

LIVE VIRTUAL BOARD MEETING



TO VIEW VIA WEB



TO PROVIDE PUBLIC COMMENT

You may submit a request to speak during Public Comment or provide a written comment by emailing PublicComment@lacera.com. If you would like to remain anonymous at the meeting without stating your name, please let us know.

Attention: Public comment requests must be submitted via email to PublicComment@lacera.com.

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

A REGULAR MEETING OF THE BOARD OF RETIREMENT
LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION
300 N. LAKE AVENUE, SUITE 810, PASADENA, CA

9:00 A.M., WEDNESDAY, AUGUST 4, 2021

This meeting will be conducted by the Board of Retirement by teleconference under the Governor's Executive Order No. N-29-20.

Any person may view the meeting online at
https://members.lacera.com/lmpublic/live_stream.xhtml

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

- I. CALL TO ORDER
- II. APPROVAL OF MINUTES
 - A. Approval of the Minutes of the Regular Meeting of July 7, 2021
- III. PUBLIC COMMENT

(Written Public Comment - You may submit written public comments by email to PublicComment@lacera.com. Correspondence will be made part of the official record of the meeting. Please submit your written public comments or documentation as soon as possible and up to the close of the meeting.

Verbal Public Comment - You may also request to address the Committee. A request to speak must be submitted via email to PublicComment@lacera.com. We will contact you with information and instructions as to how to access the meeting as a speaker. If you would like to remain anonymous at the meeting without stating your name, please let us know.)
- IV. OTHER COMMUNICATIONS
 - A. For Information
 - 1. June 2021 All Stars
 - 2. Chief Executive Officer's Report
(Memo dated July 28, 2021)

V. CONSENT ITEMS

- A. Ratification of Service Retirement and Survivor Benefit Application Approvals. (Memo dated July 19, 2021)
- B. Recommendation as submitted by Les Robbins, Chair, Insurance, Benefits, Legislative Committee: That the Board approve an extension of the Retiree Healthcare Benefits consulting contract with Segal Consulting for the period of July 1, 2022 through June 30, 2024. (Memo dated July 16, 2021)
- C. Recommendation as submitted by Shawn Kehoe, Chair, Joint Organizational Governance Committee: That the Board (1) recommend the proposed classification changes be approved for implementation for the existing Media Artist classification by the Board of Retirement and Board of Investments and (2) recommend the proposed classification and compensation changes be approved for implementation for the creation of a new Senior Media Artist classification by the Board of Retirement and Board of Investments. (Memo dated July 21, 2021)

VI. ITEMS EXCLUDED FROM CONSENT ITEMS

VII. NON-CONSENT ITEMS

- A. Recommendation as submitted by Santos H. Kreimann, Chief Executive Officer and Ted Granger, Interim Chief Financial Officer: That the Board accept the July 1, 2020, Los Angeles County Other Post-Employment Benefits (OPEB) Program Actuarial Valuation report prepared by LACERA's consulting actuary, Milliman. (Memo dated July 23, 2021)
- B. Recommendation as submitted by Alan Bernstein, Chair, Board of Retirement and Santos H. Kreimann, Chief Executive Officer: That the Board review and approve issuance of a Request for Proposal for a Strategic Planning Consultant. (Memo dated July 28, 2021)
- C. Recommendation as submitted by Trustees Shawn Kehoe and Ronald Okum: That the Board approve, as a trial period from September 2021 through January 2022, the following:
 - 1. Beginning September 2021, the Board of Retirement temporarily combine its Administrative and Disability meeting to the first Wednesday of the month instead of having separate meetings.

VII. NON-CONSENT ITEMS (Continued)

2. Beginning September 2021, the Board of Retirement temporarily move its Insurance, Benefits, and Legislative Committee (IBLC) meeting to the first Wednesday of the month with a start time of 8:00 a.m.
 3. Beginning September 2021, the Board of Retirement temporarily move its Operations Oversight Committee (OOC) meeting to the first Wednesday of the month, following the BOR meeting.
 4. Beginning September 2021, the Board of Retirement temporarily disband the Disability Procedures and Services Committee (DPSC) and direct all Committee items to the full Board.
(Memo dated July 23, 2021)
- D. Recommendation as submitted by the Board of Retirement Ad-hoc Committee on Board Duties and Responsibilities: That the Board discuss and consider the recommendations provided by the Ad-hoc Committee to (1) abolish the Joint Organizational Governance Committee, or (2) narrow the JOGC Charter or provide other committee alternatives to cover limited specific areas of joint responsibility. (Memo dated July 28, 2021)

VIII. REPORTS

- A. For Information Only as submitted by Louis Gittens, Section Head, Benefits Division, regarding the Annual Compensation Limits Applicable to Contributions and Final Average Compensation.
(Memo dated July 23, 2021)
- B. For Information Only as submitted by Carly Ntoya, Ph.D., Director of Human Resources, regarding Labor Negotiator – Irma Rodriguez Moisa
(Memo dated July 21, 2021)
- C. For Information Only as submitted by Barry W. Lew, Legislative Affairs Officer, regarding Monthly Status Report on Legislation.
(Memo dated July 23, 2021)
- D. For Information Only as submitted by Ted Granger, Interim Chief Financial Officer, regarding the Monthly Education and Travel Reports for June 2021.
(Memo dated July 24, 2021)

VIII. REPORTS (Continued)

- E. For Information Only as submitted by Steven P. Rice, Chief Counsel, regarding the July 2021 Fiduciary Counsel Contact and Billing Report. (Memo dated July 26, 2021) (Privileged and Confidential Attorney-Client Communication/Attorney Work Product)

IX. ITEMS FOR STAFF REVIEW

- X. GOOD OF THE ORDER
(For information purposes only)

XI. EXECUTIVE SESSION

- A. Conference with Legal Counsel – Anticipated Litigation
Significant Exposure to Litigation (Pursuant to Paragraph (2) of Subdivision (d) of California Government Code Section 54956.9)

- 1. Administrative Appeal of Suvimol Nakarangkul

- B. Conference with Labor Negotiators
(Pursuant to California Government Code Section 54957.6)
Agency designated representatives: Irma Rodriguez Moisa, Carly Ntoya, Santos H. Kreimann, Luis Lugo, and JJ Popowich

Employee Organization: SEIU Local 721

XII. ADJOURNMENT

Documents subject to public disclosure that relate to an agenda item for an open session of the Board of Retirement that are distributed to members of the Board of Retirement 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 Board of Retirement Members at LACERA's offices at 300 N. Lake Avenue, Suite 820, Pasadena, CA 91101, during normal business hours of 9:00 a.m. to 5:00 p.m. Monday through Friday.

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 BOARD OF RETIREMENT
LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

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

9:00 A.M., WEDNESDAY, JULY 7, 2021

This meeting was conducted by the Board of Retirement by teleconference under the Governor's Executive Order No. N-29-20.

PRESENT: Alan Bernstein, Chair

Vivian H. Gray, Vice Chair (Joined the meeting at 9:03 a.m.)

Gina Zapanta, Secretary

JP Harris (Alternate Retired)

Shawn R. Kehoe

Keith Knox

Ronald Okum

William Pryor (Alternate Safety) (Left the meeting at 9:26 a.m.)

Les Robbins

ABSENT: Herman Santos

Wayne Moore

STAFF ADVISORS AND PARTICIPANTS

Santos H. Kreimann, Chief Executive Officer

John Popowich, Assistant Executive Officer

Steven P. Rice, Chief Counsel

Jon Grabel, Chief Investment Officer

STAFF ADVISORS AND PARTICIPANTS (Continued)

Jude Perez, Principal Investment Officer

Esmeralda del Bosque, Senior Investment Officer

Johanna Fontenot, Senior Staff Counsel

Michael Herrera, Senior Staff Counsel

Fern Billingsy, Senior Staff Counsel

Barry W. Lew, Legislative Affairs Officer

Kathy Delino, Interim Systems Manager

Bob Schlotfelt, Interim Chief Information Security Officer

Ted Granger, Interim Chief Financial Officer

Carly Ntoya, Human Resources Director

Michael Cordial, Senior Human Resources Analyst

Cynthia Martinez, Chief of Communications

Erika Heru, Creative Coordinator

Richard Bendall, Chief Audit Executive

Leisha Collins, Internal Audit Principal

I. CALL TO ORDER

The meeting was called to order virtually by Mr. Bernstein at 9:00 a.m.

II. APPROVAL OF MINUTES

A. Approval of the Minutes of the Regular Meeting of June 2, 2021

II. APPROVAL OF MINUTES (Continued)

Mr. Pryor made a motion, Mr. Okum seconded, to approve the minutes of the regular meeting of June 2, 2021. The motion passed (roll call) with Messrs. Knox, Okum, Kehoe, Robbins, Bernstein, and Ms. Zapanta. Ms. Gray was absent from the vote.

III. PUBLIC COMMENT

There were no requests from the public to speak.

IV. OTHER COMMUNICATIONS (Ms. Gray joined the meeting at 9:03 a.m.)

A. For Information

1. May 2021 All Stars

Mr. Popowich announced the winners for the month of May: Angel Calvo, John Kim, Linda El-Farra, and Ana Chang.

2. Chief Executive Officer's Report
(Memo dated June 28, 2021)

Mr. Kreimann provided a brief update on the Chief Executive Officer's Report.

V. CONSENT ITEMS

Mr. Knox made a motion, Mr. Pryor seconded, to approve Consent Items A and C. The motion passed (roll call) with Messrs. Knox, Bernstein, Okum, Kehoe, Robbins, Ms. Gray and Ms. Zapanta voting yes.

A. Ratification of Service Retirement and Survivor Benefit Application Approvals. (Memo dated June 25, 2021)

B. Recommendation as submitted by Les Robbins, Chair, Insurance, Benefits, Legislative Committee: That the Board approve a visit in 2021 to Sacramento, CA (or alternatively, to local district offices within Los Angeles

V. CONSENT ITEMS (Continued)

County) with the California State Legislature by staff as designated by the Chair of the Board of Retirement. (Memo dated June 17, 2021)

This Item was held after Item V. Consent Items.

- C. Recommendation as submitted by Shawn Kehoe, Chair, Operations Oversight Committee: That the Board authorize staff to issue a Request for Proposal for consulting services to find the firm that will design, procure, and implement an enterprise budget application for the Administrative Services Division. (Memo dated June 24, 2021)

VI. ITEMS EXCLUDED FROM CONSENT ITEMS

Item V. B. was pulled for further discussion.

Mr. Kehoe made a motion, Mr. Okum seconded, to approve a visit in 2021 to Sacramento, CA (or alternatively, to local district offices within Los Angeles County) with the California State Legislature by staff and trustees, in consultation with the Chair. The motion passed (roll call) with Messrs. Knox, Bernstein, Okum, Kehoe, Robbins, Ms. Gray and Ms. Zapanta voting yes.

VII. NON-CONSENT ITEMS

- A. Recommendation as submitted by Santos H. Kreimann, Chief Executive Officer: That the Board approve an exception to LACERA's November 2019 Purchasing Goods and Services Policy to delegate authority to the Audit Committee for the procurement of audit services under their authority, as defined by the Audit Committee Charter. (Memo dated June 30, 2021)

Mr. Okum made a motion, Ms. Gray seconded to approve staff's recommendation. The motion passed (roll call) with Messrs. Knox, Bernstein, Okum, Kehoe, Robbins, Ms. Gray and Ms. Zapanta voting yes.

VII. NON-CONSENT ITEMS (Continued)

- B. Recommendation as submitted by Joseph Kelly, Chair, Audit Committee: That the Board approve and adopt the revised Audit Committee Charter. (Memo dated June 30, 2021)

Mr. Knox made a motion, Mr. Kehoe seconded to approve staff's recommendation. The motion passed (roll call) with Messrs. Knox, Bernstein, Okum, Kehoe, Robbins, Ms. Gray and Ms. Zapanta voting yes.

VIII. REPORTS

- A. Presentation as submitted by Cynthia Martinez, Chief of Communications, regarding the LACERA.com Redesign Update. (Memo dated June 21, 2021)

Ms. Martinez and Ms. Heru provided the Board a brief presentation and answered questions.

- B. For Information Only as submitted by Jonathan Grabel, Chief Investment Officer; Jude Perez, Principal Investment Officer; and Esmeralda del Bosque, Senior Investment Officer, regarding the OPEB Master Trust – Strategic Asset Allocation Update. (Memo dated June 23, 2021)

Messrs. Grabel, Perez and Ms. del Bosque were present to answer questions from the Board.

- C. For Information Only as submitted by Barry W. Lew, Legislative Affairs Officer, regarding Monthly Status Report on Legislation. (Memo dated June 25, 2021)

Mr. Lew was present to answer questions from the Board.

- D. For Information Only as submitted by Carly Ntoya, Ph.D., Human Resources Director and Michael Cordial, Senior Human Resources Analyst, regarding the LACERA Internship Program Overview. (Memo dated June 23, 2021)

Ms. Ntoya and Mr. Cordial were present to answer questions from Board.

VIII. REPORTS (Continued)

- E. For Information Only as submitted by Ted Granger, Interim Chief Financial Officer, regarding the following reports:

Monthly Education and Travel Reports for May 2021

(Public Memo dated June 24, 2021)

(Confidential Memo dated June 24, 2021 – Includes Anticipated Travel)

Mr. Granger was present to answer questions from the Board.

- F. For Information Only as submitted by Steven P. Rice, Chief Counsel, regarding the June 2021 Fiduciary Counsel Contact and Billing Report. (Memo dated June 25, 2021) (Privileged and Confidential Attorney-Client Communication/Attorney Work Product)

Mr. Rice was present to answer questions from the Board.

IX. ITEMS FOR STAFF REVIEW

The Board requested that staff provide Public Employees Pension Reform Act (PEPRA) information at an upcoming meeting. Lastly, the Board provided suggestions to the new lacera.com that included, but were not limited to, increasing the size of the MyLACERA.com icon size and providing a translation tool.

- X. GOOD OF THE ORDER
(For information purposes only)

Trustees thanked staff for their work on the lacera.com redesign project.

XI. EXECUTIVE SESSION

- A. Potential Threats to Public Services or Facilities
(Pursuant to Subdivision (a) of California Government Code Section 54957)

Consultation with: LACERA Chief Executive Officer - Santos H. Kreimann, Systems Division Interim Manager - Kathy Delino, Chief Information Security Officer - Bob Schlotfeld, and Other LACERA Staff.

The Board met in Executive Session pursuant to Government Code Section

July 7, 2021

Page 7

XI. EXECUTIVE SESSION (Consultation)

54957. There was nothing to report.

Supplemental Information (Information provided to the Trustees prior to the meeting)

1. Approval of the Revised Audit Committee Charter
(Revision to the memo dated June 30, 2021)

XII. ADJOURNMENT

There being no further business to come before the Board, the meeting was adjourned at 10:27 a.m.

GINA ZAPANTA, SECRETARY

ALAN BERNSTEIN, CHAIR



July 28, 2021

TO: Each Trustee,
Board of Retirement
Board of Investments

FROM: Santos H. Kreimann *SHK*
Chief Executive Officer

SUBJECT: **CHIEF EXECUTIVE OFFICER'S REPORT – JULY 2021**

The following reflects the Chief Executive Officer's Report for July 2021 that highlights a few of the operational activities that have taken place during the past month, key business metrics to monitor how well we are meeting our performance objectives, and our educational calendar.

Our Ongoing COVID-19 Response & New Guidelines Related to Return to Work

Governor Newsom acted in June to fully open California's economy commencing on June 15th. Shortly after that action, Cal-OSHA published guidelines no longer requiring vaccinated employees to wear masks under most conditions, or practice social distancing around other vaccinated employees. The Cal-OSHA guidelines also permitted public agencies to maintain more stringent regulations. While Cal-OSHA loosened restrictions, both Los Angeles County and LACERA independently decided to maintain stricter requirements for our employees until more information could be gathered to show less restrictive protocols were warranted. Our more conservative requirements include the requirement for all staff to wear masks, whether they are vaccinated or not, and comply with social distancing of at least six feet between staff.

Unfortunately, the less restrictive standards, combined with the fact that only about 52-53% of the public have been vaccinated, has led to an increase in COVID-19 cases and hospitalizations statewide. In Los Angeles County, the LA Times reported on July 19th that the County was seeing over 10,000 cases per week, which is comparable to levels experienced in March of this year. The Los Angeles County Department of Public Health reported 1,233 new cases on July 19th. Hospitalizations are up from approximately 200-250 per day in mid-June to just over 500 in mid-July. All reports indicate the more transmissible Delta-variant is spreading quickly throughout the County and in other major metropolitan areas within California.

Consequently, the Los Angeles County Department of Public Health issued an updated "Responding Together at Work and in the Community," health order on July 22, 2021, requiring, face masks to be worn by all persons, regardless of vaccination status, in "All indoor public and private businesses." The order does not mandate social distancing. The City of Pasadena followed

July 28, 2021

Page 2

suit and issued a requirement to wear masks indoors at all times and also announced they would be requiring all City staff members to be vaccinated.

We will continue to follow the Public Health guidelines to require all staff and members visiting LACERA to wear masks, as well as continue to require the practice of social distancing, and limiting the number of staff members physically in our offices daily.

Our Health and Safety Team continues to conduct random audits of work areas to ensure compliance with our protocols, and continue to report near 100% compliance with our mask and social distancing requirements for staff members in the office.

We continue to encourage our staff to get vaccinated. Human Resources, Communications, and the Business Continuity Team have been working on developing a proactive vaccination education campaign about the benefits and efficacy of vaccination as required by Cal-OSHA. The campaign, which kicks off on August 2, 2021, will continue throughout September with weekly or bi-weekly messages about the benefits of getting vaccinated.

We are committed to creating the safest work environment possible and one of the ways we can do that is by providing education to our staff members as we have discussed, and by learning which staff members have been vaccinated. At this time, 11% (44 staff members) voluntarily reported being fully vaccinated. Beginning in August, staff members will be required to complete LACERA's Vaccination Questionnaire, in which they will confirm that they are or are not vaccinated. Members who are not currently vaccinated, will be required to report when they do get vaccinated. This information is subject to LACERA's Privacy & Confidentiality Policy. The purpose of collecting this information is to help management make operational decisions and to apply the appropriate health & safety protocols as events dictate. Staff members who indicate they are vaccinated must upload proof of vaccination; otherwise, they will be required to follow protocols for unvaccinated people.

LACERA has not yet made the determination whether we will require, or want to require, staff members to be vaccinated. We continue to evaluate whether this step will be necessary, but we would like to determine the impacts of our COVID-19 employee education program and the legal questions raised by these mandates before making any final decisions.

In the meantime, we will continue to follow all required regulations and, for those staff members who may still get infected or who may have to care for family who may get infected, they are able to apply for Supplemental Paid Sick Leave for COVID-19 and vaccine related absences.

The following chart shows the number of LACERA staff members over the past month who were exposed (had direct close contact) to a person who tested positive for COVID-19; the number of LACERA staff members who tested positive for COVID-19; and the number of staff members who were in the office 14 days before testing positive for COVID-19.

**LACERA COVID-19 Incidents
June 29, 2021 – July 28, 2021**

Exposed	Confirmed Positive	In Office Before Positive Test
1	2	1

This recent increase in incidents at LACERA mirrors the increase in COVID-19 positive cases in Los Angeles County. Management continues to limit the number of staff members physically in our offices daily. Based on the most recent numbers, we are averaging approximately 15% of our staff in the office on any given day. Staff members can be vaccinated during working hours and are able to apply for Supplemental Paid Sick Leave for COVID-19 and vaccine related absences. Staff members who have been fully vaccinated can report that information to Human Resources and again as of the time of this memo, 11% (44 staff members) reported being fully vaccinated.

Our cautious approach to managing our response to the pandemic has kept staff members safe and allowed LACERA to continue to meet member expectations and deliver the high level of service we strive to always provide.

Update on Return to the Office Environment Planning?

While the Pandemic continues to be a fluid situation and events are changing fast, we have not lost sight of our planning efforts to return to the office environment. We have consistently messaged to all staff that our plan is to return to the office in mid-September. We have recently set the official return to the office date as Monday, September 13, 2021. However, it is important to note that should the situation worsen, we may adjust those plans.

In the meantime, the managers have finalized their return to work plans and several of them are being reviewed by the Business Continuity Team and the Executive Office. These plans take into consideration social distancing protocols and consist of hybrid schedules of working in the office and working remotely where warranted. We have finished updating all the work areas with the necessary signage and modifications. The Business Continuity Team, and Systems, completed a walk-through of each division and have made appropriate notes of what system equipment updates are needed to ensure staff's workstations and work areas are ready. Over the next month, staff will return to the office to test system access, reacclimate to the new work environment, and receive instruction on the new workplace protocols in place to maximize member and employee safety in the office.

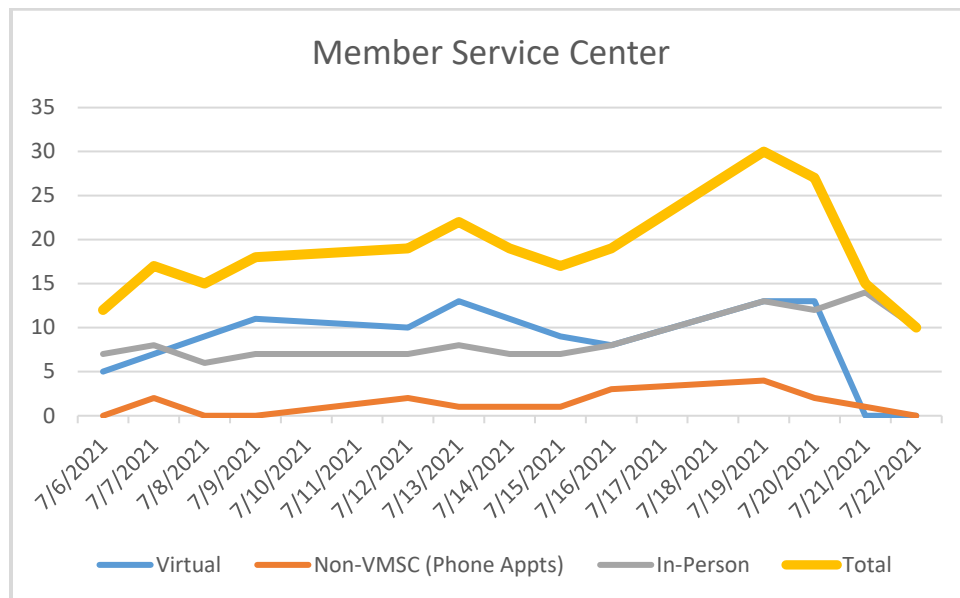
Member Service Center Re-Opening

We were excited to finally re-open the Member Service Center (MSC) on July 6, 2021, with a limited schedule of appointments. The goal was to do a controlled re-opening to allow staff

members to get used to the revised office setting and test out safety protocols and procedures. During July and August, in-person appointments are limited to no more than 10 members a day. Of course, we continue to offer the popular and convenient virtual one-on-one counseling sessions to all our members.

As a reminder, we implemented several steps to help ensure the safety and health of our members and staff. All members visiting the MSC are asked to self-affirm that they have no symptoms of COVID-19 prior to coming to, and into, the MSC. We have also installed a self-check thermometer at the MSC entry and ask members to self-check temperatures as part of their self-affirmation process. All members are required to wear a face covering while in the MSC. We also limited each member to one family member who may accompany them into the counseling area. Members are advised of these requirements during the appointment set-up process, in email confirmations, and in email reminders.

The re-opening has gone well. The chart below provides some insight into the re-opening experience.



On average we offered 18 appointments per day between virtual, in-person, and special phone appointments (non-video one-on-one counseling sessions). Pre-pandemic we offered on average about 50 appointments per day.

The reduced number of appointments is a temporary condition that is reflective of our change in procedures as we re-open our full complement of services. However, we must point out that we do not envision being able to return to the pre-pandemic number of appointments soon due to staffing shortages. In the Outreach Section of Member Services, we have a total of 22 positions allocated to meeting with members (not including management and supervisors). Of those 22, we have 14

staff dedicated to serving members in the MSC at this time. Of the remaining positions allocated to the MSC, three (3) are currently serving in the Member Services Call Center due to high call volumes, two (2) are vacant, two (2) are out on long term leave, and one (1) person is currently working in Systems on an educational opportunity.

The newly re-opened Member Service Center is now an appointment only service model. In the past, LACERA allowed walk-ins who we would see - time permitting, as scheduled appointments received priority. This arrangement often meant walk-in members would wait anywhere from an hour to four hours or longer during busy periods before they could see a Specialist. While flexible, this business model did not meet our definition of timely personalized service, and often caused some pressure and stress for staff members who sympathized with members who had to wait long periods before being seen. The appointment only model allows us to ensure we are meeting our commitment to see members within minutes of their scheduled time. This also enables management to plan our workforce scheduling much more efficiently, allowing us to ensure we have adequate staffing for webinars, workshops and other outreach efforts.

Members have largely adjusted to the change. We did have to adjust some of our communications and letters in the first few days to ensure that our message was consistent regarding the need for members to make an appointment. In the initial few days, we did see some walk-ins, which we helped schedule appointments. We also continue to promote the use of our drop-box for contactless and quick letter, form, and document drop off. Members have also largely adjusted to the safety protocols, although we did have one or two members who initially objected to the mask requirement. We have personal protective gear available to provide to any member that did not bring a mask with them.

Recruitment Updates

To provide a more complete reporting of LACERA's recruitment, assessment and hiring efforts to reduce the number of vacancies, provided below is an expanded summary of Human Resources (HR) activities.

Development

Before the position is advertised and applications are accepted, HR works with the Division(s) to review the classification description, create an ideal candidate profile, and discuss the assessment process. This is used to create the job bulletin and recruiting brochure (management positions only). Presently, there are five (5) recruitments/assessments in development: Data Systems Analyst I, Document Processing Assistant, Administrative Services Analyst I, Administrative Services Analyst II, and Administrative Services Analyst III.

There are currently three (3) Data Systems Analyst I vacancies; one (1) Document Processing Assistant vacancy; one (1) Administrative Services Analyst I vacancy; two (2) anticipated Administrative Services Analyst II vacancies; and two (2) Administrative Services Analyst III

vacancies. Going forward, the positions in the Administrative Services job family will be referred to as the Administrative Series.

During the second quarter of this fiscal year, we will finalize the classification descriptions for the Principal Investment Officer and Public Information Officer position.

Recruiting

The Human Resources team is aggressively recruiting qualified internal and external candidates to fill vacancies. Finding the right candidate(s) who will add value to the organization and help move us forward in meeting our goals is a top priority for our Human Resources Division. LACERA is currently accepting applications for:

- Senior Staff Counsel and Staff Counsel: interested candidates are encouraged to submit their resumes of consideration.
- Competitive candidates are encouraged to apply for Senior Accountant or Media Artist. The recruiting period will remain open until a pool of qualified applications are received; however, early applicants are participating in the assessment process.

Assessment

Having received a pool of qualified candidates, HR is administering assessments for the below recruitments. Examples of assessments include multiple choice tests, interviews, job simulations, and technical projects.

- Assistant Executive Officer
- Retirement Benefits Specialist (RBS) III
- Retirement Benefits Specialist (RBS) I
- Financial Analyst III
- Senior Disability Retirement Specialist
- Procurement and Supply Clerk
- Senior Internal Auditor
- Senior Accountant
- Media Artist

Upon completing the above assessments, HR staff creates the eligible lists from which Divisions can hire. Lastly, once offers have been made, HR staff have the capacity to start the development process for other recruitments/assessments. Based on the current requests, the next classifications for exam development are Data Systems Analyst II, Data Systems Coordinator, Public Information Officer, and Principal Investment Officer.

Upcoming Core-Benefits Training Class

Our Member Operations Group has reported that the delay in getting enough qualified candidates for the RBS I recruitment has led to a postponement of the date for our next CORE Benefits class.

The class was scheduled to begin in August and will now be delayed until October. The delays caused by the COVID-19 pandemic mean that we have had an interruption in the pipeline of trained staff to fill the RBS II positions in Benefits and Member Services.

Much of this delay is due to the inability to test applicants in compliance with Civil Service requirements for much of 2020 and into early 2021. However, that delay has been compounded by a slower than expected response to our recruitment efforts. As we process promotions for higher level positions with the Member Operations Group, we will also see more vacancies at the RBS II level.

As a result, existing staffing shortages in Member Services are expected to continue throughout the remainder of 2021 and into 2022, possibly impacting our March Madness season. These shortages will impact our Member Services Call Center and Member Service Center the most. The shortages may lead to wait times slightly longer and a lower than optimal number of in-person and virtual counseling sessions. Our management team is constantly reviewing workloads and working together to limit the impact as much as possible by offering overtime, looking for process improvements, evaluating procedures that reduce processing times, creating improved self-service options, and employing temporary staff where possible.

Retiree Healthcare – Bi-Annual Staying Healthy Together - Wellness Event

Given the uncertainty of the return to in person events due to COVID-19, rather than focusing on returning to LACERA's in-person Wellness events at this time, the RHC team and Segal are currently in discussion with each of our health plan vendor partners about the feasibility of providing interactive virtual wellness events for our members. This would be the first of its kind for LACERA, but given the timing and current COVID-19 status we believe there is no better time to introduce members to something new. By offering virtual wellness events, we are hoping to engage our members and provide them with valuable health and wellness information that will improve their quality of life and result in more favorable claims experience. The virtual health event would consist of various speakers and webinars on different topics provided by our health plan partners for members to peruse at their leisure. Virtual events and health related webinars will provide the opportunity for **all** retirees to be included, not just those who reside locally in California. As our discussion progresses and we have more information, staff will share that information with the Board.

New CEO Report Feature: Outstanding RFI/RFP Quiet Periods & Investment

Based on Trustee requests expressed during the recent Joint Organizational Governance Committee meeting, we have added a new section to the CEO Report: "Quiet Period List – Current Active Quiet Period List for Non-Investments." This provides a complete list of ongoing administrative (non-investment related) RFI/RFP, that will help Trustees remain informed on which requests are currently in the Quiet Period phase of the search. This is the phase where

July 28, 2021

Page 8

LACERA staff and Trustees are prohibited from interacting with the potential vendors outside of the formal solicitation process in order to preserve the integrity and fairness of the search and selection of qualified vendors. The new section will appear after the CEO Dashboard on an ongoing basis.

SHK:jp

CEO report Jul 2021.doc

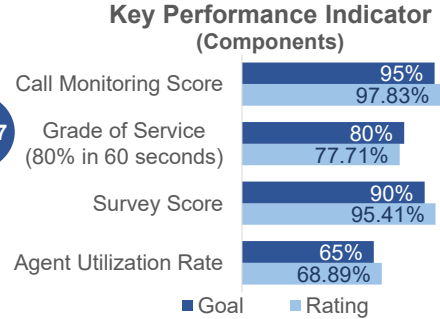
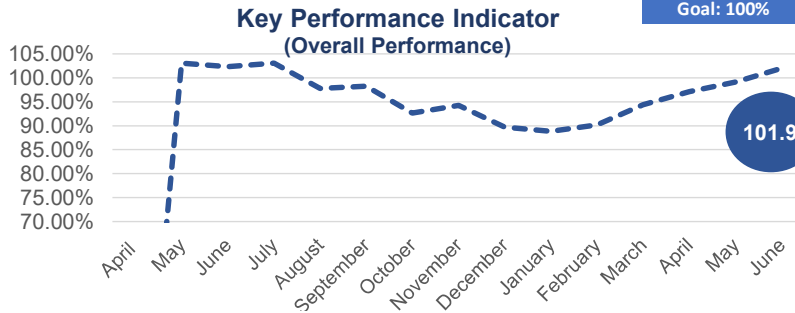
Attachments

Striving for Excellence in Service

Service Metrics Reported on a Fiscal Year Basis (July 1) Through: June 2021

<p>Outreach Attendance 1,338 18,944 Year-to-Date</p>	<p>Outreach Events 19 261 Year-to-Date</p>	<p>Outreach Satisfaction N/A Change Since Last Mo</p>	<p>Member Service Center N/A - Change Since Last Mo</p>	<p>Member Services Calls 12,615 13,149 3 Mo. Avg.</p>
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Member Services

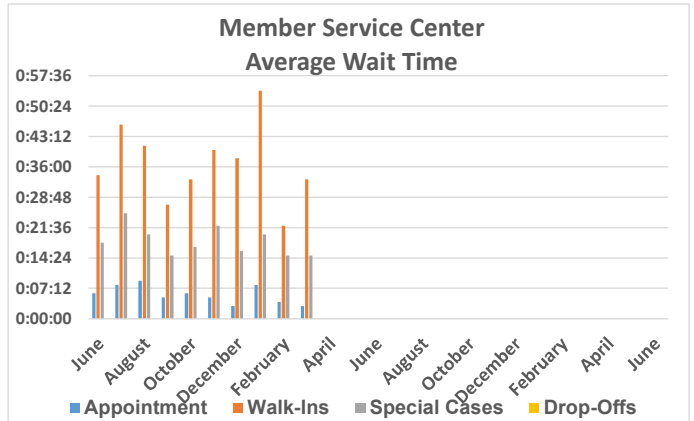
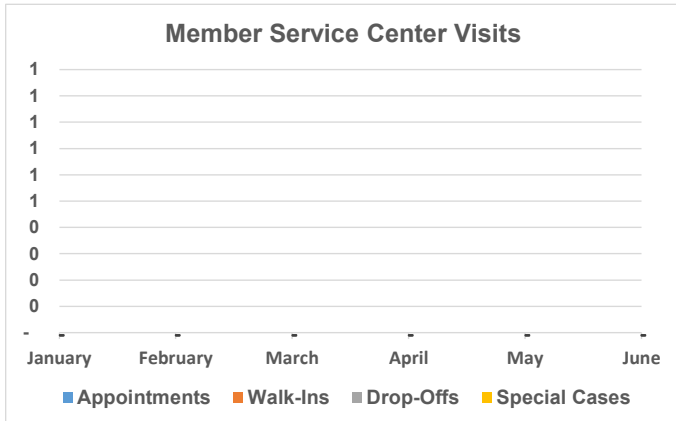


1. Retirement Counseling: Process Overview
2. MyLACERA Portal Login Issues
3. Retirement Counseling: Estimate



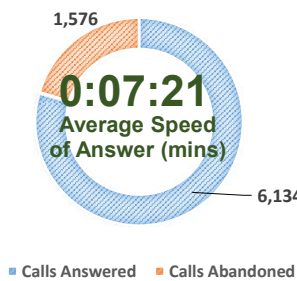
Emails **663**
24:00 hours
Avg. Response Time (ART)

Secure Messages **670**

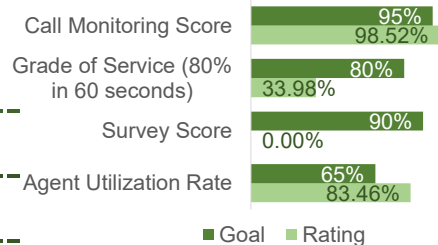


Retiree Healthcare

Total RHC Calls: 7,710



- Top Calls**
1. Medical/Dental Enrollments
 2. Medical Benefits
 3. Medicare Part B Reimbursements



Emails **403**
10 Days
Avg. Response Time (ART)

Secure Messages **293**

Striving for Excellence in Service (Continued)

Disability

Applications

711

In Process As Of: 6/30/2021

712 Pending on: 5/31/2021
 67 Received
 694 Year-to-Date
 0 Re-Opened
 0 Year-to-Date
 61 To Board - Initial
 558 Year-to-Date
 7 Closed
 68 Year-to-Date

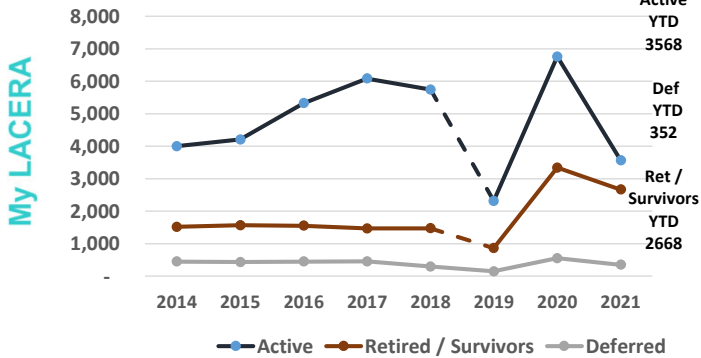
Appeals

96

In Process As Of: 6/30/2021

95 Pending on: 5/31/2021
 4 Received
 17 Year-to-Date
 3 Admin Closed/Rule 32
 12 Year-to-Date
 0 Referee Recommended
 7 Year-to-Date
 0 Revised/Reconsidered for Granting
 1 Year-to-Date

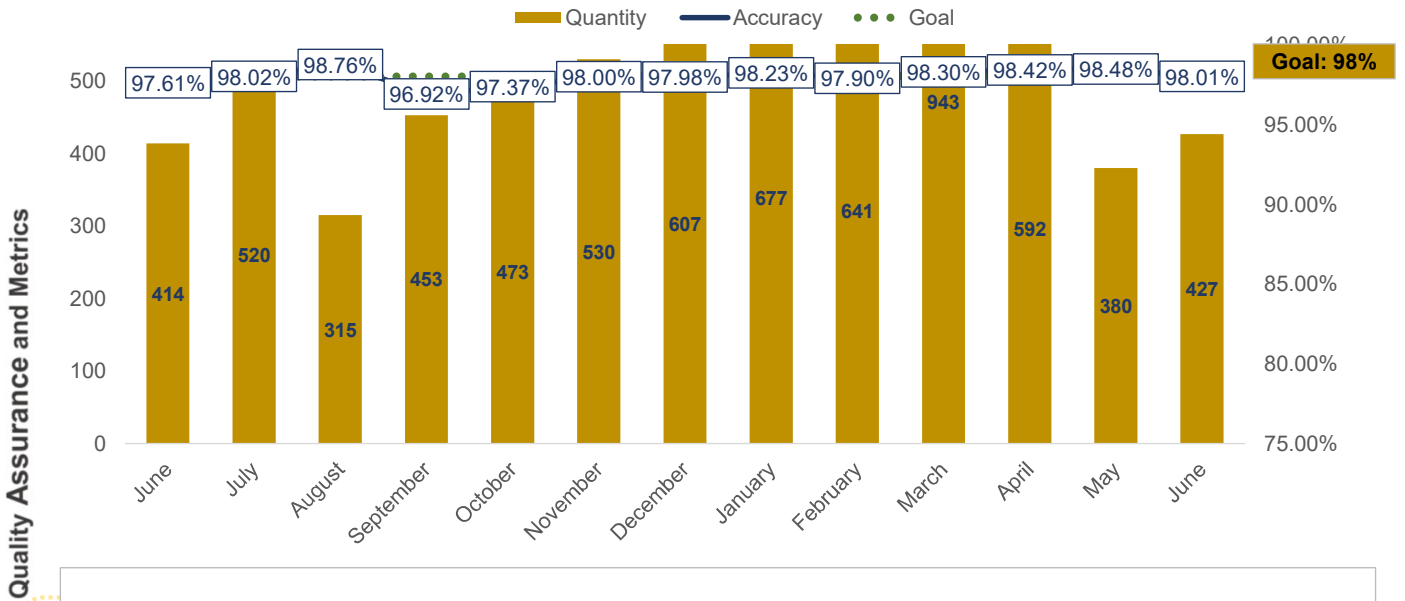
My LACERA Registrations



COVID-19 NOTE
 Some Member Services, Retiree Healthcare, and Quality Assurance statistics became unavailable for a short time beginning in April 2020 due to COVID-19 impacts. Most of the data contained herein is up to date and based on current production both virtually and in the office. However, some data points such as surveys are based on six month average for survey scores prior to the pandemic.

Striving for Excellence in Quality

Audits of Retirement Elections, Payment Contracts, and Data Entry Completed by QA



June 2021



98.01%

Retirement Elections

169 Samples
96.73% Accuracy

Payment Contracts

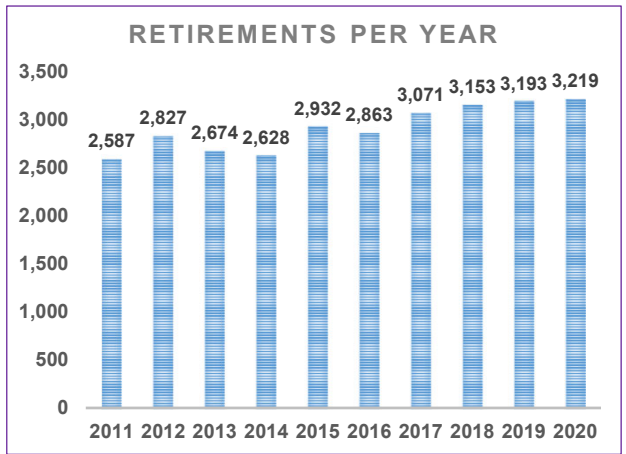
168 Samples
97.96% Accuracy

Data Entry

90 Samples
99.33% Accuracy

Member Snapshot

	Members as of 07/15/2021				
	Plan	Active	Retired	Survivors	Total
General	Plan A	71	14,814	4,263	19,148
	Plan B	19	659	66	744
	Plan C	24	423	66	513
	Plan D	38,147	18,261	1,690	58,098
	Plan E	15,245	14,207	1,392	30,844
	Plan G	32,348	108	10	32,466
	Total General	85,854	48,472	7,487	141,813
Safety	Plan A	2	4,794	1,629	6,425
	Plan B	8,655	6,927	350	15,932
	Plan C	4,471	14	1	4,486
	Total Safety	13,128	11,735	1,980	26,843
TOTAL MEMBERS	98,982	60,207	9,467	168,656	
% by Category	59%	36%	6%	100%	



Average Monthly Benefit Allowance Distribution July 23, 2021

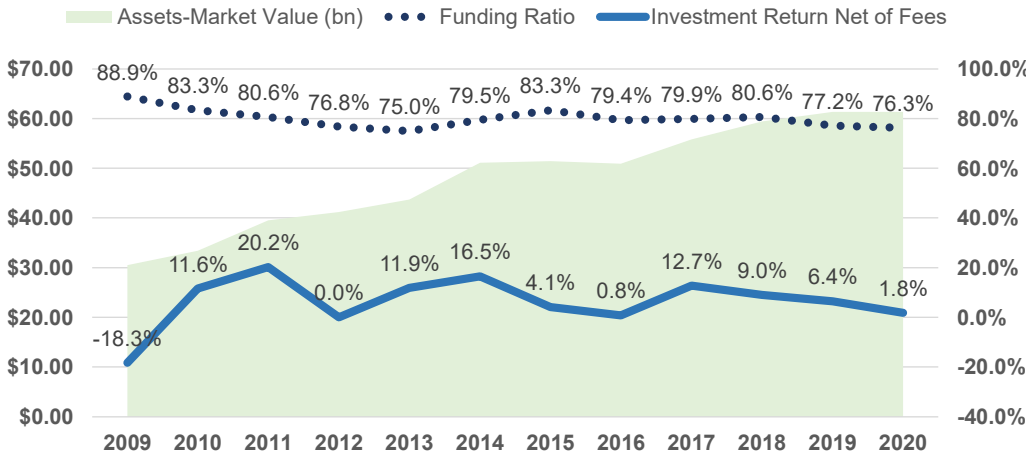
	General	Safety	Total	%
\$0 to \$3,999	29,840	1,703	31,543	52.51%
\$4,000 to \$7,999	13,397	3,472	16,869	28.08%
\$8,000 to \$11,999	3,649	4,267	7,916	13.18%
\$12,000 to \$15,999	998	1,779	2,777	4.62%
\$16,000 to \$19,999	327	347	674	1.12%
\$20,000 to \$23,999	100	114	214	0.36%
\$24,000 to \$27,999	24	27	51	0.08%
> \$28,000	18	3	21	0.03%
Totals	48,353	11,712	60,065	100%

Average Monthly Benefit Allowance: \$ 4,566.00

Healthcare Program		Healthcare Enrollments	
(Mo. Ending: 06/30/2021)		(Mo. Ending: 06/30/2021)	
	Employer	Member	
Medical	568.0	44.0	Medical 52,764
Dental	45.6	4.5	Dental 54,197
Part B	75.6	0	Part B 36,015
Total	689.2	48.5	Total 143,548

Key Financial Metrics

Fiscal Year End Financial Update (as of 06/30/2020)



Funding Metrics (as of 6/30/20)

Employer NC	10.89%
UAAL	14.85%
Assumed Rate	7.00%
Star Reserve	\$614m
Total Assets	\$58.5b

Contributions (as of 6/30/20)

	Employer	Member
Annual Add	\$1.8b	\$659.3m
% of Payroll	24.64%	7.80%

TOTAL FUND RETURN (Net of Fees)

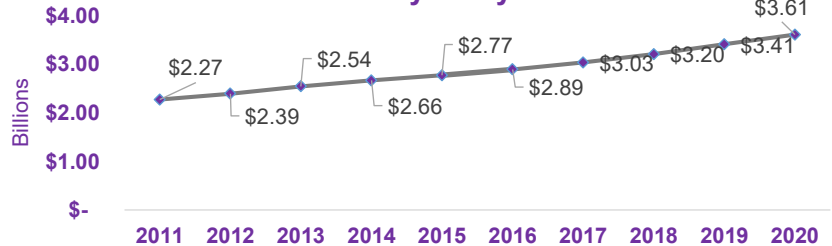
5 YR: 6.1% 10 YR: 8.2%

Retired Members Payroll

(As of 06/30/2021)

Monthly Payroll	\$329.12m
Payroll YTD	\$3.8b
New Retired Payees Added	267
Seamless %	98.13%
New Seamless Payees Added	4,657
Seamless YTD	97.27%
By Check %	2.00%
By Direct Deposit %	98.00%

Retiree Payroll by Year



QUIET PERIOD LIST
Current Active Quiet Period List for Non-Investments

RFP/RFI Name	Issuing Division	RFP Issued	Status*	Quiet Period for RFP Respondents
Consulting Services to Aid in Design, Procurement, and Implementation of a Budget Application	Administrative Services/ Systems	June 15, 2021	Bid Review	<ul style="list-style-type: none"> • Plante Moran • SDI Presence • RSM • Armanino • BPM Partners
Search for Classification and Compensation Study Services (HR)	Human Resources	May 24, 2021	Bid Review	<ul style="list-style-type: none"> • Koff and Associates • Magnova Consultant • Grant Thornton • Reward Strategy Group
Search for Classification and Compensation Study Services (RHC)	Human Resources	May 24, 2021	Bid Review	<ul style="list-style-type: none"> • Koff and Associates • Magnova Consultant • Grant Thornton • Reward Strategy Group
Agenda Management, Livestream, Recording, and Archiving	Board Offices	April 16, 2021	Vendor Selection	<ul style="list-style-type: none"> • Granicus • Diligent iCompass • PrimeGov • eSCRIBE • Hyland • Provox Systems
Contract Lifecycle Management Application	Administrative Services/ Systems	February 16, 2021	Vendor Review	<ul style="list-style-type: none"> • Icertis • Cobblestone • Ageloft • Iron Clad • SmartSheet
Automated Accounts Payable/Travel Application	Administrative Services/ FASD/ Systems	April 2, 2021	Vendor Selection	<ul style="list-style-type: none"> • Emburse • SAP Concur

*Subject to change

**Does not include Investments related vendor searches

Date	Conference
August, 2021	
22-24	NCPERS (National Conference on Public Employee Retirement Systems) Public Pension Funding Forum New York, NY
September, 2021	
17	CALAPRS (California Association of Public Retirement Systems) Round Table – Benefits Virtual (<i>subject to change in venue</i>)
21-24	AHIP (America’s Health Insurance Plans) National Conferences on Medicare, Medicaid and Dual Eligibles Virtual
22-24	National Association of Securities Professionals (NASP) 32 nd Annual Pension & Financial Services Conference Virtual
22-24	Council of Institutional Investors (CII) Fall Conference Virtual/Limited In-Person Attendance
23-25	Duke University Executive Education Program – Corporate Social Responsibility Durham, NC
26-28	NCPERS (National Conference on Public Employee Retirement Systems) FALL (Financial, Actuarial, Legislative & Legal) Conference Scottsdale, AZ
28 – 30	CALAPRS (California Association of Public Retirement Systems) Principles of Pension Governance for Trustees Virtual (<i>subject to change in venue</i>)
October, 2021	
11-15	Investment Strategies & Portfolio Management (<i>prev. Pension Fund & Investment Mgmt.</i>) Wharton School, University of Pennsylvania
17-20	IFEBP (International Foundation of Employment Benefit Plans) Annual Employee Benefits Conference Denver, CO
17-20	Milken Institute Global Conference Los Angeles, CA
25-27	PREA (Pension Real Estate Association) Annual Institutional Investor Conference Chicago, IL
25-27	ICGN (International Corporate Governance Network) Annual Conference Toronto, Canada
29	CALAPRS (California Association of Public Retirement Systems) Round Table – Trustees Virtual (<i>subject to change in venue</i>)



July 19, 2021

TO: Trustees, Board of Retirement

FOR: Board of Retirement Meeting on August 4, 2021

SUBJECT: Ratification of Service Retirement and Survivor Benefit Application Approvals

The attached report reflects service retirements and survivor benefit applications received as of the date of this memo, along with any retirement rescissions and/or changes approved at last month's Board meeting. Any retirement rescissions or changes received after the date of this memo up to the date of the Board's approval, will be reflected in next month's report.

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

SAFETY MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
DEREK M. ALKONIS	L A COUNTY FIRE DEPT Dept.#FR	08-01-2021	30 YRS 09½ MOS
MARIO CASTRO	SHERIFF Dept.#SH	07-31-2021	31 YRS 09½ MOS
STEFAN E. CHRISTOPHER	SHERIFF Dept.#SH	07-31-2021	33 YRS 10½ MOS
JOHN D. DINGER	L A COUNTY FIRE DEPT Dept.#FR	06-26-2021	29 YRS 08 MOS
STEVEN W. DODSON	SHERIFF Dept.#SH	07-30-2021	29 YRS 11 MOS
HENRI J. FLORIS	SHERIFF Dept.#SH	07-30-2021	30 YRS 01 MOS
CARLOS GUTIERREZ	L A COUNTY FIRE DEPT Dept.#FR	07-15-2021	30 YRS 04 MOS
RANDY L. HASNAS	SHERIFF Dept.#SH	07-31-2021	32 YRS ½ MOS
ROBERT M. JUSTIN	SHERIFF Dept.#SH	07-30-2021	29 YRS 10 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

SAFETY MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
RYAN K. LIBE	SHERIFF Dept.#SH	07-31-2021	30 YRS 03½ MOS
RICHARD A. MARTINEZ	SHERIFF Dept.#SH	07-31-2021	33 YRS ½ MOS
DAVID V. MERTENS	SHERIFF Dept.#SH	07-31-2021	37 YRS 04½ MOS
CHRISTOPHER C. MORGAN	SHERIFF Dept.#SH	07-09-2021	21 YRS 05½ MOS
WILLIAM R. MURRAY	SHERIFF Dept.#SH	06-30-2021	34 YRS 01 MOS
STEVEN A. PEREZ	SHERIFF Dept.#SH	07-12-2021	34 YRS 02½ MOS
FREDERICK M. SANDOVAL	L A COUNTY FIRE DEPT Dept.#FR	07-31-2021	30 YRS 06½ MOS
RONALD J. SMITH	SHERIFF Dept.#SH	06-21-2021	30 YRS 03 MOS
THOMAS R. SOSA JR	L A COUNTY FIRE DEPT Dept.#FR	07-31-2021	33 YRS 02½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

SAFETY MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
STEVE D. STURDIVANT	L A COUNTY FIRE DEPT Dept.#FR	07-31-2021	27 YRS 04½ MOS
RODNEY A. WAGNER	SHERIFF Dept.#SH	07-24-2021	33 YRS 03 MOS
ERIC G. WRIGHT	L A COUNTY FIRE DEPT Dept.#FR	07-30-2021	31 YRS 09 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
LUIS O. ACOSTA JR	SHERIFF Dept.#SH	07-23-2021	25 YRS 04 MOS
ELLAHEH ANDERSON	PUBLIC HEALTH PROGRAM Dept.#PH	06-15-2021	36 YRS 05½ MOS
PERLA ARQUIETA	PARKS AND RECREATION Dept.#PK	07-30-2021	14 YRS 00 MOS
CARLOS ARREDONDO	PROBATION DEPARTMENT Dept.#PB	07-31-2021	21 YRS 07½ MOS
JOSEPHINE ARRIAGA	WORKFORCE DEV AGING & COMM SVC Dept.#CS	06-16-2021	41 YRS 02 MOS
YEE N. AU	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-01-2021	23 YRS 05½ MOS
ROBERT L. BAKER JR	PROBATION DEPARTMENT Dept.#PB	07-31-2021	16 YRS ½ MOS
YOLANDA B. BAUTISTA	PROBATION DEPARTMENT Dept.#PB	07-31-2021	36 YRS 06½ MOS
BURDELL W. BEAMAN J R	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	06-18-2021	31 YRS 07 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
SHARVAN BHATIA	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	07-31-2021	30 YRS 09 MOS
KARIN L. BONWITT	MENTAL HEALTH Dept.#MH	07-31-2021	17 YRS ½ MOS
DEBRA A. BRYANT	COASTAL CLUSTER-HARBOR/UCLA MC Dept.#HH	06-30-2021	34 YRS 07 MOS
DEBRA M. BURNETT	CHILDREN & FAMILY SERVICES Dept.#CH	07-31-2021	28 YRS 04½ MOS
EVELYN A. BURNS	ALTERNATE PUBLIC DEFENDER Dept.#AD	07-17-2021	31 YRS 03 MOS
RAINIER A. CASTILLO	SHERIFF Dept.#SH	07-31-2021	31 YRS 10½ MOS
MONICA L. CASTRO	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	19 YRS 09½ MOS
ZALDY CATEDRILLA	PUBLIC HEALTH PROGRAM Dept.#PH	07-28-2021	30 YRS 02 MOS
RAY CAUSLY	PROBATION DEPARTMENT Dept.#PB	06-30-2021	34 YRS 09 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
BINH N. CHAN	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-15-2021	42 YRS 04½ MOS
SHUN WEN CHIANG	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	06-30-2021	27 YRS 06 MOS
RAY CHILDERS	AUDITOR - CONTROLLER Dept.#AU	07-15-2021	20 YRS 04½ MOS
DOLORES M. CHUCK	PUBLIC HEALTH PROGRAM Dept.#PH	06-30-2021	36 YRS 06 MOS
RICARDO E. COULTER	COASTAL CLUSTER-HARBOR/UCLA MC Dept.#HH	06-30-2021	33 YRS 05 MOS
WILLIAM COULTER	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	06-03-2021	26 YRS 01½ MOS
JOHN W. CRUSE	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	30 YRS 07½ MOS
ALLEN M. CUMMINS	INTERNAL SERVICES Dept.#IS	07-31-2021	20 YRS ½ MOS
MARYLOU R. CUSTODIO	COASTAL CLUSTER-HARBOR/UCLA MC Dept.#HH	07-31-2021	25 YRS 08½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
ANNIE P. DAO	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	08-01-2021	30 YRS ½ MOS
DANIEL DAVINI	RANCHO LOS AMIGOS HOSPITAL Dept.#HR	07-31-2021	26 YRS 04½ MOS
CHERYL R. DAVIS	CHILD SUPPORT SERVICES Dept.#CD	07-30-2021	48 YRS 05½ MOS
DAVID H. DOAN	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	18 YRS 01½ MOS
EVELYN DOMINGUEZ-MA	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	34 YRS 10½ MOS
DENISE L. DUFLOTH	CHILDREN & FAMILY SERVICES Dept.#CH	07-31-2021	21 YRS 01½ MOS
MANUEL DURAND	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	07-31-2021	39 YRS 09½ MOS
VICKIE A. DYRNESS	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	06-30-2021	20 YRS 06 MOS
ERNESTO C. ENRIQUEZ	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	07-31-2021	21 YRS ½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
SANDRA R. ENSLOW	SHERIFF Dept.#SH	07-31-2021	34 YRS 09 MOS
SUZANNE M. ETCHEBERRIA	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	40 YRS 05½ MOS
KATHLEEN M. FIGUEROA	CHILD SUPPORT SERVICES Dept.#CD	07-31-2021	46 YRS 07½ MOS
VALERIE R. FLOOD	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	04-08-2021	36 YRS 09½ MOS
LAURA S. FLORES	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	05-22-2021	28 YRS 04 MOS
REBECCA L. FLORES	SUPERIOR COURT/COUNTY CLERK Dept.#SC	06-30-2021	37 YRS 08 MOS
LETICIA FLORES	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-31-2021	31 YRS 02½ MOS
VALERIE R. GABELICH	COASTAL CLUSTER-HARBOR/UCLA MC Dept.#HH	06-30-2021	15 YRS 09 MOS
FRANK R. GALINDO	SHERIFF Dept.#SH	08-31-2021	42 YRS 06½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
SYLVIA S. GARDUNO	SUPERIOR COURT/COUNTY CLERK Dept.#SC	06-26-2021	40 YRS 04 MOS
IRINA GARINA	CHILD SUPPORT SERVICES Dept.#CD	07-31-2021	22 YRS ½ MOS
BARRY I. GINSBERG	CHILDREN & FAMILY SERVICES Dept.#CH	07-31-2021	41 YRS 06½ MOS
SONIA P. GONZAGA	CORRECTIONAL HEALTH Dept.#HC	07-30-2021	31 YRS 03 MOS
GARY T. GOUGIS	MENTAL HEALTH Dept.#MH	07-31-2021	14 YRS ½ MOS
JEROME GOVAN JR	PROBATION DEPARTMENT Dept.#PB	06-28-2021	34 YRS 05 MOS
ANITA V. GOWING	HEALTH SERVICES ADMINISTRATION Dept.#HS	07-30-2021	12 YRS 05 MOS
NELLI GRIGORYAN	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-21-2021	21 YRS 02 MOS
VICTORIA P. GUARDADO	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	07-01-2021	28 YRS 11½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
CHRISTOPHER P. GUNN	L A COUNTY FIRE DEPT Dept.#FR	07-02-2021	20 YRS 05½ MOS
CHINWEN HANG	L A COUNTY FIRE DEPT Dept.#FR	07-01-2021	15 YRS 04½ MOS
AGAPITO A. HAO	DISTRICT ATTORNEY Dept.#DA	07-31-2021	33 YRS 06½ MOS
VERNETT L. HARRIS	CHILD SUPPORT SERVICES Dept.#CD	06-26-2021	41 YRS 11 MOS
MAXINE HARRISON	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-31-2021	41 YRS ½ MOS
A.D. HARVEY	INTERNAL SERVICES Dept.#IS	07-01-2021	27 YRS 03½ MOS
KAREN E. HENRY	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-31-2021	20 YRS 07½ MOS
MARITZA A. HERNANDEZ	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	25 YRS 06½ MOS
ROGELIO HERRERA	SHERIFF Dept.#SH	07-01-2021	22 YRS 08½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
EDUARDO P. HIPOLITO	ASSESSOR Dept.#AS	07-31-2021	30 YRS 00 MOS
PHONG HOANG	CHILD SUPPORT SERVICES Dept.#CD	07-31-2021	24 YRS 01½ MOS
ELOISE HOLLOWAY	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-31-2021	37 YRS 04½ MOS
MARY ANN HURST	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	23 YRS ½ MOS
NAI-LEN W. ISHIKAWA	TREASURER AND TAX COLLECTOR Dept.#TT	07-30-2021	35 YRS 09 MOS
GRISELDA C. JALLAD	MENTAL HEALTH Dept.#MH	06-30-2021	10 YRS 00 MOS
MI HWA JUN	AMBULATORY CARE NETWORK Dept.#HN	07-27-2021	20 YRS 05½ MOS
MELANIE A. KAHLER	SUPERIOR COURT/COUNTY CLERK Dept.#SC	06-30-2021	36 YRS 01 MOS
FRANCIA E. KAWAGUCHI	SFV CLUSTER-OLIVE VIEW/UCLA MC Dept.#HO	07-30-2021	21 YRS 08½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
MBAREK A. KHALIFA	PUBLIC WORKS Dept.#PW	06-30-2021	33 YRS 07 MOS
CYNTHIA LANE	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	07-31-2021	16 YRS 01 MOS
HAWAIDA I. LAUTFY	ASSESSOR Dept.#AS	07-31-2021	32 YRS 04½ MOS
LANETTE LAVENDER	SUPERIOR COURT/COUNTY CLERK Dept.#SC	06-30-2021	21 YRS 05 MOS
DONNA LEBOWITZ	DISTRICT ATTORNEY Dept.#DA	07-31-2021	37 YRS 01½ MOS
PETER S. LEE	PUBLIC HEALTH PROGRAM Dept.#PH	07-31-2021	26 YRS 01½ MOS
FLORENCE C. LIN	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	08-31-2021	21 YRS ½ MOS
ANDREW LOPEZ	PARKS AND RECREATION Dept.#PK	07-31-2021	21 YRS ½ MOS
DANIEL LOPEZ	L A COUNTY FIRE DEPT Dept.#FR	07-31-2021	31 YRS 01½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
ELSA LOPEZ	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-30-2021	27 YRS 00 MOS
BRICCIO R. MALAGUIT JR	PUBLIC HEALTH PROGRAM Dept.#PH	07-31-2021	20 YRS 08½ MOS
FREDERICK U. MARASIGAN	SHERIFF Dept.#SH	06-30-2021	21 YRS 01 MOS
DEBORAH L. MARSH	CHILDREN & FAMILY SERVICES Dept.#CH	07-01-2021	34 YRS 01½ MOS
LYDIA MARTINEZ	CHILD SUPPORT SERVICES Dept.#CD	07-02-2021	21 YRS 11½ MOS
CONLEY W. MCCANCE	CHILDREN & FAMILY SERVICES Dept.#CH	08-18-2021	19 YRS 08 MOS
ALEX M. MCSWEYN	WORKFORCE DEV AGING & COMM SVC Dept.#CS	07-15-2021	26 YRS 06½ MOS
RAMON A. MENDOZA	COASTAL CLUSTER-HARBOR/UCLA MC Dept.#HH	06-30-2021	24 YRS 09½ MOS
DEBORAH D. MYERS-JACKSO	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-31-2021	42 YRS 02 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
CLIFFORD J. NADER	PROBATION DEPARTMENT Dept.#PB	07-01-2021	27 YRS 01½ MOS
JOSE E. NAJAR	BEACHES & HARBORS Dept.#BH	07-31-2021	20 YRS 02½ MOS
RITA N. NWABUZO	CHILDREN & FAMILY SERVICES Dept.#CH	07-30-2021	26 YRS 00 MOS
LUIS OJEDA	PUBLIC WORKS Dept.#PW	07-31-2021	33 YRS 04½ MOS
SOO J. PAK	COASTAL CLUSTER-HARBOR/UCLA MC Dept.#HH	06-26-2021	35 YRS 06 MOS
CHARLES H. PALMER III	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-01-2021	43 YRS 05 MOS
JOHN W. PARKIN	PROBATION DEPARTMENT Dept.#PB	07-31-2021	27 YRS 04½ MOS
NICOLASA A. PARRA	AMBULATORY CARE NETWORK Dept.#HN	07-30-2021	20 YRS 00 MOS
VALERIE J. PAYNE	SFV CLUSTER-OLIVE VIEW/UCLA MC Dept.#HO	07-31-2021	30 YRS 02½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
PATRICIA P. PAZ	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	07-30-2021	21 YRS 07 MOS
TAMARA S. PENNINGTON	CHILDREN & FAMILY SERVICES Dept.#CH	07-31-2021	20 YRS 07½ MOS
JACQUELINE D. PEREZ	MENTAL HEALTH Dept.#MH	07-30-2021	40 YRS 03 MOS
RAUL L. PEREZ	SHERIFF Dept.#SH	06-25-2021	50 YRS 09 MOS
ERVIN PICKETT	INTERNAL SERVICES Dept.#IS	06-05-2021	45 YRS 09½ MOS
ROBERTO A. PONCE	AMBULATORY CARE NETWORK Dept.#HN	07-16-2021	15 YRS 07 MOS
DANIEL Z. QUINTANA	SHERIFF Dept.#SH	07-30-2021	41 YRS 02 MOS
LOIS L. RAMIREZ	SFV CLUSTER-OLIVE VIEW/UCLA MC Dept.#HO	07-31-2021	43 YRS 04½ MOS
DIANE Y. RATCLIFF	CHILD SUPPORT SERVICES Dept.#CD	07-30-2021	19 YRS 05½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
EMMA M. RAU	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	22 YRS 10½ MOS
ROSA M. REYES	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-31-2021	29 YRS 03½ MOS
STEVEN A. REYES	PUBLIC HEALTH PROGRAM Dept.#PH	07-16-2021	21 YRS 03 MOS
DAVID M. RICCITIELLO	BOARD OF SUPERVISORS Dept.#BS	06-30-2021	07 YRS 04½ MOS
PATRICIA M. ROBACK	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	35 YRS 08½ MOS
CHARLENE R. ROBINSON	CHILDREN & FAMILY SERVICES Dept.#CH	07-29-2021	46 YRS 04 MOS
SUZANNE RODARTE	CHILDREN & FAMILY SERVICES Dept.#CH	07-31-2021	33 YRS 04½ MOS
CARL RODRIGUEZ	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-30-2021	29 YRS 05 MOS
RACHEL RODRIGUEZ DE	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-30-2021	20 YRS 06 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
JULIE YEH RUAN	MENTAL HEALTH Dept.#MH	07-30-2021	12 YRS 06 MOS
THOMAS E. RUMFELT	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	08-31-2021	14 YRS 03½ MOS
BOYD W. RUSE	AGRICULTURAL COMM./WTS & MEAS. Dept.#AW	07-31-2021	31 YRS ½ MOS
SURACHAI SAENGCHARK	TREASURER AND TAX COLLECTOR Dept.#TT	07-31-2021	16 YRS ½ MOS
CAROL ANN SCOTT	CHILDREN & FAMILY SERVICES Dept.#CH	07-29-2021	34 YRS 05 MOS
GHASSAN A. SHELLEH	PUBLIC WORKS Dept.#PW	07-12-2021	30 YRS 04½ MOS
RICHARD SHIEH	PUBLIC WORKS Dept.#PW	07-21-2021	14 YRS 04 MOS
HAN J. SHIN	MENTAL HEALTH Dept.#MH	07-30-2021	17 YRS 01 MOS
ROBERT E. SIMMS II	SHERIFF Dept.#SH	07-08-2021	28 YRS 11½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
MARICRUZ SPINDOLA	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-31-2021	30 YRS 02½ MOS
SUSAN R. STEPHANS	PUBLIC DEFENDER Dept.#PD	07-31-2021	23 YRS 01½ MOS
RUDOLPH D. STOKES	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	06-30-2021	41 YRS 01 MOS
KENRICK D. STRAUGHAN	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-31-2021	14 YRS 06½ MOS
STUART SUEDE	SHERIFF Dept.#SH	08-13-2021	44 YRS ½ MOS
SUSAN C. TANNENBAUM	DISTRICT ATTORNEY Dept.#DA	07-31-2021	35 YRS 00 MOS
MARIAN THOMPSON	DISTRICT ATTORNEY Dept.#DA	07-31-2021	38 YRS 06½ MOS
MARIAN M. TOMITA	SFV CLUSTER-OLIVE VIEW/UCLA MC Dept.#HO	07-31-2021	10 YRS ½ MOS
YUSHAN K. TONG	PUBLIC HEALTH PROGRAM Dept.#PH	07-17-2021	31 YRS 10 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
SINH D. TRAN	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-31-2021	31 YRS 04½ MOS
LONG D. TRAN	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	07-30-2021	22 YRS 02 MOS
KAREN M. TRAN	PROBATION DEPARTMENT Dept.#PB	07-30-2021	16 YRS 02 MOS
ALISON TUFEL	MENTAL HEALTH Dept.#MH	07-31-2021	36 YRS 11½ MOS
VASILICA VALCU	CORRECTIONAL HEALTH Dept.#HC	08-04-2021	05 YRS 01½ MOS
MAREL R. VALDEZ	SFV CLUSTER-OLIVE VIEW/UCLA MC Dept.#HO	08-31-2021	31 YRS 11½ MOS
REYNALDO VALENCIA	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	07-30-2021	43 YRS 06 MOS
TOMAS M. VALLEJO	PROBATION DEPARTMENT Dept.#PB	07-31-2021	34 YRS 08½ MOS
OLIVIA VASQUEZ	BOARD OF SUPERVISORS Dept.#BS	07-02-2021	06 YRS 06½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
ARLENE F. VEGA	PUBLIC HEALTH PROGRAM Dept.#PH	07-31-2021	15 YRS 01½ MOS
ELDA U. VILLARROEL	LACERA Dept.#NL	07-30-2021	22 YRS 05 MOS
JULIE WAING	TREASURER AND TAX COLLECTOR Dept.#TT	07-31-2021	16 YRS 04½ MOS
PEBBLA J. WALLACE	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-31-2021	21 YRS 09½ MOS
SHARON WARD	COASTAL CLUSTER-HARBOR/UCLA MC Dept.#HH	07-31-2021	40 YRS 06½ MOS
DEBRA K. WEATHERS	RANCHO LOS AMIGOS HOSPITAL Dept.#HR	07-31-2021	37 YRS 04½ MOS
MARY C. WICKHAM	SUPERIOR COURT/COUNTY CLERK Dept.#SC	07-15-2021	26 YRS 02½ MOS
MARTIN G. WIELAND	ASSESSOR Dept.#AS	07-30-2021	37 YRS 01 MOS
TROY L. WILCHER	PROBATION DEPARTMENT Dept.#PB	07-15-2021	23 YRS 03 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
CAMERON A. WILLIAMS	NORTHEAST CLUSTER (LAC+USC) Dept.#HG	07-14-2021	18 YRS 07½ MOS
LECIL D. WILLS	CHILDREN & FAMILY SERVICES Dept.#CH	07-29-2021	06 YRS 02 MOS
JACOB R. WILSON SR	AMBULATORY CARE NETWORK Dept.#HN	06-27-2021	25 YRS 03 MOS
CONSTANCE M. WOODLAND	CHILDREN & FAMILY SERVICES Dept.#CH	07-08-2021	28 YRS 05½ MOS
MYRNA YOUNG	CORRECTIONAL HEALTH Dept.#HC	07-31-2021	20 YRS 03½ MOS
ANTONETTE L. YWAYAN	DISTRICT ATTORNEY Dept.#DA	06-30-2021	12 YRS 10 MOS
SUSAN ZABALA	DISTRICT ATTORNEY Dept.#DA	06-26-2021	31 YRS 04 MOS
GUY ZELENSKI	AUDITOR - CONTROLLER Dept.#AU	07-31-2021	43 YRS 06½ MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

SAFETY SURVIVOR APPLICATIONS

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
HEIDI K. CARLON WIFE of TORY B CARLON dec'd on 06-01-2021, Sect. #31781.1	L A COUNTY FIRE DEPT Dept.#FR	06-02-2021	21 YRS ½ MOS
ERIK E. FLORIN HUSBAND of LARA A DAMOLE dec'd on 02-20-2021, Sect. #31781.1	SHERIFF Dept.#SH	02-21-2021	21 YRS 03 MOS
KYE RODRIGUEZ SON of FELIX J RODRIGUEZ dec'd on 10-18-2012, Sect. #31781.3	SHERIFF Dept.#SH	10-19-2012	06 YRS 01 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL SURVIVOR APPLICATIONS

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
TUHINKANA DAS WIFE of SANKAR P DAS dec'd on 05-17-2021, Sect. #31781.1	MENTAL HEALTH Dept.#MH	05-18-2021	24 YRS 10 MOS
ED DIMAANO HUSBAND of MA CRISTINA J DIMAANO dec'd on 12-17-2020, Sect. #31781.3	MENTAL HEALTH Dept.#MH	12-18-2020	24 YRS 00 MOS
MARIVIC S. HA WIFE of VIET T HA dec'd on 11-24-2020, Sect. #31781.3	PUBLIC HEALTH PROGRAM Dept.#PH	11-25-2020	24 YRS 00 MOS
KAISER SOTO SON of EVELYN M PLASCENCIA dec'd on 08-17-2015, Sect. #31781.1	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	08-18-2015	09 YRS 05 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

SAFETY MEMBER APPLICATIONS FOR: SERVICE RETIREMENT FROM DEFERRED

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
RUBEN SEMERENA	SHERIFF Dept.#SH	06-19-2021	15 YRS 05 MOS
MICHAEL G. SHEPPARD	L A COUNTY FIRE DEPT Dept.#FR	07-01-2021	12 YRS 10 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT FROM DEFERRED

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
CRISANTA C. ARANDIA	AUDITOR - CONTROLLER Dept.#AU	05-19-2021	16 YRS 03 MOS
ANITA K. BARRON	SUPERIOR COURT/COUNTY CLERK Dept.#SC	06-21-2021	42 YRS ½ MOS
ANNABELLE A. BAUTISTA	CORRECTIONAL HEALTH Dept.#HC	08-06-2021	10 YRS 01½ MOS
LYNNDA A. BRICE	RANCHO LOS AMIGOS HOSPITAL Dept.#HR	06-30-2021	08 YRS 03 MOS
JOSE A. CASTRO	INTERNAL SERVICES Dept.#IS	05-08-2021	40 YRS ½ MOS
YOUSSEF J. CHEBABI	PUBLIC WORKS Dept.#PW	06-04-2021	30 YRS 10½ MOS
KISHA L. COLEMAN	PROBATION DEPARTMENT Dept.#PB	06-30-2021	22 YRS 03½ MOS
ALFRED COLETTA	DISTRICT ATTORNEY Dept.#DA	06-30-2021	37 YRS 09½ MOS
RAQUEL COX	SHERIFF Dept.#SH	06-30-2021	12 YRS 09 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT FROM DEFERRED

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
CHRISTOPHE A. DARDEN	DISTRICT ATTORNEY Dept.#DA	05-01-2021	15 YRS 02 MOS
THOMAS J. DOMINY		06-05-2021	10 YRS 09 MOS
TRACEY L. EVANS LYNCH	CHILDREN & FAMILY SERVICES Dept.#CH	10-22-2020	11 YRS 01 MOS
MARY J. GUILLERMO	CHILDREN & FAMILY SERVICES Dept.#CH	06-24-2021	28 YRS ½ MOS
KAREN E. HARRELL GLAS	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	06-23-2021	13 YRS 04 MOS
CAY J. HAYNE	LACERA Dept.#NL	07-01-2021	09 YRS 02 MOS
HRACH ISRAELIAN	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	06-07-2021	32 YRS 02 MOS
RICHARD D. JOHNSON	SUPERIOR COURT/COUNTY CLERK Dept.#SC	06-16-2021	11 YRS 00 MOS
RONNA A. JOSEPH	CALIFORNIA CHILDREN'S SERVICES Dept.#PS	07-01-2021	14 YRS 10 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT FROM DEFERRED

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
MELODY C. KAZAN	SHERIFF Dept.#SH	06-15-2021	06 YRS 11 MOS
JOHN T. LOVE	PUBLIC DEFENDER Dept.#PD	06-25-2021	26 YRS 04 MOS
BRIDGET MAHON WYATT	Dept.#521	06-04-2021	12 YRS 08 MOS
JAMES M. METCALF III	PROBATION DEPARTMENT Dept.#PB	07-06-2012	11 YRS 07 MOS
WARREN E. MILLER	SUPERIOR COURT/COUNTY CLERK Dept.#SC	06-15-2021	25 YRS 03 MOS
LANA R. MOORE	SUPERIOR COURT/COUNTY CLERK Dept.#SC	06-01-2021	12 YRS 08 MOS
AMIRA A. NADIR	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	06-09-2021	14 YRS 05 MOS
GLENN A. NEWTON	AGRICULTURAL COMM./WTS & MEAS. Dept.#AW	05-15-2021	06 YRS 07 MOS
RUBIYA NUR	PUBLIC DEFENDER Dept.#PD	06-17-2021	06 YRS 03 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT FROM DEFERRED

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
MICHAEL ORFANIDES	COASTAL CLUSTER-HARBOR/UCLA MC Dept.#HH	06-22-2021	11 YRS 00 MOS
CHARLES I. PEVEY	HEALTH SERVICES ADMINISTRATION Dept.#HS	06-20-2021	14 YRS 02 MOS
KIM N. PHAN	SFV CLUSTER-OLIVE VIEW/UCLA MC Dept.#HO	06-03-2021	05 YRS 03 MOS
DELFA QUINTERO	DEPT OF PUBLIC SOCIAL SERVICES Dept.#SS	06-03-2021	41 YRS 06½ MOS
MARTHA E. RODRIGUEZ	SHERIFF Dept.#SH	07-02-2021	13 YRS 10½ MOS
STEVE ROJAS JR	SHERIFF Dept.#SH	06-01-2021	07 YRS 11 MOS
STACEY M. ROUX	INTERNAL SERVICES Dept.#IS	05-28-2021	16 YRS 11 MOS
JOSEPHINE R. SOLARES	AMBULATORY CARE NETWORK Dept.#HN	06-30-2021	31 YRS 03 MOS
SANDY S. SYAIFULAH	SHERIFF Dept.#SH	06-30-2021	06 YRS 07 MOS

BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021

BENEFIT APPROVAL LIST

GENERAL MEMBER APPLICATIONS FOR: SERVICE RETIREMENT FROM DEFERRED

<u>NAME</u>	<u>DEPARTMENT</u>	<u>RETIRED</u>	<u>SERVICE</u>
ARMEN A. VARTANIAN	L A COUNTY FIRE DEPT Dept.#FR	07-31-2021	05 YRS 11 MOS
SHAWN Y. WALLACE	BOARD OF SUPERVISORS Dept.#BS	06-08-2021	06 YRS 10 MOS
LISA R. WASHINGTON	PUBLIC DEFENDER Dept.#PD	06-23-2021	30 YRS 07 MOS
LAUREN D. WASHINGTON-C	CHILD SUPPORT SERVICES Dept.#CD	06-04-2021	07 YRS 05 MOS

**BOARD OF RETIREMENT MEETING OF AUGUST 4, 2021
RESCISSIONS/CHANGES FROM BENEFIT APPROVAL LIST
APPROVED ON JULY 7, 2021**

GENERAL MEMBER APPLICATIONS FOR SERVICE RETIREMENT

NAME	DEPARTMENT	UPDATE
VANNESSA L ESPY	DEPT OF PUBLIC SOCIAL SERVICES	RESCINDED RETIREMENT
SUK P CHONG	PUBLIC WORKS	CHANGE OF DATE TO June 22, 2021



July 16, 2021

TO: Each Trustee
Board of Retirement

FROM: Insurance, Benefits & Legislative Committee
Les Robbins, Chair
Vivian H. Gray, Vice President
Shawn R. Kehoe
Ronald A. Okum
Wayne Moore, Alternate

FOR: August 4, 2021 Board of Retirement Meeting

SUBJECT: TWO-YEAR EXTENSION REQUEST FOR RETIREE HEALTHCARE BENEFITS CONSULTING SERVICES CONTRACT FOR THE PERIOD OF JULY 1, 2022 THROUGH JUNE 30, 2024

RECOMMENDATION

The Board of Retirement approve an extension of the Retiree Healthcare Benefits Consulting contract with Segal Consulting for the period of July 1, 2022 through June 30, 2024.

BACKGROUND

Since the inception of the LACERA-administered Retiree Healthcare Benefits Program in 1970, the Board of Retirement has utilized the services of an insurance consultant in the area of plan design, program evaluation, rate renewals, selection of carriers (when necessary), and the design and production of communications for participants.

Most recently, in 2016, through a competitive bid process, the Board of Retirement at its meeting of January 12, 2017, selected Segal Consulting to provide Retiree Healthcare Consulting Services. The contract is for a five (5) year period beginning July 1, 2017 and ending June 30, 2022.

This past year has been a very active and busy one for LACERA. In addition, the healthcare landscape has become more complex than it has ever been with a lot of uncertainty as to what changes are in the making with Medicare and our senior population. Additionally, we have many projects on our agenda for the coming year. Therefore, staff believes that it is very important to have consistency and a trusting collaborative relationship with the people we are working with to assist us in making the right decisions for our members.

The projects we are currently involved in and have scheduled are:

- Anthem Blue Cross \$1 Million Lifetime maximum
- Retiree Healthcare Disability Reciprocity
- Kaiser Rate Structure
- Dual Coverage
- 2022-2023 healthcare premium contract renewal negotiations
- Board of Supervisors approval of the Medicare Part B Reimbursement Program
- Development of RHC Customer Service training manual
- Implementing provisions of federal legislation
- Continuing to network and collaborate with carriers, vendors, national organizations, and federal agencies involved in retiree healthcare
- We are monitoring the transition incentives occurring in the healthcare landscape from fee form service to value based models

Over the last four years, Segal Consulting has been providing LACERA with high-level service during our annual healthcare premium contract renewal negotiations, monthly carrier reports, RDS actuarial attestation, OPEB valuation, and other technical healthcare industry questions. Segal's team is always been collaborative with staff and Trustees and they are meticulous with meeting all set deadlines.

CONCLUSION

This past year has been a very active and busy one for LACERA. We implemented remote working capabilities and servicing members using more technology than ever. In addition, Retiree Healthcare also began working with our health plans toward being able to submit our enrollment and eligibility files electronically.

Segal Consulting is already familiar with the uniqueness of our Retiree Healthcare Program, as well as the benefits and claims experience. We have critical projects in process and scheduled that would best be served having a firm familiar with our program to continue through the completion of most of these projects accurately and as efficiently as possible.

Board of Retirement
July 16, 2021
Page 3 of 3

IT IS THEREFORE RECOMMENDED THAT the Board of Retirement approve an extension of the Retiree Healthcare Benefits Consulting contract with Segal Consulting for the period of July 1, 2022 through June 30, 2024.

Attachments:
Fee Proposals



Stephen Murphy
Vice President
smurphy@segalco.com

500 North Brand Boulevard
Suite 1400
Glendale, CA 91203-3338
segalco.com

May 18, 2021

Cassandra Smith
Director, Retiree Healthcare
LACERA
300 N. Lake Avenue, Suite 300
Pasadena, CA 91101

Re: LACERA – Contract Extension

Dear Cassandra,

On behalf of the entire Segal team, we are excited to submit for your consideration our proposed extension of the Retiree Healthcare Benefits Consulting Services contract with LACERA.

We propose continuing the existing scope of services at the current annual fixed fee of \$741,600, invoiced monthly in arrears, for the periods:

- 7/1/2022 – 6/30/2023
- 7/1/2023 – 6/30/2024

We look forward to discussing our proposal with you at your convenience and finalizing a mutually agreeable contract extension.

Sincerely,

A handwritten signature in blue ink, appearing to read "S. Murphy", written over a light blue horizontal line.

Stephen Murphy
Vice President



July 21, 2021

TO: Each Trustee,
Board of Retirement
Board of Investments

FROM: Joint Organizational Governance Committee
Shawn Kehoe, Chair
Elizabeth Greenwood, Vice Chair
Alan Bernstein
Vivian H. Gray
Keith Knox
Les Robbins
Herman B. Santos
Joseph Kelly

FOR: August 4, 2021 Board of Retirement Meeting
August 11, 2021 Board of Investments Meeting

SUBJECT: Media Artist Classification/Compensation Changes

RECOMMENDATIONS

That the Board of Retirement and Board of Investments approve for implementation the recommended proposed classification changes for the existing Media Artist classification.

That the Board of Retirement and Board of Investments approve for implementation the recommended proposed classification and compensation changes for the creation of a new Senior Media Artist classification.

SUMMARY OF PROPOSED CLASSIFICATION AND COMPENSATION CHANGES

Current Classification Title	Current Sal Sch	Proposed Classification Title	Proposed Sal Sch
NEW	N/A	Senior Media Artist, LACERA	103B NMO

The recommended title and salary range serves to preserve LACERA's current pay differential practice to ensure appropriate internal equity.

The authority to implement the proposed new classification rests jointly with the Board of Retirement and Board of Investments. Such authority is provided in the California Government Code Sections 31522.1, 31522.2, and 31522.4, and will require the County Board of Supervisors (BOS) to amend the Salary Ordinance.

EXECUTIVE SUMMARY

Background

On April 16, 2015, Communications Division (Communications) requested a classification study of two (2) Media Artist, LACERA (Item No. 0789) positions because the duties and responsibilities of the positions have changed. Communications is responsible for communicating retirement information to LACERA Members by producing newsletters, forms, letters, retirement plan and other brochures, the LACERA web site, annual reports, and an array of internal projects.

The Media Artist, LACERA, class specification was last updated in April 2008, and the organizational structure and duties of the studied positions have changed since then. The class specification for Media Artist, LACERA, states that the position reports to an Assistant Division Head, LACERA, which no longer exists in Communications. According to the Communications Organizational Chart, the division is divided into two (2) teams with one team specializing in video, print, and graphics; the other specializing in web, print, and graphics. There are a total of four (4) Media Artist, LACERA positions in the division, two (2) allocated to each team. The proposed Communication Division organizational structure is shown as **Attachment A**.

Classification

Civil Service Rule 5.01 requires that a class specification be developed and maintained for each class in the classification service to meet the needs of the service for the allocation of new positions and the reallocation of existing positions. A fundamental principle in classification is that the class specification should describe and define the nature and scope of responsibilities, work activities, qualifications, and other level defining characteristics of the class so that it is properly classified within the classification structure.

Classes, and jobs within them, evolve for many reasons and under many influences. A classification may undergo gradual growth that results in additional or changed duties and responsibilities and thereby require a corresponding class specification be amended or a position be reclassified to a new or existing classification. To keep current, a class specification should be reviewed when significant duties and level of responsibilities change.

Human Resources (HR) reviewed the studied positions to determine whether they function at the level assigned, and whether the duties performed warranted creation of a new classification. The study found that each of the studied positions are responsible for providing technical direction to one (1) Media Artist, LACERA. As the technical specialist and lead for print, web, and/or video projects, the studied positions receive project assignments from the Creative Coordinator, LACERA, and have authority to delegate and direct work of other media artist(s). The studied positions are responsible for developing and maintaining a Style Guide to be followed for all media projects, developing brand standards, providing training, and reviewing the work of less experienced media artists, to ensure technical standards such as type specification and color quality are met.

Based on the study findings, HR, with consultation of the Chief of Communications in charge of oversight of this division:

- Revised the existing Media Artist, LACERA classification to reflect changes in the organizational structure; and

- Developed a new Senior Media Artist, LACERA classification that encompasses the nature and scope of responsibilities, duties, work activities, and qualifications required to perform as a technical lead.

The proposed class specifications are shown as **Attachment B**. As shown in Attachment A, the Senior Media Artist, LACERA, positions will take the place of two existing Media Artist positions.

Compensation

A survey of public agencies and private compensation surveys revealed that there was no appropriate match for Media Artist or Senior Media Artist. The survey found that graphic design, web design, and videography are highly specialized technical functions that are typically not combined at the senior journey-level.

As such, there is no recommended change to the Media Artist, LACERA salary. The recommended salary for Senior Media Artist, LACERA is based on LACERA’s current pay differential practice for non-MAPP positions to ensure appropriate internal equity, typically between 7 ½ to 15%. 15% is typically provided for bona-fide supervisors performing both administrative and technical supervision. The proposed salary schedule of 103B, with a maximum salary of \$9,241.00, to be effective upon implementation after January 1, 2021, will provide a salary differential of approximately 10% to compensate the Senior Media Artist, LACERA for the responsibility of acting as lead to the lower-level Media Artist, LACERA.

	Classification Title	Salary Schedule	Monthly Min.	Monthly Max.	Salary Differential
LACERA*	Media Artist	99H NMO	\$ 6,244.55	\$ 8,414.45	10%
	NEW - Senior Media Artist (Lead)	103B NMO	\$ 6,857.09	\$ 9,241.00	

*Note: LACERA Compensation effective 1/1/2021.

BUDGET IMPACT

Implementation of the proposed classification changes will result in an annual budget increase of \$29,558.62

No. of Pos.	Budgeted Position Title	SALARY (1/1/21)			Proposed Position Title	PROPOSED SALARY			ANNUAL BUDGET IMPACT
		Sch	Max Salary	Annual		Sch	Max Salary	Annual	w/Benefits @ 55%
2	Media Artist	99H	\$ 8,414.45	\$ 100,973.40	Senior Media Artist	103B	\$ 9,241.00	\$ 110,892.00	\$ 30,747.66

PROCEDURE FOR ESTABLISHING CLASSIFICATIONS AND PAY RANGES

LACERA provides Local 721 notice and consult regarding new classifications of which the primary duties are derived from represented classifications. The Media Artist, LACERA classification currently addressed is represented; therefore, the Local 721 was notified of our intended changes on July 14, 2021.

On July 21, 2021, the Joint Organizational Governance Committee (JOGC) approved moving forward for implementation by the Board of Retirement and the Board of Investments the proposed classification changes for the existing Media Artist and classification and compensation changes for the creation of a new Senior Media Artist classification.

Upon approval from the Board of Retirement and Board of Investments, Human Resources (HR) will prepare a memorandum to the Los Angeles County's Chief Executive Office (LACCEO) which will include the Senior Media Artist class specification and salary schedule. The LACCEO Classification and Compensation staff will review the submitted documents to assure all necessary information is provided in order to add the classification title and salary schedule in the County's Payroll System. HR staff, with the LACERA Legal Office's oversight, will prepare and submit an ordinance amending Sections 6.28.050 and 6.127.010 of LACERA's Salary Code to the Los Angeles County Counsel's Office and the BOS for adoption. These actions will create the new Senior Media Artist classification and add two (2) Senior Media Artist positions to the Ordinance.

Upon approval from the Board of Retirement and Board of Investments, HR will update the Media Artist class specification to reflect the classification changes on www.lacera.com and send a copy to LACCEO for their records.

RECOMMENDATION

IT IS THEREFORE RECOMMENDED THAT THE BOARDS approve for implementation the recommended proposed classification changes for the existing Media Artist classification.

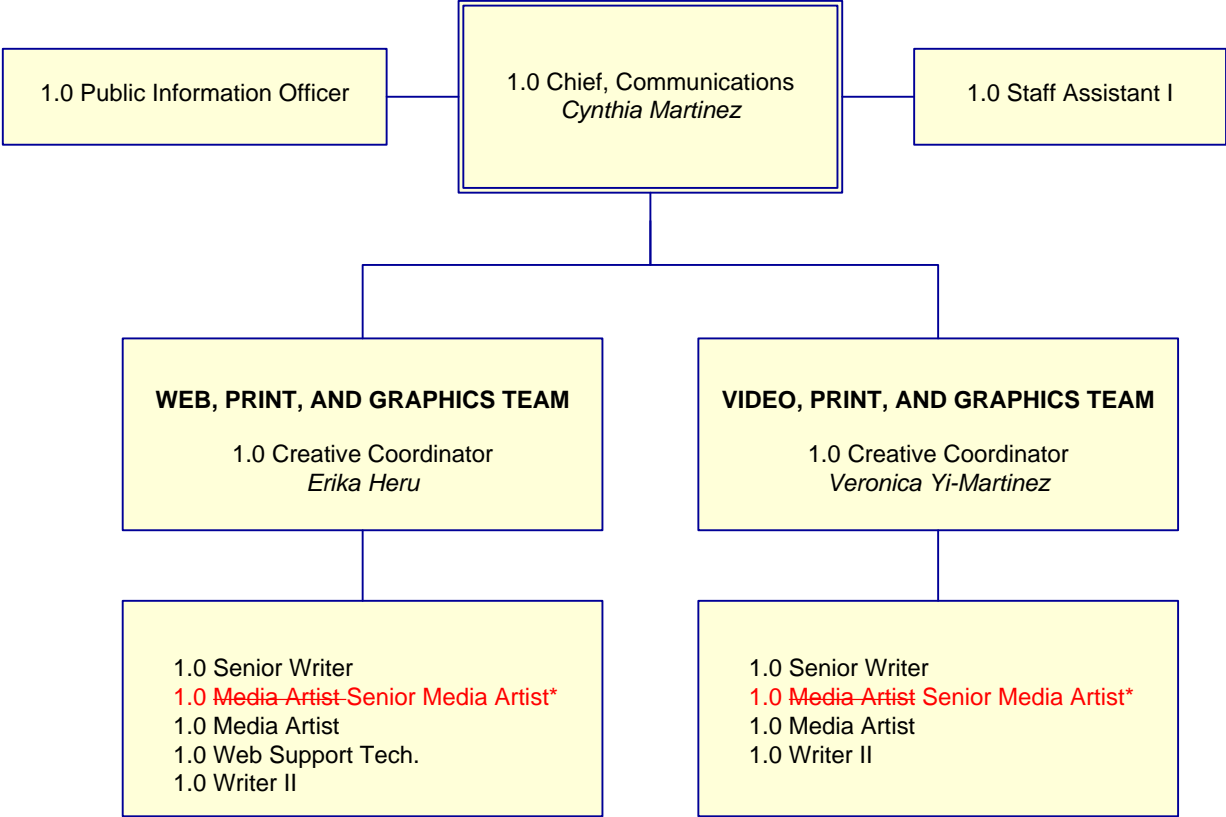
IT IS THEREFORE RECOMMENDED THAT THE BOARDS approve for implementation the recommended proposed classification and compensation changes for the creation of a new Senior Media Artist classification.

Attachments

cc: Santos H. Kreimann
Luis Lugo
Steven P. Rice
JJ Popowich
Carly Ntoya

COMMUNICATIONS

PROPOSED ORGANIZATIONAL STRUCTURE



+ Added position

* Reclass to new classification of Senior Media Artist recommended per study findings

CLASS TITLE: Media Artist, LACERA

ITEM NUMBER: 0789

APPROVAL DATE: Apr 22, 2008-TBD

DEFINITION:

Creates and produces print, web, and digital media to communicate retirement plan and other employee benefit information to LACERA members and staff.

POSITION INFORMATION:

~~Incumbents in this classification report to the Assistant Division Manager~~Positions allocable to this journey-level class report to the Creative Coordinator, LACERA or other equivalent level manager higher and work under the creative direction and technical guidance of a Senior Media Artist, LACERA.

Incumbents independently create and produce quality the artwork and ~~produce~~ print, web, and digital media such as newsletters, business cards, forms, brochures, fliers, posters, animation, videos and ~~websites~~web graphics, under the direction of a higher-level supervisor or Senior Media Artist. Incumbents must utilize an in-depth knowledge of color theory, composition, typography, and production techniques, methods, styles, and media used in the development and creation of various print and graphic arts work.

Depending on the assignment, the position may be required to have specialized technical knowledge of and experience in the following: creating storyboards, producing, directing, creating graphics, incorporating music and/or voiceover into digital media, video editing, or creating animated and other computerized graphics, and/or designing professional and innovative web site and web page graphics. Incumbents must possess the artistic and ~~design project~~ skills to conceptualize an entire assignment while being attentive to details and priorities and satisfying LACERA and County standards of professionalism, artistic expression, tastestyle, image, and customer service.

EXAMPLES OF ESSENTIAL JOB FUNCTIONS:

The following examples are intended to describe the general nature and level of work performed by persons assigned to each classification. Depending on the assignment, duties may include, but are not limited to the following:

Creates communication media to inform LACERA members and staff about retirement and other employee benefits by producing freehand, digital/computer generated artwork and multimedia designs.

Produces the final product by conceptualizing and creating the design needed including such artistic characteristics as color, style, shapes and materials, and the pre- and post-production requirements of video, web, and print.

Creates, illustrates, and produces print materials such as business cards, forms, brochures, fliers, newsletters, e-mails, ads, logos, pamphlets, booklets, scrolls, the annual retirement law

book, and the annual financial report by utilizing freehand and ~~computer-computer~~-generated art; determines size and arrangement of illustrative material and copy; selects style and size of type; arranges layout and edits; and monitors the entire pre- and ~~post-post~~-production process.

Designs digital animation, ~~and~~ PowerPoints, ~~and video~~, including the generation of graphic images, animation, sound and text into cohesive multimedia programs through the use of technology.

Designs web sites ~~such as LACERA's Internet, Intranet, Board Resources, Human Resource Professionals,~~ by producing graphic artwork, designs and copy layouts for online content; develops format and posts content; ~~refreshes~~ refreshes imagery and news items; ~~and~~ updates policies, programs and forms.

~~Assesses advances in multimedia technology for use by LACERA.~~

Takes, composes, retouches and archives digital photographs.

~~Operates May operate and directs, stages, edits, and produces video productions~~ a video camera and create storyboards, direct, create graphics, incorporate music and/or voiceover, and edit for video production.

~~The position may~~ May be required to perform other duties as assigned.

MINIMUM REQUIREMENTS:

TRAINING AND EXPERIENCE:

OPTION 1:

A Bachelor's degree from an accredited college in ~~Fine Art, Advertising~~ Graphic Design, Visual Arts, or a related subject -AND- ~~Three-three (3)~~ Three-three (3) years of experience* in an in-house creative department or design firm producing graphic and commercial arts with extensive use of freehand and ~~computer-computer~~-generated imagery in the creation and the pre- and post-production of video, web, and print, digital and web media.

OPTION 2:

~~OR~~

Five (5) years of experience* in an in-house creative department or design firm producing graphic and commercial arts with extensive use of freehand and ~~computer-computer~~-generated imagery in the creation and the pre- and post-production of video, web, and print, digital and web media.

LICENSE:

A valid California Class C Driver License or the ability to utilize an alternative method of transportation to carry out essential job functions.

PHYSICAL CLASS:

2 - Light

SPECIALTY REQUIREMENTS:

*Specialized examinations may include:

Specialty

Add to read as:

Web Graphic Design / Commercial wWeb dDesign *experience in an in-house creative department or design firm performing web graphic design and/or commercial web design work that, including determining the layout, font color, font type, logos, pictures, and other visual and verbal aspects of a website.

Videography / Commercial vVideo pProduction *experience creating storyboards, producing, directing, creating graphics, incorporating music and voiceover, and editing video for final production and output to various platforms.

CLASS TITLE: Media Artist, LACERA

ITEM NUMBER: 0789

APPROVAL DATE: ~~Apr 22, 2008~~-TBD

DEFINITION:

Creates and produces print, web, and digital media to communicate retirement plan and other employee benefit information to LACERA members and staff.

POSITION INFORMATION:

Positions allocable to this journey-level class report to the Creative Coordinator, LACERA or higher and work under the creative direction and technical guidance of a Senior Media Artist, LACERA.

Incumbents independently create and produce quality artwork and print, web, and digital media such as newsletters, business cards, forms, brochures, fliers, posters, animation, videos and web graphics, under the direction of a higher-level supervisor or Senior Media Artist. Incumbents must utilize an in-depth knowledge of color theory, composition, typography, and production techniques, methods, styles, and media used in the development and creation of various print and graphic arts work.

Depending on the assignment, the position may be required to have specialized technical knowledge of and experience in the following: creating storyboards, producing, directing, creating graphics, incorporating music and/or voiceover into digital media, video editing, creating animated and other computerized graphics, and/or designing professional and innovative web site and web page graphics. Incumbents must possess the artistic and design skills to conceptualize an entire assignment while being attentive to details and priorities and satisfying LACERA and County standards of professionalism, artistic expression, style, image, and customer service.

EXAMPLES OF ESSENTIAL JOB FUNCTIONS:

The following examples are intended to describe the general nature and level of work performed by persons assigned to each classification. Depending on the assignment, duties may include, but are not limited to the following:

Creates communication media to inform LACERA members and staff about retirement and other employee benefits by producing freehand, digital/computer generated artwork and multimedia designs.

Produces the final product by conceptualizing and creating the design needed including such artistic characteristics as color, style, shapes and materials, and the pre- and post-production requirements of video, web, and print.

Creates, illustrates, and produces print materials such as business cards, forms, brochures, flyers, newsletters, e-mails, ads, logos, pamphlets, booklets, scrolls, the annual retirement law book, and the annual financial report by utilizing freehand and computer-generated art; determines size and arrangement of illustrative material and copy; selects style and size of type; arranges layout and edits; and monitors the entire pre- and post-production process.

Designs digital animation and PowerPoints, including the generation of graphic images, animation, sound and text into cohesive multimedia programs through the use of technology.

Designs web sites by producing graphic artwork, designs and copy layouts for online content; develops format and posts content; refreshes imagery and news items; and updates policies, programs and forms.

Takes, composes, retouches and archives digital photographs.

May operate a video camera and create storyboards, direct, create graphics, incorporate music and/or voiceover, and edit for video production.

May be required to perform other duties as assigned.

MINIMUM REQUIREMENTS:

TRAINING AND EXPERIENCE:

OPTION 1:

A Bachelor's degree from an accredited college in Graphic Design, Visual Arts, or a related subject -AND- three (3) years of experience* in an in-house creative department or design firm producing commercial art with extensive use of freehand and computer-generated imagery in the creation and the pre- and post- production of video, web, and print media.

OPTION 2:

Five (5) years of experience* in an in-house creative department or design firm producing commercial art with extensive use of freehand and computer-generated imagery in the creation and the pre- and post-production of video, web, and print media.

LICENSE:

A valid California Class C Driver License or the ability to utilize an alternative method of transportation to carry out essential job functions.

PHYSICAL CLASS:

2 - Light

SPECIALTY REQUIREMENTS:

*Specialized examinations may include:

Specialty

Web Graphic Design / Commercial Web Design

department or design firm performing web graphic design and/or commercial web design work that included determining the layout, font color, font type, logos, pictures, and other visual and verbal aspects of a website.

Add to read as:

*experience in an in-house creative

Media Artist, LACERA

Page 3

Videography / Commercial Video Production *experience creating storyboards, producing, directing, creating graphics, incorporating music and voiceover, and editing video for final production and output to various platforms.

CLASS TITLE: Senior Media Artist, LACERA

ITEM NUMBER: NEW

APPROVAL DATE: TBD

DEFINITION:

Creates and produces video, web, and print media to communicate retirement plan and other employee benefit information to LACERA members and staff. Directs staff as a technical lead.

POSITION INFORMATION:

Positions allocable to this senior journey-level class report to a Creative Coordinator, LACERA or higher-level position. The positions work with the Chief of Communications to develop brand standards and creative guidelines for all media created for LACERA. As the technical lead on assigned projects, the positions are distinguished by responsibility for providing creative direction, technical guidance, and feedback on work produced by the lower-level Media Artist, LACERA. The positions are responsible for creating and maintaining a Style Guide, and reviewing the work of the Media Artist, LACERA, to ensure consistent standards are followed.

The positions independently create and produce creative, innovative, quality artwork for print, web, and digital media such as newsletters, annual reports, forms, brochures, fliers, posters, animation, videos and website graphics aligned with LACERA's brand strategy. Incumbents must utilize an in-depth knowledge of composition and production techniques, methods, styles, and media used in the development and creation of various print and graphic arts work. Incumbents meet with clients to discuss design projects and their needs.

Depending on the assignment, the position may also be required to have specialized technical knowledge of and experience in the following: creating storyboards, producing, directing, creating graphics, incorporating music and/or voiceover into digital media, video editing, creating animated and other computerized graphics, designing professional and innovative web site and web page graphics, and/or creating high quality studio photography that includes retouching images using image manipulation techniques. In addition, incumbents must possess the artistic and project management skills to conceptualize an entire assignment while being attentive to details and priorities and satisfying LACERA and County standards of professionalism, artistic expression, style, image, and customer service.

EXAMPLES OF ESSENTIAL FUNCTIONS:

The following examples are intended to describe the general nature and level of work performed by persons assigned to each classification. Depending on the assignment, duties may include, but are not limited to the following:

Creates communication media to inform LACERA members and staff about retirement and other employee benefits by producing freehand, digital/computer generated artwork and multimedia designs.

Takes creative lead on projects and oversees the production of video, web, print and other marketing materials, including assigning, directing, training, reviewing, and approving the work of lower-level staff.

Senior Media Artist, LACERA

Page 2

Collaborates with stakeholders to conceptualize and execute creative solutions that can be translated across various media platforms and to ensure consistency with LACERA branding.

Produces the final product by conceptualizing and creating the design needed including such artistic characteristics as color, style, shapes and materials, and the pre- and post-production requirements of video, web, and print.

Creates, illustrates and produces print materials such as business cards, forms, brochures, flyers, newsletters, e-mails, ads, logos, pamphlets, booklets, scrolls, the annual retirement law book and the annual financial report by utilizing freehand and computer-generated art; determines size and arrangement of illustrative material and copy; selects style and size of type; arranges layout and edits; and monitors the entire pre- and post-production process.

Designs digital animation and PowerPoints including the generation of graphic images, animation, sound and text into cohesive multimedia programs through the use of technology.

Designs web sites by producing graphic artwork, designs and copy layouts for online content; develops format and post content; refresh imagery and news items; and updates policies, programs and forms.

Makes recommendations for the purpose of obtaining paper stock, type, and printing services; and attends press checks when needed.

Researches data in order to select a theme to create a design which is an effective pictorial or graphic presentation of the data or subject to be publicized.

Monitors advances in media solutions and techniques. Continually refines processes to include advances that improve media services for use by LACERA.

Provides day-to-day maintenance and support for the Communications Studio equipment.

Makes recommendations regarding purchases of equipment and production operating policies.

Takes, composes, retouches and archives digital photographs.

May operate a video camera and create storyboards, produce, direct, create graphics, incorporate music and/or voiceover, and edit for video production.

May be required to perform other duties as assigned.

MINIMUM REQUIREMENTS:

TRAINING AND EXPERIENCE:

OPTION 1:

A Bachelor's degree from an accredited college in Graphic Design, Visual Arts, or a related subject -AND- five (5) years of experience* at an in-house creative department or design firm producing commercial art with extensive use of freehand and computer-generated imagery in the creation and the pre- and post-production of video, web, and print media.

OPTION 2:

Seven (7) years of experience* in an in-house creative department or design firm producing commercial art with extensive use of freehand and computer-generated imagery in the creation and the pre- and post-production of video, web, and print, media.

LICENSE:

A valid California Class C Driver License or the ability to utilize an alternative method of transportation to carry out essential job functions.

PHYSICAL CLASS:

2 - Light

SPECIALTY REQUIREMENTS:

*Specialized examinations may include:

Specialty

Web Graphic Design / Commercial Web Design

department or design firm performing web graphic design and/or commercial web design work that included determining the layout, font color, font type, logos, pictures, and other visual and verbal aspects of a website.

Add to read as:

*experience in an in-house creative

Videography / Commercial Video Production

producing, directing, creating graphics, incorporating music and voiceover, and editing video for final production and output to various platforms.

*experience in creating storyboards,



July 23, 2021

TO: Trustees - Board of Retirement

FROM: Santos H. Kreimann *SHK*
Chief Executive Officer

Ted Granger *TG*
Interim Chief Financial Officer

FOR: Board of Retirement Meeting on August 4, 2021

SUBJECT: **2020 ACTUARIAL VALUATION OF THE LOS ANGELES COUNTY
OTHER POSTEMPLOYMENT BENEFITS (OPEB) PROGRAM**

RECOMMENDATION

It is recommended that the Board of Retirement (BOR) accept the July 1, 2020, Los Angeles County OPEB Program Actuarial Valuation report (2020 OPEB Valuation, *Attachment I*), prepared by LACERA's consulting actuary, Milliman.

EXECUTIVE SUMMARY

Reporting

At the March 2021 BOR meeting, the Trustees adopted the 2020 Investigation of Experience for Other Post-Employment Benefits (OPEB) Assumptions report (OPEB Experience Study, *Attachment II*). Actuarial methods and assumptions in this report, along with the most recent 2019 Investigation of Experience for Retirement Benefit Assumptions (2019 Retirement Experience Study), were applied in preparing the 2020 OPEB Valuation. In addition, the 2020 OPEB Valuation results include updated claim costs, aging assumptions, and the most recent medical trends with the latest health plan premium adjustments; the recently repealed Excise Tax was excluded.

Agent Plan Reporting

The 2020 OPEB Valuation report is the third valuation report prepared under the agent multiple employer plan structure as requested by Los Angeles County. This reporting approach provides more precision in calculating liabilities and costs for each plan sponsor, as compared to the previous cost sharing model where pooled amounts were divided based upon an allocation methodology. The agent model focuses on the individual employers participating in the OPEB Trust, while the valuation report was supplemented with additional information so decision makers can review OPEB Program results in total, for all employer participants¹.

¹ Participating OPEB Program employers include: Los Angeles County (County), Los Angeles County Superior Court (Superior Court), Los Angeles County Employees Retirement Association (LACERA), South Coast Air Quality Management District (SCQAMD), Los Angeles County Office of Education (LACOE), Local Agency Formation Commission (LAFCO), and Little Lake Cemetery District (LLCD).

Policy

The Board’s policy requires LACERA’s consulting actuary to prepare annual actuarial valuations for the Los Angeles County OPEB Program administered by LACERA. The OPEB valuations provide the plan sponsors with actuarial information to make OPEB Program funding decisions. The valuation reports also serve as a basis for preparing the Governmental Accounting Standards Board Statement No. 75 – *Accounting and Financial Statement Reporting For Post-Employment Benefits Other Than Pensions (GASB 75)* disclosure reports which include accounting information plan sponsors use for footnotes and disclosures in their annual financial statements.

Summary Results

The table below includes a summary of OPEB valuation results comparing the last two reporting periods excluding financial impacts of the Excise Tax. The July 1, 2020 OPEB Valuation results indicate that the Actuarial Accrued Liability (AAL) increased by \$0.55 billion primarily due to interest and benefit accruals. The increase was partially offset by lower than expected health care costs and trends, and assumption changes. Employers participating in the OPEB Trust (i.e., Los Angeles County, Los Angeles County Superior Court, and LACERA) continued to make regular contributions, and in conjunction with investment earnings, causing assets to increase by \$0.25 billion compared to the prior year. The AAL is reduced by assets held in the OPEB Trust to calculate the Unfunded Actuarial Accrued Liability (UAAL). The UAAL increased by \$0.30 billion from July 1, 2019 to July 1, 2020, which was below the amount anticipated.

OPEB Valuation Results	July 1, 2020 without Excise Tax	July 1, 2019 with Excise Tax
Actuarial Accrued Liability (\$ billions)	\$ 21.30	\$ 20.75
Less Assets	<u>1.49</u>	<u>1.24</u>
Unfunded Actuarial Accrued Liability	\$ 19.81	\$ 19.51
Normal Cost Rate	7.33%	7.58%
ADC as a Percentage of Payroll ¹	18.18%	18.87%

¹ADC, Actuarially Determined Contribution, is the employers’ periodic contributions to a defined benefit OPEB program, calculated in Accordance with Actuarial Standards of Practice.

Reviews

In addition to the annual OPEB valuation, the Board’s policy requires actuarial reviews of both the OPEB experience study and the OPEB valuation at regular intervals consistent with when an experience study is conducted. Cavanaugh MacDonald Consulting (CMC), LACERA’s actuarial review consultant, performed two review engagements for the 2020 actuarial reporting cycle to which there were no significant issues noted. CMC’s Actuarial Review of the 2020 OPEB Valuation report and the Actuarial Review of the 2020 Experience Study report are included as *Attachments III and IV*, respectively.

OPEB ACTUARIAL VALUATION POLICY AND PROCESS

Valuation Reports

The Board's OPEB Actuarial Valuation and Audit Policy (Policy), revised in October 2017, requires the consulting actuary to conduct annual valuations to establish the actuarially determined values of participating employers' OPEB Program liabilities. The annual OPEB Program actuarial valuation, commonly referred to as the "OPEB Valuation" report, estimates the long-term OPEB liability for retiree medical, dental/vision, and death benefits promised to active and retired workers, who are employed by agencies participating in the LACERA retirement benefits plan.

OPEB valuations are performed at the request of the employers to determine OPEB Program funding progress and establish a baseline of information including the Actuarial Accrued Liability (AAL) and the Actuarial Determined Contribution (ADC). This information is then used by the consulting actuary to prepare a secondary financial statement disclosure report (the "GASB 75" report), distributed under separate cover, to satisfy financial statement reporting guidelines applicable to the plan sponsors such as the County. These financial reporting guidelines are intended to improve transparency by providing additional OPEB Program cost and liability disclosures, which can be useful to financial statement readers.

Experience Study Reports

In addition to the annual OPEB valuation, the Policy requires the consulting actuary to review the reasonableness of the economic and demographic actuarial assumptions at least every three years. The assumptions review, commonly referred to as the OPEB investigation of experience, or the "OPEB Experience Study", is accomplished by comparing actual experience during the preceding years to what was expected to happen according to the actuarial assumptions. Based on this review, the actuary determines whether changing these assumptions or methodologies will better project asset growth and benefit liabilities.

OPEB

The frequency of the OPEB experience study cycle was increased to every two years during the last several reporting cycles to coincide with the transition to an agent model reporting structure, implement GASB 75, and to alternate years in which the retirement benefits experience study occurs. The 2020 OPEB Experience Study that was approved by the BOR in March 2021 is used to prepare the 2020, 2021 and 2022 valuation reports. Now that the 2020 experience study has been completed, the cycle frequency will revert back to a three-year rotation with the next report scheduled to be completed for July 1, 2023.

Retirement Benefits

The Retirement Benefits Experience Study was conducted as of June 30, 2019 and approved by the Board of Investments (BOI) in January 2020. Milliman performs both the retirement benefits experience study and a separate OPEB Program experience

study of the LACERA membership demographics with a different focus for each project. The OPEB experience study reviews the assumptions that impact post-employment or retired population demographics as they relate to medical, dental and vision benefits as well as economic assumptions applicable to the OPEB Trust. The retirement experience study concentrates on other LACERA membership demographics including active members, and the retirement benefits economic assumptions which are established for the Pension Trust. When preparing the OPEB actuarial valuation reports, to capture all membership demographics, actuarial methods and assumptions from both of these experience studies are applied.

SUMMARY OF OPEB PROGRAM VALUATION RESULTS¹

(\$ in billions)

	July 1, 2020 Valuation⁴	July 1, 2019 Valuation ⁴	2018 Valuation ^{2,3}	2017 Valuation ²
Funded Ratio	7.0%	6.0%	4.5%	2.8%
Actuarial Accrued Liability	\$21.30	\$20.75	\$21.07	\$26.30
Less Assets	1.49	1.24	0.94	0.74
Unfunded Actuarial Accrued Liability (UAAL)	\$19.81	\$19.51	\$20.13	\$25.56
Normal Cost Rate ⁵	7.33%	7.58%	8.41%	12.54%
UAAL Rate	10.85%	11.29%	12.15%	13.03%
Actuarially Determined Contributions (ADC) as a Percentage of Payroll	18.18%	18.87%	20.56%	25.57%
Discount Rate				
Prefunding Agents	6.00%	6.00%	6.00%	4.50%
Outside Districts	2.30%	3.69%	3.69%	4.50%
Actual Contributions as a Percentage of Payroll	10.56%	10.50%	8.97%	8.33%

¹ Results are based on the total OPEB Program which include the following employers: County, Superior Court, LACERA, SCAQMD, LAFCO, LACOE, and LLCD.

² Historically, OPEB valuations were performed biennially. In October 2017, the Actuarial Valuation and Audit Policy was revised to require annual valuations beginning with the 2017 reporting cycle.

³ Includes Excise Tax. The decline in Actuarial Accrued Liability from 2017 to 2018 was heavily influenced by the increase in discount rate from 4.50% to 6.00% for the agents that are pre-funding.

⁴ Includes Impacts of July 1, 2020 and July 1, 2021 renewals, includes only calendar year 2020 Health Insurer fee, and excludes Excise Tax.

⁵ Represents the annual cost attributed to the current year of service, for active employees, shown as a percentage of valuation payroll.

Discussion of Results

An actuarial valuation can be described as a snapshot of the OPEB Program's funding metrics at a particular point in time. The following key results are included in the 2020 OPEB Valuation report:

- Since the July 1, 2019 OPEB Valuation, the Actuarial Accrued Liability (AAL) shows a net overall increase of \$0.55 billion or 2.7%, from \$20.75 billion to \$21.30 billion. The AAL increase was below expectations due to a combination of several factors. The new assumption changes as a result of the 2020 OPEB Experience Study provided an increase, however, lower-than-expected health insurance premiums offset this increase.
- The Actuarially Determined Contribution (ADC) increased by 1.8% from \$1,551.0 million to \$1,578.6 million in dollar terms but decreased by 0.69% from 18.87% to 18.18% as a percentage of valuation payroll. This decrease was due to valuation payroll increasing faster than Normal Cost and ADC.
- The increase in projected paid benefits was lower than expected for the first year following the OPEB valuation date. The one-year increase of 6.4% was less than the expected one-year increase of 7.5% due largely to lower than anticipated health care premiums. The expected pay-as-you-go costs (pay-go) of \$679 million for 2019-2020, was projected to increase to \$730 million in 2020-2021 as compared to the new expected amount of \$722 million for 2020-2021, an \$8 million reduction in ongoing costs.
- The investment rate of return (discount rate) assumption remained the same at 6.00% for participating employers (County, Superior Court, and LACERA) pre-funding through the OPEB Trust and a 2.30% investment rate of return for the Outside Districts who are not pre-funding. The investment rate of return reflects the investment policy assumptions described in the 2020 OPEB Experience Study report.
- Other OPEB Program valuation results show the funding metrics moving in a positive direction. This year's OPEB Program funded ratio stands at 7.0%, an increase of 1.0% from the prior valuation. The actual contributions provided by the sponsoring employers which include both ongoing pay-go costs and pre-funding for the OPEB Trust, as a percentage of valuation payroll, increased to 10.56% from 10.50%.

Agent Information

Funding information contained in the 2020 OPEB Valuation report is provided at the individual agent level for the County, Superior Court, and LACERA. For agent groupings, the total funding information is provided at two levels: (1) the OPEB Trust pre-funding agents (County, Superior Court, and LACERA); and (2) the total collective OPEB Program plan sponsors (County, Superior Court, LACERA, SCAQMD, LACOE, LAFCO and LLCD).

The chart below summarizes the 2020 OPEB Valuation report content and corresponding page numbers.

Agents and Agent Groupings	Valuation Report Page Numbers
County	Section 3, Page 9
Superior Court	Section 4, Page 16
LACERA	Section 5, Page 23
OPEB Trust County, Superior Court, and LACERA	Section 6, Page 30
OPEB Program Total County, Superior Court, LACERA, SCAQMD, LACOE, LAFCO, LLCD	Section 7, Page 37

Valuation results by agent are summarized below in Exhibit 3 included on Page 3 of the 2020 OPEB Valuation report:

Exhibit 3: OPEB Benefit Liabilities and Costs¹
Summary of July 1, 2020 Valuation Results
(All Dollar Amounts in Millions)

	County	Superior Court	LACERA	Outside Districts	Total
1. Present Value of Future Benefits	\$ 28,132.6	\$ 1,210.1	\$ 94.9	\$ 16.0	\$ 29,453.6
2. Present Value of Future Normal Costs	7,844.9	273.3	30.0	2.7	8,150.9
3. Actuarial Accrued Liability (1-2)	\$ 20,287.7	\$ 936.8	\$ 64.9	\$ 13.3	\$ 21,302.7
4. Assets	1,441.4	45.6	5.6	-	1,492.6
5. Unfunded Actuarial Accrued Liability (3-4)	\$ 18,846.3	\$ 891.2	\$ 59.3	\$ 13.3	\$ 19,810.1
6. ADC ²	\$ 1,508.4	\$ 64.6	\$ 5.0	\$ 0.6	\$ 1,578.6
7. ADC expressed as a percentage of payroll					
Normal Cost	7.38%	6.53%	5.09%	14.29%	7.33%
UAAL payment	10.80%	12.47%	6.48%	71.43%	10.85%
Total	18.18%	19.00%	11.57%	85.72%	18.18%

¹ Net of Retiree Paid Premiums. May not match other Tables due to rounding.

² Normal cost and 30 year level percentage of payroll amortization of the Unfunded Actuarial Accrued Liability (UAAL).

GASB 75

The County, Superior Court, and LACERA established qualifying OPEB Trusts with the enactment of GASB 75, which defined new employer OPEB financial statement reporting requirements. Prior to the implementation of GASB 75, employers utilized the OPEB valuation report including additional accounting information contained therein to prepare their financial statement disclosures. At the present time, ADC and other actuarial information, derived from the OPEB valuation, serve as critical components used by the

actuary in calculating and preparing information contained in the GASB 75 Disclosure report, which employers use to meet their financial reporting responsibilities. Since the implementation of GASB 75, the primary use of the OPEB valuation report has been for plan sponsors to make OPEB Program funding decisions.

ACTUARIAL REVIEWS

The OPEB Actuarial Valuation and Audit Policy also requires periodic actuarial reviews of the OPEB experience study and valuation at regular intervals. LACERA engaged the reviewing actuary, CMC, to perform such concurrent reviews of Milliman's 2020 OPEB Experience Study and 2020 OPEB Valuation reports.

In the 2020 OPEB Experience Study review, CMC concluded that, "We believe that the actuarial assumptions recommended by Milliman are reasonable and appropriate for the use in the upcoming OPEB actuarial valuation for LACERA. We have no findings of material discrepancies with generally accepted actuarial principals or professional standards".

Additionally, CMC's review of the 2020 OPEB Valuation indicates, "We generally find the OPEB actuarial Valuation results to be reasonable and accurate based on the assumptions and methods used. The Valuation was performed by qualified actuaries and was performed in accordance with the principles and practices prescribed by the Actuarial Standards Board."

CONCLUSION

The LACERA Board of Retirement's OPEB Actuarial Valuation and Audit Policy requires annual valuations to establish the actuarially determined values of the OPEB Program liabilities. The OPEB valuation report, estimates the long-term funding liability for retiree medical, dental/vision, and death benefits promised to active and retired workers, who participate in the LACERA retirement benefits plan. The most recent assumptions from the 2020 OPEB Experience Study; 2019 Retirement Experience Study; and updated claims, aging and trend assumptions were used to calculate and determine the funding information contained in the 2020 OPEB Valuation report, which can be used for OPEB Program funding decisions. The financial statement reporting information required by GASB and used by participating employers, is derived from the funding valuations and included in the GASB 75 Disclosure report.

The Unfunded Actuarial Accrued Liability (UAAL) increased less than expected from 2019 to 2020 based on a combination of several factors, some of which were offsetting. Actuarial gains were realized from claim cost experience, trend assumptions, and other experience. In addition, the Normal Cost and ADC increased due to the factors mentioned above and decreased as a percentage of valuation payroll because payroll increased faster than Normal Cost and ADC. Furthermore, actual contributions as a percentage of valuation payroll increased primarily due to the continuous funding stream provided by the OPEB

Trust participating employers. Actuarial losses were due to expected one-year liability increases and the 2020 OPEB Experience Study changes.

LACERA's consulting actuaries, Robert Schmidt and Janet Jennings with Milliman, and LACERA's reviewing actuary, Brent A. Banister with CMC, will be present at the August 4, 2021 meeting to discuss the 2020 OPEB Program Actuarial Valuation (*Attachment I*) report results and answer questions from the Board. Milliman's presentation slides are included as *Attachment V*.

Finally, we would like to recognize and express our gratitude to the OPEB Stakeholders, which is the working group composed of representatives from Los Angeles County, Los Angeles County Superior Court, SEIU Local 721, and their respective specialized consultants who actively participated in the OPEB experience study and OPEB valuation process.

IT IS THEREFORE RECOMMENDED the Board of Retirement accept the July 1, 2020 Los Angeles County OPEB Program Actuarial Valuation prepared by the consulting actuary, Milliman.

Attachments:

- I. Milliman's OPEB Valuation report as of July 1, 2020
- II. Milliman's OPEB Experience Study report as of July 1, 2020
- III. Cavanaugh Macdonald's Actuarial Review of the 2020 OPEB Valuation
- IV. Cavanaugh Macdonald's Actuarial Review of the 2020 OPEB Experience Study
- V. Milliman's August 4, 2021 Presentation slides

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c: Luis Lugo
Steven Rice
Jonathan Grabel
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Los Angeles County Other Postemployment Benefits Program

Other Postemployment Benefits Program Actuarial Valuation

July 1, 2020

Prepared by:

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Principal and Consulting Actuary

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July 16, 2021

Board of Retirement
Los Angeles County Employees Retirement Association
300 North Lake Avenue, Suite 820
Pasadena, CA 91101

Re: July 1, 2020 Other Postemployment Benefits (OPEB) Actuarial Valuation

Dear Members of the Board:

As requested, we have prepared an actuarial valuation of the retiree medical, dental/vision, and death benefits covering the retired Los Angeles County (County) workers who also participate in the Los Angeles County Employees Retirement Association (LACERA) retirement benefits plan. These health-related benefits are collectively referred to in this report as the Los Angeles County (County) Other Postemployment Benefits (OPEB) Program, or the "OPEB program". The major findings of the valuation are contained in this report. This report reflects the benefit provisions in effect as of July 1, 2020, and the retiree health plan premium rates in effect as of July 1, 2020 and July 1, 2021 received from Segal (LACERA's Health Care Benefits Consultant). This is the third OPEB funding valuation presented under an agent structure. OPEB funding valuations prior to the July 1, 2018 OPEB funding valuation were under a cost sharing structure.

Milliman has developed certain models to estimate the values included in this report. The intent of the models was to estimate the assumed investment earnings, analysis of OPEB demographic assumptions, retiree health claim costs, and annual trends for retiree health benefits. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP). In addition, the valuation results were developed using models intended for valuations that use standard actuarial techniques.

The models rely on data and information as input to the models. We have relied upon certain data and information listed below for this purpose and accepted it without audit. To the extent that the data and information provided is not accurate, or is not complete, the values provided in this report may likewise be inaccurate or incomplete.

In preparing this report, we relied, without audit, on information (some oral and some in writing) supplied by the County, LACERA, the Superior Court, and Segal. This information includes, but is not limited to, benefit descriptions, membership data, and financial information. We found this information to be reasonably consistent and comparable with data used for other purposes. In some cases, where the census data was incomplete, we made assumptions as noted in Table C-10 of Appendix C. The valuation results depend on the integrity of this information. If any of this information is inaccurate or incomplete, our results may be different, and our calculations may need to be revised.

In developing these recommendations, we have reflected an estimate of fees associated with the Affordable Care Act (ACA), which was signed into law in March 2010 and subsequent regulations and acts including the recent Further Consolidated Appropriations Act, 2020 (H.R. 1865). These fees include

the Patient Centered Outcomes Research Institute (PCORI) Fee and the Health Insurer Fee in calendar year 2020. H.R. 1865 repealed the Excise Tax and the Health Insurer Fee beginning with calendar year 2021. The OPEB assumptions will reflect changes in future valuations as regulations are released.

All costs, liabilities, rates of interest, health cost trend rates, and other factors under the OPEB program have been determined on the basis of actuarial assumptions and methods which are individually reasonable (taking into account the experience of the OPEB program and reasonable expectations); and which, in combination, offer a reasonable estimate of anticipated experience affecting the OPEB program. Further, in our opinion, the actuarial assumptions in the aggregate are reasonable and are related to the experience of the OPEB program and to reasonable expectations and represent a reasonable estimate of anticipated experience under the OPEB program.

We further certify that the assumptions and methods developed in this report satisfy Actuarial Standards Board (ASB) Standards of Practice, in particular, No. 6 (Measuring Retiree Group Benefit Obligations). The retirement benefit related demographic and economic assumptions used in this report are based on those developed as a result of the 2019 Retirement Investigation of Experience study, dated January 28, 2020, and approved by LACERA's Board of Investments. The OPEB demographic and economic assumptions are based on the results of our 2020 OPEB Investigation of Experience, dated July 8, 2021. The assumptions used in the OPEB Investigation of Experience were identified, evaluated, and agreed upon collaboratively by the actuaries and consultants representing the OPEB program stakeholders at the time including: Milliman, LACERA's actuary; Cavanaugh Macdonald, LACERA's reviewing actuary; Segal, LACERA's Health Care Benefits Consultant; Cheiron, Los Angeles County's actuary; and Rael & Letson, actuary for SEIU Local 721. Types of OPEB specific assumptions include initial enrollment, healthcare plan and tier selection, spouse age difference, and re-enrollment assumptions. These OPEB assumptions are combined for all of LACERA's agents. The investment rate of return assumptions differs by agent. The investment earnings assumption for the agents that are prefunding through LACERA's OPEB Trust is the expected return for the OPEB Trust. The investment earnings assumption for the agents that are not prefunding through LACERA's OPEB Trust have an investment earnings assumption of the County's general funds' expected return. The 2020 OPEB Investigation of Experience was reviewed and approved during LACERA's March 3, 2021 Board of Retirement Meeting.

OPEB specific assumptions that have been updated since the 2020 OPEB Investigation of Experience study include health cost trend rates updated with information from the July 1, 2021 renewals. These assumptions have been identified, evaluated, and agreed upon collaboratively by the actuaries and consultants currently representing the OPEB program stakeholders at the time including: Milliman, LACERA's actuary; Cavanaugh Macdonald, LACERA's reviewing actuary; Segal, LACERA's Health Care Benefits Consultant; Cheiron, Los Angeles County's actuary; and Rael & Letson, actuary for SEIU Local 721. LACERA's Board of Retirement has the final decision regarding the appropriateness of the assumptions. The assumptions and methods are summarized in Appendix A.

Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: OPEB program experience differing from that anticipated by the economic or demographic assumptions; changes in economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for these measurements (such as the end of an amortization period); and changes in OPEB program provisions or applicable law. Due to the limited scope of our assignment, we did not perform an analysis of the potential range of future measurements.

Given the substantial uncertainty regarding the impact of COVID-19 on plan costs, including whether the pandemic will increase or decrease costs during the term of our projections, we have chosen not to make an adjustment in the expected plan costs aside from what was included in the Segal July 1, 2021 renewal. It is possible that the COVID-19 pandemic could have a material impact on the projected costs.

This July 1, 2020 OPEB valuation is for funding purposes. The data, assumptions and methods, OPEB program provisions as described in Appendix B of this report, and the funding goals serve as a basis for the separate GASB 75 disclosure report. Actuarial computations under Government Accounting Standards Board (GASB) Statement Numbers 74 and 75 are for purposes of fulfilling financial accounting requirements for LACERA, Los Angeles County, Superior Court, and SCAQMD (the agents) respectively. The GASB 75 disclosure report needs to meet the requirements of these standards which include but are not limited to a different discount rate and actuarial cost methodology. A discussion of GASB OPEB Statement 75 applicable to OPEB reporting is in Section 8. Determinations for purposes other than funding purposes may be significantly different from the results contained in this report. Accordingly, additional determinations may be needed for other purposes.

Milliman's work is prepared solely for the internal business use of LACERA. To the extent that Milliman's work is not subject to disclosure under applicable public records laws, Milliman's work may not be provided to third parties without Milliman's prior written consent. Milliman does not intend to benefit or create a legal duty to any third-party recipient of its work product.

Milliman's consent to release its work product to any third party may be conditioned on the third party signing a Release, subject to the following exception(s):

- (a) LACERA may provide a copy of Milliman's work, in its entirety, to LACERA's professional service advisors who are subject to a duty of confidentiality and who agree to not use Milliman's work for any purpose other than to benefit LACERA.
- (b) LACERA may provide a copy of Milliman's work, in its entirety, to other governmental entities, as required by law.

No third-party recipient of Milliman's work product should rely upon Milliman's work product. Any third-party recipient of Milliman's work product, including Los Angeles County, Superior Court or the Outside Districts, who desires professional guidance should not rely upon Milliman's work product but should engage qualified professionals for advice appropriate to their own specific needs.

The consultants who worked on this assignment are employee benefit actuaries. Milliman's advice is not intended to be a substitute for qualified legal or accounting counsel.

On the basis of the foregoing, we hereby certify that, to the best of our knowledge and belief, this report is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices. We are members of the American Academy of Actuaries and meet the Qualification Standards to render the actuarial opinion contained herein.

We would like to express our appreciation to LACERA staff members, Los Angeles County, SEIU Local 721, Cavanaugh Macdonald, Segal, Rael & Letson, and Cheiron who gave substantial assistance on which this report is based.



We respectfully submit the following report and we look forward to discussing it with you.

Sincerely,

A handwritten signature in black ink that reads "Robert L. Schmidt".

Robert L. Schmidt, FSA, EA, MAAA
Principal and Consulting Actuary

A handwritten signature in red ink that reads "Janet Jennings".

Janet O. Jennings, ASA, MAAA
Consulting Actuary

RLS/JOJ/bh

Table of Contents

	Page
Letter of Transmittal	
Section 1: Executive Summary	1
Section 2: Actuarial Valuation as of July 1, 2020.....	6
A. Valuation Methodology	6
B. Liabilities and Costs	7
Section 3: County Liabilities and Costs	9
Section 4: Superior Court Liabilities and Costs.....	16
Section 5: LACERA Liabilities and Costs.....	23
Section 6: County, Superior Court, and LACERA Liabilities and Costs.....	30
Section 7: Total of All Agents Liabilities and Costs	37
Section 8: ACFR Information.....	44
Appendices	
Appendix A Actuarial Procedures and Assumptions	50
Appendix B Summary of OPEB Program Provisions	112
Appendix C Valuation Data and Schedules	118
Appendix D Glossary.....	129
Appendix E Medical Plan Comparisons.....	132
Appendix F Firefighters Local 1014 Medical Plan.....	146
Appendix G Dental and Vision Plan Description	152
Appendix H Medicare Part B Reimbursement Plan Description.....	155
Appendix I Historical Information	158

Section 1: Executive Summary

2020 Valuation Results

Exhibit 1	July 1, 2020	July 1, 2019
Actuarial Accrued Liability (\$ billions)	\$ 21.30	\$ 20.75
Less Assets	1.49	1.24
Unfunded Actuarial Accrued Liability	\$ 19.81	\$ 19.51
Normal Cost Rate	7.33%	7.58%
ADC as a Percentage of Payroll	18.18%	18.87%

Note both years exclude the ACA Excise Tax

Overview

We are pleased to present the results of the July 1, 2020 annual actuarial valuation. Several key points from Exhibit 1 are summarized as follows:

- The Unfunded Actuarial Accrued Liability (UAAL) increased due to a combination of several factors, some of which were offsetting. These included the assumption changes based on our 2020 OPEB Investigation of Experience study, and increases due to the passage of time since our July 1, 2019 valuation. Other factors were claim cost experience gains, trend assumption gains, other experience gains, and asset losses measured as of July 1, 2020.
- The Normal Cost and Actuarially Determined Contribution (ADC) increased as dollar amounts due to the factors mentioned above. These amounts decreased as a percentage of payroll because payroll increased faster than the Normal Cost and ADC.

Analysis of Change

Exhibit 2 illustrates the sources of change between the July 1, 2019 and July 1, 2020 valuations. The dollar figures are expressed in billions of dollars.

Section A: The impact of the 2020 OPEB Experience Study changes caused minor changes in the Actuarial Accrued Liability (AAL) and Normal Cost Rate (NCR). The expected one-year change represents expected changes in the UAAL and NCR due to interest and benefit accruals, net of employer contributions in excess of benefits paid and expected investment return. The cost percentages are based on the assumed July 1, 2019 valuation payroll of \$8,215.4 million, increased by 3.25% per year (the payroll increase assumed at the time of the July 1, 2019 valuation) for one year to \$8,482.4 million (projected as of July 1, 2020).

Section B: The claim cost experience gain includes the impact of updated aging factors. The trend assumption gain includes the impact of the July 1, 2021 premiums and the trend assumption changes. The July 1, 2021 premiums are based on premiums received from Segal as of February 19, 2021 and approved by the Board of Retirement on March 3, 2021. The trend assumption reflects the enactment of H.R. 1865 which repeals the Excise Tax and removes the Health Insurer Fee after calendar year 2020. The Patient Centered Outcomes Research Institute (PCORI) Fee was extended to 2029. The "Other Experience" gain includes the impact of all other demographic and economic experience. There is a relatively small asset loss due to the actual investment returns being lower than assumed. The cost percentages in this section are based on the July 1, 2020 valuation payroll of \$8,682.2 million.

Milliman July 1, 2020 OPEB Actuarial Valuation
Los Angeles County Employees Retirement Association

Exhibit 2: Analysis of Change
(All Dollar Amounts in Billions)

Sources of Change	Actuarial	(Assets)	Unfunded	Normal	ADC
	Accrued Liability		Actuarial Accrued Liability	Cost Rate	Percentage
A. July 1, 2019 Valuation	\$ 20.75	\$ (1.24)	\$ 19.51	7.58%	18.87%
2020 OPEB Experience Study Changes	0.31	-	0.31	0.18%	0.36%
Expected One-year Change	1.25	(0.33)	0.92	0.00%	0.15%
B. July 1, 2020 Valuation Expected	\$ 22.31	\$ (1.57)	\$ 20.74	7.76%	19.38%
Claim Cost Experience	(0.16)	-	(0.16)	(0.06%)	(0.14%)
Trend Assumption (Gain)/Loss ⁽¹⁾	(0.84)	-	(0.84)	(0.25%)	(0.71%)
Other Experience (Gain)/Loss	(0.01)	-	(0.01)	(0.12%)	(0.39%)
Asset (Gain)/Loss	-	0.08	0.08	0.00%	0.04%
C. July 1, 2020 Valuation	\$ 21.30	\$ (1.49)	\$ 19.81	7.33%	18.18%

¹ Includes impact of July 1, 2021 renewals

Summary Valuation Results

Exhibit 3 provides a summary of the valuation results for the County, Superior Court, LACERA and the Outside Districts. The following key results are included in the table:

- The total Present Value of Future Benefits (PVB). The PVB is based on a projection of all benefits that are expected to be received in the future for all current members (active, vested, and retired) discounted to the valuation date. The projected benefit payments are discounted using the investment earnings assumption. For the agents that are prefunding into the OPEB Trust (County, Superior Court and LACERA) the investment earnings assumption is 6.00%. This is OPEB Trust's expected return. The Outside Districts are not prefunding into the OPEB Trust. Their investment earnings assumption is 2.30% based on the County's general fund expected return.
- The Present Value of Future Normal Costs (PVFNC). This is the value of the liability attributable to periods after the valuation date, according to the actuarial cost method which is Entry Age Normal (EAN). The PVFNC is the difference between the PVB and the Actuarial Accrued Liability.
- The Actuarial Accrued Liability (AAL). This amount represents the value of the liability that is accrued for periods prior to the valuation date, according to the EAN actuarial cost method.
- Assets. Since the OPEB program is partially funded, this is the asset balance as of July 1, 2020.
- The Actuarially Determined Contribution (ADC). At the direction of the plan sponsors, the ADC is based on the County Normal Cost Rate plus an open 30-year level percentage of payroll amortization of the Unfunded Actuarial Accrued Liability (UAAL). It should be noted that the amortization does not cover interest on the UAAL; in other words, the UAAL will be expected to increase in the following year if all assumptions are met.

Milliman July 1, 2020 OPEB Actuarial Valuation
Los Angeles County Employees Retirement Association

Exhibit 3: OPEB Benefit Liabilities and Costs¹
Summary of July 1, 2020 Valuation Results
(All Dollar Amounts in Millions)

	County	Superior Court	LACERA	Outside Districts	Total
1. Present Value of Future Benefits	\$ 28,132.6	\$ 1,210.1	\$ 94.9	\$ 16.0	\$ 29,453.6
2. Present Value of Future Normal Costs	7,844.9	273.3	30.0	2.7	8,150.9
3. Actuarial Accrued Liability (1-2)	\$ 20,287.7	\$ 936.8	\$ 64.9	\$ 13.3	\$ 21,302.7
4. Assets	1,441.4	45.6	5.6	-	1,492.6
5. Unfunded Actuarial Accrued Liability (3-4)	\$ 18,846.3	\$ 891.2	\$ 59.3	\$ 13.3	\$ 19,810.1
6. ADC ²	\$ 1,508.4	\$ 64.6	\$ 5.0	\$ 0.6	\$ 1,578.6
7. ADC expressed as a percentage of payroll					
Normal Cost	7.38%	6.53%	5.09%	14.29%	7.33%
UAAL payment	10.80%	12.47%	6.48%	71.43%	10.85%
Total	18.18%	19.00%	11.57%	85.72%	18.18%

¹ Net of Retiree Paid Premiums. May not match other Tables due to rounding.

² Normal cost and 30 year level percentage of payroll amortization of the Unfunded Actuarial Accrued Liability (UAAL).

Comparison of Results to Prior Valuation

Exhibit 4 provides a summary of key valuation results as of July 1, 2020 and July 1, 2019, both without Excise Tax. The July 1, 2020 and July 1, 2019 results are based on an assumed 6.00% investment rate of return (discount rate) for the agents that are prefunding through the LACERA OPEB Trust (County, Superior Court, and LACERA) and an assumed 2.30% investment rate of return for the Outside Districts who are not prefunding through the LACERA OPEB Trust. The investment rate of return reflects the investment policy assumptions described in our 2020 OPEB Investigation of Experience study.

The following key results are included in Exhibit 4:

- A summary of total membership by type of member as of the valuation date.
- Total payroll as of the valuation date. The one-year increase of 5.7% is higher than the anticipated one-year increase of 3.25%.
- The expected paid benefits for the first year following the valuation date. The one-year increase of 6.4% is less than the previously expected one-year increase of 7.5% due largely to lower than anticipated health care premiums. This is based on Table 6 in Section 7 of the July 1, 2019 valuation, which expected the 2019-2020 payment level of \$678.75 million to increase to \$729.83 million in 2020-2021 (as compared to the new expected 2020-2021 amount of \$722.10 million).
- The total Present Value of Future Benefits (PVB).
- The Actuarial Accrued Liability (AAL). The changes in AAL varied by member status and benefit type. The 2.7% overall increase is lower than expected as a result of the 2020 OPEB experience study changes and lower-than-expected claims and trend.
- The Actuarially Determined Contribution (ADC). The ADC increased by 1.8% from \$1,551.0 to \$1,578.6 million. Since payroll rose faster than ADC, the ratio of ADC to payroll decreased from 18.87% to 18.18%. As seen in the Analysis of Change in Exhibit 2, this percent-of-payroll decrease is primarily due to the lower-than-expected health care trend.

Milliman July 1, 2020 OPEB Actuarial Valuation
Los Angeles County Employees Retirement Association

Exhibit 4: July 1, 2020 Summary of Liabilities and Cost
(All Dollar Amounts in Millions)

	July 1, 2020	July 1, 2019	Percentage Change
A. Total Membership			
1. Active Members	100,051	99,128	0.9%
2. Vested Terminated Members	8,631	8,593	0.4%
3. Retirees and Survivors (Medical Coverage)	52,589	51,499	2.1%
4. Total	<u>161,271</u>	<u>159,220</u>	1.3%
B. Valuation Payroll	\$ 8,682.2	\$ 8,215.4	5.7%
C. Projected Paid First-Year Benefits	\$ 722.1	\$ 678.8	6.4%
D. Present Value of Future Benefits (PVB) ¹	\$ 29,453.6	\$ 28,751.7	2.4%
E. Actuarial Accrued Liability by Member Group ¹			
1. LA County Members	\$ 20,287.7	\$ 19,770.3	2.6%
2. Superior Court Members	936.8	906.3	3.4%
3. LACERA Members	64.9	62.2	4.3%
4. Outside District Members	13.3	13.8	(3.6%)
5. Total	<u>\$ 21,302.7</u>	<u>\$ 20,752.6</u>	2.7%
F. Actuarial Accrued Liability by Member Status ¹			
1. Active Members	\$ 10,706.4	\$ 10,492.7	2.0%
2. Vested Terminated Members	500.3	496.3	0.8%
3. Retired Members	10,096.0	9,763.6	3.4%
4. Total	<u>\$ 21,302.7</u>	<u>\$ 20,752.6</u>	2.7%
G. Actuarial Accrued Liability by Benefit Type ¹			
1. Retiree Medical	\$ 16,714.0	\$ 16,491.7	1.3%
2. Retiree Dental/Vision	1,064.5	1,022.8	4.1%
3. Medicare Part B	3,351.2	3,068.4	9.2%
4. Retiree Death Benefit	173.0	169.7	1.9%
5. Total	<u>\$ 21,302.7</u>	<u>\$ 20,752.6</u>	2.7%
H. Assets	\$ 1,492.6	\$ 1,238.5	20.5%
I. Unfunded Actuarial Accrued Liability	\$ 19,810.1	\$ 19,514.1	1.5%
J. Actuarially Determined Contribution (ADC)			
1. Normal Cost	\$ 636.6	\$ 623.1	2.2%
2. UAAL payment ²	942.0	927.9	1.5%
3. Total	<u>\$ 1,578.6</u>	<u>\$ 1,551.0</u>	1.8%
K. ADC expressed as a percentage of payroll			
1. Normal Cost	7.33%	7.58%	
2. UAAL payment	10.85%	11.29%	
3. Total	<u>18.18%</u>	<u>18.87%</u>	

¹ Net of Retiree Paid Premiums

² 30 year level percentage of payroll amortization of the Unfunded Actuarial Accrued Liability (UAAL)

Funding Progress

The commitment to prefunding is based on the June 22, 2015 County budget policy, the November 20, 2015 LACERA funding policy, and the Superior Court funding policy communicated to LACERA on October 28, 2020. The County's policy is to increase the contributions by \$56 million each year until the ADC is reached and then the ADC would be contributed. The funded ratio is expected to increase gradually over time. However, the UAAL is expected to continue to increase due to the open 30-year amortization and not paying down the principal. The ADC is also expected to increase over time. The increases in the ADC are projected to be lower than what they would have been absent the ramp up of the OPEB trust contributions.

The funded status is not appropriate for assessing the sufficiency of plan assets to cover the potential costs of settling the liabilities. It is appropriate for the calculating the amount of future ADCs.

Section 2: Actuarial Valuation as of July 1, 2020

A. Valuation Methodology

This is a valuation of the retiree medical, dental/vision, and death benefits covering the retired Los Angeles County, Superior Court, LACERA, and Outside District workers who also participate in the Los Angeles County Employees Retirement Association (LACERA) retirement benefits plan. This valuation is performed annually.

In analyzing the GASB liabilities and ADC, we were asked to divide the results into the following agents and agent groupings:

- LA County
- Superior Court
- LACERA
- LA County, Superior Court, and LACERA
- LA County, Superior Court, LACERA, and Outside Districts

The tables in this report present the unfunded liabilities, ADC, and projected benefit payments under the Entry Age Normal (EAN) cost method separately for each of the agents and agent groupings identified above. This method is described further in Appendix A. Due to the low number of members who have service with more than one agent, at the direction of the plan sponsors, the results do not reflect bifurcation of service between agents.

The tables are as follows:

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

The actuarial assumptions and methods used in the valuation are summarized in Appendix A. The retirement benefit related demographic and economic assumptions used in this report are based on those developed for the June 30, 2020 valuation of the LACERA retirement benefit plan. The OPEB demographic and economic assumptions and methods are based on the results of our 2020 OPEB Investigation of Experience, dated TBD. These assumptions were identified, evaluated, and agreed upon collaboratively by the actuaries and consultants at the time representing the OPEB program stakeholders including: Milliman, LACERA's actuary; Segal, LACERA's Health Care Benefits Consultant; Cavanaugh Macdonald, LACERA's reviewing actuary; Cheiron, Los Angeles County's actuary; and Rael & Letson, actuary for SEIU Local 721.

The health-related assumptions used in the report were also agreed upon collaboratively by the following actuaries and consultants: Cavanaugh Macdonald, Cheiron, Milliman, Rael & Letson, and Segal, and

approved by the Board of Retirement. Thus, the assumptions were the result of a collaborative effort by these various stakeholder groups.

Comprehensive medical benefits, dental/vision benefits, and death benefits are provided to all members, who retire and satisfy the eligibility requirements outlined in Appendix B. Retired Local 1014 members are eligible for the Local 1014 Firefighters' retiree medical plan as outlined in Appendix F. Eligibility for the County OPEB program is tied to benefit eligibility under the LACERA retirement benefits plan. Thus, all former employees receiving OPEB program benefits are also members in the retirement benefits plan.

Appendix B includes a description of healthcare Tier 1 and Tier 2.

The active and vested terminated member census data for each of the OPEB program member groups is summarized by the LACERA retirement benefit plan levels in Appendix C. The retiree and dependent data for each health plan and benefit group is also summarized in Appendix C.

A glossary of terms is provided in Appendix D. Summaries of health benefits are provided in Appendices E, F, G, and H.

Appendix I provides historical statistical information on LACERA's membership, liabilities, assets, and costs. There is also a history of changes.

B. Liabilities and Costs

Key Liability Descriptions

A discussion of GASB Statements No. 74 and 75 is in Section 8, Accounting and Annual Comprehensive Financial Report (ACFR) Information.

There are two measures of OPEB program liabilities, the Actuarial Present Value of Projected Total Benefits (PVB) and the Actuarial Accrued Liability (AAL).

The PVB is the present value of the future postemployment benefits payable to current active members and retirees. This value is net of future retiree contributions. The PVB is shown in Exhibit 4 above.

The AAL is the most important measure of liability because it is used to derive the Actuarially Determined Contribution (ADC) and disclosure values. The AAL is the portion of the PVB attributed to periods up to the measurement date. For this report, the AAL is determined under the Entry Age Normal actuarial cost method.

Table 1 in each agent's section below shows the membership as of July 1, 2019 and July 1, 2020. The AAL is summarized by member status and coverage (Medical, dental/vision, Medicare Part B, and Death benefit).

The AAL is shown in more detail in Table 2 of each agent's section subtotaled by benefit type and member status.

Post-employment benefits are accrued during employment. Therefore, the costs are spread over the period from the date of hire to the date of termination or retirement. For current retirees and terminated vested members, the AAL is equal to the PVB since there is no future service to be rendered. For active members, the AAL is based on the portion of the PVB that is allocated to prior years based on the actuarial cost method. For the EAN method, the actuarial present value of the projected benefits of each individual is allocated as a level percentage of the individual's projected compensation between entry age and assumed exit.

The portion of the PVB that is anticipated to be earned in the year following the valuation date is the Normal Cost (NC). The NC is shown in Table 2 of each agent's section.

Actuarially Determined Contribution

The ADC is made up of two components: Normal Cost (NC) and amortization of the Unfunded Actuarial Accrued Liability (UAAL). The UAAL is the AAL net of assets. For purposes of this valuation, the UAAL is amortized on an open basis over 30 years as a level percentage of payroll. The amortization under this methodology is not sufficient to cover the interest on the UAAL which implies the amount of the UAAL is expected to increase over time. Even if the full ADC is contributed, it would not be sufficient to cover interest and the expected increase in the UAAL. Note this term, the ADC, is a calculated amount, and may or may not reflect the actual employer contributions towards funding the OPEB program benefits.

Table 3 of each agent's section details the ADC results as of July 1, 2020, the beginning of the 2020/2021 fiscal year.

Fiduciary Net Position

Table 4 in each agent's section provides the statement of changes in Fiduciary Net Position (FNP) or assets. OPEB Trust and Agency Fund activity is included.

Analysis of Change

Table 5 in each agent's section illustrates the source of change between the July 1, 2019 and the July 1, 2020 valuation.

Estimated Pay-As-You-Go Costs

Table 6 in each agent's section projects the estimated annual OPEB benefit pay-as-you-go costs, net of expected retiree paid premiums for the next ten years. The total projected pay-as-you-go costs are shown separately for medical, dental/vision, Medicare Part B, and retiree death benefits. The medical and dental/vision retiree contributions are also summarized. Finally, the net County paid benefits are shown. These are the total projected pay-as-you-go costs minus the retiree contributions.

Background on Accounting Requirements

GASB issued Statement No. 74 in June of 2015. This statement replaced GASB Statement No. 43. GASB also issued Statement No. 75 in June of 2015. This statement replaced GASB Statement No. 45. LACERA was required to adopt Statement No. 74 for the fiscal year ended June 30, 2017. For the County, LACERA, Superior Court, and Outside Districts, Statement No. 75 was required to be adopted for the fiscal year ending June 30, 2018. The requirements under GASB 74 and 75 necessitate separate disclosure reports from this funding valuation. Parts of this valuation, including the ADC, census, assumptions, and methods are utilized in the separate GASB 75 disclosure report.

The information in this report was prepared for the purpose of presenting OPEB funding and ACFR information. The actual funding of the OPEB program benefits may differ from the amounts used for accounting disclosure purposes. The investment return for the County, Superior Court and LACERA who are prefunding through the OPEB Trust, is the OPEB Trust expected return of 6.00%. The expected return for the Outside Districts is the investment earnings assumption of the County's general funds expected return of 2.30%.

Section 3: County Liabilities and Costs

The following tables show key results of the July 1, 2020 OPEB funding valuation for the County.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

**Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: County
 (All Dollar Amounts in Millions)**

	<u>July 1, 2020</u>	<u>July 1, 2019</u>	<u>Percentage Change</u>
1. Membership			
Active Members	95,188	94,192	1.1%
Vested Terminated Members	8,004	7,934	0.9%
Retirees and Survivors (Death Benefit)	<u>55,053</u>	<u>53,863</u>	2.2%
Total	158,245	155,989	1.4%
Retirees and Survivors (Medical Coverage)	49,940	48,935	2.1%
Retirees and Survivors (Dental/Vision Coverage)	51,234	50,135	2.2%
Retirees and Survivors (Medicare Part B Coverage)	34,303	33,387	2.7%
2. AAL Summary - Total Paid Benefits by Member Status			
Retirees and Survivors	\$ 9,634.7	\$ 9,331.8	3.2%
Vested Terminated Members	448.6	441.5	1.6%
Active Members	<u>10,204.4</u>	<u>9,997.0</u>	2.1%
Total	\$ 20,287.7	\$ 19,770.3	2.6%
3. AAL Summary - Total Paid Benefits by Coverage			
Medical	\$ 15,938.0	\$ 15,729.2	1.3%
Dental/Vision	1,011.2	971.9	4.0%
Medicare Part B	3,175.0	2,909.0	9.1%
Death Benefit	<u>163.5</u>	<u>160.2</u>	2.1%
Total	\$ 20,287.7	\$ 19,770.3	2.6%

**Table 2: July 1, 2020 Actuarial Accrued Liability (AAL) and Normal Cost (NC): County
 (All Dollar Amounts in Millions)**

	Medical	Dental	Part B	Death	Total
1. AAL - Total Benefits					
Retirees and Survivors	\$ 8,160.8	\$ 591.2	\$ 1,431.0	\$ 122.4	\$ 10,305.4
Vested Terminated Members	547.3	32.0	92.9	5.4	677.6
Active Members	8,343.4	469.8	1,651.1	35.7	10,500.0
Total	\$ 17,051.5	\$ 1,093.0	\$ 3,175.0	\$ 163.5	\$ 21,483.0
2. AAL - Retiree Paid Premiums					
Retirees and Survivors	\$ 620.7	\$ 50.0	\$ -	\$ -	\$ 670.7
Vested Terminated Members	216.2	12.8	-	-	229.0
Active Members	276.6	19.0	-	-	295.6
Total	\$ 1,113.5	\$ 81.8	\$ -	\$ -	\$ 1,195.3
3. AAL - Agent Paid Benefits (1) - (2)					
Retirees and Survivors	\$ 7,540.1	\$ 541.2	\$ 1,431.0	\$ 122.4	\$ 9,634.7
Vested Terminated Members	331.1	19.2	92.9	5.4	448.6
Active Members	8,066.8	450.8	1,651.1	35.7	10,204.4
Total	\$ 15,938.0	\$ 1,011.2	\$ 3,175.0	\$ 163.5	\$ 20,287.7
4. NC					
Total Benefits	\$ 598.5	\$ 29.8	\$ 101.1	\$ 2.2	\$ 731.6
Retiree Paid Premiums	113.4	6.1	-	-	119.5
Net Agent Paid Benefits	\$ 485.1	\$ 23.7	\$ 101.1	\$ 2.2	\$ 612.1

Table 3: 2020-2021 Actuarially Determined Contribution (ADC): County
(All Dollar Amounts in Millions)

	<u>County</u>
1. Unfunded Actuarial Accrued Liability (UAAL)	
Present Value of Benefits (PVB)	\$ 28,132.6
Present Value of Future Normal Cost (PVFNC)	<u>7,844.9</u>
Actuarial Accrued Liability as of July 1, 2020	\$ 20,287.7
Fund Balance at July 1, 2020	<u>1,441.4</u>
Unfunded Actuarial Accrued Liability	\$ 18,846.3
2. Amortization of UAAL (Level % of Pay)	
Amortization Period (years)	30.0
Amortization Factor	21.027
UAAL Amortization Payment	\$ 896.3
3. 2020 - 2021 Actuarially Determined Contribution (ADC) on July 1, 2020	
Amortization of UAAL	\$ 896.3
Normal Cost	<u>612.1</u>
Actuarially Determined Contribution (ADC) as of July 1, 2020	\$ 1,508.4
4. July 1, 2020 Valuation Payroll	\$ 8,298.3
5. ADC as a Percentage of Valuation Payroll	18.18%

**Table 4: Statement of Changes in Fiduciary Net Position: County
 (All Dollar Amounts in Millions)**

1. Fund Balance as of July 1, 2019	\$	1,189.4
2. Additions:		
Employer Contributions	\$	886.8
Investment and Miscellaneous Income		6.8
Investment Expenses		(0.9)
Total Additions	\$	<u>892.7</u>
3. Deductions:		
Administrative Expenses ⁽¹⁾	\$	(0.1)
Benefit Payments ⁽²⁾		(640.6)
Total Deductions	\$	<u>(640.7)</u>
4. Fund Balance as of June 30, 2020	\$	1,441.4

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ending June 30, 2020) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

Milliman July 1, 2020 OPEB Actuarial Valuation
Los Angeles County Employees Retirement Association

Table 5: Analysis of Change: County

Sources of Change	Actuarial Accrued Liability ⁽¹⁾	(Assets) ⁽¹⁾	Unfunded Actuarial Accrued Liability ⁽¹⁾	Normal Cost Rate ⁽²⁾	ADC Percentage ⁽²⁾
A. July 1, 2019 Valuation	\$ 19,770.3	\$ (1,189.4)	\$ 18,580.9	7.63%	18.90%
2020 Experience Study Changes	291.9	0	291.9	0.17%	0.35%
Expected One-year Change	1,185.2	(324.8)	860.4	0.00%	0.15%
B. July 1, 2020 Valuation Expected	\$ 21,247.4	\$ (1,514.2)	\$ 19,733.2	7.80%	19.40%
Claim Cost Experience	(150.7)	-	(150.7)	(0.05%)	(0.14%)
Trend Assumption (Gain)/Loss ⁽³⁾	(799.5)	-	(799.5)	(0.25%)	(0.70%)
Other Experience (Gain)/Loss	(9.5)	-	(9.5)	(0.12%)	(0.42%)
Asset (Gain)/Loss	-	72.8	72.8	0.00%	0.04%
C. July 1, 2020 Valuation	\$ 20,287.7	\$ (1,441.4)	\$ 18,846.3	7.38%	18.18%

- (1) In millions of dollars
- (2) Expressed as a percentage of payroll
- (3) Includes impact of July 1, 2021 renewals

**Table 6: Projected Paid Benefits by Type: County
 (All Dollar Amounts in Millions)**

Fiscal Year Ending	Medical Total	Dental/Vision Total	Medicare Part B	Death Benefit	Medical Retiree Contribution	Dental/Vision Retiree Contribution	Total Paid Benefits
6/30/2021	\$ 605.86	\$ 49.57	\$ 77.33	\$ 8.22	\$ (48.14)	\$ (4.45)	\$ 688.39
6/30/2022	629.31	50.83	87.20	8.46	(52.25)	(4.63)	718.92
6/30/2023	679.47	53.48	94.61	8.71	(57.96)	(4.94)	773.37
6/30/2024	731.35	56.26	102.65	8.96	(63.67)	(5.24)	830.31
6/30/2025	783.94	59.14	111.67	9.21	(69.23)	(5.55)	889.18
6/30/2026	842.90	62.10	121.24	9.47	(75.09)	(5.84)	954.78
6/30/2027	894.03	65.14	131.66	9.74	(80.49)	(6.14)	1,013.94
6/30/2028	951.89	68.24	142.95	10.01	(86.23)	(6.44)	1,080.42
6/30/2029	1,012.51	71.39	154.74	10.28	(92.20)	(6.74)	1,149.98
6/30/2030	1,075.24	74.60	167.63	10.55	(98.50)	(7.05)	1,222.47

Projection Basis:
 All assumptions are met
 No future members are reflected

Section 4: Superior Court Liabilities and Costs

The following tables show key results of the July 1, 2020 OPEB funding valuation for Superior Court.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

**Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: Superior Court
 (All Dollar Amounts in Millions)**

	<u>July 1, 2020</u>	<u>July 1, 2019</u>	<u>Percentage Change</u>
1. Membership			
Active Members	4,455	4,532	(1.7%)
Vested Terminated Members	594	621	(4.3%)
Retirees and Survivors (Death Benefit)	2,935	2,830	3.7%
Total	<u>7,984</u>	<u>7,983</u>	0.0%
Retirees and Survivors (Medical Coverage)	2,397	2,317	3.5%
Retirees and Survivors (Dental/Vision Coverage)	2,439	2,366	3.1%
Retirees and Survivors (Medicare Part B Coverage)	1,657	1,570	5.5%
2. AAL Summary - Total Paid Benefits by Member Status			
Retirees and Survivors	\$ 419.7	\$ 390.1	7.6%
Vested Terminated Members	49.7	52.6	(5.5%)
Active Members	467.4	463.6	0.8%
Total	<u>\$ 936.8</u>	<u>\$ 906.3</u>	3.4%
3. AAL Summary - Total Paid Benefits by Coverage			
Medical	\$ 715.5	\$ 702.6	1.8%
Dental/Vision	49.4	47.2	4.7%
Medicare Part B	163.3	147.9	10.4%
Death Benefit	8.6	8.6	0.0%
Total	<u>\$ 936.8</u>	<u>\$ 906.3</u>	3.4%

**Table 2: July 1, 2020 Actuarial Accrued Liability (AAL) and Normal Cost (NC): Superior Court
(All Dollar Amounts in Millions)**

	Medical	Dental	Part B	Death	Total
1. AAL - Total Benefits					
Retirees and Survivors	\$ 355.1	\$ 26.7	\$ 67.2	\$ 6.2	\$ 455.2
Vested Terminated Members	57.3	3.3	9.6	0.4	70.6
Active Members	362.6	24.0	86.5	2.0	475.1
Total	\$ 775.0	\$ 54.0	\$ 163.3	\$ 8.6	\$ 1,000.9
2. AAL - Retiree Paid Premiums					
Retirees and Survivors	\$ 32.8	\$ 2.7	\$ -	\$ -	\$ 35.5
Vested Terminated Members	19.7	1.2	-	-	20.9
Active Members	7.0	0.7	-	-	7.7
Total	\$ 59.5	\$ 4.6	\$ -	\$ -	\$ 64.1
3. AAL - Agent Paid Benefits (1) - (2)					
Retirees and Survivors	\$ 322.3	\$ 24.0	\$ 67.2	\$ 6.2	\$ 419.7
Vested Terminated Members	37.6	2.1	9.6	0.4	49.7
Active Members	355.6	23.3	86.5	2.0	467.4
Total	\$ 715.5	\$ 49.4	\$ 163.3	\$ 8.6	\$ 936.8
4. NC					
Total Benefits	\$ 20.7	\$ 1.2	\$ 4.1	\$ 0.1	\$ 26.1
Retiree Paid Premiums	3.7	0.2	-	-	3.9
Net Agent Paid Benefits	\$ 17.0	\$ 1.0	\$ 4.1	\$ 0.1	\$ 22.2

**Table 3: 2020-2021 Actuarially Determined Contribution (ADC): Superior Court
 (All Dollar Amounts in Millions)**

	<u>Superior Court</u>
1. Unfunded Actuarial Accrued Liability (UAAL)	
Present Value of Benefits (PVB)	\$ 1,210.1
Present Value of Future Normal Cost (PVFNC)	<u>273.3</u>
Actuarial Accrued Liability as of July 1, 2020	\$ 936.8
Fund Balance at July 1, 2020	<u>45.6</u>
Unfunded Actuarial Accrued Liability	\$ 891.2
2. Amortization of UAAL (Level % of Pay)	
Amortization Period (years)	30.0
Amortization Factor	21.027
UAAL Amortization Payment	\$ 42.4
3. 2020 - 2021 Actuarially Determined Contribution (ADC) on July 1, 2020	
Amortization of UAAL	\$ 42.4
Normal Cost	<u>22.2</u>
Actuarially Determined Contribution (ADC) as of July 1, 2020	\$ 64.6
4. July 1, 2020 Valuation Payroll	\$ 340.0
5. ADC as a Percentage of Valuation Payroll	19.00%

**Table 4: Statement of Changes in Fiduciary Net Position: Superior Court
 (All Dollar Amounts in Millions)**

1. Fund Balance as of July 1, 2019	\$	44.5
2. Additions:		
Employer Contributions	\$	26.8
Investment and Miscellaneous Income		0.1
Investment Expenses		-
Total Additions	\$	<u>26.9</u>
3. Deductions:		
Administrative Expenses ⁽¹⁾	\$	-
Benefit Payments ⁽²⁾		<u>(25.8)</u>
Total Deductions	\$	<u>(25.8)</u>
4. Fund Balance as of June 30, 2020	\$	45.6

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ending June 30, 2020) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

Note Superior Court's investment expenses are \$45,638 and administrative expenses are \$32,843 which fall below the rounding.

Milliman July 1, 2020 OPEB Actuarial Valuation
Los Angeles County Employees Retirement Association

Table 5: Analysis of Change: Superior Court

Sources of Change	Actuarial Accrued Liability ⁽¹⁾	(Assets) ⁽¹⁾	Unfunded Actuarial Accrued Liability ⁽¹⁾	Normal Cost Rate ⁽²⁾	ADC Percentage ⁽²⁾
A. July 1, 2019 Valuation	\$ 906.3	\$ (44.5)	\$ 861.8	6.69%	18.99%
2020 Experience Study Changes	16.9	0	16.9	0.18%	0.42%
Expected One-year Change	51.1	(3.7)	47.4	(0.01%)	0.23%
B. July 1, 2020 Valuation Expected	\$ 974.3	\$ (48.2)	\$ 926.1	6.86%	19.64%
Claim Cost Experience	(8.6)	-	(8.6)	(0.06%)	(0.20%)
Trend Assumption (Gain)/Loss ⁽³⁾	(37.6)	-	(37.6)	(0.26%)	(0.77%)
Other Experience (Gain)/Loss	8.7	-	8.7	(0.01%)	0.30%
Asset (Gain)/Loss	-	2.6	2.6	0.00%	0.03%
C. July 1, 2020 Valuation	\$ 936.8	\$ (45.6)	\$ 891.2	6.53%	19.00%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

(3) Includes impact of July 1, 2021 renewals

**Table 6: Projected Paid Benefits by Type: Superior Court
 (All Dollar Amounts in Millions)**

Fiscal Year Ending	Medical Total	Dental/Vision Total	Medicare Part B	Death Benefit	Medical Retiree Contribution	Dental/Vision Retiree Contribution	Total Paid Benefits
6/30/2021	\$ 27.09	\$ 2.26	\$ 3.62	\$ 0.40	\$ (2.60)	\$ (0.25)	\$ 30.52
6/30/2022	28.01	2.33	4.13	0.41	(2.78)	(0.26)	31.84
6/30/2023	30.22	2.47	4.51	0.42	(3.05)	(0.27)	34.30
6/30/2024	32.69	2.61	4.92	0.44	(3.28)	(0.29)	37.09
6/30/2025	34.91	2.77	5.41	0.45	(3.51)	(0.30)	39.73
6/30/2026	37.59	2.93	5.96	0.46	(3.77)	(0.31)	42.86
6/30/2027	40.09	3.10	6.51	0.48	(3.98)	(0.33)	45.87
6/30/2028	43.04	3.29	7.13	0.50	(4.26)	(0.34)	49.36
6/30/2029	45.89	3.48	7.84	0.51	(4.53)	(0.35)	52.84
6/30/2030	48.80	3.67	8.60	0.53	(4.77)	(0.37)	56.46

Projection Basis:
 All assumptions are met
 No future members are reflected

Section 5: LACERA Liabilities and Costs

The following tables show key results of the July 1, 2020 OPEB funding valuation for LACERA.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

**Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: LACERA
 (All Dollar Amounts in Millions)**

	<u>July 1, 2020</u>	<u>July 1, 2019</u>	<u>Percentage Change</u>
1. Membership			
Active Members	401	396	1.3%
Vested Terminated Members	33	38	(13.2%)
Retirees and Survivors (Death Benefit)	185	178	3.9%
Total	<u>619</u>	<u>612</u>	1.1%
Retirees and Survivors (Medical Coverage)	158	149	6.0%
Retirees and Survivors (Dental/Vision Coverage)	159	152	4.6%
Retirees and Survivors (Medicare Part B Coverage)	97	90	7.8%
2. AAL Summary - Total Paid Benefits by Member Status			
Retirees and Survivors	\$ 30.0	\$ 29.1	3.1%
Vested Terminated Members	2.0	2.2	(9.1%)
Active Members	32.9	30.9	6.5%
Total	<u>\$ 64.9</u>	<u>\$ 62.2</u>	4.3%
3. AAL Summary - Total Paid Benefits by Coverage			
Medical	\$ 50.6	\$ 49.2	2.8%
Dental/Vision	3.2	3.0	6.7%
Medicare Part B	10.6	9.5	11.6%
Death Benefit	0.5	0.5	0.0%
Total	<u>\$ 64.9</u>	<u>\$ 62.2</u>	4.3%

**Table 2: July 1, 2020 Actuarial Accrued Liability (AAL) and Normal Cost (NC): LACERA
 (All Dollar Amounts in Millions)**

	Medical	Dental	Part B	Death	Total
1. AAL - Total Benefits					
Retirees and Survivors	\$ 26.3	\$ 1.8	\$ 4.3	\$ 0.4	\$ 32.8
Vested Terminated Members	2.6	0.1	0.4	-	3.1
Active Members	26.6	1.7	5.9	0.1	34.3
Total	\$ 55.5	\$ 3.6	\$ 10.6	\$ 0.5	\$ 70.2
2. AAL - Retiree Paid Premiums					
Retirees and Survivors	\$ 2.6	\$ 0.2	\$ -	\$ -	\$ 2.8
Vested Terminated Members	1.0	0.1	-	-	1.1
Active Members	1.3	0.1	-	-	1.4
Total	\$ 4.9	\$ 0.4	\$ -	\$ -	\$ 5.3
3. AAL - Agent Paid Benefits (1) - (2)					
Retirees and Survivors	\$ 23.7	\$ 1.6	\$ 4.3	\$ 0.4	\$ 30.0
Vested Terminated Members	1.6	-	0.4	-	2.0
Active Members	25.3	1.6	5.9	0.1	32.9
Total	\$ 50.6	\$ 3.2	\$ 10.6	\$ 0.5	\$ 64.9
4. NC					
Total Benefits	\$ 2.2	\$ 0.1	\$ 0.4	\$ -	\$ 2.7
Retiree Paid Premiums	0.5	-	-	-	0.5
Net Agent Paid Benefits	\$ 1.7	\$ 0.1	\$ 0.4	\$ -	\$ 2.2

Table 3: 2020-2021 Actuarially Determined Contribution (ADC): LACERA
(All Dollar Amounts in Millions)

	<u>LACERA</u>
1. Unfunded Actuarial Accrued Liability (UAAL)	
Present Value of Benefits (PVB)	\$ 94.9
Present Value of Future Normal Cost (PVFNC)	<u>30.0</u>
Actuarial Accrued Liability as of July 1, 2020	\$ 64.9
Fund Balance at July 1, 2020	<u>5.6</u>
Unfunded Actuarial Accrued Liability	\$ 59.3
2. Amortization of UAAL (Level % of Pay)	
Amortization Period (years)	30.0
Amortization Factor	21.027
UAAL Amortization Payment	\$ 2.8
3. 2020 - 2021 Actuarially Determined Contribution (ADC) on July 1, 2020	
Amortization of UAAL	\$ 2.8
Normal Cost	<u>2.2</u>
Actuarially Determined Contribution (ADC) as of July 1, 2020	\$ 5.0
4. July 1, 2020 Valuation Payroll	\$ 43.2
5. ADC as a Percentage of Valuation Payroll	11.57%

**Table 4: Statement of Changes in Fiduciary Net Position: LACERA
 (All Dollar Amounts in Millions)**

1. Fund Balance as of July 1, 2019	\$	4.6
2. Additions:		
Employer Contributions	\$	3.0
Investment and Miscellaneous Income		-
Investment Expenses		-
Total Additions	\$	<u>3.0</u>
3. Deductions:		
Administrative Expenses ⁽¹⁾	\$	-
Benefit Payments ⁽²⁾		<u>(2.0)</u>
Total Deductions	\$	<u>(2.0)</u>
4. Fund Balance as of June 30, 2020	\$	5.6

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ending June 30, 2020) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

Note LACERA's investment expenses are \$7,342 and administrative expenses are \$8,210 which fall below the rounding.

Milliman July 1, 2020 OPEB Actuarial Valuation
Los Angeles County Employees Retirement Association

Table 5: Analysis of Change: LACERA

Sources of Change	Actuarial Accrued Liability ⁽¹⁾	(Assets) ⁽¹⁾	Unfunded Actuarial Accrued Liability ⁽¹⁾	Normal Cost Rate ⁽²⁾	ADC Percentage ⁽²⁾
A. July 1, 2019 Valuation	\$ 62.2	\$ (4.6)	\$ 57.6	5.39%	12.01%
2020 Experience Study Changes	1.2	-	1.2	0.24%	0.48%
Expected One-year Change	4.1	(1.3)	2.8	0.07%	0.09%
B. July 1, 2020 Valuation Expected	\$ 67.5	\$ (5.9)	\$ 61.6	5.70%	12.58%
Claim Cost Experience	(0.5)	-	(0.5)	0.00%	(0.23%)
Trend Assumption (Gain)/Loss ⁽³⁾	(2.7)	-	(2.7)	(0.47%)	(0.70%)
Other Experience (Gain)/Loss	0.6	0.3	0.9	(0.14%)	(0.08%)
Asset (Gain)/Loss	-	-	-	0.00%	0.00%
C. July 1, 2020 Valuation	\$ 64.9	\$ (5.6)	\$ 59.3	5.09%	11.57%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

(3) Includes impact of July 1, 2021 renewals

**Table 6: Projected Paid Benefits by Type: LACERA
 (All Dollar Amounts in Millions)**

Fiscal Year Ending	Medical Total	Dental/Vision Total	Medicare Part B	Death Benefit	Medical Retiree Contribution	Dental/Vision Retiree Contribution	Total Paid Benefits
6/30/2021	\$ 2.03	\$ 0.15	\$ 0.21	\$ 0.02	\$ (0.19)	\$ (0.02)	\$ 2.20
6/30/2022	2.09	0.15	0.25	0.02	(0.21)	(0.02)	2.28
6/30/2023	2.26	0.16	0.27	0.02	(0.25)	(0.02)	2.44
6/30/2024	2.40	0.17	0.30	0.03	(0.28)	(0.02)	2.60
6/30/2025	2.54	0.19	0.34	0.03	(0.31)	(0.02)	2.77
6/30/2026	2.70	0.20	0.37	0.03	(0.34)	(0.02)	2.94
6/30/2027	2.90	0.21	0.41	0.03	(0.37)	(0.03)	3.15
6/30/2028	3.09	0.22	0.45	0.03	(0.40)	(0.03)	3.36
6/30/2029	3.27	0.23	0.50	0.03	(0.43)	(0.03)	3.57
6/30/2030	3.51	0.25	0.55	0.04	(0.47)	(0.03)	3.85

Projection Basis:
 All assumptions are met
 No future members are reflected

Section 6: County, Superior Court, and LACERA Liabilities and Costs

The following tables show key results of the July 1, 2020 OPEB funding valuation for the County, Superior Court, and LACERA.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

**Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: County, Superior Court, and LACERA
 (All Dollar Amounts in Millions)**

	July 1, 2020	July 1, 2019	Percentage Change
1. Membership			
Active Members	100,044	99,120	0.9%
Vested Terminated Members	8,631	8,593	0.4%
Retirees and Survivors (Death Benefit)	58,173	56,871	2.3%
Total	<u>166,848</u>	<u>164,584</u>	1.4%
Retirees and Survivors (Medical Coverage)	52,495	51,401	2.1%
Retirees and Survivors (Dental/Vision Coverage)	53,832	52,653	2.2%
Retirees and Survivors (Medicare Part B Coverage)	36,057	35,047	2.9%
2. AAL Summary - Total Paid Benefits by Member Status			
Retirees and Survivors	\$ 10,084.4	\$ 9,751.0	3.4%
Vested Terminated Members	500.3	496.3	0.8%
Active Members	10,704.7	10,491.5	2.0%
Total	<u>\$ 21,289.4</u>	<u>\$ 20,738.8</u>	2.7%
3. AAL Summary - Total Paid Benefits by Coverage			
Medical	\$ 16,704.1	\$ 16,481.0	1.4%
Dental/Vision	1,063.8	1,022.1	4.1%
Medicare Part B	3,348.9	3,066.4	9.2%
Death Benefit	172.6	169.3	1.9%
Total	<u>\$ 21,289.4</u>	<u>\$ 20,738.8</u>	2.7%

**Table 2: July 1, 2020 Actuarial Accrued Liability (AAL) and Normal Cost (NC): County, Superior Court, and LACERA
 (All Dollar Amounts in Millions)**

	Medical	Dental	Part B	Death	Total
1. AAL - Total Benefits					
Retirees and Survivors	\$ 8,542.2	\$ 619.7	\$ 1,502.5	\$ 129.0	\$ 10,793.4
Vested Terminated Members	607.2	35.4	102.9	5.8	751.3
Active Members	8,732.6	495.5	1,743.5	37.8	11,009.4
Total	\$ 17,882.0	\$ 1,150.6	\$ 3,348.9	\$ 172.6	\$ 22,554.1
2. AAL - Retiree Paid Premiums					
Retirees and Survivors	\$ 656.1	\$ 52.9	\$ -	\$ -	\$ 709.0
Vested Terminated Members	236.9	14.1	-	-	251.0
Active Members	284.9	19.8	-	-	304.7
Total	\$ 1,177.9	\$ 86.8	\$ -	\$ -	\$ 1,264.7
3. AAL - Agent Paid Benefits (1) - (2)					
Retirees and Survivors	\$ 7,886.1	\$ 566.8	\$ 1,502.5	\$ 129.0	\$ 10,084.4
Vested Terminated Members	370.3	21.3	102.9	5.8	500.3
Active Members	8,447.7	475.7	1,743.5	37.8	10,704.7
Total	\$ 16,704.1	\$ 1,063.8	\$ 3,348.9	\$ 172.6	\$ 21,289.4
4. NC					
Total Benefits	\$ 621.4	\$ 31.1	\$ 105.6	\$ 2.3	\$ 760.4
Retiree Paid Premiums	117.6	6.3	-	-	123.9
Net Agent Paid Benefits	\$ 503.8	\$ 24.8	\$ 105.6	\$ 2.3	\$ 636.5

**Table 3: 2020-2021 Actuarially Determined Contribution (ADC): County, Superior Court, and LACERA
 (All Dollar Amounts in Millions)**

	<u>Court, and LACERA Subtotal</u>
1. Unfunded Actuarial Accrued Liability (UAAL)	
Present Value of Benefits (PVB)	\$ 29,437.6
Present Value of Future Normal Cost (PVFNC)	<u>8,148.2</u>
Actuarial Accrued Liability as of July 1, 2020	\$ 21,289.4
Fund Balance at July 1, 2020	<u>1,492.6</u>
Unfunded Actuarial Accrued Liability	\$ 19,796.8
2. Amortization of UAAL (Level % of Pay)	
Amortization Period (years)	30.0
Amortization Factor	21.027
UAAL Amortization Payment	\$ 941.5
3. 2020 - 2021 Actuarially Determined Contribution (ADC) on July 1, 2020	
Amortization of UAAL	\$ 941.5
Normal Cost	<u>636.5</u>
Actuarially Determined Contribution (ADC) as of July 1, 2020	\$ 1,578.0
4. July 1, 2020 Valuation Payroll	\$ 8,681.5
5. ADC as a Percentage of Valuation Payroll	18.18%

**Table 4: Statement of Changes in Fiduciary Net Position: County, Superior Court, and LACERA
(All Dollar Amounts in Millions)**

1. Fund Balance as of July 1, 2019	\$	1,238.5
2. Additions:		
Employer Contributions	\$	916.6
Investment and Miscellaneous Income		7.0
Investment Expenses		(0.9)
Total Additions	\$	<u>922.7</u>
3. Deductions:		
Administrative Expenses ⁽¹⁾	\$	(0.2)
Benefit Payments ⁽²⁾		(668.4)
Total Deductions	\$	<u>(668.6)</u>
4. Fund Balance as of June 30, 2020	\$	1,492.6

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ending June 30, 2020) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

Milliman July 1, 2020 OPEB Actuarial Valuation
Los Angeles County Employees Retirement Association

Table 5: Analysis of Change: County, Superior Court, and LACERA

Sources of Change	Actuarial Accrued Liability⁽¹⁾	(Assets)⁽¹⁾	Unfunded Actuarial Accrued Liability⁽¹⁾	Normal Cost Rate⁽²⁾	ADC Percentage⁽²⁾
A. July 1, 2019 Valuation	\$ 20,738.8	\$ (1,238.5)	\$ 19,500.3	7.58%	18.87%
2020 Experience Study Changes	310.0	-	310.0	0.18%	0.36%
Expected One-year Change	1,240.4	(329.8)	910.6	0.00%	0.14%
B. July 1, 2020 Valuation Expected	\$ 22,289.2	\$ (1,568.3)	\$ 20,720.9	7.76%	19.37%
Claim Cost Experience	(159.8)	-	(159.8)	(0.05%)	(0.14%)
Trend Assumption (Gain)/Loss ⁽³⁾	(839.8)	-	(839.8)	(0.25%)	(0.71%)
Other Experience (Gain)/Loss	(0.2)	-	(0.2)	(0.12%)	(0.38%)
Asset (Gain)/Loss	-	75.7	75.7	0.00%	0.04%
C. July 1, 2020 Valuation	\$ 21,289.4	\$ (1,492.6)	\$ 19,796.8	7.33%	18.18%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

(3) Includes impact of July 1, 2021 renewals

**Table 6: Projected Paid Benefits by Type: County, Superior Court, and LACERA
 (All Dollar Amounts in Millions)**

Fiscal Year Ending	Medical Total	Dental/Vision Total	Medicare Part B	Death Benefit	Medical Retiree Contribution	Dental/Vision Retiree Contribution	Total Paid Benefits
6/30/2021	\$ 634.95	\$ 51.99	\$ 81.16	\$ 8.65	\$ (50.93)	\$ (4.71)	\$ 721.11
6/30/2022	659.39	53.32	91.58	8.90	(55.24)	(4.91)	753.04
6/30/2023	711.93	56.11	99.39	9.16	(61.25)	(5.23)	810.11
6/30/2024	766.45	59.05	107.87	9.42	(67.24)	(5.55)	870.00
6/30/2025	821.40	62.09	117.42	9.69	(73.05)	(5.87)	931.68
6/30/2026	883.19	65.22	127.58	9.97	(79.20)	(6.18)	1,000.58
6/30/2027	937.02	68.45	138.58	10.25	(84.85)	(6.49)	1,062.96
6/30/2028	998.03	71.74	150.54	10.54	(90.90)	(6.81)	1,133.14
6/30/2029	1,061.67	75.10	163.08	10.83	(97.16)	(7.13)	1,206.39
6/30/2030	1,127.55	78.52	176.77	11.12	(103.73)	(7.45)	1,282.78

Projection Basis:
 All assumptions are met
 No future members are reflected

Section 7: Total of All Agents Liabilities and Costs

The following tables show key results of the July 1, 2020 OPEB funding valuation for the all agents combined.

- Table 1 is a summary of the membership and Actuarial Accrued Liability (AAL).
- Table 2 shows the AAL and Normal Cost (NC) by membership type and benefit.
- Table 3 displays the development of the Actuarially Determined Contribution (ADC).
- Table 4 is the Statement of Changes in Fiduciary Net Position (FNP).
- Table 5 shows the gain/loss detail.
- Table 6 has the projected paid benefits by benefit type.

The following agents are included in this section:

Agencies that are prefunding the liability utilize a 6.00% investment earnings assumption, which is based on the projected return on the assets in the OPEB Trust.

- County
- Superior Court
- LACERA

Agencies that are not prefunding the liability utilize a 2.30% investment earnings assumption, which is based on the projected return on County general assets.

- South Coast Air Quality Management District (SCAQMD)
- Los Angeles County Office of Education (LACOE)
- Local Agency Formation Commission (LAFCO)
- Little Lake Cemetery District (LLCD)

The agencies not prefunding the liability represent 0.06% of the total Actuarial Accrued Liability.

**Table 1: Membership and Actuarially Accrued Liability (AAL) Summary: Total
 (All Dollar Amounts in Millions)**

	<u>July 1, 2020</u>	<u>July 1, 2019</u>	<u>Percentage Change</u>
1. Membership			
Active Members	100,051	99,128	0.9%
Vested Terminated Members	8,631	8,593	0.4%
Retirees and Survivors (Death Benefit)	<u>58,277</u>	<u>56,982</u>	2.3%
Total	166,959	164,703	1.4%
Retirees and Survivors (Medical Coverage)	52,589	51,499	2.1%
Retirees and Survivors (Dental/Vision Coverage)	53,918	52,743	2.2%
Retirees and Survivors (Medicare Part B Coverage)	36,125	35,118	2.9%
2. AAL Summary - Total Paid Benefits by Member Status			
Retirees and Survivors	\$ 10,096.0	\$ 9,763.6	3.4%
Vested Terminated Members	500.3	496.3	0.8%
Active Members	<u>10,706.4</u>	<u>10,492.7</u>	2.0%
Total	\$ 21,302.7	\$ 20,752.6	2.7%
3. AAL Summary - Total Paid Benefits by Coverage			
Medical	\$ 16,714.0	\$ 16,491.7	1.3%
Dental/Vision	1,064.5	1,022.8	4.1%
Medicare Part B	3,351.2	3,068.4	9.2%
Death Benefit	<u>173.0</u>	<u>169.7</u>	1.9%
Total	\$ 21,302.7	\$ 20,752.6	2.7%

**Table 2: July 1, 2020 Actuarial Accrued Liability (AAL) and Normal Cost (NC): Total
 (All Dollar Amounts in Millions)**

	Medical	Dental	Part B	Death	Total
1. AAL - Total Benefits					
Retirees and Survivors	\$ 8,554.4	\$ 620.5	\$ 1,504.5	\$ 129.4	\$ 10,808.8
Vested Terminated Members	607.2	35.4	102.9	5.8	751.3
Active Members	8,733.9	495.6	1,743.8	37.8	11,011.1
Total	\$ 17,895.5	\$ 1,151.5	\$ 3,351.2	\$ 173.0	\$ 22,571.2
2. AAL - Retiree Paid Premiums					
Retirees and Survivors	\$ 659.7	\$ 53.1	\$ -	\$ -	\$ 712.8
Vested Terminated Members	236.9	14.1	-	-	251.0
Active Members	284.9	19.8	-	-	304.7
Total	\$ 1,181.5	\$ 87.0	\$ -	\$ -	\$ 1,268.5
3. AAL - Agent Paid Benefits (1) - (2)					
Retirees and Survivors	\$ 7,894.7	\$ 567.4	\$ 1,504.5	\$ 129.4	\$ 10,096.0
Vested Terminated Members	370.3	21.3	102.9	5.8	500.3
Active Members	8,449.0	475.8	1,743.8	37.8	10,706.4
Total	\$ 16,714.0	\$ 1,064.5	\$ 3,351.2	\$ 173.0	\$ 21,302.7
4. NC					
Total Benefits	\$ 621.5	\$ 31.1	\$ 105.6	\$ 2.3	\$ 760.5
Retiree Paid Premiums	117.6	6.3	-	-	123.9
Net Agent Paid Benefits	\$ 503.9	\$ 24.8	\$ 105.6	\$ 2.3	\$ 636.6

**Table 3: 2020-2021 Actuarially Determined Contribution (ADC): Total
 (All Dollar Amounts in Millions)**

	<u>Total</u>
1. Unfunded Actuarial Accrued Liability (UAAL)	
Present Value of Benefits (PVB)	\$ 29,453.6
Present Value of Future Normal Cost (PVFNC)	<u>8,150.9</u>
Actuarial Accrued Liability as of July 1, 2020	\$ 21,302.7
Fund Balance at July 1, 2020	<u>1,492.6</u>
Unfunded Actuarial Accrued Liability	\$ 19,810.1
2. Amortization of UAAL (Level % of Pay)	
Amortization Period (years)	30.0
Amortization Factor	21.030
UAAL Amortization Payment	\$ 942.0
3. 2020 - 2021 Actuarially Determined Contribution (ADC) on July 1, 2020	
Amortization of UAAL	\$ 942.0
Normal Cost	<u>636.6</u>
Actuarially Determined Contribution (ADC) as of July 1, 2020	\$ 1,578.6
4. July 1, 2020 Valuation Payroll	\$ 8,682.2
5. ADC as a Percentage of Valuation Payroll	18.18%

**Table 4: Statement of Changes in Fiduciary Net Position: Total
(All Dollar Amounts in Millions)**

1. Fund Balance as of July 1, 2019	\$	1,238.5
2. Additions:		
Employer Contributions	\$	917.0
Investment and Miscellaneous Income		7.0
Investment Expenses		(0.9)
Total Additions	\$	<u>923.1</u>
3. Deductions:		
Administrative Expenses ⁽¹⁾	\$	(0.2)
Benefit Payments ⁽²⁾		<u>(668.8)</u>
Total Deductions	\$	<u>(669.0)</u>
4. Fund Balance as of June 30, 2020	\$	1,492.6

Includes OPEB Trust activity and OPEB Custodial Fund employer contributions and benefit payments.

(1) These are expenses associated with administering the OPEB Trust.

(2) LACERA retiree healthcare operational administration (\$8 Per Contract Per Month in fiscal year ending June 30, 2020) is included in benefit payments. In the GASB Statement 75 report, the expenses associated with administering the OPEB Trust and these operational administration expenses are included in the administrative expenses, as required.

Milliman July 1, 2020 OPEB Actuarial Valuation
Los Angeles County Employees Retirement Association

Table 5: Analysis of Change: Total
(All Dollar Amounts in Billions)

Sources of Change	Actuarial Accrued Liability ⁽¹⁾	(Assets) ⁽¹⁾	Unfunded Actuarial Accrued Liability ⁽¹⁾	Normal Cost Rate ⁽²⁾	ADC Percentage ⁽²⁾
A. July 1, 2019 Valuation	\$ 20,752.6	\$ (1,238.5)	\$ 19,514.1	7.58%	18.87%
2020 Experience Study Changes	313.6	-	313.6	0.18%	0.36%
Expected One-year Change	1,240.5	(329.8)	910.7	0.00%	0.15%
B. July 1, 2020 Valuation Expected	\$ 22,306.7	\$ (1,568.3)	\$ 20,738.4	7.76%	19.38%
Claim Cost Experience	(159.5)	-	(159.5)	(0.06%)	(0.14%)
Trend Assumption (Gain)/Loss ⁽³⁾	(840.6)	-	(840.6)	(0.25%)	(0.71%)
Other Experience (Gain)/Loss	(3.9)	-	(3.9)	(0.12%)	(0.39%)
Asset (Gain)/Loss	-	75.7	75.7	0.00%	0.04%
C. July 1, 2020 Valuation	\$ 21,302.7	\$ (1,492.6)	\$ 19,810.1	7.33%	18.18%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

(3) Includes impact of July 1, 2021 renewals

**Table 6: Projected Paid Benefits by Type: Total
 (All Dollar Amounts in Millions)**

Fiscal Year Ending	Medical Total	Dental/Vision Total	Medicare Part B	Death Benefit	Medical Retiree Contribution	Dental/Vision Retiree Contribution	Total Paid Benefits
6/30/2021	\$ 635.94	\$ 52.06	\$ 81.31	\$ 8.68	\$ (51.16)	\$ (4.73)	\$ 722.10
6/30/2022	660.30	53.39	91.73	8.93	(55.46)	(4.93)	753.96
6/30/2023	712.81	56.18	99.53	9.19	(61.47)	(5.25)	810.99
6/30/2024	767.30	59.11	108.01	9.45	(67.46)	(5.57)	870.84
6/30/2025	822.21	62.15	117.56	9.72	(73.27)	(5.88)	932.49
6/30/2026	883.99	65.28	127.71	10.00	(79.42)	(6.20)	1,001.36
6/30/2027	937.76	68.51	138.71	10.28	(85.06)	(6.51)	1,063.69
6/30/2028	998.74	71.80	150.66	10.56	(91.10)	(6.82)	1,133.84
6/30/2029	1,062.36	75.15	163.20	10.85	(97.36)	(7.14)	1,207.06
6/30/2030	1,128.22	78.56	176.89	11.14	(103.93)	(7.46)	1,283.42

Projection Basis:
 All assumptions are met
 No future members are reflected

Section 8: ACFR Information

**Los Angeles County Other Post Employment Benefits Program
 Schedule of Funding Progress**

(Dollars in Thousands)

Valuation Date	Actuarial Value of Assets	Actuarial Accrued Liabilities	Unfunded Actuarial Accrued Liabilities (UAAL)	Funded Ratio	Covered Employee Payroll	UAAL as a Percentage of Covered Employee Payroll
July 1, 2014	\$483,800	\$28,546,600	\$28,062,800	1.7%	N/A	N/A
July 1, 2016	560,800	25,912,600	25,351,800	2.2%	N/A	N/A
July 1, 2017	742,900	26,300,800	25,557,900	2.8%	\$8,544,140	299.1%
July 1, 2018	941,010	21,066,800	20,125,790	4.5%	8,954,417	224.8%
July 1, 2019	1,238,480	20,752,600	19,514,120	6.0%	9,471,632	206.0%
July 1, 2020	1,492,600	21,302,700	19,810,100	7.0%	9,813,912	201.9%

Los Angeles County Other Post Employment Benefits Program
 Demographic Activity of Retired Members and Beneficiaries¹

(Dollars in Thousands)

Valuation Date	Added to Rolls		Removed From Rolls		Rolls at End of Year		Percentage Increase in Retiree Allowance	Average Annual Allowance
	Member Count	Annual Allowance ²	Member Count	Annual Allowance	Member Count	Annual Allowance		
July 1, 2010	-	\$ -	-	\$ -	43,936	\$ 391,979	-	\$ 8,922
July 1, 2012	5,336	56,982	(3,070)	(25,497)	46,202	423,464	8.03%	9,165
July 1, 2014	5,335	89,205	(3,369)	(29,925)	48,168	482,744	14.00%	10,022
July 1, 2016	5,710	103,373	(3,514)	(30,745)	50,364	555,372	15.04%	11,027
July 1, 2017	3,229	41,266	(1,839)	(18,052)	51,754	578,586	4.18%	11,180
July 1, 2018	3,028	61,697	(1,977)	(20,530)	52,805	619,753	7.12%	11,737
July 1, 2019	3,259	71,970	(1,996)	(22,487)	54,068	669,237	7.98%	12,378
July 1, 2020	3,216	53,933	(2,077)	(23,865)	55,207	699,305	4.49%	12,667

¹Includes medical, dental/vision, and Part B benefits

²Includes changes for continuing retirees and beneficiaries

Los Angeles County Other Post Employment Benefits Program
 Actuarial Analysis of Financial Experience - OPEB Program

(Dollars in Millions)

	Valuation as of July 1					
	<u>2014</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>
Prior Valuation Unfunded Actuarial Accrued Liability	\$ 26,953	\$ 28,063	\$ 25,352	\$ 25,558	\$ 20,126	\$ 19,514
Expected Increase (Decrease) from Prior Valuation	3,873	3,240	1,462	1,170	1,005	911
Claim Costs Greater (Less) than Expected ¹	(5,471)	(2,322)	(1,213)	(1,067)	(1,589)	(1,000)
Change in Assumptions ²	3,238	(3,385)	-	(6,936)	(35)	314
Change in Assets	(484)	78	(54)	(28)	1	76
All Other Experience ³	(46)	(322)	11	1,429	6	(5)
Ending Unfunded Actuarial Accrued Liability	\$ 28,063	\$ 25,352	\$ 25,558	\$ 20,126	\$ 19,514	\$ 19,810

¹ This amount Includes the trend assumption change.

² In 2016, this amount includes the impact from Tier 2.

³ In 2018, this amount is mostly the impact of the Excise Tax.

**Los Angeles County Other Post Employment Benefits Program
 Actuary Solvency Test - OPEB Program**

(Dollars in Millions)

Actuarial Valuation Date	Actuarial Accrued Liabilities for			Actuarial Value of Valuation Assets	Portion of Actuarial Accrued Liability Covered by Assets		
	Active Member Contributions (A)	Retirees and Beneficiaries ¹ (B)	Active Members (Employer Financed Portion) (C)		(A)	(B)	(C)
July 1, 2012	\$ -	\$ 10,681	\$ 16,272	\$ -	N/A	0%	0%
July 1, 2014	-	11,791	16,756	484	N/A	4%	0%
July 1, 2016	-	11,365	14,548	561	N/A	5%	0%
July 1, 2017	-	11,640	14,661	743	N/A	6%	0%
July 1, 2018	-	10,108	10,959	941	N/A	9%	0%
July 1, 2019	-	10,260	10,493	1,239	N/A	12%	0%
July 1, 2020	-	10,597	10,706	1,493	N/A	14%	0%

¹ Includes vested former members.

Discussion of the Transition from Cost Sharing to Agent

There are two types of plans: Cost Sharing and Agent. LACERA began funding and accounting reporting under a Cost Sharing plan in 2006. In the cost sharing structure, there is no attribution of liabilities, costs, and assets to individual employers for funding purposes. This was appropriate while the employers were not prefunding.

An OPEB Trust was established so that the County, Superior Court, and LACERA could prefund the OPEB costs. Separate accounts are maintained for each employer. This OPEB Trust meets the three GASB requirements:

1. Contributions are irrevocable
2. Assets are dedicated to retiree benefits
3. Assets are legally protected from creditors

Each employer may have a different prefunding schedule where employers could prefund different amounts at different times. To ensure assets are designated to each employer's costs and liabilities, the decision was made to change from a cost sharing structure to an agent structure. Under this arrangement the assets are partitioned according to each employer's funding actions.

The Transition timeline is as follows where the GASB Disclosure dates are the reporting dates:

<u>LACERA OPEB Report</u>	<u>Last Year with Cost Sharing Structure</u>	<u>First Year with Agent Structure</u>
Funding Valuation	July 1, 2017	July 1, 2018
GASB 74 Disclosure Report	June 30, 2018	N/A
GASB 75 Disclosure Report	June 30, 2019	June 30, 2020

Discussion of GASB Statements No. 74 and 75

On June 2, 2015, GASB approved Statement Numbers 74 and 75.

GASB Statement Number 74, *Financial Reporting for Postemployment Benefit Plans Other Than Pension Plans*, addresses reporting by OPEB plans that administer benefits on behalf of governments and replaces GASB Statement Number 43.

The effective date for this statement is applicable to LACERA's fiscal year reporting period ending June 30, 2017. Milliman prepared LACERA's first GASB 74 disclosure report issued on September 27, 2017 and was based on the July 1, 2016 OPEB valuation, measurement date of June 30, 2017 and reporting date of June 30, 2017. The second GASB 74 disclosure report was based on the July 1, 2017 OPEB valuation, measurement date of June 30, 2018 and reporting date of June 30, 2018. Due to the change from cost sharing to agent, the GASB 74 report with a reporting date of June 30, 2019 and thereafter no longer includes actuarial information. LACERA has determined an actuarial GASB 74 report under an agent structure is not necessary.

GASB Statement Number 75, *Accounting and Financial Reporting for Postemployment Benefits Other Than Pensions*, addresses reporting by governments that provide OPEB to their employees and for governments that finance OPEB for employees of other governments and replaces GASB Statement Number 45. Though the effective date is one year later than GASB Statement Number 74, the first GASB 75 disclosure report was based on the July 1, 2016 OPEB valuation with a measurement date of June 30, 2017 and a reporting date of June 30, 2018. This timing pattern is maintained for the GASB 75 disclosure reports. This valuation will be the basis for the GASB 75 disclosure report with a measurement date of June 30, 2020 and a reporting date of June 30, 2021.

Some of the highlights of the GASB Statements 74 and 75 are as follows:

- The balance sheet liability is the full Net OPEB Liability (NOL) rather than the Net OPEB Obligation. The NOL is more closely aligned with the UAAL.
- The annual OPEB expense is likely to be more volatile from year to year than the ADC because there will be faster recognition of OPEB expenses.
- The discount rate development is based on a blended rate equivalent of the long-term expected rate of return on assets and a 20-year tax-exempt municipal bond yield or index rate.
- The Entry Age Normal actuarial cost method is required.

Appendix A: Actuarial Procedures and Assumptions

The actuarial procedures and assumptions used in this valuation are described in this section. Where applicable, the same assumptions are used for the LACERA postemployment health and death benefit program as for the LACERA retirement benefits. The assumptions that overlap with the LACERA retirement benefits plan assumptions were reviewed and changed June 30, 2019, as a result of the 2019 triennial Retirement Benefit Investigation of Experience Study, approved by the Board of Investments in January 2020. These assumptions are consistent with the June 30, 2020 retirement funding valuation. The investment earnings assumptions are OPEB specific and were reviewed and changed June 30, 2020 as a result of the 2020 OPEB Experience Study. For agents that are prefunding into LACERA's OPEB Trust, the expected return of the assets of the OPEB Trust is based on the asset allocation approved in the December 2017 Board of Investments meeting, which is a different asset allocation from the one used for the retirement benefits plan. LACERA conducts an asset allocation study every three years and a new one is expected to be completed in 2021. The investment earnings assumption for agents that are not prefunding into LACERA's OPEB Trust is based on the expected return from the County's general assets in the 2020 OPEB Experience Study. The OPEB specific assumptions other than premiums, claim costs, aging, and trend were changed as a result of the 2020 OPEB Investigation of Experience Study approved in the March 2021 Board of Retirement meeting. The premiums, claim costs, aging, and trend updated with the 2021-2022 annual medical and dental plan rate renewals are updated in this Appendix A.

The actuarial assumptions used in both the retirement benefits plan and OPEB program actuarial valuation are intended to estimate the future experience of the members eligible for benefit payments and the projected benefit flow and anticipated investment earnings. Any variations in future experience from that expected from these assumptions will result in corresponding changes in the estimated costs of the benefits.

Table A-1 summarizes the assumptions. The general wage increase, inflation, and retirement specific demographic assumptions were developed in the 2019 retirement benefits experience study. Nearly all of the OPEB specific demographic and investment earnings assumptions were developed in the 2020 OPEB experience study report. The claim costs and health cost trend assumptions with the 2021-2022 annual medical and dental plan rate renewals were updated in the July 1, 2020 OPEB funding valuation.

Retirement Benefit Assumptions

Tables A-2 and A-3 show how members are expected to leave retired status due to death. These were developed from the experience as measured by the 2019 Retirement Benefit Investigation of Experience Study.

Table A-4 presents the probability of a refund of retirement benefit contributions upon termination of employment while vested. These were developed from the experience as measured by the 2019 Retirement Benefit Investigation of Experience Study.

Table A-5 presents the general wage increase of 3.25% per annum. This was developed from the experience as measured by the 2019 Retirement Benefit Investigation of Experience Study.

Tables A-6 to A-13 present the rates of separation of active service. These were developed from the experience as measured by the 2019 Retirement Benefit Investigation of Experience Study. The rates are the probabilities a member will leave active employment for various reasons.

OPEB Assumptions

Tables A-14 to A-19 present enrollment assumptions. These were developed from the 2020 OPEB Investigation of Experience Study to estimate health eligibility and enrollment.

Tables A-20 to A-21 present premium and claim cost assumptions developed from the OPEB program's July 1, 2020 premium and claim information.

Table A-22 presents the health cost trend rates for the July 1, 2020 OPEB valuation. These rates reflect the final July 1, 2021 annual medical and dental plan rate renewals. These rates do reflect the impact from the enactment of H.R. 1865 which includes the repeal of the Affordable Care Act (ACA) Excise Tax and the inclusion of the ACA Health Insurer fee for only calendar year 2020.

Table A-23 presents the assumed retirement rates for vested terminated members developed from the 2020 OPEB Investigation of Experience study.

Actuarial Cost Method

Effective with the July 1, 2018 OPEB funding valuation, the Entry Age Normal (EAN) actuarial cost method is being used. Under the principles of this method, the actuarial present value of the projected benefits of each individual included in the valuation is allocated as a level percentage of the individual's projected compensation between entry age and assumed exit (until maximum retirement age). For members who transferred between plans, entry age is based on original entry into the system.

The portion of this actuarial present value allocated to a valuation year is called the Normal Cost (NC). The portion of this actuarial present value not provided for at a valuation date by the sum of (a) the actuarial value of the assets, and (b) the actuarial present value of future Normal Costs is called the Unfunded Actuarial Accrued Liability (UAAL). The UAAL is amortized as a level percentage of the projected salaries of the active members, both present and future, covered by the LACERA retirement benefits plan over a 30-year period from the valuation date; this is commonly referred to as a "rolling 30-year amortization method". This method does not cover interest on the UAAL. We will consider changing the amortization method in the 2023 OPEB Investigation of Experience.

Records and Data

The data used in this valuation consist of medical and dental/vision premiums, financial information, and the age, service, and salary records for active and inactive members and their survivors. All of the information was supplied by LACERA, Segal, and Meketa Investment Group and was accepted for valuation purposes without audit.

Growth in Membership

For benefit determination purposes, no growth in the membership of LACERA is assumed. For funding purposes, if amortization is required, the total payroll of covered members is assumed to grow due to the combined effects of future wage increases of current active members and the replacement of the current active members by new employees. No growth in the total number of active members is assumed.

Valuation of Assets

The asset valuation method is market value.

Investment Earnings and Expenses

The investment earnings assumption is used to discount all the projected benefits that are expected to be received in the future for all current members. This OPEB program utilizes two investment earnings assumptions depending on whether the agent is prefunding into the OPEB Trust or not. For this funding valuation, we have chosen to utilize the same criteria for a qualified prefunding trust as GASB 74 and 75. The criteria include: (1) irrevocable trust contributions, (2) assets are dedicated to providing OPEB to plan members, and (3) assets are legally protected from creditors of employers and plan members.

The investment earnings assumption for agents that are prefunding through the OPEB Trust is the OPEB Trust expected return of 6.00%. The investment earnings assumption for agents that are not prefunding through the OPEB Trust is the County's general funds expected return of 2.30%. These rates were adopted from the 2020 OPEB Investigation of Experience Study.

The change from cost sharing to agent began with the July 1, 2018 OPEB funding valuation. The investment earnings assumption approach for this funding valuation is intended to reflect the earnings associated with each agent. The separate GASB 75 disclosure report, which is different from this funding valuation, follows a prescribed discount rate for accounting disclosures.

Health Cost Trend

The health cost trend is the projected increase in per person health costs from one year to the next. The trend assumptions vary by benefit type and by future fiscal year as illustrated in Table A-22. The first-year trends reflect the final July 1, 2021 annual medical and dental plan rate renewals in the July 1, 2020 OPEB Valuation. See the discussion in Table A-22 for more details about the trend assumptions. These trend rates were adopted July 1, 2020.

Future Salaries

The 3.25% per annum rate of increase in the general wage level of membership is in Table A-5. This rate was adopted June 30, 2019.

Retirement

Members in General Plans A-D may retire at age 50 with 10 years of service, or any age with 30 years of service, or age 70 regardless of the number of years of service. General Plan G members are eligible to retire at age 52 with 5 years of service, or age 70 regardless of the number of years of service. Non-contributory Plan E members may retire at age 55 with 10 years of service. Members of Safety Plans A and B may retire at age 50 with 10 years of service, or any age with 20 years of service. Safety Plan C members are eligible to retire at age 50 with 5 years of County service.

The retirement rates for active members vary by age and are shown by plan in Tables A-6 through A-13.

All general members who attain or who have attained age 75 in active service and all safety members who have attained age 65 in active service are assumed to retire immediately (except for Safety Plan C members who have not yet attained 5 years of service). All deferred vested members are assumed to retire according to Table A-23.

The assumptions regarding termination of employment, early retirement, and unreduced service retirement are treated as a single set of decrements in regard to a particular member. For example, a general member hired at age 30 has a probability to withdraw from LACERA due to death, disability, or other termination of employment until age 50. After age 50, the member could still withdraw due to death,

disability, or retirement. Thus, in no year during the member's projected employment would they be eligible for both a probability of other termination of employment and a probability of retirement.

The active members' retirement probabilities were adopted June 30, 2019. The terminated vested member's retirement probabilities were adopted July 1, 2020, for purposes of the OPEB program valuation.

Disability

The rates of disability used in the valuation are illustrated in Tables A-6 through A-13. These rates were adopted June 30, 2019.

Postretirement Mortality – Other Than Disabled Members

The same postretirement mortality rates are used in the valuation for active members, members retired for service, and beneficiaries. These rates are illustrated in Table A-2. Current beneficiary mortality is assumed to be the same assumption as healthy members of the same gender. Future beneficiaries are assumed to be of the opposite gender and have the same mortality as General members. Note that these assumptions directly reflect the expected future mortality improvement. These rates were adopted June 30, 2019.

Males	General members: PubG-2010 Healthy Retiree Mortality Table for Males, with MP-2014 Ultimate Projection Scale. Safety members: PubS-2010 Healthy Retiree Mortality Table for Males multiplied by 85%, with MP- 2014 Ultimate Projection Scale.
Females	General members: PubG-2010 Healthy Retiree Mortality Table for Females multiplied by 110%, with MP-2014 Ultimate Projection Scale. Safety members: PubS-2010 Healthy Retiree Mortality Table for Females, with MP-2014 Ultimate Projection Scale.

Postretirement Mortality – Disabled Members

For disabled members, the mortality rates used in the valuation rates are illustrated in Table A-3. Note that these assumptions directly reflect the expected future mortality improvement. These rates were adopted June 30, 2019.

Males	General members: Average of PubG-2010 Healthy Retiree Mortality Table for Males and PubG-2010 Disabled Retiree Mortality Table for Males, both projected with MP-2014 Ultimate Projection Scale. Safety members: PubS-2010 Healthy Retiree Mortality Table for Males, with MP-2014 Ultimate Projection Scale.
Females	General members: Average of PubG-2010 Healthy Retiree Mortality Table for Females and PubG-2010 Disabled Retiree Mortality Table for Females, both projected with MP-2014 Ultimate Projection Scale. Safety members: PubS-2010 Healthy Retiree Mortality Table for Females, with MP-2014 Ultimate Projection Scale.

Mortality While in Active Status

For active members, the mortality rates used in the valuation are illustrated in Tables A-6 through A-13. These rates were adopted June 30, 2019.

Class	Gender	Proposed Table
General	Male	PubG-2010 (120%) Employee Male ⁽¹⁾
General	Female	PubG-2010 (130%) Employee Female ⁽¹⁾
Safety	Male	PubS-2010 (100%) Employee Male ⁽¹⁾
Safety	Female	PubS-2010 (100%) Employee Female ⁽¹⁾

1. Projection using the MP-2014 Ultimate projection scale.

Note that Safety members have an additional service-connected mortality probability of 0.01% per year.

Other Employment Terminations

Tables A-6 to A-13 show, for all ages, the probabilities assumed in this valuation for future termination from active service other than for death, disability, or retirement. These probabilities do not apply to members eligible for service retirement. These probabilities were adopted June 30, 2019.

Terminating employees may withdraw their contributions immediately upon termination of employment and forfeit the right to further retirement, medical, dental/vision, and death benefits, or they may leave their contributions with LACERA. Former contributing members whose contributions are on deposit may later elect to receive a refund, may return to work, or may remain inactive until becoming eligible to receive a retirement benefit under either LACERA or a reciprocal retirement plan. All terminating members who are not eligible for vested benefits are assumed to withdraw their contributions immediately. All terminating members are assumed not to be rehired in the future.

Table A-4 gives the assumed probabilities that vested members will withdraw their contributions and elect a refund immediately upon termination and the probability that remaining members will elect a deferred retirement allowance. All non-vested members are assumed to elect a refund and withdraw their contributions. These rates in Table A-4 were adopted June 30, 2019.

Future Transfers

Though a few active members may change pension plans, this valuation assumes the active members remain in the plan they are enrolled in at the time of the valuation. Specifically, we assume there will be no future transfers between retirement benefit plans.

Retiree Medical and Dental/Vision Eligibility and Enrollment Assumptions

Any retired or vested terminated members who have not yet elected a refund of their member contributions and will receive a pension benefit other than a refund are eligible for retiree medical and dental/vision enrollment.

The 2020 OPEB Investigation of Experience report was used to set the following assumptions:

Age difference for future retirees and spouses	Table A-1
Probability of initial medical enrollment upon retirement	Table A-14
Probability of medical plan and coverage tier selection upon retirement for Tier 1	Table A-15A
Probability of medical plan and coverage tier selection upon retirement for Tier 2	Table A-15B
Probability of medical plan and coverage tier selection for Pre 65 retirees who become eligible for a Post 65 Plan	Table A-16
Probability of survivor and new dependent enrollment	Table A-17
Probability of dental/vision enrollment upon retirement	Table A-18
Probability of dental/vision plan and coverage tier selection upon retirement	Table A-19
Retirement of vested terminated members	Table A-23
Probability of retirees in group plans who elect Medicare Part D	0%

Table A-1
Summary of Valuation Assumptions as of July 1, 2020

- I. Economic Assumptions
 - A. General wage increases 3.25%
 - B1. Investment earnings (prefunding in OPEB Trust) 6.00%
 - B2. Investment earnings (no prefunding in OPEB Trust) 2.30%
 - C Growth in membership 0.00%
 - D. CPI inflation assumption 2.75%
 - E. Medical cost trend Table A-22
 - F. Dental and vision cost trend Table A-22

- II. Demographic Assumptions
 - A. Salary increases due to Service Table A-5
 - B. Retirement Tables A-6 to A-13
 - C. Disability Tables A-6 to A-13
 - D. Mortality during active employment Tables A-6 to A-13
 - E. Mortality for active members after termination and service retired members⁽¹⁾. Table A-2

Class	Gender	
General	Male	PubG-2010 (100%) Healthy Retiree Male
General	Female	PubG-2010 (110%) Healthy Retiree Female
Safety	Male	PubS-2010 (85%) Healthy Retiree Male
Safety	Female	PubS-2010 (100%) Healthy Retiree Female

- F. Mortality among disabled members⁽¹⁾ Table A-3

Class	Gender	
General	Male	Avg of: PubG-2010 (100%) Healthy Retiree Male PubG-2010 (100%) Disabled Retiree Male
General	Female	Avg of: PubG-2010 (100%) Healthy Retiree Female PubG-2010 (100%) Disabled Retiree Female
Safety	Male	PubS-2010 (100%) Healthy Retiree Male
Safety	Female	PubS-2010 (100%) Healthy Retiree Female

- G. Mortality for Beneficiaries⁽¹⁾ Table A-2

Basis – Current beneficiary mortality is assumed to be the same as for healthy members of the same gender. Future beneficiaries are assumed to be of the opposite gender and have the same mortality as General members.

1. All mortality probabilities are projected using the MP-2014 Ultimate projection scale.

H. Other Terminations of Employment	Tables A-6 to A-13
I. Refund of Contributions on Vested Termination	Table A-4
J. Future male retirees are assumed to be four years older than their female spouses. Assumption adopted July 1, 2008. Future female retirees are assumed to be one year younger than their male spouses. Assumption adopted July 1, 2020.	
III. Retiree Medical and Dental/Vision Enrollment Assumptions	
A. Probability of Initial Medical Enrollment upon Retirement	Table A-14
B. Probability of Medical Plan and Coverage Tier Selection Upon Retirement (Pre 65 Male, Pre 65 Female, Post 65 Male, Post 65 Female)	Table A-15
C. Probability of Medical Plan and Coverage Tier Selection for Pre 65 Retirees Who become Eligible for a <i>Post</i> 65 Plan	Table A-16
D. Probability of Medical Survivor and New Dependent Enrollment	Table A-17
E. Probability of Retirees in Group Plans Who Elect Medicare Part D. We have assumed there is no cost impact due to retirees and dependents enrolling in Part D.	0%
F. Probability of Dental/Vision Enrollment upon Retirement	Table A-18
G. Probability of Dental/Vision Plan and Coverage Tier Selection Upon Retirement	Table A-19
IV. Premium and Claim Cost Analysis	Tables A-20 to A-21
V. Medical and Dental/Vision Trend	Table A-22
VI. Retirement of Vested Terminated Members	Table A-23

Table A-2
Mortality for Members Retired for Service⁽¹⁾

Age	Safety Male	Safety Female	General Male	General Female
20	0.0520%	0.0210%	0.0740%	0.0380%
25	0.0470%	0.0260%	0.0560%	0.0260%
30	0.0520%	0.0350%	0.0720%	0.0440%
35	0.0590%	0.0470%	0.0940%	0.0680%
40	0.0750%	0.0640%	0.1320%	0.1060%
45	0.1037%	0.0870%	0.1960%	0.1650%
50	0.1632%	0.1490%	0.2980%	0.2442%
55	0.2601%	0.2580%	0.4310%	0.3146%
60	0.4318%	0.4460%	0.6150%	0.4224%
65	0.7489%	0.7700%	0.9130%	0.6743%
70	1.3328%	1.3290%	1.5260%	1.1693%
75	2.4021%	2.2950%	2.6710%	2.0713%
80	4.3376%	3.9620%	4.7740%	3.6960%
85	7.7648%	6.8420%	8.5910%	6.8255%
90	13.4810%	11.8150%	14.6720%	12.6357%

Annual Projected Mortality Improvement

Age	All Groups
65 & Less	1.000%
70	1.000%
75	1.000%
80	1.000%
85	1.000%
90	0.930%
95	0.850%
100	0.640%
105	0.430%
110	0.210%
115	0.000%

1. Mortality probabilities are those applicable for the fiscal year beginning in 2010. Annual projected improvements are assumed in the following years under the schedule shown. For example, the annual mortality probability for an 85-year old Safety male in fiscal year beginning in 2020 is 7.0223% calculated as follows:

$$\begin{aligned}
 \text{Age 85 probability in 2020} &= \text{Age 85 probability in 2010 with 10 years improvement} \\
 &= 7.7648\% \times (100.0\% - 1.0\%)^{10} \\
 &= 7.0223\%
 \end{aligned}$$

Table A-3
Mortality for Members Retired for Disability⁽¹⁾

Age	Safety Male	Safety Female	General Male	General Female
20	0.0610%	0.0210%	0.2430%	0.1340%
25	0.0550%	0.0260%	0.1670%	0.0940%
30	0.0610%	0.0350%	0.2130%	0.1485%
35	0.0700%	0.0470%	0.2760%	0.2315%
40	0.0880%	0.0640%	0.3885%	0.3625%
45	0.1220%	0.0870%	0.6015%	0.5675%
50	0.1920%	0.1490%	0.9515%	0.8525%
55	0.3060%	0.2580%	1.2725%	1.0140%
60	0.5080%	0.4460%	1.5590%	1.1700%
65	0.8810%	0.7700%	1.9785%	1.4345%
70	1.5680%	1.3290%	2.7135%	1.9625%
75	2.8260%	2.2950%	3.9315%	2.9430%
80	5.1030%	3.9620%	6.0610%	4.6835%
85	9.1350%	6.8420%	9.7030%	7.7680%
90	15.8600%	11.8150%	15.4625%	12.5760%

1. Mortality probabilities are those applicable for the fiscal year beginning in 2010. Annual projected improvements are assumed in the following years under the schedule shown on the preceding page.

Table A-4
Immediate Refund of Contributions upon Termination of Employment
(Excludes Plan E)

Years of Service	General	Safety
0	100%	100%
1	100%	100%
2	100%	100%
3	100%	100%
4	100%	100%
5	32%	30%
6	32%	30%
7	32%	30%
8	32%	28%
9	31%	26%
10	31%	24%
11	30%	22%
12	30%	20%
13	29%	18%
14	28%	16%
15	26%	14%
16	25%	12%
17	24%	10%
18	22%	9%
19	21%	8%
20	19%	7%
21	18%	6%
22	16%	5%
23	14%	4%
24	12%	3%
25	10%	2%
26	8%	2%
27	6%	2%
28	4%	2%
29	2%	2%
30 & Above	0%	0%

**Table A-5
 Annual Increase in Salary**

Payroll is assumed to increase with the general wage increase of 3.25% per annum in addition to individual annual increases from promotion and longevity. The promotion and longevity increases shown in the table below are combined with the general wage increase on a compound basis and are used for the Entry Age Normal cost method. General wage increases and individual salary increases due to promotion and longevity do not affect the amount of the OPEB program's benefits.

Years of Service	General	Safety
<1	6.00%	9.00%
1	5.25%	8.50%
2	4.75%	8.00%
3	4.10%	6.00%
4	3.50%	4.50%
5	3.00%	3.25%
6	2.50%	2.50%
7	2.00%	2.00%
8	1.60%	1.50%
9	1.30%	1.35%
10	1.15%	1.20%
11	1.00%	1.05%
12	0.85%	0.95%
13	0.75%	0.85%
14	0.70%	0.75%
15	0.65%	0.70%
16	0.60%	0.65%
17	0.55%	0.60%
18	0.50%	0.55%
19	0.45%	2.25%
20	0.40%	0.50%
21	0.35%	0.50%
22	0.30%	0.50%
23	0.25%	0.50%
24	0.25%	3.00%
25	0.25%	0.50%
26	0.25%	0.50%
27	0.25%	0.50%
28	0.25%	0.50%
29	0.25%	3.00%
30 & Above	0.25%	0.50%

**Appendix A: Probabilities of Separation from Active Service
Tables A-6 to A-13**

A schedule of the probabilities of termination of employment due to the following causes can be found on the following pages:

Service Retirement:	Member retires after meeting age and service requirements for reasons other than disability.
Other Terminations:	Member terminates and elects a refund of member contributions or a deferred vested retirement benefit.
Service Disability:	Member receives disability retirement; disability is service related.
Ordinary Disability:	Member receives disability retirement; disability is not service related.
Service Death:	Member dies before retirement; death is service related.
Ordinary Death:	Member dies before retirement; death is not service related.

Each of these represents the probability that a member will separate from service at each age due to the particular cause. For example, a probability of 0.0300 for a member's service retirement at age 50 means we assume that 30 out of 1,000 members who are age 50 will retire at that age.

Each table represents the detailed rates needed for each LACERA plan by gender:

Table A-6: General Plans A, B, & C Males	A-10: General Plan E Males
A-7: General Plans A, B, & C Females	A-11: General Plan E Females
A-8: General Plans D & G Males	A-12: Safety Plans A, B, & C Males
A-9: General Plans D & G Females	A-13: Safety Plans A, B, & C Females

Table A-6
Probability of Separation from Active Service for General Members
Plans A, B, & C – Male

Age	Service Retirement	Other Terminations	Service Disability	Ordinary Disability	Service Death	Ordinary Death
18	0.00000	0.00500	0.00010	0.00010	N/A	0.00043
19	0.00000	0.00500	0.00010	0.00010	N/A	0.00046
20	0.00000	0.00500	0.00010	0.00010	N/A	0.00044
21	0.00000	0.00500	0.00010	0.00010	N/A	0.00043
22	0.00000	0.00500	0.00010	0.00010	N/A	0.00040
23	0.00000	0.00500	0.00010	0.00010	N/A	0.00037
24	0.00000	0.00500	0.00010	0.00010	N/A	0.00035
25	0.00000	0.00500	0.00010	0.00010	N/A	0.00034
26	0.00000	0.00500	0.00010	0.00010	N/A	0.00036
27	0.00000	0.00500	0.00010	0.00010	N/A	0.00037
28	0.00000	0.00500	0.00010	0.00010	N/A	0.00040
29	0.00000	0.00500	0.00010	0.00010	N/A	0.00041
30	0.00000	0.00500	0.00010	0.00020	N/A	0.00043
31	0.00000	0.00500	0.00010	0.00020	N/A	0.00046
32	0.00000	0.00500	0.00010	0.00020	N/A	0.00048
33	0.00000	0.00500	0.00016	0.00020	N/A	0.00050
34	0.00000	0.00500	0.00022	0.00020	N/A	0.00053
35	0.00000	0.00500	0.00028	0.00020	N/A	0.00056
36	0.00000	0.00500	0.00034	0.00020	N/A	0.00060
37	0.00000	0.00500	0.00040	0.00020	N/A	0.00064
38	0.00000	0.00500	0.00048	0.00020	N/A	0.00068
39	0.00000	0.00500	0.00056	0.00020	N/A	0.00073
40	0.03000	0.00500	0.00064	0.00020	N/A	0.00079
41	0.03000	0.00500	0.00072	0.00020	N/A	0.00085
42	0.03000	0.00500	0.00080	0.00020	N/A	0.00092
43	0.03000	0.00500	0.00084	0.00024	N/A	0.00100
44	0.03000	0.00500	0.00088	0.00028	N/A	0.00108
45	0.03000	0.00500	0.00092	0.00032	N/A	0.00118
46	0.03000	0.00500	0.00096	0.00036	N/A	0.00128
47	0.03000	0.00500	0.00100	0.00040	N/A	0.00139
48	0.03000	0.00500	0.00104	0.00044	N/A	0.00152
49	0.03000	0.00500	0.00108	0.00048	N/A	0.00166
50	0.03000	0.00500	0.00112	0.00052	N/A	0.00179
51	0.03000	0.00500	0.00116	0.00056	N/A	0.00194
52	0.03000	0.00500	0.00120	0.00060	N/A	0.00210
53	0.03000	0.00500	0.00156	0.00064	N/A	0.00227
54	0.06000	0.00500	0.00192	0.00068	N/A	0.00244
55	0.10000	0.00500	0.00228	0.00072	N/A	0.00263
56	0.12000	0.00500	0.00264	0.00076	N/A	0.00283
57	0.17000	0.00500	0.00300	0.00080	N/A	0.00306
58	0.26000	0.00500	0.00330	0.00084	N/A	0.00330
59	0.26000	0.00500	0.00360	0.00088	N/A	0.00355
60	0.32000	0.00500	0.00390	0.00092	N/A	0.00383
61	0.32000	0.00500	0.00420	0.00096	N/A	0.00413
62	0.32000	0.00500	0.00450	0.00100	N/A	0.00445
63	0.32000	0.00500	0.00450	0.00104	N/A	0.00481
64	0.32000	0.00500	0.00450	0.00108	N/A	0.00520
65	0.32000	0.00500	0.00450	0.00112	N/A	0.00562
66	0.25000	0.00500	0.00450	0.00116	N/A	0.00607
67	0.24000	0.00500	0.00450	0.00120	N/A	0.00658
68	0.24000	0.00500	0.00450	0.00124	N/A	0.00713
69	0.24000	0.00500	0.00450	0.00128	N/A	0.00775
70	0.24000	0.00500	0.00450	0.00132	N/A	0.00844
71	0.24000	0.00500	0.00450	0.00136	N/A	0.00920
72	0.24000	0.00500	0.00450	0.00140	N/A	0.01004
73	0.24000	0.00500	0.00450	0.00144	N/A	0.01098
74	0.24000	0.00500	0.00450	0.00148	N/A	0.01201
75	1.00000	0.00000	0.00000	0.00000	N/A	0.01315

Table A-7
Probability of Separation from Active Service for General
Members
Plans A, B, & C – Female

Age	Service Retirement	Other Terminations	Service Disability	Ordinary Disability	Service Death	Ordinary Death
18	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
19	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
20	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
21	0.00000	0.00500	0.00015	0.00010	N/A	0.00016
22	0.00000	0.00500	0.00015	0.00010	N/A	0.00014
23	0.00000	0.00500	0.00015	0.00010	N/A	0.00013
24	0.00000	0.00500	0.00015	0.00010	N/A	0.00012
25	0.00000	0.00500	0.00015	0.00010	N/A	0.00012
26	0.00000	0.00500	0.00015	0.00010	N/A	0.00013
27	0.00000	0.00500	0.00015	0.00010	N/A	0.00014
28	0.00000	0.00500	0.00015	0.00010	N/A	0.00016
29	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
30	0.00000	0.00500	0.00015	0.00010	N/A	0.00020
31	0.00000	0.00500	0.00015	0.00010	N/A	0.00021
32	0.00000	0.00500	0.00015	0.00010	N/A	0.00023
33	0.00000	0.00500	0.00020	0.00010	N/A	0.00025
34	0.00000	0.00500	0.00025	0.00010	N/A	0.00027
35	0.00000	0.00500	0.00030	0.00010	N/A	0.00030
36	0.00000	0.00500	0.00035	0.00010	N/A	0.00033
37	0.00000	0.00500	0.00040	0.00010	N/A	0.00036
38	0.00000	0.00500	0.00042	0.00014	N/A	0.00039
39	0.00000	0.00500	0.00044	0.00018	N/A	0.00043
40	0.03000	0.00500	0.00046	0.00022	N/A	0.00047
41	0.03000	0.00500	0.00048	0.00026	N/A	0.00052
42	0.03000	0.00500	0.00050	0.00030	N/A	0.00056
43	0.03000	0.00500	0.00060	0.00032	N/A	0.00061
44	0.03000	0.00500	0.00070	0.00034	N/A	0.00066
45	0.03000	0.00500	0.00080	0.00036	N/A	0.00073
46	0.03000	0.00500	0.00090	0.00038	N/A	0.00079
47	0.03000	0.00500	0.00100	0.00040	N/A	0.00086
48	0.03000	0.00500	0.00110	0.00042	N/A	0.00092
49	0.03000	0.00500	0.00120	0.00044	N/A	0.00100
50	0.03000	0.00500	0.00130	0.00046	N/A	0.00108
51	0.03000	0.00500	0.00140	0.00048	N/A	0.00117
52	0.03000	0.00500	0.00150	0.00050	N/A	0.00126
53	0.03000	0.00500	0.00156	0.00052	N/A	0.00137
54	0.06000	0.00500	0.00162	0.00054	N/A	0.00147
55	0.10000	0.00500	0.00168	0.00056	N/A	0.00160
56	0.12000	0.00500	0.00174	0.00058	N/A	0.00173
57	0.17000	0.00500	0.00180	0.00060	N/A	0.00187
58	0.26000	0.00500	0.00194	0.00064	N/A	0.00203
59	0.26000	0.00500	0.00208	0.00068	N/A	0.00221
60	0.32000	0.00500	0.00222	0.00072	N/A	0.00242
61	0.32000	0.00500	0.00236	0.00076	N/A	0.00264
62	0.32000	0.00500	0.00250	0.00080	N/A	0.00289
63	0.32000	0.00500	0.00250	0.00084	N/A	0.00317
64	0.32000	0.00500	0.00250	0.00088	N/A	0.00350
65	0.32000	0.00500	0.00250	0.00092	N/A	0.00385
66	0.25000	0.00500	0.00250	0.00096	N/A	0.00425
67	0.24000	0.00500	0.00250	0.00100	N/A	0.00471
68	0.24000	0.00500	0.00250	0.00104	N/A	0.00520
69	0.24000	0.00500	0.00250	0.00108	N/A	0.00575
70	0.24000	0.00500	0.00250	0.00112	N/A	0.00636
71	0.24000	0.00500	0.00250	0.00116	N/A	0.00703
72	0.24000	0.00500	0.00250	0.00120	N/A	0.00777
73	0.24000	0.00500	0.00250	0.00124	N/A	0.00859
74	0.24000	0.00500	0.00250	0.00128	N/A	0.00950
75	1.00000	0.00000	0.00000	0.00000	N/A	0.01050

Table A-8
Probability of Separation from Active Service for General
Members
Plan D & G – Male

Age	Service Retirement Plan D	Service Retirement Plan G	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	0.00000	0.00010	0.00010	N/A	0.00043	0	0.07000
19	0.00000	0.00000	0.00010	0.00010	N/A	0.00046	1	0.05500
20	0.00000	0.00000	0.00010	0.00010	N/A	0.00044	2	0.04000
21	0.00000	0.00000	0.00010	0.00010	N/A	0.00043	3	0.03250
22	0.00000	0.00000	0.00010	0.00010	N/A	0.00040	4	0.02500
23	0.00000	0.00000	0.00010	0.00010	N/A	0.00037	5	0.02330
24	0.00000	0.00000	0.00010	0.00010	N/A	0.00035	6	0.02170
25	0.00000	0.00000	0.00010	0.00010	N/A	0.00034	7	0.02000
26	0.00000	0.00000	0.00010	0.00010	N/A	0.00036	8	0.01900
27	0.00000	0.00000	0.00010	0.00010	N/A	0.00037	9	0.01800
28	0.00000	0.00000	0.00010	0.00010	N/A	0.00040	10	0.01700
29	0.00000	0.00000	0.00010	0.00010	N/A	0.00041	11	0.01600
30	0.00000	0.00000	0.00010	0.00020	N/A	0.00043	12	0.01500
31	0.00000	0.00000	0.00010	0.00020	N/A	0.00046	13	0.01400
32	0.00000	0.00000	0.00010	0.00020	N/A	0.00048	14	0.01300
33	0.00000	0.00000	0.00016	0.00020	N/A	0.00050	15	0.01200
34	0.00000	0.00000	0.00022	0.00020	N/A	0.00053	16	0.01100
35	0.00000	0.00000	0.00028	0.00020	N/A	0.00056	17	0.01000
36	0.00000	0.00000	0.00034	0.00020	N/A	0.00060	18	0.00920
37	0.00000	0.00000	0.00040	0.00020	N/A	0.00064	19	0.00840
38	0.00000	0.00000	0.00048	0.00020	N/A	0.00068	20	0.00760
39	0.00000	0.00000	0.00056	0.00020	N/A	0.00073	21	0.00680
40	0.01500	0.00000	0.00064	0.00020	N/A	0.00079	22	0.00600
41	0.01500	0.00000	0.00072	0.00020	N/A	0.00085	23	0.00560
42	0.01500	0.00000	0.00080	0.00020	N/A	0.00092	24	0.00520
43	0.01500	0.00000	0.00084	0.00024	N/A	0.00100	25	0.00480
44	0.01500	0.00000	0.00088	0.00028	N/A	0.00108	26	0.00440
45	0.01500	0.00000	0.00092	0.00032	N/A	0.00118	27	0.00400
46	0.01500	0.00000	0.00096	0.00036	N/A	0.00128	28	0.00400
47	0.01500	0.00000	0.00100	0.00040	N/A	0.00139	29	0.00400
48	0.01500	0.00000	0.00104	0.00044	N/A	0.00152	30 & Above	0.00000
49	0.01500	0.00000	0.00108	0.00048	N/A	0.00166		
50	0.01500	0.01200	0.00112	0.00052	N/A	0.00179		
51	0.01200	0.00960	0.00116	0.00056	N/A	0.00194		
52	0.01200	0.00960	0.00120	0.00060	N/A	0.00210		
53	0.01500	0.01200	0.00156	0.00064	N/A	0.00227		
54	0.02000	0.01600	0.00192	0.00068	N/A	0.00244		
55	0.02500	0.02000	0.00228	0.00072	N/A	0.00263		
56	0.02500	0.02000	0.00264	0.00076	N/A	0.00283		
57	0.03000	0.02400	0.00300	0.00080	N/A	0.00306		
58	0.03500	0.02800	0.00330	0.00084	N/A	0.00330		
59	0.05000	0.04000	0.00360	0.00088	N/A	0.00355		
60	0.07000	0.05600	0.00390	0.00092	N/A	0.00383		
61	0.08000	0.06400	0.00420	0.00096	N/A	0.00413		
62	0.11000	0.11000	0.00450	0.00100	N/A	0.00445		
63	0.11000	0.11000	0.00450	0.00104	N/A	0.00481		
64	0.16000	0.16000	0.00450	0.00108	N/A	0.00520		
65	0.23000	0.18000	0.00450	0.00112	N/A	0.00562		
66	0.20000	0.18000	0.00450	0.00116	N/A	0.00607		
67	0.19000	0.30000	0.00450	0.00120	N/A	0.00658		
68	0.18000	0.18000	0.00450	0.00124	N/A	0.00713		
69	0.20000	0.20000	0.00450	0.00128	N/A	0.00775		
70	0.23000	0.23000	0.00450	0.00132	N/A	0.00844		
71	0.20000	0.20000	0.00450	0.00136	N/A	0.00920		
72	0.20000	0.20000	0.00450	0.00140	N/A	0.01004		
73	0.20000	0.20000	0.00450	0.00144	N/A	0.01098		
74	0.20000	0.20000	0.00450	0.00148	N/A	0.01201		
75	1.00000	1.00000	0.00000	0.00000	N/A	0.01315		

**Table A-9
 Probability of Separation from Active Service for General
 Members
 Plan D and G – Female**

Age	Service Retirement Plan D	Service Retirement Plan G	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	0	0.07000
19	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	1	0.05500
20	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	2	0.04000
21	0.00000	0.00000	0.00015	0.00010	N/A	0.00016	3	0.03250
22	0.00000	0.00000	0.00015	0.00010	N/A	0.00014	4	0.02500
23	0.00000	0.00000	0.00015	0.00010	N/A	0.00013	5	0.02330
24	0.00000	0.00000	0.00015	0.00010	N/A	0.00012	6	0.02170
25	0.00000	0.00000	0.00015	0.00010	N/A	0.00012	7	0.02000
26	0.00000	0.00000	0.00015	0.00010	N/A	0.00013	8	0.01900
27	0.00000	0.00000	0.00015	0.00010	N/A	0.00014	9	0.01800
28	0.00000	0.00000	0.00015	0.00010	N/A	0.00016	10	0.01700
29	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	11	0.01600
30	0.00000	0.00000	0.00015	0.00010	N/A	0.00020	12	0.01500
31	0.00000	0.00000	0.00015	0.00010	N/A	0.00021	13	0.01400
32	0.00000	0.00000	0.00015	0.00010	N/A	0.00023	14	0.01300
33	0.00000	0.00000	0.00020	0.00010	N/A	0.00025	15	0.01200
34	0.00000	0.00000	0.00025	0.00010	N/A	0.00027	16	0.01100
35	0.00000	0.00000	0.00030	0.00010	N/A	0.00030	17	0.01000
36	0.00000	0.00000	0.00035	0.00010	N/A	0.00033	18	0.00920
37	0.00000	0.00000	0.00040	0.00010	N/A	0.00036	19	0.00840
38	0.00000	0.00000	0.00042	0.00014	N/A	0.00039	20	0.00760
39	0.00000	0.00000	0.00044	0.00018	N/A	0.00043	21	0.00680
40	0.01500	0.00000	0.00046	0.00022	N/A	0.00047	22	0.00600
41	0.01500	0.00000	0.00048	0.00026	N/A	0.00052	23	0.00560
42	0.01500	0.00000	0.00050	0.00030	N/A	0.00056	24	0.00520
43	0.01500	0.00000	0.00060	0.00032	N/A	0.00061	25	0.00480
44	0.01500	0.00000	0.00070	0.00034	N/A	0.00066	26	0.00440
45	0.01500	0.00000	0.00080	0.00036	N/A	0.00073	27	0.00400
46	0.01500	0.00000	0.00090	0.00038	N/A	0.00079	28	0.00400
47	0.01500	0.00000	0.00100	0.00040	N/A	0.00086	29	0.00400
48	0.01500	0.00000	0.00110	0.00042	N/A	0.00092	30 & Above	0.00000
49	0.01500	0.00000	0.00120	0.00044	N/A	0.00100		
50	0.01500	0.01200	0.00130	0.00046	N/A	0.00108		
51	0.01200	0.00960	0.00140	0.00048	N/A	0.00117		
52	0.01200	0.00960	0.00150	0.00050	N/A	0.00126		
53	0.01500	0.01200	0.00156	0.00052	N/A	0.00137		
54	0.02000	0.01600	0.00162	0.00054	N/A	0.00147		
55	0.02500	0.02000	0.00168	0.00056	N/A	0.00160		
56	0.02500	0.02000	0.00174	0.00058	N/A	0.00173		
57	0.03000	0.02400	0.00180	0.00060	N/A	0.00187		
58	0.03500	0.02800	0.00194	0.00064	N/A	0.00203		
59	0.05000	0.04000	0.00208	0.00068	N/A	0.00221		
60	0.07000	0.05600	0.00222	0.00072	N/A	0.00242		
61	0.08000	0.06400	0.00236	0.00076	N/A	0.00264		
62	0.11000	0.11000	0.00250	0.00080	N/A	0.00289		
63	0.11000	0.11000	0.00250	0.00084	N/A	0.00317		
64	0.16000	0.16000	0.00250	0.00088	N/A	0.00350		
65	0.23000	0.18000	0.00250	0.00092	N/A	0.00385		
66	0.20000	0.18000	0.00250	0.00096	N/A	0.00425		
67	0.19000	0.30000	0.00250	0.00100	N/A	0.00471		
68	0.18000	0.18000	0.00250	0.00104	N/A	0.00520		
69	0.20000	0.20000	0.00250	0.00108	N/A	0.00575		
70	0.23000	0.23000	0.00250	0.00112	N/A	0.00636		
71	0.20000	0.20000	0.00250	0.00116	N/A	0.00703		
72	0.20000	0.20000	0.00250	0.00120	N/A	0.00777		
73	0.20000	0.20000	0.00250	0.00124	N/A	0.00859		
74	0.20000	0.20000	0.00250	0.00128	N/A	0.00950		
75	1.00000	1.00000	0.00000	0.00000	N/A	0.01050		

Table A-10
Probability of Separation from Active Service for General
Members
Plan E – Male

Age	Service Retirement	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	N/A	N/A	N/A	0.00043	0	0.15000
19	0.00000	N/A	N/A	N/A	0.00046	1	0.08000
20	0.00000	N/A	N/A	N/A	0.00044	2	0.06000
21	0.00000	N/A	N/A	N/A	0.00043	3	0.04500
22	0.00000	N/A	N/A	N/A	0.00040	4	0.03500
23	0.00000	N/A	N/A	N/A	0.00037	5	0.03100
24	0.00000	N/A	N/A	N/A	0.00035	6	0.02700
25	0.00000	N/A	N/A	N/A	0.00034	7	0.02300
26	0.00000	N/A	N/A	N/A	0.00036	8	0.02200
27	0.00000	N/A	N/A	N/A	0.00037	9	0.02100
28	0.00000	N/A	N/A	N/A	0.00040	10	0.02000
29	0.00000	N/A	N/A	N/A	0.00041	11	0.01900
30	0.00000	N/A	N/A	N/A	0.00043	12	0.01800
31	0.00000	N/A	N/A	N/A	0.00046	13	0.01680
32	0.00000	N/A	N/A	N/A	0.00048	14	0.01560
33	0.00000	N/A	N/A	N/A	0.00050	15	0.01440
34	0.00000	N/A	N/A	N/A	0.00053	16	0.01320
35	0.00000	N/A	N/A	N/A	0.00056	17	0.01200
36	0.00000	N/A	N/A	N/A	0.00060	18	0.01160
37	0.00000	N/A	N/A	N/A	0.00064	19	0.01120
38	0.00000	N/A	N/A	N/A	0.00068	20	0.01080
39	0.00000	N/A	N/A	N/A	0.00073	21	0.01040
40	0.00000	N/A	N/A	N/A	0.00079	22	0.01000
41	0.00000	N/A	N/A	N/A	0.00085	23	0.01000
42	0.00000	N/A	N/A	N/A	0.00092	24	0.01000
43	0.00000	N/A	N/A	N/A	0.00100	25	0.01000
44	0.00000	N/A	N/A	N/A	0.00108	26	0.01000
45	0.00000	N/A	N/A	N/A	0.00118	27	0.01000
46	0.00000	N/A	N/A	N/A	0.00128	28	0.01000
47	0.00000	N/A	N/A	N/A	0.00139	29	0.01000
48	0.00000	N/A	N/A	N/A	0.00152	30 & Above	0.01000
49	0.00000	N/A	N/A	N/A	0.00166		
50	0.00000	N/A	N/A	N/A	0.00179		
51	0.00000	N/A	N/A	N/A	0.00194		
52	0.00000	N/A	N/A	N/A	0.00210		
53	0.00000	N/A	N/A	N/A	0.00227		
54	0.00000	N/A	N/A	N/A	0.00244		
55	0.02000	N/A	N/A	N/A	0.00263		
56	0.02000	N/A	N/A	N/A	0.00283		
57	0.02500	N/A	N/A	N/A	0.00306		
58	0.02500	N/A	N/A	N/A	0.00330		
59	0.03000	N/A	N/A	N/A	0.00355		
60	0.04000	N/A	N/A	N/A	0.00383		
61	0.06000	N/A	N/A	N/A	0.00413		
62	0.09000	N/A	N/A	N/A	0.00445		
63	0.09000	N/A	N/A	N/A	0.00481		
64	0.20000	N/A	N/A	N/A	0.00520		
65	0.28000	N/A	N/A	N/A	0.00562		
66	0.19000	N/A	N/A	N/A	0.00607		
67	0.19000	N/A	N/A	N/A	0.00658		
68	0.19000	N/A	N/A	N/A	0.00713		
69	0.19000	N/A	N/A	N/A	0.00775		
70	0.19000	N/A	N/A	N/A	0.00844		
71	0.19000	N/A	N/A	N/A	0.00920		
72	0.19000	N/A	N/A	N/A	0.01004		
73	0.19000	N/A	N/A	N/A	0.01098		
74	0.19000	N/A	N/A	N/A	0.01201		
75	1.00000	N/A	N/A	N/A	0.01315		

Table A-11
Probability of Separation from Active Service for General Members
Plan E – Female

Age	Service Retirement	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	N/A	N/A	N/A	0.00017	0	0.15000
19	0.00000	N/A	N/A	N/A	0.00017	1	0.08000
20	0.00000	N/A	N/A	N/A	0.00017	2	0.06000
21	0.00000	N/A	N/A	N/A	0.00016	3	0.04500
22	0.00000	N/A	N/A	N/A	0.00014	4	0.03500
23	0.00000	N/A	N/A	N/A	0.00013	5	0.03100
24	0.00000	N/A	N/A	N/A	0.00012	6	0.02700
25	0.00000	N/A	N/A	N/A	0.00012	7	0.02300
26	0.00000	N/A	N/A	N/A	0.00013	8	0.02200
27	0.00000	N/A	N/A	N/A	0.00014	9	0.02100
28	0.00000	N/A	N/A	N/A	0.00016	10	0.02000
29	0.00000	N/A	N/A	N/A	0.00017	11	0.01900
30	0.00000	N/A	N/A	N/A	0.00020	12	0.01800
31	0.00000	N/A	N/A	N/A	0.00021	13	0.01680
32	0.00000	N/A	N/A	N/A	0.00023	14	0.01560
33	0.00000	N/A	N/A	N/A	0.00025	15	0.01440
34	0.00000	N/A	N/A	N/A	0.00027	16	0.01320
35	0.00000	N/A	N/A	N/A	0.00030	17	0.01200
36	0.00000	N/A	N/A	N/A	0.00033	18	0.01160
37	0.00000	N/A	N/A	N/A	0.00036	19	0.01120
38	0.00000	N/A	N/A	N/A	0.00039	20	0.01080
39	0.00000	N/A	N/A	N/A	0.00043	21	0.01040
40	0.00000	N/A	N/A	N/A	0.00047	22	0.01000
41	0.00000	N/A	N/A	N/A	0.00052	23	0.01000
42	0.00000	N/A	N/A	N/A	0.00056	24	0.01000
43	0.00000	N/A	N/A	N/A	0.00061	25	0.01000
44	0.00000	N/A	N/A	N/A	0.00066	26	0.01000
45	0.00000	N/A	N/A	N/A	0.00073	27	0.01000
46	0.00000	N/A	N/A	N/A	0.00079	28	0.01000
47	0.00000	N/A	N/A	N/A	0.00086	29	0.01000
48	0.00000	N/A	N/A	N/A	0.00092	30 & Above	0.01000
49	0.00000	N/A	N/A	N/A	0.00100		
50	0.00000	N/A	N/A	N/A	0.00108		
51	0.00000	N/A	N/A	N/A	0.00117		
52	0.00000	N/A	N/A	N/A	0.00126		
53	0.00000	N/A	N/A	N/A	0.00137		
54	0.00000	N/A	N/A	N/A	0.00147		
55	0.02000	N/A	N/A	N/A	0.00160		
56	0.02000	N/A	N/A	N/A	0.00173		
57	0.02500	N/A	N/A	N/A	0.00187		
58	0.02500	N/A	N/A	N/A	0.00203		
59	0.03000	N/A	N/A	N/A	0.00221		
60	0.04000	N/A	N/A	N/A	0.00242		
61	0.06000	N/A	N/A	N/A	0.00264		
62	0.09000	N/A	N/A	N/A	0.00289		
63	0.09000	N/A	N/A	N/A	0.00317		
64	0.20000	N/A	N/A	N/A	0.00350		
65	0.28000	N/A	N/A	N/A	0.00385		
66	0.19000	N/A	N/A	N/A	0.00425		
67	0.19000	N/A	N/A	N/A	0.00471		
68	0.19000	N/A	N/A	N/A	0.00520		
69	0.19000	N/A	N/A	N/A	0.00575		
70	0.19000	N/A	N/A	N/A	0.00636		
71	0.19000	N/A	N/A	N/A	0.00703		
72	0.19000	N/A	N/A	N/A	0.00777		
73	0.19000	N/A	N/A	N/A	0.00859		
74	0.19000	N/A	N/A	N/A	0.00950		
75	1.00000	N/A	N/A	N/A	0.01050		

Table A-12
Probability of Separation from Active Service for Safety Members
Plans A, B, & C – Male

Age	Service Retirement Plans A-B	Service Retirement Plan C	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	0.00000	0.00200	0.00000	0.00010	0.00037	0	0.03500
19	0.00000	0.00000	0.00200	0.00000	0.00010	0.00040	1	0.02750
20	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	2	0.02000
21	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	3	0.01500
22	0.00000	0.00000	0.00200	0.00000	0.00010	0.00040	4	0.01200
23	0.00000	0.00000	0.00200	0.00000	0.00010	0.00039	5	0.01130
24	0.00000	0.00000	0.00200	0.00000	0.00010	0.00038	6	0.01070
25	0.00000	0.00000	0.00200	0.00000	0.00010	0.00037	7	0.01000
26	0.00000	0.00000	0.00200	0.00000	0.00010	0.00038	8	0.00920
27	0.00000	0.00000	0.00200	0.00000	0.00010	0.00039	9	0.00840
28	0.00000	0.00000	0.00200	0.00000	0.00010	0.00040	10	0.00760
29	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	11	0.00680
30	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	12	0.00600
31	0.00000	0.00000	0.00200	0.00000	0.00010	0.00042	13	0.00560
32	0.00000	0.00000	0.00200	0.00000	0.00010	0.00043	14	0.00520
33	0.00000	0.00000	0.00210	0.00000	0.00010	0.00044	15	0.00480
34	0.00000	0.00000	0.00220	0.00000	0.00010	0.00045	16	0.00440
35	0.00000	0.00000	0.00230	0.00000	0.00010	0.00047	17	0.00400
36	0.00000	0.00000	0.00240	0.00000	0.00010	0.00049	18	0.00360
37	0.00000	0.00000	0.00250	0.00000	0.00010	0.00050	19	0.00320
38	0.00000	0.00000	0.00260	0.00000	0.00010	0.00053	20	0.00280
39	0.00000	0.00000	0.00270	0.00000	0.00010	0.00056	21	0.00240
40	0.00750	0.00000	0.00280	0.00000	0.00010	0.00059	22	0.00200
41	0.00750	0.00000	0.00290	0.00000	0.00010	0.00062	23	0.00200
42	0.00750	0.00000	0.00300	0.00000	0.00010	0.00067	24	0.00200
43	0.00750	0.00000	0.00310	0.00000	0.00010	0.00071	25	0.00200
44	0.00750	0.00000	0.00320	0.00000	0.00010	0.00076	26	0.00200
45	0.00750	0.00000	0.00330	0.00000	0.00010	0.00082	27	0.00200
46	0.00750	0.00000	0.00340	0.00000	0.00010	0.00088	28	0.00200
47	0.00750	0.00000	0.00350	0.00000	0.00010	0.00095	29	0.00200
48	0.00750	0.00000	0.00400	0.00000	0.00010	0.00102	30 & Above	0.00000
49	0.00750	0.00000	0.00500	0.00000	0.00010	0.00111		
50	0.02000	0.02000	0.00750	0.00000	0.00010	0.00120		
51	0.02000	0.02000	0.00750	0.00000	0.00010	0.00129		
52	0.02000	0.02000	0.00750	0.00000	0.00010	0.00140		
53	0.03000	0.03000	0.02000	0.00000	0.00010	0.00151		
54	0.15000	0.10000	0.02000	0.00000	0.00010	0.00162		
55	0.26000	0.15000	0.07500	0.00000	0.00010	0.00175		
56	0.17000	0.15000	0.07500	0.00000	0.00010	0.00190		
57	0.17000	0.28000	0.10000	0.00000	0.00010	0.00205		
58	0.17000	0.17000	0.10000	0.00000	0.00010	0.00223		
59	0.27000	0.27000	0.10000	0.00000	0.00010	0.00243		
60	0.27000	0.27000	0.10000	0.00000	0.00010	0.00264		
61	0.25000	0.25000	0.05000	0.00000	0.00010	0.00288		
62	0.25000	0.25000	0.05000	0.00000	0.00010	0.00315		
63	0.25000	0.25000	0.05000	0.00000	0.00010	0.00344		
64	0.25000	0.25000	0.05000	0.00000	0.00010	0.00375		
65	1.00000	1.00000	0.00000	0.00000	0.00000	0.00410		

Table A-13
Probability of Separation from Active Service for Safety Members
Plans A, B, & C – Female

Age	Service Retirement Plans A-B	Service Retirement Plan C	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	0.00000	0.00300	0.00000	0.00010	0.00014	0	0.03500
19	0.00000	0.00000	0.00300	0.00000	0.00010	0.00015	1	0.02750
20	0.00000	0.00000	0.00300	0.00000	0.00010	0.00016	2	0.02000
21	0.00000	0.00000	0.00300	0.00000	0.00010	0.00017	3	0.01500
22	0.00000	0.00000	0.00300	0.00000	0.00010	0.00017	4	0.01200
23	0.00000	0.00000	0.00300	0.00000	0.00010	0.00018	5	0.01130
24	0.00000	0.00000	0.00300	0.00000	0.00010	0.00019	6	0.01070
25	0.00000	0.00000	0.00300	0.00000	0.00010	0.00020	7	0.01000
26	0.00000	0.00000	0.00300	0.00000	0.00010	0.00021	8	0.00920
27	0.00000	0.00000	0.00300	0.00000	0.00010	0.00022	9	0.00840
28	0.00000	0.00000	0.00340	0.00000	0.00010	0.00024	10	0.00760
29	0.00000	0.00000	0.00380	0.00000	0.00010	0.00025	11	0.00680
30	0.00000	0.00000	0.00420	0.00000	0.00010	0.00027	12	0.00600
31	0.00000	0.00000	0.00460	0.00000	0.00010	0.00028	13	0.00560
32	0.00000	0.00000	0.00500	0.00000	0.00010	0.00030	14	0.00520
33	0.00000	0.00000	0.00560	0.00000	0.00010	0.00032	15	0.00480
34	0.00000	0.00000	0.00620	0.00000	0.00010	0.00034	16	0.00440
35	0.00000	0.00000	0.00680	0.00000	0.00010	0.00036	17	0.00400
36	0.00000	0.00000	0.00740	0.00000	0.00010	0.00038	18	0.00360
37	0.00000	0.00000	0.00800	0.00000	0.00010	0.00041	19	0.00320
38	0.00000	0.00000	0.00840	0.00000	0.00010	0.00043	20	0.00280
39	0.00000	0.00000	0.00880	0.00000	0.00010	0.00046	21	0.00240
40	0.00750	0.00000	0.00920	0.00000	0.00010	0.00049	22	0.00200
41	0.00750	0.00000	0.00960	0.00000	0.00010	0.00052	23	0.00200
42	0.00750	0.00000	0.01000	0.00000	0.00010	0.00056	24	0.00200
43	0.00750	0.00000	0.01040	0.00000	0.00010	0.00059	25	0.00200
44	0.00750	0.00000	0.01080	0.00000	0.00010	0.00063	26	0.00200
45	0.00750	0.00000	0.01120	0.00000	0.00010	0.00067	27	0.00200
46	0.00750	0.00000	0.01160	0.00000	0.00010	0.00071	28	0.00200
47	0.00750	0.00000	0.01200	0.00000	0.00010	0.00076	29	0.00200
48	0.00750	0.00000	0.01300	0.00000	0.00010	0.00080	30 & Above	0.00000
49	0.00750	0.00000	0.01500	0.00000	0.00010	0.00085		
50	0.02000	0.02000	0.01800	0.00000	0.00010	0.00091		
51	0.02000	0.02000	0.02000	0.00000	0.00010	0.00097		
52	0.02000	0.02000	0.02400	0.00000	0.00010	0.00103		
53	0.03000	0.03000	0.02800	0.00000	0.00010	0.00109		
54	0.15000	0.10000	0.03200	0.00000	0.00010	0.00116		
55	0.26000	0.15000	0.11000	0.00000	0.00010	0.00123		
56	0.17000	0.15000	0.06000	0.00000	0.00010	0.00131		
57	0.17000	0.28000	0.06000	0.00000	0.00010	0.00140		
58	0.17000	0.17000	0.06000	0.00000	0.00010	0.00148		
59	0.27000	0.27000	0.06000	0.00000	0.00010	0.00158		
60	0.27000	0.27000	0.06000	0.00000	0.00010	0.00168		
61	0.25000	0.25000	0.06000	0.00000	0.00010	0.00178		
62	0.25000	0.25000	0.06000	0.00000	0.00010	0.00190		
63	0.25000	0.25000	0.06000	0.00000	0.00010	0.00202		
64	0.25000	0.25000	0.06000	0.00000	0.00010	0.00215		
65	1.00000	1.00000	0.00000	0.00000	0.00000	0.00228		

Table A-14
Probability of Initial Medical Enrollment

Males and Females:

Years of Service	Assumed Enrollment %
< 10	7%
10-14	43%
15-19	64%
20-24	74%
25+	95%
Disabled	95%

This applies to the medical and Medicare Part B premium reimbursement benefits.

Table A-15A
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 1

Non-Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only	0.3%	0.5%		
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse	0.3%	0.1%		
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family	0.9%	0.1%		
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children		0.1%		
205	Anthem Blue Cross Prudent Buyer Plan	Minor Survivor				
211	Anthem Blue Cross I	Retiree Only	0.5%	0.4%	0.3%	0.2%
212	Anthem Blue Cross I	Retiree and Spouse		0.3%		
213	Anthem Blue Cross I	Retiree, Spouse and Children	0.5%	0.2%		
214	Anthem Blue Cross I	Retiree and Children		0.1%		
215	Anthem Blue Cross I	Minor Survivor				
221	Anthem Blue Cross II	Retiree Only	4.5%	7.7%	0.8%	1.3%
222	Anthem Blue Cross II	Retiree and Spouse	12.5%	7.0%	2.3%	0.9%
223	Anthem Blue Cross II	Retiree, Spouse and Children	14.9%	3.0%	0.8%	
224	Anthem Blue Cross II	Retiree and Children	1.5%	1.3%	0.3%	
225	Anthem Blue Cross II	Minor Survivor				
240	Anthem Blue Cross III	One Medicare		0.3%	7.1%	11.5%
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare		0.1%	0.2%	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare			5.5%	1.0%
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare		0.2%	7.1%	5.1%
244	Anthem Blue Cross III	Retiree and Children 1 Medicare				
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			0.4%	0.1%
246	Anthem Blue Cross III	Retiree and Family 1 Medicare				
247	Anthem Blue Cross III	Retiree and Family 1 Medicare		0.3%	1.3%	0.1%
248	Anthem Blue Cross III	Retiree and Family 2 Medicare				
249	Anthem Blue Cross III	Retiree and Family 2 Medicare			0.6%	0.1%
250	Anthem Blue Cross III	Retiree and Family 3 Medicare			0.3%	
301	Cigna Network Model Plan	Retiree Only	0.1%			
302	Cigna Network Model Plan	Retiree and Spouse	0.2%			
303	Cigna Network Model Plan	Retiree and Family	0.1%			
304	Cigna Network Model Plan	Retiree and Children				
305	Cigna Network Model Plan	Minor Survivor				
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only				
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse				
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)				
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children				
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)				
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)				
393	Kaiser (WA)	Retiree and Family				
394	Kaiser (WA)	Retiree and Family				
395	Kaiser (WA)	Retiree and Family				
396	Kaiser (WA)	Retiree and Family				
397	Kaiser (WA)	Retiree and Family				
398	Kaiser (WA)	Retiree and Family				
399	Kaiser (WA)	Retiree and Family				
400	Kaiser (WA)	Retiree and Family				
401	Kaiser (CA)	Retiree Basic (Under 65)	11.0%	26.2%		
402	Kaiser (CA)	Retiree Cost ("M" Coverage)				
403	Kaiser (CA)	Retiree Risk (Senior Advantage)		0.6%	18.0%	38.2%
404	Kaiser (CA)	Retiree Excess I			0.4%	1.0%
405	Kaiser (CA)	Retiree Excess II - Part B			1.3%	2.5%
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)				
411	Kaiser (CA)	Family Basic	33.0%	32.0%		
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic				
413	Kaiser (CA)	One Advantage, Others Basic			20.8%	5.0%
414	Kaiser (CA)	One Excess I, Others Basic			0.5%	
415	Kaiser (CA)	Two+ Cost ("M" Coverage)				
416	Kaiser (CA)	One Advantage, One Cost ("M" Coverage)				
417	Kaiser (CA)	One Excess I, One Cost ("M" Coverage)				
418	Kaiser (CA)	Two+ Advantage			15.9%	16.5%
419	Kaiser (CA)	One Excess I, One Advantage			0.2%	
420	Kaiser (CA)	Two+ Excess I				
421	Kaiser (CA)	Survivor				
422	Kaiser (CA)	One Excess II - Part B, One Basic			1.2%	0.5%
423	Kaiser (CA)	One Excess III (MNP), One Basic				
424	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B				
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess III (MNP)				
426	Kaiser (CA)	One Risk, One Excess II - Part B				0.4%
427	Kaiser (CA)	One Risk, One Excess III (MNP)				
428	Kaiser (CA)	One Excess I, One Excess II - Part B				
429	Kaiser (CA)	One Excess I, One Excess III (MNP)				
430	Kaiser (CA)	Two Excess II - Part B				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)			0.1%	
432	Kaiser (CA)	Two Excess III - Both (MNP)				

Table A-15A
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 1
(continued)

Non-Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
450	Kaiser - Colorado Basic	Retiree Basic				
451	Kaiser - Colorado	Retiree Risk				
452	Kaiser (Other)	Retiree Only				
453	Kaiser - Colorado	Retiree Basic (Two Party)				
454	Kaiser - Colorado	Retiree Basic Family				
455	Kaiser - Colorado	One Risk, One Basic				
456	Kaiser (Other)	Retiree and Spouse				
457	Kaiser - Colorado	Two Retiree Risk				
458	Kaiser - Colorado	One Risk, Two or More Dependents				
459	Kaiser - Colorado	Two Risk, Two or More Dependents				
460	Kaiser (Other)	Retiree and Spouse				
440	Kaiser - Georgia	One Medicare Member with Part B only				
441	Kaiser - Georgia	One Medicare Member with Part A only				
442	Kaiser - Georgia	One Member without Medicare Part A&B				
443	Kaiser - Georgia	One Medicare Member (Renal Failure)				
444	Kaiser - Georgia	One Medicare Member + One Medicare with Part B only				
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only				
446	Kaiser - Georgia	One Medicare Member + One Medicare without Part A&B				
461	Kaiser - Georgia Basic	Basic				
462	Kaiser - Georgia	Retiree Risk				
463	Kaiser - Georgia	Retiree (Two Party)				
464	Kaiser - Georgia	Retiree Basic Family				
465	Kaiser - Georgia	One Retiree Risk, One Basic				
466	Kaiser - Georgia	Two Retiree Risk				
467	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic				
468	Kaiser - Georgia	Two Retiree Risk, One Basic				
469	Kaiser - Georgia	Three Retiree Risk, One Basic				
470	Kaiser - Georgia	Any other Family, at least one Retiree Risk				
471	Kaiser - Hawaii	Retiree Basic (Under 65)				
472	Kaiser - Hawaii	Retiree Risk				
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B				
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)				
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)				
476	Kaiser - Hawaii	One Retiree Risk, One Basic				
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic				
478	Kaiser - Hawaii	Two Retiree Risk				
479	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B				
481	Kaiser - Oregon	Retiree Basic (Under 65)				
482	Kaiser - Oregon	Retiree Risk				
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B				
484	Kaiser - Oregon	Retiree Basic (Two Party)				
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)				
486	Kaiser - Oregon	One Retiree Risk, One Basic				
487	Kaiser - Oregon	Retiree Cost				
488	Kaiser - Oregon	Two Retiree Risk				
489	Kaiser - Oregon	Retiree w/ Part A only				
490	Kaiser - Oregon	Retiree w/ Part B only				
491	Kaiser - Oregon	One Risk, One Medicare Part A only				
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare				
493	Kaiser - Oregon	One Risk, Two Basic				
494	Kaiser - Oregon	Two Risk, One Basic				
495	Kaiser - Oregon	Two Over 65 unassigned Medicare				
496	Kaiser - Oregon	Two Medicare Part A only				
497	Kaiser - Oregon	One Basic, One Medicare Part A only				
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B				
611	SCAN Health Plan	Retiree Only			0.5%	0.8%
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)			0.5%	0.4%
701	United Healthcare Medicare Advantage	Retiree Only		0.2%	3.8%	9.2%
702	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	0.6%	2.0%	3.9%	1.0%
703	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)			3.7%	4.1%
704	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (1 Medicare)	0.1%	0.5%	1.7%	0.1%
705	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (2 Medicare)			0.5%	
706	United Healthcare Medicare Advantage	Minor Survivor				
707	United Healthcare	Single	3.5%	8.6%		
708	United Healthcare	Two-Party	7.0%	5.5%		
709	United Healthcare	Family	8.5%	2.7%		
Total			100.0%	100.0%	100.0%	100.0%
Probability of enrolling at least one dependent			80.1%	55.5%	67.8%	35.3%

Table A-15A
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 1
(continued)

Firefighters Local 1014 Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
801	Firefighters Local 1014	Med-Member under 65	6.5%	6.5%		
802	Firefighters Local 1014	Med-Member +1 under 65	35.0%	35.0%		
803	Firefighters Local 1014	Med-Member +2 under 65	58.5%	58.5%		
804	Firefighters Local 1014	Med-Member with Medicare			12.0%	12.0%
805	Firefighters Local 1014	Med-Member +1; 1 MDC				
806	Firefighters Local 1014	Med-Member +2; 2 MDC			28.0%	28.0%
807	Firefighters Local 1014	Med-Member +2; 1 MDC				
808	Firefighters Local 1014	Med-Member +2; 2 MDC			60.0%	60.0%
809	Firefighters Local 1014	Med-Surv. Sp. Under 65				
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65				
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65				
812	Firefighters Local 1014	Med-Surv. Sp. With MDC				
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC				
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC				
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC				
Total			100.0%	100.0%	100.0%	100.0%
		Probability of enrolling at least one dependent	93.5%	93.5%	88.0%	88.0%

Table A-15B
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 2

Non-Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only	0.3%	0.5%		
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse	0.3%	0.1%		
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family	0.9%	0.1%		
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children		0.1%		
205	Anthem Blue Cross Prudent Buyer Plan	Minor Survivor				
211	Anthem Blue Cross I	Retiree Only	0.5%	0.4%		
212	Anthem Blue Cross I	Retiree and Spouse		0.3%		
213	Anthem Blue Cross I	Retiree, Spouse and Children	0.5%	0.2%		
214	Anthem Blue Cross I	Retiree and Children		0.1%		
215	Anthem Blue Cross I	Minor Survivor				
221	Anthem Blue Cross II	Retiree Only	4.5%	7.7%		
222	Anthem Blue Cross II	Retiree and Spouse	12.5%	7.0%		
223	Anthem Blue Cross II	Retiree, Spouse and Children	14.9%	3.0%		
224	Anthem Blue Cross II	Retiree and Children	1.5%	1.3%		
225	Anthem Blue Cross II	Minor Survivor				
240	Anthem Blue Cross III	One Medicare		0.3%	8.2%	13.0%
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare		0.1%	0.2%	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare			7.8%	1.9%
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare		0.2%	7.1%	5.1%
244	Anthem Blue Cross III	Retiree and Children 1 Medicare				
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			0.7%	0.1%
246	Anthem Blue Cross III	Retiree and Family 1 Medicare				
247	Anthem Blue Cross III	Retiree and Family 1 Medicare		0.3%	2.1%	0.1%
248	Anthem Blue Cross III	Retiree and Family 2 Medicare				
249	Anthem Blue Cross III	Retiree and Family 2 Medicare			0.6%	0.1%
250	Anthem Blue Cross III	Retiree and Family 3 Medicare			0.3%	
301	Cigna Network Model Plan	Retiree Only	0.1%			
302	Cigna Network Model Plan	Retiree and Spouse	0.2%			
303	Cigna Network Model Plan	Retiree and Family	0.1%			
304	Cigna Network Model Plan	Retiree and Children				
305	Cigna Network Model Plan	Minor Survivor				
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only				
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse				
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)				
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children				
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)				
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)				
393	Kaiser (WA)	Retiree and Family				
394	Kaiser (WA)	Retiree and Family				
395	Kaiser (WA)	Retiree and Family				
396	Kaiser (WA)	Retiree and Family				
397	Kaiser (WA)	Retiree and Family				
398	Kaiser (WA)	Retiree and Family				
399	Kaiser (WA)	Retiree and Family				
400	Kaiser (WA)	Retiree and Family				
401	Kaiser (CA)	Retiree Basic (Under 65)	11.0%	26.2%		
402	Kaiser (CA)	Retiree Cost ("M" Coverage)				
403	Kaiser (CA)	Retiree Risk (Senior Advantage)		0.6%	19.7%	41.7%
404	Kaiser (CA)	Retiree Excess I				
405	Kaiser (CA)	Retiree Excess II - Part B				
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)				
411	Kaiser (CA)	Family Basic	33.0%	32.0%		
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic				
413	Kaiser (CA)	One Advantage, Others Basic			22.6%	5.5%
414	Kaiser (CA)	One Excess I, Others Basic				
415	Kaiser (CA)	Two+ Cost ("M" Coverage)				
416	Kaiser (CA)	One Advantage, One Cost ("M" Coverage)				
417	Kaiser (CA)	One Excess I, One Cost ("M" Coverage)				
418	Kaiser (CA)	Two+ Advantage			16.1%	16.9%
419	Kaiser (CA)	One Excess I, One Advantage				
420	Kaiser (CA)	Two+ Excess I				
421	Kaiser (CA)	Survivor				
422	Kaiser (CA)	One Excess II - Part B, One Basic				
423	Kaiser (CA)	One Excess III (MNP), One Basic				
424	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B				
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess III (MNP)				
426	Kaiser (CA)	One Risk, One Excess II - Part B				
427	Kaiser (CA)	One Risk, One Excess III (MNP)				
428	Kaiser (CA)	One Excess I, One Excess II - Part B				
429	Kaiser (CA)	One Excess I, One Excess III (MNP)				
430	Kaiser (CA)	Two Excess II - Part B				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)				
432	Kaiser (CA)	Two Excess III - Both (MNP)				

Table A-15B
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 2
(continued)

Non-Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
450	Kaiser - Colorado Basic	Retiree Basic				
451	Kaiser - Colorado	Retiree Risk				
452	Kaiser (Other)	Retiree Only				
453	Kaiser - Colorado	Retiree Basic (Two Party)				
454	Kaiser - Colorado	Retiree Basic Family				
455	Kaiser - Colorado	One Risk, One Basic				
456	Kaiser (Other)	Retiree and Spouse				
457	Kaiser - Colorado	Two Retiree Risk				
458	Kaiser - Colorado	One Risk, Two or More Dependents				
459	Kaiser - Colorado	Two Risk, Two or More Dependents				
460	Kaiser (Other)	Retiree and Spouse				
440	Kaiser - Georgia	One Medicare Member with Part B only				
441	Kaiser - Georgia	One Medicare Member with Part A only				
442	Kaiser - Georgia	One Member without Medicare Part A&B				
443	Kaiser - Georgia	One Medicare Member (Renal Failure)				
444	Kaiser - Georgia	One Medicare Member + One Medicare with Part B only				
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only				
446	Kaiser - Georgia	One Medicare Member + One Medicare without Part A&B				
461	Kaiser - Georgia Basic	Basic				
462	Kaiser - Georgia	Retiree Risk				
463	Kaiser - Georgia	Retiree (Two Party)				
464	Kaiser - Georgia	Retiree Basic Family				
465	Kaiser - Georgia	One Retiree Risk, One Basic				
466	Kaiser - Georgia	Two Retiree Risk				
467	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic				
468	Kaiser - Georgia	Two Retiree Risk, One Basic				
469	Kaiser - Georgia	Three Retiree Risk, One Basic				
470	Kaiser - Georgia	Any other Family, at least one Retiree Risk				
471	Kaiser - Hawaii	Retiree Basic (Under 65)				
472	Kaiser - Hawaii	Retiree Risk				
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B				
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)				
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)				
476	Kaiser - Hawaii	One Retiree Risk, One Basic				
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic				
478	Kaiser - Hawaii	Two Retiree Risk				
479	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B				
481	Kaiser - Oregon	Retiree Basic (Under 65)				
482	Kaiser - Oregon	Retiree Risk				
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B				
484	Kaiser - Oregon	Retiree Basic (Two Party)				
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)				
486	Kaiser - Oregon	One Retiree Risk, One Basic				
487	Kaiser - Oregon	Retiree Cost				
488	Kaiser - Oregon	Two Retiree Risk				
489	Kaiser - Oregon	Retiree w/ Part A only				
490	Kaiser - Oregon	Retiree w/ Part B only				
491	Kaiser - Oregon	One Risk, One Medicare Part A only				
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare				
493	Kaiser - Oregon	One Risk, Two Basic				
494	Kaiser - Oregon	Two Risk, One Basic				
495	Kaiser - Oregon	Two Over 65 unassigned Medicare				
496	Kaiser - Oregon	Two Medicare Part A only				
497	Kaiser - Oregon	One Basic, One Medicare Part A only				
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B				
611	SCAN Health Plan	Retiree Only			0.5%	0.8%
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)			0.5%	0.4%
701	United Healthcare Medicare Advantage	Retiree Only		0.2%	3.8%	9.2%
702	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	0.6%	2.0%	3.9%	1.0%
703	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)			3.7%	4.1%
704	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (1 Medicare)	0.1%	0.5%	1.7%	0.1%
705	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (2 Medicare)			0.5%	
706	United Healthcare Medicare Advantage	Minor Survivor				
707	United Healthcare	Single	3.5%	8.6%		
708	United Healthcare	Two-Party	7.0%	5.5%		
709	United Healthcare	Family	8.5%	2.7%		
Total			100.0%	100.0%	100.0%	100.0%

Probability of enrolling at least one dependent 80.1% 55.5% 67.8% 35.3%

Table A-15B
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 2
(continued)

Firefighters Local 1014 Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
801	Firefighters Local 1014	Med-Member under 65	6.5%	6.5%		
802	Firefighters Local 1014	Med-Member +1 under 65	35.0%	35.0%		
803	Firefighters Local 1014	Med-Member +2 under 65	58.5%	58.5%		
804	Firefighters Local 1014	Med-Member with Medicare			12.0%	12.0%
805	Firefighters Local 1014	Med-Member +1; 1 MDC				
806	Firefighters Local 1014	Med-Member +1; 2 MDC			28.0%	28.0%
807	Firefighters Local 1014	Med-Member +2; 1 MDC				
808	Firefighters Local 1014	Med-Member +2; 2 MDC			60.0%	60.0%
809	Firefighters Local 1014	Med-Surv. Sp. Under 65				
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65				
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65				
812	Firefighters Local 1014	Med-Surv. Sp. With MDC				
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC				
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC				
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC				
Total			100.0%	100.0%	100.0%	100.0%

Probability of enrolling at least one dependent **93.5%** **93.5%** **88.0%** **88.0%**

Table A-16
Probability of Medical Plan and Coverage Tier Selection for Pre 65 Retirees
Who Become Eligible for a Post 65 Plan

We assume that Pre 65 retirees and dependents will choose Post 65 plans at age 65 according to the following table:

From Pre Age 65 Eligible Plan	To Post Age 65 Eligible Plan	Tier 1	Tier 2
Anthem Blue Cross I	Anthem Blue Cross I	45.0%	0.0%
	Anthem Blue Cross III	55.0%	100.0%
Anthem Blue Cross II	Anthem Blue Cross II	44.0%	0.0%
	Anthem Blue Cross III	56.0%	100.0%
Anthem Blue Cross Prudent Buyer	Anthem Blue Cross Prudent Buyer	47.0%	0.0%
	Anthem Blue Cross II	4.0%	0.0%
	Anthem Blue Cross III	49.0%	100.0%
Cigna Network Model	Cigna Network Model Plan	36.5%	0.0%
	Cigna Medicare Select Plus Rx (AZ)	6.0%	0.0%
	Anthem Blue Cross II	2.5%	0.0%
	Anthem Blue Cross III	25.0%	25.0%
	UnitedHealthcare Medicare Advantage	18.0%	75.0%
	Senior Advantage	2.0%	0.0%
UnitedHealthcare	SCAN Health Plan	10.0%	0.0%
	UnitedHealthcare Medicare Advantage	80.0%	81.0%
	Cigna Network Model Plan	1.0%	0.0%
	Anthem Blue Cross II	2.0%	0.0%
	Anthem Blue Cross III	9.0%	11.0%
	SCAN Health Plan	2.0%	2.0%
	Senior Advantage	2.0%	6.0%
	Excess II	3.0%	0.0%
One Excess II, One Basic	1.0%	0.0%	
Kaiser Retiree Basic	Senior Advantage	77.5%	98.0%
	Retiree Excess I	3.0%	0.0%
	Retiree Excess II	14.5%	0.0%
	Excess III (MNP)	3.0%	0.0%
Kaiser Family Basic	Anthem Blue Cross III	2.0%	2.0%
	2+ Advantage	80.0%	99.0%
	One Excess I, One Advantage	4.1%	0.0%
	One Advantage, One Excess II	9.0%	0.0%
	One Advantage, One Excess III (MNP)	3.1%	0.0%
	Two+ Excess II - Part B	0.5%	0.0%
	Anthem Blue Cross III	1.6%	1.0%
	UnitedHealthcare Medicare Advantage	0.2%	0.0%
Senior Advantage	1.5%	0.0%	
Firefighters Local 1014	Firefighters Local 1014	100.0%	100.0%

We assume that 100% of the retirees are eligible for Medicare with Part B Premium Reimbursement for the plans listed below. We assume these Post Medicare Only Plans are for enrollees who are entitled for Medicare Parts A and B:

- Anthem Blue Cross III
- Cigna Medicare Select Plus Rx (AZ)
- Firefighters Local 1014 Post Medicare Plan
- Kaiser Senior Advantage
- SCAN
- UnitedHealthcare – Medicare Advantage

We assume all other plans' retirees do not receive Part B Premium Reimbursement.

The Part B reimbursement for Tier 1 is for retiree and any spouse or child(ren), while the Part B reimbursement for Tier 2 is only for retirees and surviving spouses. Tier 2 retirees are required to enroll in Medicare when eligible.

Effective January 1, 2007, Medicare Part B premiums vary depending on income status. The County places a cap on the per member monthly Part B reimbursement amount at the standard amount (e.g., \$144.60 for calendar year 2021).

For purposes of this valuation, we assume the average Medicare Part B premium reimbursement from July 1, 2020 through July 1, 2021 is \$140.08 per member per month. This is based on our average of 2020 calendar year Medicare Part B premium rates provided in the census from LACERA of \$131.66 per member per month and the 2021 calendar year Medicare Part B standard premium rate of \$148.50.

Table A-17
Survivor and New Dependent Enrollment

The valuation methods and assumptions are adjusted with the following considerations from LACERA discussions:

Scenario I

If a dependent or spouse dies, the retiree may enroll a new spouse/domestic partner and/or a new dependent.

- We assume 1.0% will enroll a new spouse/domestic partner.
- We assume 2.5% of the retirees will enroll a new dependent.

Scenario II

If a retiree who has a retirement plan option which qualifies as eligible for continuing retirement benefits to the survivor dies and the spouse has retiree medical, Part B, or dental/vision coverage, the existing spouse or dependent may continue to be enrolled and may also enroll a new spouse/domestic partner and/or a new dependent.

- We assume 90% of the retirees with spouses have a spouse continuance option.
- We assume 2.2% of the surviving spouse/domestic partners with a continuance option will enroll a new spouse.
- Therefore, we assume 2.0% (or 90% of the 2.2%) of the surviving spouses' new spouses will enroll and receive the County subsidy.
- We assume 2.5% of the surviving spouse/domestic partners will enroll a new dependent.

Scenario III

If a retiree who has a retirement plan option which qualifies as eligible for continuing retirement benefits to the survivor dies and the spouse does NOT have retiree medical coverage, we assume no additional spouse/domestic partner or dependent will be enrolled.

Table A-18
Probability of Initial Dental/Vision Enrollment

Males and Females

<u>Years of Service</u>	<u>Assumed Enrollment %</u>
< 10	9%
10-14	48%
15-19	70%
20-24	76%
25+	95%
Disabled	93%

Table A-19
Probability of Dental/Vision Plan and Coverage Tier Selection Upon Dental/Vision Retirement Enrollment

<u>Tier</u>	<u>Cigna Indemnity Dental/Vision</u>			<u>Cigna HMO Dental/Vision</u>		
	<u>Retiree Only</u>	<u>Retiree and Dependents</u>	<u>Minor Survivor</u>	<u>Retiree Only</u>	<u>Retiree and Dependents</u>	<u>Minor Survivor</u>
Deduction Code	501	502	503	901	902	903
Percentage						
Male	18.5%	70.5%	0%	3.0%	8.0%	0%
Female	45.0%	42.7%	0%	7.5%	4.8%	0%

**Table A-20
 Premium Information**

The following premium information is for retirees living in California who have less than 10 years of service and must pay the full amount. Members who have more than 10 years of service receive a subsidy from the County. Details can be found in this table below. The premium rates in Table A-20 include the carriers' administration fees and LACERA's per contract monthly administration fee. The per contract monthly administration fee was \$8.00 effective July 1, 2020 and July 1, 2021 and is included in the premium rates.

**Pre and Post Age 65 Monthly Rates Effective July 1, 2020
 UnitedHealthcare is Pre Age 65 Only**

Tier	Anthem Blue Cross - Plan I	Anthem Blue Cross - Plan II	Anthem Blue Cross - Prudent Buyer	Cigna	United Healthcare
Retiree Only	\$ 1,236.53	\$ 1,236.53	\$ 1,003.87	\$ 1,629.11	
Retiree & Spouse	\$ 2,228.45	\$ 2,228.45	\$ 1,974.83	\$ 2,940.79	
Retiree & Family	\$ 2,628.45	\$ 2,628.45	\$ 2,228.67	\$ 3,472.45	
Retiree & Children	\$ 1,635.70	\$ 1,635.70	\$ 1,290.15	\$ 2,161.46	
Minor Survivor	\$ 410.44	\$ 418.57	\$ 274.07	\$ 515.26	\$ 352.92
UnitedHealthcare Single					\$ 1,233.17
UnitedHealthcare Two-Party					\$ 2,251.48
UnitedHealthcare Family					\$ 2,669.40

**Pre and Post Age 65 Monthly Rates Effective July 1, 2021
 UnitedHealthcare is Pre Age 65 Only**

Tier	Anthem Blue Cross - Plan I	Anthem Blue Cross - Plan II	Anthem Blue Cross - Prudent Buyer	Cigna	United Healthcare
Retiree Only	\$ 1,273.39	\$ 1,273.39	\$ 883.07	\$ 1,655.81	
Retiree & Spouse	\$ 2,295.06	\$ 2,295.06	\$ 1,736.25	\$ 2,989.10	
Retiree & Family	\$ 2,707.06	\$ 2,707.06	\$ 1,959.30	\$ 3,529.49	
Retiree & Children	\$ 1,684.53	\$ 1,684.53	\$ 1,134.63	\$ 2,196.42	
Minor Survivor	\$ 422.51	\$ 430.89	\$ 241.80	\$ 523.62	\$ 362.92
UnitedHealthcare Single					\$ 1,268.09
UnitedHealthcare Two-Party					\$ 2,315.42
UnitedHealthcare Family					\$ 2,745.25

Post Age 65 Monthly Rates Effective July 1, 2020

Tier	Anthem Blue Cross - Plan III	SCAN	United Healthcare Medicare Advantage
One Medicare	\$ 504.19		
Retiree & Spouse- 1 Medicare	\$ 1,609.58		
Retiree & Spouse- 2 Medicare	\$ 1,002.43		
Retiree & Children- 1 Medicare	\$ 901.94		
Retiree & Family- 1 Medicare	\$ 2,007.20		
Retiree & Family- 2 Medicare	\$ 1,399.97		
Retiree & Family- 3 Medicare	\$ 1,568.82		
Retiree Only		\$ 273.00	\$ 343.15
Retiree & 1 Dependent (1 Medicare)			\$ 1,568.32
Retiree & 1 Dependent (2 Medicare)		\$ 538.00	\$ 678.30
Retiree & 2 + Deps. (1 Medicare)			\$ 1,779.38
Retiree & 2 + Deps. (2 Medicare)			\$ 889.36

Post Age 65 Monthly Rates Effective July 1, 2021

Tier	Anthem Blue Cross - Plan III	SCAN	United Healthcare Medicare Advantage
One Medicare	\$ 519.08		
Retiree & Spouse- 1 Medicare	\$ 1,657.63		
Retiree & Spouse- 2 Medicare	\$ 1,032.26		
Retiree & Children- 1 Medicare	\$ 928.76		
Retiree & Family- 1 Medicare	\$ 2,067.18		
Retiree & Family- 2 Medicare	\$ 1,441.73		
Retiree & Family- 3 Medicare	\$ 1,615.64		
Retiree Only		\$ 283.60	\$ 336.45
Retiree & 1 Dependent (1 Medicare)			\$ 1,596.54
Retiree & 1 Dependent (2 Medicare)		\$ 559.20	\$ 664.90
Retiree & 2 + Deps. (1 Medicare)			\$ 1,813.61
Retiree & 2 + Deps. (2 Medicare)			\$ 881.97

Kaiser California Monthly Rates

Effective Date	July 1, 2020	July 1, 2021
Retiree Basic (Under 65)	\$ 1,087.85	\$ 1,173.13
Retiree Risk (Senior Advantage)	\$ 288.17	\$ 261.84
Retiree Excess I	\$ 1,177.65	\$ 1,177.37
Retiree Excess II - Part B	\$ 1,129.77	\$ 1,176.86
Excess III - Medicare Not Provided (MNP)	\$ 2,027.76	\$ 1,177.37
Family Basic	\$ 2,167.70	\$ 2,338.26
One Advantage, One Basic	\$ 1,368.02	\$ 1,426.97
One Excess I, One Basic	\$ 2,257.50	\$ 2,342.50
One Excess II - Part B, One Basic	\$ 2,209.62	\$ 2,341.99
One Excess III (MNP), One Basic	\$ 3,107.61	\$ 2,342.50
Two+ Advantage	\$ 568.34	\$ 515.68
One Excess I, One Advantage	\$ 1,457.82	\$ 1,431.21
One Advantage, One Excess II - Part B	\$ 1,409.94	\$ 1,430.70
One Advantage, One Excess III (MNP)	\$ 2,307.93	\$ 1,431.21
Two+ Excess I	\$ 2,347.30	\$ 2,346.74
One Excess I, One Excess II - Part B	\$ 2,299.42	\$ 2,346.23
One Excess I, One Excess III (MNP)	\$ 3,197.41	\$ 2,346.74
Two Excess II - Part B	\$ 2,251.54	\$ 2,345.72
One Excess II - Part B, One Excess III (MNP)	\$ 3,149.53	\$ 2,346.23
Two Excess III - Both (MNP)	\$ 4,047.52	\$ 2,346.74
Survivor	\$ 1,087.85	\$ 1,173.13

Firefighters Local 1014 Monthly Rates

Effective Date	July 1, 2020
Medical Member Under 65	\$ 1,209.48
Medical Member + 1 Under 65	\$ 2,180.76
Medical Member + 2 Under 65	\$ 2,572.42
Medical Member with Medicare	\$ 1,209.48
Medical Member + 1: 1 Medicare (MDC)	\$ 2,180.76
Medical Member + 1; 2 MDC	\$ 2,180.76
Medical Member + 2; 1 MDC	\$ 2,572.42
Medical Member + 2; 2 MDC	\$ 2,572.42
Medical Surviving Spouse Under 65	\$ 1,209.48
Medical Surviving Spouse + 1 Under 65	\$ 2,180.76
Medical Surviving Spouse + 2 Under 65	\$ 2,572.42
Medical Surviving Spouse with MDC	\$ 1,209.48
Medical Surviving Spouse + 1; 1 MDC	\$ 2,180.76
Medical Surviving Spouse + 2; 1 MDC	\$ 2,572.42
Medical Surviving Spouse + 1; 2 MDC	\$ 2,180.76

July 1, 2021 Firefighter Local 1014 rates were not available in time to include in the valuation.

Dental/Vision Monthly Rates

<u>Effective Date</u>	July 1, 2020		July 1, 2021	
	<u>Cigna Dental HMO/Vision</u>	<u>Cigna Indemnity Dental/Vision</u>	<u>Cigna Dental HMO/Vision</u>	<u>Cigna Indemnity Dental/Vision</u>
<u>Tier</u>				
Retiree Only	\$ 46.51	\$ 51.57	\$ 46.37	\$ 51.43
Retiree & Dependents	\$ 95.26	\$ 107.25	\$ 94.95	\$ 106.94
Minor Survivor	\$ 47.09	\$ 63.40	\$ 46.91	\$ 63.22

COUNTY CONTRIBUTIONS TOWARDS RETIREE HEALTH BENEFITS

Medical

Tier 1 is for employees who are hired before July 1, 2014 and are eligible for LACERA membership. If a retiree has 10 years of retirement service credit, the County contributes 40% of the health care plan premium or 40% of the benchmark plan rate, whichever is less. For each year of retirement service credit beyond 10 years, the County contributes an additional 4% per year, up to a maximum of 100% for a member with 25 years of service credit.

Tier 2 is for employees who are hired after June 30, 2014 and are eligible for LACERA membership. The Tier 2 subsidy is the same as Tier 1 except that the benchmark plan is different. The table below shows the benchmark plans for Tier 1 and Tier 2.

<u>Tier</u>	<u>Pre / Post Medicare</u>	<u>Benchmark Plan</u>	<u>Benchmark Amount</u>
1	Pre	Anthem Blue Cross I & II	Same tier that member selects
1	Post	Anthem Blue Cross I & II	Same tier that member selects
2	Pre	Anthem Blue Cross I & II	Retiree-only tier
2	Post	Anthem Blue Cross III	Retiree-only tier

If a Tier 2 retiree selects a family tier for a plan where the premium for the retiree-only tier is less than the Tier 2 benchmark, there is a spouse subsidy equal to the Tier 2 benchmark less the premium for the retiree-only tier. The Tier 2 non Local 1014 spouse subsidy varies depending on the plan selected and the retiree's years of service, so we developed weighted average factors of the County's contribution for the spouse's portion. On average, we assume that if the retiree has 10 years of service, the County will contribute 8% of the spouse's portion. This assumption grades linearly to 20% of the spouse's portion for a retiree with 25+ years of service.

The pre 65 and post 65 retirees of Local 1014 are on the same plan and pay the same rates. The pre 65 premium for the retiree-only tier is approximately equal to the Tier 2 benchmark so we valued no spouse subsidy. Since the post 65 premium for the retiree-only tier is greater than the Tier 2 benchmark, we assume the County contribution is 15% with 10 years of service grading linearly to 40% with 25+ years of service. Post 65 spouses are assumed to receive no subsidy.

The County contribution can never exceed the premium of the benchmark plan; this means that if the premium for the chosen plan and coverage option exceeds the benchmark premium, the retiree is required to pay the difference, even if the retiree has 25 years of service. We adjust the retiree's contributions by the difference between the premium of the chosen deduction code and the benchmark plan. Likewise, if the retiree has 25 years of service and the plan premium is less than the benchmark rate, the County contributes 100% of the plan premium only, not the benchmark plan rate. Reciprocal service is not included in contribution calculations.

Dental/Vision

The contribution percentages follow the same contribution proportions based on years of service (excluding reciprocal service) as the medical plans. The Tier 1 benchmark is the indemnity plan premium for the tier that the member selects. The Tier 2 benchmark is the indemnity plan premium for the retiree-only tier.

Service-Connected Disability

Any retiree with a service-connected disability retirement with less than 13 years of service will receive a different County contribution for both medical and dental/vision plans. The County contributes 50% of the lesser of the benchmark plan rate or the premium of the plan the retiree is enrolled in. If a retiree with service-connected disability retirement has 13 or more years of service, the County subsidy is the same as a retiree with service retirement. Reciprocal service is not included in contribution calculations.

FIREFIGHTERS LOCAL 1014 CONTRIBUTIONS TOWARDS RETIREE HEALTH BENEFITS

Medical, Dental/Vision, and Service-Connected Disability

Contributions are the same as for the County employees.

Table A-21
Claim Cost Analysis

All of the plans' premium rates have been determined based on retiree only information. Active premium rates are established independently. Therefore, no implicit subsidy exists between active and retiree rates. However, some plans pooled the Medicare enrolled and non-Medicare enrolled retirees to determine the rates. The following plans did not pool Medicare and non-Medicare retirees (or have an insignificant Medicare enrollment), so we can assume the premium rates are representative of the average claim costs used to develop the age and gender adjusted claim costs:

- Anthem Blue Cross I and II (Combined)
- Anthem Blue Cross III
- Anthem Blue Cross Prudent Buyer
- Cigna Network Model Plan
- Cigna Medicare Select Plus Rx (AZ)
- UnitedHealthcare
- UnitedHealthcare Medicare Advantage
- SCAN Health Plan
- Kaiser and Kaiser Interregional
 - Basic
 - Senior Advantage
 - Medicare Cost Supplement
 - Excess I
 - Excess II
 - Excess III
- Cigna Indemnity Dental/Vision
- Cigna HMO Dental/Vision

The Firefighters Local 1014 Plan pooled Medicare and non-Medicare retirees to determine premium rates. Therefore, we adjusted the premium rates to compensate for the coordination with Medicare in making our claim cost assumption.

For current active members projected to retire in the future, we used the enrollment assumptions in Table A-15A (Tier 1), Table A-15B (Tier 2), and Table A-16 (pre 65 to post 65 election) to develop weighted average claim costs as of July 1, 2020. The monthly weighted average claim costs used for future retirees and dependents are shown in the following tables.

The medical claim costs for pre 65 retirees are different than for post 65 retirees due to different plan selection assumptions.

Current vested terminated members post 65 claim costs are based on their earliest retirement eligibility age.

In the following tables, when shown, child costs are at age 65. The costs for children are assumed to be 25% of the age 65 child costs for males and 21% of the age 65 child costs for females.

Tier 1

A. Future Retirees Retiring Before Age 65

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 427.28	\$ 635.88	\$ 380.49	\$ 301.81
30	\$ 528.25	\$ 781.16	\$ 351.81	\$ 677.81
35	\$ 657.53	\$ 843.43	\$ 437.91	\$ 674.81
40	\$ 783.56	\$ 1,069.51	\$ 552.78	\$ 725.22
45	\$ 871.06	\$ 1,283.48	\$ 673.09	\$ 821.21
50	\$ 953.72	\$ 1,194.98	\$ 795.23	\$ 926.65
55	\$ 1,037.32	\$ 1,124.68	\$ 961.07	\$ 1,061.66
60	\$ 1,101.04	\$ 1,125.52	\$ 1,213.45	\$ 1,237.23
65 (Pre 65)	\$ 1,266.92	\$ 1,249.55	\$ 1,514.08	\$ 1,465.64
65 (Post 65)	\$ 471.68	\$ 409.17	\$ 375.87	\$ 442.71
70	\$ 576.67	\$ 487.32	\$ 459.53	\$ 527.27
75	\$ 660.00	\$ 539.51	\$ 525.93	\$ 583.74
80	\$ 706.77	\$ 564.51	\$ 563.20	\$ 610.79
85	\$ 741.13	\$ 586.41	\$ 590.58	\$ 634.49
90	\$ 767.37	\$ 603.88	\$ 611.49	\$ 653.39
95	\$ 767.37	\$ 603.88	\$ 611.49	\$ 653.39

B. Future Retirees Retiring After Age 65

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	N/A	N/A	\$ 380.89	\$ 303.68
30	N/A	N/A	\$ 352.18	\$ 682.00
35	N/A	N/A	\$ 438.37	\$ 678.98
40	N/A	N/A	\$ 553.35	\$ 729.70
45	N/A	N/A	\$ 673.79	\$ 826.28
50	N/A	N/A	\$ 796.05	\$ 932.36
55	N/A	N/A	\$ 962.06	\$ 1,068.21
60	N/A	N/A	\$ 1,214.70	\$ 1,244.86
65 (Pre 65)	N/A	N/A	\$ 1,515.65	\$ 1,474.67
65 (Post 65)	\$ 335.81	\$ 304.00	\$ 296.27	\$ 324.86
70	\$ 410.55	\$ 362.06	\$ 362.22	\$ 386.90
75	\$ 469.88	\$ 400.84	\$ 414.56	\$ 428.34
80	\$ 503.18	\$ 419.42	\$ 443.94	\$ 448.19
85	\$ 527.65	\$ 435.69	\$ 465.53	\$ 465.58
90	\$ 546.33	\$ 448.67	\$ 482.01	\$ 479.45
95	\$ 546.33	\$ 448.67	\$ 482.01	\$ 479.45

The Firefighters Local 1014 and dental/vision claim costs are shown in the tables on the following page.

Tier 1

Firefighters Local 1014 Plan Monthly Medical Claim Costs

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 706.19	\$ 1,036.34	\$ 587.86	\$ 468.50
30	\$ 873.06	\$ 1,273.12	\$ 543.55	\$ 1,052.15
35	\$ 1,086.74	\$ 1,374.60	\$ 676.58	\$ 1,047.50
40	\$ 1,295.04	\$ 1,743.06	\$ 854.05	\$ 1,125.75
45	\$ 1,439.66	\$ 2,091.78	\$ 1,039.93	\$ 1,274.76
50	\$ 1,576.29	\$ 1,947.55	\$ 1,228.63	\$ 1,438.43
55	\$ 1,714.46	\$ 1,832.98	\$ 1,484.85	\$ 1,648.01
60	\$ 1,819.78	\$ 1,834.35	\$ 1,874.79	\$ 1,920.54
65 (Pre 65)	\$ 2,093.94	\$ 2,036.50	\$ 2,339.27	\$ 2,275.10
65 (Post 65)	\$ 451.07	\$ 438.69	\$ 451.07	\$ 438.69
70	\$ 551.46	\$ 522.48	\$ 551.46	\$ 522.48
75	\$ 631.15	\$ 578.44	\$ 631.15	\$ 578.44
80	\$ 675.88	\$ 605.25	\$ 675.88	\$ 605.25
85	\$ 708.74	\$ 628.73	\$ 708.74	\$ 628.73
90	\$ 733.83	\$ 647.46	\$ 733.83	\$ 647.46
95	\$ 733.83	\$ 647.46	\$ 733.83	\$ 647.46

Future Retirees Monthly Dental/Vision Claim Costs

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 24.31	\$ 30.36	\$ 26.81	\$ 27.10
30	\$ 27.30	\$ 32.29	\$ 29.25	\$ 34.64
35	\$ 29.15	\$ 33.87	\$ 31.23	\$ 36.33
40	\$ 30.35	\$ 35.46	\$ 32.52	\$ 38.04
45	\$ 32.11	\$ 37.20	\$ 34.41	\$ 39.90
50	\$ 34.97	\$ 39.83	\$ 37.47	\$ 42.72
55	\$ 39.59	\$ 43.53	\$ 42.42	\$ 46.70
60	\$ 45.36	\$ 47.64	\$ 48.60	\$ 51.11
65	\$ 51.97	\$ 51.40	\$ 55.69	\$ 55.14
70	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
75	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
80	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
85	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
90	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
95	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27

For current retired members, spouses, and dependents, the claim costs are based on the actual premiums by deduction code, adjusted for age and gender. The tables that follow show the age 65 adjusted monthly claim costs. Adjustments by age and gender are based on the same methodology used in the tables above.

Tier 1

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$ 841.99				\$ 841.99			\$ 635.92		
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$ 841.99	\$ 841.99	\$ 692.98		\$ 841.99	\$ 841.99		\$ 635.92	\$ 635.92	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$ 841.99	\$ 841.99	\$ 692.98		\$ 841.99	\$ 841.99		\$ 635.92	\$ 635.92	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$ 841.99	\$ 841.99	\$ 692.98		\$ 841.99			\$ 635.92		
205	Anthem Blue Cross Prudent Buyer	Minor Survivor				\$ 692.98			\$ 692.98			
211	Anthem Blue Cross I	Retiree Only	\$ 607.86				\$ 607.86			\$ 490.21		
212	Anthem Blue Cross I	Retiree and Spouse	\$ 607.86	\$ 607.86	\$ 500.29		\$ 607.86	\$ 607.86		\$ 490.21	\$ 490.21	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$ 607.86	\$ 607.86	\$ 500.29		\$ 607.86	\$ 607.86		\$ 490.21	\$ 490.21	
214	Anthem Blue Cross I	Retiree and Children	\$ 607.86	\$ 607.86	\$ 500.29		\$ 607.86			\$ 490.21		
215	Anthem Blue Cross I	Minor Survivor				\$ 500.29			\$ 500.29			\$ 500.29
221	Anthem Blue Cross II	Retiree Only	\$ 1,178.61				\$ 1,178.61			\$ 739.20		
222	Anthem Blue Cross II	Retiree and Spouse	\$ 1,178.61	\$ 1,178.61	\$ 970.03		\$ 1,178.61	\$ 1,178.61		\$ 739.20	\$ 739.20	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$ 1,178.61	\$ 1,178.61	\$ 970.03		\$ 1,178.61	\$ 1,178.61		\$ 739.20	\$ 739.20	
224	Anthem Blue Cross II	Retiree and Children	\$ 1,178.61	\$ 1,178.61	\$ 970.03		\$ 1,178.61			\$ 739.20		
225	Anthem Blue Cross II	Minor Survivor				\$ 970.03			\$ 970.03			\$ 970.03
240	Anthem Blue Cross III	One Medicare					\$ 393.96			\$ 393.96		
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,248.00	\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,248.00	\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare					\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96			\$ 393.96	\$ 393.96	
245	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96			\$ 393.96	\$ 393.96	
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,248.00	\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,248.00	\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
248	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
249	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
250	Anthem Blue Cross III	Retiree and Family 3 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
301	Cigna Network Model Plan	Retiree Only	\$ 1,221.40				\$ 1,221.40			\$ 668.52		
302	Cigna Network Model Plan	Retiree and Spouse	\$ 1,221.40	\$ 1,221.40	\$ 1,005.25		\$ 1,221.40	\$ 1,221.40		\$ 668.52	\$ 668.39	
303	Cigna Network Model Plan	Retiree and Family	\$ 1,221.40	\$ 1,221.40	\$ 1,005.25		\$ 1,221.40	\$ 1,221.40		\$ 668.52	\$ 668.39	
304	Cigna Network Model Plan	Retiree and Children	\$ 1,221.40	\$ 1,221.40	\$ 1,005.25		\$ 1,221.40			\$ 668.52		
305	Cigna Network Model Plan	Minor Survivor				\$ 1,005.25			\$ 1,005.25			
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only					\$ 329.57					
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse					\$ 329.57	\$ 329.57		\$ 329.57	\$ 329.57	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)					\$ 329.57	\$ 329.57				
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children					\$ 329.57	\$ 329.57		\$ 329.57	\$ 329.57	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)					\$ 329.57	\$ 329.57		\$ 329.57	\$ 329.57	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)					\$ 329.57	\$ 329.57				
401	Kaiser (CA)	Retiree Basic (Under 65)	\$ 1,299.00							\$ 385.69		
403	Kaiser (CA)	Retiree Risk (Senior Advantage)					\$ 225.27					
404	Kaiser (CA)	Retiree Excess I					\$ 920.59					
405	Kaiser (CA)	Retiree Excess II - Part B					\$ 883.16					
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)					\$ 1,585.13					
411	Kaiser (CA)	Family Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11					\$ 296.30	\$ 286.43	



Tier 1

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
413	Kaiser (CA)	One Advantage, One Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11		\$ 225.27	\$ 218.67		\$ 225.27	\$ 286.43	
414	Kaiser (CA)	One Excess I, One Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11		\$ 920.59	\$ 912.89		\$ 920.59	\$ 286.43	
418	Kaiser (CA)	Two+ Advantage					\$ 225.27	\$ 218.67				
419	Kaiser (CA)	One Excess I, One Advantage					\$ 572.93	\$ 565.78				
420	Kaiser (CA)	Two+ Excess I					\$ 920.59	\$ 912.89				
421	Kaiser (CA)	Survivor				\$ 1,069.11			\$ 1,069.11			\$ 1,069.11
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11		\$ 883.16	\$ 875.52		\$ 883.16	\$ 286.43	
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11		\$ 1,585.13	\$ 1,576.38		\$ 1,585.13	\$ 286.43	
426	Kaiser (CA)	One Advantage, One Excess II - Part B					\$ 554.21	\$ 547.09				
427	Kaiser (CA)	One Advantage, One Excess III (MNP)					\$ 905.20	\$ 897.52				
428	Kaiser (CA)	One Excess, One Excess II - Part B					\$ 901.87	\$ 894.20				
429	Kaiser (CA)	One Excess, One Excess III (MNP)					\$ 1,252.86	\$ 1,244.63				
430	Kaiser (CA)	Two Excess II - Part B					\$ 883.16	\$ 875.52				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)					\$ 1,234.14	\$ 1,225.95				
432	Kaiser (CA)	Two Excess III - Both (MNP)					\$ 1,585.13	\$ 1,576.38				
450	Kaiser - Colorado Basic	Retiree Basic	\$ 1,202.57							\$ 265.06		
451	Kaiser - Colorado	Retiree Risk					\$ 265.06					
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$ 1,202.57	\$ 1,578.56						\$ 265.06	\$ 265.34	
454	Kaiser - Colorado	Retiree Basic Family	\$ 1,202.57	\$ 1,578.56	\$ 3,234.01					\$ 265.06	\$ 265.34	
455	Kaiser - Colorado	One Risk, One Basic	\$ 1,202.57	\$ 1,293.81			\$ 265.06	\$ 265.34		\$ 265.06	\$ 265.34	
457	Kaiser - Colorado	Two Retiree Risk					\$ 265.06	\$ 265.34				
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$ 1,202.57	\$ 1,293.81	\$ 3,904.99		\$ 265.06	\$ 265.34		\$ 265.06	\$ 265.34	
459	Kaiser - Colorado	Two Risk, Two or More Dependents			\$ 4,146.14		\$ 265.06	\$ 265.34		\$ 265.06	\$ 265.34	
440	Kaiser - Georgia	One Medicare Member with Part B only					\$ 841.87					
441	Kaiser - Georgia	One Medicare Member with Part A only					\$ 841.87					
442	Kaiser - Georgia	One Member without Medicare Part A&B					\$ 841.87					
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only					\$ 841.87	\$ 323.23				
461	Kaiser - Georgia Basic	Basic	\$ 1,269.85							\$ 321.56		
462	Kaiser - Georgia	Retiree Risk					\$ 321.56					
463	Kaiser - Georgia	Retiree (Two Party)	\$ 1,269.85	\$ 1,366.75	\$ 4,379.88		\$ 321.56	\$ 323.23		\$ 321.56	\$ 323.23	
464	Kaiser - Georgia	Retiree Basic Family	\$ 1,269.85	\$ 1,366.75	\$ 4,379.88					\$ 321.56	\$ 323.23	
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$ 485.03	\$ 1,366.75	\$ 4,379.88		\$ 321.56	\$ 323.23		\$ 321.56	\$ 323.23	
466	Kaiser - Georgia	Two Retiree Risk					\$ 321.56	\$ 323.23				
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$ 1,134.79							\$ 340.37		
472	Kaiser - Hawaii	Retiree Risk					\$ 340.37					
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B					\$ 1,347.56					
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$ 1,134.79	\$ 1,220.32						\$ 340.37	\$ 342.50	
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$ 1,134.79	\$ 1,220.32	\$ 3,910.68					\$ 340.37	\$ 342.50	
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$ 1,134.79	\$ 1,220.32	\$ 3,910.64		\$ 340.37	\$ 342.50		\$ 340.37	\$ 342.50	
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$ 1,134.79	\$ 1,220.32	\$ 3,910.64		\$ 1,347.56	\$ 1,374.42		\$ 1,347.56	\$ 1,374.42	
478	Kaiser - Hawaii	Two Retiree Risk					\$ 340.37	\$ 342.50				



Tier 1

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,325.80							\$ 364.00		
482	Kaiser - Oregon	Retiree Risk										
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B							\$ 955.26			
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,325.80	\$ 1,427.42							\$ 364.00	\$ 366.72
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,325.80	\$ 1,427.42	\$ 4,574.28						\$ 364.00	\$ 366.72
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,325.80	\$ 1,427.41	\$ 4,574.27				\$ 364.00	\$ 366.72	\$ 364.00	\$ 366.72
488	Kaiser - Oregon	Two Retiree Risk							\$ 364.00	\$ 366.72		
489	Kaiser - Oregon	Retiree w/ Part A only							\$ 817.12			
491	Kaiser - Oregon	One Risk, One Medicare Part A only							\$ 817.12	\$ 366.72		
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,440.89	\$ 585.31					\$ 955.26	\$ 366.72	\$ 364.00	\$ 366.72
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,325.80	\$ 1,427.41					\$ 364.00	\$ 366.72	\$ 364.00	\$ 366.72
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,325.80	\$ 1,427.41	\$ 4,574.27				\$ 364.00	\$ 366.72	\$ 364.00	\$ 366.72
495	Kaiser - Oregon	Two Over 65 unassigned Medicare							\$ 955.26	\$ 972.49		
496	Kaiser - Oregon	Two Medicare Part A only							\$ 817.12	\$ 830.96		
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,325.80	\$ 1,427.41					\$ 817.12	\$ 830.96	\$ 817.12	\$ 830.96
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,325.80	\$ 1,427.41					\$ 955.26	\$ 972.49	\$ 955.26	\$ 972.49
393	Kaiser - Washington	Retiree Basic	\$ 1,331.06								\$ 331.47	
394	Kaiser - Washington	Retiree Risk (Senior Advantage)							\$ 331.47			
395	Kaiser - Washington	Retiree Basic (Two Party)	\$ 1,331.06	\$ 1,243.11							\$ 331.47	\$ 333.39
396	Kaiser - Washington	Retiree Basic Family	\$ 1,331.06	\$ 1,243.11	\$ 5,784.09						\$ 331.47	\$ 333.39
397	Kaiser - Washington	One Risk, One Basic	\$ 1,331.06	\$ 1,243.11	\$ 3,983.66				\$ 331.47	\$ 333.39	\$ 331.47	\$ 333.39
398	Kaiser - Washington	Two Retiree Risk							\$ 331.47	\$ 333.39		
399	Kaiser - Washington	One Risk, Two or More Dependents	\$ 1,331.06	\$ 1,243.11	\$ 5,175.22				\$ 331.47	\$ 333.39	\$ 331.47	\$ 333.39
400	Kaiser - Washington	Two Risk, Two or More Dependents			\$ 5,784.09				\$ 331.47	\$ 333.39	\$ 331.47	\$ 333.39
611	SCAN Health Plan	Retiree Only							\$ 203.97			
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)							\$ 203.97	\$ 203.97		
701	United Healthcare	Retiree Only	\$ 1,417.08						\$ 278.21		\$ 278.21	
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30				\$ 278.21	\$ 278.21	\$ 278.21	\$ 278.21
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)							\$ 278.21	\$ 278.21	\$ 278.21	\$ 278.21
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30				\$ 278.21	\$ 278.21	\$ 278.21	\$ 278.21
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30				\$ 278.21	\$ 278.21	\$ 278.21	\$ 278.21
706	United Healthcare	Minor Survivor					\$ 1,166.30			\$ 1,166.30		
707	United Healthcare	Single	\$ 1,417.08								\$ 337.72	
708	United Healthcare	Two-Party	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30						\$ 337.72	\$ 337.28
709	United Healthcare	Family	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30						\$ 337.72	\$ 337.28



Tier 1

Fire Fighters Local 1014 Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2,093.94				\$ 451.07			\$ 451.07		
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 2,093.94	\$ 2,093.94	\$ 1,723.38		\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 2,093.94	\$ 2,093.94	\$ 1,723.38		\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare					\$ 451.07		\$ 451.07	\$ 451.07		\$ 451.07
805	Firefighters' Local 1014	Med-Member +1; 1 MDC		\$ 2,093.94	\$ 1,723.38		\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
806	Firefighters' Local 1014	Med-Member +1; 2 MDC					\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
807	Firefighters' Local 1014	Med-Member +2; 1 MDC	\$ 2,093.94		\$ 1,723.38		\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
808	Firefighters' Local 1014	Med-Member +2; 2 MDC					\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65				\$ 2,093.94		\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65	\$ 2,093.94	\$ 1,723.38	\$ 2,093.94		\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65	\$ 2,093.94	\$ 1,723.38	\$ 2,093.94		\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07	\$ 451.07
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC					\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07	\$ 451.07
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC	\$ 2,093.94	\$ 1,723.38	\$ 2,093.94		\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07	\$ 451.07
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC	\$ 2,093.94	\$ 1,723.38	\$ 2,093.94		\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07	\$ 451.07
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC					\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07	\$ 451.07

Dental/Vision Male Retirees

Deduction Code	Plan	Tier	Age 65 Adjusted Claim Costs		
			Retiree	Sp/Dep	Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$ 52.48		
502	Cigna Indemnity Dental/Vision	Family	\$ 52.48	\$ 56.00	
503	Cigna Indemnity Dental/Vision	Minor Survivor			\$ 54.07
901	Cigna Dental HMO/Vision	Retiree Only	\$ 47.88		
902	Cigna Dental HMO/Vision	Family	\$ 47.88	\$ 52.91	
903	Cigna Dental HMO/Vision	Minor Survivor			\$ 49.34



Tier 1

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$ 818.89				\$ 818.89			\$ 618.47		
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$ 818.89	\$ 818.89	\$ 845.68		\$ 818.89	\$ 818.89		\$ 618.47	\$ 618.47	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$ 818.89	\$ 818.89	\$ 845.68		\$ 818.89	\$ 818.89		\$ 618.47	\$ 618.47	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$ 818.89	\$ 818.89	\$ 845.68		\$ 818.89			\$ 618.47		
205	Anthem Blue Cross Prudent Buyer	Minor Survivor				\$ 845.68			\$ 845.68			
211	Anthem Blue Cross I	Retiree Only	\$ 591.18				\$ 591.18			\$ 476.76		
212	Anthem Blue Cross I	Retiree and Spouse	\$ 591.18	\$ 591.18	\$ 610.52		\$ 591.18	\$ 591.18		\$ 476.76	\$ 476.76	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$ 591.18	\$ 591.18	\$ 610.52		\$ 591.18	\$ 591.18		\$ 476.76	\$ 476.76	
214	Anthem Blue Cross I	Retiree and Children	\$ 591.18	\$ 591.18	\$ 610.52		\$ 591.18			\$ 476.76		
215	Anthem Blue Cross I	Minor Survivor				\$ 610.52			\$ 610.52			\$ 610.52
221	Anthem Blue Cross II	Retiree Only	\$ 1,146.28				\$ 1,146.28			\$ 718.93		
222	Anthem Blue Cross II	Retiree and Spouse	\$ 1,146.28	\$ 1,146.28	\$ 1,183.78		\$ 1,146.28	\$ 1,146.28		\$ 718.93	\$ 718.93	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$ 1,146.28	\$ 1,146.28	\$ 1,183.78		\$ 1,146.28	\$ 1,146.28		\$ 718.93	\$ 718.93	
224	Anthem Blue Cross II	Retiree and Children	\$ 1,146.28	\$ 1,146.28	\$ 1,183.78		\$ 1,146.28			\$ 718.93		
225	Anthem Blue Cross II	Minor Survivor				\$ 1,183.78			\$ 1,183.78			\$ 1,183.78
240	Anthem Blue Cross III	One Medicare					\$ 383.15			\$ 383.15		
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,213.76	\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	\$ 383.15
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,213.76	\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	\$ 383.15
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare					\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	\$ 383.15
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15			\$ 383.15	\$ 383.15	\$ 383.15
245	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15			\$ 383.15	\$ 383.15	\$ 383.15
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,213.76	\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	\$ 383.15
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,213.76	\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	\$ 383.15
248	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	\$ 383.15
249	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	\$ 383.15
250	Anthem Blue Cross III	Retiree and Family 3 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	\$ 383.15
301	Cigna Network Model Plan	Retiree Only	\$ 1,187.89				\$ 1,187.89			\$ 650.18		
302	Cigna Network Model Plan	Retiree and Spouse	\$ 1,187.89	\$ 1,187.89	\$ 1,226.75		\$ 1,187.89	\$ 1,187.89		\$ 650.18	\$ 650.05	
303	Cigna Network Model Plan	Retiree and Family	\$ 1,187.89	\$ 1,187.89	\$ 1,226.75		\$ 1,187.89	\$ 1,187.89		\$ 650.18	\$ 650.05	
304	Cigna Network Model Plan	Retiree and Children	\$ 1,187.89	\$ 1,187.89	\$ 1,226.75		\$ 1,187.89			\$ 650.18		
305	Cigna Network Model Plan	Minor Survivor				\$ 1,226.75			\$ 1,226.75			
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only					\$ 320.53					
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse					\$ 320.53	\$ 320.53		\$ 320.53	\$ 320.53	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)					\$ 320.53	\$ 320.53				
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children					\$ 320.53	\$ 320.53		\$ 320.53	\$ 320.53	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)					\$ 320.53	\$ 320.53		\$ 320.53	\$ 320.53	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)					\$ 320.53	\$ 320.53				
401	Kaiser (CA)	Retiree Basic (Under 65)	\$ 1,263.36							\$ 375.11		
403	Kaiser (CA)	Retiree Risk (Senior Advantage)					\$ 219.09					
404	Kaiser (CA)	Retiree Excess I					\$ 895.33					
405	Kaiser (CA)	Retiree Excess II - Part B					\$ 858.93					
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)					\$ 1,541.65					
411	Kaiser (CA)	Family Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69					\$ 288.17	\$ 278.57	



Tier 1

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
413	Kaiser (CA)	One Advantage, One Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69		\$ 219.09	\$ 212.67		\$ 219.09	\$ 278.57	
414	Kaiser (CA)	One Excess I, One Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69		\$ 895.33	\$ 887.84		\$ 895.33	\$ 278.57	
418	Kaiser (CA)	Two+ Advantage					\$ 219.09	\$ 212.67				
419	Kaiser (CA)	One Excess I, One Advantage					\$ 557.21	\$ 550.26				
420	Kaiser (CA)	Two+ Excess I					\$ 895.33	\$ 887.84				
421	Kaiser (CA)	Survivor				\$ 1,304.69			\$ 1,304.69			\$ 1,304.69
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69		\$ 858.93	\$ 851.50		\$ 858.93	\$ 278.57	
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69		\$ 1,541.65	\$ 1,533.13		\$ 1,541.65	\$ 278.57	
426	Kaiser (CA)	One Advantage, One Excess II - Part B					\$ 539.01	\$ 532.08				
427	Kaiser (CA)	One Advantage, One Excess III (MNP)					\$ 880.37	\$ 872.90				
428	Kaiser (CA)	One Excess, One Excess II - Part B					\$ 877.13	\$ 869.67				
429	Kaiser (CA)	One Excess, One Excess III (MNP)					\$ 1,218.49	\$ 1,210.49				
430	Kaiser (CA)	Two Excess II - Part B					\$ 858.93	\$ 851.50				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)					\$ 1,200.29	\$ 1,192.32				
432	Kaiser (CA)	Two Excess III - Both (MNP)					\$ 1,541.65	\$ 1,533.13				
450	Kaiser - Colorado Basic	Retiree Basic	\$ 1,169.58							\$ 257.79		
451	Kaiser - Colorado	Retiree Risk					\$ 257.79					
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$ 1,169.58	\$ 1,535.26						\$ 257.79	\$ 258.06	
454	Kaiser - Colorado	Retiree Basic Family	\$ 1,169.58	\$ 1,535.26	\$ 3,946.62					\$ 257.79	\$ 258.06	
455	Kaiser - Colorado	One Risk, One Basic	\$ 1,169.58	\$ 1,258.32			\$ 257.79	\$ 258.06		\$ 257.79	\$ 258.06	
457	Kaiser - Colorado	Two Retiree Risk					\$ 257.79	\$ 258.06				
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$ 1,169.58	\$ 1,258.32	\$ 4,765.45		\$ 257.79	\$ 258.06		\$ 257.79	\$ 258.06	
459	Kaiser - Colorado	Two Risk, Two or More Dependents			\$ 5,059.74		\$ 257.79	\$ 258.06		\$ 257.79	\$ 258.06	
440	Kaiser - Georgia	One Medicare Member with Part B only					\$ 818.78					
441	Kaiser - Georgia	One Medicare Member with Part A only					\$ 818.78					
442	Kaiser - Georgia	One Member without Medicare Part A&B					\$ 818.78					
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only					\$ 818.78	\$ 314.37				
461	Kaiser - Georgia Basic	Basic	\$ 1,235.02							\$ 312.74		
462	Kaiser - Georgia	Retiree Risk					\$ 312.74					
463	Kaiser - Georgia	Retiree (Two Party)	\$ 1,235.02	\$ 1,329.26	\$ 5,344.98		\$ 312.74	\$ 314.37		\$ 312.74	\$ 314.37	
464	Kaiser - Georgia	Retiree Basic Family	\$ 1,235.02	\$ 1,329.26	\$ 5,344.98					\$ 312.74	\$ 314.37	
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$ 471.73	\$ 1,329.26	\$ 5,344.98		\$ 312.74	\$ 314.37		\$ 312.74	\$ 314.37	
466	Kaiser - Georgia	Two Retiree Risk					\$ 312.74	\$ 314.37				
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$ 1,103.66							\$ 331.03		
472	Kaiser - Hawaii	Retiree Risk					\$ 331.03					
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B					\$ 1,310.59					
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$ 1,103.66	\$ 1,186.85						\$ 331.03	\$ 333.11	
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$ 1,103.66	\$ 1,186.85	\$ 4,772.40					\$ 331.03	\$ 333.11	
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$ 1,103.66	\$ 1,186.85	\$ 4,772.35		\$ 331.03	\$ 333.11		\$ 331.03	\$ 333.11	
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$ 1,103.66	\$ 1,186.85	\$ 4,772.35		\$ 1,310.59	\$ 1,336.72		\$ 1,310.59	\$ 1,336.72	
478	Kaiser - Hawaii	Two Retiree Risk					\$ 331.03	\$ 333.11				



Tier 1

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,289.43							\$ 354.02		
482	Kaiser - Oregon	Retiree Risk								\$ 354.02		
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B							\$ 929.06			
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,289.43	\$ 1,388.26						\$ 354.02	\$ 356.66	
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,289.43	\$ 1,388.26	\$ 5,582.22					\$ 354.02	\$ 356.66	
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,289.43	\$ 1,388.25	\$ 5,582.21				\$ 354.02	\$ 356.66	\$ 354.02	\$ 356.66
488	Kaiser - Oregon	Two Retiree Risk							\$ 354.02	\$ 356.66		
489	Kaiser - Oregon	Retiree w/ Part A only							\$ 794.71			
491	Kaiser - Oregon	One Risk, One Medicare Part A only							\$ 794.71	\$ 356.66		
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,401.36	\$ 569.25					\$ 929.06	\$ 356.66	\$ 354.02	\$ 356.66
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,289.43	\$ 1,388.25					\$ 354.02	\$ 356.66	\$ 354.02	\$ 356.66
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,289.43	\$ 1,388.25	\$ 5,582.21				\$ 354.02	\$ 356.66	\$ 354.02	\$ 356.66
495	Kaiser - Oregon	Two Over 65 unassigned Medicare							\$ 929.06	\$ 945.82		
496	Kaiser - Oregon	Two Medicare Part A only							\$ 794.71	\$ 808.17		
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,289.43	\$ 1,388.25					\$ 794.71	\$ 808.17	\$ 794.71	\$ 808.17
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,289.43	\$ 1,388.25					\$ 929.06	\$ 945.82	\$ 929.06	\$ 945.82
393	Kaiser - Washington	Retiree Basic	\$ 1,294.55								\$ 322.38	
394	Kaiser - Washington	Retiree Risk (Senior Advantage)							\$ 322.38			
395	Kaiser - Washington	Retiree Basic (Two Party)	\$ 1,294.55	\$ 1,209.01							\$ 322.38	\$ 324.24
396	Kaiser - Washington	Retiree Basic Family	\$ 1,294.55	\$ 1,209.01	\$ 7,058.61						\$ 322.38	\$ 324.24
397	Kaiser - Washington	One Risk, One Basic	\$ 1,294.55	\$ 1,209.01	\$ 4,861.46				\$ 322.38	\$ 324.24	\$ 322.38	\$ 324.24
398	Kaiser - Washington	Two Retiree Risk							\$ 322.38	\$ 324.24		
399	Kaiser - Washington	One Risk, Two or More Dependents	\$ 1,294.55	\$ 1,209.01	\$ 6,315.58				\$ 322.38	\$ 324.24	\$ 322.38	\$ 324.24
400	Kaiser - Washington	Two Risk, Two or More Dependents			\$ 7,058.61				\$ 322.38	\$ 324.24	\$ 322.38	\$ 324.24
611	SCAN Health Plan	Retiree Only							\$ 198.38			
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)							\$ 198.38	\$ 198.38		
701	United Healthcare	Retiree Only	\$ 1,378.21						\$ 270.58		\$ 270.58	
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29				\$ 270.58	\$ 270.58	\$ 270.58	\$ 270.58
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)							\$ 270.58	\$ 270.58	\$ 270.58	\$ 270.58
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29				\$ 270.58	\$ 270.58	\$ 270.58	\$ 270.58
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29				\$ 270.58	\$ 270.58	\$ 270.58	\$ 270.58
706	United Healthcare	Minor Survivor					\$ 1,423.29			\$ 1,423.29		
707	United Healthcare	Single	\$ 1,378.21								\$ 328.45	
708	United Healthcare	Two-Party	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29						\$ 328.45	\$ 328.03
709	United Healthcare	Family	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29						\$ 328.45	\$ 328.03



Tier 1

Fire Fighters Local 1014 Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2,036.50				\$ 438.69			\$ 438.69		
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 2,036.50	\$ 2,036.50	\$ 2,103.12		\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 2,036.50	\$ 2,036.50	\$ 2,103.12		\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare					\$ 438.69		\$ 438.69	\$ 438.69		\$ 438.69
805	Firefighters' Local 1014	Med-Member +1; 1 MDC	\$ 2,036.50	\$ 2,103.12			\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
806	Firefighters' Local 1014	Med-Member +1; 2 MDC					\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
807	Firefighters' Local 1014	Med-Member +2; 1 MDC	\$ 2,036.50	\$ 2,103.12			\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
808	Firefighters' Local 1014	Med-Member +2; 2 MDC					\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65			\$ 2,036.50		\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69	\$ 438.69
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65	\$ 2,036.50	\$ 2,103.12	\$ 2,036.50		\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65	\$ 2,036.50	\$ 2,103.12	\$ 2,036.50		\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69	\$ 438.69
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC					\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69	\$ 438.69
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC	\$ 2,036.50	\$ 2,103.12	\$ 2,036.50		\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC	\$ 2,036.50	\$ 2,103.12	\$ 2,036.50		\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69	\$ 438.69
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC					\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69	\$ 438.69

Dental/Vision Female Retirees

Deduction Code	Plan	Tier	Age 65 Adjusted Claim Costs		
			Retiree	Sp/Dep	Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$ 51.97		
502	Cigna Indemnity Dental/Vision	Family	\$ 51.97	\$ 55.45	
503	Cigna Indemnity Dental/Vision	Minor Survivor			\$ 52.97
901	Cigna Dental HMO/Vision	Retiree Only	\$ 47.41		
902	Cigna Dental HMO/Vision	Family	\$ 47.41	\$ 52.40	
903	Cigna Dental HMO/Vision	Minor Survivor			\$ 48.33



Tier 2

A. Future Retirees Retiring Before Age 65

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 427.28	\$ 635.88	\$ 380.49	\$ 301.81
30	\$ 528.25	\$ 781.16	\$ 351.81	\$ 677.81
35	\$ 657.53	\$ 843.43	\$ 437.91	\$ 674.81
40	\$ 783.56	\$ 1,069.51	\$ 552.78	\$ 725.22
45	\$ 871.06	\$ 1,283.48	\$ 673.09	\$ 821.21
50	\$ 953.72	\$ 1,194.98	\$ 795.23	\$ 926.65
55	\$ 1,037.32	\$ 1,124.68	\$ 961.07	\$ 1,061.66
60	\$ 1,101.04	\$ 1,125.52	\$ 1,213.45	\$ 1,237.23
65 (Pre 65)	\$ 1,266.92	\$ 1,249.55	\$ 1,514.08	\$ 1,465.64
65 (Post 65)	\$ 299.19	\$ 266.56	\$ 259.79	\$ 284.93
70	\$ 365.78	\$ 317.47	\$ 317.61	\$ 339.35
75	\$ 418.64	\$ 351.47	\$ 363.51	\$ 375.70
80	\$ 448.31	\$ 367.76	\$ 389.27	\$ 393.11
85	\$ 470.11	\$ 382.03	\$ 408.20	\$ 408.36
90	\$ 486.75	\$ 393.41	\$ 422.65	\$ 420.52
95	\$ 486.75	\$ 393.41	\$ 422.65	\$ 420.52

B. Future Retirees Retiring After Age 65

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	N/A	N/A	\$ 380.72	\$ 303.57
30	N/A	N/A	\$ 352.02	\$ 681.76
35	N/A	N/A	\$ 438.18	\$ 678.74
40	N/A	N/A	\$ 553.12	\$ 729.44
45	N/A	N/A	\$ 673.51	\$ 825.99
50	N/A	N/A	\$ 795.72	\$ 932.04
55	N/A	N/A	\$ 961.66	\$ 1,067.84
60	N/A	N/A	\$ 1,214.20	\$ 1,244.43
65 (Pre 65)	N/A	N/A	\$ 1,515.02	\$ 1,474.17
65 (Post 65)	\$ 277.80	\$ 259.56	\$ 263.15	\$ 267.01
70	\$ 339.63	\$ 309.13	\$ 321.72	\$ 318.00
75	\$ 388.71	\$ 342.24	\$ 368.21	\$ 352.06
80	\$ 416.26	\$ 358.10	\$ 394.30	\$ 368.37
85	\$ 436.50	\$ 371.99	\$ 413.47	\$ 382.66
90	\$ 451.95	\$ 383.07	\$ 428.11	\$ 394.06
95	\$ 451.95	\$ 383.07	\$ 428.11	\$ 394.06

The Firefighters Local 1014 and dental/vision monthly claim costs are shown in the tables on the following page.

Tier 2

Firefighters Local 1014 Plan Monthly Medical Claim Costs

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 706.19	\$ 1,036.34	\$ 587.86	\$ 468.50
30	\$ 873.06	\$ 1,273.12	\$ 543.55	\$ 1,052.15
35	\$ 1,086.74	\$ 1,374.60	\$ 676.58	\$ 1,047.50
40	\$ 1,295.04	\$ 1,743.06	\$ 854.05	\$ 1,125.75
45	\$ 1,439.66	\$ 2,091.78	\$ 1,039.93	\$ 1,274.76
50	\$ 1,576.29	\$ 1,947.55	\$ 1,228.63	\$ 1,438.43
55	\$ 1,714.46	\$ 1,832.98	\$ 1,484.85	\$ 1,648.01
60	\$ 1,819.78	\$ 1,834.35	\$ 1,874.79	\$ 1,920.54
65 (Pre 65)	\$ 2,093.94	\$ 2,036.50	\$ 2,339.27	\$ 2,275.10
65 (Post 65)	\$ 451.07	\$ 438.69	\$ 451.07	\$ 438.69
70	\$ 551.46	\$ 522.48	\$ 551.46	\$ 522.48
75	\$ 631.15	\$ 578.44	\$ 631.15	\$ 578.44
80	\$ 675.88	\$ 605.25	\$ 675.88	\$ 605.25
85	\$ 708.74	\$ 628.73	\$ 708.74	\$ 628.73
90	\$ 733.83	\$ 647.46	\$ 733.83	\$ 647.46
95	\$ 733.83	\$ 647.46	\$ 733.83	\$ 647.46

Future Retirees Monthly Dental/Vision Claim Costs

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 24.31	\$ 30.36	\$ 26.81	\$ 27.10
30	\$ 27.30	\$ 32.29	\$ 29.25	\$ 34.64
35	\$ 29.15	\$ 33.87	\$ 31.23	\$ 36.33
40	\$ 30.35	\$ 35.46	\$ 32.52	\$ 38.04
45	\$ 32.11	\$ 37.20	\$ 34.41	\$ 39.90
50	\$ 34.97	\$ 39.83	\$ 37.47	\$ 42.72
55	\$ 39.59	\$ 43.53	\$ 42.42	\$ 46.70
60	\$ 45.36	\$ 47.64	\$ 48.60	\$ 51.11
65	\$ 51.97	\$ 51.40	\$ 55.69	\$ 55.14
70	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
75	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
80	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
85	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
90	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27
95	\$ 58.10	\$ 54.32	\$ 62.26	\$ 58.27

For current retired members, spouses, and dependents, the claim costs are based on the actual premiums by deduction code, adjusted for age and gender. The tables that follow show the age 65 adjusted monthly claim costs. Adjustments by age and gender are based on the same methodology used in the tables above.

Tier 2

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$ 841.99				\$ 841.99			\$ 393.96		
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$ 841.99	\$ 841.99	\$ 692.98		\$ 841.99	\$ 841.99		\$ 393.96	\$ 393.96	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$ 841.99	\$ 841.99	\$ 692.98		\$ 841.99	\$ 841.99		\$ 393.96	\$ 393.96	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$ 841.99	\$ 841.99	\$ 692.98		\$ 841.99			\$ 393.96		
205	Anthem Blue Cross Prudent Buyer	Minor Survivor				\$ 692.98			\$ 692.98			
211	Anthem Blue Cross I	Retiree Only	\$ 607.86				\$ 607.86			\$ 393.96		
212	Anthem Blue Cross I	Retiree and Spouse	\$ 607.86	\$ 607.86	\$ 500.29		\$ 607.86	\$ 607.86		\$ 393.96	\$ 393.96	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$ 607.86	\$ 607.86	\$ 500.29		\$ 607.86	\$ 607.86		\$ 393.96	\$ 393.96	
214	Anthem Blue Cross I	Retiree and Children	\$ 607.86	\$ 607.86	\$ 500.29		\$ 607.86			\$ 393.96		
215	Anthem Blue Cross I	Minor Survivor				\$ 500.29			\$ 500.29			\$ 500.29
221	Anthem Blue Cross II	Retiree Only	\$ 1,178.61				\$ 1,178.61			\$ 393.96		
222	Anthem Blue Cross II	Retiree and Spouse	\$ 1,178.61	\$ 1,178.61	\$ 970.03		\$ 1,178.61	\$ 1,178.61		\$ 393.96	\$ 393.96	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$ 1,178.61	\$ 1,178.61	\$ 970.03		\$ 1,178.61	\$ 1,178.61		\$ 393.96	\$ 393.96	
224	Anthem Blue Cross II	Retiree and Children	\$ 1,178.61	\$ 1,178.61	\$ 970.03		\$ 1,178.61			\$ 393.96		
225	Anthem Blue Cross II	Minor Survivor				\$ 970.03			\$ 970.03			\$ 970.03
240	Anthem Blue Cross III	One Medicare					\$ 393.96			\$ 393.96		
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,248.00	\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
242	Anthem Blue Cross III	Retiree and Spouse 2 Medicare	\$ 1,248.00	\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare					\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96			\$ 393.96	\$ 393.96	
245	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96			\$ 393.96	\$ 393.96	
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,248.00	\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,248.00	\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
248	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
249	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
250	Anthem Blue Cross III	Retiree and Family 3 Medicare		\$ 1,248.00	\$ 1,027.14		\$ 393.96	\$ 393.96		\$ 393.96	\$ 393.96	
301	Cigna Network Model Plan	Retiree Only	\$ 1,221.40				\$ 1,221.40			\$ 307.14		
302	Cigna Network Model Plan	Retiree and Spouse	\$ 1,221.40	\$ 1,221.40	\$ 1,005.25		\$ 1,221.40	\$ 1,221.40		\$ 307.14	\$ 307.14	
303	Cigna Network Model Plan	Retiree and Family	\$ 1,221.40	\$ 1,221.40	\$ 1,005.25		\$ 1,221.40	\$ 1,221.40		\$ 307.14	\$ 307.14	
304	Cigna Network Model Plan	Retiree and Children	\$ 1,221.40	\$ 1,221.40	\$ 1,005.25		\$ 1,221.40			\$ 307.14		
305	Cigna Network Model Plan	Minor Survivor				\$ 1,005.25			\$ 1,005.25			
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only					\$ 329.57			\$ 329.57		
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse					\$ 329.57	\$ 329.57		\$ 329.57	\$ 329.57	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)					\$ 329.57	\$ 329.57		\$ 329.57	\$ 329.57	
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children					\$ 329.57	\$ 329.57		\$ 329.57	\$ 329.57	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)					\$ 329.57	\$ 329.57		\$ 329.57	\$ 329.57	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)					\$ 329.57	\$ 329.57		\$ 329.57	\$ 329.57	
401	Kaiser (CA)	Retiree Basic (Under 65)	\$ 1,299.00							\$ 228.64		
403	Kaiser (CA)	Retiree Risk (Senior Advantage)					\$ 225.27					
404	Kaiser (CA)	Retiree Excess I					\$ 920.59					
405	Kaiser (CA)	Retiree Excess II - Part B					\$ 883.16					
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)					\$ 1,585.13					
411	Kaiser (CA)	Family Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11					\$ 226.95	\$ 220.42	



Tier 2

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
413	Kaiser (CA)	One Advantage, One Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11		\$ 225.27	\$ 218.67		\$ 225.27	\$ 220.42	
414	Kaiser (CA)	One Excess I, One Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11		\$ 920.59	\$ 912.89		\$ 920.59	\$ 220.42	
418	Kaiser (CA)	Two+ Advantage					\$ 225.27	\$ 218.67				
419	Kaiser (CA)	One Excess I, One Advantage					\$ 572.93	\$ 565.78				
420	Kaiser (CA)	Two+ Excess I					\$ 920.59	\$ 912.89				
421	Kaiser (CA)	Survivor				\$ 1,069.11			\$ 1,069.11			\$ 1,069.11
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11		\$ 883.16	\$ 875.52		\$ 883.16	\$ 220.42	
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$ 1,299.00	\$ 1,298.99	\$ 1,069.11		\$ 1,585.13	\$ 1,576.38		\$ 1,585.13	\$ 220.42	
426	Kaiser (CA)	One Advantage, One Excess II - Part B					\$ 554.21	\$ 547.09				
427	Kaiser (CA)	One Advantage, One Excess III (MNP)					\$ 905.20	\$ 897.52				
428	Kaiser (CA)	One Excess, One Excess II - Part B					\$ 901.87	\$ 894.20				
429	Kaiser (CA)	One Excess, One Excess III (MNP)					\$ 1,252.86	\$ 1,244.63				
430	Kaiser (CA)	Two Excess II - Part B					\$ 883.16	\$ 875.52				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)					\$ 1,234.14	\$ 1,225.95				
432	Kaiser (CA)	Two Excess III - Both (MNP)					\$ 1,585.13	\$ 1,576.38				
450	Kaiser - Colorado Basic	Retiree Basic	\$ 1,202.57							\$ 265.06		
451	Kaiser - Colorado	Retiree Risk					\$ 265.06					
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$ 1,202.57	\$ 1,578.56						\$ 265.06	\$ 265.34	
454	Kaiser - Colorado	Retiree Basic Family	\$ 1,202.57	\$ 1,578.56	\$ 3,234.01					\$ 265.06	\$ 265.34	
455	Kaiser - Colorado	One Risk, One Basic	\$ 1,202.57	\$ 1,293.81			\$ 265.06	\$ 265.34		\$ 265.06	\$ 265.34	
457	Kaiser - Colorado	Two Retiree Risk					\$ 265.06	\$ 265.34				
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$ 1,202.57	\$ 1,293.81	\$ 3,904.99		\$ 265.06	\$ 265.34		\$ 265.06	\$ 265.34	
459	Kaiser - Colorado	Two Risk, Two or More Dependents			\$ 4,146.14		\$ 265.06	\$ 265.34		\$ 265.06	\$ 265.34	
440	Kaiser - Georgia	One Medicare Member with Part B only					\$ 841.87					
441	Kaiser - Georgia	One Medicare Member with Part A only					\$ 841.87					
442	Kaiser - Georgia	One Member without Medicare Part A&B					\$ 841.87					
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only					\$ 841.87	\$ 323.23				
461	Kaiser - Georgia Basic	Basic	\$ 1,269.85							\$ 321.56		
462	Kaiser - Georgia	Retiree Risk					\$ 321.56					
463	Kaiser - Georgia	Retiree (Two Party)	\$ 1,269.85	\$ 1,366.75	\$ 4,379.88		\$ 321.56	\$ 323.23		\$ 321.56	\$ 323.23	
464	Kaiser - Georgia	Retiree Basic Family	\$ 1,269.85	\$ 1,366.75	\$ 4,379.88					\$ 321.56	\$ 323.23	
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$ 485.03	\$ 1,366.75	\$ 4,379.88		\$ 321.56	\$ 323.23		\$ 321.56	\$ 323.23	
466	Kaiser - Georgia	Two Retiree Risk					\$ 321.56	\$ 323.23				
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$ 1,134.79							\$ 340.37		
472	Kaiser - Hawaii	Retiree Risk					\$ 340.37					
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B					\$ 1,347.56					
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$ 1,134.79	\$ 1,220.32						\$ 340.37	\$ 342.50	
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$ 1,134.79	\$ 1,220.32	\$ 3,910.68					\$ 340.37	\$ 342.50	
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$ 1,134.79	\$ 1,220.32	\$ 3,910.64		\$ 340.37	\$ 342.50		\$ 340.37	\$ 342.50	
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$ 1,134.79	\$ 1,220.32	\$ 3,910.64		\$ 1,347.56	\$ 1,374.42		\$ 1,347.56	\$ 1,374.42	
478	Kaiser - Hawaii	Two Retiree Risk					\$ 340.37	\$ 342.50				



Tier 2

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees			
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv	
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,325.80								\$ 364.00		
482	Kaiser - Oregon	Retiree Risk						\$ 364.00					
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B						\$ 955.26					
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,325.80	\$ 1,427.42							\$ 364.00	\$ 366.72	
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,325.80	\$ 1,427.42	\$ 4,574.28						\$ 364.00	\$ 366.72	
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,325.80	\$ 1,427.41	\$ 4,574.27			\$ 364.00	\$ 366.72		\$ 364.00	\$ 366.72	
488	Kaiser - Oregon	Two Retiree Risk						\$ 364.00	\$ 366.72				
489	Kaiser - Oregon	Retiree w/ Part A only						\$ 817.12					
491	Kaiser - Oregon	One Risk, One Medicare Part A only						\$ 817.12	\$ 366.72				
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,440.89	\$ 585.31				\$ 955.26	\$ 366.72		\$ 364.00	\$ 366.72	
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,325.80	\$ 1,427.41				\$ 364.00	\$ 366.72		\$ 364.00	\$ 366.72	
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,325.80	\$ 1,427.41	\$ 4,574.27			\$ 364.00	\$ 366.72		\$ 364.00	\$ 366.72	
495	Kaiser - Oregon	Two Over 65 unassigned Medicare						\$ 955.26	\$ 972.49				
496	Kaiser - Oregon	Two Medicare Part A only						\$ 817.12	\$ 830.96				
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,325.80	\$ 1,427.41				\$ 817.12	\$ 830.96		\$ 817.12	\$ 830.96	
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,325.80	\$ 1,427.41				\$ 955.26	\$ 972.49		\$ 955.26	\$ 972.49	
393	Kaiser - Washington	Retiree Basic	\$ 1,331.06								\$ 331.47		
394	Kaiser - Washington	Retiree Risk (Senior Advantage)						\$ 331.47					
395	Kaiser - Washington	Retiree Basic (Two Party)	\$ 1,331.06	\$ 1,243.11							\$ 331.47	\$ 333.39	
396	Kaiser - Washington	Retiree Basic Family	\$ 1,331.06	\$ 1,243.11	\$ 5,784.09						\$ 331.47	\$ 333.39	
397	Kaiser - Washington	One Risk, One Basic	\$ 1,331.06	\$ 1,243.11	\$ 3,983.66			\$ 331.47	\$ 333.39		\$ 331.47	\$ 333.39	
398	Kaiser - Washington	Two Retiree Risk						\$ 331.47	\$ 333.39				
399	Kaiser - Washington	One Risk, Two or More Dependents	\$ 1,331.06	\$ 1,243.11	\$ 5,175.22			\$ 331.47	\$ 333.39		\$ 331.47	\$ 333.39	
400	Kaiser - Washington	Two Risk, Two or More Dependents			\$ 5,784.09			\$ 331.47	\$ 333.39		\$ 331.47	\$ 333.39	
611	SCAN Health Plan	Retiree Only						\$ 203.97					
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)						\$ 203.97	\$ 203.97				
701	United Healthcare	Retiree Only	\$ 1,417.08					\$ 278.21			\$ 278.21		
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30			\$ 278.21	\$ 278.21		\$ 278.21	\$ 278.21	
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)						\$ 278.21	\$ 278.21		\$ 278.21	\$ 278.21	
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30			\$ 278.21	\$ 278.21		\$ 278.21	\$ 278.21	
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30			\$ 278.21	\$ 278.21		\$ 278.21	\$ 278.21	
706	United Healthcare	Minor Survivor					\$ 1,166.30			\$ 1,166.30			
707	United Healthcare	Single	\$ 1,417.08								\$ 286.28		
708	United Healthcare	Two-Party	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30						\$ 286.28	\$ 285.88	
709	United Healthcare	Family	\$ 1,417.08	\$ 1,417.08	\$ 1,166.30						\$ 286.28	\$ 285.88	



Tier 2

Fire Fighters Local 1014 Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2,093.94				\$ 451.07			\$ 451.07		
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 2,093.94	\$ 2,093.94	\$ 1,723.38		\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 2,093.94	\$ 2,093.94	\$ 1,723.38		\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare					\$ 451.07		\$ 451.07	\$ 451.07		\$ 451.07
805	Firefighters' Local 1014	Med-Member +1; 1 MDC		\$ 2,093.94	\$ 1,723.38		\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
806	Firefighters' Local 1014	Med-Member +1; 2 MDC					\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
807	Firefighters' Local 1014	Med-Member +2; 1 MDC		\$ 2,093.94	\$ 1,723.38		\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
808	Firefighters' Local 1014	Med-Member +2; 2 MDC					\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07	\$ 451.07
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65				\$ 2,093.94		\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65		\$ 2,093.94	\$ 1,723.38	\$ 2,093.94		\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65		\$ 2,093.94	\$ 1,723.38	\$ 2,093.94		\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC						\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC		\$ 2,093.94	\$ 1,723.38	\$ 2,093.94		\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC		\$ 2,093.94	\$ 1,723.38	\$ 2,093.94		\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC						\$ 451.07	\$ 451.07		\$ 451.07	\$ 451.07

Dental/Vision Male Retirees

Deduction Code	Plan	Tier	Age 65 Adjusted Claim Costs		
			Retiree	Sp/Dep	Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$ 52.48		
502	Cigna Indemnity Dental/Vision	Family	\$ 52.48	\$ 56.00	
503	Cigna Indemnity Dental/Vision	Minor Survivor			\$ 54.07
901	Cigna Dental HMO/Vision	Retiree Only	\$ 47.88		
902	Cigna Dental HMO/Vision	Family	\$ 47.88	\$ 52.91	
903	Cigna Dental HMO/Vision	Minor Survivor			\$ 49.34

Tier 2

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$ 818.89				\$ 818.89			\$ 383.15		
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$ 818.89	\$ 818.89	\$ 845.68		\$ 818.89	\$ 818.89		\$ 383.15	\$ 383.15	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$ 818.89	\$ 818.89	\$ 845.68		\$ 818.89	\$ 818.89		\$ 383.15	\$ 383.15	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$ 818.89	\$ 818.89	\$ 845.68		\$ 818.89			\$ 383.15		
205	Anthem Blue Cross Prudent Buyer	Minor Survivor				\$ 845.68			\$ 845.68			
211	Anthem Blue Cross I	Retiree Only	\$ 591.18				\$ 591.18			\$ 383.15		
212	Anthem Blue Cross I	Retiree and Spouse	\$ 591.18	\$ 591.18	\$ 610.52		\$ 591.18	\$ 591.18		\$ 383.15	\$ 383.15	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$ 591.18	\$ 591.18	\$ 610.52		\$ 591.18	\$ 591.18		\$ 383.15	\$ 383.15	
214	Anthem Blue Cross I	Retiree and Children	\$ 591.18	\$ 591.18	\$ 610.52		\$ 591.18			\$ 383.15		
215	Anthem Blue Cross I	Minor Survivor				\$ 610.52			\$ 610.52			\$ 610.52
221	Anthem Blue Cross II	Retiree Only	\$ 1,146.28				\$ 1,146.28			\$ 383.15		
222	Anthem Blue Cross II	Retiree and Spouse	\$ 1,146.28	\$ 1,146.28	\$ 1,183.78		\$ 1,146.28	\$ 1,146.28		\$ 383.15	\$ 383.15	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$ 1,146.28	\$ 1,146.28	\$ 1,183.78		\$ 1,146.28	\$ 1,146.28		\$ 383.15	\$ 383.15	
224	Anthem Blue Cross II	Retiree and Children	\$ 1,146.28	\$ 1,146.28	\$ 1,183.78		\$ 1,146.28			\$ 383.15		
225	Anthem Blue Cross II	Minor Survivor				\$ 1,183.78			\$ 1,183.78			\$ 1,183.78
240	Anthem Blue Cross III	One Medicare					\$ 383.15			\$ 383.15		
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,213.76	\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,213.76	\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare					\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15			\$ 383.15	\$ 383.15	
245	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15			\$ 383.15	\$ 383.15	
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,213.76	\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,213.76	\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	
248	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	
249	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	
250	Anthem Blue Cross III	Retiree and Family 3 Medicare		\$ 1,213.76	\$ 1,253.47		\$ 383.15	\$ 383.15		\$ 383.15	\$ 383.15	
301	Cigna Network Model Plan	Retiree Only	\$ 1,187.89				\$ 1,187.89			\$ 298.72		
302	Cigna Network Model Plan	Retiree and Spouse	\$ 1,187.89	\$ 1,187.89	\$ 1,226.75		\$ 1,187.89	\$ 1,187.89		\$ 298.72	\$ 298.72	
303	Cigna Network Model Plan	Retiree and Family	\$ 1,187.89	\$ 1,187.89	\$ 1,226.75		\$ 1,187.89	\$ 1,187.89		\$ 298.72	\$ 298.72	
304	Cigna Network Model Plan	Retiree and Children	\$ 1,187.89	\$ 1,187.89	\$ 1,226.75		\$ 1,187.89			\$ 298.72		
305	Cigna Network Model Plan	Minor Survivor				\$ 1,226.75			\$ 1,226.75			
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only					\$ 320.53			\$ 320.53		
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse					\$ 320.53	\$ 320.53		\$ 320.53	\$ 320.53	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)					\$ 320.53	\$ 320.53		\$ 320.53	\$ 320.53	
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children					\$ 320.53	\$ 320.53		\$ 320.53	\$ 320.53	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)					\$ 320.53	\$ 320.53		\$ 320.53	\$ 320.53	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)					\$ 320.53	\$ 320.53		\$ 320.53	\$ 320.53	
401	Kaiser (CA)	Retiree Basic (Under 65)	\$ 1,263.36							\$ 222.37		
403	Kaiser (CA)	Retiree Risk (Senior Advantage)					\$ 219.09					
404	Kaiser (CA)	Retiree Excess I					\$ 895.33					
405	Kaiser (CA)	Retiree Excess II - Part B					\$ 858.93					
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)					\$ 1,541.65					
411	Kaiser (CA)	Family Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69					\$ 220.73	\$ 214.37	



Tier 2

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
413	Kaiser (CA)	One Advantage, One Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69		\$ 219.09	\$ 212.67		\$ 219.09	\$ 214.37	
414	Kaiser (CA)	One Excess I, One Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69		\$ 895.33	\$ 887.84		\$ 895.33	\$ 214.37	
418	Kaiser (CA)	Two+ Advantage					\$ 219.09	\$ 212.67				
419	Kaiser (CA)	One Excess I, One Advantage					\$ 557.21	\$ 550.26				
420	Kaiser (CA)	Two+ Excess I					\$ 895.33	\$ 887.84				
421	Kaiser (CA)	Survivor				\$ 1,304.69			\$ 1,304.69		\$ 1,304.69	
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69		\$ 858.93	\$ 851.50		\$ 858.93	\$ 214.37	
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$ 1,263.36	\$ 1,263.36	\$ 1,304.69		\$ 1,541.65	\$ 1,533.13		\$ 1,541.65	\$ 214.37	
426	Kaiser (CA)	One Advantage, One Excess II - Part B					\$ 539.01	\$ 532.08				
427	Kaiser (CA)	One Advantage, One Excess III (MNP)					\$ 880.37	\$ 872.90				
428	Kaiser (CA)	One Excess, One Excess II - Part B					\$ 877.13	\$ 869.67				
429	Kaiser (CA)	One Excess, One Excess III (MNP)					\$ 1,218.49	\$ 1,210.49				
430	Kaiser (CA)	Two Excess II - Part B					\$ 858.93	\$ 851.50				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)					\$ 1,200.29	\$ 1,192.32				
432	Kaiser (CA)	Two Excess III - Both (MNP)					\$ 1,541.65	\$ 1,533.13				
450	Kaiser - Colorado Basic	Retiree Basic	\$ 1,169.58							\$ 257.79		
451	Kaiser - Colorado	Retiree Risk					\$ 257.79					
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$ 1,169.58	\$ 1,535.26						\$ 257.79	\$ 258.06	
454	Kaiser - Colorado	Retiree Basic Family	\$ 1,169.58	\$ 1,535.26	\$ 3,946.62					\$ 257.79	\$ 258.06	
455	Kaiser - Colorado	One Risk, One Basic	\$ 1,169.58	\$ 1,258.32			\$ 257.79	\$ 258.06		\$ 257.79	\$ 258.06	
457	Kaiser - Colorado	Two Retiree Risk					\$ 257.79	\$ 258.06				
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$ 1,169.58	\$ 1,258.32	\$ 4,765.45		\$ 257.79	\$ 258.06		\$ 257.79	\$ 258.06	
459	Kaiser - Colorado	Two Risk, Two or More Dependents			\$ 5,059.74		\$ 257.79	\$ 258.06		\$ 257.79	\$ 258.06	
440	Kaiser - Georgia	One Medicare Member with Part B only					\$ 818.78					
441	Kaiser - Georgia	One Medicare Member with Part A only					\$ 818.78					
442	Kaiser - Georgia	One Member without Medicare Part A&B					\$ 818.78					
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only					\$ 818.78	\$ 314.37				
461	Kaiser - Georgia Basic	Basic	\$ 1,235.02							\$ 312.74		
462	Kaiser - Georgia	Retiree Risk					\$ 312.74					
463	Kaiser - Georgia	Retiree (Two Party)	\$ 1,235.02	\$ 1,329.26	\$ 5,344.98		\$ 312.74	\$ 314.37		\$ 312.74	\$ 314.37	
464	Kaiser - Georgia	Retiree Basic Family	\$ 1,235.02	\$ 1,329.26	\$ 5,344.98					\$ 312.74	\$ 314.37	
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$ 471.73	\$ 1,329.26	\$ 5,344.98		\$ 312.74	\$ 314.37		\$ 312.74	\$ 314.37	
466	Kaiser - Georgia	Two Retiree Risk					\$ 312.74	\$ 314.37				
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$ 1,103.66							\$ 331.03		
472	Kaiser - Hawaii	Retiree Risk					\$ 331.03					
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B					\$ 1,310.59					
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$ 1,103.66	\$ 1,186.85						\$ 331.03	\$ 333.11	
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$ 1,103.66	\$ 1,186.85	\$ 4,772.40					\$ 331.03	\$ 333.11	
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$ 1,103.66	\$ 1,186.85	\$ 4,772.35		\$ 331.03	\$ 333.11		\$ 331.03	\$ 333.11	
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$ 1,103.66	\$ 1,186.85	\$ 4,772.35		\$ 1,310.59	\$ 1,336.72		\$ 1,310.59	\$ 1,336.72	
478	Kaiser - Hawaii	Two Retiree Risk					\$ 331.03	\$ 333.11				



Tier 2

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees			
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv	
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,289.43								\$ 354.02		
482	Kaiser - Oregon	Retiree Risk					\$ 354.02						
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B					\$ 929.06						
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,289.43	\$ 1,388.26							\$ 354.02	\$ 356.66	
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,289.43	\$ 1,388.26	\$ 5,582.22						\$ 354.02	\$ 356.66	
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,289.43	\$ 1,388.25	\$ 5,582.21		\$ 354.02	\$ 356.66			\$ 354.02	\$ 356.66	
488	Kaiser - Oregon	Two Retiree Risk					\$ 354.02	\$ 356.66					
489	Kaiser - Oregon	Retiree w/ Part A only					\$ 794.71						
491	Kaiser - Oregon	One Risk, One Medicare Part A only					\$ 794.71	\$ 356.66					
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,401.36	\$ 569.25			\$ 929.06	\$ 356.66			\$ 354.02	\$ 356.66	
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,289.43	\$ 1,388.25			\$ 354.02	\$ 356.66			\$ 354.02	\$ 356.66	
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,289.43	\$ 1,388.25	\$ 5,582.21		\$ 354.02	\$ 356.66			\$ 354.02	\$ 356.66	
495	Kaiser - Oregon	Two Over 65 unassigned Medicare					\$ 929.06	\$ 945.82					
496	Kaiser - Oregon	Two Medicare Part A only					\$ 794.71	\$ 808.17					
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,289.43	\$ 1,388.25			\$ 794.71	\$ 808.17			\$ 794.71	\$ 808.17	
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,289.43	\$ 1,388.25			\$ 929.06	\$ 945.82			\$ 929.06	\$ 945.82	
393	Kaiser - Washington	Retiree Basic	\$ 1,294.55								\$ 322.38		
394	Kaiser - Washington	Retiree Risk (Senior Advantage)					\$ 322.38						
395	Kaiser - Washington	Retiree Basic (Two Party)	\$ 1,294.55	\$ 1,209.01							\$ 322.38	\$ 324.24	
396	Kaiser - Washington	Retiree Basic Family	\$ 1,294.55	\$ 1,209.01	\$ 7,058.61						\$ 322.38	\$ 324.24	
397	Kaiser - Washington	One Risk, One Basic	\$ 1,294.55	\$ 1,209.01	\$ 4,861.46		\$ 322.38	\$ 324.24			\$ 322.38	\$ 324.24	
398	Kaiser - Washington	Two Retiree Risk					\$ 322.38	\$ 324.24					
399	Kaiser - Washington	One Risk, Two or More Dependents	\$ 1,294.55	\$ 1,209.01	\$ 6,315.58		\$ 322.38	\$ 324.24			\$ 322.38	\$ 324.24	
400	Kaiser - Washington	Two Risk, Two or More Dependents			\$ 7,058.61		\$ 322.38	\$ 324.24			\$ 322.38	\$ 324.24	
611	SCAN Health Plan	Retiree Only					\$ 198.38						
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)					\$ 198.38	\$ 198.38					
701	United Healthcare	Retiree Only	\$ 1,378.21				\$ 270.58				\$ 270.58		
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29		\$ 270.58	\$ 270.58			\$ 270.58	\$ 270.58	
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)					\$ 270.58	\$ 270.58			\$ 270.58	\$ 270.58	
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29		\$ 270.58	\$ 270.58			\$ 270.58	\$ 270.58	
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29		\$ 270.58	\$ 270.58			\$ 270.58	\$ 270.58	
706	United Healthcare	Minor Survivor							\$ 1,423.29				
707	United Healthcare	Single	\$ 1,378.21								\$ 278.42		
708	United Healthcare	Two-Party	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29						\$ 278.42	\$ 278.04	
709	United Healthcare	Family	\$ 1,378.21	\$ 1,378.21	\$ 1,423.29						\$ 278.42	\$ 278.04	



Tier 2

Fire Fighters Local 1014 Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2,036.50				\$ 438.69			\$ 438.69		
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 2,036.50	\$ 2,036.50	\$ 2,103.12		\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 2,036.50	\$ 2,036.50	\$ 2,103.12		\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare					\$ 438.69		\$ 438.69	\$ 438.69		\$ 438.69
805	Firefighters' Local 1014	Med-Member +1; 1 MDC		\$ 2,036.50	\$ 2,103.12		\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
806	Firefighters' Local 1014	Med-Member +1; 2 MDC					\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
807	Firefighters' Local 1014	Med-Member +2; 1 MDC		\$ 2,036.50	\$ 2,103.12		\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
808	Firefighters' Local 1014	Med-Member +2; 2 MDC					\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69	\$ 438.69
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65				\$ 2,036.50		\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65		\$ 2,036.50	\$ 2,103.12	\$ 2,036.50		\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65		\$ 2,036.50	\$ 2,103.12	\$ 2,036.50		\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC					\$ 438.69	\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC		\$ 2,036.50	\$ 2,103.12	\$ 2,036.50		\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC		\$ 2,036.50	\$ 2,103.12	\$ 2,036.50		\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC					\$ 438.69	\$ 438.69	\$ 438.69		\$ 438.69	\$ 438.69

Dental/Vision Female Retirees

Deduction Code	Plan	Tier	Age 65 Adjusted Claim Costs		
			Retiree	Sp/Dep	Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$ 51.97		
502	Cigna Indemnity Dental/Vision	Family	\$ 51.97	\$ 55.45	
503	Cigna Indemnity Dental/Vision	Minor Survivor			\$ 52.97
901	Cigna Dental HMO/Vision	Retiree Only	\$ 47.41		
902	Cigna Dental HMO/Vision	Family	\$ 47.41	\$ 52.40	
903	Cigna Dental HMO/Vision	Minor Survivor			\$ 48.33

Table A-22
Health Cost Trend Assumptions

The health cost trend assumptions are shown in the following table. These trends have changed from the July 1, 2019 valuation, due to updates in the trend models that we use. The medical trend model is based on the Society of Actuaries' (SOA) published report on long-term medical trend. That report includes detailed research performed by a committee of economists and actuaries that uses the "Getzen Model," named after the professor who developed the model, updated in September of 2020. The following website provides more information: <https://www.soa.org/resources/research-reports/2020/getzen-model-update-2021-2030/>. We believe that the research and the model are fundamentally and technically sound and advance the body of knowledge available to actuaries to accurately project long-term medical trends. Milliman uses this model as the foundation for the trend that it recommends to our clients for OPEB valuations.

The first-year trend rates for LACERA non-Local 1014 firefighters' medical and dental/vision plans have been adjusted to reflect the final July 1, 2021 annual medical and dental plan rate renewals. The remaining short-term trends are based on Milliman's *Health Cost Guidelines*TM.

The trend assumption for Medicare Part B premiums was updated based on long-term projected Part B costs from the 2020 Medicare Trustees Report from CMS dated April 22, 2020. The dental trend assumption was updated based on the same methodology we used in our 2020 OPEB Investigation of Experience Study.

The following table presents the trend assumptions with the impact of the ACA and H.R. 1865 including the Patient Centered Outcomes Research Institute (PCORI) Fee and the Health Insurer Fee in calendar year 2020. H.R. 1865 repealed the Excise Tax and the Health Insurer Fee beginning with calendar year 2021. The weighted average trend are based on the expected payouts from each of the coverages (medical under 65, medical over 65, Part B, and Dental) for the July 1, 2020 valuation.

After fiscal year ending June 30, 2031, selected years are shown in the table. The trend rates for the years not shown generally grade ratably into the next value shown in the table. The medical trend for both under and over 65 remains at 4.30% beginning with the medical trend from fiscal year ending June 30, 2073 to fiscal year ending June 30, 2074.

Given the substantial uncertainty regarding the impact of COVID-19 on plan costs, including whether the pandemic will increase or decrease costs during the term of our projections, we have chosen not to make an adjustment in the expected plan costs. It is possible that the COVID-19 pandemic could have a material impact on the projected costs.

Fiscal Year Ending		LACERA Medical		Part B	Dental Under	Weighted Average Trend
From	To	Under 65	Over 65	Premiums	and Over 65	
6/30/2021	6/30/2022	4.60%	-1.20%	9.30%	-0.30%	1.88%
6/30/2022	6/30/2023	5.70%	5.40%	5.90%	2.90%	5.40%
6/30/2023	6/30/2024	5.30%	5.20%	5.80%	2.90%	5.16%
6/30/2024	6/30/2025	5.00%	5.00%	6.00%	2.90%	4.99%
6/30/2025	6/30/2026	5.00%	5.00%	5.90%	2.90%	4.99%
6/30/2026	6/30/2027	5.00%	5.00%	5.80%	2.90%	4.98%
6/30/2027	6/30/2028	5.00%	5.00%	5.80%	2.90%	4.98%
6/30/2028	6/30/2029	5.00%	5.00%	5.70%	2.90%	4.97%
6/30/2029	6/30/2030	5.00%	5.00%	5.90%	2.90%	5.00%
6/30/2030	6/30/2031	5.00%	5.00%	5.80%	2.80%	4.99%
6/30/2040	6/30/2041	5.10%	5.10%	5.00%	2.70%	4.97%
6/30/2050	6/30/2051	5.20%	5.20%	4.50%	2.60%	4.98%
6/30/2060	6/30/2061	5.00%	5.00%	4.30%	2.50%	4.78%
6/30/2070	6/30/2071	4.50%	4.50%	4.30%	2.70%	4.41%
6/30/2080	6/30/2081	4.30%	4.30%	4.30%	3.00%	4.27%
6/30/2090	6/30/2091	4.30%	4.30%	4.30%	3.30%	4.28%
6/30/2100	6/30/2101	4.30%	4.30%	4.30%	3.50%	4.28%
6/30/2104	6/30/2105	4.30%	4.30%	4.30%	3.60%	4.28%

Table A-23
Retirement of Vested Terminated Members

Annual Rates			
Age	General Plans A, B, C, D & G	General Plan E	Safety Plans A, B & C
<40	0.00%	0.00%	0.00%
40	0.00%	0.00%	10.00%
41	0.00%	0.00%	10.00%
42	0.00%	0.00%	10.00%
43	0.00%	0.00%	10.00%
44	0.00%	0.00%	10.00%
45	0.00%	0.00%	10.00%
46	0.00%	0.00%	10.00%
47	0.00%	0.00%	10.00%
48	0.00%	0.00%	10.00%
49	0.00%	0.00%	10.00%
50	18.00%	0.00%	29.00%
51	5.00%	0.00%	13.00%
52	6.00%	0.00%	13.00%
53	6.00%	0.00%	13.00%
54	5.00%	0.00%	13.00%
55	10.00%	25.00%	20.00%
56	7.00%	6.00%	20.00%
57	8.00%	4.00%	20.00%
58	7.00%	5.00%	20.00%
59	10.00%	5.00%	20.00%
60	11.00%	6.00%	33.00%
61	12.00%	7.00%	33.00%
62	15.00%	8.00%	33.00%
63	19.00%	7.00%	33.00%
64	20.00%	23.00%	33.00%
65	32.00%	37.00%	100.00%
66	26.00%	12.00%	100.00%
67	22.00%	8.00%	100.00%
68	22.00%	9.00%	100.00%
69	29.00%	10.00%	100.00%
70	35.00%	12.00%	100.00%
71	35.00%	18.00%	100.00%
72	35.00%	18.00%	100.00%
73	35.00%	18.00%	100.00%
74	35.00%	18.00%	100.00%
75	100.00%	100.00%	100.00%
75 or older	100.00%	100.00%	100.00%

These factors were used for current vested terminated members. For retirement of future vested terminated members (i.e., members that are currently active and may become vested terminated in the future), these factors were simplified into five-year factors for ease of application in the valuation system. Spouses of future vested terminated members were assumed to commence benefits at age 60.

Appendix B: Summary of Program Provisions

The following description of retiree healthcare and death benefits is intended to be only a brief summary. For details, reference should be made to the County and LACERA agreements, and employee booklets.

All actuarial calculations are based on our understanding of the statutes governing LACERA as contained in the County Employees Retirement Law (CERL) of 1937 and the California Public Employees' Pension Reform Act of 2013 (PEPRA), with provisions adopted by the LACERA Board of Retirement, effective through July 1, 2013. The benefit and contribution provisions of this law are summarized briefly below. This summary does not attempt to cover all the detailed provisions of the law.

ELIGIBILITY FOR RETIREE HEALTHCARE AND DEATH BENEFITS

Employees are eligible for the LACERA administered Retiree Healthcare Benefits Program if they are a member of LACERA and retire from the County of Los Angeles or Participating agencies of the County of Los Angeles. Healthcare benefits are also offered to qualifying survivors of deceased active employees who are eligible to retire at the time of death and to qualifying survivors of retired members. Since eligibility for retiree qualifying healthcare and death benefits is dependent on eligibility to receive a retirement benefit, the eligibility and other aspects of the retirement benefits are applicable for retirement healthcare and death benefits. Participation in the Retiree Healthcare Benefits Program is for life in most instances.

New retirees have 60 days from the date of retirement or 60 days from the date the retiree's name appears on the Board of Retirement agenda, to sign up for medical and dental/vision coverage. If a retiree applies for coverage after the 60 day window, there is a waiting period of 6 months for medical enrollment and 1 year for dental/vision enrollment.

If a retiree's spouse or domestic partner is also a LACERA retiree there cannot be dual coverage. If the spouse or domestic partner is covering the retiree under medical or dental/vision, the retiree may not also enroll as a retiree in medical or dental/vision.

LACERA MEMBERSHIP

Permanent employees of Los Angeles County (County) and participating districts who work $\frac{3}{4}$ time or more are eligible for membership in LACERA.

Employees eligible for safety membership (sheriff, fire, and other personnel as defined by law) become safety members on the first day of the month after date of hire. Employees who become members on or after January 1, 2013, will enter into Safety Plan C.

All other employees become general members on the first day of the month after date of hire, or the first day of the month after they make an election of either Plan D or Plan E, depending on the law in effect at that time. Employees who become members on or after January 1, 2013 will enter into General Plan G.

Elective officers become members on the first day of the month after filing a declaration with the Board of Retirement.

TIER 2 EMPLOYEES

New County employees hired after June 30, 2014 who are eligible for LACERA membership may enroll in the Los Angeles County Retiree Healthcare Benefits Program – Tier 2. The County retiree medical and dental/vision subsidy applies to retiree-only coverage for Tier 2 employees, and new benchmark plans also apply. Additional provisions and details can be found at the end of this Appendix B and on the following link of the LACERA website:

<https://www.lacera.com/healthcare/RHC-Tier2.html>

New claims costs and new probabilities of medical plan and tier selection upon initial enrollment were developed for Tier 2 employees. These can be found in Appendix A.

As Tier 2 provisions only apply to employees hired since June 30, 2014, most active and vested terminated employees as well as all of the retirees are currently Tier 1 employees. As such the new Tier 2 assumptions have a minimal effect, reducing the AAL. In the future, as the Tier 2 assumptions apply to more employees and the average service of Tier 2 employees also increases, the impact of reducing the AAL of the total membership will be more significant.

RETIREMENT PLANS

The County has established nine defined benefit plans. The following outlines the dates these plans were available, based on a member's date of entry into LACERA:

Safety Member Plans:

- Plan A:** Inception to August 1977
- Plan B:** September 1977 through December 2012
- Plan C:** January 2013 to present

General Member Plans:

- Plan A:** Inception through August 1977
- Plan B:** September 1977 through September 1978
- Plan C:** October 1978 through May 1979
- Plan D:** June 1979 through December 2012
- Plan E:** January 1982 through December 2012
- Plan G:** January 2013 to present

NOTE: After review of a new member's account, a member with prior membership or reciprocity may be enrolled into one of the pre-PEPRA plans, if they meet eligibility requirements.

SERVICE RETIREMENT ELIGIBILITY

Plans A-D:	General Members: Age 50 with 10 years of County service; Any age with 30 years of service; or Age 70 regardless of service.
Non-Contributory	
Plan E:	Age 55 with 10 years of service.
Plan G:	Age 52 with 5 years of service, or age 70 regardless of service.
Plans A-B:	Safety Members: Age 50 with 10 years of County service; Any age with 20 years of service.
Plan C:	Safety Members: Age 50 with 5 years of service.

VESTING REQUIREMENT

Plans A-D, G:	5 years of County and reciprocal service. Member contributions must be left on deposit.
Plan E:	10 years of County and reciprocal service.

SERVICE-CONNECTED DISABILITY RETIREMENT ELIGIBILITY

Plans A-D, G:	Any age or years of service; disability must result from occupational injury or disease, and member must be permanently incapacitated for the performance of duty.
Plan E:	Not available under Plan E.

NONSERVICE-CONNECTED DISABILITY RETIREMENT ELIGIBILITY

Plans A-D, G:	Any age with 5 years of service and permanently incapacitated for the performance of duty.
Plan E:	Not available under Plan E.

SERVICE-CONNECTED PRE-RETIREMENT DEATH ELIGIBILITY

- Plans A-D, G:** Active members who die in service as a result of injury or disease arising out of and in the course of employment.
- Plan E:** Not available under Plan E.

NONSERVICE-CONNECTED PRE-RETIREMENT DEATH ELIGIBILITY

- Plans A-D, G:** Active members who die while in service or while physically or mentally incapacitated for the performance of duty.
- Plan E:** Not available under Plan E.

ELIGIBLE SURVIVING DEPENDENTS

In order for a survivor of a LACERA active member to receive healthcare benefits, the LACERA active member has to be eligible for retirement at date of death. In order for a survivor of a retired LACERA member to be eligible to receive healthcare benefits, the retired member needed to have had a retirement plan option which qualified as eligible for continuing retirement benefits to the survivor. If one of these requirements is met, the following survivors are eligible for healthcare benefits:

- An eligible surviving spouse or surviving domestic partner, who is eligible to continue to receive retirement benefits and to whom the member was married or registered as a domestic partner for at least one year prior to member's retirement date. If the member was granted a service-connected disability, the one-year rule does not apply. However, the date of marriage or domestic partner registration must precede the date of retirement.
- Surviving unmarried natural children, legally adopted children or stepchildren, up to age 26, if there is also a surviving spouse/eligible domestic partner.
- Surviving unmarried natural children, legally adopted children, or stepchildren, up to age 18 or if a full time student, up to age 22, and receiving retirement pension benefits, without a surviving spouse/domestic partner.
- An eligible surviving spouse or surviving domestic partner who is receiving retiree healthcare, may enroll a new spouse or domestic partner and/or new unmarried natural children, legally adopted children, or stepchildren who are eligible up to age 26.

COUNTY CONTRIBUTIONS TOWARDS RETIREE HEALTHCARE BENEFITS

Medical

Tier 1 is for employees who are hired before July 1, 2014 and are eligible for LACERA membership. If a retiree has 10 years of retirement service credit, the County contributes 40% of the healthcare plan premium or 40% of the benchmark plan rate, whichever is less. For each year of retirement service credit beyond 10 years, the County contributes an additional 4% per year, up to a maximum of 100% for a member with 25 years of service credit.

Tier 2 is for employees who are hired after June 30, 2014 and are eligible for LACERA membership. The Tier 2 subsidy is the same as Tier 1 except that the benchmark plan is different. The table below shows the benchmark plans for Tier 1 and Tier 2.

<u>Tier</u>	<u>Pre / Post Medicare</u>	<u>Benchmark Plan</u>	<u>Benchmark Amount</u>
1	Pre	Anthem Blue Cross I & II	Same tier that member selects
1	Post	Anthem Blue Cross I & II	Same tier that member selects
2	Pre	Anthem Blue Cross I & II	Retiree-only tier
2	Post	Anthem Blue Cross III	Retiree-only tier

If a Tier 2 retiree selects a family tier for a plan where the premium for the retiree-only tier is less than the Tier 2 benchmark, there is a spouse subsidy equal to the Tier 2 benchmark less the premium for the retiree-only tier. If the Tier 2 benchmark is less than the premium for the retiree-only tier, the retiree subsidy would be lower and there would be no spouse subsidy.

The County contribution can never exceed the premium of the benchmark plan; this means that if the premium for the chosen plan and coverage option exceeds the benchmark premium, the retiree is required to pay the difference, even if the retiree has 25 years of service. Likewise, if the retiree has 25 years of service and the plan premium is less than the benchmark rate, the County contributes 100% of the plan premium only, not the benchmark plan rate. Reciprocal service is not included in contribution calculations.

Dental / Vision

The contribution percentages follow the same contribution proportions based on years of service (excluding reciprocal service) as the medical plans. The Tier 1 benchmark is the indemnity plan premium for the tier that the member selects. The Tier 2 benchmark is the indemnity plan premium for the retiree-only tier.

Disability

Any retiree with a service connected disability retirement with less than 13 years of service will receive a different County contribution for both medical and dental / vision plans. The County contributes 50% of the lesser of the benchmark plan rate or the premium of the plan the retiree is enrolled in. If a retiree with service connected disability retirement has 13 or more years of service, the County subsidy is the same as a non-disabled retiree. Reciprocal service is not included in contribution calculations.

FIREFIGHTERS LOCAL 1014 CONTRIBUTIONS TOWARDS RETIREE HEALTHCARE BENEFITS

Medical, Dental / Vision, and Disability

Contributions are the same as for the County employees.

DEATH/BURIAL BENEFIT

There is a one-time lump sum \$5,000 death benefit payable to the designated beneficiary upon the death of retirees. Actives and Vested Terminated Inactives are eligible for this benefit once they retire. Spouses and Dependents are not eligible for this death benefit upon their death. This benefit does not go through the 401(h) or any other funding vehicle; rather, is paid by LACERA and billed directly to the County on a monthly basis.

RETIREE HEALTHCARE BENEFIT PLAN DESCRIPTIONS ARE IN APPENDIX E, F, G and H

Appendix E

Medical Plan Descriptions:

http://www.lacera.com/healthcare/pdf/healthcare_charts/plan_comparison.pdf
http://www.lacera.com/healthcare/pdf/healthcare_charts/plan_comparison_ooa.pdf
http://www.lacera.com/healthcare/pdf/healthcare_charts/plan_comparison_medicare.pdf

Appendix F

Fire Fighters Local 1014 Medical Description: Selected pages from:

<http://www.local1014medical.org/docs/SPD%202019.pdf>

Appendix G

Dental and Vision Plan Description:

http://www.lacera.com/healthcare/pdf/healthcare_charts/dental_vision_charts.pdf

Appendix H

Medicare Part B Reimbursement Plan Description:

http://www.lacera.com/healthcare/Medicare/medicare_a_b.html

Appendix C: Valuation Data and Schedules

Data on LACERA's retirement benefit program membership as of June 30, 2020 was supplied to us by LACERA's Systems Division staff. Active and vested terminated data is used from the 2020 retirement benefits program valuation. Data for retired members, survivors, and dependents was provided separately for this OPEB valuation. On the following tables, we present a summary of LACERA membership at June 30, 2020 for active, vested terminated, and retired members.

- Exhibit C-1: Summary of Active Members
- Exhibit C-2: Summary of Vested Terminated Members
- Exhibit C-3: Summary of Retired Members, Spouses, and Dependents
- Exhibit C-4: Age and Service Distribution of Active Members
- Exhibit C-5: Age and Service Distribution of Vested Terminated Members
- Exhibit C-6: Age and Service Distributions of Retired Members, Spouses, and Dependents in Medical Plans
- Exhibit C-7: Age and Service Distributions of Retired Members, Spouses, and Dependents in Dental/Vision Plans
- Exhibit C-8: Medical and Dental/Vision Plan Distributions of Retired Members, Survivors, Spouses, and Dependents Pre and Post Age 65 for Tier 1
- Exhibit C-9: Medical and Dental/Vision Plan Distributions of Retired Members, Survivors, Spouses, and Dependents Pre and Post Age 65 for Tier 2
- Exhibit C-10: Treatment of Incomplete Data

Note that Exhibits C-1 through C-7 were prepared using an "age nearest birthday" basis for calculating ages as used by our valuation system. Exhibit C-8 and C-9 were prepared using an "attained age" basis to reflect when someone becomes 65.

Exhibit C-1: Summary of Active Members

	Members		Annual Salary	Average Age	Average Credited Service
	Tier 1	Tier 2			
County					
General	57,522	24,490	\$ 6,788,834,424	47.2	14.2
Safety	9,654	3,522	1,590,271,044	41.4	14.4
Total	67,176	28,012	\$ 8,379,105,468	46.4	14.3
Superior Court					
General	3,203	1,252	\$ 347,098,020	49.0	17.4
Safety	-	-	-	-	-
Total	3,203	1,252	\$ 347,098,020	49.0	17.4
LACERA					
General	268	133	\$ 44,123,016	48.2	12.8
Safety	-	-	-	-	-
Total	268	133	\$ 44,123,016	48.2	12.8
Outside Districts					
General	7	-	\$ 666,300	48.6	13.8
Safety	-	-	-	-	-
Total	7	-	\$ 666,300	48.6	13.8
Grand Total					
General	61,000	25,875	\$ 7,180,721,760	47.3	14.4
Safety	9,654	3,522	1,590,271,044	41.4	14.4
Total	70,654	29,397	\$ 8,770,992,804	46.5	14.4
Grand Total (Tiers Combined)	100,051				

This excludes 57 active pension members who are receiving retiree healthcare benefits.

Exhibit C-2: Summary of Vested Terminated Members

	<u>Members</u>		<u>Average Age</u>
	<u>Tier 1</u>	<u>Tier 2</u>	
County			
General	7,139	248	51.4
Safety	584	33	43.9
Total	7,723	281	50.8
Superior Court			
General	572	22	53.1
Safety	-	-	-
Total	572	22	53.1
LACERA			
General	33	-	50.9
Safety	-	-	-
Total	33	-	50.9
Outside Districts			
General	-	-	-
Safety	-	-	-
Total	-	-	-
Grand Total	8,328	303	50.8
Grand Total (Tiers Combined)	8,631		

Pension data includes 7,516 non vested terminated members.
 This excludes 21 vested terminated pension members who are receiving retiree healthcare benefits.

Exhibit C-3: Summary of Current Retirees, Survivors, Spouses, and Dependents

Medical

	Count				Total	Average Age		
	Retirees and Survivors		Spouses and Dependents			Retirees and Survivors	Spouses and Dependents	Total
	Tier 1	Tier 2	Tier 1	Tier 2				
County	49,935	5	27,417	3	77,360	73.6	59.7	68.6
Superior Court	2,397	-	1,047	-	3,444	73.0	62.0	69.7
LACERA	158	-	74	-	232	72.2	63.7	69.5
Outside Districts	94	-	34	-	128	84.1	71.4	80.7
Total Medical	52,584	5	28,572	3	81,164	73.6	59.8	68.7
Tiers Combined	52,589		28,575					

Dental/Vision

	Count				Total	Average Age		
	Retirees and Survivors		Spouses and Dependents			Retirees and Survivors	Spouses and Dependents	Total
	Tier 1	Tier 2	Tier 1	Tier 2				
County	51,225	9	27,234	2	78,470	73.5	62.0	69.5
Superior Court	2,439	-	1,049	-	3,488	73.0	65.3	70.7
LACERA	159	-	69	-	228	72.0	67.2	70.5
Outside Districts	86	-	33	-	119	84.2	71.8	80.8
Total Dental/Vision	53,909	9	28,385	2	82,305	73.5	62.1	69.6
Tiers Combined	53,918		28,387					

Death Benefit*

	Count				Total	Average Age		
	Retirees		Spouses and Dependents			Retirees	Spouses and Dependents	Total
	Tier 1	Tier 2	Tier 1	Tier 2				
County	55,026	27	NA	NA	55,053	72.4	NA	72.4
Superior Court	2,933	2	NA	NA	2,935	71.6	NA	71.6
LACERA	185	-	NA	NA	185	71.1	NA	71.1
Outside Districts	104	-	NA	NA	104	80.7	NA	80.7
Total Death Benefit	58,248	29	NA	NA	58,277	72.4	NA	72.4
Tiers Combined	58,277		NA					

* Totals do not include 462 people that are both a Retiree and a Survivor, but have elected their Retiree Medical benefits as a Survivor.

Exhibit C-4: Age and Service Distribution of Active Members

Age	Members' Years of Service								Total Count
	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35 & Above	
Under 18	-	-	-	-	-	-	-	-	-
18-19	3	-	-	-	-	-	-	-	3
20-24	959	1	-	-	-	-	-	-	960
25-29	5,534	514	6	-	-	-	-	-	6,054
30-34	6,969	3,344	846	15	-	-	-	-	11,174
35-39	4,634	3,313	4,124	739	43	-	-	-	12,853
40-44	2,850	2,082	4,180	2,905	1,148	73	1	-	13,239
45-49	1,954	1,462	2,875	2,919	3,330	946	108	4	13,598
50-54	1,410	1,043	2,125	2,305	3,008	2,935	1,691	159	14,676
55-59	910	876	1,623	1,679	1,941	2,179	2,509	922	12,639
60-64	510	559	1,224	1,281	1,386	1,267	1,517	1,427	9,171
65-69	148	259	609	632	715	529	471	608	3,971
70-74	26	45	209	221	251	180	141	204	1,277
75-79	2	12	41	59	69	54	41	57	335
80-84	-	2	1	7	21	16	17	18	82
85 & Over	-	1	2	1	2	-	3	10	19
Total Count	25,909	13,513	17,865	12,763	11,914	8,179	6,499	3,409	100,051

This excludes 57 active retirement program members who are receiving retiree healthcare benefits.

Exhibit C-5: Age and Service Distribution of Vested Terminated Members

Age	Members' Years of Service								Total Count
	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35 & Above	
Under 18	-	-	-	-	-	-	-	-	-
18-19	-	-	-	-	-	-	-	-	-
20-24	1	-	-	-	-	-	-	-	1
25-29	42	14	-	-	-	-	-	-	56
30-34	160	171	33	1	-	-	-	-	365
35-39	188	412	196	21	-	-	-	-	817
40-44	248	532	280	77	10	-	-	-	1,147
45-49	258	570	377	182	58	10	1	-	1,456
50-54	194	510	549	215	103	56	13	-	1,640
55-59	140	293	487	194	99	55	39	15	1,322
60-64	67	199	351	154	83	48	60	40	1,002
65-69	51	98	260	69	25	21	8	12	544
70-74	15	34	118	47	7	2	1	-	224
75-79	3	3	15	10	5	-	1	-	37
80-84	4	-	7	3	1	2	1	-	18
85 & Over	1	1	-	-	-	-	-	-	2
Total Count	1,372	2,837	2,673	973	391	194	124	67	8,631

Retirement program data includes 7,516 non vested terminated members.
 This excludes 21 vested terminated pension members who are receiving retiree healthcare benefits.

Exhibit C-6: Age and Service Medical Distributions for Current Retirees, Survivors, Spouses, and Dependents

All Members

Retirees and Survivors with Medical Coverage

Age	Retirees' Years of Service							Disableds	Total Count
	0-4	5-9	10-14	15-19	20-24	25-29	30 & Above		
Under 35	-	-	-	1	2	3	1	18	25
35-39	-	-	-	-	-	-	-	14	14
40-44	-	-	-	-	1	3	-	55	59
45-49	-	-	2	2	3	1	4	113	125
50-54	-	-	13	46	54	124	66	300	603
55-59	2	1	51	86	152	546	799	1,068	2,705
60-64	-	6	114	178	304	1,152	1,910	1,388	5,052
65-69	6	21	391	523	709	1,959	4,470	1,253	9,332
70-74	4	30	573	770	960	2,212	5,451	1,675	11,675
75-79	9	32	465	711	852	1,872	3,945	1,568	9,454
80-84	5	15	370	461	660	1,561	2,281	1,076	6,429
85-89	6	20	233	405	547	1,052	1,267	690	4,220
90-94	3	15	149	237	325	489	576	311	2,105
95-99	-	5	78	100	94	137	216	67	697
100 & Over	-	-	10	16	15	12	28	13	94
Total Count	35	145	2,449	3,536	4,678	11,123	21,014	9,609	52,589

All Members

Spouses and Dependents with Medical Coverage

Age	Retirees' Years of Service							Disableds	Total Count
	0-4	5-9	10-14	15-19	20-24	25-29	30 & Above		
Under 35	3	2	112	150	291	1,155	1,732	1,907	5,352
35-39	-	1	-	2	7	18	34	18	80
40-44	-	-	1	6	13	24	50	60	154
45-49	-	-	8	11	18	60	95	121	313
50-54	-	-	11	30	47	217	373	420	1,098
55-59	1	-	34	55	97	514	837	882	2,420
60-64	2	5	62	102	192	787	1,381	866	3,397
65-69	1	12	163	219	308	955	2,044	711	4,413
70-74	4	16	211	309	356	933	2,186	863	4,878
75-79	2	10	160	260	346	677	1,413	566	3,434
80-84	1	3	96	147	213	469	706	265	1,900
85-89	-	2	33	77	86	217	272	123	810
90-94	-	-	10	25	34	67	93	27	256
95-99	-	1	7	10	9	10	25	3	65
100 & Over	1	-	2	1	-	1	-	-	5
Total Count	15	52	910	1,404	2,017	6,104	11,241	6,832	28,575

Exhibit C-7: Age and Service Dental/Vision Distributions for Current Retirees, Survivors, Spouses, and Dependents

All Members

Retirees and Survivors with Dental/Vision Coverage

Age	Retirees' Years of Service							Disableds	Total Count
	0-4	5-9	10-14	15-19	20-24	25-29	30 & Above		
Under 35	-	-	-	1	2	3	1	20	27
35-39	-	-	-	-	-	-	-	19	19
40-44	-	-	1	-	1	3	-	68	73
45-49	-	-	2	1	2	1	4	131	141
50-54	1	-	19	49	57	122	67	346	661
55-59	4	3	71	104	161	551	801	1,133	2,828
60-64	1	13	149	219	318	1,153	1,905	1,457	5,215
65-69	7	29	450	572	736	1,983	4,485	1,315	9,577
70-74	8	43	634	820	1,004	2,223	5,478	1,755	11,965
75-79	11	37	491	739	877	1,884	3,971	1,622	9,632
80-84	4	26	355	497	693	1,578	2,305	1,094	6,552
85-89	4	25	258	414	556	1,059	1,290	694	4,300
90-94	5	13	155	245	333	493	587	310	2,141
95-99	1	6	85	96	97	136	217	65	703
100 & Over	-	-	7	10	16	11	28	12	84
Total Count	46	195	2,677	3,767	4,853	11,200	21,139	10,041	53,918

All Members

Spouses and Dependents with Dental/Vision Coverage

Age	Retirees' Years of Service							Disableds	Total Count
	0-4	5-9	10-14	15-19	20-24	25-29	30 & Above		
Under 35	3	5	93	119	185	877	1,333	1,550	4,165
35-39	-	1	1	2	6	14	25	16	65
40-44	-	-	2	6	9	22	40	62	141
45-49	-	-	7	12	18	57	92	133	319
50-54	-	1	13	27	50	200	328	401	1,020
55-59	1	2	39	58	105	508	816	812	2,341
60-64	3	6	76	117	206	774	1,376	914	3,472
65-69	2	11	180	249	336	1,001	2,151	790	4,720
70-74	4	20	236	357	389	985	2,273	888	5,152
75-79	1	8	177	270	365	720	1,508	617	3,666
80-84	-	3	104	169	241	510	744	269	2,040
85-89	3	4	38	91	97	235	302	137	907
90-94	-	1	16	33	42	78	101	32	303
95-99	-	1	11	9	11	11	26	4	73
100 & Over	-	-	1	1	-	1	-	-	3
Total Count	17	63	994	1,520	2,060	5,993	11,115	6,625	28,387

Exhibit C-8: Summary of Data for Current Retirees, Survivors, Spouses, and Dependents for Tier 1

	Retirees and Survivors			Spouses and Dependents			Total		
	Pre 65	Post 65	Total	Pre 65	Post 65	Total	Pre 65	Post 65	Total
<u>Medical Plans</u>									
Blue Cross I	186	858	1,044	260	188	448	446	1,046	1,492
Blue Cross II	2,393	2,762	5,155	3,232	973	4,205	5,625	3,735	9,360
Blue Cross III	284	12,073	12,357	1,056	4,644	5,700	1,340	16,717	18,057
Blue Cross Prudent Buyer Plan	271	698	969	342	208	550	613	906	1,519
CIGNA Healthcare for Seniors	2	57	59	10	24	34	12	81	93
CIGNA Network Model Plan	46	342	388	65	76	141	111	418	529
Kaiser (Other)	54	347	401	66	117	183	120	464	584
Kaiser (CA)	3,872	21,268	25,140	5,011	7,142	12,153	8,883	28,410	37,293
United Healthcare	1,425	3,228	4,653	1,904	1,254	3,158	3,329	4,482	7,811
SCAN Health Plan	5	400	405	-	97	97	5	497	502
Firefighters' Local 1014	774	1,239	2,013	1,270	633	1,903	2,044	1,872	3,916
Total	9,312	43,272	52,584	13,216	15,356	28,572	22,528	58,628	81,156
<u>Medicare Part B Coverage</u>									
All Members									
Receiving Reimbursement	328	35,795	36,123	420	12,171	12,591	748	47,966	48,714
Not Receiving Reimbursement	8,984	7,477	16,461	12,796	3,185	15,981	21,780	10,662	32,442
Total	9,312	43,272	52,584	13,216	15,356	28,572	22,528	58,628	81,156
<u>Dental/Vision Plans</u>									
All Members									
Cigna Indemnity Dental/Vision	8,351	39,810	48,161	10,561	15,163	25,724	18,912	54,973	73,885
Cigna Dental HMO/Vision	1,367	4,381	5,748	1,391	1,270	2,661	2,758	5,651	8,409
Total	9,718	44,191	53,909	11,952	16,433	28,385	21,670	60,624	82,294
<u>Death Benefit*</u>									
Total	12,216	46,032	58,248	NA	NA	NA	12,216	46,032	58,248

* Totals do not include 462 people that are both a Retiree and a Survivor, but have elected their Retiree Medical benefits as a Survivor.

Exhibit C-9: Summary of Data for Current Retirees, Survivors, Spouses, and Dependents for Tier 2

	Retirees and Survivors			Spouses and Dependents			Total		
	Pre 65	Post 65	Total	Pre 65	Post 65	Total	Pre 65	Post 65	Total
<u>Medical Plans</u>									
Blue Cross I	-	-	-	-	-	-	-	-	-
Blue Cross II	-	-	-	-	-	-	-	-	-
Blue Cross III	-	1	1	2	-	2	2	1	3
Blue Cross Prudent Buyer Plan	1	-	1	-	-	-	1	-	1
CIGNA Healthcare for Seniors	-	-	-	-	-	-	-	-	-
CIGNA Network Model Plan	-	-	-	-	-	-	-	-	-
Kaiser (Other)	-	-	-	-	-	-	-	-	-
Kaiser (CA)	2	1	3	-	1	1	2	2	4
United Healthcare	-	-	-	-	-	-	-	-	-
SCAN Health Plan	-	-	-	-	-	-	-	-	-
Firefighters' Local 1014	-	-	-	-	-	-	-	-	-
Total	3	2	5	2	1	3	5	3	8
<u>Medicare Part B Coverage</u>									
All Members									
Receiving Reimbursement	-	2	2	-	1	1	-	3	3
Not Receiving Reimbursement	3	-	3	2	-	2	5	-	5
Total	3	2	5	2	1	3	5	3	8
<u>Dental/Vision Plans</u>									
All Members									
Cigna Indemnity Dental/Vision	4	4	8	1	1	2	5	5	10
Cigna Dental HMO/Vision	1	-	1	-	-	-	1	-	1
Total	5	4	9	1	1	2	6	5	11
<u>Death Benefit</u>									
Total	15	14	29	NA	NA	NA	15	14	29

Exhibit C-10: Treatment of Incomplete Data

ID	Size	Situation	Assumption and Resolution
1	524 medical NA dental	There were no children listed in Retiree and Family or Retiree and Children deduction codes.	To be consistent with the tier, children were added. Children were designated as 20 years old since the average age of LACERA children under 26 is 20; half were listed as male and half as female. Children were not added for Kaiser plans, based on previous discussions with LACERA.
2	1,827 medical 169 dental	There was no spouse listed in Retiree and Spouse, Retiree & Family, or Retiree +1 deduction codes.	To be consistent with the tier, spouses were added. Even in the Retiree+1 case, a spouse was added rather than a child as this is a more conservative addition. Spouses were given a gender opposite of the retiree and date of birth was determined according to the marriage age difference assumption.
3	212 medical 220 dental 98 death benefit only	Members were deceased before 7/1/2020.	Removed records from data.
4	1 medical 1 dental	Records had unusual dates of birth.	Used average of all respective active medical and dental dates of birth.
5	4 medical 6 dental 6 death benefit only	Records had blank gender.	We designated half of the members as male and half as female.

Appendix D: Glossary

The following definitions are excerpts from other actuarial organizations in the United States. In some cases, the definitions have been modified for specific applicability to LACERA. Defined terms are capitalized throughout this Appendix.

Actuarial Accrued Liability

That portion, as determined by a particular Actuarial Cost Method, of the Actuarial Present Value of postemployment plan benefits and expenses which is not provided for by future Normal Costs.

Actuarial Assumptions

Assumptions as to the occurrence of future events affecting OPEB costs, such as: mortality, termination of employment, disability, retirement; changes in medical costs; and other relevant items.

Actuarial Cost Method

A procedure for determining the Actuarial Present Value of OPEB program benefits and expenses and for developing an actuarially equivalent allocation of such value to time periods, usually in the form of a Normal Cost and an Actuarial Accrued Liability.

Actuarial Gain (Loss)

A measure of the difference between actual experience and that expected based on a set of Actuarial Assumptions during the period between two Actuarial Valuation dates, as determined in accordance with a particular Actuarial Cost Method.

Actuarial Present Value

The value of an amount or series of amounts payable or receivable at various times, determined as of a given date by the application of a particular set of Actuarial Assumptions.

Actuarial Valuation

The determination, as of a valuation date, of the Normal Cost, Actuarial Accrued Liability, Actuarial Value of Assets, and related Actuarial Present Values for an OPEB plan.

Actuarial Value of Assets

The value of cash, investments and other property belonging to an OPEB plan, as used by the actuary for the purpose of an Actuarial Valuation.

Amortization Payment

That portion of the ARC that is designed to recognize interest on and to amortize the Unfunded Actuarial Accrued Liability.

Actuarially Determined Contributions (“ADC”)

This is the employer’s periodic required contribution to a defined benefit OPEB plan, calculated in accordance with the set of requirements for calculating actuarially determined OPEB information included in financial reports.

Attribution Period

The period of an employee’s service to which the expected postretirement benefit obligation for that employee is assigned. The beginning of the attribution period is the employee’s date of hire. The end of the attribution period is the time of assumed exit from OPEB active member status.

Benefit Payments

The monetary or in-kind benefits or benefit coverage to which participants may be entitled under a post employment benefit plan, including health care benefits and life insurance not provided through a retirement program.

GASB 74

The statement that establishes financial reporting standards for postemployment benefit plans other than retirement programs.

GASB 75

The statement that establishes financial reporting standards for employers that sponsor postemployment benefits other than retirement programs.

Net OPEB Obligation

This is the cumulative difference since the effective date of this statement between annual OPEB cost and the employer’s contributions to the plan, including the OPEB liability (asset) at transition, if any, and excluding (a) short-term differences and (b) unpaid contributions that have been converted to OPEB related debt.

Normal Cost

That portion of the Actuarial Present Value of OPEB plan benefits and expenses which is allocated to a valuation year by the Actuarial Cost Method.

Other Postemployment Benefits (“OPEB”)

This refers to postemployment benefits other than retirement program benefits, including healthcare benefits regardless of the type of plan that provides them, and all other postemployment benefits provided separately from a retirement program, excluding benefits defined as termination benefits or offers.

Present Value of Future Benefits

This is the value, as of the applicable date, of future payments for benefits and expenses under the Plan, where each payment is:

- (a) Multiplied by the probability of the event occurring on which the payment is conditioned, such as the probability of survival, death, disability, termination of employment, etc.; and
- (b) Discounted at the assumed discount rate.

Projected Benefits

Those OPEB plan benefit amounts which are expected to be paid at various future times under a particular set of Actuarial Assumptions, taking into account such items as the effect of advancement in age and past and anticipated future compensation and service credits.

Substantive Plan

The terms of the OPEB plan as understood by an employer that provides postretirement benefits and the employees who render services in exchange for those benefits. The substantive plan is the basis for the accounting for the plan.

Trend Rate

The rate of increase in per person health costs paid by a plan as a result of factors such as price increases, utilization of healthcare services, plan design, and technological developments.

Unfunded Actuarial Accrued Liability

The excess of the Actuarial Accrued Liability over the Actuarial Value of Assets.

Appendix E: Medical Plan Comparisons

Comparisons are from the following areas of the LACERA website:

http://www.lacera.com/healthcare/pdf/healthcare_charts/plan_comparison.pdf

http://www.lacera.com/healthcare/pdf/healthcare_charts/plan_comparison_ooa.pdf

http://www.lacera.com/healthcare/pdf/healthcare_charts/plan_comparison_medicare.pdf

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COMPARISON OF MEDICAL PLANS

Effective July 1, 2020

Indemnity Medical Plans

- Anthem Blue Cross I
- Anthem Blue Cross II
- Anthem Blue Cross Prudent Buyer Plan

Health Maintenance Organizations (HMOs)

- Cigna Network Model Plan (Arizona and California only)
- Kaiser Permanente (California only)
- UnitedHealthcare

This chart represents a summary of benefits only. Additional benefit information is provided by each insurance carrier. This chart does not replace or modify the official documents that legally govern each plan's operation.

The benefits offered by all LACERA-administered health plans change when an enrolled member permanently moves outside the provider network area. Moving to a location outside the coverage area can impact your plan's rates and coverage levels.

Indemnity Insurance Plans

Anthem Blue Cross I

Anthem Blue Cross II

Calendar Year Deductibles/Copayments	\$100 – individual; \$100 – family	\$500 – individual; \$1,500 – family
Annual Maximum Out-of-Pocket Expenses (for most services)	N/A	\$2,500, including deductible (Does not include amounts over allowable charges)
Lifetime Maximum Benefits	\$1,000,000	\$1,000,000
Hospital Benefits		
Room and Board	\$75 per day maximum ¹ ; \$150 per day maximum special care unit ¹	90% for PPO hospital ² ; 80% non-PPO for semi-private room; special care unit up to 2.5 times semi-private room rate
Surgical Services	80% ¹	80%
Hospital Services and Supplies	100% ¹	90% PPO hospital ² ; 80% non-PPO hospital
Hospital Admission Authorization Requirements	Preadmission authorization required in advance (on first business day following emergency admission) unless covered by Medicare Part A. \$200 deductible for unauthorized hospital admission or late notice	Preadmission authorization required in advance (on first business day following emergency admission) unless covered by Medicare Part A. \$200 deductible for unauthorized hospital admission or late notice
Nursing Benefits		
Skilled Nursing Facility Care	70% (in-network) or 50% (out-of-network) up to \$150 per day for up to 100 days per calendar year ¹	70% (in-network) or 50% (out-of-network) up to 100 days per calendar year ¹
Private Duty Nurses	80% in accordance with requirements	80% in accordance with requirements
Home Healthcare	100% in accordance with requirements ¹	100% in accordance with requirements ¹
Hospice Care	100% up to plan limitations, in accordance with requirements ¹	100% in accordance with requirements ¹
Emergency Benefits		
Inpatient	\$75 per day ¹ maximum; \$150 per day maximum special care unit ¹	90% PPO hospital ² ; 80% non-PPO hospital
Outpatient	100% at a hospital only ¹	80%
Ambulance	80% for transportation to first hospital where care is given	80% for transportation to first hospital where care is given
Outpatient Benefits		
Doctor's Office Visits	80%	80%
Preadmission X-Ray and Lab Tests	100% ¹	100% ¹
Routine Checkups, CA only		
—Adult	\$25 copay; covered in-network only; maximum of \$250	\$25 copay; covered in-network only; maximum of \$250
—Children Under 17	\$25 copay in-network; 80% out-of-network	\$25 copay in-network; 80% out-of-network
Immunizations	Not covered except for children under age 17	Not covered except for children under age 17
Outpatient Surgical Services	100% ¹	100% ¹ (80% hospital facility fees)
Physical Therapy	80% in accordance with requirements	80% in accordance with requirements
Speech Therapy	80% in accordance with requirements	80% in accordance with requirements
Maternity	80% in accordance with requirements	80% in accordance with requirements
Prescription Drug Benefits		
Prescription Drugs	Retail: 80% in-network; 60% out-of-network Mail order: \$10 generic/\$30 brand/\$50 non-preferred brand/ \$150 specialty copay for 90-day supply (Copay prorated for less than 90-day supply)	Retail: 80% in-network; 60% out-of-network Mail order: \$10 generic/\$30 brand/\$50 non-preferred brand/ \$150 specialty copay for 90-day supply (Copay prorated for less than 90-day supply)
Mental Health and Substance Abuse Benefits		
Inpatient	\$75 per day ¹ maximum; \$150 per day maximum intensive care ¹	90% PPO; 80% non-PPO
Outpatient	80% of covered expenses	80% of covered expenses
Vision Benefits		
Eye Exams	Covered after accident only ³	Covered after accident only ³
Lenses	Covered after accident ³ and after eye surgery	Covered after accident ³ and after eye surgery
Frames	Covered after accident ³ or eye surgery only	Covered after accident ³ or eye surgery only
Hearing Care Benefits		
Hearing Exams	Covered after accident only ³	Covered after accident only ³
Hearing Aids	Covered after accident only ³	Covered after accident only ³

Comparison of Medical Plans

	HMOs
Anthem Blue Cross Prudent Buyer Plan	Cigna Network Model Plan
\$100 – individual; \$200 – family	None
N/A	\$1,500 – individual; \$3,000 – family
\$1,000,000	Unlimited
80% Prudent Buyer; 70% non-Prudent Buyer with \$75 per day maximum; \$150 per day intensive care (for non-Prudent Buyer)	No charge
80% Prudent Buyer; 70% non-Prudent Buyer	No charge for inpatient or outpatient
80% Prudent Buyer; 70% non-Prudent Buyer (up to \$250 per day for non-Prudent Buyer)	No charge
Authorization by a Prudent Buyer physician required. Non-Prudent Buyer physicians must contact Anthem Blue Cross	Authorization by a Cigna HealthCare physician required within 48 hours in case of emergency outside service area
80% of semi-private room rate for up to 100 days per confinement period	No charge; CA limited to 100 days per contract year; AZ limited to 60 days per contract year
80% in accordance with requirements	No charge if authorized by a Cigna HealthCare physician (100 visits per contract year together with Home Healthcare)
100% in accordance with requirements	No charge; CA limited to 100 days per contract year; AZ limited to 60 days per contract year. Includes outpatient Private Duty Nursing subject to medical necessity.
100% up to plan limitations, in accordance with requirements ¹	No charge
80% Prudent Buyer; 70% non-Prudent Buyer	No charge
80% Prudent Buyer; 70% non-Prudent Buyer	\$50 copay; waived if admitted; \$25 copay for urgent care center
80%	No charge when true emergency authorized by a Cigna HealthCare physician
80% Prudent Buyer; 70% non-Prudent Buyer	\$5 copay
100% Prudent Buyer; 70% non-Prudent Buyer	No charge
\$25 copay; covered in-network only; maximum of \$250 \$25 copay in-network; out-of-network covered up to \$20	\$5 copay
Not covered except for children under age 17	No charge (after \$5 office visit copay, if applicable)
100% ¹ Prudent Buyer (Hospital facility fees: 80% Prudent Buyer; 70% non-Prudent Buyer)	No charge
80% Prudent Buyer; 70% non-Prudent Buyer	\$20 copay; limited 20 days for all therapies combined (unlimited days based on medical necessity for CA only)
80% in accordance with requirements	\$20 copay; limited 20 days for all therapies combined (unlimited days based on medical necessity for CA only)
80% Prudent Buyer; 70% Non-Prudent Buyer; in accordance with requirements	\$5 copay for initial visit to confirm pregnancy; no charge for subsequent maternity visits
Retail: 80% in-network; out-of network coverage may vary. Contact Anthem Blue Cross for more information. Mail order: \$10 generic/\$30 brand/\$50 non-preferred brand/ \$150 specialty for a 90-day supply /specialty copay prorated for less than 90-day supply	Retail: \$7 copay for 30-day supply; Mail order: \$14 copay for 90-day supply
80% Prudent Buyer; 70% non-Prudent Buyer	No charge for an unlimited number of days
80% Prudent Buyer; 70% non-Prudent Buyer	No charge for an unlimited number of visits
Not covered	\$10 copay; limit one exam every 12 months through Cigna Vision
One pair, after eye surgery	Covered after cataract surgery
Not covered	Not covered
Not covered	Not covered
Not covered	Not covered

Kaiser Permanente	UnitedHealthcare⁴
None	None
Maximum copays of \$1,500 per individual, \$3,000 per family	Maximum copays of \$2,000 per individual, \$6,000 per family
Unlimited	Unlimited
No charge	No charge
No charge for inpatient; \$5 copay for outpatient	No charge for inpatient or outpatient
No charge	No charge
Authorization by a Kaiser Permanente physician required within 24 hours or as soon as reasonably possible in case of emergency outside service area	Authorization by a participating UnitedHealthcare medical group or physician required. Within 24 hours in case of emergency
No charge; limit 100 days per benefit period	No charge; up to 100 days per benefit period
No charge if authorized by Kaiser Permanente physician	No charge (if medically necessary)
No charge (up to 100 visits per Accumulation Period)	No charge; 100 visits maximum per calendar year
No charge if authorized by Kaiser Permanente physician (up to 100 2-hour visits per calendar year)	No charge when authorized by a UnitedHealthcare participating physician or medical group. Prognosis of life expectancy of one year or less.
No charge	No charge
\$5 at Kaiser Permanente facility; waived if admitted directly to the hospital	\$50; waived on admission
No charge if emergency	No charge when medically necessary
\$5 copay	\$5 copay
No charge	No charge with an office visit
\$5 copay	\$5 copay; no charge for age 2 and under
No charge if generally available	\$5 copay; no charge for age 2 and under
\$5 copay	No charge
\$5 copay	Inpatient: no charge; outpatient: \$5 copay
\$5 copay	Inpatient: no charge; outpatient: \$5 copay
\$5 copay	No charge; office visit copays are waived after initial office visit copay
Generic and Brand Drugs: \$7 copay for 100-day supply Specialty Drugs: \$7 copay for 30-day supply	Retail: \$7 copay for 30-day supply; Mail order: \$7 copay for 90-day supply
No charge; for an unlimited number of days	No charge; for an unlimited number of days (both Mental Health and Substance Abuse)
\$5 copay per visit; for an unlimited number of visits	Mental Health: \$5 copay; for an unlimited number of visits, must be authorized through UnitedHealthcare Behavioral Health Substance Abuse: No charge; for an unlimited number of visits (Includes Partial Hospitalization/Day Treatment and Intensive Outpatient Treatment)
\$5 copay	\$5 copay through PCP ⁵
Not covered	Not covered
Not covered	Not covered
\$5 copay	\$5 copay
Not covered	\$5,000 annual benefit maximum per calendar year. Limited to one hearing aid (including repair and replacement) per hearing impaired ear every three years.

Carrier Notes:

Anthem Blue Cross Plans I, II, and Prudent Buyer

Coinsurance payment is the percentage of eligible charges after you meet the plan deductible, unless otherwise noted. **All plan reimbursements are based on negotiated rates or usual and customary charges.** Usual and Customary charges are the maximum amounts the plan will pay for a service based on what providers in that geographic area charge for similar services or supplies.

¹ Indicates deductible waived.

Anthem Blue Cross II

² For non-Medicare members only.

Anthem Blue Cross I and II

³ Treatment must be due to an accidental injury while insured and treatment must be received within two years of accident.

HMOs

Medical care must be received from HMO or contracted provider, physician or facility.

Mental Health Benefits for California Base Contracts: refer to evidence of coverage.

UnitedHealthcare

⁴ Refer to UnitedHealthcare HMO Schedule of Benefits and Evidence of Coverage for detailed plan information.

⁵ Your PCP is your Preferred Care Provider in the UnitedHealthcare HMO.

COMPARISON OF MEDICAL PLANS

Effective July 1, 2020

Health Maintenance Organizations (HMOs) and Medicare Advantage Prescription Drug (MA-PD) HMOs

- Kaiser Permanente – Colorado
- Kaiser Permanente – Georgia
- Kaiser Permanente – Hawaii
- Kaiser Permanente – Oregon
- Kaiser Permanente – Washington

This chart represents a summary of benefits only. Additional benefit information is provided by each insurance carrier. This chart does not replace or modify the official documents, which legally govern each plan's operation.

The health plans and benefit designs available from the LACERA-administered options change when an enrolled member permanently moves outside the provider network area. Moving to a location outside the coverage area will impact your eligibility to be enrolled in the health plan, the benefit designs available and the rates you pay.

Note: The benefit levels contained in this booklet are subject to approval by the Centers for Medicare and Medicaid Services (CMS) and may be adjusted during the plan year.

BASIC (UNDER 65 OR OVER 65 WITHOUT MEDICARE COVERAGE) HMOs

	Kaiser Permanente – Colorado	Kaiser Permanente – Georgia
Calendar Year Deductible/Copayment	None	None
Annual Maximum Out-of-Pocket Expenses (for most services)	Individual – \$2,000 Family – \$4,500	Individual – \$2,000 Family – \$4,000
Lifetime Maximum Benefits	None	None
Hospital Benefits		
Room and Board	\$250 copay per admission	\$250 copay per admission
Surgical Services	Inpatient – no charge Outpatient – \$50 copay	Inpatient – no charge Outpatient – \$100 copay
Hospital Services and Supplies	Durable medical equipment covered at 80%	Durable medical equipment covered at 80%
Hospital Admission Authorization Requirements	No authorization needed when referred by a Kaiser Permanente physician	Authorization required for hospital admissions
Nursing Benefits		
Skilled Nursing Facility Care	No charge; 100 days per period	\$250 copay per admission; 100 days per year
Private Duty Nurses	No charge if in service area only and referred by a network provider	No charge if authorized
Home Health Care	No charge if authorized	No charge up to 120 visits per calendar year (private duty nursing excluded)
Hospice Care	No charge	No charge if authorized
Emergency Benefits		
Inpatient	\$100 copay (waived if admitted)	\$100 (waived if admitted)
Outpatient	\$100 copay	\$100 (waived if admitted)
Ambulance	20% copay; max. of \$500 per trip	\$100 copay
Outpatient Benefits		
Doctor's Office Visits	\$5 copay (\$25 copay for after-hours care; \$15 copay for specialist visit)	\$15 copay
Preadmission Diagnostic X-ray and Lab Tests	Included in office visit copay	No charge
Routine Checkups		
– Adults	No charge	No charge
– Children Under 17	No charge	No charge
Immunizations	\$5 copay; no charge if preventive	\$15 copay; no charge if preventive
Outpatient Surgical Services	\$50 copay	\$100 copay
Physical Therapy	\$250 copay inpatient; \$5 copay outpatient; limited to 20 visits per year	\$15 copay; limited to 20 visits per year
Speech Therapy	\$250 copay inpatient; \$5 copay outpatient; limited to 20 visits per year	\$15 copay; limited to 20 visits per year
Maternity	No charge	\$15 copay for 1st visit; no charge thereafter
Prescription Drug Benefits		
Prescription Drugs	\$10 copay for up to 60-day supply	\$15 generic/\$30 brand copay for up to 30-day supply at Kaiser Permanente; \$25 generic/\$40 brand copay for up to 30-day supply at Walgreens
Mental Health Benefits		
Inpatient	\$250 per admission	\$250 copay
Outpatient	\$5 copay	\$15 copay
Substance Abuse Benefits		
Inpatient	\$250 per admission	\$250 copay per admission (detox only)
Outpatient	\$5 copay	\$15 copay
Residential Day	\$250/admission	Not covered
Vision/Hearing Care Benefits		
Eye Exams	\$5 copay	\$15 copay
Lenses	\$150 (adults) or 50% (children) credit toward lenses, contact lenses or frames combined every 2 years	\$100 credit toward lenses, contact lenses or frames combined every 2 years
Frames		
Hearing Exam	\$5 copay	\$15 copay (if exam copay applies)
Hearing Aids	Not covered	Not covered

Kaiser Permanente – Hawaii	Kaiser Permanente – Oregon	Kaiser Permanente – Washington
None	None	None
Individual – \$2,500 (including prescription drugs) Family (3 or more) – \$7,500 (including prescription drugs)	Individual – \$600 Family – \$1,200	Individual – \$1,500 Family – \$3,000
Unlimited	None	Unlimited
\$50/day	No charge	No charge
Inpatient - no charge Outpatient - \$5 copay	Inpatient – no charge Outpatient – \$5 copay	Inpatient – no charge Outpatient – \$10 copay
No charge	No charge	No charge
Authorization required by a Kaiser Permanente Medical Group physician	Authorization required by a Kaiser Permanente physician	Authorization required by a Kaiser Permanente physician
No charge; 120 days per accumulated period	No charge; 100 days per year	No charge; 100 days per year
Not covered	Not covered	Not covered
No charge if authorized	No charge if authorized; limited to 130 days	No charge up to 130 visits per calendar year
No charge if authorized	No charge	No charge
\$50/visit within service area; 20% copay outside of service area (waived if admitted)	\$75 copay (waived if admitted)	\$75 copay (waived if admitted)
\$50/visit within service area; 20% copay outside of service area	\$75 copay (waived if admitted)	\$75 copay (waived if admitted)
No charge	\$75 copay	No Charge
\$15 copay	\$5 copay	\$10 copay
No charge	No charge	No charge
No charge	No charge	No charge
No charge	No charge for routine care	No charge
\$15 copay	\$5 copay	\$10 copay
\$15 copay	\$5 copay; up to 20 visits per therapy, per calendar year	No charge inpatient, \$10 copay outpatient; limited to 60 inpatient days/60 outpatient visits per calendar year (physical and speech therapy combined)
\$15 copay	\$5 copay; up to 20 visits per therapy, per calendar year	
No charge (after confirmation of pregnancy)	Hospitalization – no charge; doctor’s office visit – no charge	No charge inpatient; \$10 copay outpatient; no charge for routine care
\$10 copay for up to 30-day supply	\$5 copay for up to 30-day supply	\$10 copay for up to 30-day supply, preferred generic and/or brand
\$50/day*	No charge	No charge
\$15 copay*	\$5 copay	\$10 copay
\$50/day	No charge	No charge
\$15 copay	\$5 copay	\$10 copay
No charge	No charge	No charge
\$15 copay	\$5 copay	\$10 copay
Not covered	Not covered	Not covered
Not covered	Not covered	Not covered
\$15 copay	\$5 copay	\$10 copay
60% of applicable charges per ear, once every three years	Covered for children only	Not covered

*When prescribed by a physician, services for serious mental illness will be provided in accordance with state law.

RETIREE WITH MEDICARE MA-PD HMOs

	Kaiser Permanente – Colorado	Kaiser Permanente – Georgia
Calendar Year Deductible/Copayment	None	None
Annual Maximum Out-of-Pocket Expenses (for most services)	Individual – \$2,500	Individual – \$2,000
Lifetime Maximum Benefits	None	None
Hospital Benefits		
Room and Board	\$250 copay per admission	\$250 copay per admission
Surgical Services	Inpatient – no charge; outpatient – \$50 copay	Inpatient – no charge; outpatient – \$100 copay
Hospital Services and Supplies	Durable medical equipment covered at 80%	No charge
Hospital Admission Authorization Requirements	No authorization needed when referred by a Kaiser Permanente physician	Authorization required for hospital admissions
Nursing Benefits		
Skilled Nursing Facility Care	No charge; 100 days per period	\$250 copay per admission; 100 days per period
Private Duty Nurses	No charge in service area	No charge if authorized
Home Health Care	No charge in service area	No charge, unlimited visits (private duty nursing excluded)
Hospice Care	No charge (only home-based hospice care)	No charge
Emergency Benefits		
Inpatient	\$50 copay (waived if admitted)	\$50 copay (waived if admitted)
Outpatient	\$50 copay	\$50 copay (waived if admitted)
Ambulance	20% copay; max. of \$195 per trip	\$100 copay
Outpatient Benefits		
Doctor's Office Visits	\$5 copay (\$15 copay for specialist visit)*	\$15 copay
Preadmission Diagnostic X-ray and Lab Tests	Included in office visit copay	Copay varies
Routine Checkups	No charge	No charge
Immunizations	\$5 copay; no charge if preventive	\$15 copay; no charge if preventive
Outpatient Surgical Services	\$50 copay	\$100 copay
Physical Therapy	\$250 copay inpatient; \$5 copay outpatient	\$15 copay outpatient
Speech Therapy	\$250 copay inpatient; \$5 copay outpatient	\$15 copay outpatient
Maternity	No charge	No charge
Prescription Drug Benefits		
Prescription Drugs	\$10 copay for up to 60-day supply	\$15 generic/\$30 brand copay for up to 30-day supply at Kaiser Permanente; \$25 generic/\$40 brand copay for 30-day supply at Rite Aid or Walgreens
Mental Health Benefits		
Inpatient	\$250 per admission	\$250 per admission
Outpatient	\$5 copay	\$15 copay
Substance Abuse Benefits		
Inpatient	\$250 per admission	\$250 per admission; detox and rehab
Outpatient	\$5 copay	\$15 copay
Vision/Hearing Care Benefits		
Eye Exams	\$5 copay	\$15 copay
Lenses	\$150 credit toward lenses, contact lenses or frames combined every 2 years	\$100 credit toward lenses and/or frames combined every 2 years
Frames		
Hearing Exam	\$5 copay	\$15 copay
Hearing Aids	Not covered	Not covered

*All office-administered prescription drugs covered by Medicare Part B (except preventive immunizations and diagnostic drugs) will be subject to 20% coinsurance. This coinsurance will apply to the annual maximum out-of-pocket expenses.

Kaiser Permanente – Hawaii	Kaiser Permanente – Oregon	Kaiser Permanente – Washington
None	None	None
Individual – \$2,500	Individual – \$600	Individual – \$2,500
Unlimited	None	Unlimited
\$50/day	No charge	No charge
No charge	Inpatient - no charge Outpatient – \$5 copay	Inpatient – no charge Outpatient – \$10 copay
No charge	No charge	No Charge
Authorization required by a Kaiser Permanente Medical Group physician	Authorization required by a Kaiser Permanente physician	Authorization required by a Kaiser Permanente physician
No charge; 100 days for Medicare benefits period	No charge; 100 days for Medicare benefits period	No charge; 100 days per Medicare benefit period
Not covered	Not covered	Not covered
No charge if authorized	No charge; unlimited visits	No charge
No charge if authorized	No charge	No charge
\$50 copay (waived if admitted)	\$50 copay (waived if admitted)	\$75 copay (waived if admitted)
\$50 per visit	\$50 copay (waived if admitted)	\$75 copay (waived if admitted)
No charge	\$50 copay	\$0 – \$150 per one-way trip
\$15 copay	\$5 copay	\$10 copay
No charge	No charge	No charge
No charge	No charge	No charge; annual routine physical exam/ annual wellness visit covered once every 12 months
No charge	No charge	No charge
\$15 copay	\$5 copay	\$10 copay
\$15 copay	\$5 copay; unlimited visits	\$10 copay
\$15 copay	\$5 copay; unlimited visits	\$10 copay
No charge (after confirmation of pregnancy)	No charge	Covered at applicable cost shares
\$10 copay for up to 30-day supply	\$5 copay for a 30-day supply	\$3 preferred generic/\$40 preferred brand copay for up to 30-day supply
\$50/day**	No charge	No charge
\$15 copay**	\$5 copay	\$10 copay
\$50/day	No charge	No charge
\$15 copay	\$5 copay	No charge
\$15 copay	\$5 copay	\$10 copay; one routine exam per calendar year
Not covered	\$150 credit toward the purchase of lenses, frames, and/or contact lenses every 24 months	\$150 combined allowance per calendar year
Not covered		
\$15 copay	\$5 copay (adults/children)	\$10 copay
60% of applicable charges per ear, once every three years	Not covered	\$250 allowance, every 24 months

**When prescribed by a physician, services for serious mental illness will be provided in accordance with state law.

COMPARISON OF MEDICAL PLANS

For those enrolled in Medicare Parts A and B

Effective July 1, 2020

Medicare Supplement Plan

- **Anthem Blue Cross III**

Medicare Advantage Prescription Drug (MA-PD) HMOs

- **Kaiser Permanente Senior Advantage**
- **UnitedHealthcare Medicare Advantage HMO**
- **SCAN Health Plan**

This chart represents a summary of benefits only. Additional benefit information is provided by each insurance carrier. This chart does not replace or modify the official documents that legally govern each plan's operation. The benefits offered by all LACERA-administered health plans change when an enrolled member permanently moves outside the provider network area. Moving to a location outside the coverage area can impact your plan's rates and coverage levels.

Comparison of Medical Plans

(For Medicare-Eligible Members Enrolled in Medicare Parts A and B)

Medicare Supplement		Medicare Advantage Prescription Drug (MA-PD) HMOs		
Anthem Blue Cross III		Kaiser Permanente Senior Advantage ⁶	SCAN ¹	UnitedHealthcare Medicare Advantage HMO
Outpatient Benefits				
Doctor's Office Visit	20% of Medicare-approved charges	\$5 copay	\$5 copay	\$5 copay
Preadmission X-ray and Lab Tests	20% of Medicare-approved charges	No charge	No charge	No charge with an office visit copay
Routine Checkups	Not covered	No charge	\$5 copay	No charge
Immunizations	Not covered	No charge	No charge	No charge with an office visit copay
Outpatient Surgical Services	20% of Medicare-approved charges	\$5 copay per procedure	No charge	No charge
Physical Therapy	20% of Medicare-approved charges	\$5 copay	\$5 copay	No charge with an office visit copay
Speech Therapy	20% of Medicare-approved charges	\$5 copay	\$5 copay	No charge with an office visit copay
Maternity	Covered the same as an illness for services covered by Medicare	\$5 copay	Covered as any illness	Covered in accordance with Medicare guidelines
Chiropractic Care	20% of Medicare-approved charges	\$5 copay for Medicare-covered services ³	\$5 copay for Medicare-covered services ³	\$5 copay for Medicare-covered services ³
Transportation	Not covered	Not covered	No charge for unlimited number of rides to medical or dental appointments	Not covered
Prescription Drug Benefits				
Prescription Drugs	Retail: 80% in-network, 60% out-of-network Mail order: \$10 generic/\$30 brand/\$50 non-preferred brand/\$150 specialty copay for mail order for 90-day supply ⁴	\$7 copay for up to 100-day supply; covers dental prescriptions	Retail: \$7 generic/\$15 brand for 30-day supply Mail order: \$7 generic/\$15 brand for 90-day supply Generic drug discounts at Preferred Network Pharmacies (CVS, Rite-Aid, Costco, Vons, Ralphs): \$2 Retail/\$4 Mail-Order	\$7 copay for 30-day supply (or for 90-day mail order supply for maintenance medications only)
Mental Health and Substance Abuse Benefits				
Inpatient	Plan pays all Medicare inpatient deductibles for approved Medicare days; 190-day lifetime maximum	No charge; for unlimited number of days	No charge; 90 days per benefit period. 190-day lifetime maximum in Medicare facility. ²	No charge; 190-day lifetime maximum if admitted to Medicare-approved psychiatric hospital
Outpatient	20% of Medicare-approved charges; up to 50 professional visits per year	\$5 copay for each visit per calendar year for an unlimited number of visits	\$5 copay for each visit per calendar year. No charge for severe mental illness	\$5 copay; unlimited visits
Substance Abuse	20% of Medicare-approved charges	Inpatient: No charge as per plan limitations; Outpatient: \$5 per individual visit; \$2 per group visit	\$5 copay; unlimited visits	Same as Mental Health Inpatient and Outpatient
Vision Benefits				
Eye Exams	Not covered	\$5 copay	\$5 copay for Medicare-covered, medically-necessary eye exam	\$5 copay
Lenses	Not covered unless 1st lens after eye surgery	Eyewear (frames/lenses/contacts) purchased from plan optical sales every 24 months; \$150 allowance	Not covered	Not covered
Frames	Not covered unless after eye surgery		Not covered	Not covered
Hearing Care Benefits				
Hearing Exams	One per calendar year; 80%	\$5 copay	\$5 copay	\$5 copay
Hearing Aids	50% up to \$300 lifetime maximum	Not covered	\$600 allowance, every 24 months	Not covered

Comparison of Medical Plans

(For Medicare-Eligible Members Enrolled in Medicare Parts A and B)

	Medicare Supplement	Medicare Advantage Prescription Drug (MA-PD) HMOs		
	Anthem Blue Cross III	Kaiser Permanente Senior Advantage	SCAN ¹	UnitedHealthcare Medicare Advantage HMO
Calendar Year Deductibles	None	None	None	None
Annual Maximum Out-Of-Pocket Expenses (for most services)	None	Maximum copayments of \$1,500 – individual \$3,000 – family	\$3,400	\$6,700
Lifetime Maximum Benefits	Unlimited	Unlimited	Unlimited	Unlimited
Hospital Benefits				
Room and Board	Plan pays all Medicare inpatient deductibles for approved Medicare days	No charge	No charge	No charge
Surgical Services	Plan pays all Medicare inpatient deductibles for approved Medicare days	No charge	No charge	No charge
Hospital Services and Supplies	Plan pays all Medicare inpatient deductibles for approved Medicare days	No charge	No charge	No charge
Nursing Benefits				
Skilled Nursing Facility Care	Plan pays Medicare daily deductible for days 21–100; no coverage beyond 100 days	No charge; 100 days per benefit period in a Medicare-certified facility	No charge; 100 days per benefit period in a Medicare-certified facility	No charge; 100 days per benefit period in a Medicare-certified facility
Private Duty Nurses	Not covered	No charge if authorized by a Kaiser Permanente physician	No charge when medically necessary only, per Medicare guidelines	No charge when medically necessary only, per Medicare guidelines
Home Healthcare	Plan pays nothing except 20% of the Medicare-approved amount for durable medical equipment only	No charge for Medicare-covered Home Health and no charge for part-time intermittent care if authorized by a Kaiser Permanente physician	No charge for Medicare-covered Home Health. See (*) below for expanded coverage info	No charge when medically necessary only, per Medicare guidelines
Hospice Care	100% of all remaining costs not covered by Medicare	No charge if authorized by a Kaiser Permanente physician	No charge	No charge, provided care is in accordance with Medicare guidelines
Emergency Benefits				
Inpatient	Plan pays all Medicare inpatient deductibles for approved Medicare days	\$5 copay; waived if admitted	No charge	No charge
Outpatient	20% of Medicare-approved charges	\$5 copay; waived if admitted	\$25 copay; waived if admitted	\$50 copay; waived if admitted
Ambulance	20% of Medicare-approved charges	No charge for emergency	No charge	No charge (if medically necessary)

¹ SCAN includes expanded coverage for Independent Living Power™ services, which are only available in Los Angeles, Orange, Riverside, San Bernardino, and San Diego Counties. Qualifying members are eligible for up to \$650 per month of these additional services.

- No charge for personal care coordination via phone
- No copay for emergency response system
- \$15 copay per visit for alternative caregiver visit to a member's home when his or her regular caregiver is not available
- \$15 copay per visit for adult day care to provide relief for regular caregiver
- No copay for up to five days in a facility when regular caregiver is unavailable
- \$15 copay per visit for transportation escort to medical, dental, optometric or other necessary appointments
- \$15 copay per visit for personal care such as assistance with bathing, dressing, eating, getting in and out of bed, moving about/walking and grooming
- \$15 copay per visit for homemaker services such as light cleaning, grocery shopping, laundry and meal preparation
- No copay for bathroom durable medical equipment
- No copay for home-delivered meals
- No copay for inpatient custodial care up to 5 days in a facility. Medicare will not pay for a stay in a facility if the services received are primarily for those purposes.
- SilverSneakers by Tivity Health Fitness Program available at no extra cost.

² Note: Visit or day limits do not apply to certain mental healthcare described in the evidence of coverage.

³ Manual manipulation of the spine to correct subluxation that can be demonstrated by X-ray, when the manipulation is prescribed by plan physician and performed by plan provider.

⁴ Copayment for specialty drugs will be prorated if you receive less than a 90-day supply

⁵ UnitedHealthcare Medicare Advantage HMO includes coverage for Solutions for Caregiver's services — No charge for advice, information and referrals. See the Caregiver flyer included in the materials received after enrollment in the plan for additional services.

⁶ Kaiser Senior Advantage - Silver&Fit Exercise & Healthy Aging available effective July 1, 2019. Contact Kaiser at (877) 750-2746.

Appendix F: Firefighters Local 1014 Medical Plan

The description of the Firefighters Local 1014 Medical Plan is from selected pages of the following website:

<https://www.local1014medical.org/docs/SPD%202019.pdf>

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Medical Benefits at a Glance

The “*Benefits at a Glance*” chart below is an outline of what the **Plan** covers and how costs are shared for covered services. Coverage for services by an **out-of-network** provider is limited to **Reasonable and Customary charges** as determined by Local 1014. For more detailed information about what the **Plan** does and does not cover, refer to the sections of this SPD: **What the Medical Plan Covers** and **What the Medical Plan Does Not Cover**.

Covered Expense	In-Network	Out-of-Network
Lifetime plan maximum	Unlimited	
Annual deductible	First \$200 of allowable expenses per person; \$600 maximum per family	
Coinsurance	Once you meet the annual deductible, the Plan pays 90% and you pay 10% of most allowable expenses , up to the annual out-of-pocket limit. Once the annual out-of-pocket limit is reached, the Plan generally pays 100% of allowable expenses .	Once you meet the annual deductible, the Plan pays 70% and you pay 30% of most allowable expenses , up to the annual out-of-pocket limit. Once the annual out-of-pocket limit is reached, the Plan generally pays 100% of allowable expenses . You also remain responsible for all amounts that exceed Reasonable and Customary charges .
Annual Out-of-Pocket Limit The combined In-Network and Out-of-Network limit is \$1,500. (Does not include annual deductibles, prescription drug or other copayments , non-covered expenses and amounts that exceed Reasonable and Customary)	\$1,000 per person or family per year (after you pay the deductible)	\$1,500 per person or family per year ¹ (after you pay the deductible). You remain responsible for all amounts that exceed Reasonable and Customary charges after the out-of-pocket limit is met.

¹ **Allowable expenses** for **out-of-network** services are limited to **Reasonable and Customary charges**, which are defined as the fees and charges customarily accepted as payment for **Medically Necessary** health care services and supplies in a specific geographical area.





Covered Expense	In-Network	Out-of-Network
Well-baby care (up to age 2, including immunizations)	100%; deductible does not apply	100%; deductible does not apply ¹
Immunizations (age 2 and older)	100%; deductible does not apply	100%; deductible does not apply ¹
Wellness benefit (age 2 and older)	100%; annual preventive exam and screenings, including “fit for life” exam, and immunizations; deductible does not apply	100%; annual preventive exam and screenings, including “fit for life” exam, and immunizations; deductible does not apply ¹
Cancer screenings	100% for Pap smear, mammogram, PSA test and colonoscopy covered according to American Cancer Society guidelines; deductible does not apply	100% for Pap smear, mammogram, PSA test and colonoscopy covered according to American Cancer Society guidelines; deductible does not apply ¹
Accidents	100% of allowable expenses for the first \$5,000 incurred within 180 days of the accident ¹ (deductible and emergency room copay do not apply)	
Ambulance	90% after deductible ¹	
Doctor’s office visits	90% after deductible	70% after deductible ¹
Emergency room	90% after deductible and \$50 copay per visit (copay waived in certain circumstances)	70% after deductible ¹ and \$50 copay per visit (copay waived in certain circumstances)
Hospital care (Providers must request pre-authorization from Anthem Blue Cross)	90% after deductible	70% after deductible ¹
Maternity (No pre-authorization required for uncomplicated obstetrical care)	90% after deductible	70% after deductible ¹

¹ Allowable expenses for out-of-network services are limited to Reasonable and Customary charges, which are defined as the fees and charges customarily accepted as payment for Medically Necessary health care services and supplies in a specific geographical area.

Photo by Dave Mills





Covered Expense	In-Network	Out-of-Network
Surgery [Providers must request pre-authorization from Anthem Blue Cross for all <i>inpatient</i> surgery and any outpatient procedure that might be considered experimental, investigational or cosmetic. Organ and tissue transplants, and weight loss surgery are covered only when performed at an Anthem Blue Cross Center of Expertise (COE)].	90% after deductible	70% after deductible ¹
X-rays and lab tests (excludes periodic preventive exams)	90% after deductible	70% after deductible ¹
Mental health/substance abuse care		
<ul style="list-style-type: none"> • Outpatient care (All day or partial day treatment requires pre-authorization from Anthem Blue Cross) 	90% after deductible	70% after deductible ¹
<ul style="list-style-type: none"> • Inpatient care (All <i>inpatient care</i> requires pre-authorization from Anthem Blue Cross) 	90% after deductible	70% after deductible ¹
Acupuncture	90% after deductible (up to 30 visits per year)	70% after deductible (up to 30 visits per year)
Chiropractic care	90% after deductible (up to 30 visits per year)	70% after deductible (up to 30 visits per year)
Physical therapy (Requires referral by a <i>physician</i> ; additional visits require prior approval by Local 1014's Patient Care Coordinator)	90% after deductible (up to 30 visits per year)	70% after deductible (up to 30 visits per year) ¹

¹ **Allowable expenses** for *out-of-network* services are limited to **Reasonable and Customary charges**, which are defined as the fees and charges customarily accepted as payment for **Medically Necessary** health care services and supplies in a specific geographical area.

Photo by Juan Guerra





Covered Expense	In-Network	Out-of-Network
Occupational therapy (Requires referral by a <i>physician</i> ; additional visits require prior approval by Local 1014's Patient Care Coordinator)	90% after deductible (up to 12 visits per year)	70% after deductible (up to 12 visits per year) ¹
Home health care (Requires pre-authorization by Local 1014's Patient Care Coordinator)	90% after deductible (up to 100 visits per year) ¹	
Hospice care (Requires pre-authorization by Local 1014's Patient Care Coordinator)	90% after deductible ¹	
Extended care facility (Providers must request pre-authorization from Anthem Blue Cross)	90% after deductible (up to 70 days per occurrence) ¹	
Transitional nursing benefit (Requires pre-authorization by Local 1014's Patient Care Coordinator)	90% after deductible (up to 400 hours per lifetime)	70% after deductible (up to \$100 per hour; up to 400 hours per lifetime) ¹
Diabetes self care (Requires pre-authorization by Local 1014's Patient Care Coordinator)	90% after deductible	70% after deductible ¹
Infertility (includes only diagnostic tests and office visits to determine the existence and underlying cause of <i>Infertility</i>)	90% after deductible (benefit limited to \$3,000 per lifetime)	70% after deductible (benefit limited to \$3,000 per lifetime) ¹
Intrauterine Insemination (IUI) (Requires pre-authorization by Local 1014's Patient Care Coordinator)	90% after deductible (benefit limited to \$10,000 per lifetime)	70% after deductible (benefit limited to \$10,000 per lifetime) ¹
Intrauterine Insemination (IUI) Pharmacy (Requires pre-authorization by Local 1014's Patient Care Coordinator)	100% (benefit limited to \$10,000 per lifetime)	
Temporomandibular Joint (TMJ) Disorders	90% after deductible (benefit for non-surgical treatment limited to \$4,000 per lifetime; this limit does not apply to surgical treatment)	70% after deductible ¹ (benefit for non-surgical treatment limited to \$4,000 per lifetime; this limit does not apply to surgical treatment)
Refractive eye surgery (e.g., radial keratotomy, LASIK)	90% after deductible (benefit limited to \$1,500 per eye, \$3,000 per lifetime)	70% after deductible ¹ (benefit limited to \$1,500 per eye, \$3,000 per lifetime)
Medical weight loss program	90% after deductible	70% after deductible ¹
Shoe orthotics	90% after deductible (benefit limited to \$4,000 per lifetime)	70% after deductible ¹ (benefit limited to 4,000 per lifetime)
LiveHealth Online®	100% after \$15 <i>copayment</i>	Not covered
Preventive Body Scan	100% for one scan of the torso region by BSI Scan (not affiliated with Anthem Blue Cross). Repeat preventive body scans are covered no more frequently than once every two years; deductible does not apply	Not covered

¹ **Allowable expenses for out-of-network services are limited to Reasonable and Customary charges, which are defined as the fees and charges customarily accepted as payment for Medically Necessary health care services and supplies in a specific geographical area.**

Appendix G: Dental and Vision Plan Description

The dental and vision plan description is from the following area of the LACERA website:

http://www.lacera.com/healthcare/pdf/healthcare_charts/dental_vision_charts.pdf

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DENTAL PLAN

	Cigna Indemnity Dental	Cigna Dental HMO
Individual annual deductible	\$25	None
Family annual deductible	\$50	None
Individual annual maximum benefit	\$1,500	Unlimited
Exams & cleanings	20%*	\$0**
Amalgam – 1 surface, permanent	20%*	\$0**
Amalgam – 2 surface, permanent	20%*	\$0**
Amalgam – 3 surface, permanent	20%*	\$0**
Amalgam – 4 surface, permanent	20%*	\$0**
Resin or composite – anterior	20%*	\$0**
Anterior root canal – permanent	20%*	\$10**
Scaling/root planing – per quad	20%*	\$35**
Simple extraction	20%*	\$10**
Surgical extraction	20%*	\$15 – \$50**
Crown – porcelain to high noble metal	20%*	\$220**
Crown – stainless steel	20%*	\$10**
Post – prefab or crown buildup	20%*	\$40/\$55/\$65**
Orthodontic therapy – child	Not covered	\$2,240**
Orthodontic therapy – adult	Not covered	\$2,840**

* Member pays 20% of usual and customary charges (the maximum amount the plan will pay for a service, based on what providers in that geographic area charge for similar services or supplies). The plan pays 80% after deductible. Procedures with **high** noble gold are covered at 50%, after deductible.

** Member pays this amount, plus additional charges specified in the plan brochure. For post/crown buildup work, the copy amounts apply to different steps in the procedure.

VISION PLAN

Benefit	In-Network Benefits	Out-of-Network Benefits
Spectacle exam*** (Once every 12 months)	\$20 copay; then covered in full. For contact lens fitting and professional services, member pays additional charges	\$25 reimbursement maximum
Lenses (Once every 12 months)		
■ Single vision	\$40 copay; then covered in full	\$35 reimbursement maximum
■ Bifocal	\$40 copay; then covered in full	\$45 reimbursement maximum
■ Trifocal	\$40 copay; then covered in full	\$70 reimbursement maximum
■ Lenticular	\$40 copay; then covered in full	\$130 reimbursement maximum
■ Progressive	\$40 copay; then up to \$70 allowance	\$70 reimbursement maximum
Frames (Once every 24 months)	\$50 allowance	\$35 reimbursement maximum
Contact lenses (one pair or single purchase up to allowed amount with one lifetime maximum)		
■ Hard lenses	\$180 allowance	\$150 reimbursement maximum
■ Soft lenses	\$230 allowance	\$225 reimbursement maximum

*** Spectacle exam includes routine exam, including dilation and refraction.

Appendix H: Medicare Part B Reimbursement Plan Description

The Medicare Part B reimbursement plan description is from the following area of the LACERA website:

http://www.lacera.com/healthcare/Medicare/medicare_a_b.html

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[Medicare Parts A & B Eligibility](#)

[Medicare Part B Reimbursement](#)

[The Value of Medicare Part B](#)

ELIGIBILITY REQUIREMENTS FOR MEDICARE PART A

(Hospital Insurance Coverage)

Medicare Part A is **free** to any person **age 65 or older** who is either:

- Eligible to receive a monthly Social Security benefit, or
- Eligible based on wages on which sufficient Medicare payroll taxes were paid.

You **automatically apply** for Medicare Part A when you apply for Social Security benefits. Your spouse may also qualify for Part A coverage at age 65, based on your eligibility for Social Security. To be eligible for Part A, you **do not** have to enroll in Part B. If you are not eligible for free Part A coverage, you may purchase this coverage.

Medicare Part A is **free** to any person **under age 65** who is **disabled** and has either:

- Received Social Security disability benefits for 24 months as a worker, surviving spouse, or adult child of a retired, disabled, or deceased worker; or
- Accumulated a sufficient number of Social Security credits to be insured for Medicare and meets the requirements of the Social Security disability program.

Effective January 2021, the Medicare Part A premium amount increased to \$471.00 per month for people who are not eligible for premium-free hospital insurance and have fewer than 40 quarters of Medicare-covered employment. Visit [Medicare](#) for more information.

ELIGIBILITY REQUIREMENTS FOR MEDICARE PART B

(Supplementary medical insurance coverage for physicians, labs, testing)

When you enroll in Medicare Part A, you are **automatically enrolled** in Medicare Part B unless you decline it. This rule applies to persons age 65 or older and also to those who are disabled under age 65.

If you pay a premium for Plan A, you must enroll in Part B if you also desire that coverage. The Part B coverage is ordinarily deducted from your Social Security benefit.

If you select a LACERA-administered Medicare plan, you and/or your eligible dependent **may be reimbursed** by LACERA for the Part B premium amount, up to the standard Medicare part B premium amount only. This reimbursement program is subject to annual review by the Board of Supervisors. **Note: For Tier 2 members, the Medicare Part B premium reimbursement amount applies to the member/survivor only (single-party).**

If you or your eligible dependent has fewer than 40 quarters of Medicare-covered employment, you must pay a monthly premium for Part A.

On December 8, 2020, the Board of Supervisors approved continuing the Medicare Part B Premium Reimbursement Program for 2021 for LACERA-administered Medicare Plan enrollees.

[Read more about Part B.](#)

12/14/20

Call Center: 800-786-6464 (M-F 7 AM - 5:30 PM) • Fax: 626-564-6155
 Member Service Center: Temporarily Closed Due To COVID • [Appointment and Workshop Reservation System](#)
 Location: 300 N. Lake Ave. Pasadena, CA 91101 [Map](#) • Mailing Address: PO Box 7060 Pasadena, CA 91109-7060

Appendix I: Historical Information

This section presents historical statistical information on LACERA's membership, liabilities, assets, and costs. There is also a history of changes.

Table I-1: Membership Data

Valuation Date (July 1)	Membership			Payroll (Millions)
	Actives	Vested Terminateds	Retirees and Survivors with Medical	
2006	88,581	7,450	39,078	\$5,307.2
2008	94,415	8,074	40,444	\$6,259.2
2010	94,343	7,917	41,786	\$6,732.7
2012	91,898	7,835	43,897	\$6,630.0
2014	92,393	8,069	45,825	\$6,764.0
2016	95,295	8,207	47,903	\$7,268.6
2017	97,149	8,302	49,109	\$7,743.0
2018	98,415	8,434	50,271	\$7,880.3
2019	99,128	8,593	51,499	\$8,215.4
2020	100,051	8,631	52,589	\$8,682.2

**Table I-2: Liabilities, Assets, and Costs
 (All Dollar Amounts in Millions)**

Valuation Year	Actuarial Accrued Liability	Assets	Unfunded Actuarial Accrued Liability	ARC/ADC ¹	Funded Ratio	ARC/ADC as a % of Pay
2006	\$ 21,215.8	\$ -	\$ 21,215.8	\$ 1,630.7	0.00%	30.73%
2008	\$ 21,863.6	\$ -	\$ 21,863.6	\$ 1,737.0	0.00%	27.75%
2010	\$ 24,031.0	\$ -	\$ 24,031.0	\$ 1,938.4	0.00%	28.79%
2012	\$ 26,952.7	\$ -	\$ 26,952.7	\$ 2,126.1	0.00%	32.07%
2014	\$ 28,546.6	\$ 483.8	\$ 28,062.8	\$ 2,152.3	1.69%	31.82%
2016	\$ 25,912.6	\$ 560.8	\$ 25,351.8	\$ 1,964.4	2.16%	27.03%
2017	\$ 26,300.8	\$ 742.9	\$ 25,557.9	\$ 1,979.8	2.82%	25.57%
2018	\$ 21,066.8	\$ 941.0	\$ 20,125.8	\$ 1,620.2	4.47%	20.56%
2019	\$ 20,752.6	\$ 1,238.5	\$ 19,514.1	\$ 1,551.0	5.97%	18.87%
2020	\$ 21,302.7	\$ 1,492.6	\$ 19,810.1	\$ 1,578.6	7.01%	18.18%

¹ Annual Required Contribution (ARC) through 2017 and Actuarially Determined Contribution (ADC) thereafter

Table I-3: Change History

Valuation Year	Investment Return Assumption		Changes
	Prefunding Agents	Outside Districts	
2006	5.00%	5.00%	Initial OPEB Valuation and Segal actuarial review
2008	5.00%	5.00%	Investigation of Experience Study
2010	5.00%	5.00%	Investigation of Experience Study and Segal actuarial review
2012	4.35%	4.35%	2013 Investigation of Experience Study
2014	3.75%	3.75%	Initial Valuation with OPEB Trust assets
2016	4.50%	4.50%	Initial Valuation reflecting Tier 2, Investigation of Experience Study and Segal actuarial review
2017	4.50%	4.50%	Beginning of annual valuations
2018	6.00%	3.69%	Initial agent Valuation, 2018 Investigation of Experience Study and Cavanaugh Macdonald actuarial review
2019	6.00%	3.69%	ACA Excise Tax and Health Insurer Fee repealed
2020	6.00%	2.30%	2020 Investigation of Experience Study and Cavanaugh Macdonald actuarial review



Los Angeles County Other Postemployment Benefits Program

2020 Investigation of Experience for Other Postemployment Benefits Assumptions

Prepared by:

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Principal and Consulting Actuary

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July 8, 2021

Board of Retirement
Los Angeles County Employees Retirement Association
300 North Lake Avenue, Suite 820
Pasadena, CA 91101

Dear Members of the Board:

It is a pleasure to submit this report of our investigation of the experience of the Los Angeles County Employees Retirement Association (LACERA) Other Postemployment Benefits (OPEB) Program for the period ending June 30, 2020. It has been two years since the last 2018 OPEB experience study. The results of this investigation are the basis for recommended changes in OPEB related actuarial assumptions for the actuarial valuation to be performed as of July 1, 2020.

The purpose of this report is to communicate the results of our review of the OPEB related actuarial assumptions to be used in the completion of the upcoming valuation. Several of our recommendations represent changes from the prior assumptions and are designed to better anticipate the emerging experience of Los Angeles County's OPEB Program administered by LACERA.

We have provided financial information showing the estimated hypothetical impact of the recommended assumptions if they had been used in the July 1, 2019 actuarial OPEB valuation. We believe the recommended assumptions provide a reasonable estimate of anticipated experience affecting LACERA. Nevertheless, the emerging costs will vary from those presented in this report to the extent that actual experience differs from that projected by the actuarial assumptions.

Milliman has developed certain models to estimate the values included in this report. The intent of the models was to estimate the assumed investment earnings, analysis of OPEB demographic assumptions, retiree health claim costs, and annual trends for retiree health benefits. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP). In addition, the valuation results were developed using models intended for valuations that use standard actuarial techniques.

The models rely on data and information as input to the models. We have relied upon certain data and information listed below for this purpose and accepted it without audit. To the extent that the data and information provided is not accurate, or is not complete, the values provided in this report may likewise be inaccurate or incomplete.

Milliman's data and information reliance are listed below. The models, including all input, calculations, and output may not be appropriate for any other purpose.

In preparing this report, we relied without audit on information (some oral and some in writing) supplied by the County, the Superior Court, LACERA's staff; Segal, LACERA's Health Care Benefits Consultant; and Meketa Investment Group, LACERA's general investment consultant. This information includes, but is not limited to benefit descriptions, membership data, and financial information. We used LACERA's benefit provisions as summarized in our July 1, 2019 OPEB Actuarial Valuation Report. In some cases, where the census data was incomplete, we made assumptions as noted in Table C-10 of Appendix C of the July 1, 2019 OPEB Actuarial Valuation Report. In our examination, after discussion with LACERA and making certain adjustments, we have found the data to be reasonably consistent and comparable with data used for other purposes. Since the experience study results are dependent on the integrity of the data supplied, the results can be expected to differ if the underlying data is incomplete or missing. It should be noted that if any data or other information is inaccurate or incomplete, our determinations might need to be revised.

In developing these recommendations, we have reflected an estimate of fees associated with the Affordable Care Act (ACA), which was signed into law in March 2010 and subsequent regulations and acts including the recent Further Consolidated Appropriations Act, 2020 (H.R. 1865). These fees include the Patient Centered Outcomes Research Institute (PCORI) Fee and the Health Insurer Fee in calendar year 2020. There was a calendar year 2019 moratorium on the Health Insurer Fee. H.R. 1865 repealed the Excise Tax and the Health Insurer Fee beginning with calendar year 2021. The OPEB assumptions will reflect changes in future valuations as regulations are released. The trend will be updated for the July 1, 2020 valuation to reflect the July 1, 2021 final annual medical and dental plan rate renewals.

We certify that the assumptions developed in this report satisfy Actuarial Standards Board (ASB) Standards of Practice, in particular, No. 6 (Measuring Retiree Group Benefit Obligations). The assumptions used in this OPEB Investigation of Experience are derived from a combination of assumptions identified during the 2019 LACERA Investigation of Experience for Retirement Benefit Assumptions and collaboration among a group of stakeholder representatives. Demographic assumptions from the latest 2019 Retirement Benefit Investigation of Experience, conducted by Milliman and approved by LACERA's Board of Investments, are integrated into the OPEB Investigation of Experience where they are appropriate for OPEB benefits. Assumptions unique to OPEB are identified, evaluated, and agreed upon collaboratively by the actuaries and consultants representing the OPEB program stakeholders including: Milliman, LACERA's actuary; Cavanaugh Macdonald, LACERA's auditing actuary; Segal, LACERA's Health Care Benefits Consultant; Cheiron, Los Angeles County's actuary; and Rael & Letson, actuary for SEIU Local 721. Types of OPEB specific assumptions include: initial enrollment, plan and tier selection, spouse age difference, and re-enrollment assumptions. The claim cost assumptions and final trend rates reflecting the July 1, 2021 annual medical and dental plan rate renewals will be developed and agreed upon collaboratively with the same LACERA stakeholders during the July 1, 2020 valuation.

Future actuarial measurements may differ significantly from the current measurements presented in this report due to such factors as the following: program experience differing from that anticipated by the economic or demographic assumptions; changes in economic or demographic assumptions; increases or decreases expected as part of the natural operation of the methodology used for these measurements (such as the end of an amortization period or additional cost or contribution requirements based on the program's funded status); and changes in program provisions or applicable law. Due to the limited scope of the assignment, we did not perform an analysis of the potential range of future measurements. The 2023 OPEB Investigation of Experience Study may include a review of the amortization method if guidance from the Actuarial Standard Board is provided beforehand on this topic.

Given the substantial uncertainty regarding the impact of COVID-19 on plan costs, including whether the pandemic will increase or decrease costs during the term of our projections, we have chosen not to make an adjustment in the expected plan costs. It is possible that the COVID-19 pandemic could have a material impact on the projected costs.

The assumptions from this July 1, 2020 OPEB Investigation of Experience Report will be used in the forthcoming OPEB funding valuation reports. The funding goals serve as a basis for the separate Government Accounting Standards Board (GASB) Statement Number 75 disclosure report. Actuarial computations under GASB Statement Numbers 74 and 75 are for the purposes of fulfilling financial accounting requirements for LACERA, Los Angeles County, the Superior Court, and SCAQMD (the agents) respectively. The GASB 75 disclosure report needs to meet the requirements of these standards which include but are not limited to a different discount rate and actuarial cost methodology. Determinations for purposes other than meeting these financial accounting requirements may be significantly different from the results contained in this valuation report. Accordingly, additional determinations may be needed for other purposes.

Milliman's work is prepared solely for the internal business use of LACERA. To the extent that Milliman's work is not subject to disclosure under applicable public records laws, Milliman's work may not be provided to third parties without Milliman's prior written consent. Milliman does not intend to benefit or create a legal duty to any third-party recipient of its work product.

Milliman's consent to release its work product to any third party may be conditioned on the third party signing a Release, subject to the following exception(s):

- (a) LACERA may provide a copy of Milliman's work, in its entirety, to LACERA's professional service advisors who are subject to a duty of confidentiality and who agree to not use Milliman's work for any purpose other than to benefit LACERA.
- (b) LACERA may provide a copy of Milliman's work, in its entirety, to other governmental entities, as required by law.

No third-party recipient of Milliman's work product should rely upon Milliman's work product. Any third party recipient of Milliman's work product, including Los Angeles County, the Superior Court, the South Coast Air Quality Management District, Local Agency Formation Commission, Los Angeles County Office of Education, and Little Lake Cemetery District who desires professional guidance should not rely upon Milliman's work product, but should engage qualified professionals for advice appropriate to their own specific needs.

We would like to express our appreciation to LACERA staff members, Los Angeles County, SEIU Local 721, Cavanaugh Macdonald, Segal, Rael & Letson, Cheiron, and Meketa Investment Group who gave substantial assistance in supplying the data on which this report is based.

The consultants who worked on this assignment are employee benefit and health actuaries. Milliman's advice is not intended to be a substitute for qualified legal or accounting counsel.

On the basis of the foregoing, we hereby certify that, to the best of our knowledge and belief, this report is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

We are members of the American Academy of Actuaries and meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained herein.

We respectfully submit the following report and we look forward to discussing it with you.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert L. Schmidt".

Robert L. Schmidt, FSA, EA, MAAA
Principal and Consulting Actuary

RLS/JOJ/bh

A handwritten signature in black ink, appearing to read "Janet O. Jennings".

Janet O. Jennings, ASA, MAAA
Consulting Actuary

Table of Contents

	<i>Page</i>
Section 1	Executive Summary and Recommendations..... 1
Section 2	Introduction.....5
Section 3	Initial Enrollment11
Section 4	Plan and Tier Selection19
Section 5	Retirement of Vested Terminated Members35
Section 6	Other OPEB Demographic Assumptions39
Section 7	OPEB Economic Assumptions41
Appendix A	Proposed Actuarial Procedures and Assumptions55

Section 1 Executive Summary and Recommendations

Overview



This is a study of the OPEB related assumptions of the Los Angeles County OPEB Program for the period ending June 30, 2020. It includes a discussion of the OPEB-related economic and demographic actuarial assumptions. These assumptions were set initially for the July 1, 2006 inaugural OPEB valuation. An Investigation of Experience was conducted in 2008 for the July 1, 2008 OPEB valuation, in 2010 for the July 1, 2010 and July 1, 2012 OPEB valuations, in 2013 for the July 1, 2014 OPEB Valuation, in 2016 for the July 1, 2016 and July 1, 2017 OPEB Valuations, and in 2018 for the July 1, 2018 and July 1, 2019 Valuations. Now that two additional years have passed since the 2018 Investigation of Experience, we have more information with which to test the validity of the assumptions of the program. In addition, the retirement benefit related assumptions used for pension benefits were studied in 2019. Some of those assumptions are also used in the OPEB valuations. For consistency, changes to those assumptions will continue to be made in future OPEB valuations. The next OPEB investigation of experience study is scheduled for 2023.

The OPEB funding valuations starting with the July 1, 2018 report have been under an agent structure with results shown by agent. This 2020 OPEB Investigation of Experience Study reviews experience for all OPEB program participants (members) combined regardless of agency. Assumptions are also studied and considered on a combined basis.

This report recommends several assumption changes that result in an Actuarially Determined Contribution (ADC) rate increase of 0.36% of payroll. Where the recommended assumptions are different from the current assumptions, the recommended assumptions are highlighted in yellow.

Summary

This Section of the report includes a brief summary of each of the other sections of the report, our recommendations for changes in the current actuarial assumptions, and the financial impact of the recommendations as adopted at the March 3, 2021 LACERA's Board of Retirement meeting.

Healthcare Tier

Employees who were hired after June 30, 2014 are covered by Tier 2 of the Los Angeles County OPEB Program. Given the subsidy for members in Tier 2 applies to retiree-only coverage and the Tier 2 benchmark is different than Tier 1, we have evaluated plan and tier selection of Tier 1 members separately from Tier 2 members.

Section 2 Introduction

Just as certain investment choices have an associated "investment risk", choices in actuarial assumptions have an associated "actuarial risk." Determining the OPEB liabilities and costs is dependent on the assumptions we use to project the future benefit payments and then to discount the value of future benefits to determine the present values. Thus, it is important that the agents and LACERA understand the sensitivity of the actuarial calculations to the underlying assumptions.

Section 2 provides an introduction to the process of setting OPEB demographic and economic actuarial assumptions. It discusses the following:

- The “actuarial risk” associated with setting actuarial assumptions
- An overview of the presentation of results you will see in this report
- Our philosophy in setting actuarial assumptions
- Actuarial Standard of Practice No. 6
- Actuarial Standard of Practice No. 27
- Actuarial Standard of Practice No. 35

**Section 3
Initial Enrollment**

Section 3 discusses the probability of initial enrollment of current active and vested terminated Tier 1 members who are anticipated to retire in the future for both medical and dental/vision coverage. We are recommending adjustments from the current assumptions to reflect recent experience while achieving an actual-to-expected enrollment ratio of 100% for both medical and dental/vision. Since there is insufficient information regarding initial enrollment for Tier 2, we recommend the same initial enrollment assumptions for both Tier 1 and Tier 2.

**Section 4
Plan and Tier
Selections**

Section 4 discusses the probability of medical and dental/vision plan and tier selection upon retirement and attainment of age 65 for healthcare Tiers 1 and 2. We are recommending changes to these assumptions to reflect recent plan and tier selection patterns.

**Section 5
Retirement of Vested
Terminated Members**

Section 5 discusses the assumption for retirement of vested terminated members. For all groups including General Plans A, B, C, D, and G, General Plan E, and Safety Plans A, B, and C, the actual retirements have been lower than our assumptions, and we recommend changes to these assumptions to bring them closer to actual experience. Experience from the five-year period ended June 30, 2020 was used. We recommend the same assumptions for both Tier 1 and Tier 2.

**Section 6
Other OPEB
Demographic
Assumptions**

Section 6 discusses the following other OPEB demographic assumptions:

- Enrolled spouse age difference
- Medicare enrollment for members in Blue Cross Plan I, Plan II, and Prudent Buyer
- Probability of survivor and new dependent enrollment

For female retirees, we recommend the age difference assumption for male spouses be changed from two years older to one year older. We recommend no change for male retirees to the assumption that spouses are four years younger. We are recommending no change to our Medicare enrollment assumption and are recommending small changes to our survivor enrollment assumptions. We are also recommending that a small change be made to the new dependent enrollment assumption.

We recommend these assumptions be the same for Tier 1 and Tier 2.

**Section 7
OPEB Economic
Assumptions**

Section 7 discusses the investment earnings and health cost trend assumptions. Based on a decision made by the Board of Investments in January 2020 to use economic alternative A, we are proposing continuing to use retirement alternative A inflation and general wage increases of 2.75% and 3.25% respectively. This is

consistent with the 2019 Retirement Benefit Investigation of Experience and is the same as the July 1, 2020 retirement funding valuation. We recommend an investment earnings assumption of 6.00% for agents that are prefunding through the OPEB Trust. For agents that are not prefunding through the OPEB Trust, we recommend an investment earnings assumption of 2.3%, based on the County's general fund expected return. For the health cost trend rates, we utilized the updated version of the Getzen trend model sponsored by the Society of Actuaries. Based on this information, we are recommending changes to the trend assumptions. The first-year trend assumptions will be updated to reflect the final July 1, 2021 annual medical and dental plan rate renewals.

Financial Impact

The assumption changes in total are projected to increase the Actuarial Accrued Liability (AAL) by 1.51%, increase the Normal Cost Rate by 0.18% of payroll, and increase the Actuarially Determined Contribution (ADC) by 0.36% of payroll.

Exhibit 1-1 summarizes the financial impact of the assumption changes. It shows the impact on the Actuarial Accrued Liability, Normal Cost Rate, and Actuarially Determined Contribution of each individual assumption change. This is based solely on the impact the new assumptions would have had on the July 1, 2019 OPEB valuation results without the Excise tax. Note that the relative impact of the various assumption changes by component is somewhat dependent on the order in which they are evaluated. For this study, the impact from the 2019 retirement demographic assumption changes are not applicable because the assumptions based on the 2019 Retirement Benefit Investigation of Experience for LACERA have already been reflected in the July 1, 2019 OPEB valuation results.

Future Amortization Considerations

The current ADC amortization method is 30-year level percent of pay on an open basis. Once guidance on OPEB amortizations methods from the Actuarial Standards Board is provided, Milliman will work with LACERA and the stakeholders on possible modifications. Possible considerations include the following:

- Shortening the amortization period
- Closed versus open amortization
- Layering of amortization bases
- Level dollar or level percentage of pay

The transition methodology will also be evaluated.

**Exhibit 1-1
 Hypothetical Results of July 1, 2019 Valuation
 With Proposed Assumptions**

	Actuarial Accrued Liability ⁽¹⁾	(Assets) ⁽¹⁾	Unfunded Actuarial Accrued Liability ⁽¹⁾	Normal Cost Rate ⁽²⁾	ADC Percentage ⁽²⁾
July 1, 2019 Valuation	\$ 20,752.6	\$ (1,238.5)	\$ 19,514.1	7.58%	18.87%
Assumption Changes					
Initial Enrollment	(87.6)	-	(87.6)	(0.03%)	(0.08%)
Plan and Tier Selection	84.5	-	84.5	0.05%	0.09%
Vested Terminated Commencement	(12.6)	-	(12.6)	0.00%	0.00%
Other OPEB Demographic	21.1	-	21.1	0.03%	0.04%
Trend - Without 1st Year Renewal Adjustment	304.7	-	304.7	0.13%	0.31%
Discount Rate	3.5	-	3.5	0.00%	0.00%
Total Assumption Changes	\$ 313.6	\$ -	\$ 313.6	0.18%	0.36%
July 1, 2019 Valuation with Assumption Changes	\$ 21,066.2	\$ (1,238.5)	\$ 19,827.7	7.76%	19.23%

(1) In millions of dollars

(2) Expressed as a percentage of payroll

Section 2 Introduction



While our goal is to make the best possible estimate of future experience, it is important for the Board to recognize that the future will almost certainly differ from our current best efforts to forecast it. Routine scheduled reevaluations of the actuarial assumptions, such as through this experience investigation, are a sound methodology to identify where assumptions differ from emerging experience and to fine-tune the actuarial estimates to keep them as close as possible to emerging experience.

OPEB actuarial assumptions can be broken into three broad groups:

- Retirement Benefit Related Assumptions
- OPEB Demographic Assumptions
- OPEB Economic Assumptions

The Retirement Benefit Related Assumptions were studied in Milliman’s 2019 Retirement Benefit Investigation of Experience for LACERA. The focus of this study is the OPEB Demographic Assumptions. This section, however, encompasses all three types of assumptions and provides an overview of the process and importance of setting actuarial assumptions.

The history of assumption studies for this program is shown below.

<u>Year</u>	<u>Assumptions Studied</u>
2006	OPEB Demographic and Economic Assumptions
2008	OPEB Demographic and Economic Assumptions
2010	OPEB Demographic and Economic Assumptions
2013	OPEB Demographic Assumptions
2014	OPEB Economic Assumptions
2016	OPEB Demographic and Economic Assumptions
2017	OPEB Economic Assumptions
2018	OPEB Demographic and Economic Assumptions

Due to the timing requirements of GASB 74 and 75 along with the audit schedule, the experience study is performed on a two-year cycle, from 2016 to 2018, and 2018 to 2020. After 2020, we will return to a three-year cycle. These OPEB experience studies are one year after the study of assumptions for LACERA’s retirement benefit program beginning with year 2020.

Funding and Valuation Principles and “Actuarial Risk”

Just as certain investment choices have an associated “investment risk,” choices in actuarial assumptions have an associated “actuarial risk.” Our responsibility is to always consider the impact our work will have on future taxpayers and on the participants of the Los Angeles County OPEB Program.

Our estimate of the OPEB liabilities and costs is dependent on the assumptions we use to project the future benefit payments and then to discount the value of future benefits to determine the present values. Thus, it is important that the County understand the sensitivity of the actuarial calculations to the underlying assumptions.

- If actual experience shows that the assumptions significantly overestimated the true cost of the program, decisions for change could be made based on the higher estimated cost levels. This may also result in an overstatement of cost today and the longer-term impact will not be realized until many years in the future when costs may need to be lowered due to the current overstatement.
- If actual experience shows that the assumptions significantly underestimated the true cost of the program, decisions for change could be made based on the lower estimated costs levels. This may result in an unexpected need to increase costs in the future and may lead to budgeting difficulties.
- The valuation is completed annually for the Los Angeles County OPEB Program and presents the costs as of only one date. Further analysis illustrating the potential volatility of the cost results may be needed to fully appreciate the “actuarial risk” associated with actuarial assumptions. These further studies are beyond the scope of this project.

As stated above, the actuarial assumptions can be divided into three groups: retirement benefit related, OPEB demographic, and OPEB economic.

The retirement benefit related assumptions are based on the recommendations from the LACERA 2019 Investigation of Experience as developed under Actuarial Standards of Practice (ASOP) Numbers 27 and 35.

The OPEB demographic assumptions are based on the County OPEB program’s actual experience, adjusted to reflect trends and historical experience. These are developed under ASOP Numbers 6 and 35.

The OPEB economic assumptions must not only reflect the County’s actual experience but also give even greater consideration to the long-term expectation of future economic growth for the nation, as well as the global economy. By long term, we are looking at time periods of from 20 to 40, possibly to 60, years – a much longer time frame than any period investment managers or economists would typically be discussing with you. Since the economic assumptions are for the long-term, it is expected that in the short-term there will be years in which the actual investment return will exceed the actuarial assumption, and there will be years when the actual experience will not meet the assumed rate. It is the expected long-term rate that is used to project and finance the OPEB benefits. These are developed under ASOP Number 27.

Thus, the economic assumptions are much more subjective than the demographic assumptions, and the demographic assumptions are much more dependent on the results of the experience studies.

Overview

This report presents the results of an investigation of the recent actuarial experience of the County OPEB program. We will refer to this investigation as an experience study.

Throughout this report, we refer to “expected” and “proposed” actuarial assumptions. The “expected” assumptions are those used for our actuarial valuation of the County OPEB program dated July 1, 2019. They may also be referred to as the “current” or “old” assumptions. The “proposed” or “recommended” assumptions are those we recommend for use in the OPEB valuation dated July 1, 2020 and for subsequent valuations until further changes are made.

The assumptions used in this OPEB Investigation of Experience are derived from a combination of assumptions identified during the 2019 LACERA Investigation of Experience for Retirement Benefit Related Assumptions and collaboration among a group of stakeholder representatives. Economic and demographic assumptions from the Retirement Benefit Investigation of Experience, conducted by Milliman and approved by LACERA's Board of Investments, are integrated into the OPEB Investigation of Experience. Assumptions unique to OPEB are identified, evaluated, and agreed upon collaboratively by the actuaries and consultants representing the OPEB program stakeholders including: Milliman, LACERA's actuary; Cavanaugh Macdonald, LACERA's auditing actuary; Segal, LACERA's Healthcare Benefits Consultant; Cheiron, Los Angeles County's actuary; and Rael & Letson, actuary for SEIU Local 721. Types of OPEB specific assumptions include: initial enrollment, plan and tier selection, spouse age difference, and re-enrollment assumptions. The OPEB Investigation of Experience is reviewed in conjunction with the approval of the OPEB Valuation by LACERA's Board of Retirement.

This report shows the results of our study of OPEB demographic and economic assumptions. The exhibits are detailed comparisons between the actual and expected experience on both the current and proposed bases.

For each type of assumption, graphs and tables show the actual, the expected (or old), and proposed rates. The exhibits also show the total numbers of actual and expected retirements from vested terminated status, and enrollment probabilities. Ratios larger than 100% on the current basis indicate that the rates may need to be raised; ratios smaller than 100% indicate that rates may need to be lowered.

For the graphical exhibits, the actual rates in this 2020 study and actual rates from the prior 2018 study are shown as bars on the graphs on either a years-of-service basis, or, in the case of retirement rates, on an age-by-age basis. The current, or “expected” rates used in the July 1, 2019 OPEB valuation and the new proposed assumptions are shown as lines on the graphs. Therefore, the assumption changes we are proposing are illustrated by the difference between the two lines in each exhibit.

For the tabular exhibits, the current assumptions, actual rates, and recommended assumptions are identified in the tables. Where the recommended assumptions are different from the current assumptions, the recommended assumptions are highlighted.

Our Philosophy

Similar to an actuarial valuation, the calculation of actual and expected experience is a fairly mechanical process. From one actuary to another, you would expect to see very little difference. However, the setting of assumptions is a different story, as it is much more subjective. In this report, we recommend new assumptions. To help you understand our thought process, here is a brief summary of our philosophy:

- **Don't Overreact:** When we see significant changes in experience, we generally do not adjust our rates to reflect the entire difference. We will generally recommend rates somewhere between the old rates and the new experience. If the experience during the next study shows the same result, we will probably recognize this trend at that point. On the other hand, if the experience returns closer to its prior level, we will not have overreacted, minimizing volatility in results.
- **Anticipate Trends:** If there is an identified trend that is expected to continue, we believe that this should be recognized. An example of this is the initial enrollment assumption. Rather than looking at where all retirees are enrolled today, we consider recent experience in developing this assumption, combined with input from LACERA staff and the stakeholders.
- **Simplify:** Where there is no material difference in results, we attempt to simplify our assumptions and methods. In general, we attempt to identify which factors are significant and eliminate the ones that do not materially improve accuracy.

Actuarial Standard of Practice No. 6

ASOP No. 6 *Measuring Retiree Group Benefit Obligations* provides guidance to actuaries giving advice on selecting assumptions for measuring obligations under OPEB plans.

Each individual OPEB assumption should satisfy the criteria of ASOP No. 6. In selecting OPEB assumptions, the actuary should also consider: the internal consistency between the assumptions, materiality, cost effectiveness, and the combined effect of all assumptions. At each measurement date, the actuary should consider whether the selected assumptions continue to be reasonable, but the actuary is not required to do a complete assumption study at each measurement date. In our opinion, the demographic assumptions recommended in this report have been developed in accordance with ASOP No. 6.

Actuarial Standard of Practice No. 35: Selection of Demographic Assumptions

ASOP No. 35 governs the selection of demographic and other non-economic assumptions for measuring pension and OPEB obligations. ASOP No. 35 states that the actuary should use professional judgment to estimate possible future outcomes based on past experience and future expectations, and select assumptions based upon application of that professional judgment. The actuary should select reasonable demographic assumptions in light of the particular characteristics of the defined benefit plan that is the subject of the measurement.

ASOP No. 35 Steps

The actuary should follow the following steps in selecting the demographic assumptions which pertain to OPEB:

1. Identify the types of assumptions. Types of demographic assumptions include but are not limited to initial enrollment, plan and tier selection, spouse age difference, and re-enrollment assumptions.

The actuary should consider the purpose and nature of the measurement, the materiality of each assumption, and the characteristics of the covered group in determining which types of assumptions should be incorporated into the actuarial model.

2. Consider the relevant assumption universe. The relevant assumption universe includes experience studies or published tables based on the experience of other representative populations, the experience of the plan sponsor, the effects of plan design, general trends, and future expectations.
3. Consider the assumption format. The assumption format includes whether assumptions are based on parameters such as gender, age, service, or calendar year. The actuary should consider the impact the format may have on the results, the availability of relevant information, the potential to model anticipated plan experience, and the size of the covered population.
4. Select the specific assumptions. In selecting an assumption, the actuary should consider the potential impact of future plan design as well as the factors listed above.
5. Select a reasonable assumption. The assumption should be expected to appropriately model the contingency being measured. The assumption should not be anticipated to produce significant actuarial gains or losses.

ASOP 35 General Considerations and Application

Each individual demographic assumption should satisfy the criteria of ASOP No. 35. In selecting demographic assumptions, the actuary should also consider: the internal consistency between the assumptions, materiality, cost effectiveness, and the combined effect of all assumptions. At each measurement date the actuary should consider whether the selected assumptions continue to be reasonable, but the actuary is not required to do a complete assumption study at each measurement date. In our opinion, the demographic assumptions recommended in this report have been developed in accordance with ASOP No. 35.

Actuarial Standard of Practice No. 27

The Actuarial Standards Board has adopted ASOP No. 27, *Selection of Economic Assumptions for Measuring Pension Obligations*. This standard provides guidance to actuaries giving advice on selecting economic assumptions for measuring obligations under defined benefit plans such as LACERA.

Because no one knows what the future holds, the best an actuary can do is to use professional judgment to estimate possible future economic outcomes. These estimates are based on a mixture of past experience, future expectations, and professional judgment. The actuary should consider a number of factors,

including the purpose and nature of the measurement, and appropriate recent and long-term historical economic data. However, the standard explicitly advises the actuary not to give undue weight to recent experience.

ASOP No. 27 states that each economic assumption selected by the actuary should be reasonable. The assumption is reasonable if it has the following characteristics:

- It is appropriate for the purpose of the measurement.
- It reflects the actuary's professional judgment.
- It takes into account relevant historical and current economic data.
- It reflects the actuary's best estimate of future experience and observation of the estimates in market data.
- It has no specific bias (i.e., it is not significantly optimistic or pessimistic) but may specifically make provision for adverse deviation.

Each economic assumption should individually satisfy this standard. Furthermore, with respect to any particular valuation, each economic assumption should be consistent with every other economic assumption over the measurement period.

In our opinion, the economic assumptions we recommend for the Board of Retirement consideration in this report have been developed in accordance with ASOP No. 27.

Section 3 Initial Enrollment



The initial enrollment assumption is used to estimate the probability that a new retiree from active or vested terminated status, who is eligible for retiree health care coverage, will elect to join the OPEB program. For the retiree death benefit coverage, the enrollment assumption is 100% since retirees do not pay for coverage and enrollment is automatic. For retiree medical and dental/vision coverage, we have reviewed recent retiree experience and used an enrollment assumption that is graded by years of service at retirement. The County subsidy for medical and dental/vision coverage is 40% of the benchmark plan rate (or 40% of the premium for the plan elected, if less) for retirees with 10 years of retirement service credit. For each year of service beyond 10 years, the County contributes an additional 4%, up to a maximum of 100% for a retiree with 25 years of service. Since the County subsidy increases with years of service, retirees with more service are more likely to enroll. A retiree with service-connected disability retirement with less than 13 years of service will receive a 50% County subsidy of the benchmark plan rate (or 50% of the premium for the plan elected, if less). If a retiree with service-connected disability retirement has 13 or more years of service, the County subsidy is the same as a non-disabled retiree.

Exhibits 3-1 and 3-2 show a comparison of actual medical enrollees to assumed enrollees for the three-year period ending June 30, 2020 separately for males and females. The results show those who both enrolled at the time of retirement and those who enrolled sometime after retirement.

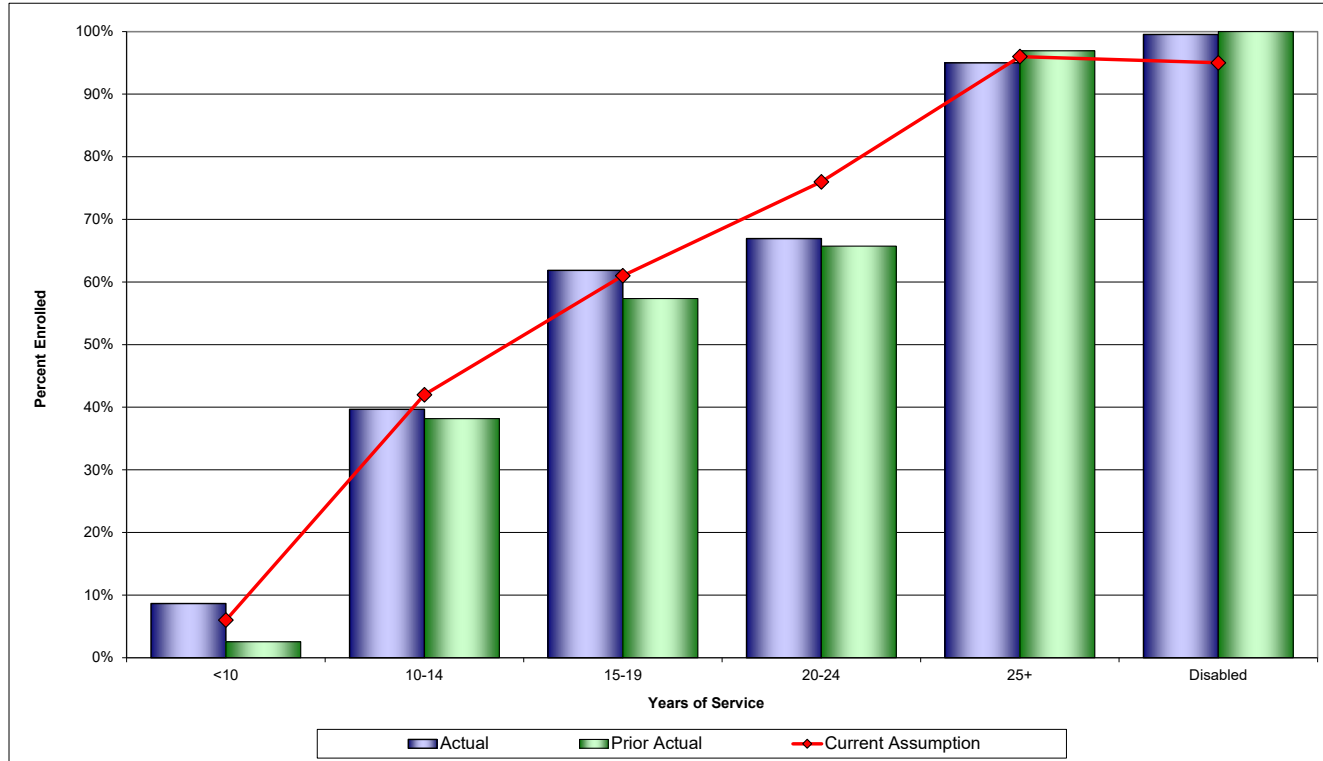
The exhibits show that patterns for males and females are similar. Therefore, we recommend using combined male/female assumptions.

Exhibit 3-3 shows the combined male and female experience, along with the current and proposed assumptions. The proposed assumptions involve adjustments from the current assumptions to achieve an actual-to-expected ratio closer to 100%.

Exhibits 3-4 through 3-6 show the results for the dental/vision enrollees. We are recommending similar assumption changes for the dental/vision enrollment as the medical enrollment.

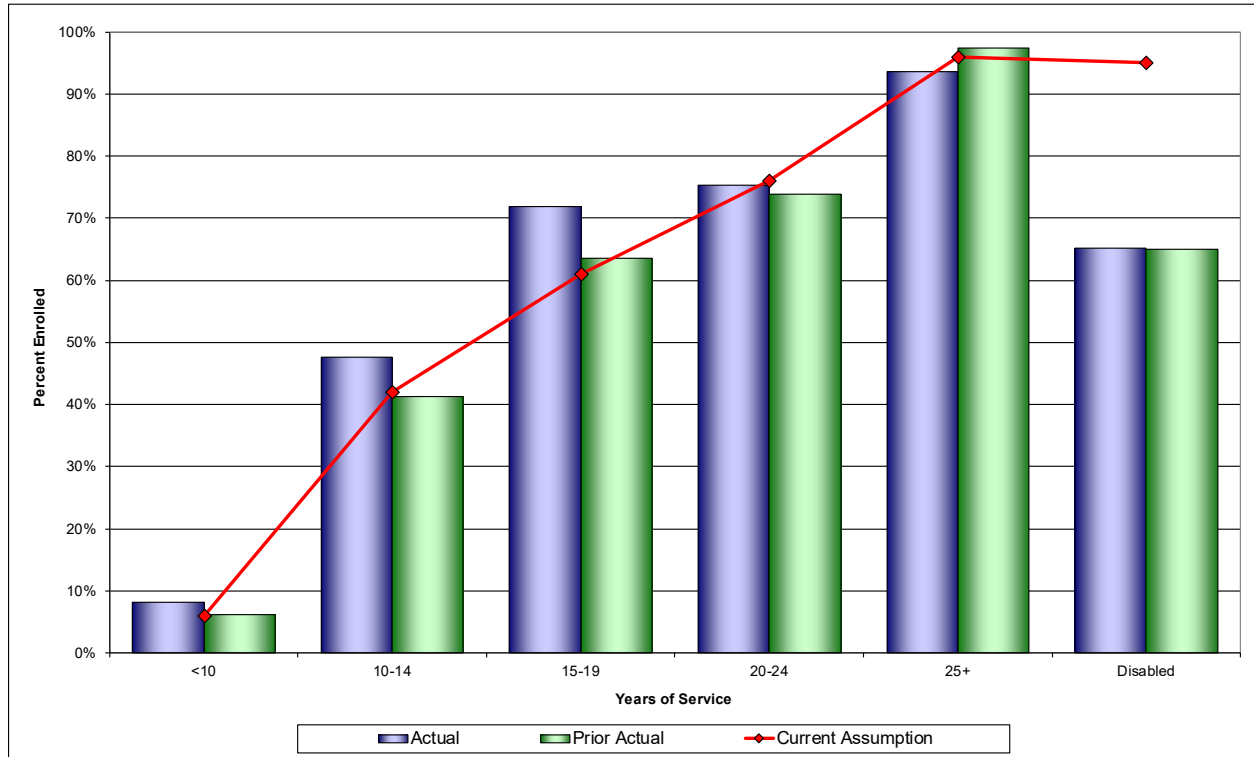
Due to lack of credible experience with respect to Tier 2 enrollees, we recommend the same initial enrollment assumptions for Tier 1 and Tier 2 enrollees. We will monitor Tier 2 as experience develops.

**Exhibit 3-1
 Initial Medical Enrollment – Males**



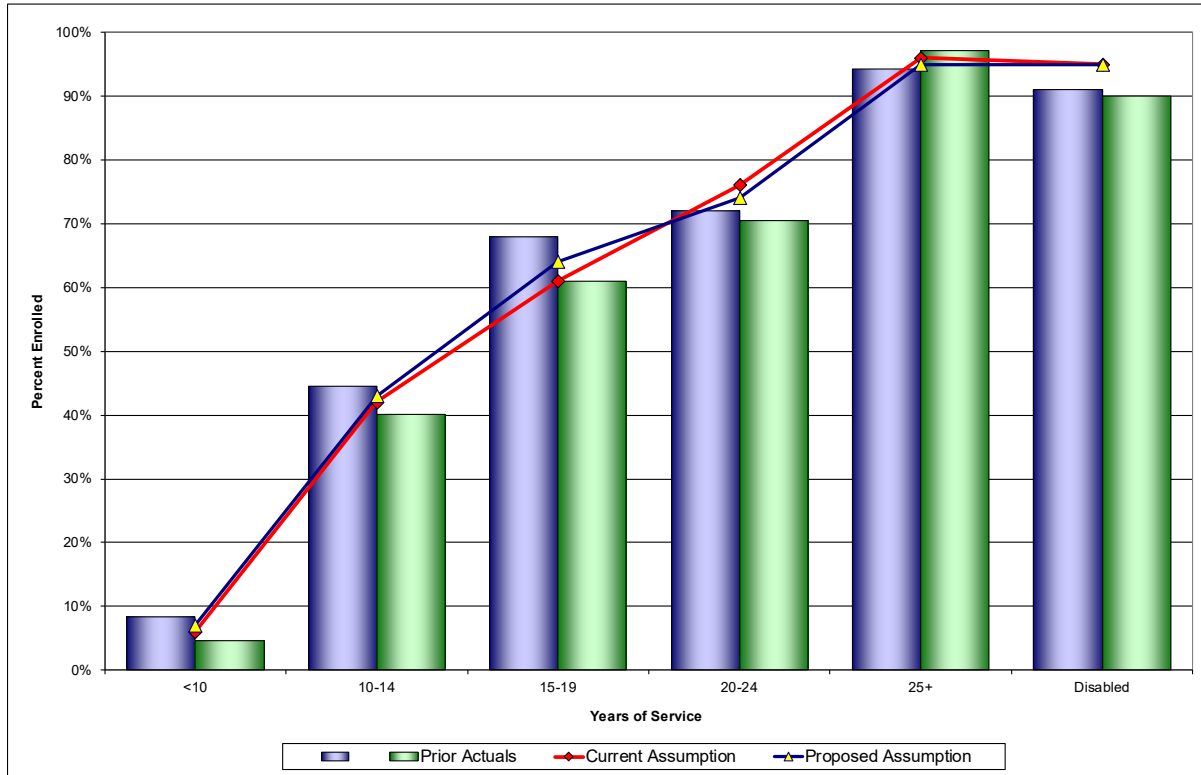
All Enrollees	Current Assumption	Actual
Total Count	3,382	3,338
Actual / Expected	99%	

Exhibit 3-2
Initial Medical Enrollment – Females



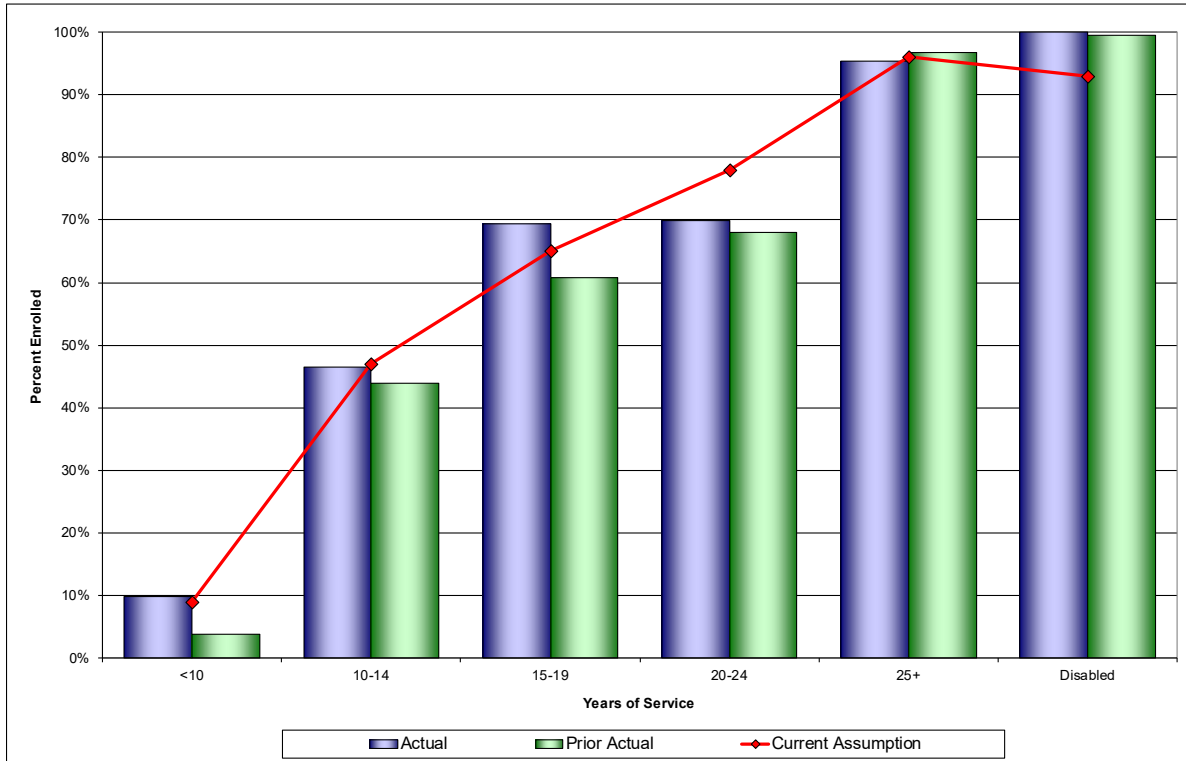
All Enrollees	Current Assumption	Actual
Total Count	4,284	4,254
Actual / Expected	99%	

Exhibit 3-3
Initial Medical Enrollment – Males and Females



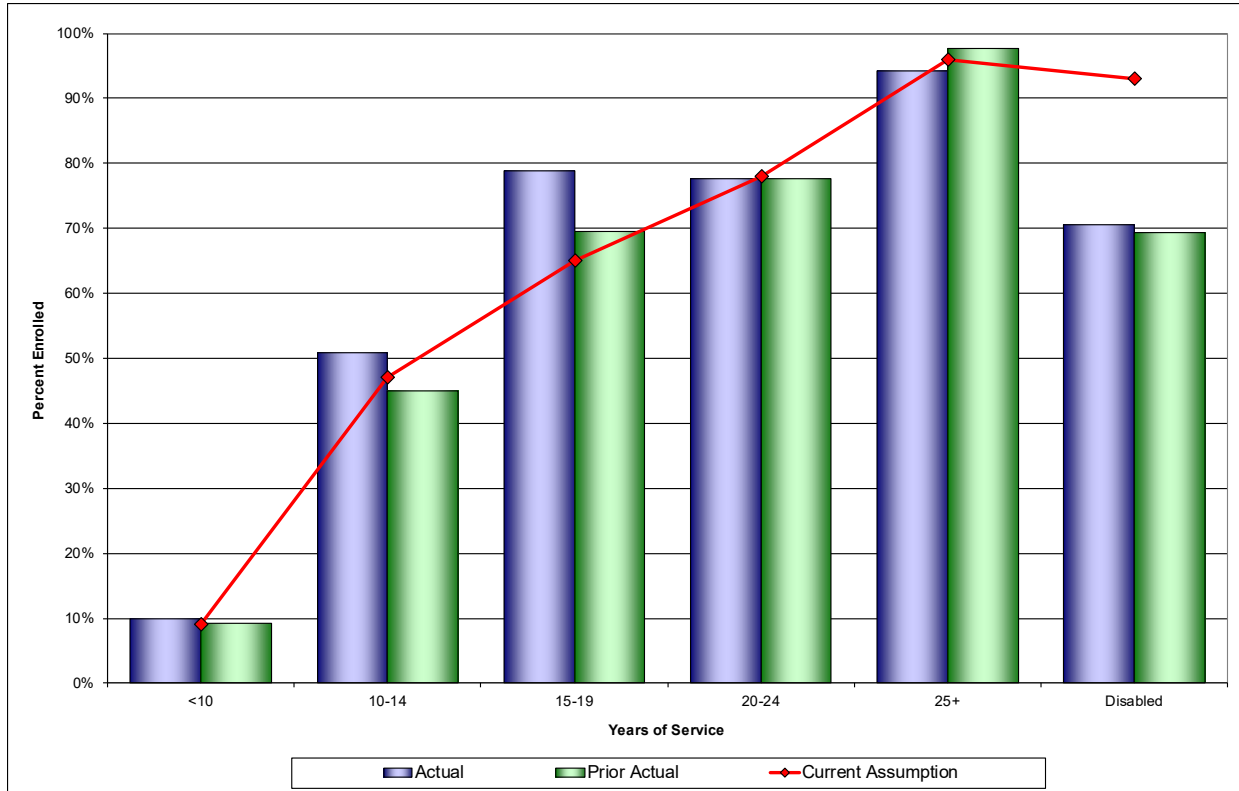
All Enrollees	Current Assumption	Actual	Proposed Assumption
Total Count	7,666	7,592	7,617
Actual / Expected	99%		100%

Exhibit 3-4
Initial Dental/Vision Enrollment – Males



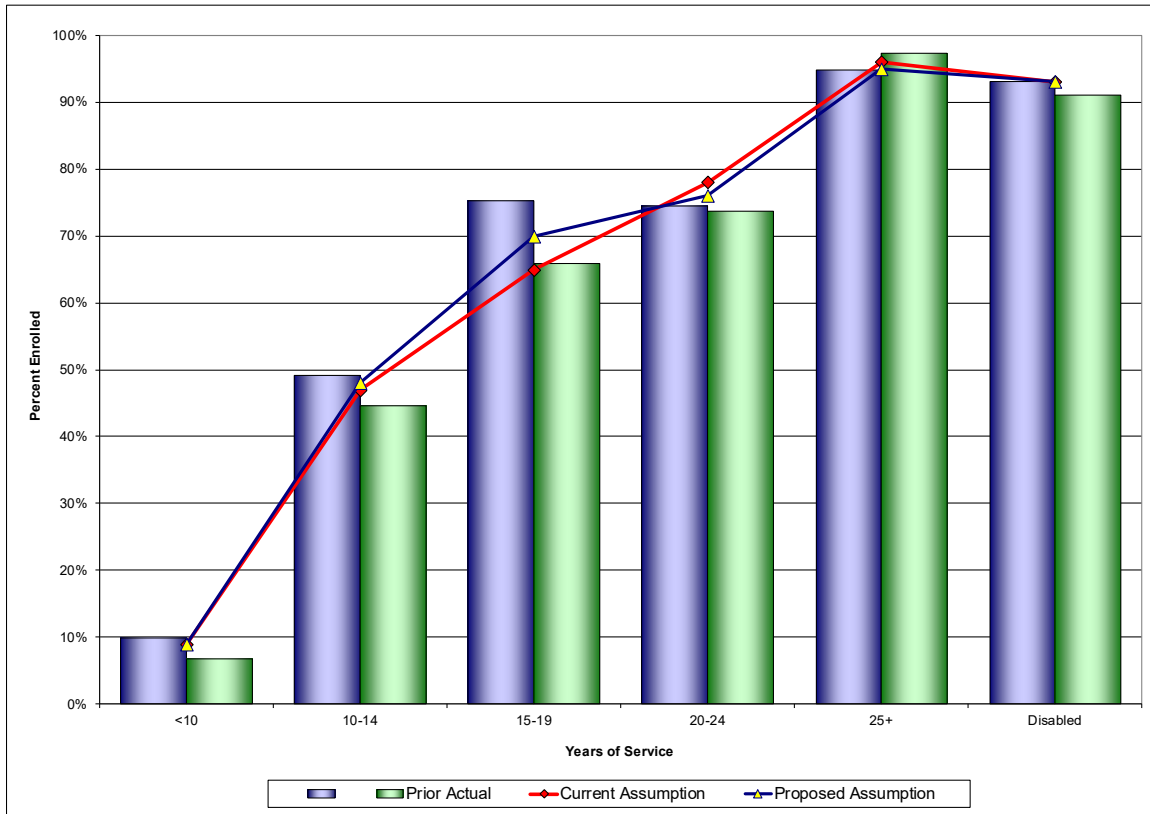
All Enrollees	Current Assumption	Actual
Total Count	3,414	3,411
Actual / Expected	100%	

**Exhibit 3-5
 Initial Dental/Vision Enrollment – Females**



All Enrollees	Current Assumption	Actual
Total Count	4,344	4,353
Actual / Expected	100%	

Exhibit 3-6
Initial Dental/Vision Enrollment – Males and Females



All Enrollees	Current Assumption	Actual	Proposed Assumption
Total Count	7,758	7,764	7,767
Actual / Expected	100%		100%

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Section 4 Plan and Tier Selection



The plan and tier selection assumptions are used to model the range of possible selections for new enrollees. In our July 1, 2019 OPEB valuation, the selections were indexed by deduction code and gender separately for pre-65 and post-65 enrollees. We include only Tier 1 members in this evaluation since there is not yet sufficient experience for Tier 2 members. To determine Tier 2 members plan and tier selection, we considered the fact that the Tier 2 benchmark is based on the Blue Cross III retiree only premium for Medicare-eligible retirees and that it is possible that more retirees could enroll in lower cost plans such as Kaiser or United Healthcare. We also considered the fact that the benchmarks are based on Blue Cross I and Blue Cross II premiums for all retirees of Tier 1 and non-Medicare eligible retirees of Tier 2. The Tier 2 benchmark is for the retiree-only tier and the Tier 1 benchmark is for the tier that the member selects.

Medical Selection Upon Enrollment

Exhibits 4-1 and 4-2 examine the medical plan and tier selection separately for males and females who enrolled before age 65, between July 1, 2018 and June 30, 2020. The plan and tier options were constant throughout the study period. The actual experience is compared to the expected results, along with new proposed assumptions. When the proposed assumptions differ from the current assumptions, changes are highlighted in yellow. At the bottom of the exhibits, the total enrollment for the non-single tiers is totaled. This represents the probability of enrolling at least one dependent.

Exhibits 4-3 and 4-4 are similar to Exhibits 4-1 and 4-2, except that they focus on those who enrolled after age 65. The exhibits show that patterns for males and females are quite different. Based on this, we recommend continuing with separate assumptions for males and females.

Dental/Vision Selection Upon Enrollment

Exhibit 4-5 examines the dental/vision plan and tier selection separately for males and females.

Similar to the medical exhibits, the dental/vision exhibits show that patterns for males and females are quite different, resulting in a recommendation for continuing with separate assumptions for males and females.

Medical Selection for Pre-65 Retirees When They Reach Age 65

When pre-65 retirees reach age 65, they may migrate to a different plan and/or tier. Exhibit 4-6 compares the actual experience to expected results. Based on the updated experience and future expectations, we are recommending changes in the assumed migration patterns. Note that in many cases where retirees are not the same age as their spouses, retirees migrate from a tier with two pre-65 members to a tier where the pre and post-65 members have different plans. For our modeling purposes, we encompassed these into a pure post-65 tier. This is especially evident in the Kaiser plans.

**Exhibit 4-1
 Initial Medical Pre-65 Enrollment – Males**

Non Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only	0.5%	0.5%	0.2%	0.2%	0.3%	0.3%
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse	0.5%	0.5%	0.2%	0.1%	0.3%	0.3%
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family	1.0%	1.0%	1.2%	0.6%	0.9%	0.9%
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children				0.1%		
205	Anthem Blue Cross Prudent Buyer Plan	Minor Survivor						
211	Anthem Blue Cross I	Retiree Only	0.5%	0.5%	0.1%	0.1%	0.5%	0.5%
212	Anthem Blue Cross I	Retiree and Spouse			0.1%	0.2%		
213	Anthem Blue Cross I	Retiree, Spouse and Children	0.5%	0.5%	0.6%	0.4%	0.5%	0.5%
214	Anthem Blue Cross I	Retiree and Children			0.1%	0.1%		
215	Anthem Blue Cross I	Minor Survivor						
221	Anthem Blue Cross II	Retiree Only	4.5%	4.5%	4.2%	4.5%	4.5%	4.5%
222	Anthem Blue Cross II	Retiree and Spouse	12.5%	12.5%	10.1%	11.8%	12.5%	12.5%
223	Anthem Blue Cross II	Retiree, Spouse and Children	12.5%	12.5%	14.0%	16.9%	14.9%	14.9%
224	Anthem Blue Cross II	Retiree and Children			1.7%	1.9%	1.5%	1.5%
225	Anthem Blue Cross II	Minor Survivor						
240	Anthem Blue Cross III	One Medicare				0.1%		
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare				0.1%		
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare						
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare						
244	Anthem Blue Cross III	Retiree and Children 1 Medicare						
245	Anthem Blue Cross III	Retiree and Children 1 Medicare						
246	Anthem Blue Cross III	Retiree and Family 1 Medicare						
247	Anthem Blue Cross III	Retiree and Family 1 Medicare			0.1%	0.1%		
248	Anthem Blue Cross III	Retiree and Family 2 Medicare						
249	Anthem Blue Cross III	Retiree and Family 2 Medicare						
250	Anthem Blue Cross III	Retiree and Family 3 Medicare						
301	Cigna Network Model Plan	Retiree Only			0.2%		0.1%	0.1%
302	Cigna Network Model Plan	Retiree and Spouse	0.5%	0.5%	0.3%	0.1%	0.2%	0.2%
303	Cigna Network Model Plan	Retiree and Family			0.1%	0.1%	0.1%	0.1%
304	Cigna Network Model Plan	Retiree and Children						
305	Cigna Network Model Plan	Minor Survivor						
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only						
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse						
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)						
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children						
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)						
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)						
393	Kaiser (WA)	Retiree and Family						
394	Kaiser (WA)	Retiree and Family						
395	Kaiser (WA)	Retiree and Family						
396	Kaiser (WA)	Retiree and Family						
397	Kaiser (WA)	Retiree and Family						
398	Kaiser (WA)	Retiree and Family						
399	Kaiser (WA)	Retiree and Family						
400	Kaiser (WA)	Retiree and Family						
401	Kaiser (CA)	Retiree Basic (Under 65)	12.0%	12.0%	10.5%	10.0%	11.0%	11.0%
402	Kaiser (CA)	Retiree Cost ("M" Coverage)						
403	Kaiser (CA)	Retiree Risk (Senior Advantage)			0.3%	0.2%		
404	Kaiser (CA)	Retiree Excess I						
405	Kaiser (CA)	Retiree Excess II - Part B						
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)						
411	Kaiser (CA)	Family Basic	35.0%	35.0%	32.1%	29.5%	33.0%	33.0%
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic						
413	Kaiser (CA)	One Advantage, Others Basic			1.7%	2.0%		
414	Kaiser (CA)	One Excess I, Others Basic						
415	Kaiser (CA)	Two+ Cost ("M" Coverage)						
416	Kaiser (CA)	One Advantage, One Cost ("M" Coverage)						
417	Kaiser (CA)	One Excess I, One Cost ("M" Coverage)						
418	Kaiser (CA)	Two+ Advantage				0.1%		
419	Kaiser (CA)	One Excess I, One Advantage						
420	Kaiser (CA)	Two+ Excess I						
421	Kaiser (CA)	Survivor						
422	Kaiser (CA)	One Excess II - Part B, One Basic				0.1%		
423	Kaiser (CA)	One Excess III (MNP), One Basic						
424	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B						
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess III (MNP)						
426	Kaiser (CA)	One Risk, One Excess II - Part B						
427	Kaiser (CA)	One Risk, One Excess III (MNP)						
428	Kaiser (CA)	One Excess I, One Excess II - Part B						
429	Kaiser (CA)	One Excess I, One Excess III (MNP)						
430	Kaiser (CA)	Two Excess II - Part B						
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)						
432	Kaiser (CA)	Two Excess III - Both (MNP)						

**Exhibit 4-1
 Initial Medical Pre-65 Enrollment – Males (continued)**

Non Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
450	Kaiser - Colorado Basic	Retiree Basic						
451	Kaiser - Colorado	Retiree Risk						
452	Kaiser (Other)	Retiree Only						
453	Kaiser - Colorado	Retiree Basic (Two Party)						
454	Kaiser - Colorado	Retiree Basic Family			0.1%	0.1%		
455	Kaiser - Colorado	One Risk, One Basic						
456	Kaiser (Other)	Retiree and Spouse						
457	Kaiser - Colorado	Two Retiree Risk						
458	Kaiser - Colorado	One Risk, Two or More Dependents						
459	Kaiser - Colorado	Two Risk, Two or More Dependents						
460	Kaiser (Other)	Retiree and Spouse						
440	Kaiser - Georgia	One Medicare Member with Part B only						
441	Kaiser - Georgia	One Medicare Member with Part A only						
442	Kaiser - Georgia	One Member without Medicare Part A&B						
443	Kaiser - Georgia	One Medicare Member (Renal Failure)						
444	Kaiser - Georgia	One Medicare + One Medicare with Part B only						
445	Kaiser - Georgia	One Medicare + One Medicare with Part A only						
446	Kaiser - Georgia	One Medicare + One Medicare without Part A&B						
461	Kaiser - Georgia Basic	Basic						
462	Kaiser - Georgia	Retiree Risk						
463	Kaiser - Georgia	Retiree (Two Party)			0.1%	0.1%		
464	Kaiser - Georgia	Retiree Basic Family						
465	Kaiser - Georgia	One Retiree Risk, One Basic						
466	Kaiser - Georgia	Two Retiree Risk						
467	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic						
468	Kaiser - Georgia	Two Retiree Risk, One Basic						
469	Kaiser - Georgia	Three Retiree Risk, One Basic						
470	Kaiser - Georgia	Any other Family, at least one Retiree Risk						
471	Kaiser - Hawaii	Retiree Basic (Under 65)						
472	Kaiser - Hawaii	Retiree Risk						
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B						
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)			0.1%	0.1%		
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)						
476	Kaiser - Hawaii	One Retiree Risk, One Basic						
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic						
478	Kaiser - Hawaii	Two Retiree Risk						
479	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B						
481	Kaiser - Oregon	Retiree Basic (Under 65)						
482	Kaiser - Oregon	Retiree Risk						
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B						
484	Kaiser - Oregon	Retiree Basic (Two Party)			0.1%	0.1%		
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)						
486	Kaiser - Oregon	One Retiree Risk, One Basic						
487	Kaiser - Oregon	Retiree Cost						
488	Kaiser - Oregon	Two Retiree Risk						
489	Kaiser - Oregon	Retiree w/ Part A only						
490	Kaiser - Oregon	Retiree w/ Part B only						
491	Kaiser - Oregon	One Risk, One Medicare Part A only						
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare						
493	Kaiser - Oregon	One Risk, Two Basic						
494	Kaiser - Oregon	Two Risk, One Basic						
495	Kaiser - Oregon	Two Over 65 unassigned Medicare						
496	Kaiser - Oregon	Two Medicare Part A only						
497	Kaiser - Oregon	One Basic, One Medicare Part A only						
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B						
611	SCAN Health Plan	Retiree Only						
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)						
701	United Healthcare Medicare Advantage	Retiree Only						
702	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	0.5%	0.5%	0.5%	0.6%	0.6%	0.6%
703	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)			0.1%			
704	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (1 Medicare)			0.2%	0.3%	0.1%	0.1%
705	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (2 Medicare)						
706	United Healthcare Medicare Advantage	Minor Survivor						
707	United Healthcare	Single	3.5%	3.5%	3.6%	3.5%	3.5%	3.5%
708	United Healthcare	Two-Party	7.0%	7.0%	7.4%	6.3%	7.0%	7.0%
709	United Healthcare	Family	7.5%	7.5%	9.9%	9.5%	8.5%	8.5%
Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Probability of enrolling at least one dependent	79.0%	79.0%	80.8%	81.3%	80.1%	80.1%
Total New Enrollees			1,718	1,920		

* May not total to 100% due to rounding.

**Exhibit 4-1
 Initial Medical Pre-65 Enrollment – Males (continued)**

Firefighters Local 1014 Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
801	Firefighters Local 1014	Med-Member under 65	7.0%	7.0%	7.2%	5.9%	6.5%	6.5%
802	Firefighters Local 1014	Med-Member +1 under 65	39.0%	39.0%	30.1%	31.0%	35.0%	35.0%
803	Firefighters Local 1014	Med-Member +2 under 65	54.0%	54.0%	61.6%	63.0%	58.5%	58.5%
804	Firefighters Local 1014	Med-Member with Medicare						
805	Firefighters Local 1014	Med-Member +1; 1 MDC			1.1%			
806	Firefighters Local 1014	Med-Member +1; 2 MDC						
807	Firefighters Local 1014	Med-Member +2; 1 MDC						
808	Firefighters Local 1014	Med-Member +2; 2 MDC						
809	Firefighters Local 1014	Med-Surv. Sp. Under 65						
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65						
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65						
812	Firefighters Local 1014	Med-Surv. Sp. With MDC						
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC						
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC						
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC						
Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Probability of enrolling at least one dependent			93.0%	93.0%	92.8%	94.1%	93.5%	93.5%
Total New Enrollees					276	304		

* May not total to 100% due to rounding.

**Exhibit 4-2
 Initial Medical Pre-65 Enrollment – Females**

Non Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only	0.5%	0.5%	0.5%	0.5%	0.5%	0.5%
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse	0.5%	0.5%	0.2%		0.1%	0.1%
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family	0.5%	0.5%	0.2%	0.1%	0.1%	0.1%
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children			0.2%	0.1%	0.1%	0.1%
205	Anthem Blue Cross Prudent Buyer Plan	Minor Survivor						
211	Anthem Blue Cross I	Retiree Only	0.5%	0.5%	0.5%	0.3%	0.4%	0.4%
212	Anthem Blue Cross I	Retiree and Spouse	0.5%	0.5%	0.2%	0.3%	0.3%	0.3%
213	Anthem Blue Cross I	Retiree, Spouse and Children			0.1%	0.2%	0.2%	0.2%
214	Anthem Blue Cross I	Retiree and Children			0.2%	0.1%	0.1%	0.1%
215	Anthem Blue Cross I	Minor Survivor						
221	Anthem Blue Cross II	Retiree Only	7.5%	7.5%	7.2%	7.8%	7.7%	7.7%
222	Anthem Blue Cross II	Retiree and Spouse	6.5%	6.5%	5.9%	7.4%	7.0%	7.0%
223	Anthem Blue Cross II	Retiree, Spouse and Children	2.5%	2.5%	2.6%	3.5%	3.0%	3.0%
224	Anthem Blue Cross II	Retiree and Children	1.5%	1.5%	1.5%	1.2%	1.3%	1.3%
225	Anthem Blue Cross II	Minor Survivor						
240	Anthem Blue Cross III	One Medicare	0.5%	0.5%	0.2%	0.2%	0.3%	0.3%
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare				0.1%	0.1%	0.1%
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare						
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare			0.1%	0.3%	0.2%	0.2%
244	Anthem Blue Cross III	Retiree and Children 1 Medicare						
245	Anthem Blue Cross III	Retiree and Children 1 Medicare						
246	Anthem Blue Cross III	Retiree and Family 1 Medicare						
247	Anthem Blue Cross III	Retiree and Family 1 Medicare			0.2%	0.4%	0.3%	0.3%
248	Anthem Blue Cross III	Retiree and Family 2 Medicare						
249	Anthem Blue Cross III	Retiree and Family 2 Medicare						
250	Anthem Blue Cross III	Retiree and Family 3 Medicare						
301	Cigna Network Model Plan	Retiree Only				0.2%		
302	Cigna Network Model Plan	Retiree and Spouse				0.1%		
303	Cigna Network Model Plan	Retiree and Family						
304	Cigna Network Model Plan	Retiree and Children				0.1%		
305	Cigna Network Model Plan	Minor Survivor						
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only						
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse						
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)						
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children						
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)						
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)						
393	Kaiser (WA)	Retiree and Family						
394	Kaiser (WA)	Retiree and Family						
395	Kaiser (WA)	Retiree and Family						
396	Kaiser (WA)	Retiree and Family						
397	Kaiser (WA)	Retiree and Family						
398	Kaiser (WA)	Retiree and Family						
399	Kaiser (WA)	Retiree and Family						
400	Kaiser (WA)	Retiree and Family						
401	Kaiser (CA)	Retiree Basic (Under 65)	28.5%	28.5%	26.4%	24.8%	26.2%	26.2%
402	Kaiser (CA)	Retiree Cost ("M" Coverage)						
403	Kaiser (CA)	Retiree Risk (Senior Advantage)	0.5%	0.5%	0.7%	0.6%	0.6%	0.6%
404	Kaiser (CA)	Retiree Excess I			0.1%			
405	Kaiser (CA)	Retiree Excess II - Part B						
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)						
411	Kaiser (CA)	Family Basic	30.5%	30.5%	22.8%	23.7%	32.0%	32.0%
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic						
413	Kaiser (CA)	One Advantage, Others Basic			7.6%	8.2%		
414	Kaiser (CA)	One Excess I, Others Basic			0.2%	0.1%		
415	Kaiser (CA)	Two+ Cost ("M" Coverage)						
416	Kaiser (CA)	One Advantage, One Cost ("M" Coverage)						
417	Kaiser (CA)	One Excess I, One Cost ("M" Coverage)						
418	Kaiser (CA)	Two+ Advantage			0.1%	0.2%		
419	Kaiser (CA)	One Excess I, One Advantage						
420	Kaiser (CA)	Two+ Excess I						
421	Kaiser (CA)	Survivor						
422	Kaiser (CA)	One Excess II - Part B, One Basic			0.2%	0.2%		
423	Kaiser (CA)	One Excess III (MNP), One Basic						
424	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B						
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess III (MNP)						
426	Kaiser (CA)	One Risk, One Excess II - Part B						
427	Kaiser (CA)	One Risk, One Excess III (MNP)						
428	Kaiser (CA)	One Excess I, One Excess II - Part B						
429	Kaiser (CA)	One Excess I, One Excess III (MNP)						
430	Kaiser (CA)	Two Excess II - Part B						
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)						
432	Kaiser (CA)	Two Excess III - Both (MNP)						

**Exhibit 4-2
 Initial Medical Pre-65 Enrollment – Females (continued)**

Non Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
450	Kaiser - Colorado Basic	Retiree Basic			0.2%	0.1%		
451	Kaiser - Colorado	Retiree Risk						
452	Kaiser (Other)	Retiree Only						
453	Kaiser - Colorado	Retiree Basic (Two Party)						
454	Kaiser - Colorado	Retiree Basic Family						
455	Kaiser - Colorado	One Risk, One Basic						
456	Kaiser (Other)	Retiree and Spouse						
457	Kaiser - Colorado	Two Retiree Risk						
458	Kaiser - Colorado	One Risk, Two or More Dependents						
459	Kaiser - Colorado	Two Risk, Two or More Dependents						
460	Kaiser (Other)	Retiree and Spouse						
440	Kaiser - Georgia	One Medicare Member with Part B only						
441	Kaiser - Georgia	One Medicare Member with Part A only						
442	Kaiser - Georgia	One Member without Medicare Part A&B						
443	Kaiser - Georgia	One Medicare Member (Renal Failure)						
444	Kaiser - Georgia	One Medicare + One Medicare with Part B only						
445	Kaiser - Georgia	One Medicare + One Medicare with Part A only						
446	Kaiser - Georgia	One Medicare + One Medicare without Part A&B						
461	Kaiser - Georgia Basic	Basic			0.1%	0.1%		
462	Kaiser - Georgia	Retiree Risk						
463	Kaiser - Georgia	Retiree (Two Party)			0.1%			
464	Kaiser - Georgia	Retiree Basic Family						
465	Kaiser - Georgia	One Retiree Risk, One Basic						
466	Kaiser - Georgia	Two Retiree Risk						
467	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic						
468	Kaiser - Georgia	Two Retiree Risk, One Basic						
469	Kaiser - Georgia	Three Retiree Risk, One Basic						
470	Kaiser - Georgia	Any other Family, at least one Retiree Risk						
471	Kaiser - Hawaii	Retiree Basic (Under 65)			0.1%			
472	Kaiser - Hawaii	Retiree Risk						
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B						
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)						
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)						
476	Kaiser - Hawaii	One Retiree Risk, One Basic						
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic						
478	Kaiser - Hawaii	Two Retiree Risk						
479	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B						
481	Kaiser - Oregon	Retiree Basic (Under 65)						
482	Kaiser - Oregon	Retiree Risk						
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B						
484	Kaiser - Oregon	Retiree Basic (Two Party)						
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)						
486	Kaiser - Oregon	One Retiree Risk, One Basic						
487	Kaiser - Oregon	Retiree Cost						
488	Kaiser - Oregon	Two Retiree Risk						
489	Kaiser - Oregon	Retiree w/ Part A only						
490	Kaiser - Oregon	Retiree w/ Part B only						
491	Kaiser - Oregon	One Risk, One Medicare Part A only						
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare						
493	Kaiser - Oregon	One Risk, Two Basic						
494	Kaiser - Oregon	Two Risk, One Basic						
495	Kaiser - Oregon	Two Over 65 unassigned Medicare						
496	Kaiser - Oregon	Two Medicare Part A only						
497	Kaiser - Oregon	One Basic, One Medicare Part A only						
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B						
611	SCAN Health Plan	Retiree Only			0.1%			
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)						
701	United Healthcare Medicare Advantage	Retiree Only			0.2%	0.3%	0.2%	0.2%
702	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	2.0%	2.0%	2.1%	1.9%	2.0%	2.0%
703	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)			0.2%	0.1%		
704	United Healthcare Medicare Advantage	Retiree & 2 + Depts. (1 Medicare)	0.5%	0.5%	0.4%	0.4%	0.5%	0.5%
705	United Healthcare Medicare Advantage	Retiree & 2 + Depts. (2 Medicare)						
706	United Healthcare Medicare Advantage	Minor Survivor						
707	United Healthcare	Single	9.0%	9.0%	9.1%	8.1%	8.6%	8.6%
708	United Healthcare	Two-Party	5.5%	5.5%	5.7%	5.6%	5.5%	5.5%
709	United Healthcare	Family	2.5%	2.5%	3.4%	3.1%	2.7%	2.7%
Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Probability of enrolling at least one dependent	53.0%	53.0%	54.4%	57.2%	55.5%	55.5%
Total New Enrollees			1,988	2,082		

* May not total to 100% due to rounding.

**Exhibit 4-2
 Initial Medical Pre-65 Enrollment – Females (continued)**

Firefighters Local 1014 Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
801	Firefighters Local 1014	Med-Member under 65	7.0%	7.0%	66.7%	60.0%	6.5%	6.5%
802	Firefighters Local 1014	Med-Member +1 under 65	39.0%	39.0%			35.0%	35.0%
803	Firefighters Local 1014	Med-Member +2 under 65	54.0%	54.0%	33.3%	40.0%	58.5%	58.5%
804	Firefighters Local 1014	Med-Member with Medicare						
805	Firefighters Local 1014	Med-Member +1; 1 MDC						
806	Firefighters Local 1014	Med-Member +1; 2 MDC						
807	Firefighters Local 1014	Med-Member +2; 1 MDC						
808	Firefighters Local 1014	Med-Member +2; 2 MDC						
809	Firefighters Local 1014	Med-Surv. Sp. Under 65						
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65						
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65						
812	Firefighters Local 1014	Med-Surv. Sp. With MDC						
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC						
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC						
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC						
Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Probability of enrolling at least one dependent			93.0%	93.0%	33.3%	40.0%	93.5%	93.5%
Total New Enrollees					3	5		

* May not total to 100% due to rounding.

Exhibit 4-3
Initial Medical Post-65 Enrollment – Males

Non Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only			0.1%			
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse			0.1%	0.1%		
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family			0.1%			
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children						
205	Anthem Blue Cross Prudent Buyer Plan	Minor Survivor						
211	Anthem Blue Cross I	Retiree Only	0.5%		0.2%	0.1%	0.3%	
212	Anthem Blue Cross I	Retiree and Spouse						
213	Anthem Blue Cross I	Retiree, Spouse and Children				0.1%		
214	Anthem Blue Cross I	Retiree and Children						
215	Anthem Blue Cross I	Minor Survivor						
221	Anthem Blue Cross II	Retiree Only	1.0%		0.8%	0.6%	0.8%	
222	Anthem Blue Cross II	Retiree and Spouse	2.5%		2.4%	2.0%	2.3%	
223	Anthem Blue Cross II	Retiree, Spouse and Children	1.0%		0.9%	0.6%	0.8%	
224	Anthem Blue Cross II	Retiree and Children	0.5%		0.2%	0.1%	0.3%	
225	Anthem Blue Cross II	Minor Survivor						
240	Anthem Blue Cross III	One Medicare	7.0%	8.5%	7.2%	7.3%	7.1%	8.2%
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare			0.2%	0.3%	0.2%	0.2%
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	5.5%	8.0%	5.3%	5.6%	5.5%	7.8%
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare	7.0%	7.0%	7.1%	7.3%	7.1%	7.1%
244	Anthem Blue Cross III	Retiree and Children 1 Medicare						
245	Anthem Blue Cross III	Retiree and Children 1 Medicare	0.5%	1.0%	0.4%	0.3%	0.4%	0.7%
246	Anthem Blue Cross III	Retiree and Family 1 Medicare						
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	1.0%	2.0%	1.2%	1.7%	1.3%	2.1%
248	Anthem Blue Cross III	Retiree and Family 2 Medicare			0.1%	0.1%		
249	Anthem Blue Cross III	Retiree and Family 2 Medicare	0.5%	0.5%	0.5%	0.7%	0.6%	0.6%
250	Anthem Blue Cross III	Retiree and Family 3 Medicare	0.5%	0.5%	0.3%	0.1%	0.3%	0.3%
301	Cigna Network Model Plan	Retiree Only			0.1%	0.1%		
302	Cigna Network Model Plan	Retiree and Spouse			0.1%			
303	Cigna Network Model Plan	Retiree and Family						
304	Cigna Network Model Plan	Retiree and Children						
305	Cigna Network Model Plan	Minor Survivor						
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only						
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse			0.1%	0.1%		
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)						
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children						
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)						
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)						
393	Kaiser (WA)	Retiree and Family						
394	Kaiser (WA)	Retiree and Family						
395	Kaiser (WA)	Retiree and Family						
396	Kaiser (WA)	Retiree and Family						
397	Kaiser (WA)	Retiree and Family						
398	Kaiser (WA)	Retiree and Family						
399	Kaiser (WA)	Retiree and Family						
400	Kaiser (WA)	Retiree and Family						
401	Kaiser (CA)	Retiree Basic (Under 65)			1.2%	1.4%		
402	Kaiser (CA)	Retiree Cost ("M" Coverage)						
403	Kaiser (CA)	Retiree Risk (Senior Advantage)	18.0%	19.5%	17.1%	16.5%	18.0%	19.7%
404	Kaiser (CA)	Retiree Excess I	0.5%		0.3%	0.4%	0.4%	
405	Kaiser (CA)	Retiree Excess II - Part B	1.0%		1.2%	1.6%	1.3%	
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)			0.1%	0.1%		
411	Kaiser (CA)	Family Basic			2.0%	2.2%		
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic						
413	Kaiser (CA)	One Advantage, Others Basic	21.0%	22.5%	21.5%	18.3%	20.8%	22.6%
414	Kaiser (CA)	One Excess I, Others Basic	0.5%		0.3%	0.2%	0.5%	
415	Kaiser (CA)	Two+ Cost ("M" Coverage)						
416	Kaiser (CA)	One Advantage, One Cost ("M" Coverage)						
417	Kaiser (CA)	One Excess I, One Cost ("M" Coverage)						
418	Kaiser (CA)	Two+ Advantage	16.0%	16.0%	13.1%	15.8%	15.9%	16.1%
419	Kaiser (CA)	One Excess I, One Advantage			0.1%	0.3%	0.2%	
420	Kaiser (CA)	Two+ Excess I						
421	Kaiser (CA)	Survivor						
422	Kaiser (CA)	One Excess II - Part B, One Basic	1.0%		0.9%	1.3%	1.2%	
423	Kaiser (CA)	One Excess III (MNP), One Basic						
424	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B						
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess III (MNP)						
426	Kaiser (CA)	One Risk, One Excess II - Part B						
427	Kaiser (CA)	One Risk, One Excess III (MNP)						
428	Kaiser (CA)	One Excess I, One Excess II - Part B						
429	Kaiser (CA)	One Excess I, One Excess III (MNP)						
430	Kaiser (CA)	Two Excess II - Part B			0.2%	0.2%		
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)					0.1%	
432	Kaiser (CA)	Two Excess III - Both (MNP)						

Exhibit 4-3
Initial Medical Post-65 Enrollment – Males (continued)

Non Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
450	Kaiser - Colorado Basic	Retiree Basic						
451	Kaiser - Colorado	Retiree Risk						
452	Kaiser (Other)	Retiree Only						
453	Kaiser - Colorado	Retiree Basic (Two Party)						
454	Kaiser - Colorado	Retiree Basic Family						
455	Kaiser - Colorado	One Risk, One Basic						
456	Kaiser (Other)	Retiree and Spouse						
457	Kaiser - Colorado	Two Retiree Risk						
458	Kaiser - Colorado	One Risk, Two or More Dependents						
459	Kaiser - Colorado	Two Risk, Two or More Dependents						
460	Kaiser (Other)	Retiree and Spouse						
440	Kaiser - Georgia	One Medicare Member with Part B only						
441	Kaiser - Georgia	One Medicare Member with Part A only						
442	Kaiser - Georgia	One Member without Medicare Part A&B						
443	Kaiser - Georgia	One Medicare Member (Renal Failure)						
444	Kaiser - Georgia	One Medicare + One Medicare with Part B only						
445	Kaiser - Georgia	One Medicare + One Medicare with Part A only						
446	Kaiser - Georgia	One Medicare + One Medicare without Part A&B						
461	Kaiser - Georgia Basic	Basic						
462	Kaiser - Georgia	Retiree Risk						
463	Kaiser - Georgia	Retiree (Two Party)						
464	Kaiser - Georgia	Retiree Basic Family						
465	Kaiser - Georgia	One Retiree Risk, One Basic						
466	Kaiser - Georgia	Two Retiree Risk				0.1%		
467	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic						
468	Kaiser - Georgia	Two Retiree Risk, One Basic						
469	Kaiser - Georgia	Three Retiree Risk, One Basic						
470	Kaiser - Georgia	Any other Family, at least one Retiree Risk						
471	Kaiser - Hawaii	Retiree Basic (Under 65)						
472	Kaiser - Hawaii	Retiree Risk						
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B						
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)						
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)						
476	Kaiser - Hawaii	One Retiree Risk, One Basic						
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic						
478	Kaiser - Hawaii	Two Retiree Risk						
479	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B						
481	Kaiser - Oregon	Retiree Basic (Under 65)						
482	Kaiser - Oregon	Retiree Risk						
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B						
484	Kaiser - Oregon	Retiree Basic (Two Party)						
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)						
486	Kaiser - Oregon	One Retiree Risk, One Basic						
487	Kaiser - Oregon	Retiree Cost				0.1%		
488	Kaiser - Oregon	Two Retiree Risk						
489	Kaiser - Oregon	Retiree w/ Part A only						
490	Kaiser - Oregon	Retiree w/ Part B only						
491	Kaiser - Oregon	One Risk, One Medicare Part A only						
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare						
493	Kaiser - Oregon	One Risk, Two Basic						
494	Kaiser - Oregon	Two Risk, One Basic						
495	Kaiser - Oregon	Two Over 65 unassigned Medicare						
496	Kaiser - Oregon	Two Medicare Part A only						
497	Kaiser - Oregon	One Basic, One Medicare Part A only						
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B						
611	SCAN Health Plan	Retiree Only	0.5%	0.5%	0.3%	0.5%	0.5%	0.5%
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)	0.5%	0.5%	0.4%	0.5%	0.5%	0.5%
701	United Healthcare Medicare Advantage	Retiree Only	4.0%	4.0%	4.2%	3.6%	3.8%	3.8%
702	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	4.5%	4.5%	4.6%	3.2%	3.9%	3.9%
703	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)	3.0%	3.0%	3.1%	4.2%	3.7%	3.7%
704	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (1 Medicare)	1.5%	1.5%	1.6%	1.9%	1.7%	1.7%
705	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (2 Medicare)	0.5%	0.5%	0.3%	0.4%	0.5%	0.5%
706	United Healthcare Medicare Advantage	Minor Survivor						
707	United Healthcare	Single						
708	United Healthcare	Two-Party				0.1%		
709	United Healthcare	Family						
Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Probability of enrolling at least one dependent	67.5%	67.5%	67.1%	67.8%	67.8%	67.8%
Total New Enrollees			1,117	1,108		

* May not total to 100% due to rounding.

**Exhibit 4-3
 Initial Medical Post-65 Enrollment – Males (continued)**

Firefighters Local 1014 Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
801	Firefighters Local 1014	Med-Member under 65				16.7%		
802	Firefighters Local 1014	Med-Member +1 under 65						
803	Firefighters Local 1014	Med-Member +2 under 65						
804	Firefighters Local 1014	Med-Member with Medicare	7.0%	7.0%			12.0%	12.0%
805	Firefighters Local 1014	Med-Member +1; 1 MDC			50.0%	16.7%		
806	Firefighters Local 1014	Med-Member +1; 2 MDC	39.0%	39.0%	16.7%		28.0%	28.0%
807	Firefighters Local 1014	Med-Member +2; 1 MDC			33.3%	50.0%		
808	Firefighters Local 1014	Med-Member +2; 2 MDC	54.0%	54.0%		16.7%	60.0%	60.0%
809	Firefighters Local 1014	Med-Surv. Sp. Under 65						
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65						
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65						
812	Firefighters Local 1014	Med-Surv. Sp. With MDC						
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC						
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC						
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC						
Total			100.0%	100.0%	100.0%	100.1%	100.0%	100.0%
Probability of enrolling at least one dependent			93.0%	93.0%	100.0%	83.4%	88.0%	88.0%
Total New Enrollees					6	6		

* May not total to 100% due to rounding.

Exhibit 4-4
Initial Medical Post-65 Enrollment – Females

Non Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only			0.1%	0.1%		
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse						
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family						
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children						
205	Anthem Blue Cross Prudent Buyer Plan	Minor Survivor						
211	Anthem Blue Cross I	Retiree Only			0.1%	0.4%	0.2%	
212	Anthem Blue Cross I	Retiree and Spouse						
213	Anthem Blue Cross I	Retiree, Spouse and Children						
214	Anthem Blue Cross I	Retiree and Children						
215	Anthem Blue Cross I	Minor Survivor						
221	Anthem Blue Cross II	Retiree Only	1.5%		1.6%	1.2%	1.3%	
222	Anthem Blue Cross II	Retiree and Spouse	1.0%		0.8%	0.6%	0.9%	
223	Anthem Blue Cross II	Retiree, Spouse and Children			0.1%	0.2%		
224	Anthem Blue Cross II	Retiree and Children						
225	Anthem Blue Cross II	Minor Survivor						
240	Anthem Blue Cross III	One Medicare	11.5%	13.0%	11.8%	11.5%	11.5%	13.0%
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare			0.1%	0.3%		
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	1.0%	2.0%	1.2%	1.0%	1.0%	1.9%
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare	4.5%	4.5%	4.5%	5.7%	5.1%	5.1%
244	Anthem Blue Cross III	Retiree and Children 1 Medicare			0.1%			
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			0.1%	0.3%	0.1%	0.1%
246	Anthem Blue Cross III	Retiree and Family 1 Medicare						
247	Anthem Blue Cross III	Retiree and Family 1 Medicare			0.1%	0.2%	0.1%	0.1%
248	Anthem Blue Cross III	Retiree and Family 2 Medicare						
249	Anthem Blue Cross III	Retiree and Family 2 Medicare			0.1%	0.2%	0.1%	0.1%
250	Anthem Blue Cross III	Retiree and Family 3 Medicare						
301	Cigna Network Model Plan	Retiree Only						
302	Cigna Network Model Plan	Retiree and Spouse						
303	Cigna Network Model Plan	Retiree and Family						
304	Cigna Network Model Plan	Retiree and Children						
305	Cigna Network Model Plan	Minor Survivor						
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only						
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse						
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)						
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children						
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)						
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)						
393	Kaiser (WA)	Retiree and Family						
394	Kaiser (WA)	Retiree and Family						
395	Kaiser (WA)	Retiree and Family						
396	Kaiser (WA)	Retiree and Family						
397	Kaiser (WA)	Retiree and Family						
398	Kaiser (WA)	Retiree and Family						
399	Kaiser (WA)	Retiree and Family						
400	Kaiser (WA)	Retiree and Family						
401	Kaiser (CA)	Retiree Basic (Under 65)			2.9%	2.7%		
402	Kaiser (CA)	Retiree Cost ("M" Coverage)						
403	Kaiser (CA)	Retiree Risk (Senior Advantage)	38.5%	42.0%	34.1%	33.3%	38.2%	41.7%
404	Kaiser (CA)	Retiree Excess I	1.0%		0.8%	0.9%	1.0%	
405	Kaiser (CA)	Retiree Excess II - Part B	2.5%		2.7%	3.5%	2.5%	
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)						
411	Kaiser (CA)	Family Basic			0.7%	0.8%		
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic						
413	Kaiser (CA)	One Advantage, Others Basic	5.0%	5.5%	4.9%	5.0%	5.0%	5.5%
414	Kaiser (CA)	One Excess I, Others Basic			0.1%	0.1%		
415	Kaiser (CA)	Two+ Cost ("M" Coverage)						
416	Kaiser (CA)	One Advantage, One Cost ("M" Coverage)						
417	Kaiser (CA)	One Excess I, One Cost ("M" Coverage)						
418	Kaiser (CA)	Two+ Advantage	16.5%	17.0%	15.9%	16.0%	16.5%	16.9%
419	Kaiser (CA)	One Excess I, One Advantage			0.1%	0.2%		
420	Kaiser (CA)	Two+ Excess I						
421	Kaiser (CA)	Survivor						
422	Kaiser (CA)	One Excess II - Part B, One Basic	0.5%		0.5%	0.3%	0.5%	
423	Kaiser (CA)	One Excess III (MNP), One Basic						
424	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B						
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess III (MNP)						
426	Kaiser (CA)	One Risk, One Excess II - Part B	0.5%		0.2%	0.2%	0.4%	
427	Kaiser (CA)	One Risk, One Excess III (MNP)						
428	Kaiser (CA)	One Excess I, One Excess II - Part B						
429	Kaiser (CA)	One Excess I, One Excess III (MNP)						
430	Kaiser (CA)	Two Excess II - Part B						
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)						
432	Kaiser (CA)	Two Excess III - Both (MNP)						

Exhibit 4-4
Initial Medical Post-65-Enrollment – Females (continued)

Non Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
450	Kaiser - Colorado Basic	Retiree Basic			0.1%			
451	Kaiser - Colorado	Retiree Risk						
452	Kaiser (Other)	Retiree Only						
453	Kaiser - Colorado	Retiree Basic (Two Party)						
454	Kaiser - Colorado	Retiree Basic Family						
455	Kaiser - Colorado	One Risk, One Basic						
456	Kaiser (Other)	Retiree and Spouse						
457	Kaiser - Colorado	Two Retiree Risk						
458	Kaiser - Colorado	One Risk, Two or More Dependents						
459	Kaiser - Colorado	Two Risk, Two or More Dependents						
460	Kaiser (Other)	Retiree and Spouse						
440	Kaiser - Georgia	One Medicare Member with Part B only				0.1%		
441	Kaiser - Georgia	One Medicare Member with Part A only						
442	Kaiser - Georgia	One Member without Medicare Part A&B						
443	Kaiser - Georgia	One Medicare Member (Renal Failure)						
444	Kaiser - Georgia	One Medicare + One Medicare with Part B only						
445	Kaiser - Georgia	One Medicare + One Medicare with Part A only						
446	Kaiser - Georgia	One Medicare + One Medicare without Part A&B						
461	Kaiser - Georgia Basic	Basic				0.1%		
462	Kaiser - Georgia	Retiree Risk						
463	Kaiser - Georgia	Retiree (Two Party)						
464	Kaiser - Georgia	Retiree Basic Family						
465	Kaiser - Georgia	One Retiree Risk, One Basic						
466	Kaiser - Georgia	Two Retiree Risk						
467	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic						
468	Kaiser - Georgia	Two Retiree Risk, One Basic						
469	Kaiser - Georgia	Three Retiree Risk, One Basic						
470	Kaiser - Georgia	Any other Family, at least one Retiree Risk						
471	Kaiser - Hawaii	Retiree Basic (Under 65)						
472	Kaiser - Hawaii	Retiree Risk						
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B						
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)						
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)						
476	Kaiser - Hawaii	One Retiree Risk, One Basic						
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic						
478	Kaiser - Hawaii	Two Retiree Risk						
479	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B						
481	Kaiser - Oregon	Retiree Basic (Under 65)						
482	Kaiser - Oregon	Retiree Risk						
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B						
484	Kaiser - Oregon	Retiree Basic (Two Party)						
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)						
486	Kaiser - Oregon	One Retiree Risk, One Basic						
487	Kaiser - Oregon	Retiree Cost						
488	Kaiser - Oregon	Two Retiree Risk						
489	Kaiser - Oregon	Retiree w/ Part A only						
490	Kaiser - Oregon	Retiree w/ Part B only						
491	Kaiser - Oregon	One Risk, One Medicare Part A only						
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare						
493	Kaiser - Oregon	One Risk, Two Basic						
494	Kaiser - Oregon	Two Risk, One Basic						
495	Kaiser - Oregon	Two Over 65 unassigned Medicare						
496	Kaiser - Oregon	Two Medicare Part A only						
497	Kaiser - Oregon	One Basic, One Medicare Part A only						
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B						
611	SCAN Health Plan	Retiree Only	1.0%	1.0%	0.8%	0.6%	0.8%	0.8%
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)	0.5%	0.5%	0.5%	0.3%	0.4%	0.4%
701	United Healthcare Medicare Advantage	Retiree Only	9.5%	9.5%	9.3%	8.8%	9.2%	9.2%
702	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	1.0%	1.0%	1.3%	0.9%	1.0%	1.0%
703	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)	4.0%	4.0%	4.0%	4.1%	4.1%	4.1%
704	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (1 Medicare)			0.2%	0.2%	0.1%	0.1%
705	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (2 Medicare)			0.2%	0.1%		
706	United Healthcare Medicare Advantage	Minor Survivor						
707	United Healthcare	Single						
708	United Healthcare	Two-Party						
709	United Healthcare	Family						
Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Probability of enrolling at least one dependent	34.5%	34.5%	35.7%	36.8%	35.3%	35.3%
Total New Enrollees			2,046	2,167		

* May not total to 100% due to rounding.

**Exhibit 4-4
 Initial Medical Post-65-Enrollment – Females (continued)**

Firefighters Local 1014 Retirees

Deduction Code	Plan	Tier	Current Assumption Tier 1	Current Assumption Tier 2	Prior Actual *	Actual *	Proposed Assumption Tier 1	Proposed Assumption Tier 2
801	Firefighters Local 1014	Med-Member under 65						
802	Firefighters Local 1014	Med-Member +1 under 65						
803	Firefighters Local 1014	Med-Member +2 under 65						
804	Firefighters Local 1014	Med-Member with Medicare	7.0%	7.0%	50.0%		12.0%	12.0%
805	Firefighters Local 1014	Med-Member +1; 1 MDC			50.0%			
806	Firefighters Local 1014	Med-Member +1; 2 MDC	39.0%	39.0%			28.0%	28.0%
807	Firefighters Local 1014	Med-Member +2; 1 MDC						
808	Firefighters Local 1014	Med-Member +2; 2 MDC	54.0%	54.0%			60.0%	60.0%
809	Firefighters Local 1014	Med-Surv. Sp. Under 65						
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65						
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65						
812	Firefighters Local 1014	Med-Surv. Sp. With MDC						
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC						
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC						
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC						
Total			100.0%	100.0%	100.0%	0.0%	100.0%	100.0%
Probability of enrolling at least one dependent			93.0%	93.0%	50.0%	0.0%	88.0%	88.0%
Total New Enrollees					2	0		

* May not total to 100% due to rounding.

**Exhibit 4-5
 Initial Dental/Vision Enrollment**

Tier Deduction Code	Cigna Indemnity Dental/Vision			Cigna HMO Dental/Vision		
	Retiree Only	Retiree and Dependents	Survivor	Retiree Only	Retiree and Dependents	Survivor
	501	502	503	901	902	903
Current Assumption Percentage:						
Males	19.0%	68.0%	0.0%	4.0%	9.0%	0.0%
Females	46.0%	40.0%	0.0%	8.0%	6.0%	0.0%

Prior Actual:

Tier Deduction Code	Cigna Indemnity Dental/Vision			Cigna HMO Dental/Vision		
	Retiree Only	Retiree and Dependents	Survivor	Retiree Only	Retiree and Dependents	Survivor
	501	502	503	901	902	903
Male						
Count	590	2,178	0	119	267	0
Percentage	18.7%	69.1%	0.0%	3.8%	8.5%	0.0%
Female						
Count	1,874	1,718	0	321	220	0
Percentage	45.4%	41.5%	0.0%	7.8%	5.3%	0.0%

Actual:

Tier Deduction Code	Cigna Indemnity Dental/Vision			Cigna HMO Dental/Vision		
	Retiree Only	Retiree and Dependents	Survivor	Retiree Only	Retiree and Dependents	Survivor
	501	502	503	901	902	903
Male						
Count	621	2,425	0	101	264	0
Percentage	18.2%	71.1%	0.0%	3.0%	7.7%	0.0%
Female						
Count	1,940	1,918	0	298	197	0
Percentage	44.6%	44.1%	0.0%	6.8%	4.5%	0.0%

Proposed Assumption Percentage:

Tier Deduction Code	Cigna Indemnity Dental/Vision			Cigna HMO Dental/Vision		
	Retiree Only	Retiree and Dependents	Survivor	Retiree Only	Retiree and Dependents	Survivor
	501	502	503	901	902	903
Male	18.5%	70.5%	0.0%	3.0%	8.0%	0.0%
Female	45.0%	42.7%	0.0%	7.5%	4.8%	0.0%

Exhibit 4-6
 Pre-65 to Post-65 Migration*

Pre-Medicare Elig Plan	Count	Post-Medicare Elig Plan	Tier 1				Tier 2 Proposed	
			Current Assumptions	Prior Actual	Actual	Proposed Assumptions	Current Assumptions	Tier 2 Assumptions
Blue Cross I	27	Blue Cross I	42.0%	42.7%	47.4%	45.0%	0.0%	0.0%
		0 Blue Cross II	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		29 Blue Cross III	58.0%	56.0%	50.8%	55.0%	100.0%	100.0%
		1 Other	0.0%	1.3%	1.8%	0.0%	0.0%	0.0%
		57 Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Blue Cross II		0 Blue Cross I	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		281 Blue Cross II	45.0%	44.0%	41.8%	44.0%	0.0%	0.0%
		380 Blue Cross III	55.0%	54.9%	56.5%	56.0%	100.0%	100.0%
		1 UnitedHealthcare	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%
		0 Excess I	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		0 Kaiser Family Basic	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		11 Other	0.0%	1.0%	1.6%	0.0%	0.0%	0.0%
		673 Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Blue Cross Prudent Buyer Plan		0 Blue Cross I	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		4 Blue Cross II	2.0%	3.9%	4.4%	4.0%	0.0%	0.0%
		44 Blue Cross III	50.0%	52.9%	48.3%	49.0%	100.0%	100.0%
		41 Blue Cross Prudent Buyer Plan	48.0%	42.2%	45.1%	47.0%	0.0%	0.0%
		2 Other	0.0%	1.0%	2.2%	0.0%	0.0%	0.0%
		91 Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Cigna Network Model Plan		0 Blue Cross I	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		2 Blue Cross II	0.0%	0.0%	4.8%	2.5%	0.0%	0.0%
		12 Blue Cross III	23.0%	24.5%	28.6%	25.0%	23.0%	25.0%
		2 Cigna Healthcare for Seniors	8.0%	8.2%	4.8%	6.0%	0.0%	0.0%
		12 Cigna Network Model Plan	44.0%	42.8%	28.5%	36.5%	0.0%	0.0%
		8 UnitedHealthcare	15.0%	14.3%	19.0%	18.0%	77.0%	75.0%
		0 Senior Advantage	2.0%	2.0%	0.0%	2.0%	0.0%	0.0%
		0 One Advantage, Others Basic	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		5 SCAN Health Plan	8.0%	8.2%	11.9%	10.0%	0.0%	0.0%
		1 Other	0.0%	0.0%	2.4%	0.0%	0.0%	0.0%
		42 Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
UnitedHealthcare		430 UnitedHealthcare	81.0%	77.6%	78.6%	80.0%	82.0%	81.0%
		0 Cigna Network Model Plan	1.0%	0.7%	0.0%	1.0%	0.0%	0.0%
		2 Blue Cross I	0.0%	0.3%	0.4%	0.0%	0.0%	0.0%
		13 Blue Cross II	2.0%	1.9%	2.4%	2.0%	0.0%	0.0%
		54 Blue Cross III	8.0%	8.8%	9.8%	9.0%	10.0%	11.0%
		8 SCAN Health Plan	2.0%	2.2%	1.5%	2.0%	2.0%	2.0%
		12 Senior Advantage	2.0%	2.2%	2.2%	2.0%	6.0%	6.0%
		1 One Advantage, Others Basic	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%
		0 One Advantage, One Excess II	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		12 Excess II	3.0%	3.0%	2.2%	3.0%	0.0%	0.0%
		4 One Excess II, One Basic	1.0%	2.2%	0.7%	1.0%	0.0%	0.0%
		0 One Excess III (MNP), One Basic	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		11 Other	0.0%	1.1%	2.0%	0.0%	0.0%	0.0%
		547 Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Kaiser Retiree Basic		624 Senior Advantage	79.0%	76.1%	73.2%	77.5%	98.0%	98.0%
		21 Excess I	3.0%	2.9%	2.5%	3.0%	0.0%	0.0%
		145 Excess II	12.0%	13.1%	17.0%	14.5%	0.0%	0.0%
		19 Excess III (MNP)	4.0%	3.1%	2.3%	3.0%	0.0%	0.0%
		1 Blue Cross I	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%
		23 Blue Cross III	2.0%	1.9%	2.8%	2.0%	2.0%	2.0%
		2 UnitedHealthcare	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%
		0 Kaiser Retiree Basic	0.0%	0.9%	0.0%	0.0%	0.0%	0.0%
		3 One Advantage, Others Basic	0.0%	0.6%	0.4%	0.0%	0.0%	0.0%
		1 One Excess III (MNP), One Basic	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%
		13 Other	0.0%	1.3%	1.5%	0.0%	0.0%	0.0%
		852 Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Kaiser Family Basic		80 2+ Advantage	82.0%	13.3%	12.5%	80.0%	99.0%	99.0%
		3 One Advantage, One Excess II	8.5%	0.1%	0.5%	9.0%	0.0%	0.0%
		5 One Advantage, One Excess III (MNP)	3.0%	0.7%	0.7%	3.1%	0.0%	0.0%
		337 One Advantage, Others Basic	0.0%	58.7%	52.7%	0.0%	0.0%	0.0%
		4 One Excess I, One Advantage	4.5%	0.6%	0.6%	4.1%	0.0%	0.0%
		28 One Excess I, Others Basic	0.0%	4.4%	4.4%	0.0%	0.0%	0.0%
		1 One Excess I, Others Excess II	0.0%	0.1%	0.2%	0.0%	0.0%	0.0%
		87 One Excess II, One Basic	0.0%	11.6%	13.6%	0.0%	0.0%	0.0%
		0 One Excess II, Others Excess III (MNP)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		16 One Excess III (MNP), One Basic	0.0%	3.1%	2.5%	0.0%	0.0%	0.0%
		5 Two+ Excess II-Part B	0.5%	0.1%	0.8%	0.5%	0.0%	0.0%
		0 Cigna Network Model Plan	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		2 Excess I	0.0%	0.6%	0.3%	0.0%	0.0%	0.0%
		2 Excess III (MNP)	0.0%	0.1%	0.3%	0.0%	0.0%	0.0%
		12 Blue Cross III	1.0%	1.2%	1.8%	1.6%	1.0%	1.0%
		1 UnitedHealthcare	0.5%	0.0%	0.2%	0.2%	0.0%	0.0%
		20 Senior Advantage	0.0%	3.2%	3.1%	1.5%	0.0%	0.0%
		24 Kaiser Family Basic	0.0%	0.1%	3.8%	0.0%	0.0%	0.0%
		12 Other	0.0%	2.1%	1.9%	0.0%	0.0%	0.0%
		639 Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
One Advantage, Others Basic		4 Senior Advantage	0.0%	0.5%	1.1%	0.0%	0.0%	0.0%
		297 2+ Advantage	0.0%	80.9%	78.7%	0.0%	0.0%	0.0%
		4 One Advantage, One Excess II	0.0%	1.8%	1.1%	0.0%	0.0%	0.0%
		8 One Advantage, One Excess III (MNP)	0.0%	1.8%	2.1%	0.0%	0.0%	0.0%
		50 One Advantage, Others Basic	0.0%	10.8%	13.3%	0.0%	0.0%	0.0%
		2 One Excess I, One Advantage	0.0%	1.8%	0.5%	0.0%	0.0%	0.0%
		9 Blue Cross III	0.0%	0.8%	2.4%	0.0%	0.0%	0.0%
		0 Blue Cross I	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		1 Blue Cross II	0.0%	0.0%	0.3%	0.0%	0.0%	0.0%
		0 Excess III (MNP)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		0 One Excess III (MNP), One Basic	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%
		2 Other	0.0%	1.3%	0.5%	0.0%	0.0%	0.0%
		377 Total	0.0%	100.0%	100.0%	0.0%	0.0%	0.0%
Firefighters Local 1014		171 Firefighters Local 1014	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
		0 Other	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		171 Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

* Tiers with both a pre- and post-65 member were encompassed in a pure post-65 tier. The results from the Kaiser One Advantage, Others Basic section is included in the results of the Kaiser Family Basic section.

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Section 5 Retirement of Vested Terminated Members



The exhibits in this section present comparisons of actual retirements from vested terminated status during the five-year period ending June 30, 2020 with those expected to retire according to the actuarial assumptions used in our 2019 OPEB valuation.

Assumption Format

- We recommend that the current format based on age is maintained.
- Since the experience for this assumption is somewhat limited, we have not differentiated this assumption by gender.

Experience was examined separately for the General retirement Plans A-D and G, General Plan E, and the Safety Plans A-C, due to different retirement eligibility provisions.

Results and Recommendations

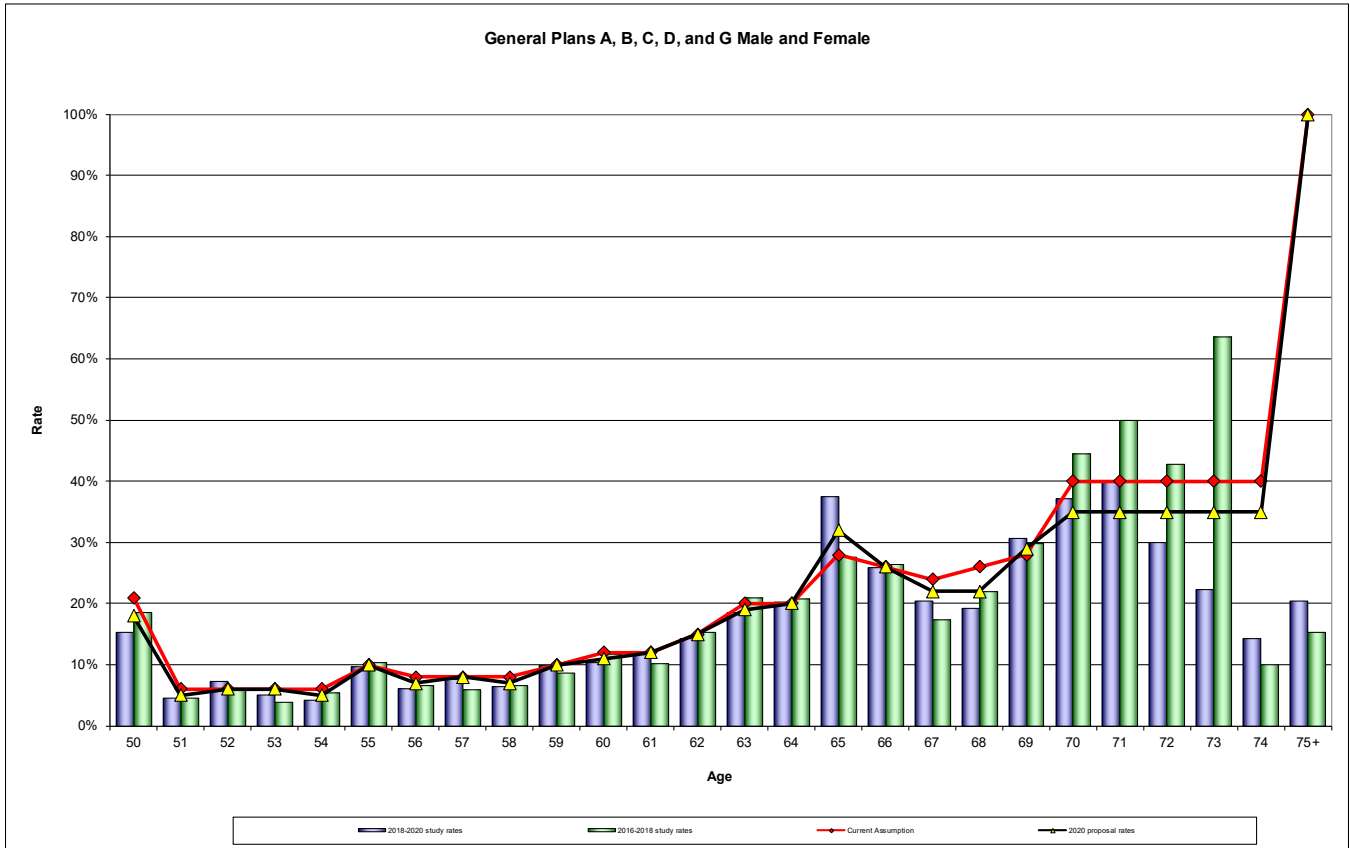
Over the five-year period ended June 30, 2020, retirements from vested terminated status were slightly lower than our assumptions. In addition, there has been some variation in the retirement patterns by age compared to our assumptions. Based on this, we are recommending adjustments to the age based rates to bring the actual to expected ratios closer to 100%. The table below summarizes the results which are presented by age on Exhibits 5-1, 5-2, and 5-3.

We recommend these assumptions be the same for Tier 1 and Tier 2.

Retirement of Vested Terminated Members						
Class of Members	Number of Retirements				Actual / Expected	
	Current Assumption	Prior Actual	Actual	Proposed	Current	Proposed
General A,B,C,D,G	856	830	736	806	86%	91%
General E	1,149	1,151	888	1,051	77%	84%
Safety A,B,C	111	99	86	100	77%	86%
Total	2,116	2,080	1,710	1,957	81%	87%

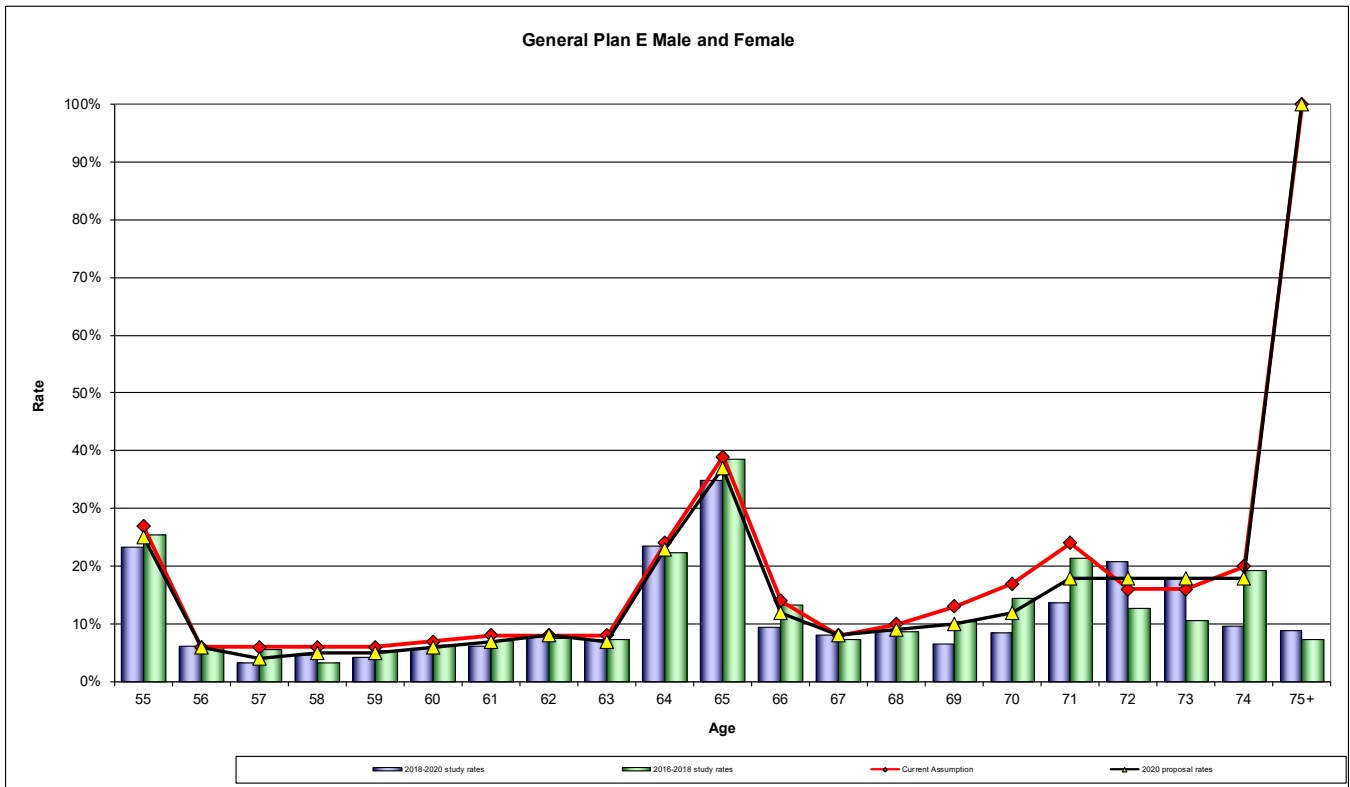
The charts in Exhibits 5-1, 5-2, and 5-3 include results for ages below the assumed certain retirement age, since a considerable number of vested terminated members retire later than that.

Exhibit 5-1
Retirement of Vested Terminated Members
General Plans A, B, C, D, and G – Male & Female



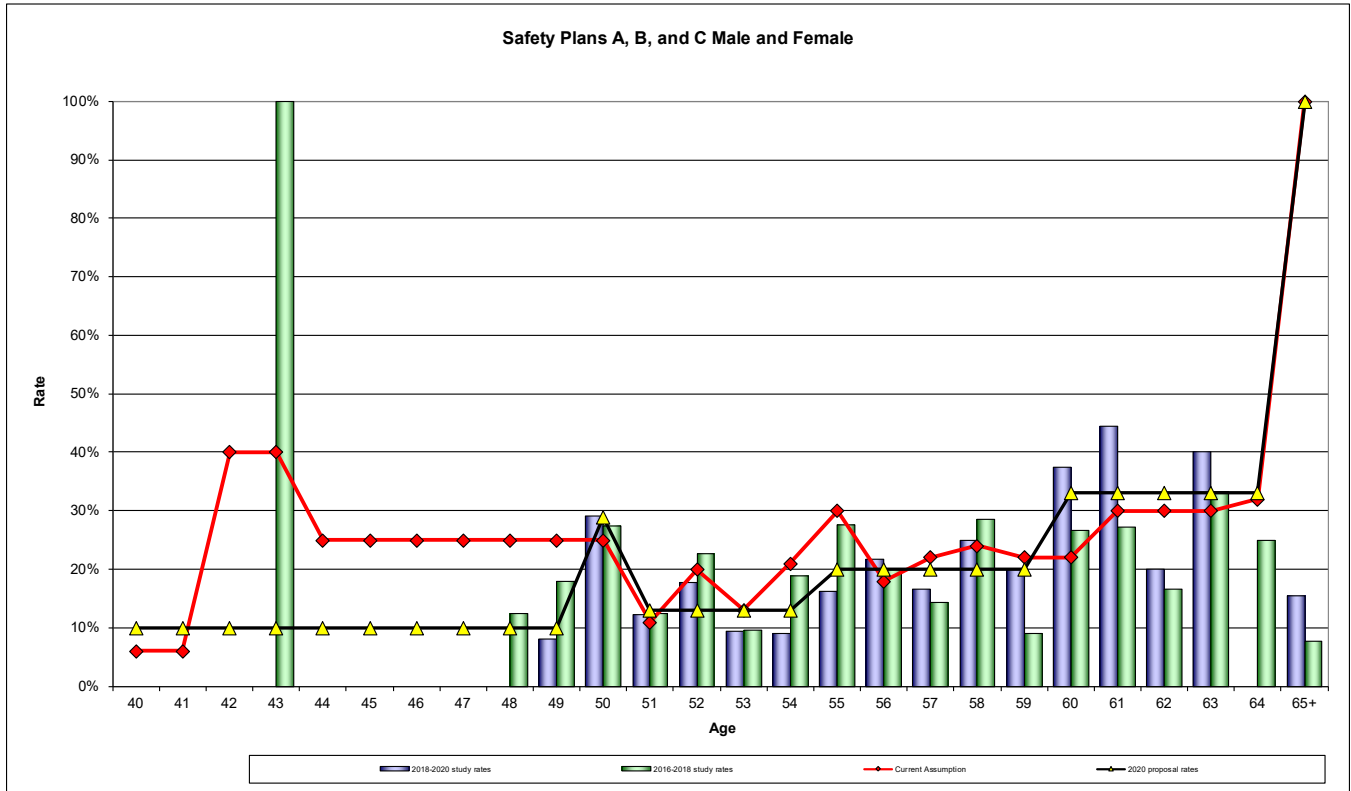
All Eligible VTs	Current Assumption	Prior Actual	Actual	2020 Proposal
Total Count	856	830	736	806
Actual / Expected	86%			91%
Total Count w/o 75+	807	822	726	757
Actual / Expected w/o 75+	90%			96%

Exhibit 5-2
Retirement of Vested Terminated Members
General Plan E – Male & Female



All Eligible VTs	Current Assumption	Prior Actual	Actual	2020 Proposal
Total Count	1,149	1,151	888	1,051
Actual / Expected	77%			84%
Total Count w/o 75+	1,036	1,145	878	938
Actual / Expected w/o 75+	85%			94%

Exhibit 5-3
Retirement of Vested Terminated Members
Safety Plans A, B, and C – Male & Female



All Eligible VTs	Current Assumption	Prior Actual	Actual	2020 Proposal
Total Count	111	99	86	100
Actual / Expected	77%			86%
Total Count w/o 65+	98	98	84	87
Actual / Expected w/o 65+	86%			97%
Total Count 50 - 65	87	89	81	83
Actual / Expected 50 - 65	93%			98%

Section 6 Other OPEB Demographic Assumptions



This section discusses the following OPEB demographic assumptions:

- Age difference for enrolled spouses
- Medicare enrollment for members in Blue Cross Plans I, II, and Prudent Buyer
- Survivor and new dependent enrollment, after the death of a retired member or dependent

Age Difference for Enrolled Spouses

The age difference for enrolled spouses is used for the valuation of current active members projected to retire and enroll a spouse in the future. In our July 1, 2019 OPEB valuation, we assumed that future male retirees will be four years older than their female spouse. Furthermore, we assumed that future female retirees will be two years younger than their male spouses.

Results and Recommendation

We studied the age difference for two groups of current retirees with spouses enrolled in order to forecast what patterns may be for future retirees.

- Group 1: All current retirees
- Group 2: Recent retirees (5 years)

The table below shows the results by group based on the July 1, 2018, 2019, and 2020 OPEB valuation data along with our recommended assumption. Note that our valuation system is designed to utilize whole year age differences.

Class of Retirees with Spouses	Male Retirees		Female Retirees	
	Number	Male Age Less Female Age	Number	Male Age Less Female Age
Current Assumption		4.0 years		2.0 years
Prior Actual Experience				
All Retirees	17,110	4.4 years	9,060	1.5 years
Recent Retirees	3,825	3.7 years	2,919	1.7 years
Actual Experience				
All Retirees	17,711	4.5 years	9,799	1.3 years
Recent Retirees	4,121	3.5 years	3,195	1.4 years
Recommended Assumption (Tier 1 and Tier 2)		4.0 years		1.0 year

Medicare Enrollment for Blue Cross Plans I, II, and Prudent Buyer

Our July 1, 2019 OPEB valuation assumed that members in Blue Cross I, II, and Prudent Buyer were not eligible for Medicare Part B premium reimbursement. We checked the validity of this assumption based on July 1, 2018, 2019, and 2020 enrollment information. Medicare Part A information from LACERA for both inactives and actives was incomplete, so we relied on the Medicare Part B indicator. There were not any members in the Blue Cross I, II, and Prudent Buyer plans who were in Medicare Part B. We recommend continuing with the current assumption for Tier 1. We will assume Tier 2 members will enroll in Medicare Parts A and B.

Survivor and New Dependent Enrollment

There are three scenarios that we incorporated into our July 1, 2019 OPEB valuation:

1. If a dependent spouse/domestic partner dies, the retiree may enroll a new spouse/domestic partner and/or a new dependent. This applies for new spouses and dependents of Tier 1 and Tier 2.
2. If a retiree who has a pension option which qualifies as eligible for continuing retirement benefits to the survivor dies, and the spouse/domestic partner has retiree health coverage, the existing spouse/domestic partner or dependent may continue to be enrolled and may also enroll a new spouse/domestic partner and/or a new dependent. There is no subsidy for a new spouse or child of a surviving spouse who is under Tier 2.
3. If a retiree who has a pension option which qualifies as eligible for continuing retirement benefits to the survivor dies, and the spouse/domestic partner does not have retiree health coverage, we assume no additional spouse/domestic partner or dependent will be enrolled in both Tiers.

Results and Recommendations

We studied the experience since the July 1, 2018 OPEB Experience Study and developed the recommendations shown in the table below. Although actual experience from these assumptions is somewhat difficult to track, we were able to develop approximate results for Scenarios 1 and 2. We did not study Scenario 3 since it is based on LACERA policy. LACERA staff will consider how to track this experience in the future.

Scenario	New Spouse/Domestic Partner Enrollment	New Dependent Enrollment
Scenario 1		
Current Assumption	2.0%	3.0%
Prior Actual Experience	1.0%	N/A
Number of Observations	17	N/A
Actual Experience	0.5%	N/A
Number of Observations	10	N/A
Recommended Assumption	1.0%	2.5%
Scenario 2		
Current Assumption	4.0%	3.0%
Prior Actual Experience	2.0%	2.0%
Number of Observations	14	13
Actual Experience	1.5%	2.5%
Number of Observations	10	17
Recommended Assumption	2.0%	2.5%

Section 7 OPEB Economic Assumptions



This section discusses the investment earnings and health cost trend assumptions, which are the primary economic assumptions that differentiate the OPEB valuation for Los Angeles County from the LACERA retirement benefit valuation. The salary increase assumptions and inflation are included in the retirement benefit experience studies. These assumptions are used for both the retirement benefits funding valuation and the OPEB funding valuation. There is not a separate OPEB study of the salary increase and inflation assumptions.

Investment Earnings

With respect to the investment earnings assumption, ASOP No. 6 references ASOP No. 27, Selection of Economic Assumptions for Measuring Pension Obligations, which provides guidance to actuaries giving advice on selecting economic assumptions for measuring obligations under defined benefit plans. For more details of ASOP No. 27, refer to Milliman's 2019 Investigation of Experience for Retirement Benefit Assumptions dated January 28, 2020.

The change from cost sharing to agent was effective for the July 1, 2018 OPEB funding valuation. The investment earnings assumption approach for this funding valuation is intended to reflect the funding policy associated with each agent. The investment earnings assumption for agents that are prefunding through the OPEB Trust will be the expected return of the OPEB Trust. The agents that are not prefunding through the OPEB Trust will have an investment earnings assumption of the County's general funds' expected return.

OPEB Trust Investment Earnings

The County, Superior Court, and LACERA are contributing to the OPEB Trust for the purposes of prefunding future OPEB costs. The expected investment return on the OPEB Trust is 6.1%, based on the Trust's investment policy and Meketa's current 10-year capital market assumptions and investment forecast model.

The investment return assumption for agents that have been prefunding the OPEB Trust has been rounded to the nearest 0.25% since 2014 which was the initial valuation with OPEB Trust assets. We recommend rounding 6.1% to the nearest 0.25% and continuing with the 6.00% return assumption for agents that are prefunding through the OPEB Trust. The funding policies are structured such that contributions will exceed benefit payments by a significant amount until the contribution reaches the Actuarially Determined Contribution (ADC). After that point, benefits are projected to be payable out of Trust assets for the foreseeable future.

Details of Meketa's current 10-year capital market assumptions are in the chart below.

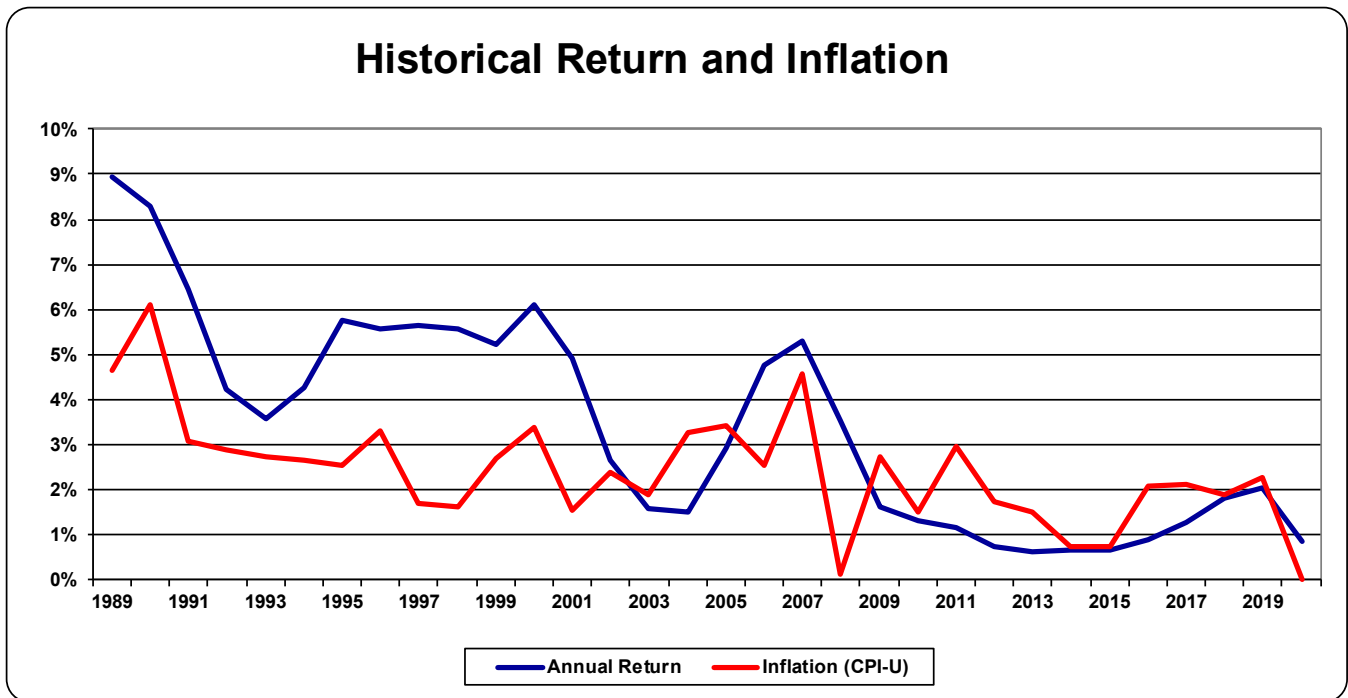
Asset Class	Target Allocation (policy)		Weighted Average 10-Year Expected Real Rate of Return (After Expected 2.75% Inflation Rate) (Geometric)		
	4Q 2019	6/30/20 Actual	Expected	10 Year Expected Nominal Return	Standard Deviation
Growth	50.0%	50.6%	3.9%	6.8%	17.0%
Global Equity	50.0%	50.6%	3.9%	6.8%	17.0%
Credit	20.0%	19.8%	2.0%	4.8%	9.0%
High Yield Bonds	6.0%	5.9%	1.3%	4.1%	11.0%
Bank Loans	10.0%	9.9%	2.1%	4.9%	9.0%
Emerging Market Bonds (Local)	4.0%	4.0%	1.5%	4.3%	12.5%
Risk Reduction & Mitigation	10.0%	10.0%	-0.5%	2.2%	3.2%
Cash Equivalents	2.0%	1.6%	-0.8%	1.9%	1.0%
Investment Grade Bonds	8.0%	8.4%	-0.4%	2.3%	4.0%
Inflation Hedges	20.0%	19.6%	3.2%	6.1%	15.1%
TIPS	6.0%	6.0%	-0.5%	2.3%	7.0%
REITs	10.0%	9.6%	3.8%	6.6%	26.0%
Commodities	4.0%	4.0%	2.0%	4.9%	17.0%
Total	100.0%	100.0%	3.3%	6.1%	12.4%

Weighted Average Long-Term Expected Real Rate of Return: The long-term expected real rate on the OPEB Trust investments is based on inflation expectations and nominal return expectations developed by Meketa Investment Group for each asset class. In the case of the total portfolio and broad asset groupings (e.g., Growth, Credit), returns are calculated using a portfolio approach that first calculates nominal expected returns by incorporating target weights, nominal expected returns, and volatility and correlations estimates for each asset class, adjusted by the defined return period. Nominal expected returns for each portfolio or broad asset groupings are converted to real expected returns by adjusting them for inflation, using a base inflation rate assumption of 2.75%.

It is worth noting that a simple weighted sum of asset classes returns will not yield the total results shown on the table for the total portfolio and broad asset groupings, given the process followed to adjust for inflation, the compounding to a given time period, and the impact of volatility and correlations to the portfolio.

General Fund Investment Earnings

In setting the investment earnings assumption for the General Fund, we use a “building block” approach, which involves an estimate of inflation plus an assumed real return. In reviewing the real return assumption, we looked at historical information from the County, combined with our estimate of long-term expectations for short-term high-quality fixed income investments. The following chart compares historical County returns to the rate of inflation from 1989 through 2019. Over this period, the geometric averages of the annual return and the rate of inflation were 3.5% and 2.5%, respectively, resulting in a real return over the period of approximately 1.0% per year.



**General Fund
 Investment Earnings
 (continued)**

Based on our discussions with the County and our review of asset class returns over this period, the returns are consistent with those of a fixed income investment portfolio concentrated in short-term U.S. Government investments with maturities of three years or less. Recent projections of returns for these investments indicate that the historical 1.0% real return may be higher than what is achievable in the future. Current projections are for real returns in the -0.65% to -0.25% range for these investments.

The 2019 retirement benefit experience study analyzed the rate of price inflation and wage inflation. The Board of Investment decided at the January 2020 meeting to make changes in some of these economic assumptions for the retirement benefit program. The price inflation assumption remained at 2.75%. To be consistent with the retirement benefit program, we propose using 2.75% for the price inflation assumption used for the OPEB valuation.

Using the building block approach to combine assumed real return and assumed inflation, the preceding discussion yields a range from which to choose the assumed investment return of the general assets. This range is between 2.10% and 2.50% (2.75% inflation plus assumed real return between -0.65% and -0.25%).

Milliman used our current capital market assumptions and investment forecast model to develop an expected return on general assets of 2.30%. We incorporated the County’s general fund balance sheet as of June 30, 2020 to develop this result, as shown in the chart below. Note that this estimate falls within the range derived from the building block approach described above.

Asset Class	Expected Arithmetic Nominal Return (30 yrs)	Asset Allocation
Cash	1.68%	27.66%
Short-term U.S. Bonds	2.56%	72.34%
Expected Arithmetic Return (30 yrs) ⁽¹⁾		2.32%
Expected Geometric Return (30 yrs) ⁽²⁾		2.30%

1. The expected arithmetic return is the average or “mean” long-term expected compound return based on the capital market assumptions and the asset allocation.
2. The expected geometric return is the “median” long-term expected compound return based on the estimated variability of the asset allocation. It is less than the expected arithmetic return because of the variability in future expected returns.

Investment Earnings

The investment earnings assumptions will vary by Agent. The County, LACERA, and Superior Courts will have an investment earnings assumption based on the OPEB Trust expected return of 6.00%. The agents that are not prefunding through the OPEB Trust will have an investment earnings assumption of the County’s general funds expected return of 2.30%.

Assumption	Current OPEB	Proposed OPEB
Price Inflation (CPI)	2.75%	2.75%
Wage Inflation	3.25%	3.25%
Investment Earnings		
Agents prefunding in the OPEB Trust	6.00%	6.00%
Agents not prefunding	3.69%	2.30%

**Health Cost Trend
 General Discussion**

In our July 1, 2019 OPEB valuation, we developed trend rates for the following three benefit types:

- LACERA and Firefighters Local 1014 medical plans
- Medicare Part B premiums
- Dental/vision plans

We have examined these assumptions and are recommending modifications as discussed below. The first-year trends will be modified to reflect the July 1, 2021 final annual medical and dental plan rate renewals which will be reflected in the July 1, 2020 OPEB valuation.

Medical Trend

Starting with the July 1, 2008 OPEB valuation, we began setting the medical trend assumption based on the Society of Actuaries (SOA) report entitled “Modeling Long-Term Healthcare Cost Trends” by Professor Thomas E. Getzen. The report includes detailed research performed by a committee of economists and actuaries (including a Milliman representative) and recommends the use of the “Getzen Model” named after the professor who developed the model. We believe that the research and the model are fundamentally and technically sound and advance the body of knowledge available to actuaries to more accurately project long-term medical trends.

The Getzen model is a tool that Milliman uses as the foundation for the trend that we recommend to our clients for OPEB valuations. The Getzen model uses assumptions about healthcare to model its growth as a share of the U.S. Gross Domestic Product (GDP) in order to develop a long-term medical trend assumption. The premise is that although health costs will continue to grow as a percentage of GDP, that growth will ultimately reach a limit. The major assumptions are as follows:

- *Trends through 2022.* These trends are based on our review of the July 1, 2020 annual medical and dental plan rate renewals and summaries provided by Segal taking into account drug percentage of total, approximate annual premiums, and plan type.
- *2030 GDP % Share.* This is the assumed percentage of GDP that is spent on healthcare and is assumed to be 20.3%. This is based on a recent actuarial projection of National Health Expenditures (NHE) from the Centers for Medicare & Medicaid Services (CMS).
- *Inflation (CPI).* This is consistent with the assumption used for the investment earnings rate above.
- *Real GDP Per Capita.* This is the assumed growth in the GDP over inflation. The model uses a 1.5% assumption, which falls within the range of projected scenarios from both the Congressional Budget Office (CBO) and CMS.
- *Excess Medical Cost Growth.* This component represents all other sources of excess trend, and it is assumed to be 1.1%, based on the SOA research.
- *GDP Resistance Point.* This is the point at which health care costs as a percentage of GDP are assumed to begin to meet resistance. The assumption used is 25% based on the SOA research.
- *GDP Limit Year.* The model assumes that after 2075, health costs will grow at the rate of GDP growth, equal to the CPI plus real per capita GDP growth.

We made several adjustments to the base trends obtained from the Getzen model, as discussed below.

- *Aging.* Since the Getzen model projects overall healthcare spending in the U.S., it implicitly includes aging of the population. Since we have an explicit assumption for aging in the OPEB valuation, we have removed the aging factor from the Getzen model, resulting in a 0.4% decrease in the 2020 trend assumption, grading to 0.0% by 2061. We assume the aging reduction is limited such that trend is not reduced below inflation plus GDP growth.
- *Administrative Costs.* A portion of the retiree health premiums (assumed to be 10%) are used for carrier administrative costs. We assume that this portion of the premium will grow at inflation plus 0.75% annually.
- *Rounding.* We rounded the trend assumptions to the nearest 0.10% for each year.

The first-year trend rates for LACERA will be adjusted for the July 1, 2021 annual medical and dental plan rate renewals and fees in the July 1, 2020 OPEB funding valuation. These approved annual medical and dental plan rate renewals will not be available until March 2021. These trends reflect fees from ACA and the enactment of H.R. 1865. These fees include the Patient Centered Outcomes Research Institute (PCORI) Fee and the Health Insurer Fee in 2020. H.R. 1865 repealed the Excise tax and the Health Insurer Fee beginning with calendar year 2021.

Exhibits 7-1 through 7-4 show the recommended medical trend assumptions excluding Excise tax for the July 1, 2020 OPEB valuation compared to the medical trend assumptions used for the July 1, 2019 OPEB valuation. Exhibits 7-1 and 7-2 are for the under 65 members and Exhibits 7-3 and 7-4 are for the over 65 members.

Medicare Part B Premium Trend

In the July 1, 2019 OPEB valuation, we established the Medicare Part B premium trend assumption to be consistent with projections from CMS. We have updated the Medicare Part B assumption for the July 1, 2020 valuation based on the following CMS reports:

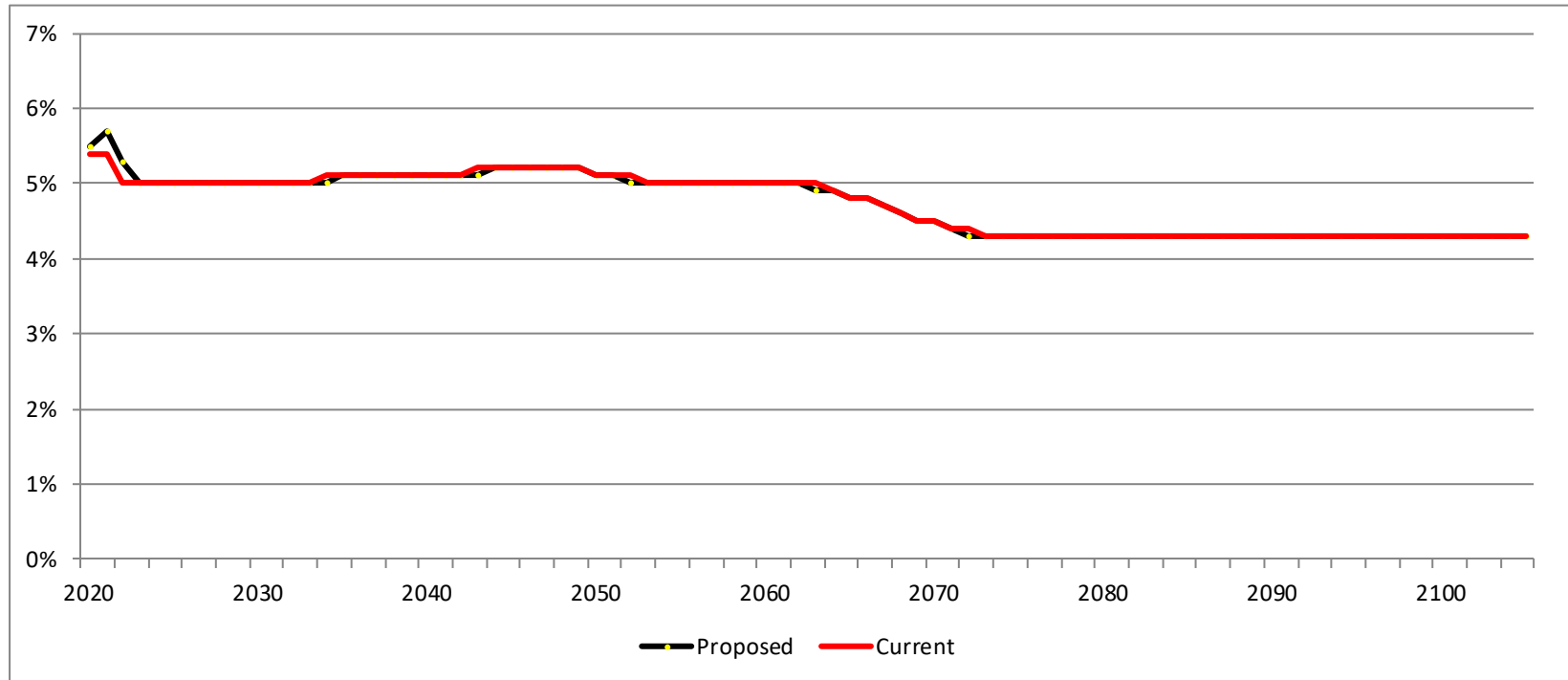
- *2020 Medicare Trustees Report.* We used this report for assumed Medicare Part B enrollment growth and for the real GDP growth assumption of 1.5%.
- *2020 CMS report titled *Projected Medicare Expenditures under an Illustrative Scenario with Alternative Payment Updates to Medicare Providers.** We used this report for assumed Part B premium increases, under the assumption that physician updates will increase in line with the Medicare Economic Index (MEI).

Our recommended July 1, 2020 Medicare Part B premium trend is compared to the July 1, 2019 assumption in Exhibits 7-5 and 7-6. The July 1, 2020 census data indicates that a large number of individuals are being reimbursed for an amount lower than the 2020 standard Part B premium of \$144.60. The lower amount is due to a CMS hold harmless provision that does not allow an individual's Part B premium increase to exceed the increase in their Social Security benefits. Based on recent cost of living adjustments, we believe that most of these individuals are actually paying the standard amount, and we assume that these individuals will verify their updated premium by 2021, causing a large trend increase in the first year. Exhibits 7-5 and 7-6 include a calendar year to fiscal year adjustment.

Dental/Vision Trend

In our July 1, 2020 OPEB valuation, the underlying dental/vision trend rate will be 4.25%. This assumption is based on the CPI plus 1.5%. We also incorporate a Claim Probability Distribution (CPD) analysis to model the indemnity plan annual maximum. This causes the trend to decline for about 35 years, but then increase once the costs of the HMO plan begin to have a greater influence on the trend than the indemnity plan. Refer to Exhibits 7-7 and 7-8.

Exhibit 7-1
Medical Trend without Excise Tax for Pre-65 Members



**Exhibit 7-2
 Medical Trend without Excise Tax for Pre-65 Members – Percentage Table**

Fiscal Year Ending		Current	Proposed	Fiscal Year Ending		Current	Proposed
From	To			From	To		
6/30/2021	6/30/2022	5.40%	5.50%	6/30/2064	6/30/2065	5.00%	4.90%
6/30/2022	6/30/2023	5.40%	5.70%	6/30/2065	6/30/2066	4.90%	4.90%
6/30/2023	6/30/2024	5.00%	5.30%	6/30/2066	6/30/2067	4.80%	4.80%
6/30/2024	6/30/2025	5.00%	5.00%	6/30/2067	6/30/2068	4.80%	4.80%
6/30/2025	6/30/2026	5.00%	5.00%	6/30/2068	6/30/2069	4.70%	4.70%
6/30/2026	6/30/2027	5.00%	5.00%	6/30/2069	6/30/2070	4.60%	4.60%
6/30/2027	6/30/2028	5.00%	5.00%	6/30/2070	6/30/2071	4.50%	4.50%
6/30/2028	6/30/2029	5.00%	5.00%	6/30/2071	6/30/2072	4.50%	4.50%
6/30/2029	6/30/2030	5.00%	5.00%	6/30/2072	6/30/2073	4.40%	4.40%
6/30/2030	6/30/2031	5.00%	5.00%	6/30/2073	6/30/2074	4.40%	4.30%
6/30/2031	6/30/2032	5.00%	5.00%	6/30/2074	6/30/2075	4.30%	4.30%
6/30/2032	6/30/2033	5.00%	5.00%	6/30/2075	6/30/2076	4.30%	4.30%
6/30/2033	6/30/2034	5.00%	5.00%	6/30/2076	6/30/2077	4.30%	4.30%
6/30/2034	6/30/2035	5.00%	5.00%	6/30/2077	6/30/2078	4.30%	4.30%
6/30/2035	6/30/2036	5.10%	5.00%	6/30/2078	6/30/2079	4.30%	4.30%
6/30/2036	6/30/2037	5.10%	5.10%	6/30/2079	6/30/2080	4.30%	4.30%
6/30/2037	6/30/2038	5.10%	5.10%	6/30/2080	6/30/2081	4.30%	4.30%
6/30/2038	6/30/2039	5.10%	5.10%	6/30/2081	6/30/2082	4.30%	4.30%
6/30/2039	6/30/2040	5.10%	5.10%	6/30/2082	6/30/2083	4.30%	4.30%
6/30/2040	6/30/2041	5.10%	5.10%	6/30/2083	6/30/2084	4.30%	4.30%
6/30/2041	6/30/2042	5.10%	5.10%	6/30/2084	6/30/2085	4.30%	4.30%
6/30/2042	6/30/2043	5.10%	5.10%	6/30/2085	6/30/2086	4.30%	4.30%
6/30/2043	6/30/2044	5.10%	5.10%	6/30/2086	6/30/2087	4.30%	4.30%
6/30/2044	6/30/2045	5.20%	5.10%	6/30/2087	6/30/2088	4.30%	4.30%
6/30/2045	6/30/2046	5.20%	5.20%	6/30/2088	6/30/2089	4.30%	4.30%
6/30/2046	6/30/2047	5.20%	5.20%	6/30/2089	6/30/2090	4.30%	4.30%
6/30/2047	6/30/2048	5.20%	5.20%	6/30/2090	6/30/2091	4.30%	4.30%
6/30/2048	6/30/2049	5.20%	5.20%	6/30/2091	6/30/2092	4.30%	4.30%
6/30/2049	6/30/2050	5.20%	5.20%	6/30/2092	6/30/2093	4.30%	4.30%
6/30/2050	6/30/2051	5.20%	5.20%	6/30/2093	6/30/2094	4.30%	4.30%
6/30/2051	6/30/2052	5.10%	5.10%	6/30/2094	6/30/2095	4.30%	4.30%
6/30/2052	6/30/2053	5.10%	5.10%	6/30/2095	6/30/2096	4.30%	4.30%
6/30/2053	6/30/2054	5.10%	5.00%	6/30/2096	6/30/2097	4.30%	4.30%
6/30/2054	6/30/2055	5.00%	5.00%	6/30/2097	6/30/2098	4.30%	4.30%
6/30/2055	6/30/2056	5.00%	5.00%	6/30/2098	6/30/2099	4.30%	4.30%
6/30/2056	6/30/2057	5.00%	5.00%	6/30/2099	6/30/2100	4.30%	4.30%
6/30/2057	6/30/2058	5.00%	5.00%	6/30/2100	6/30/2101	4.30%	4.30%
6/30/2058	6/30/2059	5.00%	5.00%	6/30/2101	6/30/2102	4.30%	4.30%
6/30/2059	6/30/2060	5.00%	5.00%	6/30/2102	6/30/2103	4.30%	4.30%
6/30/2060	6/30/2061	5.00%	5.00%	6/30/2103	6/30/2104	4.30%	4.30%
6/30/2061	6/30/2062	5.00%	5.00%	6/30/2104	6/30/2105	4.30%	4.30%
6/30/2062	6/30/2063	5.00%	5.00%	6/30/2105	6/30/2106	4.30%	4.30%
6/30/2063	6/30/2064	5.00%	5.00%	6/30/2106	6/30/2107	4.30%	4.30%

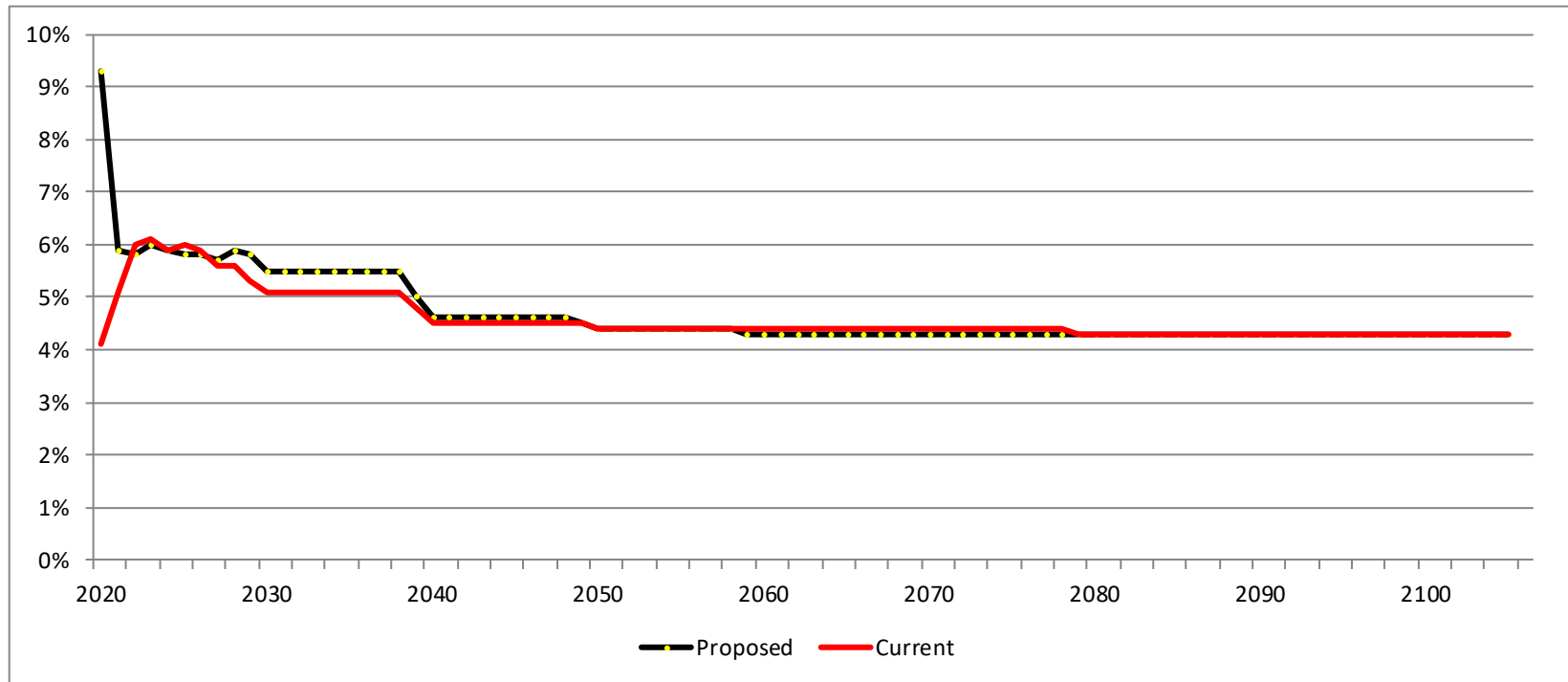
Exhibit 7-3
Medical Trend without Excise Tax for Post-65 Members



Exhibit 7-4
Medical Trend without Excise Tax for Post-65 Members – Percentage Table

Fiscal Year Ending		Current	Proposed	Fiscal Year Ending		Current	Proposed
From	To			From	To		
6/30/2021	6/30/2022	4.90%	5.00%	6/30/2064	6/30/2065	5.00%	4.90%
6/30/2022	6/30/2023	5.20%	5.40%	6/30/2065	6/30/2066	4.90%	4.90%
6/30/2023	6/30/2024	5.00%	5.20%	6/30/2066	6/30/2067	4.80%	4.80%
6/30/2024	6/30/2025	5.00%	5.00%	6/30/2067	6/30/2068	4.80%	4.80%
6/30/2025	6/30/2026	5.00%	5.00%	6/30/2068	6/30/2069	4.70%	4.70%
6/30/2026	6/30/2027	5.00%	5.00%	6/30/2069	6/30/2070	4.60%	4.60%
6/30/2027	6/30/2028	5.00%	5.00%	6/30/2070	6/30/2071	4.50%	4.50%
6/30/2028	6/30/2029	5.00%	5.00%	6/30/2071	6/30/2072	4.50%	4.50%
6/30/2029	6/30/2030	5.00%	5.00%	6/30/2072	6/30/2073	4.40%	4.40%
6/30/2030	6/30/2031	5.00%	5.00%	6/30/2073	6/30/2074	4.40%	4.30%
6/30/2031	6/30/2032	5.00%	5.00%	6/30/2074	6/30/2075	4.30%	4.30%
6/30/2032	6/30/2033	5.00%	5.00%	6/30/2075	6/30/2076	4.30%	4.30%
6/30/2033	6/30/2034	5.00%	5.00%	6/30/2076	6/30/2077	4.30%	4.30%
6/30/2034	6/30/2035	5.00%	5.00%	6/30/2077	6/30/2078	4.30%	4.30%
6/30/2035	6/30/2036	5.10%	5.00%	6/30/2078	6/30/2079	4.30%	4.30%
6/30/2036	6/30/2037	5.10%	5.10%	6/30/2079	6/30/2080	4.30%	4.30%
6/30/2037	6/30/2038	5.10%	5.10%	6/30/2080	6/30/2081	4.30%	4.30%
6/30/2038	6/30/2039	5.10%	5.10%	6/30/2081	6/30/2082	4.30%	4.30%
6/30/2039	6/30/2040	5.10%	5.10%	6/30/2082	6/30/2083	4.30%	4.30%
6/30/2040	6/30/2041	5.10%	5.10%	6/30/2083	6/30/2084	4.30%	4.30%
6/30/2041	6/30/2042	5.10%	5.10%	6/30/2084	6/30/2085	4.30%	4.30%
6/30/2042	6/30/2043	5.10%	5.10%	6/30/2085	6/30/2086	4.30%	4.30%
6/30/2043	6/30/2044	5.10%	5.10%	6/30/2086	6/30/2087	4.30%	4.30%
6/30/2044	6/30/2045	5.20%	5.10%	6/30/2087	6/30/2088	4.30%	4.30%
6/30/2045	6/30/2046	5.20%	5.20%	6/30/2088	6/30/2089	4.30%	4.30%
6/30/2046	6/30/2047	5.20%	5.20%	6/30/2089	6/30/2090	4.30%	4.30%
6/30/2047	6/30/2048	5.20%	5.20%	6/30/2090	6/30/2091	4.30%	4.30%
6/30/2048	6/30/2049	5.20%	5.20%	6/30/2091	6/30/2092	4.30%	4.30%
6/30/2049	6/30/2050	5.20%	5.20%	6/30/2092	6/30/2093	4.30%	4.30%
6/30/2050	6/30/2051	5.20%	5.20%	6/30/2093	6/30/2094	4.30%	4.30%
6/30/2051	6/30/2052	5.10%	5.10%	6/30/2094	6/30/2095	4.30%	4.30%
6/30/2052	6/30/2053	5.10%	5.10%	6/30/2095	6/30/2096	4.30%	4.30%
6/30/2053	6/30/2054	5.10%	5.00%	6/30/2096	6/30/2097	4.30%	4.30%
6/30/2054	6/30/2055	5.00%	5.00%	6/30/2097	6/30/2098	4.30%	4.30%
6/30/2055	6/30/2056	5.00%	5.00%	6/30/2098	6/30/2099	4.30%	4.30%
6/30/2056	6/30/2057	5.00%	5.00%	6/30/2099	6/30/2100	4.30%	4.30%
6/30/2057	6/30/2058	5.00%	5.00%	6/30/2100	6/30/2101	4.30%	4.30%
6/30/2058	6/30/2059	5.00%	5.00%	6/30/2101	6/30/2102	4.30%	4.30%
6/30/2059	6/30/2060	5.00%	5.00%	6/30/2102	6/30/2103	4.30%	4.30%
6/30/2060	6/30/2061	5.00%	5.00%	6/30/2103	6/30/2104	4.30%	4.30%
6/30/2061	6/30/2062	5.00%	5.00%	6/30/2104	6/30/2105	4.30%	4.30%
6/30/2062	6/30/2063	5.00%	5.00%	6/30/2105	6/30/2106	4.30%	4.30%
6/30/2063	6/30/2064	5.00%	5.00%	6/30/2106	6/30/2107	4.30%	4.30%

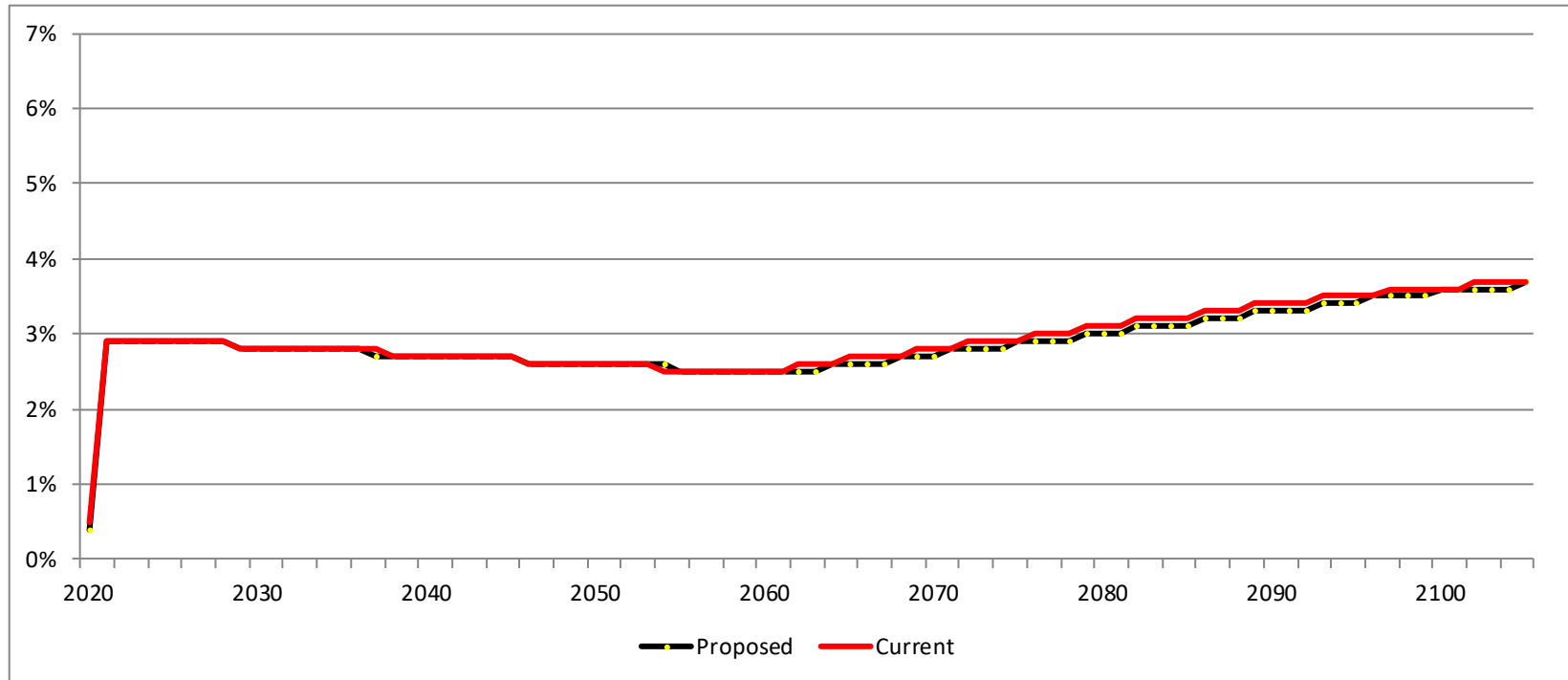
Exhibit 7-5
Medicare Part B Premium Trend



**Exhibit 7-6
 Medicare Part B Premium Trend – Percentage Table**

Fiscal Year Ending		Current	Proposed	Fiscal Year Ending		Current	Proposed
From	To			From	To		
6/30/2021	6/30/2022	4.10%	9.30%	6/30/2064	6/30/2065	4.40%	4.30%
6/30/2022	6/30/2023	5.10%	5.90%	6/30/2065	6/30/2066	4.40%	4.30%
6/30/2023	6/30/2024	6.00%	5.80%	6/30/2066	6/30/2067	4.40%	4.30%
6/30/2024	6/30/2025	6.10%	6.00%	6/30/2067	6/30/2068	4.40%	4.30%
6/30/2025	6/30/2026	5.90%	5.90%	6/30/2068	6/30/2069	4.40%	4.30%
6/30/2026	6/30/2027	6.00%	5.80%	6/30/2069	6/30/2070	4.40%	4.30%
6/30/2027	6/30/2028	5.90%	5.80%	6/30/2070	6/30/2071	4.40%	4.30%
6/30/2028	6/30/2029	5.60%	5.70%	6/30/2071	6/30/2072	4.40%	4.30%
6/30/2029	6/30/2030	5.60%	5.90%	6/30/2072	6/30/2073	4.40%	4.30%
6/30/2030	6/30/2031	5.30%	5.80%	6/30/2073	6/30/2074	4.40%	4.30%
6/30/2031	6/30/2032	5.10%	5.50%	6/30/2074	6/30/2075	4.40%	4.30%
6/30/2032	6/30/2033	5.10%	5.50%	6/30/2075	6/30/2076	4.40%	4.30%
6/30/2033	6/30/2034	5.10%	5.50%	6/30/2076	6/30/2077	4.40%	4.30%
6/30/2034	6/30/2035	5.10%	5.50%	6/30/2077	6/30/2078	4.40%	4.30%
6/30/2035	6/30/2036	5.10%	5.50%	6/30/2078	6/30/2079	4.40%	4.30%
6/30/2036	6/30/2037	5.10%	5.50%	6/30/2079	6/30/2080	4.40%	4.30%
6/30/2037	6/30/2038	5.10%	5.50%	6/30/2080	6/30/2081	4.30%	4.30%
6/30/2038	6/30/2039	5.10%	5.50%	6/30/2081	6/30/2082	4.30%	4.30%
6/30/2039	6/30/2040	5.10%	5.50%	6/30/2082	6/30/2083	4.30%	4.30%
6/30/2040	6/30/2041	4.80%	5.00%	6/30/2083	6/30/2084	4.30%	4.30%
6/30/2041	6/30/2042	4.50%	4.60%	6/30/2084	6/30/2085	4.30%	4.30%
6/30/2042	6/30/2043	4.50%	4.60%	6/30/2085	6/30/2086	4.30%	4.30%
6/30/2043	6/30/2044	4.50%	4.60%	6/30/2086	6/30/2087	4.30%	4.30%
6/30/2044	6/30/2045	4.50%	4.60%	6/30/2087	6/30/2088	4.30%	4.30%
6/30/2045	6/30/2046	4.50%	4.60%	6/30/2088	6/30/2089	4.30%	4.30%
6/30/2046	6/30/2047	4.50%	4.60%	6/30/2089	6/30/2090	4.30%	4.30%
6/30/2047	6/30/2048	4.50%	4.60%	6/30/2090	6/30/2091	4.30%	4.30%
6/30/2048	6/30/2049	4.50%	4.60%	6/30/2091	6/30/2092	4.30%	4.30%
6/30/2049	6/30/2050	4.50%	4.60%	6/30/2092	6/30/2093	4.30%	4.30%
6/30/2050	6/30/2051	4.50%	4.50%	6/30/2093	6/30/2094	4.30%	4.30%
6/30/2051	6/30/2052	4.40%	4.40%	6/30/2094	6/30/2095	4.30%	4.30%
6/30/2052	6/30/2053	4.40%	4.40%	6/30/2095	6/30/2096	4.30%	4.30%
6/30/2053	6/30/2054	4.40%	4.40%	6/30/2096	6/30/2097	4.30%	4.30%
6/30/2054	6/30/2055	4.40%	4.40%	6/30/2097	6/30/2098	4.30%	4.30%
6/30/2055	6/30/2056	4.40%	4.40%	6/30/2098	6/30/2099	4.30%	4.30%
6/30/2056	6/30/2057	4.40%	4.40%	6/30/2099	6/30/2100	4.30%	4.30%
6/30/2057	6/30/2058	4.40%	4.40%	6/30/2100	6/30/2101	4.30%	4.30%
6/30/2058	6/30/2059	4.40%	4.40%	6/30/2101	6/30/2102	4.30%	4.30%
6/30/2059	6/30/2060	4.40%	4.40%	6/30/2102	6/30/2103	4.30%	4.30%
6/30/2060	6/30/2061	4.40%	4.30%	6/30/2103	6/30/2104	4.30%	4.30%
6/30/2061	6/30/2062	4.40%	4.30%	6/30/2104	6/30/2105	4.30%	4.30%
6/30/2062	6/30/2063	4.40%	4.30%	6/30/2105	6/30/2106	4.30%	4.30%
6/30/2063	6/30/2064	4.40%	4.30%	6/30/2106	6/30/2107	4.30%	4.30%

Exhibit 7-7
Dental/Vision Trend



**Exhibit 7-8
 Dental/Vision Trend – Percentage Table**

Fiscal Year Ending		Current	Proposed	Fiscal Year Ending		Current	Proposed
From	To			From	To		
6/30/2021	6/30/2022	0.50%	0.40%	6/30/2064	6/30/2065	2.60%	2.50%
6/30/2022	6/30/2023	2.90%	2.90%	6/30/2065	6/30/2066	2.60%	2.60%
6/30/2023	6/30/2024	2.90%	2.90%	6/30/2066	6/30/2067	2.70%	2.60%
6/30/2024	6/30/2025	2.90%	2.90%	6/30/2067	6/30/2068	2.70%	2.60%
6/30/2025	6/30/2026	2.90%	2.90%	6/30/2068	6/30/2069	2.70%	2.60%
6/30/2026	6/30/2027	2.90%	2.90%	6/30/2069	6/30/2070	2.70%	2.70%
6/30/2027	6/30/2028	2.90%	2.90%	6/30/2070	6/30/2071	2.80%	2.70%
6/30/2028	6/30/2029	2.90%	2.90%	6/30/2071	6/30/2072	2.80%	2.70%
6/30/2029	6/30/2030	2.90%	2.90%	6/30/2072	6/30/2073	2.80%	2.80%
6/30/2030	6/30/2031	2.80%	2.80%	6/30/2073	6/30/2074	2.90%	2.80%
6/30/2031	6/30/2032	2.80%	2.80%	6/30/2074	6/30/2075	2.90%	2.80%
6/30/2032	6/30/2033	2.80%	2.80%	6/30/2075	6/30/2076	2.90%	2.80%
6/30/2033	6/30/2034	2.80%	2.80%	6/30/2076	6/30/2077	2.90%	2.90%
6/30/2034	6/30/2035	2.80%	2.80%	6/30/2077	6/30/2078	3.00%	2.90%
6/30/2035	6/30/2036	2.80%	2.80%	6/30/2078	6/30/2079	3.00%	2.90%
6/30/2036	6/30/2037	2.80%	2.80%	6/30/2079	6/30/2080	3.00%	2.90%
6/30/2037	6/30/2038	2.80%	2.80%	6/30/2080	6/30/2081	3.10%	3.00%
6/30/2038	6/30/2039	2.80%	2.70%	6/30/2081	6/30/2082	3.10%	3.00%
6/30/2039	6/30/2040	2.70%	2.70%	6/30/2082	6/30/2083	3.10%	3.00%
6/30/2040	6/30/2041	2.70%	2.70%	6/30/2083	6/30/2084	3.20%	3.10%
6/30/2041	6/30/2042	2.70%	2.70%	6/30/2084	6/30/2085	3.20%	3.10%
6/30/2042	6/30/2043	2.70%	2.70%	6/30/2085	6/30/2086	3.20%	3.10%
6/30/2043	6/30/2044	2.70%	2.70%	6/30/2086	6/30/2087	3.20%	3.10%
6/30/2044	6/30/2045	2.70%	2.70%	6/30/2087	6/30/2088	3.30%	3.20%
6/30/2045	6/30/2046	2.70%	2.70%	6/30/2088	6/30/2089	3.30%	3.20%
6/30/2046	6/30/2047	2.70%	2.70%	6/30/2089	6/30/2090	3.30%	3.20%
6/30/2047	6/30/2048	2.60%	2.60%	6/30/2090	6/30/2091	3.40%	3.30%
6/30/2048	6/30/2049	2.60%	2.60%	6/30/2091	6/30/2092	3.40%	3.30%
6/30/2049	6/30/2050	2.60%	2.60%	6/30/2092	6/30/2093	3.40%	3.30%
6/30/2050	6/30/2051	2.60%	2.60%	6/30/2093	6/30/2094	3.40%	3.30%
6/30/2051	6/30/2052	2.60%	2.60%	6/30/2094	6/30/2095	3.50%	3.40%
6/30/2052	6/30/2053	2.60%	2.60%	6/30/2095	6/30/2096	3.50%	3.40%
6/30/2053	6/30/2054	2.60%	2.60%	6/30/2096	6/30/2097	3.50%	3.40%
6/30/2054	6/30/2055	2.60%	2.60%	6/30/2097	6/30/2098	3.50%	3.50%
6/30/2055	6/30/2056	2.50%	2.60%	6/30/2098	6/30/2099	3.60%	3.50%
6/30/2056	6/30/2057	2.50%	2.50%	6/30/2099	6/30/2100	3.60%	3.50%
6/30/2057	6/30/2058	2.50%	2.50%	6/30/2100	6/30/2101	3.60%	3.50%
6/30/2058	6/30/2059	2.50%	2.50%	6/30/2101	6/30/2102	3.60%	3.60%
6/30/2059	6/30/2060	2.50%	2.50%	6/30/2102	6/30/2103	3.60%	3.60%
6/30/2060	6/30/2061	2.50%	2.50%	6/30/2103	6/30/2104	3.70%	3.60%
6/30/2061	6/30/2062	2.50%	2.50%	6/30/2104	6/30/2105	3.70%	3.60%
6/30/2062	6/30/2063	2.50%	2.50%	6/30/2105	6/30/2106	3.70%	3.60%
6/30/2063	6/30/2064	2.60%	2.50%	6/30/2106	6/30/2107	3.70%	3.70%

Appendix A Proposed Actuarial Procedures and Assumptions

This section of the experience study report reflects how the Appendix A of the July 1, 2020 actuarial valuation will appear since the Board of Retirement adopted all of the recommended assumptions at the March 3, 2021 Board of Retirement meeting. This will only contain assumptions approved in the 2020 Investigation of Experience for OPEB related assumptions. Changes to OPEB related assumptions are highlighted in yellow.

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Note: The OPEB specific assumptions shown in this appendix are Milliman's proposed assumptions that have been adopted by the Board of Retirement March 2021 meeting. Recommended OPEB related changes from the prior assumptions have been shaded in yellow.

Appendix A: Actuarial Procedures and Assumptions

The actuarial procedures and assumptions used in this valuation are described in this section. Where applicable, the same assumptions are used for the LACERA postemployment health and death benefit program as for the LACERA retirement benefits. The assumptions that overlap with the LACERA retirement benefits plan assumptions were reviewed and changed June 30, 2019, as a result of the 2019 triennial Retirement Benefit Investigation of Experience Study, approved by the Board of Investments in January 2020. These assumptions are consistent with the June 30, 2020 retirement funding valuation. The investment earnings assumptions are OPEB specific and were reviewed and changed June 30, 2020 as a result of the 2020 OPEB Experience Study. For agents that are prefunding into LACERA's OPEB Trust, the expected return of the assets of the OPEB Trust is based on the asset allocation approved in the March 2021 Board of Retirement meeting, which is a different asset allocation from the one used for the retirement benefits plan. The investment earnings assumption for agents that are not prefunding into LACERA's OPEB Trust is based on the expected return from the County's general assets in the 2020 OPEB Experience Study. The OPEB specific assumptions other than premiums, claim costs, aging, and trend were changed as a result of the 2020 OPEB Investigation of Experience Study approved in the March 2021 Board of Retirement meeting. The premiums, claim costs, aging, and trend are updated with the 2021-2022 annual medical and dental plan rate renewals in the July 1, 2020 OPEB funding valuation report Appendix A.

The actuarial assumptions used in both the retirement benefits plan and OPEB program actuarial valuation are intended to estimate the future experience of the members eligible for benefit payments and the projected benefit flow and anticipated investment earnings. Any variations in future experience from that expected from these assumptions will result in corresponding changes in the estimated costs of the benefits.

Table A-1 summarizes the assumptions. The general wage increase, inflation, and retirement specific demographic assumptions were developed in the 2019 retirement benefits experience study. Nearly all of the OPEB specific demographic and investment earnings assumptions were developed in the 2020 OPEB experience study report. The claim costs and health cost trend assumptions with the 2021-2022 annual medical and dental plan rate renewals will be updated in the July 1, 2020 OPEB funding valuation.

Retirement Benefit Assumptions

Tables A-2 and A-3 show how members are expected to leave retired status due to death. These were developed from the experience as measured by the 2019 Retirement Benefit Investigation of Experience Study.

Table A-4 presents the probability of a refund of retirement benefit contributions upon termination of employment while vested. These were developed from the experience as measured by the 2019 Retirement Benefit Investigation of Experience Study.

Table A-5 presents the general wage increase of 3.25% per annum. This was developed from the experience as measured by the 2019 Retirement Benefit Investigation of Experience Study.

Tables A-6 to A-13 present the rates of separation of active service. These were developed from the experience as measured by the 2019 Retirement Benefit Investigation of Experience Study. The rates are the probabilities a member will leave active employment for various reasons.

OPEB Assumptions

Tables A-14 to A-19 present enrollment assumptions. These were developed from the 2020 OPEB Investigation of Experience Study to estimate health eligibility and enrollment.

Tables A-20 to A-21 present premium and claim cost assumptions developed from the OPEB program's July 1, 2020 premium and claim information.

Table A-22 presents the health cost trend rates for the July 1, 2020 OPEB valuation. These rates will reflect the final July 1, 2021 annual medical and dental plan rate renewals in the July 1, 2020 OPEB Valuation. These rates do not reflect the impact from the enactment of H.R. 1865 which includes the repeal of the Affordable Care Act (ACA) Excise Tax and the inclusion of the ACA Health Insurer fee for only calendar year 2020.

Table A-23 presents the assumed retirement rates for vested terminated members developed from the 2020 OPEB Investigation of Experience study.

Actuarial Cost Method

Effective with the July 1, 2018 OPEB funding valuation, the Entry Age Normal (EAN) actuarial cost method is being used. Under the principles of this method, the actuarial present value of the projected benefits of each individual included in the valuation is allocated as a level percentage of the individual's projected compensation between entry age and assumed exit (until maximum retirement age). For members who transferred between plans, entry age is based on original entry into the system.

The portion of this actuarial present value allocated to a valuation year is called the Normal Cost (NC). The portion of this actuarial present value not provided for at a valuation date by the sum of (a) the actuarial value of the assets, and (b) the actuarial present value of future Normal Costs is called the Unfunded Actuarial Accrued Liability (UAAL). The UAAL is amortized as a level percentage of the projected salaries of the active members, both present and future, covered by the LACERA retirement benefits plan over a 30-year period from the valuation date; this is commonly referred to as a "rolling 30-year amortization method". This method does not cover interest on the UAAL. We will consider changing the amortization method in the 2023 OPEB Investigation of Experience.

Records and Data

The data used in this valuation consist of medical and dental/vision premiums, financial information, and the age, service, and salary records for active and inactive members and their survivors. All of the information was supplied by LACERA, Segal, and Meketa Investment Group and was accepted for valuation purposes without audit.

Growth in Membership

For benefit determination purposes, no growth in the membership of LACERA is assumed. For funding purposes, if amortization is required, the total payroll of covered members is assumed to grow due to the combined effects of future wage increases of current active members and the replacement of the current active members by new employees. No growth in the total number of active members is assumed.

Valuation of Assets

The asset valuation method is market value.

Investment Earnings and Expenses

The investment earnings assumption is used to discount all the projected benefits that are expected to be received in the future for all current members. This OPEB program utilizes two investment earnings assumptions depending on whether the agent is prefunding into the OPEB Trust or not. For this funding valuation, we have chosen to utilize the same criteria for a qualified prefunding trust as GASB 74 and 75. The criteria include: (1) irrevocable trust contributions, (2) assets are dedicated to providing OPEB to plan members, and (3) assets are legally protected from creditors of employers and plan members.

The investment earnings assumption for agents that are prefunding through the OPEB Trust is the OPEB Trust expected return of 6.00%. The investment earnings assumption for agents that are not prefunding through the OPEB Trust is the County's general funds expected return of 2.30%. These rates were adopted from the 2020 OPEB Investigation of Experience Study.

The change from cost sharing to agent began with the July 1, 2018 OPEB funding valuation. The investment earnings assumption approach for this funding valuation is intended to reflect the earnings associated with each agent. The separate GASB 75 disclosure report, which is different from this funding valuation, follows a prescribed discount rate for accounting disclosures.

Health Cost Trend

The health cost trend is the projected increase in per person health costs from one year to the next. The trend assumptions vary by benefit type and by future fiscal year as illustrated in Table A-22. The first-year trends reflect the final July 1, 2021 annual medical and dental plan rate renewals in the July 1, 2020 OPEB Valuation. See the discussion in Table A-22 for more details about the trend assumptions. These trend rates were adopted July 1, 2020.

Future Salaries

The 3.25% per annum rate of increase in the general wage level of membership is in Table A-5. This rate was adopted June 30, 2019.

Retirement

Members in General Plans A-D may retire at age 50 with 10 years of service, or any age with 30 years of service, or age 70 regardless of the number of years of service. General Plan G members are eligible to retire at age 52 with 5 years of service, or age 70 regardless of the number of years of service. Non-contributory Plan E members may retire at age 55 with 10 years of service. Members of Safety Plans A and B may retire at age 50 with 10 years of service, or any age with 20 years of service. Safety Plan C members are eligible to retire at age 50 with 5 years of County service.

The retirement rates for active members vary by age and are shown by plan in Tables A-6 through A-13.

All general members who attain or who have attained age 75 in active service and all safety members who have attained age 65 in active service are assumed to retire immediately (except for Safety Plan C members who have not yet attained 5 years of service). All deferred vested members are assumed to retire according to Table A-23.

The assumptions regarding termination of employment, early retirement, and unreduced service retirement are treated as a single set of decrements in regard to a particular member. For example, a general member hired at age 30 has a probability to withdraw from LACERA due to death, disability, or *other termination of employment* until age 50. After age 50, the member could still withdraw due to death,

disability, or *retirement*. Thus, in no year during the member's projected employment would they be eligible for both a probability of other termination of employment and a probability of retirement.

The active members' retirement probabilities were adopted June 30, 2019. The terminated vested member's retirement probabilities were adopted July 1, 2020, for purposes of the OPEB program valuation.

Disability

The rates of disability used in the valuation are illustrated in Tables A-6 through A-13. These rates were adopted June 30, 2019.

Postretirement Mortality – Other Than Disabled Members

The same postretirement mortality rates are used in the valuation for active members, members retired for service, and beneficiaries. These rates are illustrated in Table A-2. Current beneficiary mortality is assumed to be the same assumption as healthy members of the same gender. Future beneficiaries are assumed to be of the opposite gender and have the same mortality as General members. Note that these assumptions directly reflect the expected future mortality improvement. These rates were adopted June 30, 2019.

Males	General members: PubG-2010 Healthy Retiree Mortality Table for Males, with MP-2014 Ultimate Projection Scale. Safety members: PubS-2010 Healthy Retiree Mortality Table for Males multiplied by 85%, with MP- 2014 Ultimate Projection Scale.
Females	General members: PubG-2010 Healthy Retiree Mortality Table for Females multiplied by 110%, with MP-2014 Ultimate Projection Scale. Safety members: PubS-2010 Healthy Retiree Mortality Table for Females, with MP-2014 Ultimate Projection Scale.

Postretirement Mortality – Disabled Members

For disabled members, the mortality rates used in the valuation rates are illustrated in Table A-3. Note that these assumptions directly reflect the expected future mortality improvement. These rates were adopted June 30, 2019.

Males	General members: Average of PubG-2010 Healthy Retiree Mortality Table for Males and PubG-2010 Disabled Retiree Mortality Table for Males, both projected with MP-2014 Ultimate Projection Scale. Safety members: PubS-2010 Healthy Retiree Mortality Table for Males, with MP-2014 Ultimate Projection Scale.
Females	General members: Average of PubG-2010 Healthy Retiree Mortality Table for Females and PubG-2010 Disabled Retiree Mortality Table for Females, both projected with MP-2014 Ultimate Projection Scale. Safety members: PubS-2010 Healthy Retiree Mortality Table for Females, with MP-2014 Ultimate Projection Scale.

Mortality While in Active Status

For active members, the mortality rates used in the valuation are illustrated in Tables A-6 through A-13. These rates were adopted June 30, 2019.

Class	Gender	Proposed Table
General	Male	PubG-2010 (120%) Employee Male ⁽¹⁾
General	Female	PubG-2010 (130%) Employee Female ⁽¹⁾
Safety	Male	PubS-2010 (100%) Employee Male ⁽¹⁾
Safety	Female	PubS-2010 (100%) Employee Female ⁽¹⁾

1. Projection using the MP-2014 Ultimate projection scale.

Note that Safety members have an additional service-connected mortality probability of 0.01% per year.

Other Employment Terminations

Tables A-6 to A-13 show, for all ages, the probabilities assumed in this valuation for future termination from active service other than for death, disability, or retirement. These probabilities do not apply to members eligible for service retirement. These probabilities were adopted June 30, 2019.

Terminating employees may withdraw their contributions immediately upon termination of employment and forfeit the right to further retirement, medical, dental/vision, and death benefits, or they may leave their contributions with LACERA. Former contributing members whose contributions are on deposit may later elect to receive a refund, may return to work, or may remain inactive until becoming eligible to receive a retirement benefit under either LACERA or a reciprocal retirement plan. All terminating members who are not eligible for vested benefits are assumed to withdraw their contributions immediately. All terminating members are assumed not to be rehired in the future.

Table A-4 gives the assumed probabilities that vested members will withdraw their contributions and elect a refund immediately upon termination and the probability that remaining members will elect a deferred retirement allowance. All non-vested members are assumed to elect a refund and withdraw their contributions. These rates in Table A-4 were adopted June 30, 2019.

Future Transfers

Though a few active members may change pension plans, this valuation assumes the active members remain in the plan they are enrolled in at the time of the valuation. Specifically, we assume there will be no future transfers between retirement benefit plans.

Retiree Medical and Dental/Vision Eligibility and Enrollment Assumptions

Any retired or vested terminated members who have not yet elected a refund of their member contributions and will receive a pension benefit other than a refund are eligible for retiree medical and dental/vision enrollment.

The 2020 OPEB Investigation of Experience report was used to set the following assumptions:

Age difference for future retirees and spouses	Table A-1
Probability of initial medical enrollment upon retirement	Table A-14
Probability of medical plan and coverage tier selection upon retirement for Tier 1	Table A-15A
Probability of medical plan and coverage tier selection upon retirement for Tier 2	Table A-15B
Probability of medical plan and coverage tier selection for Pre 65 retirees who become eligible for a Post 65 Plan	Table A-16
Probability of survivor and new dependent enrollment	Table A-17
Probability of dental/vision enrollment upon retirement	Table A-18
Probability of dental/vision plan and coverage tier selection upon retirement	Table A-19
Retirement of vested terminated members	Table A-23
Probability of retirees in group plans who elect Medicare Part D	0%

Table A-1
Summary of Valuation Assumptions as of July 1, 2020

- I. Economic Assumptions
 - A. General wage increases 3.25%
 - B1. Investment earnings (prefunding in OPEB Trust) 6.00%
 - B2. Investment earnings (no prefunding in OPEB Trust) **2.30%**
 - C. Growth in membership 0.00%
 - D. CPI inflation assumption 2.75%
 - E. Medical cost trend Table A-22
 - F. Dental and vision cost trend Table A-22

- II. Demographic Assumptions
 - A. Salary increases due to Service Table A-5
 - B. Retirement Tables A-6 to A-13
 - C. Disability Tables A-6 to A-13
 - D. Mortality during active employment Tables A-6 to A-13
 - E. Mortality for active members after termination and service retired members⁽¹⁾. Table A-2

Class	Gender	
General	Male	PubG-2010 (100%) Healthy Retiree Male
General	Female	PubG-2010 (110%) Healthy Retiree Female
Safety	Male	PubS-2010 (85%) Healthy Retiree Male
Safety	Female	PubS-2010 (100%) Healthy Retiree Female

- F. Mortality among disabled members⁽¹⁾ Table A-3

Class	Gender	
General	Male	Avg of: PubG-2010 (100%) Healthy Retiree Male PubG-2010 (100%) Disabled Retiree Male
General	Female	Avg of: PubG-2010 (100%) Healthy Retiree Female PubG-2010 (100%) Disabled Retiree Female
Safety	Male	PubS-2010 (100%) Healthy Retiree Male
Safety	Female	PubS-2010 (100%) Healthy Retiree Female

- G. Mortality for Beneficiaries⁽¹⁾ Table A-2

Basis – Beneficiaries are assumed to have the same mortality as a general member of the opposite gender who has taken a service retirement.

1. All mortality probabilities are projected using the MP-2014 Ultimate projection scale.

H. Other Terminations of Employment	Tables A-6 to A-13
I. Refund of Contributions on Vested Termination	Table A-4
J. Future male retirees are assumed to be four years older than their female spouses. Assumption adopted July 1, 2008. Future female retirees are assumed to be one year younger than their male spouses. Assumption adopted July 1, 2020.	
III. Retiree Medical and Dental/Vision Enrollment Assumptions	
A. Probability of Initial Medical Enrollment upon Retirement	Table A-14
B. Probability of Medical Plan and Coverage Tier Selection Upon Retirement (Pre 65 Male, Pre 65 Female, Post 65 Male, Post 65 Female)	Table A-15
C. Probability of Medical Plan and Coverage Tier Selection for Pre 65 Retirees Who become Eligible for a <i>Post</i> 65 Plan	Table A-16
D. Probability of Medical Survivor and New Dependent Enrollment	Table A-17
E. Probability of Retirees in Group Plans Who Elect Medicare Part D. We have assumed there is no cost impact due to retirees and dependents enrolling in Part D.	0%
F. Probability of Dental/Vision Enrollment upon Retirement	Table A-18
G. Probability of Dental/Vision Plan and Coverage Tier Selection Upon Retirement	Table A-19
IV. Premium and Claim Cost Analysis	Tables A-20 to A-21
V. Medical and Dental/Vision Trend	Table A-22
VI. Retirement of Vested Terminated Members	Table A-23

Table A-2
Mortality for Members Retired for Service⁽¹⁾

Age	Safety Male	Safety Female	General Male	General Female
20	0.0520%	0.0210%	0.0740%	0.0380%
25	0.0470%	0.0260%	0.0560%	0.0260%
30	0.0520%	0.0350%	0.0720%	0.0440%
35	0.0590%	0.0470%	0.0940%	0.0680%
40	0.0750%	0.0640%	0.1320%	0.1060%
45	0.1037%	0.0870%	0.1960%	0.1650%
50	0.1632%	0.1490%	0.2980%	0.2442%
55	0.2601%	0.2580%	0.4310%	0.3146%
60	0.4318%	0.4460%	0.6150%	0.4224%
65	0.7489%	0.7700%	0.9130%	0.6743%
70	1.3328%	1.3290%	1.5260%	1.1693%
75	2.4021%	2.2950%	2.6710%	2.0713%
80	4.3376%	3.9620%	4.7740%	3.6960%
85	7.7648%	6.8420%	8.5910%	6.8255%
90	13.4810%	11.8150%	14.6720%	12.6357%

Annual Projected Mortality Improvement

Age	All Groups
65 & Less	1.000%
70	1.000%
75	1.000%
80	1.000%
85	1.000%
90	0.930%
95	0.850%
100	0.640%
105	0.430%
110	0.210%
115	0.000%

1. Mortality probabilities are those applicable for the fiscal year beginning in 2010. Annual projected improvements are assumed in the following years under the schedule shown. For example, the annual mortality probability for an 85-year old Safety male in fiscal year beginning in 2020 is 7.0223% calculated as follows:

$$\begin{aligned}
 \text{Age 85 probability in 2020} &= \text{Age 85 probability in 2010 with 10 years improvement} \\
 &= 7.7648\% \times (100.0\% - 1.0\%)^{10} \\
 &= 7.0223\%
 \end{aligned}$$

Table A-3
Mortality for Members Retired for Disability⁽¹⁾

Age	Safety Male	Safety Female	General Male	General Female
20	0.0610%	0.0210%	0.2430%	0.1340%
25	0.0550%	0.0260%	0.1670%	0.0940%
30	0.0610%	0.0350%	0.2130%	0.1485%
35	0.0700%	0.0470%	0.2760%	0.2315%
40	0.0880%	0.0640%	0.3885%	0.3625%
45	0.1220%	0.0870%	0.6015%	0.5675%
50	0.1920%	0.1490%	0.9515%	0.8525%
55	0.3060%	0.2580%	1.2725%	1.0140%
60	0.5080%	0.4460%	1.5590%	1.1700%
65	0.8810%	0.7700%	1.9785%	1.4345%
70	1.5680%	1.3290%	2.7135%	1.9625%
75	2.8260%	2.2950%	3.9315%	2.9430%
80	5.1030%	3.9620%	6.0610%	4.6835%
85	9.1350%	6.8420%	9.7030%	7.7680%
90	15.8600%	11.8150%	15.4625%	12.5760%

1. Mortality probabilities are those applicable for the fiscal year beginning in 2010. Annual projected improvements are assumed in the following years under the schedule shown on the preceding page.

Table A-4
Immediate Refund of Contributions upon Termination of Employment
(Excludes Plan E)

Years of Service	General	Safety
0	100%	100%
1	100%	100%
2	100%	100%
3	100%	100%
4	100%	100%
5	32%	30%
6	32%	30%
7	32%	30%
8	32%	28%
9	31%	26%
10	31%	24%
11	30%	22%
12	30%	20%
13	29%	18%
14	28%	16%
15	26%	14%
16	25%	12%
17	24%	10%
18	22%	9%
19	21%	8%
20	19%	7%
21	18%	6%
22	16%	5%
23	14%	4%
24	12%	3%
25	10%	2%
26	8%	2%
27	6%	2%
28	4%	2%
29	2%	2%
30 & Above	0%	0%

**Table A-5
 Annual Increase in Salary**

Payroll is assumed to increase with the general wage increase of 3.25% per annum in addition to individual annual increases from promotion and longevity. The promotion and longevity increases shown in the table below are combined with the general wage increase on a compound basis and are used for the Entry Age Normal cost method. General wage increases and individual salary increases due to promotion and longevity do not affect the amount of the OPEB program's benefits.

Years of Service	General	Safety
<1	6.00%	9.00%
1	5.25%	8.50%
2	4.75%	8.00%
3	4.10%	6.00%
4	3.50%	4.50%
5	3.00%	3.25%
6	2.50%	2.50%
7	2.00%	2.00%
8	1.60%	1.50%
9	1.30%	1.35%
10	1.15%	1.20%
11	1.00%	1.05%
12	0.85%	0.95%
13	0.75%	0.85%
14	0.70%	0.75%
15	0.65%	0.70%
16	0.60%	0.65%
17	0.55%	0.60%
18	0.50%	0.55%
19	0.45%	2.25%
20	0.40%	0.50%
21	0.35%	0.50%
22	0.30%	0.50%
23	0.25%	0.50%
24	0.25%	3.00%
25	0.25%	0.50%
26	0.25%	0.50%
27	0.25%	0.50%
28	0.25%	0.50%
29	0.25%	3.00%
30 & Above	0.25%	0.50%

**Appendix A: Probabilities of Separation from Active Service
Tables A-6 to A-13**

A schedule of the probabilities of termination of employment due to the following causes can be found on the following pages:

Service Retirement:	Member retires after meeting age and service requirements for reasons other than disability.
Other Terminations:	Member terminates and elects a refund of member contributions or a deferred vested retirement benefit.
Service Disability:	Member receives disability retirement; disability is service related.
Ordinary Disability:	Member receives disability retirement; disability is not service related.
Service Death:	Member dies before retirement; death is service related.
Ordinary Death:	Member dies before retirement; death is not service related.

Each of these represents the probability that a member will separate from service at each age due to the particular cause. For example, a probability of 0.0300 for a member's service retirement at age 50 means we assume that 30 out of 1,000 members who are age 50 will retire at that age.

Each table represents the detailed rates needed for each LACERA plan by gender:

Table A-6: General Plans A, B, & C Males	A-10: General Plan E Males
A-7: General Plans A, B, & C Females	A-11: General Plan E Females
A-8: General Plans D & G Males	A-12: Safety Plans A, B, & C Males
A-9: General Plans D & G Females	A-13: Safety Plans A, B, & C Females

Table A-6
Probability of Separation from Active Service for General Members
Plans A, B, & C – Male

Age	Service Retirement	Other Terminations	Service Disability	Ordinary Disability	Service Death	Ordinary Death
18	0.00000	0.00500	0.00010	0.00010	N/A	0.00043
19	0.00000	0.00500	0.00010	0.00010	N/A	0.00046
20	0.00000	0.00500	0.00010	0.00010	N/A	0.00044
21	0.00000	0.00500	0.00010	0.00010	N/A	0.00043
22	0.00000	0.00500	0.00010	0.00010	N/A	0.00040
23	0.00000	0.00500	0.00010	0.00010	N/A	0.00037
24	0.00000	0.00500	0.00010	0.00010	N/A	0.00035
25	0.00000	0.00500	0.00010	0.00010	N/A	0.00034
26	0.00000	0.00500	0.00010	0.00010	N/A	0.00036
27	0.00000	0.00500	0.00010	0.00010	N/A	0.00037
28	0.00000	0.00500	0.00010	0.00010	N/A	0.00040
29	0.00000	0.00500	0.00010	0.00010	N/A	0.00041
30	0.00000	0.00500	0.00010	0.00020	N/A	0.00043
31	0.00000	0.00500	0.00010	0.00020	N/A	0.00046
32	0.00000	0.00500	0.00010	0.00020	N/A	0.00048
33	0.00000	0.00500	0.00016	0.00020	N/A	0.00050
34	0.00000	0.00500	0.00022	0.00020	N/A	0.00053
35	0.00000	0.00500	0.00028	0.00020	N/A	0.00056
36	0.00000	0.00500	0.00034	0.00020	N/A	0.00060
37	0.00000	0.00500	0.00040	0.00020	N/A	0.00064
38	0.00000	0.00500	0.00048	0.00020	N/A	0.00068
39	0.00000	0.00500	0.00056	0.00020	N/A	0.00073
40	0.03000	0.00500	0.00064	0.00020	N/A	0.00079
41	0.03000	0.00500	0.00072	0.00020	N/A	0.00085
42	0.03000	0.00500	0.00080	0.00020	N/A	0.00092
43	0.03000	0.00500	0.00084	0.00024	N/A	0.00100
44	0.03000	0.00500	0.00088	0.00028	N/A	0.00108
45	0.03000	0.00500	0.00092	0.00032	N/A	0.00118
46	0.03000	0.00500	0.00096	0.00036	N/A	0.00128
47	0.03000	0.00500	0.00100	0.00040	N/A	0.00139
48	0.03000	0.00500	0.00104	0.00044	N/A	0.00152
49	0.03000	0.00500	0.00108	0.00048	N/A	0.00166
50	0.03000	0.00500	0.00112	0.00052	N/A	0.00179
51	0.03000	0.00500	0.00116	0.00056	N/A	0.00194
52	0.03000	0.00500	0.00120	0.00060	N/A	0.00210
53	0.03000	0.00500	0.00156	0.00064	N/A	0.00227
54	0.06000	0.00500	0.00192	0.00068	N/A	0.00244
55	0.10000	0.00500	0.00228	0.00072	N/A	0.00263
56	0.12000	0.00500	0.00264	0.00076	N/A	0.00283
57	0.17000	0.00500	0.00300	0.00080	N/A	0.00306
58	0.26000	0.00500	0.00330	0.00084	N/A	0.00330
59	0.26000	0.00500	0.00360	0.00088	N/A	0.00355
60	0.32000	0.00500	0.00390	0.00092	N/A	0.00383
61	0.32000	0.00500	0.00420	0.00096	N/A	0.00413
62	0.32000	0.00500	0.00450	0.00100	N/A	0.00445
63	0.32000	0.00500	0.00450	0.00104	N/A	0.00481
64	0.32000	0.00500	0.00450	0.00108	N/A	0.00520
65	0.32000	0.00500	0.00450	0.00112	N/A	0.00562
66	0.25000	0.00500	0.00450	0.00116	N/A	0.00607
67	0.24000	0.00500	0.00450	0.00120	N/A	0.00658
68	0.24000	0.00500	0.00450	0.00124	N/A	0.00713
69	0.24000	0.00500	0.00450	0.00128	N/A	0.00775
70	0.24000	0.00500	0.00450	0.00132	N/A	0.00844
71	0.24000	0.00500	0.00450	0.00136	N/A	0.00920
72	0.24000	0.00500	0.00450	0.00140	N/A	0.01004
73	0.24000	0.00500	0.00450	0.00144	N/A	0.01098
74	0.24000	0.00500	0.00450	0.00148	N/A	0.01201
75	1.00000	0.00000	0.00000	0.00000	N/A	0.01315

Table A-7
Probability of Separation from Active Service for General
Members
Plans A, B, & C – Female

Age	Service Retirement	Other Terminations	Service Disability	Ordinary Disability	Service Death	Ordinary Death
18	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
19	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
20	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
21	0.00000	0.00500	0.00015	0.00010	N/A	0.00016
22	0.00000	0.00500	0.00015	0.00010	N/A	0.00014
23	0.00000	0.00500	0.00015	0.00010	N/A	0.00013
24	0.00000	0.00500	0.00015	0.00010	N/A	0.00012
25	0.00000	0.00500	0.00015	0.00010	N/A	0.00012
26	0.00000	0.00500	0.00015	0.00010	N/A	0.00013
27	0.00000	0.00500	0.00015	0.00010	N/A	0.00014
28	0.00000	0.00500	0.00015	0.00010	N/A	0.00016
29	0.00000	0.00500	0.00015	0.00010	N/A	0.00017
30	0.00000	0.00500	0.00015	0.00010	N/A	0.00020
31	0.00000	0.00500	0.00015	0.00010	N/A	0.00021
32	0.00000	0.00500	0.00015	0.00010	N/A	0.00023
33	0.00000	0.00500	0.00020	0.00010	N/A	0.00025
34	0.00000	0.00500	0.00025	0.00010	N/A	0.00027
35	0.00000	0.00500	0.00030	0.00010	N/A	0.00030
36	0.00000	0.00500	0.00035	0.00010	N/A	0.00033
37	0.00000	0.00500	0.00040	0.00010	N/A	0.00036
38	0.00000	0.00500	0.00042	0.00014	N/A	0.00039
39	0.00000	0.00500	0.00044	0.00018	N/A	0.00043
40	0.03000	0.00500	0.00046	0.00022	N/A	0.00047
41	0.03000	0.00500	0.00048	0.00026	N/A	0.00052
42	0.03000	0.00500	0.00050	0.00030	N/A	0.00056
43	0.03000	0.00500	0.00060	0.00032	N/A	0.00061
44	0.03000	0.00500	0.00070	0.00034	N/A	0.00066
45	0.03000	0.00500	0.00080	0.00036	N/A	0.00073
46	0.03000	0.00500	0.00090	0.00038	N/A	0.00079
47	0.03000	0.00500	0.00100	0.00040	N/A	0.00086
48	0.03000	0.00500	0.00110	0.00042	N/A	0.00092
49	0.03000	0.00500	0.00120	0.00044	N/A	0.00100
50	0.03000	0.00500	0.00130	0.00046	N/A	0.00108
51	0.03000	0.00500	0.00140	0.00048	N/A	0.00117
52	0.03000	0.00500	0.00150	0.00050	N/A	0.00126
53	0.03000	0.00500	0.00156	0.00052	N/A	0.00137
54	0.06000	0.00500	0.00162	0.00054	N/A	0.00147
55	0.10000	0.00500	0.00168	0.00056	N/A	0.00160
56	0.12000	0.00500	0.00174	0.00058	N/A	0.00173
57	0.17000	0.00500	0.00180	0.00060	N/A	0.00187
58	0.26000	0.00500	0.00194	0.00064	N/A	0.00203
59	0.26000	0.00500	0.00208	0.00068	N/A	0.00221
60	0.32000	0.00500	0.00222	0.00072	N/A	0.00242
61	0.32000	0.00500	0.00236	0.00076	N/A	0.00264
62	0.32000	0.00500	0.00250	0.00080	N/A	0.00289
63	0.32000	0.00500	0.00250	0.00084	N/A	0.00317
64	0.32000	0.00500	0.00250	0.00088	N/A	0.00350
65	0.32000	0.00500	0.00250	0.00092	N/A	0.00385
66	0.25000	0.00500	0.00250	0.00096	N/A	0.00425
67	0.24000	0.00500	0.00250	0.00100	N/A	0.00471
68	0.24000	0.00500	0.00250	0.00104	N/A	0.00520
69	0.24000	0.00500	0.00250	0.00108	N/A	0.00575
70	0.24000	0.00500	0.00250	0.00112	N/A	0.00636
71	0.24000	0.00500	0.00250	0.00116	N/A	0.00703
72	0.24000	0.00500	0.00250	0.00120	N/A	0.00777
73	0.24000	0.00500	0.00250	0.00124	N/A	0.00859
74	0.24000	0.00500	0.00250	0.00128	N/A	0.00950
75	1.00000	0.00000	0.00000	0.00000	N/A	0.01050

Table A-8
Probability of Separation from Active Service for General
Members
Plan D & G – Male

Age	Service Retirement Plan D	Service Retirement Plan G	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	0.00000	0.00010	0.00010	N/A	0.00043	0	0.07000
19	0.00000	0.00000	0.00010	0.00010	N/A	0.00046	1	0.05500
20	0.00000	0.00000	0.00010	0.00010	N/A	0.00044	2	0.04000
21	0.00000	0.00000	0.00010	0.00010	N/A	0.00043	3	0.03250
22	0.00000	0.00000	0.00010	0.00010	N/A	0.00040	4	0.02500
23	0.00000	0.00000	0.00010	0.00010	N/A	0.00037	5	0.02330
24	0.00000	0.00000	0.00010	0.00010	N/A	0.00035	6	0.02170
25	0.00000	0.00000	0.00010	0.00010	N/A	0.00034	7	0.02000
26	0.00000	0.00000	0.00010	0.00010	N/A	0.00036	8	0.01900
27	0.00000	0.00000	0.00010	0.00010	N/A	0.00037	9	0.01800
28	0.00000	0.00000	0.00010	0.00010	N/A	0.00040	10	0.01700
29	0.00000	0.00000	0.00010	0.00010	N/A	0.00041	11	0.01600
30	0.00000	0.00000	0.00010	0.00020	N/A	0.00043	12	0.01500
31	0.00000	0.00000	0.00010	0.00020	N/A	0.00046	13	0.01400
32	0.00000	0.00000	0.00010	0.00020	N/A	0.00048	14	0.01300
33	0.00000	0.00000	0.00016	0.00020	N/A	0.00050	15	0.01200
34	0.00000	0.00000	0.00022	0.00020	N/A	0.00053	16	0.01100
35	0.00000	0.00000	0.00028	0.00020	N/A	0.00056	17	0.01000
36	0.00000	0.00000	0.00034	0.00020	N/A	0.00060	18	0.00920
37	0.00000	0.00000	0.00040	0.00020	N/A	0.00064	19	0.00840
38	0.00000	0.00000	0.00048	0.00020	N/A	0.00068	20	0.00760
39	0.00000	0.00000	0.00056	0.00020	N/A	0.00073	21	0.00680
40	0.01500	0.00000	0.00064	0.00020	N/A	0.00079	22	0.00600
41	0.01500	0.00000	0.00072	0.00020	N/A	0.00085	23	0.00560
42	0.01500	0.00000	0.00080	0.00020	N/A	0.00092	24	0.00520
43	0.01500	0.00000	0.00084	0.00024	N/A	0.00100	25	0.00480
44	0.01500	0.00000	0.00088	0.00028	N/A	0.00108	26	0.00440
45	0.01500	0.00000	0.00092	0.00032	N/A	0.00118	27	0.00400
46	0.01500	0.00000	0.00096	0.00036	N/A	0.00128	28	0.00400
47	0.01500	0.00000	0.00100	0.00040	N/A	0.00139	29	0.00400
48	0.01500	0.00000	0.00104	0.00044	N/A	0.00152	30 & Above	0.00000
49	0.01500	0.00000	0.00108	0.00048	N/A	0.00166		
50	0.01500	0.01200	0.00112	0.00052	N/A	0.00179		
51	0.01200	0.00960	0.00116	0.00056	N/A	0.00194		
52	0.01200	0.00960	0.00120	0.00060	N/A	0.00210		
53	0.01500	0.01200	0.00156	0.00064	N/A	0.00227		
54	0.02000	0.01600	0.00192	0.00068	N/A	0.00244		
55	0.02500	0.02000	0.00228	0.00072	N/A	0.00263		
56	0.02500	0.02000	0.00264	0.00076	N/A	0.00283		
57	0.03000	0.02400	0.00300	0.00080	N/A	0.00306		
58	0.03500	0.02800	0.00330	0.00084	N/A	0.00330		
59	0.05000	0.04000	0.00360	0.00088	N/A	0.00355		
60	0.07000	0.05600	0.00390	0.00092	N/A	0.00383		
61	0.08000	0.06400	0.00420	0.00096	N/A	0.00413		
62	0.11000	0.11000	0.00450	0.00100	N/A	0.00445		
63	0.11000	0.11000	0.00450	0.00104	N/A	0.00481		
64	0.16000	0.16000	0.00450	0.00108	N/A	0.00520		
65	0.23000	0.18000	0.00450	0.00112	N/A	0.00562		
66	0.20000	0.18000	0.00450	0.00116	N/A	0.00607		
67	0.19000	0.30000	0.00450	0.00120	N/A	0.00658		
68	0.18000	0.18000	0.00450	0.00124	N/A	0.00713		
69	0.20000	0.20000	0.00450	0.00128	N/A	0.00775		
70	0.23000	0.23000	0.00450	0.00132	N/A	0.00844		
71	0.20000	0.20000	0.00450	0.00136	N/A	0.00920		
72	0.20000	0.20000	0.00450	0.00140	N/A	0.01004		
73	0.20000	0.20000	0.00450	0.00144	N/A	0.01098		
74	0.20000	0.20000	0.00450	0.00148	N/A	0.01201		
75	1.00000	1.00000	0.00000	0.00000	N/A	0.01315		

Table A-9
Probability of Separation from Active Service for General
Members
Plan D and G – Female

Age	Service Retirement Plan D	Service Retirement Plan G	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	0	0.07000
19	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	1	0.05500
20	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	2	0.04000
21	0.00000	0.00000	0.00015	0.00010	N/A	0.00016	3	0.03250
22	0.00000	0.00000	0.00015	0.00010	N/A	0.00014	4	0.02500
23	0.00000	0.00000	0.00015	0.00010	N/A	0.00013	5	0.02330
24	0.00000	0.00000	0.00015	0.00010	N/A	0.00012	6	0.02170
25	0.00000	0.00000	0.00015	0.00010	N/A	0.00012	7	0.02000
26	0.00000	0.00000	0.00015	0.00010	N/A	0.00013	8	0.01900
27	0.00000	0.00000	0.00015	0.00010	N/A	0.00014	9	0.01800
28	0.00000	0.00000	0.00015	0.00010	N/A	0.00016	10	0.01700
29	0.00000	0.00000	0.00015	0.00010	N/A	0.00017	11	0.01600
30	0.00000	0.00000	0.00015	0.00010	N/A	0.00020	12	0.01500
31	0.00000	0.00000	0.00015	0.00010	N/A	0.00021	13	0.01400
32	0.00000	0.00000	0.00015	0.00010	N/A	0.00023	14	0.01300
33	0.00000	0.00000	0.00020	0.00010	N/A	0.00025	15	0.01200
34	0.00000	0.00000	0.00025	0.00010	N/A	0.00027	16	0.01100
35	0.00000	0.00000	0.00030	0.00010	N/A	0.00030	17	0.01000
36	0.00000	0.00000	0.00035	0.00010	N/A	0.00033	18	0.00920
37	0.00000	0.00000	0.00040	0.00010	N/A	0.00036	19	0.00840
38	0.00000	0.00000	0.00042	0.00014	N/A	0.00039	20	0.00760
39	0.00000	0.00000	0.00044	0.00018	N/A	0.00043	21	0.00680
40	0.01500	0.00000	0.00046	0.00022	N/A	0.00047	22	0.00600
41	0.01500	0.00000	0.00048	0.00026	N/A	0.00052	23	0.00560
42	0.01500	0.00000	0.00050	0.00030	N/A	0.00056	24	0.00520
43	0.01500	0.00000	0.00060	0.00032	N/A	0.00061	25	0.00480
44	0.01500	0.00000	0.00070	0.00034	N/A	0.00066	26	0.00440
45	0.01500	0.00000	0.00080	0.00036	N/A	0.00073	27	0.00400
46	0.01500	0.00000	0.00090	0.00038	N/A	0.00079	28	0.00400
47	0.01500	0.00000	0.00100	0.00040	N/A	0.00086	29	0.00400
48	0.01500	0.00000	0.00110	0.00042	N/A	0.00092	30 & Above	0.00000
49	0.01500	0.00000	0.00120	0.00044	N/A	0.00100		
50	0.01500	0.01200	0.00130	0.00046	N/A	0.00108		
51	0.01200	0.00960	0.00140	0.00048	N/A	0.00117		
52	0.01200	0.00960	0.00150	0.00050	N/A	0.00126		
53	0.01500	0.01200	0.00156	0.00052	N/A	0.00137		
54	0.02000	0.01600	0.00162	0.00054	N/A	0.00147		
55	0.02500	0.02000	0.00168	0.00056	N/A	0.00160		
56	0.02500	0.02000	0.00174	0.00058	N/A	0.00173		
57	0.03000	0.02400	0.00180	0.00060	N/A	0.00187		
58	0.03500	0.02800	0.00194	0.00064	N/A	0.00203		
59	0.05000	0.04000	0.00208	0.00068	N/A	0.00221		
60	0.07000	0.05600	0.00222	0.00072	N/A	0.00242		
61	0.08000	0.06400	0.00236	0.00076	N/A	0.00264		
62	0.11000	0.11000	0.00250	0.00080	N/A	0.00289		
63	0.11000	0.11000	0.00250	0.00084	N/A	0.00317		
64	0.16000	0.16000	0.00250	0.00088	N/A	0.00350		
65	0.23000	0.18000	0.00250	0.00092	N/A	0.00385		
66	0.20000	0.18000	0.00250	0.00096	N/A	0.00425		
67	0.19000	0.30000	0.00250	0.00100	N/A	0.00471		
68	0.18000	0.18000	0.00250	0.00104	N/A	0.00520		
69	0.20000	0.20000	0.00250	0.00108	N/A	0.00575		
70	0.23000	0.23000	0.00250	0.00112	N/A	0.00636		
71	0.20000	0.20000	0.00250	0.00116	N/A	0.00703		
72	0.20000	0.20000	0.00250	0.00120	N/A	0.00777		
73	0.20000	0.20000	0.00250	0.00124	N/A	0.00859		
74	0.20000	0.20000	0.00250	0.00128	N/A	0.00950		
75	1.00000	1.00000	0.00000	0.00000	N/A	0.01050		

Table A-10
Probability of Separation from Active Service for General
Members
Plan E – Male

Age	Service Retirement	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	N/A	N/A	N/A	0.00043	0	0.15000
19	0.00000	N/A	N/A	N/A	0.00046	1	0.08000
20	0.00000	N/A	N/A	N/A	0.00044	2	0.06000
21	0.00000	N/A	N/A	N/A	0.00043	3	0.04500
22	0.00000	N/A	N/A	N/A	0.00040	4	0.03500
23	0.00000	N/A	N/A	N/A	0.00037	5	0.03100
24	0.00000	N/A	N/A	N/A	0.00035	6	0.02700
25	0.00000	N/A	N/A	N/A	0.00034	7	0.02300
26	0.00000	N/A	N/A	N/A	0.00036	8	0.02200
27	0.00000	N/A	N/A	N/A	0.00037	9	0.02100
28	0.00000	N/A	N/A	N/A	0.00040	10	0.02000
29	0.00000	N/A	N/A	N/A	0.00041	11	0.01900
30	0.00000	N/A	N/A	N/A	0.00043	12	0.01800
31	0.00000	N/A	N/A	N/A	0.00046	13	0.01680
32	0.00000	N/A	N/A	N/A	0.00048	14	0.01560
33	0.00000	N/A	N/A	N/A	0.00050	15	0.01440
34	0.00000	N/A	N/A	N/A	0.00053	16	0.01320
35	0.00000	N/A	N/A	N/A	0.00056	17	0.01200
36	0.00000	N/A	N/A	N/A	0.00060	18	0.01160
37	0.00000	N/A	N/A	N/A	0.00064	19	0.01120
38	0.00000	N/A	N/A	N/A	0.00068	20	0.01080
39	0.00000	N/A	N/A	N/A	0.00073	21	0.01040
40	0.00000	N/A	N/A	N/A	0.00079	22	0.01000
41	0.00000	N/A	N/A	N/A	0.00085	23	0.01000
42	0.00000	N/A	N/A	N/A	0.00092	24	0.01000
43	0.00000	N/A	N/A	N/A	0.00100	25	0.01000
44	0.00000	N/A	N/A	N/A	0.00108	26	0.01000
45	0.00000	N/A	N/A	N/A	0.00118	27	0.01000
46	0.00000	N/A	N/A	N/A	0.00128	28	0.01000
47	0.00000	N/A	N/A	N/A	0.00139	29	0.01000
48	0.00000	N/A	N/A	N/A	0.00152	30 & Above	0.01000
49	0.00000	N/A	N/A	N/A	0.00166		
50	0.00000	N/A	N/A	N/A	0.00179		
51	0.00000	N/A	N/A	N/A	0.00194		
52	0.00000	N/A	N/A	N/A	0.00210		
53	0.00000	N/A	N/A	N/A	0.00227		
54	0.00000	N/A	N/A	N/A	0.00244		
55	0.02000	N/A	N/A	N/A	0.00263		
56	0.02000	N/A	N/A	N/A	0.00283		
57	0.02500	N/A	N/A	N/A	0.00306		
58	0.02500	N/A	N/A	N/A	0.00330		
59	0.03000	N/A	N/A	N/A	0.00355		
60	0.04000	N/A	N/A	N/A	0.00383		
61	0.06000	N/A	N/A	N/A	0.00413		
62	0.09000	N/A	N/A	N/A	0.00445		
63	0.09000	N/A	N/A	N/A	0.00481		
64	0.20000	N/A	N/A	N/A	0.00520		
65	0.28000	N/A	N/A	N/A	0.00562		
66	0.19000	N/A	N/A	N/A	0.00607		
67	0.19000	N/A	N/A	N/A	0.00658		
68	0.19000	N/A	N/A	N/A	0.00713		
69	0.19000	N/A	N/A	N/A	0.00775		
70	0.19000	N/A	N/A	N/A	0.00844		
71	0.19000	N/A	N/A	N/A	0.00920		
72	0.19000	N/A	N/A	N/A	0.01004		
73	0.19000	N/A	N/A	N/A	0.01098		
74	0.19000	N/A	N/A	N/A	0.01201		
75	1.00000	N/A	N/A	N/A	0.01315		

Table A-11
Probability of Separation from Active Service for General Members
Plan E – Female

Age	Service Retirement	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	N/A	N/A	N/A	0.00017	0	0.15000
19	0.00000	N/A	N/A	N/A	0.00017	1	0.08000
20	0.00000	N/A	N/A	N/A	0.00017	2	0.06000
21	0.00000	N/A	N/A	N/A	0.00016	3	0.04500
22	0.00000	N/A	N/A	N/A	0.00014	4	0.03500
23	0.00000	N/A	N/A	N/A	0.00013	5	0.03100
24	0.00000	N/A	N/A	N/A	0.00012	6	0.02700
25	0.00000	N/A	N/A	N/A	0.00012	7	0.02300
26	0.00000	N/A	N/A	N/A	0.00013	8	0.02200
27	0.00000	N/A	N/A	N/A	0.00014	9	0.02100
28	0.00000	N/A	N/A	N/A	0.00016	10	0.02000
29	0.00000	N/A	N/A	N/A	0.00017	11	0.01900
30	0.00000	N/A	N/A	N/A	0.00020	12	0.01800
31	0.00000	N/A	N/A	N/A	0.00021	13	0.01680
32	0.00000	N/A	N/A	N/A	0.00023	14	0.01560
33	0.00000	N/A	N/A	N/A	0.00025	15	0.01440
34	0.00000	N/A	N/A	N/A	0.00027	16	0.01320
35	0.00000	N/A	N/A	N/A	0.00030	17	0.01200
36	0.00000	N/A	N/A	N/A	0.00033	18	0.01160
37	0.00000	N/A	N/A	N/A	0.00036	19	0.01120
38	0.00000	N/A	N/A	N/A	0.00039	20	0.01080
39	0.00000	N/A	N/A	N/A	0.00043	21	0.01040
40	0.00000	N/A	N/A	N/A	0.00047	22	0.01000
41	0.00000	N/A	N/A	N/A	0.00052	23	0.01000
42	0.00000	N/A	N/A	N/A	0.00056	24	0.01000
43	0.00000	N/A	N/A	N/A	0.00061	25	0.01000
44	0.00000	N/A	N/A	N/A	0.00066	26	0.01000
45	0.00000	N/A	N/A	N/A	0.00073	27	0.01000
46	0.00000	N/A	N/A	N/A	0.00079	28	0.01000
47	0.00000	N/A	N/A	N/A	0.00086	29	0.01000
48	0.00000	N/A	N/A	N/A	0.00092	30 & Above	0.01000
49	0.00000	N/A	N/A	N/A	0.00100		
50	0.00000	N/A	N/A	N/A	0.00108		
51	0.00000	N/A	N/A	N/A	0.00117		
52	0.00000	N/A	N/A	N/A	0.00126		
53	0.00000	N/A	N/A	N/A	0.00137		
54	0.00000	N/A	N/A	N/A	0.00147		
55	0.02000	N/A	N/A	N/A	0.00160		
56	0.02000	N/A	N/A	N/A	0.00173		
57	0.02500	N/A	N/A	N/A	0.00187		
58	0.02500	N/A	N/A	N/A	0.00203		
59	0.03000	N/A	N/A	N/A	0.00221		
60	0.04000	N/A	N/A	N/A	0.00242		
61	0.06000	N/A	N/A	N/A	0.00264		
62	0.09000	N/A	N/A	N/A	0.00289		
63	0.09000	N/A	N/A	N/A	0.00317		
64	0.20000	N/A	N/A	N/A	0.00350		
65	0.28000	N/A	N/A	N/A	0.00385		
66	0.19000	N/A	N/A	N/A	0.00425		
67	0.19000	N/A	N/A	N/A	0.00471		
68	0.19000	N/A	N/A	N/A	0.00520		
69	0.19000	N/A	N/A	N/A	0.00575		
70	0.19000	N/A	N/A	N/A	0.00636		
71	0.19000	N/A	N/A	N/A	0.00703		
72	0.19000	N/A	N/A	N/A	0.00777		
73	0.19000	N/A	N/A	N/A	0.00859		
74	0.19000	N/A	N/A	N/A	0.00950		
75	1.00000	N/A	N/A	N/A	0.01050		

Table A-12
Probability of Separation from Active Service for Safety Members
Plans A, B, & C – Male

Age	Service Retirement Plans A-B	Service Retirement Plan C	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	0.00000	0.00200	0.00000	0.00010	0.00037	0	0.03500
19	0.00000	0.00000	0.00200	0.00000	0.00010	0.00040	1	0.02750
20	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	2	0.02000
21	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	3	0.01500
22	0.00000	0.00000	0.00200	0.00000	0.00010	0.00040	4	0.01200
23	0.00000	0.00000	0.00200	0.00000	0.00010	0.00039	5	0.01130
24	0.00000	0.00000	0.00200	0.00000	0.00010	0.00038	6	0.01070
25	0.00000	0.00000	0.00200	0.00000	0.00010	0.00037	7	0.01000
26	0.00000	0.00000	0.00200	0.00000	0.00010	0.00038	8	0.00920
27	0.00000	0.00000	0.00200	0.00000	0.00010	0.00039	9	0.00840
28	0.00000	0.00000	0.00200	0.00000	0.00010	0.00040	10	0.00760
29	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	11	0.00680
30	0.00000	0.00000	0.00200	0.00000	0.00010	0.00041	12	0.00600
31	0.00000	0.00000	0.00200	0.00000	0.00010	0.00042	13	0.00560
32	0.00000	0.00000	0.00200	0.00000	0.00010	0.00043	14	0.00520
33	0.00000	0.00000	0.00210	0.00000	0.00010	0.00044	15	0.00480
34	0.00000	0.00000	0.00220	0.00000	0.00010	0.00045	16	0.00440
35	0.00000	0.00000	0.00230	0.00000	0.00010	0.00047	17	0.00400
36	0.00000	0.00000	0.00240	0.00000	0.00010	0.00049	18	0.00360
37	0.00000	0.00000	0.00250	0.00000	0.00010	0.00050	19	0.00320
38	0.00000	0.00000	0.00260	0.00000	0.00010	0.00053	20	0.00280
39	0.00000	0.00000	0.00270	0.00000	0.00010	0.00056	21	0.00240
40	0.00750	0.00000	0.00280	0.00000	0.00010	0.00059	22	0.00200
41	0.00750	0.00000	0.00290	0.00000	0.00010	0.00062	23	0.00200
42	0.00750	0.00000	0.00300	0.00000	0.00010	0.00067	24	0.00200
43	0.00750	0.00000	0.00310	0.00000	0.00010	0.00071	25	0.00200
44	0.00750	0.00000	0.00320	0.00000	0.00010	0.00076	26	0.00200
45	0.00750	0.00000	0.00330	0.00000	0.00010	0.00082	27	0.00200
46	0.00750	0.00000	0.00340	0.00000	0.00010	0.00088	28	0.00200
47	0.00750	0.00000	0.00350	0.00000	0.00010	0.00095	29	0.00200
48	0.00750	0.00000	0.00400	0.00000	0.00010	0.00102	30 & Above	0.00000
49	0.00750	0.00000	0.00500	0.00000	0.00010	0.00111		
50	0.02000	0.02000	0.00750	0.00000	0.00010	0.00120		
51	0.02000	0.02000	0.00750	0.00000	0.00010	0.00129		
52	0.02000	0.02000	0.00750	0.00000	0.00010	0.00140		
53	0.03000	0.03000	0.02000	0.00000	0.00010	0.00151		
54	0.15000	0.10000	0.02000	0.00000	0.00010	0.00162		
55	0.26000	0.15000	0.07500	0.00000	0.00010	0.00175		
56	0.17000	0.15000	0.07500	0.00000	0.00010	0.00190		
57	0.17000	0.28000	0.10000	0.00000	0.00010	0.00205		
58	0.17000	0.17000	0.10000	0.00000	0.00010	0.00223		
59	0.27000	0.27000	0.10000	0.00000	0.00010	0.00243		
60	0.27000	0.27000	0.10000	0.00000	0.00010	0.00264		
61	0.25000	0.25000	0.05000	0.00000	0.00010	0.00288		
62	0.25000	0.25000	0.05000	0.00000	0.00010	0.00315		
63	0.25000	0.25000	0.05000	0.00000	0.00010	0.00344		
64	0.25000	0.25000	0.05000	0.00000	0.00010	0.00375		
65	1.00000	1.00000	0.00000	0.00000	0.00000	0.00410		

Table A-13
Probability of Separation from Active Service for Safety Members
Plans A, B, & C – Female

Age	Service Retirement Plans A-B	Service Retirement Plan C	Service Disability	Ordinary Disability	Service Death	Ordinary Death	Years of Service	Other Terminations
18	0.00000	0.00000	0.00300	0.00000	0.00010	0.00014	0	0.03500
19	0.00000	0.00000	0.00300	0.00000	0.00010	0.00015	1	0.02750
20	0.00000	0.00000	0.00300	0.00000	0.00010	0.00016	2	0.02000
21	0.00000	0.00000	0.00300	0.00000	0.00010	0.00017	3	0.01500
22	0.00000	0.00000	0.00300	0.00000	0.00010	0.00017	4	0.01200
23	0.00000	0.00000	0.00300	0.00000	0.00010	0.00018	5	0.01130
24	0.00000	0.00000	0.00300	0.00000	0.00010	0.00019	6	0.01070
25	0.00000	0.00000	0.00300	0.00000	0.00010	0.00020	7	0.01000
26	0.00000	0.00000	0.00300	0.00000	0.00010	0.00021	8	0.00920
27	0.00000	0.00000	0.00300	0.00000	0.00010	0.00022	9	0.00840
28	0.00000	0.00000	0.00340	0.00000	0.00010	0.00024	10	0.00760
29	0.00000	0.00000	0.00380	0.00000	0.00010	0.00025	11	0.00680
30	0.00000	0.00000	0.00420	0.00000	0.00010	0.00027	12	0.00600
31	0.00000	0.00000	0.00460	0.00000	0.00010	0.00028	13	0.00560
32	0.00000	0.00000	0.00500	0.00000	0.00010	0.00030	14	0.00520
33	0.00000	0.00000	0.00560	0.00000	0.00010	0.00032	15	0.00480
34	0.00000	0.00000	0.00620	0.00000	0.00010	0.00034	16	0.00440
35	0.00000	0.00000	0.00680	0.00000	0.00010	0.00036	17	0.00400
36	0.00000	0.00000	0.00740	0.00000	0.00010	0.00038	18	0.00360
37	0.00000	0.00000	0.00800	0.00000	0.00010	0.00041	19	0.00320
38	0.00000	0.00000	0.00840	0.00000	0.00010	0.00043	20	0.00280
39	0.00000	0.00000	0.00880	0.00000	0.00010	0.00046	21	0.00240
40	0.00750	0.00000	0.00920	0.00000	0.00010	0.00049	22	0.00200
41	0.00750	0.00000	0.00960	0.00000	0.00010	0.00052	23	0.00200
42	0.00750	0.00000	0.01000	0.00000	0.00010	0.00056	24	0.00200
43	0.00750	0.00000	0.01040	0.00000	0.00010	0.00059	25	0.00200
44	0.00750	0.00000	0.01080	0.00000	0.00010	0.00063	26	0.00200
45	0.00750	0.00000	0.01120	0.00000	0.00010	0.00067	27	0.00200
46	0.00750	0.00000	0.01160	0.00000	0.00010	0.00071	28	0.00200
47	0.00750	0.00000	0.01200	0.00000	0.00010	0.00076	29	0.00200
48	0.00750	0.00000	0.01300	0.00000	0.00010	0.00080	30 & Above	0.00000
49	0.00750	0.00000	0.01500	0.00000	0.00010	0.00085		
50	0.02000	0.02000	0.01800	0.00000	0.00010	0.00091		
51	0.02000	0.02000	0.02000	0.00000	0.00010	0.00097		
52	0.02000	0.02000	0.02400	0.00000	0.00010	0.00103		
53	0.03000	0.03000	0.02800	0.00000	0.00010	0.00109		
54	0.15000	0.10000	0.03200	0.00000	0.00010	0.00116		
55	0.26000	0.15000	0.11000	0.00000	0.00010	0.00123		
56	0.17000	0.15000	0.06000	0.00000	0.00010	0.00131		
57	0.17000	0.28000	0.06000	0.00000	0.00010	0.00140		
58	0.17000	0.17000	0.06000	0.00000	0.00010	0.00148		
59	0.27000	0.27000	0.06000	0.00000	0.00010	0.00158		
60	0.27000	0.27000	0.06000	0.00000	0.00010	0.00168		
61	0.25000	0.25000	0.06000	0.00000	0.00010	0.00178		
62	0.25000	0.25000	0.06000	0.00000	0.00010	0.00190		
63	0.25000	0.25000	0.06000	0.00000	0.00010	0.00202		
64	0.25000	0.25000	0.06000	0.00000	0.00010	0.00215		
65	1.00000	1.00000	0.00000	0.00000	0.00000	0.00228		

Table A-14
Probability of Initial Medical Enrollment

Males and Females:

Years of Service	Assumed Enrollment %
< 10	7%
10-14	43%
15-19	64%
20-24	74%
25+	95%
Disabled	95%

This applies to the medical and Medicare Part B premium reimbursement benefits.

Table A-15A
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 1

Non-Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only	0.3%	0.5%		
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse	0.3%	0.1%		
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family	0.9%	0.1%		
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children		0.1%		
205	Anthem Blue Cross Prudent Buyer Plan	Minor Survivor				
211	Anthem Blue Cross I	Retiree Only	0.5%	0.4%	0.3%	0.2%
212	Anthem Blue Cross I	Retiree and Spouse		0.3%		
213	Anthem Blue Cross I	Retiree, Spouse and Children	0.5%	0.2%		
214	Anthem Blue Cross I	Retiree and Children		0.1%		
215	Anthem Blue Cross I	Minor Survivor				
221	Anthem Blue Cross II	Retiree Only	4.5%	7.7%	0.8%	1.3%
222	Anthem Blue Cross II	Retiree and Spouse	12.5%	7.0%	2.3%	0.9%
223	Anthem Blue Cross II	Retiree, Spouse and Children	14.9%	3.0%	0.8%	
224	Anthem Blue Cross II	Retiree and Children	1.5%	1.3%	0.3%	
225	Anthem Blue Cross II	Minor Survivor				
240	Anthem Blue Cross III	One Medicare		0.3%	7.1%	11.5%
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare		0.1%	0.2%	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare			5.5%	1.0%
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare		0.2%	7.1%	5.1%
244	Anthem Blue Cross III	Retiree and Children 1 Medicare				
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			0.4%	0.1%
246	Anthem Blue Cross III	Retiree and Family 1 Medicare				
247	Anthem Blue Cross III	Retiree and Family 1 Medicare		0.3%	1.3%	0.1%
248	Anthem Blue Cross III	Retiree and Family 2 Medicare				
249	Anthem Blue Cross III	Retiree and Family 2 Medicare			0.6%	0.1%
250	Anthem Blue Cross III	Retiree and Family 3 Medicare			0.3%	
301	Cigna Network Model Plan	Retiree Only	0.1%			
302	Cigna Network Model Plan	Retiree and Spouse	0.2%			
303	Cigna Network Model Plan	Retiree and Family	0.1%			
304	Cigna Network Model Plan	Retiree and Children				
305	Cigna Network Model Plan	Minor Survivor				
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only				
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse				
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)				
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children				
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)				
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)				
393	Kaiser (WA)	Retiree and Family				
394	Kaiser (WA)	Retiree and Family				
395	Kaiser (WA)	Retiree and Family				
396	Kaiser (WA)	Retiree and Family				
397	Kaiser (WA)	Retiree and Family				
398	Kaiser (WA)	Retiree and Family				
399	Kaiser (WA)	Retiree and Family				
400	Kaiser (WA)	Retiree and Family				
401	Kaiser (CA)	Retiree Basic (Under 65)	11.0%	26.2%		
402	Kaiser (CA)	Retiree Cost ("M" Coverage)				
403	Kaiser (CA)	Retiree Risk (Senior Advantage)		0.6%	18.0%	38.2%
404	Kaiser (CA)	Retiree Excess I			0.4%	1.0%
405	Kaiser (CA)	Retiree Excess II - Part B			1.3%	2.5%
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)				
411	Kaiser (CA)	Family Basic	33.0%	32.0%		
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic			20.8%	5.0%
413	Kaiser (CA)	One Advantage, Others Basic			0.5%	
414	Kaiser (CA)	One Excess I, Others Basic				
415	Kaiser (CA)	Two+ Cost ("M" Coverage)				
416	Kaiser (CA)	One Advantage, One Cost ("M" Coverage)			15.9%	16.5%
417	Kaiser (CA)	One Excess I, One Cost ("M" Coverage)			0.2%	
418	Kaiser (CA)	Two+ Advantage				
419	Kaiser (CA)	One Excess I, One Advantage			1.2%	0.5%
420	Kaiser (CA)	Two+ Excess I				
421	Kaiser (CA)	Survivor				
422	Kaiser (CA)	One Excess II - Part B, One Basic				
423	Kaiser (CA)	One Excess III (MNP), One Basic				
424	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B				
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess III (MNP)				
426	Kaiser (CA)	One Risk, One Excess II - Part B				0.4%
427	Kaiser (CA)	One Risk, One Excess III (MNP)				
428	Kaiser (CA)	One Excess I, One Excess II - Part B				
429	Kaiser (CA)	One Excess I, One Excess III (MNP)				
430	Kaiser (CA)	Two Excess II - Part B				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)			0.1%	
432	Kaiser (CA)	Two Excess III - Both (MNP)				

Table A-15A
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 1
(continued)

Non-Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
450	Kaiser - Colorado Basic	Retiree Basic				
451	Kaiser - Colorado	Retiree Risk				
452	Kaiser (Other)	Retiree Only				
453	Kaiser - Colorado	Retiree Basic (Two Party)				
454	Kaiser - Colorado	Retiree Basic Family				
455	Kaiser - Colorado	One Risk, One Basic				
456	Kaiser (Other)	Retiree and Spouse				
457	Kaiser - Colorado	Two Retiree Risk				
458	Kaiser - Colorado	One Risk, Two or More Dependents				
459	Kaiser - Colorado	Two Risk, Two or More Dependents				
460	Kaiser (Other)	Retiree and Spouse				
440	Kaiser - Georgia	One Medicare Member with Part B only				
441	Kaiser - Georgia	One Medicare Member with Part A only				
442	Kaiser - Georgia	One Member without Medicare Part A&B				
443	Kaiser - Georgia	One Medicare Member (Renal Failure)				
444	Kaiser - Georgia	One Medicare Member + One Medicare with Part B only				
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only				
446	Kaiser - Georgia	One Medicare Member + One Medicare without Part A&B				
461	Kaiser - Georgia Basic	Basic				
462	Kaiser - Georgia	Retiree Risk				
463	Kaiser - Georgia	Retiree (Two Party)				
464	Kaiser - Georgia	Retiree Basic Family				
465	Kaiser - Georgia	One Retiree Risk, One Basic				
466	Kaiser - Georgia	Two Retiree Risk				
467	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic				
468	Kaiser - Georgia	Two Retiree Risk, One Basic				
469	Kaiser - Georgia	Three Retiree Risk, One Basic				
470	Kaiser - Georgia	Any other Family, at least one Retiree Risk				
471	Kaiser - Hawaii	Retiree Basic (Under 65)				
472	Kaiser - Hawaii	Retiree Risk				
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B				
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)				
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)				
476	Kaiser - Hawaii	One Retiree Risk, One Basic				
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic				
478	Kaiser - Hawaii	Two Retiree Risk				
479	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B				
481	Kaiser - Oregon	Retiree Basic (Under 65)				
482	Kaiser - Oregon	Retiree Risk				
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B				
484	Kaiser - Oregon	Retiree Basic (Two Party)				
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)				
486	Kaiser - Oregon	One Retiree Risk, One Basic				
487	Kaiser - Oregon	Retiree Cost				
488	Kaiser - Oregon	Two Retiree Risk				
489	Kaiser - Oregon	Retiree w/ Part A only				
490	Kaiser - Oregon	Retiree w/ Part B only				
491	Kaiser - Oregon	One Risk, One Medicare Part A only				
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare				
493	Kaiser - Oregon	One Risk, Two Basic				
494	Kaiser - Oregon	Two Risk, One Basic				
495	Kaiser - Oregon	Two Over 65 unassigned Medicare				
496	Kaiser - Oregon	Two Medicare Part A only				
497	Kaiser - Oregon	One Basic, One Medicare Part A only				
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B				
611	SCAN Health Plan	Retiree Only			0.5%	0.8%
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)			0.5%	0.4%
701	United Healthcare Medicare Advantage	Retiree Only		0.2%	3.8%	9.2%
702	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	0.6%	2.0%	3.9%	1.0%
703	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)			3.7%	4.1%
704	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (1 Medicare)	0.1%	0.5%	1.7%	0.1%
705	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (2 Medicare)			0.5%	
706	United Healthcare Medicare Advantage	Minor Survivor				
707	United Healthcare	Single	3.5%	8.6%		
708	United Healthcare	Two-Party	7.0%	5.5%		
709	United Healthcare	Family	8.5%	2.7%		
Total			100.0%	100.0%	100.0%	100.0%
		Probability of enrolling at least one dependent	80.1%	55.5%	67.8%	35.3%

Table A-15A
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 1
(continued)

Firefighters Local 1014 Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
801	Firefighters Local 1014	Med-Member under 65	6.5%	6.5%		
802	Firefighters Local 1014	Med-Member +1 under 65	35.0%	35.0%		
803	Firefighters Local 1014	Med-Member +2 under 65	58.5%	58.5%		
804	Firefighters Local 1014	Med-Member with Medicare			12.0%	12.0%
805	Firefighters Local 1014	Med-Member +1; 1 MDC				
806	Firefighters Local 1014	Med-Member +2; 2 MDC			28.0%	28.0%
807	Firefighters Local 1014	Med-Member +2; 1 MDC				
808	Firefighters Local 1014	Med-Member +2; 2 MDC			60.0%	60.0%
809	Firefighters Local 1014	Med-Surv. Sp. Under 65				
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65				
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65				
812	Firefighters Local 1014	Med-Surv. Sp. With MDC				
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC				
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC				
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC				
Total			100.0%	100.0%	100.0%	100.0%
		Probability of enrolling at least one dependent	93.5%	93.5%	88.0%	88.0%

Table A-15B
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 2

Non-Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
201	Anthem Blue Cross Prudent Buyer Plan	Retiree Only	0.3%	0.5%		
202	Anthem Blue Cross Prudent Buyer Plan	Retiree and Spouse	0.3%	0.1%		
203	Anthem Blue Cross Prudent Buyer Plan	Retiree and Family	0.9%	0.1%		
204	Anthem Blue Cross Prudent Buyer Plan	Retiree and Children		0.1%		
205	Anthem Blue Cross Prudent Buyer Plan	Minor Survivor				
211	Anthem Blue Cross I	Retiree Only	0.5%	0.4%		
212	Anthem Blue Cross I	Retiree and Spouse		0.3%		
213	Anthem Blue Cross I	Retiree, Spouse and Children	0.5%	0.2%		
214	Anthem Blue Cross I	Retiree and Children		0.1%		
215	Anthem Blue Cross I	Minor Survivor				
221	Anthem Blue Cross II	Retiree Only	4.5%	7.7%		
222	Anthem Blue Cross II	Retiree and Spouse	12.5%	7.0%		
223	Anthem Blue Cross II	Retiree, Spouse and Children	14.9%	3.0%		
224	Anthem Blue Cross II	Retiree and Children	1.5%	1.3%		
225	Anthem Blue Cross II	Minor Survivor				
240	Anthem Blue Cross III	One Medicare		0.3%	8.2%	13.0%
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare		0.1%	0.2%	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare			7.8%	1.9%
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare		0.2%	7.1%	5.1%
244	Anthem Blue Cross III	Retiree and Children 1 Medicare				
245	Anthem Blue Cross III	Retiree and Children 1 Medicare			0.7%	0.1%
246	Anthem Blue Cross III	Retiree and Family 1 Medicare				
247	Anthem Blue Cross III	Retiree and Family 1 Medicare		0.3%	2.1%	0.1%
248	Anthem Blue Cross III	Retiree and Family 2 Medicare				
249	Anthem Blue Cross III	Retiree and Family 2 Medicare			0.6%	0.1%
250	Anthem Blue Cross III	Retiree and Family 3 Medicare			0.3%	
301	Cigna Network Model Plan	Retiree Only	0.1%			
302	Cigna Network Model Plan	Retiree and Spouse	0.2%			
303	Cigna Network Model Plan	Retiree and Family	0.1%			
304	Cigna Network Model Plan	Retiree and Children				
305	Cigna Network Model Plan	Minor Survivor				
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only				
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse				
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)				
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children				
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)				
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)				
393	Kaiser (WA)	Retiree and Family				
394	Kaiser (WA)	Retiree and Family				
395	Kaiser (WA)	Retiree and Family				
396	Kaiser (WA)	Retiree and Family				
397	Kaiser (WA)	Retiree and Family				
398	Kaiser (WA)	Retiree and Family				
399	Kaiser (WA)	Retiree and Family				
400	Kaiser (WA)	Retiree and Family				
401	Kaiser (CA)	Retiree Basic (Under 65)	11.0%	26.2%		
402	Kaiser (CA)	Retiree Cost ("M" Coverage)				
403	Kaiser (CA)	Retiree Risk (Senior Advantage)		0.6%	19.7%	41.7%
404	Kaiser (CA)	Retiree Excess I				
405	Kaiser (CA)	Retiree Excess II - Part B				
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)				
411	Kaiser (CA)	Family Basic	33.0%	32.0%		
412	Kaiser (CA)	One Cost ("M" Coverage), Others Basic				
413	Kaiser (CA)	One Advantage, Others Basic			22.6%	5.5%
414	Kaiser (CA)	One Excess I, Others Basic				
415	Kaiser (CA)	Two+ Cost ("M" Coverage)				
416	Kaiser (CA)	One Advantage, One Cost ("M" Coverage)				
417	Kaiser (CA)	One Excess I, One Cost ("M" Coverage)				
418	Kaiser (CA)	Two+ Advantage			16.1%	16.9%
419	Kaiser (CA)	One Excess I, One Advantage				
420	Kaiser (CA)	Two+ Excess I				
421	Kaiser (CA)	Survivor				
422	Kaiser (CA)	One Excess II - Part B, One Basic				
423	Kaiser (CA)	One Excess III (MNP), One Basic				
424	Kaiser (CA)	One Cost ("M" Coverage), One Excess II - Part B				
425	Kaiser (CA)	One Cost ("M" Coverage), One Excess III (MNP)				
426	Kaiser (CA)	One Risk, One Excess II - Part B				
427	Kaiser (CA)	One Risk, One Excess III (MNP)				
428	Kaiser (CA)	One Excess I, One Excess II - Part B				
429	Kaiser (CA)	One Excess I, One Excess III (MNP)				
430	Kaiser (CA)	Two Excess II - Part B				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)				
432	Kaiser (CA)	Two Excess III - Both (MNP)				

Table A-15B
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 2
(continued)

Non-Local 1014 Firefighters Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
450	Kaiser - Colorado Basic	Retiree Basic				
451	Kaiser - Colorado	Retiree Risk				
452	Kaiser (Other)	Retiree Only				
453	Kaiser - Colorado	Retiree Basic (Two Party)				
454	Kaiser - Colorado	Retiree Basic Family				
455	Kaiser - Colorado	One Risk, One Basic				
456	Kaiser (Other)	Retiree and Spouse				
457	Kaiser - Colorado	Two Retiree Risk				
458	Kaiser - Colorado	One Risk, Two or More Dependents				
459	Kaiser - Colorado	Two Risk, Two or More Dependents				
460	Kaiser (Other)	Retiree and Spouse				
440	Kaiser - Georgia	One Medicare Member with Part B only				
441	Kaiser - Georgia	One Medicare Member with Part A only				
442	Kaiser - Georgia	One Member without Medicare Part A&B				
443	Kaiser - Georgia	One Medicare Member (Renal Failure)				
444	Kaiser - Georgia	One Medicare Member + One Medicare with Part B only				
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only				
446	Kaiser - Georgia	One Medicare Member + One Medicare without Part A&B				
461	Kaiser - Georgia Basic	Basic				
462	Kaiser - Georgia	Retiree Risk				
463	Kaiser - Georgia	Retiree (Two Party)				
464	Kaiser - Georgia	Retiree Basic Family				
465	Kaiser - Georgia	One Retiree Risk, One Basic				
466	Kaiser - Georgia	Two Retiree Risk				
467	Kaiser - Georgia	One Retiree Risk, Two Retiree Basic				
468	Kaiser - Georgia	Two Retiree Risk, One Basic				
469	Kaiser - Georgia	Three Retiree Risk, One Basic				
470	Kaiser - Georgia	Any other Family, at least one Retiree Risk				
471	Kaiser - Hawaii	Retiree Basic (Under 65)				
472	Kaiser - Hawaii	Retiree Risk				
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B				
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)				
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)				
476	Kaiser - Hawaii	One Retiree Risk, One Basic				
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic				
478	Kaiser - Hawaii	Two Retiree Risk				
479	Kaiser - Hawaii	One Risk, One Over 65 without Medicare A&B				
481	Kaiser - Oregon	Retiree Basic (Under 65)				
482	Kaiser - Oregon	Retiree Risk				
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B				
484	Kaiser - Oregon	Retiree Basic (Two Party)				
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)				
486	Kaiser - Oregon	One Retiree Risk, One Basic				
487	Kaiser - Oregon	Retiree Cost				
488	Kaiser - Oregon	Two Retiree Risk				
489	Kaiser - Oregon	Retiree w/ Part A only				
490	Kaiser - Oregon	Retiree w/ Part B only				
491	Kaiser - Oregon	One Risk, One Medicare Part A only				
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare				
493	Kaiser - Oregon	One Risk, Two Basic				
494	Kaiser - Oregon	Two Risk, One Basic				
495	Kaiser - Oregon	Two Over 65 unassigned Medicare				
496	Kaiser - Oregon	Two Medicare Part A only				
497	Kaiser - Oregon	One Basic, One Medicare Part A only				
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B				
611	SCAN Health Plan	Retiree Only			0.5%	0.8%
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)			0.5%	0.4%
701	United Healthcare Medicare Advantage	Retiree Only		0.2%	3.8%	9.2%
702	United Healthcare Medicare Advantage	Retiree & 1 Dependent (1 Medicare)	0.6%	2.0%	3.9%	1.0%
703	United Healthcare Medicare Advantage	Retiree & 1 Dependent (2 Medicare)			3.7%	4.1%
704	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (1 Medicare)	0.1%	0.5%	1.7%	0.1%
705	United Healthcare Medicare Advantage	Retiree & 2 + Deps. (2 Medicare)			0.5%	
706	United Healthcare Medicare Advantage	Minor Survivor				
707	United Healthcare	Single	3.5%	8.6%		
708	United Healthcare	Two-Party	7.0%	5.5%		
709	United Healthcare	Family	8.5%	2.7%		
Total			100.0%	100.0%	100.0%	100.0%

Probability of enrolling at least one dependent 80.1% 55.5% 67.8% 35.3%

Table A-15B
Probability of Medical Plan and Coverage Tier Selection upon Initial Enrollment for Tier 2
(continued)

Firefighters Local 1014 Retirees

Deduction Code	Plan	Tier	Pre 65		Post 65	
			Male	Female	Male	Female
801	Firefighters Local 1014	Med-Member under 65	6.5%	6.5%		
802	Firefighters Local 1014	Med-Member +1 under 65	35.0%	35.0%		
803	Firefighters Local 1014	Med-Member +2 under 65	58.5%	58.5%		
804	Firefighters Local 1014	Med-Member with Medicare			12.0%	12.0%
805	Firefighters Local 1014	Med-Member +1; 1 MDC				
806	Firefighters Local 1014	Med-Member +1; 2 MDC			28.0%	28.0%
807	Firefighters Local 1014	Med-Member +2; 1 MDC				
808	Firefighters Local 1014	Med-Member +2; 2 MDC			60.0%	60.0%
809	Firefighters Local 1014	Med-Surv. Sp. Under 65				
810	Firefighters Local 1014	Med-Surv. Sp. +1 Under 65				
811	Firefighters Local 1014	Med-Surv. Sp. +2 Under 65				
812	Firefighters Local 1014	Med-Surv. Sp. With MDC				
813	Firefighters Local 1014	Med-Surv. Sp. +1 1 MDC				
814	Firefighters Local 1014	Med-Surv. Sp. +2; 1 MDC				
815	Firefighters Local 1014	Med-Surv. Sp. +1; 2 MDC				
Total			100.0%	100.0%	100.0%	100.0%
Probability of enrolling at least one dependent			93.5%	93.5%	88.0%	88.0%

Table A-16
Probability of Medical Plan and Coverage Tier Selection for Pre 65 Retirees
Who Become Eligible for a Post 65 Plan

We assume that Pre 65 retirees and dependents will choose Post 65 plans at age 65 according to the following table:

From Pre Age 65 Eligible Plan	To Post Age 65 Eligible Plan	Tier 1	Tier 2
Anthem Blue Cross I	Anthem Blue Cross I	45.0%	0.0%
	Anthem Blue Cross III	55.0%	100.0%
Anthem Blue Cross II	Anthem Blue Cross II	44.0%	0.0%
	Anthem Blue Cross III	56.0%	100.0%
Anthem Blue Cross Prudent Buyer	Anthem Blue Cross Prudent Buyer	47.0%	0.0%
	Anthem Blue Cross II	4.0%	0.0%
	Anthem Blue Cross III	49.0%	100.0%
Cigna Network Model	Cigna Network Model Plan	36.5%	0.0%
	Cigna Medicare Select Plus Rx (AZ)	6.0%	0.0%
	Anthem Blue Cross II	2.5%	0.0%
	Anthem Blue Cross III	25.0%	25.0%
	UnitedHealthcare Medicare Advantage	18.0%	75.0%
	Senior Advantage	2.0%	0.0%
UnitedHealthcare	SCAN Health Plan	10.0%	0.0%
	UnitedHealthcare Medicare Advantage	80.0%	81.0%
	Cigna Network Model Plan	1.0%	0.0%
	Anthem Blue Cross II	2.0%	0.0%
	Anthem Blue Cross III	9.0%	11.0%
	SCAN Health Plan	2.0%	2.0%
	Senior Advantage	2.0%	6.0%
Excess II	3.0%	0.0%	
Kaiser Retiree Basic	One Excess II, One Basic	1.0%	0.0%
	Senior Advantage	77.5%	98.0%
	Retiree Excess I	3.0%	0.0%
	Retiree Excess II	14.5%	0.0%
	Excess III (MNP)	3.0%	0.0%
Kaiser Family Basic	Anthem Blue Cross III	2.0%	2.0%
	2+ Advantage	80.0%	99.0%
	One Excess I, One Advantage	4.1%	0.0%
	One Advantage, One Excess II	9.0%	0.0%
	One Advantage, One Excess III (MNP)	3.1%	0.0%
	Two+ Excess II - Part B	0.5%	0.0%
	Anthem Blue Cross III	1.6%	1.0%
	UnitedHealthcare Medicare Advantage	0.2%	0.0%
Senior Advantage	1.5%	0.0%	
Firefighters Local 1014	Firefighters Local 1014	100.0%	100.0%

We assume that 100% of the retirees are eligible for Medicare with Part B Premium Reimbursement for the plans listed below. We assume these Post Medicare Only Plans are for enrollees who are entitled for Medicare Parts A and B:

- Anthem Blue Cross III
- Cigna Medicare Select Plus Rx (AZ)
- Firefighters Local 1014 Post Medicare Plan
- Kaiser Senior Advantage
- SCAN
- UnitedHealthcare – Medicare Advantage

We assume all other plans' retirees do not receive Part B Premium Reimbursement.

The Part B reimbursement for Tier 1 is for retiree and any spouse or child(ren), while the Part B reimbursement for Tier 2 is only for retirees and surviving spouses. Tier 2 retirees are required to enroll in Medicare when eligible.

Effective January 1, 2007, Medicare Part B premiums vary depending on income status. The County places a cap on the per member monthly Part B reimbursement amount at the standard amount (e.g., \$144.60 for calendar year 2021).

For purposes of this valuation, we assume the average Medicare Part B premium reimbursement from July 1, 2020 through July 1, 2021 is \$140.08 per member per month. This is based on our average of 2020 calendar year Medicare Part B premium rates provided in the census from LACERA of \$131.66 per member per month and the 2021 calendar year Medicare Part B standard premium rate of \$148.50.

Table A-17
Survivor and New Dependent Enrollment

The valuation methods and assumptions are adjusted with the following considerations from LACERA discussions:

Scenario I

If a dependent or spouse dies, the retiree may enroll a new spouse/domestic partner and/or a new dependent.

- We assume 1.0% will enroll a new spouse/domestic partner.
- We assume 2.5% of the retirees will enroll a new dependent.

Scenario II

If a retiree who has a retirement plan option which qualifies as eligible for continuing retirement benefits to the survivor dies and the spouse has retiree medical, Part B, or dental/vision coverage, the existing spouse or dependent may continue to be enrolled and may also enroll a new spouse/domestic partner and/or a new dependent.

- We assume 90% of the retirees with spouses have a spouse continuance option.
- We assume 2.2% of the surviving spouse/domestic partners with a continuance option will enroll a new spouse.
- Therefore, we assume 2.0% (or 90% of the 2.2%) of the surviving spouses' new spouses will enroll and receive the County subsidy.
- We assume 2.5% of the surviving spouse/domestic partners will enroll a new dependent.

Scenario III

If a retiree who has a retirement plan option which qualifies as eligible for continuing retirement benefits to the survivor dies and the spouse does NOT have retiree medical coverage, we assume no additional spouse/domestic partner or dependent will be enrolled.

Table A-18
Probability of Initial Dental/Vision Enrollment

Males and Females

<u>Years of Service</u>	<u>Assumed Enrollment %</u>
< 10	9%
10-14	48%
15-19	70%
20-24	76%
25+	95%
Disabled	93%

Table A-19
Probability of Dental/Vision Plan and Coverage Tier Selection Upon Dental/Vision Retirement Enrollment

<u>Tier</u>	<u>Cigna Indemnity Dental/Vision</u>			<u>Cigna HMO Dental/Vision</u>		
	<u>Retiree Only</u>	<u>Retiree and Dependents</u>	<u>Minor Survivor</u>	<u>Retiree Only</u>	<u>Retiree and Dependents</u>	<u>Minor Survivor</u>
Deduction Code	501	502	503	901	902	903
Percentage						
Male	18.5%	70.5%	0%	3.0%	8.0%	0%
Female	45.0%	42.7%	0%	7.5%	4.8%	0%

**Table A-20
 Premium Information**

This section is from the July 1, 2019 OPEB valuation. The July 1, 2021 information will be displayed with the July 1, 2020 OPEB valuation.

The following premium information is for retirees living in California who have less than 10 years of service and must pay the full amount. Members who have more than 10 years of service receive a subsidy from the County. Details can be found in this table below. The premium rates in Table A-20 include the carriers' administration fees and LACERA's per contract monthly administration fee. The per contract monthly administration fee was \$8.00 effective July 1, 2019 and July 1, 2020 and is included in the premium rates.

**Pre and Post Age 65 Monthly Rates Effective July 1, 2019
 UnitedHealthcare is Pre Age 65 Only**

Tier	Anthem Blue Cross - Plan I	Anthem Blue Cross - Plan II	Anthem Blue Cross - Prudent Buyer	Cigna	United Healthcare
Retiree Only	\$ 1,170.28	\$ 1,170.28	\$ 1,016.48	\$ 1,624.26	
Retiree & Spouse	\$ 2,108.71	\$ 2,108.71	\$ 1,999.73	\$ 2,932.02	
Retiree & Family	\$ 2,487.14	\$ 2,487.14	\$ 2,256.78	\$ 3,462.10	
Retiree & Children	\$ 1,547.92	\$ 1,547.92	\$ 1,306.38	\$ 2,155.02	
Minor Survivor	\$ 388.74	\$ 396.24	\$ 277.44	\$ 513.74	\$ 341.77
UnitedHealthcare Single					\$ 1,193.57
UnitedHealthcare Two-Party					\$ 2,178.97
UnitedHealthcare Family					\$ 2,583.38

**Pre and Post Age 65 Monthly Rates Effective July 1, 2020
 UnitedHealthcare is Pre Age 65 Only**

Tier	Anthem Blue Cross - Plan I	Anthem Blue Cross - Plan II	Anthem Blue Cross - Prudent Buyer	Cigna	United Healthcare
Retiree Only	\$ 1,236.53	\$ 1,236.53	\$ 1,003.87	\$ 1,629.11	
Retiree & Spouse	\$ 2,228.45	\$ 2,228.45	\$ 1,974.83	\$ 2,940.79	
Retiree & Family	\$ 2,628.45	\$ 2,628.45	\$ 2,228.67	\$ 3,472.45	
Retiree & Children	\$ 1,635.70	\$ 1,635.70	\$ 1,290.15	\$ 2,161.46	
Minor Survivor	\$ 410.44	\$ 418.57	\$ 274.07	\$ 515.26	\$ 352.92
UnitedHealthcare Single					\$ 1,233.17
UnitedHealthcare Two-Party					\$ 2,251.48
UnitedHealthcare Family					\$ 2,669.40

Post Age 65 Monthly Rates Effective July 1, 2019

Tier	Anthem Blue Cross - Plan III	SCAN	United Healthcare Medicare Advantage
One Medicare	\$ 477.43		
Retiree & Spouse- 1 Medicare	\$ 1,523.21		
Retiree & Spouse- 2 Medicare	\$ 948.80		
Retiree & Children- 1 Medicare	\$ 853.73		
Retiree & Family- 1 Medicare	\$ 1,899.39		
Retiree & Family- 2 Medicare	\$ 1,324.91		
Retiree & Family- 3 Medicare	\$ 1,484.65		
Retiree Only		\$ 267.00	\$ 356.76
Retiree & 1 Dependent (1 Medicare)			\$ 1,542.33
Retiree & 1 Dependent (2 Medicare)		\$ 526.00	\$ 705.52
Retiree & 2 + Deps. (1 Medicare)			\$ 1,746.57
Retiree & 2 + Deps. (2 Medicare)			\$ 909.76

Post Age 65 Monthly Rates Effective July 1, 2020

Tier	Anthem Blue Cross - Plan III	SCAN	United Healthcare Medicare Advantage
One Medicare	\$ 504.19		
Retiree & Spouse- 1 Medicare	\$ 1,609.58		
Retiree & Spouse- 2 Medicare	\$ 1,002.43		
Retiree & Children- 1 Medicare	\$ 901.94		
Retiree & Family- 1 Medicare	\$ 2,007.20		
Retiree & Family- 2 Medicare	\$ 1,399.97		
Retiree & Family- 3 Medicare	\$ 1,568.82		
Retiree Only		\$ 273.00	\$ 343.15
Retiree & 1 Dependent (1 Medicare)			\$ 1,568.32
Retiree & 1 Dependent (2 Medicare)		\$ 538.00	\$ 678.30
Retiree & 2 + Deps. (1 Medicare)			\$ 1,779.38
Retiree & 2 + Deps. (2 Medicare)			\$ 889.36

Kaiser California Monthly Rates

Effective Date	July 1, 2019	July 1, 2020
Retiree Basic (Under 65)	\$ 1,032.28	\$ 1,087.85
Retiree Risk (Senior Advantage)	\$ 280.80	\$ 288.17
Retiree Excess I	\$ 1,178.79	\$ 1,177.65
Retiree Excess II - Part B	\$ 1,086.88	\$ 1,129.77
Excess III - Medicare Not Provided (MNP)	\$ 1,922.46	\$ 2,027.76
Family Basic	\$ 2,056.56	\$ 2,167.70
One Advantage, One Basic	\$ 1,305.08	\$ 1,368.02
One Excess I, One Basic	\$ 2,203.07	\$ 2,257.50
One Excess II - Part B, One Basic	\$ 2,111.16	\$ 2,209.62
One Excess III (MNP), One Basic	\$ 2,946.74	\$ 3,107.61
Two+ Advantage	\$ 553.60	\$ 568.34
One Excess I, One Advantage	\$ 1,451.59	\$ 1,457.82
One Advantage, One Excess II - Part B	\$ 1,359.68	\$ 1,409.94
One Advantage, One Excess III (MNP)	\$ 2,195.26	\$ 2,307.93
Two+ Excess I	\$ 2,349.58	\$ 2,347.30
One Excess I, One Excess II - Part B	\$ 2,257.67	\$ 2,299.42
One Excess I, One Excess III (MNP)	\$ 3,093.25	\$ 3,197.41
Two Excess II - Part B	\$ 2,165.76	\$ 2,251.54
One Excess II - Part B, One Excess III (MNP)	\$ 3,001.34	\$ 3,149.53
Two Excess III - Both (MNP)	\$ 3,836.92	\$ 4,047.52
Survivor	\$ 1,032.28	\$ 1,087.85

Firefighters Local 1014 Monthly Rates

Effective Date	July 1, 2019
Medical Member Under 65	\$ 1,152.32
Medical Member + 1 Under 65	\$ 2,077.71
Medical Member + 2 Under 65	\$ 2,450.86
Medical Member with Medicare	\$ 1,152.32
Medical Member + 1: 1 Medicare (MDC)	\$ 2,077.71
Medical Member + 1; 2 MDC	\$ 2,077.71
Medical Member + 2; 1 MDC	\$ 2,450.86
Medical Member + 2; 2 MDC	\$ 2,450.86
Medical Surviving Spouse Under 65	\$ 1,152.32
Medical Surviving Spouse + 1 Under 65	\$ 2,077.71
Medical Surviving Spouse + 2 Under 65	\$ 2,450.86
Medical Surviving Spouse with MDC	\$ 1,152.32
Medical Surviving Spouse + 1; 1 MDC	\$ 2,077.71
Medical Surviving Spouse + 2; 1 MDC	\$ 2,450.86
Medical Surviving Spouse + 1; 2 MDC	\$ 2,077.71

July 1, 2020 Firefighter Local 1014 rates were not available in time to include in the valuation. The July 1, 2020 Firefighter Local 1014 rates will be displayed with the July 1, 2020 OPEB Valuation.

Dental/Vision Monthly Rates

<u>Effective Date</u>	July 1, 2019		July 1, 2020	
	<u>Cigna Dental HMO/Vision</u>	<u>Cigna Indemnity Dental/Vision</u>	<u>Cigna Dental HMO/Vision</u>	<u>Cigna Indemnity Dental/Vision</u>
<u>Tier</u>				
Retiree Only	\$ 46.19	\$ 52.16	\$ 46.51	\$ 51.57
Retiree & Dependents	\$ 94.52	\$ 108.60	\$ 95.26	\$ 107.25
Minor Survivor	\$ 46.78	\$ 64.15	\$ 47.09	\$ 63.40

COUNTY CONTRIBUTIONS TOWARDS RETIREE HEALTH BENEFITS

Medical

Tier 1 is for employees who are hired before July 1, 2014 and are eligible for LACERA membership. If a retiree has 10 years of retirement service credit, the County contributes 40% of the health care plan premium or 40% of the benchmark plan rate, whichever is less. For each year of retirement service credit beyond 10 years, the County contributes an additional 4% per year, up to a maximum of 100% for a member with 25 years of service credit.

Tier 2 is for employees who are hired after June 30, 2014 and are eligible for LACERA membership. The Tier 2 subsidy is the same as Tier 1 except that the benchmark plan is different. The table below shows the benchmark plans for Tier 1 and Tier 2.

<u>Tier</u>	<u>Pre / Post Medicare</u>	<u>Benchmark Plan</u>	<u>Benchmark Amount</u>
1	Pre	Anthem Blue Cross I & II	Same tier that member selects
1	Post	Anthem Blue Cross I & II	Same tier that member selects
2	Pre	Anthem Blue Cross I & II	Retiree-only tier
2	Post	Anthem Blue Cross III	Retiree-only tier

If a Tier 2 retiree selects a family tier for a plan where the premium for the retiree-only tier is less than the Tier 2 benchmark, there is a spouse subsidy equal to the Tier 2 benchmark less the premium for the retiree-only tier. The Tier 2 non Local 1014 spouse subsidy varies depending on the plan selected and the retiree's years of service, so we developed weighted average factors of the County's contribution for the spouse's portion. On average, we assume that if the retiree has 10 years of service, the County will contribute 8% of the spouse's portion. This assumption grades linearly to 20% of the spouse's portion for a retiree with 25+ years of service.

The pre 65 and post 65 retirees of Local 1014 are on the same plan and pay the same rates. The pre 65 premium for the retiree-only tier is approximately equal to the Tier 2 benchmark so we valued no spouse subsidy. Since the post 65 premium for the retiree-only tier is greater than the Tier 2 benchmark, we assume the County contribution is 16% with 10 years of service grading linearly to 41% with 25+ years of service. Post 65 spouses are assumed to receive no subsidy.

The County contribution can never exceed the premium of the benchmark plan; this means that if the premium for the chosen plan and coverage option exceeds the benchmark premium, the retiree is required to pay the difference, even if the retiree has 25 years of service. We adjust the retiree's contributions by the difference between the premium of the chosen deduction code and the benchmark plan. Likewise, if the retiree has 25 years of service and the plan premium is less than the benchmark rate, the County contributes 100% of the plan premium only, not the benchmark plan rate. Reciprocal service is not included in contribution calculations.

Dental/Vision

The contribution percentages follow the same contribution proportions based on years of service (excluding reciprocal service) as the medical plans. The Tier 1 benchmark is the indemnity plan premium for the tier that the member selects. The Tier 2 benchmark is the indemnity plan premium for the retiree-only tier.

Service-Connected Disability

Any retiree with a service-connected disability retirement with less than 13 years of service will receive a different County contribution for both medical and dental/vision plans. The County contributes 50% of the lesser of the benchmark plan rate or the premium of the plan the retiree is enrolled in. If a retiree with service-connected disability retirement has 13 or more years of service, the County subsidy is the same as a retiree with service retirement. Reciprocal service is not included in contribution calculations.

FIREFIGHTERS LOCAL 1014 CONTRIBUTIONS TOWARDS RETIREE HEALTH BENEFITS

Medical, Dental/Vision, and Service-Connected Disability

Contributions are the same as for the County employees.

Table A-21
Claim Cost Analysis

This section is from the July 1, 2019 OPEB valuation. The July 1, 2021 information is displayed with the July 1, 2020 OPEB valuation.

All of the plans' premium rates have been determined based on retiree only information. Active premium rates are established independently. Therefore, no implicit subsidy exists between active and retiree rates. However, some plans pooled the Medicare enrolled and non-Medicare enrolled retirees to determine the rates. The following plans did not pool Medicare and non-Medicare retirees (or have an insignificant Medicare enrollment), so we can assume the premium rates are representative of the average claim costs used to develop the age and gender adjusted claim costs:

- Anthem Blue Cross I and II (Combined)
- Anthem Blue Cross III
- Anthem Blue Cross Prudent Buyer
- Cigna Network Model Plan
- Cigna Medicare Select Plus Rx (AZ)
- UnitedHealthcare
- UnitedHealthcare Medicare Advantage
- SCAN Health Plan
- Kaiser and Kaiser Interregional
 - Basic
 - Senior Advantage
 - Medicare Cost Supplement
 - Excess I
 - Excess II
 - Excess III
- Cigna Indemnity Dental/Vision
- Cigna HMO Dental/Vision

The Firefighters Local 1014 Plan pooled Medicare and non-Medicare retirees to determine premium rates. Therefore, we adjusted the premium rates to compensate for the coordination with Medicare in making our claim cost assumption.

For current active members projected to retire in the future, we used the enrollment assumptions in Table A-15A (Tier 1), Table A-15B (Tier 2), and Table A-16 (pre 65 to post 65 election) to develop weighted average claim costs as of July 1, 2019. The monthly weighted average claim costs used for future retirees and dependents are shown in the following tables.

The medical claim costs for pre 65 retirees are different than for post 65 retirees due to different plan selection assumptions.

In the following tables, when shown, child costs are at age 65. The costs for children are assumed to be 25% of the age 65 child costs for males and 21% of the age 65 child costs for females.

Note that subsequent to the release of the first draft, Segal notified Milliman that there was a change to some Kaiser Oregon rates in deduction codes 486, 493, 494, 497, and 498. The impact is not material on the valuation and so the assumptions are not modified to reflect this change.

Tier 1

A. Future Retirees Retiring Before Age 65

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 405.91	\$ 600.22	\$ 358.44	\$ 287.54
30	\$ 501.82	\$ 737.35	\$ 332.08	\$ 647.04
35	\$ 624.64	\$ 796.12	\$ 413.35	\$ 644.18
40	\$ 744.37	\$ 1,009.52	\$ 521.77	\$ 692.30
45	\$ 827.50	\$ 1,211.49	\$ 635.33	\$ 783.94
50	\$ 906.03	\$ 1,127.96	\$ 750.61	\$ 884.59
55	\$ 985.45	\$ 1,061.60	\$ 907.15	\$ 1,013.47
60	\$ 1,045.98	\$ 1,062.39	\$ 1,145.37	\$ 1,181.07
65 (Pre 65)	\$ 1,195.28	\$ 1,172.78	\$ 1,419.29	\$ 1,391.18
65 (Post 65)	\$ 454.07	\$ 400.75	\$ 370.71	\$ 426.78
70	\$ 548.78	\$ 472.79	\$ 448.03	\$ 503.50
75	\$ 624.57	\$ 521.51	\$ 509.90	\$ 555.38
80	\$ 669.25	\$ 546.23	\$ 546.37	\$ 581.70
85	\$ 701.82	\$ 568.01	\$ 572.96	\$ 604.89
90	\$ 725.87	\$ 585.25	\$ 592.59	\$ 623.24
95	\$ 725.87	\$ 585.25	\$ 592.59	\$ 623.24

B. Future Retirees Retiring After Age 65

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	N/A	N/A	\$ 358.03	\$ 286.70
30	N/A	N/A	\$ 331.70	\$ 645.15
35	N/A	N/A	\$ 412.88	\$ 642.30
40	N/A	N/A	\$ 521.18	\$ 690.28
45	N/A	N/A	\$ 634.61	\$ 781.65
50	N/A	N/A	\$ 749.77	\$ 882.01
55	N/A	N/A	\$ 906.13	\$ 1,010.52
60	N/A	N/A	\$ 1,144.09	\$ 1,177.63
65 (Pre 65)	N/A	N/A	\$ 1,417.71	\$ 1,387.12
65 (Post 65)	\$ 332.76	\$ 301.27	\$ 293.25	\$ 322.77
70	\$ 402.17	\$ 355.43	\$ 354.41	\$ 380.79
75	\$ 457.71	\$ 392.05	\$ 403.35	\$ 420.03
80	\$ 490.45	\$ 410.63	\$ 432.20	\$ 439.94
85	\$ 514.32	\$ 427.00	\$ 453.23	\$ 457.48
90	\$ 531.94	\$ 439.96	\$ 468.76	\$ 471.36
95	\$ 531.94	\$ 439.96	\$ 468.76	\$ 471.36

The Firefighters Local 1014 and dental/vision claim costs are shown in the tables on the following page.

Tier 1

Firefighters Local 1014 Plan Monthly Medical Claim Costs

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 681.03	\$ 999.41	\$ 564.11	\$ 449.58
30	\$ 841.95	\$ 1,227.75	\$ 522.63	\$ 1,011.66
35	\$ 1,048.01	\$ 1,325.61	\$ 650.54	\$ 1,007.19
40	\$ 1,248.89	\$ 1,680.94	\$ 821.18	\$ 1,082.43
45	\$ 1,388.36	\$ 2,017.23	\$ 999.91	\$ 1,225.70
50	\$ 1,520.12	\$ 1,878.14	\$ 1,181.35	\$ 1,383.07
55	\$ 1,653.36	\$ 1,767.65	\$ 1,427.71	\$ 1,584.58
60	\$ 1,754.92	\$ 1,768.97	\$ 1,802.64	\$ 1,846.62
65 (Pre 65)	\$ 2,005.41	\$ 1,952.79	\$ 2,233.75	\$ 2,175.14
65 (Post 65)	\$ 432.00	\$ 420.66	\$ 432.00	\$ 420.66
70	\$ 522.10	\$ 496.28	\$ 522.10	\$ 496.28
75	\$ 594.20	\$ 547.42	\$ 594.20	\$ 547.42
80	\$ 636.70	\$ 573.37	\$ 636.70	\$ 573.37
85	\$ 667.68	\$ 596.23	\$ 667.68	\$ 596.23
90	\$ 690.56	\$ 614.32	\$ 690.56	\$ 614.32
95	\$ 690.56	\$ 614.32	\$ 690.56	\$ 614.32

Future Retirees Monthly Dental/Vision Claim Costs

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 24.30	\$ 31.02	\$ 28.01	\$ 28.60
30	\$ 27.42	\$ 32.86	\$ 29.75	\$ 35.72
35	\$ 29.10	\$ 34.40	\$ 31.57	\$ 37.40
40	\$ 30.28	\$ 35.59	\$ 32.85	\$ 38.68
45	\$ 32.33	\$ 37.35	\$ 35.07	\$ 40.60
50	\$ 35.56	\$ 40.45	\$ 38.57	\$ 43.97
55	\$ 40.57	\$ 44.47	\$ 44.02	\$ 48.34
60	\$ 46.29	\$ 48.50	\$ 50.21	\$ 52.73
65	\$ 52.13	\$ 51.60	\$ 56.55	\$ 56.09
70	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
75	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
80	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
85	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
90	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
95	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34

For current retired members, spouses, and dependents, the claim costs are based on the actual premiums by deduction code, adjusted for age and gender. The tables that follow show the age 65 adjusted monthly claim costs. Adjustments by age and gender are based on the same methodology used in the tables above.

Tier 1

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$ 861.84				\$ 861.84			\$ 625.47		
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$ 861.84	\$ 861.84	\$ 709.32		\$ 861.84	\$ 861.84		\$ 625.47	\$ 625.47	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$ 861.84	\$ 861.84	\$ 709.32		\$ 861.84	\$ 861.84		\$ 625.47	\$ 625.47	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$ 861.84	\$ 861.84	\$ 709.32		\$ 861.84			\$ 625.47		
205	Anthem Blue Cross Prudent Buyer	Minor Survivor				\$ 709.32			\$ 709.32			
211	Anthem Blue Cross I	Retiree Only	\$ 500.97				\$ 500.97			\$ 429.79		
212	Anthem Blue Cross I	Retiree and Spouse	\$ 500.97	\$ 500.97	\$ 412.31		\$ 500.97	\$ 500.97		\$ 429.79	\$ 429.79	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$ 500.97	\$ 500.97	\$ 412.31		\$ 500.97	\$ 500.97		\$ 429.79	\$ 429.79	
214	Anthem Blue Cross I	Retiree and Children	\$ 500.97	\$ 500.97	\$ 412.31		\$ 500.97			\$ 429.79		
215	Anthem Blue Cross I	Minor Survivor				\$ 412.31			\$ 412.31			\$ 412.31
221	Anthem Blue Cross II	Retiree Only	\$ 1,133.22				\$ 1,133.22			\$ 717.98		
222	Anthem Blue Cross II	Retiree and Spouse	\$ 1,133.22	\$ 1,133.22	\$ 932.68		\$ 1,133.22	\$ 1,133.22		\$ 717.98	\$ 717.98	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$ 1,133.22	\$ 1,133.22	\$ 932.68		\$ 1,133.22	\$ 1,133.22		\$ 717.98	\$ 717.98	
224	Anthem Blue Cross II	Retiree and Children	\$ 1,133.22	\$ 1,133.22	\$ 932.68		\$ 1,133.22			\$ 717.98		
225	Anthem Blue Cross II	Minor Survivor				\$ 932.68			\$ 932.68			\$ 932.68
240	Anthem Blue Cross III	One Medicare					\$ 378.24			\$ 378.24		
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,186.58	\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,186.58	\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare					\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24			\$ 378.24	\$ 378.24	
245	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24			\$ 378.24	\$ 378.24	
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,186.58	\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,186.58	\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
248	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
249	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
250	Anthem Blue Cross III	Retiree and Family 3 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
301	Cigna Network Model Plan	Retiree Only	\$ 1,258.78				\$ 1,258.78			\$ 731.71		
302	Cigna Network Model Plan	Retiree and Spouse	\$ 1,258.78	\$ 1,258.78	\$ 1,036.01		\$ 1,258.78	\$ 1,258.78		\$ 731.71	\$ 731.58	
303	Cigna Network Model Plan	Retiree and Family	\$ 1,258.78	\$ 1,258.78	\$ 1,036.01		\$ 1,258.78	\$ 1,258.78		\$ 731.71	\$ 731.58	
304	Cigna Network Model Plan	Retiree and Children	\$ 1,258.78	\$ 1,258.78	\$ 1,036.01		\$ 1,258.78			\$ 731.71		
305	Cigna Network Model Plan	Minor Survivor				\$ 1,036.01			\$ 1,036.01			
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only					\$ 329.99					
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse					\$ 329.99	\$ 329.99		\$ 329.99	\$ 329.99	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)					\$ 329.99	\$ 329.99				
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children					\$ 329.99	\$ 329.99		\$ 329.99	\$ 329.99	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)					\$ 329.99	\$ 329.99		\$ 329.99	\$ 329.99	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)					\$ 329.99	\$ 329.99				
401	Kaiser (CA)	Retiree Basic (Under 65)	\$ 1,203.36							\$ 375.62		
403	Kaiser (CA)	Retiree Risk (Senior Advantage)					\$ 222.49					
404	Kaiser (CA)	Retiree Excess I					\$ 934.00					
405	Kaiser (CA)	Retiree Excess II - Part B					\$ 861.17					
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)					\$ 1,523.23					
411	Kaiser (CA)	Family Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40					\$ 290.25	\$ 283.99	



Tier 1

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
413	Kaiser (CA)	One Advantage, One Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40		\$ 222.49	\$ 216.14		\$ 222.49	\$ 283.99	
414	Kaiser (CA)	One Excess I, One Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40		\$ 934.00	\$ 927.61		\$ 934.00	\$ 283.99	
418	Kaiser (CA)	Two+ Advantage					\$ 222.49	\$ 216.14				
419	Kaiser (CA)	One Excess I, One Advantage					\$ 578.24	\$ 571.87				
420	Kaiser (CA)	Two+ Excess I					\$ 934.00	\$ 927.61				
421	Kaiser (CA)	Survivor				\$ 990.40			\$ 990.40			\$ 990.40
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40		\$ 861.17	\$ 854.79		\$ 861.17	\$ 283.99	
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40		\$ 1,523.23	\$ 1,516.81		\$ 1,523.23	\$ 283.99	
426	Kaiser (CA)	One Advantage, One Excess II - Part B					\$ 541.83	\$ 535.46				
427	Kaiser (CA)	One Advantage, One Excess III (MNP)					\$ 872.86	\$ 866.48				
428	Kaiser (CA)	One Excess, One Excess II - Part B					\$ 897.59	\$ 891.20				
429	Kaiser (CA)	One Excess, One Excess III (MNP)					\$ 1,228.62	\$ 1,222.21				
430	Kaiser (CA)	Two Excess II - Part B					\$ 861.17	\$ 854.79				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)					\$ 1,192.20	\$ 1,185.80				
432	Kaiser (CA)	Two Excess III - Both (MNP)					\$ 1,523.23	\$ 1,516.81				
450	Kaiser - Colorado Basic	Retiree Basic	\$ 1,047.39							\$ 276.93		
451	Kaiser - Colorado	Retiree Risk					\$ 276.93					
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$ 1,047.39	\$ 1,349.00						\$ 276.93	\$ 198.78	
454	Kaiser - Colorado	Retiree Basic Family	\$ 1,047.39	\$ 1,349.00	\$ 2,460.99					\$ 276.93	\$ 198.78	
455	Kaiser - Colorado	One Risk, One Basic	\$ 1,047.39	\$ 984.20			\$ 276.93	\$ 198.78		\$ 276.93	\$ 278.14	
457	Kaiser - Colorado	Two Retiree Risk					\$ 276.93	\$ 278.14				
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$ 1,047.39	\$ 984.20	\$ 2,908.76		\$ 276.93	\$ 278.14		\$ 276.93	\$ 278.14	
459	Kaiser - Colorado	Two Risk, Two or More Dependents			\$ 3,220.19		\$ 276.93	\$ 278.14		\$ 276.93	\$ 278.14	
440	Kaiser - Georgia	One Medicare Member with Part B only					\$ 853.50					
441	Kaiser - Georgia	One Medicare Member with Part A only					\$ 853.50					
442	Kaiser - Georgia	One Member without Medicare Part A&B					\$ 853.50					
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only					\$ 853.50	\$ 328.55				
461	Kaiser - Georgia Basic	Basic	\$ 1,260.01							\$ 326.01		
462	Kaiser - Georgia	Retiree Risk					\$ 326.01					
463	Kaiser - Georgia	Retiree (Two Party)	\$ 1,260.01	\$ 1,332.07	\$ 4,358.38		\$ 326.01	\$ 328.55		\$ 326.01	\$ 328.55	
464	Kaiser - Georgia	Retiree Basic Family	\$ 1,260.01	\$ 1,332.07	\$ 4,358.38					\$ 326.01	\$ 328.55	
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$ 481.28	\$ 1,332.07	\$ 4,358.38		\$ 326.01	\$ 328.55		\$ 326.01	\$ 328.55	
466	Kaiser - Georgia	Two Retiree Risk					\$ 326.01	\$ 328.55				
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$ 1,085.63							\$ 344.91		
472	Kaiser - Hawaii	Retiree Risk					\$ 344.91					
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B					\$ 1,360.26					
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$ 1,085.63	\$ 1,146.37						\$ 344.91	\$ 347.98	
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$ 1,085.63	\$ 1,146.37	\$ 3,750.80					\$ 344.91	\$ 347.98	
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$ 1,085.63	\$ 1,146.37	\$ 3,750.80		\$ 344.91	\$ 347.98		\$ 344.91	\$ 347.98	
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$ 1,085.63	\$ 1,146.37	\$ 3,750.80		\$ 1,360.26	\$ 1,390.96		\$ 1,360.26	\$ 1,390.96	
478	Kaiser - Hawaii	Two Retiree Risk					\$ 344.91	\$ 347.98				



Tier 1

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,336.08							\$ 358.59		
482	Kaiser - Oregon	Retiree Risk							\$ 358.59			
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B							\$ 961.56			
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,336.08	\$ 1,413.07						\$ 358.59	\$ 362.03	
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,336.08	\$ 2,826.15	\$ 4,623.41					\$ 358.59	\$ 362.03	
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,336.08	\$ 1,413.07	\$ 4,623.41				\$ 358.59	\$ 362.03	\$ 358.59	\$ 362.03
488	Kaiser - Oregon	Two Retiree Risk							\$ 358.59	\$ 362.03		
489	Kaiser - Oregon	Retiree w/ Part A only							\$ 804.80			
491	Kaiser - Oregon	One Risk, One Medicare Part A only							\$ 804.80	\$ 362.03		
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,419.53	\$ 554.05					\$ 961.56	\$ 362.03	\$ 358.59	\$ 362.03
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,336.08	\$ 1,413.07					\$ 358.59	\$ 362.03	\$ 358.59	\$ 362.03
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,336.08	\$ 1,413.07	\$ 4,623.41				\$ 358.59	\$ 362.03	\$ 358.59	\$ 362.03
495	Kaiser - Oregon	Two Over 65 unassigned Medicare							\$ 961.56	\$ 981.41		
496	Kaiser - Oregon	Two Medicare Part A only							\$ 804.80	\$ 820.38		
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,336.08	\$ 1,413.07					\$ 804.80	\$ 820.38	\$ 804.80	\$ 820.38
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,336.08	\$ 1,413.07					\$ 961.56	\$ 981.41	\$ 961.56	\$ 981.41
611	SCAN Health Plan	Retiree Only							\$ 202.45			
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)							\$ 202.45	\$ 202.45		
701	United Healthcare	Retiree Only	\$ 1,354.92						\$ 292.02		\$ 292.02	
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14				\$ 292.02	\$ 292.02	\$ 292.02	\$ 292.02
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)							\$ 292.02	\$ 292.02	\$ 292.02	\$ 292.02
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14				\$ 292.02	\$ 292.02	\$ 292.02	\$ 292.02
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14				\$ 292.02	\$ 292.02	\$ 292.02	\$ 292.02
706	United Healthcare	Minor Survivor					\$ 1,115.14			\$ 1,115.14		
707	United Healthcare	Single	\$ 1,354.92								\$ 344.99	
708	United Healthcare	Two-Party	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14						\$ 344.99	\$ 344.61
709	United Healthcare	Family	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14						\$ 344.99	\$ 344.61



Tier 1

Fire Fighters Local 1014 Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2,005.41				\$ 432.00			\$ 432.00		
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 2,005.41	\$ 2,005.41	\$ 1,650.52		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 2,005.41	\$ 2,005.41	\$ 1,650.52		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare					\$ 432.00		\$ 432.00	\$ 432.00		\$ 432.00
805	Firefighters' Local 1014	Med-Member +1; 1 MDC		\$ 2,005.41	\$ 1,650.52		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
806	Firefighters' Local 1014	Med-Member +1; 2 MDC		\$ 2,005.41	\$ 1,650.52		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
807	Firefighters' Local 1014	Med-Member +2; 1 MDC		\$ 2,005.41	\$ 1,650.52		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
808	Firefighters' Local 1014	Med-Member +2; 2 MDC					\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65				\$ 2,005.41		\$ 432.00	\$ 432.00		\$ 432.00	\$ 432.00
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65	\$ 2,005.41	\$ 1,650.52	\$ 2,005.41		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65	\$ 2,005.41	\$ 1,650.52	\$ 2,005.41		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC					\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC	\$ 2,005.41	\$ 1,650.52	\$ 2,005.41		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC	\$ 2,005.41	\$ 1,650.52	\$ 2,005.41		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC					\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00

Dental/Vision Male Retirees

Deduction Code	Plan	Tier	Age 65 Adjusted Claim Costs		
			Retiree	Sp/Dep	Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$ 52.92		
502	Cigna Indemnity Dental/Vision	Family	\$ 52.92	\$ 57.03	
503	Cigna Indemnity Dental/Vision	Minor Survivor			\$ 54.65
901	Cigna Dental HMO/Vision	Retiree Only	\$ 46.86		
902	Cigna Dental HMO/Vision	Family	\$ 46.86	\$ 53.35	
903	Cigna Dental HMO/Vision	Minor Survivor			\$ 48.40



Tier 1

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$ 839.22				\$ 839.22			\$ 609.06		
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$ 839.22	\$ 839.22	\$ 866.68		\$ 839.22	\$ 839.22		\$ 609.06	\$ 609.06	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$ 839.22	\$ 839.22	\$ 866.68		\$ 839.22	\$ 839.22		\$ 609.06	\$ 609.06	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$ 839.22	\$ 839.22	\$ 866.68		\$ 839.22			\$ 609.06		
205	Anthem Blue Cross Prudent Buyer	Minor Survivor				\$ 866.68			\$ 866.68			
211	Anthem Blue Cross I	Retiree Only	\$ 487.82				\$ 487.82			\$ 418.51		
212	Anthem Blue Cross I	Retiree and Spouse	\$ 487.82	\$ 487.82	\$ 503.78		\$ 487.82	\$ 487.82		\$ 418.51	\$ 418.51	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$ 487.82	\$ 487.82	\$ 503.78		\$ 487.82	\$ 487.82		\$ 418.51	\$ 418.51	
214	Anthem Blue Cross I	Retiree and Children	\$ 487.82	\$ 487.82	\$ 503.78		\$ 487.82			\$ 418.51		
215	Anthem Blue Cross I	Minor Survivor				\$ 503.78			\$ 503.78			\$ 503.78
221	Anthem Blue Cross II	Retiree Only	\$ 1,103.48				\$ 1,103.48			\$ 699.14		
222	Anthem Blue Cross II	Retiree and Spouse	\$ 1,103.48	\$ 1,103.48	\$ 1,139.58		\$ 1,103.48	\$ 1,103.48		\$ 699.14	\$ 699.14	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$ 1,103.48	\$ 1,103.48	\$ 1,139.58		\$ 1,103.48	\$ 1,103.48		\$ 699.14	\$ 699.14	
224	Anthem Blue Cross II	Retiree and Children	\$ 1,103.48	\$ 1,103.48	\$ 1,139.58		\$ 1,103.48			\$ 699.14		
225	Anthem Blue Cross II	Minor Survivor				\$ 1,139.58			\$ 1,139.58			\$ 1,139.58
240	Anthem Blue Cross III	One Medicare					\$ 368.32			\$ 368.32		
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,155.44	\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	\$ 368.32
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,155.44	\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	\$ 368.32
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare					\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	\$ 368.32
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32			\$ 368.32	\$ 368.32	\$ 368.32
245	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32			\$ 368.32	\$ 368.32	\$ 368.32
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,155.44	\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	\$ 368.32
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,155.44	\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	\$ 368.32
248	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	\$ 368.32
249	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	\$ 368.32
250	Anthem Blue Cross III	Retiree and Family 3 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	\$ 368.32
301	Cigna Network Model Plan	Retiree Only	\$ 1,225.75				\$ 1,225.75			\$ 712.50		
302	Cigna Network Model Plan	Retiree and Spouse	\$ 1,225.75	\$ 1,225.75	\$ 1,265.84		\$ 1,225.75	\$ 1,225.75		\$ 712.50	\$ 712.38	
303	Cigna Network Model Plan	Retiree and Family	\$ 1,225.75	\$ 1,225.75	\$ 1,265.84		\$ 1,225.75	\$ 1,225.75		\$ 712.50	\$ 712.38	
304	Cigna Network Model Plan	Retiree and Children	\$ 1,225.75	\$ 1,225.75	\$ 1,265.84		\$ 1,225.75			\$ 712.50		
305	Cigna Network Model Plan	Minor Survivor				\$ 1,265.84			\$ 1,265.84			
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only					\$ 321.33					
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse					\$ 321.33	\$ 321.33		\$ 321.33	\$ 321.33	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)					\$ 321.33	\$ 321.33				
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children					\$ 321.33	\$ 321.33		\$ 321.33	\$ 321.33	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)					\$ 321.33	\$ 321.33		\$ 321.33	\$ 321.33	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)					\$ 321.33	\$ 321.33				
401	Kaiser (CA)	Retiree Basic (Under 65)	\$ 1,171.78							\$ 365.76		
403	Kaiser (CA)	Retiree Risk (Senior Advantage)					\$ 216.65					
404	Kaiser (CA)	Retiree Excess I					\$ 909.49					
405	Kaiser (CA)	Retiree Excess II - Part B					\$ 838.58					
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)					\$ 1,483.26					
411	Kaiser (CA)	Family Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11					\$ 282.63	\$ 276.54	



Tier 1

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
413	Kaiser (CA)	One Advantage, One Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11		\$ 216.65	\$ 210.47		\$ 216.65	\$ 276.54	
414	Kaiser (CA)	One Excess I, One Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11		\$ 909.49	\$ 903.27		\$ 909.49	\$ 276.54	
418	Kaiser (CA)	Two+ Advantage					\$ 216.65	\$ 210.47				
419	Kaiser (CA)	One Excess I, One Advantage					\$ 563.07	\$ 556.87				
420	Kaiser (CA)	Two+ Excess I					\$ 909.49	\$ 903.27				
421	Kaiser (CA)	Survivor				\$ 1,210.11			\$ 1,210.11			\$ 1,210.11
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11		\$ 838.58	\$ 832.36		\$ 838.58	\$ 276.54	
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11		\$ 1,483.26	\$ 1,477.01		\$ 1,483.26	\$ 276.54	
426	Kaiser (CA)	One Advantage, One Excess II - Part B					\$ 527.61	\$ 521.41				
427	Kaiser (CA)	One Advantage, One Excess III (MNP)					\$ 849.96	\$ 843.74				
428	Kaiser (CA)	One Excess, One Excess II - Part B					\$ 874.03	\$ 867.81				
429	Kaiser (CA)	One Excess, One Excess III (MNP)					\$ 1,196.38	\$ 1,190.14				
430	Kaiser (CA)	Two Excess II - Part B					\$ 838.58	\$ 832.36				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)					\$ 1,160.92	\$ 1,154.68				
432	Kaiser (CA)	Two Excess III - Both (MNP)					\$ 1,483.26	\$ 1,477.01				
450	Kaiser - Colorado Basic	Retiree Basic	\$ 1,019.91							\$ 269.66		
451	Kaiser - Colorado	Retiree Risk							\$ 269.66			
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$ 1,019.91	\$ 1,313.60						\$ 269.66	\$ 193.56	
454	Kaiser - Colorado	Retiree Basic Family	\$ 1,019.91	\$ 1,313.60	\$ 3,006.94					\$ 269.66	\$ 193.56	
455	Kaiser - Colorado	One Risk, One Basic	\$ 1,019.91	\$ 958.37			\$ 269.66	\$ 193.56		\$ 269.66	\$ 270.84	
457	Kaiser - Colorado	Two Retiree Risk					\$ 269.66	\$ 270.84				
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$ 1,019.91	\$ 958.37	\$ 3,554.04		\$ 269.66	\$ 270.84		\$ 269.66	\$ 270.84	
459	Kaiser - Colorado	Two Risk, Two or More Dependents			\$ 3,934.56		\$ 269.66	\$ 270.84		\$ 269.66	\$ 270.84	
440	Kaiser - Georgia	One Medicare Member with Part B only					\$ 831.11					
441	Kaiser - Georgia	One Medicare Member with Part A only					\$ 831.11					
442	Kaiser - Georgia	One Member without Medicare Part A&B					\$ 831.11					
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only					\$ 831.11	\$ 319.93				
461	Kaiser - Georgia Basic	Basic	\$ 1,226.95							\$ 317.45		
462	Kaiser - Georgia	Retiree Risk					\$ 317.45					
463	Kaiser - Georgia	Retiree (Two Party)	\$ 1,226.95	\$ 1,297.12	\$ 5,325.25		\$ 317.45	\$ 319.93		\$ 317.45	\$ 319.93	
464	Kaiser - Georgia	Retiree Basic Family	\$ 1,226.95	\$ 1,297.12	\$ 5,325.25					\$ 317.45	\$ 319.93	
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$ 468.65	\$ 1,297.12	\$ 5,325.25		\$ 317.45	\$ 319.93		\$ 317.45	\$ 319.93	
466	Kaiser - Georgia	Two Retiree Risk					\$ 317.45	\$ 319.93				
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$ 1,057.14							\$ 335.86		
472	Kaiser - Hawaii	Retiree Risk					\$ 335.86					
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B					\$ 1,324.57					
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$ 1,057.14	\$ 1,116.29						\$ 335.86	\$ 338.85	
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$ 1,057.14	\$ 1,116.29	\$ 4,582.88					\$ 335.86	\$ 338.85	
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$ 1,057.14	\$ 1,116.29	\$ 4,582.88		\$ 335.86	\$ 338.85		\$ 335.86	\$ 338.85	
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$ 1,057.14	\$ 1,116.29	\$ 4,582.88		\$ 1,324.57	\$ 1,354.46		\$ 1,324.57	\$ 1,354.46	
478	Kaiser - Hawaii	Two Retiree Risk					\$ 335.86	\$ 338.85				



Tier 1

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,301.02							\$ 349.18		
482	Kaiser - Oregon	Retiree Risk							\$ 349.18			
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B							\$ 936.33			
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,301.02	\$ 1,375.99						\$ 349.18	\$ 352.53	
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,301.02	\$ 2,751.99	\$ 5,649.07					\$ 349.18	\$ 352.53	
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,301.02	\$ 1,375.99	\$ 5,649.07				\$ 349.18	\$ 352.53	\$ 349.18	\$ 352.53
488	Kaiser - Oregon	Two Retiree Risk							\$ 349.18	\$ 352.53		
489	Kaiser - Oregon	Retiree w/ Part A only							\$ 783.68			
491	Kaiser - Oregon	One Risk, One Medicare Part A only							\$ 783.68	\$ 352.53		
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,382.28	\$ 539.51					\$ 936.33	\$ 352.53	\$ 349.18	\$ 352.53
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,301.02	\$ 1,375.99					\$ 349.18	\$ 352.53	\$ 349.18	\$ 352.53
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,301.02	\$ 1,375.99	\$ 5,649.07				\$ 349.18	\$ 352.53	\$ 349.18	\$ 352.53
495	Kaiser - Oregon	Two Over 65 unassigned Medicare							\$ 936.33	\$ 955.66		
496	Kaiser - Oregon	Two Medicare Part A only							\$ 783.68	\$ 798.85		
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,301.02	\$ 1,375.99					\$ 783.68	\$ 798.85	\$ 783.68	\$ 798.85
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,301.02	\$ 1,375.99					\$ 936.33	\$ 955.66	\$ 936.33	\$ 955.66
611	SCAN Health Plan	Retiree Only							\$ 197.14			
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)							\$ 197.14	\$ 197.14		
701	United Healthcare	Retiree Only	\$ 1,319.37						\$ 284.36		\$ 284.36	
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53				\$ 284.36	\$ 284.36	\$ 284.36	\$ 284.36
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)							\$ 284.36	\$ 284.36	\$ 284.36	\$ 284.36
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53				\$ 284.36	\$ 284.36	\$ 284.36	\$ 284.36
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53				\$ 284.36	\$ 284.36	\$ 284.36	\$ 284.36
706	United Healthcare	Minor Survivor					\$ 1,362.53			\$ 1,362.53		
707	United Healthcare	Single	\$ 1,319.37								\$ 335.94	
708	United Healthcare	Two-Party	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53						\$ 335.94	\$ 335.57
709	United Healthcare	Family	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53						\$ 335.94	\$ 335.57



Tier 1

Fire Fighters Local 1014 Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 1,952.79				\$ 420.66			\$ 420.66		
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 1,952.79	\$ 1,952.79	\$ 2,016.67		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 1,952.79	\$ 1,952.79	\$ 2,016.67		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare					\$ 420.66		\$ 420.66	\$ 420.66		\$ 420.66
805	Firefighters' Local 1014	Med-Member +1; 1 MDC		\$ 1,952.79	\$ 2,016.67		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
806	Firefighters' Local 1014	Med-Member +1; 2 MDC					\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
807	Firefighters' Local 1014	Med-Member +2; 1 MDC		\$ 1,952.79	\$ 2,016.67		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
808	Firefighters' Local 1014	Med-Member +2; 2 MDC					\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65				\$ 1,952.79	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65	\$ 1,952.79	\$ 2,016.67	\$ 1,952.79		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65	\$ 1,952.79	\$ 2,016.67	\$ 1,952.79		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC					\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC	\$ 1,952.79	\$ 2,016.67	\$ 1,952.79		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC	\$ 1,952.79	\$ 2,016.67	\$ 1,952.79		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC					\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66

Dental/Vision Female Retirees

Deduction Code	Plan	Tier	Age 65 Adjusted Claim Costs		
			Retiree	Sp/Dep	Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$ 52.44		
502	Cigna Indemnity Dental/Vision	Family	\$ 52.44	\$ 56.52	
503	Cigna Indemnity Dental/Vision	Minor Survivor			\$ 53.08
901	Cigna Dental HMO/Vision	Retiree Only	\$ 46.44		
902	Cigna Dental HMO/Vision	Family	\$ 46.44	\$ 52.86	
903	Cigna Dental HMO/Vision	Minor Survivor			\$ 47.00



Tier 2

A. Future Retirees Retiring Before Age 65

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 405.91	\$ 600.22	\$ 358.44	\$ 287.54
30	\$ 501.82	\$ 737.35	\$ 332.08	\$ 647.04
35	\$ 624.64	\$ 796.12	\$ 413.35	\$ 644.18
40	\$ 744.37	\$ 1,009.52	\$ 521.77	\$ 692.30
45	\$ 827.50	\$ 1,211.49	\$ 635.33	\$ 783.94
50	\$ 906.03	\$ 1,127.96	\$ 750.61	\$ 884.59
55	\$ 985.45	\$ 1,061.60	\$ 907.15	\$ 1,013.47
60	\$ 1,045.98	\$ 1,062.39	\$ 1,145.37	\$ 1,181.07
65 (Pre 65)	\$ 1,195.28	\$ 1,172.78	\$ 1,419.29	\$ 1,391.18
65 (Post 65)	\$ 290.14	\$ 262.63	\$ 256.78	\$ 276.09
70	\$ 350.66	\$ 309.84	\$ 310.34	\$ 325.72
75	\$ 399.09	\$ 341.77	\$ 353.20	\$ 359.28
80	\$ 427.64	\$ 357.97	\$ 378.46	\$ 376.31
85	\$ 448.45	\$ 372.24	\$ 396.88	\$ 391.31
90	\$ 463.82	\$ 383.54	\$ 410.48	\$ 403.18
95	\$ 463.82	\$ 383.54	\$ 410.48	\$ 403.18

B. Future Retirees Retiring After Age 65

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	N/A	N/A	\$ 356.90	\$ 285.96
30	N/A	N/A	\$ 330.65	\$ 643.48
35	N/A	N/A	\$ 411.57	\$ 640.63
40	N/A	N/A	\$ 519.53	\$ 688.49
45	N/A	N/A	\$ 632.60	\$ 779.62
50	N/A	N/A	\$ 747.39	\$ 879.71
55	N/A	N/A	\$ 903.26	\$ 1,007.88
60	N/A	N/A	\$ 1,140.46	\$ 1,174.55
65 (Pre 65)	N/A	N/A	\$ 1,413.22	\$ 1,383.50
65 (Post 65)	\$ 274.51	\$ 255.75	\$ 257.48	\$ 263.65
70	\$ 331.76	\$ 301.72	\$ 311.18	\$ 311.04
75	\$ 377.58	\$ 332.81	\$ 354.15	\$ 343.09
80	\$ 404.59	\$ 348.58	\$ 379.48	\$ 359.35
85	\$ 424.28	\$ 362.48	\$ 397.95	\$ 373.68
90	\$ 438.82	\$ 373.48	\$ 411.59	\$ 385.02
95	\$ 438.82	\$ 373.48	\$ 411.59	\$ 385.02

The Firefighters Local 1014 and dental/vision monthly claim costs are shown in the tables on the following page.

Tier 2

Firefighters Local 1014 Plan Monthly Medical Claim Costs

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 681.03	\$ 999.41	\$ 564.11	\$ 449.58
30	\$ 841.95	\$ 1,227.75	\$ 522.63	\$ 1,011.66
35	\$ 1,048.01	\$ 1,325.61	\$ 650.54	\$ 1,007.19
40	\$ 1,248.89	\$ 1,680.94	\$ 821.18	\$ 1,082.43
45	\$ 1,388.36	\$ 2,017.23	\$ 999.91	\$ 1,225.70
50	\$ 1,520.12	\$ 1,878.14	\$ 1,181.35	\$ 1,383.07
55	\$ 1,653.36	\$ 1,767.65	\$ 1,427.71	\$ 1,584.58
60	\$ 1,754.92	\$ 1,768.97	\$ 1,802.64	\$ 1,846.62
65 (Pre 65)	\$ 2,005.41	\$ 1,952.79	\$ 2,233.75	\$ 2,175.14
65 (Post 65)	\$ 432.00	\$ 420.66	\$ 432.00	\$ 420.66
70	\$ 522.10	\$ 496.28	\$ 522.10	\$ 496.28
75	\$ 594.20	\$ 547.42	\$ 594.20	\$ 547.42
80	\$ 636.70	\$ 573.37	\$ 636.70	\$ 573.37
85	\$ 667.68	\$ 596.23	\$ 667.68	\$ 596.23
90	\$ 690.56	\$ 614.32	\$ 690.56	\$ 614.32
95	\$ 690.56	\$ 614.32	\$ 690.56	\$ 614.32

Future Retirees Monthly Dental/Vision Claim Costs

Age	Retiree		Spouse/Surv Spouse + Dependents	
	Male	Female	Male	Female
25	\$ 24.30	\$ 31.02	\$ 28.01	\$ 28.60
30	\$ 27.42	\$ 32.86	\$ 29.75	\$ 35.72
35	\$ 29.10	\$ 34.40	\$ 31.57	\$ 37.40
40	\$ 30.28	\$ 35.59	\$ 32.85	\$ 38.68
45	\$ 32.33	\$ 37.35	\$ 35.07	\$ 40.60
50	\$ 35.56	\$ 40.45	\$ 38.57	\$ 43.97
55	\$ 40.57	\$ 44.47	\$ 44.02	\$ 48.34
60	\$ 46.29	\$ 48.50	\$ 50.21	\$ 52.73
65	\$ 52.13	\$ 51.60	\$ 56.55	\$ 56.09
70	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
75	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
80	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
85	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
90	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34
95	\$ 57.32	\$ 53.66	\$ 62.18	\$ 58.34

For current retired members, spouses, and dependents, the claim costs are based on the actual premiums by deduction code, adjusted for age and gender. The tables that follow show the age 65 adjusted monthly claim costs. Adjustments by age and gender are based on the same methodology used in the tables above.

Tier 2

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$ 861.84				\$ 861.84			\$ 378.24		
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$ 861.84	\$ 861.84	\$ 709.32		\$ 861.84	\$ 861.84		\$ 378.24	\$ 378.24	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$ 861.84	\$ 861.84	\$ 709.32		\$ 861.84	\$ 861.84		\$ 378.24	\$ 378.24	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$ 861.84	\$ 861.84	\$ 709.32		\$ 861.84			\$ 378.24		
205	Anthem Blue Cross Prudent Buyer	Minor Survivor				\$ 709.32			\$ 709.32			
211	Anthem Blue Cross I	Retiree Only	\$ 500.97				\$ 500.97			\$ 378.24		
212	Anthem Blue Cross I	Retiree and Spouse	\$ 500.97	\$ 500.97	\$ 412.31		\$ 500.97	\$ 500.97		\$ 378.24	\$ 378.24	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$ 500.97	\$ 500.97	\$ 412.31		\$ 500.97	\$ 500.97		\$ 378.24	\$ 378.24	
214	Anthem Blue Cross I	Retiree and Children	\$ 500.97	\$ 500.97	\$ 412.31		\$ 500.97			\$ 378.24		
215	Anthem Blue Cross I	Minor Survivor				\$ 412.31			\$ 412.31			\$ 412.31
221	Anthem Blue Cross II	Retiree Only	\$ 1,133.22				\$ 1,133.22			\$ 378.24		
222	Anthem Blue Cross II	Retiree and Spouse	\$ 1,133.22	\$ 1,133.22	\$ 932.68		\$ 1,133.22	\$ 1,133.22		\$ 378.24	\$ 378.24	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$ 1,133.22	\$ 1,133.22	\$ 932.68		\$ 1,133.22	\$ 1,133.22		\$ 378.24	\$ 378.24	
224	Anthem Blue Cross II	Retiree and Children	\$ 1,133.22	\$ 1,133.22	\$ 932.68		\$ 1,133.22			\$ 378.24		
225	Anthem Blue Cross II	Minor Survivor				\$ 932.68			\$ 932.68			\$ 932.68
240	Anthem Blue Cross III	One Medicare					\$ 378.24			\$ 378.24		
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,186.58	\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,186.58	\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24			\$ 378.24	\$ 378.24	
245	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24			\$ 378.24	\$ 378.24	
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,186.58	\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,186.58	\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
248	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
249	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
250	Anthem Blue Cross III	Retiree and Family 3 Medicare		\$ 1,186.57	\$ 976.59		\$ 378.24	\$ 378.24		\$ 378.24	\$ 378.24	
301	Cigna Network Model Plan	Retiree Only	\$ 1,258.78				\$ 1,258.78			\$ 311.85		
302	Cigna Network Model Plan	Retiree and Spouse	\$ 1,258.78	\$ 1,258.78	\$ 1,036.01		\$ 1,258.78	\$ 1,258.78		\$ 311.85	\$ 311.85	
303	Cigna Network Model Plan	Retiree and Family	\$ 1,258.78	\$ 1,258.78	\$ 1,036.01		\$ 1,258.78	\$ 1,258.78		\$ 311.85	\$ 311.85	
304	Cigna Network Model Plan	Retiree and Children	\$ 1,258.78	\$ 1,258.78	\$ 1,036.01		\$ 1,258.78			\$ 311.85		
305	Cigna Network Model Plan	Minor Survivor				\$ 1,036.01			\$ 1,036.01			
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only					\$ 329.99			\$ 329.99		
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse					\$ 329.99	\$ 329.99		\$ 329.99	\$ 329.99	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)					\$ 329.99	\$ 329.99		\$ 329.99	\$ 329.99	
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children					\$ 329.99	\$ 329.99		\$ 329.99	\$ 329.99	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)					\$ 329.99	\$ 329.99		\$ 329.99	\$ 329.99	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)					\$ 329.99	\$ 329.99		\$ 329.99	\$ 329.99	
401	Kaiser (CA)	Retiree Basic (Under 65)	\$ 1,203.36							\$ 225.60		
403	Kaiser (CA)	Retiree Risk (Senior Advantage)					\$ 222.49					
404	Kaiser (CA)	Retiree Excess I					\$ 934.00					
405	Kaiser (CA)	Retiree Excess II - Part B					\$ 861.17					
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)					\$ 1,523.23					
411	Kaiser (CA)	Family Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40					\$ 224.05	\$ 217.76	



Tier 2

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
413	Kaiser (CA)	One Advantage, One Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40		\$ 222.49	\$ 216.14		\$ 222.49	\$ 217.76	
414	Kaiser (CA)	One Excess I, One Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40		\$ 934.00	\$ 927.61		\$ 934.00	\$ 217.76	
418	Kaiser (CA)	Two+ Advantage					\$ 222.49	\$ 216.14				
419	Kaiser (CA)	One Excess I, One Advantage					\$ 578.24	\$ 571.87				
420	Kaiser (CA)	Two+ Excess I					\$ 934.00	\$ 927.61				
421	Kaiser (CA)	Survivor				\$ 990.40			\$ 990.40			\$ 990.40
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40		\$ 861.17	\$ 854.79		\$ 861.17	\$ 217.76	
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$ 1,203.36	\$ 1,203.36	\$ 990.40		\$ 1,523.23	\$ 1,516.81		\$ 1,523.23	\$ 217.76	
426	Kaiser (CA)	One Advantage, One Excess II - Part B					\$ 541.83	\$ 535.46				
427	Kaiser (CA)	One Advantage, One Excess III (MNP)					\$ 872.86	\$ 866.48				
428	Kaiser (CA)	One Excess, One Excess II - Part B					\$ 897.59	\$ 891.20				
429	Kaiser (CA)	One Excess, One Excess III (MNP)					\$ 1,228.62	\$ 1,222.21				
430	Kaiser (CA)	Two Excess II - Part B					\$ 861.17	\$ 854.79				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)					\$ 1,192.20	\$ 1,185.80				
432	Kaiser (CA)	Two Excess III - Both (MNP)					\$ 1,523.23	\$ 1,516.81				
450	Kaiser - Colorado Basic	Retiree Basic	\$ 1,047.39							\$ 276.93		
451	Kaiser - Colorado	Retiree Risk					\$ 276.93					
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$ 1,047.39	\$ 1,349.00						\$ 276.93	\$ 198.78	
454	Kaiser - Colorado	Retiree Basic Family	\$ 1,047.39	\$ 1,349.00	\$ 2,460.99					\$ 276.93	\$ 198.78	
455	Kaiser - Colorado	One Risk, One Basic	\$ 1,047.39	\$ 984.20			\$ 276.93	\$ 198.78		\$ 276.93	\$ 278.14	
457	Kaiser - Colorado	Two Retiree Risk					\$ 276.93	\$ 278.14				
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$ 1,047.39	\$ 984.20	\$ 2,908.76		\$ 276.93	\$ 278.14		\$ 276.93	\$ 278.14	
459	Kaiser - Colorado	Two Risk, Two or More Dependents			\$ 3,220.19		\$ 276.93	\$ 278.14		\$ 276.93	\$ 278.14	
440	Kaiser - Georgia	One Medicare Member with Part B only					\$ 853.50					
441	Kaiser - Georgia	One Medicare Member with Part A only					\$ 853.50					
442	Kaiser - Georgia	One Member without Medicare Part A&B					\$ 853.50					
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only					\$ 853.50	\$ 328.55				
461	Kaiser - Georgia Basic	Basic	\$ 1,260.01							\$ 326.01		
462	Kaiser - Georgia	Retiree Risk					\$ 326.01					
463	Kaiser - Georgia	Retiree (Two Party)	\$ 1,260.01	\$ 1,332.07	\$ 4,358.38		\$ 326.01	\$ 328.55		\$ 326.01	\$ 328.55	
464	Kaiser - Georgia	Retiree Basic Family	\$ 1,260.01	\$ 1,332.07	\$ 4,358.38					\$ 326.01	\$ 328.55	
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$ 481.28	\$ 1,332.07	\$ 4,358.38		\$ 326.01	\$ 328.55		\$ 326.01	\$ 328.55	
466	Kaiser - Georgia	Two Retiree Risk					\$ 326.01	\$ 328.55				
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$ 1,085.63							\$ 344.91		
472	Kaiser - Hawaii	Retiree Risk					\$ 344.91					
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B					\$ 1,360.26					
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$ 1,085.63	\$ 1,146.37						\$ 344.91	\$ 347.98	
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$ 1,085.63	\$ 1,146.37	\$ 3,750.80					\$ 344.91	\$ 347.98	
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$ 1,085.63	\$ 1,146.37	\$ 3,750.80		\$ 344.91	\$ 347.98		\$ 344.91	\$ 347.98	
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$ 1,085.63	\$ 1,146.37	\$ 3,750.80		\$ 1,360.26	\$ 1,390.96		\$ 1,360.26	\$ 1,390.96	
478	Kaiser - Hawaii	Two Retiree Risk					\$ 344.91	\$ 347.98				



Tier 2

Non Local 1014 Fire Fighters Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees			
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv	
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,336.08								\$ 358.59		
482	Kaiser - Oregon	Retiree Risk					\$ 358.59						
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B					\$ 961.56						
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,336.08	\$ 1,413.07							\$ 358.59	\$ 362.03	
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,336.08	\$ 2,826.15	\$ 4,623.41						\$ 358.59	\$ 362.03	
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,336.08	\$ 1,413.07	\$ 4,623.41		\$ 358.59	\$ 362.03			\$ 358.59	\$ 362.03	
488	Kaiser - Oregon	Two Retiree Risk					\$ 358.59	\$ 362.03					
489	Kaiser - Oregon	Retiree w/ Part A only					\$ 804.80						
491	Kaiser - Oregon	One Risk, One Medicare Part A only					\$ 804.80	\$ 362.03					
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,419.53	\$ 554.05			\$ 961.56	\$ 362.03			\$ 358.59	\$ 362.03	
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,336.08	\$ 1,413.07			\$ 358.59	\$ 362.03			\$ 358.59	\$ 362.03	
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,336.08	\$ 1,413.07	\$ 4,623.41		\$ 358.59	\$ 362.03			\$ 358.59	\$ 362.03	
495	Kaiser - Oregon	Two Over 65 unassigned Medicare					\$ 961.56	\$ 981.41					
496	Kaiser - Oregon	Two Medicare Part A only					\$ 804.80	\$ 820.38					
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,336.08	\$ 1,413.07			\$ 804.80	\$ 820.38			\$ 804.80	\$ 820.38	
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,336.08	\$ 1,413.07			\$ 961.56	\$ 981.41			\$ 961.56	\$ 981.41	
611	SCAN Health Plan	Retiree Only					\$ 202.45						
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)					\$ 202.45	\$ 202.45					
701	United Healthcare	Retiree Only	\$ 1,354.92				\$ 292.02				\$ 292.02		
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14		\$ 292.02	\$ 292.02			\$ 292.02	\$ 292.02	
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)					\$ 292.02	\$ 292.02			\$ 292.02	\$ 292.02	
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14		\$ 292.02	\$ 292.02			\$ 292.02	\$ 292.02	
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14		\$ 292.02	\$ 292.02			\$ 292.02	\$ 292.02	
706	United Healthcare	Minor Survivor					\$ 1,115.14			\$ 1,115.14			
707	United Healthcare	Single	\$ 1,354.92								\$ 294.68		
708	United Healthcare	Two-Party	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14						\$ 294.68	\$ 294.30	
709	United Healthcare	Family	\$ 1,354.92	\$ 1,354.92	\$ 1,115.14						\$ 294.68	\$ 294.30	



Tier 2

Fire Fighters Local 1014 Male Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 2,005.41				\$ 432.00			\$ 432.00		
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 2,005.41	\$ 2,005.41	\$ 1,650.52		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 2,005.41	\$ 2,005.41	\$ 1,650.52		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare					\$ 432.00		\$ 432.00	\$ 432.00		\$ 432.00
805	Firefighters' Local 1014	Med-Member +1; 1 MDC		\$ 2,005.41	\$ 1,650.52		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
806	Firefighters' Local 1014	Med-Member +1; 2 MDC					\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
807	Firefighters' Local 1014	Med-Member +2; 1 MDC		\$ 2,005.41	\$ 1,650.52		\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
808	Firefighters' Local 1014	Med-Member +2; 2 MDC					\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00	\$ 432.00
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65				\$ 2,005.41		\$ 432.00	\$ 432.00		\$ 432.00	\$ 432.00
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65		\$ 2,005.41	\$ 1,650.52	\$ 2,005.41		\$ 432.00	\$ 432.00		\$ 432.00	\$ 432.00
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65		\$ 2,005.41	\$ 1,650.52	\$ 2,005.41		\$ 432.00	\$ 432.00		\$ 432.00	\$ 432.00
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC						\$ 432.00	\$ 432.00		\$ 432.00	\$ 432.00
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC		\$ 2,005.41	\$ 1,650.52	\$ 2,005.41		\$ 432.00	\$ 432.00		\$ 432.00	\$ 432.00
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC		\$ 2,005.41	\$ 1,650.52	\$ 2,005.41		\$ 432.00	\$ 432.00		\$ 432.00	\$ 432.00
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC						\$ 432.00	\$ 432.00		\$ 432.00	\$ 432.00

Dental/Vision Male Retirees

Deduction Code	Plan	Tier	Age 65 Adjusted Claim Costs		
			Retiree	Sp/Dep	Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$ 52.92		
502	Cigna Indemnity Dental/Vision	Family	\$ 52.92	\$ 57.03	
503	Cigna Indemnity Dental/Vision	Minor Survivor			\$ 54.65
901	Cigna Dental HMO/Vision	Retiree Only	\$ 46.86		
902	Cigna Dental HMO/Vision	Family	\$ 46.86	\$ 53.35	
903	Cigna Dental HMO/Vision	Minor Survivor			\$ 48.40

Tier 2

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
201	Anthem Blue Cross Prudent Buyer	Retiree Only	\$ 839.22				\$ 839.22			\$ 368.32		
202	Anthem Blue Cross Prudent Buyer	Retiree and Spouse	\$ 839.22	\$ 839.22	\$ 866.68		\$ 839.22	\$ 839.22		\$ 368.32	\$ 368.32	
203	Anthem Blue Cross Prudent Buyer	Retiree and Family	\$ 839.22	\$ 839.22	\$ 866.68		\$ 839.22	\$ 839.22		\$ 368.32	\$ 368.32	
204	Anthem Blue Cross Prudent Buyer	Retiree and Children	\$ 839.22	\$ 839.22	\$ 866.68		\$ 839.22			\$ 368.32		
205	Anthem Blue Cross Prudent Buyer	Minor Survivor				\$ 866.68			\$ 866.68			
211	Anthem Blue Cross I	Retiree Only	\$ 487.82				\$ 487.82			\$ 368.32		
212	Anthem Blue Cross I	Retiree and Spouse	\$ 487.82	\$ 487.82	\$ 503.78		\$ 487.82	\$ 487.82		\$ 368.32	\$ 368.32	
213	Anthem Blue Cross I	Retiree, Spouse and Children	\$ 487.82	\$ 487.82	\$ 503.78		\$ 487.82	\$ 487.82		\$ 368.32	\$ 368.32	
214	Anthem Blue Cross I	Retiree and Children	\$ 487.82	\$ 487.82	\$ 503.78		\$ 487.82			\$ 368.32		
215	Anthem Blue Cross I	Minor Survivor				\$ 503.78			\$ 503.78			\$ 503.78
221	Anthem Blue Cross II	Retiree Only	\$ 1,103.48				\$ 1,103.48			\$ 368.32		
222	Anthem Blue Cross II	Retiree and Spouse	\$ 1,103.48	\$ 1,103.48	\$ 1,139.58		\$ 1,103.48	\$ 1,103.48		\$ 368.32	\$ 368.32	
223	Anthem Blue Cross II	Retiree, Spouse and Children	\$ 1,103.48	\$ 1,103.48	\$ 1,139.58		\$ 1,103.48	\$ 1,103.48		\$ 368.32	\$ 368.32	
224	Anthem Blue Cross II	Retiree and Children	\$ 1,103.48	\$ 1,103.48	\$ 1,139.58		\$ 1,103.48			\$ 368.32		
225	Anthem Blue Cross II	Minor Survivor				\$ 1,139.58			\$ 1,139.58			\$ 1,139.58
240	Anthem Blue Cross III	One Medicare					\$ 368.32			\$ 368.32		
241	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,155.44	\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	
242	Anthem Blue Cross III	Retiree and Spouse 1 Medicare	\$ 1,155.44	\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	
243	Anthem Blue Cross III	Retiree and Spouse 2 Medicare					\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	
244	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32			\$ 368.32	\$ 368.32	
245	Anthem Blue Cross III	Retiree and Children 1 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32			\$ 368.32	\$ 368.32	
246	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,155.44	\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	
247	Anthem Blue Cross III	Retiree and Family 1 Medicare	\$ 1,155.44	\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	
248	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	
249	Anthem Blue Cross III	Retiree and Family 2 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	
250	Anthem Blue Cross III	Retiree and Family 3 Medicare		\$ 1,155.44	\$ 1,193.24		\$ 368.32	\$ 368.32		\$ 368.32	\$ 368.32	
301	Cigna Network Model Plan	Retiree Only	\$ 1,225.75				\$ 1,225.75			\$ 303.67		
302	Cigna Network Model Plan	Retiree and Spouse	\$ 1,225.75	\$ 1,225.75	\$ 1,265.84		\$ 1,225.75	\$ 1,225.75		\$ 303.67	\$ 303.67	
303	Cigna Network Model Plan	Retiree and Family	\$ 1,225.75	\$ 1,225.75	\$ 1,265.84		\$ 1,225.75	\$ 1,225.75		\$ 303.67	\$ 303.67	
304	Cigna Network Model Plan	Retiree and Children	\$ 1,225.75	\$ 1,225.75	\$ 1,265.84		\$ 1,225.75			\$ 303.67		
305	Cigna Network Model Plan	Minor Survivor				\$ 1,265.84			\$ 1,265.84			
321	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree Only					\$ 321.33			\$ 321.33		
322	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse					\$ 321.33	\$ 321.33		\$ 321.33	\$ 321.33	
324	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Spouse (Both Risk)					\$ 321.33	\$ 321.33		\$ 321.33	\$ 321.33	
325	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Children					\$ 321.33	\$ 321.33		\$ 321.33	\$ 321.33	
327	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (1 Medicare)					\$ 321.33	\$ 321.33		\$ 321.33	\$ 321.33	
329	Cigna Medicare Select Plus Rx (AZ)	Risk-Retiree & Family (2 Medicare)					\$ 321.33	\$ 321.33		\$ 321.33	\$ 321.33	
401	Kaiser (CA)	Retiree Basic (Under 65)	\$ 1,171.78							\$ 219.68		
403	Kaiser (CA)	Retiree Risk (Senior Advantage)					\$ 216.65					
404	Kaiser (CA)	Retiree Excess I					\$ 909.49					
405	Kaiser (CA)	Retiree Excess II - Part B					\$ 838.58					
406	Kaiser (CA)	Excess III - Medicare Not Provided (MNP)					\$ 1,483.26					
411	Kaiser (CA)	Family Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11					\$ 218.17	\$ 212.04	



Tier 2

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
413	Kaiser (CA)	One Advantage, One Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11		\$ 216.65	\$ 210.47		\$ 216.65	\$ 212.04	
414	Kaiser (CA)	One Excess I, One Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11		\$ 909.49	\$ 903.27		\$ 909.49	\$ 212.04	
418	Kaiser (CA)	Two+ Advantage					\$ 216.65	\$ 210.47				
419	Kaiser (CA)	One Excess I, One Advantage					\$ 563.07	\$ 556.87				
420	Kaiser (CA)	Two+ Excess I					\$ 909.49	\$ 903.27				
421	Kaiser (CA)	Survivor				\$ 1,210.11			\$ 1,210.11			\$ 1,210.11
422	Kaiser (CA)	One Excess II - Part B, One Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11		\$ 838.58	\$ 832.36		\$ 838.58	\$ 212.04	
423	Kaiser (CA)	One Excess III (MNP), One Basic	\$ 1,171.78	\$ 1,171.78	\$ 1,210.11		\$ 1,483.26	\$ 1,477.01		\$ 1,483.26	\$ 212.04	
426	Kaiser (CA)	One Advantage, One Excess II - Part B					\$ 527.61	\$ 521.41				
427	Kaiser (CA)	One Advantage, One Excess III (MNP)					\$ 849.96	\$ 843.74				
428	Kaiser (CA)	One Excess, One Excess II - Part B					\$ 874.03	\$ 867.81				
429	Kaiser (CA)	One Excess, One Excess III (MNP)					\$ 1,196.38	\$ 1,190.14				
430	Kaiser (CA)	Two Excess II - Part B					\$ 838.58	\$ 832.36				
431	Kaiser (CA)	One Excess II - Part B, One Excess III (MNP)					\$ 1,160.92	\$ 1,154.68				
432	Kaiser (CA)	Two Excess III - Both (MNP)					\$ 1,483.26	\$ 1,477.01				
450	Kaiser - Colorado Basic	Retiree Basic	\$ 1,019.91							\$ 269.66		
451	Kaiser - Colorado	Retiree Risk					\$ 269.66					
453	Kaiser - Colorado	Retiree Basic (Two Party)	\$ 1,019.91	\$ 1,313.60						\$ 269.66	\$ 193.56	
454	Kaiser - Colorado	Retiree Basic Family	\$ 1,019.91	\$ 1,313.60	\$ 3,006.94					\$ 269.66	\$ 193.56	
455	Kaiser - Colorado	One Risk, One Basic	\$ 1,019.91	\$ 958.37			\$ 269.66	\$ 193.56		\$ 269.66	\$ 270.84	
457	Kaiser - Colorado	Two Retiree Risk					\$ 269.66	\$ 270.84				
458	Kaiser - Colorado	One Risk, Two or More Dependents	\$ 1,019.91	\$ 958.37	\$ 3,554.04		\$ 269.66	\$ 270.84		\$ 269.66	\$ 270.84	
459	Kaiser - Colorado	Two Risk, Two or More Dependents			\$ 3,934.56		\$ 269.66	\$ 270.84		\$ 269.66	\$ 270.84	
440	Kaiser - Georgia	One Medicare Member with Part B only					\$ 831.11					
441	Kaiser - Georgia	One Medicare Member with Part A only					\$ 831.11					
442	Kaiser - Georgia	One Member without Medicare Part A&B					\$ 831.11					
445	Kaiser - Georgia	One Medicare Member + One Medicare with Part A only					\$ 831.11	\$ 319.93				
461	Kaiser - Georgia Basic	Basic	\$ 1,226.95							\$ 317.45		
462	Kaiser - Georgia	Retiree Risk					\$ 317.45					
463	Kaiser - Georgia	Retiree (Two Party)	\$ 1,226.95	\$ 1,297.12	\$ 5,325.25		\$ 317.45	\$ 319.93		\$ 317.45	\$ 319.93	
464	Kaiser - Georgia	Retiree Basic Family	\$ 1,226.95	\$ 1,297.12	\$ 5,325.25					\$ 317.45	\$ 319.93	
465	Kaiser - Georgia	One Retiree Risk, One Basic	\$ 468.65	\$ 1,297.12	\$ 5,325.25		\$ 317.45	\$ 319.93		\$ 317.45	\$ 319.93	
466	Kaiser - Georgia	Two Retiree Risk					\$ 317.45	\$ 319.93				
471	Kaiser - Hawaii	Retiree Basic (Under 65)	\$ 1,057.14							\$ 335.86		
472	Kaiser - Hawaii	Retiree Risk					\$ 335.86					
473	Kaiser - Hawaii	Retiree Over 65 without Medicare A&B					\$ 1,324.57					
474	Kaiser - Hawaii Basic	Retiree Basic (Two Party)	\$ 1,057.14	\$ 1,116.29						\$ 335.86	\$ 338.85	
475	Kaiser - Hawaii	Retiree Basic Family (Under 65)	\$ 1,057.14	\$ 1,116.29	\$ 4,582.88					\$ 335.86	\$ 338.85	
476	Kaiser - Hawaii	One Retiree Risk, One Basic	\$ 1,057.14	\$ 1,116.29	\$ 4,582.88		\$ 335.86	\$ 338.85		\$ 335.86	\$ 338.85	
477	Kaiser - Hawaii	Over 65 without Medicare A&B, One Basic	\$ 1,057.14	\$ 1,116.29	\$ 4,582.88		\$ 1,324.57	\$ 1,354.46		\$ 1,324.57	\$ 1,354.46	
478	Kaiser - Hawaii	Two Retiree Risk					\$ 335.86	\$ 338.85				



Tier 2

Non Local 1014 Fire Fighters Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees			
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv	
481	Kaiser - Oregon	Retiree Basic (Under 65)	\$ 1,301.02								\$ 349.18		
482	Kaiser - Oregon	Retiree Risk					\$ 349.18						
483	Kaiser - Oregon	Retiree Over 65 unassigned Medicare A&B					\$ 936.33						
484	Kaiser - Oregon	Retiree Basic (Two Party)	\$ 1,301.02	\$ 1,375.99							\$ 349.18	\$ 352.53	
485	Kaiser - Oregon Basic	Retiree Basic Family (Under 65)	\$ 1,301.02	\$ 2,751.99	\$ 5,649.07						\$ 349.18	\$ 352.53	
486	Kaiser - Oregon	One Retiree Risk, One Basic	\$ 1,301.02	\$ 1,375.99	\$ 5,649.07		\$ 349.18	\$ 352.53			\$ 349.18	\$ 352.53	
488	Kaiser - Oregon	Two Retiree Risk					\$ 349.18	\$ 352.53					
489	Kaiser - Oregon	Retiree w/ Part A only					\$ 783.68						
491	Kaiser - Oregon	One Risk, One Medicare Part A only					\$ 783.68	\$ 352.53					
492	Kaiser - Oregon	One Risk, One Over 65 No Medicare	\$ 1,382.28	\$ 539.51			\$ 936.33	\$ 352.53			\$ 349.18	\$ 352.53	
493	Kaiser - Oregon	One Risk, Two Basic	\$ 1,301.02	\$ 1,375.99			\$ 349.18	\$ 352.53			\$ 349.18	\$ 352.53	
494	Kaiser - Oregon	Two Risk, One Basic	\$ 1,301.02	\$ 1,375.99	\$ 5,649.07		\$ 349.18	\$ 352.53			\$ 349.18	\$ 352.53	
495	Kaiser - Oregon	Two Over 65 unassigned Medicare					\$ 936.33	\$ 955.66					
496	Kaiser - Oregon	Two Medicare Part A only					\$ 783.68	\$ 798.85					
497	Kaiser - Oregon	One Basic, One Medicare Part A only	\$ 1,301.02	\$ 1,375.99			\$ 783.68	\$ 798.85			\$ 783.68	\$ 798.85	
498	Kaiser - Oregon	One Basic, One over 65 unassigned Medicare A&B	\$ 1,301.02	\$ 1,375.99			\$ 936.33	\$ 955.66			\$ 936.33	\$ 955.66	
611	SCAN Health Plan	Retiree Only					\$ 197.14						
613	SCAN Health Plan	Retiree & 1 Dependent (2 Medicare)					\$ 197.14	\$ 197.14					
701	United Healthcare	Retiree Only	\$ 1,319.37				\$ 284.36				\$ 284.36		
702	United Healthcare	Retiree & 1 Dependent (1 Medicare)	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53		\$ 284.36	\$ 284.36			\$ 284.36	\$ 284.36	
703	United Healthcare	Retiree & 1 Dependent (2 Medicare)					\$ 284.36	\$ 284.36			\$ 284.36	\$ 284.36	
704	United Healthcare	Retiree & 2 + Deps. (1 Medicare)	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53		\$ 284.36	\$ 284.36			\$ 284.36	\$ 284.36	
705	United Healthcare	Retiree & 2 + Deps. (2 Medicare)	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53		\$ 284.36	\$ 284.36			\$ 284.36	\$ 284.36	
706	United Healthcare	Minor Survivor				\$ 1,362.53			\$ 1,362.53				
707	United Healthcare	Single	\$ 1,319.37								\$ 286.95		
708	United Healthcare	Two-Party	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53						\$ 286.95	\$ 286.57	
709	United Healthcare	Family	\$ 1,319.37	\$ 1,319.37	\$ 1,362.53						\$ 286.95	\$ 286.57	



Tier 2

Fire Fighters Local 1014 Female Retirees

Deduct Code	Plan	Tier	Pre 65 Claim Costs				Post 65 Claim Costs for Post 65 Retirees			Post 65 Claim Costs for Pre 65 Retirees		
			Retiree	Spouse	Child	Surv	Retiree	Spouse	Surv	Retiree	Spouse	Surv
801	Firefighters' Local 1014	Med-Member under 65	\$ 1,952.79				\$ 420.66			\$ 420.66		
802	Firefighters' Local 1014	Med-Member +1 under 65	\$ 1,952.79	\$ 1,952.79	\$ 2,016.67		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
803	Firefighters' Local 1014	Med-Member +2 under 65	\$ 1,952.79	\$ 1,952.79	\$ 2,016.67		\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
804	Firefighters' Local 1014	Med-Member or Surviving Sp with Medicare					\$ 420.66		\$ 420.66	\$ 420.66		\$ 420.66
805	Firefighters' Local 1014	Med-Member +1; 1 MDC	\$ 1,952.79	\$ 2,016.67			\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
806	Firefighters' Local 1014	Med-Member +1; 2 MDC					\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
807	Firefighters' Local 1014	Med-Member +2; 1 MDC	\$ 1,952.79	\$ 2,016.67			\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
808	Firefighters' Local 1014	Med-Member +2; 2 MDC					\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66	\$ 420.66
809	Firefighters' Local 1014	Med-Surv. Sp. Under 65				\$ 1,952.79		\$ 420.66	\$ 420.66		\$ 420.66	\$ 420.66
810	Firefighters' Local 1014	Med-Surv. Sp. +1 Under 65	\$ 1,952.79	\$ 2,016.67	\$ 1,952.79			\$ 420.66	\$ 420.66		\$ 420.66	\$ 420.66
811	Firefighters' Local 1014	Med-Surv. Sp. +2 Under 65	\$ 1,952.79	\$ 2,016.67	\$ 1,952.79			\$ 420.66	\$ 420.66		\$ 420.66	\$ 420.66
812	Firefighters' Local 1014	Med-Surv. Sp. With MDC						\$ 420.66	\$ 420.66		\$ 420.66	\$ 420.66
813	Firefighters' Local 1014	Med-Surv. Sp. +1; 1 MDC	\$ 1,952.79	\$ 2,016.67	\$ 1,952.79			\$ 420.66	\$ 420.66		\$ 420.66	\$ 420.66
814	Firefighters' Local 1014	Med-Surv. Sp. +2; 1 MDC	\$ 1,952.79	\$ 2,016.67	\$ 1,952.79			\$ 420.66	\$ 420.66		\$ 420.66	\$ 420.66
815	Firefighters' Local 1014	Med-Surv. Sp. +1; 2 MDC						\$ 420.66	\$ 420.66		\$ 420.66	\$ 420.66

Dental/Vision Female Retirees

Deduction Code	Plan	Tier	Age 65 Adjusted Claim Costs		
			Retiree	Sp/Dep	Surv
501	Cigna Indemnity Dental/Vision	Retiree Only	\$ 52.44		
502	Cigna Indemnity Dental/Vision	Family	\$ 52.44	\$ 56.52	
503	Cigna Indemnity Dental/Vision	Minor Survivor			\$ 53.08
901	Cigna Dental HMO/Vision	Retiree Only	\$ 46.44		
902	Cigna Dental HMO/Vision	Family	\$ 46.44	\$ 52.86	
903	Cigna Dental HMO/Vision	Minor Survivor			\$ 47.00



Table A-22
Health Cost Trend Assumptions

The health cost trend assumptions are shown in the following table. These trends have changed from the July 1, 2019 valuation, due to updates in the trend models that we use. The medical trend model is based on the Society of Actuaries' (SOA) published report on long-term medical trend. That report includes detailed research performed by a committee of economists and actuaries that uses the "Getzen Model," named after the professor who developed the model, updated in September of 2020. The following website provides more information: <https://www.soa.org/resources/research-reports/2020/getzen-model-update-2021-2030/>. We believe that the research and the model are fundamentally and technically sound and advance the body of knowledge available to actuaries to accurately project long-term medical trends. Milliman uses this model as the foundation for the trend that it recommends to our clients for OPEB valuations.

The first-year trend rates for LACERA non-Local 1014 firefighters' medical and dental/vision plans have not yet been adjusted to reflect the final July 1, 2021 annual medical and dental plan rate renewals. Upon receipt of the final July 1, 2021 annual medical and dental plan rate renewals in March 2021, the first-year trend will be updated in the July 1, 2020 OPEB funding valuation. The remaining short-term trends are based on Milliman's *Health Cost Guidelines*TM.

The trend assumption for Medicare Part B premiums was updated based on long-term projected Part B costs from the 2020 Medicare Trustees Report from CMS dated April 22, 2020. The dental trend assumption was updated based on the same methodology we used in our 2020 OPEB Investigation of Experience Study.

The following table presents the trend assumptions with the impact of the ACA and H.R. 1865 including the Patient Centered Outcomes Research Institute (PCORI) Fee and the Health Insurer Fee in calendar year 2020. H.R. 1865 repealed the Excise Tax and the Health Insurer Fee beginning with calendar year 2021. The weighted average trend will be based on the expected payouts from each of the coverages (medical under 65, medical over 65, Part B, and Dental) for the July 1, 2020 valuation.

After fiscal year ending June 30, 2031, selected years are shown in the table. The trend rates for the years not shown generally grade ratably into the next value shown in the table. The medical trend for both under and over 65 remains at 4.30% beginning with the medical trend from fiscal year ending June 30, 2073 to fiscal year ending June 30, 2074.

Given the substantial uncertainty regarding the impact of COVID-19 on plan costs, including whether the pandemic will increase or decrease costs during the term of our projections, we have chosen not to make an adjustment in the expected plan costs. It is possible that the COVID-19 pandemic could have a material impact on the projected costs.

	Fiscal Year Ending		LACERA Medical		Part B Premiums	Dental Under and Over 65	Weighted Average Trend
	From	To	Under 65	Over 65			
2020	6/30/2021	6/30/2022	5.50%	5.00%	9.30%	0.40%	TBD
2021	6/30/2022	6/30/2023	5.70%	5.40%	5.90%	2.90%	TBD
2022	6/30/2023	6/30/2024	5.30%	5.20%	5.80%	2.90%	TBD
2023	6/30/2024	6/30/2025	5.00%	5.00%	6.00%	2.90%	TBD
2024	6/30/2025	6/30/2026	5.00%	5.00%	5.90%	2.90%	TBD
2025	6/30/2026	6/30/2027	5.00%	5.00%	5.80%	2.90%	TBD
2026	6/30/2027	6/30/2028	5.00%	5.00%	5.80%	2.90%	TBD
2027	6/30/2028	6/30/2029	5.00%	5.00%	5.70%	2.90%	TBD
2028	6/30/2029	6/30/2030	5.00%	5.00%	5.90%	2.90%	TBD
2029	6/30/2030	6/30/2031	5.00%	5.00%	5.80%	2.80%	TBD
2039	6/30/2040	6/30/2041	5.10%	5.10%	5.00%	2.70%	TBD
2049	6/30/2050	6/30/2051	5.20%	5.20%	4.50%	2.60%	TBD
2059	6/30/2060	6/30/2061	5.00%	5.00%	4.30%	2.50%	TBD
2069	6/30/2070	6/30/2071	4.50%	4.50%	4.30%	2.70%	TBD
2079	6/30/2080	6/30/2081	4.30%	4.30%	4.30%	3.00%	TBD
2089	6/30/2090	6/30/2091	4.30%	4.30%	4.30%	3.30%	TBD
2099	6/30/2100	6/30/2101	4.30%	4.30%	4.30%	3.50%	TBD
2103	6/30/2104	6/30/2105	4.30%	4.30%	4.30%	3.60%	TBD

Table A-23
Retirement of Vested Terminated Members

Annual Rates			
Age	General Plans A, B, C, D & G	General Plan E	Safety Plans A, B & C
<40	0.00%	0.00%	0.00%
40	0.00%	0.00%	10.00%
41	0.00%	0.00%	10.00%
42	0.00%	0.00%	10.00%
43	0.00%	0.00%	10.00%
44	0.00%	0.00%	10.00%
45	0.00%	0.00%	10.00%
46	0.00%	0.00%	10.00%
47	0.00%	0.00%	10.00%
48	0.00%	0.00%	10.00%
49	0.00%	0.00%	10.00%
50	18.00%	0.00%	29.00%
51	5.00%	0.00%	13.00%
52	6.00%	0.00%	13.00%
53	6.00%	0.00%	13.00%
54	5.00%	0.00%	13.00%
55	10.00%	25.00%	20.00%
56	7.00%	6.00%	20.00%
57	8.00%	4.00%	20.00%
58	7.00%	5.00%	20.00%
59	10.00%	5.00%	20.00%
60	11.00%	6.00%	33.00%
61	12.00%	7.00%	33.00%
62	15.00%	8.00%	33.00%
63	19.00%	7.00%	33.00%
64	20.00%	23.00%	33.00%
65	32.00%	37.00%	100.00%
66	26.00%	12.00%	100.00%
67	22.00%	8.00%	100.00%
68	22.00%	9.00%	100.00%
69	29.00%	10.00%	100.00%
70	35.00%	12.00%	100.00%
71	35.00%	18.00%	100.00%
72	35.00%	18.00%	100.00%
73	35.00%	18.00%	100.00%
74	35.00%	18.00%	100.00%
75	100.00%	100.00%	100.00%
75 or older	100.00%	100.00%	100.00%

These factors were used for current vested terminated members. For retirement of future vested terminated members (i.e., members that are currently active and may become vested terminated in the future), these factors were simplified into five-year factors for ease of application in the valuation system. Spouses of future vested terminated members were assumed to commence benefits at age 60.



Cavanaugh Macdonald
CONSULTING, LLC

The experience and dedication you deserve

**ACTUARIAL REVIEW REPORT FOR THE
LOS ANGELES COUNTY
OTHER POSTEMPLOYMENT BENEFITS PROGRAM
JULY 1, 2020 VALUATION**

Prepared: July 20, 2021





Cavanaugh Macdonald

CONSULTING, LLC

The experience and dedication you deserve

July 20, 2021

Mr. Richard Bendall
Chief, Internal Audit
Los Angeles County Employees Retirement Association
300 North Lake Avenue, Suite 820
Pasadena, CA 91101

Dear Mr. Bendall:

Cavanaugh Macdonald Consulting, LLC (CMC) has performed an independent review of the July 1, 2020 Other Postemployment Benefits (OPEB) Program actuarial valuation prepared for LACERA and other stakeholders. As an independent reviewing, or auditing actuary, we have been asked to express an opinion regarding the reasonableness and accuracy of the valuation results, including a review of sample lives as well as a replication of the main valuation results.

Our opinion on the valuation results was based on a replication of the July 1, 2020 OPEB actuarial valuations and a review of detailed sample lives. Previously, we reviewed the 2020 OPEB Experience Study to confirm the reasonableness of the assumptions and methods selected for the valuation. We would like to thank Milliman, the Association's retained actuary, for their cooperation and assistance in providing the required information to us. **We generally find the OPEB actuarial valuation results to be reasonable and accurate based on the assumptions and methods used. The valuation was performed by qualified actuaries and was performed in accordance with the principles and practices prescribed by the Actuarial Standards Board.** This report documents the detailed results of our review.

Additional Information and Disclosures

This report has been prepared for LACERA and its stakeholders by CMC and is intended to assist LACERA as it validates the reasonability of the liabilities, costs, and other calculations for the OPEB Program as of June 30, 2020. Additionally, the findings, conclusions, and recommendations presented in this report are specific to LACERA, LACERA's OPEB Program, and the work produced by Milliman. CMC may produce different findings or arrive at different conclusions in other situations, even in cases involving similar OPEB plans. As such, it is important to keep in mind that the use of this information for purposes other than those expressed here may not be appropriate.



Mr. Richard Bendall

July 20, 2021

Page 2

In preparing this review, we have relied on the following information provided by LACERA and/or Milliman:

- Milliman’s draft report titled, “2020 Investigation of Experience for Los Angeles County Other Postemployment Benefits Assumptions” (2020 Investigation of OPEB Program Experience Report);
- Raw Retirement Plan actuarial valuation census data as of June 30, 2020;
- OPEB Program actuarial valuation census data as of June 30, 2020;
- Milliman’s processed OPEB Program actuarial valuation census data as of June 30, 2020;
- Detailed sample lives prepared by Milliman; and
- Complete tables of actuarial assumptions used by Milliman.

While we cannot verify the accuracy of all this information, the supplied information was reviewed for reasonableness and consistency and we have no reason to doubt the substantial accuracy or completeness of the information and believe that it is reliable for the purpose of conducting this review. The results and conclusions contained in this report depend on the integrity of this information, and if any of the supplied information or analyses change, our results and conclusions may be different, and this report may need to be revised.

CMC does not provide legal, investment, or accounting advice. Thus, the information in this report is not intended to supersede or supplant the advice and interpretations of LACERA or its external consultants.



Mr. Richard Bendall

July 20, 2021

Page 3

We would like to acknowledge the assistance for this review given by LACERA staff and the Milliman consultants.

I, Brent A. Banister, FSA, am a member of the American Academy of Actuaries and Fellow of the Society of Actuaries, and meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained herein.

I, Alisa Bennett, FSA, am a member of the American Academy of Actuaries and Fellow of the Society of Actuaries, and meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained herein.

Sincerely,

A handwritten signature in blue ink that reads "Brent A. Banister". The signature is fluid and cursive, with a long horizontal stroke at the end.

Brent A. Banister, Ph.D., FSA, EA, MAAA, FCA
Chief Actuary

A handwritten signature in blue ink that reads "Alisa Bennet". The signature is cursive and somewhat compact.

Alisa Bennet, FSA, EA, MAAA, FCA
President



TABLE OF CONTENTS

	<u>Page</u>
1. Executive Summary	1
2. Data Review	3
3. Actuarial Valuation Results Review	6
4. Valuation Report Review	9
5. Sample Life Review	10



1. EXECUTIVE SUMMARY

As an independent auditing actuary, Cavanaugh Macdonald Consulting, LLC (CMC) has been tasked to provide a general overview and express an opinion of the reasonableness and soundness of the work performed by Milliman, Inc. for the Los Angeles County Retirement Association (LACERA). The work to be reviewed was the July 1, 2020 actuarial valuation for the Other Postemployment Benefits (OPEB) program. The specific items to be included in the actuarial audit include a replication of the major valuation results and a detailed review of selected sample lives.

We examined whether the actuarial methods, considerations, and analyses used by Milliman in preparing the OPEB actuarial valuation are reasonable and consistent with generally accepted actuarial standards and practices as promulgated by the Actuarial Standards Board. This examination included:

- a) An in-depth review and analysis of the valuation results, including an evaluation of the data used for reasonableness and consistency as well as a review of mathematical calculations for completeness and accuracy.
- b) Verification that benefits have been valued accurately.
- c) Verification that the data provided by LACERA is consistent with data used by Milliman.
- d) Verification of the reasonableness of the calculation of the unfunded actuarial accrued liability and the amortization period.

We requested the original member census data from LACERA. We also requested member data, as reconciled for the 2020 OPEB valuation, from Milliman along with complete descriptions of assumptions, methods and valuation procedures. Most of the active member data was based on the pension valuation, which was accepted based on our prior audit of that process. We also requested a range of sample life information from Milliman.

It is our belief that an audit should not focus on finding trivial differences between actuarial processes, procedures, philosophies, or styles utilized by two different actuaries, but rather to verify there are no material errors, and to identify potential improvements to the process and procedures utilized by the Association's actuary. Because actuarial work draws on professional judgment, there is a subjective component that must be considered alongside the objective component of matching numerical results. In performing this audit, we attempt to limit discussions concerning stylistic preferences and focus more on the significant philosophical approaches, the accuracy of calculations, the completeness and reliability of reporting, and the compliance with generally acceptable actuarial practices and standards of practice in all the work reviewed.



1. EXECUTIVE SUMMARY

As described in our report, we have determined that the actuarial methods, assumptions, processes, and reports are consistent with the applicable Actuarial Standards of Practice (ASOP). Throughout the report, we have noted a few issues where we believe there are opportunities for improvement.

In Section 2 of our report, we compare data used by Milliman with the original data produced by LACERA. **We find that the data is consistent and appropriate, although we did note an insignificant issue regarding the handling of missing spouse dates of birth.**

In Section 3 of our report, the results of our independent calculations of the LACERA liabilities are compared with the results prepared by Milliman. We were able to match all liabilities within a reasonable range. **We find the calculation results to be reasonable and appropriate for their intended purposes, and offer some suggestions for possible refinement.**

In Section 4, we provide our comments on the OPEB valuation report produced by Milliman. **We found the reports to be generally in compliance with the ASOPs.**

In Section 5, we discuss our review of the sample lives provided by Milliman. **Our review further confirmed the accuracy of the OPEB valuation results discussed in section 3.**

Because of the complexity of actuarial work, we would not expect to match Milliman's valuation results exactly, nor would we necessarily expect our opinions regarding the results to be the same as those of Milliman. While we offer some different viewpoints or ideas, we believe that Milliman's work provides an appropriate assessment of the status of the OPEB Program for purposes of determining an appropriate funding strategy.

The remainder of this report provides the basis for our findings for each of the requested tasks, including our recommendations.



2. DATA REVIEW

Milliman and LACERA supplied CMC with the member data used for the July 1, 2020 OPEB valuation. This included both the raw data prepared by LACERA and the processed data used by Milliman in its valuation software. We compared the records and generally agreed with the processing being performed by Milliman. The following pages contain some summarization of our comparisons.

There is minimal data scrubbing performed by Milliman, so we were generally able to confirm that the records used by Milliman contained the data provided by LACERA. We further tested that the manner in which records were selected for inclusion or exclusion in the valuation or assignment of valuation status was appropriate. We note that Milliman details in their report in Appendix C that there are cases where certain adjustments were required. We believe such adjustments are reasonable.

We tested the counts by status and the totals of selected key fields to be sure they were reasonably close. The following tables contain some additional detail summarizing our review. We believe that the data provided by LACERA is sufficient for Milliman to reasonably perform its work. We did not audit the data, but simply determined whether Milliman was using the data appropriately.

In our review of the work performed by Milliman, we did identify one issue that should have an insignificant impact on results. It is necessary to make an assumption about the age difference of spouses when birth dates for current retiree spouses is missing and also for current active members who will retire in the future. During the 2020 Investigation of Experience, Milliman changed the assumption used for female LACERA members from being two years younger than their male spouses to one year younger. However, in the processing of the retiree data, the old two-year assumption was used when spouse data was missing. We agree with Milliman that this error will have no meaningful effect on any of the results.

In our review of the data files, we observed that the data provided by LACERA for dental benefits included some spouse dates of birth that were missing on the data provided for medical benefits. We encourage Milliman and LACERA to review how these files are generated to determine which data set is more appropriate. We would not expect this to have any meaningful impact on the results.

Overall, we are comfortable that the data Milliman uses to perform its valuation is consistent with the data supplied by LACERA and appropriate to obtain the desired measurements.



2. DATA REVIEW

Data Items Checked

<u>Active & Deferred Vested Raw Data Field</u>	<u>Result</u>
- Count	Matched 100%
- Date of Birth	Matched 100%
- Average Age	Matched 100%
- Date of Hire	Matched 100%
- Average Service	Matched 100%
- Gender	Matched 100%
- Group ID	Matched 100%

<u>Medical Raw Data Field</u>	
- Count	Matched within 0.08%
- Date of Birth	Matched within 0.07%
- Average Age	Matched 100%
- Gender	Matched within 0.07%

<u>Dental Raw Data Field</u>	
- Count	Matched 100%
- Date of Birth	Matched 100%
- Average Age	Matched 100%
- Gender	Matched 100%



2. DATA REVIEW

Not In-Pay Reconciliation

	Raw Data	Milliman Exhibit	Percent Difference
Records Received Active	100,051	100,051	0.0%
Records Received Deferred Vested Status	<u>8,631</u>	<u>8,631</u>	0.0%
Net Records	108,682	108,682	0.0%

In-Pay Reconciliation

	Medical Raw Data	Milliman Medical Exhibit	Percent Difference	Dental Raw Data	Milliman Dental Exhibit	Percent Difference
Records Received (Retirees / Spouses / Dependents)	83,198			82,305		
Adjustment for Duplicate Records	(4,388)			0		
Subsequent Data Adjustments	<u>2,114</u>			<u>0</u>		
Net Records	80,924	81,164	-0.3%	82,305	82,305	0.0%
- Retirees / Survivors	52,589	52,589	0.0%	53,918	53,918	0.0%
- Spouses and Dependents	28,335	28,575	-0.8%	28,387	28,387	0.0%



3. ACTUARIAL VALUATION RESULTS REVIEW

This section of our review discusses the reasonableness and accuracy of the liabilities and costs developed in Milliman's July 1, 2020 OPEB actuarial valuations. We independently programmed the benefits provided under LACERA's OPEB Program using standard actuarial approaches.

The OPEB Program offered by LACERA is quite complex compared with most OPEB Programs, largely because of the number of groups in the program and the extensive array of coverage options available to its members. Consequently, different actuaries could reasonably take different approaches to appropriately modelling the liabilities of the Program. In order to be able to meaningfully compare our results to Milliman's results and to perform a useful sample life audit, we elected to mimic certain aspects of the model used by Milliman. We made an effort to minimize this duplication in order to have our results be as independent as possible. While Milliman was responsive to questions that we asked, they were also careful not to provide any information that would have provided inappropriate insight into their processes. As a result, we believe that the results we obtained are a meaningful test of the work performed by Milliman.

As the following summaries show, we matched well overall and reasonably well on the various component pieces. We do not expect to be able to match exactly because we know we are using independent approaches to modelling the liabilities. Results are shown for the Present Value of Benefits (PVB), the Actuarial Accrued Liability (AAL), and the Normal Cost. The PVB is a measure of all benefits expected to be ultimately paid for all current members of the Plan. The AAL reflects the portion of the PVB attributable to service already performed, and is the measure typically used for funding and accounting purposes. The Normal Cost is the portion of the PVB that will be earned in the upcoming year. Of the three measures, we generally expect to match the PVB the closest, typically within 1-3%, while the AAL is often not quite as close, and the Normal Cost may be only within 3-6%.

Employer Provided Present Value of Benefits (dollars in millions)

	Milliman	CMC	Percent Difference
Active Members	\$18,857.3	\$19,016.9	0.8%
Vested Terminated Members	500.3	490.7	-1.9%
Retirees and Survivors	<u>10,096.0</u>	<u>9,757.7</u>	-3.4%
Total	\$29,453.6	\$29,265.3	-0.6%



3. ACTUARIAL VALUATION RESULTS REVIEW

Employer Provided Actuarial Accrued Liability (dollars in millions)

	Milliman	CMC	Percent Difference
Active Members			
Medical	\$8,449.0	\$8,540.9	1.1%
Dental/Vision	475.8	469.8	-1.3%
Medicare Part B	1,743.8	1,739.2	-0.3%
Death Benefit	37.8	37.5	-0.8%
	<u>\$10,706.4</u>	<u>\$10,787.4</u>	0.8%
Vested Terminated Members			
Medical	\$370.3	\$358.3	-3.2%
Dental/Vision	21.3	22.3	4.7%
Medicare Part B	102.9	104.3	1.4%
Death Benefit	5.8	5.8	0.0%
	<u>\$500.3</u>	<u>\$490.7</u>	-1.9%
Retirees and Survivors			
Medical	\$7,894.7	\$7,531.5	-4.6%
Dental/Vision	567.4	584.5	3.0%
Medicare Part B	1,504.5	1,512.6	0.5%
Death Benefit	129.4	129.1	-0.2%
	<u>\$10,096.0</u>	<u>\$9,757.7</u>	-3.4%
Total	\$21,302.7	\$21,035.8	-1.3%

Employer Provided Normal Cost (dollars in millions)

	Milliman	CMC	Percent Difference
Medical	\$503.9	\$508.7	1.0%
Dental/Vision	24.8	25.0	0.8%
Medicare Part B	105.6	106.8	1.1%
Death Benefit	2.3	2.3	0.0%
	<u>\$636.6</u>	<u>\$642.8</u>	1.0%

Note: We also compared results by agent employers and found similar results.



3. ACTUARIAL VALUATION RESULTS REVIEW

The valuation report contains various exhibits determining such things as funding status and contribution rate determination. These exhibits hinge upon the accuracy of the liability calculations. To the extent that our estimates of the liabilities vary, we would expect corresponding changes in these other exhibits. We reviewed these tables based upon Milliman's liability results and found no issues.

Through the process of replicating the liability results produced by Milliman, we identified some issues where we believe that Milliman could possibly refine their approach in the future. We believe their current approach is consistent with their described assumptions and methods, but that some refinements in those assumptions and methods might improve the accuracy of the valuation estimates with only minimal extra effort.

First, we observed an issue with a group of retirees who were between 64 ½ and 65 on the valuation date. These retirees currently are enrolled in a non-Medicare plan since they are not yet eligible for Medicare. In the valuation software, they are also considered age 65 due to rounding, which is appropriate. Milliman values these individuals with their current medical plan election and assumes that since they have that plan at (rounded age) 65, they will keep the same non-Medicare plan for the future. While some retirees certainly do this, we believe that it would also be reasonable to treat this group like the younger (under age 64 ½) retirees who are assumed to elect from a range of Medicare and non-Medicare plans upon reaching Medicare eligibility at 65. Note that because Milliman assumes that this group will continue with a non-Medicare plan, they are consistent and do not value any liability for the Part B premium reimbursement. Our preferred approach would be to value the lower Medicare premium costs and include the Part B premium reimbursement. The net effect of our approach should result in a small reduction in overall liabilities.

Second, there is a very technical issue with the treatment of current active members and current inactive deferred vested members regarding the assumed premium at age 65 and beyond. For current active members, the post-65 premium depends upon whether the member is *assumed* to retire before or after age 65. For the deferred vested members, the post-65 premium depends upon whether or not the member is *eligible* to retire before or after age 65. This nuance has not been clearly expressed in the assumptions section and Milliman intends to clarify that issue. We see no particular reason other than perhaps ease of coding effort for this distinction to exist. For the newer tier whose members are required to enroll in Medicare, the difference is trivial and the distinct assumptions could probably be eliminated.



4. VALUATION REPORT REVIEW

CONTENT OF THE ACTUARIAL REPORTS

The Actuarial Standard Board has issued a number of Actuarial Standards of Practice (ASOP) which provide guidance on measuring retiree group benefit obligations and communicating the results (ASOP Nos. 4, 5, 6, 12, 21, 23, 25, 27, 35, 41, 44, and 56). Those standards list specific elements to be included, either directly or by reference to other documents, in OPEB actuarial communications. Some of the elements would not be pertinent in all communications, but since an actuarial valuation report is the most complete picture of the actuarial status of the plan, all of the elements listed should be covered in the report, even if only briefly.

The July 1, 2020 OPEB actuarial valuation (in its initial draft) report generally provides sufficient information for another actuary to understand the process and to assess the reasonableness of the results.

In our review of the July 1, 2018 OPEB actuarial valuation, we noted several minor issues where we thought enhancement or clarification would be helpful. Milliman had made those changes and we have no further suggestions at this time. We do note that ASOP 56 is new since the 2018 report and Milliman has included appropriate commentary on their use of models.

We compared the contents of the draft report to over 30 specific items detailed for pension actuarial work in the ASOPs listed above. *In our review of the report, we found it to be substantially in compliance with the applicable ASOPs.*



5. SAMPLE LIFE REVIEW

In addition to the replication of results discussed in section 3, we were also asked by LACERA to perform a review of sample lives. These samples included 14 retirees and surviving spouses, 10 of whom have a current spouse entitled to benefits, 14 deferred members, and 17 active members. We were provided with details of calculations for medical benefits and premiums, dental benefits and premium, the Part B reimbursement provision, and life insurance benefits. (Deferred members only had medical benefits and premiums provided.) Additionally decrement tables were provided for active and deferred members, and additional detail to support the Entry Age Normal cost allocation was provided for active members. This sample appropriately covered a range of ages, pension plan participation, medical or dental plan election, and general demographic variation.

We reviewed all benefits for each individual included in the sample. In many cases, we matched liabilities to the nearest penny, particularly for life insurance, but also some medical, dental, and Part B benefits. This level of matching is much closer than we would generally expect since we were independently programming how benefits are valued but is partly a reflection of certain benefits being straightforward to value and using the same underlying valuation software. In many other cases we did not match exactly, but we were reasonably close and an inspection of the intermediate calculations did not indicate any systemic issues.

In certain cases, we noted that our calculation of the premiums paid by a retired member and spouse were approximately the same in total, but our method of allocating the cost resulted in a different split between the member and the spouse. That fact that nearly the same result could be obtained with different approaches should be viewed as a positive, reflecting an alternative model yielding similar results.

One item we did detect last time in our review and still remains, but is of negligible consequence, relates to certain deferred inactive members with very low service, who are not vested. Under the retirement plan provisions for plans A, B, C, D, and G, these individuals are eligible to retire at age 70 regardless of the amount of service. Milliman had these individuals commencing benefits at age 75 which is the listed assumption. Because these individuals receive no subsidy for the medical or dental plans, there is no impact on the liabilities for those benefits. There would be some very tiny increases in the Part B and life insurance liabilities.



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**ACTUARIAL REVIEW REPORT FOR THE
LOS ANGELES COUNTY
OTHER POSTEMPLOYMENT BENEFITS PROGRAM
2020 INVESTIGATION OF EXPERIENCE FOR OTHER
POST EMPLOYMENT BENEFITS ASSUMPTIONS**

Prepared: February 18, 2021





Cavanaugh Macdonald

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February 18, 2021

Mr. Richard Bendall
Chief, Internal Audit
Los Angeles County Employees Retirement Association
300 North Lake Avenue, Suite 820
Pasadena, CA 91101

Re: Actuarial Review of the 2020 Investigation of OPEB Program Experience for the Los Angeles County Other Postemployment Benefits Program

Dear Mr. Bendall:

Cavanaugh Macdonald Consulting, LLC (CMC) has performed an independent review of the 2020 Investigation of Experience for Other Postemployment Benefits (OPEB) Assumptions prepared by Milliman, Inc. for LACERA. As an independent reviewing, or auditing, actuary, we have been asked to express an opinion regarding the reasonableness and accuracy of this work product.

LACERA conducts experience studies every three years to study the relevant economic and demographic assumptions that will be used to determine employer and member contribution rates for LACERA's Retirement Plan. In accordance with LACERA's OPEB Program Policy, an Experience Study for the OPEB Program immediately follows each Retirement Plan Experience Study. These Experience Studies may be reviewed by an independent actuarial services firm on a schedule determined by the Board. As requested, this report presents the results of the Actuarial Review of the 2020 Investigation of OPEB Program Experience Report. Our findings are outlined in the Board Summary, and various observations are included throughout in the sections applicable to each review task. Detailed findings and conclusions from the Actuarial Review are provided in Section 6 of the report.

We would like to thank LACERA's staff for their responsiveness in providing the items and information that we requested during the course of our review. Additionally, we would also like to thank Milliman for their cooperation and assistance in providing the requested information and answering our questions along the way. **We generally find the Investigation of Experience results to be reasonable and accurate. The study was performed by qualified actuaries and conducted in accordance with the principles and practices prescribed by the Actuarial Standards Board.** This report documents the detailed results of our review.



Mr. Richard Bendall
February 18, 2021
Page 2

Additional Information and Disclosures

This report has been prepared for LACERA and its stakeholders by CMC and is intended to assist LACERA as it validates the reasonability of the liabilities, costs, and other calculations for the OPEB Program as of June 30, 2020 and following years. Additionally, the findings, conclusions, and recommendations presented in this report are specific to LACERA, LACERA's OPEB Program, and the work produced by Milliman. CMC may produce different findings or arrive at different conclusions in other situations or even in cases involving similar other postemployment benefit plans. As such, it is important to keep in mind that the use of this information for purposes other than those expressed here may not be appropriate.

In preparing this review, we have relied on the following information provided by LACERA and/or Milliman:

- A report produced by Milliman on June 25, 2019 titled, "Los Angeles County Other Postemployment Benefits Program 2018 Investigation of Experience for Other Postemployment Benefits Assumptions" (2018 Investigation of OPEB Program Experience Report);
- A draft report dated February 10, 2021 prepared by Milliman titled, "Los Angeles County Other Postemployment Benefits Program 2020 Investigation of Experience for Other Postemployment Benefits Assumptions" (2020 Investigation of OPEB Program Experience Report);
- Retirement Plan actuarial valuation census data and OPEB Program Experience Study data as of June 30, 2018, June 30, 2019, and June 30, 2020; and,
- OPEB Program actuarial valuation census data as of June 30, 2017, June 30, 2018 and June 30, 2019, and preliminary actuarial valuation census data as of June 30, 2020.

While we cannot verify the accuracy of all this information, the supplied information was reviewed for reasonableness and consistency. We have no reason to doubt the substantial accuracy or completeness of the information and believe that it is reliable for the purpose of conducting this review. The results and conclusions contained in this report depend on the integrity of this information, and if any of the supplied information or analyses change, our results and conclusions may be different, and this report may need to be revised.

The undersigned are familiar with the near-term and/or long-term aspects of other postemployment benefit plan valuations and collectively meet the Qualification Standards of the American Academy of Actuaries necessary to render the actuarial opinions contained in this report. All sections of this report, including any appendices and attachments, are considered an integral part of the actuarial opinions.



Mr. Richard Bendall
February 18, 2021
Page 3

CMC does not provide legal, investment, or accounting advice. Thus, the information in this report is not intended to supersede or supplant the advice and interpretations of LACERA or its external consultants.

Please let us know if you have any questions or need any additional information.

Respectfully submitted,

A handwritten signature in blue ink that reads 'Brent A. Banister'.

Brent A. Banister, Ph.D., FSA, EA, MAAA, FCA
Chief Actuary

A handwritten signature in blue ink that reads 'Alisa Bennet'.

Alisa Bennet, FSA, MAAA, FCA, EA
President



TABLE OF CONTENTS

Section 1 – Executive Summary1

Section 2 – Review of Initial Election Assumptions3

Section 3 – Review of Tier Selection and Migration Assumptions10

Section 4 – Review of Other Demographic Assumptions32

Section 5 – Review of Economic Assumptions37

Section 6 – Investigation of Experience Report Review and Conclusions40



1. EXECUTIVE SUMMARY

LACERA engaged Cavanaugh Macdonald Consulting, LLC (CMC) to prepare an independent review of the OPEB Experience Study for Los Angeles County’s OPEB Program prepared by Milliman for the period ending on June 30, 2020. While the prior study was performed two years ago, this study used three years of data, including the 2017-18 experience that was also used in the prior study. The scope of the actuarial review requested by LACERA includes an independent verification of the results and evaluation of any recommendations in the 2020 Investigation of OPEB Program Experience Report, the preparation of a report containing CMC’s findings and conclusions from the actuarial review, and a presentation of any findings to the Board of Retirement.

The process of setting actuarial assumptions brings together a blend of both numerical analysis and professional judgment. An experience study is not simply a mathematical exercise, but also draws on the experience and insight of the professionals conducting the study. While our review included confirming certain data tabulations supporting the results in Milliman’s report, we wish to stress that we have also examined the bigger picture to determine if an assumption, or recommended change, is appropriate. We consider whether there are other ways to form an assumption, whether an assumption may be simplified, and whether or not the assumption reflects trends that we have observed in other plans. The fact that we might prefer an alternate approach does not automatically mean that Milliman’s approach is not reasonable. Rather, we offer some of these thoughts as a consideration for future studies, fully aware that there are multiple ways in which to appropriately model a dynamic post-retirement benefit program like Los Angeles County’s OPEB Program.

In general, we find Milliman’s work to be accurate and complete, and we have not identified any material findings.

We summarize our findings for each major review task as follows:

1. Review of Data Used in the 2020 OPEB Investigation of Experience

The actuarial review of the 2020 Investigation of Experience for OPEB Assumptions Report is based on the experience study data that Milliman provided. We requested and received from Milliman the full valuation data files for the 2018, 2019, and 2020 OPEB and pension valuations. These files allowed us to replicate certain portions of Milliman’s work with regards to the analysis of demographic assumptions. In our opinion, the data used is sufficient for the purposes of the experience study, appears consistent with previous experience investigations and, therefore, appropriately reflects the active and inactive membership of LACERA during the two-year period ending on June 30, 2020.

2. Review the Proposed Economic and Demographic Assumptions Contained in the 2020 OPEB Investigation of Experience Report

We find the work prepared by Milliman—reviewed within the scope of this assignment—to be based on reasonable processes, to be technically sound, and to be fairly presented. Milliman’s work related to LACERA’s experience, selecting assumptions, and presenting the



1. EXECUTIVE SUMMARY

associated results is based on generally accepted actuarial practices and principles. Relevant details for each assumption reviewed are provided in Section 2 through 5.

3. Present Any Recommendations to the Board of Retirement Regarding the Work Completed by Milliman

We believe that the actuarial assumptions recommended by Milliman are reasonable and appropriate for use in the upcoming OPEB actuarial valuation for LACERA. We have no findings of material discrepancies with generally accepted actuarial principles or professional standards. In Section 6, we provide some minor considerations and recommendations for future studies.

Milliman proposes several changes in assumptions in its experience study. Generally, these are fine-tuning of the current assumptions to better reflect recent behavior of the plan members. These changes involve initial election rates, plan election rates, retirement rates for deferred vested members, and some other minor items such as spouse age difference. We find these assumptions to be reasonable. We also find the economic assumptions, including the health cost trend rates proposed by Milliman to be appropriate.

Conclusions

Because of the complexity of actuarial work, we would not expect our opinions regarding the selection of assumptions and methods to be the same as the opinions of Milliman. We do expect, however, that there would be sufficient explanation of their choices that we can acknowledge that they are reasonable based upon the relevant factors. In our opinion, the assumptions and methods proposed by Milliman are reflective of sound professional judgement and are appropriate for the systematic funding of the OPEB obligations of LACERA.

We have determined that the actuarial methods, assumptions, processes, and the report are consistent with the applicable Actuarial Standards of Practice. Throughout this report, we have noted a few minor items for consideration that we believe may present opportunities for improvement, but none that we believe would have a material impact on the proposed assumptions and the resulting OPEB liabilities.

The remainder of this report provides the basis for our findings and recommendations for each assumption that appears in the 2020 Investigation of Experience for Other Post-Employment Benefits Assumptions Report and our conclusions.

We would like to thank LACERA's staff for their responsiveness in providing the items and information that we requested during our review. Additionally, we would also like to thank Milliman for their cooperation and assistance in providing the requested information and answering our questions.



2. REVIEW OF INITIAL ELECTION ASSUMPTIONS

The provisions and plan design of the OPEB Program determine how plan costs are shared with members, and because cost sharing varies based on service credit at retirement, we would expect initial medical election percentages to vary with service at retirement as well. Milliman has used a service-based assumption for both medical and dental/vision initial election and is proposing some minor refinements. For members who retire on account of disability, by contrast, the assumption is uniform regardless of service. While we believe there may be a slight service-related correlation, the comparatively limited amount of data or anticipated liability does not suggest any need for such a refinement. Milliman recommends the same rates for both males and females but does conduct the analysis separately as well as in total to test their assertion.

CMC independently developed exposures and initial medical election experience for members during the three-year period from July 1, 2017 to June 30, 2020. We note that our independent development is truly independent in that we did not follow the same methodology as was used by Milliman. As the retained actuary, Milliman has built the historical data they need for valuations that allows them to be slightly more refined than we can be in analyzing the experience results. By analyzing in a slightly different manner, we do not expect to match their results exactly. However, to the extent our independent approach provides similar results, there is actually a higher degree of confidence in the reasonableness of their conclusions than if we were simply replicating their methodology. We believe that we match to a sufficient level to be confident that Milliman is using an appropriate approach.

It should be noted that we have also confirmed the reasonableness of the experience of disabled members, even though these results are not shown in the following tables. Because disability experience often unfolds across more than one fiscal year, there is a challenge in assigning disabilities to a specific year. By taking a deeper look across multiple years and discussing the issue with Milliman, we are very comfortable in concluding that a very high portion of disabled members do elect coverage, as assumed.

We find the proposed election rates to be reasonable. We note that with the very high election rates observed among those members who retire with more than 25 years of service, it would also be appropriate to simplify the assumption and assume 100% elect coverage. However, there are indeed some members who do not elect coverage, and the proposed assumptions reasonably reflect that reality.



2. REVIEW OF INITIAL ELECTION ASSUMPTIONS

ANALYSIS OF MALE MEMBER INITIAL MEDICAL ELECTION PERCENTAGES

The following tables compare the results of our analyses with those proposed in Exhibit 3–1 of the 2020 Investigation of OPEB Program Experience Report.

Total Number of Members Exposed—Males						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	172	362	346	353	2,417	3,650
Milliman	162	353	333	369	2,434	3,651
<i>Pct. Difference</i>	6.17%	2.55%	3.90%	-4.34%	-0.70%	-0.03%

Total Number of Member Initial Medical Elections—Males						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	15	139	204	245	2,309	2,912
Milliman	14	140	206	247	2,312	2,919
<i>Pct. Difference</i>	7.14%	-0.71%	-0.97%	-0.81%	-0.13%	-0.24%

Member Initial Medical Election Percentages—Males						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	8.72%	38.40%	58.96%	69.41%	95.53%	79.78%
Milliman	8.64%	39.66%	61.86%	66.94%	94.99%	79.95%
<i>Difference</i>	0.93%	-3.18%	-4.69%	3.69%	0.57%	-0.21%



2. REVIEW OF INITIAL ELECTION ASSUMPTIONS

ANALYSIS OF FEMALE MEMBER INITIAL MEDICAL ELECTION PERCENTAGES

The following tables compare the results of our analyses with those proposed in Exhibit 3–2 of the 2020 Investigation of OPEB Program Experience Report.

Total Number of Members Exposed—Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	209	586	548	542	3,283	5,168
Milliman	183	556	522	562	3,302	5,125
<i>Pct. Difference</i>	14.21%	5.40%	4.98%	-3.56%	-0.58%	0.84%

Total Number of Member Initial Medical Elections—Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	16	265	372	421	3,089	4,163
Milliman	15	265	375	423	3,092	4,170
<i>Pct. Difference</i>	6.67%	0.00%	-0.80%	-0.47%	-0.10%	-0.17%

Member Initial Medical Election Percentages—Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	7.66%	45.22%	67.88%	77.68%	94.09%	80.55%
Milliman	8.20%	47.66%	71.84%	75.27%	93.64%	81.37%
<i>Difference</i>	-6.59%	-5.12%	-5.51%	3.20%	0.48%	-1.01%



2. REVIEW OF INITIAL ELECTION ASSUMPTIONS

ANALYSIS OF MALE AND FEMALE MEMBER INITIAL MEDICAL ELECTION PERCENTAGES

Because the initial medical election percentages are not significantly different for males and females, the assumption used for valuation purposes is based on combined male and female experience. The following tables compare the results of our analyses with those proposed in Exhibit 3–3 of the 2020 Investigation of OPEB Program Experience Report.

Total Number of Members Exposed—Males and Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	381	948	894	895	5,700	8,818
Milliman	345	909	855	931	5,736	8,776
<i>Pct. Difference</i>	<i>10.43%</i>	<i>4.29%</i>	<i>4.56%</i>	<i>-3.87%</i>	<i>-0.63%</i>	<i>0.48%</i>

Total Number of Member Initial Medical Elections—Males and Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	31	404	576	666	5,398	7,075
Milliman	29	405	581	670	5,404	7,089
<i>Pct. Difference</i>	<i>6.90%</i>	<i>-0.25%</i>	<i>-0.86%</i>	<i>-0.60%</i>	<i>-0.11%</i>	<i>-0.20%</i>

Member Initial Medical Election Percentages—Males and Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	8.14%	42.62%	64.43%	74.41%	94.70%	80.23%
Milliman	8.41%	44.55%	67.95%	71.97%	94.21%	80.78%
<i>Difference</i>	<i>-3.21%</i>	<i>-4.33%</i>	<i>-5.18%</i>	<i>3.39%</i>	<i>0.52%</i>	<i>-0.68%</i>



2. REVIEW OF INITIAL ELECTION ASSUMPTIONS

Like the medical election rates, dental election rates are also significantly affected by the amount of service a member has at retirement. The same comments on methodology and the issues surrounding disability retirement that were applicable to the initial medical election assumption are also applicable to the dental and vision election assumption. We find Milliman’s proposed assumptions to be reasonable.

ANALYSIS OF MALE MEMBER INITIAL DENTAL / VISION ELECTION PERCENTAGES

The following tables compare the results of our analyses with those proposed in Exhibit 3–4 of the 2020 Investigation of OPEB Program Experience Report.

Total Number of Members Exposed—Males						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	172	362	346	353	2,417	3,650
Milliman	162	353	333	369	2,434	3,651
<i>Pct. Difference</i>	6.17%	2.55%	3.90%	-4.34%	-0.70%	-0.03%

Total Number of Member Initial Dental / Vision Elections—Males						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	17	162	229	256	2,319	2,983
Milliman	16	164	231	258	2,321	2,990
<i>Pct. Difference</i>	6.25%	-1.22%	-0.87%	-0.78%	-0.09%	-0.23%

Member Initial Dental / Vision Election Percentages—Males						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	9.88%	44.75%	66.18%	72.52%	95.95%	81.73%
Milliman	9.88%	46.46%	69.37%	69.92%	95.36%	81.90%
<i>Difference</i>	0.00%	-1.71%	-3.19%	2.60%	0.59%	-0.21%



2. REVIEW OF INITIAL ELECTION ASSUMPTIONS

ANALYSIS OF FEMALE MEMBER INITIAL DENTAL / VISION ELECTION PERCENTAGES

The following tables compare the results of our analyses with those proposed in Exhibit 3–5 of the 2020 Investigation of OPEB Program Experience Report.

Total Number of Members Exposed—Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	209	586	548	542	3,283	5,168
Milliman	183	556	522	562	3,302	5,125
<i>Pct. Difference</i>	14.21%	5.40%	4.98%	-3.56%	-0.58%	0.84%

Total Number of Member Initial Dental / Vision Elections—Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	22	281	409	434	3,111	4,257
Milliman	18	283	412	436	3,113	4,262
<i>Pct. Difference</i>	22.22%	-0.71%	-0.73%	-0.46%	-0.06%	-0.12%

Member Initial Dental / Vision Election Percentages—Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	10.53%	47.95%	74.64%	80.07%	94.76%	82.37%
Milliman	9.84%	50.90%	78.93%	77.58%	94.28%	83.16%
<i>Difference</i>	0.69%	-2.95%	-4.29%	2.49%	0.48%	-0.95%



2. REVIEW OF INITIAL ELECTION ASSUMPTIONS

ANALYSIS OF MALE AND FEMALE MEMBER INITIAL DENTAL / VISION ELECTION PERCENTAGES

Because the initial election percentages are not significantly different for males and females, the assumption used for valuation purposes is based on combined male and female experience. The following tables compare the results of our analyses with those proposed in Exhibit 3–6 of the 2020 Investigation of OPEB Program Experience Report.

Total Number of Members Exposed—Males and Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	381	948	894	895	5,700	8,818
Milliman	345	909	855	931	5,736	8,776
<i>Pct. Difference</i>	<i>10.43%</i>	<i>4.29%</i>	<i>4.56%</i>	<i>-3.87%</i>	<i>-0.63%</i>	<i>0.48%</i>

Total Number of Member Initial Dental / Vision Elections—Males and Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	39	443	638	690	5,430	7,240
Milliman	34	447	643	694	5,434	7,252
<i>Pct. Difference</i>	<i>14.71%</i>	<i>-0.89%</i>	<i>-0.78%</i>	<i>-0.58%</i>	<i>-0.07%</i>	<i>-0.17%</i>

Member Initial Dental / Vision Election Percentages—Males and Females						
<u>Years of Service Credit Earned by Healthy Members</u>						
	Under 10	10 – 14	15 – 19	20 – 24	Over 24	Total
CMC	10.24%	46.73%	71.36%	77.09%	95.26%	82.10%
Milliman	9.86%	49.17%	75.20%	74.54%	94.74%	82.63%
<i>Difference</i>	<i>0.38%</i>	<i>-2.44%</i>	<i>-3.84%</i>	<i>2.55%</i>	<i>0.52%</i>	<i>-0.64%</i>



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

ANALYSIS OF MALE MEMBER INITIAL PRE-65 MEDICAL PLAN AND TIER SELECTION PERCENTAGES

CMC independently developed initial pre-65 medical plan and tier selection percentages for male members during the period from June 30, 2017 to June 30, 2020. The following tables compare the results of our analyses with those proposed in Exhibit 4–1 of the 2020 Investigation of OPEB Program Experience Report.

Pre-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Males						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Anthem Blue Cross Prudent Buyer Plan						
201	4	0.2%	0.2%		0.3%	0.3%
202	1	0.1%	0.1%		0.3%	0.3%
203	13	0.7%	0.6%	0.1%	0.9%	0.9%
204	1	0.1%	0.1%			
205						
Anthem Blue Cross I						
211	2	0.1%	0.1%		0.5%	0.5%
212	3	0.2%	0.2%			
213	7	0.4%	0.4%		0.5%	0.5%
214	1	0.1%	0.1%			
215						
Anthem Blue Cross II						
221	86	4.5%	4.5%		4.5%	4.5%
222	226	11.8%	11.8%		12.5%	12.5%
223	325	17.0%	16.9%	0.1%	14.9%	14.9%
224	36	1.9%	1.9%		1.5%	1.5%
225						
Anthem Blue Cross III						
240	2	0.1%	0.1%			
241	2	0.1%	0.1%			
242						
243						
244						
245						
246						
247	2	0.1%	0.1%			
248						
249						
250						



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Pre-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Males						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Cigna Network Model Plan						
301					0.1%	0.1%
302	1	0.1%	0.1%		0.2%	0.2%
303	2	0.1%	0.1%		0.1%	0.1%
304						
305						
Cigna Medicare Select Plus Rx (AZ)						
<i>No observations</i>						
Kaiser (CA)						
401	193	10.1%	10.0%	0.1%	11.0%	11.0%
402						
403	3	0.2%	0.2%			
404						
405						
406						
411	563	29.4%	29.5%	-0.1%	33.0%	33.0%
412						
413	41	2.1%	2.0%	0.1%		
414						
415						
416						
417						
418	2	0.1%	0.1%			
419						
420						
421						
422	1	0.1%	0.1%			
423						
424						
425						
426						
427						
428						
429						
430						
431						
432						



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Pre-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Males						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Kaiser (Other than CA)						
442						
446						
450						
451						
453	1	0.1%	0.1%			
454	2	0.1%	0.1%			
461						
462						
463	1	0.1%	0.1%			
467						
474	1	0.1%	0.1%			
482						
484	1	0.1%	0.1%			
SCAN Health Plan						
611						
613						
United Healthcare Medicare Advantage						
701						
702	12	0.6%	0.6%		0.6%	0.6%
703						
704	6	0.3%	0.3%		0.1%	0.1%
705						
706						
United Healthcare						
707	68	3.6%	3.5%	0.1%	3.5%	3.5%
708	121	6.3%	6.3%		7.0%	7.0%
709	182	9.5%	9.5%		8.5%	8.5%
Total	1,912	100.0%	100.0%	0.0%	100.0%	100.0%
Milliman	1,920					

*Numbers may not add to 100% due to rounding.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Pre-65 Medical Plan Selection—Local 1014 Firefighter Retirees—Males						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
801	18	5.9%	5.9%		6.5%	6.5%
802	94	30.9%	31.0%	-0.1%	35.0%	35.0%
803	190	62.5%	63.0%	-0.5%	58.5%	58.5%
804						
805	2	0.7%		0.7%		
806						
807						
808						
809						
810						
811						
812						
813						
814						
815						
Total	304	100.0%	100.0%	0.0%	100.0%	100.0%
Milliman	304					

*Numbers may not add to 100% due to rounding.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

ANALYSIS OF FEMALE MEMBER INITIAL PRE-65 MEDICAL PLAN AND TIER SELECTION PERCENTAGES

CMC independently developed initial pre-65 medical plan and tier selection percentages for female members during the period from June 30, 2017 to June 30, 2020. The following tables compare the results of our analyses with those proposed in Exhibit 4–2 of the 2020 Investigation of OPEB Program Experience Report.

Pre-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Females						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Anthem Blue Cross Prudent Buyer Plan						
201	9	0.4%	0.5%	-0.1%	0.5%	0.5%
202	1	0.0%			0.1%	0.1%
203	1	0.0%	0.1%	-0.1%	0.1%	0.1%
204	2	0.1%	0.1%		0.1%	0.1%
205						
Anthem Blue Cross I						
211	6	0.3%	0.3%		0.4%	0.4%
212	7	0.3%	0.3%		0.3%	0.3%
213	4	0.2%	0.2%		0.2%	0.2%
214	3	0.1%	0.1%		0.1%	0.1%
215						
Anthem Blue Cross II						
221	158	7.6%	7.8%	-0.2%	7.7%	7.7%
222	152	7.3%	7.4%	-0.1%	7.0%	7.0%
223	72	3.5%	3.5%		3.0%	3.0%
224	26	1.3%	1.2%	0.1%	1.3%	1.3%
225						
Anthem Blue Cross III						
240	4	0.2%	0.2%		0.3%	0.3%
241	3	0.1%	0.1%		0.1%	0.1%
242						
243	5	0.2%	0.3%	-0.1%	0.2%	0.2%
244						
245	1	0.0%				
246						
247	8	0.4%	0.4%		0.3%	0.3%
248						
249						
250						



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Pre-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Females						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Cigna Network Model Plan						
<i>No observations</i>						
Cigna Medicare Select Plus Rx (AZ)						
<i>No observations</i>						
Kaiser (CA)						
401	517	25.0%	24.8%	0.2%	26.2%	26.2%
402						
403	14	0.7%	0.6%	0.1%	0.6%	0.6%
404	1	0.0%				
405	1	0.0%				
406						
411	490	23.7%	23.7%		32.0%	32.0%
412						
413	165	8.0%	8.2%	-0.2%		
414	2	0.1%	0.1%			
415						
416						
417						
418	5	0.2%	0.2%			
419						
420						
421						
422	5	0.2%	0.2%			
423						
424						
425						
426						
427						
428						
429						
430						
431						
432						



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Pre-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Females						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Kaiser (Other than CA)						
442						
446	1	0.0%				
450	2	0.1%	0.1%			
451						
453	1	0.0%				
454						
461	3	0.1%	0.1%			
462						
463						
467	1	0.0%				
474						
482						
484						
SCAN Health Plan						
611	1	0.0%				
613						
United Healthcare Medicare Advantage						
701	8	0.4%	0.3%	0.1%	0.2%	0.2%
702	36	1.7%	1.9%	-0.2%	2.0%	2.0%
703	5	0.2%	0.1%	0.1%		
704	7	0.3%	0.4%	-0.1%	0.5%	0.5%
705						
706						
United Healthcare						
707	167	8.1%	8.1%		8.6%	8.6%
708	113	5.5%	5.6%	-0.1%	5.5%	5.5%
709	63	3.0%	3.1%	-0.1%	2.7%	2.7%
Total	2,070	100.0%	100.0%	0.0%	100.0%	100.0%
Milliman	2,082					

*Numbers may not add to 100% due to rounding.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Pre-65 Medical Plan Selection—Local 1014 Firefighter Retirees—Females						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
801	3	60.0%	60.0%		6.5%	6.5%
802					35.0%	35.0%
803	2	40.0%	40.0%		58.5%	58.5%
804						
805						
806						
807						
808						
809						
810						
811						
812						
813						
814						
815						
Total	5	100.0%	100.0%	0.0%	100.0%	100.0%
Milliman	5					

*Numbers may not add to 100% due to rounding.

In general, we find the plan election analysis to be performed correctly. We do note that some of the assumed rates of election are less than 1%. Such a rate has very minimal impact on the total results, and we would certainly not be opposed to a simpler assumption in which these plans were grouped with some others expected to have similar costs. Because of the size of LACERA, there is certainly sufficient credible data to reasonably draw the conclusions that have been made, and so we are not suggesting a change is needed, but simply that some consideration be given to a possible simplification that would have negligible impact on the results.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

ANALYSIS OF MALE MEMBER INITIAL POST-65 MEDICAL PLAN AND TIER SELECTION PERCENTAGES

CMC independently developed initial post-65 medical plan and tier selection percentages for male members during the period from June 30, 2017 to June 30, 2020. The following tables compare the results of our analyses with those proposed in Exhibit 4–3 of the 2020 Investigation of OPEB Program Experience Report.

Post-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Males						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Anthem Blue Cross Prudent Buyer Plan						
201						
202	1	0.1%	0.1%			
203						
204						
205						
Anthem Blue Cross I						
211	1	0.1%	0.1%		0.3%	
212						
213	1	0.1%	0.1%			
214						
215						
Anthem Blue Cross II						
221	8	0.7%	0.6%	0.1%	0.8%	
222	22	2.0%	2.0%		2.3%	
223	7	0.6%	0.6%		0.8%	
224	1	0.1%	0.1%		0.3%	
225						
Anthem Blue Cross III						
240	81	7.3%	7.3%		7.1%	8.2%
241	3	0.3%	0.3%		0.2%	0.2%
242	63	5.7%	5.6%	0.1%	5.5%	7.8%
243	81	7.3%	7.3%		7.1%	7.1%
244						
245						
246			0.3%		0.4%	0.7%
247	20	1.8%	1.7%	0.1%	1.3%	2.1%
248	1	0.1%	0.1%			
249	8	0.7%	0.7%		0.6%	0.6%
250	1	0.1%	0.1%		0.3%	0.3%



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Post-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Males						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Cigna Network Model Plan						
301	1	0.1%	0.1%			
302						
303						
304						
305						
Cigna Medicare Select Plus Rx (AZ)						
321						
322	1	0.1%	0.1%			
324						
325						
327						
329						
Kaiser (CA)						
401	17	1.5%	1.4%	0.1%		
402						
403	183	16.5%	16.5%		18.0%	19.7%
404	4	0.4%	0.4%		0.4%	
405	18	1.6%	1.6%		1.3%	
406	1	0.1%	0.1%			
411	28	2.5%	2.2%	0.3%		
412						
413	202	18.2%	18.3%	-0.1%	20.8%	22.6%
414	2	0.2%	0.2%		0.5%	
415						
416						
417						
418	171	15.4%	15.8%	-0.4%	15.9%	16.1%
419	3	0.3%	0.3%		0.2%	
420						
421						
422	14	1.3%	1.3%		1.2%	
423						
424						
425						
426						
427						



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Post-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Males						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
428						
429						
430	2	0.2%	0.2%			
431					0.1%	
432						
Kaiser (Other than CA)						
442						
446						
450						
451						
453						
454						
461						
462						
463						
467	1	0.1%	0.1%			
474						
482						
484						
SCAN Health Plan						
611	6	0.5%	0.5%		0.5%	0.5%
613	6	0.5%	0.5%		0.5%	0.5%
United Healthcare Medicare Advantage						
701	40	3.6%	3.6%		3.8%	3.8%
702	34	3.1%	3.2%	-0.1%	3.9%	3.9%
703	47	4.2%	4.2%		3.7%	3.7%
704	21	1.9%	1.9%		1.7%	1.7%
705	4	0.4%	0.4%		0.5%	0.5%
706						
United Healthcare						
707						
708	1	0.1%	0.1%			
709	1	0.1%		0.1%		
Total	1,107	100.0%	100.0%	0.0%	100.0%	100.0%
Milliman	1,108					

*Numbers may not add to 100% due to rounding.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Post-65 Medical Plan Selection—Local 1014 Firefighter Retirees—Males						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
801	1	16.7%	16.7%			
802						
803						
804					12.0%	12.0%
805	1	16.7%	16.7%			
806					28.0%	28.0%
807	3	50.0%	50.0%			
808	1	16.7%	16.7%		60.0%	60.0%
809						
810						
811						
812						
813						
814						
815						
Total	6	100.0%	100.0%	0.0%	100.0%	100.0%
Milliman	6					

*Numbers may not add to 100% due to rounding.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

ANALYSIS OF FEMALE MEMBER INITIAL POST-65 MEDICAL PLAN AND TIER SELECTION PERCENTAGES

CMC independently developed initial post-65 medical plan and tier selection percentages for female members during the period from June 30, 2017 to June 30, 2020. The following tables compare the results of our analyses with those proposed in Exhibit 4–4 of the 2020 Investigation of OPEB Program Experience Report.

Post-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Females						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Anthem Blue Cross Prudent Buyer Plan						
201	2	0.1%	0.1%			
202	1	0.0%				
203						
204						
205						
Anthem Blue Cross I						
211	8	0.4%	0.4%		0.2%	
212						
213	1	0.0%				
214						
215						
Anthem Blue Cross II						
221	29	1.3%	1.2%	0.1%	1.3%	
222	13	0.6%	0.6%		0.9%	
223	4	0.2%	0.2%			
224						
225						
Anthem Blue Cross III						
240	250	11.5%	11.5%		11.5%	13.0%
241	7	0.3%	0.3%			
242	21	1.0%	1.0%		1.0%	1.9%
243	122	5.6%	5.7%	-0.1%	5.1%	5.1%
244	1	0.0%				
245	6	0.3%	0.3%		0.1%	0.1%
246						
247	4	0.2%	0.2%		0.1%	0.1%
248	1	0.0%				
249	4	0.2%	0.2%		0.1%	0.1%
250						



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Post-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Females						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Cigna Network Model Plan						
301	1	0.0%				
302						
303						
304						
305						
Cigna Medicare Select Plus Rx (AZ)						
<i>No observations</i>						
Kaiser (CA)						
401	56	2.6%	2.7%	-0.1%		
402						
403	720	33.2%	33.3%	-0.1%	38.2%	41.7%
404	19	0.9%	0.9%		1.0%	
405	75	3.5%	3.5%		2.5%	
406						
411	20	0.9%	0.8%	0.1%		
412						
413	113	5.2%	5.0%	0.2%		
414	2	0.1%	0.1%		5.0%	5.5%
415						
416						
417						
418	341	15.7%	16.0%	-0.3%	16.5%	16.9%
419	4	0.2%	0.2%			
420	1	0.0%				
421						
422	5	0.2%	0.3%	-0.1%	0.5%	
423						
424						
425						
426	4	0.2%	0.2%		0.4%	
427	1	0.0%				
428	2	0.1%	0.1%			
429						
430	1	0.0%				
431						
432						



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Post-65 Medical Plan Selection—Non-Local 1014 Firefighter Retirees—Females						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
Kaiser (Other than CA)						
442	2	0.1%	0.1%			
446						
450						
451	1	0.0%				
453						
454						
461						
462	2	0.1%	0.1%			
463						
467						
474						
482	1	0.0%				
484						
SCAN Health Plan						
611	14	0.6%	0.6%		0.8%	0.8%
613	6	0.3%	0.3%		0.4%	0.4%
United Healthcare Medicare Advantage						
701	188	8.7%	8.8%	-0.1%	9.2%	9.2%
702	20	0.9%	0.9%		1.0%	1.0%
703	86	4.0%	4.1%	-0.1%	4.1%	4.1%
704	5	0.2%	0.2%		0.1%	0.1%
705	3	0.1%	0.1%			
706						
United Healthcare						
707	2	0.1%		0.1%		
708	2	0.1%		0.1%		
709						
Total	2,171	100.0%	100.0%	0.0%	100.0%	100.0%
Milliman	2,167					

*Numbers may not add to 100% due to rounding.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Post-65 Medical Plan Selection—Local 1014 Firefighter Retirees—Females						
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Proposed Assumption Tier 1	Proposed Assumption Tier 2
801						
802						
803						
804					12.0%	12.0%
805						
806					28.0%	28.0%
807						
808					60.0%	60.0%
809						
810						
811						
812						
813						
814						
815						
Total	0	100.0%	100.0%	0.0%	100.0%	100.0%
Milliman	0					

*Numbers may not add to 100% due to rounding.

As with the pre-65 assumptions, we find the results reasonable, but believe that some simplification might be considered without significantly affecting the quality of the liability estimation.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

ANALYSIS OF MALE MEMBER INITIAL DENTAL / VISION PLAN AND TIER SELECTION PERCENTAGES

CMC independently developed initial dental / vision plan and tier selection percentages for male members during the period from June 30, 2017 to June 30, 2020. The following tables compare the results of our analyses with those proposed in Exhibit 4–5 of the 2020 Investigation of OPEB Program Experience Report.

Initial Dental / Vision Plan Selection—Males							
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Current Assumption	Proposed Assumption Tier 1	Proposed Assumption Tier 2
501	619	18.2%	18.2%		19.0%	18.5%	18.5%
502	2,424	71.1%	71.1%		68.0%	70.5%	70.5%
503							
901	101	3.0%	3.0%		4.0%	3.0%	3.0%
902	263	7.7%	7.7%		9.0%	8.0%	8.0%
903							
Total	3,407	100.0%	100.0%	0.0%	100.0%	100.0%	100.0%
Milliman	3,414						

*Numbers may not add to 100% due to rounding.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

ANALYSIS OF FEMALE MEMBER INITIAL DENTAL / VISION PLAN AND TIER SELECTION PERCENTAGES

CMC independently developed initial dental / vision plan and tier selection percentages for female members during the period from June 30, 2017 to June 30, 2020. The following tables compare the results of our analyses with those proposed in Exhibit 4–5 of the 2020 Investigation of OPEB Program Experience Report.

Initial Dental / Vision Plan Selection—Females							
Deduction Code	Number Enrolled	CMC Pct.	Milliman Pct.	Difference	Current Assumption	Proposed Assumption Tier 1	Proposed Assumption Tier 2
501	1940	44.6%	44.6%		46.0%	45.0%	45.0%
502	1,914	44.0%	44.1%	-0.1%	40.0%	42.7%	42.7%
503							
901	297	6.8%	6.8%		8.0%	7.5%	7.5%
902	196	4.5%	4.5%		6.0%	4.8%	4.8%
903							
Total	4,347	100.0%	100.0%	0.0%	100.0%	100.0%	100.0%
Milliman	4,353						

*Numbers may not add to 100% due to rounding.



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Review of Pre-65 to Post-65 Medical Plan Migration Assumptions

CMC independently developed the frequencies of member medical plan enrollment decisions for those who reached Medicare-eligibility age during the period from June 30, 2017 to June 30, 2020 and were enrolled in a pre-65 medical plan immediately prior to attaining age 65. The following tables compare the results of our analyses with those proposed in Exhibit 4–6 of the 2020 Investigation of OPEB Program Experience Report.

Pre-65 to Post-64 Medical Plan Migration Assumptions				
Eligible Plan		Number of Enrollments		
		Pre-Medicare	Post-Medicare	
		CMC	Milliman	Difference
Anthem Blue Cross I	Anthem Blue Cross I	27	27	
	Anthem Blue Cross II	0	0	
	Anthem Blue Cross III	26	29	-3
	Other	<u>1</u>	<u>1</u>	
	Total	54	57	-3
Anthem Blue Cross II	Anthem Blue Cross I	0	0	
	Anthem Blue Cross II	281	281	
	Anthem Blue Cross III	375	380	-5
	United Healthcare Medicare Advantage	1	1	
	Excess I	0	0	
	Kaiser Family Basic	0	0	
	Other	<u>10</u>	<u>11</u>	<i>-1</i>
Total	667	673	-6	
Anthem Blue Cross Prudent Buyer Plan	Anthem Blue Cross I	0	0	
	Anthem Blue Cross II	4	4	
	Anthem Blue Cross III	43	44	-1
	Anthem Blue Cross Prudent Buyer Plan	40	41	-1
	Other	<u>2</u>	<u>2</u>	
Total	89	91	-2	



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Pre-65 to Post-64 Medical Plan Migration Assumptions					
Eligible Plan	Pre-Medicare	Post-Medicare	Number of Enrollments		
			CMC	Milliman	Difference
CIGNA Network Model Plan					
		Anthem Blue Cross I	0	0	
		Anthem Blue Cross II	1	2	-1
		Anthem Blue Cross III	11	12	-1
		CIGNA Medicare Select Plus Rx (AZ)	2	2	
		CIGNA Network Model Plan	12	12	
		United Healthcare Medicare Advantage	7	8	-1
		Senior Advantage	0	0	
		One Advantage, Others Basic	0	0	
		SCAN Health Plan	5	5	
		Other	<u>1</u>	<u>1</u>	
		Total	39	42	-3
United Healthcare					
		United Healthcare Medicare Advantage	429	430	-1
		CIGNA Network Model Plan	0	0	
		Anthem Blue Cross I	2	2	
		Anthem Blue Cross II	13	13	
		Anthem Blue Cross III	54	54	
		SCAN Health Plan	8	8	
		Senior Advantage	8	12	-4
		One Advantage, Others Basic	1	1	
		One Advantage, One Excess II	0	0	
		Excess II	13	12	1
		One Excess II, One Basic	7	4	3
		One Excess III (MNP), One Basic	0	0	
		Other	<u>9</u>	<u>11</u>	-2
		Total	544	547	-3



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

Pre-65 to Post-64 Medical Plan Migration Assumptions				
Eligible Plan	Post-Medicare	Number of Enrollments		
		CMC	Milliman	Difference
Kaiser Retiree Basic				
	Senior Advantage	623	624	-1
	Excess I	22	21	1
	Excess II	147	145	2
	Excess III (MNP)	20	19	1
	Anthem Blue Cross I	1	1	
	Anthem Blue Cross III	20	23	-3
	United Healthcare Medicare Advantage	2	2	
	Kaiser Retiree Basic	0	0	
	One Advantage, Others Basic	3	3	
	One Excess III (MNP), One Basic	1	1	
	Other	<u>10</u>	<u>13</u>	-3
	Total	849	852	-3
Kaiser Family Basic				
	Two+ Advantage	79	80	-1
	One Advantage, One Excess II	3	3	
	One Advantage, One Excess III (MNP)	5	5	
	One Advantage, Others Basic	333	337	-4
	One Excess I, One Advantage	4	4	
	One Excess I, Others Basic	28	28	
	One Excess I, Others Excess II	1	1	
	One Excess II, One Basic	86	87	-1
	One Excess II, Others Excess III (MNP)	0	0	
	One Excess III (MNP), One Basic	16	16	
	Two+ Excess II - Part B	5	5	
	CIGNA Network Model Plan	0	0	
	Excess I	2	2	
	Excess III (MNP)	2	2	
	Anthem Blue Cross III	12	12	
	United Healthcare Medicare Advantage	1	1	
	Senior Advantage	18	20	-2
	Kaiser Family Basic	23	24	-1
	Other	<u>11</u>	<u>12</u>	-1
	Total	629	639	-10



3. REVIEW OF TIER SELECTION AND MIGRATION ASSUMPTIONS

		Pre-65 to Post-64 Medical Plan Migration Assumptions		
Eligible Plan		Number of Enrollments		
Pre-Medicare	Post-Medicare	CMC	Milliman	Difference
One Advantage, Others Basic				
	Senior Advantage	4	4	
	Two+ Advantage	300	297	3
	One Advantage, One Excess II	4	4	
	One Advantage, One Excess III (MNP)	9	8	1
	One Advantage, Others Basic	50	50	
	One Excess I, One Advantage	2	2	
	Anthem Blue Cross III	9	9	
	Anthem Blue Cross I	0	0	
	Anthem Blue Cross II	1	1	
	Excess III (MNP)	0	0	
	One Excess III (MNP), One Basic	0	0	
	Other	<u>2</u>	<u>2</u>	
	Total	381	377	4
Firefighters Local 1014				
	Firefighters Local 1014	172	171	1
	Other	<u>0</u>	<u>0</u>	
	Total	172	171	1
All Pre-Medicare Plans	Total	3,424	3,449	-25

The Plan's experience during the three-year study period is consistent with current assumptions, and the adjustments recommended by Milliman appear to be reasonable. Additionally, we agree with the proposed assumptions for Tier 2 members, because our understanding is that these members must enroll in Medicare when they reach Medicare-eligibility age in order to be eligible to elect a post-65 medical plan.



4. REVIEW OF OTHER DEMOGRAPHIC ASSUMPTIONS

ANALYSIS OF ASSUMED RETIREMENT RATES FOR DEFERRED VESTED MEMBERS—GENERAL PLANS A, B, C, D, AND G

CMC independently developed the percentages of members with deferred vested pension benefits under General Plans A, B, C, D, and G who will retire at a given age based on experience during the period from June 30, 2017 to June 30, 2020. Milliman used two additional years of data, so we would expect there to be some differences in our results. The general concurrence of the two sets of results further strengthens our confidence in the resulting conclusion, because the possible influence of some unusual year is significantly reduced by not using all of the same years. The following table compares the results of our analyses with those proposed in Exhibit 5–1 of the 2020 Investigation of OPEB Program Experience Report.

Age	Observed Rates		Ratio of Rates (CMC / Milliman)
	CMC	Milliman	
50	11.1%	15.3%	0.725
51	4.1%	4.6%	0.904
52	5.3%	7.2%	0.732
53	3.9%	5.1%	0.768
54	4.4%	4.2%	1.051
55	9.3%	9.7%	0.958
56	6.6%	6.2%	1.075
57	6.7%	7.6%	0.885
58	6.1%	6.4%	0.950
59	9.2%	9.9%	0.925
60	11.4%	10.4%	1.095
61	11.3%	12.1%	0.936
62	14.3%	14.3%	0.997
63	17.3%	18.6%	0.931
64	18.3%	20.2%	0.905
65	39.9%	37.5%	1.063
66	23.7%	25.8%	0.917
67	15.5%	20.4%	0.761
68	20.2%	19.2%	1.052
69	27.9%	30.6%	0.912
70	33.3%	37.1%	0.898
71	25.7%	40.0%	0.643
72	30.0%	30.0%	1.000
73	10.0%	22.2%	0.450
74	25.0%	14.3%	1.749
75+	26.7%	20.4%	1.307
Total	10.4%	11.3%	0.921



4. REVIEW OF OTHER DEMOGRAPHIC ASSUMPTIONS

ANALYSIS OF ASSUMED RETIREMENT RATES FOR DEFERRED VESTED MEMBERS—GENERAL PLAN E

CMC independently developed the percentages of members with deferred vested pension benefits under General Plan E who will retire at a given age based on experience during the period from June 30, 2017 to June 30, 2020. As with General Plans A, B, C, D, and G, Milliman used two additional years of data, so the comments made earlier apply here as well. The following table compares the results of our analyses with those proposed in Exhibit 5–2 of the 2020 Investigation of OPEB Program Experience Report.

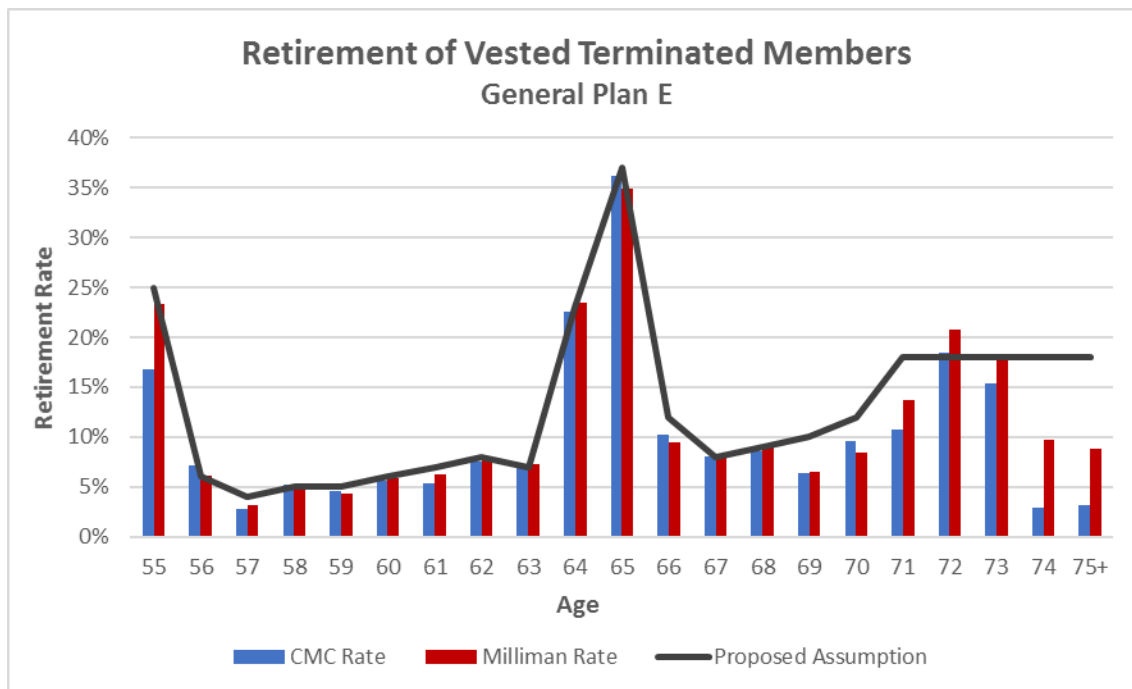
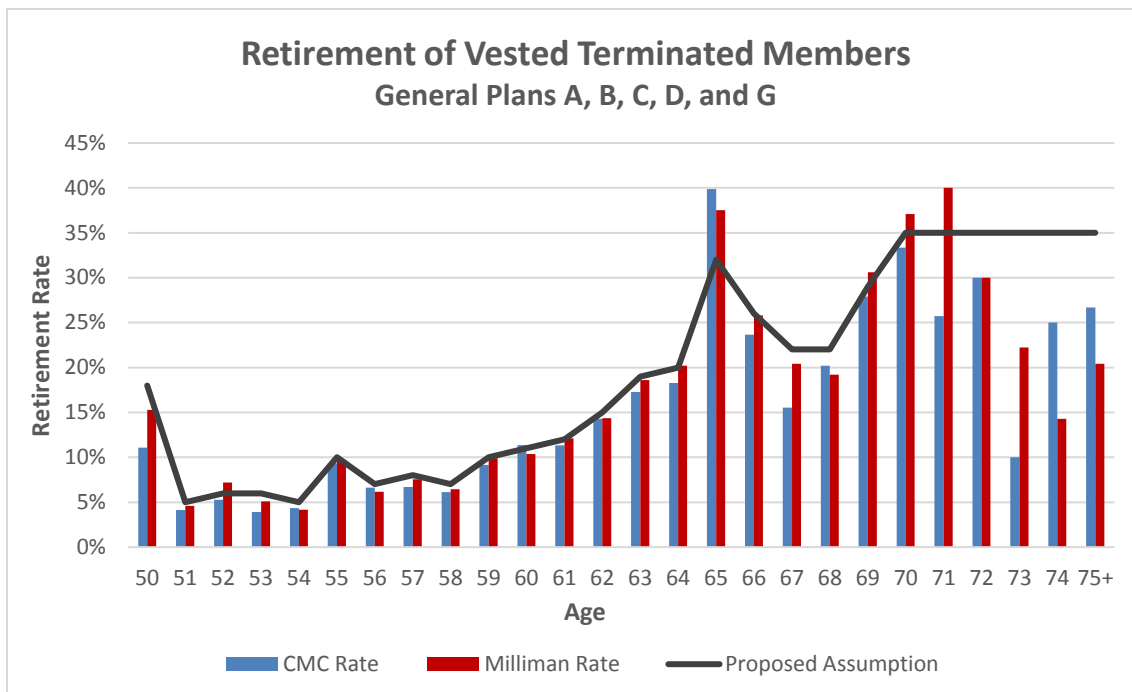
Age	Observed Rates		Ratio of Rates
	CMC	Milliman	(CMC / Milliman)
55	16.8%	23.3%	0.718
56	7.2%	6.1%	1.168
57	2.8%	3.2%	0.879
58	5.2%	4.7%	1.105
59	4.6%	4.3%	1.085
60	5.6%	5.9%	0.949
61	5.4%	6.2%	0.861
62	7.5%	7.9%	0.951
63	7.1%	7.3%	0.978
64	22.6%	23.4%	0.964
65	36.2%	34.9%	1.038
66	10.2%	9.4%	1.082
67	8.0%	8.1%	0.996
68	8.6%	8.9%	0.964
69	6.4%	6.5%	0.988
70	9.6%	8.4%	1.148
71	10.8%	13.7%	0.788
72	18.5%	20.8%	0.887
73	15.4%	17.9%	0.861
74	2.9%	9.7%	0.295
75+	3.2%	8.9%	0.360
Total	10.5%	11.1%	0.942

The total number of members with deferred vested pension benefits under Safety Plans A and B shown in Exhibit 5-3 are low relative to the other Plan groups (86 total actual retirement observations). As a result, CMC did not independently develop rates of retirement for these members.

The graphical comparisons are shown on the following page:



4. REVIEW OF OTHER DEMOGRAPHIC ASSUMPTIONS





4. REVIEW OF OTHER DEMOGRAPHIC ASSUMPTIONS

ANALYSIS OF DIFFERENCES IN MEMBER AGES AND AGES OF ENROLLED SPOUSES

CMC performed a high-level review of the average differences in member ages and the ages of enrolled spouses based only on the experience of retired members who were enrolled in a medical plan as of June 30, 2020, and had a spouse date of birth on his or her record. This approach means that we will miss some records where a member dies shortly after retirement. Thus, our counts are lower, but we do not anticipate a significant bias in the results.

The following table summarizes the results:

Actual Experience	Male Retirees		Female Retirees	
	Number	Average Age Difference in Years (Males Older Than Females)	Number	Average Age Difference in Years (Males Older Than Females)
CMC—All Retirees	17,698	4.3	9,854	1.5
CMC—Recent Retirees	4,087	3.5	3,136	1.6
Milliman—All Retirees	17,711	4.5	9,799	1.3
Milliman—Recent Retirees	4,121	3.5	3,195	1.4

As shown in the table above, the average age differences we produced are consistent with the results contained in Section 6 of the 2020 Investigation of OPEB Program Experience Report.

We also note that the proposed assumptions concerning the average difference in male and female member ages and the ages of enrolled spouses provided in the 2020 Investigation of OPEB Program Experience Report are consistent with the assumptions used in the 2020 Retirement Plan Actuarial Valuation. This consistency is an additional support of Milliman’s proposed assumption.



4. REVIEW OF OTHER DEMOGRAPHIC ASSUMPTIONS

ANALYSIS OF MEDICARE ENROLLMENT FOR ANTHEM BLUE CROSS I, II, AND PRUDENT BUYER PLANS

Section 6 of the 2020 Investigation of OPEB Program Experience Report contains the following description of the Medicare enrollment assumptions for members who are enrolled in Anthem Blue Cross I, II, and Prudent Buyer Plans:

“Our July 1, 2019 OPEB valuation assumed that members in Blue Cross I, II, and Prudent Buyer were not eligible for Medicare Part B premium reimbursement. We checked the validity of this assumption based on July 1, 2018, 2019, and 2020 enrollment information. Medicare Part A information from LACERA for both inactives and actives was incomplete, so we relied on the Medicare Part B indicator. There were not any members in the Blue Cross I, II, and Prudent Buyer plans who were in Medicare Part B. We recommend continuing with the current assumption for Tier 1. We will assume Tier 2 members will enroll in Medicare Parts A and B.”

CMC reviewed the OPEB Program census data provided by Milliman, and agree that records for members who are age 65 or older and enrolled in Anthem Blue Cross I, II, and Prudent Buyer Plans do not contain Medicare Part B premium amounts.

ANALYSIS OF SURVIVOR AND NEW DEPENDENT ENROLLMENT ASSUMPTIONS

CMC did not review the results that support the survivor and new dependent enrollment assumptions provided in Section 6 of the 2020 Investigation of OPEB Program Experience Report because (1) the number of observations is small relative to the total population of retirees and their dependents and (2) any variance in these rates are unlikely to have a material impact on the OPEB Program actuarial valuation as of June 30, 2020.



5. REVIEW OF ECONOMIC ASSUMPTIONS

INFLATION

The inflation assumption is a component of both the investment return assumption and the health cost trend rate development. For consistency with the pension assumptions developed last year, Milliman uses the same 2.75% inflation assumption and points to the pension study for justification. We do not find 2.75% unreasonable, but we do note that this is on the higher end of what most practitioners are currently recommending. Recent pricing of inflation in the TIPS and Treasuries markets may be suggesting change in expectations, and so we do not see any reason for Milliman to reconsider this assumption at this time.

Milliman also recommends using the pension assumption of 3.25% for wage inflation. We believe this is reasonable and consistent.

INVESTMENT RETURN

ASOP 6 and ASOP 27 provide actuaries with guidance on selecting an investment return that included considering the purpose of the measurement. With the adoption of an agent employer approach, the OPEB Program has two groups of employers – those who are prefunding, and those who are not (at least to any significant degree). As a result, there are really two different investment return assumptions needed -one for the funded employers and one for the unfunded employers.

The assumed long-term rate of return on plan assets, as disclosed in the 2020 Investigation of OPEB Program Experience Report, was 6.00%. This assumption was selected based on the Trust's investment policy and the current capital market assumptions and investment forecast of Meketa, LACERA's investment advisor.

CMC reviewed the expected long-term rate of return assumption based on consideration of the asset allocation, Meketa's assumptions, and the assumptions of other investment advisors. Based on these factors, CMC agrees the 6.00% expected long-term rate of return selected by LACERA is reasonable for the purposes described above.

Likewise, we also reviewed Milliman's analysis of the expected return for the unfunded plans. In this case, Milliman recommends using the expected return of the general (cash) account held by the County, which is generally considered a reasonable approach. Based on the general proportions of cash and short-term Treasuries that this account holds, Milliman recommends the use of a 2.30% rate. We find this analysis reasonable.

We do note that for accounting purposes under Governmental Accounting Standards Board Statements 74 and 75, the effective rate used may be a blend of this long-term rate and a current bond index rate, as required in those standards.



5. REVIEW OF ECONOMIC ASSUMPTIONS

LONG-TERM HEALTH CARE COST TREND RATES

Annual per capita health care claims costs are expected to increase in future years as a result of medical inflation, utilization, leverage in the plan design, and improvements in technology adjusted for any implicit and/or explicit cost containment features. Long-term health care trend rates are typically used to reflect an assumed pattern of annual increases in expected health care claims costs and contributions (if applicable) during each period subsequent to the measurement date. ASOP 6 provides specific guidance concerning the selection of long-term health care cost rates for the purpose of measuring retiree group benefit plan obligations or establishing actuarially determined contribution amounts for these plans.

CMC reviewed the proposed long-term medical cost trend rates (Medical Trend Rates) provided in the 2020 Investigation of OPEB Program Experience Report. Milliman selected Medical Trend Rates based on the Society of Actuaries (SOA) Long Term Healthcare Cost Trends Model, which is often referred to as the “Getzen Model” because it was originally developed by Professor Thomas E. Getzen for the SOA. We note that one common criticism of the Getzen Model is that it generates a longer transition period from short-term trend rates to ultimate trend rates when compared to transition periods produced by other models. Another criticism, somewhat less commonly voiced, is that the Getzen Model is not elastic with respect to the development of trend rates for health care cost components, such as in-patient, out-patient, professional services, and prescription drug costs. Nonetheless, it is a well-respected methodology.

Our understanding is that Milliman has modified the Getzen Model to reflect:

- An offset to correct the implicit aging of the population—an artifact of the Getzen Model development process—included in trend rates as required under Section 3.12.1(a) of ASOP 6;
- An adjustment equal to the expected long-term rate of inflation plus 0.75% to reflect future changes in carrier administrative costs as recommended under Section 3.12.1(a) of ASOP 6; and,
- Adjustments, if needed, to produce trend rates that are rounded to the nearest 0.1%.

CMC believes that the modifications outlined above are reasonable for the purposes stated herein.

The Getzen Model produces short-term, intermediate-term, and long-term rates based on various inputs provided by the user. Milliman selected the following inputs to calibrate the Getzen Model for the OPEB Program:

- Trends through 2022—These trend rates are based on information provided by LACERA’s health consultant, and reflect actual experience and changes as required under Section 3.7.11 of ASOP 6.
- 2030 GDP Percentage Share—The assumed percentage of the Gross Domestic Product dedicated to health care costs in 2030. Based on guidance from the Centers for Medicare and Medicaid Services (CMS), Milliman selected the recommended value to be 20.3% for the health share of GDP in 2030.



5. REVIEW OF ECONOMIC ASSUMPTIONS

- **Inflation Rate**—Milliman selected a 2.75% inflation assumption, which is consistent with the expected long-term rate of inflation selected by LACERA last year for the pension work and used for various purposes as of June 30, 2020.
- **Real GDP Per Capita Growth**—The expected growth in Real GDP during future periods. Milliman used information from the Congressional Budget Office to select a 1.50% per year growth in Real GDP.
- **Excess Medical Cost Growth**—The ratio of expected increases in health care expenditures over expected increases in income and wages. Milliman selected a 1.10% rate based on SOA research.
- **GDP Resistance Point and Limit Year**—The projected health share of GDP percentage where additional increases in costs meet resistance and the year in which this limit is expected to be reached. Milliman selected the 25.0% recommended value for the GDP Resistance Point, and 2075 for the GDP Limit Year, based on SOA research.

The values listed above for the parameters used in the Getzen Model are all within ranges produced and accepted by researchers, forecasters, government officials, and other interested parties, and appear to meet the criteria outlined in Section 3.6 of ASOP 27, as well as the requirements in Section 3.12.5 of ASOP 6, concerning the selection of reasonable assumptions. As a result, CMC believes that the inputs selected by Milliman for the purposes of calibrating the Getzen Model for the OPEB Program are reasonable. Overall, CMC did not uncover any concerns with the parameters or modifications employed by Milliman in their use of the Getzen Model, and we have determined that the Getzen Model described above is an acceptable basis for the selection of long-term medical cost trend rates for the OPEB Program.

CMC also reviewed the proposed long-term dental / vision cost trend rates provided in the 2020 Investigation of OPEB Program Experience Report. Milliman selected a 4.25% underlying dental / vision trend rate, which was developed based on the expected long-term rate of inflation (2.75%) plus 1.50%. As required under Section 3.12 of ASOP 27, these parameters are consistent with the values selected for similar inputs used in the development of long-term medical cost trend rates. CMC believes that the inputs selected by Milliman for the purposes of developing the 4.25% underlying dental / vision trend rate are reasonable.

MEDICARE PART B PREMIUM TREND RATES

CMC reviewed the proposed Medicare Part B premium trend rates contained in Exhibit 7–6 in Milliman’s report. The proposed Medicare Part B premium trend rates initially start at 9.30% and grade down to an ultimate rate equal to 4.30%. The first year of this trend includes an adjustment that reflect Milliman’s belief that the actual Part B premium data amounts are under-reported and will be corrected . In general, we find their proposed trend rates reasonable.



6. INVESTIGATION OF EXPERIENCE REPORT REVIEW AND CONCLUSIONS

In general, we find Milliman’s work to be accurate and complete, and we have not identified any material findings.

We note that Milliman acknowledges that issues related to COVID may have a future impact, but they do not reflect anything now. We believe that this is an appropriate response in light of what is currently knowable.

We have no findings of material discrepancies with generally accepted actuarial principles or professional standards, and our recommendations are limited to suggesting minor improvements to the OPEB Program Experience Study process. We have summarized our recommendations for future experience studies:

- In our report, we identified some areas in which we believe there could be some simplification of assumptions. We recognize that there may be valid reasons for the more complex assumptions, and do not disagree with those assumptions. However, some simplification could be made with only a very minor change in results.
- In our opinion, it is helpful to add some commentary as to the rationale in changing assumptions. This helps provide documentation of the thought process behind the recommended changes. While Milliman does this to some extent, we would suggest they expand this discussion. This is a preference issue, of course, and we recognize that each firm and consultant have personal styles, and that the client’s wishes are also a significant consideration.

As part of the actuarial review of the 2020 OPEB Program Actuarial Valuation Report scheduled later this year, we will be reviewing Milliman’s valuation process and confirming the valuation results. As part of that project, we will be reviewing the reasonableness of Milliman’s estimated cost impact of the proposed assumption changes. While we are not able to fully quantify the changes at this point, we believe the changes are reasonable in light of general actuarial rules of thumb and our experience with other OPEB plans.

Los Angeles County OPEB Program

2020 Valuation Results

Robert Schmidt, FSA, EA, MAAA
Janet Jennings, ASA, MAAA

AUGUST 4, 2021



Agenda

Highlights

Timeline

Process Summary

Assumptions

Valuation Summary Results

Historical Information and Projections

Questions and Comments

Cavanaugh Macdonald Review

Appendix

Glossary

Highlights

Highlights

- 2020 Experience Study and Actuarial Review by Cavanaugh Macdonald
- Continuing with Agent Structure
 - Provides agent specific information for those employers who are pre-funding through the OPEB Trust
 - Other agents are grouped together into the overall OPEB Program valuation calculations
 - Employers requiring financial statement reporting information obtain it from the GASB 75 report
- Small increase in liabilities and costs
 - Increase due to passage of time and 2020 OPEB Experience Study
 - Offset by favorable July 1, 2021 renewals and claim cost experience
 - Discount rate remained the same for LA County, Superior Court, and LACERA
- Employer contributions are progressing toward reaching the ADC. Milestone reached in estimated 8 years for LA County, 9 years for LACERA, and 24 years for Superior Court
- Membership continues to increase.

Timeline

Timeline

Description	2020						2021								
	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
Entrance Meeting				█											
Data Received		█	█	█	█	█									
Census and Experience Study					█	█	█	█	█						
BOR Educational Meeting							█								
Stakeholder Assumptions Meeting								█							
BOR Meeting to Approve Assumptions									█						
Receive Approved 7/1/2021 Premiums										█					
Conduct Funding Valuation									█	█	█				
Closing Stakeholder Meeting												█			
BOR Meeting to Approve Valuation														█	

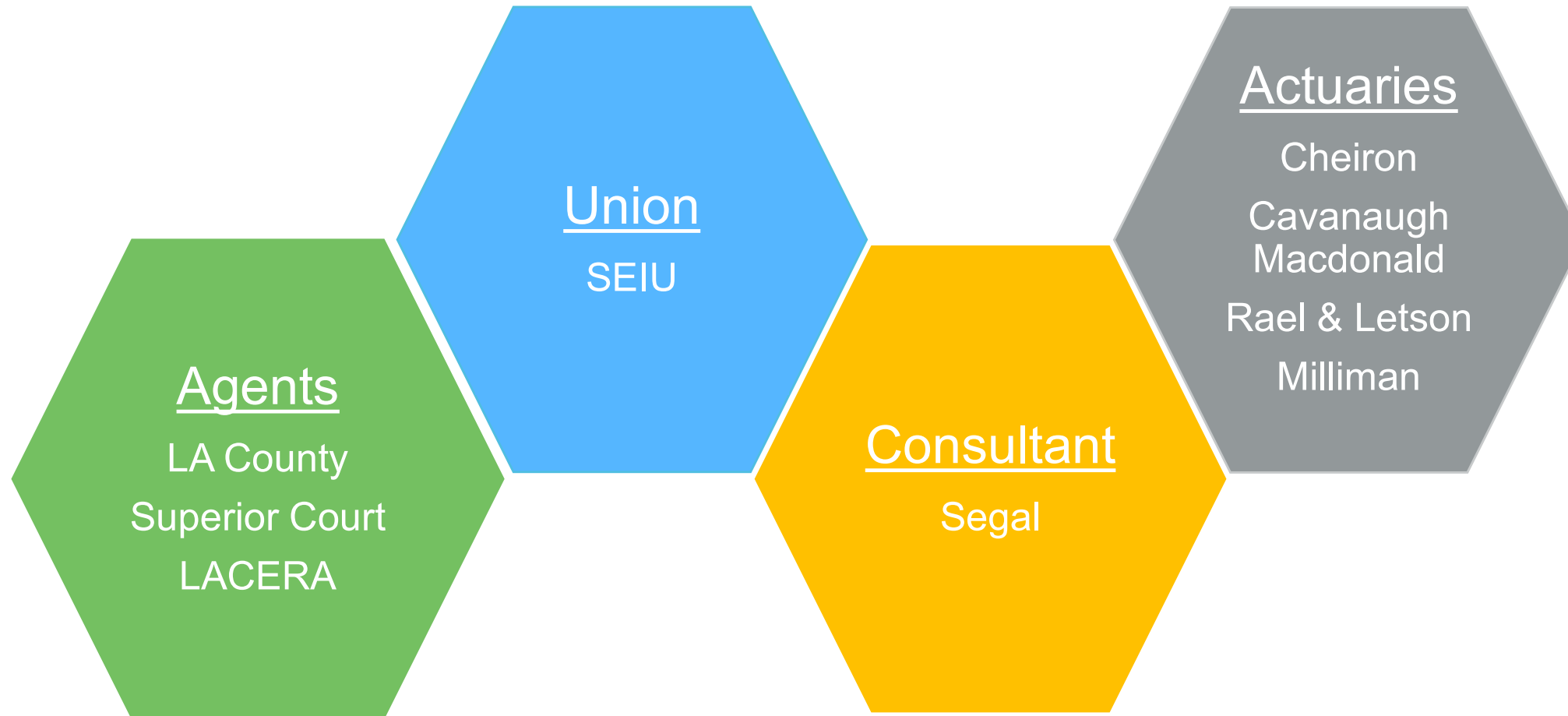
Process Summary

Process Summary

- July 1, 2018 Last OPEB Experience Study
- July 1, 2019 Last OPEB Funding Valuation
- July 1, 2020 Experience Study and July 1, 2020 Funding Valuation
- July 1, 2021 Next OPEB Funding Valuation
 - Continue with annual funding valuations
- July 1, 2023 Next OPEB Experience Study
 - Experience study returns to three-year cycle

Process Summary (continued)

Stakeholders



Process Summary (continued)

- Experience study assumptions
 - 2019 Retirement benefit related demographic and economic assumptions
 - 2020 Vested terminated members retirement rates
 - 2020 OPEB demographic assumptions
 - Health initial enrollment, health plan and coverage tier selection, and other OPEB assumptions
 - 2020 OPEB economic assumptions (discount rate and trend)
- Valuation assumption changes
 - Claim costs
 - Trend updated with July 1, 2021 health plan premiums
- Valuation based on
 - June 30, 2020 census data
 - July 1, 2020 and July 1, 2021 health plan premiums

Assumptions

Investment Return and Health Assumptions

The Investment Return Assumption was set in the 2020 Experience Study

- Agents that are prefunding through the OPEB Trust continue with an expected return of 6.00% based on Meketa's 2020 capital market assumptions.
- Agents not prefunding through the OPEB Trust have an expected return of 2.30% based on the County general assets. The expected return for these agents was previously 3.69%.

The following assumptions were updated after the 2020 Experience Study

- Medical and Dental/Vision claim costs
- Health cost trend rates with adjustments for July 1, 2021 health plan premiums
 - Medical
 - Dental/Vision

Investment Earnings by Agent

OPEB Trust Long Term Rate of Return (6.00%)

- Pre-funding Agents
 - LA County
 - LACERA
 - Superior Court

General Assets Rate of Return (2.30%)

- Outside District agents
 - SCAQMD
 - LAFCO
 - LACOE
 - LLCD

- OPEB Trust Long Term Rate of Return is unchanged from previous 2018 Experience Study
- Change from prior General Asset Rate of Return of 3.69% assumption to new assumption results in a de-minimis increase in the overall AAL and ADC

Valuation Summary Results

Analysis of Change

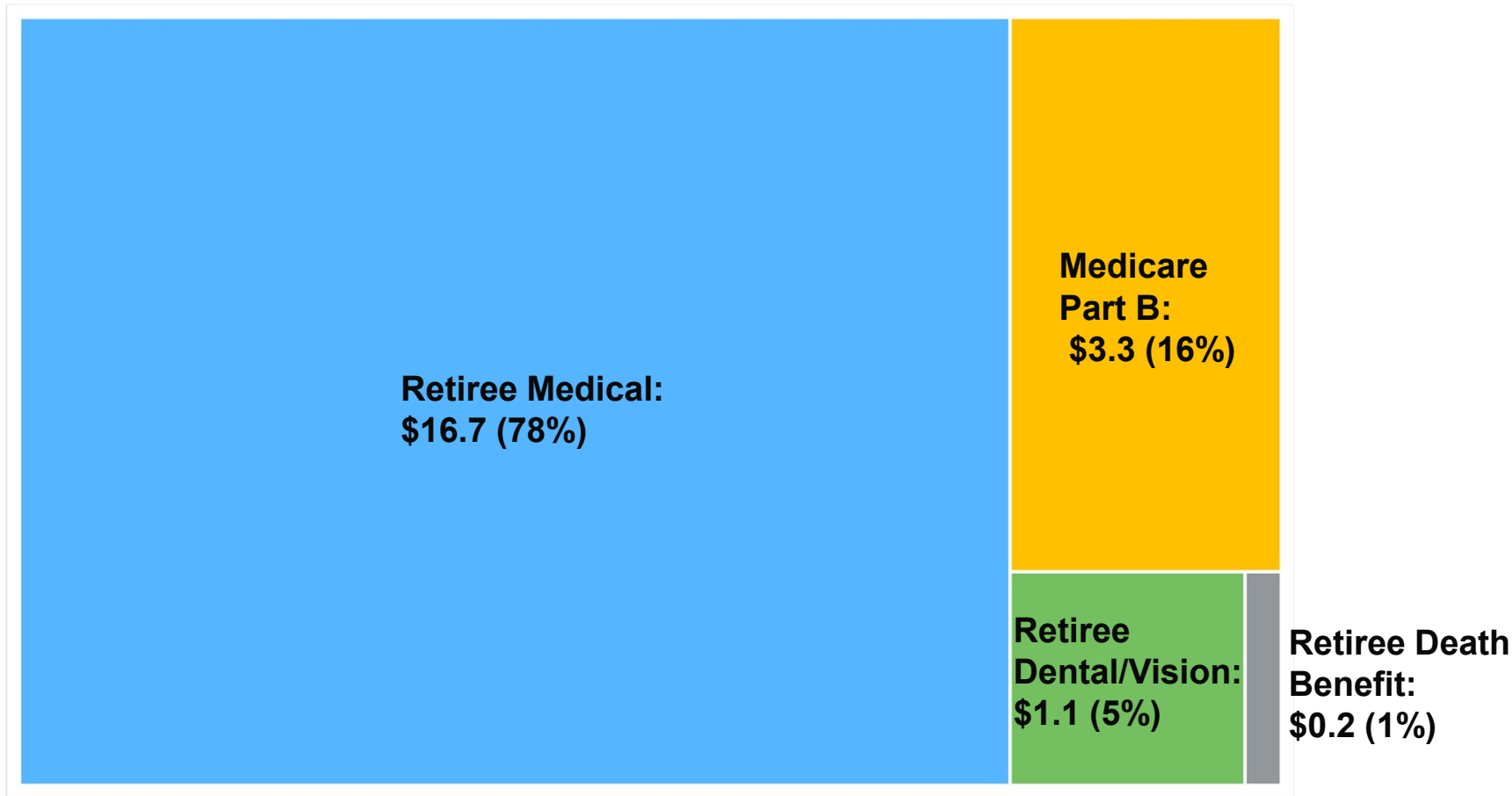
Sources of Change	Actuarial Accrued Liability	(Assets)	Unfunded Actuarial Accrued Liability	Normal Cost Rate	ADC Percentage
A. July 1, 2019 Valuation	\$ 20.75	\$ (1.24)	\$ 19.51	7.58%	18.87%
2020 OPEB Experience Study Changes	0.31	-	0.31	0.18%	0.36%
Expected One-year Change	1.25	(0.33)	0.92	0.00%	0.15%
B. July 1, 2020 Valuation Expected	\$ 22.31	\$ (1.57)	\$ 20.74	7.76%	19.38%
Claim Cost Experience	(0.16)	-	(0.16)	(0.06%)	(0.14%)
Trend Assumption (Gain)/Loss ⁽¹⁾	(0.84)	-	(0.84)	(0.25%)	(0.71%)
Other Experience (Gain)/Loss	(0.01)	-	(0.01)	(0.12%)	(0.39%)
Asset (Gain)/Loss	-	0.08	0.08	0.00%	0.04%
C. July 1, 2020 Valuation	\$ 21.30	\$ (1.49)	\$ 19.81	7.33%	18.18%

¹ Includes impact of July 1, 2021 renewals

All dollar amounts are expressed in billions.

Actuarial Accrued Liability by Benefit Type

The Total Actuarial Accrued Liability is \$21.3 Billion



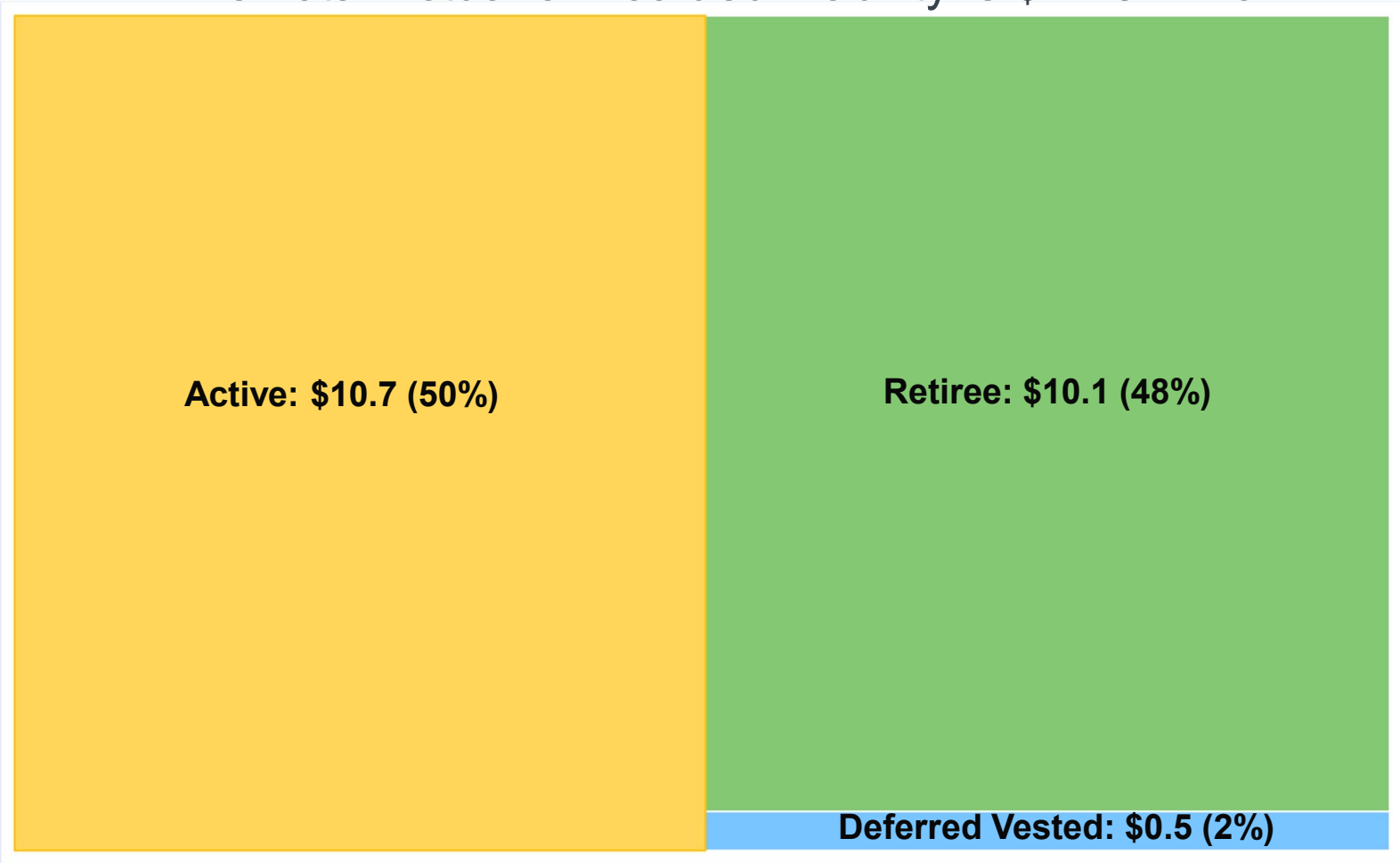
All dollar amounts are expressed in billions.



This work product was prepared solely for LACERA for the purposes described herein and may not be appropriate to use for other purposes. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. Milliman recommends that third parties be aided by their own actuary or other qualified professional when reviewing the Milliman work product.

Actuarial Accrued Liability by Member Status

The Total Actuarial Accrued Liability is \$21.3 Billion

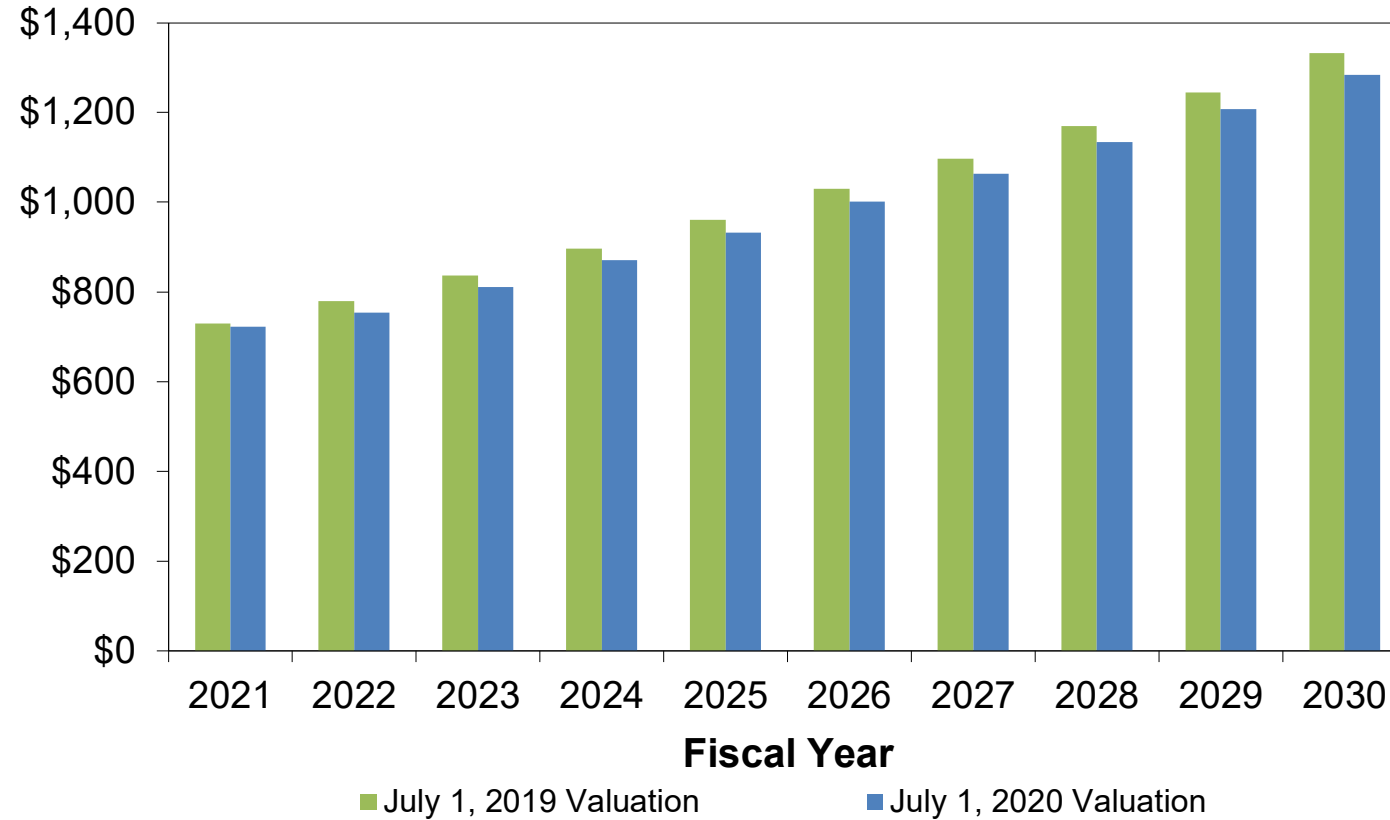


All dollar amounts are expressed in billions.



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Projected Paid Benefits



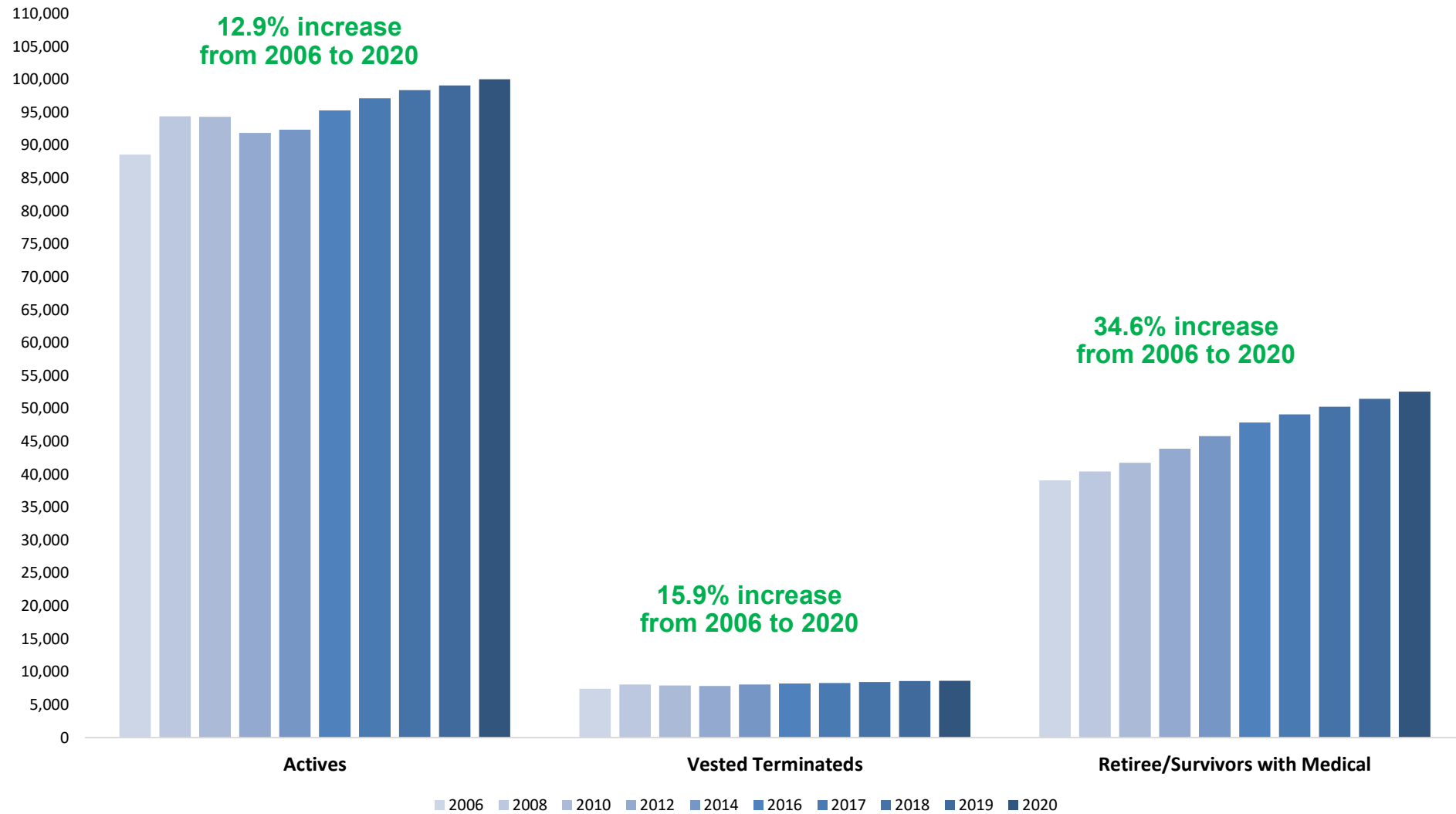
All amounts are expressed in millions of dollars.

Historical Information and Projections

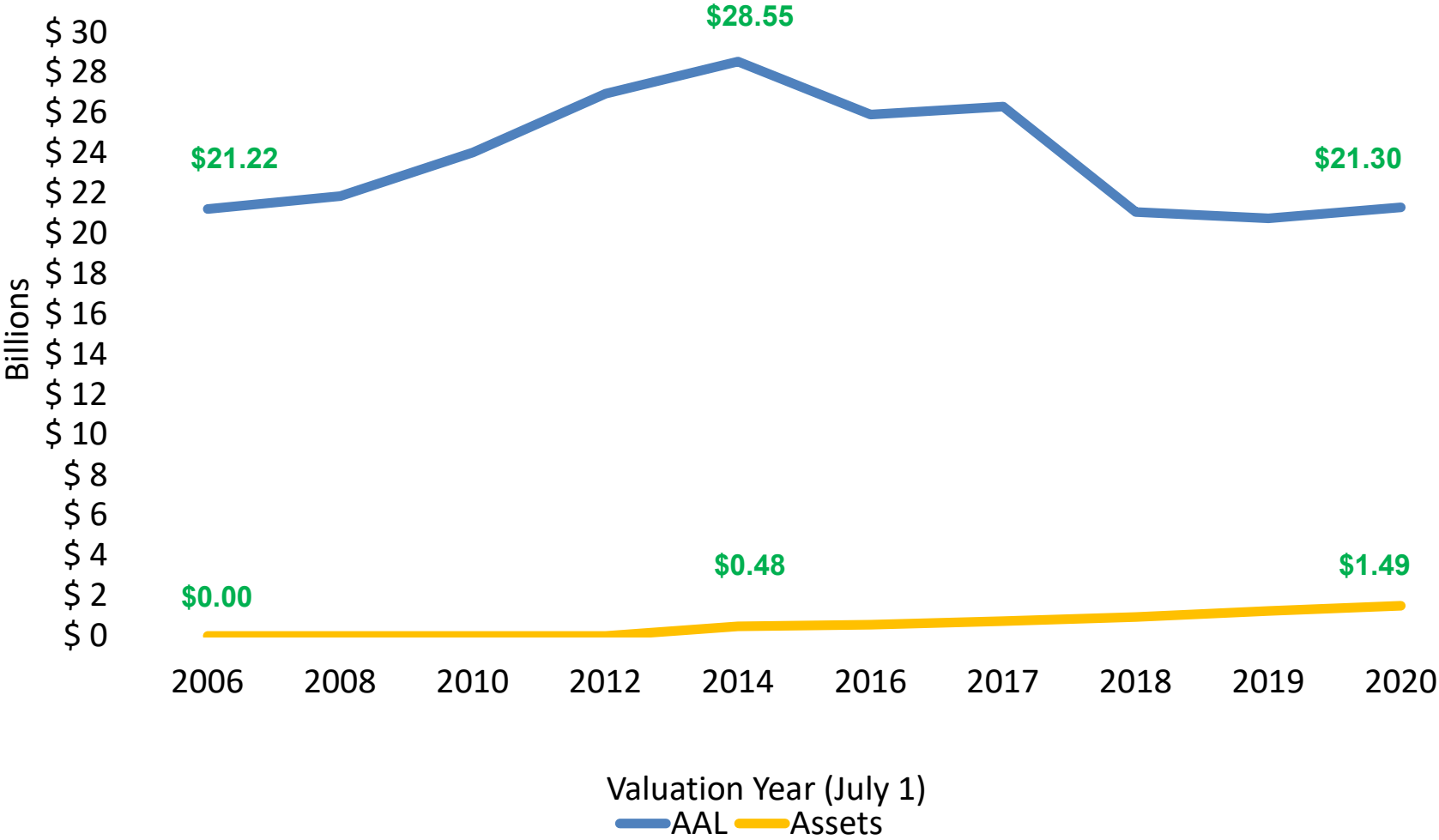
History of Changes

Valuation Year	Investment Return Assumption		Changes
	Prefunding Agents	Outside Districts	
2006	5.00%	5.00%	Initial OPEB Valuation and Segal actuarial review
2008	5.00%	5.00%	Investigation of Experience Study
2010	5.00%	5.00%	Investigation of Experience Study and Segal actuarial review
2012	4.35%	4.35%	2013 Investigation of Experience Study
2014	3.75%	3.75%	Initial Valuation with OPEB Trust assets
2016	4.50%	4.50%	Initial Valuation reflecting Tier 2, Investigation of Experience Study and Segal actuarial review
2017	4.50%	4.50%	Beginning of annual valuations
2018	6.00%	3.69%	Initial agent Valuation, 2018 Investigation of Experience Study and Cavanaugh Macdonald actuarial review
2019	6.00%	3.69%	ACA Excise Tax and Health Insurer Fee repealed
2020	6.00%	2.30%	2020 Investigation of Experience Study and Cavanaugh Macdonald actuarial review

Number of Members Increasing, Particularly Retirees



Actuarial Accrued Liability (AAL) and Assets

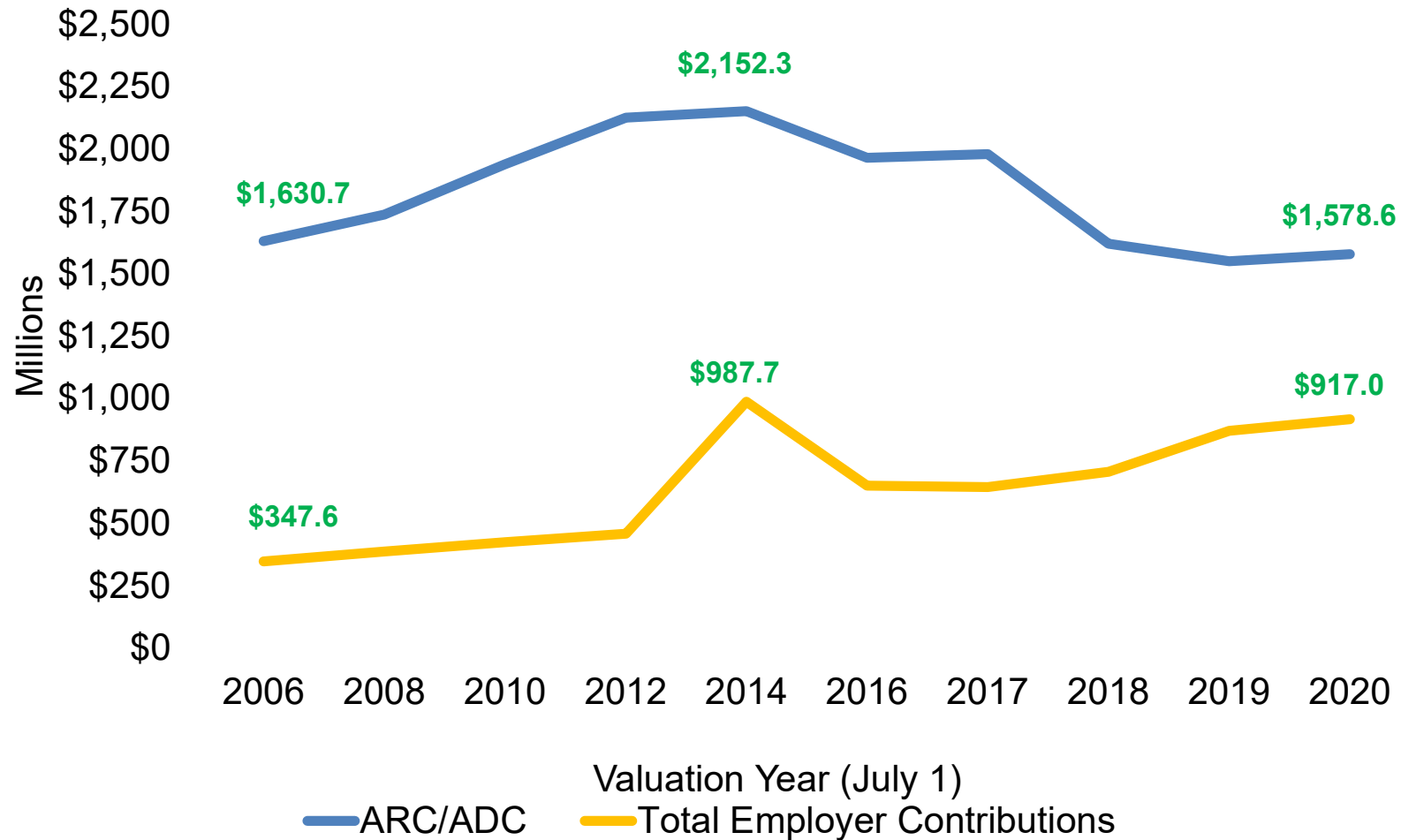


All amounts are expressed in billions of dollars.



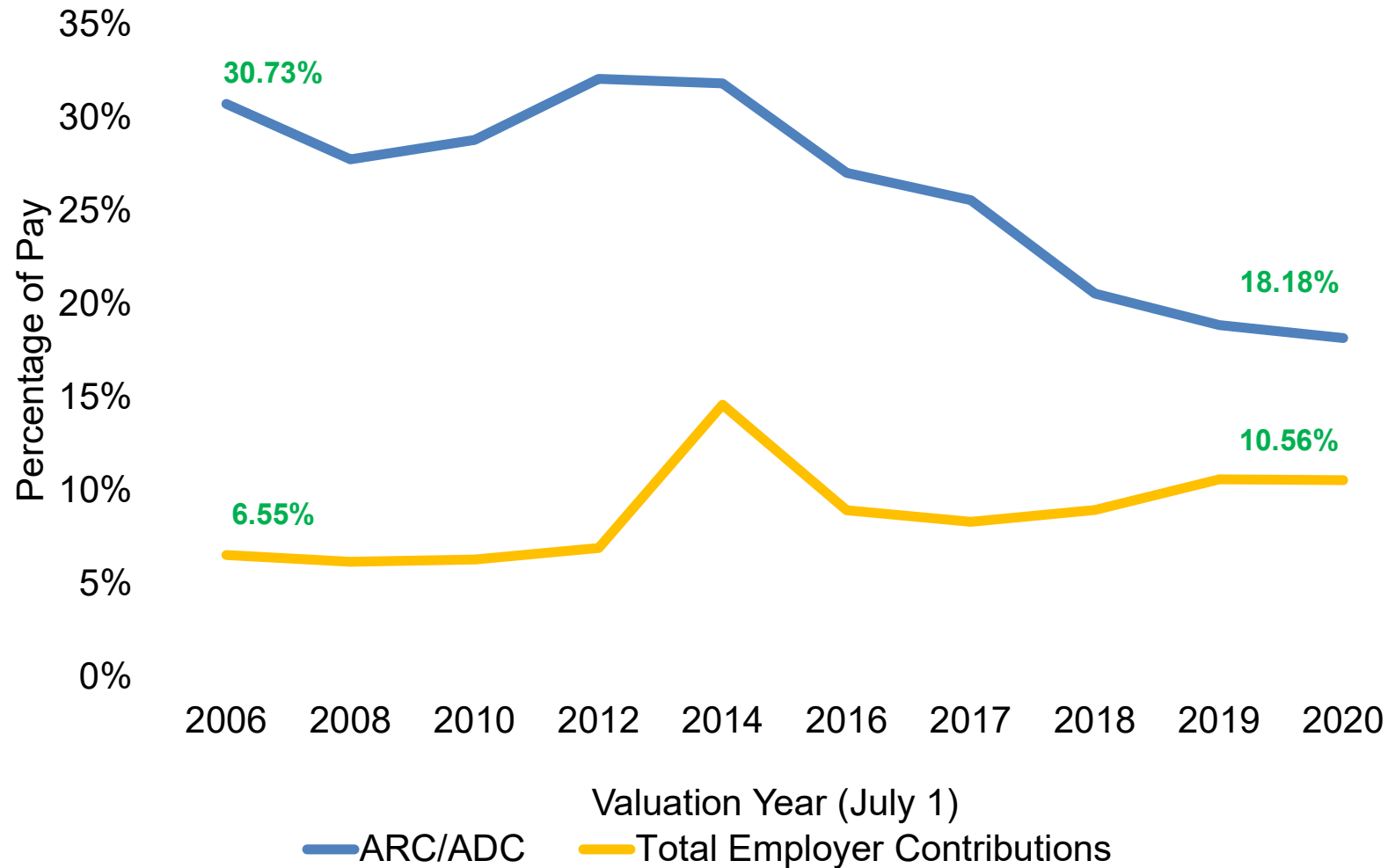
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ARC/ADC and Total Employer Contributions



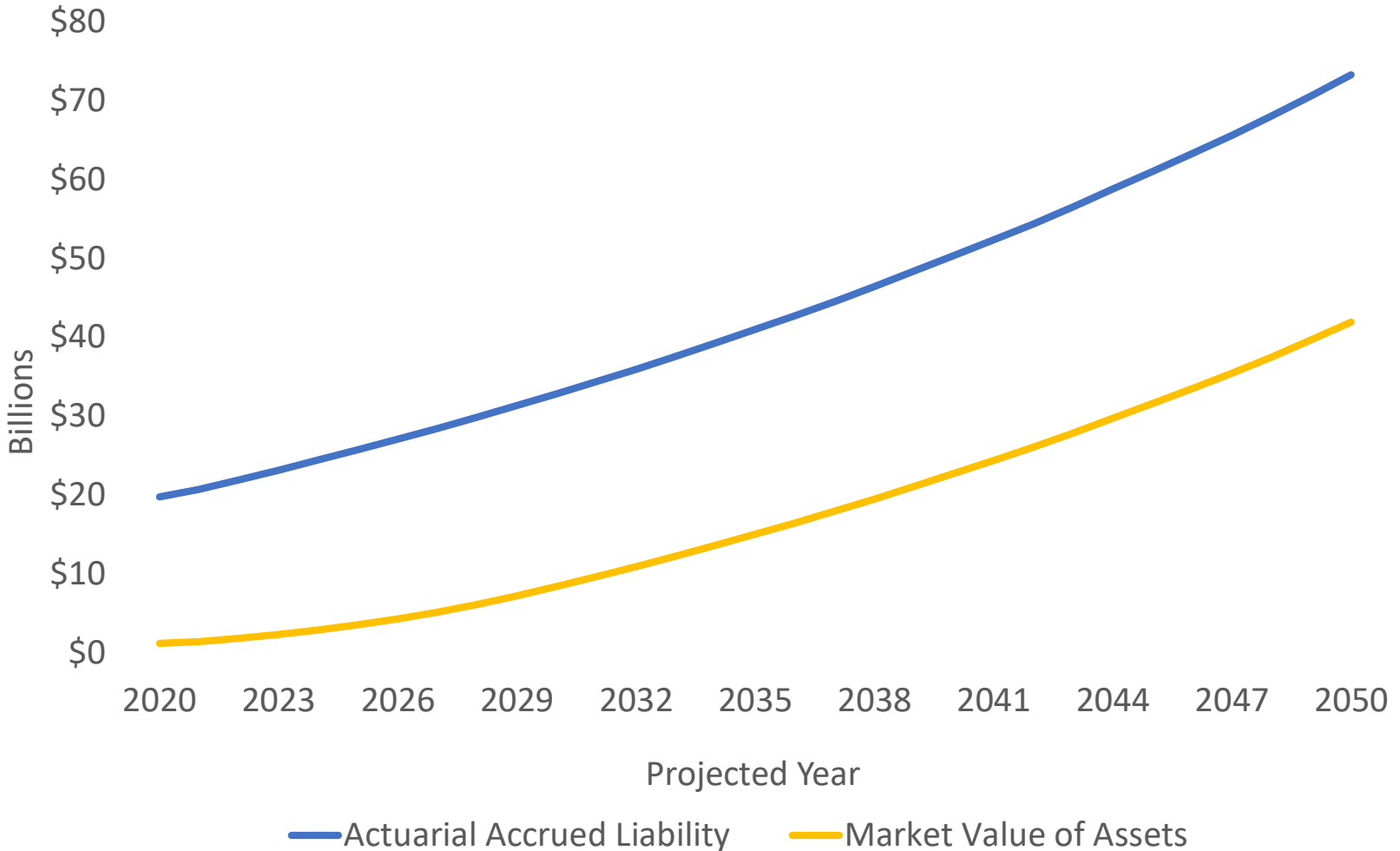
Total Employer Contributions include OPEB Trust and Custodial Fund employer contributions.
 Prior to 2017, Total Employer Contributions are projected benefit payments from OPEB Valuations.

ARC/ADC and Total Employer Contributions



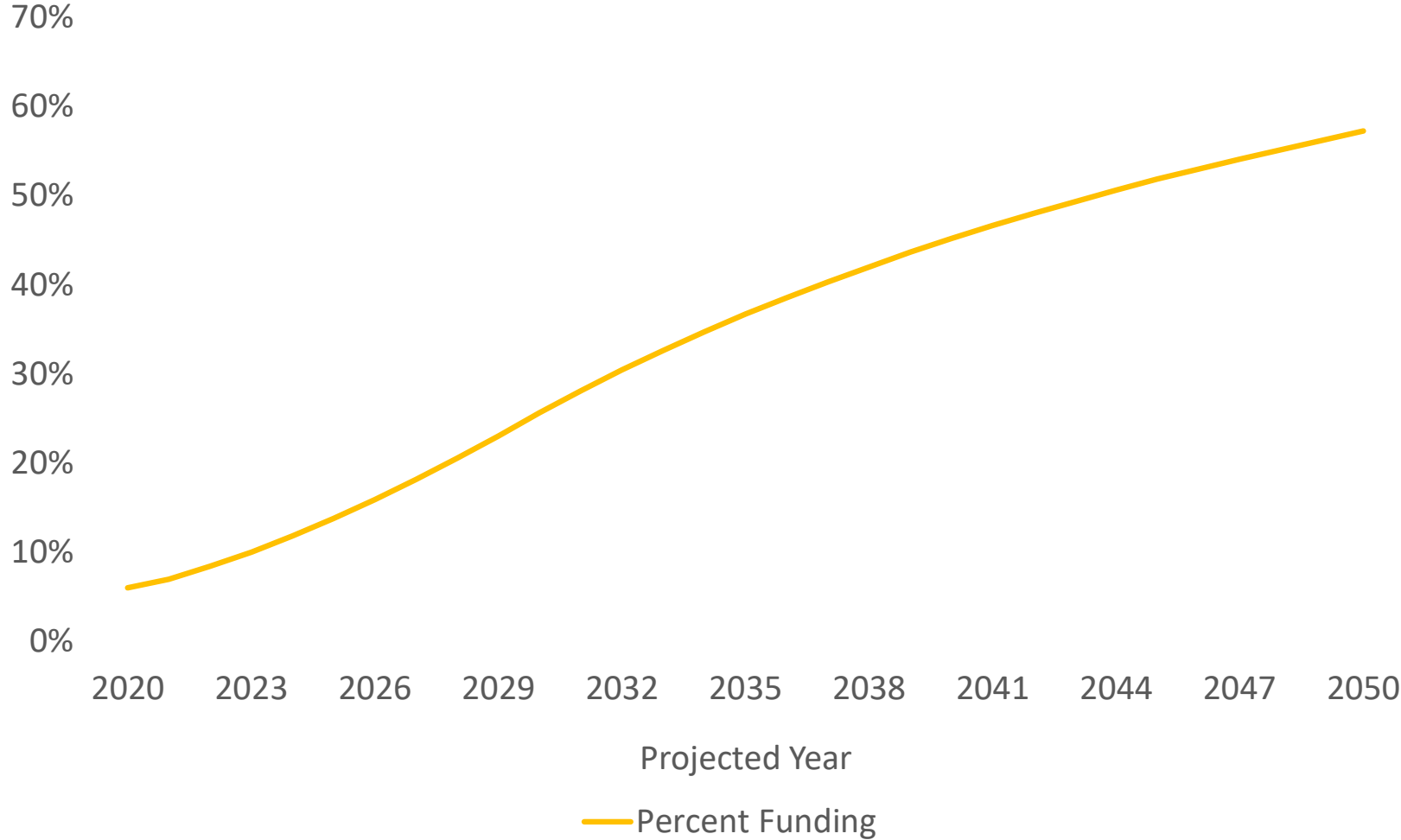
*Total Employer Contributions include OPEB Trust and Custodial Fund employer contributions.
Prior to 2017, Total Employer Contributions are projected benefit payments from OPEB Valuations.*

County Projected Actuarial Accrued Liability and Market Value of Assets

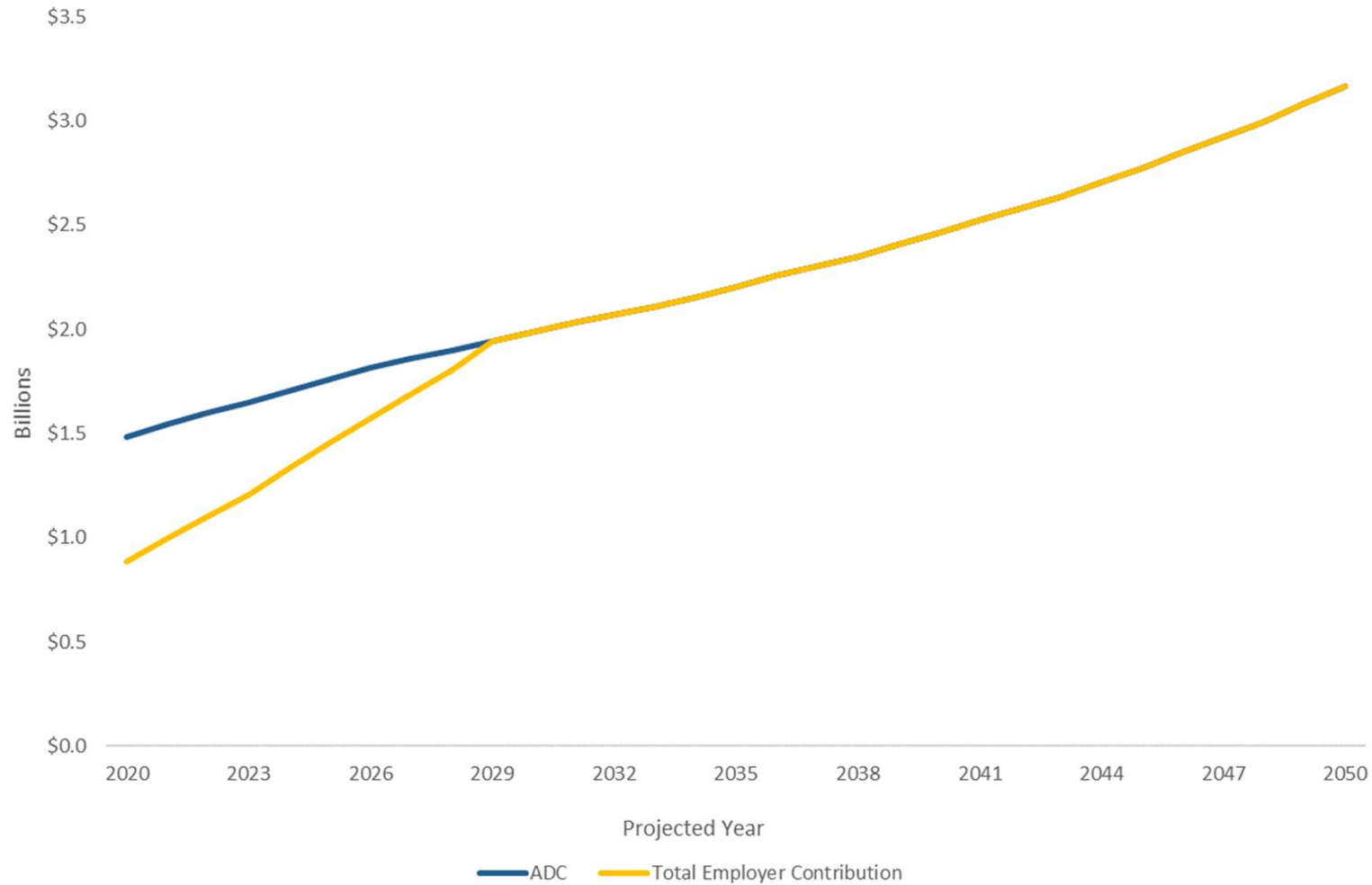


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County Projected Funded Ratio



County Projected ADC and Total Employer Contributions



Total Contributions include OPEB Trust contributions and the employer portion of Benefit Payments.



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Questions and Comments?

Cavanaugh Macdonald Review

Review Notes



- Assumptions/methods reviewed when Milliman conducted the Investigation of Experience
 - No issues
- Reviewed data work
 - Identified one issue with negligible impact
- Independently valued liabilities
 - Used independent coding and approaches as much as possible
 - Our results confirm that Milliman's work is reasonable
 - Provided some suggestions for possible refinement
- Milliman's work is providing LACERA with appropriate information

Appendix

Investment Earnings Approach

- The investment earnings assumption for Government Accounting Standards Board (GASB) accounting and funding used to be the same
 - Blend of expected return from the OPEB Trust and General Assets
 - Based on the percent of Annual Required Contribution (ARC) that was funded
- Now, the accounting and funding investment earnings assumptions are different
- New GASB statements now have a more prescribed approach for accounting
 - Based on a depletion date projection
 - Blend of expected return from the OPEB Trust and Bond Buyer GO rate
- For funding, using an approach consistent with actuarial standards for the discount rate assumption

Investment Return Background

- The prior Investment Return Assumptions were set in the 2018 Experience Study.
 - Included in the July 1, 2018 and July 1, 2019 OPEB Funding Valuations
 - Agents that are prefunding through the OPEB Trust had an expected return of 6.00% based on Meketa's 2018 capital market assumptions.
 - Agents not prefunding through the OPEB Trust had an expected return of 3.69% based on the County general assets.
 - Represent a small portion of the OPEB Program
- The determination was made that the anticipated schedule of OPEB contributions plus interest are anticipated to be adequate to pay benefit payments for the foreseeable future.
 - Based on the funding plan and historical OPEB Trust contributions
 - Independent Actuarial Reviewer recommendation
 - Applies to OPEB Trust participating employers

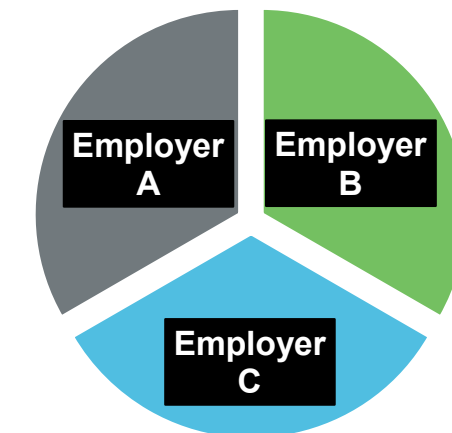
Investment Earnings for Each Agent

- Cost Sharing has combined assets with proportionate shares
- OPEB reporting changed from Cost Sharing to Agent effective July 1, 2018
- Pre-funding creates need for more explicit asset tracking
 - Employers have different funding policies
 - Necessitates an agent structure
- Agent structure partitions assets according to each employer's funding actions
- Each agent's investment earnings assumption for the funding valuation should be aligned with their funding policy
 - For agents that are pre-funding, the OPEB Trust return assumption is supported by actuarial standards
 - For agents that are not pre-funding, the County general fund investment earnings is used as an assumption

Cost Sharing Plan



Agent Plan



2020 Investment Earnings - OPEB Trust

- The OPEB Trust expected return is 6.00% rounded to the nearest quarter percent
- Based on Meketa's 2020 capital market assumptions and investment forecast model

Asset Class	Target Allocation (policy)		Weighted Average 10-Year Expected Real Rate of Return (After Expected 2.75% Inflation Rate) (Geometric)		
	4Q 2019	6/30/20 Actual		10 Year Expected Nominal Return	Standard Deviation
Growth	50.0%	50.6%	3.9%	6.8%	17.0%
Global Equity	50.0%	50.6%	3.9%	6.8%	17.0%
Credit	20.0%	19.8%	2.0%	4.8%	9.0%
High Yield Bonds	6.0%	5.9%	1.3%	4.1%	11.0%
Bank Loans	10.0%	9.9%	2.1%	4.9%	9.0%
Emerging Market Bonds (Local)	4.0%	4.0%	1.5%	4.3%	12.5%
Risk Reduction & Mitigation	10.0%	10.0%	-0.5%	2.2%	3.2%
Cash Equivalents	2.0%	1.6%	-0.8%	1.9%	1.0%
Investment Grade Bonds	8.0%	8.4%	-0.4%	2.3%	4.0%
Inflation Hedges	20.0%	19.6%	3.2%	6.1%	15.1%
TIPS	6.0%	6.0%	-0.5%	2.3%	7.0%
REITs	10.0%	9.6%	3.8%	6.6%	26.0%
Commodities	4.0%	4.0%	2.0%	4.9%	17.0%
Total	100.0%	100.0%	3.3%	6.1%	12.4%

Weighted Average Long-Term Expected Real Rate of Return: The long-term expected real rate on the OPEB Trust investments is based on inflation expectations and nominal return expectations developed by Meketa Investment Group for each asset class. In the case of the total portfolio and broad asset groupings (e.g., Growth, Credit), returns are calculated using a portfolio approach that first calculates nominal expected returns by incorporating target weights, nominal expected returns, and volatility and correlations estimates for each asset class, adjusted by the defined return period. Nominal expected returns for each portfolio or broad asset groupings are converted to real expected returns by adjusting them for inflation, using a base inflation rate assumption of 2.75%.

It is worth noting that a simple weighted sum of asset classes returns will not yield the total results shown on the table for the total portfolio and broad asset groupings, given the process followed to adjust for inflation, the compounding to a given time period, and the impact of volatility and correlations to the portfolio.

2020 Investment Earnings – General Assets

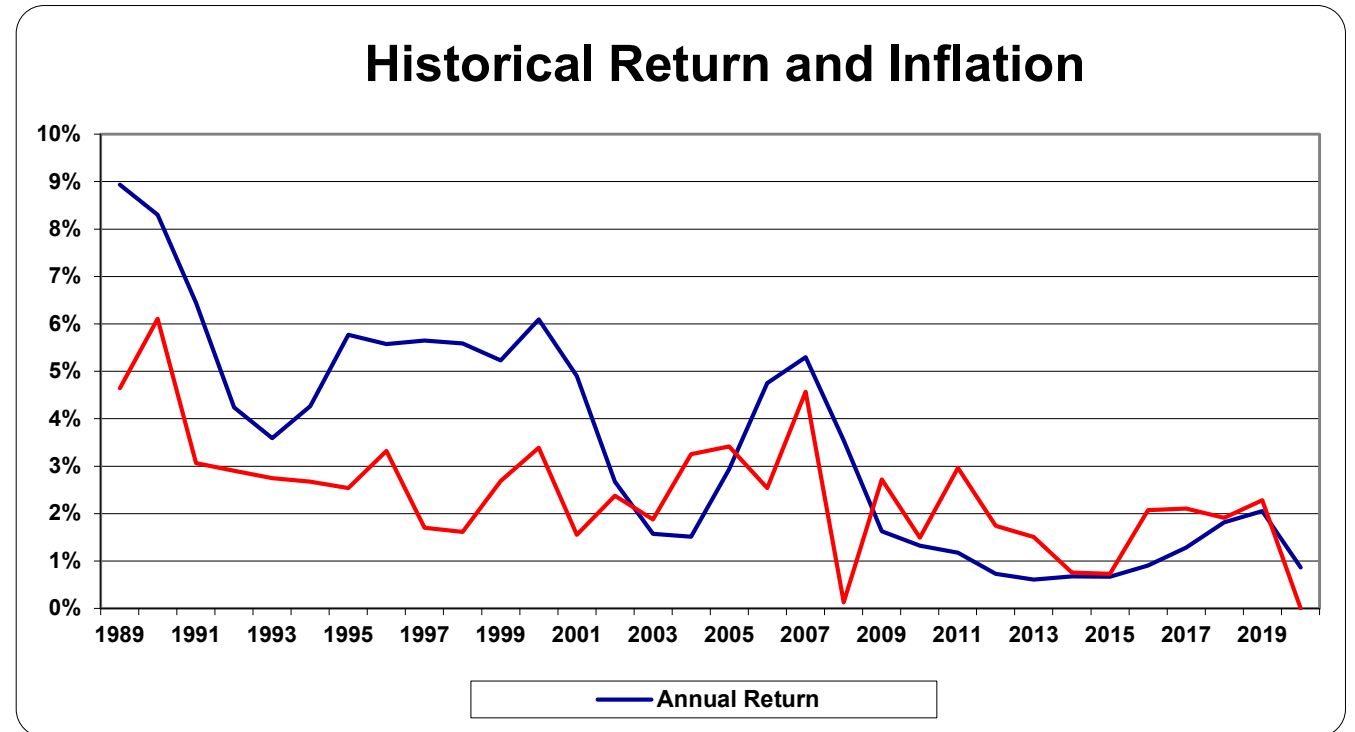
- Based on June 30, 2020 County General Fund balance sheet
- Assumption of 2.30% is within the building block approach range

Asset Class	Expected Arithmetic Nominal Return (30 yrs)	Asset Allocation
Cash	1.68%	27.66%
Short-term U.S. Bonds	2.56%	72.34%
Expected Arithmetic Return (30 yrs) ⁽¹⁾		2.32%
Expected Geometric Return (30 yrs) ⁽²⁾		2.30%

1. The expected arithmetic return is the average or “mean” long-term expected compound return based on the capital market assumptions and the asset allocation.
2. The expected geometric return is the “median” long-term expected compound return based on the estimated variability of the asset allocation. It is less than the expected arithmetic return because of the variability in future expected returns.

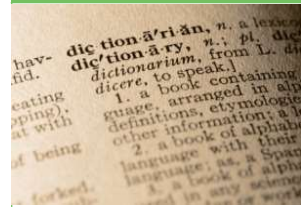
2020 Investment Earnings – General Assets Building Block Approach

- Real returns on County general assets from 1989 through 2019 averaged 1.0% per year
- However, current projections indicate that real returns of -0.65% to -0.25% are more likely going forward based on the current asset allocation
- With 2.75% inflation, the range is between 2.10% and 2.50%



Glossary

Glossary



The following definitions are excerpts from other actuarial organizations in the United States. In some cases, the definitions have been modified for specific applicability to LACERA. Defined terms are capitalized throughout this Appendix.

Affordable Care Act (“ACA”)	A law enacted with the goal of providing all Americans access to affordable health insurance.
Actuarial Accrued Liability (“AAL”)	That portion, as determined by a particular Actuarial Cost Method, of the Actuarial Present Value of postemployment plan benefits and expenses which is not provided for by future Normal Costs.
Actuarial Assumptions	Assumptions as to the occurrence of future events affecting OPEB costs, such as: mortality, termination of employment, disability, retirement; changes in medical costs; and other relevant items.
Actuarial Cost Method	A procedure for determining the Actuarial Present Value of OPEB program benefits and expenses and for developing an actuarially equivalent allocation of such value to time periods, usually in the form of a Normal Cost and an Actuarial Accrued Liability.
Actuarial Gain/ (Loss)	A measure of the difference between actual experience and that expected based on a set of Actuarial Assumptions during the period between two Actuarial Valuation dates, as determined in accordance with a particular Actuarial Cost Method.

Glossary (continued)

Actuarial Present Value	The value of an amount or series of amounts payable or receivable at various times, determined as of a given date by the application of a particular set of Actuarial Assumptions.
Actuarial Valuation	The determination, as of a valuation date, of the Normal Cost, Actuarial Accrued Liability, Actuarial Value of Assets, and related Actuarial Present Values for an OPEB plan.
Actuarial Value of Assets	The value of cash, investments and other property belonging to an OPEB plan, as used by the actuary for the purpose of an Actuarial Valuation. LACERA has adopted market value.
Amortization Payment	That portion of the ADC that is designed to recognize interest on and to amortize the Unfunded Actuarial Accrued Liability.
Actuarially Determined Contributions (“ADC”)	This is the employer's periodic contribution to a defined benefit OPEB plan, calculated in accordance with Actuarial Standards of Practice.
Annual Required Contributions (“ARC”)	This is the employer's periodic required contribution to a defined benefit OPEB plan, calculated in accordance with the set requirements for calculating actuarially determined OPEB information included in financial reports. This was a GASB 45 concept that is no longer used.

Glossary (continued)

Attribution Period	The period of an employee’s service to which the expected postretirement benefit obligation for that employee is assigned. The beginning of the attribution period is the employee’s date of hire. The end of the attribution period is the time of assumed exit from OPEB active member status.
Benefit Payments	The monetary or in-kind benefits or benefit coverage to which participants may be entitled under a post employment benefit plan, including health care benefits and life insurance not provided through a retirement program.
Entry Age Normal (“EAN”)	Actuarial Cost Method that allocates the present value of the projected benefits of each individual included in the valuation as a level percentage of the individual’s projected compensation between entry age and assumed exit (until maximum retirement age).
GASB 74	The statement that establishes financial reporting standards for postemployment benefit <u>plans</u> other than retirement programs.
GASB 75	The statement that establishes financial reporting standards for <u>employers</u> that sponsor postemployment benefits other than retirement programs.
Net OPEB Obligation	This is the cumulative difference since the effective date of this statement between annual OPEB cost and the employer’s contributions to the plan, including the OPEB liability (asset) at transition, if any, and excluding (a) short-term differences and (b) unpaid contributions that have been converted to OPEB related debt.

Glossary (continued)

Normal Cost (“NC”)	That portion of the Actuarial Present Value of OPEB plan benefits and expenses which is allocated to a valuation year by the Actuarial Cost Method.
Other Postemployment Benefits (“OPEB”)	This refers to postemployment benefits other than retirement program benefits, including healthcare benefits regardless of the type of plan that provides them, and all other postemployment benefits provided separately from a retirement program, excluding benefits defined as termination benefits or offers.
Present Value of Future Benefits (“PVFB”)	This is the value, as of the applicable date, of future payments for benefits and expenses under the Plan, where each payment is: <ul style="list-style-type: none">(a) Multiplied by the probability of the event occurring on which the payment is conditioned, such as the probability of survival, death, disability, termination of employment, etc.; and(b) Discounted at the assumed discount rate.
Projected Unit Credit (“PUC”)	Actuarial Cost Method that takes the actuarial present value of the projected benefits of each individual included in the valuation is allocated pro-rata to each year of service between entry age and assumed exit.

Glossary (continued)

Projected Benefits	Those OPEB plan benefit amounts which are expected to be paid at various future times under a particular set of Actuarial Assumptions, taking into account such items as the effect of advancement in age and past and anticipated future compensation and service credits.
Substantive Plan	The terms of the OPEB plan as understood by an employer that provides postretirement benefits and the employees who render services in exchange for those benefits. The substantive plan is the basis for the accounting for the plan.
Trend Rate	The rate of increase in per person health costs paid by a plan as a result of factors such as price increases, utilization of healthcare services, plan design, and technological developments.
Unfunded Actuarial Accrued Liability (“UAAL”)	The excess of the Actuarial Accrued Liability over the Actuarial Value of Assets.



Thank you

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Limitations and Reliances

The Milliman slides in this presentation are subject to the same data, methods, assumptions, and plan provisions as in the July 1, 2020 Experience Study report issued July 8, 2021 and the July 1, 2020 Valuation report issued July 16, 2021.

- All caveats, limitations, and certifications from those reports apply to the Milliman slides in this presentation.
- The caveats, limitations and certifications from those reports do not apply to the Cavanaugh Macdonald slide.



Robert Schmidt, FSA, EA, MAAA
Principal and Consulting Actuary



Janet Jennings, ASA, MAAA
Consulting Actuary



July 28, 2021

TO: Each Trustee,
Board of Retirement

FROM: Alan J. Bernstein, Chair
Board of Retirement

SHC
Santos H. Kreimann
Chief Executive Officer

FOR: August 4, 2021 Board of Retirement Meeting

SUBJECT: Strategic Planning Consultant – Approval of Request for Proposals (RFP)

RECOMMENDATION

That the Board of Retirement review and approve issuance of a Request for Proposals for a Strategic Planning Consultant.

LEGAL AUTHORITY

The Board of Retirement has plenary authority and exclusive fiduciary responsibility for administration of the LACERA system under Article XVI, Section 17 of the California Constitution. This authority includes the ability to engage consultants to assist in the business of the system, such as strategic planning.

DISCUSSION

During the June 2, 2021 Board of Retirement (BOR) meeting, LACERA staff presented the BOR with a proposed strategic planning process and timeline, and requested authorization to issue a Request for Proposal (RFP), evaluate the responses to the RFP, and select a Strategic Planning consultant to assist LACERA in developing and implementing a sustainable and ongoing Strategic Planning process and a strategic plan document.

Through BOR discussion, it was determined that the BOR Chair and LACERA Chief Executive Officer should work collaboratively throughout the Strategic Planning process. The first step in this process is issuance of a Request for Proposal (RFP) and selection of a Strategic Planning Consultant to assist LACERA and the BOR in a new strategic planning process and preparation of a new strategic plan.

LACERA's approach to strategic planning is evolving, and the successful respondent to this RFP will assist in shaping that evolution. This RFP will be issued by the BOR to obtain input for the Board, executive management, staff, members, and stakeholders on the planning process and plan development in connection with the administrative priorities that are the focus of the BOR

to improve operations and meet member needs while also recognizing the need to include and support the work and priorities of the Board of Investments and the Investment Division.

The attached RFP provides a clear scope of work and outlines the needs of the BOR and LACERA staff. Although the RFP is not meant to be prescriptive, we would like the proposal of respondents to leverage their knowledge and offer strategic planning processes, goals, and objectives.

LACERA anticipates that respondents, including the lead consultant committed to provide services to LACERA, will have at least three (3) to five (5) years providing strategic planning process development and plan preparation services to public and private member service organizations and institutional investors. Experience in advising other public pension systems is desirable. The RFP is written to encourage diverse candidates as well as emerging firms through flexible and holistic selection criteria.

The expected time frame for completion of the scope of work is not prescribed at this time; it will be developed with the successful respondent, keeping in mind a meaningful outcome, quality, cost, and efficiency. As a guide, LACERA preliminarily estimates that the project, including both phases, may take up to six months.

CONCLUSION

We ask that the BOR review the proposed Strategic Planning Consultant RFP and approve staff to issue the RFP.

Attachment

Los Angeles County Employees Retirement Association Request for Proposals for Strategic Planning Consultant

I. INTRODUCTION

The Los Angeles County Employees Retirement Association (LACERA) invites proposals from experienced professionals in response to this Request for Proposals (RFP) to provide strategic planning consulting services to its Board of Retirement and executive management. The selected respondent will partner with LACERA, the Board, and management, as well as other staff, to educate all parties on best practices in strategic planning, develop an effective and inclusive strategic planning process, and then facilitate implementation of the agreed process through the preparation of a fully developed plan that reflects LACERA's Mission, Vision, and Values and organizational priorities. The agreed upon process should include the establishment of a sustainable oversight and measurement process for on-gong strategic planning.

The process and plan will include all aspects of LACERA's administration that are within the authority of LACERA's Board of Retirement. The process must also respect, reflect, and take into account separate strategic plans developed by LACERA's Board of Investments and the Chief Investment Officer, given their specific authority over investment-related issues since these plans often utilize the same resources.

II. BACKGROUND

LACERA is a defined benefit public pension fund established to administer retirement benefits to employees of the County of Los Angeles and other participating agencies. LACERA operates as an independent governmental entity separate and distinct from Los Angeles County. LACERA has over 425 dedicated employees to administer pension benefits for active, deferred, and retired members, oversee the County's retiree health benefits program, and manage the fund's investments. LACERA manages over \$70 billion in fund assets to support the pensions of over 184,000 members, including over 67,000 benefit recipients. LACERA's annual pension benefits payments to its retirees total approximately \$3 billion. The retiree healthcare program has over 52,000 member participants and a supporting Other Post-Employment Benefits (OPEB) Trust with over \$2.1 billion in assets.

Our members rely upon LACERA to provide a secure lifetime retirement at the conclusion of their careers of public service to the people of Los Angeles County in many different general and safety positions that support the community. Our members also rely on LACERA to continue providing lifetime benefits to eligible survivors. LACERA is the largest county pension system in the United States, the fourth largest public system in California, and one of the largest public pensions at any level in the country. LACERA is both a member service organization serving its members and an institutional investor of assets for the long term to provide benefits for our members and their beneficiaries. The successful respondent will have an appreciation for and the knowledge, perspectives, and judgment to assist in strategic planning to support the administrative needs of the entire organization.

LACERA's stakeholders include: our plan sponsor, the County of Los Angeles; other participating agencies; active, deferred, and retired members; LACERA's employees; employee and member organizations; and the public. LACERA emphasizes transparency, accountability, and values of effective and positive communication and positive relationships with our stakeholders.

LACERA'S MISSION, VISION, AND VALUES

Mission: To Produce, Protect, and Provide the Promised Benefits

Vision: Excellence, Commitment, Trust, and Service

Values: Professionalism, Respect, Open Communication, Fairness, Integrity, and Teamwork (PROFIT)

LACERA'S GOVERNING BOARDS

Board of Retirement (BOR) – This nine-trustee Board, with two alternates, is responsible for the overall management of the retirement system. Under the policy guidance of the BOR, LACERA strives to create innovative ways to streamline and expedite retirement processes, integrate new technologies, and introduce new member services options and upgrades. The strategic planning consultant selected through this RFP will work with the Board of Retirement, as well as executive management, staff, and the Board of Investments, as needed. This RFP is issued by the Board of Retirement.

Board of Investments (BOI) – This nine-trustee Board is responsible for establishing LACERA's investment policy and objectives and overseeing the investment management of the fund. The BOI diversifies fund investments to maximize the rate of return and minimize the risk of loss; the Board also oversees actuarial services to assist in the setting of employer and employee contributions to assure the long-term safety of LACERA's assets.

The two Boards share joint responsibility for LACERA's budget, personnel classifications and compensation, and certain other issues. The Boards, and their trustees, have a fiduciary duty of prudence and loyalty to administer the system to assure the prompt delivery of benefits and related services to members and beneficiaries. In performing their fiduciary duty of loyalty, the Boards must act according to a three-pronged legal formula that balances the interests of LACERA's stakeholders: (1) solely in the interest of providing benefits to members and beneficiaries, (2) to minimize employer contributions, and (3) to defray the expenses of administering the Fund. The Board's duty to members and their beneficiaries takes precedence over any other duty. Under the duty of prudence, the trustees, must discharge their duties with the care, skill, prudence, and diligence that a prudent fiduciary familiar with the matters and the circumstances of each particular decision would use in the conduct of a similar enterprise with like aims.

Each Board includes four trustees elected by active general and safety members and retirees, four trustees appointed by the Los Angeles County Board of Supervisors, and the County Treasurer and Tax Collector, who sits ex officio on both Boards. The Board of Retirement also includes two elected safety and retiree alternate trustees. The balanced and diverse composition of the Boards ensures a broad range of perspectives.

For additional information about LACERA, respondents are encouraged to access the resources available on LACERA.com.

MANAGEMENT STRUCTURE

LACERA's Chief Executive Officer leads the organization's operations, supported by a Deputy CEO and two Assistant Executive Officers. The organization includes fourteen divisions, each led by a separate manager: Administrative Services; Benefit Services; Communications; Disability Litigation; Disability Retirement Services; Financial and Accounting Services; Human Resources; Information Systems; Internal Audit; Investments; Legal Services; Member Services; Quality Assurance; and Retiree Healthcare. In addition to the Board and executive management, LACERA anticipates that the division managers, as well as other staff from the divisions, will be involved in the new strategic planning process.

CURRENT STRATEGIC PLANNING PROCESS

LACERA's last strategic plan was adopted in 2017. In 2017, the Boards formed a Joint Organizational Governance Committee, which under its Charter (as revised and restated in May 2019), is to provide oversight and guidance on the strategic plan and budget and makes recommendations on these matters to the full Boards. LACERA operates on a July 1 to June 30 fiscal year. The Boards, management, and staff consider strategic objectives in each fiscal year budget approval.

LACERA's approach to strategic planning is evolving, and the successful respondent to this RFP will assist in shaping that evolution. This RFP is issued by the Board of Retirement to obtain input for the Board and executive management on the planning process and plan development in connection with the administrative priorities that are the focus of that Board to improve operations and meet member needs while also recognizing the need to include and support the work and priorities of the Board of Investments and the Investment Division.

II. SCOPE OF SERVICES, DELIVERABLES, AND REQUIRED CORE SKILLS

LACERA seeks to engage a consultant to assist in a new strategic planning process and preparation of a new plan. The purpose of this RFP is to engage a consultant to assist the Board of Retirement and management with two phases of work, including, first, developing a new strategic planning process and, second, guiding the implementation of the new process through to completion of a new plan. The specific process to be developed by the consultant is not prescribed by LACERA. LACERA expects the consultant to use their knowledge, perspective, and judgment to evaluate the current planning process and LACERA's needs based on input from the Board of Retirement, Board of Investments, management, and staff, consider the 2017 plan, the 100-Day Management Report dated May 2020, current ongoing initiatives, best practices, and any additional information collected during the evaluation, make findings, and recommend a process for the organization. Following approval of the planning process, the consultant will assist LACERA in applying the process in the development of a new strategic plan.

The consultant's scope of work will include the following:

- A. Review and assessment, through documents and discussion, of LACERA's historical strategic planning process and past strategic plans, including the plan approved in 2017, other historical strategic planning communications in annual budget presentations and other contexts, Board and JOGC Charters and other LACERA governance documents, policies, and procedures as they relate to the strategic

planning process and past strategic plans, the current Chief Executive Officer's 100-Day Management Report dated May 2020, the 2021 Employee Engagement Survey results, Board and Committee agenda packets, current ongoing initiatives, and other documents reflecting the activities, goals, and priorities of the Boards, management, and staff.

- B. Survey of peer pension fund best practices in strategy planning process and plan content and documentation.
- C. Attendance at Board of Retirement meetings and interviews, surveys, and other communications with individual Board trustees to communicate with the Board concerning its goals, objectives, and perspectives, and presentation of the final process document and the final strategic plan at Board meetings. Communication with the Board of Investments and its trustees, as determined appropriate, to ensure proper consideration of its goals and needs in providing administrative support for that Board and the Investment Division.
- D. Interviews and discussions with executive management to understand management's goals, objectives, and perspectives with respect to the planning process and development of the strategic plan.
- E. Interviews with division managers with respect to the planning process and development of the strategic plan.
- F. General education for the trustees and management staff on strategic planning including but not limited to the purpose, how it relates to budgeting, the definition of planning, the need for a guiding planning process and framework, and best practices in general.
- G. Recommend and implement a process for obtaining input and involvement from other LACERA staff at various levels, including but not limited to consideration of focus groups, workshops, surveys, select interviews, and other tools as deemed appropriate, with respect to the planning process and development of the strategic plan.
- H. Recommend and implement an approach, including but not limited to consideration of tools such as those listed in connection with staff as described in Section G above, for obtaining input and involvement from other LACERA stakeholders, including members, the plan sponsor and participating agencies, stakeholder organizations, with respect to the planning process and development of the strategic plan.
- I. Facilitate a SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis to assist in the strategic planning.
- J. Review and assessment of LACERA's Mission, Vision, and Values, and recommendations for improvements.

- K. Align the strategic planning process with LACERA's budgeting process. LACERA is currently in the process of obtaining a separate consultant to help LACERA review and revise our budget and budget process, as well as selecting a budget software package. The successful respondent may be required to work together with the budget consultant as they help us develop a budget and strategic planning process that fit together and are designed on best practices.
- L. Development of a recommended strategic planning process and supporting process documents, including a report explaining and justifying the recommended process and including recommendation of any necessary adjustment to current governance documents, policies, and procedures, and presentation of the recommended process to the Board of Retirement (and the Board of Investments if deemed appropriate). The planning process will include evaluation of internal administrative processes, quality, effectiveness, efficacy, and efficiency, consideration of future opportunities and technologies to, for example, improve internal processes and provide service or self-service for LACERA's members in an environment of increasing technology, and talent management and training.
- M. Development of recommended strategic plan elements and format to provide a plan template for future use.
- N. Guide the implementation of the new strategic planning process and plan template, once approved, through development of a new strategic plan for LACERA. LACERA expects that the new plan will be based on and include: (1) LACERA's Mission, Vision, and Values; (2) SMART (specific, measurable, achievable, realistic, and time-limited) goals; (3) Objectives; (4) Strategies; (5) Tactics, (6) Responsible parties and roles; (7) Resources, (8) Desired outcomes; and (9) Performance metrics.
- O. Development of templates for a scorecard or other measurement tools based on industry best practices to be used during the period of the strategic plan for evaluation of organizational performance and achievement of plan objectives.
- P. Assess and recommend project planning tools and methodology as part of strategic plan development and implementation, such as, for example, utilizing a Gantt chart to provide a phased timetable for completion of the strategic planning process development and then separately completion of the development of the new strategic plan.
- Q. Assist in other strategic planning process and plan issues, as requested.

The expected time frame for completion of the scope of work is not prescribed at this time; it will be developed with the successful respondent, keeping in mind a meaningful outcome, quality, cost, and efficiency. As a guide, LACERA preliminary estimates that the project, including both phases, may take up to six months.

Core skills of the successful consultant include: comprehensive knowledge, understanding,

and demonstrated ability in strategic processes, process development, strategic plans, and plan preparation and content for member service organizations and institutional investors, including public pensions; ability to clearly communicate with the Board of Retirement, Board of Investments, management, and staff, orally and in writing; ability to manage difficult conversations and constructively resolve competing points of view; sound judgment; the ability to work well with and maintain the confidence of the Boards, management, and staff; and the ability to deliver services in an efficient, timely, and cost effective manner.

LACERA anticipates that respondents, including the lead consultant committed to provide services to LACERA, will have at least five (5) to seven (7) years providing strategic planning process development and plan preparation services to public and private member service organizations and institutional investors. Experience in advising other public pension systems is desirable. However, as discussed in Section III.F below, LACERA encourages submission by all candidates who possess the demonstrated experience and judgment to perform the scope of work, with regard to a rigid years of experience requirement.

III. RFP PROCESS

This RFP and other relevant information related to the RFP, including addenda, modifications, answers to questions, and other updates, will be posted on the RFPs page of LACERA.com. Additional background information about LACERA may also be found on LACERA.com.

A. Calendar, Expected but Subject to Change *[Dates to be inserted.]*

Issuance of RFP

Written Questions and Requests for Clarification Due

Responses to Questions Posted

Proposals Due

Finalist Interviews

Estimated Final Selection and Approval by the Board of Retirement

B. Communication and Questions

Respondents are encouraged to communicate any questions regarding this RFP by the deadline stated above in the RFP Calendar. Questions should be sent in writing only via email to _____, at ____@lacera.com. Questions and answers will be posted at LACERA.com by the date stated in the RFP Calendar.

C. Errors in the RFP

If a respondent discovers an ambiguity, conflict, discrepancy, omission or other error in this RFP, notice should be immediately provided to ____@lacera.com. LACERA is not

responsible for, and has no liability for or obligation to correct, any errors or omissions.

D. Addenda

Modifications or clarifications of the RFP, if deemed necessary in LACERA's discretion at any time during the RFP process, will be made by addenda to the RFP and posted on LACERA.com.

E. Delivery of Submissions

Submissions must be delivered in PDF format via email to _____@lacera.com by the due date stated above in the RFP Calendar. In addition, respondents must send three (3) hard copies of their submissions for delivery by the due date stated in the RFP Calendar addressed to:

LACERA
Attention: _____

300 North Lake Avenue, Suite 650
Pasadena, CA 91101

See the Notice Regarding the California Public Records Act and Brown Act in Section IV.B of this RFP for information regarding redactions and disclosure.

F. Proposal Format and Content

All responses to this RFP should follow the format described in this Section III.F. When requested, please provide details and state all qualifications or exceptions. All information provided should be concise and clearly relevant to the qualifications to serve as LACERA's strategic planning consultant.

Cover Letter

The cover letter must provide a statement affirming that the signatory is empowered and authorized to bind the respondent to an engagement agreement with LACERA and represents and warrants that the information stated in the proposal is accurate and may be relied upon by LACERA in considering, and potentially accepting, the proposal.

Executive Summary

In this section, an overview should be provided of the respondent's background, experience, and other qualifications to serve as LACERA's strategic planning consultant, and respondent's approach to providing services to LACERA.

Experience and Approach

The proposal must provide a detailed statement of the respondent's experience in providing strategic planning process and plan development services to public and private sector member service and institutional investors, including, if applicable, other public pension

systems. The response should keep in mind the evaluation criteria stated in Section III.I. LACERA's goal in the RFP process is to obtain an understanding of each respondent's experience across the full spectrum of strategic planning process development and plan development issues may arise in the representation of LACERA and the type of work and working relationship LACERA can expect from the respondent. Examples of strategic planning process and plan development work should be included. The relevance of all stated experience to representation of LACERA should be explained.

LACERA is interested in a respondent's experience and approach in analyzing such issues, interfacing with trustees and staff, communicating with governing bodies, management, staff, and stakeholders, managing difficult conversations and differing perspectives, and preparation of strategic process and plan documents. LACERA is interested in how the respondent differentiates themselves from other consultants offering similar services.

LACERA encourages respondents to provide written samples of relevant work product, which may be redacted as deemed appropriate.

The proposal must also include a detailed proposed project plan for Phase 1 (strategic planning process development) and Phase 2 (preparation of strategic plan) of the project, including all elements of the scope, services, and deliverables as described in Section II above.

While demonstrated experience and a sound approach in strategic planning is necessary, LACERA encourages all candidates who can demonstrate the ability to effectively perform the scope of work to respond, without regard to a rigid number of years or type of strategic planning experience. In selecting the successful respondent, LACERA will evaluate the experience and approach of all respondents holistically, including consideration of judgment, perspective and thought, creativity, diversity of backgrounds, and fit with our organization, as well as years and type of experience.

Assigned Professionals

The proposal must state the name of the lead consultant and all other professional staff expected to be assigned to LACERA work, including a detailed profile of each person's background and relevant individual experience and the ability of the professionals collectively to function together as a team and also to work effectively with LACERA's Boards and staff in performing the scope of services. In evaluating respondents' proposed team members, LACERA will apply the same holistic approach described in the Experience and Approach section immediately above.

Diversity is a core LACERA value, and therefore the proposal must specifically address the diversity of the proposed team members in meaningful roles across levels of seniority to support the firm's work for LACERA. LACERA expects that this section of the response will only include those persons committed to supporting LACERA and investing in a relationship with LACERA on a regular and long-term basis. The proposal should include a commitment by the lead consultant will have responsibility for the work and will be available to LACERA on an ongoing basis during the work. LACERA also expects that other professionals identified will actually work on the project. Consultant should not include professionals who

will not work on the project.

With respect to diversity, the response must include a description of diversity policies, practices, and procedures maintained by the firm regarding equal employment opportunity, including the recruitment, development, retention, and promotion of a diverse and inclusive workforce, non-discrimination based on gender, race, ethnicity, sexual orientation, age, veteran's status, and other legally protected categories, and prohibition of sexual harassment in the workplace. If the respondent has written policies, a copy should be provided with the response to this RFP. The response should identify the oversight, monitoring, and other compliance processes for implementation and enforcement of the firm's diversity policies, practices, and procedures, including the name of the perform who is responsible for oversight the firm's method to measure the effectiveness of the policies, and conclusions as to effectiveness. Please describe any judicial, regulatory, or other legal finding, formal action, or claims related to equal employment opportunity, workplace discrimination, or sexual harassment during the past ten (10) years.

Estimated Timeframe

A statement of the estimated timeframe for completion of Phase 1 (strategic planning process development) and Phase 2 (preparation of strategic plan) of the project, including major tasks and milestones.

References

In this section, the proposal must identify references who can speak to respondent's ability in connection with elements of the scope of work. While there is no fixed number, LACERA requires references and suggests that at least five (5) references may be reasonable, including public and private member service organizations and institutional investors, including, if available, public pension systems, for which the respondent provided strategic planning process development and plan preparation services in the last five (5) years. Each reference should include an individual point of contact, the length of time the respondent served as consultant, and a summary of the work performed, and successes achieved. The references must be available for LACERA to contact during the evaluation process.

Fees and Costs, Billing Practices, and Payment Terms

The respondent must explain the pricing proposal for the scope of work including pricing of fees and costs, billing practices, and payment terms that would apply throughout the duration of the engagement, including a detailed project budget. LACERA does not place any limits on the approach to pricing and is open to presentation of more than one pricing option for the scope of work, or portions of it. This section of the response should include an explanation as to how the pricing approach(es) will be managed to provide the best value to LACERA. The respondent should represent that the pricing offered to LACERA is, and will remain, equivalent to or better than that provided to other governmental clients or should provide an explanation as to why this representation cannot be provided. All pricing proposals should be "best and final," although LACERA reserves the right to negotiate on pricing.

Comments on Proposed Agreement

All comments on the proposed agreement attached to this RFP shall be included in the proposal.

Conflicts of Interest

The proposal must identify all actual or potential conflicts of interest that the respondent may face in providing strategic planning process development and plan preparation services to LACERA. Specifically, and without limitation to other actual or potential conflicts, the proposal should identify any representation of the County of Los Angeles, Los Angeles County Office of Education, the South Coast Air Quality Management District, Little Lake Cemetery District, and Local Agency Formation Commission, and, to the respondent's knowledge, any of LACERA's members, vendors, other contracting parties, investments or investment managers, and employees, to the extent known. The proposal should identify any potential positional conflicts of which the respondent is aware.

Quiet Period

The proposal must confirm that the respondent has and will, for the duration of the RFP, comply with the quiet period requirement stated in Section IV.A of this RFP.

Claims

The proposal must identify all past, pending, or threatened litigation, including any claims against the firm and the personnel proposed to provide services to LACERA.

Insurance

The proposal must explain the insurance that the respondent will provide with respect to the services to be provided and other acts or omission of the firm and its personnel in the representation of LACERA. The limits of liability are a material term of any engagement letter with the firm and may be subject to negotiation.

Other Information

The proposal must confirm that respondent and its proposal comply with all requirements of this RFP. The proposal may also contain any other information that the respondent deems relevant to LACERA's selection process.

G. Post-Proposal Request for Information

LACERA reserves the right in its discretion to request additional information from any respondent, although such requests may not be made to all respondents.

H. Interviews and Personal Presentations

LACERA intends to require one or more interviews with or personal presentations by finalists to be conducted with staff and trustees of the Board of Retirement. The lead consultant must

attend the interviews, as well as other team members that will support LACERA.

I. Evaluation Criteria

Respondents will be evaluated holistically at the discretion of LACERA based upon the information and considerations identified in this RFP, including the following factors:

1. Experience providing strategic planning process development and strategic plan preparation services, including, if available, services provided to public and private member service organizations and institutional investors. Specific experience in representing public pension systems is relevant, if provided.
2. Quality of the team proposed to provide services to LACERA, based on experience, contacts and relationships, diversity, insights, creativity, and success.
3. Ability to provide focused, professional, and responsive services in a timely manner in both strategic planning assignments and time-sensitive situations that can be expected to arise, including the availability of the lead consultant and other team members on an immediate basis when needed.
4. Information provided by references.
5. Written and oral communications skills, including written materials and other samples of work, such as, for example, sample strategic plan process and plan documents, demonstrating such skills, if provided.
6. Pricing and value.
7. Teamwork, both internally and with LACERA's Boards and staff. LACERA seeks a highly collaborative relationship with the successful respondent.
8. Level of investment and commitment to the LACERA relationship.
9. The organization, completeness, and quality of the proposal, including cohesiveness, conciseness, and clarity.

The factors will be considered as a whole, without a specific weighting. The balancing of the factors is in LACERA's sole discretion. Factors other than those listed may be considered by LACERA in making its selection.

J. Engagement Agreement

LACERA will execute an engagement agreement with the successful respondent, which must contain such terms and may be changed from the attached version as LACERA in its sole discretion may require. A copy of LACERA's form of agreement is attached to this RFP.

IV. GENERAL CONDITIONS

This RFP is not an offer to contract. Acceptance of a proposal neither commits LACERA to award a contract to any respondent even if all requirements stated in this RFP are met, nor does it limit LACERA's right to negotiate the terms of an engagement agreement in LACERA's best interest, including requirement of terms not mentioned in this RFP. LACERA reserves the right to contract with a vendor for reasons other than lowest price.

Failure to comply with the requirements of this RFP may subject the proposal to disqualification. However, failure to meet a qualification or requirement will not necessarily subject a proposal to disqualification.

Publication of this RFP does not limit LACERA's right to negotiate for the services described in this RFP. If deemed by LACERA to be in its best interests, LACERA may negotiate for the services described in this RFP with a party that did not submit a proposal. LACERA reserves the right to choose to not enter into an agreement with any of the respondents to this RFP.

A. Quiet Period

To ensure that prospective service providers responding to this RFP have equal access to information regarding the RFP and that communications related to the RFP are consistent and accurate so that the selection process is efficient and fair, a quiet period will be in effect from the date of issuance of this RFP until the search has been completed. During the quiet period, respondents are not permitted to communicate with any LACERA staff member or Board member regarding this RFP except through the point of contact named herein. Respondents violating the quiet period may be disqualified at LACERA's discretion. Respondents who are existing LACERA service providers must limit their communications with LACERA staff and Board members to the subject of the existing services provided.

B. Notice Regarding the California Public Records Act and Brown Act

The information submitted in response to this RFP will be subject to public disclosure pursuant to the California Public Records Act (California Government Code Section 6250, et. seq.) and the Brown Act (California Government Code Section 54950, et seq.) (collectively, the Acts). The Acts provide generally that records relating to a public agency's business are open to public inspection and copying and that the subject matter of this RFP is a matter for public open session discussion by the Boards, unless specifically exempted under one of several exemptions set forth in the Acts. If a respondent believes that any portion of its proposal is exempt from public disclosure or discussion under the Acts, the respondent must provide a full explanation and mark such portion "TRADE SECRETS," "CONFIDENTIAL," or "PROPRIETARY," and make it readily separable from the balance of the response. Proposals marked "TRADE SECRETS," "CONFIDENTIAL," or "PROPRIETARY" in their entirety will not be honored, and LACERA will not deny public disclosure of all or any portion of proposals so marked.

By submitting a proposal with material marked "TRADE SECRETS," "CONFIDENTIAL," or "PROPRIETARY," a respondent represents it has a good faith belief that the material is exempt from disclosure under the Acts; however, such designations will not necessarily be conclusive, and a respondent may be required to justify in writing why such material should not be disclosed by LACERA under the Acts.

LACERA will use reasonable means to ensure that material marked “TRADE SECRETS,” “CONFIDENTIAL,” or “PROPRIETARY” is safeguarded and held in confidence. LACERA will not be liable, however, for disclosure of such material if deemed appropriate in LACERA’s sole discretion. LACERA retains the right to disclose all information provided by a respondent.

If LACERA denies public disclosure of any materials designated as “TRADE SECRETS,” “CONFIDENTIAL,” or “PROPRIETARY,” the respondent agrees to reimburse LACERA for, and to indemnify, defend and hold harmless LACERA, its Boards, officers, fiduciaries, employees and agents from and against:

1. Any and all claims, damages, losses, liabilities, suits, judgments, fines, penalties, costs, and expenses, including without limitation attorneys’ fees, expenses, and court costs of any nature whatsoever (collectively, Claims) arising from or relating to LACERA’s non-disclosure of any such designated portions of a proposal; and
2. Any and all Claims arising from or relating to LACERA’s public disclosure of any such designated portions of a proposal if LACERA determines disclosure is deemed required by law, or if disclosure is ordered by a court of competent jurisdiction.

If LACERA staff recommend any respondent to the Boards for hiring, such recommendation, the reasons for the recommendation, and the relevant proposal(s) will appear on a publicly posted agenda and in supporting materials for public meetings of the Boards.

Nothing in this RFP requires LACERA to withhold any documents from production under the Act.

C. Ownership of Proposals

The information that a respondent submits in response to this RFP becomes the exclusive property of LACERA. LACERA will not return any proposal or reimburse proposal preparation expenses.

D. Valid Period of Proposal

The pricing, terms, conditions, and other information stated in each proposal must remain valid for 120 days from the date of delivery of the proposal to LACERA.

E. Cost of Proposal

LACERA shall not be liable for any costs that respondents incur in connection with the preparation or submission of a proposal.

F. Contract Negotiations

Upon Board approval, staff will enter contract negotiations with the approved Respondent(s). LACERA may end negotiations, at its sole discretion, if it believes a satisfactory agreement

cannot be negotiated. LACERA reserves the right to award a contract based upon proposals received; respondents should not rely upon the opportunity to alter their proposal (e.g., services to be provided, fees, etc.) during contract negotiations.

The final contract must allow LACERA to terminate (a) for its convenience, (b) if funds are not appropriated for the services to be provided, and (c) for default.

The general form of the contract LACERA intends to use for this engagement is attached as [Exhibit XX]. By sending a proposal without comment on the general form contract, respondent agrees to each term in the contract, and will not seek any modifications to the contract. LACERA has the right to change or negotiate contract terms different than those in [Exhibit XX] in our sole discretion.

If respondent objects to a term in the general form contract, or wishes to change or add terms, respondent's proposal must show each objection, and propose language for each modification and additional term sought, including the rationale for the change. LACERA reserves the right to make changes to the contract prior to execution, including material changes.

G. Additional Reservations by LACERA

In addition to the other provisions of this RFP, LACERA reserves the right to:

1. Cancel this RFP, in whole or in part, at any time.
2. Make such investigation as it deems necessary to determine the respondent's ability to furnish the required services. The respondent agrees to furnish all such information for this purpose as LACERA may request.
3. Reject the proposal of any respondent who is not currently in a position to perform the contract, or who has previously failed to perform similar contracts properly, or in a timely manner, or for any other reason in LACERA's sole discretion.
4. Waive irregularities, to negotiate in any manner necessary to best serve the public interest, and to make a whole award, multiple awards, a partial award, or no award.
5. Award a contract, if at all, to the firm which will provide the best match to the requirements of the RFP and the service needs of LACERA in LACERA's sole discretion, which may not be the proposal offering the lowest fees.
6. Reject any or all proposals submitted in response to this RFP.
7. Determine the extent, without limitation, to which the services of a successful respondent are or are not actually utilized.

ON BEHALF OF TRUSTEES SHAWN KEHOE AND RONALD OKUM

July 23, 2021

TO: Each Trustee,
Board of Retirement

FROM: Trustees,
Shawn Kehoe
Ronald Okum

FOR: August 4, 2021 Board of Retirement Meeting

SUBJECT: **COMBINING BOR ADMINISTRATIVE, DISABILITY AND COMMITTEE MEETINGS – FIRST WEDNESDAY OF THE MONTH (TRIAL PERIOD)**

RECOMMENDATION

That the Board of Retirement (BOR) approve, as a trial period from September 2021 through January 2022, the following:

1. Beginning September 2021, the Board of Retirement temporarily combine its Administrative and Disability meeting to the first Wednesday of the month instead of having separate meetings.
2. Beginning September 2021, the Board of Retirement temporarily move its Insurance, Benefits, and Legislative Committee (IBLC) meeting to the first Wednesday of the month with a start time of 8:00 a.m.
3. Beginning September 2021, the Board of Retirement temporarily move its Operations Oversight Committee (OOC) meeting to the first Wednesday of the month, following the BOR meeting.
4. Beginning September 2021, the Board of Retirement temporarily disband the Disability Procedures and Services Committee (DPSC) and direct all Committee items to the full Board.

INTRODUCTION

At the Joint Organizational Governance Committee held on July 21, 2021, a brief discussion took place regarding Trustees' concerns of the workload associated with Board commitment and time requirements. Therefore, we are proposing that the Board of Retirement approve, on a trial bases from September 2021 through January 2022, moving the Board of Retirement and committees to the first Wednesday of the month. The Board leadership elected in January 2022 can re-evaluate this change and determine the best path moving forward.

LEGAL AUTHORITY

The Board of Retirement has the plenary authority and fiduciary responsibility to administer the retirement system, and holds executive, legislative, and quasi-judicial powers. In administering its duties, the Board has the authority to promulgate rules, regulations, and policies.¹

BOARD REGULATIONS

Under the [Regulations of the Board of Retirement](#):

Regular meetings of the Board of Retirement shall be held on the first Wednesday and the Thursday following the second Wednesday in each month at 9:00 a.m. (Regulations, Section II.1.)

Since this is a temporary change to the meeting schedule, the Regulations do not have to be changed until it is made as a permanent change by the Board of Retirement. Meeting notices will be agendized as a Special Meeting of the Board of Retirement during the trial period.

COMMITTEE MEETINGS

By Board action taken on July 3, 2019, OOC meets after the Board's Administrative meeting held on the first Wednesday of the month, DPSC and IBLC meets before/after the Board's Disability meetings, which takes place the Thursday following the second Wednesday of the month.

LACERA's healthcare consultant, Segal, who participates in the IBLC meetings, is not available on the first Wednesday of the month due to a conflict with meetings of another client system. However, as long as meetings are held virtually and travel to the other client is not necessary, Segal will be able to participate virtually.

Furthermore, monthly data presented to the IBLC is not available in time for an earlier meeting. Thus, should the meeting schedule change be approved, the monthly data will be provided to staff, public and Trustees as a Supplemental Document the week of the meeting. Furthermore, any verbal commentary that Segal would have provided will be held in written form accompanied to any reports. Responses from any Trustee questions at the IBLC meetings will be addressed in the Segal report the following month.

If the Board approves a change in the meeting schedule of the monthly Board meetings, the committee meeting schedule will also change. The IBLC will take place at 8:00 a.m. prior to the BOR meeting, and the OOC will take place following the BOR meeting. Meetings of the DPSC would be disbanded and items will be agendized to the full Board.

□

¹ Cal. Const. art. XVI, Sec. 17, subd. (a) and (b): Cal. Gov't Code §§ 31525-31527.

CURRENT STAFF PROCESSES FOR PRESENTING DISABILITY RETIREMENT APPLICATIONS TO THE BOARD OF RETIREMENT

The following is a summary of processes involved for disability retirement applications both before and after the Board's Disability meeting. These processes primarily involve Disability Retirement Services, Disability Litigation, and the Benefits Division.

Disability Retirement Services (DRS)

- **Before the Meeting**

Once a disability-application has been approved by staff for presentation to the Board of Retirement for a decision, it is placed on a final agenda. "Board Packets," which include a Disability Retirement Evaluation Report, panel-physician report, and application, are delivered to Board members two weeks before the scheduled meeting. Ten days before the meeting, applicants and their attorneys are notified by letter that their applications will be heard by the Board at the next meeting, and the final agenda is posted publicly on LACERA's website.

- **After the Meeting**

Board actions are entered into Workspace and posted on LACERA's website within 48 hours of the Board meeting. Notice of Board Actions are sent to each member within seven days of the Board meeting. If the Board grants a disability retirement, a Board Action Summary is prepared and sent to the Benefits Division to initiate payment.

Benefits Division

Within 45 days from the date DRS sends out the Notice of Board Action, Benefits must contact the member to begin the process of placing the member on LACERA payroll. During this process, the member's effective date of disability retirement is established. Benefits staff reach out to the member's department to coordinate leave benefits and to confirm whether there are any corrections or adjustments needed to the member's time on the books. After counseling members about various topics, staff obtains a signed disability election form stating the retirement date. Advanced Payroll then places the member on payroll.

IMPACT OF PROPOSED CHANGES

The following is a description of the impact of the proposed changes.

Benefits and Systems Divisions

The ratification of service retirements, survivor benefit applications, and reciprocal disability retirements will continue to be placed on the first meeting of the month, so the change in meeting dates will not impact these applications. There should not be any delay for members in processing payment of their disability retirement.

Disability Retirement Service (DRS)

The change will have little impact on Disability Retirement Services. It will continue to have two mailings per month. Disability cases will be delivered two weeks prior to the scheduled meeting and information for the Miscellaneous Agenda will be delivered one week prior to the scheduled meeting. Appropriate pre- and post-board meeting notices will be mailed in conjunction with the new meeting dates. Furthermore, now that virtual participation is provided to applicants and their attorneys, they are able to participate with ease when their case is being heard by the Board. Also, staff has confirmed that the Board's new Medical Advisor can be available the first Wednesday of the month if the meetings are changed.

Disability Litigation

The change will have little impact on Disability Litigation. Appropriate pre- and post-board meeting notices will be mailed in conjunction with the new meeting dates.

Retiree Health Care (RHC) and IBLC

Impact addressed under **COMMITTEE MEETINGS** on page 2.

COMMUNICATION TO MEMBERS, COUNTY DEPARTMENTS, AND AFFILIATES

It is necessary to notify members, County departments, and other affiliates such as applicant attorneys, that meeting dates have changed. This information will be communicated through letters to our members, the human resource offices for each of the County departments, and the applicant attorneys included in Disability Retirement's list of attorneys. Notification of the date changes will also be posted on LACERA's website (lacera.com) as well as LACERA's website Human Resources Professionals (HR Pros).

CONCLUSION

For these reasons, it is recommended that beginning September 2021, on a trial period through January 2022, the Board of Retirement temporarily combine its Administrative, Disability, and its Committee meetings to the first Wednesday of the month and disband its Disability Procedures and Services Committee meeting directing items to the Board of Retirement.

c:

Santos H. Kreimann	Steven P. Rice
Luis Lugo	Jon Grabel
JJ Popowich	Carly Ntoya
Ricki Contreras	Vincent Lim
Cassandra Smith	Carlos Barrios

July 28, 2021

TO: Each Trustee,
Board of Retirement

FROM: Ad Hoc Committee on Board Duties and Responsibilities
William Pryor, Chair
James P. Harris
Herman Santos
Ronald Okum

FOR: August 4, 2021 Board of Retirement Meeting

SUBJECT: Board of Retirement Ad Hoc Committee Report on Board Duties and Responsibilities

In March 2021, the Chair of the Board of Retirement (BOR) formed an ad hoc committee for the express purpose of reviewing the unique authorities of the BOR and whether there are ways to better clarify the lines of responsibility between the BOR and the Board of Investment (BOI).

Attached is the final report of the BOR Ad Hoc Committee. This report is the product of five meetings of the Committee and substantial study and debate concerning the duties and responsibilities of the BOR and of those duties shared with the BOI. The report concludes with the following recommendations.

RECOMMENDATION

That the Board of Retirement discuss and consider the following recommendations:

- 1) Abolish the Joint Organizational Governance Committee (JOGC), or
- 2) Narrow the JOGC Charter or provide other committee alternatives to cover limited specific areas of joint responsibility.

We look forward to the discussion and answering any questions Trustees may have.

July 28, 2021

To: Board of Retirement

From: Ad Hoc Committee on Board Duties and Responsibilities
William Pryor, Chair
James P. Harris
Herman Santos
Ronald Okum

For: August 4, 2021 Board of Retirement Meeting

Subject: Report and Recommendations of the Committee

The Chair of the Board of Retirement (BOR) formed an ad hoc committee for the express purpose of reviewing the unique authorities of the Board of Retirement (BOR) and whether there are ways to better clarify the lines of responsibility between the BOR and the Board of Investment.

The Ad Hoc Committee on Board of Retirement Role and Responsibility (the Committee) held its initial meeting on March 17, 2021, and subsequently met four additional times on May 18, June 8, July 20, and July 28, 2021, to focus on issues of concern regarding the role of the BOR, ways in which that role may have been affected by other LACERA bodies and governance, and ways in which the BOR's ability to perform its role can be improved. The Ad Hoc Committee reviewed the statutory duties of each Board and the matters in which the County Employees Retirement Law (CERL) requires the Boards to work jointly.

The California Constitution and CERL make the Boards, acting together, responsible for management of the system as a whole. Specifically, administration of the fund is the duty of the BOR and investment of assets is the duty of the BOI.

The Boards together are responsible for the adoption of a budget, positions and salaries, and the appointment and performance evaluation of certain senior officers. Compensation is governed in part by the County Salary Ordinance.

The BOR has exclusive authority regarding the determination and grant of retirement allowances, including pensionable compensation for purposes of benefit calculations. The BOR is also responsible for personnel issues, including human resource matters and employment claims. This would necessarily include retention of litigation counsel as needed.

Under the LACERA Travel and Education policy, each board determines its own needs.

The Ad Hoc Committee was focused on the specific mission of the BOR as outlined in CERL. Fiduciary Counsel was involved in order to advise the Ad Hoc Committee on the roles of the Boards under the Constitution and CERL, the over-all mission of LACERA, and the interrelated nature of the Boards.

The Ad Hoc Committee discussed the concern that the inter-related mission was not intended to be to the exclusion of either Board in the fulfillment of its separate statutory responsibilities. The Ad Hoc Committee came to the unanimous conclusion that the current pattern of Joint Organizational Governance Committee (JOGC) use has led to a blurring of the lines of responsibility between the Boards. While Human Resources and rank-and-file personnel decisions had customarily fallen to the Board of Retirement, the discussion centered on the recent personnel claim involving a higher ranking LACERA employee. The Ad Hoc Committee expressed the opinion and use of the JOGC to establish the strategy for the defense of that claim was a dilution of the BOR's authority. The Ad Hoc Committee also expressed concern that the post-adoption implementation of the non-investment budget was not being clearly assigned to the Board of Retirement. At its March 17, 2021 meeting, the Ad Hoc Committee requested an outline of its possible recommendations for consideration at its next meeting specifically focused on the use or perceived over-use of the JOGC.

At its meeting of May 18, 2021, the Ad Hoc Committee considered the following optional recommendations:

1. **Leave the JOGC Charter as written.** The JOGC would continue to address matters referred to it on a case-by-case basis. At that time, the referral to the JOGC or one of the boards will be determined. If the matter is retained by the JOGC, the procedures outlined in its charter will prevail.
2. **Replace the JOGC with specialized short term, project specific committees.** The Boards are statutorily required to collectively adopt a budget, determine positions and salaries, and appoint certain officials to manage the System. The BOR is thereafter responsible for the administration of the System, except for investment and management of System assets, which is solely the duty of the Board of Investments. The Boards could annually create a joint budget committee to work with the CEO to develop a budget, included needed positions and salaries, which could then be presented for approval to the respective boards. This joint committee, together with the CEO could also work to resolve budget disagreements between the boards. Similarly, at times where joint appointment or evaluation of a System official is needed, a special committee for that purpose could be created to assist in vetting applicants and presenting a report concerning those candidates to the respective boards. If a professional executive search firm is to be employed, it is envisioned the special committee would vet the search firm candidates

and present a joint report on same to the respective boards. Thereafter, the special committee would work with the executive search firm to assist in preparing a report on the search result to the respective boards.

The budget and executive search committees would automatically dissolve after their work is completed.

The Ad Hoc Committee's view is that beyond budget and designated personnel selection, all investment matters would be in the sole control of the BOI. All other matters related to System administration would be in the sole control of the BOR. Fiduciary Counsel discussed with the Ad Hoc Committee that the more important the issue, the more blurred the lines of control appeared because of the broad categories of personnel and budget. This would necessitate finding an organized means of addressing matters of universal concern to the Boards as part of the Boards' respective roles in System governance.

To better control the perceived over-use of committees in general, it was determined that each board has the authority to create a committee related to the accomplishment of its specific statutory mission. Joint committees could be created to address other joint issues as needed and determined by action of both Boards in consultation with the CEO and the Chief Counsel.

3. **Refine and narrow the current JOGC.** The Charter of the JOGC as currently written could be narrowed to the two matters required by statute and the JOGC would function in the manner envisioned for the two special committees as outlined above.

In addition to the budget and executive selection duties, the JOGC could be retained for threatened or pending litigation which has an impact on the System as a whole. The unresolved issue was the standard by which unique issues required joint management would be identified and implemented. The Ad Hoc Committee did observe that -most personnel and litigation matters (other than investment related litigation) would remain within the province of the BOR.

There may be other matters that arise where a standing committee would be useful in addressing issues affecting the System as a whole. These matters would be referred to the JOGC by agreement of the Board chairs with input from the CEO and the Chief Counsel.

The JOGC charter would be rewritten to reflect this narrower scope of responsibility.

Following a lengthy discussion, the Ad Hoc Committee concluded at its May 18, 2021 meeting to recommend Option 2 to the Board of Retirement. The Ad Hoc Committee expressed the belief that use of the JOGC on a regular basis was contributing to blurred lines of responsibility. If the BOR and the BOI determined that the JOGC should be retained to determine whether a matter was properly in the purview of one board or the other, the Committee recommends that the matter be returned to the Ad Hoc Committee to develop proposals for change to the JOGC Charter reflecting a narrower scope for its mission.

The Ad Committee concluded that the absence of clarity in the division of duties was resulting in an over-abundance of committee meetings. As many JOGC meetings are attended by a majority of each Board, it was observed by the Committee that the JOGC was effectively serving as a committee-of-the-whole beyond the specific joint governance issues of personnel selection and evaluation and budget.

The Ad Hoc Committee reconvened on June 8, 2021 and July 20, 2021 to consider a draft report reflecting its earlier conclusions. At the June 8th meeting, the Ad Hoc Committee had a detailed discussion of the April 4, 2018 memorandum from the Chief Counsel which outlined the duties of the Boards, both individually and collectively.¹ The Ad Hoc Committee reviewed the Boards' plenary authority and fiduciary duty to the System as expressed in Article XVI, Section 17 of the California Constitution. The Ad Hoc Committee also reviewed the enumerated duties of the Boards as expressed in various provision of the County Employees Retirement Law (CERL). A considerable portion of the Committee's discussion focused on the shared duties of the BOR and the BOI. The Chief Counsel's report identified 23 specific duties of the Board of Retirement and 24 specific duties of the Board of Investment as assigned by various provisions of CERL, as well as the areas of joint responsibility.

The discussion again turned to whether the JOGC was being over-used and whether that was a weakness in the LACERA governance structure. The discussion also included the question of whether duties which could have been delegated to the Chief Executive Officer have instead been routed to the JOGC. Having the CEO and the Chief Counsel provide continuing guidance on duties identified in the April 4, 2018 memorandum were believed by the Ad Hoc Committee to offer an opportunity to reduce reliance on the JOGC or to abolish it altogether, by increasing delegation of non-policy making matters to the CEO and staff.

The Ad Hoc Committee concluded its discussion by noting that additional governance development was desirable as it could eliminate over-reliance on

¹ The Chief Counsel's memorandum is incorporated in this memorandum and attached as an appendix.

committees. This additional governance development would better position the Boards to avoid micro-management and focus on constitutional mandate to set the vision for LACERA and to evaluate staff's progress in implementing that vision.

At the June 8, 2021 meeting, following the discussion, Mr. Harris moved, seconded by Mr. Santos, to confirm the recommendation that the JOGC be abolished and that alternatives be developed in the areas of overlapping fiduciary duty of the Boards. The motion passed, with Messrs. Pryor, Harris, and Santos voting yes and Mr. Okun abstaining.

At its July 20, 2021 meeting, the Ad Hoc Committee reviewed a draft of this report. While the Committee still concurred that the current use pattern of the JOGC needed change, it was believed that the Committee had an obligation to provide a recommended substitute. To that end, the Committee concluded that the list of 24 specific statutory duties of the BOI outlined in the Chief Counsel's March 27, 2018 memo (Attachment A) should be managed solely by the BOI. Similarly, the list of 23 specific statutory duties of the BOR outlined in the Chief Counsel's March 27, 2018 memo should be managed solely by the BOR. In those enumerated circumstances, the JOGC should not be utilized.

Whether the current name for the JOGC is retained or not, the following joint Board responsibilities may be properly be addressed in a joint committee(s):

1. Budget
2. Education and Travel Policy
3. Appointment of the Chief Executive Officer and Chief Legal Counsel
4. Classification and salaries of staff
5. System wide policies such as Ethics and Conflict of Interest
6. Engagement of Fiduciary Counsel who advise both Boards
7. In certain limited circumstances, litigation involving senior staff which may jointly affect both the BOR and the BOI. A standard for when this applies should be developed and included in a revised joint committee charter. In any event, the Chief Counsel and the Chief Executive Officer shall participate in the decision-making process, together with such additional advisors as they deem necessary.



FOR INFORMATION ONLY

March 27, 2018

TO: Each Member
Board of Retirement
Board of Investments

FROM: Steven P. Rice *SPR*
Chief Counsel

FOR: April 4, 2018 Joint Board of Retirement and Board of Investments Meeting

SUBJECT: Joint and Separate Responsibilities of the Boards

At the March 15, 2018 Board of Retirement (BOR) meeting, certain BOR members requested a legal analysis of the joint and separate responsibilities of the BOR and the Board of Investments (BOI) (together, Boards) in order to facilitate a clear understanding and compliance with applicable law.

LEGAL AUTHORITY

The responsibilities of the Boards are enumerated in Article XVI, Section 17 of the California Constitution, the County Employees Retirement Law of 1937 (CERL), Cal. Gov't Code §§ 31450, *et seq.*, the California Public Employees' Pension Reform Act of 2013 (PEPRA), Cal. Gov't Code §§ 7522, *et seq.*, and the Internal Revenue Code, 26 U.S.C. §§ 401(a), *et seq.*

The Boards' overarching plenary authority and fiduciary responsibilities are addressed in Article XVI, Section 17 of the Constitution. Article XVI, Section 17 applies generally to all California public pension boards. The Constitution does not change the division of responsibilities between the Boards as established in CERL.

Specific operational responsibilities of the Boards are set forth in CERL and PEPRA, which describe the duties of LACERA's Boards in detail.

LACERA is the only California public pension system that has separate boards for administration and investments (although a number of California charter cities have established separate pension funds and boards for safety and general members).

DISCUSSION

A. Constitution.

Under Article XVI, Section 17 of the Constitution, "the retirement board of a public pension or retirement system shall have plenary authority and fiduciary responsibility for

investment of moneys and administration of the system.” The Constitution only uses the singular term “retirement board,” but it does not create that board. Rather, the Constitution confers duties on governing board(s) otherwise established by plan sponsor agencies under the laws that provide for their respective plans. For example, the Public Employees’ Retirement Law, Cal. Gov’t Code §§ 20000, *et seq.* (PERL), establishes the Board of CalPERS; the Teachers’ Retirement Law, Cal. Ed. Code §§ 22000, *et seq.*, establishes the Board of CalSTRS. So, too, CERL authorizes the twenty California counties adopting the CERL to establish the retirement boards for their respective county systems. For Los Angeles County, CERL authorized the County to establish two boards for jointly governing a single retirement system, and the County exercised that authority to create the BOI. Because of the unique authority granted by CERL, both LACERA Boards have constitutional fiduciary obligations that are important to the performance of their coordinated governance of the retirement system. The Boards both have the same constitutional mission and the same fiduciary duties of prudence and loyalty. It is important to review these fiduciary duties because they have a direct bearing on how the Boards should interact with each other in considering their joint and separate operational responsibilities under CERL.

Article XVI, Section 17 provides for the following duties, which apply to both the BOR and the BOI:

- “The retirement board . . . shall have the sole and exclusive fiduciary responsibility over the assets” of the system. (Section 17(a).)
- “The retirement board shall also have sole and exclusive responsibility to administer the system in a manner that will assure prompt delivery of benefits and related services to the participants and their beneficiaries.” (Section 17(a).)
- Fund assets “are trust funds and shall be held for the exclusive purposes of providing benefits to participants . . . and their beneficiaries and defraying reasonable expenses of administering the system.” (Section 17(a).)
- Trustees “shall discharge their duties with respect to the system solely in the interest of, and for the exclusive purposes of providing benefits to, participants and their beneficiaries, minimizing employer contributions thereto, and defraying reasonable expenses of administering the system. A retirement board’s duty to its participants and their beneficiaries shall take precedence over any other duty.” This is the duty of loyalty. (Section 17(b); see *also* CERL, Section 31595(a).)
- Trustees “shall discharge their duties with respect to the system with the care, skill, prudence, and diligence under the circumstances then prevailing that a prudent person acting in a like capacity and familiar with these matters would

use in the conduct of an enterprise of a like character and with like aims.” This is the duty of prudence. (Section 17(b).)

In addition, Article XVI, Section 17 includes two duties that apply to the BOI, although the BOI is not mentioned by name:

- Trustees “shall diversify the investments of the system so as to minimize the risk of loss and to maximize the rate of return, unless under the circumstances it is clearly not prudent to do so.” (Section 17(d); see *also* CERL, Section 31595(c).)
- The board, “consistent with the exclusive fiduciary responsibilities vested in it, shall have the sole and exclusive power to provide for actuarial services in order to assure the competency of the assets of the public pension or retirement system.” (Section 17(e).)

The BOR and BOI share the same constitutional fiduciary duties in furtherance of the same purpose. The trustees of the boards are co-fiduciaries of the retirement system. The Boards must work together to achieve the purpose of the fund. The need to work together is a constitutional requirement that follows from the duty of prudence because any reasonable trustee in a like position must cooperate fully with their trustees on the other board. Joint effort also follows from the duty of loyalty because the interests of the members and their beneficiaries could be impaired if there are jurisdictional disagreements between the Boards. The Boards must respect clear lines drawn in CERL as to their separate and joint authorities. The Boards should also be flexible and collaborative in addressing ambiguities in the law as to board authority where they exist in CERL and PEPRA and in addressing special circumstances that may prudently require joint action or joint communication.

B. CERL and PEPRA.

1. Background.

a. BOR.

Section 31520 of CERL provides, “Except as otherwise delegated to the board of investments and except for statutory duties of the county treasurer,¹ the management of the retirement system is vested in the board of retirement” Section 31520 provides for a five-member board of retirement. However, where a system (like LACERA) provides for safety member contributions and retirement, Section 31520.1 provides for a nine-

¹ CERL provides that the Boards may delegate certain responsibilities, such as the holding and investment of assets, to the treasurer. The Boards have not exercised this authority.

member board of retirement, with an alternate safety member. The nine members include four elected by the members (two by general members, one by safety members, and one by retired members), four appointed by the board of supervisors, and the county treasurer, sitting ex officio. Section 31520.5 provides for a retired member alternate to the board of retirement.

LACERA has had its Board of Retirement since the fund's formation in 1938.

b. BOI.

Section 31520.2 provides that, in any county with over \$800 million in assets, the board of supervisors may establish a nine-member board of investments. The membership of the board of investments follows the same pattern as described above for the board of retirement, except that there are no alternate members.

LACERA has had a Board of Investments since 1972, shortly after the Board of Supervisors voted to authorize it. LACERA is the only CERL system with a board of investments. Under Section 31520.2(b), "The board of investments shall be responsible for all investments of the retirement system."

2. Definition of "Board."

The responsibilities of the BOR and BOI are contained in various CERL and PEPRA provisions. Sometimes, the statutes are clear and specific as to which board is given a particular responsibility. Other provisions simply use the term "board" or are vague as to whether they apply to the BOR, the BOI, or both. Section 31459.1 provides a definition of "board" which is applicable only to LACERA, as follows:

(a) In a county in which a board of investments has been established pursuant to Section 31520.2:

(1) As used in Sections 31453, 31453.5, 31454, 31454.1, 31454.5, 31472, 31588.1, 31589.1, 31591, 31592.3, 31594, 31595.1, 31595.9, 31596, 31596.1, 31601.1, 31607, 31610, 31611, 31612, 31613, 31616, 31618, 31621.11, 31625, 31639.26, 31784, and 31872, "board" means board of investments.

(2) As used in the first paragraph of Section 31592.2 and the first paragraph and subdivision (c) of the second paragraph of Section 31595, "board" means a board of investments.

(3) Sections 31521, 31522, 31522.1, 31522.2, 31523, 31524, 31525, 31528, 31529, 31529.5, 31535.1, 31580.2, 31614, 31680, and 31680.1,

apply to both the board of retirement and board of investments, and “board” means either or both the board of retirement and board of investments.

(4) Subdivision (a) of Section 31526 and subdivisions (a) and (b) of the second paragraph of Section 31595 apply to both the board of retirement and board of investments, and “board” means either or both the board of retirement and board of investments.

(b) In Article 17 (commencing with Section 31880) of this chapter, “board” means the Board of Administration of the Public Employees’ Retirement System.

(c) In all other cases, “board” means the board of retirement.

(d) This section shall apply only in a county of the first class, as defined in Section 28020, as amended by Chapter 1204 of the Statutes of 1971, and Section 28022, as amended by Chapter 43 of the Statutes of 1961.

The specific CERL sections mentioned in Section 31459.1 are discussed in detail in the next section of this memo. Section 31459.1 does not list all provisions of CERL that specifically mention the board of investments. Other provisions must be interpreted in developing a list of the Boards’ responsibilities. In addition, it is important to note that Section 31459.1 is not itself a grant of authority to either board; it is a definitional section to assist in interpreting some but not all of the substantive provisions of CERL that describe specific areas of board responsibility.

3. Responsibilities and Authorities of the Boards.

As quoted above, Section 31520 states that “the management of the retirement system is vested in the board of retirement,” and Section 31520.2(b) provides that “The board of investments shall be responsible for all investments of the retirement system.” However, these statements are so general that they do not provide much practical guidance in understanding how the many specific functions of managing a public retirement system are to be handled by the Boards.

Understanding of the detailed allocation of responsibilities is found in the definition quoted above from Section 31459.1 and in other provisions of CERL that specifically mention one or both of the Boards. Based on Section 31459.1 and the rest of CERL, certain responsibilities belong to both the BOI and the BOR, certain responsibilities belong to the BOI, and everything else that is not specifically identified belongs to the BOR. The next three subsections of this memo list specific responsibilities that fall into each category. CERL is a long and complex statute, over 360 pages in length. There may be specific separate responsibilities of the BOR or BOI that are not listed below. However, the lists below include major responsibilities and authorities of the Boards.

a. Joint Responsibilities and Authorities of the BOR and BOI.

Under CERL, there are two specific responsibilities and authorities that require joint action of both the BOR and the BOI:

- i. Appointment of personnel.* (Sections 31522.1, 31522.2, 31522.4.) These provisions provide that “the board of retirement and both the board of retirement and board of investment may appoint” the retirement administrator and other staff. Since LACERA has both the BOR and BOI, the statutory language giving appointing authority to “both” the BOR and the BOI governs. Appointing authority includes the power to approve organizational staffing needs, classifications and classification changes, evaluation, compensation adjustments, and discipline. Accordingly, appointment of staff is a statutory joint responsibility of the Boards.

Long ago, the Boards determined to retain joint appointing authority over the Chief Executive Officer (CEO) and delegate appointing authority for all other positions, other than the Chief Audit Executive,² to the CEO. This structure is reflected in County Salary Ordinance provisions, as required by CERL.³

The Salary Ordinance provides, “The person appointed by the Boards of Retirement and Investments to act as retirement administrator pursuant to Government Code Section 31522.2, shall be known as the Chief Executive Officer.” (Ordinance 6.127.020(A).) The Salary Ordinance defines “Appointing Authority” for the CEO as “the board of retirement and the board of investments jointly” and for staff as the “retirement administrator.” (Ordinance 6.127.040(B)(1).)

² The Boards have determined that they are the appointing authority for the Chief Audit Executive (CAE) with respect to appointment, discipline, dismissal, and/or removal. The Audit Committee is the CAE’s appointing authority with respect to performance management and salary adjustments. The CAE reports to the CEO for administrative purposes. The role of the Boards, the Audit Committee, and CEO are fully described in the Audit Committee Charter. Note that changes to the Salary Ordinance to implement the system described in this footnote, as approved by the Boards in January 2017, are pending approval by the Board of Supervisors as of the date of this memo.

³ This structure is not unique to LACERA. A similar arrangement exists in the City of San José, which has separate boards to administer its Police and Fire Department Retirement Plan and its Federated City Employees’ Retirement System. By City Charter (Section 810.1(a)), however, the two boards have the authority to “jointly appoint the chief executive officer and the chief investment officer.”

The CEO's compensation "may be determined by written agreement between the boards of retirement and investments and such designated person." (Ordinance 6.127.030(B)(1); see also Ordinance 6.127.040(C).) The CEO's salary may be adjusted "by the boards of retirement and investments," even if it falls outside designated Salary Ranges. (Ordinance 6.127.030(B)(3).) The Boards jointly may authorize additional compensation to the CEO for "exceptional or extraordinary service." (Ordinance 6.127.030(B)(2).) The County's Table of Classes of Positions with Salary Schedule and Level does not state the CEO's compensation; instead, it refers back to the Board's joint compensation setting authority under Ordinance 6.127.020(A). (Ordinance 6.127.050, Note N37.)

Under the Ordinance, salary adjustments and performance management for LACERA staff are the responsibility of the CEO as Appointing Authority under Chapter 127 of the Ordinance.

The Boards also have the independent authority, by joint resolution, to create a Performance Compensation Program for LACERA employees. (Ordinance 6.127.030(C).)

The Boards may, by joint action, request a change in the Ordinance. However, at present, the structure for personnel is as described above. The Civil Services Rules are consistent, where applicable.

- ii. Budget approval. (Section 31580.2.) This statute provides that, where "the board of retirement, or the board of retirement and the board of investments, have appointed personnel . . . , the respective board or boards shall annually adopt a budget covering the entire expense of administration of the retirement system which expense shall be charged against the earnings of the retirement fund." At LACERA, since the Boards jointly appoint personnel under CERL as discussed above, the responsibility and authority to adopt a budget belongs as a matter of law under Section 31580.2 to both Boards acting jointly. This is in fact the way LACERA conducts its budget process.

Although appointment of personnel and budget approval are the only two specified areas of joint Board action under CERL and PEPR, there may be other important issues that flow from the specified areas or otherwise reasonably should be handled by both Boards. Examples include: litigation that presents significant organizational risks; union contracts; legislation that affects LACERA's overall governance structure; changes in LACERA's

Mission, Values, or Vision; joint committees such as the Audit Committee;⁴ policies that affect both Boards, such as the Audit Committee Charter, Education and Travel Policy, Legislative Policy, Code of Ethical Conduct, Conflict of Interest Code, and similar policies that cross board lines; and engagement of fiduciary counsel to advise both Boards. As noted above, a spirit of cooperation, collaboration, and flexibility is legally required among the Boards as a matter of their co-fiduciary duties in addressing other issues of joint interest.

b. BOI Responsibilities and Authorities.

CERL is generally structured so that the responsibilities and powers of the BOI are specifically identified. Any responsibilities and powers not given to the BOI belong to the BOR. Despite this structure, there are still some ambiguities because Section 31459.1 is not complete and other CERL and PEPR provisions are also ambiguous. Responsibilities and authorities that the BOI, and its trustees, may separately exercise as identified in governing law include the following:

- i. All investments.* (Sections 7514.2, 31520.2(b), 31594, 31595, 31595.1, 31595.9, 31601.1, 31602, 31603.) The BOI “shall be responsible for all investments of the retirement system.” (Section 31520.2(b).) The statutory authority is very broad. Investments may be made “in any form or type of investment deemed prudent” in compliance with the BOI’s fiduciary duties. (Section 31494.) Note that investments in real property require approval by at least six votes, except that nine votes are required if the Board of Supervisors or County Board of Education has a material interest. (Section 31601.1.) Investments in in-state infrastructure projects are specifically addressed by statute. (Section 7514.2.)
- ii. Diversification of investments.* (Section 31595(c).) The BOI is required to “diversify the investments of the system so as to minimize the risk of loss and to maximize the rate of return, unless under the circumstances it is clearly prudent not to do so.” (*Id.*) This same language appears in Article XVI, Section 17(d).

⁴ The responsibilities and authorities of the Audit Committee include oversight of Internal Audit, oversight of the CAE (see footnote 2), oversight of and recommendations regarding selection of the External Auditor, monitoring of the financial reporting process, monitoring management’s system of internal controls and compliance, and conflicts and ethics. These responsibilities are fully defined in the Audit Committee Charter approved by both Boards.

- iii. Delegation of investment authority. (Sections 31595, 31595.1, 31596.) The BOI has the authority and discretion to “invest, or delegate the authority to invest, the assets of the fund.” (Section 31595.) One party to whom the BOI may delegate authority is the treasurer. (Sections 31595.1, 31596.)
- iv. Actuarial investigations, assumptions, and valuations. (Sections 31453, 31453.6, 31454, 31454.1, 31515.1.) The BOI has sole authority under CERL over actuarial matters related to the pension fund. Actuarial issues are also recognized in the Constitution, which provides that board (as to LACERA, the BOI) “shall have the sole and exclusive power to provide for actuarial services in order to assure the competency of the assets of the public pension or retirement system.” (Article XVI, Section 17(e).)
- v. Retirement benefit funding policy. (Sections 7522.52, 31591.) The BOI sets the funding policy for LACERA, which includes the funding goal, annual implementation, allocation of actuarial assets, and the valuation cycle.
- vi. Recommendation of interest rates on deposits. (Sections 31453, 31454, 31472, 31591.) Based on actuarial investigation, valuation, and recommendations, the BOI recommends to the Board of Supervisors changes in the interest rate on deposits.
- vii. Recommendation of member contribution rates. (Sections 31453, 31454, 31621.11, 31625, 31639.26, 31872.) Based on actuarial input, the BOI recommends to the Board of Supervisors the rates of member contributions.
- viii. Recommendation of employer contribution rates and appropriations. (Sections 31453, 31453.5, 31454, 31454.5, 31495.) Similarly, the BOI recommends to the Board of Supervisors employer contributions rates and appropriations based on actuarial findings.
- ix. Transfer of excess interest. (Section 31592.2(a).) The BOI has authority, when the surplus interest in excess of the amount credited to contributions and reserves exceeds 1% of total assets, to transfer such surplus into a county advance reserve for the payment of benefits.
- x. Selection of custodian. (Section 31596.) The BOI is responsible to select LACERA’s custodian.

- xi. Investment, actuarial, custodial, and investment legal expenses.* (Section 31596.1) The BOI manages expenses of investment, the fund's actuary, the custodian, and investment counsel, all of which are then charged against investment earnings or fund assets as the BOI determines.
- xii. Adopt BOI regulations.* (Sections 31525, 31526(a).) The BOI is required to adopt board regulations providing for election of officers, their terms, meetings, and all other matters relating to the administrative procedure of the board.
- xiii. Interest on unpaid installments of death benefit.* (Section 31784.) The BOI determines the rate at which interest is paid to a person who elects to receive a death benefit over time.
- xiv. Certain Plan E actions.* (Sections 31488, 31491(f) and (g), 31492(b) and (c).) The interest and mortality tables adopted by the BOI are used for calculation of the early retirement adjustment factors that may be employed under Plan E. (Section 31491(f).) The BOI also adjusts primary insurance amounts for Plan E based on the advice of the actuary. (Section 31491(g).) In addition, the BOI approves the actuarial equivalence of a Plan E member's election for an increased survivor allowance. (Section 31492(c).)
- xv. Filling of BOI vacancies.* (Section 31523.1.) The BOI is required to cause an election to be held at the earliest possible date for any vacancy in the elected positions.
- xvi. Separation from County service.* (Section 31524.) Separation from County service of an elected member vacates the trustee's office.
- xvii. 24 hours of trustee education.* (Section 31522.8.) BOI trustees are required to obtain 24 hours of education every two years on the subjects listed in Section 31522.8.
- xviii. Conflict and revolving door limits.* (Section 31528.) Members of the BOI may not have a personal interest, direct or indirect, in the making of any investment, the profit or losses on any investments, or the sale of any investment, or act as agent for others in the use of trust funds. BOI members also may not, for a period of two years after leaving office, act as an agent or attorney for or otherwise represent for compensation any person, except the County, before the BOI, BOR, or staff by personal appearance or any oral or written communication for the purpose of influencing LACERA administrative or legislative

action or concerning a contract, grant, or purchase or sale of good or property. Beyond Section 31528, the BOI has authority to regulate conflicts that may arise in the conduct of its affairs and the matters under its authority.

- xix. Authority to obtain legal representation. (Sections 31529, 31529.1, 31529.5, 31529.6, 31529.9, 31607.) The BOI may retain outside counsel to act as counsel for the board or assist in the performance of its responsibilities.
- xx. Securities and investment-related litigation. Authorization and oversight of securities and other investment-related litigation is the responsibility of the BOI because the issues involve matters within the broad investment responsibility of that board.
- xxi. Issuance of subpoenas. (Section 31535.1) The BOI has the authority to issue subpoenas in connection with its areas of responsibility.
- xxii. OPEB trust investments and trust administration. (Sections 31694.1, 31694.3, 31694.5.) The BOI may invest Other Post-Employment Benefit (OPEB) trust assets contributed by participating employers. The BOI is trustee under the County, Court, and Master OPEB Trust Agreements with responsibility for trust investment and administration.
- xxiii. Approval of travel. The BOI has the responsibility under the Education and Travel Policy to approve travel for its trustees according to the terms of the policy.
- xxiv. Committees. Under the BOI Regulations, the BOI Chair may appoint such standing and ad hoc committees as he or she deems necessary to accomplish the BOI's responsibilities. The BOI as a whole also has authority to establish committees.

The BOI has the authority to perform and manage their specific responsibilities as listed above, adopt policies and procedures, retain other consultants and vendors, and take other reasonable and necessary actions related to their specifically assigned responsibilities. The BOI's authorities and responsibilities are further addressed in the BOI's Regulations (or Bylaws), Board Charter, Powers Reserved Defined, Powers Reserved and Delegated Authorities, the Powers and Duties of Investments Board Members, Investment Policy Statement, Corporate Governance Committee Charter, Corporate Governance Principles and Policy, Domestic Proxy Voting Guidelines, and other existing policies and procedures. The BOI must manage its meetings and affairs so as to comply with the Brown Act, Cal. Gov't Code 54950, *et seq.*

c. BOR Responsibilities and Authorities.

Under Section 31520, “the management of the retirement system is vested in the” BOR, except for those responsibilities specifically assigned to both Boards or the BOI. Accordingly, the short answer to the question of the BOR’s responsibilities and authorities is that the BOR separately can do anything, required under CERL, PEPRA, and the Constitution to manage the system, that is not specifically listed in paragraph 3(a) (joint BOR and BOI responsibilities) and paragraph 3(b) (BOI responsibilities). However, to provide a more helpful response, the responsibilities and authorities that may be separately exercised by the BOR include the following:

- i. Pension benefits administration upon service retirement.* (Section 31670.) The BOR approves all service retirements and administers all issues and processes under CERL and PEPRA related to delivery and support of pension benefits, including Member Services, Benefits, and Quality Assurance.
- ii. Compensation earnable and pensionable compensation.* (Sections 7522.34, 31461.) The BOR makes determinations as to whether pay codes are compensation earnable under CERL. The BOR also acts upon pensionable compensation recommendations under PEPRA, although there is less board discretion under PEPRA than there is under CERL because PEPRA does not specifically reference a board determination.
- iii. Disability retirement benefits administration.* (Sections 31530, 31720 *et seq.*) The BOR approves all disability retirements. In that role, the BOR administers Disability Retirement Services, engages physicians, manages the board’s medical advisor, decides applications, appoints referees to conduct appeal hearings, receives and acts upon referee reports, sets rules for disability applications and hearings, and makes such other decisions and performs such other oversight as required for delivery of disability retirement benefits. Member Services, Benefits, and Quality Assurance may also be necessary, from time to time, to support the administration of disability retirement.
- iv. All other benefits and benefit-related issues.* All other benefits and benefit-related issues under CERL and PEPRA, including, for example, survivor benefits, death benefits, investigation of benefits questions, felony forfeiture, and reciprocity, are within the BOR’s authority.

- v. Collections. The BOR oversees collection issues, including underpayment of contributions and overpayment of benefits.
- vi. Administrative appeals. The BOR has established and oversees an administrative appeals process, and hears and decides member appeals with regard to plan administration issues. The administrative appeals process adopted by the BOR provides due process to members with disputes.
- vii. Procedure for assessing and determining whether an element of compensation was paid to enhance benefits. (Section 31542.) The BOR is required to implement a procedure to address potential “pension spiking.” If the BOR determines that compensation was paid to enhance a member’s benefit, the member or employer may present evidence that the compensation was not paid for that purpose and request the BOR to reverse its decision. This requirement was implemented in part through the administrative appeals process described in (vi) above.
- viii. LACERA operations. All LACERA operational issues are addressed by the BOR, other than those assigned to the Boards jointly or to the BOI as described in the preceding sections of this memo. The BOR’s operational responsibilities are broad, except as limited, and include such important matters as privacy, Public Records Act requests, member communications, and all issues not specifically provided to be performed elsewhere.
- ix. Financial and accounting services. (Section 31593.) Aside from financial, actuarial, and auditing responsibilities of the BOI and the Audit Committee as explained above, the BOR monitors and supervises the Financial and Accounting Services Division and related financial reporting compliance issues and approves retention of LACERA’s external financial auditor based on a recommendation from the Audit Committee.
- x. Personnel issues. The personnel function, which includes Human Resources, is part of the management of the system, and is therefore under the jurisdiction of the Board of Retirement. Personnel issues includes employment claims and litigation. This responsibility excludes the CEO and the CAE, which report jointly to both Boards as noted above. It also excludes classification, compensation, and union contracts (although negotiations will be overseen by the BOR), which are joint board responsibilities. In addition, it is reasonable to

acknowledge that both Boards have an interest in significant personnel issues concerning senior management, such as the Chief Counsel, who regularly advise the BOR. Accordingly, while the BOR will have oversight responsibility for most personnel issues, certain personnel issues may appropriately be addressed by both Boards working together or by the BOI alone.

- xi. Aids to benefits administration.* The BOR's broad authority over benefits, including service retirements, disability retirements, and other benefits, encompasses the ability to procure consultants and whatever other aids are necessary for the effective performance of that work.
- xii. Tax compliance issues.* The BOR oversees tax qualification issues and monitors that LACERA remains in compliance with applicable requirements of the Internal Revenue Code. The BOR also monitors compliance with other tax laws, such as state and federal withholding requirements for member and beneficiary payments.
- xiii. Adopt BOR regulations.* (Sections 31525, 31526.) The BOR is required to adopt board regulations providing for election of officers, their terms, meetings, and all other matters relating to the administrative procedure of the board.
- xiv. Filling of BOR vacancies.* (Section 31523.) The BOR is required to cause an election to be held at the earliest possible date for any vacancy in the elected positions.
- xv. Separation from County service.* (Section 31524.) Separation from County service of an elected member vacates the trustee's office.
- xvi. 24 hours of trustee education.* (Section 31522.8.) BOR trustees are required to obtain 24 hours of education every two years on the subjects listed in Section 31522.8.
- xvii. Conflict and revolving door limits.* (Section 31528.) Members of the BOR may not have a personal interest, direct or indirect, in the making of any investment, the profit or losses on any investments, or the sale of any investment, or act as agent for others in the use of trust funds. BOR members also may not, for a period of two years after leaving office, act as an agent or attorney for or otherwise represent for compensation any person, except the County, before the BOI, BOR, or staff by personal appearance or any oral or written communication for the purpose of influencing LACERA administrative or legislative action or concerning a contract, grant, or purchase or sale of goods or

property. Beyond Section 31528, the BOR has authority to regulate conflicts that may arise in the conduct of its affairs and the matters under its authority.

- xxviii. Authority to obtain legal representation. (Sections 31529, 31529.1, 31529.5, 31529.6, 31529.9.) The BOR may retain outside counsel to act as counsel for the board or assist in the performance of its responsibilities.
- xix. Litigation related to LACERA benefits, operations, and management. All non-investment related litigation is managed by the BOR, with the possible exception that there may be limited, extraordinary situations where good governance and fiduciary duty suggests that the best case management will be performed by both Boards.
- xx. Issuance of subpoenas. (Section 31535.1) The BOR has the authority to issue subpoenas in connection with its areas of responsibility.
- xxi. Administration of the OPEB program. (Sections 31691, 31694.) The BOR administers the retiree healthcare program under the 1982 Agreement, as amended, with the County and under separate agreements with participating districts.
- xxii. Approval of travel. The BOR has the responsibility under the Education and Travel Policy to approve travel for its trustees according to the terms of the policy.
- xxiii. Committees. Under the BOR Regulations, the BOR Chair may appoint such standing and ad hoc committees as he or she deems necessary to accomplish the BOR's responsibilities. The BOR as a whole also has the authority to establish committees.

The BOR also has the authority to perform and manage their specific responsibilities as listed above, adopt policies and procedures, and take other reasonable and necessary actions related to their specifically assigned responsibilities. The BOR's authorities and responsibilities are further addressed in the BOR's Regulations, Board Charter, Committee Charters, the Power and Duties of Retirement Board Members, Policies and Procedures for Handling Disability Applications, Procedures for Disability Retirement Hearings, and other existing policies and procedures. The BOR must manage its meetings and affairs to comply with the Brown Act, Cal. Gov't Code 54950, *et seq.*

///

CONCLUSION

This summary of the Boards' responsibilities is based on the current state of the law. It is also important to repeat that, while this memo is intended to be comprehensive, there may be specific responsibilities of the Boards that are not mentioned with particularity. To the extent there are ambiguities in the law or the Boards would like to change existing practice, LACERA can seek legislative changes. The Boards, separately or jointly depending on the subject matter, also have the discretion to adopt additional policies and procedures to clarify their respective responsibilities.

c:	Robert Hill	Vincent Lim	Leilani Ignacio
	James Brekk	Ted Granger	Fern Billingsy
	John Popowich	John McClelland	Johanna Fontenot
	Bernie Buenaflor	Christopher Wagner	Frank Boyd
	Jon Gabel	Vache Mahseredjian	Michael Herrera
	Beulah Auten	Ted Wright	Christine Roseland
	Richard Bendall	Jude Perez	John Harrington
	Allan Cochran	Jim Rice	Jill Rawal
	Vanessa Gonzalez	Scott Zdrazil	Cheryl Lu
	Ricki Contreras	Quoc Nguyen	Bonnie Nolley
	Derwin Brown	Leisha Collins	Linda Ghazarian
	Cassandra Smith	Harvey Leiderman	

**FOR INFORMATION ONLY**

July 23, 2021

TO: Each Trustee,
Board of Retirement

FROM: Louis Gittens, Section Head ^{LG}
Benefits Division

FOR: August 4, 2021 Board of Retirement Meeting

**SUBJECT: ANNUAL COMPENSATION LIMITS APPLICABLE TO CONTRIBUTIONS
AND FINAL AVERAGE COMPENSATION**

At the Board's request, we are providing this memo to give Trustees an update on the annual compensation limits for both Legacy and Public Employees Pension Reform Act of 2013 (PEPRA) members, and to give Trustees a better understanding of how annual compensation limits apply toward both contributions and retirement benefits.

Both private and government retirement plans are subject to the employee compensation and benefit limits set forth in IRC Section 401(a)(17) of Title 26 of the United States Code. To conform with IRC Section 401(a)(17), CERL Section 31671 places an annual compensation limit on Legacy employees entering membership on or after July 1, 1996. Legacy employees entering membership prior to July 1, 1996 are not subject to an annual compensation limit and are "grandfathered" with no limit placed on their annual retirement allowance.

California government retirement plans are further subject to compensation and benefit limits set forth in the Public Employees' Pension Reform Act of 2013 (PEPRA). PEPRA placed further annual compensation limits on employees entering membership on or after January 1, 2013. The annual compensation limit is used to determine the required member contributions toward the retirement plan and the final average compensation (FAC) used to compute the retirement allowance. Once a member has reached the annual compensation limit, contributions will cease for the remainder of that year, and they will be restricted to using that limited amount in the determination of their FAC. We will provide an example of this later in this memo.

Annual Compensation Limits

Under IRC 401(a)(17) and Section 31671 the annual compensation limit for Legacy employees entering membership on or after July 1, 1996 may be adjusted from time to

time by the Commissioner of Internal Revenue due to increases in the cost of living. Historically, the Internal Revenue has increased the salary limit in \$5,000 increments. The current annual compensation limit for 2021 is \$290,000.

Employees entering membership on or after January 1, 2013 become PEPRA members and are subject to an annual compensation limit described under PEPRA Section 7522.10. The limit is based on 120% of the Social Security annual compensation limit in effect in 2013, which was in the amount of \$113,700, and, therefore, 120% amounted to \$136,400, in 2013. Thereafter, the annual compensation limit has been adjusted based on changes to the Consumer Price Indices for All Urban Consumers (CPI-U) U.S. City Average. The 2021 annual compensation limit for PEPRA members is \$153,671.

The chart below summarizes the 2021 Annual Compensation Limit based on Membership Date.

Annual Compensation Limits Based on Membership Date		
Membership Date	2021 Annual Compensation Limit	Status
Prior to July 1, 1996	No limit	Grandfathered
On or after July 1, 1996	\$290,000	401(a)(17) & 31671
On or after January 1, 2013	\$153,671	PEPRA, 7522.10

Applicable Periods Subject to the Annual Compensation Limit

The annual compensation limit for each 12-month period is subject to the annual compensation limit in effect for the calendar year in which the 12-month period begins.

Take for example a legacy member in Safety Plan B who applied to retire effective July 31, 2021. Safety Plan B requires a one-year FAC period, the beginning of which would occur in 2020 for a retirement date of July 31, 2021.

Legacy Member Retiring Effective July 31, 2021	
FAC Period:	June 30, 2020 - July 31, 2021
Beginning Annual Compensation Year:	2020
2020 Annual Compensation Limit:	\$285,000

When the plan requires more than one 12-month period, such as the PEPRA plans and Plan E, the applicable annual compensation limit is the annual compensation limit in effect for the calendar year in which the 12-month period begins. The same exercise would occur for each year if a member were in a retirement plan that required a 3-year FAC, and the FAC would be the average of those three years.

Los Angeles County Auditor Controller's Role

The Los Angeles County Auditor-Controller is responsible for employee's salary payments and deductions for contributions, which it performs through their payroll system,

eHR. If a member's earnings reach the annual compensation limit, the County's payroll system discontinues deductions for retirement contributions for the remainder of the calendar year. Members continue to earn service credit through

the end of the calendar year for pay periods in which they earn compensation despite not making retirement contributions. Deductions for contributions resume the following January.


Where Members Can Find the Current Annual Compensation Limits

Members can find the current annual compensation limits posted in LACERA's new website under Active Members>General Plans>Plan Center. Alternatively, members may contact LACERA's Call Center at 800-786-6464, or make an appointment to visit the Member Service Center, and a specialist will gladly assist them with their needs.



July 21, 2021

TO: Each Trustee,
Board of Retirement

FROM: Carly Ntoya, Ph.D. 
Director, Human Resources

FOR: August 4, 2021 Board of Retirement Meeting

SUBJECT: Labor Negotiator - Irma Rodriguez Moisa

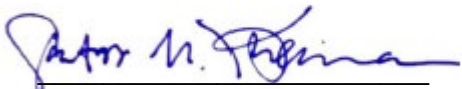
The current Memoranda of Understanding (MOU) between Los Angeles County Employees Retirement Association (LACERA) and Service Employees International Union (SEIU) Local 721 for Bargaining Units 850 and 851 will expire on December 31, 2021. Therefore, in August 2021 LACERA and SEIU will begin negotiations to establish new labor contracts.

Human Resources Division posted one (1) Request for Proposal (RFP) for Labor Negotiation Services on the LACERA website on March 30, 2020. LACERA received six (6) proposals in response to the RFP. The RFP selection committee (Committee) consisting of JJ Popowich, Assistant Executive Director; Johanna Fontenot, Senior Staff Counsel; Carly Ntoya, Director, Human Resources; and Annette Cleary, Assistant Director, Human Resources interviewed four (4) potential Negotiators. Mr. Draza Mrvichin, LACERA's long-time negotiator, was contacted but chose not to submit a proposal.

The Committee selected Irma Rodriguez Moisa, Partner at Atkinson, Andelson, Loya, Ruud, & Romo (AALRR) to provide labor negotiation services in the best interest for LACERA. As detailed in the attached resume, Ms. Moisa has extensive experience in employment law, labor law, and in the negotiation of MOUs for public sector agencies. Ms. Moisa and AALRR are highly regarded in the labor relations industry. The RFP Committee's recommendation was approved by Santos H. Kreimann, Chief Executive Officer.

By mutual agreement, LACERA and SEIU will open negotiations no later than August 15, 2021.

Reviewed and Approved:



Santos H. Kreimann
Chief Executive Officer

Attachment: Irma Rodriguez Moisa Resume

cc: Board of Investments
Luis Lugo
Steven P. Rice

Irma Rodríguez Moisa

Partner
562-653-3200
imoisa@aalrr.com



Irma Rodríguez Moisa is an experienced litigator, labor negotiator, and trial attorney representing public and private entities in labor and employment matters. She is recognized as one of the top Labor and Employment lawyers in the state for her outstanding results for her clients in their most complex and sensitive matters. She has handled matters ranging from discrimination, sexual harassment, retaliation, FMLA/CFRA, disability discrimination, wrongful termination, and the First Amendment.

Ms. Rodríguez Moisa serves as the Partner In Charge of the Firm's Headquarters office in Cerritos and is a member of the Firm's Executive Committee. She also served as the Practice Group Leader for the Public Entity Labor and Employment Practice Group.

Honors & Recognitions

Ms. Rodríguez Moisa was named to the *Daily Journal's* Top Women Lawyers list in 2015 and its Top Labor & Employment Attorney list in 2015 and 2017. In 2011, Ms. Rodríguez Moisa was named to the *Daily Journal's* top municipal lawyers in California. In 2009, Ms. Rodríguez Moisa was named to the *Daily Journal's* annual list of the "Top Women Litigators" in California. Every year since 2004, she has been recognized as a Super Lawyer by *Southern California Super Lawyers* magazine.

Upon graduating from law school Ms. Rodríguez Moisa earned a Skadden Arps Public Interest Law Fellowship, awarded to only twenty-five law students from around the country. The Fellowship allowed Ms. Rodríguez Moisa to spend the first four years of her career at the Mexican American Legal Defense and Educational Fund (MALDEF), working on issues related to language-based discrimination and voting rights.

OFFICE

12800 Center Court Drive
Suite 300
Cerritos, CA 90703

EDUCATION

J.D., University of California,
Berkeley School of Law
M.P.P., Harvard University
B.S., University of California, Berkeley

ADMISSIONS

1992, California
U.S. Court of Appeals, Fifth Circuit
U.S. Court of Appeals, Ninth Circuit
U.S. District Courts, Central, Eastern,
and Northern Districts of California

PRACTICE AREAS

Class Action Defense
Collective Bargaining & Labor
Relations
Investigations
Labor & Employment Litigation
Litigation
Nonprofit Organizations
Trials
Workplace Training

Irma Rodríguez Moisa

Representative Matters

Labor Relations

Irma Rodríguez Moisa began negotiating on behalf of public agencies in 1999. She was drawn into this field by clients who admired her advocacy style in litigation and because of her public policy background. Since that time, Ms. Rodríguez Moisa has served as lead negotiator for numerous agencies, usually negotiating three to five contracts per year. As chief negotiator, Ms. Rodríguez Moisa has provided strategic labor advice to clients, allowing them to reach their short- and long-term organizational and financial goals.

These negotiations have resulted in changes to retiree medical benefits, implementation of furloughs, salary concessions, and changes to pension benefit formulas and contributions. Some of Ms. Rodríguez Moisa's clients in the last few years include the following:

- *City of Long Beach*: Negotiated four-year agreements with the City's largest civilian union after years of contentious relationships. Also negotiated three-year agreements with the City's firefighters association and lifeguard association.
- *Long Beach Transit*: Serve as the chief negotiator with the bus operator and supervisor bargaining units. Negotiated the initial four-year comprehensive MOU with the supervisor unit.
- *City of Anaheim*: Served as chief negotiator with the Anaheim Police Association, convention center employees (represented by Teamsters) and supervisors (represented by AFSCME) bargaining units. Reached multi-year agreements.
- *City of Pasadena*: Served as chief negotiator with the POA and reached a three-year agreement after contentious and political negotiations.
- *City of Los Angeles*: Served as co-chief negotiator for the City's negotiations with the Coalition of Los Angeles City Unions, which represents approximately 60 percent of the City's civilian workforce. These negotiations resulted in an unprecedented amount of concessions, revisions to retiree health benefits, and resolution of several outstanding lawsuits. In addition, in 2012, Ms. Rodríguez Moisa assisted the City in negotiating with the Engineers and Architects Association to bring about salary and health insurance concessions and resolve the parties' furlough litigation.

Litigation

Irma Rodríguez Moisa

Ms. Rodríguez Moisa has represented clients in hundreds of lawsuits in both state and federal court. Ms. Rodríguez Moisa has taken dozens of cases to trial and arbitration, with a remarkable success record. These matters range from sexual harassment and discrimination claims to First Amendment and whistleblower claims. Some representative trials include:

- *Complete Defense Verdict.* After the plaintiff was discharged from his job, he filed a civil action against a major California water district. He alleged religious discrimination and retaliation and sought economic damages in excess of \$1.6 million, plus emotional distress damages. The plaintiff claimed that his supervisor was biased against him due to his religious beliefs and that the defendant retaliated against him after he filed an internal complaint for religious discrimination. During a three-week trial, Ms. Rodríguez Moisa provided evidence of the defendant's culture of religious tolerance, the plaintiff's insubordination and misrepresentations, and the defendant's attempts to counsel, train, and otherwise help the plaintiff. Witnesses included the defendant's supervisors, employee relations personnel, and coworkers as well as a psychiatrist and an economist. On June 1, 2016, the jury returned a 12-0 verdict in favor of the defendant on the religious discrimination claim and an 11-1 verdict for the defendant on the retaliation claim.
- *Greatly Reduced Damages.* The plaintiff, the only African-American firefighter employed by Ms. Rodríguez Moisa's client, a city in California, alleged he was subjected to a hostile work environment and discrimination due to his race and to retaliation for complaining of discrimination and harassment. The plaintiff contended that his supervisor and colleagues referred to him as a "n" and made other racially demeaning comments. The plaintiff also contended that he was denied promotional opportunities. He demanded \$4.5 million in damages from the City. The City admitted that the supervisor used the "n" word on three occasions and explained that the supervisor was terminated after the plaintiff complained. The City also denied that the plaintiff was refused a promotion and instead noted that he remained on the eligibility list for a promotion. After an eleven-day trial, the jury awarded Plaintiff \$915,000 in damages.
- *Highly Favorable Settlement.* The plaintiff filed suit against Ms. Rodríguez Moisa's client, a large grocery chain, alleging that he had been subjected to disability discrimination and retaliation, and that the defendant failed to engage in the interactive process and failed to accommodate him in violation of the Fair Employment and Housing Act. The plaintiff alleged that he was terminated because his store manager harbored animus towards him after he suffered a workplace injury. He claimed that the store manager targeted him for termination after he purportedly ate one grape while on the produce department floor. The

Irma Rodríguez Moisa

defendant contended that the plaintiff was terminated for violating its company policy prohibiting employees from consuming or taking company product without paying for it. After seven days of trial and Ms. Rodríguez Moisa's cross-examination of the plaintiff, the case settled for \$5,000.

- *Summary Judgment:* The plaintiff, a faculty member and surgeon at a highly prestigious medical school and hospital, filed suit alleging discrimination based on his association with an African-American colleague and retaliation in violation of the California Fair Employment and Housing Act. The plaintiff alleged that he was subjected to numerous adverse employment actions because of his support of his colleague's lawsuit against the defendants. The plaintiff claimed that he was the only person who corroborated the showing of an inappropriate and racist slideshow depicting his colleague as a gorilla. The plaintiff claimed that his supervisors and hospital administrators sought to discredit him and decrease his practice by wrongfully reporting him in a malpractice action, reducing the number of patient referrals, and having to endure his colleagues' ostracism. Specifically, the plaintiff claimed that one of his colleagues prepared a slide show depicting his gravestone and stating that he should "RIP." After aggressive litigation, the defendant filed a motion for summary judgment, which was granted.
- *Complete Defense Verdict:* The plaintiff was laid off from his job at a large public institution of higher education in 2010 after a reorganization of his unit resulted in his position being eliminated. He filed suit, alleging several causes of actions against Ms. Rodríguez Moisa's client, including: religious creed discrimination in violation of the Fair Employment and Housing Act (FEHA); whistleblower retaliation; and wrongful termination in violation of public policy. During the course of litigation, multiple claims were dismissed. Consequently, the only claims presented to the jury at trial were the claims for age discrimination, retaliation under the FEHA, and failure to prevent discrimination and retaliation, with alleged economic damages of about \$750,000 and non-economic damages of two to three times that amount. After three weeks of trial, the jury rendered a defense verdict in less than 45 minutes of deliberation.
- *Complete Defense Verdict:* The plaintiff alleged that she was subjected to sexual harassment by a co-worker and that her supervisor ignored her complaints. Ms. Rodríguez Moisa's client, a large grocery chain, contended it took appropriate corrective action after the plaintiff complained. A defense verdict was rendered after less than two hours of deliberations.
- *Appellate Victory:* The plaintiff filed suit against a large California city represented by Ms. Rodríguez Moisa and five individual defendants,

Irma Rodríguez Moisa

alleging eight separate causes of action. After a two-month jury trial, the jury found in favor of the City in six of the eight causes of action. On appeal, the Court of Appeal reversed the jury's verdict on the other two causes of action and rendered judgment in favor of the City.

Representative Clients

Ralphs Grocery Company; Home Depot; CalAmp Wireless Networks, Inc.; PIH Health; The Regents of the University of California; Metropolitan Water District; California cities include: Los Angeles, Downey, Long Beach, Camarillo, Montebello, Anaheim, Santa Ana, Huntington Beach, Vernon, and Commerce; California counties include: Imperial, San Bernardino, and Inyo.

Events & Speaking Engagements

Ms. Rodríguez Moisa is a sought-after presenter and instructor. She has provided training to various entities and professional associations on topics such as: preventing discrimination, retaliation, and harassment; conducting disciplinary investigations; responding to EEOC and DFEH complaints; understanding employee privacy rights; properly maintaining personnel files; managing employee leaves; and imposing employee discipline.

Ms. Rodríguez Moisa has spoken before numerous organizations, including the National Employment Law Institute, the California Association of District Attorneys, PIHRA, ACHRO, CalPELRA, the Kansas Judicial Council, the California League of Cities, the City Attorneys Association of Los Angeles County, the Orange County City Attorneys Association, SCPMA, and SCPLRC.

Ms. Rodríguez Moisa also serves as a trainer at the California Public Employer Labor Relations Association Labor Academies ("CalPELRLearn") and has taught at the National Employment Law Institute.

Alerts & Articles

Cal/OSHA Updates "FAQ" Guidance Regarding Emergency COVID-19 Regulations | 01.15.2021

Legal and Practical Considerations for Mandating That Public Employees Obtain a COVID-19 Vaccination | 12.17.2020

Cal/OSHA Adopts Expansive and Burdensome Regulations to Mitigate COVID-19 Exposure and Outbreaks in the Workplace | 12.02.2020

FOR INFORMATION ONLY

July 23, 2021

TO: Each Trustee
Board of Retirement
Board of Investments

FROM: Barry W. Lew 
Legislative Affairs Officer

FOR: August 4, 2021 Board of Retirement Meeting
August 11, 2021 Board of Investments Meeting

SUBJECT: **Monthly Status Report on Legislation**

Attached is the monthly report on the status of legislation that staff is monitoring or on which LACERA has adopted a position.

Reviewed and Approved:



Steven P. Rice, Chief Counsel

Attachments

LACERA Legislative Report Index
LACERA Legislative Report

cc: Santos H. Kreimann
JJ Popowich
Steven P. Rice
Jon Gabel
Tony Roda, Williams & Jensen
Joe Ackler, Ackler & Associates

PUBLIC RETIREMENT	AUTHOR	TITLE	PAGE
AB 551.....	Rodriguez (D).....	Teachers' Retirement System: Individual Plans.....	1
AB 627.....	Waldron (R).....	Recognition of Tribal Court Orders: Retirement Plans.....	1
AB 826.....	Irwin (D).....	County Employees Retirement Law: Compensation Earnable....	1
AB 1133.....	Chen (R).....	State Employee Hybrid Pension System.....	1
AB 1293.....	Cooley (D).....	Federal Law Limits: Adjustments.....	2
SB 278.....	Leyva (D).....	PERS: Disallowed Compensation: Benefit Adjustments.....	2
SB 294.....	Leyva (D).....	Public Retirement: Leave of Absence: Service Credit.....	2
SB 634.....	Labor, Public Employment & Retirement Cmt.....	Public Employees' Retirement.....	2
HR 2954.....	Neal (D).....	Strong Retirement.....	3
PUBLIC INVESTMENT			
AB 539.....	Cooley (D).....	State Teachers' Retirement: Investment Managers.....	3
AB 890.....	Cervantes (D).....	Public Employee Retirement Systems: Investment.....	3
AB 1019.....	Holden (D).....	Public Employee Retirement Systems: Investments.....	4
SB 457.....	Portantino (D).....	Public Employee Retirement Systems: Investments.....	4
RETIREMENT PERSONNEL			
AB 761.....	Chen (R).....	County Employees' Retirement: Personnel: Orange County.....	4
PUBLIC EMPLOYMENT			
AB 17.....	Cooper (D).....	Peace Officers: Disqualification from Employment.....	5
AB 444.....	Public Employment and Retirement Cmt.....	State and Local Employees: Pay Warrants: Designees.....	5
AB 1354.....	Grayson (D).....	Public Employees' Retirement.....	5
AB 1460.....	Bigelow (R).....	State Employment: COVID-19 Telework: Costs.....	5
SB 411.....	Cortese (D).....	Public Employees' Retirement System.....	6
DISABILITY RETIREMENT			
AB 845.....	Rodriguez (D).....	Disability Retirement: COVID-19: Presumption.....	6
WORKERS COMPENSATION			
AB 334.....	Mullin (D).....	Workers Compensation: Skin Cancer.....	6
AB 415.....	Rivas R (D).....	Employment: Workers' Compensation.....	7
AB 772.....	Ramos (D).....	Workers' Compensation: Medical Treatment.....	7
AB 872.....	Wood (D).....	Leave of Absence: Firefighters.....	7
AB 991.....	Ward (D).....	Workers' Compensation: Presumed Injuries.....	8
SB 213.....	Cortese (D).....	Workers' Compensation: Hospital Employees.....	8
SB 284.....	Stern (D).....	Workers' Compensation: Firefighters and Peace Officers.....	8
SB 335.....	Cortese (D).....	Workers' Compensation: Liability.....	9
SB 788.....	Bradford (D).....	Workers' Compensation: Risk Factors.....	9
BROWN ACT			
AB 339.....	Lee (D).....	Local Government: Open and Public Meetings.....	9
AB 361.....	Rivas R (D).....	Open Meetings: Local Agencies: Teleconferences.....	9
AB 703.....	Rubio (D).....	Open Meetings: Local Agencies: Teleconferences.....	10
SB 274.....	Wieckowski (D).....	Local Government Meetings: Agenda and Documents.....	10
PUBLIC RECORDS ACT			
AB 343.....	Fong (R).....	California Public Records Act Ombudsperson.....	10
AB 386.....	Cooper (D).....	Public Employees Retirement: Investments: Confidential.....	11
AB 473.....	Chau (D).....	California Public Records Act.....	11
AB 474.....	Chau (D).....	California Public Records Act: Conforming Revisions.....	11
SOCIAL SECURITY			
AJR 9.....	Cooper (D).....	Social Security.....	11
HR 82.....	Davis R (R).....	Government Pension Offset Repeal.....	12
HR 2337.....	Neal (D).....	Noncovered Employment.....	12
HEALTHCARE			
AB 1092.....	Mayes (R).....	Public Employees' Retirement: Health Benefits.....	12
AB 1400.....	Kalra (D).....	Guaranteed Health Care for All.....	13
HR 4148.....	Malinowski (D).....	First Responders Medicare Option.....	13
S 2236.....	Brown S (D).....	Medicare Buy In Option for First Responders.....	13

LACERA Legislative Report
2021-22 Legislative Session
Status as of July 23, 2021

PUBLIC RETIREMENT

CA AB 551	AUTHOR: TITLE: INTRODUCED: DISPOSITION: SUMMARY:	Rodriguez [D] Teachers' Retirement System: Individual Plans 02/10/2021 Pending Authorizes the State Teachers' Retirement System to administer an individual retirement plan as described in Section 408 of Title 26 of the United States Code. Eliminates the requirement that the administration of these plans be for the purpose of accepting a rollover from an annuity contract or custodial account offered by the system.
	STATUS:	06/03/2021 In ASSEMBLY. To Inactive File.
CA AB 627	AUTHOR: TITLE: INTRODUCED: DISPOSITION: SUMMARY:	Waldron [R] Recognition of Tribal Court Orders: Retirement Plans 02/12/2021 Enacted Establishes a procedure pursuant to which one or both of the parties to a tribal court proceeding may file an application for recognition of a tribal court order that establishes a right to child support, spousal support payments, or marital property rights to a spouse, former spouse, child, or other dependent of a participant in a retirement plan or other plan of deferred compensation, and that assigns all or a portion of the benefits payable with respect to the plan participant to an alternate payee.
	STATUS:	07/09/2021 Chaptered by Secretary of State. Chapter No. 2021-058
CA AB 826	AUTHOR: TITLE: INTRODUCED: LAST AMEND: DISPOSITION: SUMMARY:	Irwin [D] County Employees Retirement Law: Compensation Earnable 02/16/2021 07/14/2021 Pending Prescribes, for the County Employees Retirement Law, a definition of compensation earnable that would include any form of remuneration, whether paid in cash or as in-kind benefits, if specified requirements are met.
	STATUS:	07/14/2021 In SENATE. Read second time and amended. To third reading.
CA AB 1133	AUTHOR: TITLE: INTRODUCED: DISPOSITION: SUMMARY:	Chen [R] State Employee Hybrid Pension System 02/18/2021 Pending States the intent of the Legislature to enact legislation that would create a hybrid retirement benefit, consisting of a defined benefit pension and a defined contribution program, within the Public Employees' Retirement System, that state employees would have the option of electing.

	STATUS:	
	02/18/2021	INTRODUCED.
CA AB 1293	AUTHOR:	Cooley [D]
	TITLE:	Federal Law Limits: Adjustments
	INTRODUCED:	02/19/2021
	LAST AMEND:	07/06/2021
	DISPOSITION:	Pending
	SUMMARY:	Prohibits the amount payable to a member or a judge under the Legislators' Retirement System, the Judges' Retirement System, and the Judges' Retirement System II, including specified adjustments, from exceeding the federal limits on annual defined benefit plan payments and would incorporate specified provisions of federal law by reference. Requires the retirement allowance of specified judges to be increased to reflect adjustments to payment limits prescribed by federal law under certain circumstances.
	STATUS:	
	07/12/2021	From SENATE Committee on LABOR, PUBLIC EMPLOYMENT AND RETIREMENT: Do pass to Committee on APPROPRIATIONS. (5-0)
CA SB 278	AUTHOR:	Leyva [D]
	TITLE:	PERS: Disallowed Compensation: Benefit Adjustments
	INTRODUCED:	01/29/2021
	LAST AMEND:	03/23/2021
	DISPOSITION:	Pending
	SUMMARY:	Establishes new procedures under Public Employees' Retirement Law for cases in which Public Employees' Retirement System determines that the benefits of a member or annuitant are, or would be, based on disallowed compensation that conflicts with State Public Employees' Pension Reform Act of 2013 and other specified laws and thus impermissible under Public Employees' Retirement Law.
	STATUS:	
	07/07/2021	In ASSEMBLY Committee on APPROPRIATIONS: To Suspend File.
CA SB 294	AUTHOR:	Leyva [D]
	TITLE:	Public Retirement: Leave of Absence: Service Credit
	INTRODUCED:	02/02/2021
	LAST AMEND:	06/14/2021
	DISPOSITION:	Pending
	SUMMARY:	Removes the 12-year limitation for service credit earned on a compensated leave of absence for purposes of service with an employee organization. States that this leave is in addition to any leave to which public employees may be entitled by other laws or by a memorandum of understanding or collective bargaining agreement.
	STATUS:	
	07/08/2021	In ASSEMBLY. Read second time. To third reading.
CA SB 634	AUTHOR:	Labor, Public Employment & Retirement Cmt
	TITLE:	Public Employees' Retirement
	INTRODUCED:	02/19/2021

LAST AMEND: 06/14/2021
DISPOSITION: Pending
SUMMARY:

Prohibits a member of the State Teachers' Retirement System (STRS) from purchasing service credit for any school year if the purchase would result in more than one year of service for that school year. Requires the member to submit the election to retain coverage to the employer and would delete the requirement that a copy of the form be submitted to STRS.

STATUS:

07/15/2021 In ASSEMBLY. Read third time. Passed ASSEMBLY.
*****To SENATE for concurrence. (69-0)

Comments:

This is an omnibus bill that covers technical amendments for CalPERS, CalSTRS, and CERL retirement systems.

US HR 2954

SPONSOR: Neal [D]
TITLE: Strong Retirement
INTRODUCED: 05/04/2021
DISPOSITION: Pending
SUMMARY:

Secures a Strong Retirement Act of 2021.

STATUS:

05/04/2021 INTRODUCED.
05/04/2021 To HOUSE Committee on WAYS AND MEANS.
05/04/2021 To HOUSE Committee on FINANCIAL SERVICES.
05/04/2021 To HOUSE Committee on EDUCATION AND LABOR.

Comments:

Would gradually raise the age for mandatory distributions to age 75 by 2032.

PUBLIC INVESTMENT

CA AB 539

AUTHOR: Cooley [D]
TITLE: State Teachers' Retirement: Investment Managers
INTRODUCED: 02/10/2021
DISPOSITION: Pending
SUMMARY:

Authorizes the Teachers' Retirement Board to contract with investment advisers upon the same finding by the Board and approval by the State Personnel Board. Authorizes the Board to establish a competitive bidding process and to specify the contract terms and conditions the Board solely deems necessary and prudent to contract with qualified investment managers and investment advisers.

STATUS:

07/15/2021 From SENATE Committee on APPROPRIATIONS: To second reading without further hearing pursuant to Senate Rule 28.8.

CA AB 890

AUTHOR: Cervantes [D]
TITLE: Public Employee Retirement Systems: Investment
INTRODUCED: 02/17/2021
LAST AMEND: 05/24/2021
DISPOSITION: Pending
SUMMARY:

Requires the Board of Administration of the Public Employees' Retirement

System and the Teachers' Retirement Board to provide reports to the Legislature on the status of achieving objectives and initiatives, to be defined by the boards, regarding participation of emerging managers or diverse managers responsible for asset management within each retirement system's portfolio of investments.

STATUS:

07/15/2021 From SENATE Committee on APPROPRIATIONS: Do pass. (5-2)

CA AB 1019

AUTHOR: Holden [D]
TITLE: Public Employee Retirement Systems: Investments
INTRODUCED: 02/18/2021
DISPOSITION: Pending
SUMMARY:

prohibit state trust moneys from being used to make additional or new investments or to renew existing investments in investment vehicles issued or owned by the government of Turkey, unless the government adopts a policy to acknowledge the Armenian Genocide and embark on a path of affording justice to its victims.

STATUS:

03/04/2021 To ASSEMBLY Committee on PUBLIC EMPLOYMENT AND RETIREMENT.

CA SB 457

AUTHOR: Portantino [D]
TITLE: Public Employee Retirement Systems: Investments
INTRODUCED: 02/16/2021
DISPOSITION: Pending
SUMMARY:

Requires the boards of administration of the Public Employees Retirement System and the State Teachers Retirement System to provide employers that are school districts and cities that participate in the systems an option to elect an investment portfolio that does not contain investment vehicles that are issued or owned by the government of the Republic of Turkey.

STATUS:

05/28/2021 To ASSEMBLY Committee on PUBLIC EMPLOYMENT AND RETIREMENT.

RETIREMENT PERSONNEL

CA AB 761

AUTHOR: Chen [R]
TITLE: County Employees' Retirement: Personnel: Orange County
INTRODUCED: 02/16/2021
LAST AMEND: 03/18/2021
DISPOSITION: Enacted
SUMMARY:

Authorizes the board of retirement for Orange County to appoint an administrator, assistant administrators, a chief investment officer, subordinate investment officers, senior management employees, legal counsel, and other specified employees. Provides that the personnel appointed pursuant to these provisions would not be county employees subject to county civil service and merit system rules, and instead would be employees of the retirement system.

STATUS:

06/28/2021 Signed by GOVERNOR.
06/28/2021 Chaptered by Secretary of State. Chapter No. 2021-026

PUBLIC EMPLOYMENT

CA AB 17	AUTHOR:	Cooper [D]
	TITLE:	Peace Officers: Disqualification from Employment
	INTRODUCED:	12/07/2020
	LAST AMEND:	01/12/2021
	DISPOSITION:	Pending
	SUMMARY:	<p>Disqualifies a person from being a peace officer if the person has been discharged from the military for committing an offense that would have been a felony if committed in the state or if the person has been certified as a peace officer and has had that certification revoked by the Commission on Peace Officer Standards and Training.</p>
	STATUS:	
	01/12/2021	From ASSEMBLY Committee on PUBLIC SAFETY with author's amendments.
	01/12/2021	In ASSEMBLY. Read second time and amended. Re-referred to Committee on PUBLIC SAFETY.
CA AB 444	AUTHOR:	Public Employment and Retirement Cmt
	TITLE:	State and Local Employees: Pay Warrants: Designees
	INTRODUCED:	02/08/2021
	DISPOSITION:	Enacted
	SUMMARY:	<p>Relates to State and local employees. Prescribes a process by which an appointing power would issue a check directly to a designated person instead of delivering employee warrants to that person. Provides that upon sufficient proof of the designee's identity, the appointing power must endorse and deposit the warrant issued to a deceased employee back into the Treasury to the credit of the fund or appropriation upon which it was drawn, then issue a revolving fund check to the designated person.</p>
	STATUS:	
	07/09/2021	Chaptered by Secretary of State. Chapter No. 2021-055
	Comments:	<p>The SACRS Legislative Committee is considering a similar proposal that would clarify that a deceased member's last pension check may be issued to a corporation, trust, or estate.</p>
CA AB 1354	AUTHOR:	Grayson [D]
	TITLE:	Public Employees' Retirement
	INTRODUCED:	02/19/2021
	DISPOSITION:	Pending
	SUMMARY:	<p>Makes nonsubstantive changes to provisions prohibiting a retired person from being employed by a public employer in the same public retirement system from which the retiree receives pension benefits without reinstatement from retirement into that system, subject to certain exceptions.</p>
	STATUS:	
	02/19/2021	INTRODUCED.
	Comments:	<p>This is a spot bill.</p>
CA AB 1460	AUTHOR:	Bigelow [R]

TITLE: State Employment: COVID-19 Telework: Costs
INTRODUCED: 02/19/2021
DISPOSITION: Pending
SUMMARY:

Authorizes the Department of Human Resources (CalHR) to provide a one-time payment of an unspecified amount to employees who have been required to telework as a result of the COVID-19 pandemic in order to offset costs associated with working remotely.

STATUS:

03/11/2021 To ASSEMBLY Committee on PUBLIC EMPLOYMENT AND RETIREMENT.

CA SB 411

AUTHOR: Cortese [D]
TITLE: Public Employees' Retirement System
INTRODUCED: 02/12/2021
LAST AMEND: 04/13/2021
DISPOSITION: To Governor
SUMMARY:

Eliminates the requirement that a person employed without reinstatement in a manner other than authorized by PERL be reinstated, instead providing that reinstatement is permissive. Makes conforming changes and makes specific reference to the duties of employees and employers regarding reinstatement after retirement in violation of PEPR.

STATUS:

07/21/2021 *****To GOVERNOR.

DISABILITY RETIREMENT

CA AB 845

AUTHOR: Rodriguez [D]
TITLE: Disability Retirement: COVID-19: Presumption
INTRODUCED: 02/17/2021
LAST AMEND: 03/30/2021
DISPOSITION: To Governor
SUMMARY:

Creates a presumption, applicable to the retirement systems that PEPR regulates and to specified members in those systems, that would be applied to disability retirements on the basis, in whole or in part, of a Coronavirus disease 2019-related illness. Requires that it be presumed the disability arose out of, or in the course of, the member's employment.

STATUS:

07/15/2021 *****To GOVERNOR.

WORKERS COMPENSATION

CA AB 334

AUTHOR: Mullin [D]
TITLE: Workers Compensation: Skin Cancer
INTRODUCED: 01/27/2021
DISPOSITION: Pending
SUMMARY:

Relates to existing law which provides that skin cancer developing in active lifeguards, for purposes of workers' compensation, is presumed to arise out of and in the course of employment, unless the presumption is rebutted. Expands the scope of this provision to certain peace officers of the Department of Fish and Wildlife and the Department of Parks and Recreation.

STATUS:

	07/15/2021	From SENATE Committee on APPROPRIATIONS: To second reading without further hearing pursuant to Senate Rule 28.8.
CA AB 415	AUTHOR:	Rivas R [D]
	TITLE:	Employment: Workers' Compensation
	INTRODUCED:	02/03/2021
	LAST AMEND:	02/12/2021
	DISPOSITION:	Pending
	SUMMARY:	Relates to workers' compensation. Defines injury for certain public employees regularly exposed to active fires or health hazards directly resulting from firefighting operations to include cancer that develops or manifests during a period of exposure to a known carcinogen while in public employment. Establishes a presumption that the cancer arose out of, and in the course of, employment, unless the presumption is controverted by evidence.
	STATUS:	
	02/12/2021	To ASSEMBLY Committee on INSURANCE.
	02/12/2021	From ASSEMBLY Committee on INSURANCE with author's amendments.
	02/12/2021	In ASSEMBLY. Read second time and amended. Re-referred to Committee on INSURANCE.
CA AB 772	AUTHOR:	Ramos [D]
	TITLE:	Workers' Compensation: Medical Treatment
	INTRODUCED:	02/16/2021
	LAST AMEND:	03/25/2021
	DISPOSITION:	Pending
	SUMMARY:	Clarifies that an employer is not limited in its ability to insure against an act of domestic terrorism or to provide benefits in excess of those required by existing law following an act of terrorism. Clarifies that when an employer approves a request for medical treatment from a treatment provider, without modification, the employer has completed utilization review under the law.
	STATUS:	
	03/25/2021	To ASSEMBLY Committee on INSURANCE.
	03/25/2021	From ASSEMBLY Committee on INSURANCE with author's amendments.
	03/25/2021	In ASSEMBLY. Read second time and amended. Re-referred to Committee on INSURANCE.
CA AB 872	AUTHOR:	Wood [D]
	TITLE:	Leave of Absence: Firefighters
	INTRODUCED:	02/17/2021
	DISPOSITION:	Pending
	SUMMARY:	Relates to Leave of absence for firefighters. Makes that benefit available to all rank-and-file and supervisory firefighters employed by the Department of Forestry and Fire Protection whose principal duties include active fire suppression or prevention services.
	STATUS:	
	07/05/2021	In SENATE Committee on APPROPRIATIONS: To Suspense File.

CA AB 991 **AUTHOR:** Ward [D]
TITLE: Workers' Compensation: Presumed Injuries
INTRODUCED: 02/18/2021
LAST AMEND: 03/11/2021
DISPOSITION: Pending
SUMMARY:
Expands presumptions for hernia, pneumonia, heart trouble, cancer, tuberculosis, bloodborne infectious disease, methicillin-resistant Staphylococcus aureus skin infection, and meningitis-related illnesses and injuries to a lifeguard employed on a year-round, full-time basis by the City of San Diego.
STATUS:
03/11/2021 To ASSEMBLY Committee on INSURANCE.
03/11/2021 From ASSEMBLY Committee on INSURANCE with author's amendments.
03/11/2021 In ASSEMBLY. Read second time and amended. Re-referred to Committee on INSURANCE.

CA SB 213 **AUTHOR:** Cortese [D]
TITLE: Workers' Compensation: Hospital Employees
INTRODUCED: 01/12/2021
LAST AMEND: 03/04/2021
DISPOSITION: Pending
SUMMARY:
Defines injury, for a hospital employee who provides direct patient care in an acute care hospital, to include infectious diseases, cancer, musculoskeletal injuries, post-traumatic stress disorder, and respiratory diseases. Creates a rebuttable presumption that these injuries that develop or manifest in a hospital employee who provides direct patient care in an acute care hospital arose out of and in the course of the employment. Includes COVID-19 in the definitions of infectious and respiratory diseases.
STATUS:
06/03/2021 In SENATE. Read third time. Failed to pass SENATE. (20-10)
06/03/2021 In SENATE. Motion to reconsider.
06/03/2021 In SENATE. Reconsideration granted.
06/03/2021 In SENATE. To Inactive File.

CA SB 284 **AUTHOR:** Stern [D]
TITLE: Workers' Compensation: Firefighters and Peace Officers
INTRODUCED: 02/01/2021
LAST AMEND: 06/28/2021
DISPOSITION: Pending
SUMMARY:
Relates to existing Law which provides that injury includes post-traumatic stress that develops during a period in which the injured person is in the service of the department or unit. Makes that provision applicable to active firefighting members of the State Department of State Hospitals, the State Department of Developmental Services, and the Military Department, and the Department of Veterans Affairs, including security officers of the Department of Justice when performing assigned duties.
STATUS:
06/28/2021 In ASSEMBLY. Read second time and amended.

Re-referred to Committee on APPROPRIATIONS.

CA SB 335 **AUTHOR:** Cortese [D]
TITLE: Workers' Compensation: Liability
INTRODUCED: 02/08/2021
LAST AMEND: 03/10/2021
DISPOSITION: Pending
SUMMARY:
Reduces the time periods after the date the claim form is filed with an employer in which the injury is presumed compensable and the presumption is rebuttable only by evidence discovered subsequent to the time period for certain injuries or illnesses, including hernia, heart trouble, pneumonia, or tuberculosis, among others, sustained in the course of employment of a specified member of law enforcement or a specified first responder.
STATUS:
07/13/2021 In ASSEMBLY Committee on INSURANCE: Failed passage.

CA SB 788 **AUTHOR:** Bradford [D]
TITLE: Workers' Compensation: Risk Factors
INTRODUCED: 02/19/2021
LAST AMEND: 06/17/2021
DISPOSITION: Pending
SUMMARY:
Prohibits consideration of race, religious creed, color, national origin, gender, marital status, sex, sexual identity, or sexual orientation to determine the approximate percentage of the permanent disability caused by other factors. Expresses the Legislature's intent to eliminate bias and discrimination in the workers' compensation system.
STATUS:
07/01/2021 In ASSEMBLY. Read third time. Passed ASSEMBLY.
*****To SENATE for concurrence. (77-0)

BROWN ACT

CA AB 339 **AUTHOR:** Lee [D]
TITLE: Local Government: Open and Public Meetings
INTRODUCED: 01/28/2021
LAST AMEND: 07/05/2021
DISPOSITION: Pending
SUMMARY:
Requires local agencies to conduct meetings subject to Ralph M. Brown Act consistent with applicable state and federal civil rights laws. Includes findings that changes proposed by this bill address a matter of statewide concern rather than a municipal affair and, therefore, apply to all cities and counties, including charter cities and counties.
STATUS:
07/13/2021 From SENATE Committee on JUDICIARY: Do pass to Committee on APPROPRIATIONS. (9-0)

CA AB 361 **AUTHOR:** Rivas R [D]
TITLE: Open Meetings: Local Agencies: Teleconferences
INTRODUCED: 02/01/2021
LAST AMEND: 07/06/2021
DISPOSITION: Pending

SUMMARY:

Authorizes a local agency to use teleconferencing without complying with the teleconferencing requirements imposed by the Ralph m. Brown Act when a legislative body of a local agency holds a meeting during a declared state of emergency, when state or local health officials have imposed or recommended measures to promote social distancing during a proclaimed state of emergency, provided certain requirements are met. Prohibits the closing of the public comment period.

STATUS:

07/15/2021 In SENATE. Read second time. To third reading.

CA AB 703

AUTHOR: Rubio [D]
TITLE: Open Meetings: Local Agencies: Teleconferences
INTRODUCED: 02/12/2021
LAST AMEND: 04/29/2021
DISPOSITION: Pending
SUMMARY:

Removes the requirements of the Ralph M. Brown Act particular to teleconferencing and allows for teleconferencing subject to existing provisions regarding the posting of notice of an agenda and the ability of the public to observe the meeting and provide public comment.

STATUS:

04/29/2021 From ASSEMBLY Committee on LOCAL GOVERNMENT with author's amendments.

04/29/2021 In ASSEMBLY. Read second time and amended.
Re-referred to Committee on LOCAL GOVERNMENT.

Comments:

According to SACRS lobbyists, this will be a two-year bill and not taken up in 2021.

CA SB 274

AUTHOR: Wieckowski [D]
TITLE: Local Government Meetings: Agenda and Documents
INTRODUCED: 01/29/2021
LAST AMEND: 04/05/2021
DISPOSITION: Pending
SUMMARY:

Requires a local agency with an internet website, or its designee, to email a copy of, or website link to, the agenda or a copy of all the documents constituting the agenda packet if the person requests that the items be delivered by email. Requires the legislative body or its designee to send by mail a copy of the agenda or a website link to the agenda and to email a copy of all other documents constituting the agenda packet, if specified criteria or circumstances are met.

STATUS:

07/08/2021 In ASSEMBLY. Read second time. To third reading.

PUBLIC RECORDS ACT

CA AB 343

AUTHOR: Fong [R]
TITLE: California Public Records Act Ombudsperson
INTRODUCED: 01/28/2021
LAST AMEND: 05/24/2021
DISPOSITION: Pending
SUMMARY:

Establishes, within the California State Auditor's Office, the California Public Records Act Ombudsperson. Requires the California State Auditor to appoint the Ombudsperson subject to certain requirements. Requires the Ombudsperson to receive and investigate requests for review, determine whether the denials of original requests complied with the California Public Records Act, and issue written opinions of its determination.

STATUS:

06/09/2021 To SENATE Committees on JUDICIARY and GOVERNMENTAL ORGANIZATION.

CA AB 386

AUTHOR: Cooper [D]
TITLE: Public Employees Retirement: Investments: Confidential
INTRODUCED: 02/02/2021
LAST AMEND: 06/29/2021
DISPOSITION: Pending
SUMMARY:

Exempts from disclosure under the California Public Records Act specified records regarding an internally managed private loan made directly by the Public Employees' Retirement Fund. Provides that these records would include quarterly and annual financial statements of the borrower or its constituent owners, unless the information has already been publicly released by the keeper of the information. Prescribes specified exceptions to this exemption from disclosure.

STATUS:

07/13/2021 In SENATE Committee on JUDICIARY: Failed passage.
 07/13/2021 In SENATE Committee on JUDICIARY: Reconsideration granted.

CA AB 473

AUTHOR: Chau [D]
TITLE: California Public Records Act
INTRODUCED: 02/08/2021
DISPOSITION: Pending
SUMMARY:

Recodifies and reorganizes the provisions of the California Public Records Act. The bill would include provisions to govern the effect of recodification and states that the bill is intended to be entirely nonsubstantive in effect.

STATUS:

07/08/2021 In SENATE. From Consent Calendar. To third reading.

CA AB 474

AUTHOR: Chau [D]
TITLE: California Public Records Act: Conforming Revisions
INTRODUCED: 02/08/2021
LAST AMEND: 06/21/2021
DISPOSITION: Pending
SUMMARY:

Enacts various conforming and technical changes related to another bill, AB 473, which recodifies and reorganizes the California Public Records Act.

STATUS:

07/08/2021 In SENATE. From Consent Calendar. To third reading.

SOCIAL SECURITY

CA AJR 9

AUTHOR: Cooper [D]
TITLE: Social Security

INTRODUCED: 03/01/2021

DISPOSITION: Adopted

SUMMARY:

Requests the Congress of the United States to enact, and the President to sign, legislation that would repeal the Government Pension Offset and the Windfall Elimination Provision from the Social Security Act.

STATUS:

07/15/2021 Chaptered by Secretary of State.

07/15/2021 Resolution Chapter No. 2021-078

BOR_Position: Support 05/05/2021

IBLC_Recommendation: Support 04/15/2021

Staff_Recommendation: Support

US HR 82

SPONSOR: Davis R [R]

TITLE: Government Pension Offset Repeal

INTRODUCED: 01/04/2021

DISPOSITION: Pending

SUMMARY:

Amends the Social Security Act; repeals the Government pension offset and windfall elimination provisions.

STATUS:

01/04/2021 INTRODUCED.

01/04/2021 To HOUSE Committee on WAYS AND MEANS.

BOR_Position: Support 05/05/2021

IBLC_Recommendation: Support 04/15/2021

Staff_Recommendation: Support

US HR 2337

SPONSOR: Neal [D]

TITLE: Noncovered Employment

INTRODUCED: 04/01/2021

DISPOSITION: Pending

SUMMARY:

Amends Title II of the Social Security Act to provide an equitable Social Security formula for individuals with noncovered employment and to provide relief for individuals currently affected by the Windfall Elimination Provision.

STATUS:

04/01/2021 INTRODUCED.

04/01/2021 To HOUSE Committee on WAYS AND MEANS.

HEALTHCARE

CA AB 1092

AUTHOR: Mayes [R]

TITLE: Public Employees' Retirement: Health Benefits

INTRODUCED: 02/18/2021

LAST AMEND: 04/26/2021

DISPOSITION: Pending

SUMMARY:

Precludes a person who has retired under PERS and who obtains work with a subsequent employer from receiving any health benefits offered under PEMHCA if the person's subsequent employer offers health care coverage that provides reasonably comparable benefits. Prohibits, among other things, employees, annuitants, and family members who become eligible to enroll on or after a specified date in Part A and Part B of Medicare from being enrolled in a basic health benefit plan.

STATUS:
04/26/2021 From ASSEMBLY Committee on PUBLIC EMPLOYMENT AND RETIREMENT With author's amendments.
04/26/2021 In ASSEMBLY. Read second time and amended. Re-referred to Committee on PUBLIC EMPLOYMENT AND RETIREMENT.

CA AB 1400 **AUTHOR:** Kalra [D]
TITLE: Guaranteed Health Care for All
INTRODUCED: 02/19/2021
DISPOSITION: Pending
SUMMARY:
Creates the Guaranteed Health Care for All Program, or CalCare, to provide comprehensive universal single-payer health care coverage and a health care cost control system for the benefit of all residents of the state. Provides that CalCare cover a wide range of medical benefits and other services and would incorporate the health care benefits and standards of other existing federal and state provisions. Creates the CalCare Board to govern CalCare, made up of 9 voting members.
STATUS:
02/19/2021 INTRODUCED.

US HR 4148 **SPONSOR:** Malinowski [D]
TITLE: First Responders Medicare Option
INTRODUCED: 06/24/2021
DISPOSITION: Pending
SUMMARY:
Amends Title XVIII of the Social Security Act to provide an option for first responders age 50 to 64 who are separated from service due to retirement or disability to buy into Medicare.
STATUS:
06/24/2021 INTRODUCED.
06/24/2021 To HOUSE Committee on WAYS AND MEANS.
06/24/2021 To HOUSE Committee on ENERGY AND COMMERCE.

US S 2236 **SPONSOR:** Brown S [D]
TITLE: Medicare Buy In Option for First Responders
INTRODUCED: 06/24/2021
DISPOSITION: Pending
SUMMARY:
Amends Title XVIII of the Social Security Act to provide an option for first responders age 50 to 64 who are separated from service due to retirement or disability to buy into Medicare.
STATUS:
06/24/2021 INTRODUCED.
06/24/2021 In SENATE. Read second time.
06/24/2021 To SENATE Committee on FINANCE.

**FOR INFORMATION ONLY**

July 21, 2021

TO: Each Trustee
Board of Retirement
Board of Investments

FROM: Ted Granger 
Interim Chief Financial Officer

FOR: August 4, 2021 Board of Retirement Meeting
August 11, 2021 Board of Investments Meeting

SUBJECT: **MONTHLY EDUCATION & TRAVEL REPORTS – JUNE 2021**

Attached, for your review, are the Board and Staff Education & Travel Reports as of June 2021. These reports include travel (i.e., attended and canceled) during Fiscal Year 2020-2021.

REVIEWED AND APPROVED:



Santos H. Kreimann
Chief Executive Officer

TG/EW/krh

Attachments

c: Luis Lugo
JJ Popowich
Jon Grabel
Steve Rice
Roberta Van Nortrick

**BOARD EDUCATION AND TRAVEL REPORT
FOR FISCAL YEAR 2020 - 2021
JUNE 2021**

Attendee	Purpose of Travel - Location	Event Dates	Travel Status
Alan Bernstein			
B	- Edu - NACD Real Estate Industry Outlook: Insights, Impacts and Opportunities - VIRTUAL	09/02/2020 - 09/02/2020	Attended
	- Edu - 2020 Milken Institute Virtual Global Conference - VIRTUAL	10/12/2020 - 10/21/2020	Attended
	- Edu- 2020 SACRS Fall Virtual Conference - VIRTUAL	11/10/2020 - 11/13/2020	Attended
	- Edu - Virtual Pension Bridge Alternatives - VIRTUAL	01/26/2021 - 01/28/2021	Attended
	- Edu - CII's 2021 Spring Conference - VIRTUAL	03/08/2021 - 03/10/2021	Attended
Elizabeth Ginsberg			
B	- Edu - CALAPRS Principles for Trustees - VIRTUAL	08/18/2020 - 08/26/2020	Attended
	- Edu - CALAPRS Advanced Principles for Trustees - VIRTUAL	06/07/2021 - 06/11/2021	Attended
Vivian Gray			
B	- Edu - SACRS Public Pension Investment Management Program 2020 - VIRTUAL	07/28/2020 - 08/13/2020	Attended
	- Edu - Koried Black Directors' Virtual Workshop - VIRTUAL	10/15/2020 - 10/15/2020	Attended
	- Edu- 2020 SACRS Fall Virtual Conference - VIRTUAL	11/10/2020 - 11/13/2020	Attended
	- Edu - Milken Institute: Walk the Talk: Investing in the Future of Black Banks, Entrepreneurship, and Opportunity - VIRTUAL	02/24/2021 - 02/24/2021	Attended
	- Edu - CALAPRS General Assembly - VIRTUAL	03/08/2021 - 03/09/2021	Attended
	- Edu - NASP 11th Annual Day of Education in Private Equity - VIRTUAL	03/25/2021 - 03/26/2021	Attended
	- Edu - NCPERS 2021 Legislative Conference - VIRTUAL	04/20/2021 - 04/20/2021	Attended
	- Edu - SACRS Spring Conference - VIRTUAL	05/11/2021 - 05/14/2021	Attended
	- Edu - NACD Women in the Boardroom: Pathways to a Board Seat - VIRTUAL	05/18/2021 - 05/18/2021	Attended
David Green			
B	- Edu - PPI 2020 Summer Roundtable - Los Angeles CA	07/14/2020 - 07/16/2020	Attended
	- Edu - Pacific Council - "Beyond the Horizon" Summit - VIRTUAL	07/20/2020 - 07/24/2020	Attended
	- Edu - The Pacific Council on International Policy's PolicyWest 2020 - VIRTUAL	12/03/2020 - 12/04/2020	Attended
	- Edu - SACRS Spring Conference - VIRTUAL	05/11/2021 - 05/14/2021	Attended
Elizabeth Greenwood			
B	- Edu - 2020 Milken Institute Virtual Global Conference - VIRTUAL	10/12/2020 - 10/21/2020	Attended
	- Edu- PPI 2020 Asia Pacific Roundtable - VIRTUAL	10/20/2020 - 10/22/2020	Attended
	- Edu - Yale School of Management Executive Education -Women's Leadership Program - VIRTUAL	11/18/2020 - 11/18/2020	Attended
James Harris			
B	- Edu - SACRS Sexual Harassment Prevention Training - VIRTUAL	07/15/2020 - 07/15/2020	Attended
	- Edu - SACRS Public Pension Investment Management Program 2020 - VIRTUAL	07/28/2020 - 08/13/2020	Attended

**BOARD EDUCATION AND TRAVEL REPORT
FOR FISCAL YEAR 2020 - 2021
JUNE 2021**

Attendee	Purpose of Travel - Location	Event Dates	Travel Status
Patrick Jones			
B	- Edu - Goldman Sachs The Pandemic Economy: Rates, the Fed & the Road Ahead - VIRTUAL	04/30/2021 - 04/30/2021	Attended
	- Edu - SACRS Spring Conference - VIRTUAL	05/11/2021 - 05/14/2021	Attended
	- Edu - NCPERS 2021 Trustee Educational Seminar - VIRTUAL	06/08/2021 - 06/09/2021	Attended
Shawn Kehoe			
B	- Edu- PPI 2020 Asia Pacific Roundtable - VIRTUAL	10/20/2020 - 10/22/2020	Attended
	- Edu - NCPERS Fall Conference - VIRTUAL	02/02/2021 - 02/03/2021	Attended
Joseph Kelly			
B	- Edu - NACD Financial Services Industry Outlook: Future Trends in Middle Market Credit - VIRTUAL	01/07/2021 - 01/07/2021	Attended
	- Edu - NACD Hospitality and Travel Industry Outlook: Insights, Impacts, and Opportunities - VIRTUAL	01/27/2021 - 01/27/2021	Attended
	- Edu - PPI Virtual Roundtable - VIRTUAL	02/16/2021 - 02/18/2021	Attended
	- Edu - CII's 2021 Spring Conference - VIRTUAL	03/08/2021 - 03/10/2021	Attended
	- Edu - NACD - Conversation with Walter Isaacson - VIRTUAL	03/08/2021 - 03/08/2021	Attended
	- Edu - NASP 11th Annual Day of Education in Private Equity - VIRTUAL	03/25/2021 - 03/26/2021	Attended
	- Edu - SACRS Spring Conference - VIRTUAL	05/11/2021 - 05/14/2021	Attended
Keith Knox			
B	- Edu - PPI 2020 Summer Roundtable - Los Angeles CA	07/14/2020 - 07/16/2020	Attended
	- Edu - SACRS Public Pension Investment Management Program 2020 - VIRTUAL	07/28/2020 - 08/13/2020	Attended
	- Edu - CII & NYU Corporate Governance Bootcamp - VIRTUAL	09/23/2020 - 09/25/2020	Attended
	- Edu - 2020 Milken Institute Virtual Global Conference - VIRTUAL	10/12/2020 - 10/21/2020	Attended
	- Edu - CALAPRS Virtual Trustees Round Table - VIRTUAL	10/23/2020 - 10/23/2020	Attended
	- Edu - PPI Virtual Roundtable - VIRTUAL	02/16/2021 - 02/18/2021	Attended
	- Edu - TLF Political Accountability and Investment - VIRTUAL	02/23/2021 - 02/23/2021	Attended
	- Edu - NCPERS Accredited Fiduciary Program (Module 1 & 2) - VIRTUAL	03/02/2021 - 03/05/2021	Attended
	- Edu - NCPERS Accredited Fiduciary Program (Module 3 & 4) - VIRTUAL	03/09/2021 - 03/12/2021	Attended
	- Edu - NCPERS 2021 Legislative Conference - VIRTUAL	04/20/2021 - 04/20/2021	Attended
	- Edu - 2021 Annual Virtual Pension Bridge Conference - VIRTUAL	05/04/2021 - 05/07/2021	Attended
	- Edu - NACD Cyber Risk Oversight Program - VIRTUAL	05/06/2021 - 06/30/2021	Attended
	- Edu - CALAPRS Virtual Trustees Round Table - VIRTUAL	05/10/2021 - 05/10/2021	Attended
	- Edu - SACRS Spring Conference - VIRTUAL	05/11/2021 - 05/14/2021	Attended

**BOARD EDUCATION AND TRAVEL REPORT
FOR FISCAL YEAR 2020 - 2021
JUNE 2021**

Attendee	Purpose of Travel - Location	Event Dates	Travel Status
Wayne Moore			
B	- Edu- NASP 31st Annual Virtual Pension & Financial Services Conference - VIRTUAL	12/07/2020 - 12/10/2020	Attended
	- Edu - NASP 11th Annual Day of Education in Private Equity - VIRTUAL	03/25/2021 - 03/26/2021	Attended
Ronald Okum			
B	- Edu- 2020 SACRS Fall Virtual Conference - VIRTUAL	11/10/2020 - 11/13/2020	Attended
	- Edu - SACRS Spring Conference - VIRTUAL	05/11/2021 - 05/14/2021	Attended
William Pryor			
B	- Edu - NCPERS Fall Conference - VIRTUAL	02/02/2021 - 02/03/2021	Attended
Les Robbins			
B	- Edu - IFEBP 66th Annual Employee Benefits Conference - VIRTUAL	11/10/2020 - 11/13/2020	Attended
	- Edu - NCPERS 2021 Legislative Conference - VIRTUAL	04/20/2021 - 04/20/2021	Attended
	- Edu - SACRS Spring Conference - VIRTUAL	05/11/2021 - 05/14/2021	Attended
X	- Edu - IFEBP 66th Annual Employee Benefits Conference - Honolulu HI	11/15/2020 - 11/18/2020	Host Canceled
Gina Sanchez			
B	- Edu - SACRS Sexual Harassment Prevention Training - VIRTUAL	07/15/2020 - 07/15/2020	Attended
	- Edu - 2020 Milken Institute Virtual Global Conference - VIRTUAL	10/12/2020 - 10/21/2020	Attended
	- Edu - 2020 Virtual NACD Summit - VIRTUAL	10/12/2020 - 10/13/2020	Attended
	- Edu - CALAPRS Virtual Trustees Round Table - VIRTUAL	10/23/2020 - 10/23/2020	Attended
	- Edu- 2020 SACRS Fall Virtual Conference - VIRTUAL	11/10/2020 - 11/13/2020	Attended
	- Edu - Harvard Business School Executive Education - Audit Committees - VIRTUAL	11/12/2020 - 11/14/2020	Attended
	- Edu - NCPERS Fall Conference - VIRTUAL	02/02/2021 - 02/03/2021	Attended
	- Edu - Virtual Oxford Scenarios Programme - VIRTUAL	04/20/2021 - 05/20/2021	Attended
	- Edu - 2021 Annual Virtual Pension Bridge Conference - VIRTUAL	05/04/2021 - 05/07/2021	Attended
	- Edu - SACRS Spring Conference - VIRTUAL	05/11/2021 - 05/14/2021	Attended
	- Edu - NACD Women in the Boardroom: Pathways to a Board Seat - VIRTUAL	05/18/2021 - 05/18/2021	Attended
	- Edu - NACD ESG Continuous Learning Cohort - VIRTUAL	06/16/2021 - 06/16/2021	Attended
	- Edu - 2021 Virtual Milken Institute Future of Health Summit - VIRTUAL	06/22/2021 - 06/23/2021	Attended

BOARD EDUCATION AND TRAVEL REPORT
FOR FISCAL YEAR 2020 - 2021
JUNE 2021

Attendee	Purpose of Travel - Location	Event Dates	Travel Status
Herman Santos			
B	- Edu- LAVCA's Annual Investor Meeting - VIRTUAL	09/14/2020 - 09/17/2020	Attended
	- Edu - Nossaman's 2020 Public Pensions and Investments Fiduciaries' Forum - VIRTUAL	10/01/2020 - 10/01/2020	Attended
	- Edu- 2020 SACRS Fall Virtual Conference - VIRTUAL	11/10/2020 - 11/13/2020	Attended
	- Edu - Virtual PPI Salon: Gearing for Gridlock - VIRTUAL	12/10/2020 - 12/10/2020	Attended
	- Edu - PPI Virtual Roundtable - VIRTUAL	02/16/2021 - 02/18/2021	Attended
	- Edu - CII's 2021 Spring Conference - VIRTUAL	03/08/2021 - 03/10/2021	Attended
	- Edu - NASP 11th Annual Day of Education in Private Equity - VIRTUAL	03/25/2021 - 03/26/2021	Attended
	- Edu - PREA Spring Conference - VIRTUAL	03/25/2021 - 03/26/2021	Attended
	- Edu - PREA International Affinity Group Program - VIRTUAL	04/01/2021 - 04/01/2021	Attended
	- Edu - SACRS Spring Conference - VIRTUAL	05/11/2021 - 05/14/2021	Attended

Category Legend:

A - Pre-Approved/Board Approved

B - Includes 1) Educational Conferences and Administrative Meetings in CA where total cost is no more than \$2,000 per Trustee Travel Policy; Section III.A and 2) Virtual Events. Virtual Events are not subject to cost or count limits.

C - Second of two conferences and/or meetings counted as one conference per Trustee Education Policy Section IV.C.2 and Trustee Travel Policy Section IV.

X - Canceled events for which expenses have been incurred.

Z - Trip was Canceled - Balance of \$0.00



**STAFF EDUCATION AND TRAVEL REPORT
FOR FISCAL YEAR 2020 - 2021
JUNE 2021**

Attendee		Purpose of Travel - Location	Event Dates	Travel Status
Executive Offices				
Bob Schlotfeld	1	Admin - Conduct Site Visit to Mainline/DMI Data Center - Phoenix AZ	05/27/2021 - 05/27/2021	Attended
Systems				
Steven Alexander	1	Admin - Conduct Site Visit to Mainline/DMI Data Center - Phoenix AZ	05/27/2021 - 05/27/2021	Attended
Matthew Behrens	1	Admin - Conduct Site Visit to Mainline/DMI Data Center - Phoenix AZ	05/27/2021 - 05/27/2021	Attended
Irwin Devries	1	Admin - Conduct Site Visit of Mesa, AZ Facility - Mesa AZ	12/03/2020 - 12/05/2020	Attended
Eddie Paz	1	Admin - Conduct Site Visit to Mainline/DMI Data Center - Phoenix AZ	05/27/2021 - 05/27/2021	Attended
Celso Templo	1	Admin - Conduct Site Visit of Mesa, AZ Facility - Mesa AZ	10/09/2020 - 10/09/2020	Attended



Documents not attached are exempt from disclosure under the California Public Records Act and other legal authority.

**For further information, contact:
LACERA
Attention: Public Records Act Requests
300 N. Lake Ave., Suite 620
Pasadena, CA 91101**



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LACERA
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