

NOTICE OF MEETING AND AGENDA

**SPECIAL MEETING OF THE INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE
and
BOARD OF RETIREMENT***

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

**300 NORTH LAKE AVENUE, SUITE 810
PASADENA, CA 91101**

WEDNESDAY, NOVEMBER 4, 2015 - 9:00 A.M.**

COMMITTEE MEMBERS:

Les Robbins, Chair
Alan Bernstein, Vice Chair
William de la Garza
Vivian H. Gray
Ronald Okum, Alternate

I. APPROVAL OF THE MINUTES

A. Approval of the minutes of the regular meeting of October 15, 2015

II. PUBLIC COMMENT

III. FOR INFORMATION

- A. Staff Activities Report for October, 2015
- B. Cigna & Anthem Blue Cross Claims Experience
- C. Federal Legislation
 - Aon Hewitt Washington Report

IV. GOOD OF THE ORDER

(For information purposes only)

**V. ADJOURNMENT *and*
SET TIME FOR OPERATIONS OVERSIGHT COMMITTEE MEETING**

November 4, 2015

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

****Although the meeting is scheduled for 9:00 a.m., it can start anytime thereafter, depending on the length of the Board of Retirement meeting preceding it. Please be on call.**

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

Persons requiring an alternative format of this agenda pursuant to Section 202 of the Americans with Disabilities Act of 1990 may request one by calling Cynthia Guider at (626)-564-6000, from 8:30 a.m. to 5:00 p.m. Monday through Friday, but no later than 48 hours prior to the time the meeting is to commence. Assistive Listening Devices are available upon request. American Sign Language (ASL) Interpreters are available with at least three (3) business days notice before the meeting date.

MINUTES OF THE MEETING OF THE
INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE
and
BOARD OF RETIREMENT*

LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

GATEWAY PLAZA - 300 N. LAKE AVENUE, SUITE 810, PASADENA, CA 91101

THURSDAY, OCTOBER 15, 2015, 12:55 P.M. – 1:25 P.M.

COMMITTEE MEMBERS

PRESENT: Les Robbins, Chair
Alan Bernstein, Vice Chair
William de la Garza
Ronald Okum, Alternate

ABSENT: Vivian H. Gray

ALSO ATTENDING:

BOARD MEMBERS AT LARGE

Anthony Bravo
Shawn R. Kehoe
David L. Muir

STAFF, ADVISORS, PARTICIPANTS

Cassandra Smith
Leilani Ignacio

Aon Hewitt

Kirby Bosley
Helen Batsalkin

The meeting was called to order by Chair Robbins at 12:55 p.m. Due to the absence of Ms. Gray, the Chair announced that Mr. Okum, as the alternate, would be a voting member of the Committee.

I. APPROVAL OF THE MINUTES

A. Approval of the minutes of the regular meeting of September 10, 2015

Mr. Bernstein made a motion, Mr. Okum seconded, to approve the minutes of the regular meeting of September 10, 2015. The motion passed unanimously.

II. PUBLIC COMMENT

III. ACTION ITEMS

A. Recommendation as submitted by Barry W. Lew, Legislative Affairs Officer: That the Committee recommend the Board of Retirement direct staff to work with LACERA's legislative advocate and seek an author to introduce legislation to amend the definition of Plan D in the Prospective Plan Transfer provisions of the County Employees Retirement Law of 1937. (Memorandum dated October 5, 2015)

Mr. de la Garza made a motion, Mr. Okum seconded, to approve the recommendation. The motion passed unanimously.

B. Recommendation as submitted by Barry W. Lew, Legislative Affairs Officer: That the Committee recommend the Board of Retirement direct its voting delegate to support inclusion of the following in the SACRS 2016 legislative platform:

1. District Status for 1937 Act County Employees Retirement Systems (SACRS #1)-To provide retirement systems the option to adopt district status.
2. Optional Employee Sworn Statements (San Diego #1)-To allow the retirement system to collect the member's enrollment information directly from the employer in lieu of a sworn statement from the member.

(Memorandum dated October 5, 2015)

Mr. Okum made a motion, Mr. de la Garza seconded, to approve the recommendation. The motion passed unanimously.

IV. FOR INFORMATION

A. Board Offsite Agenda Planning – Day 2

Ms. Smith presented a draft of the proposed agenda for Day 2 of the Board Offsite, dedicated to the Retiree Healthcare Program.

- Strategic Plan – Retiree Healthcare
- Retiree Healthcare 101
- Knowledge Testing
- Rx Insights, Trends, and Costs
- Market Forces and Challenges for LACERA
- Provider Prospective
- Kick It Up – Physical Activity
- Excise Tax Update

B. Retiree Healthcare Division Strategic Plan (FYE 2016-2018) Progress Report & Discussion

Ms. Smith presented a progress report for the Retiree Healthcare FYE 2016-2018 Strategic Plan, outlining the current status of major projects, as well as information regarding projects that have been accelerated, delayed, or canceled.

C. Staff Activities Report for September, 2015

The staff activities report was discussed.

D. CIGNA & Anthem Blue Cross Claims Experience

The CIGNA & Anthem Blue Cross Claims Experience reports through August 2015 were discussed.

E. Federal Legislation

- Aon Hewitt Washington Report

Submitted for information only.

October 15, 2015

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V. GOOD OF THE ORDER

(For information purposes only)

VI. ADJOURNMENT

The meeting adjourned at 1:25 p.m.

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

**INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE
 RETIREE HEALTHCARE BENEFITS PROGRAM
 STAFF ACTIVITIES REPORT
 OCTOBER 2015
 FOR INFORMATION ONLY**

Centers for Medicare and Medicaid Services (CMS) Medicare Part D Retiree Drug Subsidy (RDS) Applications Plan Year 7/1/2013 – 6/30/2014 – Reconciliation

As we have informed your Board, staff completed the reconciliation process for the following RDS applications for plan year 7/1/2013 – 6/30/2014: Anthem Blue Cross, Cigna HMO, Kaiser, and Local 1014, before the September 30, 2015 CMS deadline. LACERA received all the subsidy payments to-date. The chart below shows the breakdown of subsidy payments per plan as well as the total payments received:

Plan	Subsidy Amount Received (2013-2014)
Anthem Blue Cross	\$9,289,424
Cigna	\$ 275,551
Kaiser	\$ 375,025
LACFF Local 1014	\$ 895,229
TOTAL:	\$10,835,229

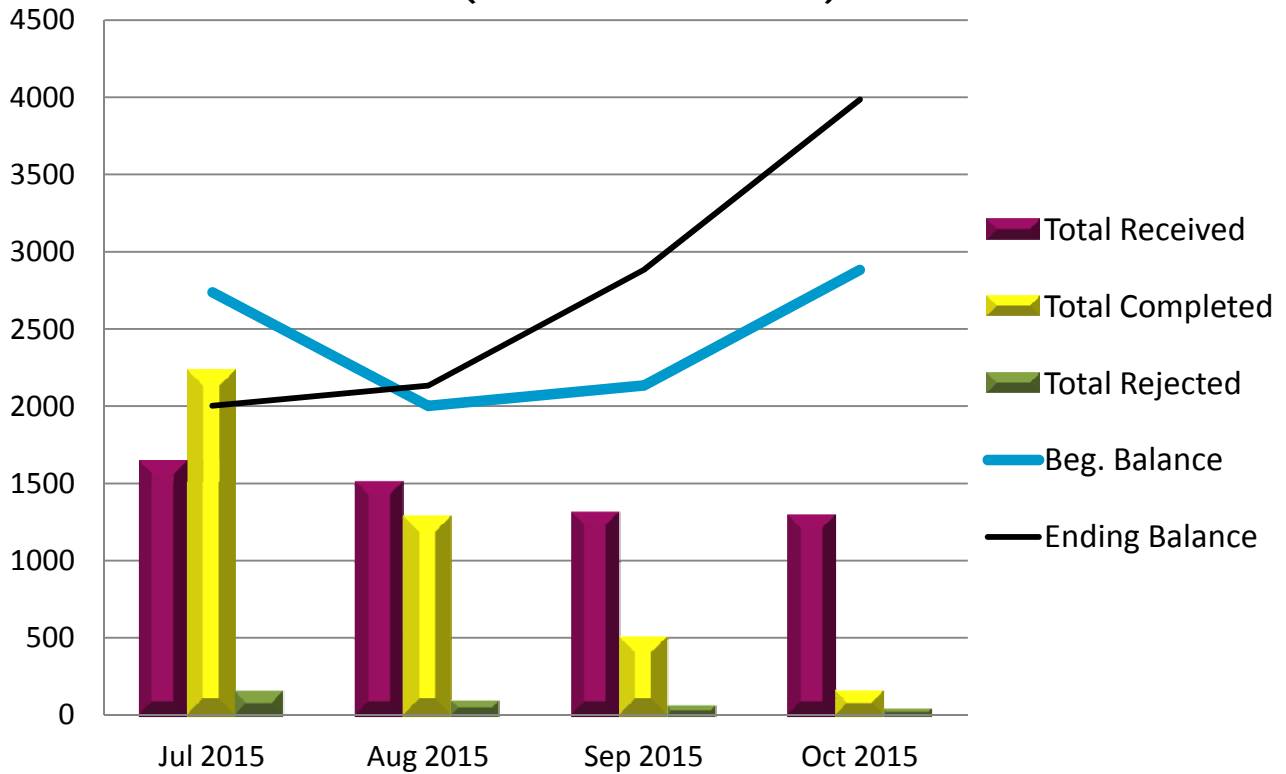
AHIP National Conferences on Medicare & Medicaid

Staff attended the AHIP National Conferences on Medicare and Medicaid on October 18-20, 2015 in Washington, DC. Some of the topics discussed included:

- The Medicare Program in 2016 and Beyond: The View from CMS
- Future Environment for Prescription Drugs and the Impact on Part D
- Celebrating 50 Years of Public Programs
- Compliance: Best Practices for MA and Part D Audit Readiness for 2016
- The Future of Medicare Advantage: Where Are We Going?

Retiree Healthcare Division Insurance Status Report July 2015 - Oct. 2015

RETIREE HEALTHCARE ENROLLMENT SUMMARY (ROLLING 4 MONTHS)

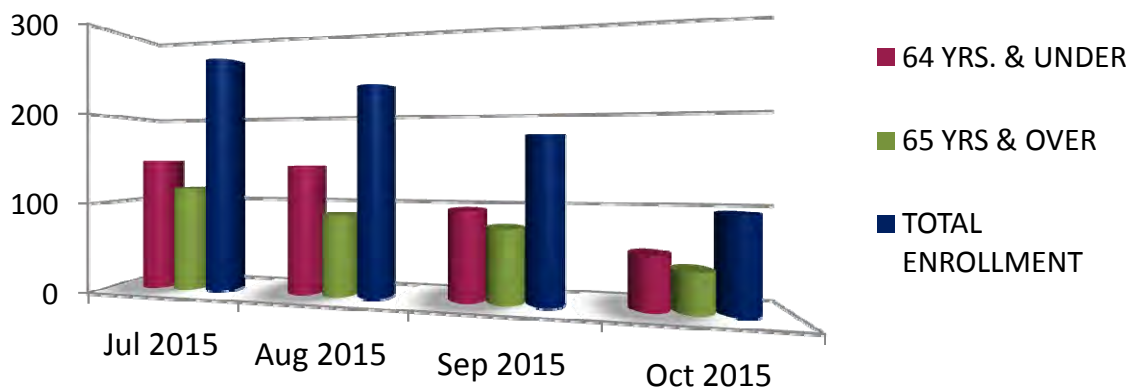


Date	Beg. Balance	Total Received	Total Completed	Total Rejected	Ending Balance
Jul 2015	2737	1639	2228	146	2002
Aug 2015	2002	1508	1287	89	2134
Sep 2015	2134	1311	506	56	2883
Oct 2015	2883	1290	152	36	3985

Retirees Monthly Age Breakdown June 2015 - Sept. 2015

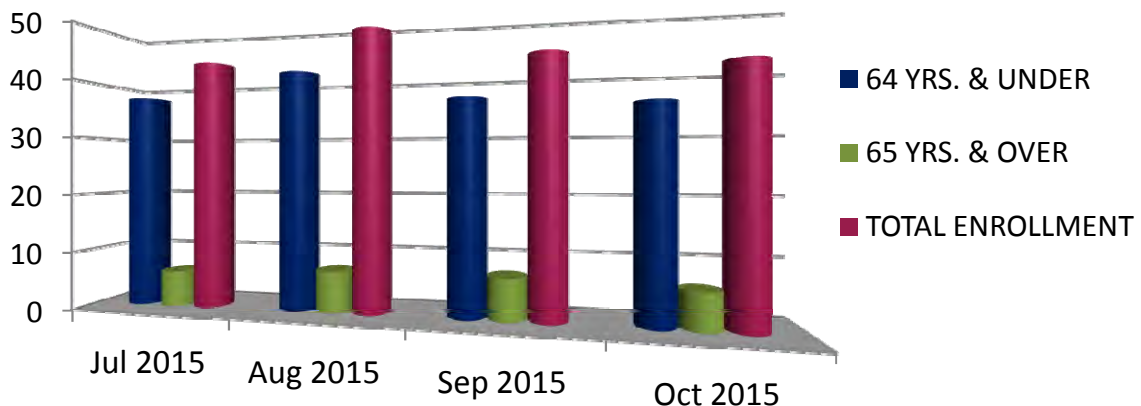
Service Retirement

MONTH	64 YRS. & UNDER	65 YRS & OVER	TOTAL ENROLLMENT
Jul 2015	147	115	262
Aug 2015	141	88	229
Sep 2015	96	78	174
Oct 2015	56	41	97



Disability Retirement

MONTH	64 YRS. & UNDER	65 YRS. & OVER	TOTAL ENROLLMENT
Jul 2015	37	6	43
Aug 2015	41	7	48
Sep 2015	36	7	43
Oct 2015	35	6	41



Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 10/31/2015

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
ANTHEM BC III				
240	6,095	\$643,538.10	10	\$241.50
241	193	\$20,035.90	1	\$62.90
242	853	\$89,374.80	0	\$0.00
243	3,515	\$731,576.70	8	\$451.20
244	14	\$1,468.60	0	\$0.00
245	37	\$3,881.30	0	\$0.00
246	16	\$1,678.40	0	\$0.00
247	77	\$8,077.30	0	\$0.00
248	9	\$1,888.20	1	\$31.50
249	34	\$7,133.20	0	\$0.00
250	13	\$2,937.20	0	\$0.00
Plan Total:	10,856	\$1,511,589.70	20	\$787.10
CIGNA-HEALTHSPRING PREFERRED with RX				
321	23	\$2,517.60	0	\$0.00
322	8	\$839.20	0	\$0.00
324	16	\$2,937.20	0	\$0.00
327	2	\$209.80	0	\$0.00
329	1	\$209.80	0	\$0.00
Plan Total:	50	\$6,713.60	0	\$0.00
KAISER SR. ADVANTAGE				
401	4	\$209.80	0	\$0.00
403	9,282	\$973,052.40	6	\$178.50
404	3	(\$104.90)	0	\$0.00
411	1	\$104.90	0	\$0.00
413	1,679	\$175,925.80	0	\$0.00
414	1	(\$314.70)	0	\$0.00
418	4,594	\$957,967.70	5	\$220.50
419	241	\$24,861.30	0	\$0.00
422	1	\$104.90	0	\$0.00
426	196	\$20,560.40	0	\$0.00
427	162	\$16,993.80	0	\$0.00
445	2	\$209.80	0	\$0.00
451	26	\$2,727.40	0	\$0.00
457	13	\$2,727.40	0	\$0.00
462	54	\$5,664.60	0	\$0.00
465	18	\$1,888.20	0	\$0.00
466	20	\$4,196.00	0	\$0.00
472	29	\$3,042.10	0	\$0.00
476	5	\$524.50	0	\$0.00
478	12	\$2,517.60	0	\$0.00
482	74	\$7,343.00	1	\$10.50
486	11	\$1,153.90	0	\$0.00
488	42	\$8,811.60	1	\$10.50
491	1	\$104.90	0	\$0.00
492	1	\$104.90	0	\$0.00
493	1	\$104.90	0	\$0.00
Plan Total:	16,473	\$2,210,482.20	13	\$420.00

Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 10/31/2015

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	264	\$26,749.50	0	\$0.00
613	92	\$19,196.70	0	\$0.00
Plan Total:	356	\$45,946.20	0	\$0.00
UNITED HEALTHCARE GROUP MEDICARE ADV. HMO				
701	1,411	\$148,118.80	1	\$31.50
702	307	\$31,994.50	0	\$0.00
703	750	\$156,383.90	1	\$10.50
704	62	\$6,818.50	0	\$0.00
705	17	\$3,566.60	0	\$0.00
707	2	(\$314.70)	0	\$0.00
Plan Total:	2,549	\$346,567.60	2	\$42.00
Grand Total:	30,284	\$4,121,299.30	35	\$1,249.10

Medicare Part B Reimbursement and Penalty Report

PAY PERIOD 10/31/2015

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
ANTHEM BC III				
240	6,095	\$643,538.10	10	\$241.50
241	193	\$20,035.90	1	\$62.90
242	853	\$89,374.80	0	\$0.00
243	3,515	\$731,576.70	8	\$451.20
244	14	\$1,468.60	0	\$0.00
245	37	\$3,881.30	0	\$0.00
246	16	\$1,678.40	0	\$0.00
247	77	\$8,077.30	0	\$0.00
248	9	\$1,888.20	1	\$31.50
249	34	\$7,133.20	0	\$0.00
250	13	\$2,937.20	0	\$0.00
Plan Total:	10,856	\$1,511,589.70	20	\$787.10
CIGNA-HEALTHSPRING PREFERRED with RX				
321	23	\$2,517.60	0	\$0.00
322	8	\$839.20	0	\$0.00
324	16	\$2,937.20	0	\$0.00
327	2	\$209.80	0	\$0.00
329	1	\$209.80	0	\$0.00
Plan Total:	50	\$6,713.60	0	\$0.00
KAISER SR. ADVANTAGE				
401	4	\$209.80	0	\$0.00
403	9,282	\$673,052.40	6	\$178.50
404	3	(\$104.90)	0	\$0.00
405	1	(\$209.80)	0	\$0.00
411	1	\$104.90	0	\$0.00
413	1,679	\$175,925.80	0	\$0.00
418	4,594	\$957,967.70	5	\$220.50
419	241	\$24,861.30	0	\$0.00
422	1	\$104.90	0	\$0.00
426	196	\$20,560.40	0	\$0.00
427	162	\$16,993.80	0	\$0.00
445	2	\$209.80	0	\$0.00
451	26	\$2,727.40	0	\$0.00
457	13	\$2,727.40	0	\$0.00
462	54	\$5,664.60	0	\$0.00
465	18	\$1,888.20	0	\$0.00
466	20	\$4,196.00	0	\$0.00
472	29	\$3,042.10	0	\$0.00
476	5	\$524.50	0	\$0.00
478	12	\$2,517.60	0	\$0.00
482	74	\$7,343.00	1	\$10.50
486	11	\$1,153.90	0	\$0.00
488	42	\$8,811.60	1	\$10.50
491	1	\$104.90	0	\$0.00
492	1	\$104.90	0	\$0.00
493	1	\$104.90	0	\$0.00
Plan Total:	16,473	\$1,910,587.10	13	\$420.00

Medicare Part B Reimbursement and Penalty Report
PAY PERIOD 10/31/2015

Deduction Code	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
SCAN				
611	264	\$26,749.50	0	\$0.00
613	92	\$19,196.70	0	\$0.00
Plan Total:	356	\$45,946.20	0	\$0.00
UNITED HEALTHCARE GROUP MEDICARE ADV. HMO				
701	1,411	\$148,118.80	1	\$31.50
702	307	\$31,994.50	0	\$0.00
703	750	\$156,383.90	1	\$10.50
704	62	\$6,818.50	0	\$0.00
705	17	\$3,566.60	0	\$0.00
707	2	(\$314.70)	0	\$0.00
Plan Total:	2,549	\$346,567.60	2	\$42.00
LOCAL 1014				
804	160	\$19,469.60	0	\$0.00
805	172	\$18,693.10	0	\$0.00
806	547	\$118,244.20	0	\$0.00
807	33	\$3,713.50	0	\$0.00
808	9	\$2,202.90	0	\$0.00
812	203	\$22,092.10	0	\$0.00
Plan Total:	1,124	\$184,415.40	0	\$0.00
Grand Total:	31,408	\$4,005,819.60	35	\$1,259.60

Medical and Dental Vision Insurance Premiums November 2015

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Medical Plan							
Anthem Blue Cross Prudent Buyer Plan							
201	799	\$671,847.14	\$115,550.94	\$557,977.92	\$673,528.86	(\$3,363.44)	\$670,165.42
202	445	\$736,839.90	\$83,320.83	\$648,551.61	\$731,872.44	(\$1,655.82)	\$730,216.62
203	111	\$207,444.57	\$47,992.43	\$153,845.53	\$201,837.96	\$0.00	\$201,837.96
204	39	\$42,164.85	\$15,957.67	\$26,207.18	\$42,164.85	\$0.00	\$42,164.85
205	1	\$228.33	\$9.13	\$219.20	\$228.33	\$0.00	\$228.33
SUBTOTAL	1,395	\$1,658,524.79	\$262,831.00	\$1,386,801.44	\$1,649,632.44	(\$5,019.26)	\$1,644,613.18
Anthem Blue Cross I							
211	997	\$1,059,601.63	\$77,604.53	\$991,417.88	\$1,069,022.41	(\$8,502.32)	\$1,060,520.09
212	377	\$722,652.45	\$36,803.43	\$683,932.17	\$720,735.60	(\$3,833.70)	\$716,901.90
213	42	\$94,972.92	\$13,522.31	\$79,189.35	\$92,711.66	\$0.00	\$92,711.66
214	16	\$22,503.68	\$5,766.56	\$16,737.12	\$22,503.68	\$0.00	\$22,503.68
215	3	\$1,054.53	\$386.66	\$667.87	\$1,054.53	\$0.00	\$1,054.53
SUBTOTAL	1,435	\$1,900,785.21	\$134,083.49	\$1,771,944.39	\$1,906,027.88	(\$12,336.02)	\$1,893,691.86
Anthem Blue Cross II							
221	2,128	\$2,264,805.49	\$139,437.44	\$2,129,186.22	\$2,268,623.66	(\$3,188.37)	\$2,265,435.29
222	1,945	\$3,745,524.90	\$103,164.75	\$3,576,261.71	\$3,679,426.46	\$1,916.85	\$3,681,343.31
223	497	\$1,123,846.22	\$46,993.12	\$1,079,114.36	\$1,126,107.48	\$4,522.52	\$1,130,630.00
224	108	\$153,306.32	\$14,739.91	\$132,940.49	\$147,680.40	\$0.00	\$147,680.40
225	2	\$703.02	\$175.75	\$527.27	\$703.02	\$0.00	\$703.02
SUBTOTAL	4,680	\$7,288,185.95	\$304,510.97	\$6,918,030.05	\$7,222,541.02	\$3,251.00	\$7,225,792.02

Medical and Dental Vision Insurance Premiums November 2015

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Anthem Blue Cross III							
240	6,115	\$2,621,929.20	\$427,829.19	\$2,212,397.17	\$2,640,226.36	(\$6,314.88)	\$2,633,911.48
241	190	\$264,906.01	\$33,078.85	\$230,454.59	\$263,533.44	\$0.00	\$263,533.44
242	859	\$1,187,273.05	\$80,769.89	\$1,077,321.90	\$1,158,091.79	(\$1,372.57)	\$1,156,719.22
243	3,520	\$3,020,239.04	\$360,552.35	\$2,618,191.22	\$2,978,743.57	(\$3,416.56)	\$2,975,327.01
244	14	\$10,756.62	\$2,304.98	\$8,451.64	\$10,756.62	\$0.00	\$10,756.62
245	37	\$28,428.21	\$3,457.49	\$24,970.72	\$28,428.21	\$0.00	\$28,428.21
246	16	\$27,393.60	\$4,211.76	\$23,181.84	\$27,393.60	\$0.00	\$27,393.60
247	78	\$135,255.90	\$8,984.91	\$122,328.28	\$131,313.19	\$0.00	\$131,313.19
248	9	\$10,742.31	\$1,193.59	\$9,548.72	\$10,742.31	\$0.00	\$10,742.31
249	34	\$40,582.06	\$4,392.40	\$36,189.66	\$40,582.06	\$0.00	\$40,582.06
250	13	\$17,391.01	\$1,016.70	\$17,712.08	\$18,728.78	\$0.00	\$18,728.78
SUBTOTAL	10,885	\$7,364,897.01	\$927,792.11	\$6,380,747.82	\$7,308,539.93	(\$11,104.01)	\$7,297,435.92
CIGNA Network Model Plan							
301	397	\$510,157.41	\$106,475.45	\$398,567.60	\$505,043.05	\$0.00	\$505,043.05
302	185	\$431,805.44	\$81,117.51	\$340,668.98	\$421,786.49	\$0.00	\$421,786.49
303	29	\$79,058.35	\$22,765.60	\$59,018.90	\$81,784.50	\$0.00	\$81,784.50
304	22	\$39,052.62	\$12,224.78	\$23,431.96	\$35,656.74	\$0.00	\$35,656.74
SUBTOTAL	633	\$1,060,073.82	\$222,583.34	\$821,687.44	\$1,044,270.78	\$0.00	\$1,044,270.78

Medical and Dental Vision Insurance Premiums November 2015

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
CIGNA Healthspring Pref w/ Rx - Phoenix, AZ							
321	23	\$7,702.70	\$1,821.87	\$6,215.73	\$8,037.60	\$0.00	\$8,037.60
322	8	\$10,918.00	\$982.62	\$9,935.38	\$10,918.00	\$0.00	\$10,918.00
324	15	\$10,636.80	\$1,037.09	\$8,270.11	\$9,307.20	\$0.00	\$9,307.20
327	2	\$3,562.60	\$0.00	\$3,562.60	\$3,562.60	\$0.00	\$3,562.60
329	1	\$1,136.12	\$0.00	\$1,136.12	\$1,136.12	\$0.00	\$1,136.12
SUBTOTAL	49	\$33,956.22	\$3,841.58	\$29,119.94	\$32,961.52	\$0.00	\$32,961.52

Medical and Dental Vision Insurance Premiums November 2015

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser/Senior Advantage							
401	1,790	\$1,568,364.50	\$138,129.70	\$1,416,130.02	\$1,554,259.72	\$5,213.40	\$1,559,473.12
403	9,353	\$2,246,250.00	\$251,792.81	\$2,003,490.54	\$2,255,283.35	(\$5,977.30)	\$2,249,306.05
404	490	\$481,294.08	\$16,534.58	\$465,263.62	\$481,798.20	\$0.00	\$481,798.20
405	858	\$763,748.70	\$20,954.11	\$742,794.59	\$763,748.70	(\$1,759.21)	\$761,989.49
406	51	\$83,781.88	\$31,416.08	\$49,143.42	\$80,559.50	(\$1,611.19)	\$78,948.31
411	1,803	\$3,139,833.60	\$167,555.51	\$2,949,996.29	\$3,117,551.80	(\$6,931.20)	\$3,110,620.60
413	1,684	\$1,879,260.50	\$87,663.39	\$1,755,300.65	\$1,842,964.04	(\$2,207.00)	\$1,840,757.04
414	148	\$274,478.86	\$4,789.59	\$296,113.71	\$300,903.30	\$0.00	\$300,903.30
418	4,586	\$2,182,742.60	\$183,079.75	\$1,997,944.90	\$2,181,024.65	\$948.40	\$2,181,973.05
419	241	\$297,145.80	\$6,140.07	\$285,949.69	\$292,089.76	\$0.00	\$292,089.76
420	122	\$238,080.56	\$3,434.64	\$248,306.28	\$251,740.92	\$0.00	\$251,740.92
421	7	\$6,082.30	\$903.67	\$6,916.43	\$7,820.10	\$0.00	\$7,820.10
422	206	\$368,350.50	\$2,104.85	\$334,293.23	\$336,398.08	\$0.00	\$336,398.08
423	19	\$49,501.80	\$6,550.16	\$41,989.49	\$48,539.65	\$0.00	\$48,539.65
426	196	\$220,451.00	\$3,554.20	\$216,896.80	\$220,451.00	(\$1,124.75)	\$219,326.25
427	164	\$311,938.51	\$3,435.55	\$286,539.64	\$289,975.19	\$0.00	\$289,975.19
428	40	\$74,535.60	\$1,788.86	\$72,746.74	\$74,535.60	\$0.00	\$74,535.60
429	6	\$15,506.58	\$1,939.02	\$13,567.56	\$15,506.58	\$0.00	\$15,506.58
430	130	\$230,789.00	\$3,231.04	\$227,557.96	\$230,789.00	\$0.00	\$230,789.00
431	11	\$29,956.08	\$1,667.02	\$14,105.66	\$15,772.68	\$0.00	\$15,772.68
432	9	\$28,956.42	\$7,648.96	\$18,090.08	\$25,739.04	(\$3,217.38)	\$22,521.66
SUBTOTAL	21,914	\$14,491,048.87	\$944,313.56	\$13,443,137.30	\$14,387,450.86	(\$16,666.23)	\$14,370,784.63

Medical and Dental Vision Insurance Premiums November 2015

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Colorado							
450	6	\$6,357.66	\$1,101.99	\$5,255.67	\$6,357.66	\$0.00	\$6,357.66
451	26	\$9,184.32	\$979.68	\$7,524.32	\$8,504.00	\$0.00	\$8,504.00
453	2	\$4,692.66	\$858.96	\$3,833.70	\$4,692.66	\$0.00	\$4,692.66
454	1	\$3,168.92	\$907.66	\$2,261.26	\$3,168.92	\$0.00	\$3,168.92
457	13	\$8,779.16	\$1,701.80	\$7,077.36	\$8,779.16	\$0.00	\$8,779.16
SUBTOTAL	48	\$32,182.72	\$5,550.09	\$25,952.31	\$31,502.40	\$0.00	\$31,502.40
Kaiser - Georgia							
440	1	\$1,010.58	\$0.00	\$1,010.58	\$1,010.58	\$0.00	\$1,010.58
441	2	\$2,021.16	\$0.00	\$2,021.16	\$2,021.16	\$0.00	\$2,021.16
442	4	\$4,042.32	\$0.00	\$4,042.32	\$4,042.32	\$0.00	\$4,042.32
445	2	\$2,783.56	\$0.00	\$2,783.56	\$2,783.56	\$0.00	\$2,783.56
461	17	\$17,179.86	\$2,445.61	\$13,723.67	\$16,169.28	\$0.00	\$16,169.28
462	56	\$21,627.20	\$3,259.53	\$18,753.87	\$22,013.40	\$0.00	\$22,013.40
463	6	\$12,096.90	\$1,554.22	\$10,542.68	\$12,096.90	\$0.00	\$12,096.90
465	18	\$25,052.04	\$2,226.85	\$22,825.19	\$25,052.04	\$0.00	\$25,052.04
466	20	\$15,348.00	\$859.49	\$14,488.51	\$15,348.00	\$0.00	\$15,348.00
SUBTOTAL	126	\$101,161.62	\$10,345.70	\$90,191.54	\$100,537.24	\$0.00	\$100,537.24

Medical and Dental Vision Insurance Premiums November 2015

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Hawaii							
471	6	\$5,805.84	\$1,083.76	\$4,722.08	\$5,805.84	\$0.00	\$5,805.84
472	29	\$10,238.16	\$1,694.59	\$8,543.57	\$10,238.16	\$0.00	\$10,238.16
473	2	\$2,851.82	\$853.77	\$1,998.05	\$2,851.82	\$0.00	\$2,851.82
474	3	\$5,190.84	\$830.53	\$4,360.31	\$5,190.84	\$0.00	\$5,190.84
476	5	\$6,078.40	\$2,285.48	\$3,792.92	\$6,078.40	\$0.00	\$6,078.40
478	12	\$8,412.96	\$532.82	\$7,880.14	\$8,412.96	\$0.00	\$8,412.96
SUBTOTAL	57	\$38,578.02	\$7,280.95	\$31,297.07	\$38,578.02	\$0.00	\$38,578.02
Kaiser - Oregon							
481	8	\$8,666.64	\$1,949.80	\$6,716.84	\$8,666.64	\$0.00	\$8,666.64
482	73	\$33,137.20	\$4,469.03	\$26,876.97	\$31,346.00	\$0.00	\$31,346.00
484	6	\$12,969.96	\$2,949.21	\$7,859.09	\$10,808.30	\$0.00	\$10,808.30
486	11	\$16,787.43	\$1,159.86	\$15,627.57	\$16,787.43	\$0.00	\$16,787.43
488	42	\$37,405.20	\$5,414.86	\$31,990.34	\$37,405.20	\$0.00	\$37,405.20
489	1	\$976.66	\$0.00	\$3,906.64	\$3,906.64	\$0.00	\$3,906.64
491	1	\$1,419.46	\$0.00	\$1,419.46	\$1,419.46	\$0.00	\$1,419.46
492	1	\$1,584.47	\$316.89	\$1,267.58	\$1,584.47	\$0.00	\$1,584.47
493	1	\$2,604.46	\$343.20	\$2,261.26	\$2,604.46	\$0.00	\$2,604.46
495	1	\$2,278.34	\$361.49	\$1,916.85	\$2,278.34	\$0.00	\$2,278.34
497	1	\$2,054.99	\$138.14	\$1,916.85	\$2,054.99	\$0.00	\$2,054.99
498	1	\$2,220.00	\$303.15	\$1,916.85	\$2,220.00	\$0.00	\$2,220.00
SUBTOTAL	147	\$122,104.81	\$17,405.63	\$103,676.30	\$121,081.93	\$0.00	\$121,081.93

Medical and Dental Vision Insurance Premiums November 2015

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
SCAN Health Plan							
611	264	\$91,047.00	\$19,008.66	\$65,794.34	\$84,803.00	(\$634.00)	\$84,169.00
613	92	\$62,284.00	\$12,781.76	\$49,502.24	\$62,284.00	\$0.00	\$62,284.00
SUBTOTAL	356	\$153,331.00	\$31,790.42	\$115,296.58	\$147,087.00	(\$634.00)	\$146,453.00
UHC Medicare Adv.							
701	1,414	\$445,108.04	\$57,659.27	\$387,448.77	\$445,108.04	(\$1,555.88)	\$443,552.16
702	307	\$386,673.33	\$20,747.61	\$360,920.24	\$381,667.85	\$0.00	\$381,667.85
703	749	\$467,430.00	\$55,169.69	\$411,013.83	\$466,183.52	\$0.00	\$466,183.52
704	63	\$89,008.29	\$5,679.59	\$86,154.36	\$91,833.95	\$0.00	\$91,833.95
705	17	\$13,339.90	\$690.53	\$12,649.37	\$13,339.90	\$0.00	\$13,339.90
SUBTOTAL	2,550	\$1,401,559.56	\$139,946.69	\$1,258,186.57	\$1,398,133.26	(\$1,555.88)	\$1,396,577.38
United Healthcare							
707	419	\$397,629.50	\$44,605.98	\$350,196.77	\$394,802.75	\$0.00	\$394,802.75
708	337	\$585,225.00	\$26,905.09	\$557,278.66	\$584,183.75	\$0.00	\$584,183.75
709	200	\$414,314.88	\$31,634.91	\$374,516.13	\$406,151.04	\$2,040.96	\$408,192.00
SUBTOTAL	956	\$1,397,169.38	\$103,145.98	\$1,281,991.56	\$1,385,137.54	\$2,040.96	\$1,387,178.50

Medical and Dental Vision Insurance Premiums November 2015

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Local 1014 Firefighters							
801	43	\$42,530.87	\$2,096.87	\$40,434.00	\$42,530.87	\$0.00	\$42,530.87
802	260	\$463,686.60	\$11,699.15	\$453,156.55	\$464,855.70	\$0.00	\$464,855.70
803	207	\$435,463.83	\$13,968.49	\$425,702.72	\$439,671.21	\$0.00	\$439,671.21
804	160	\$158,254.40	\$9,079.80	\$140,232.52	\$149,312.32	(\$19,963.65)	\$129,348.67
805	172	\$306,746.52	\$7,811.32	\$298,935.20	\$306,746.52	(\$18,693.10)	\$288,053.42
806	547	\$975,525.27	\$39,484.62	\$936,040.65	\$975,525.27	(\$120,027.61)	\$855,497.66
807	33	\$69,421.77	\$925.62	\$67,327.05	\$68,252.67	(\$3,713.50)	\$64,539.17
808	9	\$18,933.21	\$168.30	\$18,764.91	\$18,933.21	(\$2,202.90)	\$16,730.31
809	24	\$23,738.16	\$2,532.07	\$21,206.09	\$23,738.16	\$0.00	\$23,738.16
810	4	\$7,133.64	\$1,319.72	\$5,813.92	\$7,133.64	\$0.00	\$7,133.64
811	5	\$10,518.45	\$168.30	\$10,350.15	\$10,518.45	\$0.00	\$10,518.45
812	203	\$200,785.27	\$19,524.52	\$182,249.84	\$201,774.36	(\$22,764.68)	\$179,009.68
SUBTOTAL	1,667	\$2,712,737.99	\$108,778.78	\$2,600,213.60	\$2,708,992.38	(\$187,365.44)	\$2,521,626.94
Medical Plan Total	46,898	\$39,756,296.97	\$3,224,200.29	\$36,258,273.91	\$39,482,474.20	(\$229,388.88)	\$39,253,085.32

Medical and Dental Vision Insurance Premiums November 2015

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Dental/Vision Plan							
CIGNA Indemnity Dental/Vision							
501	22,153	\$1,032,784.38	\$125,310.00	\$911,716.16	\$1,037,026.16	(\$2,367.01)	\$1,034,659.15
502	20,329	\$2,030,614.80	\$166,222.63	\$1,859,892.52	\$2,026,115.15	(\$798.08)	\$2,025,317.07
503	10	\$579.00	\$116.97	\$577.83	\$694.80	\$0.00	\$694.80
SUBTOTAL	42,492	\$3,063,978.18	\$291,649.60	\$2,772,186.51	\$3,063,836.11	(\$3,165.09)	\$3,060,671.02
CIGNA Dental HMO/Vision							
901	3,157	\$133,489.03	\$18,241.39	\$115,368.61	\$133,610.00	(\$253.38)	\$133,356.62
902	2,188	\$195,966.48	\$18,606.09	\$177,279.29	\$195,885.38	(\$89.36)	\$195,796.02
903	4	\$171.20	\$49.65	\$121.55	\$171.20	\$0.00	\$171.20
SUBTOTAL	5,349	\$329,626.71	\$36,897.13	\$292,769.45	\$329,666.58	(\$342.74)	\$329,323.84
Dental/Vision Plan Total	47,841	\$3,393,604.89	\$328,546.73	\$3,064,955.96	\$3,393,502.69	(\$3,507.83)	\$3,389,994.86
GRAND TOTALS	94,739	\$43,149,901.86	\$3,552,747.02	\$39,323,229.87	\$42,875,976.89	(\$232,896.71)	\$42,643,080.18

CARRIER DEDUCTION PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS
<u>Anthem Blue Cross Prudent Buyer Plan</u>		
\$630.26	201	Retiree Only
\$1,239.88	202	Retiree and Spouse/Domestic Partner
\$1,399.26	203	Retiree, Spouse/Domestic Partner and Children
\$810.01	204	Retiree and Children
\$172.06	205	Survivor Children Only Rates
<u>Anthem Blue Cross Plan I</u>		
\$904.25	211	Retiree Only
\$1,630.31	212	Retiree and Spouse/Domestic Partner
\$1,923.10	213	Retiree, Spouse/Domestic Partner and Children
\$1,196.44	214	Retiree and Children
\$299.58	215	Survivor Children Only Rates
<u>Anthem Blue Cross Plan II</u>		
\$904.25	221	Retiree Only
\$1,630.31	222	Retiree and Spouse/Domestic Partner
\$1,923.10	223	Retiree, Spouse/Domestic Partner and Children
\$1,196.44	224	Retiree and Children
\$299.58	225	Survivor Children Only Rates
<u>Anthem Blue Cross Plan III</u>		
\$365.20	240	Retiree Only with Medicare
\$1,167.61	241	Retiree and Spouse/Domestic Partner - One with Medicare (Non-Medicare has Anthem Blue Cross I)
\$1,167.61	242	Retiree and Spouse/Domestic Partner - One with Medicare (Non-Medicare has Anthem Blue Cross II)
\$726.87	243	Retiree and Spouse/Domestic Partner - Both with Medicare
\$653.93	244	Retiree and Children (Retiree has Medicare; Children have Anthem Blue Cross I)
\$653.93	245	Retiree and Children (Retiree has Medicare; Children have Anthem Blue Cross II)
\$1,456.25	246	Retiree, Spouse/Domestic Partner and Children - One with Medicare (Non-Medicare has Anthem Blue Cross I)
\$1,456.25	247	Retiree, Spouse/Domestic Partner and Children - One with Medicare (Non-Medicare has Anthem Blue Cross II)
\$1,015.45	248	Retiree, Spouse/Domestic Partner and Children - Two with Medicare (Children have Anthem Blue Cross I)
\$1,015.45	249	Retiree, Spouse/Domestic Partner and Children - Two with Medicare (Children have Anthem Blue Cross II)
\$1,138.02	250	Member, Spouse/Domestic Partner, Child (3 with Medicare)

*Benchmark premiums are bolded.

CARRIER DEDUCTION PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS
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CIGNA Network Model Plan

\$1,143.49	301	Retiree Only
\$2,064.71	302	Retiree and Spouse/Domestic Partner
\$2,438.35	303	Retiree, Spouse/Domestic Partner and Children
\$1,517.57	304	Retiree and Children
\$378.87	305	Survivor Children Only Rates

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

\$328.00	321	Retiree Only with Medicare
\$1,249.22	322	Retiree and Spouse/Domestic Partner/Domestic Partner - One with Medicare
\$651.00	324	Retiree and Spouse/Domestic Partner -Both with Medicare
\$702.09	325	Retiree and Children
\$1,622.87	327	Retiree, Spouse/Domestic Partner and Children - One with Medicare
\$1,025.09	329	Retiree, Spouse/Domestic Partner and Children - Two with Medicare

Kaiser

\$774.10	401	Retiree Only ("Basic")
N/A	402	Retiree Only ("Supplement")
\$235.64	403	Retiree Only ("Senior Advantage")
\$894.95	404	Retiree Only ("Excess I")
\$795.39	405	Retiree Only - ("Excess II")
\$1,408.39	406	Retiree Only ("Excess III")
\$1,543.20	411	Retiree and Family (All family members are "Basic")
N/A	412	Retiree and Family (One family member is "Supplement"; others are "Basic")
\$1,004.74	413	Retiree and Family (One family member is "Senior Advantage"; others are "Basic")
\$1,664.05	414	Retiree and Family (One family member is "Excess I"; others are "Basic")
N/A	415	Retiree and Family (Two or more family members are "Supplement")
N/A	416	Retiree and Family (One family member is "Senior Advantage"; others are "Supplement")
N/A	417	Retiree and Family (One family member is "Excess I"; others are "Supplement")
\$466.28	418	Retiree and Family (Two or more family members are "Senior Advantage")
\$1,125.59	419	Retiree and Family (One family member is "Excess I"; others are "Senior Advantage")
\$1,784.90	420	Retiree and Family (Two or more family members are "Excess I")
N/A	421	Survivor Children Only Rates
\$1,564.49	422	Retiree and Family (One family member is "Excess II"; others are "Basic")
\$2,177.49	423	Retiree and Family (One family member is "Excess III"; others are "Basic")

*Benchmark premiums are bolded.

CARRIER DEDUCTION PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS
<u>Kaiser (continued)</u>		
N/A	424	Retiree and Family (One family member is "Supplement"; others are "Excess II")
N/A	425	Retiree and Family (One family member is "Supplement"; others are "Excess III")
\$1,026.03	426	Retiree and Family (One family member is "Senior Advantage"; others are "Excess II")
\$1,639.03	427	Retiree and Family (One family member is "Senior Advantage"; others are "Excess III")
\$1,685.34	428	Retiree and Family (One family member is "Excess I"; others are "Excess II")
\$2,298.34	429	Retiree and Family One family member is "Excess I"; others are "Excess III")
\$1,585.78	430	Retiree and Family (Two or more family members are "Excess II")
\$2,198.78	431	Retiree and Family (One family member is "Excess II"; others are "Excess III")
\$2,811.78	432	Retiree and Family (Two or more family members are "Excess III")
<u>Kaiser Colorado</u>		
\$793.06	450	Retiree Only ("Basic" under age 65)
\$327.27	451	Retiree Only ("Senior Advantage")
\$1,754.57	453	Retiree and Family (Two family members are "Basic")
\$2,369.25	454	Retiree and Family (Three or more family members are "Basic")
\$1,115.33	455	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic")
\$649.55	457	Retiree and Family (Two family members are "Senior Advantage")
\$1,857.56	458	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$1,437.60	459	Retiree and Family (Two family members are "Senior Advantage"; one or more are "Basic")
<u>Kaiser Georgia</u>		
\$847.24	440	Retiree Only ("Basic" over age 65 with Medicare Part B only)
\$847.24	441	Retiree Only ("Basic over age 65 with Medicare Part A only)
\$847.24	442	Retiree Only ("Basic over age 65 without Medicare Part A or Medicare Part B)
\$361.11	443	Retiree Only ("Basic" over age 65 - Medicare eligible who is classified as having renal failure)
\$1,203.35	444	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with Medicare Part B only)
\$1,203.35	445	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 with Medicare Part A only)
\$1,203.35	446	Retiree and Family (One family member is "Senior Advantage"; one family member is "Basic" over age 65 without Medicare Part A and B)
\$847.24	461	Retiree Only ("Basic" under age 65)
\$361.11	462	Retiree Only ("Senior Advantage")

*Benchmark premiums are bolded.

CARRIER DEDUCTION PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS
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Kaiser Georgia (continued)

\$1,689.48	463	Retiree and Family (Two family members are "Basic")
\$2,531.72	464	Retiree and Family (Three or more family members are "Basic")
\$1,203.35	465	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")
\$717.22	466	Retiree and Family (Two family members are "Senior Advantage")
\$2,045.59	467	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$1,559.46	468	Retiree and Family (Two family members are "Senior Advantage"; one is "Basic")
\$1,915.57	469	Retiree and Family (Three or more family members are "Senior Advantage"; one is "Basic")
\$2,045.59	470	Retiree and Family (Three or more family members are "Basic"; one is "Senior Advantage")

Kaiser Hawaii

\$795.16	471	Retiree Only ("Basic" under age 65)
\$346.45	472	Retiree Only ("Senior Advantage")
\$1,381.42	473	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)
\$1,585.31	474	Retiree and Family (Two family members are "Basic")
\$2,375.47	475	Retiree and Family (Three or more family members are "Basic")
\$1,136.61	476	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")
\$2,171.58	477	Retiree and Family (One family member is "Basic" under age 65; one is over age 65 without Medicare Part A or Medicare Part B)
\$687.90	478	Retiree and Family (Two family members are "Senior Advantage")
\$1,722.87	479	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 without Medicare Part A or Medicare Part B)

Kaiser Oregon

\$806.67	481	Retiree Only ("Basic" under age 65)
\$465.92	482	Retiree Only ("Senior Advantage")
\$1,205.27	483	Retiree Only (Over age 65 without Medicare Part A or Medicare Part B)
\$1,608.34	484	Retiree and Family (Two family members are "Basic")
\$2,410.01	485	Retiree and Family (Three or more family members are "Basic")
\$1,267.59	486	Retiree and Family (One family member is "Senior Advantage"; one is "Basic")
N/A	487	Retiree Only (Medicare Cost "Supplement" program)
\$926.84	488	Retiree and Family (Two family members are "Senior Advantage")
\$1,110.84	489	Retiree Only (Over age 65 with Medicare Part A only)
\$1,205.27	490	Retiree Only (Over age 65 with Medicare Part B only)

*Benchmark premiums are bolded.

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
<u>Kaiser Oregon (continued)</u>		
\$1,571.76	491	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 with Medicare Par A only)
\$1,666.19	492	Retiree and Family (One family member is "Senior Advantage"; one is over age 65 without Medicare Part A or Medicare Part B)
\$2,069.26	493	Retiree and Family (One family member is "Senior Advantage"; two or more are "Basic")
\$1,728.51	494	Retiree and Family (Two family members are "Senior Advantage"; one is "Basic")
\$2,405.54	495	Retiree and Family (Two family members are over age 65 without Medicare Part A or Medicare Part B)
\$2,216.68	496	Retiree and Family (Two family members are over age 65 with Medicare Part A only)
\$2,216.68	497	Retiree and Family (One family member is "Basic"; one is over age 65 with Medicare Part A only)
\$2,006.94	498	Retiree and Family (One family member is "Basic"; one is over age 65 without Medicare Part A or Medicare Part B)

Kaiser Rate Category Definitions

"Basic" - includes those who are under age 65

Medicare Cost ("Supplement")

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

"Senior Advantage"

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

"Excess I"

- Is for participants who have Medicare Part A only.

"Excess II"

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

"Excess III"

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

PREMIUMS*	CARRIER DEDUCTION CODES	DEDUCTION CODE DEFINITIONS
<u>SCAN Health Plan</u>		
\$304.00	611	Retiree Only with SCAN
\$603.00	613	Retiree and 1 Dependent - Both with SCAN (Retiree and 1 Dependent = Retiree and Spouse/Domestic Partner OR Retiree and 1 Child. Both Retiree and Dependent must have Medicare.)
<u>United Healthcare Medicare Advantage (UHCMA)</u>		
(For both members and dependents who are enrolled in UHCMA, or a family combination of UHCMA/UHC)		
\$293.62	701	Retiree Only with Secure Horizons
\$1,203.81	702	Retiree and 1 Dependent - One with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic Partner OR Retiree and 1 Child)
\$582.24	703	Retiree and 1 Dependent - Both with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic Partner OR Retiree and 1 Child)
\$1,360.59	704	Retiree and 2 or More Dependents - One with Secure Horizons (Retiree and 2 or More Dependents = Retiree, Spouse/Domestic Partner and 1 or More Children OR Retiree and 2 or More Children)
\$739.02	705	Retiree and 2 or More Dependents - Two with Secure Horizons (Retiree and 2 or More Dependents = Retiree, Spouse/Domestic Partner and 1 or More Children OR Retiree and 2 or More Children)
\$261.24	706	Survivor Children Only Rates
<u>United Healthcare (UHC)</u>		
(For members and dependents under age 65 [no Medicare])		
\$915.18	707	Retiree Only
\$1,671.68	708	Retiree and 1 Dependent
\$1,982.16	709	Retiree and 2 Or More Dependents
<u>Local 1014 Firefighters</u>		
\$914.03	801	Member Under 65
\$1,648.06	802	Member + 1 Under 65
\$1,944.04	803	Member + 2 Under 65
\$914.03	804	Member with Medicare
\$1,648.06	805	Member + 1; 1 Medicare
\$1,648.06	806	Member + 1; 2 Medicare
\$1,944.04	807	Member + 2; 1 Medicare
\$1,944.04	808	Member + 2; 2 Medicare

*Benchmark premiums are bolded.

CARRIER DEDUCTION PREMIUMS*	CODES	DEDUCTION CODE DEFINITIONS
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Local 1014 Firefighters (continued)

\$914.03	809	Surviving Spouse Under 65
\$1,648.06	810	Surviving Spouse + 1; Under 65
\$1,944.04	811	Surviving Spouse + 2 Under 65
\$914.03	812	Surviving Spouse with Medicare
\$1,648.06	813	Surviving Spouse + 1; 1 Medicare
\$1,944.04	814	Spouse + 1; 1 Medicare
\$1,648.06	815	Surviving Spouse + 1; 2 Medicare

CIGNA Indemnity - Dental/Vision

\$46.55	501	Retiree Only
\$99.61	502	Retiree and Dependent(s)
\$57.81	503	Survivor Children Only Rates

CIGNA HMO - Dental/Vision

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

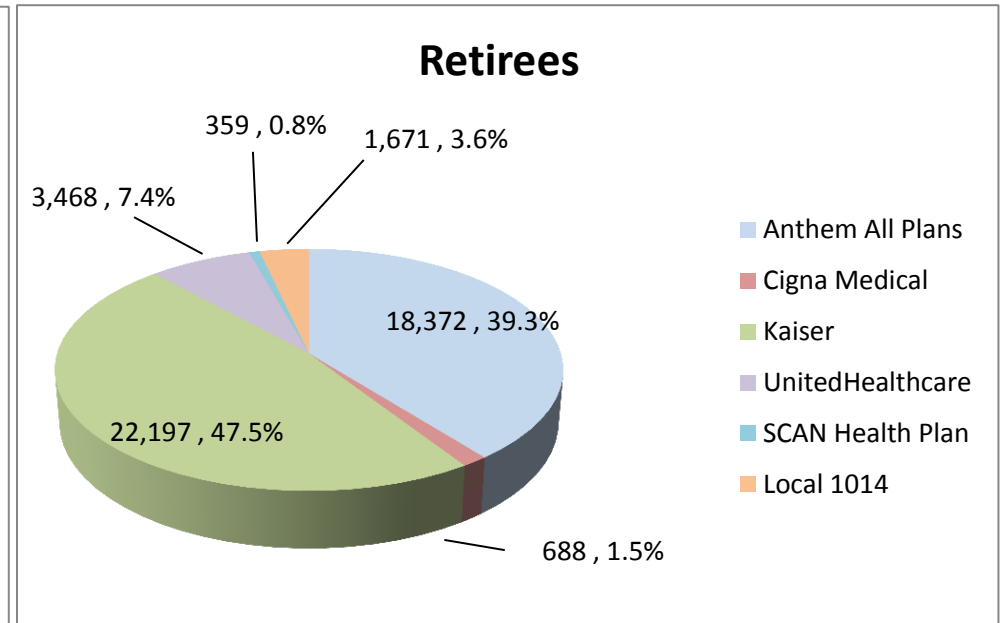
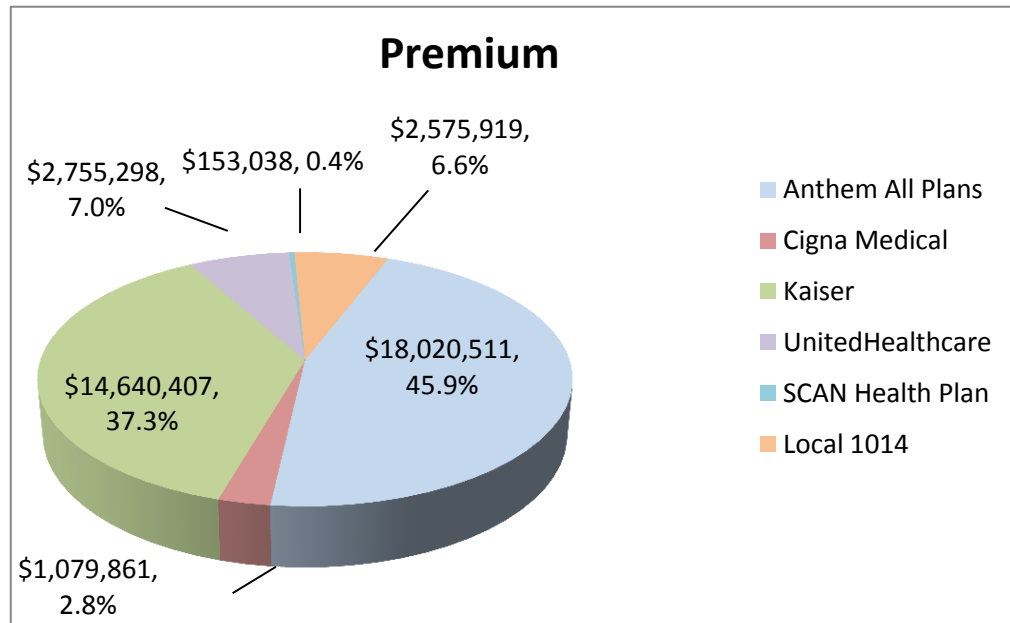
LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

Premium and Enrollment

September 2015 Coverage Month

Carrier / Plan	Monthly Premium	Percent of Total	Retirees	Percent of Total
Anthem All Plans	\$18,020,511	45.9%	18,372	39.3%
Cigna Medical	\$1,079,861	2.8%	688	1.5%
Kaiser	\$14,640,407	37.3%	22,197	47.5%
UnitedHealthcare	\$2,755,298	7.0%	3,468	7.4%
SCAN Health Plan	\$153,038	0.4%	359	0.8%
Local 1014	\$2,575,919	6.6%	1,671	3.6%
Combined Medical	\$39,225,034	100.0%	46,755	100.0%

Cigna Dental & Vision	\$3,383,420	47,699
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LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

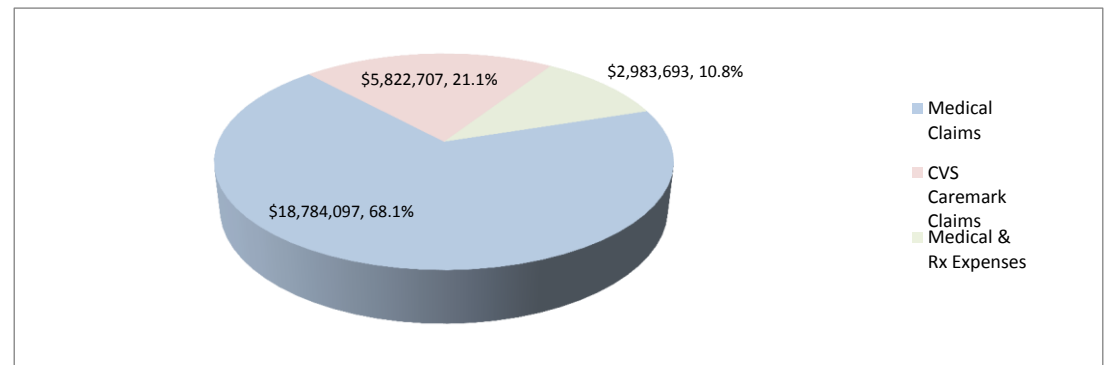
Anthem Plans I and II

Plan Year July 1, 2015 - June 30, 2016

Month	Monthly Enrollment	Monthly Premium	Medical Claims	CVS Caremark Claims	Medical & Rx Claims	Claims Per Retiree Per Month	Paid Loss Ratio	Medical & Rx Expenses	Total Paid Claims & Expenses	Expense Ratio
Jul-15	6,158	\$9,170,958	\$6,045,082	\$1,927,509	\$7,972,591	\$1,294.67	86.9%	\$996,885	\$8,969,477	97.8%
Aug-15	6,149	\$9,187,473	\$6,191,520	\$1,848,592	\$8,040,112	\$1,307.55	87.5%	\$995,372	\$9,035,484	98.3%
Sep-15	6,125	\$9,098,082	\$6,547,496	\$2,046,606	\$8,594,101	\$1,403.12	94.5%	\$991,435	\$9,585,537	105.4%
Oct-15										
Nov-15										
Dec-15										
Jan-16										
Feb-16										
Mar-16										
Apr-16										
May-16										
Jun-16										

YTD Plan Year	18,432	\$27,456,514	\$18,784,097	\$5,822,707	\$24,606,804	\$1,335.00	89.6%	\$2,983,693	\$27,590,497	100.5%
3 Month Average	6,144	\$9,152,171	\$6,261,366	\$1,940,902	\$8,202,268	\$1,335.00	89.6%	\$994,564	\$9,196,832	100.5%
12 Month Rollup	74,025	\$98,291,289	\$72,695,781	\$21,771,657	\$94,467,438	\$1,276.16	96.1%	\$8,710,826	\$103,178,264	105.0%

Medical Claims reported by Anthem
 CVS Caremark Claims reported by CVS
 Expenses: Anthem Admin, Stop Loss, and Premium Taxes
 Enrollment and Premium Reported by LACERA



LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

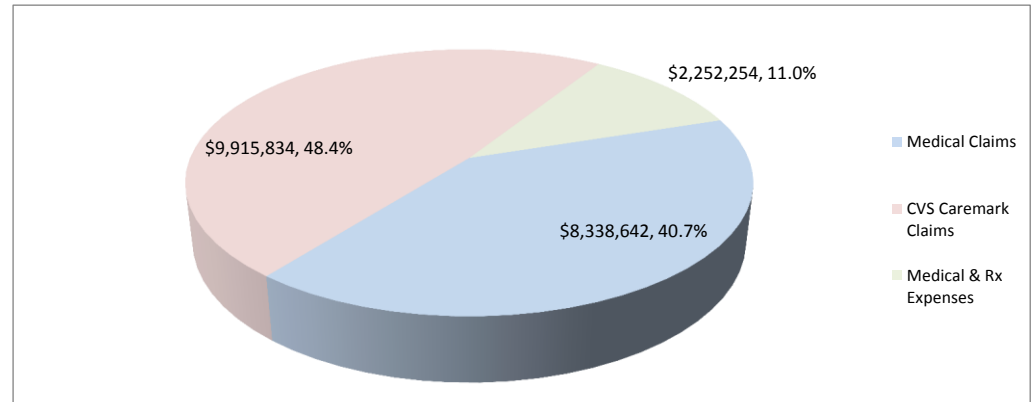
Anthem Plan III

Plan Year July 1, 2015 - June 30, 2016

Month	Monthly Enrollment	Monthly Premium	Medical Claims	CVS Caremark Claims	Medical & Rx Claims	Claims Per Retiree Per Month	Paid Loss Ratio	Medical & Rx Expenses	Total Paid Claims & Expenses	Expense Ratio
Jul-15	10,771	\$7,235,374	\$2,953,865	\$3,470,465	\$6,424,330	\$596.45	88.8%	\$748,366	\$7,172,696	99.1%
Aug-15	10,810	\$7,269,627	\$2,599,013	\$3,209,072	\$5,808,085	\$537.29	79.9%	\$751,076	\$6,559,161	90.2%
Sep-15	10,835	\$7,259,484	\$2,785,764	\$3,236,297	\$6,022,061	\$555.80	83.0%	\$752,813	\$6,774,874	93.3%
Oct-15										
Nov-15										
Dec-15										
Jan-16										
Feb-16										
Mar-16										
Apr-16										
May-16										
Jun-16										

YTD Plan Year	32,416	\$21,764,484	\$8,338,642	\$9,915,834	\$18,254,476	\$563.13	83.9%	\$2,252,254	\$20,506,730	94.2%
3 Month Average	10,805	\$7,254,828	\$2,779,547	\$3,305,278	\$6,084,825	\$563.13	83.9%	\$750,751	\$6,835,577	94.2%
12 Month Rollup	128,301	\$77,462,459	\$34,918,356	\$37,415,595	\$72,333,951	\$563.78	93.4%	\$8,024,680	\$80,358,630	103.7%

Medical Claims reported by Anthem
 CVS Caremark Claims reported by CVS
 Expenses: Anthem Admin and Premium Taxes
 Enrollment and Premium Reported by LACERA



LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

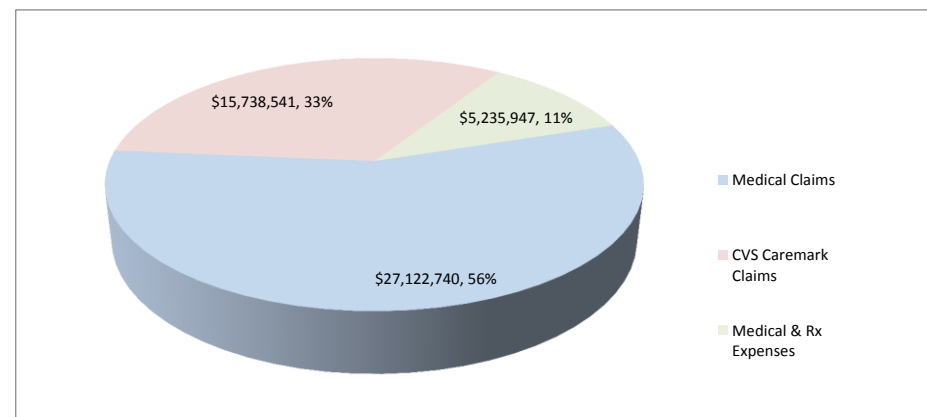
Anthem Plan I, II, and III

Plan Year July 1, 2015 – June 30, 2016

Month	Monthly Enrollment	Monthly Premium	Medical Claims	CVS Caremark Claims	Medical & Rx Claims	Claims Per Retiree Per Month	Paid Loss Ratio	Medical & Rx Expenses	Total Paid Claims & Expenses	Expense Ratio
Jul-15	16,929	\$16,406,332	\$8,998,948	\$5,397,974	\$14,396,922	\$850.43	87.8%	\$1,745,251	\$16,142,173	98.4%
Aug-15	16,959	\$16,457,100	\$8,790,532	\$5,057,665	\$13,848,197	\$816.57	84.1%	\$1,746,448	\$15,594,645	94.8%
Sep-15	16,960	\$16,357,566	\$9,333,260	\$5,282,902	\$14,616,162	\$861.80	89.4%	\$1,744,248	\$16,360,410	100.0%
Oct-15										
Nov-15										
Dec-15										
Jan-16										
Feb-16										
Mar-16										
Apr-16										
May-16										
Jun-16										

YTD Plan Year	50,848	\$49,220,998	\$27,122,740	\$15,738,541	\$42,861,281	\$842.93	87.1%	\$5,235,947	\$48,097,228	97.7%
3 Month Average	16,949	\$16,406,999	\$9,040,913	\$5,246,180	\$14,287,094	\$842.93	87.1%	\$1,745,316	\$16,032,409	97.7%
12 Month Rollup	202,326	\$175,753,749	\$107,614,137	\$59,187,252	\$166,801,389	\$824.42	94.9%	\$16,735,505	\$183,536,894	104.4%

Medical Claims reported by Anthem
 CVS Caremark Claims reported by CVS
 Expenses: Anthem Admin, Stop Loss, and Premium Taxes
 Enrollment and Premium Reported by LACERA



LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

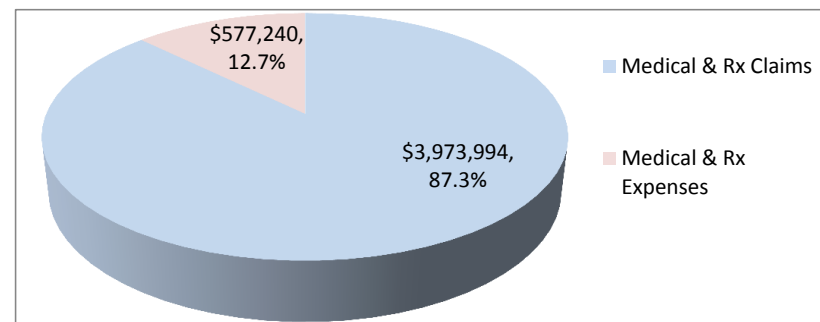
Anthem Prudent Buyer

Plan Year July 1, 2015 – June 30, 2014

Month	Monthly Enrollment	Monthly Premium	Medical & Rx Claims	Claims Per Retiree Per Month	Paid Loss Ratio	Medical & Rx Expenses	Total Paid Claims & Expenses	Expense Ratio
Jul-15	1,445	\$1,705,018	\$1,467,346	\$1,015.46	86.1%	\$194,659	\$1,662,005	97.5%
Aug-15	1,428	\$1,675,848	\$1,314,525	\$920.54	78.4%	\$192,368	\$1,506,894	89.9%
Sep-15	1,412	\$1,662,945	\$1,192,123	\$844.28	71.7%	\$190,213	\$1,382,336	83.1%
Oct-15								
Nov-15								
Dec-15								
Jan-16								
Feb-16								
Mar-16								
Apr-16								
May-16								
Jun-16								

YTD Plan Year	4,285	\$5,043,812	\$3,973,994	\$927.42	78.8%	\$577,240	\$4,551,234	90.2%
3 Month Average	1,428	\$1,681,271	\$1,324,665	\$927.42	78.8%	\$192,413	\$1,517,078	90.2%
12 Month Rollup	17,546	\$17,426,701	\$15,394,523	\$877.38	88.3%	\$2,341,738	\$17,736,261	101.8%

Monthly Enrollment and Premium Data as reported by LACERA
 Medical Claims reported by Anthem
 Expenses: Anthem Admin, Stop Loss, and Premium Taxes
 Enrollment and Premium Reported by LACERA



LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

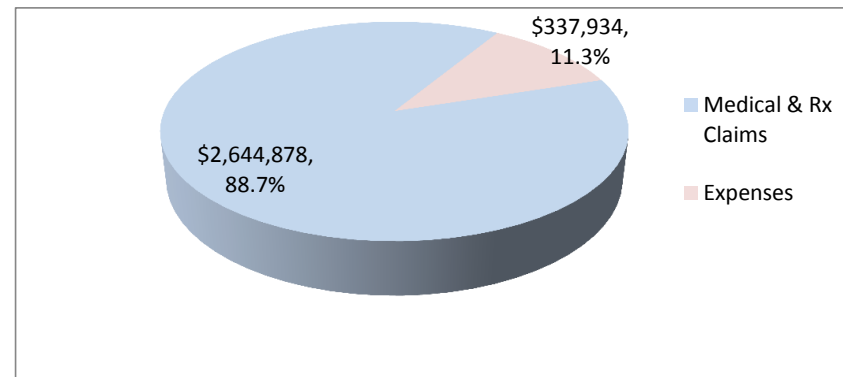
Cigna HMO

Plan Year July 1, 2015 – June 30, 2016

Month	Monthly Enrollment	Monthly Premium	Medical & Rx Claims	Claims Per Retiree Per Month	Paid Loss Ratio	Expenses	Total Paid Claims & Expenses	Expense Ratio
Jul-15	657	\$1,085,738	\$958,557	\$1,458.99	88.3%	\$115,092	\$1,073,649	98.9%
Aug-15	648	\$1,055,975	\$775,934	\$1,197.43	73.5%	\$111,937	\$887,871	84.1%
Sep-15	639	\$1,046,239	\$910,387	\$1,424.71	87.0%	\$110,905	\$1,021,292	97.6%
Oct-15								
Nov-15								
Dec-15								
Jan-16								
Feb-16								
Mar-16								
Apr-16								
May-16								
Jun-16								

YTD Plan Year	1,944	\$3,187,953	\$2,644,878	\$1,360.53	83.0%	\$337,934	\$2,982,812	93.6%
3 Month Average	648	\$1,062,651	\$881,626	\$1,360.53	83.0%	\$112,645	\$994,271	93.6%
12 Month Rollup	8,150	\$13,093,420	\$11,348,860	\$1,392.50	86.7%	\$1,910,105	\$13,258,965	101.3%

Monthly Enrollment and Premium Data as reported by LACERA
 Medical Claims reported by Cigna
 Expenses: Cigna Admin Costs and Premium Taxes
 Enrollment and Premium Reported by LACERA



LOS ANGELES COUNTY EMPLOYEES RETIREMENT ASSOCIATION

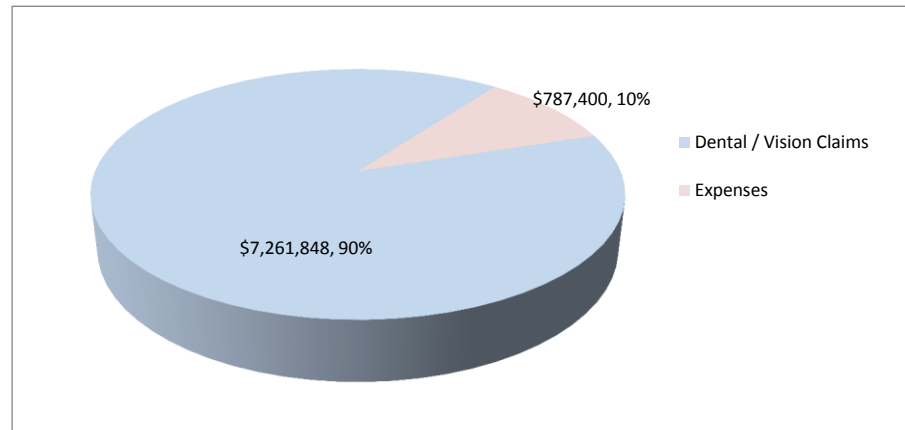
Cigna Dental PPO and Vision

Plan Year July 1, 2015 - June 30, 2016

Month	Monthly Enrollment	Monthly Premium	Dental / Vision Claims	In-Network Dental Claims	Claims Per Retiree Per Month	Paid Loss Ratio	Expenses	Total Paid Claims & Expenses	Expense Ratio
Jul-15	42,187	\$3,040,191	\$2,480,364	47.7%	\$58.79	81.6%	\$261,787	\$2,742,151	90.2%
Aug-15	42,303	\$3,049,180	\$2,439,511	56.4%	\$57.67	80.0%	\$262,561	\$2,702,072	88.6%
Sep-15	42,370	\$3,054,892	\$2,341,973	58.5%	\$55.27	76.7%	\$263,053	\$2,605,026	85.3%
Oct-15									
Nov-15									
Dec-15									
Jan-16									
Feb-16									
Mar-16									
Apr-16									
May-16									
Jun-16									

YTD Plan Year	126,860	\$9,144,263	\$7,261,848	54.2%	\$57.24	79.4%	\$787,400	\$8,049,248	88.0%
3 Month Average	42,287	\$3,048,088	\$2,420,616	52.1%	\$57.24	79.4%	\$262,467	\$2,683,083	88.0%
12 Month Rollup	501,967	\$36,030,552	\$31,450,457	47.4%	\$62.65	87.3%	\$3,163,715	\$34,614,172	96.1%

Expenses: Cigna Admin Costs and Premium Taxes
Enrollment and Premium Reported by LACERA





Legislative

President Signs Short-Term Funding Bill Into Law

On September 30, 2015, President Obama signed into law a continuing resolution (H.R. 719 - Continuing Appropriations Act 2016) to maintain government funding through December 11, 2015. Both the House and Senate passed the measure on the same day, averting a federal shutdown. Lawmakers have the next two months to negotiate a longer-term budget solution.

The full text of H.R. 719 is available [here](#).

Congress Approves Bill That Would Revise Definition of Small Employer Under Affordable Care Act; President Expected to Sign Into Law

On October 1, 2015, the Senate passed by voice vote the Protecting Coverage for Employees Act (H.R. 1624), which would amend the Affordable Care Act to revise the definition of small employer. The House approved the bill on September 28. H.R. 1624 would maintain the current definition of a small group health plan at 50 or fewer employees, amending a provision scheduled to take effect in 2016 that would include all companies with up to 100 employees in the definition of small group plans. The legislation would provide states the option of expanding small groups, although most states are expected to maintain the current definition. The White House has stated that President Obama will sign the bill into law.

H.R. 1624 is available [here](#).

President Signs Bill Into Law That Revises Definition of Small Employer Under Affordable Care Act

On October 7, 2015, President Obama signed into law the Protecting Coverage for Employees Act (H.R. 1624), which amends the Affordable Care Act by revising the definition of small employer. The Senate passed the bill on October 1 and the House approved the legislation on September 28. The law maintains the current definition of a small group health plan at 50 or fewer employees, amending a provision scheduled to take effect in 2016 that would have included all companies with up to 100 employees in the definition of small group plans. The legislation provides states the option of expanding small groups, although most states are expected to maintain the current definition.

H.R. 1624 is available [here](#).

Aon Hewitt Publications

IRS Releases Final Forms and Instructions for Affordable Care Act Reporting

The Internal Revenue Service (IRS) recently released final Affordable Care Act information reporting forms that employers and health plans must complete to comply with the Affordable Care Act reporting requirements for calendar months in 2015, along with the instructions for completing the forms.

The IRS release includes Forms 1094-C, 1095-C, 1094-B, and 1095-B, along with the related instructions. While there were no significant changes to the draft 2015 forms (see the August 2015 Aon Hewitt bulletin, “IRS Releases Updated Affordable Care Act Forms and Instructions”), the final instructions include some clarifications and changes to the draft instructions for employers.

The Aon Hewitt bulletin on the final forms and instructions is available [here](#).