IN PERSON & VIRTUAL BOARD MEETING

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



TO VIEW VIA WEB



TO PROVIDE PUBLIC COMMENT

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

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

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

AGENDA

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

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

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

8:30 A.M., WEDNESDAY, NOVEMBER 5, 2025

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

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

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

COMMITTEE TRUSTEES:

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

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

III. APPROVAL OF MINUTES

A. Approval of the Minutes of the Regular Meeting of October 1, 2025

IV. PUBLIC COMMENT

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

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

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

V. REPORTS

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

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

C. LACERA Claims Experience Michael Szeto, Segal Consulting

(Presentation)

D. Federal Legislation

Stephen Murphy, Segal Consulting (For Discussion Purposes)

VI. ITEMS FOR STAFF REVIEW

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

VII. ITEMS FOR FUTURE AGENDAS

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

- VIII. GOOD OF THE ORDER
 (For Information Purposes Only)
- IX. ADJOURNMENT

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

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

Requests for reasonable modification or accommodation of the telephone public access and Public Comments procedures stated in this agenda from individuals with disabilities, consistent with the Americans with Disabilities Act of 1990, may call the Board Offices at (626) 564-6000, Ext. 4401/4402 from 8:30 a.m. to 5:00 p.m. Monday through Friday or email PublicComment@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. - 9:00 A.M., WEDNESDAY, OCTOBER 1, 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: Les Robbins, Chair

Aleen Langton, Trustee

Wayne Moore, Trustee

Shawn R. Kehoe, Alternate Trustee

ABSENT: : Ronald Okum, Vice 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

JJ Popowich, Assistant Executive Officer

Laura Guglielmo, Assistant Executive Officer

October 1, 2025 Page 2

STAFF, ADVISORS AND PARTICIPANTS (Continued)

Steven P. Rice, Chief Counsel

Barry W. Lew, Legislative Affairs Officer

Segal Consulting Stephen Murphy, Sr. Vice President Michael Szeto, Sr. Actuarial Associate

I. CALL TO ORDER

This meeting was called to order by Chair Robbins at 8:30 a.m. In the absence of Trustee Okum, the 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 September 3, 2025

Trustee Kehoe made a motion, Trustee Moore seconded, to approve the minutes of the regular meeting of September 3, 2025. The motion passed by the following roll call vote:

Yes: Langton, Moore, Kehoe

No: None

Abstain: Robbins

Absent: Okum

IV. PUBLIC COMMENT

There were no requests from the public to speak.

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)

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

Yes: Langton, Moore, Kehoe, Robbins

No: None

Absent: Okum

VI. REPORTS

A. Engagement Report for September 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 September 2025

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

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

VI. REPORTS (Continued)

C. LACERA Claims Experience

Michael Szeto, Segal Consulting (Presentation)

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

D. Federal Legislation

Stephen Murphy, Segal Consulting (For Information Only)

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

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 agendized item at a future meeting.)

There was nothing to report.

VIII. ITEMS FOR FUTURE AGENDAS

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

Trustee Robbins requested that Segal prepare a comprehensive presentation addressing current developments in Washington, DC, with particular focus on the anticipated impact of prescription drug costs for retirees and active members. The presentation should also include a discussion of potential increases to Medicare Part B and Part D.

IX. GOOD OF THE ORDER

(For Information Purposes Only)

There was nothing to report.

X. ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at 9:00 a.m.



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

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

S&P Global Ratings: US Local Government Pension Funding Improved in 2024

A recent report by S&P Global Ratings indicates that the aggregate median funded ratio for US local government (LG) pensions increased to 80% in fiscal 2024 compared to 78% in fiscal 2022. "Local governments" include municipalities, school districts, and counties. Municipalities saw a bigger jump than counties and school districts.

The pensions costs of municipalities and school districts generally have a greater impact on their credit ratings, whereas counties generally have lower pension costs with less impact on their ratings.

Although recent markets returns have helped increase the funded status, LGs have also generally increased their contributions in 2024 and also changes to their benefit structures, which support long-term sustainability.

The report attributes the decline in costs and improved funding levels to these factors:

- Positive investment returns, generally 16%-17% for fiscal 2024 compared to 12% in fiscal 2023. The typical assumed return rate is 7%.
- Over the last 15 years, plans have implemented lower benefit tiers, and reduced costs are becoming more apparent as the membership in these new tiers grows.
- Management's commitment to fund pensions due to lessons learned from past underfunding.

(Source)

Employers Committed to Their DB Benefits

Despite a broader shift toward defined contribution (DC) retirement plans, many employers—especially in the public sector—remain committed to defined benefit (DB) pensions. This commitment is driven by factors such as employee demand, union influence, and the strategic advantages DB plans offer in recruitment, retention, and workforce stability. Surveys show growing support for DB plans, with 50% of CFOs in 2025 reporting no plans to terminate their DB plans, up from 28% in 2021. Among sponsors of DB plans in a MetLife survey, the most common reasons for providing a DB plan were attracting and retaining talent (57%), promoting long-term employment (47%), and providing financial security (43%).

DB plans are valued for providing predictable lifetime income, which appeals to both older and younger employees amid growing concerns about self-funded retirement. Private sector DB plans, which currently have funding levels at or near surplus, may believe they Engagement Report (October 2025) Insurance, Benefits and Legislative Committee Page 2 of 2

provide a better benefit than DC plans. At the same time, both government and corporate plans seek to lower expenses, which can include outsourcing everything from investment decisions to payments.

Communicating the value of DB plans remains a challenge, especially to younger workers more familiar with DC plans. For example, a fluctuating account balance in a DC plan is easier to understand than a lifetime annuity benefit payable in the future, which is more difficult to express in today's dollars for participants to understand. (Source)

Ohio Bill Would End "Pension Pickup" For Public Employees

Ohio House Bill 473 aims to prohibit public employers from covering any portion of employees' pension contributions in future contracts. This practice, often used to attract top administrators, adds hidden compensation that critics say lacks transparency and fairness for taxpayers. The bill's sponsor, Rep. Dave Thomas, argues it inflates pay without public awareness and contributes to bidding wars between districts. Unions and education leaders oppose the bill, saying pension pickups help offset lower pay and demanding workloads, and that local boards should retain control over compensation decisions. They also warn HB 473 is part of a broader effort to weaken public-sector bargaining rights, echoing past legislation like Senate Bill 5, which was a bill that limited collective bargaining and banned pension pickups but was eventually struck down by voters. (Source)

Ohio Legislation: Tracking Public Dollars

Ohio Rep. Tom Young (R-Washington Twp.) has introduced House Bill 413, which would mandate full financial transparency from all 6,000 public entities in Ohio—including state agencies, cities, counties, and public libraries. The bill requires a public-facing database detailing how every public dollar is raised and spent, including tax revenues, grants, salaries, leases, and more. Young emphasizes that taxpayers deserve easy access to this information without needing to file public records requests.

The bill, co-sponsored by Rep. Bob Peterson (R-Sabina), builds on the existing voluntary Ohio Checkbook platform but would make participation mandatory. It also includes Ohio's public retirement systems in its scope. The proposed system would be developed with a \$5 million startup investment and maintained by the Ohio Treasurer's Office. Young is seeking a tech partner to help implement the large-scale database and is open to refining the bill during the committee process. He expects bipartisan support, arguing that the reporting burden should be minimal since most entities already track this data. (Source)

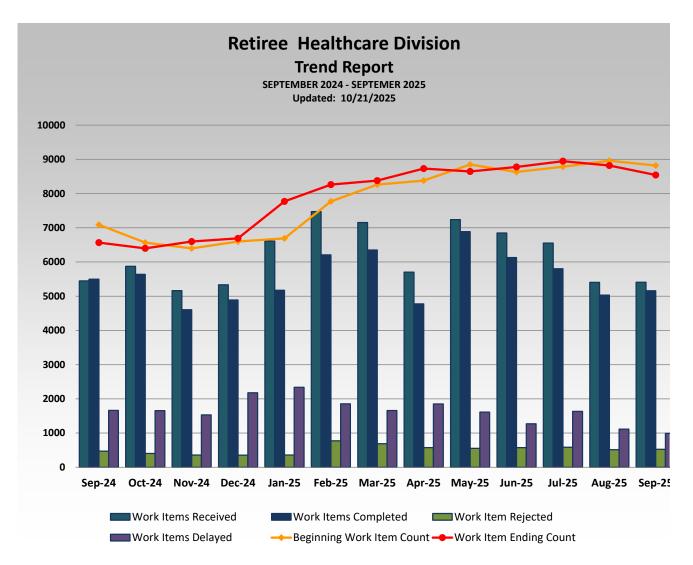
INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE RETIREE HEALTHCARE BENEFITS PROGRAM STAFF ACTIVITIES REPORT OCTOBER 2025 FOR INFORMATION ONLY

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

Staff have successfully completed and submitted the RDS subsidy payment request to CMS/RDS for the 2023/2024 Plan Year. Below is an updated breakdown of all the subsidy payments received:

MEDICAL PLAN	SUBSIDY AMOUNT RECEIVED
Anthem Blue Cross	\$8,370,220.69
Cigna Medical	\$208,745.65
Kaiser Permanente	\$356,288.53
LACFF Local 1014	\$962,613.90

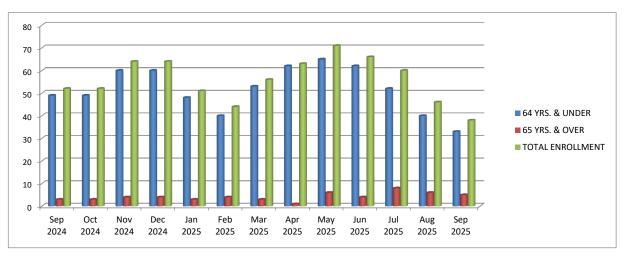
As a background, the Retiree Drug Subsidy (RDS) Program was enacted in December 2003 to reimburse Plan Sponsors for a portion of their Qualifying Covered Retirees' costs for prescription drugs otherwise covered by Medicare Part D that are attributable to drug costs between the applicable Cost Threshold 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.



	Beginning Work Item Count	Work Items Received	Work Items Completed	Work Item Rejected	Work Items Delayed	Work Item Ending Count
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
Sep-25	8821	5408	5161	524	992	8544

Retirees Monthly Age Breakdown SEPTEMBER 2024 - SEPTEMBER 2025

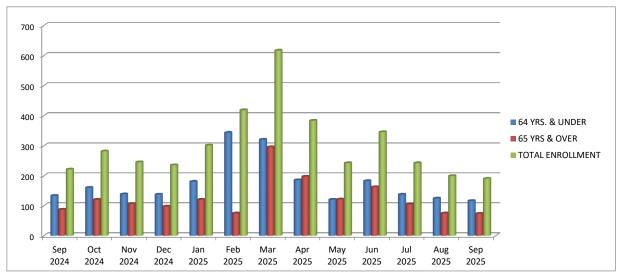
Disability Retirement								
MONTH	64 YRS. & UNDER	65 YRS. & OVER	TOTAL ENROLLMENT					
Sep 2024	49	3	52					
Oct 2024	49	3	52					
Nov 2024	60	4	64					
Dec 2024	60	4	64					
Jan 2025	48	3	51					
Feb 2025	40	4	44					
Mar 2025	53	3	56					
Apr 2025	62	1	63					
May 2025	65	6	71					
Jun 2025	62	4	66					
Jul 2025	52	8	60					
Aug 2025	40	6	46					
Sep 2025	33	5	38					



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

Retirees Monthly Age Breakdown SEPTEMBER 2024 - SEPTEMBER 2025

Service Retirement								
MONTH	64 YRS. & UNDER	65 YRS & OVER	TOTAL ENROLLMENT					
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					
Sep 2025	117	74	191					



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

MEDICARE NO LOCAL 1014 - 103125

		PAY PERIOD	10/31/2025	
Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
ANTHEM BC III				
240	7896	\$1,348,210.70	0	\$0.00
241	129	\$22,208.30	0	\$0.00
242	1020	\$177,784.20	0	\$0.00
243	4787	\$1,676,011.16	0	\$0.00
244	13	\$2,158.80	0	\$0.00
245	63	\$11,867.90	0	\$0.00
246	15	\$2,669.10	0	\$0.00
247	180	\$33,094.40	0	\$0.00
248	14	\$4,418.40	0	\$0.00
249	91	\$33,124.60	0	\$0.00
250	17	\$5,809.90	0	\$0.00
Plan Total:	14,225	\$3,317,357.46	0	\$0.00
i iaii i otai.	14,223	ψ3,317,337.40	U	Ψ0.00
KAISER SR. ADV	ANTAGE			
394	21	\$3,613.70	0	\$0.00
397	2	\$329.60	0	\$0.00
398	12	\$4,440.00	0	\$0.00
403	12440	\$2,094,365.68	0	\$0.00
413	1552	\$263,109.20	0	\$0.00
418	6491	\$2,256,912.27	1	\$51.50
419	210	\$33,451.10	0	\$0.00
426	254	\$43,225.80	0	\$0.00
445	2	\$370.00	0	\$0.00
451	38	\$6,514.50	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	88	\$15,015.40	0	\$0.00
465	3	\$555.00	0	\$0.00
466	29	\$10,130.10	0	\$0.00
472	28	\$4,903.20	0	\$0.00
476	4	\$690.50	0	\$0.00
478	14	\$5,074.20	0	\$0.00
479	1	\$144.60	0	\$0.00
482	80	\$13,124.60	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
Plan Total:	21,331	\$4,775,640.95	1	\$51.50

MEDICARE NO LOCAL 1014 - 103125

		IAIILMOD	10/31/2023	
Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	284	\$49,141.70	0	\$0.00
613	102	\$34,112.10	0	\$0.00
620	29	\$4,868.10	0	\$0.00
621	13	\$4,729.20	0	\$0.00
622	22	\$4,067.00	0	\$0.00
623	7	\$3,169.80	0	\$0.00
Plan Total:	457	\$100,087.90	0	0
UNITED HEALTH	CARE GROUP ME	DICARE ADV. HMC)	
701	2262	\$393,650.50	0	\$0.00
702	400	\$67,336.20	0	\$0.00
703	1454	\$515,036.50	0	\$0.00
704	105	\$19,367.70	0	\$0.00
705	56	\$19,662.30	0	\$0.00
Plan Total:	4,277	\$1,015,053.20	0	\$0.00
Grand Total:	40,290	\$9,208,139.51	1	\$51.50

MEDICARE - 103125

	PAY PERIOD 10/31/2025								
Deduction Code	No. of Mambars	Reimbursement	No. of	Penalty					
Deduction Code No. of Members		Amount	Penalties	Amount					
ANTHEM BC III									
240	7896	\$1,348,210.70	0	\$0.00					
241	129	\$22,208.30	0	\$0.00					
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244	13	\$2,158.80	0	\$0.00					
245	63	\$11,867.90	0	\$0.00					
246	15	\$2,669.10	0	\$0.00					
247	180	\$33,094.40	0	\$0.00					
248	14	\$4,418.40	0	\$0.00					
249	91	\$33,124.60	0	\$0.00					
250	17	\$5,809.90	0	\$0.00					
Plan Total:	14,225	\$3,317,357.46	0	\$0.00					
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459	2	\$740.00	0	\$0.00					
462	88	\$15,015.40	0	\$0.00					
465	3	\$555.00	0	\$0.00					
466	29	\$10,130.10	0	\$0.00					
472	28	\$4,903.20	0	\$0.00					
476	4	\$690.50	0	\$0.00					
478	14	\$5,074.20	0	\$0.00					
479	1	\$144.60	0	\$0.00					
482	80	\$13,124.60	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					
Plan Total:	21,331	\$4,775,640.95	1	\$51.50					

MEDICARE - 103125

	PAT PERIOD 10/31/2025								
Deduction Code	No. of Members	Reimbursement Amount	No. of	Penalty					
			Penalties	Amount					
SCAN									
611	284	\$49,141.70	0	\$0.00					
613	102	\$34,112.10	0	\$0.00					
620	29	\$4,868.10	0	\$0.00					
621	13	\$4,729.20	0	\$0.00					
622	22	\$4,067.00	0	\$0.00					
623	7	\$3,169.80	0	\$0.00					
Plan Total:	457	100,088	0	\$0.00					
UNITED HEALTH	CARE GROUP ME	DICARE ADV. HMC)						
701	2262	\$393,650.50	0	\$0.00					
702	400	\$67,336.20	0	\$0.00					
703	1454	\$515,036.50	0	\$0.00					
704	105	\$19,367.70	0	\$0.00					
705	56	\$19,662.30	0	\$0.00					
Plan Total:	4,277	\$1,015,053.20	0	\$0.00					
LOCAL 1014									
804	205	\$49,873.50	0	\$0.00					
805	242	\$52,020.80	0	\$0.00					
806	771	\$312,200.70	0	\$0.00					
807	65	\$14,022.60	0	\$0.00					
808	25	\$10,433.80	0	\$0.00					
812	262	\$54,204.00	0	\$0.00					
813	2	\$370.00	0	\$0.00					
Plan Total:	1,572	\$493,125.40	0	\$0.00					
Grand Total:	41,862	\$9,701,264.91	1	\$51.50					

Carrier Codes	Membe Count		Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
<u>ledical Plan</u>							
Anthem Blue Cross	Prudent Buy	er Plan					
201	405	\$499,135.42	\$67,291.88	\$418,419.36	\$485,711.24	(\$4,778.06)	\$480,933.18
202	208	\$504,512.40	\$41,610.31	\$446,085.01	\$487,695.32	\$0.00	\$487,695.32
203	80	\$216,917.60	\$34,110.27	\$188,230.27	\$222,340.54	\$2,711.47	\$225,052.01
204	25	\$39,223.00	\$9,601.77	\$29,621.23	\$39,223.00	\$4,706.76	\$43,929.76
SUBTOTAL	718	\$1,259,788.42	\$152,614.23	\$1,082,355.87	\$1,234,970.10	\$2,640.17	\$1,237,610.27
Anthem Blue Cross I							
211	510	\$813,002.40	\$50,143.08	\$751,765.72	\$801,908.80	\$1,584.80	\$803,493.60
212	206	\$591,585.30	\$29,550.70	\$550,603.00	\$580,153.70	\$0.00	\$580,153.70
213	80	\$269,704.00	\$25,487.03	\$254,330.87	\$279,817.90	\$0.00	\$279,817.90
214	26	\$56,622.24	\$3,103.72	\$51,421.40	\$54,525.12	\$0.00	\$54,525.12
215	2	\$1,069.92	\$171.19	\$898.73	\$1,069.92	\$0.00	\$1,069.92
SUBTOTAL	824	\$1,731,983.86	\$108,455.72	\$1,609,019.72	\$1,717,475.44	\$1,584.80	\$1,719,060.24
Anthem Blue Cross I	II						
221	2,503	\$3,987,356.80	\$193,884.25	\$3,785,225.51	\$3,979,109.76	\$6,339.20	\$3,985,448.96
222	2,058	\$5,935,858.30	\$139,694.23	\$5,664,700.67	\$5,804,394.90	(\$2,857.90)	\$5,801,537.00
223	964	\$3,270,161.00	\$127,704.79	\$3,098,859.01	\$3,226,563.80	\$6,742.60	\$3,233,306.40
224	256	\$541,056.96	\$57,423.47	\$498,170.66	\$555,594.13	(\$2,097.12)	\$553,497.01
SUBTOTAL	5,781	\$13,734,433.06	\$518,706.74	\$13,046,955.85	\$13,565,662.59	\$8,126.78	\$13,573,789.37

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Anthem Blue Cross III							
240	7,939	\$5,108,483.40	\$641,279.79	\$4,501,194.25	\$5,142,474.04	(\$13,977.60)	\$5,128,496.44
241	129	\$265,390.41	\$20,243.67	\$251,318.61	\$271,562.28	\$0.00	\$271,562.28
242	1,010	\$2,116,951.41	\$109,990.17	\$1,955,663.06	\$2,065,653.23	\$0.00	\$2,065,653.23
243	4,803	\$6,170,295.79	\$620,360.94	\$5,535,767.10	\$6,156,128.04	(\$6,402.05)	\$6,149,725.99
244	13	\$14,973.79	\$1,336.13	\$13,637.66	\$14,973.79	\$0.00	\$14,973.79
245	64	\$73,717.12	\$6,670.41	\$70,502.20	\$77,172.61	\$0.00	\$77,172.61
246	15	\$38,490.75	\$3,489.83	\$37,566.97	\$41,056.80	\$0.00	\$41,056.80
247	187	\$482,417.40	\$22,478.58	\$454,806.72	\$477,285.30	\$0.00	\$477,285.30
248	14	\$25,047.12	\$2,290.03	\$22,757.09	\$25,047.12	\$0.00	\$25,047.12
249	92	\$164,595.36	\$13,310.79	\$151,284.57	\$164,595.36	\$0.00	\$164,595.36
250	17	\$34,087.04	\$2,606.65	\$31,480.39	\$34,087.04	(\$2,005.12)	\$32,081.92
SUBTOTAL	14,283	\$14,494,449.59	\$1,444,056.99	\$13,025,978.62	\$14,470,035.61	(\$22,384.77)	\$14,447,650.84
CIGNA Network Mode	l Plan						
301	211	\$429,781.24	\$104,677.88	\$321,048.82	\$425,726.70	\$0.00	\$425,726.70
302	54	\$197,699.40	\$46,745.12	\$150,954.28	\$197,699.40	\$0.00	\$197,699.40
303	5	\$21,615.35	\$4,751.05	\$12,541.23	\$17,292.28	\$0.00	\$17,292.28
304	11	\$29,592.09	\$11,556.85	\$18,035.24	\$29,592.09	\$0.00	\$29,592.09
SUBTOTAL	281	\$678,688.08	\$167,730.90	\$502,579.57	\$670,310.47	\$0.00	\$670,310.47

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser/Senior Advan	tage						
401	1,637	\$2,346,110.51	\$167,193.18	\$2,192,190.35	\$2,359,383.53	\$4,232.31	\$2,363,615.84
403	12,455	\$3,646,624.98	\$314,679.32	\$3,336,467.52	\$3,651,146.84	(\$6,134.12)	\$3,645,012.72
404	446	\$609,695.38	\$9,350.45	\$598,977.90	\$608,328.35	(\$4,101.09)	\$604,227.26
405	1,468	\$2,077,650.77	\$19,517.77	\$2,063,790.32	\$2,083,308.09	\$0.00	\$2,083,308.09
411	2,006	\$5,739,621.60	\$216,187.35	\$5,258,842.25	\$5,475,029.60	\$5,627.08	\$5,480,656.68
413	1,511	\$2,650,088.52	\$113,133.89	\$2,413,123.48	\$2,526,257.37	\$1,694.43	\$2,527,951.80
414	47	\$130,180.60	\$332.37	\$127,078.43	\$127,410.80	\$0.00	\$127,410.80
418	6,459	\$3,737,278.72	\$261,059.33	\$3,478,826.87	\$3,739,886.20	(\$1,725.96)	\$3,738,160.24
419	215	\$354,898.35	\$4,886.07	\$350,012.28	\$354,898.35	\$0.00	\$354,898.35
420	94	\$258,975.70	\$1,308.50	\$252,215.08	\$253,523.58	\$0.00	\$253,523.58
421	7	\$11,286.16	(\$686.72)	\$10,442.87	\$9,756.15	\$0.00	\$9,756.15
422	273	\$783,153.80	\$1,577.57	\$759,039.43	\$760,617.00	\$0.00	\$760,617.00
426	254	\$434,685.44	\$4,007.28	\$428,980.17	\$432,987.45	\$0.00	\$432,987.45
428	42	\$116,481.12	\$554.67	\$115,926.45	\$116,481.12	\$0.00	\$116,481.12
430	141	\$400,533.72	\$1,071.86	\$393,820.54	\$394,892.40	\$0.00	\$394,892.40
SUBTOTAL	27,055	\$23,297,265.37	\$1,114,172.89	\$21,779,733.94	\$22,893,906.83	(\$407.35)	\$22,893,499.48
Kaiser - Colorado							
450	4	\$5,687.20	\$568.72	\$5,118.48	\$5,687.20	\$0.00	\$5,687.20
451	38	\$11,618.10	\$1,495.46	\$10,420.54	\$11,916.00	\$0.00	\$11,916.00
453	9	\$28,321.11	\$2,942.96	\$25,378.15	\$28,321.11	\$0.00	\$28,321.11
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
SUBTOTAL	77	\$70,480.21	\$7,046.05	\$63,732.06	\$70,778.11	\$0.00	\$70,778.11

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Georgia							
441	3	\$5,342.61	\$588.21	\$4,754.40	\$5,342.61	\$0.00	\$5,342.61
442	7	\$12,466.09	\$1,372.49	\$11,093.60	\$12,466.09	\$0.00	\$12,466.09
445	2	\$4,373.48	\$0.00	\$4,373.48	\$4,373.48	\$0.00	\$4,373.48
461	17	\$30,274.79	\$5,013.08	\$25,261.71	\$30,274.79	\$2,339.81	\$32,614.60
462	87	\$36,420.56	\$4,875.34	\$31,545.22	\$36,420.56	\$413.87	\$36,834.43
463	4	\$14,214.96	\$4,212.31	\$10,002.65	\$14,214.96	\$0.00	\$14,214.96
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	\$22,149.37	\$23,772.46	\$0.00	\$23,772.46
SUBTOTAL	152	\$133,425.17	\$18,034.40	\$115,390.77	\$133,425.17	\$2,753.68	\$136,178.85
Kaiser - Hawaii							
471	5	\$4,814.20	\$577.71	\$4,236.49	\$4,814.20	\$0.00	\$4,814.20
472	28	\$12,523.00	\$2,039.46	\$10,483.54	\$12,523.00	\$0.00	\$12,523.00
473	1	\$2,222.50	\$637.70	\$1,584.80	\$2,222.50	\$0.00	\$2,222.50
474	4	\$7,670.72	\$0.00	\$7,670.72	\$7,670.72	\$0.00	\$7,670.72
475	2	\$5,745.04	\$0.00	\$5,745.04	\$5,745.04	\$0.00	\$5,745.04
476	4	\$5,608.36	\$1,233.84	\$4,374.52	\$5,608.36	\$0.00	\$5,608.36
477	0	\$3,177.34	(\$958.32)	\$8,573.70	\$7,615.38	\$0.00	\$7,615.38
478	14	\$12,411.00	\$602.82	\$11,808.18	\$12,411.00	\$0.00	\$12,411.00
479	1	\$2,661.75	\$0.00	\$2,661.75	\$2,661.75	\$0.00	\$2,661.75
SUBTOTAL	59	\$56,833.91	\$4,133.21	\$57,138.74	\$61,271.95	\$0.00	\$61,271.95

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
(aiser - Oregon							
481	2	\$2,829.92	\$707.48	\$1,905.82	\$2,613.30	\$0.00	\$2,613.30
482	81	\$45,781.20	\$6,183.30	\$39,597.90	\$45,781.20	(\$565.20)	\$45,216.00
483	5	\$8,661.05	\$1,117.40	\$7,543.65	\$8,661.05	\$0.00	\$8,661.05
484	3	\$8,465.76	\$0.00	\$8,465.76	\$8,465.76	\$0.00	\$8,465.76
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
SUBTOTAL	126	\$110,669.08	\$12,812.04	\$93,696.10	\$106,508.14	(\$565.20)	\$105,942.94
CAN Health Plan							
611	286	\$82,457.97	\$16,198.39	\$66,546.89	\$82,745.28	(\$287.31)	\$82,457.97
613	99	\$57,795.24	\$12,023.63	\$43,505.13	\$55,528.76	\$0.00	\$55,528.76
SUBTOTAL	385	\$140,253.21	\$28,222.02	\$110,052.02	\$138,274.04	(\$287.31)	\$137,986.73
CAN Health Plan, AZ							
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
SUBTOTAL	42	\$15,698.05	\$2,322.22	\$13,375.83	\$15,698.05	\$0.00	\$15,698.05
GCAN Health Plan, NV							
622	24	\$6,895.44	\$787.24	\$6,108.20	\$6,895.44	\$0.00	\$6,895.44
623	7	\$3,966.34	\$1,065.25	\$4,034.33	\$5,099.58	\$0.00	\$5,099.58
SUBTOTAL	31	\$10,861.78	\$1,852.49	\$10,142.53	\$11,995.02	\$0.00	\$11,995.02

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
UHC Medicare Adv.							
701	2,261	\$879,511.50	\$96,854.74	\$787,732.61	\$884,587.35	(\$1,937.25)	\$882,650.10
702	388	\$832,536.15	\$34,464.08	\$739,939.87	\$774,403.95	\$2,076.15	\$776,480.10
703	1,446	\$1,115,839.50	\$106,117.61	\$1,012,789.49	\$1,118,907.10	\$0.00	\$1,118,907.10
704	106	\$253,274.35	\$10,935.75	\$242,338.60	\$253,274.35	\$0.00	\$253,274.35
705	55	\$59,236.80	\$2,961.84	\$56,274.96	\$59,236.80	\$0.00	\$59,236.80
706	2	\$967.32	\$77.39	\$1,373.59	\$1,450.98	\$0.00	\$1,450.98
SUBTOTAL	4,258	\$3,141,365.62	\$251,411.41	\$2,840,449.12	\$3,091,860.53	\$138.90	\$3,091,999.43
United Healthcare							
707	531	\$929,791.60	\$113,271.77	\$762,225.43	\$875,497.20	\$0.00	\$875,497.20
708	452	\$1,416,823.39	\$154,619.22	\$1,253,388.10	\$1,408,007.32	\$0.00	\$1,408,007.32
709	352	\$1,330,820.60	\$152,741.32	\$1,071,466.58	\$1,224,207.90	\$0.00	\$1,224,207.90
SUBTOTAL	1,335	\$3,677,435.59	\$420,632.31	\$3,087,080.11	\$3,507,712.42	\$0.00	\$3,507,712.42

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
ocal 1014 Firefighters							
801	83	\$120,496.08	\$4,732.71	\$115,763.37	\$120,496.08	\$0.00	\$120,496.08
802	339	\$887,376.57	\$28,165.76	\$851,357.92	\$879,523.68	\$0.00	\$879,523.68
803	424	\$1,309,201.76	\$46,439.73	\$1,272,025.25	\$1,318,464.98	\$3,087.74	\$1,321,552.72
804	207	\$300,514.32	\$10,017.10	\$290,497.22	\$300,514.32	(\$99,488.00)	\$201,026.32
805	245	\$641,319.35	\$14,449.32	\$629,487.66	\$643,936.98	(\$105,151.40)	\$538,785.58
806	771	\$2,018,192.73	\$42,091.49	\$1,976,101.24	\$2,018,192.73	(\$625,973.96)	\$1,392,218.77
807	67	\$206,878.58	\$3,458.28	\$197,244.82	\$200,703.10	(\$27,342.40)	\$173,360.70
808	25	\$77,193.50	\$1,976.16	\$75,217.34	\$77,193.50	(\$20,127.60)	\$57,065.90
809	17	\$24,679.92	\$1,858.24	\$22,821.68	\$24,679.92	\$0.00	\$24,679.92
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	263	\$381,812.88	\$23,111.93	\$361,604.47	\$384,716.40	(\$106,401.24)	\$278,315.16
813	2	\$5,235.26	\$0.00	\$5,235.26	\$5,235.26	(\$740.00)	\$4,495.26
SUBTOTAL	2,459	\$6,017,603.69	\$182,230.25	\$5,836,129.44	\$6,018,359.69	(\$982,136.86)	\$5,036,222.83
aiser - Washington							
393	6	\$12,075.18	\$3,421.84	\$12,678.40	\$16,100.24	\$0.00	\$16,100.24
394	21	\$8,776.11	\$1,078.20	\$7,697.91	\$8,776.11	\$0.00	\$8,776.11
395	3	\$15,005.04	\$893.36	\$2,857.90	\$3,751.26	\$0.00	\$3,751.26
397	2	\$4,313.28	\$0.00	\$4,313.28	\$4,313.28	\$0.00	\$4,313.28
398	12	\$9,933.84	\$1,192.07	\$8,741.77	\$9,933.84	\$0.00	\$9,933.84
SUBTOTAL	44	\$50,103.45	\$6,585.47	\$36,289.26	\$42,874.73	\$0.00	\$42,874.73
edical Plan Total	57,910	\$68,621,338.14	\$4,441,019.34	\$63,310,099.55	\$67,751,118.89	(\$990,537.16)	\$66,760,581.73

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
ental/Vision Plan							
CIGNA Indemnity Denta	I/Vision						
501	27,399	\$1,540,723.00	\$152,943.05	\$1,403,511.33	\$1,556,454.38	(\$2,978.68)	\$1,553,475.70
502	25,101	\$2,962,411.10	\$216,853.19	\$2,748,421.55	\$2,965,274.74	(\$21.66)	\$2,965,253.08
503	10	\$693.00	\$24.94	\$737.36	\$762.30	\$0.00	\$762.30
SUBTOTAL	52,510	\$4,503,827.10	\$369,821.18	\$4,152,670.24	\$4,522,491.42	(\$3,000.34)	\$4,519,491.08
CIGNA Dental HMO/Vision	on						
901	4,440	\$207,509.80	\$21,210.59	\$187,227.39	\$208,437.98	(\$93.20)	\$208,344.78
902	3,307	\$317,180.35	\$22,552.74	\$291,955.01	\$314,507.75	(\$95.45)	\$314,412.30
903	2	\$141.63	(\$24.54)	\$24.54	\$0.00	\$0.00	\$0.00
SUBTOTAL	7,749	\$524,831.78	\$43,738.79	\$479,206.94	\$522,945.73	(\$188.65)	\$522,757.08
ental/Vision Plan Total	60,259	\$5,028,658.88	\$413,559.97	\$4,631,877.18	\$5,045,437.15	(\$3,188.99)	\$5,042,248.16
RAND TOTALS	118,169	\$73,649,997.02	\$4,854,579.31	\$67,941,976.73	\$72,796,556.04	(\$993,726.15)	\$71,802,829.89

CARRIER DEDUCTION

PREMIUMS* CODES

DEDUCTION CODE DEFINITIONS

Anthem	Blue (Cross	Prudent	Buy	yer	Plan

\$1,220.38	201	Retiree Only
\$2,402.44	202	Retiree and Spouse/Domestic Partner
\$2,711.47	203	Retiree, Spouse/Domestic Partner and Children
\$1,568.92	204	Retiree and Children
\$331.92	205	Survivor Children Only Rates

Anthem Blue Cross Plan I

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

Anthem Blue Cross Plan II

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

Anthem Blue Cross Plan III

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

^{*}Benchmark premiums are bolded.

	CARRIER
	DEDUCTION
PREMIUMS*	CODES

DEDUCTION CODE DEFINITIONS

CIGNA Network Model Plan

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

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

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

<u>Kaiser</u>

\$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.

(aiser (continued)			
PREMIUMS*	CODES		
	DEDUCTION		
	CARRIER		

DEDUCTION CODE DEFINITIONS

Kaiser (continued)		
N/A	424	Retiree and Family (One family member is "Supplement'; others are "Excess II")
N/A	425	Retiree and Family (One family member is "Supplement"; others are "Excess III")
\$1,697.99	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")
Kaiser Colorado		
\$1,421.80	450	Retiree Only ("Basic" under age 65)
\$297.90	451	Retiree Only ("Senior Advantage")
\$3,146.79	453	Retiree and Family (Two family members are "Basic")
\$4,249.55	454	Retiree and Family (Three or more family members are "Basic")
\$1,711.70	455	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic")
\$587.80	457	Retiree and Family (Two family members are "Senior Advantage")
\$3,043.28	458	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$2,001.60	459	Retiree and Family (Two family members are "Senior Advantage"; one or more are "Basic")
Kaiser Georgia		
\$1,780.87	440	Retiree Only ("Basic" over age 65 with Medicare Part B only
\$1,780.87	441	Retiree Only ("Basic over age 65 with Medicare Part A only)
\$1,780.87	442	Retiree Only ("Basic over age 65 without Medicare Part A or Medicare Part B)
\$413.87	443	Retiree Only ("Basic" over age 65 - Medicare eligible who is classified as having renal failure)
\$2,186.74	444	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with 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.

	DEDUCTION			
PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS		
TILLIMOMO		DEDUCTION CODE DEL MITTORIO		
Kaiser Georgia	(continued)			
	_			
\$3,553.74	463	Retiree and Family (Two family members are "Basic")		
\$5,326.61	464	Retiree and Family (Three or more family members are "Basic)		
\$2,186.74	465	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")		
\$819.74	466	Retiree and Family (Two family members are "Senior Advantage")		
\$3,959.61	467	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")		
\$2,592.61	468	Retiree and Family (Two family members are "Senior Advantage"; one is "Basic")		
\$1,225.61	469	Retiree and Family (Three or more family members are "Senior Advantage"; one is "Basic")		
\$3,959.61	470	Retiree and Family (Three or more family members are "Basic"; one is "Senior Advantage"		
Kaiser Hawaii				
\$962.84	471	Retiree Only ("Basic" under age 65)		
\$447.25	472	Retiree Only ("Senior Advantage")		
\$2,222.50	473	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)		
\$1,917.68	474	Retiree and Family (Two family members are "Basic")		
\$2,872.52	475	Retiree and Family (Three or more family members are "Basic")		
\$1,402.09	476	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")		
\$3,177.34	477	Retiree and Family (One family member is "Basic" under age 65; one is over age 65 without Medicare Part A or Medicare Part B)		
\$886.50	478	Retiree and Family (Two family members are "Senior Advantage"		
\$2,661.75	479	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 without Medicare Part A or Medicare Part B)		
Kaiser Oregon				
\$1,414.96	481	Retiree Only ("Basic" under age 65)		
\$565.20	482	Retiree Only ("Senior Advantage")		
\$1,732.21	483	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)		
\$2,821.92	484	Retiree and Family (Two family members are "Basic")		
\$4,228.88	485	Retiree and Family (Three or more family members are "Basic")		
\$1,972.16	486	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")		
N/A	487	Retiree Only (Medicare Cost "Supplement" program)		
\$1,122.40	488	Retiree and Family (Two family members are "Senior Advantage")		
\$1,373.66	489	Retiree Only (Over age 65 with Medicare Part A only)		
\$1,732.21	490	Retiree Only (Over age 65 with Medicare Part B only)		

^{*}Benchmark premiums are bolded.

CARRIER

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

^{*}Benchmark premiums are bolded.

CARRIER DEDUCTION CODES

PREMIUMS*

DEDUCTION CODE DEFINITIONS

Kaiser Rate Category Definitions

"Basic" - includes those who are under age 65

Medicare Cost ("Supplement")

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

"Senior Advantage"

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

"Excess I"

-Is for participants who have Medicare Part A only.

"Excess II"

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

"Excess III"

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

^{*}Benchmark premiums are bolded.

	CARRIER
	DEDUCTION
DDEMILIME*	CODES

REMIUMS*	CODES	DEDUCTION CODE DEFINITION
KEMIUMO	CODES	

SCAN Health Plan

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

United Healthcare Medicare Advantage (UHCMA)

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

\$387.45	701	Retiree Only with Secure Horizons
\$2,076.15	702	Retiree and 1 Dependent - One with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic
		Partner OR Retiree and 1 Child)
\$766.90	703	Retiree and 1 Dependent - Both with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic
		Partner OR Retiree and 1 Child)
\$2,367.05	704	Retiree and 2 or More Dependents - One with Secure Horizons (Retiree and 2 or More Dependents = Retiree,
		Spouse/Domestic Partner and 1 or More Children OR Retiree and 2 or More Children)
\$1,057.80	705	Retiree and 2 or More Dependents - Two with Secure Horizons (Retiree and 2 or More Dependents = Retiree,
		Spouse/Domestic Partner and 1 or More Children OR Retiree and 2 or More Children)
\$483.66	706	Survivor Children Only Rates

United Healthcare (UHC)

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

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

Local 1014 Firefighters

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

^{*}Benchmark premiums are bolded.

CARRIER DEDUCTION CODES

PREMIUMS*

DEDUCTION CODE DEFINITIONS

Local 1014 Firefighters (continued)

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

CIGNA Indemnity - Dental/Vision

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

CIGNA HMO - Dental/Vision

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

^{*}Benchmark premiums are bolded.

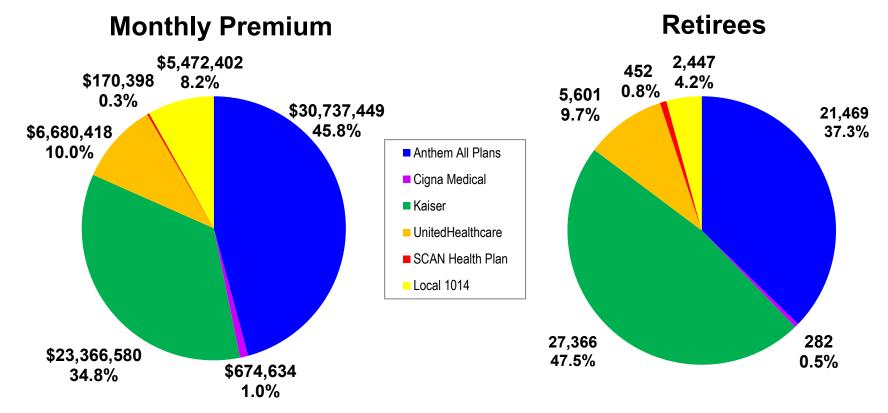


Premium & Enrollment

Coverage Month Ending September 2025

Carrier / Plan	Monthly Premium	Percent of Total	Retirees	Percent of Total	
Anthem All Plans	\$30,737,449	45.8%	21,469	37.3%	
Cigna Medical	\$674,634	1.0%	282	0.5%	
Kaiser	\$23,366,580	34.8%	27,366	47.5%	
UnitedHealthcare	\$6,680,418	10.0%	5,601	9.7%	
SCAN Health Plan	\$170,398	0.2%	452	0.8%	
Local 1014	\$5,472,402	8.2%	2,447	4.2%	
Combined Medical	\$67,101,881	100.0%	57,617	100.0%	

Cigna Dental & Vision	¢5 044 727	E0 027
(PPO and HMO)	\$5,011,737	59,927

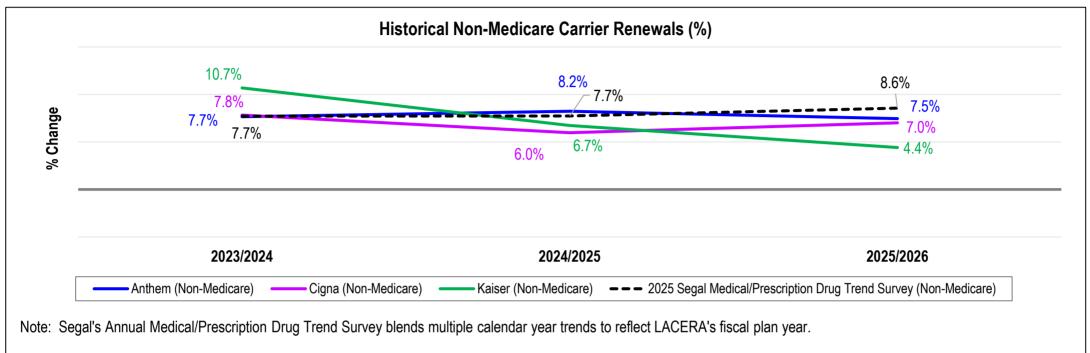


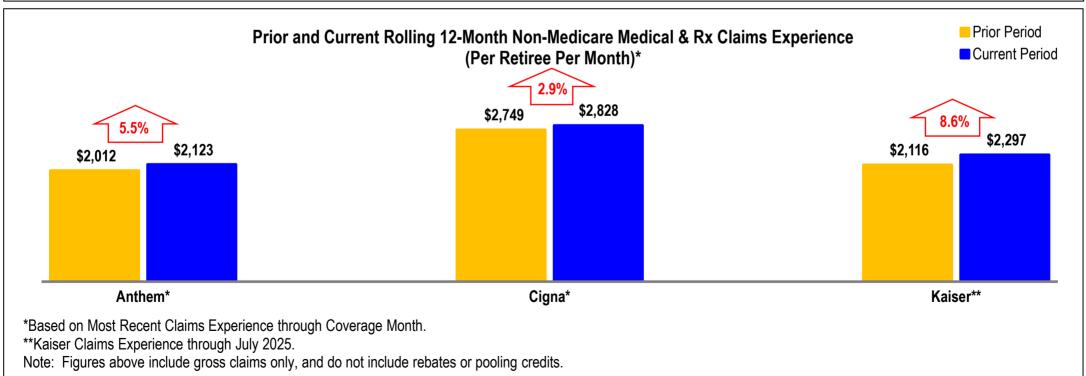
Note: Premiums include LACERA's Administrative Fee of \$8.00 per member, per plan, per month.



Claims Experience by Carrier

Coverage Month Ending September 2025

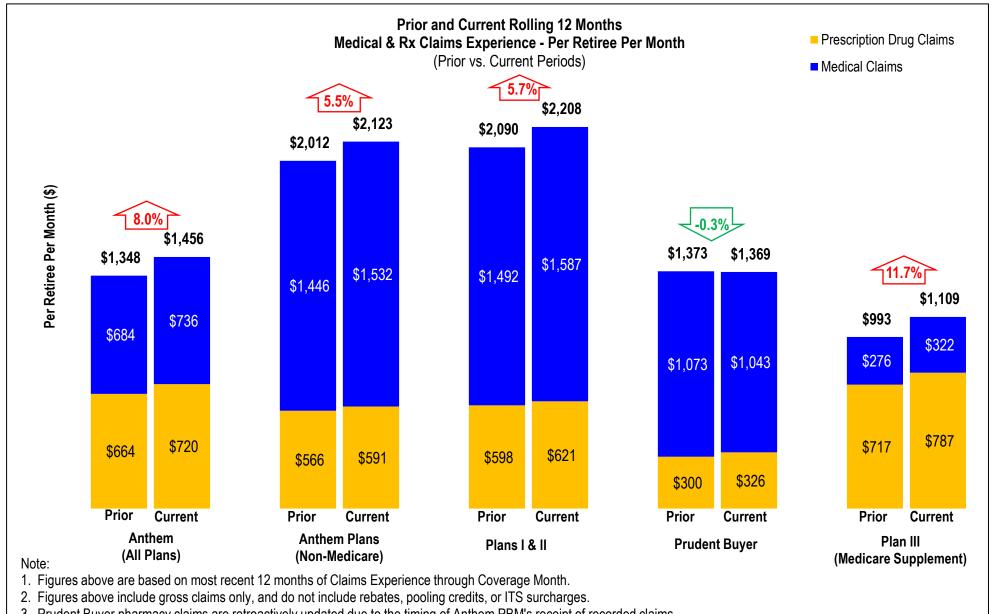






Anthem Claims Experience By Plan

Coverage Month Ending September 2025



- 3. Prudent Buyer pharmacy claims are retroactively updated due to the timing of Anthem PBM's receipt of recorded claims.
- 4. Anthem applies ITS surcharges for Plans I-III, and Prudent Buyer, which historically adds an estimated 0.5% to 0.7% towards claims.



Kaiser Utilization Coverage Month Ending September 2025

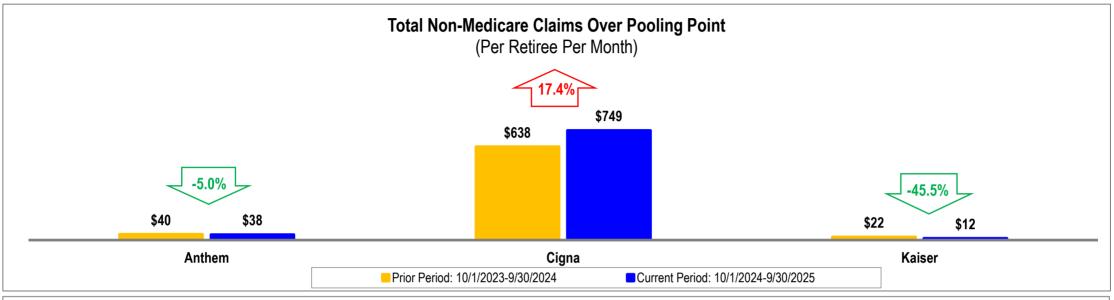
- Kaiser insures approximately 26,500 LACERA retirees with the majority enrolled in Medicare Advantage plans.
- Kaiser's Periodic Utilization Report (PUR) monitors utilization patterns of LACERA's non-Medicare population in California.

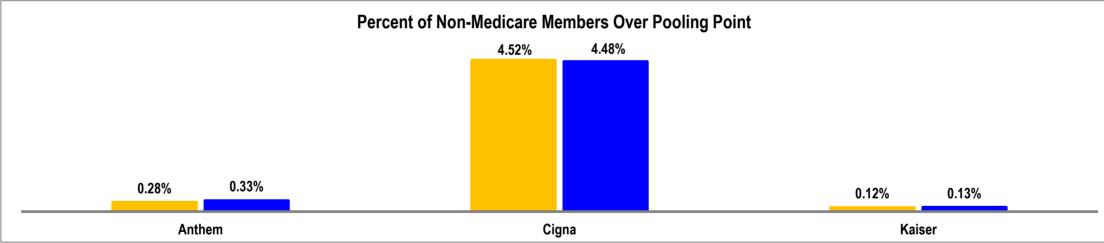
Category	Current Period 8/1/2024 - 7/31/2025	Prior Period 8/1/2023 - 7/31/2024	Change	
Average Contract Size	1.82	1.82	0.00%	
Average Members	12,649	12,554	0.76%	
Inpatient Claims Per Member Per Month	\$317.55	\$320.44	-0.90%	
Outpatient Claims Per Member Per Month	\$555.57	\$495.09	12.22%	
Pharmacy Per Member Per Month	\$173.50	\$157.19	10.38%	
Other Per Member Per Month	\$215.63	\$192.92	11.77%	
Total Claims Per Member Per Month	\$1,262.25	\$1,165.64	8.29%	
Total Paid Claims	\$191,598,683	\$175,596,218	9.11%	
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	0.52%	1.05%		
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%	



High Cost Claimants (Anthem, Cigna, & Kaiser)

Coverage Month Ending September 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.



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

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

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

¹ Includes two years of historical data.

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

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

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

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

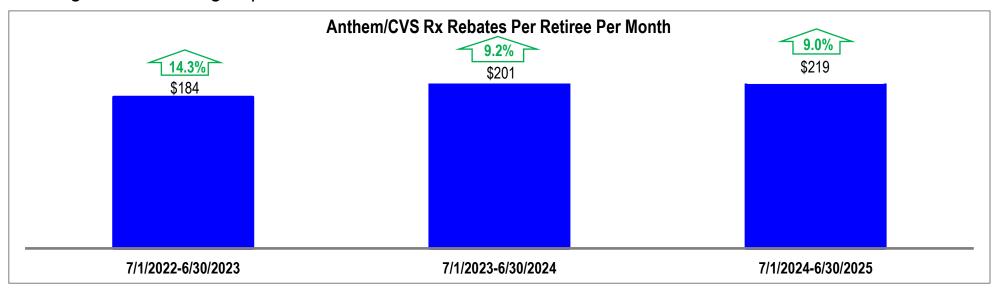
⁶ Based on data provided by Anthem on August 19, 2025.

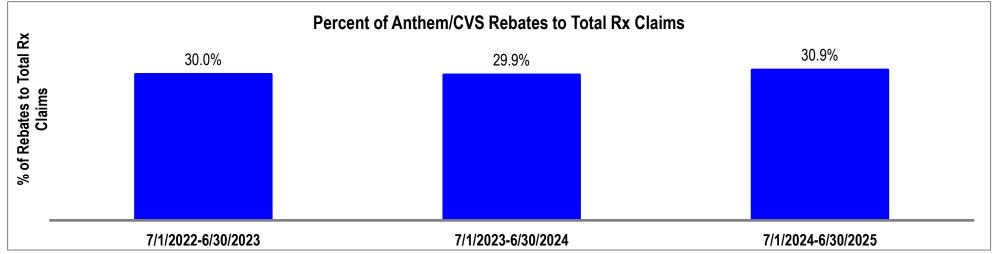
⁷ Includes two months of historical data.



Prescription Drug Rebates (Anthem)

Coverage Month Ending September 2025





Rebates Overview:

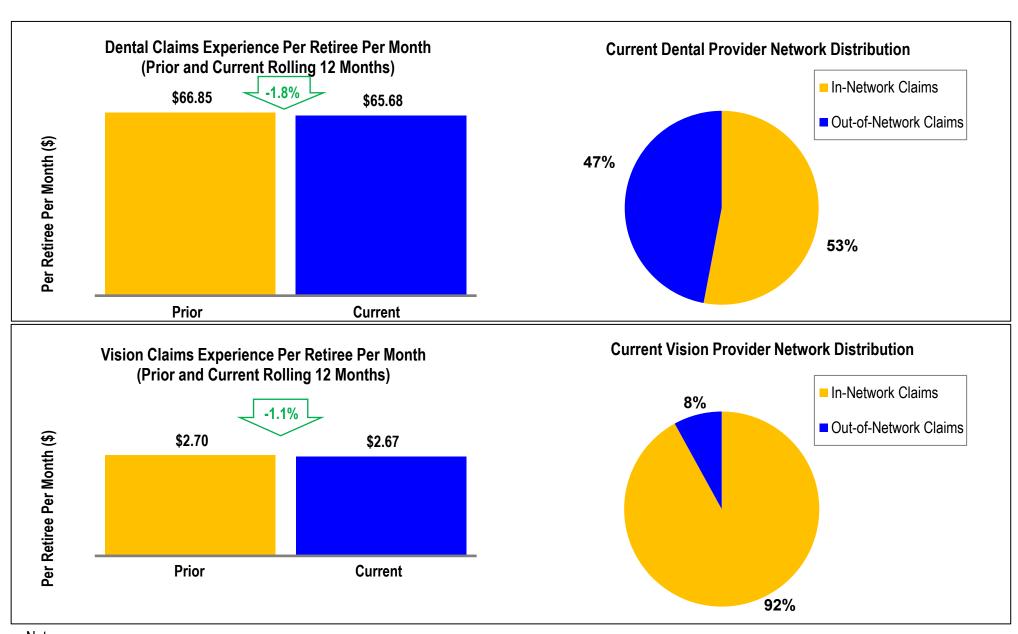
Pharmacy Benefit Managers negotiate volume-based rebates with drug manufacturers of brand medications. Manufacturer rebates are passed on to plan sponsors and are used to offset pharmaceutical claims expenses.

Note:

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



Cigna Dental & Vision Claims Experience Coverage Month Ending September 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.