



Benefits Administration Committee Agenda

REGULAR MEETING

TUESDAY, JUNE 9, 2020

TIME: 9:00 A.M.

MEETING LOCATION:

In conformity with the Governor's Executive Order N-29-20 (March 17, 2020) and due to the concerns over COVID-19, the LACERS Benefits Administration Committee's June 9, 2020, meeting will be conducted via telephone and/or videoconferencing.

Important Message to the Public

Information to call-in to participate:

Dial: (669) 900-6833 or (253) 215-8782

Meeting ID# 918 8647 4424

Instructions for call-in participants:

- 1- Dial in and enter Meeting ID
- 2- Automatically enter virtual "Waiting Room"
- 3- Automatically enter Meeting
- 4- During Public Comment, **press *9** to raise hand
- 5- Staff will call out the last 3-digits of your phone number to make your comment

Information to listen only: Live Committee Meetings can be heard at: (213) 621-CITY (Metro), (818) 904-9450 (Valley), (310) 471-CITY (Westside), and (310) 547-CITY (San Pedro Area).

Chair: Michael R. Wilkinson

Committee Members: Sandra Lee
Nilza R. Serrano

Manager-Secretary: Neil M. Guglielmo

Executive Assistant: Ani Ghoukassian

Legal Counselor: City Attorney's Office
Public Pensions General
Counsel Division

Notice to Paid Representatives

If you are compensated to monitor, attend, or speak at this meeting, City law may require you to register as a lobbyist and report your activity. See Los Angeles Municipal Code §§ 48.01 *et seq.* More information is available at ethics.lacity.org/lobbying. For assistance, please contact the Ethics Commission at (213) 978-1960 or ethics.commission@lacity.org.

Request for services

As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and, upon request, will provide reasonable accommodation to ensure equal access to its programs, services and activities.

Sign Language Interpreters, Communication Access Real-Time Transcription, Assistive Listening Devices, Telecommunication Relay Services (TRS), or other auxiliary aids and/or services may be provided upon request. To ensure availability, you are advised to make your request at least 72 hours prior to the meeting you wish to attend. Due to difficulties in securing Sign Language Interpreters, five or more business days' notice is strongly recommended. For additional information, please contact: Board of Administration Office at **(213) 855-9348** and/or email at ani.ghoukassian@lacers.org.

Disclaimer to participants

Please be advised that all LACERS Board and Committee Meeting proceedings are audio recorded.

[CLICK HERE TO ACCESS BOARD REPORTS](#)

- I. PUBLIC COMMENTS AND GENERAL PUBLIC COMMENTS ON MATTERS WITHIN THE COMMITTEE'S JURISDICTION AND COMMENTS ON ANY SPECIFIC MATTERS ON THE AGENDA – ***THIS WILL BE THE ONLY OPPORTUNITY FOR PUBLIC COMMENT - PRESS *9 TO RAISE HAND DURING PUBLIC COMMENT PERIOD***

- II. [APPROVAL OF MINUTES FOR THE REGULAR MEETING OF JANUARY 28, 2020 AND POSSIBLE COMMITTEE ACTION](#)
- III. [RECEIVE AND FILE - 2021 HEALTH PLAN CONTRACT RENEWAL UPDATE](#)
- IV. [RECEIVE AND FILE - HEALTH PLAN FINANCIAL AND HEALTH MANAGEMENT DASHBOARDS](#)
- V. VERBAL REPORT - INTRODUCTION OF STEPHANIE SMITH, WELLNESS PROGRAM MANAGER
- VI. OPERATIONAL UPDATE
- VII. OTHER BUSINESS
- VIII. NEXT MEETING: The next Benefits Administration Committee meeting is not scheduled at this time, and will be announced upon scheduling. Please continue to view the LACERS website for updated information on public access to Board/Committee meetings while public health concerns relating to the novel coronavirus continue.
- IX. ADJOURNMENT



Board of Administration Agenda

SPECIAL MEETING

TUESDAY, JUNE 9, 2020

TIME: 9:00 A.M.

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President: Cynthia M. Ruiz
Vice President: Michael R. Wilkinson

Commissioners: Annie Chao
Elizabeth Lee
Sandra Lee
Nilza R. Serrano
Sung Won Sohn

Manager-Secretary: Neil M. Guglielmo

Executive Assistant: Ani Ghoukassian

Legal Counsel: City Attorney's Office
Public Pensions General
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- II. APPROVAL OF MINUTES FOR THE REGULAR MEETING OF JANUARY 28, 2020 AND POSSIBLE COMMITTEE ACTION
- III. RECEIVE AND FILE - 2021 HEALTH PLAN CONTRACT RENEWAL UPDATE
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MINUTES OF THE REGULAR MEETING
BENEFITS ADMINISTRATION COMMITTEE
LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM

LACERS Ken Spiker Boardroom
202 West First Street, Suite 500
Los Angeles, California

January 28, 2020

Agenda of: June 9, 2020

Item No: II

9:01 a.m.

PRESENT:	Chair:	Michael R. Wilkinson
	Committee Member:	Sandra Lee Nilza R. Serrano
	Manager-Secretary:	Lita Payne
	Executive Assistant:	Ani Ghoukassian
	Legal Counselor:	Anya Freedman

The Items in the Minutes are numbered to correspond with the Agenda.

I

PUBLIC COMMENTS ON MATTERS WITHIN THE COMMITTEE'S JURISDICTION – Chair Wilkinson asked if any persons wished to speak on matters within the Committee's jurisdiction, to which there was no response and no public comment cards received.

II

APPROVAL OF MINUTES FOR REGULAR MEETING OF OCTOBER 8, 2019 AND POSSIBLE COMMITTEE ACTION – Approval of the minutes was moved by Committee Member Serrano and adopted by the following vote: Ayes, Committee Members Sandra Lee, Serrano and Chair Wilkinson – 3; Nays, None.

III

2021 HEALTH PLAN CONTRACT RENEWAL UPDATE – VERBAL REPORT – Alex Rabrenovich, Chief Benefits Analyst with Health Benefits Administration & Communications Division and Bordan Darm with Keenan & Associates presented this item to the Committee for 19 minutes.

IV

RECEIVE AND FILE – LACERS *WELL* 2019 ANNUAL REPORT – Alex Rabrenovich, Chief Benefits Analyst and Heather Ramirez, Senior Management Analyst I, with Health Benefits Administration & Communications Division presented this item to the Committee for 22 minutes.

V

AGED DECEASED ACCOUNTS WITH UNRECOVERABLE OVERPAYMENTS AND POSSIBLE COMMITTEE ACTION – Ferralyn Sneed, Senior Management Analyst II, Lady Smith, Senior Management Analyst I, and James Kawashima, Management Analyst with Retirement Services Division, presented this item to the Committee and discussed for 16 minutes. Committee Member Serrano moved approval of staff's recommendation, adopted by the following vote: Ayes, Committee Members Sandra Lee, Serrano and Chair Wilkinson –3; Nays, None.

VI

OPERATIONAL UPDATE – Lita Payne, Assistant General Manager, deferred the update to the Board Meeting.

VII

OTHER BUSINESS – Chair Wilkinson recognized the loss of Kobe Bryant and eight other individuals in the helicopter crash on Sunday, January 26, 2020.

VIII

NEXT MEETING: Chair Wilkinson announced that the next Benefits Administration Committee Meeting is not scheduled at this time, and will be announced upon scheduling.

IX

ADJOURNMENT – There being no further business before the Committee, Chair Wilkinson adjourned the Meeting at 10:00 a.m.

Michael R. Wilkinson
Chair

Lita Payne
Manager-Secretary



REPORT TO BENEFITS ADMINISTRATION COMMITTEE

From: Neil M. Guglielmo, General Manager

MEETING: JUNE 9, 2020

ITEM: III

Neil M. Guglielmo

SUBJECT: 2021 HEALTH PLAN CONTRACT RENEWAL UPDATE

ACTION: ☐ CLOSED: ☐ CONSENT: ☐ RECEIVE & FILE: ☒

Recommendation

That the Committee receive and file this report.

Executive Summary

Based on the preliminary responses to LACERS' Request for Renewal, it is estimated that the annual premium cost of LACERS health plans will increase by approximately 2.6%, or \$3.4 million, from \$127.1 million to \$130.5 million.

Discussion

LACERS' health and welfare consultant, Keenan and Associates (Keenan), sent each LACERS health plan carrier a 2021 Request for Renewal in mid-March with a response deadline of April 30, 2020. During May, staff and Keenan met with each carrier regarding the renewal process and to discuss any concerns or special areas of interest.

Preliminary 2021 premium rates have been submitted by all carriers for all plans, except the Kaiser Permanente Senior Advantage plan (the renewal premium for this plan is usually available in late June/early July). Based on the preliminary results, it is estimated that the annual premium cost of LACERS' health plans will increase by approximately 2.6%, or \$3.4 million, from \$127.1 million to \$130.5 million.

During this renewal period, carriers were asked about senior support programs, such as emergency alert systems, meal delivery, and transportation services. Also, a request for the cost of removing the lifetime maximum from LACERS' PPO and Medicare Supplement plans was made. The results above do not include any plan design/benefit changes.

Currently, Keenan is in negotiation with each carrier to finalize the 2021 health plan premium rates and it is expected that final premium rates will be presented in late July.

Strategic Plan Impact Statement

This item supports Strategic Plan goal 3: Improve Value and Minimize Costs of Members' Health and Wellness Benefits.

Prepared By: Alex Rabrenovich, Chief Benefits Analyst, Health Benefits and Wellness Division.

NMG:AR:ar

Attachment: 1. Keenan Report, 2021 Health Plan Renewal, Preliminary Report



BAC Meeting: 06/09/20
Item III
Attachment 1

Los Angeles City Employees' Retirement System

2021 Health Plan Renewal, Preliminary Report

Benefits Administration Committee

Respectfully Submitted by:

Ju Anderson, Vice President | Bordan Darm, Senior Consultant
Erin Robinson, Senior Service Representative | Christine Hough, Actuary

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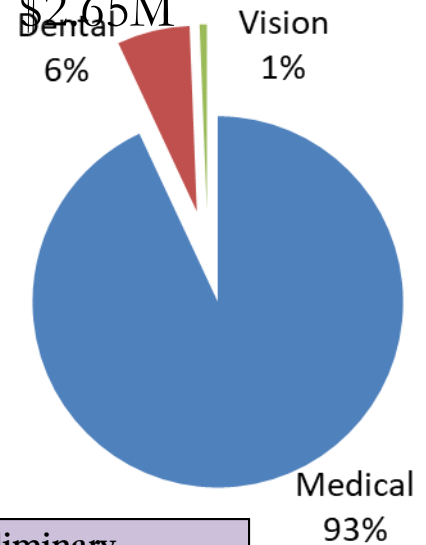
Introduction

- This report presents Los Angeles City Employees' Retirement System's (LACERS) preliminary 2021 health plan renewals
- Anthem Blue Cross (Anthem), Kaiser Permanente (Kaiser), UnitedHealthcare (UHC), and SCAN have provided medical plan renewals for 2021
- Delta Dental has provided a renewal for the DHMO plan for 2021. The Delta Dental PPO plan is self-funded as of January 1, 2019. The PPO administration fee will remain the same for 2021
- Anthem Blue View Vision has provided renewals for 2021 and for a three-year guarantee contract
- Data assumes the current carriers, current plan designs, and current enrollment for the report



Financial Summary - Medical, Dental, Vision

- The insurance carriers for LACERS originally requested an increase in cost of \$6.0M or +4.7% from \$127,130,920 to \$133,161,662 in the 2021 preliminary renewal
- With the initial negotiations, and Anthem's and Delta's renewal concessions, the preliminary renewal decreased to a +2.6% or \$3.35M, a savings of \$2.65M
- The 2019 LACERS preliminary renewals are as follows:
 - Medical premiums: \$3,312,977 or 2.8%
 - Dental premiums: \$0 or 0.0%
 - Vision premiums: \$38,806 or 4.9%
- Preliminary renewals are still being negotiated
- The Delta Dental PPO plan is in its second year of self-funding



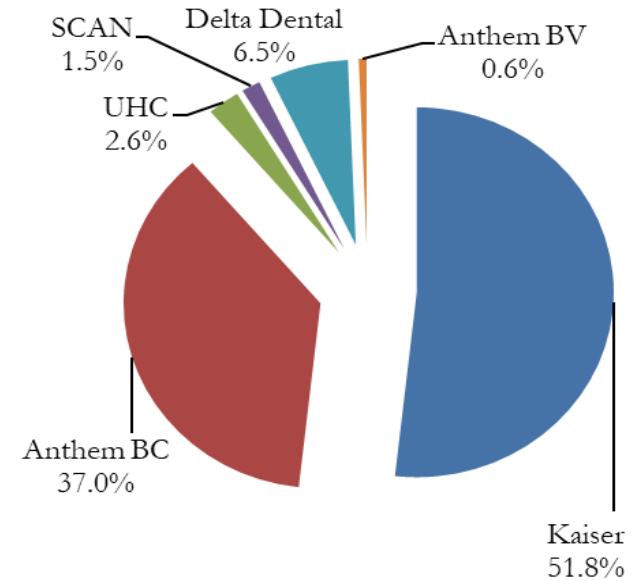
	Current Enrollment	2020 Premium	2021 Renewal - Preliminary		
			Premium	\$ Change	% Change
MEDICAL	19,248	\$117,905,970	\$121,218,947	\$3,312,977	2.8%
DENTAL	13,332	\$8,427,820	\$8,427,820	\$0	0.0%
VISION	6,385	\$792,709	\$831,306	\$38,596	4.9%
GRAND TOTAL		\$127,126,499	\$130,478,072	\$3,351,573	2.6%

1) Anthem and Delta Dental enrollments are retiree counts.

2) Kaiser, UnitedHealthcare and SCAN enrollments are member counts.

Financial Summary – By Carrier

- The 2021 LACERS preliminary renewals by carrier are as follows:
 - Anthem: **\$1,300,794** or **2.8%**
 - Kaiser: **\$1,912,023** or **2.9%**
 - UHC: **\$100,160** or **3.0%**
 - SCAN: **\$0** or **0.0%**
 - Delta Dental: **\$0** or **0.0%**
 - Anthem Blue View: **\$38,806** or **4.9%**
- Kaiser and Anthem comprise 88.8% of the total cost



Carriers	Current Enrollment	2020 Premium	2021 Renewal - Preliminary		
			Premium	\$ Change	% Change
Anthem	5,139	\$46,918,507	\$48,219,300	\$1,300,794	2.8%
Kaiser	12,437	\$65,636,663	\$67,548,686	\$1,912,023	2.9%
UnitedHealthcare	1,027	\$3,339,871	\$3,440,031	\$100,160	3.0%
SCAN	645	\$2,010,929	\$2,010,929	\$0	0.0%
Delta Dental	13,332	\$8,427,820	\$8,427,820	\$0	0.0%
Anthem Blue View	6,385	\$792,709	\$831,306	\$38,596	4.9%
GRAND TOTAL		\$127,126,499	\$130,478,072	\$3,351,573	2.6%

- Anthem and Delta Dental enrollments are retiree counts.
- Kaiser, UnitedHealthcare and SCAN enrollments are member counts.

Financial Summary – *By Line of Coverage*

- Anthem Blue Cross is requesting 2.8% for the PPO, 2.9% for the HMO, and 2.7% for the Medicare Supplemental plan
- Kaiser is requesting 2.85% for the HMO. The Senior Advantage renewal is an estimate until rates are received.
- Delta Dental PPO plan is self-funded and does not require an increase.

	Current	2020	2021 Renewal - Preliminary		
	Enrollment	Premium	Premium	\$ Change	% Change
Anthem					
Anthem					
PPO Under 65 and 65+ Part B	1,051	\$15,581,369	\$16,025,438	\$444,069	2.8%
HMO Under 65 and 65+ Part B	814	\$10,065,436	\$10,358,378	\$292,942	2.9%
Medicare Supplement	3,274	\$21,271,702	\$21,835,485	\$563,783	2.7%
Total	5,139	\$46,918,507	\$48,219,300	\$1,300,794	2.8%
Kaiser					
HMO Under 65	4,108	\$37,805,143	\$38,882,221	\$1,077,078	2.8%
Senior Advantage*	8,329	\$27,831,520	\$28,666,466	\$834,946	3.0%
Total	12,437	\$65,636,663	\$67,548,686	\$1,912,023	2.9%
UnitedHealthcare					
CA Medicare Advantage	845	\$2,728,877	\$2,810,707	\$81,830	3.0%
NV Medicare Advantage	110	\$317,183	\$326,700	\$9,517	3.0%
AZ Medicare Advantage	72	\$293,812	\$302,625	\$8,813	3.0%
Total	1,027	\$3,339,871	\$3,440,031	\$100,160	3.0%
SCAN					
Medicare Advantage	645	\$2,010,929	\$2,010,929	\$0	0.0%
Total	645	\$2,010,929	\$2,010,929	\$0	0.0%
Medical Total	19,248	\$117,905,970	\$121,218,947	\$3,312,977	2.8%
DENTAL					
Delta Dental PPO (self-funded)	10,137	\$7,666,984	\$7,666,984	\$0	0.0%
Delta Dental HMO	3,195	\$760,835	\$760,835	\$0	0.0%
Dental Total	13,332	\$8,427,820	\$8,427,820	\$0	0.0%
VISION					
Anthem Blue View	6,385	\$792,709	\$831,306	\$38,596	4.9%
Vision Total	6,385	\$792,709	\$831,306	\$38,596	4.9%
GRAND TOTAL		\$127,126,499	\$130,478,072	\$3,351,573	2.6%

* Kaiser did not provide Senior Advantage renewal. For illustration, an industry norm 3% increase is assumed.

Financial Summary – *Kaiser Member Rate*

- LACERS implemented a benefit strategy for 2019 and 2020, which held the member rate from 2018, since the Kaiser renewal rates were rates decreases.
- Even though Kaiser is requesting a 2.85% rate increase, the 2021 carrier rate would still be less than the 2020 Kaiser member rate.
- This allows LACERS to continue the member rate strategy for 2021 and that the Kaiser member rate would not have increased for four years.

Kaiser HMO Carrier Rates	2018	2019	2020	2021
Retiree < 65 or > 65 with only Part B of Medicare	\$853.39	\$830.44	\$813.14	\$836.31
Retiree & Dependent both < 65	\$1,706.78	\$1,660.88	\$1,626.28	\$1,672.61
Retiree & Dependents all < 65	\$2,218.82	\$2,159.14	\$2,114.16	\$2,174.40
Rate Change		-2.69%	-2.08%	2.85%
Kaiser HMO Member Rate	2018	2019	2020	2021
Retiree < 65 or > 65 with only Part B of Medicare	\$853.39	\$853.39	\$853.39	\$853.39
Retiree & Dependent both < 65	\$1,706.78	\$1,706.78	\$1,706.78	\$1,706.78
Retiree & Dependents all < 65	\$2,218.82	\$2,218.82	\$2,218.82	\$2,218.82
Rate Change		0.00%	0.00%	0.00%

Recommendations

- Analyze the preliminary renewals and negotiate with carriers to finalize the rates
- Finalize the Kaiser Senior Advantage renewal
- Finalize Anthem 2019 year-end accounting
- Receive and Finalize performance guarantees
- Finalize 2021 renewal impact on 401(h)/115 Trust



Acknowledgement

Keenan & Associates would like to thank Ms. Lita Payne, Mr. Alex Rabrenovich, and the LACERS Health Benefits Administration staff for providing the necessary data and engaging in this renewal process. Their cooperation and guidance have been extremely valuable.

Questions and Answers

REPORT TO BENEFITS ADMINISTRATION COMMITTEE

From: Neil M. Guglielmo, General Manager

MEETING: JUNE 9, 2020

ITEM: IV

Neil M. Guglielmo

SUBJECT: HEALTH PLAN FINANCIAL AND HEALTH MANAGEMENT DASHBOARDS

ACTION: ☐ CLOSED: ☐ CONSENT: ☐ RECEIVE & FILE: ☒

Recommendation

That the Committee receive and file this report.

Executive Summary

LACERS' health and welfare consultant, Keenan and Associates, will present the health plan financial and health management dashboards, tracking utilization data to inform LACERS on trends impacting contract renewals and focus areas for future communications. The financial dashboards show that the overall health plan loss ratio has increased by 7.7% between 2018 and 2019, and the health management dashboards show minimal change from the previous year.

Discussion

As part of LACERS' Strategic Plan, staff developed a health plan data initiative to help achieve the Goal: Maximize Value and Minimize Costs of our Health and Wellness Program. The purpose of the initiative is to review various health plan data reports to better understand costs and trends, and to identify cost drivers that have the potential to be mitigated. As such cost drivers are identified, staff and its health and welfare consultant, Keenan and Associates (Keenan), develop strategies to minimize their impact in an effort to reduce health plan premium increases. The results of these efforts is monitored and reported back to the Board through health plan dashboards.

Keenan developed a set of financial dashboards to track utilization and cost trends associated with LACERS health plans, as they relate to diagnostic categories, inpatient and outpatient claims, prescription drug claims, high-cost claims, and therapies. These health plan data dashboards are useful in monitoring the performance of each plan, explaining changes in premiums, and informing health plan decisions and negotiation points during contract renewals. Additionally, they may guide staff's communications and wellness efforts to encourage our Members to utilize their plans in a more cost-effective manner for better health and financial outcomes.

After meeting with Anthem Blue Cross and Kaiser Permanente, staff and Keenan identified diagnostic categories that are having the greatest impact on premium costs. (More attention is placed on these two plans because they are able to provide the greatest amount of data and provide coverage to over 90% of our plans' covered lives.) These categories are: Circulatory (e.g., hypertension, cardiovascular disease), Musculoskeletal (e.g., osteoarthritis, low back problems), Neoplasms (e.g., skin cancer), Obesity, and Diabetes. Claims costs and utilization trends associated with each of these diagnostic categories are monitored and discussions held regarding the potential to improve outcomes and/or reduce costs, and how concerns can be addressed through Member wellness efforts.

As a means of monitoring and reporting on the impact of the data initiative/wellness program strategies, the health management dashboards reflect claims costs associated with various health conditions, and any changes in participation in health management programs and resources available to Members through their LACERS medical plans.

Staff and Keenan will be present to share highlights from the current set of financial dashboards.

Strategic Plan Impact Statement

The health plan dashboards support Strategic Plan Goal 3, Improve Value and Minimize Costs of Members' Health and Wellness Benefits. These dashboards give the Board and LACERS staff insight into health plan utilization, which allows staff to develop strategies to minimize future increases in premium costs.

Prepared By: Alex Rabrenovich, Chief Benefits Analyst of the Health Benefits and Wellness Division.

NG:AR:ar

Attachments: 1. Keenan Report – LACERS Health Plan Financial Dashboards
 2. Keenan Report – LACERS Health Management Data Report

BAC Meeting: 06/09/20
Item IV
Attachment 1



Los Angeles City Employees' Retirement System Health Plan Financial Dashboards June 9, 2020

Respectfully Submitted by:

Ju Anderson, Senior Advisor | Bordan Darm, Senior Consultant
Erin Robinson, Service Consultant | Christine Hough, Consultant and Actuary

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Background



- The LACERS financial dashboard was developed by Keenan & Associates to assist LACERS in identifying trends and assisting in the renewal negotiation process with LACERS' carriers
- The 2019 financial dashboard includes the most recent experience available for the following:
 - Anthem plans from January 1, 2016 to December 31, 2019
 - Kaiser plan from January 1, 2015 to December 31, 2019
 - Dental and Vision plans from January 1, 2016 to December 31, 2019
 - Delta Dental has been the current dental carrier since January 1, 2015
 - Anthem Blue View Vision has been the current vision carrier since January 1, 2015
- This report is based on information provided by the carriers where plan experience is available
 - This report excludes the following carriers and coverage:
 - Kaiser Medicare coverage
 - UHC Medicare coverage
 - SCAN Medicare coverage
- *Anthem Blue Cross HMO* refers to coverage for early retirees and retirees with Part B coverage
- *Anthem Blue Cross PPO* refers to coverage for early retirees and retirees with Part B coverage and retirees with Part A and Part B coverage
- Kaiser refers to coverage for early retirees
- This report is highlighted by red and green arrows. Red refers to an unfavorable trend and green to a favorable trend.

Executive Summary

Executive Summary

- LACERS 2019 plan experience overall loss ratio was 7.7% higher than 2018
 - Kaiser 91.2% in 2019 versus 78.6% for 2018 🚩
 - Anthem HMO 93.3% in 2019 versus 78.7% for 2018 🚩
 - Anthem PPO 84.8% in 2019 versus 82.7% for 2018
 - Delta Dental 76.2% in 2019 versus 83.5% for 2018 👍
 - Anthem Blue View Vision 93.9% in 2018 versus 100.9% for 2018 🚩
 - Overall loss ratio 87.8% versus 80.1% for 2018

	2019			2018	2017	2016
	Premium	Claims	Loss Ratio	Loss Ratio	Loss Ratio	Loss Ratio
Kaiser ^{1,5}	\$ 38,093,075	\$ 34,746,396	91.2% 🚩	78.6%	79.9%	106.5%
Anthem - HMO ^{2,6}	\$ 12,114,384	\$ 11,297,796	93.3% 🚩	78.7%	89.8%	90.0%
Anthem - PPO (Combined with MedSupp) ^{3,4,6}	\$ 26,504,659	\$ 22,481,067	84.8%	82.7%	92.2%	81.0%
Dental	\$ 10,185,820	\$ 7,763,760	76.2% 👍	83.5%	84.7%	85.3%
Vision	\$ 725,266	\$ 681,374	93.9% 🚩	100.9%	95.6%	86.4%
Total	\$ 87,623,204	\$ 76,970,393	87.8%	80.1%	85.7%	93.8%

Notes:

1. Kaiser is for the early retiree plans only
2. Anthem Blue Cross HMO is for the early retiree plans and retirees with Part B. (includes Capitation Fees)
3. Anthem Blue Cross PPO includes the Blue Card plan for early retirees and retirees with Part B, and retirees with Parts A and B
4. Anthem Blue Cross 2011, 2014-17 include MedSupp plans
5. Kaiser data is based on the annual renewal packets
6. Anthem Blue Cross data is based on the Summary Annual Reports and Claims Loss Reports

Executive Summary (Cont.)



Overall All Plan Performance

- The overall loss ratio for 2019 was 87.8% compared to 80.1% for 2018
- These loss ratios are indicators for the 2021 renewals since the renewals will be underwritten based on claim experience from 2019 and the first part of 2020

Anthem Blue Cross PPO

- The Anthem Blue Cross PPO loss ratio increased to 84.8% in 2019 versus 82.7% for 2018
 - Total paid claims pmpm decreased -1.6% to \$366.33 pmpm
 - Inpatient Facility cost decreased -15.3% to \$88.62
 - Outpatient Facility cost decreased -3.0% to \$85.76
 - Professional/Other cost increased 8.7% to \$137.55
 - Overall drug cost increased 5.1% to \$395.62

Executive Summary (Cont.)



Anthem Blue Cross HMO

- The HMO loss ratio increased to 93.5% compared to 78.7% in the previous year
 - Capitation cost increased 2.1% to \$297.20 pmpm
 - Inpatient Facility cost increased 4.8% to \$127.40
 - Outpatient Facility cost increased 11.8% to \$127.40
 - Professional/Other cost increased 4.8% to \$74.59
 - Prescription Drug cost increased 11.0% to \$234.76
- Medical Enrollment decreased -9.7% to 803 subscribers and -10.3% to 1,188 members

Kaiser

- The Kaiser loss ratio for 2019 was 91.2% versus 78.6% in 2018
- The Claim Cost ratio increased 16.1% to 91.2%
- Medical Enrollment increased 3.1% to 4,118 members

Executive Summary (Cont.)



Delta Dental

- The Delta Dental loss ratio for 2019 was 76.2% versus 83.5% for 2018
- LACERS self-funded the dental program starting January 1, 2019
- When self-funding, a reserve for claims incurred but not reported (IBNR or claims runout) must be maintained
- Keenan's Actuary calculated a \$521,600 IBNR reserve requirement year-end December 31, 2019

Anthem Blue View Vision

- The Anthem Blue View Vision loss ratio for 2019 was 93.9% versus 100.9% for 2018

Anthem Blue Cross PPO

Anthem Blue Cross PPO – Medical Summary

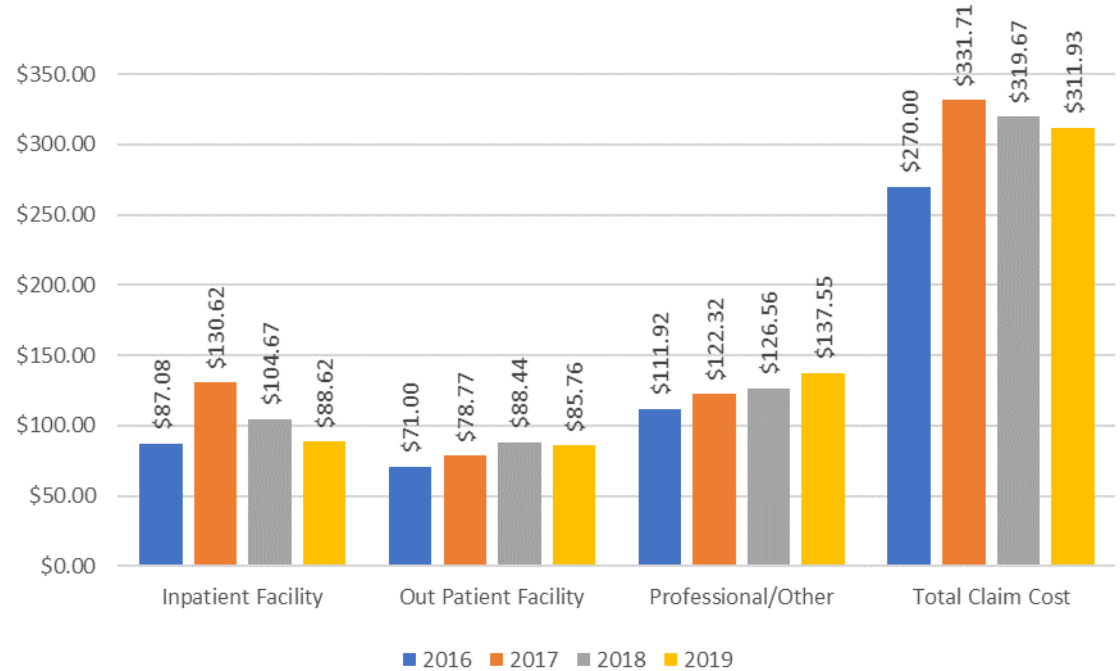






PPO Summary	2016	2017	YOY % Change	2018	YOY % Change	2019	YOY % Change
Medical Subscribers	3,762	3,905	3.8%	4,075	4.4%	4,186	2.7%
Medical Members	4,502	4,714	4.7%	4,952	5.0%	5,114	3.3%
Prescription Drug Subscribers	4,464	4,667	4.5%	4,839	3.7%	5,041	4.2%
Prescription Drug Members	4,646	4,869	4.8%	5,061	4.0%	5,272	4.2%
Premium	\$21,730,470	\$23,421,893	7.8%	\$26,759,578	14.3%	\$26,504,659	-1.0%
Paid Claims	\$17,611,357	\$21,597,294	22.6%	\$22,119,027	2.4%	\$22,481,067	1.6%
Claim Cost Loss Ratio	81.0%	92.2%	13.8%	82.7%	-10.4%	84.8%	2.6%
In-Network Utilization	78.4%	73.2%	-6.6%	82.6%	12.8%	80.9%	-2.1%

- Membership in the Anthem Blue Cross PPO plan increased 2.7% to 4,186 subscribers and 3.3% to 5,114 members
- Pharmacy Enrollment increased 4.2% to 5,041 subscribers and to 5,272 members
- The Claim Cost ratio had a minor increase of 2.6% to 84.8%
- In-network utilization decreased -2.1% to 80.9%

Anthem Blue Cross PPO – Medical Summary

- Total paid claims pmpm decreased 1.6% to \$366.33
- Inpatient Facility cost decreased - 15.3% to \$88.62
- Outpatient Facility cost decreased - 3.0% to \$85.76
- Professional/Other cost increased 8.7% to \$137.55

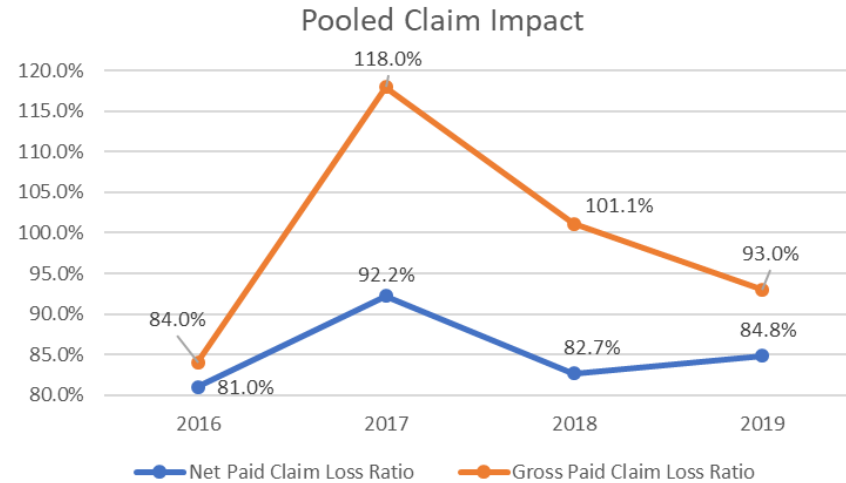


PPO Medical - PMPM	2016	2017	YOY % Change	2018	YOY % Change	2019	YOY % Change
Inpatient Facility	\$87.08	\$130.62	50.0%	\$104.67	-19.9%	\$88.62	-15.3% 
Out Patient Facility	\$71.00	\$78.77	10.9%	\$88.44	12.3%	\$85.76	-3.0% 
Professional/Other	\$111.92	\$122.32	9.3%	\$126.56	3.5%	\$137.55	8.7% 
Total Claim Cost PMPM	\$270.00	\$331.71	22.9%	\$319.67	-3.6%	\$311.93	-2.4% 

Anthem Blue Cross PPO – Large Claim Cost Summary



Large Claim Cost	2016	2017	2018	2019
Premium	\$21,730,470	\$23,421,893	\$26,759,578	\$26,504,659
Net Paid Claims	\$17,611,357	\$21,597,294	\$22,119,027	\$22,481,067
Net Paid Claim Loss Ratio	81.0%	92.2%	82.7%	84.8%
Pooling Level	\$200,000	\$200,000	\$200,000	\$300,000
Large Claimants	2	14	12	4
Pooled Amount	\$651,552	\$6,034,148	\$4,942,569	\$2,165,195
Gross Paid Claims	\$18,262,909	\$27,631,442	\$27,061,596	\$24,646,262
Gross Paid Claim Loss Ratio	84.0%	118.0%	101.1%	93.0%

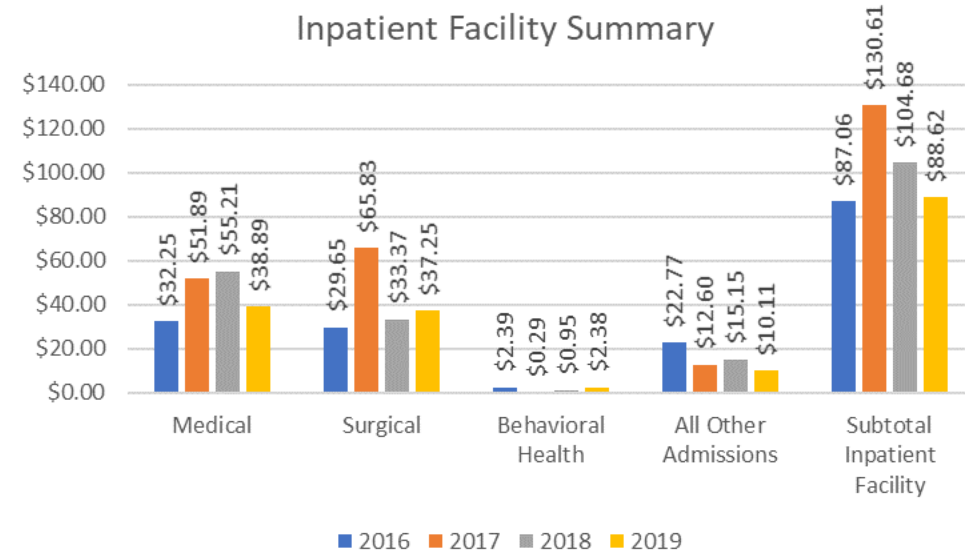


- For 2019, the pooling level for large claimants increased to \$300,000 from \$200,000 in 2018.
- Pooling claims reduced the loss ratio by 8.2%.
- There were four large claimants above \$300,000 in 2019. In 2018 there were also four large claimants with claims above \$300,000.

Description	Total Paid
1 Hereditary Factor VIII Deficiency	\$687,737
2 Other Interstitial Pulmonary Diseases	\$598,916
3 Fibrosis And Cirrhosis Of Liver	\$572,319
4 <u>Malignant Neoplasm Of Breast</u>	<u>\$306,223</u>
Total	\$2,165,195

Anthem Blue Cross PPO – Inpatient Claim Summary by Classification

- Inpatient facility charges decreased for the second year in a row -15.3% from \$104.68 pmpm to \$88.62 pmpm
- This was led by a decrease in acute care for medical procedures



Inpatient Facility Summary - by Classification	2016	2017	2018	2019
Medical	\$1,741,785	\$2,935,328	\$3,281,032	\$2,386,304
Surgical	\$1,601,241	\$3,723,909	\$1,982,709	\$2,286,047
Behavioral Health	\$129,307	\$16,405	\$56,441	\$145,807
All Other Admissions	\$1,229,941	\$712,495	\$900,218	\$620,400
Subtotal Inpatient Facility	\$4,702,274	\$7,388,137	\$6,220,400	\$5,438,558

Anthem Blue Cross PPO – Inpatient Utilization Summary



Inpatient Utilization Summary	2016	2017	2018	2019	% Change
# of Admits	756	873	915	871	-4.8%
# of Days	3,991	4,670	5,146	4,559	-11.4%
Avg Length of Stay (LOS)	5.3	5.3	5.6	5.2	-7.0%
Admits Per 1,000	168	185	185	170	-7.8%
Covered Charge per Admit	\$5,521	\$7,647	\$5,951	\$5,536	-7.0%
Covered Charge per Day	\$1,046	\$1,429	\$1,058	\$1,058	0.0%

- The total number of admissions decreased -4.8% to 871
- The number of days in hospital decreased -11.4% to 4,559
- The length of stays per admission also decreased from 5.6 days to 5.2 days or -11.4%
- The covered charge per admission decreased -7.0% to \$5,536
- The covered charge per day stayed constant at \$1,058

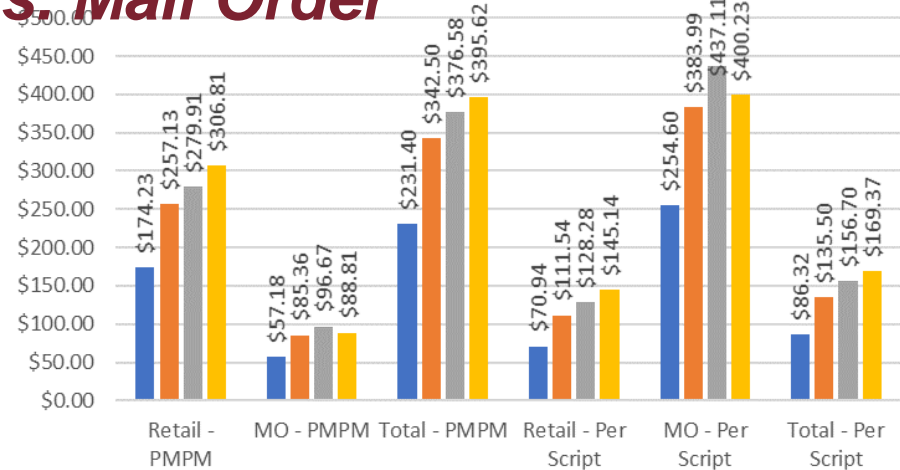
Anthem Blue Cross PPO – Major Diagnostic Category Summary



Health Conditions	Unique Claimants	Inpatient	Outpatient	Professional	Total	% of Total
1 Musculoskeletal System	2,822	\$555,151	\$604,239	\$1,166,022	\$2,325,412	12.1%
2 Circulatory System	2,851	\$949,819	\$591,833	\$708,449	\$2,250,101	11.8%
3 Neoplasms - Malignant	865	\$263,320	\$402,672	\$937,369	\$1,603,361	8.4%
4 Genitourinary System	1,560	\$404,182	\$731,713	\$376,114	\$1,512,009	7.9%
5 Ill-Defined Conditions	3,195	\$221,290	\$478,348	\$723,168	\$1,422,805	7.4%
6 Digestive System	1,238	\$744,442	\$263,513	\$243,505	\$1,251,461	6.5%
7 Respiratory System	1,479	\$744,090	\$212,017	\$285,788	\$1,241,895	6.5%
8 Injury & Poisoning	1,225	\$406,531	\$298,271	\$256,516	\$961,318	5.0%
9 Aftercare	378	\$68,644	\$647,582	\$164,725	\$880,950	4.6%
10 Nervous System	1,246	\$326,646	\$200,200	\$299,554	\$826,400	4.3%
11 Health Status	2,689	\$57,476	\$314,609	\$432,298	\$804,383	4.2%
12 Diseases of the Blood	417	\$14,192	\$27,848	\$714,337	\$756,377	4.0%
13 Diseases of the Eye	2,162	\$1,364	\$193,128	\$508,228	\$702,720	3.7%
14 Diseases of the Ear	693	\$1,364	\$51,647	\$584,149	\$637,159	3.3%
15 <u>All Other</u>		<u>\$680,045</u>	<u>\$245,818</u>	<u>\$1,041,345</u>	<u>\$1,967,208</u>	<u>10.3%</u>
Total		\$5,438,558	\$5,263,438	\$8,441,565	\$19,143,561	100.0%

- Musculoskeletal System, Circulatory System, and Malignant Neoplasms make up the top 32.3% health conditions

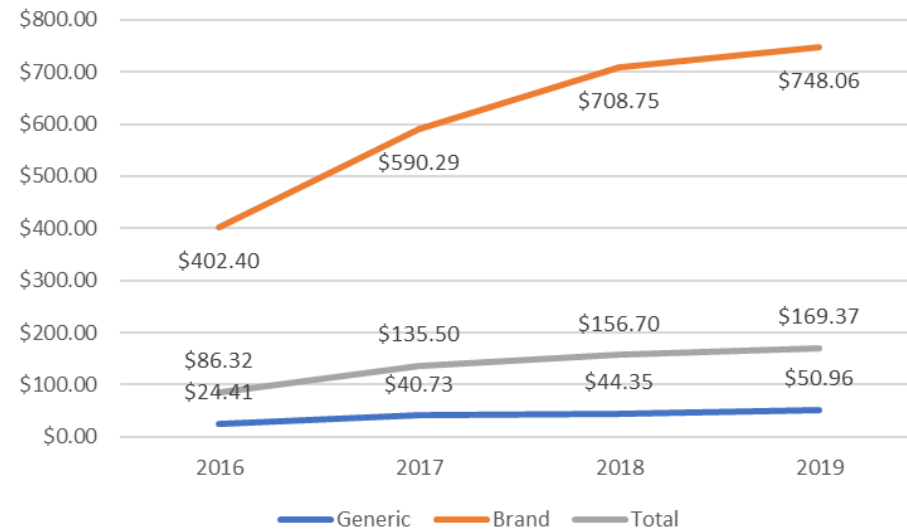
- Overall drug cost increased 5.1% year over year, from \$376.58 to \$395.62 pmpm
 - Retail drug cost increased 9.6% year over year, from \$279.91 to \$306.81 pmpm
 - Mail order drug cost decreased -8.1% year over year, from \$96.67 to 88.81 pmpm
- Retail claim cost represented 77.6% of total cost
- Mail Order Utilization increased to 9.5% of scripts



		2016	2017	2018	2019	% Change	
Retail	# of Scripts	136,929	134,686	132,516	129,730	-2.1%	
	Paid	\$9,713,416	\$15,022,478	\$16,999,404	\$18,828,618	10.8%	
	PMPM	\$174.23	\$257.13	\$279.91	\$306.81	9.6%	→
	Per Script	\$70.94	\$111.54	\$128.28	\$145.14	13.1%	→
Mail Order	# of Scripts	12,521	12,988	13,431	13,617	1.4%	
	Paid	\$3,187,785	\$4,987,228	\$5,870,819	\$5,449,915	-7.2%	
	PMPM	\$57.18	\$85.36	\$96.67	\$88.81	-8.1%	←
	Per Script	\$254.60	\$383.99	\$437.11	\$400.23	-8.4%	←
Total	# of Scripts	149,450	147,674	145,947	143,347	-1.8%	
	Paid	\$12,901,201	\$20,009,706	\$22,870,223	24,278,533	6.2%	
	PMPM	\$231.40	\$342.50	\$376.58	\$395.62	5.1%	→
	Per Script	\$86.32	\$135.50	\$156.70	\$169.37	8.1%	→
% Retail Dollars		75.3%	75.1%	74.3%	77.6%	4.3%	
% Retail Scripts		91.6%	91.2%	90.8%	90.5%	-0.3%	
% MO Dollars		24.7%	24.9%	25.7%	22.4%	-12.6%	←
% MO Scripts		8.4%	8.8%	9.2%	9.5%	3.2%	

Anthem Blue Cross PPO – Pharmacy Summary: Generic vs. Brand

- Overall generic drug cost increased 14.9% year over year, from \$44.35 to \$50.96 per script
- Overall brand drug cost increased 5.5% year over year, from \$708.75 to \$748.06 per script
- Total Overall drug cost increased 8.1% year over year, from \$156.70 to \$169.37 per script
- The Generic fill rate represents 25.0% of claim cost and 83.0% of scripts

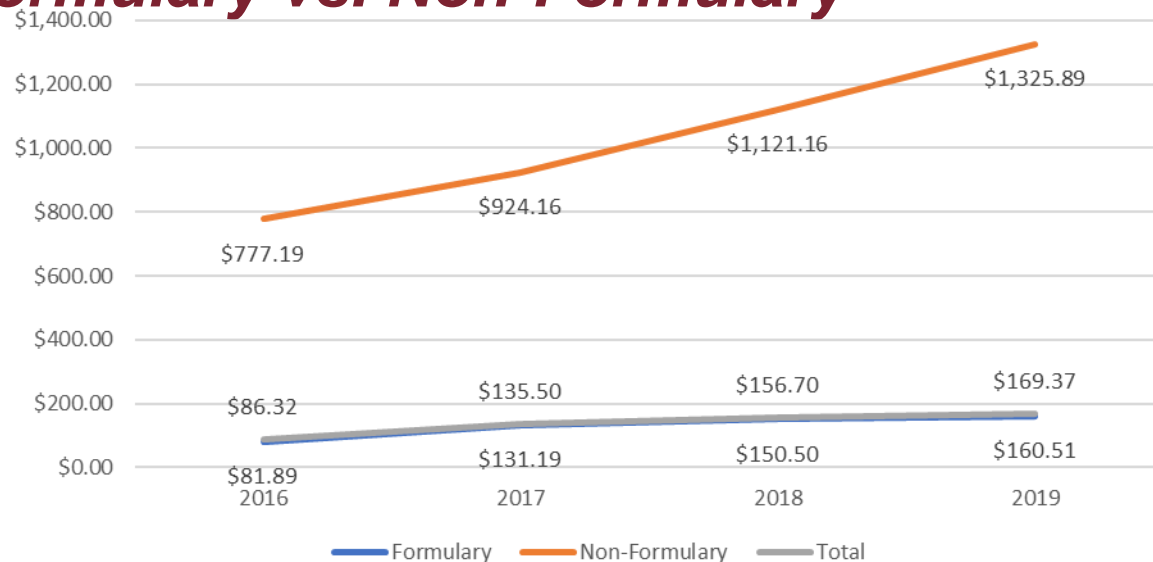


		2016	2017	2018	2019	% Change
Generic	# of Scripts	124,972	122,208	121,266	118,998	
	Paid Claims	\$3,051,170	\$4,977,266	\$5,377,617	\$6,064,015	
	Avg Paid Claim per Script	\$24.41	\$40.73	\$44.35	\$50.96	14.9%
Brand	# of Scripts	24,478	25,466	24,681	24,349	
	Paid Claims	\$9,850,030	\$15,032,439	\$17,492,607	\$18,214,517	
	Avg Paid Claim per Script	402.40	590.29	708.75	748.06	5.5%
Total	# of Scripts	149,450	147,674	145,947	143,347	
	Paid Claims	\$12,901,200	\$20,009,705	\$22,870,224	\$24,278,532	
	Avg Paid Claim per Script	\$86.32	\$135.50	\$156.70	\$169.37	8.1%
Generic Fill Rate						
	Paid Claims	23.7%	24.9%	23.5%	25.0%	6.2%
	# of Scripts	83.6%	82.8%	83.1%	83.0%	-0.1%

Anthem Blue Cross PPO –

Pharmacy Summary: Formulary vs. Non-Formulary

- Overall formulary drug cost increased 6.6% year over year, from \$150.50 to \$160.51 per script
- Overall non-formulary drug cost increased 18.3% year over year, from \$1,121.16 to \$1,325.89 per script
- Total Overall drug cost increased 8.1% year over year, from \$156.70 to \$169.37 per script
- The Formulary fill rate represents 94.0% of claim cost and 99.2% of scripts



		2016	2017	2018	2019	% Change
Formulary	# of Scripts	148,496	146,872	145,015	142,257	
	Paid Claims	\$12,159,763	\$19,268,526	\$21,825,300	\$22,833,313	
	Avg Paid Claim per Script	\$81.89	\$131.19	\$150.50	\$160.51	6.6%
Non-Formulary	# of Scripts	954	802	932	1,090	
	Paid Claims	\$741,437	\$741,179	\$1,044,923	\$1,445,219	
	Avg Paid Claim per Script	777.19	924.16	1,121.16	1,325.89	18.3%
Total	# of Scripts	149,450	147,674	145,947	143,347	
	Paid Claims	\$12,901,200	\$20,009,705	\$22,870,223	\$24,278,532	
	Avg Paid Claim per Script	\$86.32	\$135.50	\$156.70	\$169.37	8.1%
Formulary Fill Rate						
	Paid Claims	94.3%	96.3%	95.4%	94.0%	-1.4%
	# of Scripts	99.4%	99.5%	99.4%	99.2%	-0.1%

Anthem Blue Cross HMO

Anthem Blue Cross HMO – HMO Summary

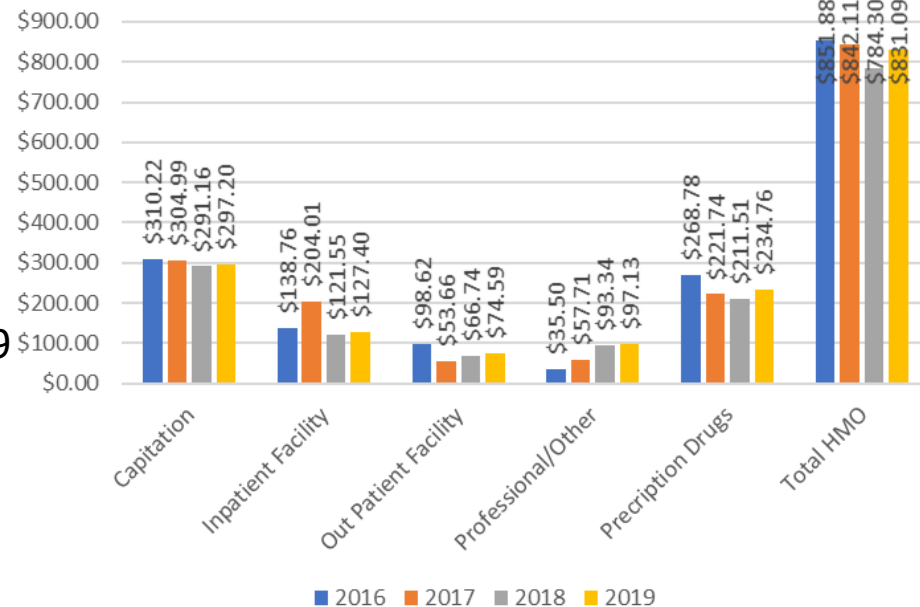


HMO Summary	2016	2017	% Change	2018	% Change	2019	% Change
Medical Subscribers	756	823	8.9%	888	7.9%	803	-9.6%
Medical Members	1,117	1,215	8.8%	1,325	9.1%	1,188	-10.3%
Prescription Drug Subscribers	615	664	8.0%	716	7.8%	633	-11.6%
Prescription Drug Members	960	1,043	8.6%	1,141	9.4%	1,004	-12.0%
Premium	12,397,039	13,165,555	6.2%	15,252,406	15.9%	12,114,386	-20.6%
Paid Claims (Non-Capitation)	\$3,902,488	\$4,597,352	17.8%	\$4,479,263	-2.6%	\$4,264,922	-4.8%
Capitation	\$4,158,124	\$4,446,812	6.9%	\$4,629,466	4.1%	\$4,236,951	-8.5%
<u>Prescription Drugs</u>	<u>\$3,096,358</u>	<u>\$2,775,249</u>	<u>-10.4%</u>	<u>\$2,895,929</u>	<u>4.3%</u>	<u>\$2,828,441</u>	<u>-2.3%</u>
Total Claim Cost	\$11,156,970	\$11,819,413	5.9%	\$12,004,658	1.6%	\$11,330,314	-5.6%
Claim Cost Loss Ratio	90.0%	89.8%	-0.2%	78.7%	-12.3%	93.5%	18.8%
% Medical Paid in Network	95.5%	91.3%	-4.4%	98.9%	8.3%	95.7%	-3.2%

- Medical Enrollment decreased -9.7% to 803 subscribers and -10.3% to 1,188 members
- Pharmacy Enrollment decreased -11.6% to 633 subscribers and -12.0% to 1,004 members
- The Claim Cost ratio including capitation increased 18.8% to 93.5%
- In-network utilization decreased -3.2% to 95.7%
- When Total Claim Cost (-5.6%) decreases less than enrollment (-9.6%), total pmpm claim cost increases.

Anthem Blue Cross HMO – HMO Summary

- Premium pmpm decreased -11.4% to \$849.77
- Capitation cost increased 2.1% to \$297.20
- Inpatient Facility cost increased 4.8% to \$127.40
- Outpatient Facility cost increased 11.8% to \$127.40
- Professional/Other cost increased 4.8% to \$74.59
- Prescription Drug cost increased 11.0% to \$234.76
- The claim cost loss ratio increased to 97.8%, a 19.6% increase

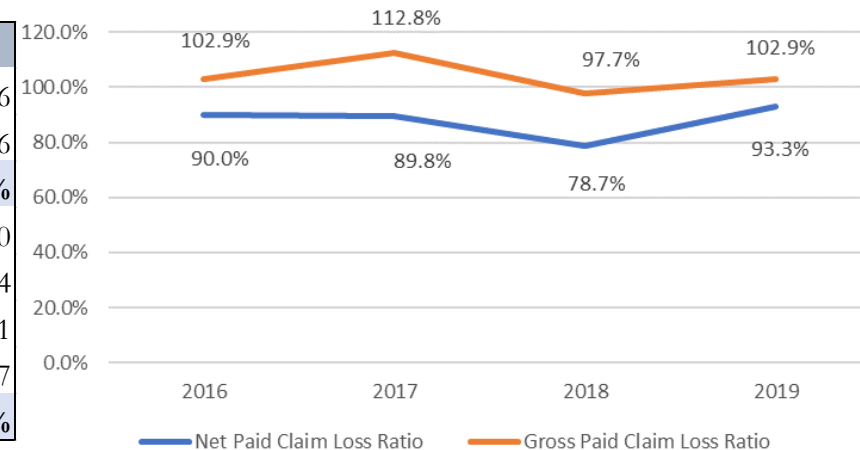


HMO PMPM* Summary	2016	2017	% Change	2018	% Change	2019	% Change
Premium	\$924.88	\$902.99	-2.4%	\$959.27	6.2%	\$849.77	-11.4%
Capitation	\$310.22	\$304.99	-1.7%	\$291.16	-4.5%	\$297.20	2.1%
Inpatient Facility	\$138.76	\$204.01	47.0%	\$121.55	-40.4%	\$127.40	4.8%
Out Patient Facility	\$98.62	\$53.66	-45.6%	\$66.74	24.4%	\$74.59	11.8%
Professional/Other	\$35.50	\$57.71	62.6%	\$93.34	61.7%	\$97.13	4.1%
<u>Prescription Drugs</u>	<u>\$268.78</u>	<u>\$221.74</u>	<u>-17.5%</u>	<u>\$211.51</u>	<u>-4.6%</u>	<u>\$234.76</u>	<u>11.0%</u>
Total Claim Cost PMPM	\$851.88	\$842.11	-1.1%	\$784.30	-6.9%	\$831.09	6.0%
Claim Cost Loss Ratio	92.1%	93.3%	1.2%	81.8%	-12.3%	97.8%	19.6%

Anthem Blue Cross HMO – Large Claim Cost Summary



Pooled Claim Impact



Large Claim Cost	2016	2017	2018	2019
Premium	\$12,397,039	\$13,165,555	\$15,252,406	\$12,114,386
Net Paid Claims	\$11,157,154	\$11,819,412	\$12,004,658	\$11,297,796
Net Paid Claim Loss Ratio	90.0%	89.8%	78.7%	93.3%
Pooling Level	\$100,000	\$100,000	\$100,000	\$175,000
Large Claimants	7	7	12	4
Pooled Amount	\$1,597,780	\$3,028,925	\$2,896,277	\$1,163,641
Gross Paid Claims	\$12,754,934	\$14,848,337	\$14,900,935	\$12,461,437
Gross Paid Claim Loss Ratio	102.9%	112.8%	97.7%	102.9%

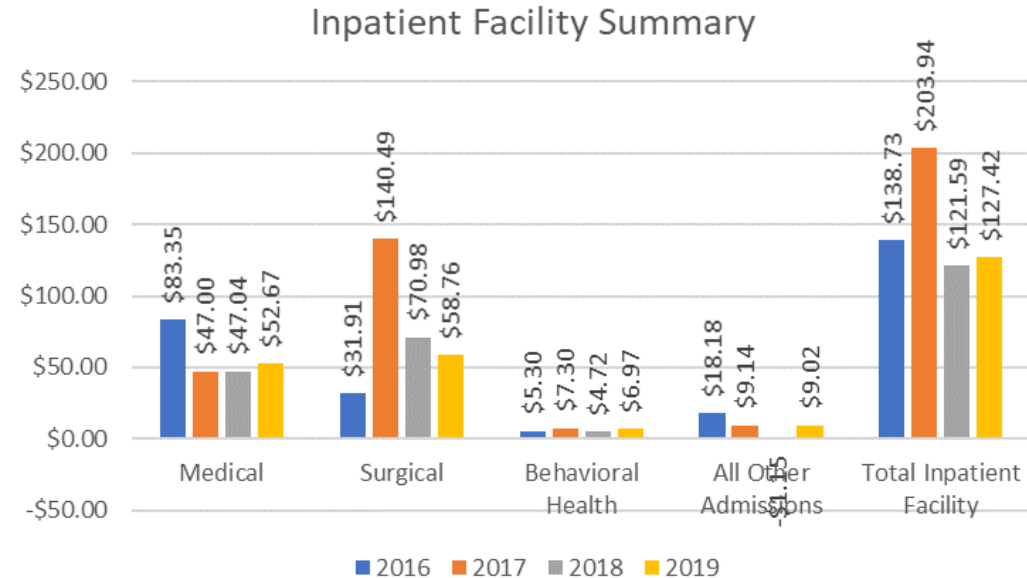
- For 2019, the pooling level for large claimants increased to \$175,000 from \$100,000 in 2018.
- Pooling claims reduced the loss ratio by 9.6%.
- There were four large claimants above \$175,000 in 2019. In 2018 there were six large claimants with claims above \$300,000.

2019		Total Paid
Description		
1 Other Systemic Invlv Connective Tiss		\$379,717
2 Spinal Musc Atrophy & Related Synd		\$333,595
3 Other Sepsis		\$256,673
4 Paralyt Ileus Intest Obst W/O Hern		\$193,656
Total		\$1,163,641

Anthem Blue Cross HMO – Inpatient Claim Classification Summary



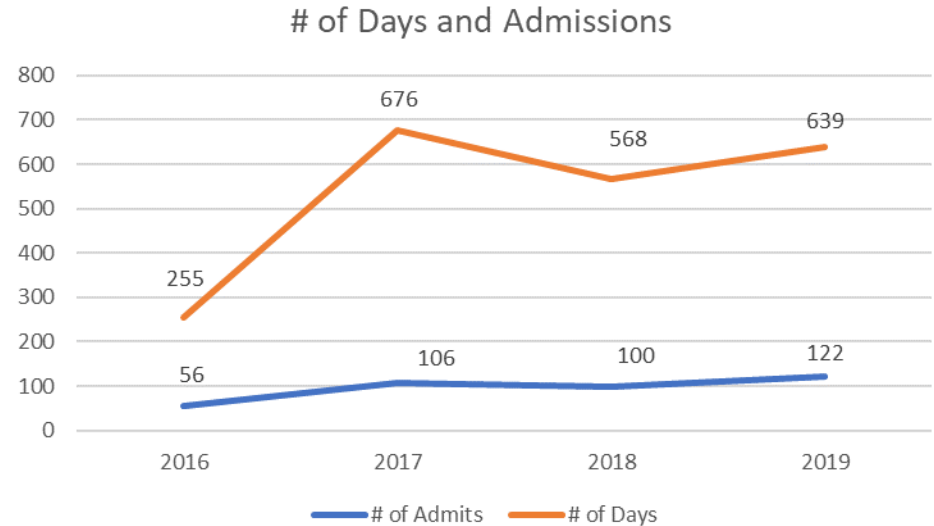
- Total Inpatient facility charges increased 4.8% to \$127.42 from \$121.59 ppm
- 2019 was LACERS lowest year in total Inpatient Facility spend in four years








Inpatient Facility - by Claim Classification	2016	2017	2018	2019
Medical	\$1,117,207	\$685,320	\$747,914	\$750,808
Surgical	\$427,720	\$2,048,405	\$1,128,613	\$837,716
Behavioral Health	\$71,022	\$106,478	\$75,002	\$99,348
All Other Admissions	\$243,652	\$133,235	-\$18,318	\$128,594
Total Inpatient Facility	\$1,859,601	\$2,973,438	\$1,933,211	\$1,816,466

Anthem Blue Cross HMO – Inpatient Utilization Summary

- The total number of admissions increased 22.0% to 122
- The number of days in hospital decreased 12.5% to 639
- The length of stays per admission decreased from 5.7 days to 4.3 days or - 23.8%
- The covered charge per admission decreased -17.3% to \$25,621
- The covered charge per day had a minor increase of 3.4% to \$4,729



Inpatient Utilization Summary	2016	2017	2018	2019	% Change
# of Admits	56	106	100	122	22.0% 
# of Days	255	676	568	639	12.5% 
Avg LOS	4.6	6.4	5.7	4.3	-23.8% 
Admits Per 1,000	50	87	75	103	36.2% 
Covered Charge per Admit	\$34,160	\$53,589	\$30,987	\$25,621	-17.3% 
Covered Charge per Day	\$7,502	\$6,174	\$4,572	\$4,729	3.4%

Anthem Blue Cross HMO – Major Diagnostic Category Summary

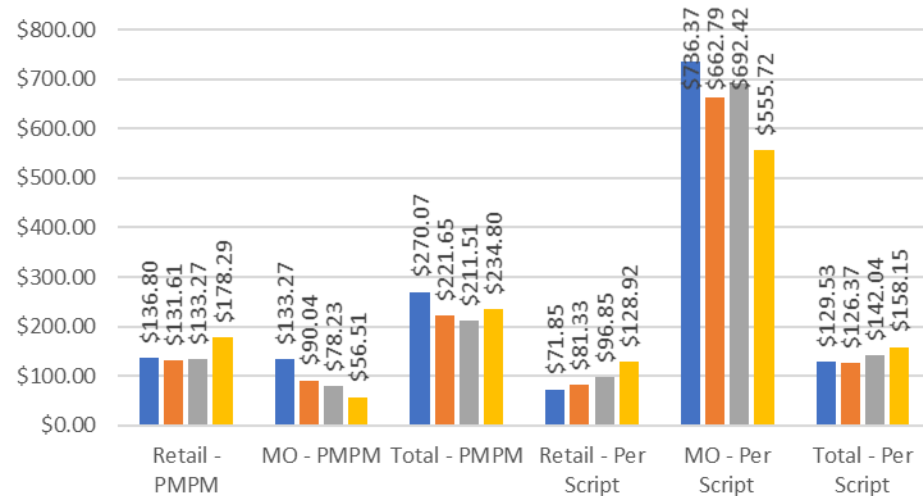
Health Conditions		Unique Claimants	Inpatient	Outpatient	Professional	Total	% of Total
1	Musculoskeletal System	501	\$235,027	\$96,304	\$395,043	\$726,374	17.0%
2	Nervous System	193	\$0	\$201,261	\$352,297	\$553,558	13.0%
3	Circulatory System	406	\$337,463	\$110,169	\$57,823	\$505,456	11.9%
4	Infectious/Parasitic	107	\$393,043	\$104	\$7,884	\$401,031	9.4%
5	Behavioral Health	187	\$99,348	\$124,040	\$174,816	\$398,204	9.3%
6	Digestive System	213	\$301,577	\$68,281	\$9,558	\$379,415	8.9%
7	Injury & Poisoning	221	\$156,135	\$69,145	\$12,195	\$237,475	5.6%
8	Health Status	878	\$53,147	\$117,905	\$52,447	\$223,499	5.2%
9	Ill-Defined Conditions	591	\$62,557	\$69,317	\$71,747	\$203,620	4.8%
10	Aftercare	45	\$27,424	\$12,113	\$99,207	\$138,744	3.3%
11	Neoplasms - Malignant	101	\$43,082	\$21,586	\$28,202	\$92,870	2.2%
12	Respiratory System	241	\$28,501	\$52,978	\$8,265	\$89,745	2.1%
13	Endocrine/Metabolic	481	\$34,231	\$6,484	\$29,165	\$69,881	1.6%
14	Genitourinary System	281	\$22,624	\$35,838	\$6,195	\$64,657	1.5%
15	<u>All Other</u>		<u>\$22,306</u>	<u>\$78,017</u>	<u>\$80,070</u>	<u>\$180,393</u>	4.2%
	Total		\$1,816,466	\$1,063,542	\$1,384,915	\$4,264,922	100.0%

- Musculoskeletal System, Nervous System, and Circulatory System make up the top 41.9% health conditions

Anthem Blue Cross HMO –

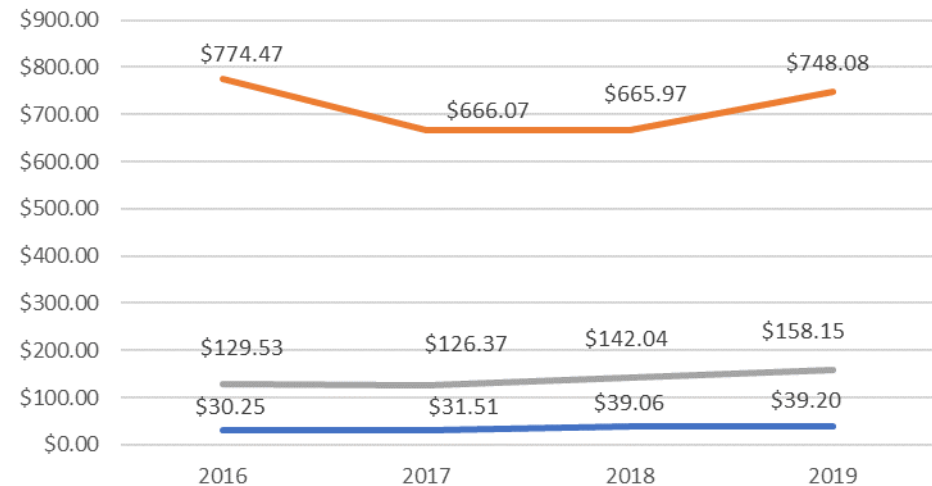
Pharmacy Summary: Retail vs. Mail Order

- Overall drug cost increased 11.0% year over year, from \$211.51 to \$234.80 pmpm
 - Retail drug cost increased 33.8% year over year, from \$133.27 to \$178.29 pmpm
 - Mail order drug cost decreased -27.8% year over year, from \$78.23 to \$56.51 pmpm
- Retail claim cost represented 75.9% of total cost
- Mail Order Utilization increased to 6.8% of scripts



		2016	2017	2018	2019	% Change
Retail	# of Scripts	21,829	20,261	18,841	16,659	-11.6%
	Paid	\$1,568,400	\$1,647,836	\$1,824,760	\$2,147,680	17.7%
	PMPM	\$136.80	\$131.61	\$133.27	\$178.29	33.8%
	Per Script	\$71.85	\$81.33	\$96.85	\$128.92	33.1%
Mail Order	# of Scripts	2,075	1,701	1,547	1,225	-20.8%
	Paid	\$1,527,958	\$1,127,413	\$1,071,169	\$680,761	-36.4%
	PMPM	\$133.27	\$90.04	\$78.23	\$56.51	-27.8%
	Per Script	\$736.37	\$662.79	\$692.42	\$555.72	-19.7%
Total	# of Scripts	23,904	21,962	20,388	17,884	-12.3%
	Paid	\$3,096,358	\$2,775,249	\$2,895,929	2,828,441	-2.3%
	PMPM	\$270.07	\$221.65	\$211.51	\$234.80	11.0%
	Per Script	\$129.53	\$126.37	\$142.04	\$158.15	11.3%
	% Retail Dollars	50.7%	59.4%	63.0%	75.9%	20.5%
	% Retail Scripts	91.3%	92.3%	92.4%	93.2%	0.8%
	% MO Dollars	49.3%	40.6%	37.0%	24.1%	-34.9%
	% MO Scripts	8.7%	7.7%	7.6%	6.8%	-9.7%

- Overall generic drug cost increased 0.4% year over year, from \$39.06 to \$39.20 per script
- Overall brand drug cost increased 12.3% year over year, from \$665.97 to \$748.08 per script
- Total Overall drug cost increased 11.3% year over year, from \$142.04 to \$158.15 per script
- The Generic fill rate represents 20.6% of claim cost and 83.2% of scripts



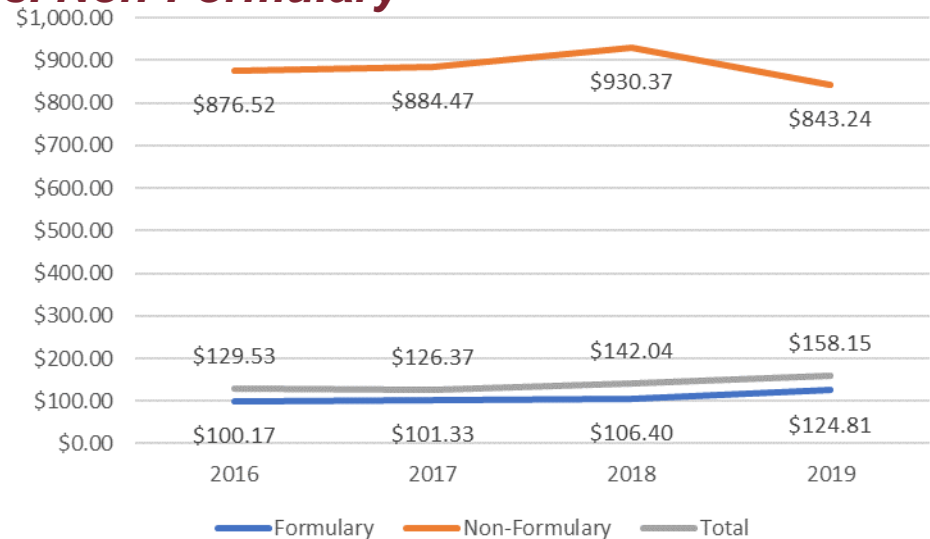
Total		2016	2017	2018	2019	% Change
Generic	# of Scripts	20,715	18,679	17,039	14,883	
	Paid Claims	\$626,563	\$588,555	\$665,588	\$583,446	
	Avg Paid Claim per Script	\$30.25	\$31.51	\$39.06	\$39.20	0.4%
Brand	# of Scripts	3,189	3,283	3,349	3,001	
	Paid Claims	\$2,469,795	\$2,186,694	\$2,230,341	\$2,244,995	
	Avg Paid Claim per Script	\$774.47	\$666.07	\$665.97	\$748.08	12.3%
Total	# of Scripts	23,904	21,962	20,388	17,884	
	Paid Claims	\$3,096,358	\$2,775,249	\$2,895,929	\$2,828,441	
	Avg Paid Claim per Script	\$129.53	\$126.37	\$142.04	\$158.15	11.3%
Generic Fill Rate						
	Paid Claims	20.2%	21.2%	23.0%	20.6%	-10.2%
	# of Scripts	86.7%	85.1%	83.6%	83.2%	-0.4%

Anthem Blue Cross HMO –



Pharmacy Summary: Formulary vs. Non-Formulary

- Overall formulary drug cost increased 17.3% year over year, from \$106.40 to \$124.81 per script
- Overall non-formulary drug cost decreased -9.4% year over year, from \$930.37 to \$843.24 per script
- Total Overall drug cost increased 11.3% year over year, from \$142.04 to \$169.37 per script
- The Formulary fill rate represents 75.3% of claim cost and 95.4% of scripts



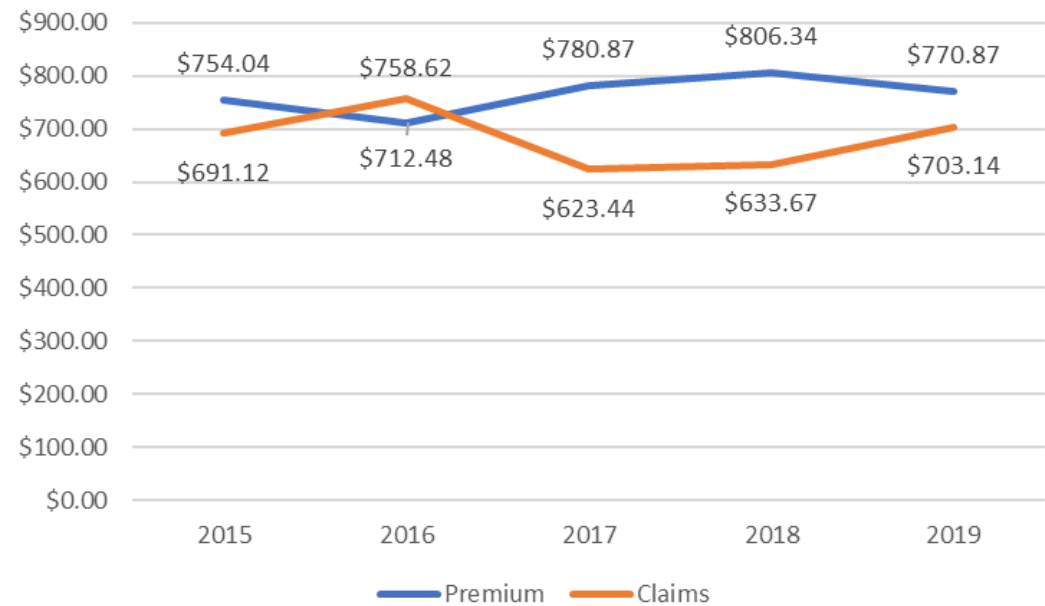
Total		2016	2017	2018	2019	% Change
Formulary	# of Scripts	23,000	21,260	19,506	17,054	
	Paid Claims	\$2,303,988	\$2,154,348	\$2,075,342	\$2,128,549	
	Avg Paid Claim per Script	\$100.17	\$101.33	\$106.40	\$124.81	17.3%
Non-Formulary	# of Scripts	904	702	882	830	
	Paid Claims	\$792,370	\$620,901	\$820,587	\$699,893	
	Avg Paid Claim per Script	876.52	884.47	930.37	843.24	-9.4%
Total	# of Scripts	23,904	21,962	20,388	17,884	
	Paid Claims	\$3,096,358	\$2,775,249	\$2,895,929	\$2,828,442	
	Avg Paid Claim per Script	\$129.53	\$126.37	\$142.04	\$158.15	11.3%
Formulary Fill Rate						
	Paid Claims	74.4%	77.6%	71.7%	75.3%	5.0%
	# of Scripts	96.2%	96.8%	95.7%	95.4%	-0.3%

Kaiser HMO

Kaiser HMO – HMO Summary



- The Claim Cost ratio increased 16.1% to 91.2%
- Medical Enrollment increased 3.1% to 4,118 members
- 2016, LACERS had 12 claimants with claims above \$280,000. Additionally, the impact of the Hepatitis-C prescription drug cure impacted LACERS claim cost

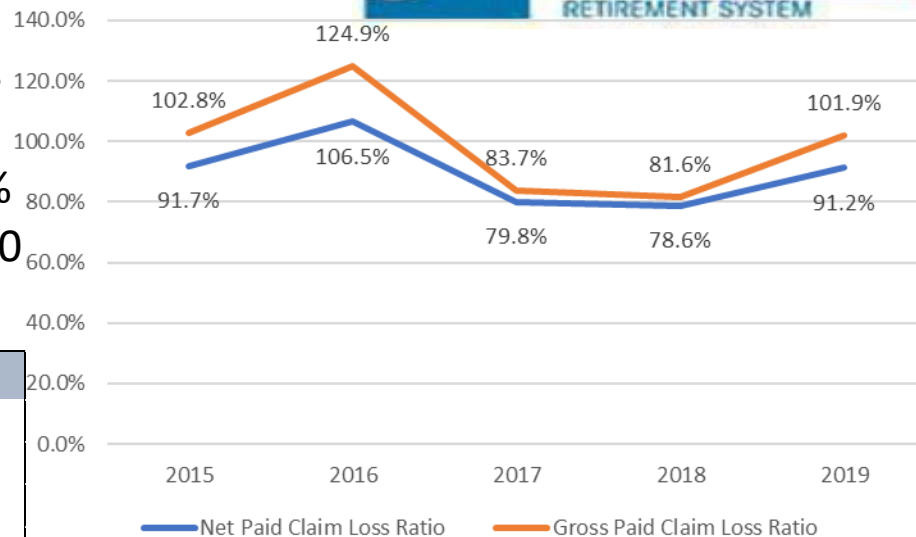


	2015	2016	% Change	2017	% Change	2018	% Change	2019	% Change
Average Members	3,590	3,694	2.9%	3,768	2.0%	3,996	6.1%	4,118	3.1%
Average Age	55.7	55.2	-0.9%	54.7	-0.9%	54.2	-0.9%	54.1	-0.2%
Premium	\$32,484,151	\$31,582,829	-2.8%	\$35,307,623	11.8%	\$38,665,574	9.5%	\$38,093,075	-1.5%
Claims	\$29,773,500	\$33,627,950	12.9%	\$28,189,333	-16.2%	\$30,385,948	7.8%	\$34,746,396	14.4%
Loss Ratio	91.7%	106.5%	16.2%	79.8%	-25.0%	78.6%	-1.6%	91.2%	16.1%
Premium PMPM	\$754.04	\$712.48	-5.5%	\$780.87	9.6%	\$806.34	3.3%	\$770.87	-4.4%
Claims PMPM	\$691.12	\$758.62	9.8%	\$623.44	-17.8%	\$633.67	1.6%	\$703.14	11.0%

Kaiser HMO – Large Claims



- For 2019, the pooling level for large claimants increased to \$280,000 from \$265,000 in 2018
- Pooling claims reduced the loss ratio by 10.7%
- There were six large claimants above \$280,000 in 2019 compared to three in 2018

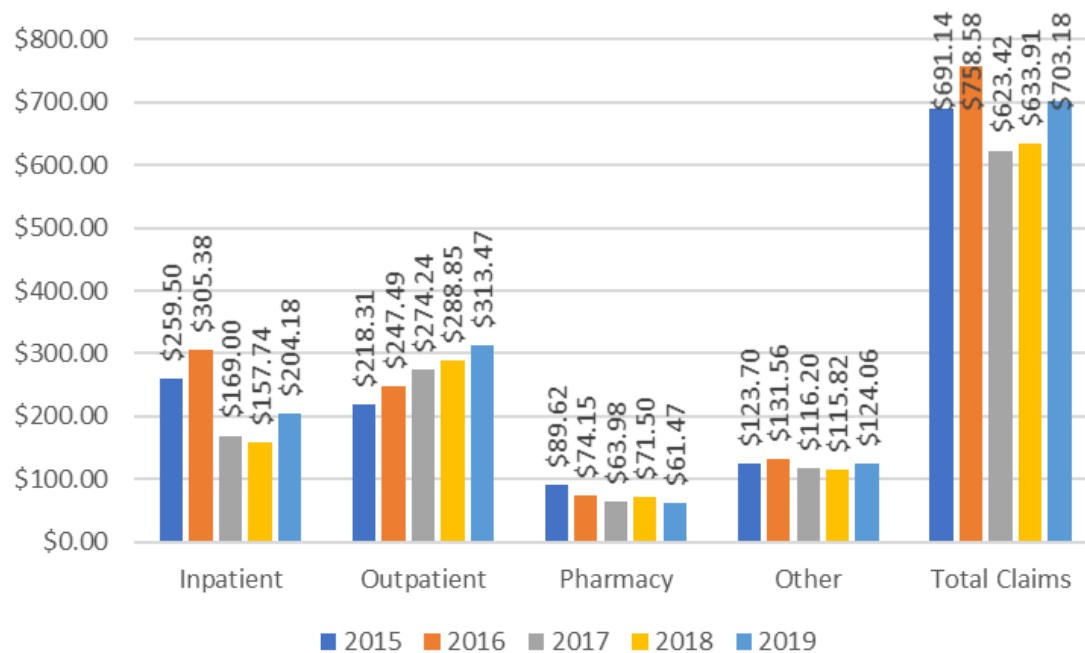


Diagnosis	2019 Claims
1 Sepsis Due to Streptococcus Pneumoniae	\$2,089,081
2 Other General Symptoms and Signs	\$448,032
3 Malignant Neoplasm of Thyroid Gland	\$446,247
4 Other Specified Sepsis	\$401,014
5 Hypertensive Heart and Chronic Kidney Disease w/ Heart Failure	\$371,546
6 Nonrheumatic Aortic (Valve) Insufficiency	\$318,134
Total	\$4,074,054

Premium & Claims	2015	2016	2017	2018	2019
Premium	\$32,484,151	\$31,582,829	\$35,307,623	\$38,665,574	\$38,093,075
Net Paid Claims	\$29,773,500	\$33,627,950	\$28,189,333	\$30,385,948	\$34,746,396
Net Paid Claim Loss Ratio	91.7%	106.5%	79.8%	78.6%	91.2%
High Cost Claimants	2015	2016	2017	2018	2019
Pooling Point	\$265,000	\$265,000	\$265,000	\$265,000	\$280,000
Number of Pooled Claimants	9	12	3	3	6
Pooled Amount	\$3,611,211	\$5,822,344	\$1,370,716	\$1,166,402	\$4,074,054
Gross Paid Claims	\$33,384,711	\$39,450,294	\$29,560,049	\$31,552,350	\$38,820,450
Gross Paid Claim Loss Ratio	102.8%	124.9%	83.7%	81.6%	101.9%

Kaiser – Claim Summary

- Total Claims for 2019, are near the 2015 level, but on a rising trend since 2017
- A steady annual trend between 5.3% and 13.4% has occurred in Outpatient Services
- Inpatient costs have decreased over time due to Kaiser's effort to provide more services on an Outpatient basis



Claims Summary	2015	2016	% Change	2017	% Change	2018	% Change	2019	% Change
Inpatient	\$259.50	\$305.38	17.7%	\$169.00	-44.7%	\$157.74	-6.7%	\$204.18	29.4%
Outpatient	\$218.31	\$247.49	13.4%	\$274.24	10.8%	\$288.85	5.3%	\$313.47	8.5%
Pharmacy	\$89.62	\$74.15	-17.3%	\$63.98	-13.7%	\$71.50	11.8%	\$61.47	-14.0%
Other	\$123.70	\$131.56	6.4%	\$116.20	-11.7%	\$115.82	-0.3%	\$124.06	7.1%
Total Claims	\$691.14	\$758.58	9.8%	\$623.42	-17.8%	\$633.91	1.7%	\$703.18	10.9%

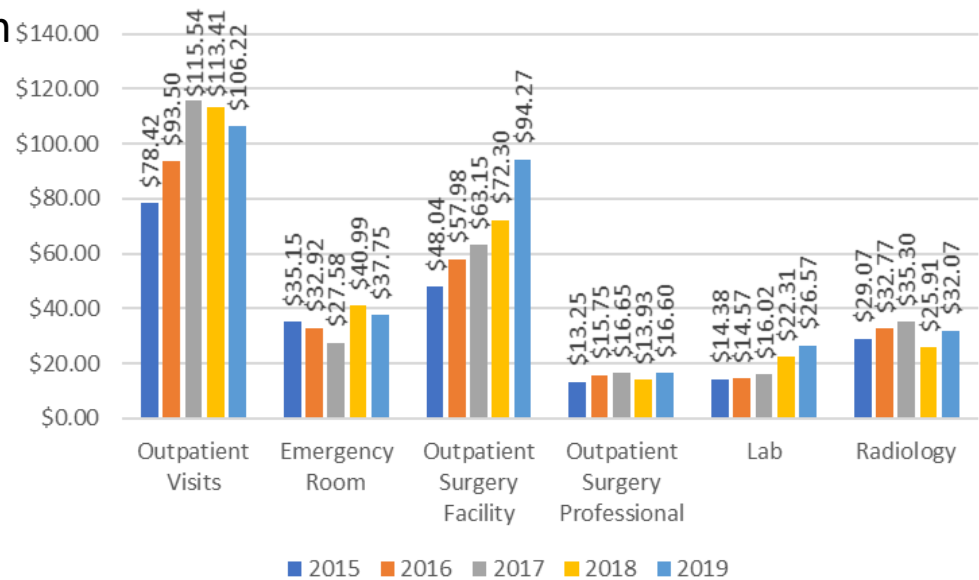
Kaiser – Inpatient Summary

Inpatient PMPM	2015	2016	% Change	2017	% Change	2018	% Change	2019	% Change
Medical - Hospital	\$117.23	\$117.44	0.2%	\$60.43	-48.5%	\$56.69	-6.2%	\$61.06	7.7%
Medical - Professional	\$16.24	\$15.95	-1.8%	\$7.78	-51.2%	\$8.19	5.3%	\$10.12	23.6%
Surgical									
Surgical - Hospital	\$104.34	\$143.41	37.4%	\$86.18	-39.9%	\$77.16	-10.5%	\$106.58	38.1%
Surgical - Professional	\$15.14	\$19.39	28.0%	\$10.92	-43.7%	\$8.78	-19.6%	\$14.79	68.5%
Maternity									
Maternity - Hospital	\$1.02	\$0.84	-17.6%	\$1.07	27.4%	\$1.45	35.5%	\$0.67	-53.8%
Maternity - Professional	\$0.35	\$0.33	-5.7%	\$0.42	27.3%	\$0.58	38.1%	\$0.25	-56.9%
Mental Health	\$0.98	\$2.84	189.8%	\$1.21	-57.4%	\$2.42	100.0%	\$5.01	107.1%
Substance Abuse	\$0.00	\$1.49	0.0%	\$0.98	-34.2%	\$0.19	-81.0%	\$2.76	1382.9%
SNF	\$4.21	\$3.68	-12.6%	\$0.02	-99.5%	\$2.28	11300.0%	\$2.93	28.5%
Total Inpatient PMPM	\$259.50	\$305.38	17.7%	\$169.01	-44.7%	\$157.74	-6.7%	\$204.17	29.4%

- Inpatient Cost are lead by Facility Charges accounting for 82.1% of Inpatient Cost
- Inpatient Professional services only account for 12.3% of Inpatient Cost

Kaiser – Outpatient Summary

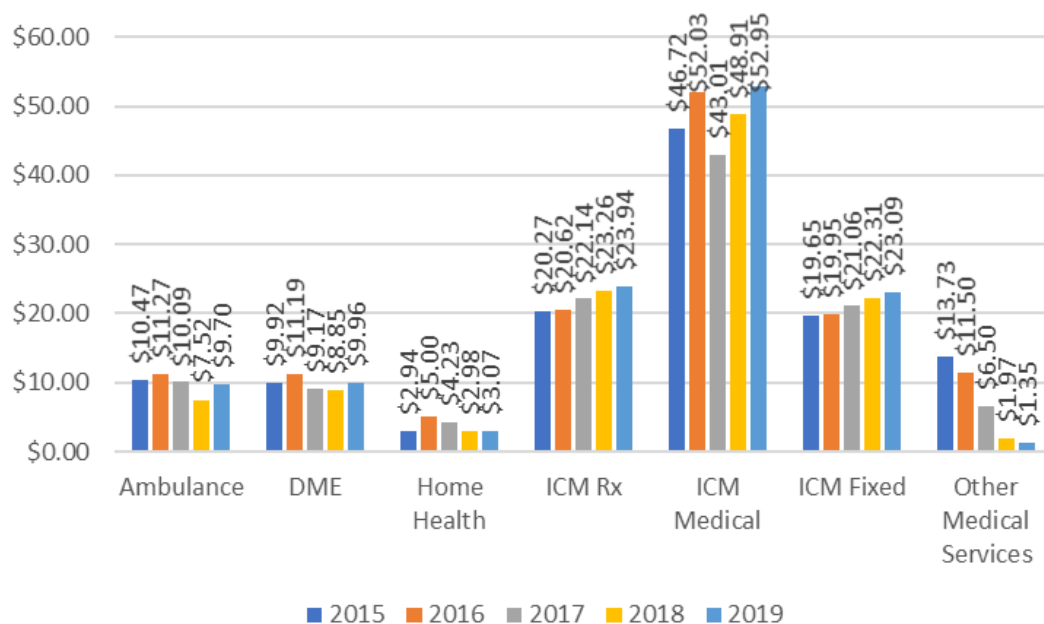
- Total Outpatient cost increased 8.5% from \$288.85 to \$313.48 pmpm
 - Outpatient visits decreased -6.3%
 - Emergency room decreased -7.9%
 - OP Surgery Facility increased 30.4%
 - OP Surgery Professional increased 19.2%
 - Laboratory services increased 19.1%
 - Radiology increased 23.8%



Outpatient PMPM	2015	2016	% Change	2017	% Change	2018	% Change	2019	% Change
Outpatient Visits	\$78.42	\$93.50	19.2%	\$115.54	23.6%	\$113.41	-1.8%	\$106.22	-6.3%
Emergency Room	\$35.15	\$32.92	-6.3%	\$27.58	-16.2%	\$40.99	48.6%	\$37.75	-7.9%
Outpatient Surgery Facility	\$48.04	\$57.98	20.7%	\$63.15	8.9%	\$72.30	14.5%	\$94.27	30.4%
Outpatient Surgery Professional	\$13.25	\$15.75	18.9%	\$16.65	5.7%	\$13.93	-16.3%	\$16.60	19.2%
Lab	\$14.38	\$14.57	1.3%	\$16.02	10.0%	\$22.31	39.3%	\$26.57	19.1%
Radiology	\$29.07	\$32.77	12.7%	\$35.30	7.7%	\$25.91	-26.6%	\$32.07	23.8%
Total Outpatient PMPM	\$218.31	\$247.49	13.4%	\$274.24	10.8%	\$288.85	5.3%	\$313.48	8.5%

Kaiser – Other Summary

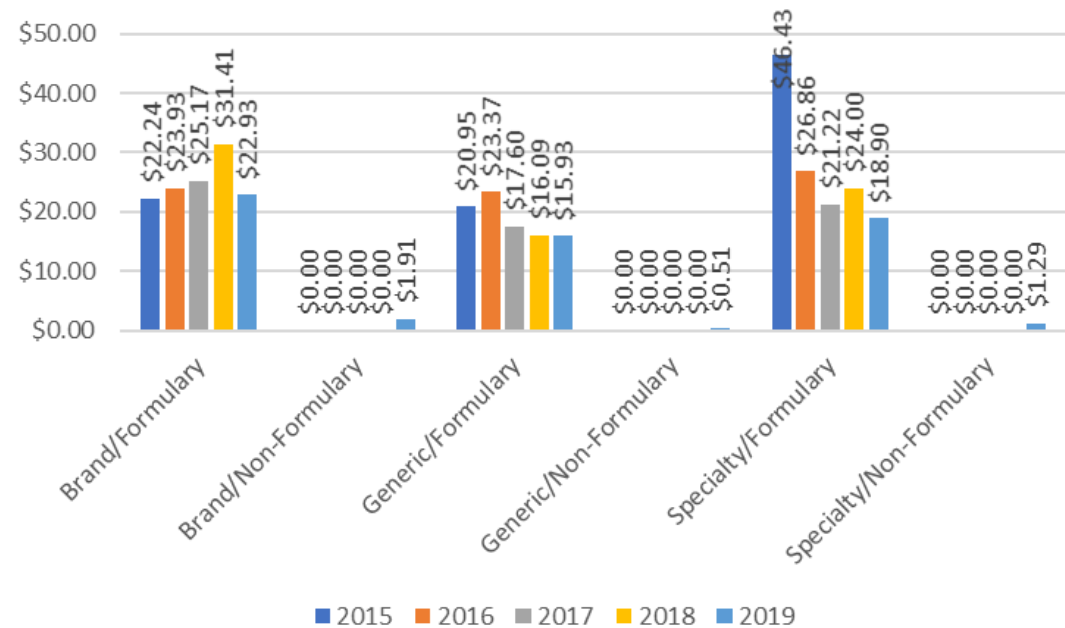
- Total Other cost increased 7.1% from \$115.80 to \$124.06 pmpm
- While most other services have maintained cost, Integrated care management for medical services, prescription drug services, and fixed ICM costs have shown a steady increase over the last five years



Other PMPM	2015	2016	% Change	2017	% Change	2018	% Change	2019	% Change
Ambulance	\$10.47	\$11.27	7.6%	\$10.09	-10.5%	\$7.52	-25.5%	\$9.70	29.0%
DME	\$9.92	\$11.19	12.8%	\$9.17	-18.1%	\$8.85	-3.5%	\$9.96	12.5%
Home Health	\$2.94	\$5.00	70.1%	\$4.23	-15.4%	\$2.98	-29.6%	\$3.07	3.0%
ICM Rx	\$20.27	\$20.62	1.7%	\$22.14	7.4%	\$23.26	5.1%	\$23.94	2.9%
ICM Medical	\$46.72	\$52.03	11.4%	\$43.01	-17.3%	\$48.91	13.7%	\$52.95	8.3%
ICM Fixed	\$19.65	\$19.95	1.5%	\$21.06	5.6%	\$22.31	5.9%	\$23.09	3.5%
Other Medical Services	\$13.73	\$11.50	-16.2%	\$6.50	-43.5%	\$1.97	-69.7%	\$1.35	-31.5%
Total Other PMPM	\$123.70	\$131.56	6.4%	\$116.20	-11.7%	\$115.80	-0.3%	\$124.06	7.1%

Kaiser – Pharmacy Summary

- Total Pharmacy cost decreased - 14.0% from \$71.50 to \$61.47 pmpm
- Formulary Brand and Specialty Brand drugs lead the cost decrease with a -27.0% and -21.3% reduction in cost over 2018

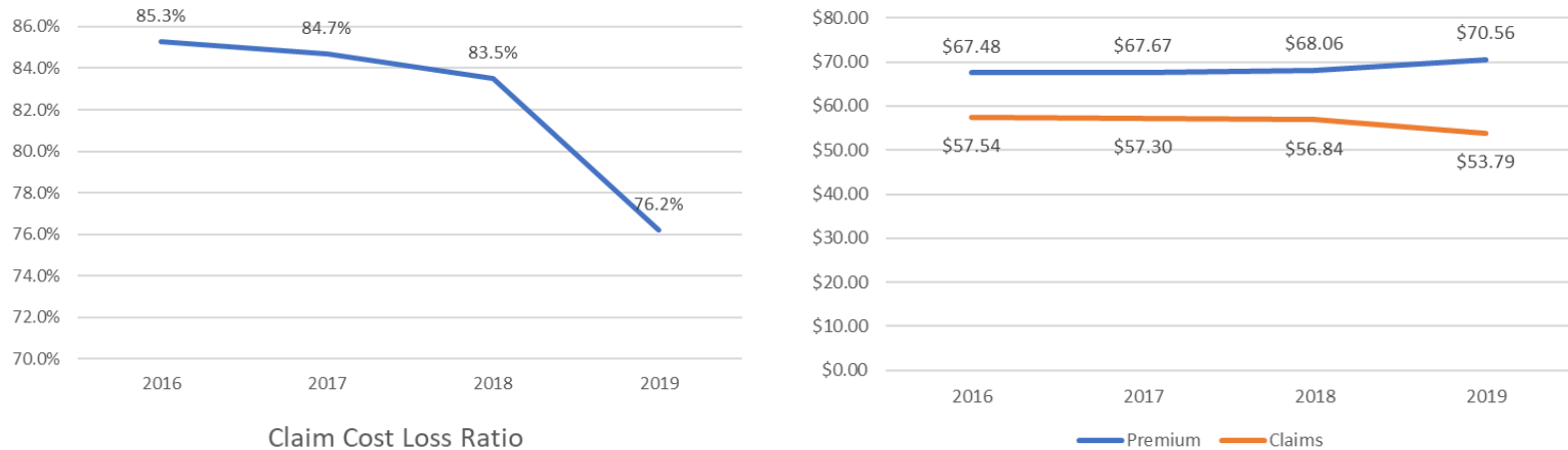


Pharmacy PMPM	2015	2016	% Change	2017	% Change	2018	% Change	2019	% Change
Brand/Formulary	\$22.24	\$23.93	7.6%	\$25.17	5.2%	\$31.41	24.8%	\$22.93	-27.0%
Brand/Non-Formulary	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%	\$1.91	0.0%
Generic/Formulary	\$20.95	\$23.37	11.6%	\$17.60	-24.7%	\$16.09	-8.6%	\$15.93	-1.0%
Generic/Non-Formulary	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%	\$0.51	0.0%
Specialty/Formulary	\$46.43	\$26.86	-42.1%	\$21.22	-21.0%	\$24.00	13.1%	\$18.90	-21.3%
Specialty/Non-Formulary	\$0.00	\$0.00	0.0%	\$0.00	0.0%	\$0.00	0.0%	\$1.29	0.0%
Total Pharmacy PMPM	\$89.62	\$74.15	-17.3%	\$63.99	-13.7%	\$71.50	11.7%	\$61.47	-14.0%

Delta Dental

Delta Dental – Summary

- For 2019, LACERS self-funded the dental plan
- Premium equivalent exceeded claims for a 76.2% claim cost loss ratio.
- The claim cost below for 2019 is considered immature. A reserve of \$521,600 is recommended for LACERS to cover incurred but not reported (run-out) claims

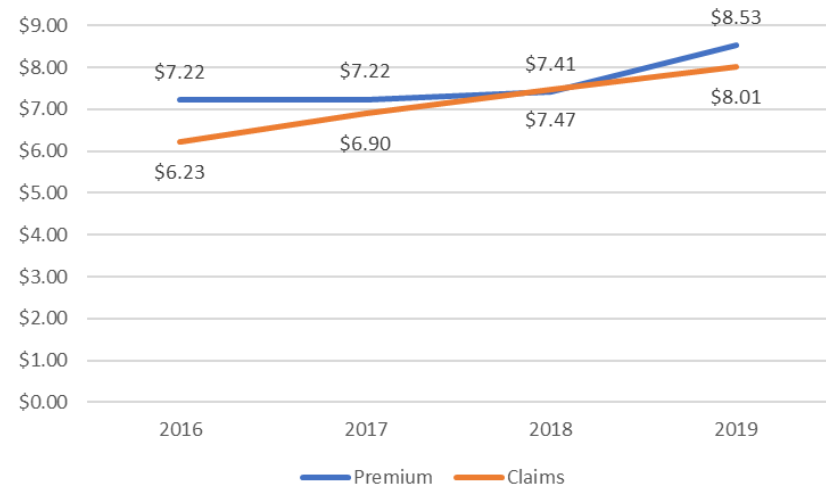
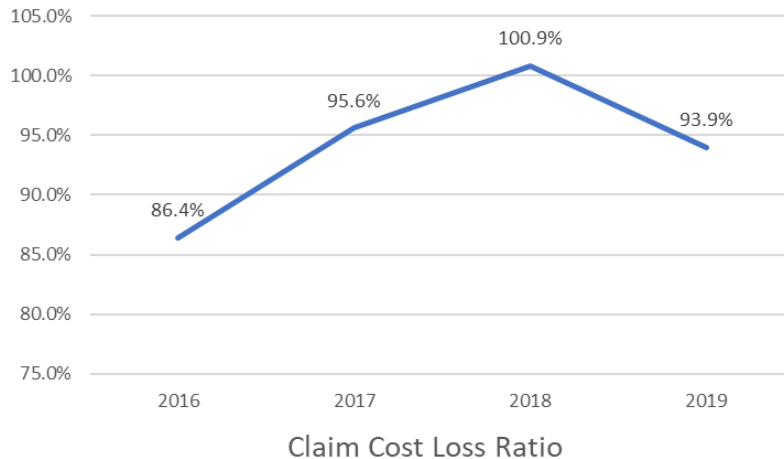


Delta Dental	2016	2017	% Change	2018	% Change	2019	% Change
Average Members	10,794	11,150	3.3%	11,559	3.7%	12,029	4.1%
Premium	\$8,740,607	\$9,054,217	3.6%	\$9,440,831	4.3%	\$10,185,820	7.9%
Claims	\$7,453,548	\$7,666,357	2.9%	\$7,884,355	2.8%	\$7,763,760	-1.5%
Loss Ratio	85.3%	84.7%	-0.7%	83.5%	-1.4%	76.2%	-8.7%
Premium PMPM	\$67.48	\$67.67	0.3%	\$68.06	0.6%	\$70.56	3.7%
Claims PMPM	\$57.54	\$57.30	-0.4%	\$56.84	-0.8%	\$53.79	-5.4%

Anthem Blue View Vision

Anthem Blue View Vision – Executive Summary

- For 2019, claim cost was \$8.01 pmpm for a 93.9% loss ratio



Anthem Blue View	2016	2017	% Change	2018	% Change	2019	% Change
Average Members	7,129	7,353	3.1%	7,641	3.9%	7,089	-7.2%
Premium	\$617,329	\$636,952	3.2%	\$679,099	6.6%	\$725,266	6.8%
Claims	\$533,380	\$608,902	14.2%	\$684,891	12.5%	\$681,374	-0.5%
Loss Ratio	86.4%	95.6%	10.6%	100.9%	5.5%	93.9%	-6.8%
Premium PMPM	\$7.22	\$7.22	0.0%	\$7.41	2.6%	\$8.53	15.1%
Claims PMPM	\$6.23	\$6.90	10.7%	\$7.47	8.2%	\$8.01	7.2%

Next Steps

Next Steps



- Develop coordinated carrier strategy using dashboard findings:
 - Share dashboard findings with carriers
 - Seek carrier programs to better serve LACERS' membership
 - Prepare for upcoming 2021 renewal
- Review with LACERS the 2019 financial dashboard and develop 2021 key benefit initiatives

Appendix

Anthem Blue Cross PPO – Monthly Premium and Claims Summary



	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Retirees	4,102	4,117	4,124	4,153	4,171	4,189	4,199	4,207	4,226	4,237	4,242	4,249	4,185
Premium	\$ 2,325,037	\$ 2,171,193	\$ 1,755,650	\$ 2,191,037	\$ 2,243,473	\$ 2,272,895	\$ 2,186,785	\$ 2,255,384	\$ 2,259,094	\$ 2,291,792	\$ 2,279,137	\$ 2,273,182	\$ 26,504,659
Claims	\$ 1,434,756	\$ 1,251,569	\$ 1,655,633	\$ 1,890,888	\$ 1,879,563	\$ 2,085,488	\$ 1,817,724	\$ 2,034,197	\$ 1,888,351	\$ 1,982,553	\$ 2,425,792	\$ 2,134,554	\$ 22,481,068
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Retirees	3,964	3,963	3,979	4,012	4,029	4,061	4,081	4,115	4,145	4,168	4,182	4,196	4,075
Premium	\$ 2,108,087	\$ 2,213,117	\$ 2,047,322	\$ 2,219,356	\$ 2,226,618	\$ 2,143,259	\$ 2,277,232	\$ 2,270,932	\$ 2,314,606	\$ 2,315,659	\$ 2,329,326	\$ 2,294,064	\$ 26,759,578
Claims	\$ 1,437,361	\$ 1,504,362	\$ 2,045,506	\$ 1,447,687	\$ 1,942,384	\$ 2,016,506	\$ 1,952,469	\$ 1,889,571	\$ 1,412,122	\$ 2,757,743	\$ 1,850,689	\$ 1,862,627	\$ 22,119,027
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Retirees	3,838	3,909	3,934	3,870	3,886	3,856	3,873	3,947	3,919	3,934	4,031	3,929	3,911
Premium	\$ 1,926,978	\$ 1,978,730	\$ 2,006,821	\$ 1,965,298	\$ 1,986,401	\$ 1,944,582	\$ 1,775,361	\$ 2,010,426	\$ 1,891,199	\$ 2,006,798	\$ 2,024,301	\$ 1,904,998	\$ 23,421,893
Claims	\$ 1,579,959	\$ 2,676,376	\$ 2,118,584	\$ 1,502,085	\$ 1,648,562	\$ 1,803,725	\$ 2,069,502	\$ 1,797,383	\$ 1,463,551	\$ 1,270,688	\$ 2,054,775	\$ 1,612,104	\$ 21,597,294
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Retirees	3,686	3,779	3,741	3,779	3,769	3,775	3,819	3,800	3,824	3,813	3,849	3,826	3,788
Premium	\$ 1,727,736	\$ 1,813,052	\$ 1,785,189	\$ 1,799,779	\$ 1,782,113	\$ 1,816,176	\$ 1,821,315	\$ 1,820,245	\$ 1,847,355	\$ 1,838,540	\$ 1,850,391	\$ 1,828,579	\$ 21,730,470
Claims	\$ 1,378,405	\$ 1,117,151	\$ 1,478,871	\$ 1,266,440	\$ 1,486,157	\$ 1,646,629	\$ 1,430,059	\$ 1,527,161	\$ 1,489,970	\$ 1,441,605	\$ 1,698,688	\$ 1,650,221	\$ 17,611,357
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Retirees	3,561	3,687	3,645	3,651	3,677	3,630	3,683	3,721	3,668	3,707	3,705	3,623	3,663
Premium	\$ 2,207,448	\$ 2,332,280	\$ 2,306,408	\$ 2,286,441	\$ 2,306,379	\$ 2,291,149	\$ 2,329,235	\$ 2,350,454	\$ 2,294,500	\$ 2,317,084	\$ 2,328,591	\$ 2,242,589	\$ 27,592,559
Claims	\$ 1,809,972	\$ 1,467,236	\$ 1,474,743	\$ 2,282,917	\$ 1,543,014	\$ 1,736,139	\$ 2,068,048	\$ 1,690,055	\$ 1,951,923	\$ 1,802,310	\$ 2,120,645	\$ 1,860,588	\$ 21,807,589

Anthem Blue Cross PPO –



Per Employee Per Month Premium and Claims Summary

	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Retirees	4,102	4,117	4,124	4,153	4,171	4,189	4,199	4,207	4,226	4,237	4,242	4,249	4,185
Premium	\$ 566.81	\$ 527.37	\$ 425.72	\$ 527.58	\$ 537.87	\$ 542.59	\$ 520.79	\$ 536.10	\$ 534.57	\$ 540.90	\$ 537.28	\$ 534.99	\$ 527.71
Claims	\$ 349.77	\$ 304.00	\$ 401.46	\$ 455.31	\$ 450.63	\$ 497.85	\$ 432.89	\$ 483.53	\$ 446.84	\$ 467.91	\$ 571.85	\$ 502.37	\$ 447.03
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Retirees	3,964	3,963	3,979	4,012	4,029	4,061	4,081	4,115	4,145	4,168	4,182	4,196	4,075
Premium	\$ 531.81	\$ 558.44	\$ 514.53	\$ 553.18	\$ 552.65	\$ 527.77	\$ 558.01	\$ 551.87	\$ 558.41	\$ 555.58	\$ 556.99	\$ 546.73	\$ 547.29
Claims	\$ 362.60	\$ 379.60	\$ 514.08	\$ 360.84	\$ 482.10	\$ 496.55	\$ 478.43	\$ 459.19	\$ 340.68	\$ 661.65	\$ 442.54	\$ 443.91	\$ 452.38
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Retirees	3,838	3,909	3,934	3,870	3,886	3,856	3,873	3,947	3,919	3,934	4,031	3,929	3,911
Premium	\$ 502.08	\$ 506.20	\$ 510.12	\$ 507.83	\$ 511.17	\$ 504.30	\$ 458.39	\$ 509.36	\$ 482.57	\$ 510.12	\$ 502.18	\$ 484.86	\$ 499.12
Claims	\$ 411.66	\$ 684.67	\$ 538.53	\$ 388.14	\$ 424.23	\$ 467.77	\$ 534.34	\$ 455.38	\$ 373.45	\$ 323.00	\$ 509.74	\$ 410.31	\$ 460.24
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Retirees	3,686	3,779	3,741	3,779	3,769	3,775	3,819	3,800	3,824	3,813	3,849	3,826	3,788
Premium	\$ 468.73	\$ 479.77	\$ 477.20	\$ 476.26	\$ 472.83	\$ 481.11	\$ 476.91	\$ 479.01	\$ 483.09	\$ 482.18	\$ 480.75	\$ 477.93	\$ 478.01
Claims	\$ 373.96	\$ 295.62	\$ 395.31	\$ 335.13	\$ 394.31	\$ 436.19	\$ 374.46	\$ 401.88	\$ 389.64	\$ 378.08	\$ 441.33	\$ 431.32	\$ 387.40
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Retirees	3,561	3,687	3,645	3,651	3,677	3,630	3,683	3,721	3,668	3,707	3,705	3,623	3,663
Premium	\$ 619.90	\$ 632.57	\$ 632.76	\$ 626.25	\$ 627.24	\$ 631.17	\$ 632.43	\$ 631.67	\$ 625.55	\$ 625.06	\$ 628.50	\$ 618.99	\$ 627.70
Claims	\$ 508.28	\$ 397.95	\$ 404.59	\$ 625.29	\$ 419.64	\$ 478.28	\$ 561.51	\$ 454.19	\$ 532.15	\$ 486.19	\$ 572.37	\$ 513.55	\$ 496.10

Anthem Blue Cross HMO – Monthly Premium and Claims Summary



	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Retirees	768	779	785	795	803	806	818	818	828	821	815	806	804
Premium	\$ 964,929	\$ 978,750	\$ 986,288	\$ 998,853	\$ 1,008,904	\$ 1,012,673	\$ 1,027,750	\$ 1,027,750	\$ 1,040,314	\$ 1,031,519	\$ 1,023,981	\$ 1,012,673	\$ 12,114,384
Claims	\$ 816,069	\$ 908,388	\$ 859,984	\$ 1,309,970	\$ 727,839	\$ 762,997	\$ 833,831	\$ 1,166,212	\$ 1,026,500	\$ 1,038,197	\$ 980,281	\$ 867,528	\$ 11,297,796
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Retirees	848	853	862	872	888	896	885	894	903	909	917	923	888
Premium	\$ 1,231,168	\$ 1,258,060	\$ 1,088,455	\$ 1,251,256	\$ 1,243,772	\$ 1,322,926	\$ 1,351,647	\$ 1,320,972	\$ 1,298,594	\$ 1,243,701	\$ 1,335,136	\$ 1,306,719	\$ 15,252,406
Claims	\$ 962,346	\$ 695,105	\$ 1,265,144	\$ 954,252	\$ 788,631	\$ 1,023,184	\$ 1,163,757	\$ 1,086,229	\$ 836,634	\$ 1,322,936	\$ 882,834	\$ 1,023,606	\$ 12,004,658
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Retirees	784	815	788	797	844	825	787	842	857	839	860	843	823
Premium	\$ 1,044,772	\$ 1,076,927	\$ 1,052,062	\$ 1,061,615	\$ 1,135,200	\$ 1,110,027	\$ 1,009,107	\$ 1,107,553	\$ 1,128,335	\$ 1,129,192	\$ 1,158,671	\$ 1,152,094	\$ 13,165,555
Claims	\$ 908,415	\$ 887,394	\$ 1,090,354	\$ 779,124	\$ 920,028	\$ 1,528,446	\$ 889,390	\$ 884,263	\$ 914,962	\$ 762,349	\$ 1,171,923	\$ 1,082,764	\$ 11,819,412
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Retirees	768	764	713	767	751	759	736	759	762	771	771	754	756
Premium	\$ 1,059,289	\$ 1,047,518	\$ 999,160	\$ 1,048,266	\$ 1,038,163	\$ 1,038,621	\$ 990,208	\$ 1,050,928	\$ 1,026,857	\$ 1,029,708	\$ 1,037,445	\$ 1,030,877	\$ 12,397,041
Claims	\$ 833,016	\$ 918,929	\$ 832,864	\$ 905,215	\$ 814,722	\$ 924,473	\$ 1,033,931	\$ 827,021	\$ 1,247,048	\$ 861,241	\$ 820,963	\$ 1,137,731	\$ 11,157,154
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Retirees	784	717	759	746	736	776	772	765	757	754	754	682	750
Premium	\$ 956,186	\$ 899,834	\$ 966,702	\$ 926,502	\$ 918,252	\$ 973,272	\$ 973,606	\$ 964,541	\$ 973,048	\$ 950,139	\$ 960,100	\$ 871,964	\$ 11,334,147
Claims	\$ 676,797	\$ 1,041,922	\$ 640,752	\$ 670,913	\$ 932,706	\$ 777,484	\$ 813,275	\$ 876,307	\$ 793,769	\$ 730,081	\$ 740,746	\$ 823,701	\$ 9,518,453

Anthem Blue Cross HMO –



Per Employee Per Month Premium and Claims Summary

	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Retirees	768	779	785	795	803	806	818	818	828	821	815	806	804
Premium	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42	\$ 1,256.42
Claims	\$ 1,062.59	\$ 1,166.09	\$ 1,095.52	\$ 1,647.76	\$ 906.40	\$ 946.65	\$ 1,019.35	\$ 1,425.69	\$ 1,239.73	\$ 1,264.55	\$ 1,202.80	\$ 1,076.34	\$ 1,171.12
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Retirees	848	853	862	872	888	896	885	894	903	909	917	923	888
Premium	\$ 1,451.85	\$ 1,474.86	\$ 1,262.71	\$ 1,434.93	\$ 1,400.64	\$ 1,476.48	\$ 1,527.28	\$ 1,477.60	\$ 1,438.09	\$ 1,368.21	\$ 1,455.98	\$ 1,415.73	\$ 1,432.15
Claims	\$ 1,134.84	\$ 814.89	\$ 1,467.68	\$ 1,094.33	\$ 888.10	\$ 1,141.95	\$ 1,314.98	\$ 1,215.02	\$ 926.51	\$ 1,455.38	\$ 962.74	\$ 1,109.00	\$ 1,127.20
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Retirees	784	815	788	797	844	825	787	842	857	839	860	843	823
Premium	\$ 1,332.62	\$ 1,321.38	\$ 1,335.10	\$ 1,332.01	\$ 1,345.02	\$ 1,345.49	\$ 1,282.22	\$ 1,315.38	\$ 1,316.61	\$ 1,345.88	\$ 1,347.29	\$ 1,366.66	\$ 1,332.41
Claims	\$ 1,158.69	\$ 1,088.83	\$ 1,383.70	\$ 977.57	\$ 1,090.08	\$ 1,852.66	\$ 1,130.10	\$ 1,050.19	\$ 1,067.63	\$ 908.64	\$ 1,362.70	\$ 1,284.42	\$ 1,196.18
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Retirees	768	764	713	767	751	759	736	759	762	771	771	754	756
Premium	\$ 1,379.28	\$ 1,371.10	\$ 1,401.35	\$ 1,366.71	\$ 1,382.37	\$ 1,368.41	\$ 1,345.39	\$ 1,384.62	\$ 1,347.58	\$ 1,335.55	\$ 1,345.58	\$ 1,367.21	\$ 1,366.07
Claims	\$ 1,084.66	\$ 1,202.79	\$ 1,168.11	\$ 1,180.20	\$ 1,084.85	\$ 1,218.01	\$ 1,404.80	\$ 1,089.62	\$ 1,636.55	\$ 1,117.04	\$ 1,064.80	\$ 1,508.93	\$ 1,229.44
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Retirees	784	717	759	746	736	776	772	765	757	754	754	682	750
Premium	\$ 1,219.63	\$ 1,255.00	\$ 1,273.65	\$ 1,241.96	\$ 1,247.63	\$ 1,254.22	\$ 1,261.15	\$ 1,260.84	\$ 1,285.40	\$ 1,260.13	\$ 1,273.34	\$ 1,278.54	\$ 1,259.07
Claims	\$ 863.26	\$ 1,453.17	\$ 844.21	\$ 899.35	\$ 1,267.26	\$ 1,001.91	\$ 1,053.47	\$ 1,145.50	\$ 1,048.57	\$ 968.28	\$ 982.42	\$ 1,207.77	\$ 1,057.37

Kaiser –

Monthly Premium and Claims Summary



	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Members	4,056	4,051	4,089	4,139	4,145	4,158	4,170	4,158	4,167	4,122	4,097	4,061	4,118
Premium	\$ 3,126,819	\$ 3,122,965	\$ 3,152,259	\$ 3,190,805	\$ 3,195,430	\$ 3,205,452	\$ 3,214,703	\$ 3,205,452	\$ 3,212,390	\$ 3,177,699	\$ 3,158,426	\$ 3,130,674	\$ 38,093,074
Claims	\$ 2,773,098	\$ 2,198,082	\$ 2,482,638	\$ 2,548,366	\$ 2,544,412	\$ 2,363,768	\$ 3,435,651	\$ 3,050,397	\$ 2,354,707	\$ 2,993,508	\$ 5,214,113	\$ 2,787,655	\$ 34,746,395
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Members	3,800	3,780	3,864	4,011	3,985	3,990	4,029	4,060	4,161	4,126	4,168	4,178	4,013
Premium	\$ 3,051,362	\$ 3,035,302	\$ 3,102,753	\$ 3,220,793	\$ 3,199,915	\$ 3,203,930	\$ 3,235,247	\$ 3,260,139	\$ 3,341,241	\$ 3,313,137	\$ 3,346,862	\$ 3,354,892	\$ 38,665,574
Claims	\$ 2,688,477	\$ 2,283,585	\$ 2,019,194	\$ 2,140,224	\$ 2,283,457	\$ 2,993,169	\$ 3,232,660	\$ 2,296,956	\$ 2,828,420	\$ 3,071,918	\$ 2,150,606	\$ 2,397,282	\$ 30,385,948
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Members	3,733	3,712	3,713	3,745	3,782	3,765	3,744	3,787	3,781	3,812	3,843	3,815	3,769
Premium	\$ 2,912,524	\$ 2,896,140	\$ 2,896,920	\$ 2,921,886	\$ 2,950,754	\$ 2,937,491	\$ 2,921,106	\$ 2,954,655	\$ 2,949,974	\$ 2,974,161	\$ 2,998,347	\$ 2,976,501	\$ 35,290,459
Claims	\$ 2,467,331	\$ 2,134,732	\$ 3,368,101	\$ 2,630,415	\$ 2,214,887	\$ 1,711,140	\$ 2,293,468	\$ 2,533,288	\$ 2,098,372	\$ 2,218,897	\$ 2,550,296	\$ 1,968,406	\$ 28,189,333
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Members	3,640	3,657	3,671	3,667	3,700	3,700	3,708	3,742	3,724	3,713	3,716	3,695	3,694
Premium	\$ 2,593,136	\$ 2,605,247	\$ 2,615,220	\$ 2,612,371	\$ 2,635,880	\$ 2,635,880	\$ 2,641,579	\$ 2,665,801	\$ 2,652,978	\$ 2,645,141	\$ 2,647,278	\$ 2,632,318	\$ 31,582,829
Claims	\$ 2,555,199	\$ 3,776,444	\$ 3,014,380	\$ 2,976,014	\$ 3,289,930	\$ 2,560,709	\$ 3,142,465	\$ 2,551,200	\$ 2,371,659	\$ 2,305,036	\$ 2,377,768	\$ 2,704,146	\$ 33,624,950
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Members	3,497	3,519	3,557	3,577	3,605	3,602	3,633	3,651	3,634	3,608	3,603	3,597	3,590
Premium	\$ 2,636,703	\$ 2,653,291	\$ 2,681,942	\$ 2,697,022	\$ 2,718,134	\$ 2,715,872	\$ 2,739,246	\$ 2,752,817	\$ 2,740,000	\$ 2,720,396	\$ 2,716,626	\$ 2,712,102	\$ 32,484,151
Claims	\$ 2,385,244	\$ 2,087,995	\$ 2,350,843	\$ 2,677,802	\$ 2,264,638	\$ 2,462,225	\$ 2,579,045	\$ 2,449,195	\$ 2,736,786	\$ 2,663,993	\$ 2,974,071	\$ 2,141,663	\$ 29,773,500

Kaiser –



Per Employee Per Month Premium and Claims Summary

	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Members	4,056	4,051	4,089	4,139	4,145	4,158	4,170	4,158	4,167	4,122	4,097	4,061	4,118
Premium	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91	\$ 770.91
Claims	\$ 683.70	\$ 542.60	\$ 607.15	\$ 615.70	\$ 613.85	\$ 568.49	\$ 823.90	\$ 733.62	\$ 565.08	\$ 726.23	\$ 1,272.67	\$ 686.45	\$ 703.18
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Members	3,800	3,780	3,864	4,011	3,985	3,990	4,029	4,060	4,161	4,126	4,168	4,178	4,013
Premium	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99	\$ 802.99
Claims	\$ 707.49	\$ 604.12	\$ 522.57	\$ 533.59	\$ 573.01	\$ 750.17	\$ 802.35	\$ 565.75	\$ 679.75	\$ 744.53	\$ 515.98	\$ 573.79	\$ 631.04
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Members	3,733	3,712	3,713	3,745	3,782	3,765	3,744	3,787	3,781	3,812	3,843	3,815	3,769
Premium	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21	\$ 780.21
Claims	\$ 660.95	\$ 575.09	\$ 907.11	\$ 702.38	\$ 585.64	\$ 454.49	\$ 612.57	\$ 668.94	\$ 554.98	\$ 582.08	\$ 663.62	\$ 515.96	\$ 623.22
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Members	3,640	3,657	3,671	3,667	3,700	3,700	3,708	3,742	3,724	3,713	3,716	3,695	3,694
Premium	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40	\$ 712.40
Claims	\$ 701.98	\$ 1,032.66	\$ 821.13	\$ 811.57	\$ 889.17	\$ 692.08	\$ 847.48	\$ 681.77	\$ 636.86	\$ 620.80	\$ 639.87	\$ 731.84	\$ 758.46
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Members	3,497	3,519	3,557	3,577	3,605	3,602	3,633	3,651	3,634	3,608	3,603	3,597	3,590
Premium	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99	\$ 753.99
Claims	\$ 682.08	\$ 593.35	\$ 660.91	\$ 748.62	\$ 628.19	\$ 683.57	\$ 709.89	\$ 670.83	\$ 753.11	\$ 738.36	\$ 825.44	\$ 595.40	\$ 691.07

Delta Dental –

Monthly Premium and Claims Summary



	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Members	11,822	11,836	11,880	11,968	11,995	12,033	12,072	12,096	12,140	12,163	12,174	12,174	12,029
Premium	\$ 835,516	\$ 835,668	\$ 838,960	\$ 845,985	\$ 847,141	\$ 849,845	\$ 852,544	\$ 853,519	\$ 856,900	\$ 857,636	\$ 857,152	\$ 854,954	\$ 10,185,820
Claims	\$ 545,725	\$ 737,068	\$ 700,291	\$ 642,973	\$ 781,973	\$ 610,363	\$ 568,691	\$ 737,173	\$ 597,225	\$ 731,619	\$ 572,951	\$ 537,709	\$ 7,763,760
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Members	11,351	11,391	11,419	11,462	11,525	11,558	11,586	11,633	11,685	11,710	11,697	11,688	11,559
Premium	\$ 773,262	\$ 772,317	\$ 772,477	\$ 776,696	\$ 780,075	\$ 792,008	\$ 788,684	\$ 789,959	\$ 795,379	\$ 799,546	\$ 802,303	\$ 798,124	\$ 9,440,830
Claims	\$ 918,160	\$ 720,511	\$ 736,277	\$ 689,322	\$ 714,306	\$ 613,328	\$ 563,379	\$ 641,636	\$ 555,328	\$ 621,293	\$ 544,463	\$ 566,352	\$ 7,884,355
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Members	10,973	11,010	11,031	11,089	11,120	11,124	11,170	11,218	11,238	11,275	11,278	11,279	11,150
Premium	\$ 742,378	\$ 740,018	\$ 742,033	\$ 748,793	\$ 749,577	\$ 757,359	\$ 755,495	\$ 755,582	\$ 759,484	\$ 767,756	\$ 767,313	\$ 768,429	\$ 9,054,217
Claims	\$ 767,130	\$ 680,435	\$ 722,622	\$ 611,108	\$ 671,173	\$ 632,995	\$ 561,567	\$ 648,443	\$ 516,352	\$ 612,430	\$ 585,825	\$ 656,277	\$ 7,666,357
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Members	10,652	10,669	10,715	10,734	10,773	10,805	10,822	10,848	10,862	10,887	10,885	10,872	10,794
Premium	\$ 720,515	\$ 717,639	\$ 720,435	\$ 725,349	\$ 726,556	\$ 727,953	\$ 729,869	\$ 732,200	\$ 734,091	\$ 735,615	\$ 736,494	\$ 733,891	\$ 8,740,607
Claims	\$ 807,266	\$ 719,388	\$ 711,205	\$ 603,411	\$ 610,820	\$ 590,578	\$ 574,443	\$ 595,451	\$ 547,563	\$ 550,508	\$ 529,359	\$ 613,556	\$ 7,453,548
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Members	10,603	10,585	10,533	10,494	10,467	10,438	10,471	10,495	10,512	10,523	10,527	10,537	10,515
Premium	\$ 689,523	\$ 689,507	\$ 693,809	\$ 698,987	\$ 698,680	\$ 700,266	\$ 706,268	\$ 708,598	\$ 710,357	\$ 710,653	\$ 709,007	\$ 710,765	\$ 8,426,420
Claims	\$ 725,886	\$ 610,915	\$ 682,879	\$ 642,879	\$ 546,209	\$ 596,476	\$ 581,619	\$ 541,167	\$ 530,850	\$ 576,100	\$ 515,010	\$ 645,990	\$ 7,195,980

Delta Dental –

Per Employee Per Month Premium and Claims Summary



	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Members	11,822	11,836	11,880	11,968	11,995	12,033	12,072	12,096	12,140	12,163	12,174	12,174	12,029
Premium	\$ 70.67	\$ 70.60	\$ 70.62	\$ 70.69	\$ 70.62	\$ 70.63	\$ 70.62	\$ 70.56	\$ 70.58	\$ 70.51	\$ 70.41	\$ 70.23	\$ 70.56
Claims	\$ 46.16	\$ 62.27	\$ 58.95	\$ 53.72	\$ 65.19	\$ 50.72	\$ 47.11	\$ 60.94	\$ 49.19	\$ 60.15	\$ 47.06	\$ 44.17	\$ 53.80
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Members	11,351	11,391	11,419	11,462	11,525	11,558	11,586	11,633	11,685	11,710	11,697	11,688	11,559
Premium	\$ 68.12	\$ 67.80	\$ 67.65	\$ 67.76	\$ 67.69	\$ 68.52	\$ 68.07	\$ 67.91	\$ 68.07	\$ 68.28	\$ 68.59	\$ 68.29	\$ 68.06
Claims	\$ 80.89	\$ 63.25	\$ 64.48	\$ 60.14	\$ 61.98	\$ 53.07	\$ 48.63	\$ 55.16	\$ 47.52	\$ 53.06	\$ 46.55	\$ 48.46	\$ 56.93
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Members	10,973	11,010	11,031	11,089	11,120	11,124	11,170	11,218	11,238	11,275	11,278	11,279	11,150
Premium	\$ 67.65	\$ 67.21	\$ 67.27	\$ 67.53	\$ 67.41	\$ 68.08	\$ 67.64	\$ 67.35	\$ 67.58	\$ 68.09	\$ 68.04	\$ 68.13	\$ 67.67
Claims	\$ 69.91	\$ 61.80	\$ 65.51	\$ 55.11	\$ 60.36	\$ 56.90	\$ 50.27	\$ 57.80	\$ 45.95	\$ 54.32	\$ 51.94	\$ 58.19	\$ 57.29
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Members	10,652	10,669	10,715	10,734	10,773	10,805	10,822	10,848	10,862	10,887	10,885	10,872	10,794
Premium	\$ 67.64	\$ 67.26	\$ 67.24	\$ 67.57	\$ 67.44	\$ 67.37	\$ 67.44	\$ 67.50	\$ 67.58	\$ 67.57	\$ 67.66	\$ 67.50	\$ 67.48
Claims	\$ 75.79	\$ 67.43	\$ 66.37	\$ 56.21	\$ 56.70	\$ 54.66	\$ 53.08	\$ 54.89	\$ 50.41	\$ 50.57	\$ 48.63	\$ 56.43	\$ 57.55
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Members	10,603	10,585	10,533	10,494	10,467	10,438	10,471	10,495	10,512	10,523	10,527	10,537	10,515
Premium	\$ 65.03	\$ 65.14	\$ 65.87	\$ 66.61	\$ 66.75	\$ 67.09	\$ 67.45	\$ 67.52	\$ 67.58	\$ 67.53	\$ 67.35	\$ 67.45	\$ 66.78
Claims	\$ 68.46	\$ 57.72	\$ 64.83	\$ 61.26	\$ 52.18	\$ 57.14	\$ 55.55	\$ 51.56	\$ 50.50	\$ 54.75	\$ 48.92	\$ 611.32	\$ 57.03



	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Members	7,944	8,063	7,931	7,893	7,925	7,962	6,182	6,198	6,226	6,236	6,250	6,253	7,089
Premium	\$ 60,838	\$ 61,619	\$ 65,102	\$ 62,860	\$ 51,129	\$ 54,377	\$ 61,004	\$ 61,048	\$ 62,204	\$ 62,050	\$ 61,361	\$ 61,674	\$ 725,266
Claims	\$ 36,187	\$ 53,941	\$ 51,231	\$ 61,364	\$ 60,561	\$ 55,016	\$ 59,086	\$ 59,749	\$ 67,363	\$ 66,775	\$ 62,624	\$ 47,477	\$ 681,374
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Members	7,457	7,451	7,477	7,537	7,564	7,616	7,654	7,700	7,759	7,805	7,825	7,846	7,641
Premium	\$ 55,258	\$ 55,573	\$ 55,193	\$ 55,883	\$ 56,013	\$ 56,575	\$ 56,861	\$ 56,775	\$ 57,126	\$ 57,846	\$ 58,359	\$ 57,637	\$ 679,099
Claims	\$ 56,894	\$ 41,383	\$ 60,183	\$ 61,270	\$ 55,218	\$ 50,458	\$ 62,857	\$ 55,571	\$ 50,096	\$ 74,149	\$ 61,492	\$ 55,320	\$ 684,891
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Members	7,230	7,281	7,296	7,307	7,310	7,324	7,362	7,411	7,406	7,435	7,436	7,437	7,353
Premium	\$ 51,972	\$ 52,485	\$ 52,533	\$ 52,988	\$ 52,639	\$ 52,904	\$ 52,870	\$ 53,725	\$ 53,431	\$ 53,739	\$ 53,939	\$ 53,727	\$ 636,952
Claims	\$ 38,677	\$ 44,386	\$ 49,515	\$ 52,476	\$ 52,383	\$ 49,527	\$ 41,600	\$ 62,340	\$ 57,813	\$ 55,001	\$ 58,884	\$ 46,300	\$ 608,902
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Members	7,099	7,094	7,083	7,132	7,093	7,116	7,122	7,124	7,140	7,174	7,188	7,178	7,129
Premium	\$ 51,115	\$ 51,272	\$ 50,873	\$ 51,193	\$ 52,069	\$ 50,667	\$ 51,566	\$ 51,460	\$ 51,812	\$ 51,842	\$ 51,795	\$ 51,665	\$ 617,329
Claims	\$ 43,151	\$ 50,462	\$ 44,392	\$ 43,247	\$ 40,081	\$ 41,473	\$ 41,569	\$ 46,915	\$ 48,266	\$ 47,601	\$ 42,869	\$ 43,354	\$ 533,380
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Members	5,397	5,453	5,450	5,492	5,513	5,468	5,512	5,546	5,526	5,566	5,559	5,482	5,497
Premium	\$ 49,486	\$ 50,241	\$ 50,117	\$ 50,475	\$ 50,784	\$ 50,407	\$ 50,786	\$ 51,095	\$ 51,021	\$ 51,264	\$ 51,273	\$ 50,552	\$ 607,501
Claims	\$ 11,598	\$ 58,368	\$ 68,986	\$ 50,100	\$ 51,563	\$ 63,019	\$ 46,168	\$ 66,119	\$ 42,446	\$ 60,005	\$ 71,042	\$ 28,943	\$ 618,357

Anthem Blue View Vision –

Per Employee Per Month Premium and Claims Summary

	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Total
Members	7,944	8,063	7,931	7,893	7,925	7,962	6,182	6,198	6,226	6,236	6,250	6,253	7,089
Premium	\$ 7.66	\$ 7.64	\$ 8.21	\$ 7.96	\$ 6.45	\$ 6.83	\$ 9.87	\$ 9.85	\$ 9.99	\$ 9.95	\$ 9.82	\$ 9.86	\$ 8.67
Claims	\$ 4.56	\$ 6.69	\$ 6.46	\$ 7.77	\$ 7.64	\$ 6.91	\$ 9.56	\$ 9.64	\$ 10.82	\$ 10.71	\$ 10.02	\$ 7.59	\$ 8.20
	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Total
Members	7,457	7,451	7,477	7,537	7,564	7,616	7,654	7,700	7,759	7,805	7,825	7,846	7,641
Premium	\$ 7.41	\$ 7.46	\$ 7.38	\$ 7.41	\$ 7.41	\$ 7.43	\$ 7.43	\$ 7.37	\$ 7.36	\$ 7.41	\$ 7.46	\$ 7.35	\$ 7.41
Claims	\$ 7.63	\$ 5.55	\$ 8.05	\$ 8.13	\$ 7.30	\$ 6.63	\$ 8.21	\$ 7.22	\$ 6.46	\$ 9.50	\$ 7.86	\$ 7.05	\$ 7.47
	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Total
Members	7,230	7,281	7,296	7,307	7,310	7,324	7,362	7,411	7,406	7,435	7,436	7,437	7,353
Premium	\$ 7.19	\$ 7.21	\$ 7.20	\$ 7.25	\$ 7.20	\$ 7.22	\$ 7.18	\$ 7.25	\$ 7.21	\$ 7.23	\$ 7.25	\$ 7.22	\$ 7.22
Claims	\$ 5.35	\$ 6.10	\$ 6.79	\$ 7.18	\$ 7.17	\$ 6.76	\$ 5.65	\$ 8.41	\$ 7.81	\$ 7.40	\$ 7.92	\$ 6.23	\$ 6.90
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Total
Members	7,099	7,094	7,083	7,132	7,093	7,116	7,122	7,124	7,140	7,174	7,188	7,178	7,129
Premium	\$ 7.20	\$ 7.23	\$ 7.18	\$ 7.18	\$ 7.34	\$ 7.12	\$ 7.24	\$ 7.22	\$ 7.26	\$ 7.23	\$ 7.21	\$ 7.20	\$ 7.22
Claims	\$ 6.08	\$ 7.11	\$ 6.27	\$ 6.06	\$ 5.65	\$ 5.83	\$ 5.84	\$ 6.59	\$ 6.76	\$ 6.64	\$ 5.96	\$ 6.04	\$ 6.24
	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Total
Members	5,397	5,453	5,450	5,492	5,513	5,468	5,512	5,546	5,526	5,566	5,559	5,482	5,497
Premium	\$ 9.17	\$ 9.21	\$ 9.20	\$ 9.19	\$ 9.21	\$ 9.22	\$ 9.21	\$ 9.21	\$ 9.23	\$ 9.21	\$ 9.22	\$ 9.22	\$ 9.21
Claims	\$ 2.15	\$ 10.70	\$ 12.66	\$ 9.12	\$ 9.35	\$ 11.53	\$ 8.38	\$ 11.92	\$ 7.68	\$ 10.78	\$ 12.78	\$ 5.28	\$ 9.37

Acknowledgement



Keenan & Associates would like to thank Ms. Lita Payne, Mr. Alex Rabrenovich, the LACERS Health Benefits Administration staff and LACERS' vendor partners for providing the necessary data. Their cooperation and guidance have been extremely valuable.

Questions and Answers



BAC Meeting: 06/09/20
Item IV
Attachment 2

Los Angeles City Employees' Retirement System Health Management Data Report 2019

June 9, 2020

In this LACERS health management data report, health management metrics on LACERS members enrolled in the Kaiser Permanente health plan (Commercial and Medicare) and Anthem Blue Cross (PPO, HMO, and Medicare Supplement) for the 12-month period of October 1, 2018 through September 30, 2019 are presented, including statistics on:

Health Risks (Kaiser Only)
Chronic Health Conditions
Lifestyle-Related Chronic Condition Management
Preventive Care
Carrier Resources Utilization

These metrics can be used for a) identifying the primary health issues and cost drivers among the LACERS members, b) tracking members' use of the health management resources available to them, c) and guiding the development of health management strategies for optimizing the members' health.

Summary of the Findings

In general, among the LACERS members enrolled in Kaiser and Anthem Medicare and Non-Medicare plans, the **2018/19 rates** for the members' health risks, lifestyle-related chronic health conditions, chronic condition management, preventive care, and resources utilization have remained **relatively steady from the previous 3 years**, with a few exceptions noted in the detailed breakouts below. The top health issues affected by lifestyle behaviors continue to be related to **obesity, diabetes, high blood pressure, musculoskeletal problems, and depression**.

Health Risks

- The top health risks among members continue to be **obesity/overweight, inadequate exercise, prediabetes, high blood pressure, and unhealthy blood lipid levels (total, LDL, HDL)**.
- The **Medicare and non-Medicare** members have **similar rates** for these risk factors, and the rates have been **relatively consistent over the past 3 years**.
- The rates for Medicare and non-Medicare members are **similar to the benchmark comparison groups**.

Summary of the Findings (continued)

Lifestyle-Related Chronic Health Conditions

- The top lifestyle-related chronic health conditions among members continue to be **obesity, diabetes, hypertension, osteoarthritis, back problems, and depression.**
- The **Medicare members** have significantly **higher rates** of major chronic conditions (especially for 2+ conditions), and for **hypertension, osteoarthritis, coronary artery disease, depression, and skin cancer**, compared to the non-Medicare members.
- These rates have been **relatively consistent over the past 3 years**, except for moderate increases in **osteoarthritis** and **skin cancer** for the Medicare members.
- The rates for Medicare and non-Medicare members are **similar to the benchmark comparison groups.**

Chronic Condition Management

- The percentage of members whose chronic conditions are **being well managed is high among LACERS members** for both Medicare and non-Medicare groups.
- The **Medicare and non-Medicare** members have **similar rates** for condition management, and the rates have been **relatively consistent over the past 3 years**, except for slight increases in acute and continuous management of **depression.**
- The rates for Medicare and non-Medicare members are **similar to the benchmark comparison groups.**

Summary of the Findings

Summary of the Findings (continued)

Preventive Care

- **Kaiser** members have **high rates of preventive care compliance** (for clinical visits and cancer screenings) for both Medicare and non-Medicare groups, and the rates have been **relatively consistent over the past 3 years**.
- **Anthem** members have **moderate rates of compliance** (for preventive visits, cholesterol screening, immunization, cancer screenings, and gaps in care) **for the non-Medicare group**, and relatively **low rates for the Medicare group**, which has seen a **decrease from the previous year**.

Resources Utilization

- **Kaiser** members have relatively **high rates** of registration and sign-on to the **kp.org website** for both Medicare and non-Medicare groups, and the rates have been **relatively consistent over the past 3 years**.
- A significant number of **Anthem** members have **begun to engage** in the relatively new **Reimagine website and mobile app**.
- **Anthem** members have also seen a **large increase** in the **Solera Diabetes Prevention Program** enrollment and a **slight increase** in **LiveHealth Online registration** from the previous year.

Implications for the LACERS *Well* Program

Implications for the LACERS *Well* Program

To address the key health issues facing LACERS members, the LACERS *Well* wellness program has developed a wide array of prevention and intervention initiatives in collaboration with its medical, dental, and vision carriers. In addition to providing virtual and onsite events and activities, a key goal of the wellness program has been the encouragement of members to connect with their primary care providers for utilization of the many preventive care and health management services available to them. Some specific implications for the LACERS *Well* program are as follows:

- 1) Promote physical activity, healthy nutrition habits, weight control, and tobacco cessation, particularly among the younger members.
- 2) Encourage monitoring of blood pressure, blood glucose, and cholesterol, and management of members with those having chronic health conditions related to these risk factors, particularly among Anthem members and the older retirees.
- 3) Provide mobility assessment and back care programs, with a focus on addressing back problems particularly for younger retirees.

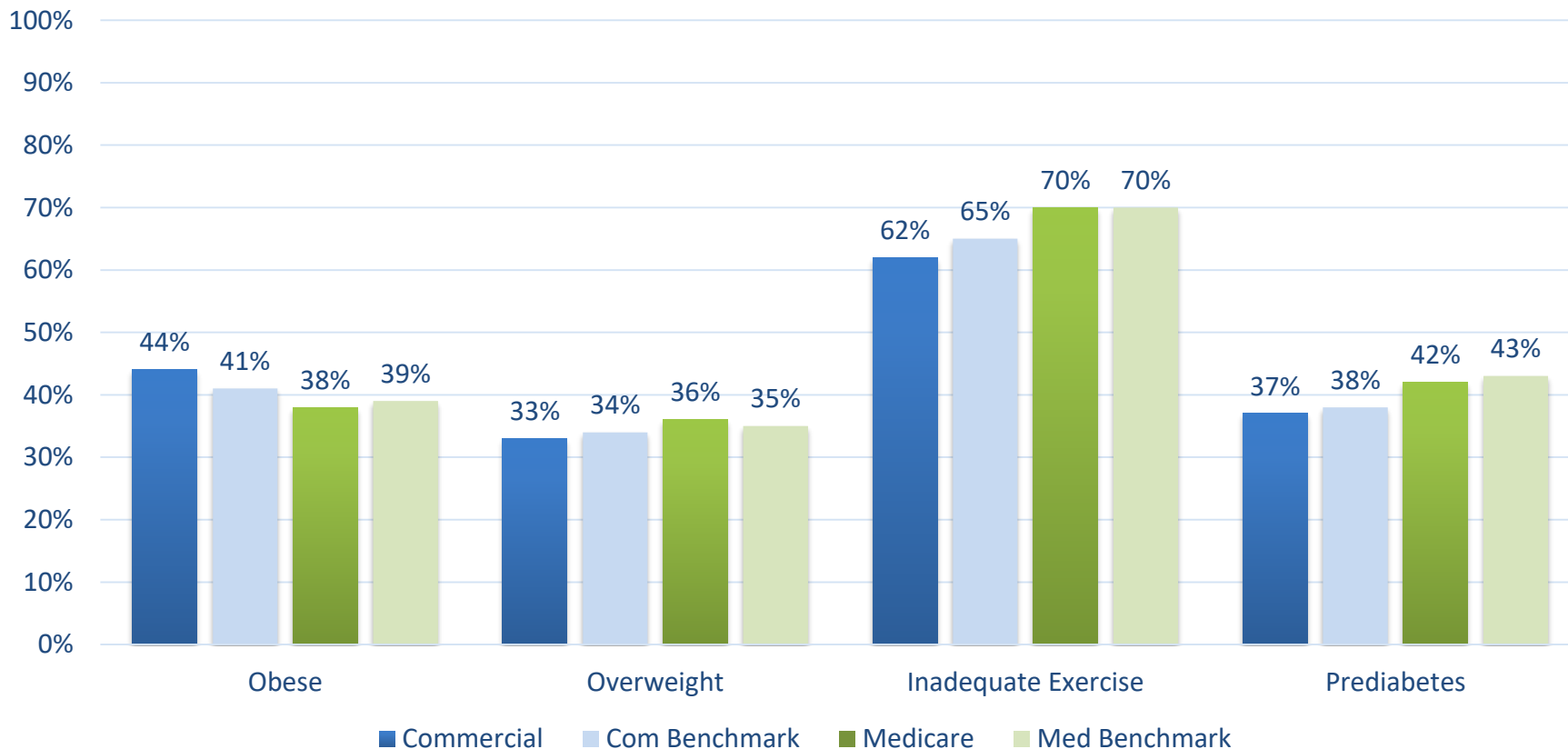
Implications for the LACERS Well Program

Implications for the LACERS Well Program (continued)

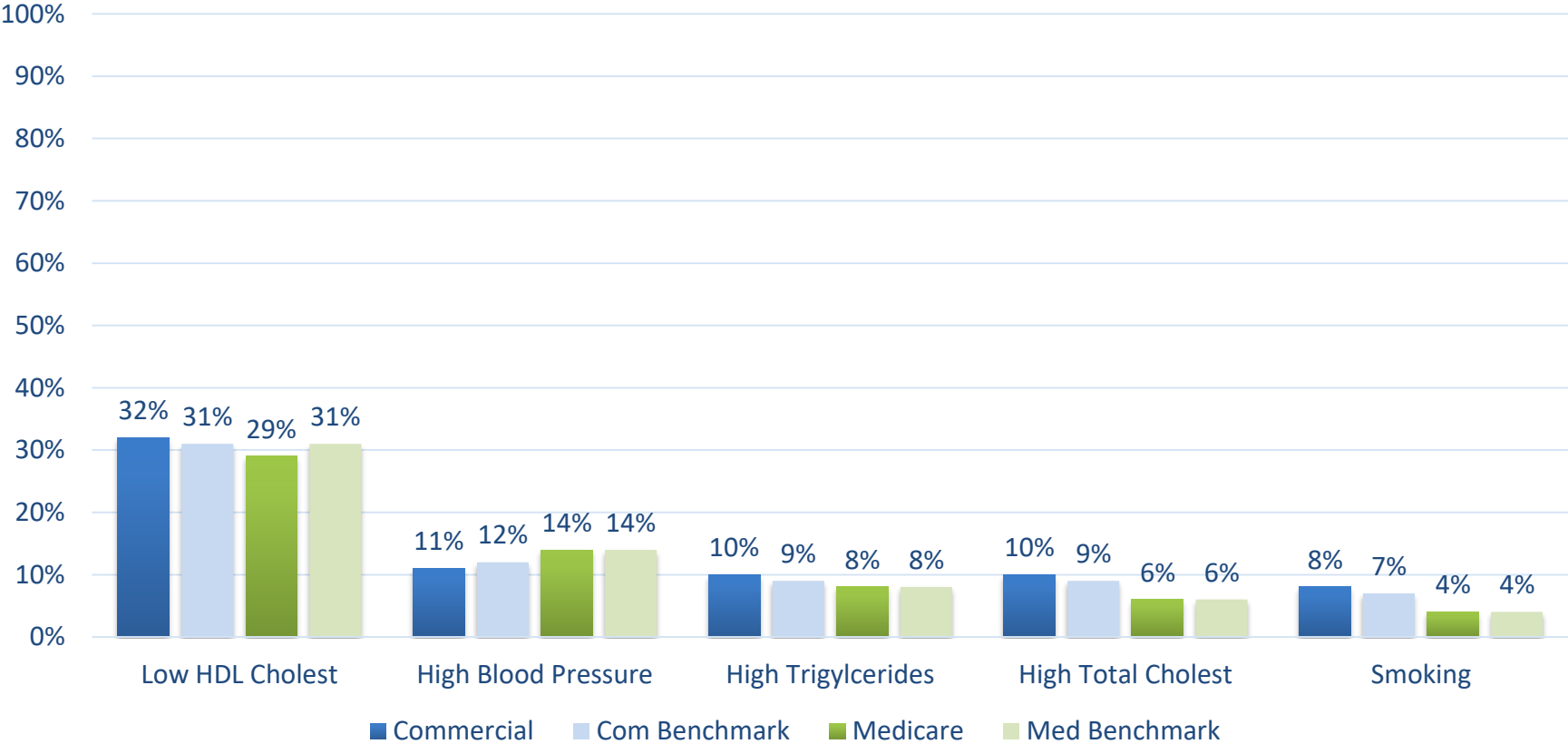
- 4) Focus on identification, management, and prevention of loneliness, isolation, and depression, particularly for older retirees, and provide resources such as purposeful living and healthy aging workshops.
- 5) Promote preventive care screenings and flu shots for all members, but particularly older members.
- 6) Direct members to the health plan websites to access their personal health care information (e.g., lab results), communicate with their doctor, schedule appointments, and order prescriptions.
- 7) Promote the telemedicine options and mobile apps available through the carriers.
- 8) Conduct a campaign to promote the utilization of the carriers' preventive care and virtual services, such as diabetes prevention programs.
- 9) Collaborate with the City of LA's active employee wellness/health management program in partnership with carriers and community organizations to support and co-promote the collective resources available to actives and retirees.

Kaiser Permanente

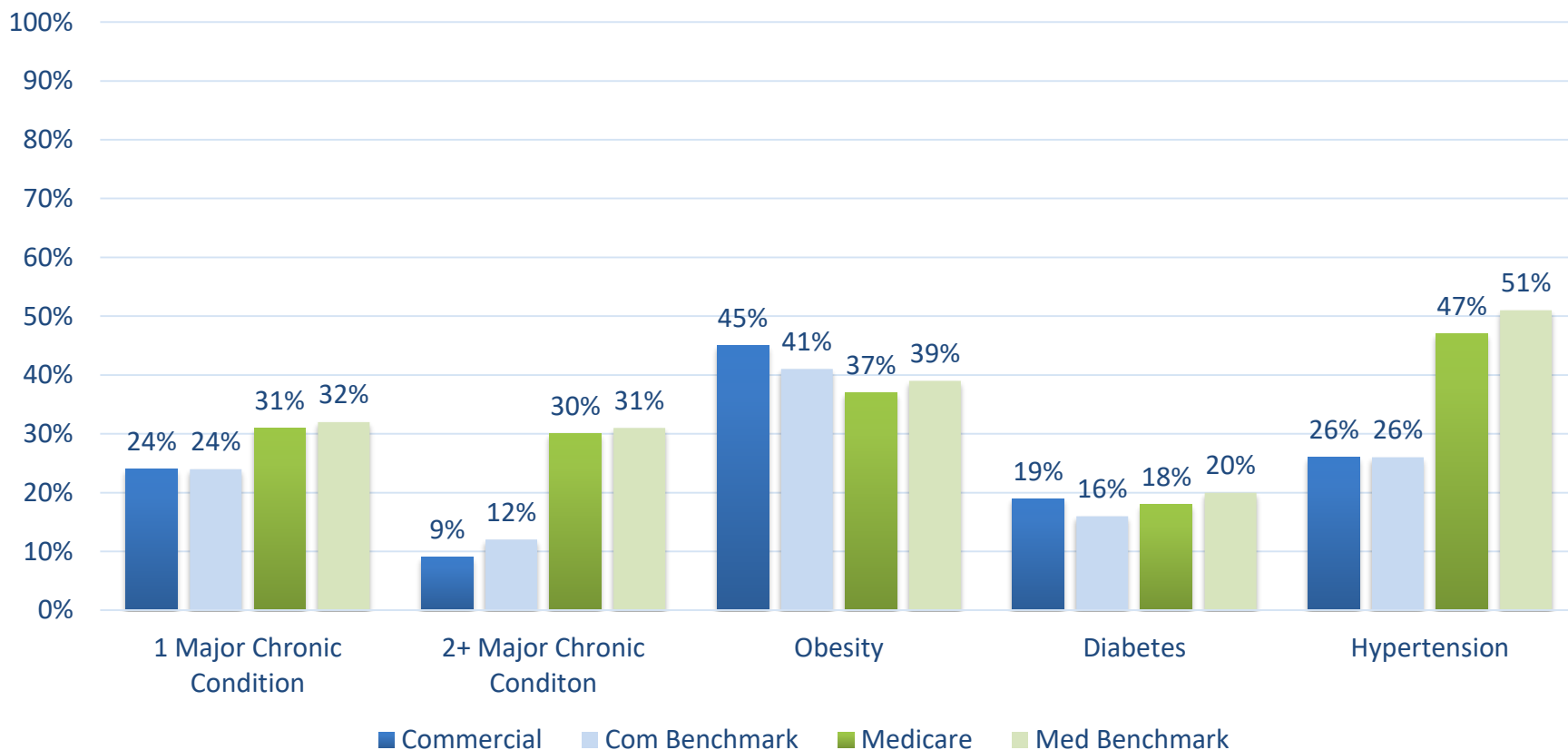
Health Risks Commercial – Medicare



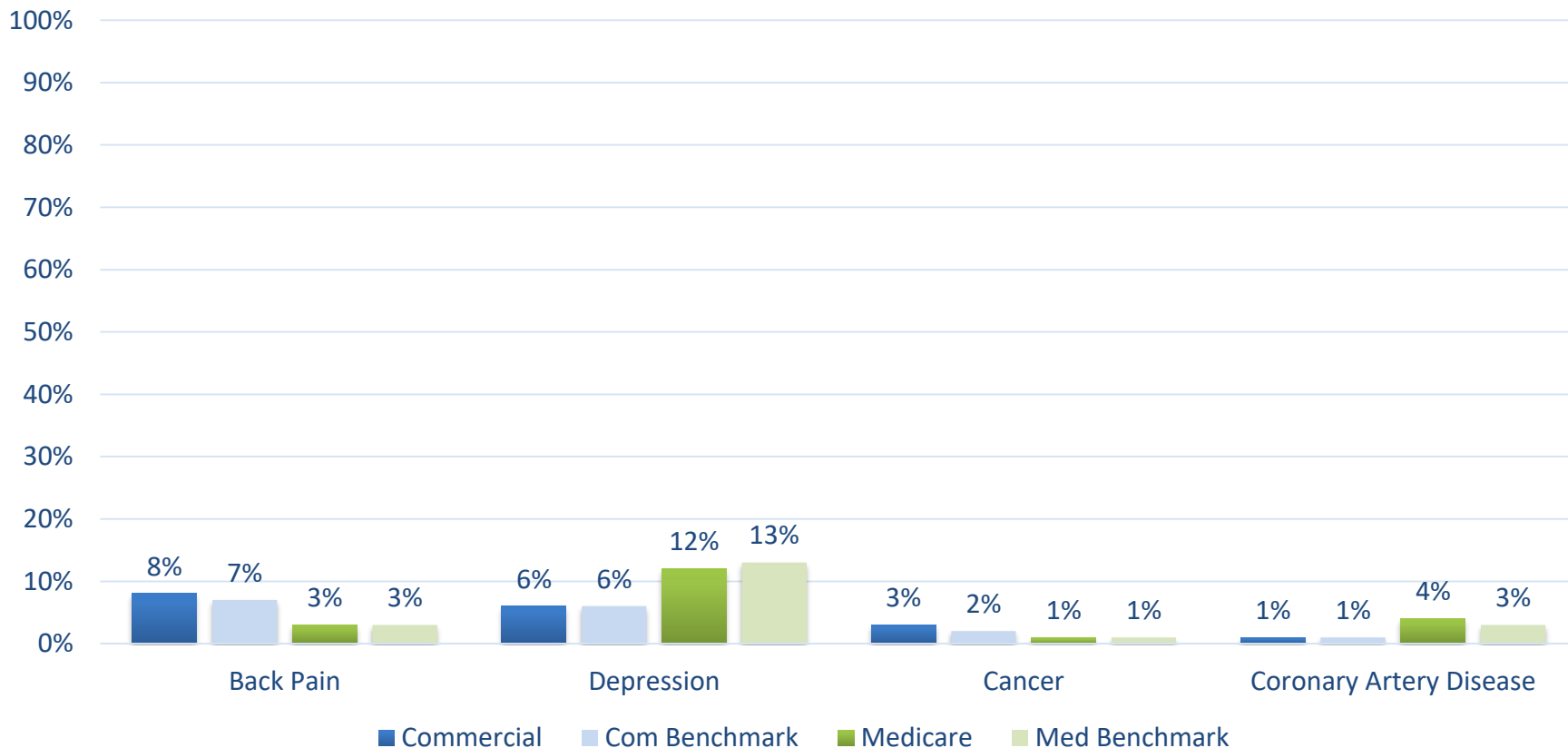
Health Risks
Commercial – Medicare



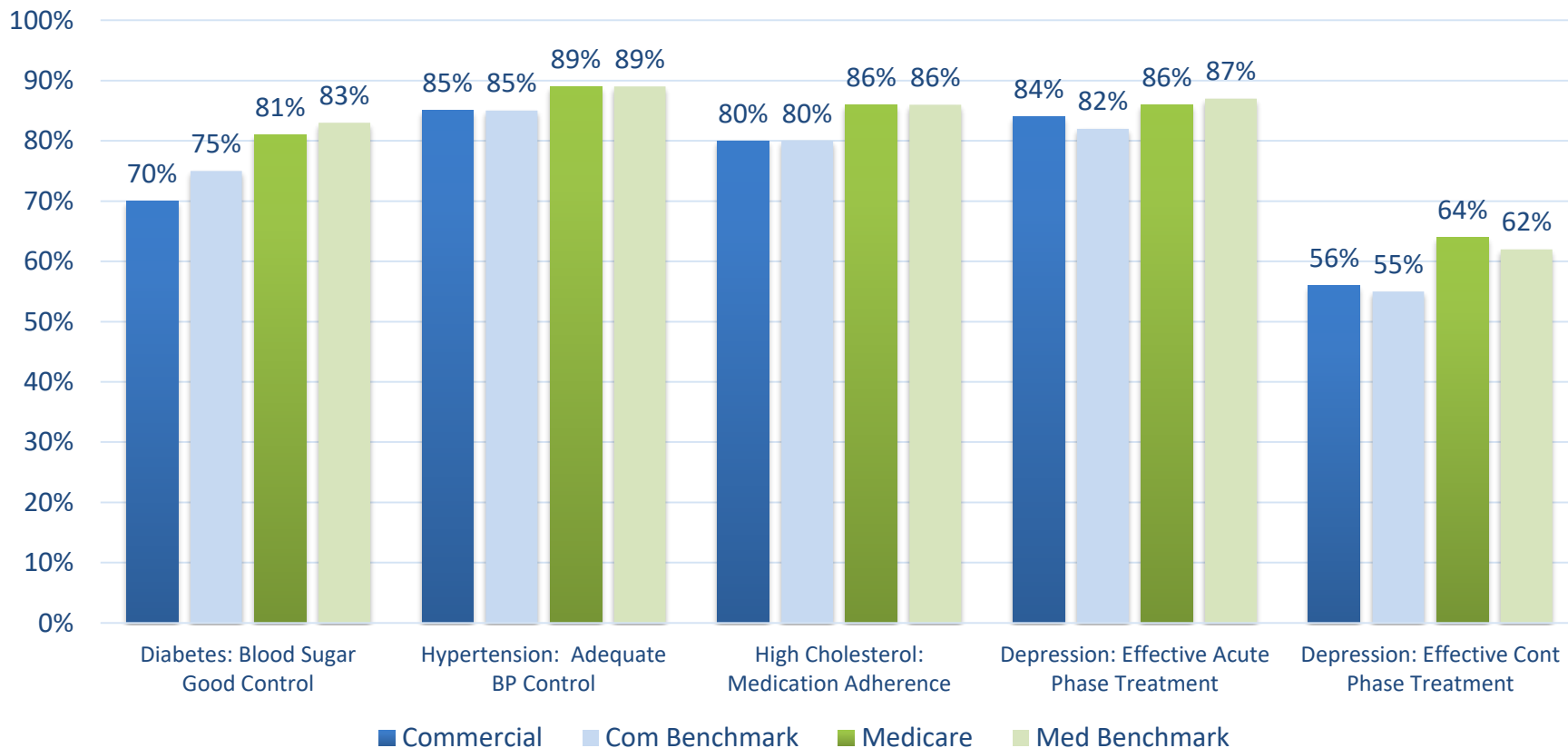
Lifestyle-Related Chronic Health Conditions Commercial – Medicare



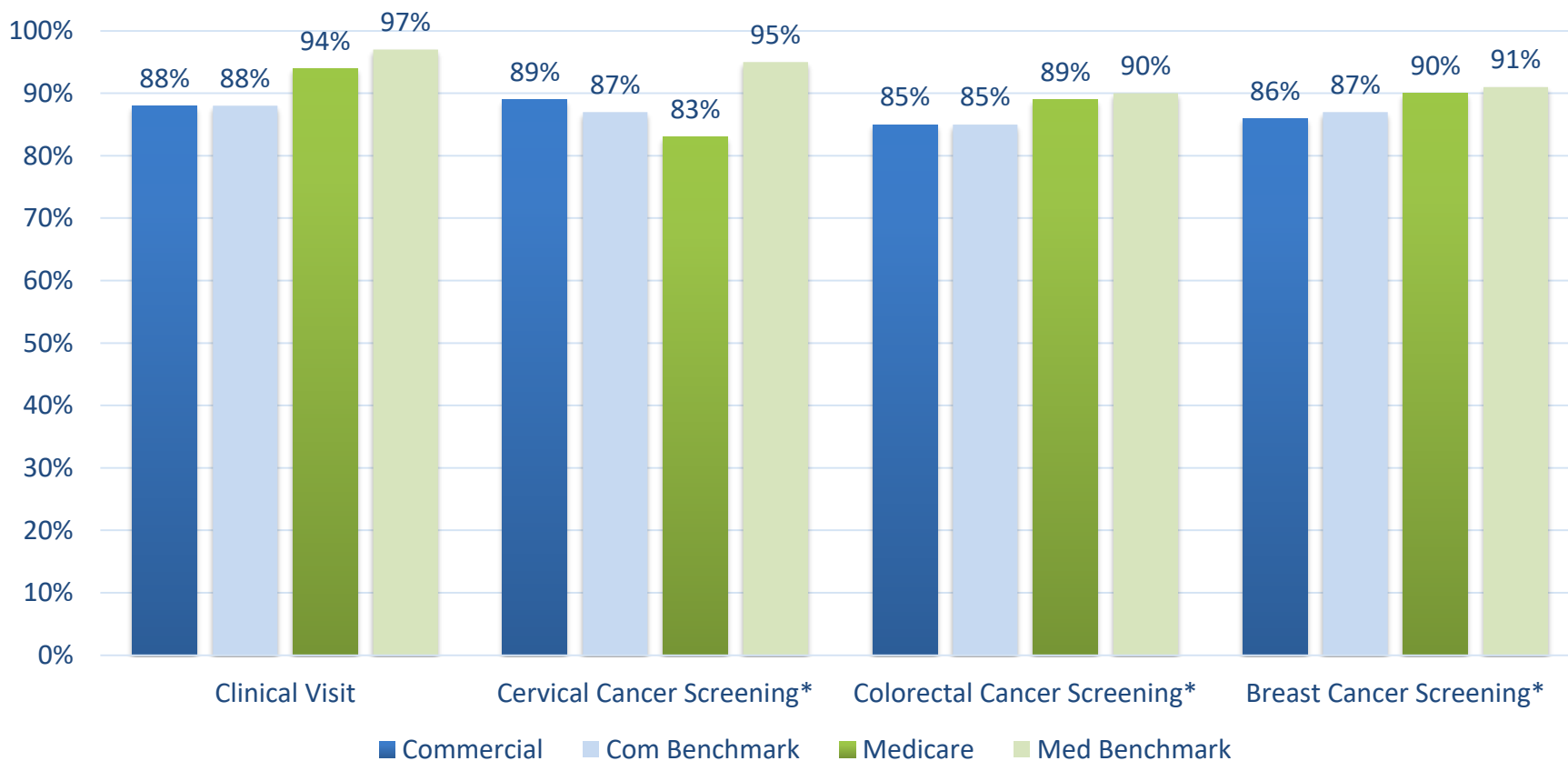
Lifestyle-Related Chronic Health Conditions Commercial – Medicare



Chronic Condition Management Commercial – Medicare

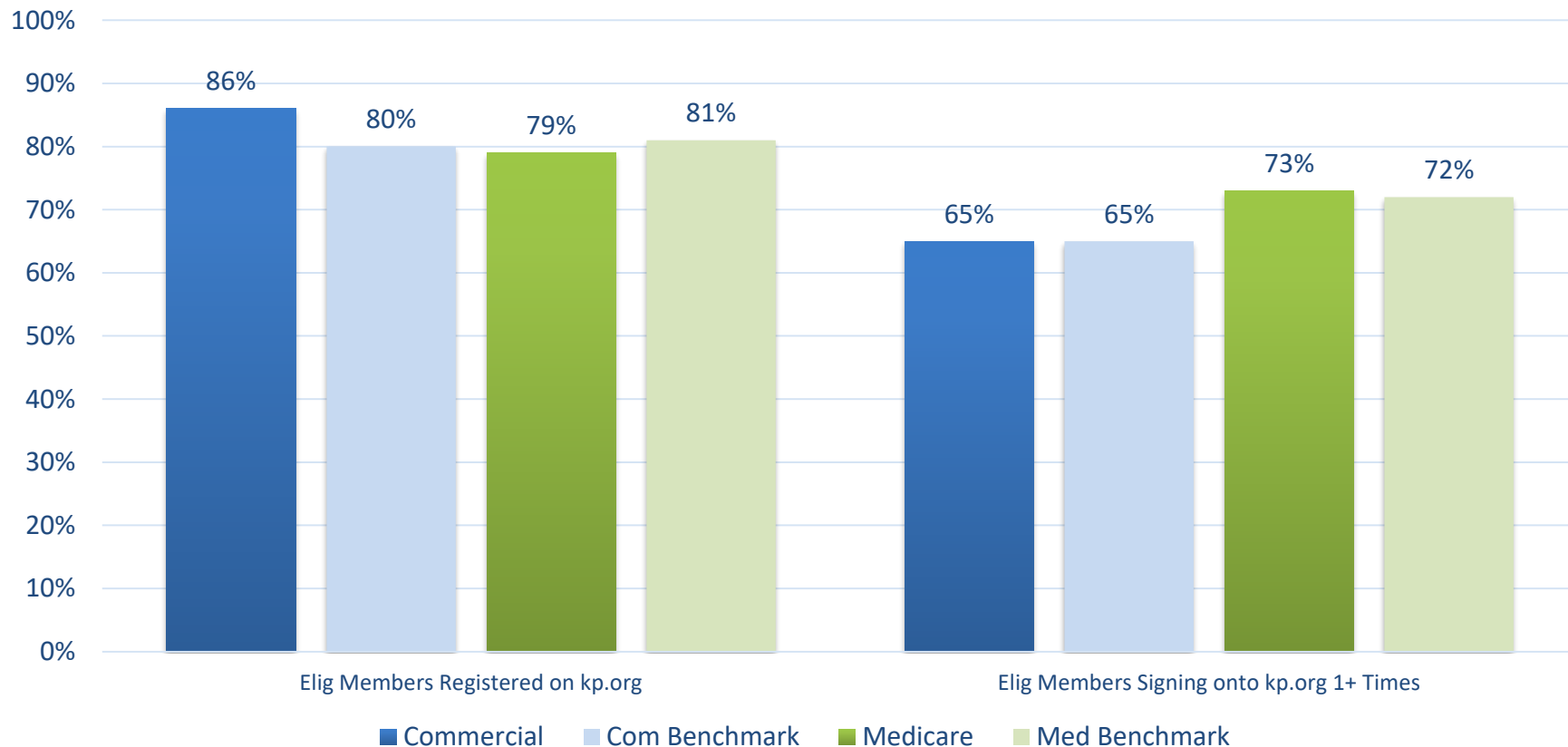


Preventive Care Commercial – Medicare



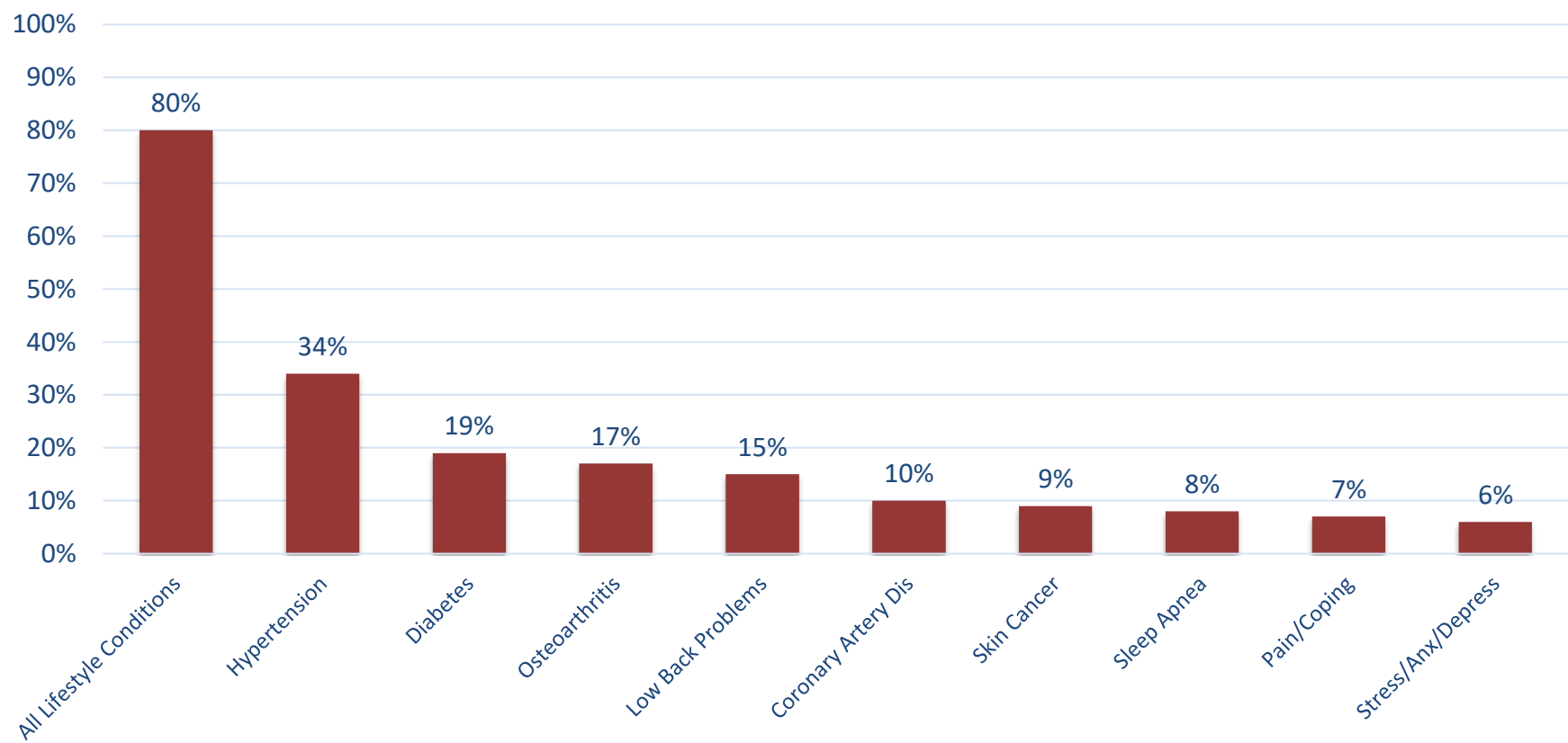
*See Appendix for screening criteria

KP Resources Utilization Commercial – Medicare

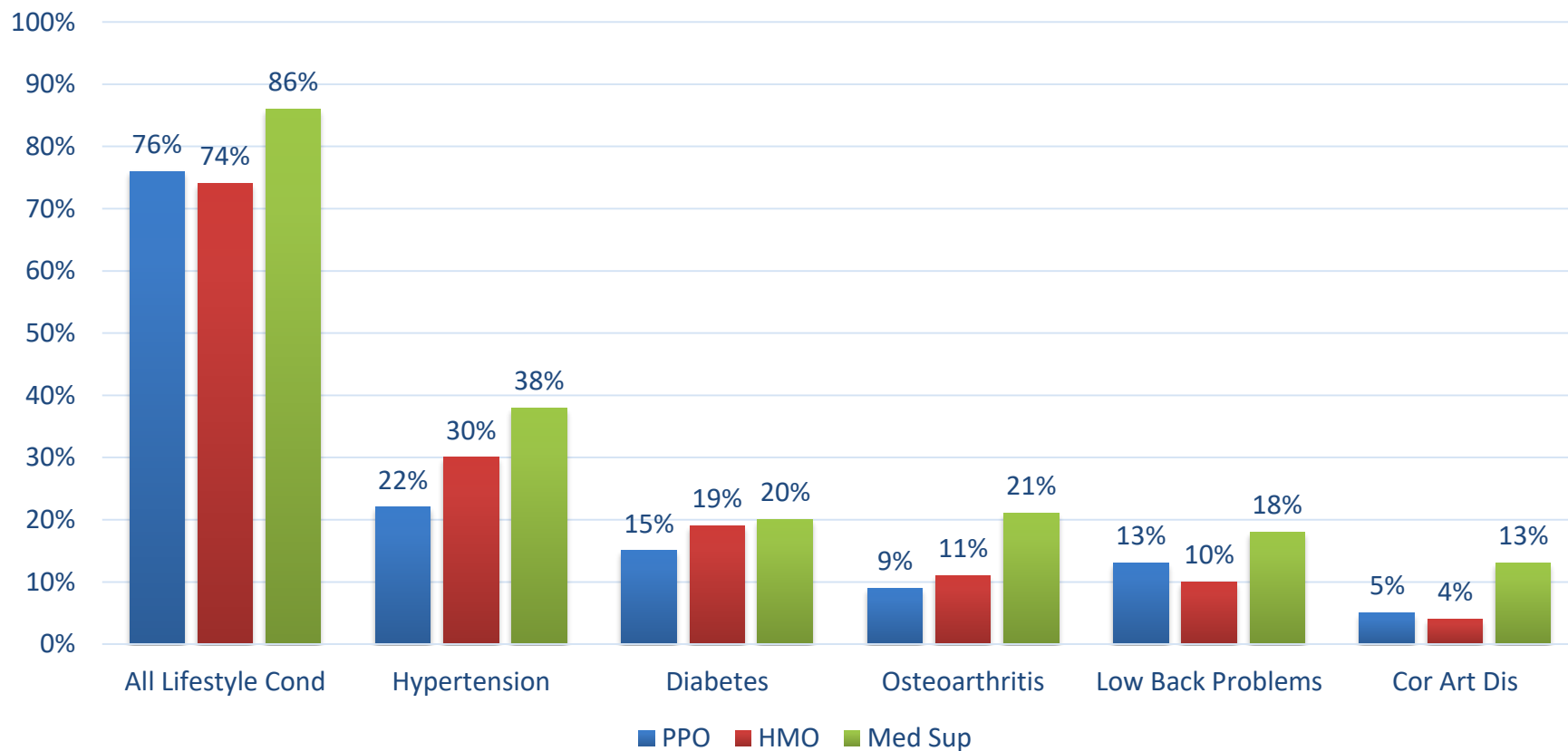


Anthem Blue Cross

Lifestyle-Related Chronic Health Conditions All Members

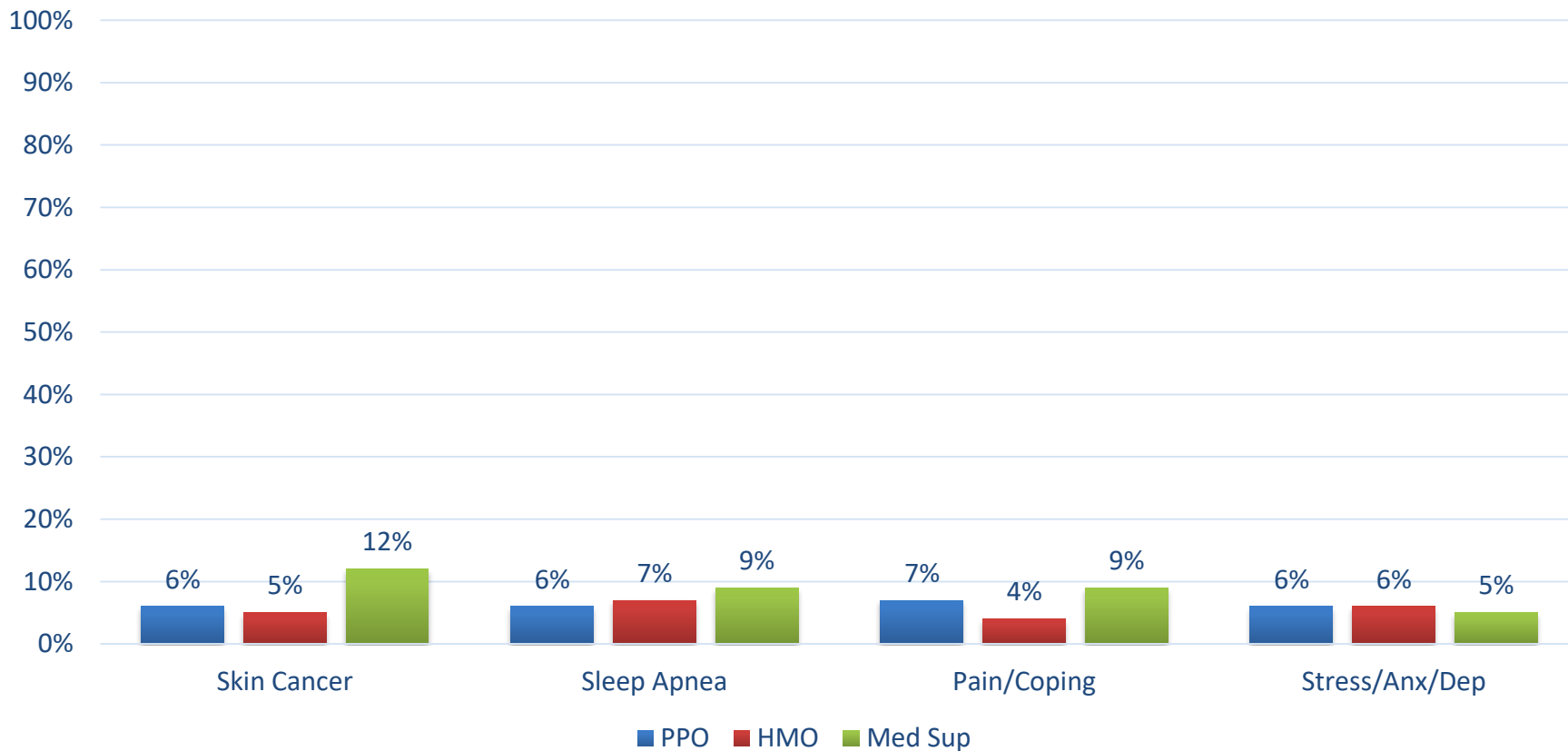


Lifestyle-Related Chronic Health Conditions PPO – HMO – Med Sup

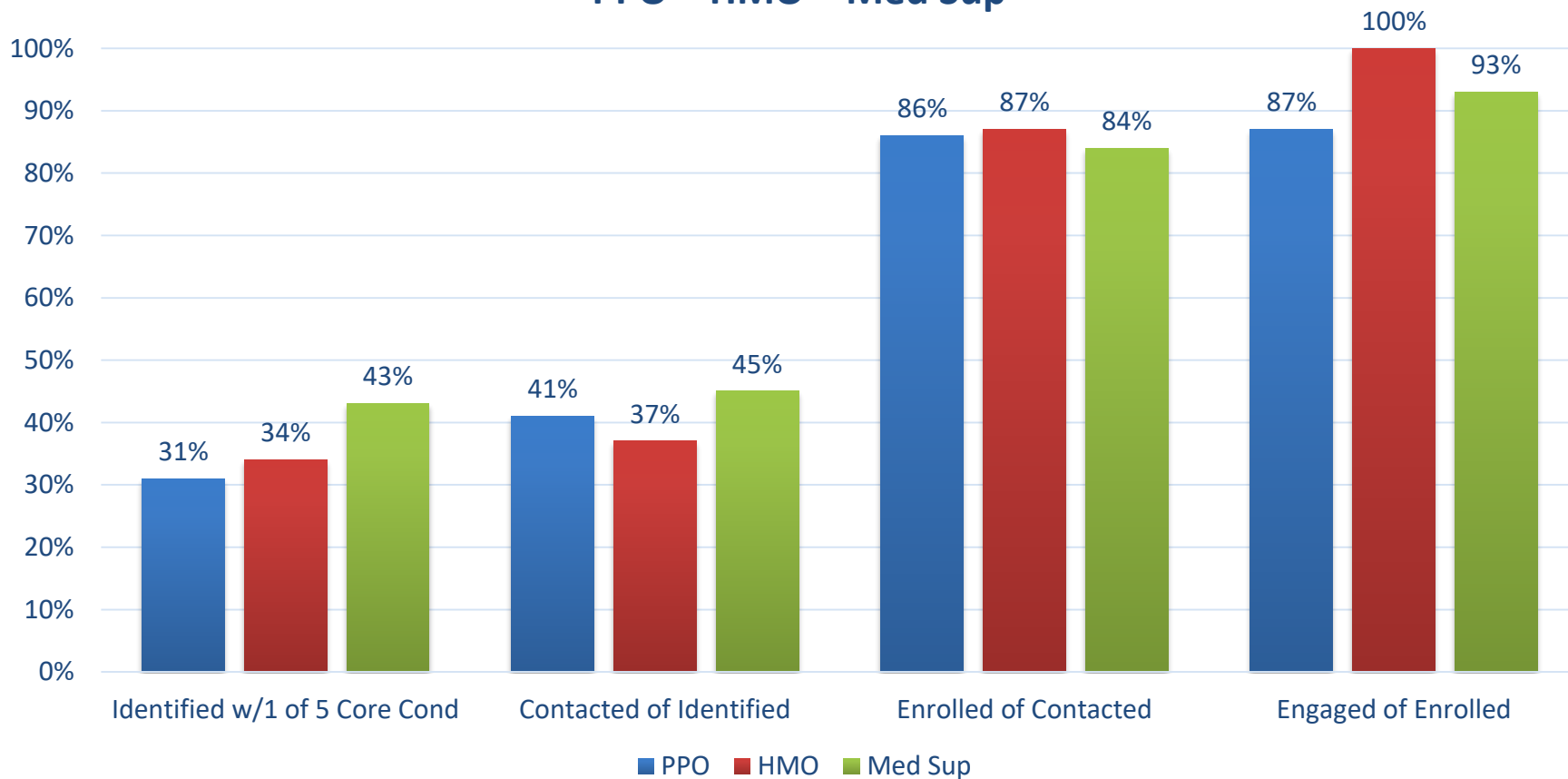


Lifestyle-Related Chronic Health Conditions

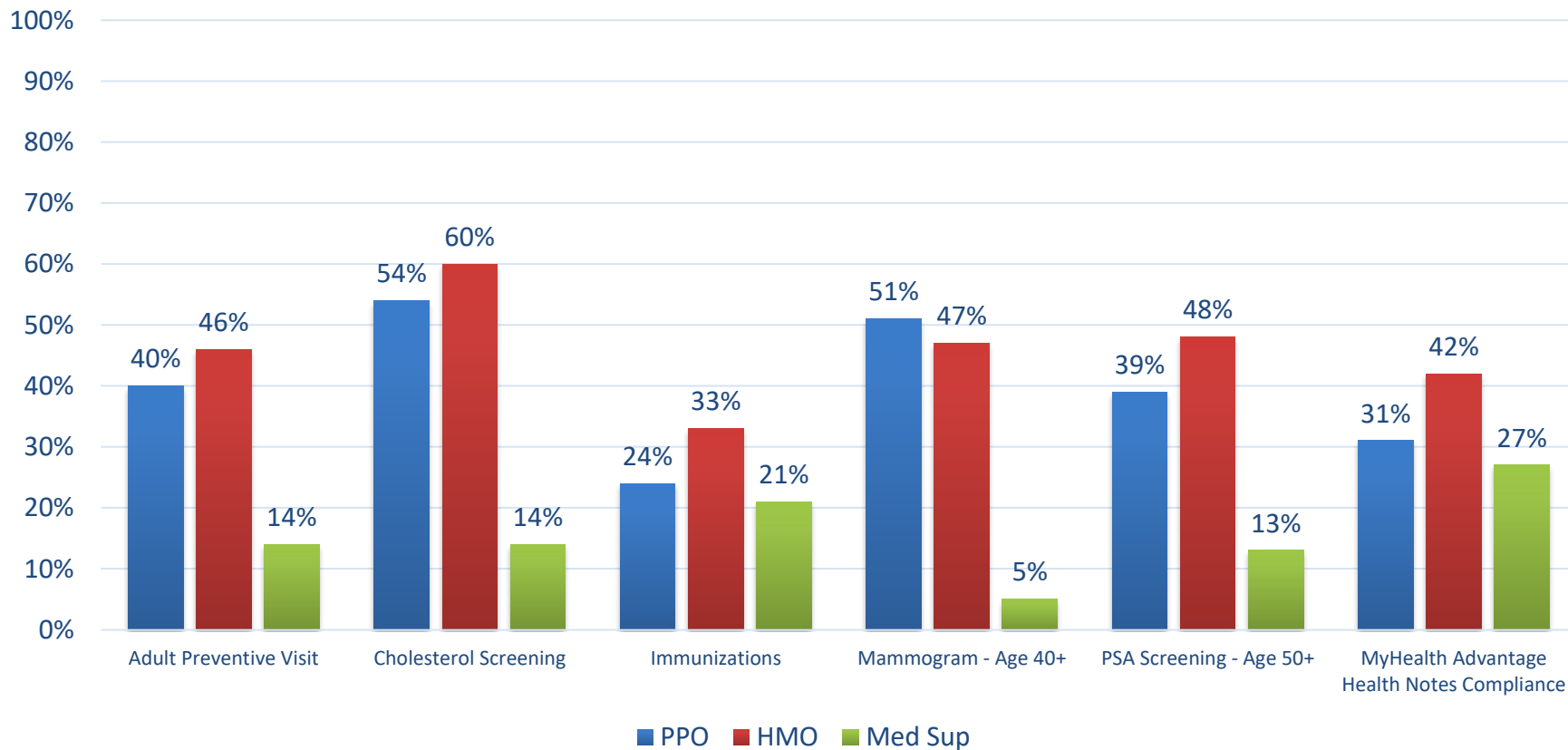
PPO – HMO – Med Sup



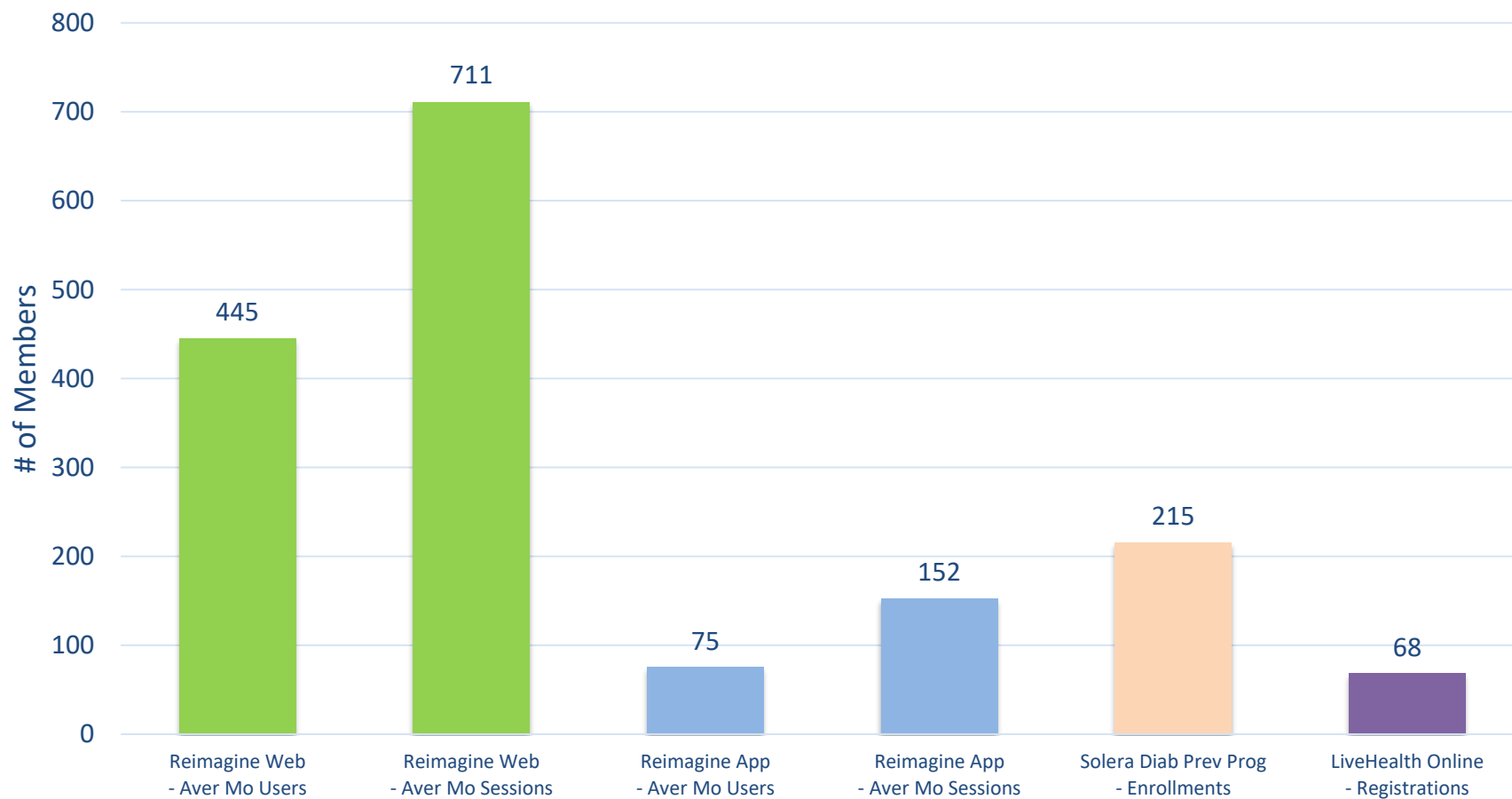
Chronic Condition Management PPO – HMO – Med Sup



Preventive Care – Compliance of Eligible Population PPO – HMO – Med Sup



Anthem Blue Cross Resources Utilization – All Members



LACERS Health Management Data Report
Kaiser Permanente: Commercial and Medicare Groups
Appendix

Metric	Notes
Blood Glucose	Adults ages 18+ with a recorded result for glucose. KP is using a new advanced lab process for HbA1C testing (a measure of average blood glucose) which provides improved accuracy and reliability. Results from the prior process used different standards and are not directly comparable to KP's current testing. Due to this change, KP is only reporting results from the current measurement period.
Blood Pressure	Of those with a recorded result during the measurement period (12-months time period for BMI and Blood Pressure results); ages 18-75, based on HEDIS standards for age on similar measures.
BMI	Adults ages 21-74 with a recorded result for BMI. BMI categorizations are based on CDC guidelines; excludes members who utilized maternity services.
Cholesterol	Of those with a recorded result during the measurement period (5-year time period for Cholesterol results); ages 18-75, based on HEDIS standards for age on similar measures.
Depression - Effective acute phase treatment	The percentage of members who continued antidepressant use for at least 12 weeks among those who started use for a new episode of depression. New episodes are defined as depression diagnoses with no depression diagnosis in the previous year and no antidepressant use in the previous 4 months.
Depression - Effective continuation phase treatment	The percentage of members who continued antidepressant use for at least 6 months among those who started use for a new episode of depression. New episodes are defined as depression diagnoses with no depression diagnosis in the previous year and no antidepressant use in the previous 4 months.
Depression- Prevalence	Starting with Q4 2016 data, KP is using an industry-standard disease cohort definition for depression prevalence that more accurately reflects the latest coding.
Exercise Level	Adults ages 18+ with a recorded result for exercise; excludes members who utilized maternity services.
Flu Immunization	Of those with a recorded result during the measurement period.
Hypertension	The specifications for the Hypertension metric have been further defined. The denominator population was previously identified as members with one outpatient visit with a hypertension diagnosis in the first 6 months of the year, with confirmation of hypertension in the medical record before June 30 of the measurement year. Effective with Q4 2018 data release, the denominator is now identified as members with at least two visits with a hypertension diagnosis on different dates of service any time in the measurement year or the year prior to the measurement year. Additionally, the numerator was previously members ages 60-85 who are not diabetic with a BP <= 150/90. Effective with Q4 2018 data release, members must have a BP <= 140/90.
Kp.org - Registered on kp.org	The percentage of eligible members registered on kp.org; includes kp.org activity for members regardless of whether or not they were enrolled at the end of the measurement period.
Kp.org - Signed on to kp.org at least 1 time	The percentage of eligible members who signed on to kp.org at least once; includes kp.org activity for members regardless of whether or not they were enrolled at the end of the measurement period.

LACERS Health Management Data Report
Kaiser Permanente: Commercial and Medicare Groups
Appendix

Metric	Notes
Major Chronic Conditions	Major chronic conditions are defined as diabetes, asthma, coronary heart disease, chronic heart failure, COPD, CKD, and depression.
Medication Adherence - High Cholesterol	Percentage of subscribers with a proportion of days covered (PDC) greater than or equal to 80% on the statin medication variable. PDC is the proportion of days in the measurement period "covered" by prescription claims for the same medication or another in its therapeutic category. The PDC threshold of 80% is the level above which the medication has a reasonable likelihood of achieving most of the potential clinical benefit.
Obesity Prevalence	Based on BMI for all members (adults and children) with a measurement recorded within the last 12 months.
Screening - Breast Cancer	The percentage of women ages 52-74 who had a mammogram during the measurement period or one year prior to the measurement period. Members must have been continuously enrolled during the measurement period. Note: As of the Q1 2018 measurement period, the metric age range was corrected to the appropriate HEDIS age range of 52-74 (previously 52-69).
Screening - Cervical Cancer	The percentage of women ages 21–64 years who were screened for cervical cancer using either of the following criteria: · Women age 21–64 who had cervical cytology performed every 3 years (the original definition prior to Q4 2013) · Women age 30–64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years (added to the original definition starting Q4 2013)
Screening - Colorectal Cancer	The percentage of men and women ages 51-75 who had an appropriate screening for colorectal cancer. Appropriate screening is: Cologuard Test (FIT-DNA Test) during the measurement year or the 2 years prior to the measurement year, a fecal occult blood test during the measurement year, a flexible sigmoidoscopy during the measurement year or up to four years prior to the measurement year, or a colonoscopy during the measurement year or up to nine years prior to the measurement year.
Smoking	Of those with a recorded result during the measurement period (lifetime for smoking status); ages 18+