#### 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, MARCH 2, 2016 - 9:00 A.M.\*\*

#### COMMITTEE MEMBERS:

Les Robbins, Chair William de la Garza, Vice Chair Vivian H. Gray Shawn R. Kehoe Ronald Okum, Alternate

- I. APPROVAL OF THE MINUTES
  - A. Approval of the minutes of the regular meeting of February 11, 2016
- 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 adopt a "Watch" position on Assembly Bill 1812, which limits the maximum retirement benefit payable for public employees who become members of a public retirement system on or after January 1, 2017. (Memorandum dated February 22, 2016)
  - B. Recommendation as submitted by Barry W. Lew, Legislative Affairs Officer: That the Committee recommend the Board of Retirement adopt a "Support" position on Assembly Bill 2376, which amends the definition of Plan D in the Prospective Plan Transfer provisions and authorizes regulations relating to sworn statements in the County Employees Retirement Law of 1937. (Memorandum dated February 22, 2016)

#### IV. FOR INFORMATION

- A. Staff Activities Report for February, 2016
- B. Cigna & Anthem Blue Cross Claims Experience
- C. Federal Legislation
  - Aon Hewitt Washington Report

#### V. GOOD OF THE ORDER

(For information purposes only)

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

\*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, FEBRUARY 11, 2016, 10:35 A.M. – 10:50 P.M.

#### **COMMITTEE MEMBERS**

PRESENT: Les Robbins, Chair

William de la Garza, Vice Chair

Alan Bernstein Vivian H. Gray

ABSENT: Ronald Okum, Alternate

**ALSO ATTENDING:** 

**BOARD MEMBERS AT LARGE** 

Anthony Bravo Yves Chery Joseph Kelly Shawn R. Kehoe David L. Muir

STAFF, ADVISORS, PARTICIPANTS

Gregg Rademacher Leilani Ignacio

Aon Hewitt

Kirby Bosley Helen Batsalkin

The meeting was called to order by Chair Robbins at 10:35 a.m.

#### I. APPROVAL OF THE MINUTES

A. Approval of the minutes of the regular meeting of January 14, 2016

Mr. Bernstein made a motion, Mr. de la Garza seconded, to approve the minutes of the regular meeting of January 14, 2016. 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 adopt a "Watch" position on Assembly Bill 1640, which indefinitely extends the exemption of certain public employees from the provisions of the California Public Employees' Pension Reform Act of 2013. (Memorandum dated February 1, 2016)

Mr. Bernstein made a motion, Mr. de la Garza 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 adopt a "Watch" position on Assembly Bill 1692, which applies the terms and conditions of disability retirement under Tier Three of the Contra Costa Employees' Retirement Association to nonsafety PEPRA plan members for whom the Board of Supervisors of Contra Costa County is the governing body. (Memorandum dated February 1, 2016)

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

#### III. ACTION ITEMS (Continued)

C. Recommendation as submitted by Barry W. Lew, Legislative Affairs Officer: That the Committee recommend the Board of Retirement adopt a "Watch" position on Senate Bill 24, which clarifies the treatment of pension benefits for employees who transfer from an employer to a joint powers authority. (Memorandum dated February 2, 2016)

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

#### IV. FOR INFORMATION

A. Staff Activities Report for January, 2016

The staff activities report was discussed.

B. CIGNA & Anthem Blue Cross Claims Experience

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

V. GOOD OF THE ORDER

(For information purposes only)

VI. ADJOURNMENT and

SET TIME FOR OPERATIONS OVERSIGHT COMMITTEE MEETING

The meeting adjourned at 10:50 a.m., after setting the time for the Operations Oversight Committee at 10:55 a.m.

<sup>\*</sup>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.



February 22, 2016

TO: Insurance, Benefits and Legislative Committee

Les Robbins, Chair

William de la Garza, Vice Chair

Vivian H. Gray Shawn Kehoe

Ronald Okum, Alternate

FROM: Barry W. Lew &

Legislative Affairs Officer

FOR: March 2, 2016 Insurance, Benefits and Legislative Committee Meeting

SUBJECT: Assembly Bill 1812- Benefit Limits

#### RECOMMENDATION

That the Insurance, Benefits and Legislative Committee recommend that the Board of Retirement adopt a "Watch" position on Assembly Bill 1812, which limits the maximum retirement benefit payable for public employees who become members of a public retirement system on or after January 1, 2017.

#### DISCUSSION

The defined benefits of public retirement systems are based on final compensation, service credit, and age at retirement. This bill would limit the retirement benefit paid to a a member to \$100,000 per year for those members of a public retirement system whose service is not covered by Social Security. The bill would limit the retirement benefit to \$80,000 per year for those members of a public retirement system whose service is covered by Social Security. The retirement benefits would be adjusted for inflation based on the Consumer Price Index for All Urban Consumers.

The benefit limits apply to public employees who are employed by a public agency for the first time and become members of a public retirement system on or after January 1, 2017.

The public retirement systems include all state and local public retirement systems except the University of California Retirement System and any retirement systems created for a charter city or charter county. Because LACERA is a retirement system created for the charter county of Los Angeles, the provisions of the bill do not apply to LACERA. There are eight charter counties, including Los Angeles, with retirement systems established under the County Employees Retirement Law of 1937 (CERL).

Assembly Bill 1812 Insurance, Benefits and Legislative Committee February 22, 2016 Page 2

On April 12, 2012, LACERA's Board of Retirement adopted a "Watch" position on Assembly Bill 1663, which was an identical bill, except that it applied to new members of public retirement systems on or after January 1, 2013.

**IT IS THEREFORE RECOMMENDED THAT YOUR COMMITTEE** recommend that the Board of Retirement adopt a "Watch" position on Assembly Bill 1812, which limits the maximum retirement benefit payable for public employees who become members of a public retirement system on or after January 1, 2017.

**Reviewed and Approved:** 

Steven P. Rice, Chief Counsel

Attachments

2016. Leg.AB 1812.IBL.022216

## LEGISLATIVE ANALYSIS ASSEMBLY BILL 1812

AUTHOR: Wagner [R]

INTRODUCED: February 8, 2016

SUMMARY: This bill establishes two limits to the payment of retirement

benefits paid to members of public retirement systems. If the member's service is not covered by Social Security, then the retirement benefit cannot exceed \$100,000 per year. If the member's service is covered by Social Security, then the retirement benefit cannot exceed \$80,000 per year. The amounts are adjusted annually for inflation using the Consumer Price Index for All Urban Consumers.

The benefit limits apply to public employees who are employed by a public agency for the first time and becomes a member of a public retirement system on or

after January 1, 2017.

The benefit limits do not apply to the following employees:

- Former public employees employed before January 1, 2017 who return to employment with the same public agency on or after January 1, 2017.
- State employees hired prior to January 1, 2017 who were subject to a 24-month waiting period before accruing service credit or making employee contributions.
- Public employees on an approved leave of absence prior to January 1, 2017 who return to active employment on or after January 1, 2017.

The benefit limits apply to all state and local public retirement systems except for the University of California Retirement System and any retirement systems created for a charter city or charter county.

If a memorandum of understanding is in effect of January 1, 2017, the provisions of this bill will not become effective until the expiration of the memorandum of understanding.

ANALYSIS: The provisions of the bill do not apply to retirement

systems created for a charter city or charter county. The charter counties under the County Employees Retirement Law of 1937 (CERL) are as follows: Alameda, Fresno, Los Angeles, Orange, Sacramento, San Bernardino, San Diego, and San Mateo. Since LACERA as a retirement system was

created for the charter county of Los Angeles, the provisions of the bill would not apply to LACERA. However, retirement systems under CERL that were created for general law counties would be subject to the bill's provisions.

(In contrast, the California Public Employees' Pension Reform Act of 2013 (PEPRA) also does not apply to charter counties—except to the extent the retirement system of the charter county is governed by state statute. Thus, LACERA is subject to PEPRA because CERL is a state statute.)

#### **Legislative History**

AB 1663 (2012) was an identical bill that applied to new members of a public retirement system on or after January 1, 2013. LACERA's Board of Retirement adopted a "Watch" position on April 12, 2012. The bill remained in committee without further action and died.

STAFF

**RECOMMENDATION: Watch** 

PREPARED BY: Barry W. Lew, Legislative Affairs Officer

DATED: February 22, 2016

#### **Introduced by Assembly Member Wagner**

February 8, 2016

An act to add Section 7514.7 to the Government Code, relating to public employees' retirement.

#### LEGISLATIVE COUNSEL'S DIGEST

AB 1812, as introduced, Wagner. Public employees' retirement.

Existing state and local public retirement systems provide defined benefits based on age at retirement, service credit, and final compensation. Existing law defines final compensation for various employment classifications in connection with the benefits provided by these systems.

This bill would prohibit the retirement benefit paid to a member of any public retirement system whose service is not included in the federal social security system from exceeding \$100,000. The bill would prohibit the retirement benefit paid to a member of any public retirement system whose service is included in the federal social security system from exceeding \$80,000. The bill would require that those amounts be adjusted annually by each public retirement system using the Consumer Price Index for All Urban Consumers.

This bill would apply the above-described provisions to a public employee who is first employed by a public agency and becomes a member of any public retirement system on or after January 1, 2017.

This bill would specify that if any of these provisions are in conflict with a memorandum of understanding that is current and in effect on January 1, 2017, the memorandum of understanding would be controlling while it remains in effect, but that upon expiration of that

AB 1812 — 2 —

3

9

10

11

12 13

14

15

16 17

18

19 20

21

22

23

24

25

26

27

28

29

memorandum of understanding, these provisions would be controlling and would not be superseded by a subsequent memorandum of understanding.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 7514.7 is added to the Government Code, 2 to read:

- 7514.7. (a) (1) The retirement benefit paid to a member of any public retirement system whose service is not included in the federal system shall not exceed one hundred thousand dollars (\$100,000) per year, adjusted by each system annually for inflation using the Consumer Price Index for All Urban Consumers.
- (2) The retirement benefit paid to a member of any public retirement system whose service is included in the federal system shall not exceed eighty thousand dollars (\$80,000) per year, adjusted by each system annually for inflation using the Consumer Price Index for All Urban Consumers.
- (b) Notwithstanding any other law or any provision of an expired memorandum of understanding, this section shall apply to a public employee who is employed by a public agency for the first time and becomes a member of a public retirement system on or after January 1, 2017.
  - (c) This section shall not apply to:
- (1) Former public employees employed before January 1, 2017, who return to employment in the same public agency on or after January 1, 2017.
- (2) State employees hired prior to January 1, 2017, who were subject to Section 20281.5 during the first 24 months of state employment.
- (3) Public employees on an approved leave of absence employed prior to January 1, 2017, who return to active employment on or after January 1, 2017.
- (d) For purposes of this section, the following definitions shall apply:
- 30 (1) "Federal system" means the old age, survivors, disability, 31 and health insurance provisions of the Social Security Act.

-3- AB 1812

(2) "Public agency" means the state or a county, city, city and county, district, school district, authority, university, or any public or municipal corporation, political subdivision, or other public agency of the state, or any department, division, bureau, board, commission, agency, or instrumentality of any of these entities.

- (3) "Public employee" means any person employed by any public agency.
- (4) "Public retirement system" means all state and local public retirement systems, excluding the University of California Retirement System and any retirement systems created for a charter city or charter county.
- (e) If this section is in conflict with a memorandum of understanding that is current and in effect on January 1, 2017, the memorandum of understanding shall be controlling while it remains in effect. Upon expiration of the memorandum of understanding that is in effect and current on January 1, 2017, this section shall be controlling and shall not be superseded by a subsequent memorandum of understanding.



#### February 22, 2016

TO: Insurance, Benefits and Legislative Committee

Les Robbins, Chair

William de la Garza, Vice Chair

Vivian H. Gray Shawn Kehoe

Ronald Okum, Alternate

FROM: Barry W. Lew &

Legislative Affairs Officer

FOR: March 2, 2016 Insurance, Benefits and Legislative Committee Meeting

SUBJECT: Assembly Bill 2376 - County Employees' Retirement

#### RECOMMENDATION

That the Insurance, Benefits and Legislative Committee recommend that the Board of Retirement adopt a "Support" position on Assembly Bill 2376, which amends the definition of Plan D in the Prospective Plan Transfer provisions and authorizes regulations relating to sworn statements in the County Employees Retirement Law of 1937.

#### DISCUSSION

#### Definition of Plan D in Prospective Plan Transfers

This provision in the bill was proposed by LACERA since the prospective plan transfer provisions relate to LACERA and none of the other retirement systems under the County Employees Retirement Law of 1937 (CERL).

CERL authorizes LACERA members of Plan D to prospectively transfer to Plan E and vice versa. Plan D is currently defined as the contributory plan otherwise available to new members of the retirement system on the transfer date. The California Public Employees' Pension Reform Act of 2013 (PEPRA) requires that new members of LACERA be enrolled in Plan G on or after January 1, 2013.

This bill would revise the definition of Plan D to mean the contributory plan otherwise available to members between June 1, 1979 and December 31, 2012. The revision would remove the conflict between Plan D and Plan G with respect to the definition of the contributory plan that is available to new members of the retirement system.

Assembly Bill 2376 Insurance, Benefits and Legislative Committee February 22, 2016 Page 2

#### **Sworn Statements**

This provision in the bill was proposed by the State Association of County Retirement Systems (SACRS). The Board of Retirement directed its voting delegate to support its inclusion in the 2016 SACRS legislative platform at November 2015 SACRS Conference. However, voting on the item was postponed until the May 2016 SACRS Conference because the boards of certain systems had not yet had the opportunity to consider all the proposals on the legislative platform.

CERL requires that a board of retirement's regulations provide for the collection of a sworn statement from every person who qualifies for membership. Since the information on a sworn statement may have already been collected by the employer and electronically transmitted to the retirement system, the retirement system's collection of the form may be duplicative and unnecessary. The bill provides the option for the submission of the information to the retirement system in a form other than the sworn statement.

IT IS THEREFORE RECOMMENDED THAT YOUR COMMITTEE recommend that the Board of Retirement adopt a "Support" position on Assembly Bill 2376, which amends the definition of Plan D in the Prospective Plan Transfer provisions and authorizes regulations relating to sworn statements in the County Employees Retirement Law of 1937.

**Reviewed and Approved:** 

Steven P. Rice. Chief Counsel

Attachments

2016. Leg.AB 2376.IBL.022216

## LEGISLATIVE ANALYSIS ASSEMBLY BILL 2376

AUTHOR: Assembly Committee on Public Employees, Retirement,

and Social Security

INTRODUCED: February 18, 2016

SPONSOR: Los Angeles County Employees Retirement Association

**State Association of County Retirement Systems** 

SUMMARY: The County Employees Retirement Law of 1937 (CERL)

authorizes LACERA members of Plan D to prospectively transfer to Plan E and vice versa. Plan D is currently defined as the contributory plan otherwise available to new members of the retirement system on the transfer date.

This bill would revise the definition of Plan D to mean the contributory plan otherwise available to members between

June 1, 1979 and December 31, 2012.

CERL authorizes the board of retirement to make regulations that are not inconsistent with CERL. It also requires that regulations of the board of retirement shall include provisions for the filing of a sworn statement by every person who qualifies for membership. The sworn statement contains the date of birth, nature and duration of employment with the county, compensation, and other information required by the board.

This bill would authorize the retirement association to make regulations enabling the required information to be submitted by the member's employer in a form other than

the sworn statement.

ANALYSIS: The California Public Employees' Pension Reform Act of

2013 (PEPRA) requires that new members of LACERA be enrolled in Plan G on or after January 1, 2013. The revised definition of Plan D is a technical change that removes the conflict between Plan D and Plan G with respect to the definition of the contributory plan that is available to new members of the retirement system. The revision does not otherwise change the existing terms and conditions of the

prospective plan transfer.

On November 4, 2015, LACERA's Board of Retirement directed staff to work with its legislative advocate to seek an author to introduce legislation that amends the definition of Plan D in the prospective plan transfer provisions of CERL.

The filing of a sworn statement may be duplicative and unnecessary if the employer collects the same information

and electronically transmits it to the retirement association. The bill provides the option for the submission of the information to the retirement system in a form other than the sworn statement.

The provision relating to sworn statements was a proposal put forth by the State Association of County Retirement Systems (SACRS) for the 2016 legislative year. On November 4, 2015, LACERA's Board of Retirement directed its voting delegate to support inclusion of the proposal in the SACRS legislative platform. At the November 2015 SACRS Conference, voting on the item was postponed to the May 2016 SACRS Conference because the boards of certain systems had not yet had the opportunity to consider all the proposals on the legislative platform.

STAFF

**RECOMMENDATION:** Support

PREPARED BY: Barry W. Lew, Legislative Affairs Officer

DATED: February 22, 2016

Introduced by Committee on Public Employees, Retirement, and Social Security (Assembly Members Cooper (Chair), Bonta, Cooley, Gonzalez, and O'Donnell)

February 18, 2016

An act to amend Sections 31494.2, 31494.5, and 31526 of the Government Code, relating to county employees' retirement.

#### LEGISLATIVE COUNSEL'S DIGEST

AB 2376, as introduced, Committee on Public Employees, Retirement, and Social Security. County employees' retirement: Los Angeles County.

The County Employees Retirement Law of 1937 (CERL) establishes retirement plans, known as Retirement Plan D and Retirement Plan E, that are applicable in the retirement system in Los Angeles County and prescribes procedures for members to transfer between those plans. CERL defines "Retirement Plan E" to mean the noncontributory retirement plan established by specific provisions, and defines "Retirement Plan D" to mean the contributory retirement plan otherwise available to new members of the retirement system on the transfer date.

This bill would revise the definition of Retirement Plan D to, instead, refer to the contributory retirement plan otherwise available to members of the system between June 1, 1979, and December 31, 2012, inclusive.

Under CERL, except as specified, the management of a retirement system is vested in the board of retirement, with membership as prescribed. CERL authorizes such a board to make regulations not inconsistent with that law, and requires that the regulations include specific provisions, including provisions for the filing of a sworn AB 2376 -2-

1

2

19

20

21

22

23

24

25

26

27

statement by every person who is or becomes a member, showing date of birth, nature and duration of employment with the county, compensation received, and other information as is required by the board.

This bill would authorize those regulations, in lieu of a sworn statement, to provide for the submission by a member's employer to the retirement association of the information otherwise required in a sworn statement, in a form determined by the retirement association.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Section 31494.2 of the Government Code is amended to read:

3 31494.2. (a) A general member whose benefits are governed 4 by Retirement Plan D may, during a period of active employment, 5 elect to change plan membership and become a member, prospectively, in Retirement Plan E. The election shall be made upon written application signed by the member and filed with the 7 board, pursuant to enrollment procedures and during an enrollment period established by the board, which enrollment period shall not 10 occur more frequently than once every three years for that member. The change in plan membership shall be effective as of the transfer 11 12 date, as defined in subdivision (d). Except as otherwise provided 13 in this section, the rights and obligations of a member who elects 14 to change membership under this section shall be governed by the 15 terms of this article on and after the transfer date. Prior to the transfer date, the rights to retirement, survivors', or other benefits 16 17 payable to a member and his or her survivors or beneficiaries shall 18 continue to be governed by Retirement Plan D.

(b) Except as otherwise provided in this section, effective as of the transfer date, a member who has transferred to Retirement Plan E pursuant to this section and his or her survivors or beneficiaries shall receive retirement, survivors', and other benefits that shall consist of: (1) the benefits to which they are entitled under the terms of Retirement Plan E, but based on the member's service credited only under that plan, and payable at the time and in the manner provided under Retirement Plan E, and (2) the benefits to which they would have been entitled under the terms of Retirement

-3-**AB 2376** 

1 Plan D had the member remained a member of Retirement Plan

- 2 D, but based on the member's service credited only under that
- 3 plan, and payable at the time and in the manner provided under
- 4 Retirement Plan D. Except as otherwise provided in this section,
- 5 the calculation of the member's, survivors', or beneficiaries'
- 6 benefits under each plan shall be subject to that plan's respective,
- 7 separate terms, including, but not limited to, the definitions of
- "final compensation" and provisions establishing cost-of-living 8
- adjustments, establishing minimum retirement age and service
- 10 requirements, and governing integration with federal social security
- 11 payments. Notwithstanding the foregoing, the aggregate service 12 credited under both retirement plans shall be taken into account

  - for the purpose of determining eligibility for and vesting of benefits
- 14 under each plan.

13

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

- (c) Notwithstanding any other provision of Retirement Plan D or Retirement Plan E:
- (1) A member who has transferred to Retirement Plan E pursuant to this section may not retire for disability and receive disability retirement benefits under Retirement Plan D.
- (2) If a member who has transferred to Retirement Plan E pursuant to this section dies prior to retirement, that member's survivor or beneficiary may not receive survivor or death benefits under Retirement Plan D but shall receive a refund of the member's contributions to Retirement Plan D together with all interest credited thereto.
  - (d) As used in this section:
- (1) "Period of active employment" means a period during which the member is actively performing the duties of a full-time or part-time employee position or is on any authorized paid leave of absence, except a leave of absence during which the member is totally disabled and is receiving, or is eligible to receive, disability benefits, either during or after any elimination or qualifying period, under a disability plan provided by the employer.
- (2) "Retirement Plan D" means the contributory retirement plan otherwise available to new members of the system on the transfer date. members of the system between June 1, 1979, and December 31. 2012. inclusive.
- 38 (3) "Retirement Plan E" means the noncontributory retirement 39 plan established under this article.

AB 2376 —4—

(4) "Transfer date" means the first day of the first month that is at least 30 days after the date that the application is filed with the board to change plan membership under subdivision (a).

- (e) This section shall only be applicable to Los Angeles County and shall not become operative until the board of supervisors of that county elects, by resolution adopted by a majority vote, to make this section operative in the county.
- SEC. 2. Section 31494.5 of the Government Code is amended to read:
- 31494.5. (a) A general member whose benefits are governed by Retirement Plan E may, during a period of active employment, elect to change plan membership and become a member, prospectively, in Retirement Plan D. The election shall be made upon written application signed by the member and filed with the board, pursuant to enrollment procedures and during an enrollment period established by the board, which enrollment period shall not occur more frequently than once every three years for that member. The change in plan membership shall be effective as of the transfer date, as defined in subdivision (g). Except as otherwise provided in this section, the rights and obligations of a member who elects to change membership under this section shall be governed by the terms of Retirement Plan D on and after the transfer date. Prior to the transfer date, the rights to retirement, survivors', or other benefits payable to a member and his or her survivors or beneficiaries shall continue to be governed by Retirement Plan E.
- (b) If a member has made the election to change plans under subdivision (a), monthly contributions by the member and the employer under the terms of Retirement Plan D shall commence as of the transfer date. For the purposes of calculating the member's contribution rate under Retirement Plan D, his or her entry age shall be deemed to be his or her age at his or her birthday nearest the transfer date; however, if the member exchanges service credit in accordance with subdivision (c), with regard to contributions made for periods after that exchange, his or her entry age shall be adjusted and deemed to be the member's age at his or her birthday nearest the date on which begins the most recent period of unbroken service credited under Retirement Plan D, taking into account service purchased under subdivision (c). In no event shall the exchange of service under subdivision (c) affect the entry age

\_5\_ AB 2376

with respect to, or the cost of, employee contributions made, or service purchased, prior to the exchange.

(c) (1) A general member who has elected to change plans under subdivision (a) also may elect to exchange, at that time or any time thereafter, but prior to the earlier of his or her application for retirement, termination from employment, or death, some portion designated in whole-month increments, or all of the service credited under Retirement Plan E for an equivalent amount of service credited under Retirement Plan D, provided, however, that the member may not exchange less than 12 months' service or, if less, the total service credited under Retirement Plan E. The exchange shall be effective on the date when the member completes the purchase of that service by depositing in the retirement fund, by lump sum or regular monthly installments, over the period of time determined by a resolution adopted by a majority vote of the board of retirement, or both, but in any event prior to the earlier of his or her death or the date that is 120 days after the effective date of his or her retirement, the sum of: (1) the contributions the member would have made to the retirement fund under Retirement Plan D for that length of time for which the member shall receive credit as service under Retirement Plan D, computed in accordance with the rate of contribution applicable to the member under Retirement Plan D, based upon his or her entry age, and in the same manner prescribed under Retirement Plan D as if that plan had been in effect during the period for which the member shall receive service credit, and (2) the regular interest thereon.

#### -For

1

2

3

4

5

6

7

8

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

39

40

(2) For the purposes of this subdivision, a member's entry age shall be deemed to be the member's age at his or her birthday nearest the date on which begins the most recent period of unbroken service credited under Retirement Plan D following completion of the service exchange under this subdivision. A member may receive credit for a period of service under only one plan and in no event shall a member receive credit for the same period of service under both Retirement Plan D and Retirement Plan E.

#### $\mathbf{A}$

(3) A member who fails to complete the purchase of service as required under this subdivision shall be treated as completing an exchange of service under Retirement Plan E for an equivalent

AB 2376 -6-

1

2

3

4

5

6 7

8

10

11 12

13

14

15

16 17

18

19

20

21 22

23

24

25

26

27

28

29

30

31

32

33

34

35

36 37

38

39

40

amount of service under Retirement Plan D only with regard to the service that actually has been purchased through completed deposit with the retirement fund of the requisite purchase amount, calculated in accordance with this subdivision.

- (d) Except as otherwise provided in this section, effective as of the transfer date, a member who has transferred to Retirement Plan D pursuant to this section and his or her survivors or beneficiaries shall receive retirement, disability, survivors', death, or other benefits that shall consist of: (1) the benefits to which they are entitled under the terms of Retirement Plan D, but based on the member's service credited only under that plan, and payable at the time and in the manner provided under Retirement Plan D, and (2) the benefits to which they would have been entitled under the terms of Retirement Plan E had the member remained a member of Retirement Plan E, but based on the member's service credited only under that plan, and payable at the time and in the manner provided under Retirement Plan E. Except as otherwise provided in this section, the calculation of the portion of a member's or beneficiary's benefit that is attributable to each plan is subject to that plan's respective, separate terms, including, but not limited to, the definitions of "final compensation" and provisions establishing cost-of-living adjustments, establishing minimum age and service requirements, and governing integration with federal social security payments. Notwithstanding the foregoing, the aggregate service credited under both Retirement Plan D and Retirement Plan E shall be taken into account for the purpose of determining eligibility for, and vesting of, benefits under each plan.
- (e) Notwithstanding any other provision of Retirement Plan D or Retirement Plan E, a member who transfers into Retirement Plan D under this section may retire for service-connected or nonservice-connected disability and receive disability benefits under Retirement Plan D only if he or she has either (1) completed two continuous years of active service after his or her most recent transfer date, or (2) earned five years of retirement service credit under Retirement Plan D after his or her most recent transfer date. Notwithstanding any other provision to the contrary, a member who becomes disabled and does not meet either of these conditions (1) may apply for and receive only a deferred or service retirement allowance, or (2) may elect to transfer prospectively back to

\_7\_ AB 2376

Retirement Plan E, and for the purposes of calculating his or her retirement benefits under this section, shall in lieu of credit under Retirement Plan D be credited with service under Retirement Plan E as provided under subdivision (g) of Section 31488 during any period he or she is totally disabled and is receiving, or eligible to receive, disability benefits, either during or after any elimination or qualifying period, under a disability plan provided by the employer up to the earlier of the date he or she retires or no longer qualifies for disability benefits. If a member dies before he or she is eligible to retire and before completing either two continuous years of active service after the transfer date into Retirement Plan D or after earning five years of retirement service credit under Retirement Plan D after that transfer date, that member's beneficiary shall not be entitled to the survivor allowance under Section 31781.1 or 31781.12, if operative.

- (f) Notwithstanding any other provisions of Retirement Plan D or Retirement Plan E, a member who has transferred to Retirement Plan D pursuant to this section and who retires for disability when eligible under this section and Retirement Plan D, may not also retire for service and receive service retirement benefits under Retirement Plan E. However, for the purpose of calculating disability benefits under Retirement Plan D, the "sum to which he or she would be entitled as service retirement" or his or her "service retirement allowance," as those terms are used in Sections 31726, 31726.5, and 31727.4, shall consist of the blended benefit to which the member would be entitled under subdivision (d) if he or she retired for service, not just the service retirement benefit to which he or she would be entitled under Retirement Plan D.
  - (g) As used in this section:

(1) "Active service" means time spent on active, on-the-job performance of the duties of a full-time or part-time position and on any authorized paid leaves of absence; provided, however, that any authorized paid leave of absence or part-time service shall not constitute active service if the leave of absence or part-time service is necessitated by a preexisting disability, injury, or disease. The board of retirement shall determine whether or not a leave of absence or part-time service is necessitated by a preexisting disability, injury, or disease, and thus excluded from the member's active service, based upon evidence presented by the employer and the member upon request by the board.

AB 2376 —8—

(2) "Entry age" means the age used for calculating the normal rate of contribution to Retirement Plan D with respect to a member who has transferred membership to Retirement Plan D under this section.

- (3) "Period of active employment" means a period during which the member is actively performing the duties of a full-time or part-time employee position or is on any authorized paid leave of absence, except a leave of absence during which the member is totally disabled and is receiving, or is eligible to receive, disability benefits, either during or after any elimination or qualifying period, under a disability plan provided by the employer.
- (4) "Retirement Plan D" means the contributory retirement plan otherwise available to new members of the retirement system on the transfer date. members of the system between June 1, 1979, and December 31, 2012, inclusive.
- (5) "Retirement Plan E" means the noncontributory retirement plan established under this article.
- (6) "Transfer date" means the first day of the first month that is at least 30 days after the date that the application is filed with the board to change plan membership under subdivision (a).
- (h) This section shall only be applicable to Los Angeles County and shall not become operative until the board of supervisors of that county elects, by resolution adopted by a majority vote, to make this section operative in the county.
- SEC. 3. Section 31526 of the Government Code is amended to read:
  - 31526. The regulations shall include provisions:
- (a) For the election of officers, their terms, meetings, and all other matters relating to the administrative procedure of the board.
  - (b) For the one of the following:
- (1) The filing of a sworn statement by every person who is or becomes a member, showing date of birth, nature and duration of employment with the county, compensation received, and—such other information as is required by the board.
- (2) In lieu of a sworn statement, the submission by the member's employer to the retirement association of the information otherwise required in paragraph (1), in a form determined by the retirement association.

\_9\_ AB 2376

1 (c) For forms of annuity certificates and for such other forms 2 as are required.

# INSURANCE, BENEFITS & LEGISLATIVE COMMITTEE RETIREE HEALTHCARE BENEFITS PROGRAM STAFF ACTIVITIES REPORT FEBRUARY 2016 FOR INFORMATION ONLY

#### 1095-B Form – Healthcare Coverage

As a background, under the Affordable Care Act (ACA) also known as Obamacare, taxpayers who do not have health insurance coverage must pay a penalty when they file their tax returns. Those who have health insurance that meets the standards of the law and therefore aren't liable for the individual shared responsibility payment, will receive their 1095-B Form directly from their health care insurer. According to the Internal Revenue Service (IRS), minimum essential coverage includes government-sponsored programs, eligible employer-sponsored plans, individual market plans, and other coverage the Department of Health and Human Services designates as minimum essential coverage.

The carriers under the LACERA-administered health plans have confirmed that they will mail out the 1095-B Forms to members confirming their enrollment into the plans. All affected members should receive their 1095-B Forms from our carriers by the March 31, 2016 deadline. Our carriers provided the below schedule of mailing:

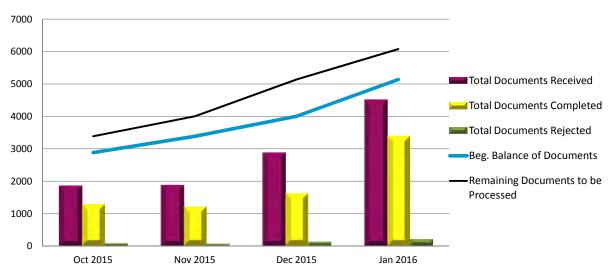
- Anthem Blue Cross Mailing started and Anthem's goal is to have all the forms mailed by the end of February.
- Kaiser Permanente Mailing started in early February.
- United Healthcare Mailing started in February
- Cigna Mailing began January 22 and into January 27

Members enrolled in the LACERA-administered MA PD plans such as Kaiser Senior Advantage, United Healthcare MA, and SCAN will receive their 1095-B forms from Medicare.

CS/Ivi

#### Retiree Healthcare Division Insurance Status Report October 1, 2015 - January 31, 2016

#### RETIREE HEALTHCARE ENROLLMENT SUMMARY (ROLLING 4 MONTHS)



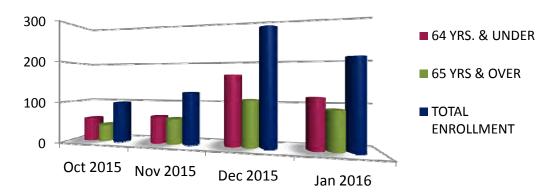
Date	Beg. Balance of Documents	Total Documents Received	Total Documents Completed	Total Documents Rejected	Remaining Documents to be Processed
Oct 2015	2883	1849	1276	67	3389
Nov 2015	3389	1863	1200	50	4002
Dec 2015	4002	2859	1611	110	5140
Jan 2016	5140	4498	3370	190	6078

<sup>\*</sup> Please Note: February's (2/2016) data is not yet available as data is provided on a full month basis.

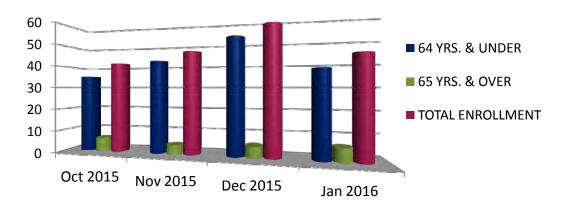
<sup>\* \*</sup>Next Report will include the following dates: November 1, 2015 through February 29, 2016.

### Retirees Monthly Age Breakdown October 1, 2015 - January 31, 2016

Service Retirement								
MONTH	64 YRS. & UNDER	65 YRS & OVER	TOTAL ENROLLMENT					
Oct 2015	56	41	97					
Nov 2015	64	60	124					
Dec 2015	166	108	274					
Jan 2016	115	89	204					



Disability Retirement								
MONTH	64 YRS. & UNDER	65 YRS. & OVER	TOTAL ENROLLMENT					
Oct 2015	35	6	41					
Nov 2015	42	4	46					
Dec 2015	52	5	57					
Jan 2016	38	6	44					



<sup>\*</sup> Please Note: February's (2/2016) data is not yet available as data is provided on a full month basis.

<sup>\* \*</sup>Next Report will include the following dates: November 1, 2015 through February 29, 2016.

#### MEDICARE NO LOCAL 1014 022916.xls

## Medicare Part B Reimbursement and Penalty Report PAY PERIOD 2/29/2016

		PAY PERIOD	2/29/2016	
<b>Deduction Code</b>	No. of Members	Reimbursement Amount	No. of Penalties	Penalty Amount
ANTHEM BC III				7
240	6,134	\$653,832.30	11	\$275.90
241	183	\$18,946.10	1	\$62.90
242	843	\$90,225.60	0	\$0.00
243	3,521	\$745,368.20	6	\$398.70
244	14	\$1,485.50	0	\$0.00
245	41	\$4,175.60	0	\$0.00
246	16	\$1,695.30	0	\$0.00
247	77	\$8,280.10	0	\$0.00
248	10	\$2,114.90	1	\$31.50
249	36	\$7,772.50	0	\$0.00
250	13	\$2,727.40	0	\$0.00
Plan Total:	10,888	\$1,536,623.50	19	\$769.00
CIGNA-HEALTHS	PRING PREFERR	ED with RX		
321	24	\$2,341.60	0	\$0.00
322	8	\$839.20	0	\$0.00
324	15	\$3,163.90	0	\$0.00
327	2	\$209.80	0	\$0.00
329	1	\$209.80	0	\$0.00
Plan Total:	50	\$6,764.30	0	\$0.00
		<del>+ 0,1 0 110 0</del>	Ţ.	<del></del>
KAISER SR. ADV	ANTAGE			
403	9,388	\$1,000,401.80	7	\$308.70
413	1,662	\$178,321.50	0	\$0.00
418	4,647	\$979,142.96	5	\$220.50
419	245	\$26,237.90	0	\$0.00
426	197	\$21,230.00	0	\$0.00
427	166	\$17,145.90	0	\$0.00
445	2	\$209.80	0	\$0.00
451	26	\$2,744.30	0	\$0.00
457	11	\$2,324.70	0	\$0.00
462	53	\$5,576.60	0	\$0.00
465	17	\$1,800.20	0	\$0.00
466	20	\$4,196.00	0	\$0.00
472	30	\$3,163.90	0	\$0.00
476	5	\$575.20	0	\$0.00
478	12	\$2,517.60	0	\$0.00
482	75	\$7,968.90	1	\$12.20
486	10	\$1,065.90	0	\$0.00
488	43	\$9,241.10	0	\$0.00
492	1	\$104.90	0	\$0.00
493	1	\$104.90	0	\$0.00
Plan Total:	16,611	\$2,264,074.06	13	\$541.40

#### MEDICARE NO LOCAL 1014 022916.xls

### Medicare Part B Reimbursement and Penalty Report PAY PERIOD 2/29/2016

2/29/2016 No. of Penalty Reimbursement **Deduction Code** No. of Members Amount **Penalties** Amount SCAN 261 \$0.00 \$27,615.50 0 611 613 \$19,423.40 0 \$0.00 93 Plan Total: 354 \$47,038.90 0 \$0.00 UNITED HEALTHCARE GROUP MEDICARE ADV. HMO 701 1,447 \$153,994.30 1 \$36.50 702 315 0 \$0.00 \$33,035.90 703 771 \$164,047.70 1 \$10.50 704 62 0 \$7,302.20 \$0.00 705 20 \$4,246.70 0 \$0.00 Plan Total: 2,615 \$362,626.80 2 \$47.00 34 **Grand Total:** 30,518 4,217,127.56 \$1,357.40

#### MEDICARE 022916.xls

## Medicare Part B Reimbursement and Penalty Report PAY PERIOD 2/29/2016

	1	PAY PERIOD	2/29/2016	
<b>Deduction Code</b>	No. of Members	Reimbursement	No. of	Penalty
		Amount	Penalties	Amount
ANTHEM BC III				
240	6,134	\$653,832.30	11	\$275.90
241	183	\$18,946.10	1	\$62.90
242	843	\$90,225.60	0	\$0.00
243	3,521	\$745,368.20	6	\$398.70
244	14	\$1,485.50	0	\$0.00
245	41	\$4,175.60	0	\$0.00
246	16	\$1,695.30	0	\$0.00
247	77	\$8,280.10	0	\$0.00
248	10	\$2,114.90	1	\$31.50
249	36	\$7,772.50	0	\$0.00
250	13	\$2,727.40	0	\$0.00
Plan Total:	10,888	\$1,536,623.50	19	\$769.00
CIGNA-HEALTHS	PRING PREFERR	FD with RX		
321	24	\$2,341.60	0	\$0.00
322	8	\$839.20	0	\$0.00
324	15	\$3,163.90	0	\$0.00
327	2	\$209.80		\$0.00
329	1	\$209.80	0	\$0.00
Plan Total:	50	\$6,764.30	0	\$0.00
	00	ψο,ι ο τισο	-	Ψοίου
KAISER SR. ADV	ANTAGE			
403	9,388	\$1,000,401.80	7	\$308.70
413	1,662	\$178,321.50	0	\$0.00
418	4,647	\$979,142.96	5	\$220.50
419	245	\$26,237.90	0	\$0.00
426	197	\$21,230.00	0	\$0.00
427	166	\$17,145.90	0	\$0.00
445	2	\$209.80	0	\$0.00
451	26	\$2,744.30	0	\$0.00
457	11	\$2,324.70	0	\$0.00
462	53	\$5,576.60	0	\$0.00
465	17	\$1,800.20	0	\$0.00
466	20	\$4,196.00	0	\$0.00
472	30	\$3,163.90	0	\$0.00
476	5	\$575.20	0	\$0.00
478	12	\$2,517.60	0	\$0.00
482	75	\$7,968.90	1	\$12.20
486	10	\$1,065.90	0	\$0.00
488	43	\$9,241.10	0	\$0.00
492	1	\$104.90	0	\$0.00
493	1	\$104.90	0	\$0.00
Plan Total:	-			
rian i otal:	16,611	\$2,264,074.06	13	\$541.40

#### MEDICARE 022916.xls

#### Medicare Part B Reimbursement and Penalty Report

**PAY PERIOD** 2/29/2016 No. of Penalty Reimbursement **Deduction Code** No. of Members Amount **Penalties** Amount SCAN \$0.00 261 0 611 \$27,615.50 613 0 93 \$19,423.40 \$0.00 Plan Total: 354 \$47,038.90 0 \$0.00 UNITED HEALTHCARE GROUP MEDICARE ADV. HMO 701 1,447 \$153,994.30 1 \$36.50 702 315 0 \$33,035.90 \$0.00 \$164,047.70 703 771 1 \$10.50 704 62 \$7,302.20 0 \$0.00 705 20 \$4,246.70 0 \$0.00 Plan Total: 2,615 \$362,626.80 2 \$47.00 **LOCAL 1014** 0 804 159 \$19,629.50 \$0.00 805 170 \$19,365.90 0 \$0.00 806 555 0 \$124,107.60 \$0.00 807 36 0 \$0.00 \$4,603.10 808 10 \$2,409.20 0 \$0.00 812 205 \$22,494.30 0 \$0.00 Plan Total: 1,135 0 \$192,609.60 \$0.00 **Grand Total:** 31,653 \$4,409,737.16 34 \$1,357.40

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
<u>ledical Plan</u>							
Anthem Blue Cross I	Prudent Buy	er Plan					
201	768	\$648,303.06	\$111,498.02	\$539,447.92	\$650,945.94	(\$6,726.88)	\$644,219.06
202	428	\$713,658.42	\$75,406.03	\$623,350.01	\$698,756.04	(\$1,655.82)	\$697,100.22
203	112	\$209,313.44	\$49,674.41	\$154,032.42	\$203,706.83	\$0.00	\$203,706.83
204	35	\$38,921.40	\$13,535.89	\$22,139.06	\$35,674.95	\$0.00	\$35,674.95
205	1	\$228.33	\$9.13	\$219.20	\$228.33	\$0.00	\$228.33
SUBTOTAL	1,344	\$1,610,424.65	\$250,123.48	\$1,339,188.61	\$1,589,312.09	(\$8,382.70)	\$1,580,929.39
Anthem Blue Cross I							
211	989	\$1,052,162.10	\$74,777.52	\$988,221.21	\$1,062,998.73	(\$3,044.04)	\$1,059,954.69
212	361	\$699,650.25	\$38,298.57	\$637,912.88	\$676,211.45	(\$3,833.70)	\$672,377.75
213	49	\$110,801.74	\$15,331.31	\$93,209.17	\$108,540.48	\$0.00	\$108,540.48
214	18	\$25,316.64	\$5,766.56	\$19,550.08	\$25,316.64	\$0.00	\$25,316.64
215	3	\$1,054.53	\$386.66	\$667.87	\$1,054.53	\$351.51	\$1,406.04
SUBTOTAL	1,420	\$1,888,985.26	\$134,560.62	\$1,739,561.21	\$1,874,121.83	(\$6,526.23)	\$1,867,595.60
Anthem Blue Cross I	l						
221	2,116	\$2,250,989.22	\$139,777.55	\$2,121,839.57	\$2,261,617.12	(\$5,169.62)	\$2,256,447.50
222	1,931	\$3,714,855.30	\$103,126.40	\$3,546,328.13	\$3,649,454.53	(\$1,916.85)	\$3,647,537.68
223	517	\$1,169,071.42	\$47,083.56	\$1,103,897.78	\$1,150,981.34	\$0.00	\$1,150,981.34
224	109	\$153,306.32	\$14,402.36	\$141,716.92	\$156,119.28	\$1,406.48	\$157,525.76
225	2	\$703.02	\$175.75	\$527.27	\$703.02	\$0.00	\$703.02
SUBTOTAL	4,675	\$7,288,925.28	\$304,565.62	\$6,914,309.67	\$7,218,875.29	(\$5,679.99)	\$7,213,195.30

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Anthem Blue Cros	s III						
240	6,153	\$2,638,648.50	\$427,393.54	\$2,226,479.17	\$2,653,872.71	(\$7,971.87)	\$2,645,900.84
241	182	\$251,180.31	\$30,992.52	\$214,697.51	\$245,690.03	\$0.00	\$245,690.03
242	850	\$1,172,174.78	\$75,546.11	\$1,083,447.25	\$1,158,993.36	(\$2,745.14)	\$1,156,248.22
243	3,526	\$3,024,509.74	\$359,013.24	\$2,627,501.94	\$2,986,515.18	(\$10,249.68)	\$2,976,265.50
244	14	\$10,756.62	\$2,304.98	\$8,451.64	\$10,756.62	\$0.00	\$10,756.62
245	40	\$31,501.53	\$3,718.71	\$26,246.16	\$29,964.87	\$0.00	\$29,964.87
246	16	\$27,393.60	\$3,184.50	\$24,209.10	\$27,393.60	\$0.00	\$27,393.60
247	79	\$135,255.90	\$8,731.72	\$124,812.08	\$133,543.80	\$0.00	\$133,543.80
248	10	\$11,935.90	\$1,909.74	\$10,026.16	\$11,935.90	\$0.00	\$11,935.90
249	36	\$42,969.24	\$4,869.84	\$38,099.40	\$42,969.24	\$0.00	\$42,969.24
250	13	\$17,391.01	\$749.15	\$16,641.86	\$17,391.01	\$0.00	\$17,391.01
SUBTOTAL	10,919	\$7,363,717.13	\$918,414.05	\$6,400,612.27	\$7,319,026.32	(\$20,966.69)	\$7,298,059.63
CIGNA Network Mo	odel Plan						
301	386	\$493,535.74	\$104,433.46	\$391,659.46	\$496,092.92	(\$3,835.77)	\$492,257.15
302	181	\$417,950.72	\$79,933.39	\$338,017.33	\$417,950.72	\$0.00	\$417,950.72
303	26	\$70,879.90	\$19,355.75	\$48,798.00	\$68,153.75	\$0.00	\$68,153.75
304	21	\$35,656.74	\$12,252.91	\$23,403.83	\$35,656.74	\$0.00	\$35,656.74
SUBTOTAL	614	\$1,018,023.10	\$215,975.51	\$801,878.62	\$1,017,854.13	(\$3,835.77)	\$1,014,018.36

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
IGNA Healthspring	g Pref w/ Rx - P	hoenix, AZ					
321	23	\$8,037.60	\$1,473.57	\$5,894.23	\$7,367.80	\$0.00	\$7,367.80
322	8	\$10,918.00	\$982.62	\$9,935.38	\$10,918.00	\$0.00	\$10,918.00
324	15	\$9,972.00	\$1,316.31	\$8,655.69	\$9,972.00	\$0.00	\$9,972.00
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	\$33,626.32	\$3,772.50	\$29,184.02	\$32,956.52	\$0.00	\$32,956.52

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser/Senior Advantage							
401	1,735	\$1,516,230.50	\$132,872.12	\$1,363,830.00	\$1,496,702.12	\$0.00	\$1,496,702.12
403	9,461	\$2,269,970.40	\$253,425.43	\$2,030,870.47	\$2,284,295.90	(\$11,507.04)	\$2,272,788.86
404	477	\$470,533.44	\$16,463.94	\$440,506.23	\$456,970.17	(\$1,673.20)	\$455,296.97
405	874	\$781,551.70	\$20,526.84	\$773,292.69	\$793,819.53	\$0.00	\$793,819.53
406	63	\$109,560.92	\$34,419.44	\$56,115.32	\$90,534.76	\$0.00	\$90,534.76
411	1,791	\$3,117,307.20	\$161,947.64	\$2,910,137.38	\$3,072,085.02	\$3,465.60	\$3,075,550.62
413	1,675	\$1,858,294.00	\$86,448.19	\$1,758,843.41	\$1,845,291.60	\$0.00	\$1,845,291.60
414	149	\$276,321.00	\$3,979.05	\$266,815.53	\$270,794.58	(\$1,842.14)	\$268,952.44
418	4,636	\$2,208,349.40	\$183,507.31	\$2,010,295.49	\$2,193,802.80	(\$2,326.08)	\$2,191,476.72
419	247	\$303,210.00	\$7,422.58	\$295,615.68	\$303,038.26	\$0.00	\$303,038.26
420	125	\$243,935.00	\$1,561.20	\$244,325.28	\$245,886.48	\$0.00	\$245,886.48
421	5	\$4,344.50	\$903.67	\$3,440.83	\$4,344.50	\$0.00	\$4,344.50
422	203	\$359,580.25	\$2,104.85	\$367,874.81	\$369,979.66	\$0.00	\$369,979.66
423	25	\$69,302.52	\$6,327.37	\$39,532.99	\$45,860.36	\$0.00	\$45,860.36
426	196	\$227,199.50	\$3,599.19	\$225,119.14	\$228,718.33	(\$1,124.75)	\$227,593.58
427	166	\$315,630.09	\$2,601.84	\$287,393.95	\$289,995.79	(\$3,691.58)	\$286,304.21
428	44	\$81,989.16	\$1,788.86	\$79,173.42	\$80,962.28	\$0.00	\$80,962.28
429	11	\$28,428.73	\$3,554.87	\$24,873.86	\$28,428.73	(\$2,584.43)	\$25,844.30
430	131	\$232,564.30	\$3,089.02	\$229,475.28	\$232,564.30	\$0.00	\$232,564.30
431	11	\$27,459.74	\$2,585.88	\$24,873.86	\$27,459.74	\$0.00	\$27,459.74
432	11	\$38,608.56	\$9,561.20	\$22,612.60	\$32,173.80	\$0.00	\$32,173.80
SUBTOTAL	22,036	\$14,540,370.91	\$938,690.49	\$13,455,018.22	\$14,393,708.71	(\$21,283.62)	\$14,372,425.09

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	\$8,844.16	\$993.29	\$7,850.87	\$8,844.16	\$0.00	\$8,844.16
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	11	\$7,428.52	\$1,296.61	\$6,131.91	\$7,428.52	\$0.00	\$7,428.52
SUBTOTAL	46	\$30,491.92	\$5,158.51	\$25,333.41	\$30,491.92	\$0.00	\$30,491.92
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	54	\$20,854.80	\$3,313.60	\$17,541.20	\$20,854.80	(\$386.20)	\$20,468.60
463	6	\$12,096.90	\$1,554.22	\$10,542.68	\$12,096.90	\$0.00	\$12,096.90
465	17	\$23,660.26	\$2,226.85	\$21,433.41	\$23,660.26	\$0.00	\$23,660.26
466	20	\$15,348.00	\$859.49	\$14,488.51	\$15,348.00	\$0.00	\$15,348.00
SUBTOTAL	123	\$98,997.44	\$10,399.77	\$87,587.09	\$97,986.86	(\$386.20)	\$97,600.66

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
Kaiser - Hawaii							
471	7	\$6,773.48	\$1,432.11	\$5,341.37	\$6,773.48	\$0.00	\$6,773.48
472	30	\$10,591.20	\$1,878.17	\$8,713.03	\$10,591.20	\$0.00	\$10,591.20
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	59	\$39,898.70	\$7,812.88	\$32,085.82	\$39,898.70	\$0.00	\$39,898.70
Kaiser - Oregon							
481	8	\$8,666.64	\$1,949.80	\$6,716.84	\$8,666.64	\$0.00	\$8,666.64
482	75	\$33,585.00	\$4,451.12	\$29,133.88	\$33,585.00	\$0.00	\$33,585.00
484	4	\$8,646.64	\$887.78	\$5,597.20	\$6,484.98	\$0.00	\$6,484.98
486	10	\$15,261.30	\$1,098.81	\$14,162.49	\$15,261.30	\$0.00	\$15,261.30
488	43	\$38,295.80	\$5,628.61	\$32,667.19	\$38,295.80	\$0.00	\$38,295.80
489	1	\$976.66	\$0.00	\$976.66	\$976.66	\$0.00	\$976.66
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	2	\$4,556.68	\$722.98	\$3,833.70	\$4,556.68	\$0.00	\$4,556.68
497	1	\$2,054.99	\$138.14	\$1,916.85	\$2,054.99	\$0.00	\$2,054.99
SUBTOTAL	146	\$116,232.64	\$15,537.33	\$98,533.65	\$114,070.98	\$0.00	\$114,070.98
SCAN Health Plan							
611	262	\$89,683.00	\$18,980.06	\$71,043.94	\$90,024.00	\$0.00	\$90,024.00
613	93	\$62,961.00	\$12,700.52	\$50,260.48	\$62,961.00	\$0.00	\$62,961.00
SUBTOTAL	355	\$152,644.00	\$31,680.58	\$121,304.42	\$152,985.00	\$0.00	\$152,985.00

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
UHC Medicare Adv.							
701	1,450	\$456,730.48	\$58,331.40	\$404,038.52	\$462,369.92	(\$628.24)	\$461,741.68
702	314	\$397,935.66	\$23,050.11	\$362,371.85	\$385,421.96	\$0.00	\$385,421.96
703	771	\$481,764.52	\$54,546.45	\$424,754.55	\$479,301.00	\$623.24	\$479,924.24
704	64	\$90,421.12	\$4,944.92	\$91,127.52	\$96,072.44	\$0.00	\$96,072.44
705	20	\$15,694.00	\$973.02	\$14,720.98	\$15,694.00	\$0.00	\$15,694.00
SUBTOTAL	2,619	\$1,442,545.78	\$141,845.90	\$1,297,013.42	\$1,438,859.32	(\$5.00)	\$1,438,854.32
United Healthcare							
707	417	\$395,745.00	\$45,906.30	\$349,838.70	\$395,745.00	\$0.00	\$395,745.00
708	341	\$588,667.50	\$27,195.71	\$559,750.54	\$586,946.25	\$5,163.75	\$592,110.00
709	220	\$451,052.16	\$36,778.13	\$406,110.19	\$442,888.32	\$0.00	\$442,888.32
SUBTOTAL	978	\$1,435,464.66	\$109,880.14	\$1,315,699.43	\$1,425,579.57	\$5,163.75	\$1,430,743.32

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
ocal 1014 Firefighters							
801	39	\$38,574.51	\$1,780.36	\$36,794.15	\$38,574.51	\$0.00	\$38,574.51
802	255	\$454,769.55	\$11,699.15	\$443,070.40	\$454,769.55	\$1,783.41	\$456,552.96
803	207	\$435,463.83	\$13,968.49	\$425,702.72	\$439,671.21	(\$2,103.69)	\$437,567.52
804	159	\$157,265.31	\$9,079.80	\$148,185.51	\$157,265.31	(\$19,629.50)	\$137,635.81
805	170	\$303,179.70	\$7,668.65	\$295,511.05	\$303,179.70	(\$19,365.90)	\$283,813.80
806	555	\$989,792.55	\$39,270.61	\$950,521.94	\$989,792.55	(\$129,101.15)	\$860,691.40
807	36	\$75,732.84	\$1,598.80	\$74,134.04	\$75,732.84	(\$4,603.10)	\$71,129.74
808	10	\$21,036.90	\$168.30	\$20,868.60	\$21,036.90	(\$2,409.20)	\$18,627.70
809	23	\$22,749.07	\$2,532.07	\$20,217.00	\$22,749.07	\$0.00	\$22,749.07
810	4	\$7,133.64	\$1,462.39	\$5,671.25	\$7,133.64	\$0.00	\$7,133.64
811	5	\$10,518.45	\$0.00	\$10,518.45	\$10,518.45	\$0.00	\$10,518.45
812	205	\$202,763.45	\$19,524.52	\$186,206.20	\$205,730.72	(\$24,472.48)	\$181,258.24
SUBTOTAL	1,668	\$2,718,979.80	\$108,753.14	\$2,617,401.31	\$2,726,154.45	(\$199,901.61)	\$2,526,252.84
dical Plan Total	47,051	\$39,779,327.59	\$3,197,170.52	\$36,274,711.17	\$39,471,881.69	(\$261,804.06)	\$39,210,077.63

Carrier Codes	Member Count	Premium Amount	Member Amount	County Subsidy Amount	Total	Adjustments	Total Paid
ental/Vision Plan							
<b>CIGNA Indemnity Dental</b>	l/Vision						
501	22,260	\$1,037,678.43	\$124,930.69	\$920,584.64	\$1,045,515.33	(\$3,774.39)	\$1,041,740.94
502	20,413	\$2,040,590.80	\$165,548.31	\$1,864,072.26	\$2,029,620.57	(\$2,241.33)	\$2,027,379.24
503	7	\$405.30	\$88.02	\$317.28	\$405.30	\$0.00	\$405.30
SUBTOTAL	42,680	\$3,078,674.53	\$290,567.02	\$2,784,974.18	\$3,075,541.20	(\$6,015.72)	\$3,069,525.48
CIGNA Dental HMO/Vision	on						
901	3,170	\$133,869.10	\$18,353.87	\$116,065.31	\$134,419.18	(\$128.12)	\$134,291.06
902	2,195	\$196,413.28	\$18,728.02	\$177,769.78	\$196,497.80	\$178.72	\$196,676.52
903	4	\$171.20	\$49.65	\$121.55	\$171.20	\$42.80	\$214.00
SUBTOTAL	5,369	\$330,453.58	\$37,131.54	\$293,956.64	\$331,088.18	\$93.40	\$331,181.58
Dental/Vision Plan Total	48,049	\$3,409,128.11	\$327,698.56	\$3,078,930.82	\$3,406,629.38	(\$5,922.32)	\$3,400,707.06
RAND TOTALS	95,100	\$43,188,455.70	\$3,524,869.08	\$39,353,641.99	\$42,878,511.07	(\$267,726.38)	\$42,610,784.69

CARRIER DEDUCTION

PREMIUMS\* CODES DEDUCTION CODE DEFINITIONS

# **Anthem Blue Cross Prudent Buyer Plan**

\$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

# **Anthem Blue Cross Plan I**

\$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

### **Anthem Blue Cross Plan II**

\$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

# **Anthem Blue Cross Plan III**

\$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)

<sup>\*</sup>Benchmark premiums are bolded.

#### **DEDUCTION CODE DEFINITIONS**

### **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

#### <u>Kaiser</u>

\$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.

#### **DEDUCTION CODE DEFINITIONS**

Kaiser (continued	)				
N/A	424	Retiree and Family (One family member is "Supplement'; others are "Excess II")			
N/A	425	Retiree and Family (One family member is "Supplement"; others are "Excess III")			
\$1,026.03	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")			
Kaiser Colorado					
\$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")			
Kaiser Georgia					
\$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")			

<sup>\*</sup>Benchmark premiums are bolded.

#### **DEDUCTION CODE DEFINITIONS**

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)			

<sup>\*</sup>Benchmark premiums are bolded.

	CARRIER
	DEDUCTION
PREMILIMS*	CODES

#### **DEDUCTION CODE DEFINITIONS**

#### **Kaiser Oregon (continued)**

\$1,571.76

\$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)

Retiree and Family (One family member is "Senior Advantage"; one is over age 65 with Medicare Par A only)

#### **Kaiser Rate Category Definitions**

"Basic" - includes those who are under age 65

491

#### **Medicare Cost ("Supplement")**

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

#### "Senior Advantage"

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

#### "Excess I"

-Is for participants who have Medicare Part A only.

#### "Excess II"

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

#### "Excess III"

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

#### \*Benchmark premiums are bolded.

	CARRIER
	<b>DEDUCTION</b>
PREMIUMS*	CODES

#### **DEDUCTION CODE DEFINITIONS**

#### **SCAN Health Plan**

\$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.)

# **United Healthcare Medicare Advantage (UHCMA)**

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

701	Retiree Only with Secure Horizons
702	Retiree and 1 Dependent - One with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic
	Partner OR Retiree and 1 Child)
703	Retiree and 1 Dependent - Both with Secure Horizons (Retiree and 1 Dependent = Retiree and Spouse/Domestic
	Partner OR Retiree and 1 Child)
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)
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)
706	Survivor Children Only Rates
	702 703 704 705

### **United Healthcare (UHC)**

(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

### **Local 1014 Firefighters**

\$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.

DEDUCTION CODE DEFINITIONS

# **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**

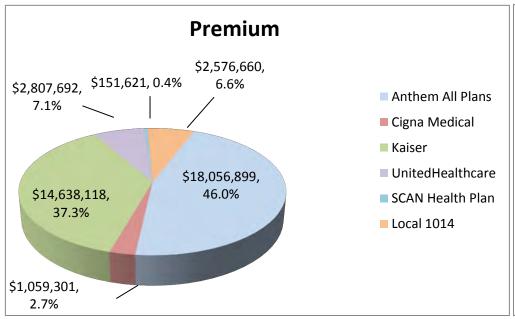
\$39.02	901	Retiree Only
\$81.07	902	Retiree and Dependent(s)
\$39.56	903	Survivor Children Only Rates

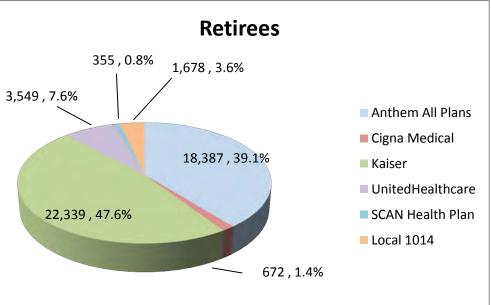


Premium and Enrollment
January 2016 Coverage Month

Carrier / Plan	Monthly Premium	Percent of Total	Retirees	Percent of Total
Anthem All Plans	\$18,056,899	46.0%	18,387	39.1%
Cigna Medical	\$1,059,301	2.7%	672	1.4%
Kaiser	\$14,638,118	37.3%	22,339	47.6%
UnitedHealthcare	\$2,807,692	7.1%	3,549	7.6%
SCAN Health Plan	\$151,621	0.4%	355	0.8%
Local 1014	\$2,576,660	6.6%	1,678	3.6%
Combined Medical	\$39,290,291	100.0%	46,980	100.0%

Cigna Dental & Vision	\$3,398,568	47,939
e.g.i.a Deiitai a violeii	40,000,000	17,505





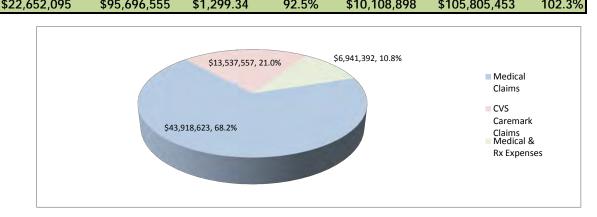


Anthem Plans I and II

Plan Year July 1, 2015 - June 30, 2016

						Claims Per			Total Paid	
	Monthly	Monthly	Medical	CVS Caremark	Medical & Rx	Retiree Per	Paid Loss	Medical & Rx	Claims &	Expense
Month	Enrollment	Premium	Claims	Claims	Claims	Month	Ratio	Expenses	Expenses	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	6,128	\$9,169,945	\$6,330,776	\$2,035,800	\$8,366,576	\$1,365.30	91.2%	\$991,837	\$9,358,413	102.1%
Nov-15	6,115	\$9,119,484	\$5,278,304	\$1,825,634	\$7,103,938	\$1,161.72	77.9%	\$989,661	\$8,093,599	88.8%
Dec-15	6,108	\$9,128,572	\$6,385,606	\$1,865,532	\$8,251,138	\$1,350.87	90.4%	\$988,490	\$9,239,628	101.2%
Jan-16	6,103	\$9,117,643	\$7,139,839	\$1,987,884	\$9,127,723	\$1,495.61	100.1%	\$987,711	\$10,115,434	110.9%
Feb-16										
Mar-16										
Apr-16										
May-16										
Jun-16										
YTD Plan Year	42,886	\$63,992,158	\$43,918,623	\$13,537,557	\$57,456,180	\$1,339.74	89.8%	\$6,941,392	\$64,397,572	100.6%
7 Month Average	6,127	\$9,141,737	\$6,274,089	\$1,933,937	\$8,208,026	\$1,339.74	89.8%	\$991,627	\$9,199,653	100.6%
12 Month Rollup	73,650	\$103,421,111	\$73,044,460	\$22,652,095	\$95,696,555	\$1,299.34	92.5%	\$10,108,898	\$105,805,453	102.3%

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





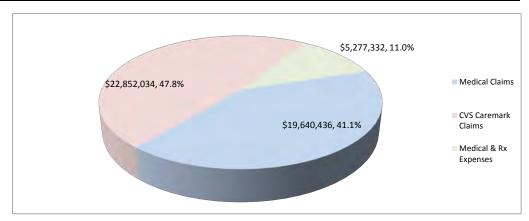
Anthem Plan III Plan Year July 1, 2015 - June 30, 2016

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	10,853	\$7,266,152	\$2,695,565	\$3,181,587	\$5,877,152	\$541.52	80.9%	\$754,063	\$6,631,216	91.3%
Nov-15	10,885	\$7,297,436	\$2,730,333	\$3,159,912	\$5,890,245	\$541.13	80.7%	\$756,287	\$6,646,532	91.1%
Dec-15	10,885	\$7,265,650	\$2,828,255	\$3,287,954	\$6,116,209	\$561.89	84.2%	\$756,287	\$6,872,495	94.6%
Jan-16	10,916	\$7,317,893	\$3,047,641	\$3,306,747	\$6,354,388	\$582.12	86.8%	\$758,441	\$7,112,828	97.2%
Feb-16										
Mar-16										
Apr-16										
May-16										

YTD Plan Year	75,955	\$50,911,614	\$19,640,436	\$22,852,034	\$42,492,470	\$559.44	83.5%	\$5,277,332	\$47,769,802	93.8%
7 Month Average	10,851	\$7,273,088	\$2,805,777	\$3,264,576	\$6,070,353	\$559.44	83.5%	\$753,905	\$6,824,257	93.8%
12 Month Rollup	129,383	\$81,958,348	\$34,633,328	\$38,338,558	\$72,971,885	\$564.00	89.0%	\$8,493,780	\$81,465,665	99.4%

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

Jun-16





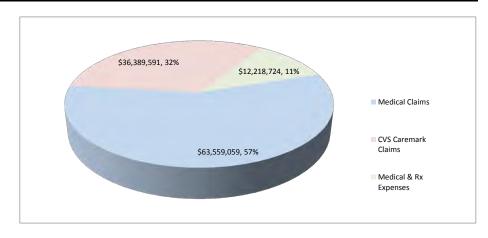
Anthem Plan I, II, and III

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	16,981	\$16,436,097	\$9,026,342	\$5,217,387	\$14,243,729	\$838.80	86.7%	\$1,745,900	\$15,989,629	97.3%
Nov-15	17,000	\$16,416,920	\$8,008,636	\$4,985,547	\$12,994,183	\$764.36	79.2%	\$1,745,948	\$14,740,131	89.8%
Dec-15	16,993	\$16,394,222	\$9,213,861	\$5,153,485	\$14,367,346	\$845.49	87.6%	\$1,744,777	\$16,112,123	98.3%
Jan-16	17,019	\$16,435,536	\$10,187,480	\$5,294,631	\$15,482,111	\$909.70	94.2%	\$1,746,151	\$17,228,262	104.8%
Feb-16										
Mar-16										
Apr-16										
May-16										
Jun-16										

YTD Plan Year	118,841	\$114,903,772	\$63,559,059	\$36,389,591	\$99,948,650	\$841.03	87.0%	\$12,218,724	\$112,167,373	97.6%
7 Month Average	16,977	\$16,414,825	\$9,079,866	\$5,198,513	\$14,278,379	\$841.03	87.0%	\$1,745,532	\$16,023,910	97.6%
12 Month Rollup	203,033	\$185,379,458	\$107,677,788	\$60,990,653	\$168,668,441	\$830.74	91.0%	\$18,602,678	\$187,271,118	101.0%

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





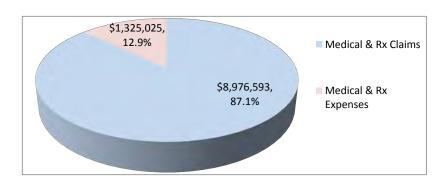
Anthem Prudent Buyer

Plan Year July 1, 2015 - June 30, 2014

	., .,			61 1 5				
				Claims Per			Total Paid	
	Monthly	Monthly	Medical & Rx	Retiree Per	Paid Loss	Medical & Rx	Claims &	Expense
Month	Enrollment	Premium	Claims	Month	Ratio	Expenses	Expenses	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	1,403	\$1,650,974	\$1,390,133	\$990.83	84.2%	\$189,001	\$1,579,133	95.6%
Nov-15	1,395	\$1,644,613	\$1,200,740	\$860.75	73.0%	\$187,923	\$1,388,662	84.4%
Dec-15	1,385	\$1,637,330	\$1,365,728	\$986.09	83.4%	\$186,576	\$1,552,304	94.8%
Jan-16	1,368	\$1,621,362	\$1,045,999	\$764.62	64.5%	\$184,286	\$1,230,285	75.9%
Feb-16								
Mar-16								
Apr-16								
May-16								
Jun-16								

YTD Plan Year	9,836	\$11,598,091	\$8,976,593	\$912.63	77.4%	\$1,325,025	\$10,301,619	88.8%
7 Month Average	1,405	\$1,656,870	\$1,282,370	\$912.63	77.4%	\$189,289	\$1,471,660	88.8%
12 Month Rollup	17,132	\$18,408,395	\$15,301,261	\$893.14	83.1%	\$2,295,825	\$17,597,086	95.6%

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





Cigna HMO

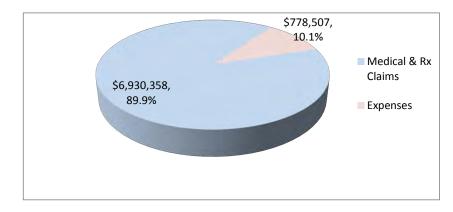
Plan Year July 1, 2015 - June 30, 2016

ran raar a.	<i>)</i> .,	34.7.6 66, 2		Claims Per			Total Paid	
Month	Monthly Enrollment	Monthly Premium	Medical & Rx Claims	Retiree Per Month	Paid Loss Ratio	Expenses	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	637	\$1,051,998	\$997,434	\$1,565.83	94.8%	\$111,515	\$1,108,949	105.4%
Nov-15	633	\$1,044,271	\$1,097,762	\$1,734.22	105.1%	\$110,696	\$1,208,458	115.7%
Dec-15	630	\$1,037,369	\$1,067,015	\$1,693.67	102.9%	\$109,965	\$1,176,980	113.5%
Jan-16	623	\$1,022,580	\$1,123,269	\$1,803.00	109.8%	\$108,397	\$1,231,666	120.4%
Feb-16								
Mar-16								
Apr-16								
May-16								
Jun-16								

YTD Plan Year	4,467	\$7,344,171	\$6,930,358	\$1,551.46	94.4%	\$778,507	\$7,708,865	105.0%
7 Month Average	638	\$1,049,167	\$990,051	\$1,551.46	94.4%	\$111,215	\$1,101,266	105.0%
12 Month Rollup	7,852	\$12,740,577	\$11,872,387	\$1,512.02	93.2%	\$1,635,011	\$13,507,398	106.0%

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



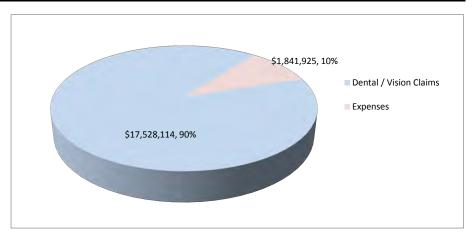


Cigna Dental PPO and Vision Plan Year July 1, 2015 - June 30, 2016

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	
Sep-15	42,370	\$3,054,892	\$2,341,973	58.5%	\$55.27	76.7%	\$263,053	\$2,605,026	
Oct-15	42,428	\$3,054,818	\$2,805,842	57.9%	\$66.13	91.8%	\$263,046	\$3,068,888	
Nov-15	42,492	\$3,060,671	\$2,204,045	58.8%	\$51.87	72.0%	\$263,550	\$2,467,595	80.6%
Dec-15	42,534	\$3,063,692	\$2,514,858	56.2%	\$59.13	82.1%	\$263,810	\$2,778,668	90.7%
Jan-16	42,585	\$3,067,278	\$2,741,522	55.5%	\$64.38	89.4%	\$264,119	\$3,005,641	98.0%
Feb-16									
Mar-16									
Apr-16									
May-16									
Jun-16									

YTD Plan Year	296,899	\$21,390,722	\$17,528,114	55.8%	\$59.04	81.9%	\$1,841,925	\$19,370,040	90.6%
7 Month Average	42,414	\$3,055,817	\$2,504,016	55.8%	\$59.04	81.9%	\$263,132	\$2,767,149	90.6%
12 Month Rollup	506,056	\$36,422,076	\$32,214,829	51.4%	\$63.66	88.4%	\$3,170,455	\$35,385,284	97.2%

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





**February 8, 2016** 

### Legislative

#### President Obama to Release 2017 Budget

President Obama is expected to release his budget for fiscal year 2017 on February 9, 2016.

#### **Health Care**

# IRS Issues Guidance on the Application of the Market Reforms and Other Provisions of the Affordable Care Act to Student Health Coverage

On February 5, 2016, the Internal Revenue Service (IRS) released Notice 2016-17, which provides colleges and universities with temporary transition relief to address compliance with certain group market reform provisions of the Affordable Care Act. (The information in the notice was issued in substantially identical form by the Departments of Labor [DOL] and Health and Human Services [HHS] as separate guidance the same day in Technical Release 2016-01.) The Treasury Department, IRS, DOL, and HHS will not assert that a premium reduction arrangement fails to satisfy certain group market reform provisions of the Affordable Care Act if the arrangement is offered in connection with other student health coverage (insured or self-insured) for a plan year or policy year beginning before January 1, 2017.

IRS Notice 2016-17 is available here.

Technical Release 2016-01 is available here.

# Other HR-Related Topics

#### **EEOC Releases Proposed Changes to EEO-1 Report**

On January 29, 2016, the Equal Employment Opportunity Commission (EEOC) made public a proposed revision to the Employer Information Report (EEO-1) to include collecting pay data from employers, including federal contractors, with more than 100 employees. This new data will assist the EEOC in identifying possible pay discrimination and assist employers in promoting equal pay in their workplaces. EEO-1 data provides the federal government with workforce profiles from private sector employers by race, ethnicity, sex, and job category. This proposal would add aggregate data on pay ranges and hours worked to the information collected, beginning with the September 2017 report. Comments on the proposed changes are due by April 1, 2016.

The EEOC news release is available <u>here</u>.

The Federal Register posting, which includes the proposed changes, is available here.

The EEOC resource page (which includes a fact sheet for small employers, questions and answers, and the proposed EEO-1 form), is available here.