26             |
| <b>SUBTOTAL</b>                | <b>2,453</b>  | <b>\$6,003,289.43</b>  | <b>\$181,726.42</b>   | <b>\$5,825,082.81</b>  | <b>\$6,006,809.23</b>  | <b>(\$5,705.37)</b>  | <b>\$6,001,103.86</b>  |
| <b>Kaiser - Washington</b>     |               |                        |                       |                        |                        |                      |                        |
| 393                            | 5             | \$10,062.65            | \$2,138.65            | \$7,924.00             | \$10,062.65            | \$0.00               | \$10,062.65            |
| 394                            | 21            | \$9,194.02             | \$1,078.20            | \$7,280.00             | \$8,358.20             | \$0.00               | \$8,358.20             |
| 395                            | 4             | \$15,005.04            | \$4,466.80            | \$14,289.50            | \$18,756.30            | \$0.00               | \$18,756.30            |
| 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             |
| <b>SUBTOTAL</b>                | <b>44</b>     | <b>\$48,508.83</b>     | <b>\$8,875.72</b>     | <b>\$42,548.55</b>     | <b>\$51,424.27</b>     | <b>\$0.00</b>        | <b>\$51,424.27</b>     |
| <b>Medical Plan Total</b>      | <b>57,790</b> | <b>\$68,694,340.64</b> | <b>\$4,452,571.40</b> | <b>\$63,341,765.77</b> | <b>\$67,794,337.17</b> | <b>(\$44,746.00)</b> | <b>\$67,749,591.17</b> |



## Medical and Dental Vision Insurance Premiums

### October 2025

| Carrier Codes                        | Member Count   | Premium Amount         | Member Amount         | County Subsidy Amount  | Total                  | Adjustments          | Total Paid             |
|--------------------------------------|----------------|------------------------|-----------------------|------------------------|------------------------|----------------------|------------------------|
| <b>Dental/Vision Plan</b>            |                |                        |                       |                        |                        |                      |                        |
| <b>CIGNA Indemnity Dental/Vision</b> |                |                        |                       |                        |                        |                      |                        |
| 501                                  | 27,316         | \$1,535,440.20         | \$152,003.53          | \$1,399,943.37         | \$1,551,946.90         | (\$2,245.91)         | \$1,549,700.99         |
| 502                                  | 25,047         | \$2,955,339.50         | \$217,864.65          | \$2,744,596.55         | \$2,962,461.20         | (\$2,264.20)         | \$2,960,197.00         |
| 503                                  | 9              | \$623.70               | \$19.40               | \$604.30               | \$623.70               | \$0.00               | \$623.70               |
| <b>SUBTOTAL</b>                      | <b>52,372</b>  | <b>\$4,491,403.40</b>  | <b>\$369,887.58</b>   | <b>\$4,145,144.22</b>  | <b>\$4,515,031.80</b>  | <b>(\$4,510.11)</b>  | <b>\$4,510,521.69</b>  |
| <b>CIGNA Dental HMO/Vision</b>       |                |                        |                       |                        |                        |                      |                        |
| 901                                  | 4,421          | \$206,111.80           | \$21,043.37           | \$188,240.07           | \$209,283.44           | \$46.20              | \$209,329.64           |
| 902                                  | 3,306          | \$316,607.65           | \$22,919.09           | \$295,596.37           | \$318,515.46           | (\$95.45)            | \$318,420.01           |
| 903                                  | 4              | \$188.84               | \$51.00               | \$279.47               | \$330.47               | \$0.00               | \$330.47               |
| <b>SUBTOTAL</b>                      | <b>7,731</b>   | <b>\$522,908.29</b>    | <b>\$44,013.46</b>    | <b>\$484,115.91</b>    | <b>\$528,129.37</b>    | <b>(\$49.25)</b>     | <b>\$528,080.12</b>    |
| <b>Dental/Vision Plan Total</b>      | <b>60,103</b>  | <b>\$5,014,311.69</b>  | <b>\$413,901.04</b>   | <b>\$4,629,260.13</b>  | <b>\$5,043,161.17</b>  | <b>(\$4,559.36)</b>  | <b>\$5,038,601.81</b>  |
| <b>GRAND TOTALS</b>                  | <b>117,893</b> | <b>\$73,708,652.33</b> | <b>\$4,866,472.44</b> | <b>\$67,971,025.90</b> | <b>\$72,837,498.34</b> | <b>(\$49,305.36)</b> | <b>\$72,788,192.98</b> |

| PREMIUMS*  | CARRIER<br>DEDUCTION<br>CODES | DEDUCTION CODE DEFINITIONS  |
|--|-------------------------------|---|
| <b><u>Anthem Blue Cross Prudent Buyer Plan</u></b> |                               |   |
| \$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  |
| <b><u>Anthem Blue Cross Plan I</u></b>             |                               |   |
| <b>\$1,584.80</b>                                  | 211                           | Retiree Only  |
| <b>\$2,857.90</b>                                  | 212                           | Retiree and Spouse/Domestic Partner   |
| <b>\$3,371.30</b>                                  | 213                           | Retiree, Spouse/Domestic Partner and Children   |
| <b>\$2,097.12</b>                                  | 214                           | Retiree and Children  |
| \$534.96   | 215                           | Survivor Children Only Rates  |
| <b><u>Anthem Blue Cross Plan II</u></b>            |                               |   |
| <b>\$1,584.80</b>                                  | 221                           | Retiree Only  |
| <b>\$2,857.90</b>                                  | 222                           | Retiree and Spouse/Domestic Partner   |
| <b>\$3,371.30</b>                                  | 223                           | Retiree, Spouse/Domestic Partner and Children   |
| <b>\$2,097.12</b>                                  | 224                           | Retiree and Children  |
| \$534.96   | 225                           | Survivor Children Only Rates  |
| <b><u>Anthem Blue Cross Plan III</u></b>           |                               |   |
| \$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.

| <b>PREMIUMS*</b>   | <b>CARRIER<br/>DEDUCTION<br/>CODES</b> | <b>DEDUCTION CODE DEFINITIONS</b>   |
|--|--|---|
| <b><u>CIGNA Network Model Plan</u></b>   |  |   |
| \$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  |
| <b><u>CIGNA Medicare Select Plus Rx (Available in the Phoenix, AZ area only)</u></b> |  |   |
| 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                     |
| <b><u>Kaiser</u></b>   |  |   |
| \$1,410.77   | 401                                    | Retiree Only ("Basic")  |
| N/A  | 402                                    | Retiree Only ("Supplement")   |
| \$291.66   | 403                                    | Retiree Only ("Senior Advantage")   |
| \$1,367.03   | 404                                    | Retiree Only ("Excess I")   |
| \$1,414.33   | 405                                    | Retiree Only - ("Excess II")  |
| N/A  | 406                                    | Retiree Only ("Excess III")   |
| \$2,813.54   | 411                                    | Retiree and Family (All family members are "Basic")                                   |
| N/A  | 412                                    | Retiree and Family (One family member is "Supplement"; others are "Basic")            |
| \$1,694.43   | 413                                    | Retiree and Family (One family member is "Senior Advantage"; others are "Basic")      |
| \$2,769.80   | 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")         |
| \$575.32   | 418                                    | Retiree and Family (Two or more family members are "Senior Advantage")                |
| \$1,650.69   | 419                                    | Retiree and Family (One family member is "Excess I"; others are "Senior Advantage")   |
| \$2,726.06   | 420                                    | Retiree and Family (Two or more family members are "Excess I")                        |
| N/A  | 421                                    | Survivor Children Only Rates  |
| \$2,817.10   | 422                                    | Retiree and Family (One family member is "Excess II"; others are "Basic")             |
| N/A  | 423                                    | Retiree and Family (One family member is "Excess III"; others are "Basic")            |

\*Benchmark premiums are bolded.

| CARRIER DEDUCTION CODES          |     | DEDUCTION CODE DEFINITIONS   |
|----------------------------------|-----|--|
| PREMIUMS*                        |     |  |
| <b><u>Kaiser (continued)</u></b> |     |  |
| 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")  |
| \$1,697.99                       | 426 | Retiree and Family (One family member is "Senior Advantage"; others are "Excess II")   |
| \$N/A                            | 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")   |
| <b><u>Kaiser Colorado</u></b>    |     |  |
| \$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")  |
| <b><u>Kaiser Georgia</u></b>     |     |  |
| \$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 Medicare Part B only)     |
| \$2,186.74                       | 445 | Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with 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.

| PREMIUMS*                                | CARRIER<br>DEDUCTION<br>CODES | DEDUCTION CODE DEFINITIONS  |
|--|-------------------------------|---|
| <b><u>Kaiser Georgia (continued)</u></b> |                               |   |
| \$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")                                      |
| <b><u>Kaiser Hawaii</u></b>              |                               |   |
| \$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)   |
| <b><u>Kaiser Oregon</u></b>              |                               |   |
| \$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.

| PREMIUMS*                               | CARRIER<br>DEDUCTION<br>CODES | DEDUCTION CODE DEFINITIONS  |
|---|-------------------------------|---|
| <b><u>Kaiser Oregon (continued)</u></b> |                               |   |
| \$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)            |
| <b><u>Kaiser Washington</u></b>         |                               |   |
| \$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.

| PREMIUMS* | CARRIER<br>DEDUCTION<br>CODES | DEDUCTION CODE DEFINITIONS |
|-----------|-------------------------------|----------------------------|
|-----------|-------------------------------|----------------------------|

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### **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.

| <b>PREMIUMS*</b>  | <b>CARRIER<br/>DEDUCTION<br/>CODES</b> | <b>DEDUCTION CODE DEFINITIONS</b>  |
|---|--|--|
| <b><u>SCAN Health Plan</u></b>  |  |  |
| \$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.)            |
| <b><u>United Healthcare Medicare Advantage (UHCMA)</u></b>  |  |  |
| (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   |
| <b><u>United Healthcare (UHC)</u></b>   |  |  |
| (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   |
| <b><u>Local 1014 Firefighters</u></b>   |  |  |
| \$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.



| PREMIUMS* | CARRIER<br>DEDUCTION<br>CODES | 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**

|                 |     |                              |
|-----------------|-----|------------------------------|
| <b>\$56.20</b>  | 501 | Retiree Only                 |
| <b>\$117.86</b> | 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.

# Los Angeles County Employees Retirement Association

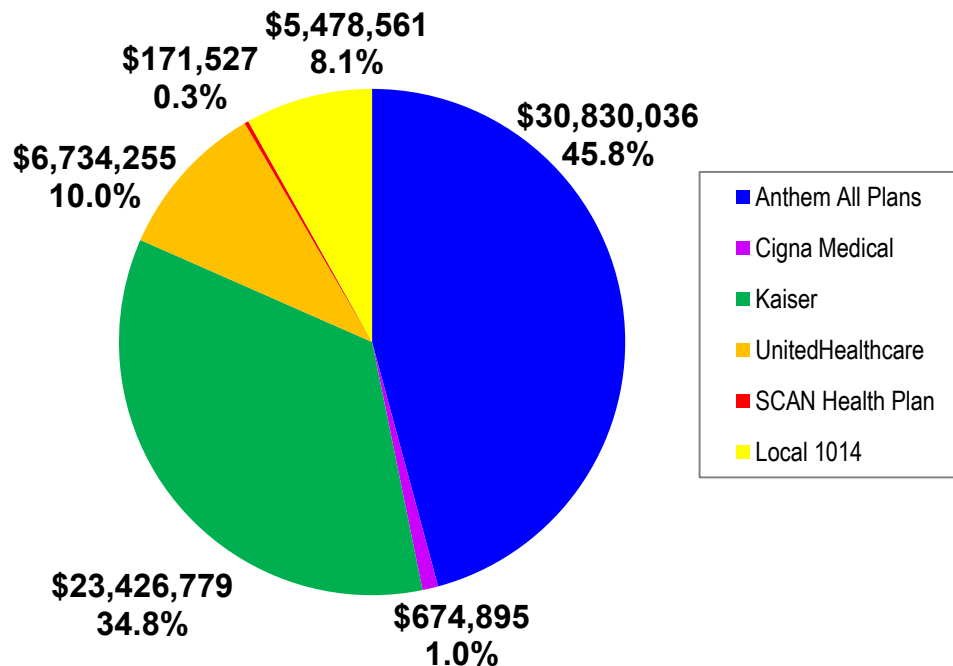
## Premium & Enrollment

### Coverage Month Ending August 2025

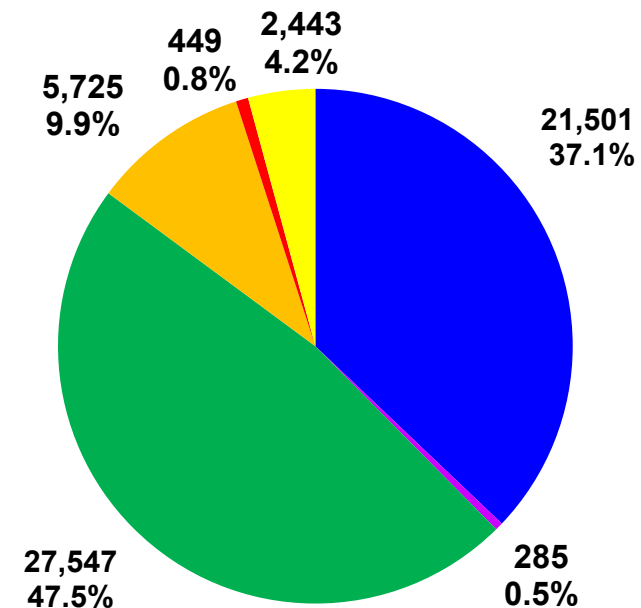
| Carrier / Plan          | Monthly Premium     | Percent of Total | Retirees      | Percent of Total |
|-------------------------|---------------------|------------------|---------------|------------------|
| Anthem All Plans        | \$30,830,036        | 45.8%            | 21,501        | 37.1%            |
| Cigna Medical           | \$674,895           | 1.0%             | 285           | 0.5%             |
| Kaiser                  | \$23,426,779        | 34.8%            | 27,547        | 47.5%            |
| UnitedHealthcare        | \$6,734,255         | 10.0%            | 5,725         | 9.9%             |
| SCAN Health Plan        | \$171,527           | 0.3%             | 449           | 0.8%             |
| Local 1014              | \$5,478,561         | 8.1%             | 2,443         | 4.2%             |
| <b>Combined Medical</b> | <b>\$67,316,052</b> | <b>100.0%</b>    | <b>57,950</b> | <b>100.0%</b>    |

|  |                    |               |
|--|--------------------|---------------|
| <b>Cigna Dental &amp; Vision<br/>(PPO and HMO)</b> | <b>\$5,017,288</b> | <b>59,946</b> |
|--|--------------------|---------------|

### Monthly Premium



### Retirees

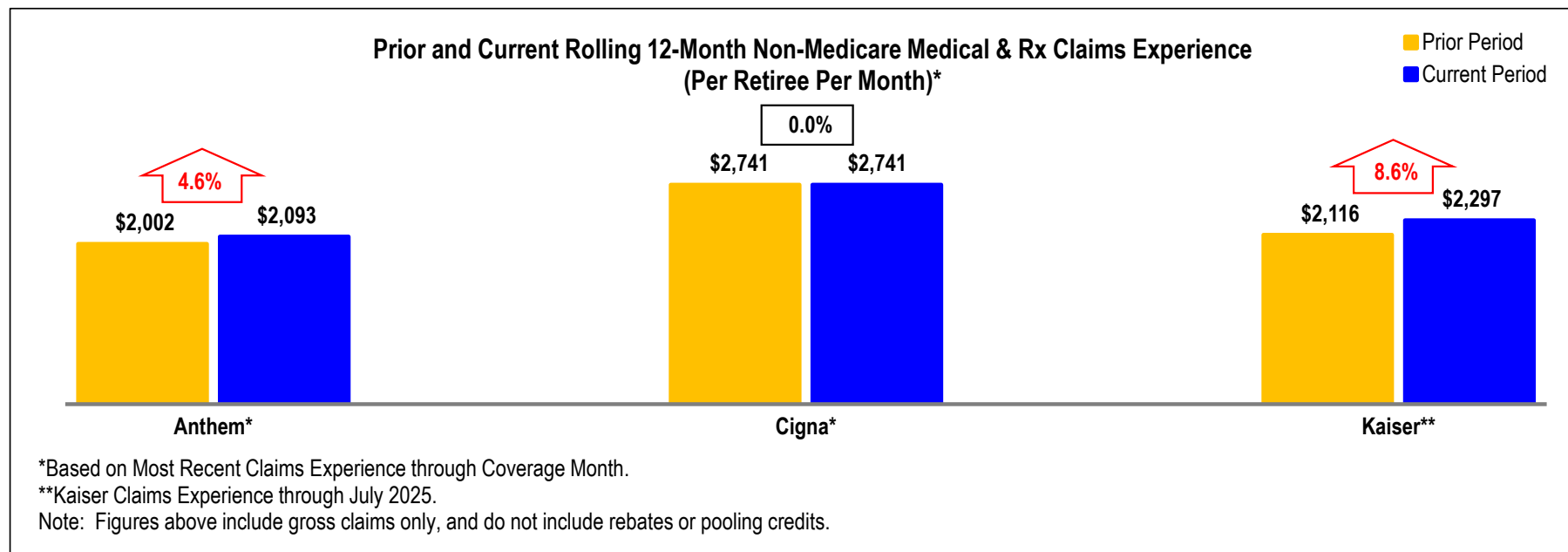
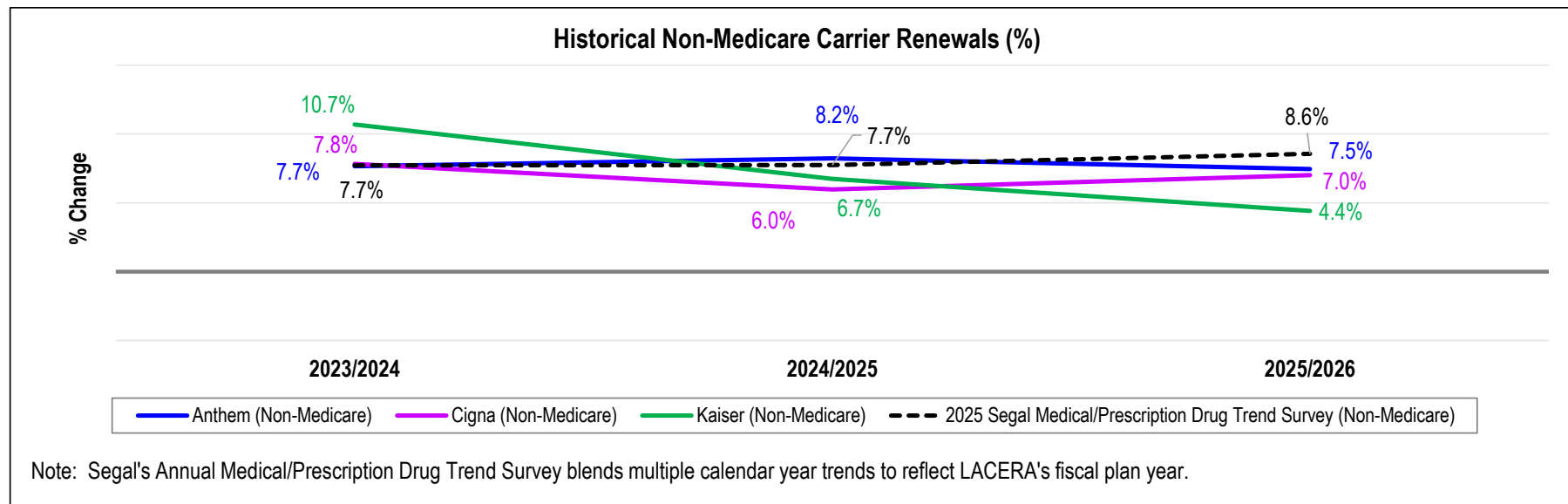


Note: Premiums include LACERA's Administrative Fee of \$8.00 per member, per plan, per month.

# Los Angeles County Employees Retirement Association

## Claims Experience by Carrier

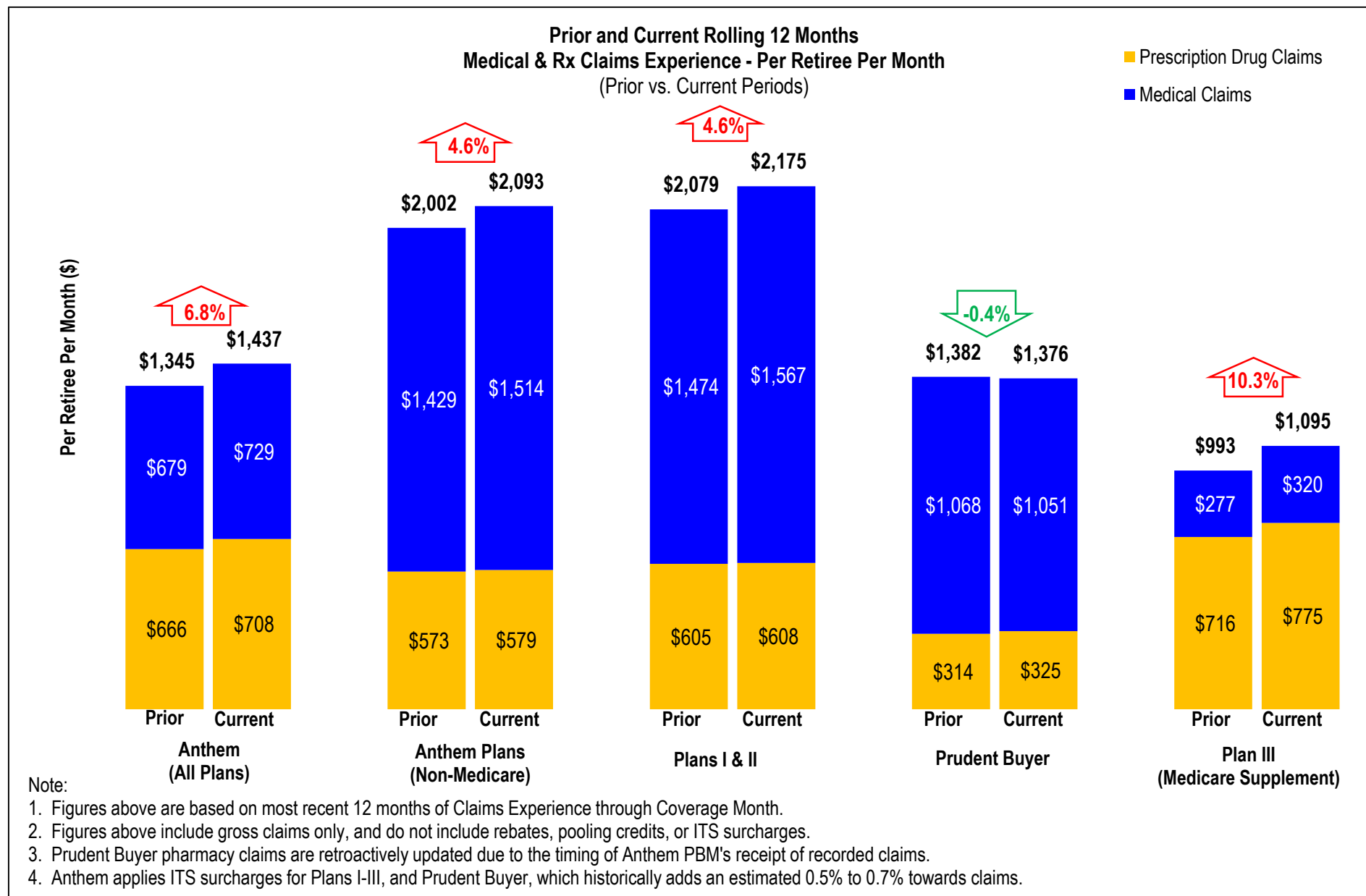
Coverage Month Ending August 2025



# Los Angeles County Employees Retirement Association

Anthem Claims Experience By Plan

Coverage Month Ending August 2025



# Los Angeles County Employees Retirement Association

## Kaiser Utilization

### Coverage Month Ending August 2025

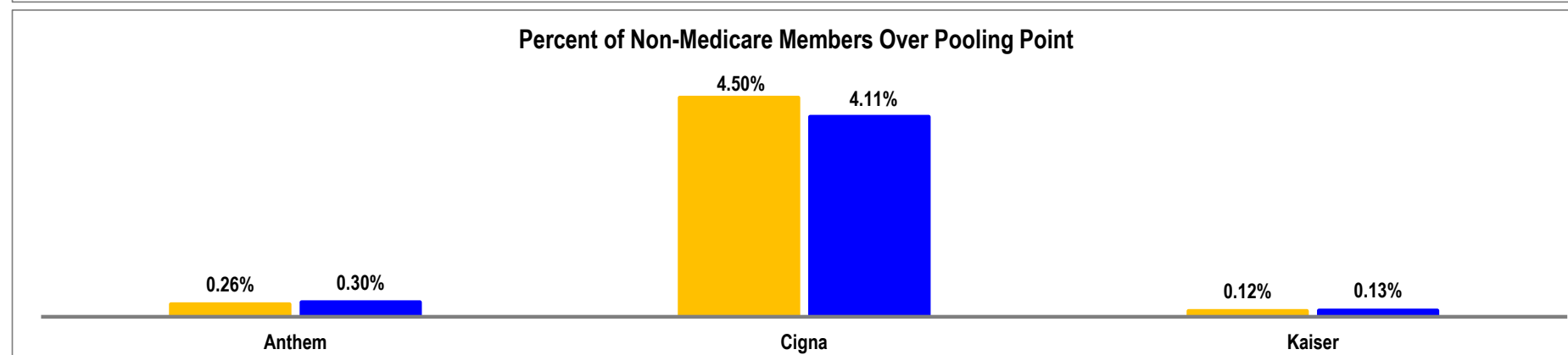
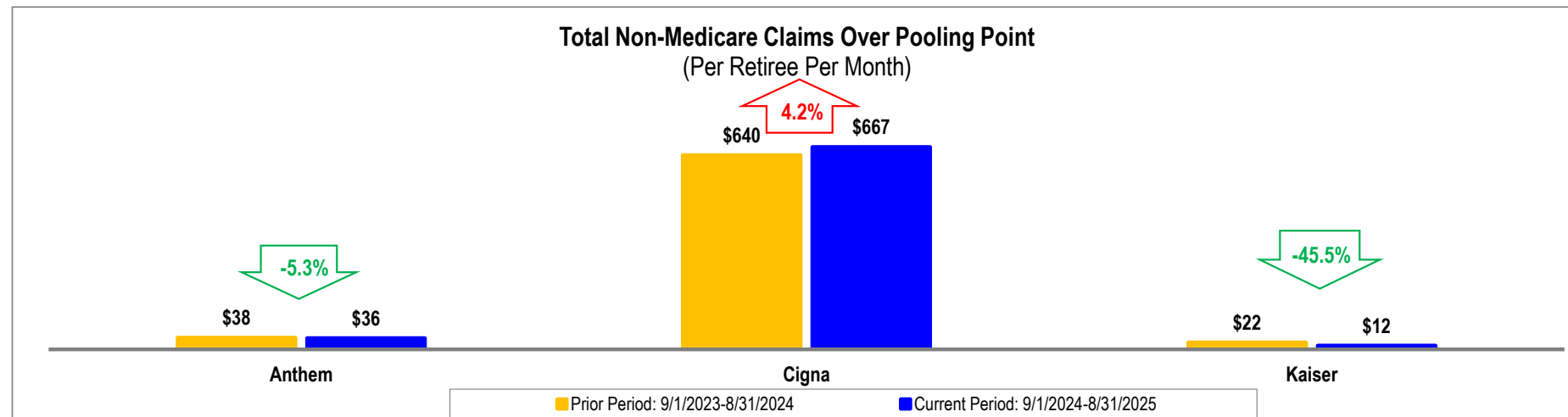
- Kaiser insures approximately 26,500 LACERA retirees with the majority enrolled in Medicare Advantage plans.
- Kaiser's Periodic Utilization Report (PUR) monitors utilization patterns of LACERA's non-Medicare population in California.

| Category                                  | Current Period<br>8/1/2024 - 7/31/2025 | Prior Period<br>8/1/2023 - 7/31/2024 | Change       |
|---|--|--------------------------------------|--------------|
| <b>Average Contract Size</b>              | <b>1.82</b>                            | <b>1.82</b>                          | <b>0.00%</b> |
| <b>Average Members</b>                    | <b>12,649</b>                          | <b>12,554</b>                        | <b>0.76%</b> |
| Inpatient Claims Per Member Per Month     | \$317.55                               | \$320.44                             | -0.90%       |
| Outpatient Claims Per Member Per Month    | \$555.57                               | \$495.09                             | 12.22%       |
| Pharmacy Per Member Per Month             | \$173.50                               | \$157.19                             | 10.38%       |
| Other Per Member Per Month                | \$215.63                               | \$192.92                             | 11.77%       |
| <b>Total Claims Per Member Per Month</b>  | <b>\$1,262.25</b>                      | <b>\$1,165.64</b>                    | <b>8.29%</b> |
| <b>Total Paid Claims</b>                  | <b>\$191,598,683</b>                   | <b>\$175,596,218</b>                 | <b>9.11%</b> |
| Large Claims over \$600,000 Pooling Point |  |                                      |              |
| Number of Claims over Pooling Point       | 9                                      | 8                                    |              |
| Amount over Pooling Point                 | \$987,252                              | \$1,840,204                          | -46.35%      |
| % of Total Paid Claims                    | <b>0.52%</b>                           | <b>1.05%</b>                         |              |
| Inpatient Days / 1000                     | 707.9                                  | 740.3                                | -4.38%       |
| Inpatient Admits / 1000                   | 96.4                                   | 93.9                                 | 2.66%        |
| Outpatient Visits / 1000                  | 16,794.0                               | 16,090.4                             | 4.37%        |
| Pharmacy Scripts Per Member Per Year      | 14.3                                   | 13.6                                 | 5.15%        |

# Los Angeles County Employees Retirement Association

High Cost Claimants (Anthem, Cigna, & Kaiser)

Coverage Month Ending August 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 August through July.

## 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.

# Los Angeles County Employees Retirement Association

## Anthem Lifetime Max Accumulation Status By Plan

### Coverage Month Ending August 2025

| Prior Calendar Year: December 2023 <sup>1,2</sup> |              |               |            | Current Calendar Year: December 2024 <sup>1,3</sup> |               |            |
|---|--------------|---------------|------------|---|---------------|------------|
| Lifetime Claim Amount <sup>4</sup>                | 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         |
| \$600K-\$699K                                     | 53           | 2             | 55         | 61  | 0             | 61         |
| \$500K-\$599K                                     | 82           | 4             | 86         | 78  | 8             | 86         |
| <b>Total</b>                                      | <b>210</b>   | <b>12</b>     | <b>222</b> | <b>199</b>  | <b>12</b>     | <b>211</b> |

| Prior Month: June 2025 <sup>5,7</sup> |              |               |            | Most Recent Month: July 2025 <sup>6,7</sup> |               |            |
|---------------------------------------|--------------|---------------|------------|---|---------------|------------|
| Lifetime Claim Amount <sup>4</sup>    | 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         |
| \$600K-\$699K                         | 49           | 2             | 51         | 44  | 1             | 45         |
| \$500K-\$599K                         | 82           | 8             | 90         | 84  | 8             | 92         |
| <b>Total</b>                          | <b>183</b>   | <b>13</b>     | <b>196</b> | <b>182</b>                                  | <b>13</b>     | <b>195</b> |

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.

<sup>1</sup> Includes two years of historical data.

<sup>2</sup> Based on data provided by Anthem on September 17, 2024.

<sup>3</sup> Based on data provided by Anthem on January 22, 2025.

<sup>4</sup> Members identified by Anthem as terminated were excluded from the counts above.

<sup>5</sup> Based on data provided by Anthem on July 17, 2025.

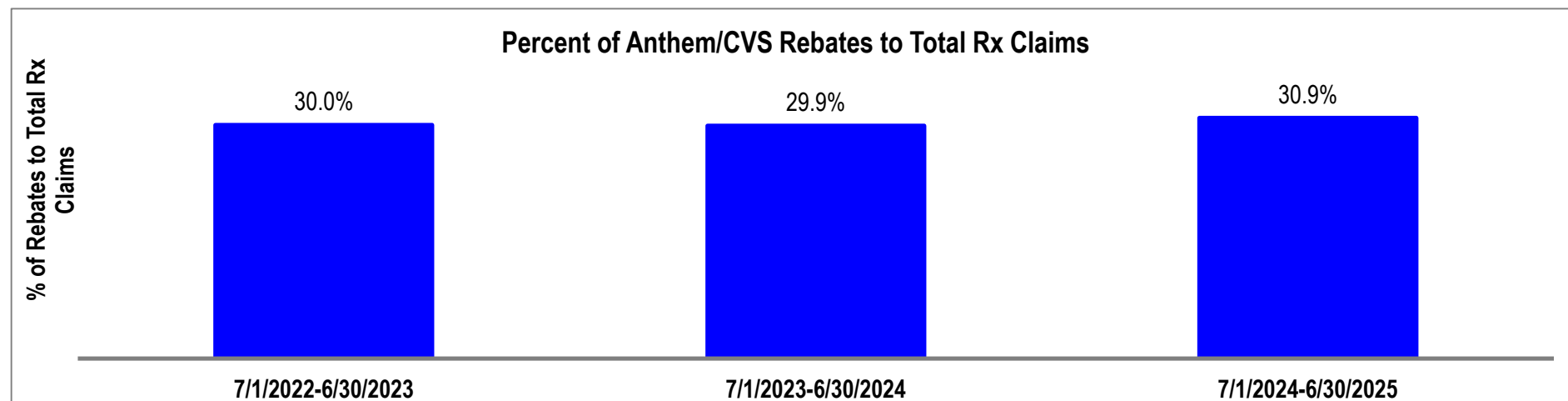
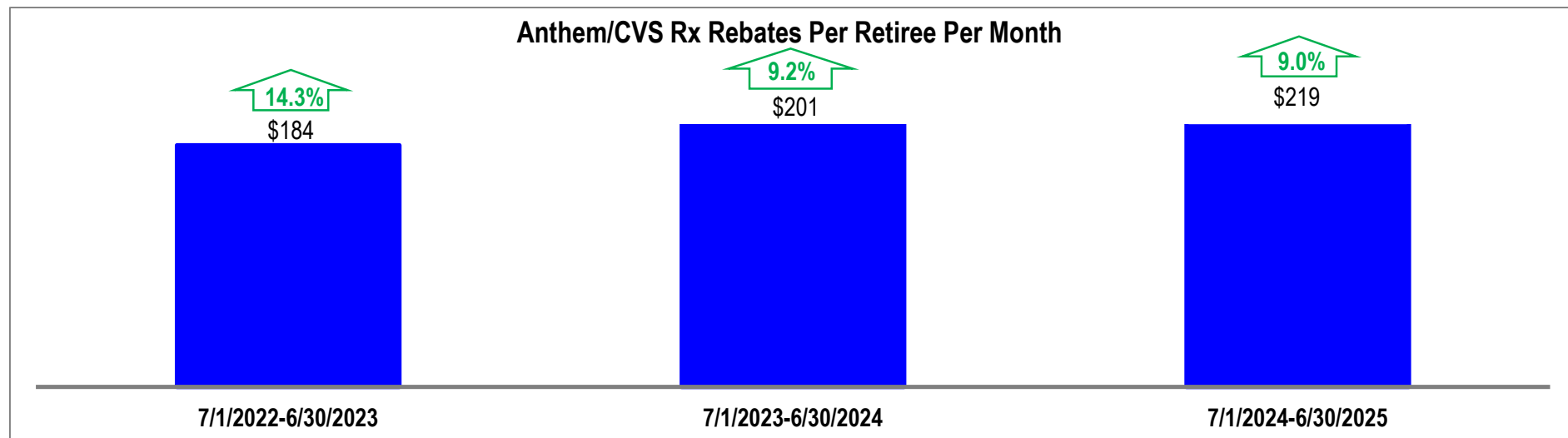
<sup>6</sup> Based on data provided by Anthem on August 19, 2025.

<sup>7</sup> Includes two months of historical data.

# Los Angeles County Employees Retirement Association

## Prescription Drug Rebates (Anthem)

Coverage Month Ending August 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:**

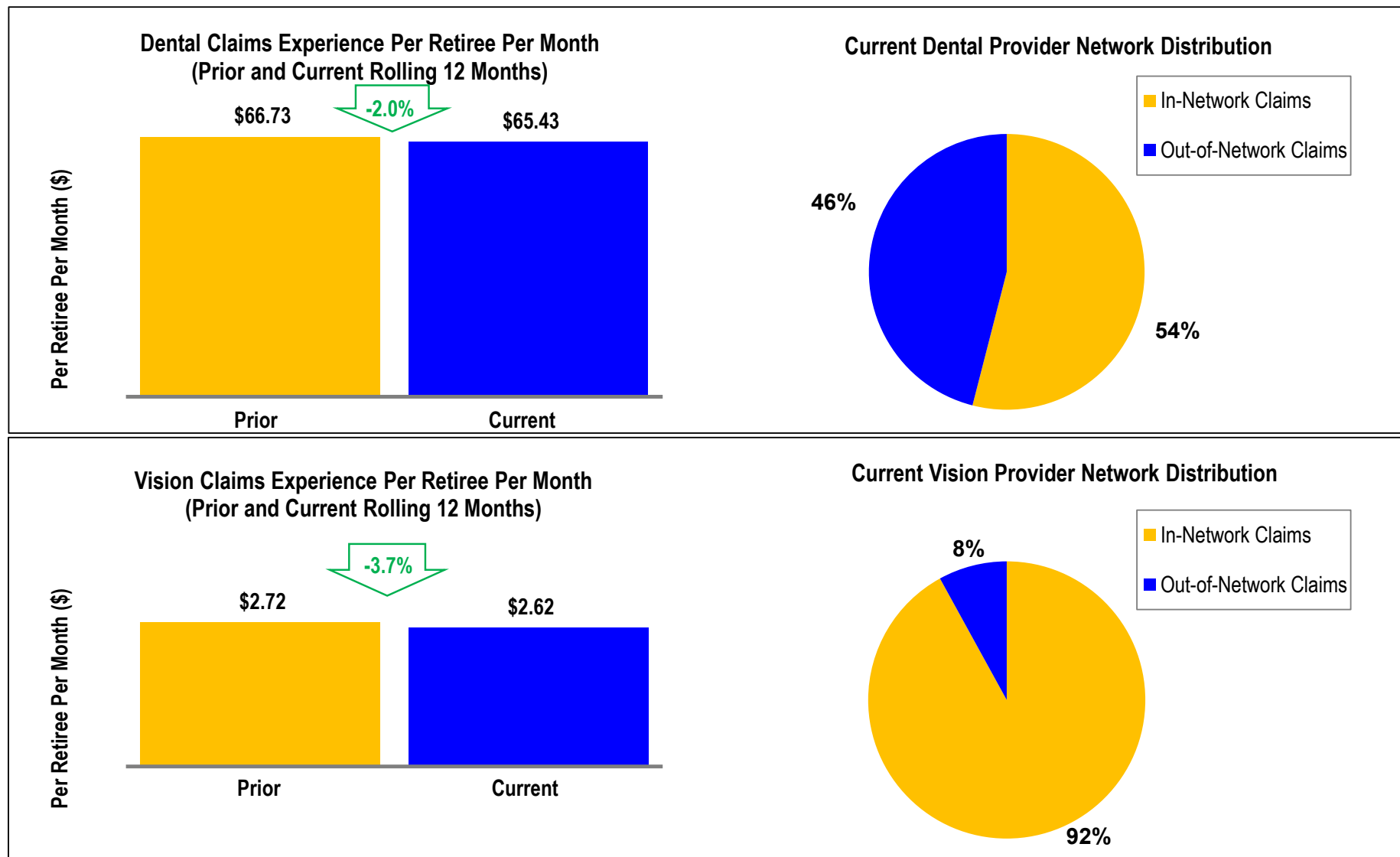
1. Prescription Claims and Rebates Data were provided by CVS.
2. Anthem Prudent Buyer prescription drugs are provided by CarelonRx and are not included in the charts above.



# Los Angeles County Employees Retirement Association

Cigna Dental & Vision Claims Experience

Coverage Month Ending August 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.

# HIPAA Privacy Notice Updates to Consider

Plan sponsors that amended their HIPAA-mandated Notice of Privacy Practices to include information about enhanced privacy protections for reproductive healthcare and substance use disorders (SUD) under a Biden-era final rule should remove the reproductive healthcare updates while making sure SUD-related updates are made before the 2026 deadline.



Here's why: The current administration had until August 18, 2025 to appeal a District Court ruling that invalidated the final rule but did not.

## Background on the reproductive healthcare guidance and the District Court decision that rescinded it

The [final rule](#) on reproductive healthcare, which became effective December 23, 2024, prohibited covered entities from disclosing protected health information (PHI) related to lawful reproductive healthcare in certain situations. Specifically, it restricted covered entities (e.g., health plans, healthcare clearinghouses or healthcare providers) and business associates from using or disclosing an individual's PHI for the purpose of conducting a criminal, civil or administrative investigation into or to impose criminal, civil or administrative liability on any person for the "mere act of seeking, obtaining, providing or facilitating lawful reproductive healthcare."

The final rule also required covered entities to obtain a signed written attestation from the person requesting reproductive health PHI that the use or disclosure is not for a prohibited purpose.

In addition to the amendments related to reproductive health, the final rule required covered entities to revise their Notices of Privacy Practices by February 16, 2026, to address new privacy protections under the Part 2 Rule for the Confidentiality of Substance Use Disorder Patient Records, published on February 16, 2024. [For more information about the final rule, see our May 16, 2024, insight.](#)

## The District Court ruling

On June 18, 2025, in *Purl v. Department of Health and Human Services*, the [U.S. District Court N.D. Texas](#) vacated the final rule. The court ruled that the final rule's protections for reproductive healthcare exceeded the statutory authority of the Department of Health and Human Services (HHS). The court struck down nationwide the final rule's protections for PHI related to reproductive healthcare.

# Final rule on PHI related to substance use disorders

The court left intact the final rule's new HIPAA privacy notice requirements related to substance use disorder patient records, which will take effect on February 16, 2026.

On August 26, 2025, the Secretary of HHS [delegated authority](#) to the Office for Civil Rights to administer and enforce the final rule on the confidentiality of substance use disorder patients' records.

## Implications for plan sponsors

Covered entities, including group health plans, must continue to comply with the HIPAA privacy and security requirements that were in place before the 2024 final rule took effect. However, any updates to policies and procedures that specifically address the final rule on reproductive healthcare should not be followed, particularly in response to law enforcement activity.

Plan sponsors that amended their Notice of Privacy Practices and HIPAA policies and procedures to include the special rules on reproductive healthcare should determine, in consultation with legal counsel, next steps for removing those rules and communicating the changes to plan participants. Plan sponsors that amended their Notice of Privacy Practices to include both information on the reproductive healthcare rule and the new substance use disorder notice, should delete the reproductive healthcare information and retain the substance use disorder information.

If the Notice of Privacy Practices has not yet been updated to include the additional protections and consent requirements for records pertaining to substance use disorder services, it must be updated no later than February 16, 2026.

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