



Benefits Administration Committee Agenda

REGULAR MEETING

TUESDAY, JUNE 28, 2022

TIME: 9:00 A.M.

MEETING LOCATION:

In accordance with Government Code Section 54953, subsections (e)(1) and (e)(3), and in light of the State of Emergency proclaimed by the Governor on March 4, 2020 relating to COVID-19 and ongoing concerns that meeting in person would present imminent risks to the health or safety of attendees and/or that the State of Emergency continues to directly impact the ability of members to meet safely in person, the LACERS Benefits Administration June 28, 2022 meeting will be conducted via telephone and/or videoconferencing.

Important Message to the Public

Information to call-in to listen and/or participate:

Dial: (669) 254-5252 or (669) 216-1590

Meeting ID# 160 266 7553

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: Annie Chao
Sandra Lee

Manager-Secretary: Todd Bouey

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 MEETING OF MAY 24, 2022 AND POSSIBLE COMMITTEE ACTION](#)
- III. [HEALTH MANAGEMENT DATA REPORT](#)
- IV. VERBAL UPDATE ON 2023 HEALTH PLAN CONTRACT RENEWALS
- V. OTHER BUSINESS
- VI. 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.
- VII. ADJOURNMENT



Board of Administration Agenda

SPECIAL MEETING

TUESDAY, JUNE 28, 2022

TIME: 9:00 A.M.

MEETING LOCATION:

In accordance with Government Code Section 54953, subsections (e)(1) and (e)(3), and in light of the State of Emergency proclaimed by the Governor on March 4, 2020 relating to COVID-19 and ongoing concerns that meeting in person would present imminent risks to the health or safety of attendees and/or that the State of Emergency continues to directly impact the ability of members to meet safely in person, the LACERS Benefits Administration June 28, 2022 meeting will be conducted via telephone and/or videoconferencing.

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President: Vacant
Vice President: Sung Won Sohn

Commissioners: Annie Chao
Elizabeth Lee
Sandra Lee
Nilza R. Serrano
Michael R. Wilkinson

Manager-Secretary: Todd Bouey

Executive Assistant: Ani Ghoukassian

Legal Counsel: City Attorney's Office
Public Pensions General
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- III. HEALTH MANAGEMENT DATA REPORT
- IV. VERBAL UPDATE ON 2023 HEALTH PLAN CONTRACT RENEWALS
- V. OTHER BUSINESS
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- VII. ADJOURNMENT

MINUTES OF THE SPECIAL MEETING
BOARD OF ADMINISTRATION
LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM

In accordance with Government Code Section 54953, subsections (e)(1) and (e)(3), and in light of the State of Emergency proclaimed by the Governor on March 4, 2020 relating to COVID-19 and ongoing concerns that meeting in person would present imminent risks to the health and safety of attendees and/or that the State of Emergency continues to directly impact the ability of members to meet safely in person, the LACERS Benefits Administration May 24, 2022 meeting will be conducted via telephone and/or videoconferencing.

May 24, 2022

9:00 a.m.

PRESENT via Videoconferencing:	Chair:	Michael R. Wilkinson
	Committee Member:	Annie Chao Sandra Lee
	President:	Cynthia M. Ruiz
	Manager-Secretary:	Neil M. Guglielmo
	Legal Counselor:	Miguel Bahamon
PRESENT at LACERS office:	Executive Assistant:	Ani Ghoukassian

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

President Cynthia M. Ruiz joined the meeting, this is considered a Special Meeting of the Board of Administration. Any votes will be taken by Benefits Administration Committee members only.

I

PUBLIC COMMENTS AND GENERAL PUBLIC COMMENTS ON MATTERS WITHIN THE COMMITTEE'S JURISDICTION AND COMMENTS ON ANY SPECIFIC MATTERS ON THE AGENDA
PRESS *9 TO RAISE HAND DURING PUBLIC COMMENT PERIOD – Chair Wilkinson asked if any persons wished to speak on matters within the Committee's jurisdiction, to which there was no response.

II

APPROVAL OF MINUTES FOR THE MEETING OF MARCH 22, 2022 AND POSSIBLE COMMITTEE ACTION – Committee Member Chao moved approval, adopted by the following vote: Ayes, Committee Members Chao, Sandra Lee, and Chair Wilkinson -3; Nays, None.

III

ANTHEM MEDICARE ADVANTAGE PLAN TRANSITION UPDATE – Karen Freire, Chief Benefits Analyst, and Jennifer Heinz, Account Manger with Anthem, presented and discussed this item with the Committee for 30 minutes.

IV

President Ruiz joined the meeting at 9:55 a.m.

HEALTH PLAN FINANCIAL DASHBOARDS – James Kawashima, Senior Benefits Analyst, and Bordam Darm, Senior Consultant with Keenan Associates, presented and discussed this item with the Committee for 28 minutes.

V

OTHER BUSINESS –There was no other business.

VI

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 responding to public health concerns relating to the novel coronavirus continue.

VII

ADJOURNMENT – There being no further business before the Committee, Chair Wilkinson adjourned the Meeting at 9:59 a.m.

Michael R. Wilkinson
Chair

Neil M. Guglielmo
Manager-Secretary



LACERS
LA CITY EMPLOYEES'
RETIREMENT SYSTEM



REPORT TO BENEFITS ADMINISTRATION COMMITTEE
From: Neil M. Guglielmo, General Manager

MEETING: JUNE 28, 2022
ITEM: III

SUBJECT: HEALTH MANAGEMENT DATA REPORT

ACTION: CLOSED: CONSENT: RECEIVE & FILE:

Recommendation

That the Committee receive and file this report.

Executive Summary

LACERS' Health and Welfare consultant, Keenan & Associates (Keenan), will present the Health Management Data Report which tracks utilization data to inform LACERS on trends that may impact contract renewals and focus areas for future Member outreach. These metrics can be used to: 1) identify the primary health issues and cost drivers among the LACERS Members; 2) track Members' use of the health management resources available to them; and 3) guide the development of health management strategies to optimize Members' health, such as promoting preventive care, connecting enrollees to their health insurance, and encouraging participation in LACERS Well Program. In this report, the top health issues among LACERS members continue to be related to the risk for, and management of obesity, high blood pressure, diabetes, and depression.

Discussion

As part of LACERS' Strategic Plan, the Health Plan Data Initiative aims to improve value and minimize costs of Members' health and wellness benefits. The initiative analyzes various health plan data reports to better understand costs and trends, and to identify cost drivers that have the potential to be mitigated.

Keenan assembled the Health Management Data Report using metrics based on LACERS members enrolled in the Kaiser Permanente and Anthem Blue Cross health plans in 2021. These metrics identify top health risks and cost drivers, and track resources available to Members through their LACERS medical plans. The Health Management Data is used in discussions with health carriers to develop strategies to optimize Members' health through the carriers' health management programs and the LACERS *Well* program initiatives.

Keenan will be present to share highlights from the Health Management Data Report.

Strategic Plan Impact Statement

The Health Management Data Report is in line with the Strategic Plan Health and Welfare Goal of improving the value and minimizing costs of our Health and Wellness Benefits that support LACERS' Member Experience pillar.

Prepared By: James Kawashima, Senior Benefits Analyst, Health, Wellness and Buyback Division

NMG/DWN/KF/jk

Attachments: 1. Keenan Report – LACERS Health Management Data Report



LACERS
LA CITY EMPLOYEES'
RETIREMENT SYSTEM

BAC Mtg: 06/28/22
Item No.: III
Attachment

Los Angeles City Employees' Retirement System Health Management Data Report 2021

June 28, 2022

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Introduction

Introduction

In this LACERS health management data report, health management metrics on LACERS Non-Medicare and Medicare members (all covered lives) enrolled in the Kaiser Permanente (KP) and Anthem Blue Cross (ABC) health plans for the 12-month period of January 1- December 31, 2021 are presented, including statistics on:

- Health Risks (KP Members Only)**
- Lifestyle-Related Chronic Health Conditions**
- Chronic Condition Management**
- Preventive Care**
- Member Engagement**

For some of these metrics (based on available data), multi-year comparisons are also presented to provide a look at year-to-year trends, along with benchmark comparisons of the KP Non-Medicare and Medicare groups to municipality retiree benchmark groups.

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

Summary

While the coronavirus pandemic has resulted in some fluctuations over the past 4 years in access to and use of healthcare resources, including health screenings and preventive care, the top health issues among LACERS members continue to be related to the risk for and effective management of **obesity, high blood pressure, diabetes, and depression**.

During the same time period, many LACERS members enrolled in Kaiser and Anthem Non-Medicare and Medicare plans **increasingly turned to virtual mechanisms** for their engagement with their healthcare resources.

In general, based on comparisons of the LACERS Kaiser Non-Medicare and Medicare member groups to Kaiser municipality retiree benchmark groups, the **LACERS KP groups were similar to the benchmarks for health risks, lifestyle-related chronic health conditions, chronic condition management, preventive care, and member engagement** during the 2021 reporting period. Summary comparisons of the LACERS KP groups vs the benchmark groups for these metrics for 2020 and 2021 are provided on page 5.

Key highlights of the report are presented in pages 6-16. Full versions of the Kaiser and Anthem health management metrics charts can be found in the Appendix on pages 27-53.

Recommendations for 2022/23 health management initiatives for Kaiser and Anthem, and for the LACERS *Well* program, are provided on pages 17-26.

Comparison of LACERS KP Member Groups to Benchmarks – 2020 and 2021

2020 LACERS KP Member Groups vs KP Benchmark Groups						
	Non-Medicare Members			Medicare Members		
	Better	Similar	Worse	Better	Similar	Worse
Top 3 Health Risks						
Obesity/Overweight			Worse		Similar	
Inadequate Exercise		Similar			Similar	
Pre-Diabetes		Similar				Worse
Top 3 Lifestyle-Related Chronic Conditions						
Hypertension		Similar			Similar	
Diabetes			Worse		Similar	
Depression		Similar			Similar	
Prevalence of Lifestyle-Related Chronic Conditions						
1 Condition			Worse		Similar	
2+ Conditions			Worse		Similar	
Chronic Condition Management						
Diabetes			Worse	Better		
Hypertension		Similar		Better		
High Cholesterol			Worse			Worse
Depression - Acute	Better				Similar	
Depression - Chronic	Better					Worse
Preventive Care Compliance						
Clinical Visit		Similar				Worse
Cervical Cancer Screening		Similar				Worse
Colorectal Cancer Screening				Better		
Breast Cancer Screening		Similar			Similar	
Flu Immunization			Worse	Better		
Member Engagement						
Getting Connected	Better					Worse
Knowing Numbers		Similar			Similar	
Staying Up to Date					Similar	
Seeking Care		Similar			Similar	

2021 LACERS KP Member Groups vs KP Benchmark Groups						
	Non-Medicare Members			Medicare Members		
	Better	Similar	Worse	Better	Similar	Worse
Top 3 Health Risks						
Obesity/Overweight		Similar			Similar	
Inadequate Exercise		Similar			Similar	
Pre-Diabetes		Similar				Worse
Top 3 Lifestyle-Related Chronic Conditions						
Hypertension		Similar			Similar	
Diabetes			Worse		Similar	
Depression		Similar			Similar	
Prevalence of Lifestyle-Related Chronic Conditions						
1 Condition		Similar			Similar	
2+ Conditions			Worse		Similar	
Chronic Condition Management						
Diabetes		Similar			Similar	
Hypertension		Similar			Similar	
High Cholesterol		Similar			Similar	
Depression - Acute	Better			Better		
Depression - Chronic	Better			Better		
Preventive Care Compliance						
Clinical Visit		Similar			Similar	
Cervical Cancer Screening		Similar			Similar	
Colorectal Cancer Screening		Similar			Similar	
Breast Cancer Screening		Similar			Similar	
Flu Immunization		Similar			Similar	
Member Engagement						
Getting Connected	Better				Similar	
Knowing Numbers		Similar			Similar	
Staying Up to Date		Similar			Similar	
Seeking Care		Similar			Similar	

- In 2021, the metrics for the LACERS KP member groups were closer to the benchmark comparison groups than they were in 2020, particularly for the LACERS Medicare group.
- The LACERS KP Non-Medicare group remained worse than the benchmark group in 2021 for prevalence of diabetes and 2+ chronic conditions.
- The LACERS KP Medicare group improved compared to the benchmark group for effective management of acute and chronic depression.

Key Highlights

Health Risks

KP Members:

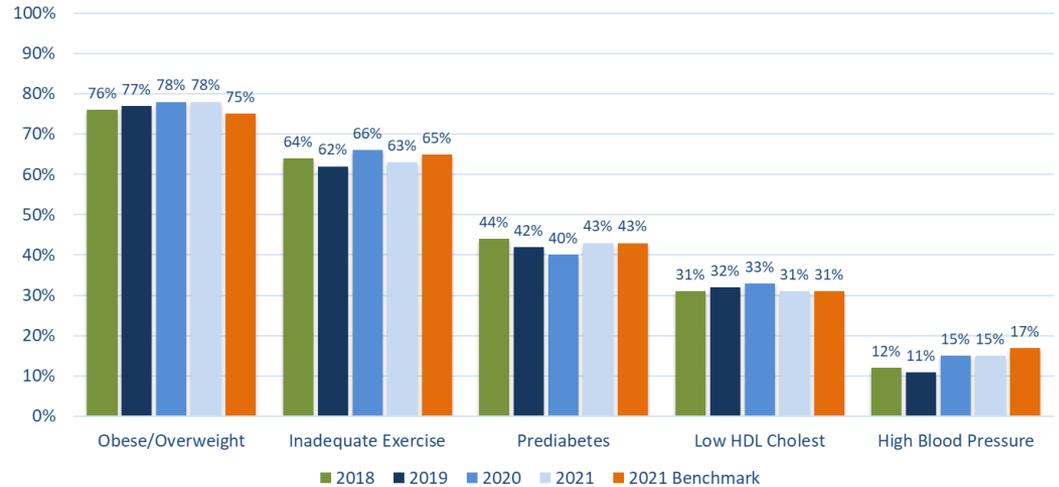
- In 2021, the top health risks among KP members have continued to be **obesity/overweight, inadequate exercise, prediabetes, low HDL (good) cholesterol, and high blood pressure**. Many members have two or more of these risk factors, most of which are associated with the low physical activity.
- The KP Medicare members had **higher rates for inadequate exercise, prediabetes, and high blood pressure** compared to Non-Medicare members during 2021.
- For 2021, the prevalence rates for the KP Non-Medicare and Medicare groups for these top health risks were **similar to the benchmark group rates**.
- Overall, the prevalence rates for these risk factors have remained **steady over the past four years, except for high blood pressure, which increased during 2020 and 2021**.

Health Risks

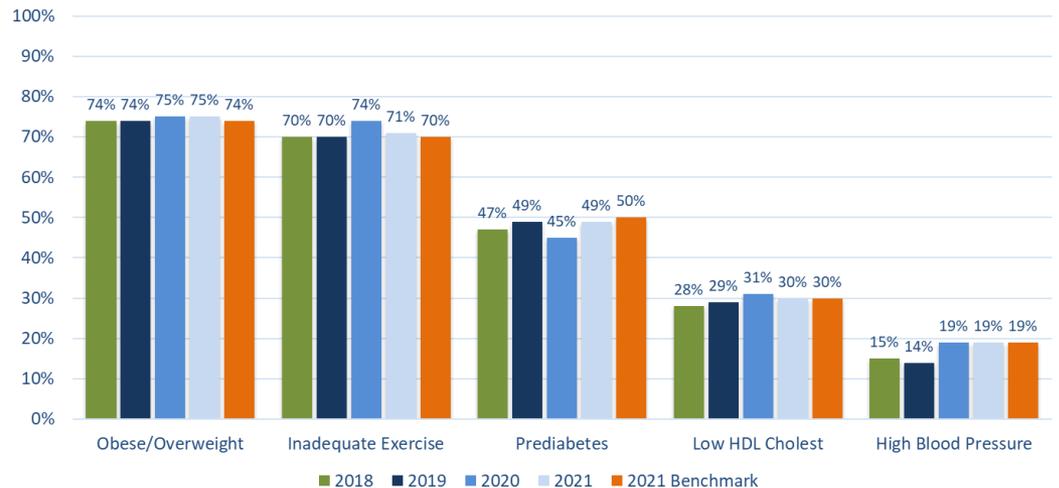
ABC Members:

- Health risk reporting for ABC members based on health risk assessments and biometric screenings are not available.

Health Risks – KP Members
Non-Medicare



Health Risks – KP Members
Medicare



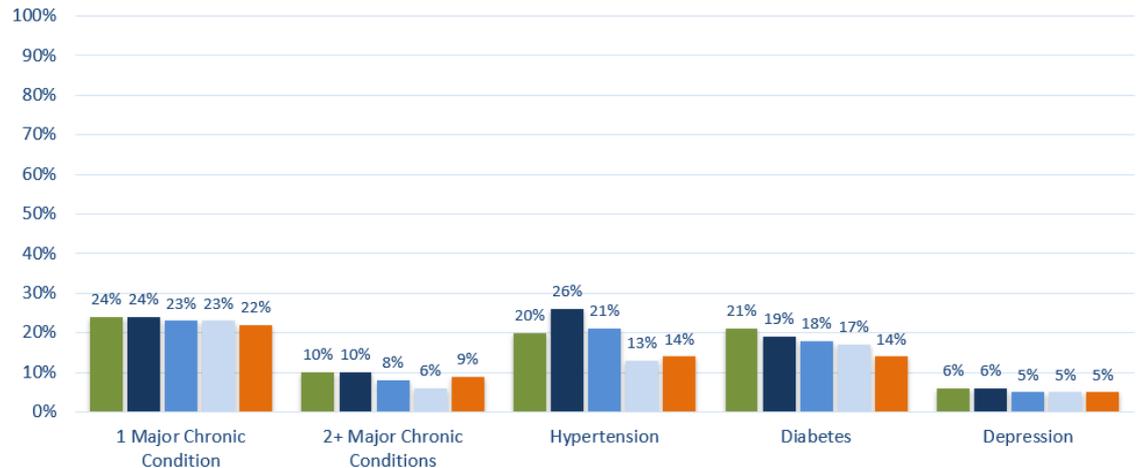
Key Highlights

Lifestyle-Related Chronic Health Conditions

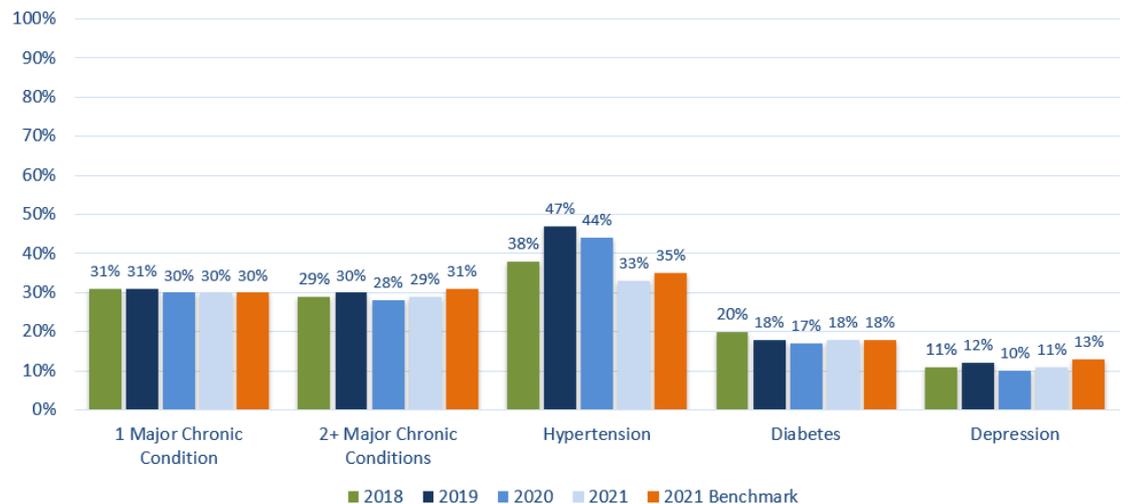
KP Members:

- In 2021, the top lifestyle-related chronic health conditions among KP members have continued to be **hypertension, diabetes, and depression**.
- The KP Medicare members had **significantly higher rates of hypertension and depression** compared to the Non-Medicare members during 2021.
- The KP Medicare members also had nearly **5 times the rate of multiple major chronic conditions** during 2021 compared to the Non-Medicare members.
- In 2021, most of the chronic condition rates for KP members were **similar to the benchmark group rates**, except for the **2+ major chronic conditions** (which was lower) and **diabetes** (which was higher) than benchmark for the **Non-Medicare group**.
- Overall, the prevalence rates for these lifestyle-related chronic health conditions have remained **steady over the past four years, except for hypertension**, which increased during 2019 and 2020 and then dropped significantly during 2021.

Lifestyle-Related Chronic Health Conditions – KP Members Non-Medicare



Lifestyle-Related Chronic Health Conditions – KP Members Medicare



Lifestyle-Related Chronic Health Conditions

ABC Members:

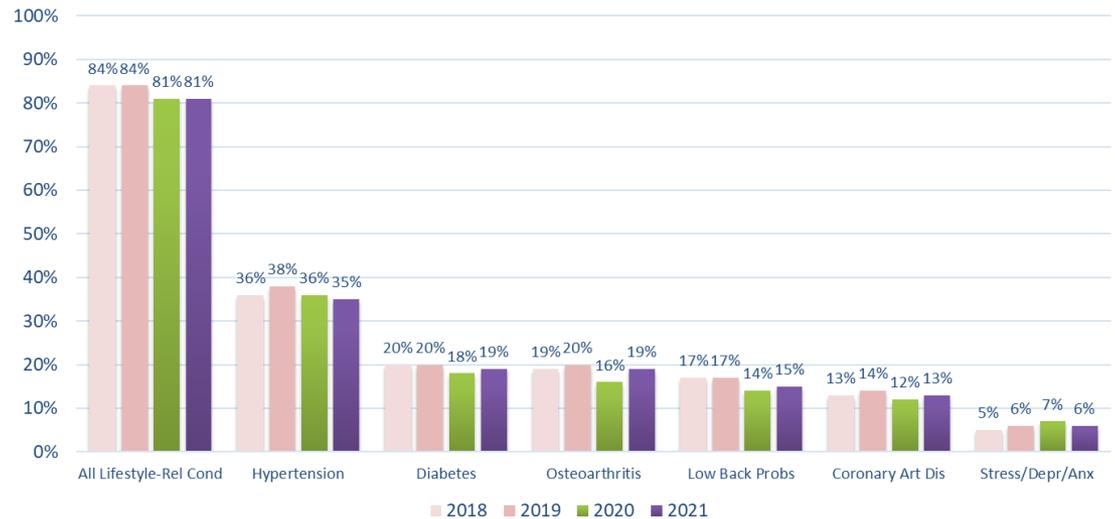
- In 2021, the top lifestyle-related chronic health conditions among ABC members were **hypertension, diabetes, osteoarthritis, low back problems, coronary artery disease, and stress/depression/anxiety.**
- The ABC Medicare members had **higher rates of these conditions** in 2021, especially for **hypertension**, compared to the Non-Medicare members.
- The **Non-Medicare group** has experienced a **downward trend** overall from 2018 to 2021 for **all lifestyle-related conditions combined** and for **diabetes**, while the prevalence rates for the **Medicare group** have remained **fairly steady**.

Note: No valid ABC retiree benchmark comparison groups were available.

**Lifestyle-Related Chronic Health Conditions – ABC Members
 Non-Medicare**



**Lifestyle-Related Chronic Health Conditions – ABC Members
 Medicare**



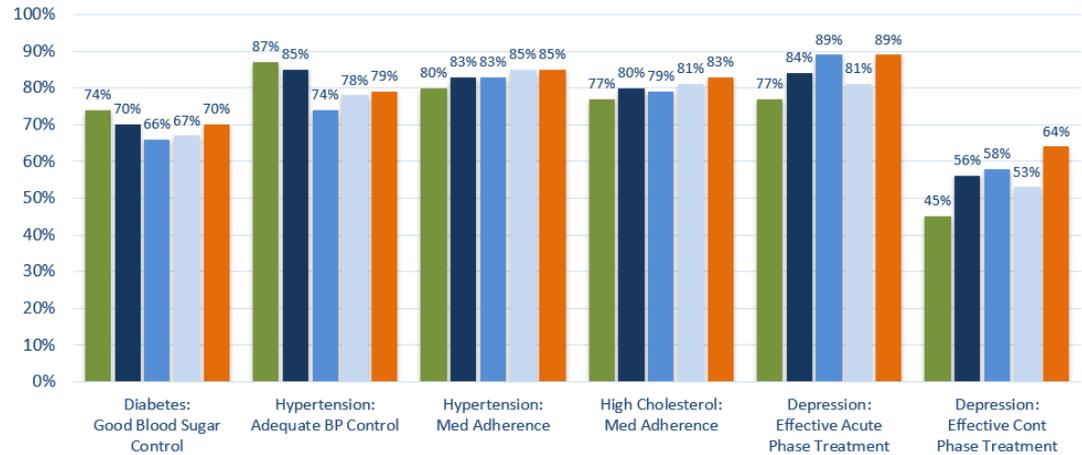
Key Highlights

Chronic Condition Management

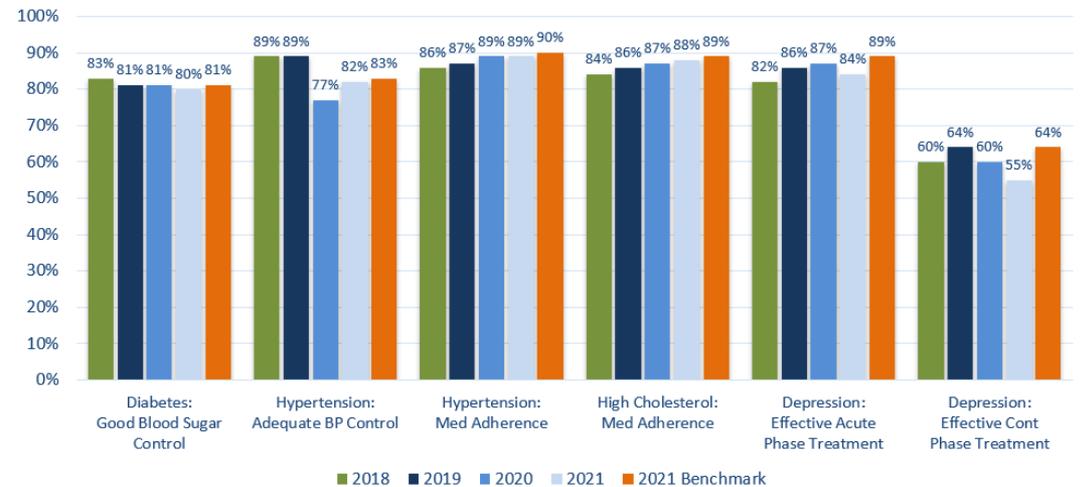
KP Members:

- In 2021, overall, a **high percentage** of KP members with top lifestyle-related chronic conditions were being **well managed**, with similar condition control rates for both the Non-Medicare and Medicare groups.
- Overall, the KP **Medicare members** had **higher rates of effective management** for these conditions than Non-Medicare members during 2021.
- In 2021, most of the effective condition management rates for KP members were **similar to the benchmark group, except for treatment of depression** (for both acute and continuous phase treatment), which was **lower than the benchmark rate**.
- Over the past four years, the rates for **hypertension and high cholesterol medication adherence** have continuously **trended upward**, while the rates for effective management of the other conditions have flat or inconsistent.

Chronic Condition Management – KP Members
Non-Medicare



Chronic Condition Management – KP Members
Medicare



Key Highlights

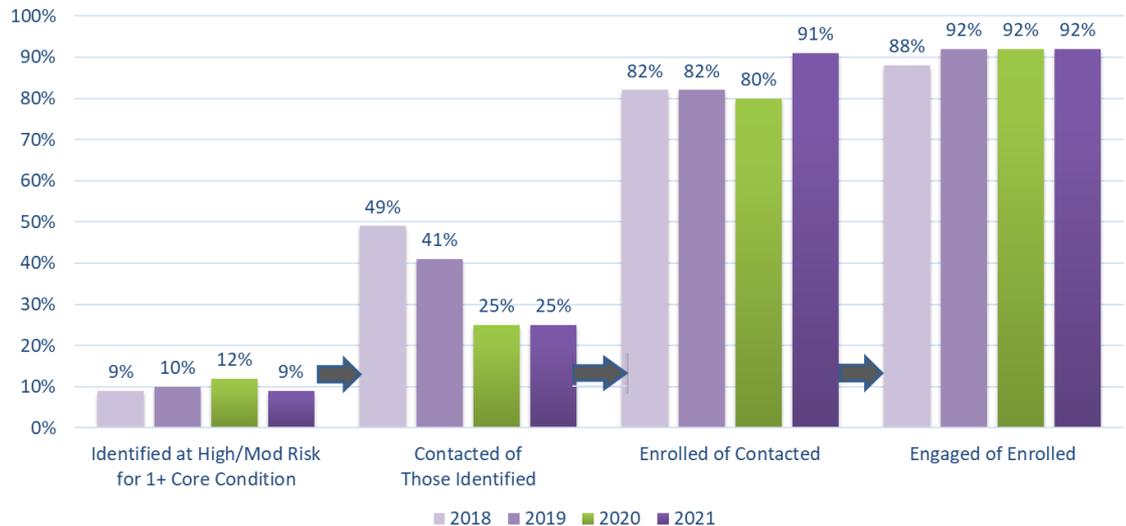
Chronic Condition Management

ABC Members:

- The percentage of the ABC members (as a combined Non-Medicare and Medicare group) who were **identified at high or moderate risk** for 1 or more of the core chronic conditions **dropped slightly in 2021**.
- Of those identified at high or moderate risk, the percentages of ABC members who were **able to be contacted by phone** for condition management **dropped significantly** in 2020 and 2021, although **enrollment** of those contacted **increased** in 2021.
- During 2018 to 2021, once they were enrolled, a **high percentage** of the ABC members **remained engaged** in the condition management program.

Note: No valid ABC retiree benchmark comparison groups were available.

Chronic Condition Management – ABC Members Non-Medicare & Medicare



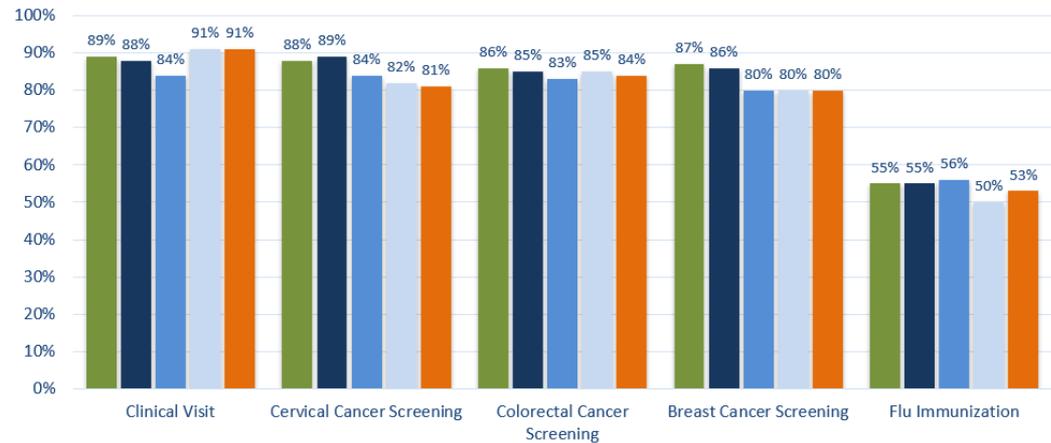
Key Highlights

Preventive Care

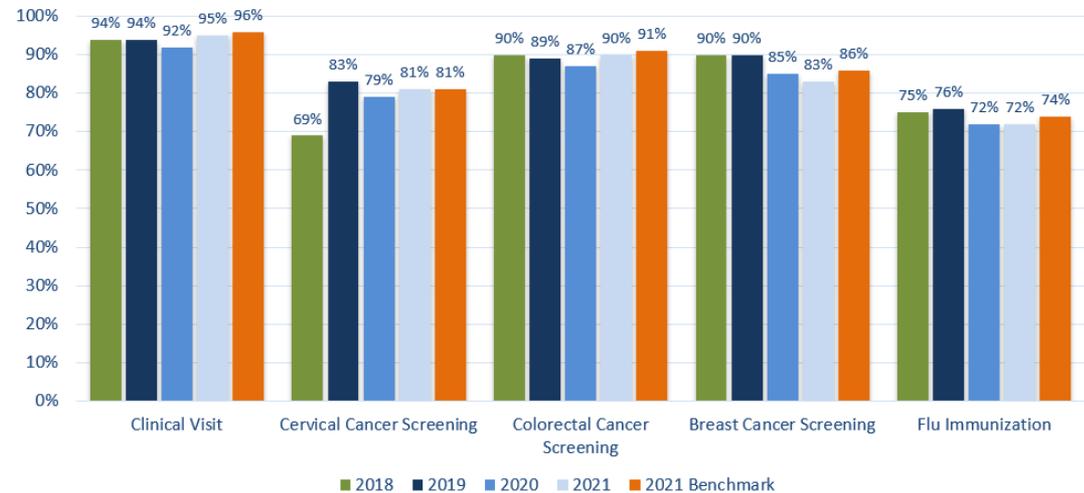
KP Members:

- In 2021, KP members continued to have **high rates of preventive care compliance overall** for both Non-Medicare and Medicare groups – **except for flu immunization**, especially for the Non-Medicare group.
- The 2021 preventive care rates for KP members were **similar to the benchmark groups**.
- The KP member rates have been **relatively consistent over the past 4 years** except for a **slight downward trend in cervical cancer screening** for the Non-Medicare group and **breast cancer screening** for both groups.

Preventive Care Compliance of Eligible Members – KP Members
Non-Medicare



Preventive Care Compliance of Eligible Members – KP Members
Medicare



*See Appendix for screening criteria

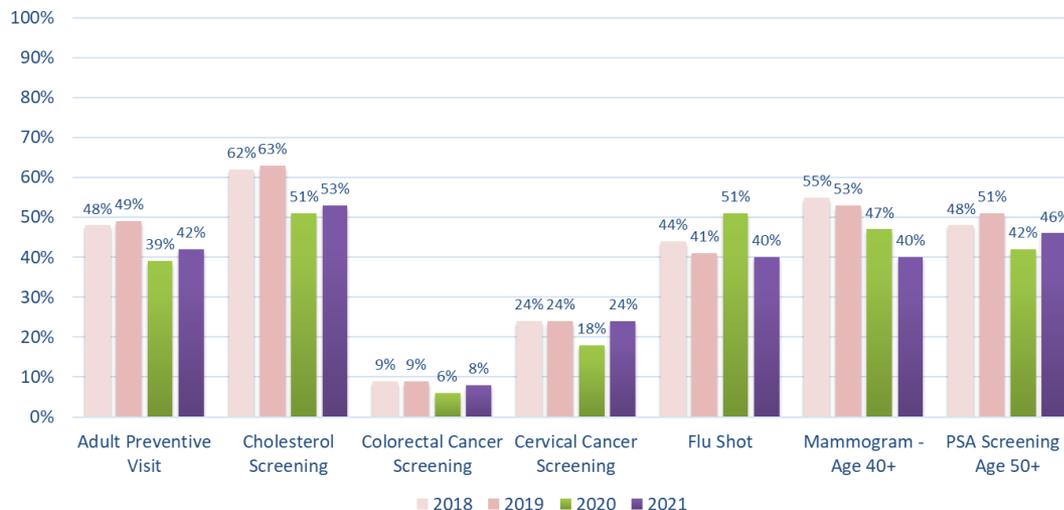
Preventive Care

ABC Members:

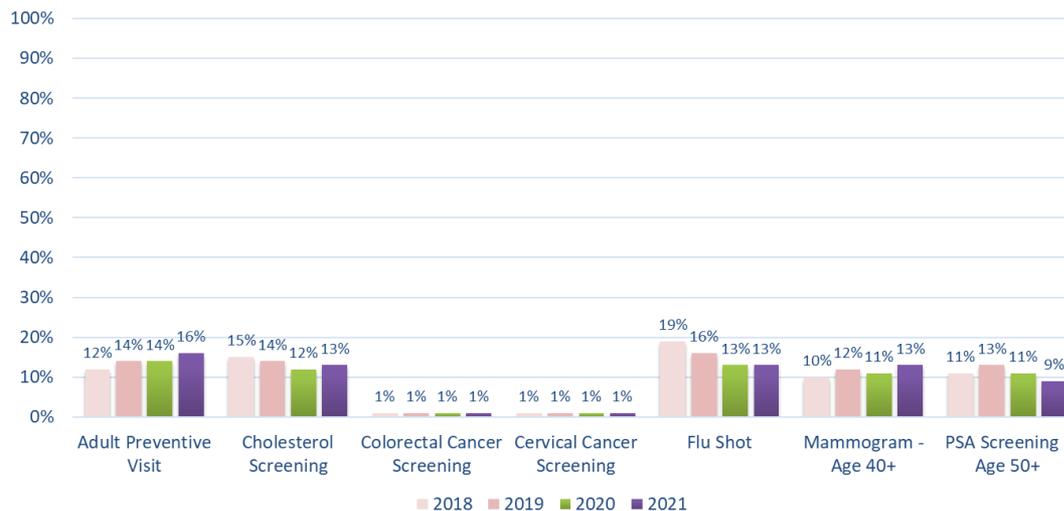
- Overall, preventive care compliance has been relatively low.
- Compliance rates dropped in 2020 for both the ABC Non-Medicare and Medicare groups, except that Non-Medicare member flu shots increased that year.
- Some of the preventive care rates rebounded in 2021, but mammogram screening continued a downward trend.
- Compliance rates for both groups were low for colorectal and cervical cancer screening.
- ABC Medicare group compliance rates presented in this report are low compared to the Non-Medicare group because they reflect only the preventive care claims paid by ABC as secondary to Medicare payment.

Note: No valid ABC retiree benchmark comparison groups were available for these preventive care metrics.

**Preventive Care Compliance of Eligible Members – ABC Members
 Non-Medicare**



**Preventive Care Compliance of Eligible Members – ABC Members
 Medicare**



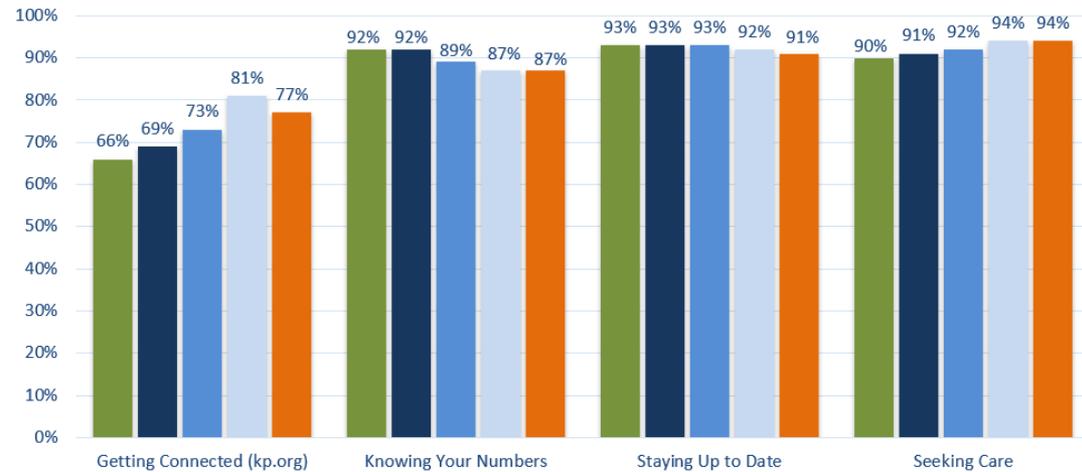
Key Highlights

Member Engagement

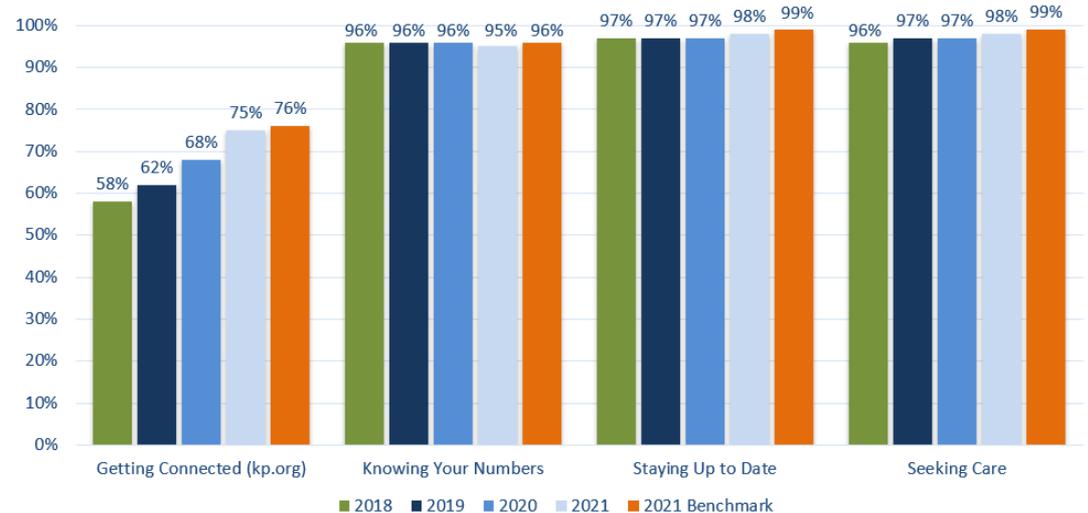
KP Members:

- In 2021, KP members had **high rates** of member engagement for **Getting Connected** (registration and sign-on to the kp.org website), **Knowing Your Numbers** (BMI, BP, or Exercise measured), **Staying Up to Date** (cholesterol or glucose measured; cancer screenings; or flu shot), and **Seeking Care** (outpatient visit, nurse line, email to doctor, or prescription filled).
- All of the 2021 KP member engagement rates are **close to the benchmarks** except for **Getting Connected**, which was **higher than the benchmark for the Non-Medicare group**.
- The **Getting Connected** rates for both the Medicare and Non-Medicare groups have been **steadily increasing over the past four years**, particularly in 2021, while the **rates for the other engagement metrics have been consistently high** for both groups.

Member Engagement – KP Members
Non-Medicare



Member Engagement – KP Members
Medicare



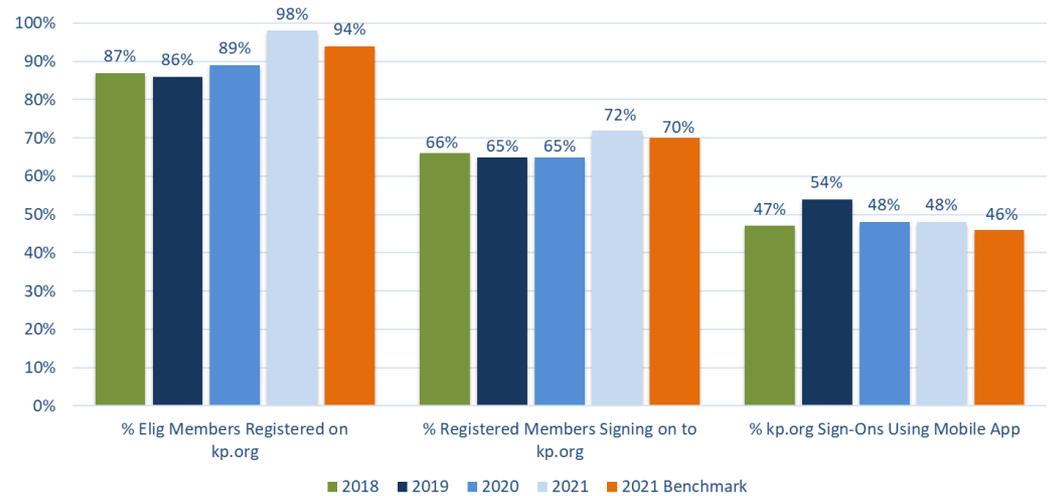
Key Highlights

Member Engagement

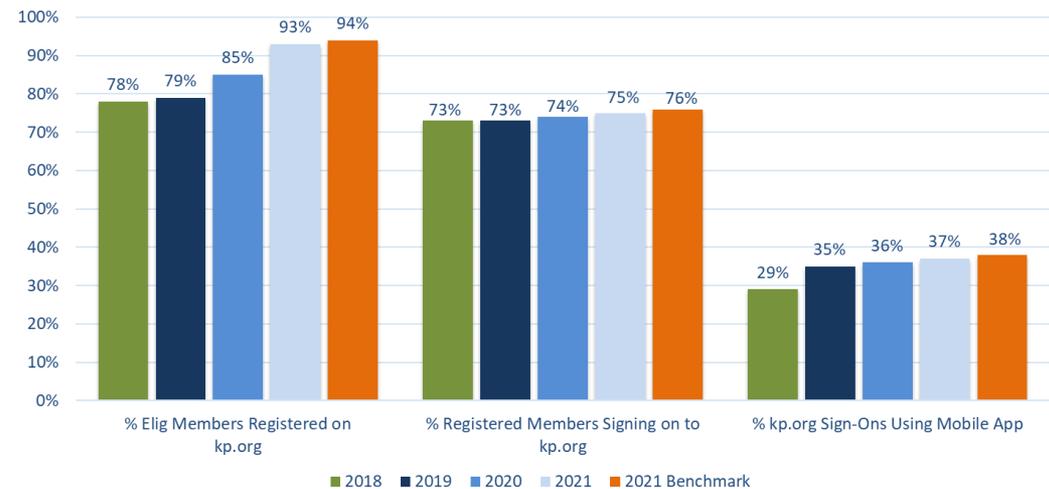
KP Members:

- Over the past four years, KP members have had **high rates of members registered on kp.org**, with nearly all Non-Medicare and Medicare group members registered in 2021.
- The percentage of members **signing on to the kp.org website was relatively flat** during 2018-2020, with a **jump in the KP Non-Medicare group rate in 2021**.
- The **KP Medicare group had a higher percentage of members signing-on to kp.org overall** during the four-year period, but a **lower percentage using the mobile app** to sign-on.
- The 2021 rates for the LACERS KP groups were **similar to the benchmark groups**.

Online/Mobile Utilization – KP Members
Non-Medicare



Online/Mobile Utilization – KP Members
Medicare



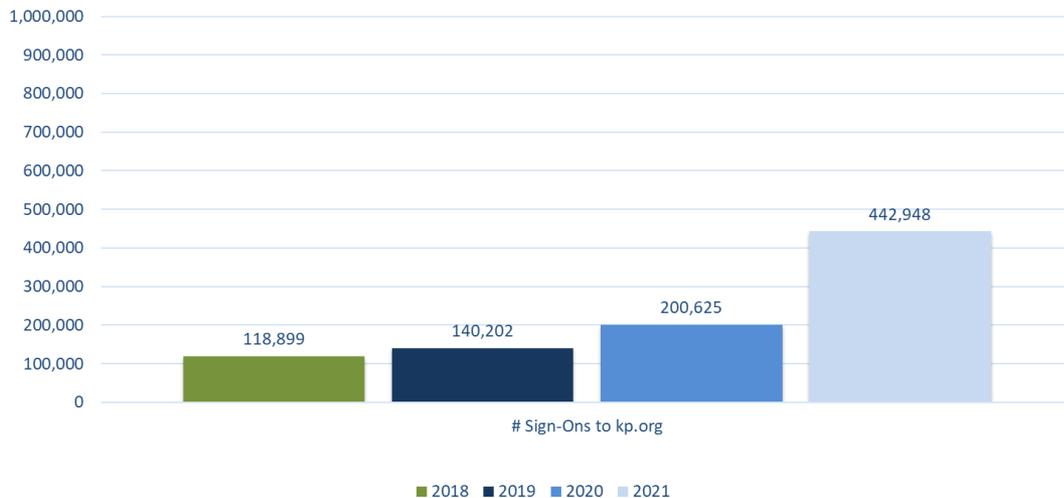
Key Highlights

Member Engagement

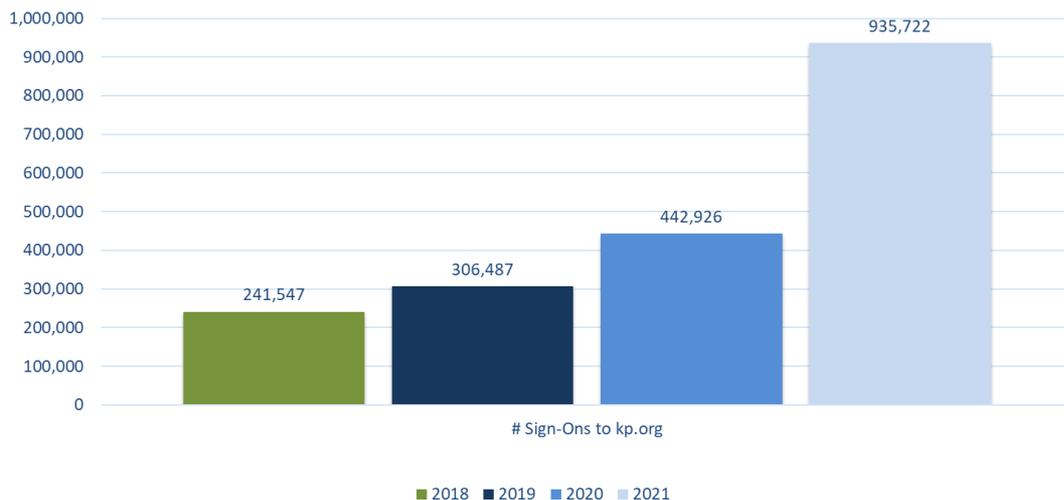
KP Members:

- The number of sign-ons to kp.org increased each year during the 4-year period, with large jumps in 2021 for both the Non-Medicare and Medicare groups.

Online/Mobile Utilization – KP Members
Non-Medicare



Online/Mobile Utilization – KP Members
Medicare



Key Highlights

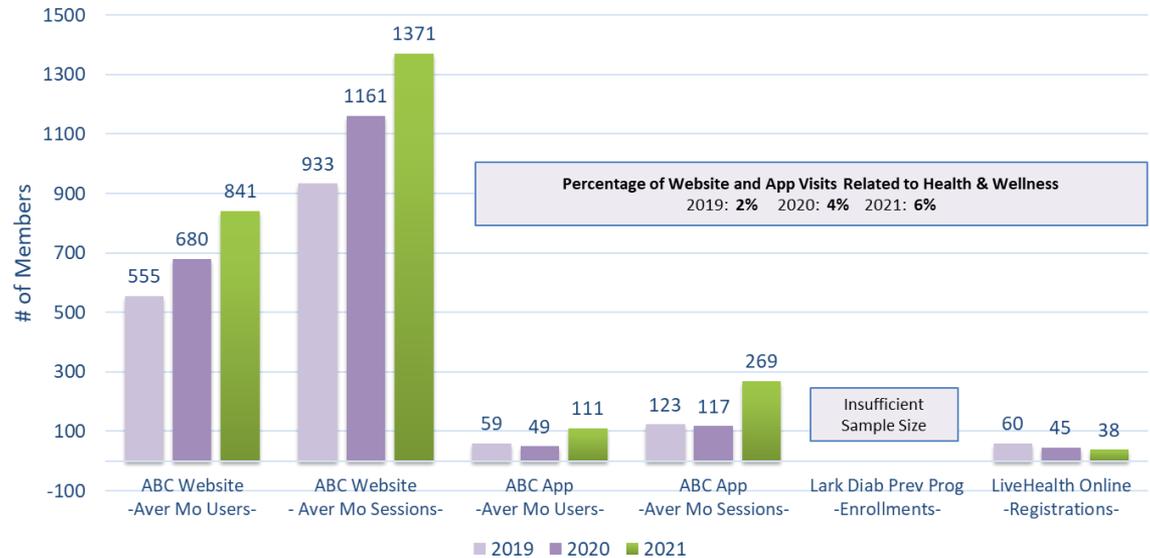
Member Engagement

ABC Members:

- During the 3-year period of 2019 to 2021, ABC member use of the relatively new ABC website continued to grow.
- Utilization of the ABC mobile app grew significantly in 2021.
- Health and wellness visits to the website and app among ABC members also increased.
- LiveHealth Online registrations, which have seen limited use, decreased during 2020 and 2021.
- The recently launched Lark Diabetes Prevention Program – which replaced the Solera DPP that was sunsetted in 2020 – has had insufficient enrollment to meet HIPAA requirements for reporting.

Note: No valid ABC retiree benchmark comparison groups were available for these member engagement metrics.

Member Engagement – ABC Members Medicare & Non-Medicare



Recommendations for 2022/23 Kaiser and Anthem Health Management Focus Areas

As part of its comprehensive health management approach, LACERS has collaborated with Kaiser Permanente, Anthem Blue Cross, and its other healthcare carriers over the past 9 years to promote the health and well-being of its members and support the LACERS *Well* wellness program. The following recommendations are provided for the KP and ABC health management initiatives, based on the data collected for this report.

Recommended 2022/23 Kaiser Permanente Focus Areas:

- 1) Intensify efforts to address the following health issues and co-morbidities, particularly for the Medicare members:

Overweight/Obesity

Prehypertension/Hypertension

Prediabetes/Diabetes

Depression

- 2) Improve **management of blood sugar control for diabetes** and **effective continuous phase treatment for depression** for KP Non-Medicare and Medicare members.
- 3) Increase member participation in **flu immunizations**, particularly for KP Non-Medicare members.
- 4) Increase member awareness and utilization of **KP's mobile app and new virtual wellness and condition management program resources**.

2022/23 Focus Area Recommendations for Anthem Blue Cross

Recommended 2022/23 Anthem Blue Cross Focus Areas:

- 1) Facilitate the collection and reporting of **ABC member health risk data**, particularly overweight and obesity.
- 2) Intensify efforts to address the following health issues and co-morbidities, particularly for the Medicare members:

Overweight/Obesity	Prediabetes/Diabetes
Prehypertension/Hypertension	Osteoarthritis/Low Back Problems
- 3) Improve **ability to contact members** identified as having chronic health conditions.
- 4) Increase eligible member **compliance with recommended preventive care screenings**, particularly for adult preventive visits and immunizations.
- 5) Increase member awareness of and participation in **ABC's telemedicine and new virtual wellness and condition management program resources**, including the new Lark diabetes prevention program and the Sydney mobile app.

LACERS Well Program Initiatives Conducted During 2021/22

Over the past 4 years, the LACERS Well wellness program team – in collaboration with its medical, dental, and vision carriers and the Keenan health management consultants – **has expanded and aligned its wellness initiatives to address the key health issues facing LACERS members.**

During the 2021/22 plan year, the LACERS Well program has provided an **extensive array of resources, activities, and communications** to improve the health and well-being of its member population. As part of those initiatives, the wellness program has also focused on **encouraging members to connect with their health plans and primary care providers** for utilization of the many preventive care and health management services available to them.

LACERS Well Program Initiatives During 2021/22

Physical Activity	2021/2022: Fitness Made Simple Virtual Fitness Classes; Champion-led Activities (Walks in Park, Hiking, Golfing); 2021-2022 Newsletter – Getting Your Health Back on Track
Healthy Nutrition Habits	2/17/22: Kaiser Eat Well, Live Well Webinar; 4/18/22: Kaiser Plant-Based Meal Planning Webinar
Weight Control	2/24/22: Kaiser Managing Your Weight Webinar
Blood Pressure Monitoring	4/25/22: Kaiser Dietary Approaches to Stopping Hypertension (DASH) Meal Plan Webinar; 5/12/22 Kaiser Taking Care of Your Heart Webinar
Diabetes Prevention and Management	5/17/22: Kaiser Keys to Preventing Diabetes Webinar
Wellness & Condition Management	8/2021: Anthem ConditionCare Mailing
Telemedicine and Mobile App Availability	8/2021: Wellness Newsletter article: Telemedicine Appointments Available Through Your Health Plan
Preventative Screenings & Flu Shots	8/2021: Wellness Newsletter article: Preventive Care Screenings and Flu Shots for All Members
Depression & Anxiety Resources	2/2022: Kaiser Wellbeing Webinars – Emotional Wellbeing, Cultivating Mindfulness, Managing Stress
Loneliness & Isolation Resources	4/2022: County of LA Dept of Mental Health Wellness Series – Isolation, Resilience, Sleep
Health Plan Website Resources	8/2021: Wellness Newsletter article: Five Ways to Get the Most Out of Your Health Benefits; Lacers.org Health Plan Carrier Resources & Microsites
Active City Resource Collaboration	2021/22 Kaiser Wellbeing Webinars on Healthy Eating, Weight Control, Hypertension and Diabetes Management open to both Retirees and Active Members

Recommendations for 2022/23 LACERS Well Program Focus Areas

The coronavirus pandemic which struck the U.S. in 2020 resulted in the need to pivot from in-person to virtual formats (e.g., webinars, virtual chats, podcasts, videos, etc.) for LACERS Well program activities, and this approach has continued through 2021 and into 2022. Keeping the coronavirus safety issues in mind, the following recommendations are provided for focus areas for 2022/23 LACERS Well program initiatives, based on the Kaiser and Anthem data collected for this report:

- 1) Continue to promote **physical activity, healthy nutrition habits, weight control, and tobacco cessation** for both the younger and older retirees.
- 2) Continue to encourage members to consistently **monitor their blood pressure, blood glucose, and cholesterol**, particularly those who have paused their healthcare visits during the pandemic.
- 3) Continue to promote the **new virtual wellness and condition management program options** (including diabetes prevention and management programs) available to members through their Kaiser or Anthem health plans.
- 4) Continue to promote the **telemedicine options and mobile apps** available through the carriers.

2022/23 Focus Area Recommendations for LACERS Well

- 5) Continue to promote **preventive care screenings and flu shots** for all members, particularly for those who have paused that preventive care during the pandemic.
- 6) Expand programs and resources that address **depression and anxiety**, particularly for older retirees, but also for younger members who are also experiencing a greater severity of these mental health issues as a result of the pandemic.
- 7) Expand programs and resources that address **loneliness and isolation**, which has become a greater issue for members during the pandemic as well.
- 8) Provide a **virtual back care program** to all members.
- 9) Continue to **direct members to use the health plan websites** to access their personal health care information (e.g., lab results), communicate with their doctor, schedule appointments, and order prescriptions.
- 10) Continue to **explore opportunities to collaborate with the City of LA's employee wellness/health management program** to share and co-promote the collective resources available to employees and retirees.
- 11) Participate in the newly formed **California Municipality Retiree Wellness Collaborative**, in partnership with carriers and community organizations, to exchange ideas, share resources, and identify opportunities for offering joint activities to support retiree health and wellness.

APPENDIX

Health Management Metrics – Full Version

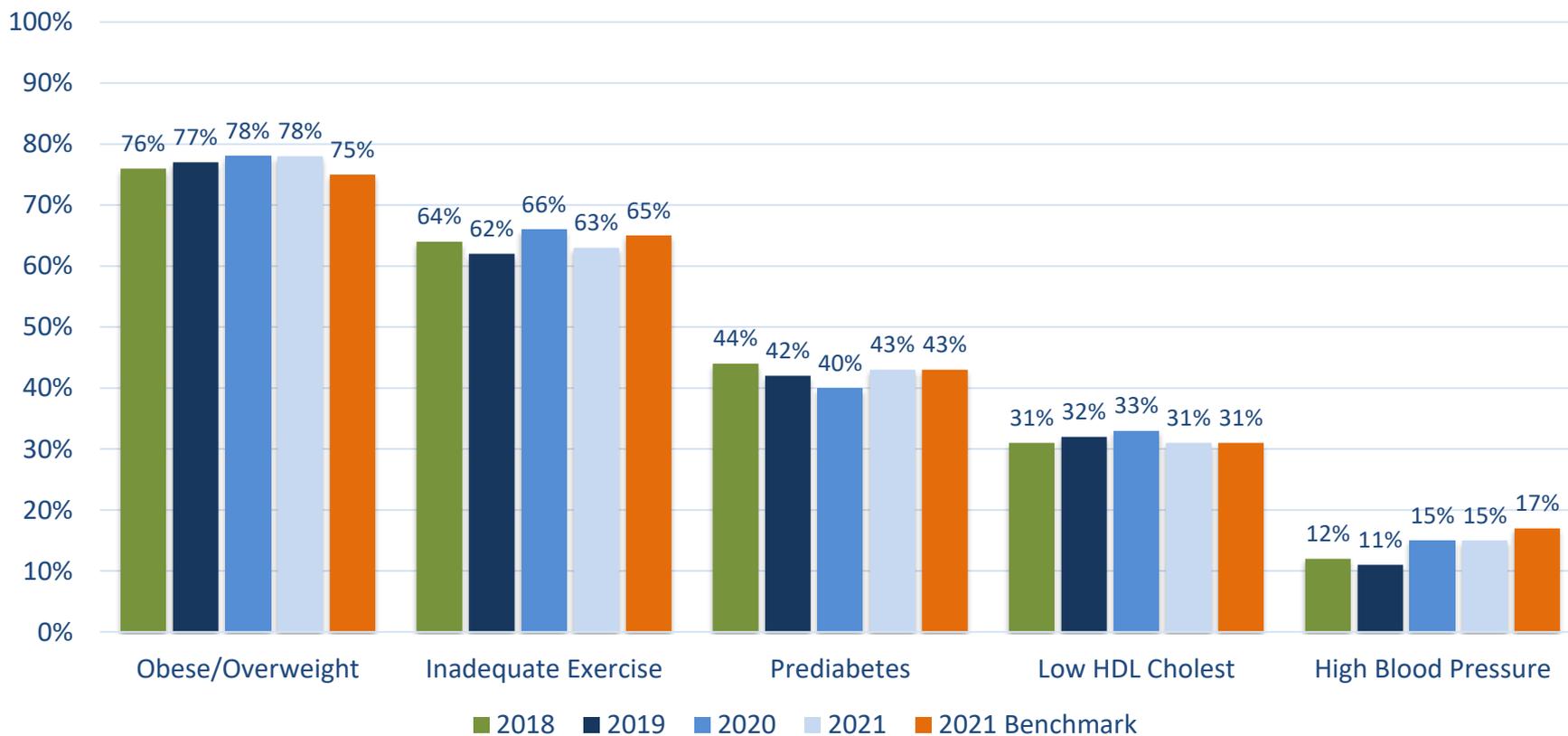
2020 Comparison of LACERS KP Member Groups to Benchmarks

2020 LACERS KP Member Groups vs KP Benchmark Groups						
	Non-Medicare Members			Medicare Members		
	Better	Similar	Worse	Better	Similar	Worse
Top 3 Health Risks						
Obesity/Overweight			Worse		Similar	
Inadequate Exercise		Similar			Similar	
Pre-Diabetes		Similar				Worse
Top 3 Lifestyle-Related Chronic Conditions						
Hypertension		Similar			Similar	
Diabetes			Worse		Similar	
Depression		Similar			Similar	
Prevalence of Lifestyle-Related Chronic Conditions						
1 Condition			Worse		Similar	
2+ Conditions			Worse		Similar	
Chronic Condition Management						
Diabetes			Worse	Better		
Hypertension		Similar		Better		
High Cholesterol			Worse			Worse
Depression - Acute	Better				Similar	
Depression - Chronic	Better					Worse
Preventive Care Compliance						
Clinical Visit		Similar				Worse
Cervical Cancer Screening		Similar				Worse
Colorectal Cancer Screening		Similar		Better		
Breast Cancer Screening		Similar			Similar	
Flu Immunization			Worse	Better		
Member Engagement						
Getting Connected	Better					Worse
Knowing Numbers		Similar			Similar	
Staying Up to Date		Similar			Similar	
Seeking Care		Similar			Similar	

2021 Comparison of LACERS KP Member Groups to Benchmarks

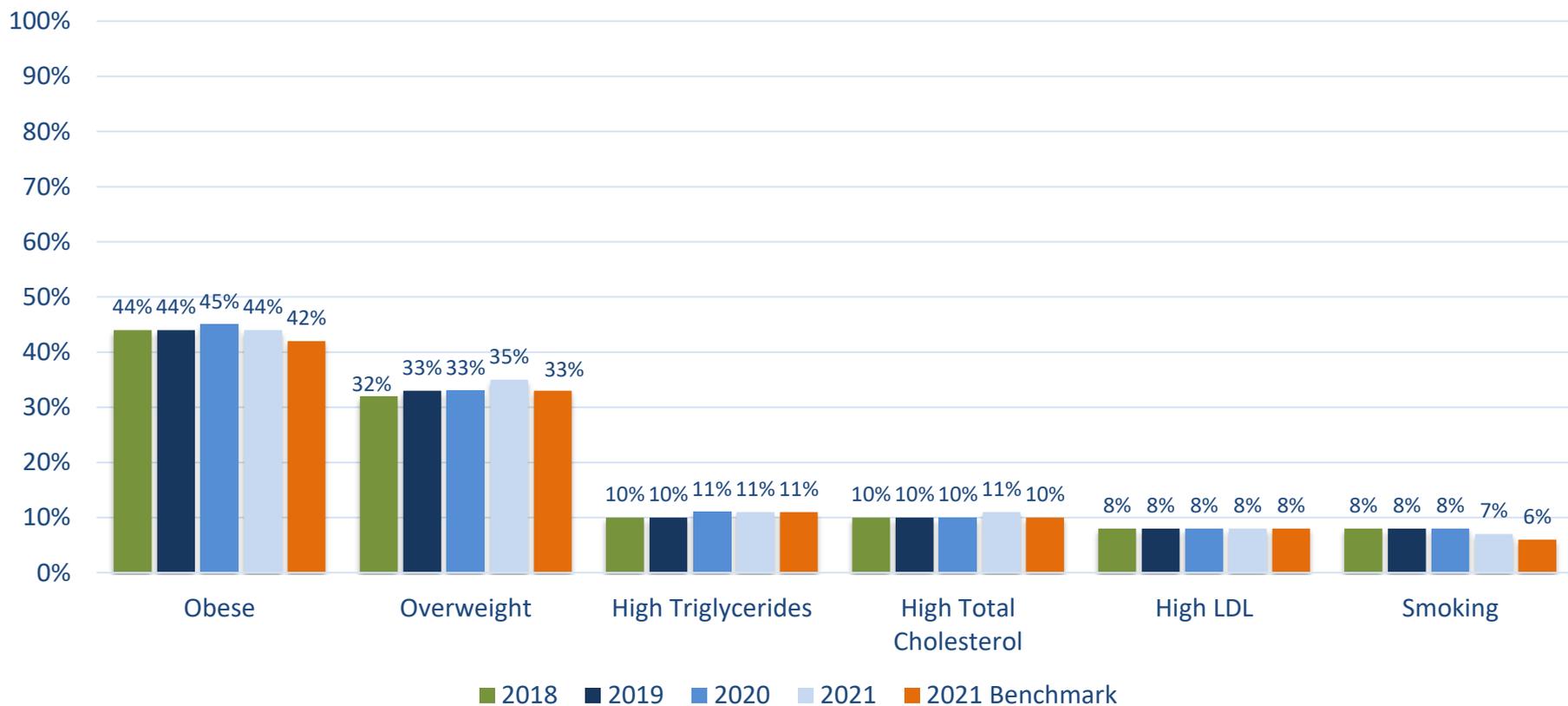
2021 LACERS KP Member Groups vs KP Benchmark Groups						
	Non-Medicare Members			Medicare Members		
	Better	Similar	Worse	Better	Similar	Worse
Top 3 Health Risks						
Obesity/Overweight		Yellow			Yellow	
Inadequate Exercise		Yellow			Yellow	
Pre-Diabetes		Yellow			Yellow	
Top 3 Lifestyle-Related Chronic Conditions						
Hypertension		Yellow			Yellow	
Diabetes			Red		Yellow	
Depression		Yellow			Yellow	
Prevalence of Lifestyle-Related Chronic Conditions						
1 Condition		Yellow			Yellow	
2+ Conditions			Red		Yellow	
Chronic Condition Management						
Diabetes		Yellow			Yellow	
Hypertension		Yellow			Yellow	
High Cholesterol		Yellow			Yellow	
Depression - Acute	Green			Green		
Depression - Chronic	Green			Green		
Preventive Care Compliance						
Clinical Visit		Yellow			Yellow	
Cervical Cancer Screening		Yellow			Yellow	
Colorectal Cancer Screening		Yellow			Yellow	
Breast Cancer Screening		Yellow			Yellow	
Flu Immunization		Yellow			Yellow	
Member Engagement						
Getting Connected	Green				Yellow	
Knowing Numbers		Yellow			Yellow	
Staying Up to Date		Yellow			Yellow	
Seeking Care		Yellow			Yellow	

Health Risks – KP Members Non-Medicare

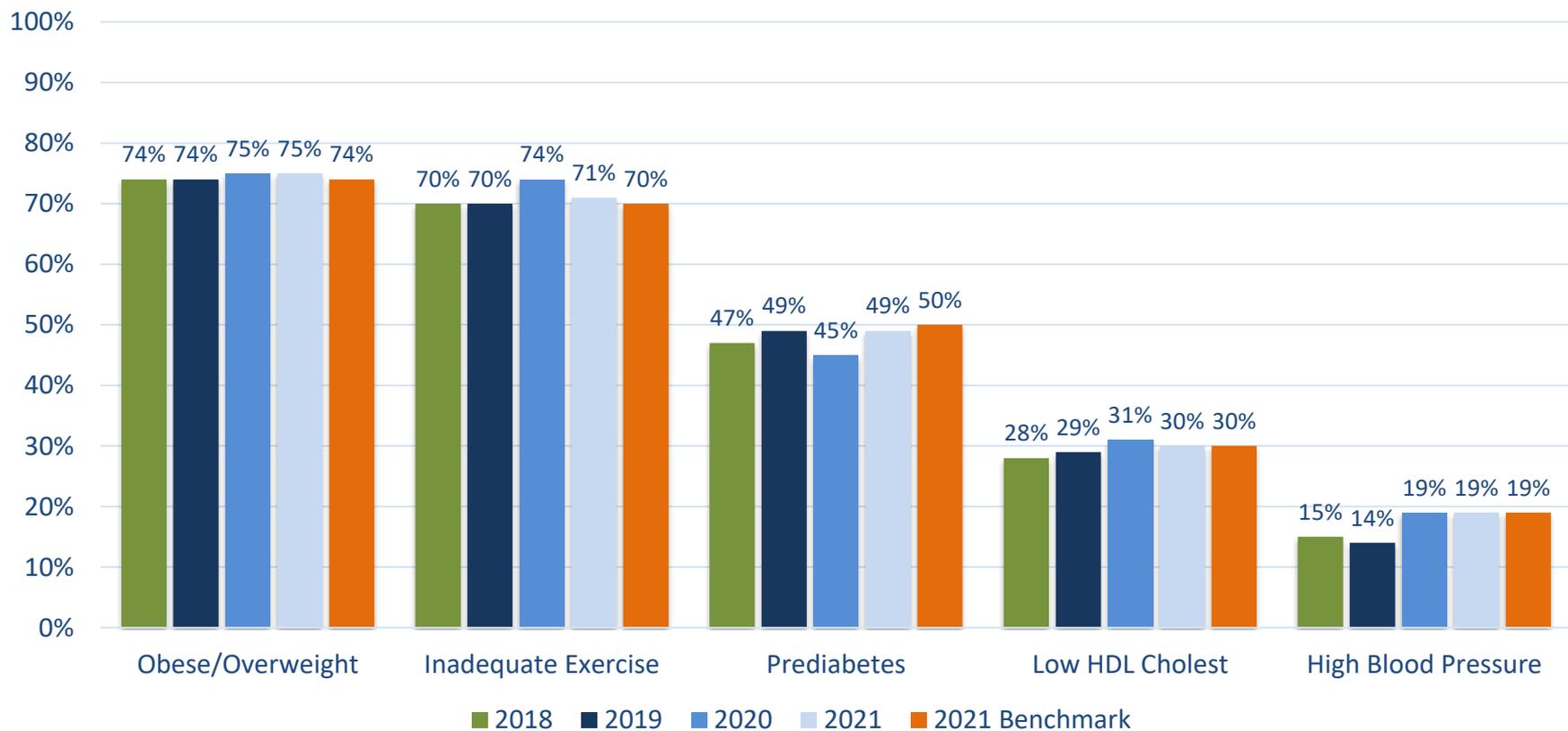


Kaiser Permanente Members

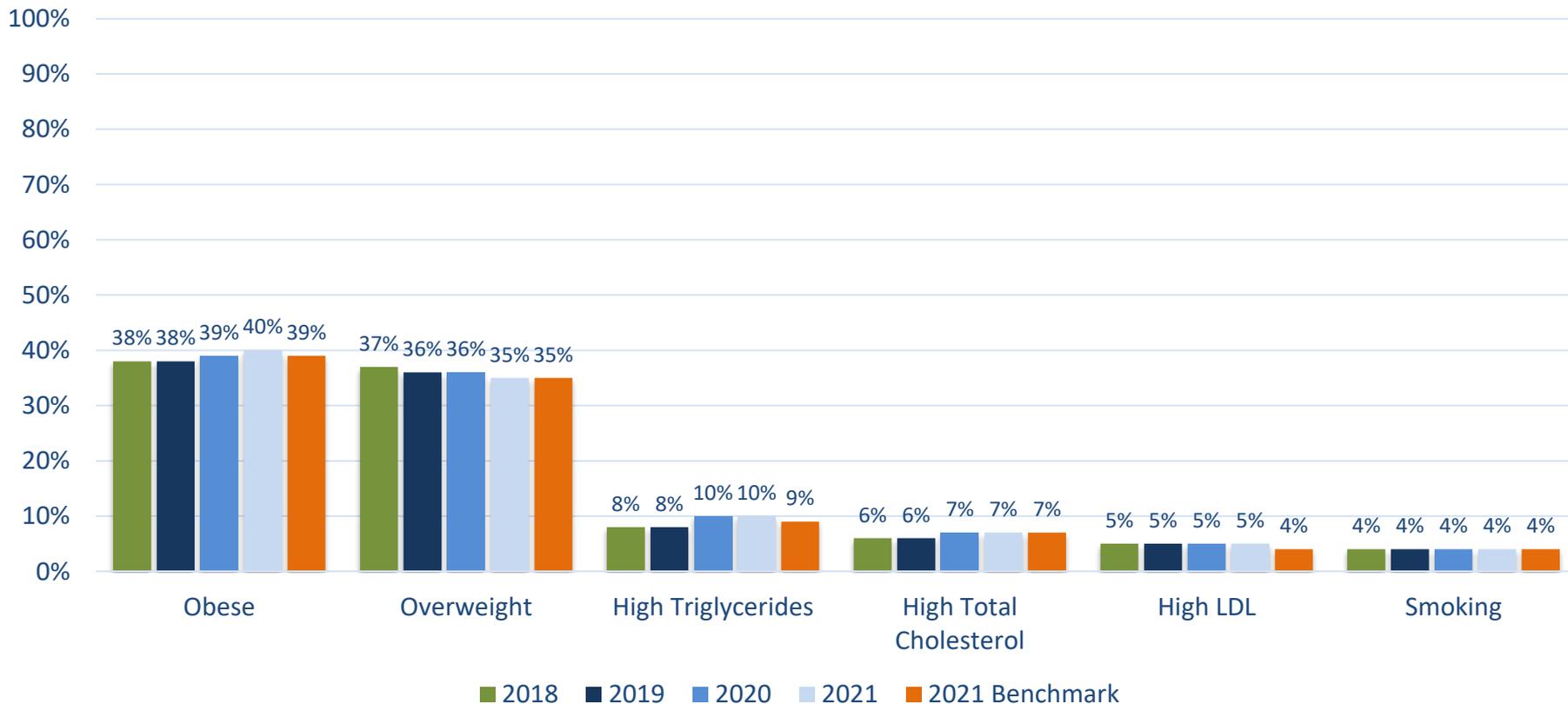
Health Risks – KP Members Non-Medicare



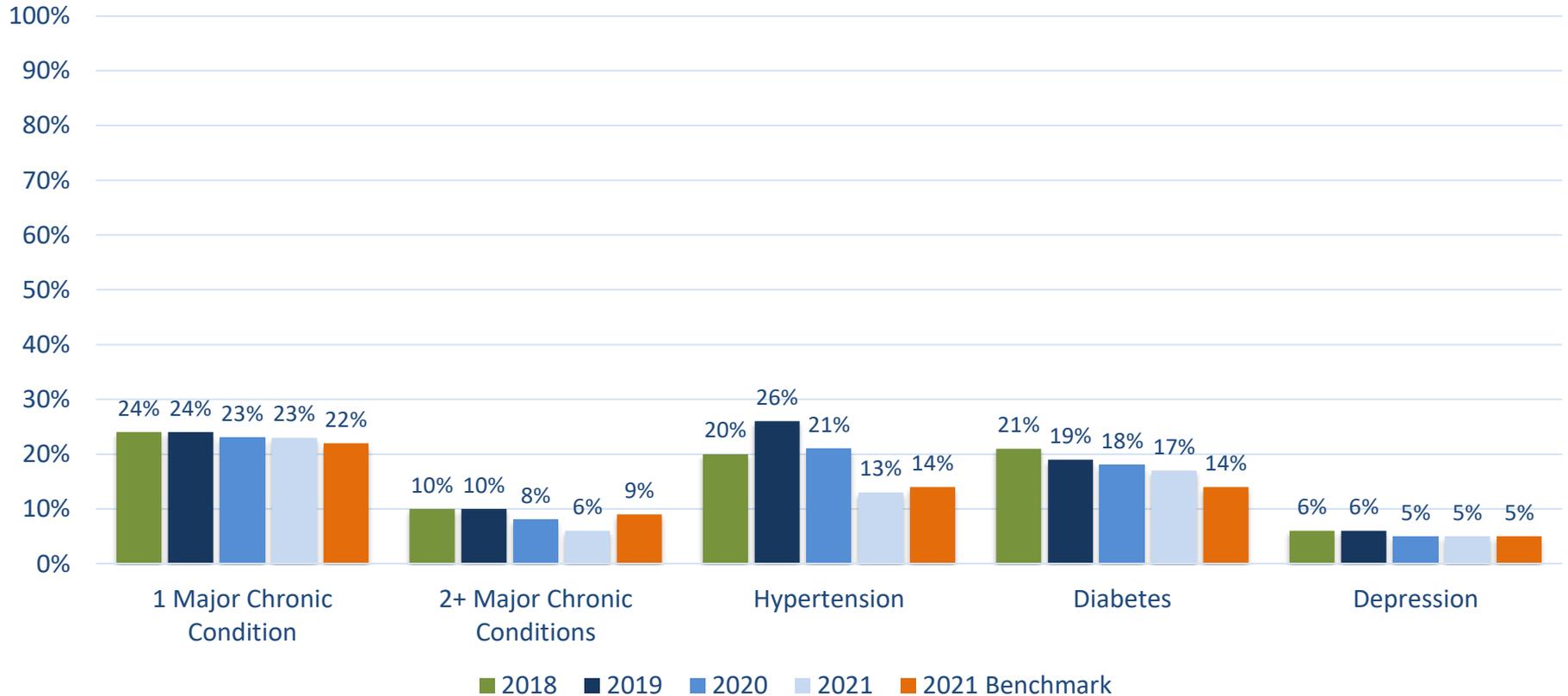
Health Risks – KP Members Medicare



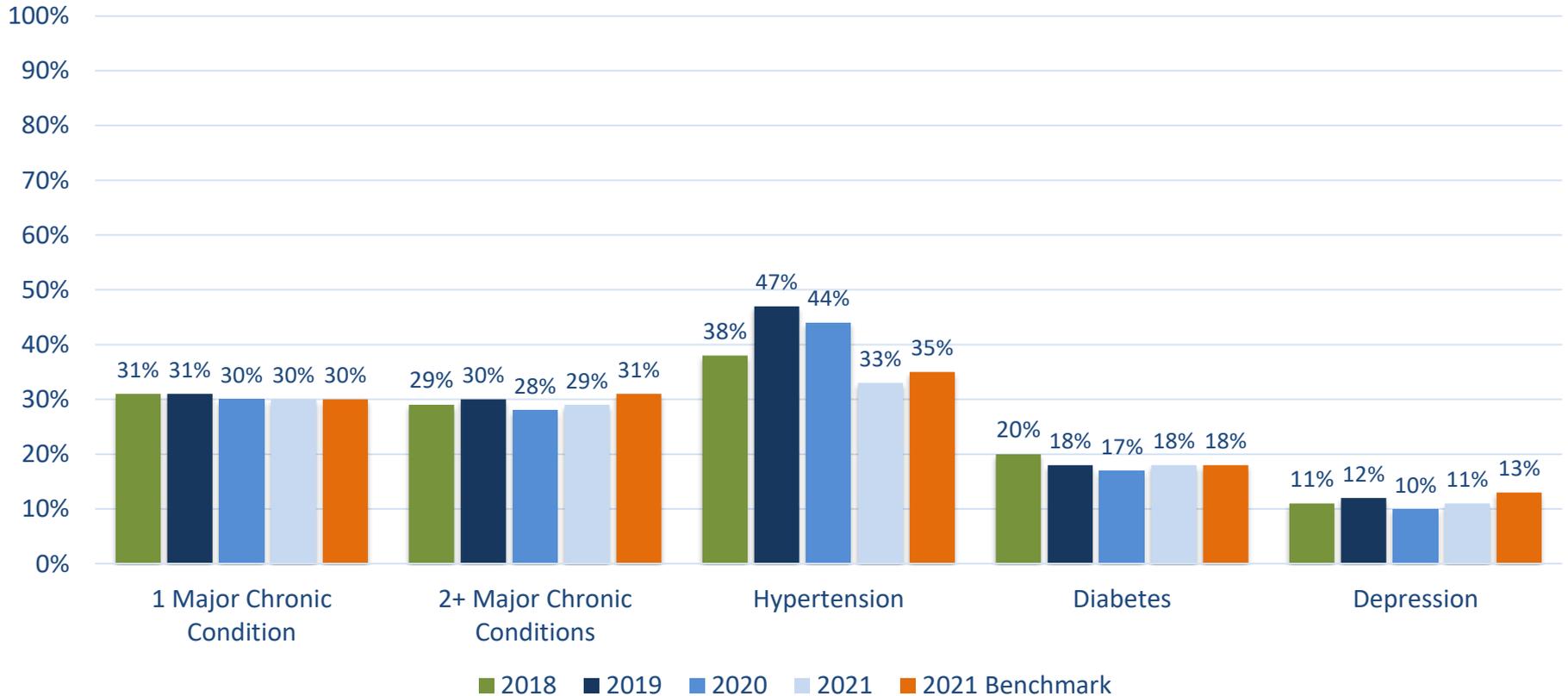
Health Risks – KP Members Medicare



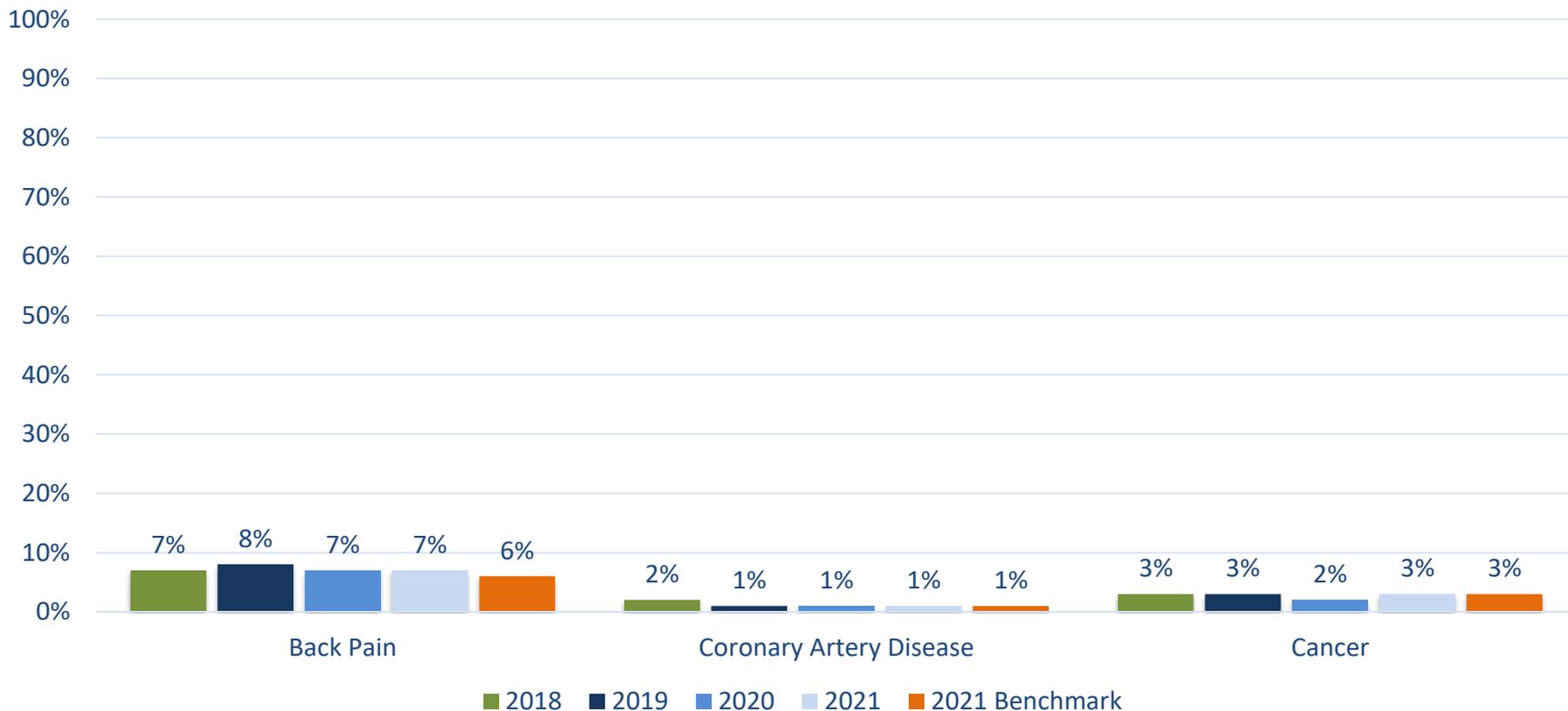
Lifestyle-Related Chronic Health Conditions – KP Members Non-Medicare



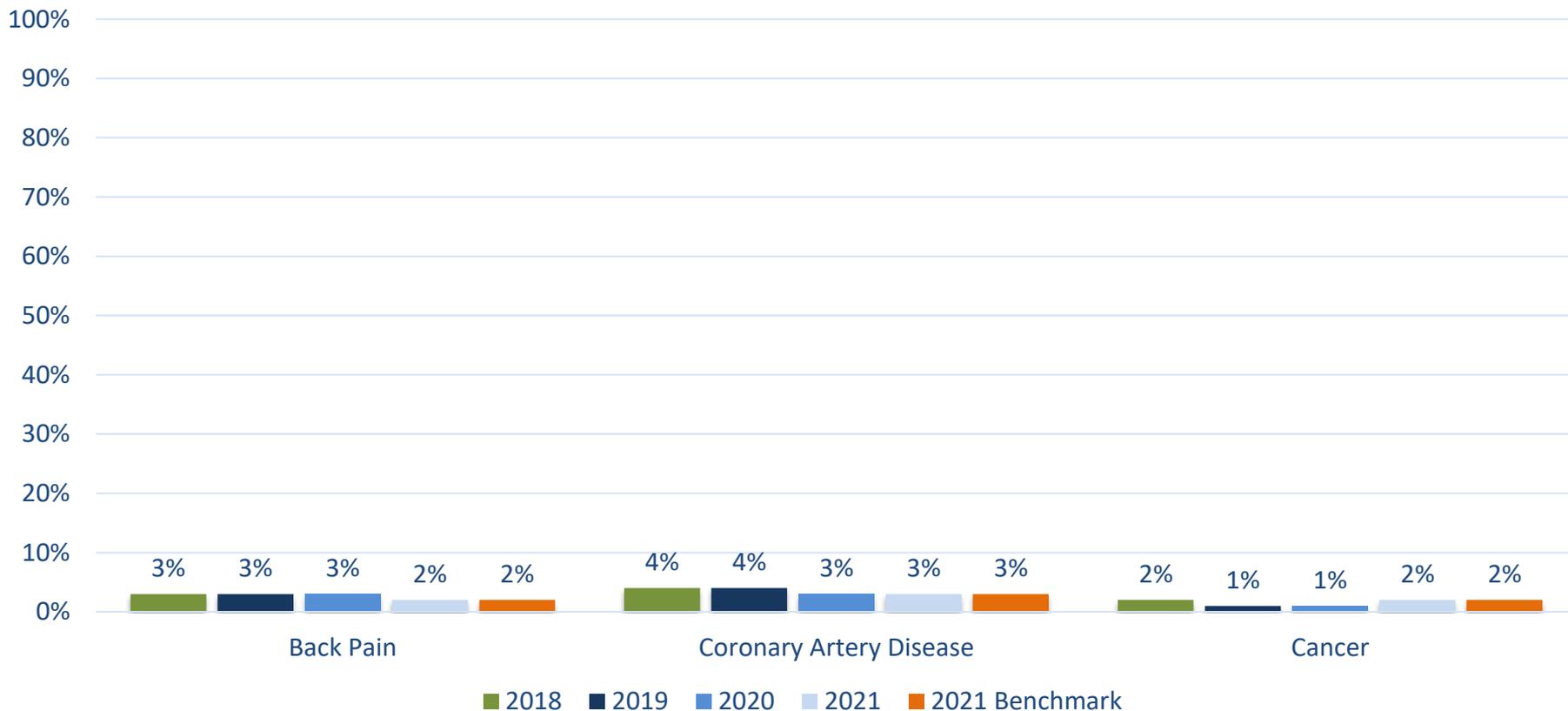
Lifestyle-Related Chronic Health Conditions – KP Members Medicare



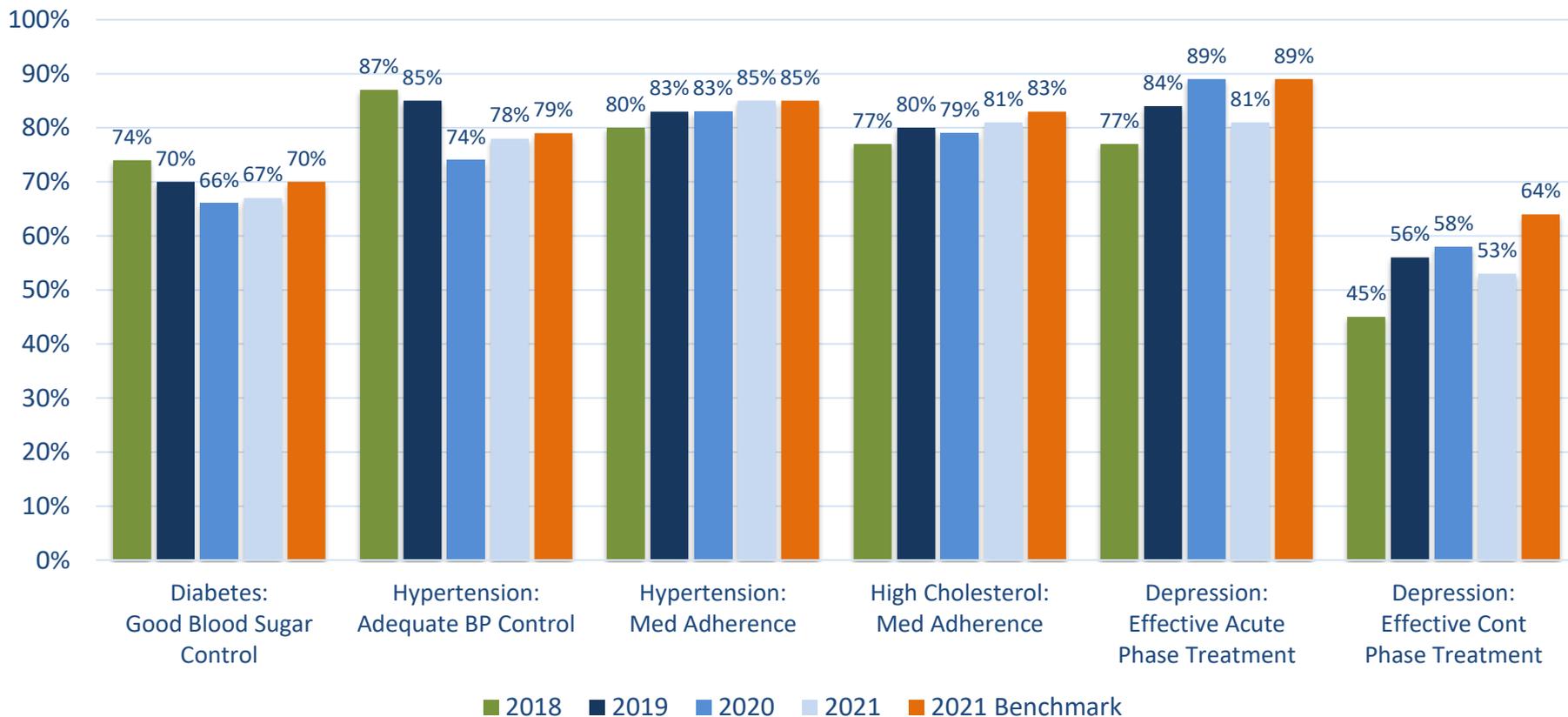
Lifestyle-Related Chronic Health Conditions – KP Members Non-Medicare



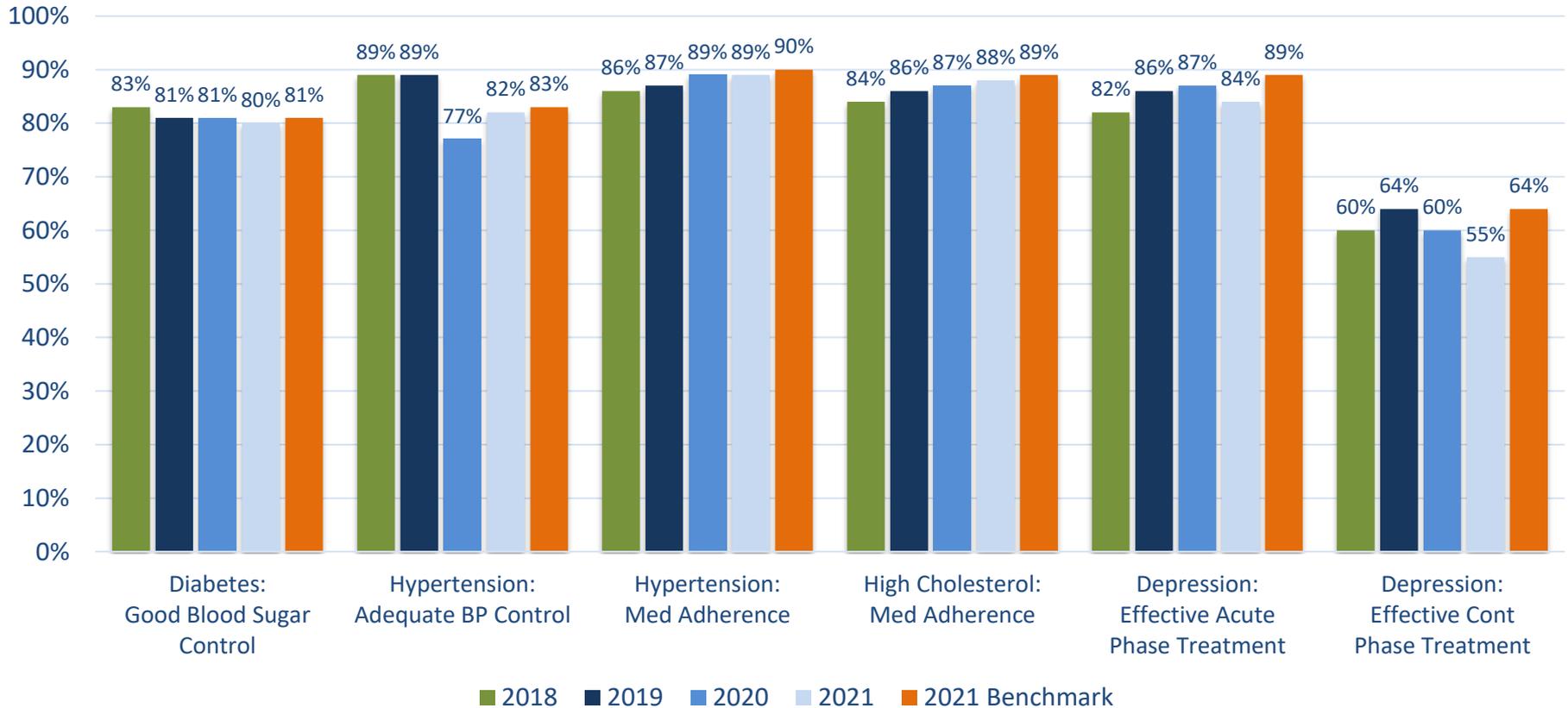
Lifestyle-Related Chronic Health Conditions – KP Members Medicare



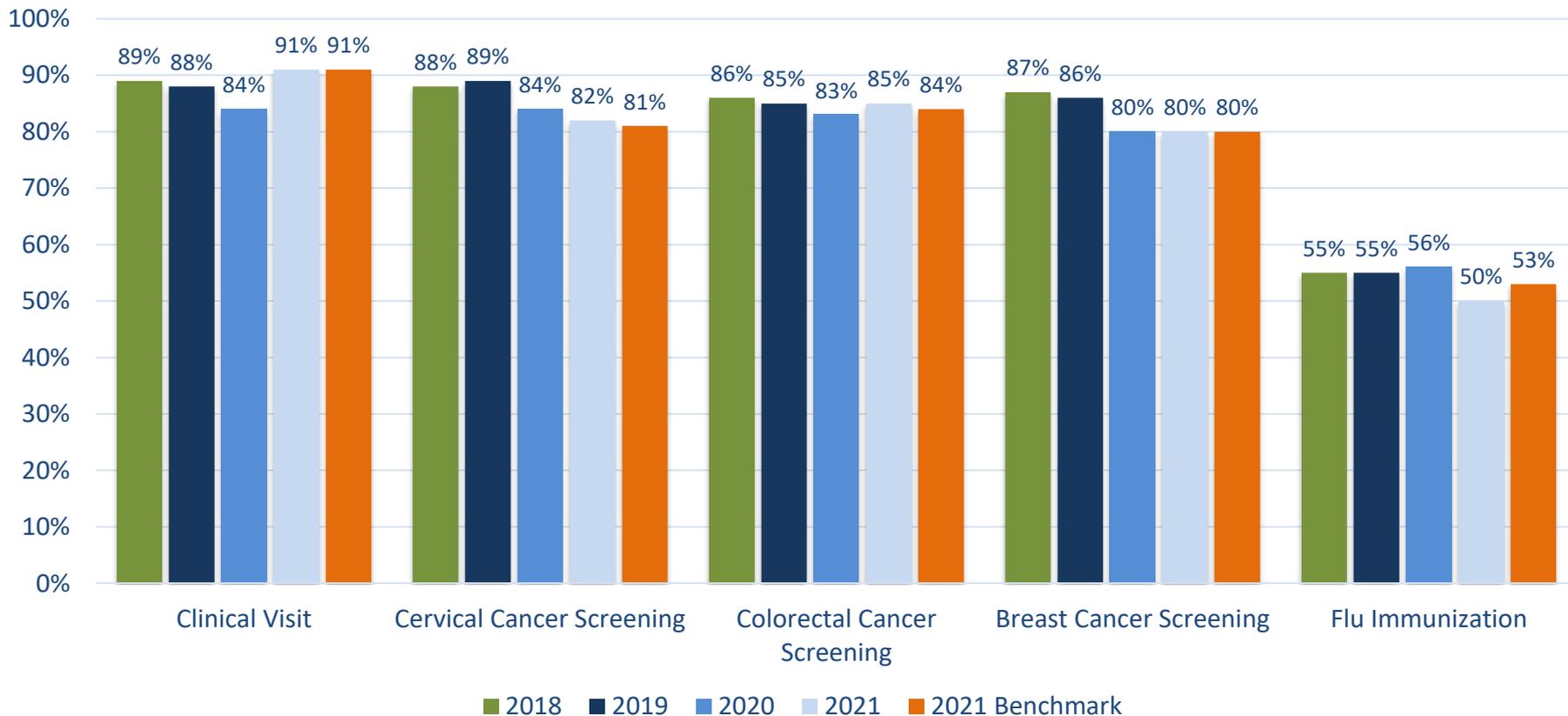
Chronic Condition Management – KP Members Non-Medicare



Chronic Condition Management – KP Members Medicare

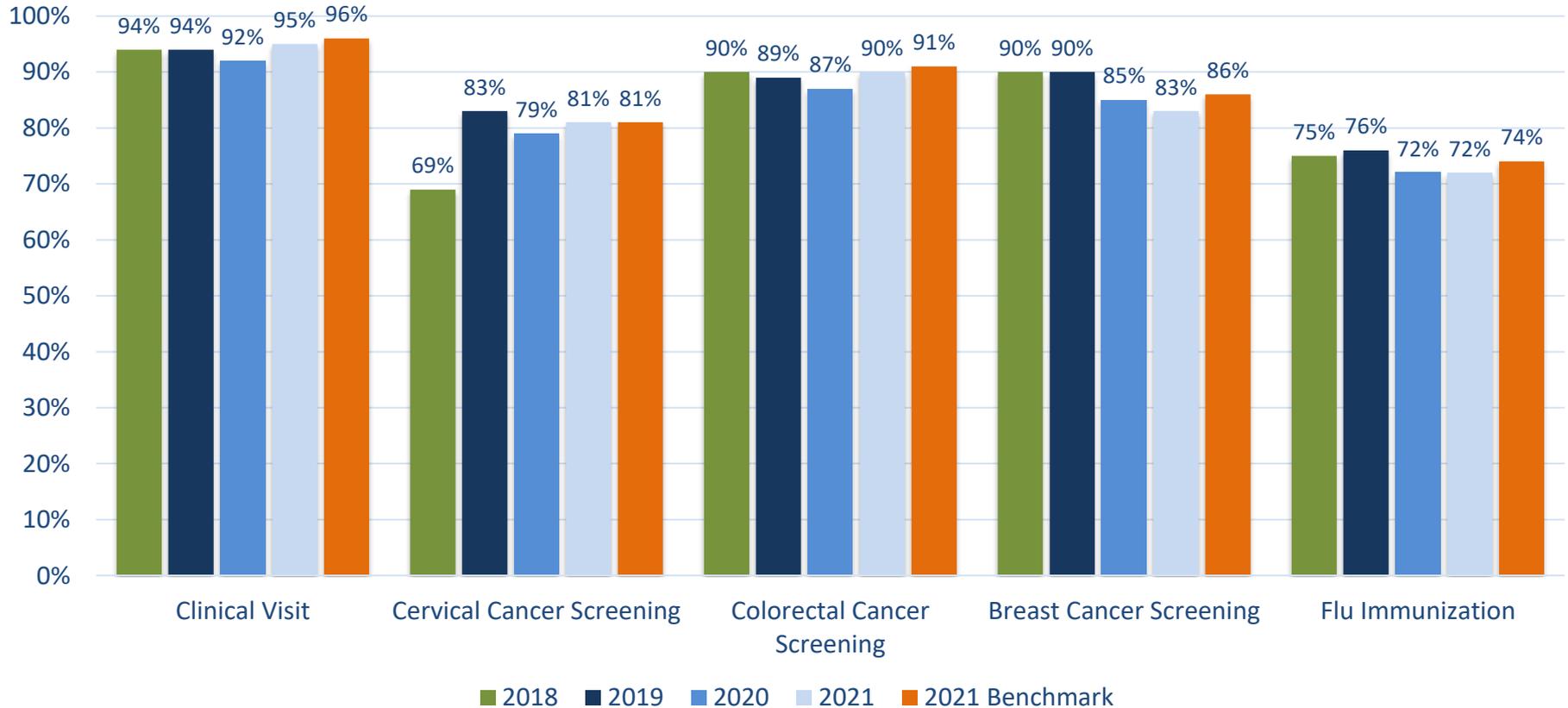


Preventive Care Compliance of Eligible Members – KP Members Non-Medicare



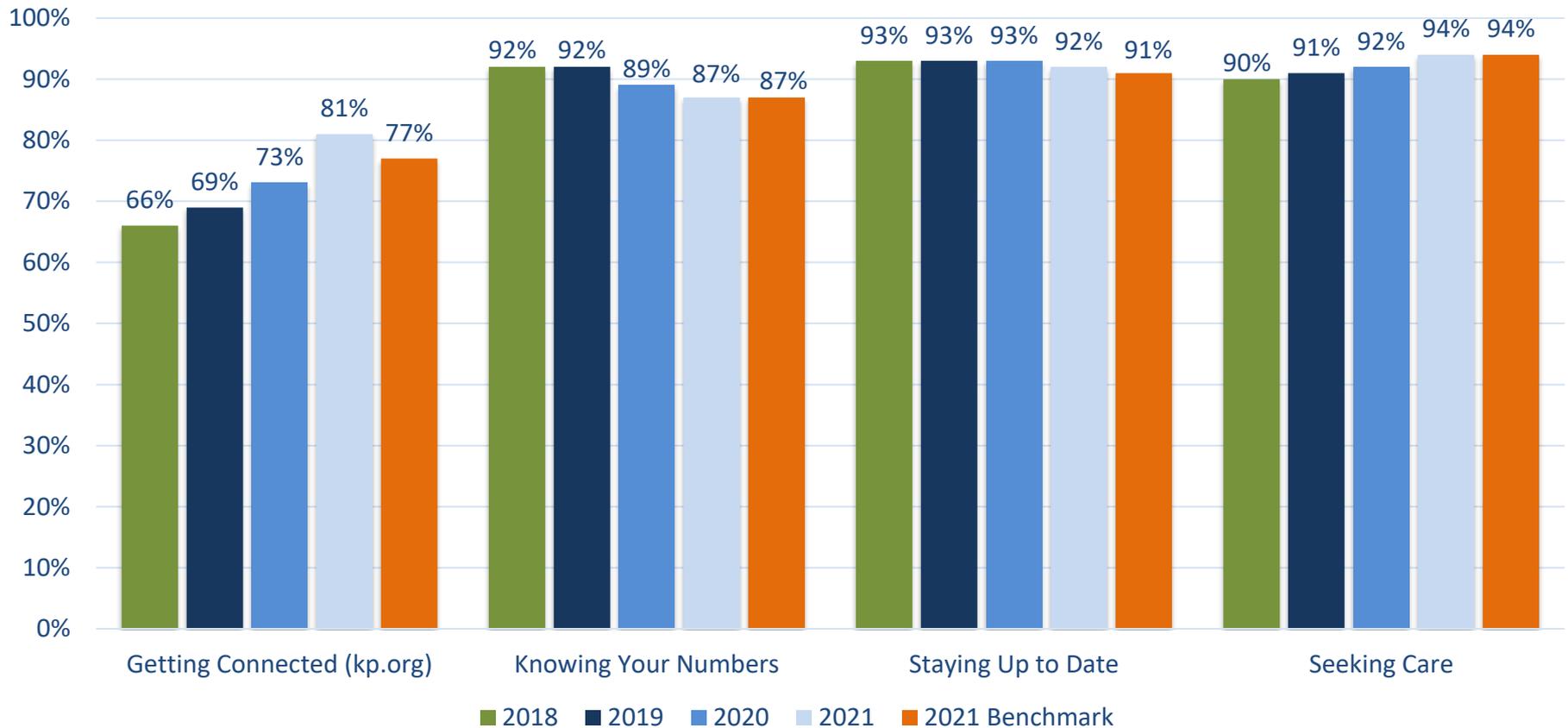
*See Appendix for screening criteria

Preventive Care Compliance of Eligible Members – KP Members Medicare

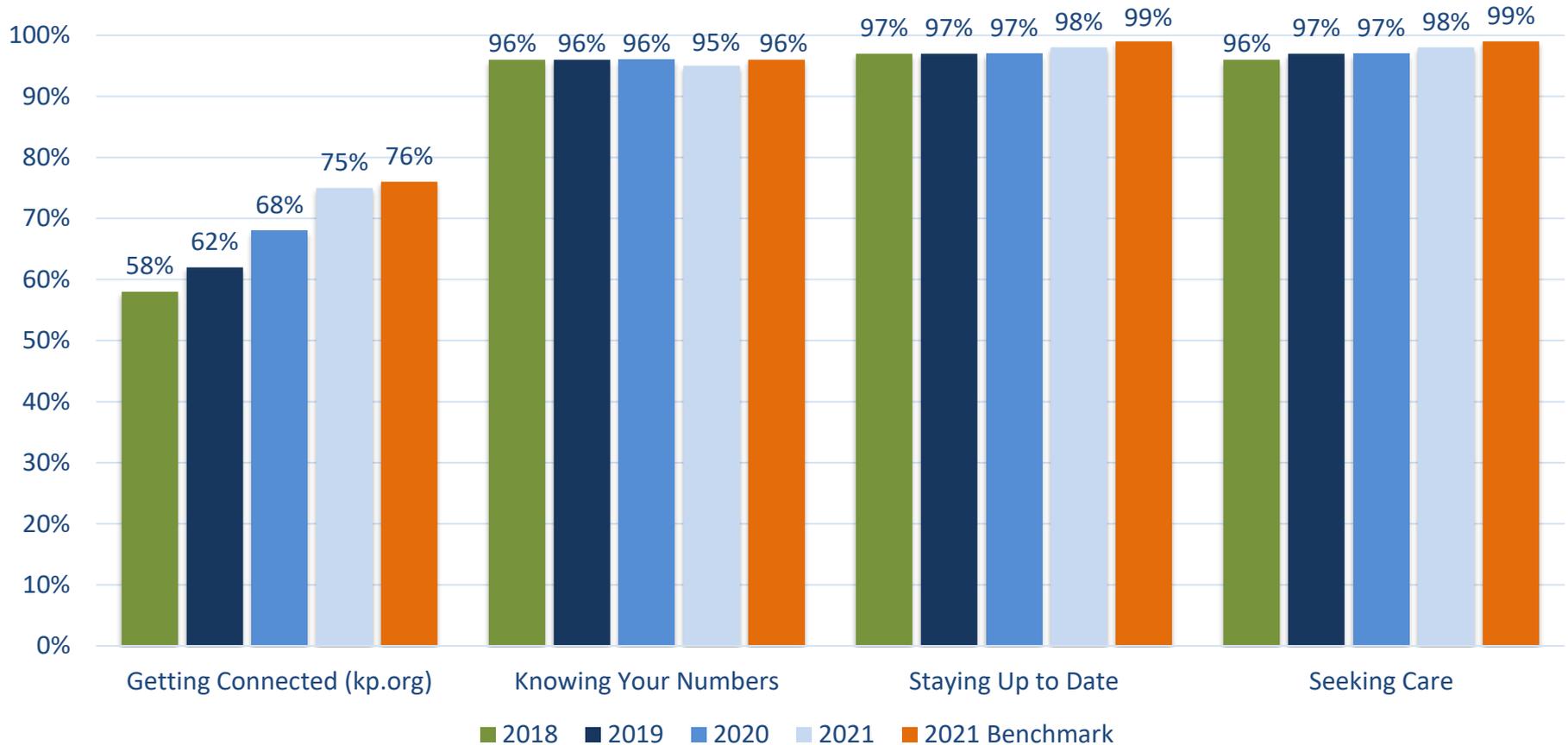


*See Appendix for screening criteria

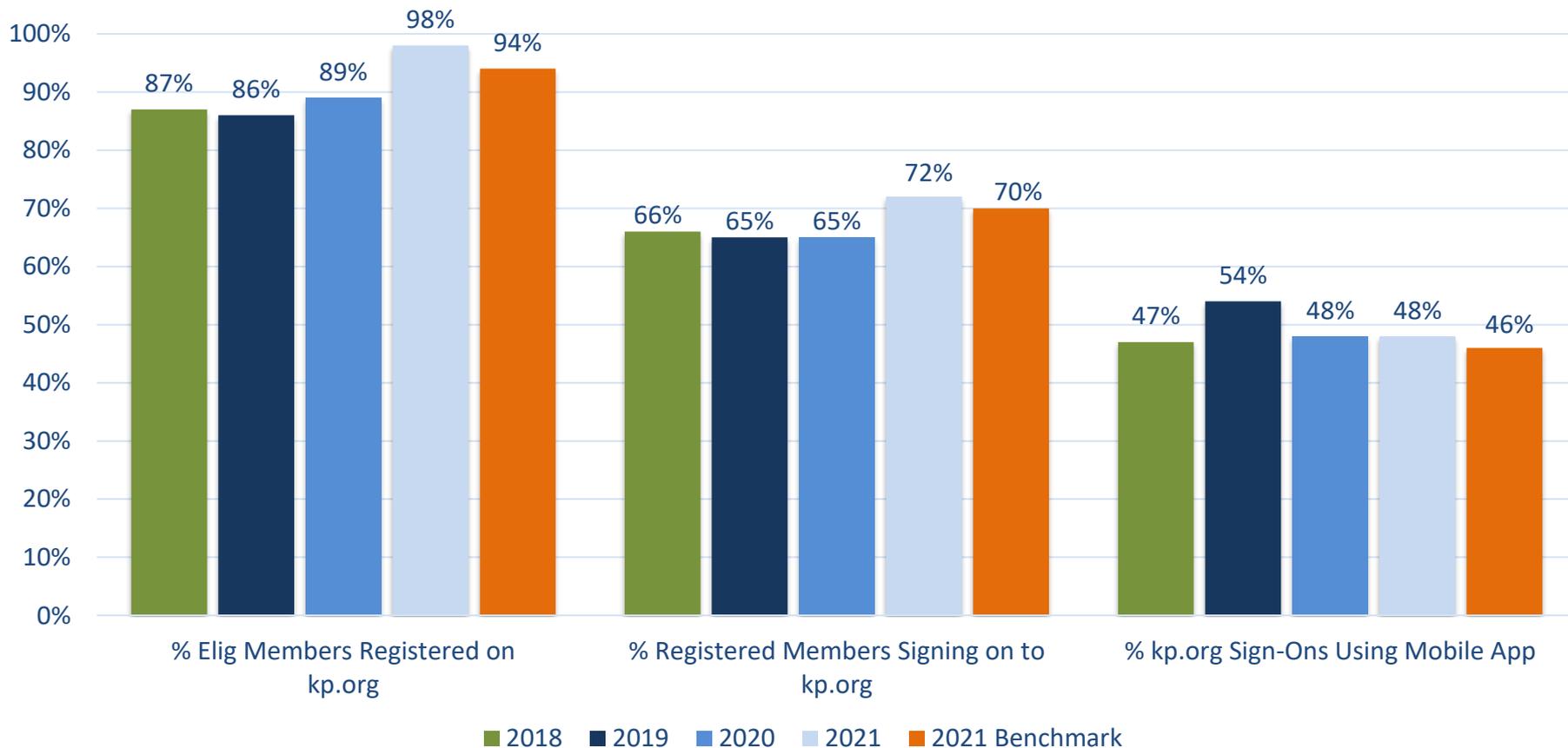
Member Engagement – KP Members Non-Medicare



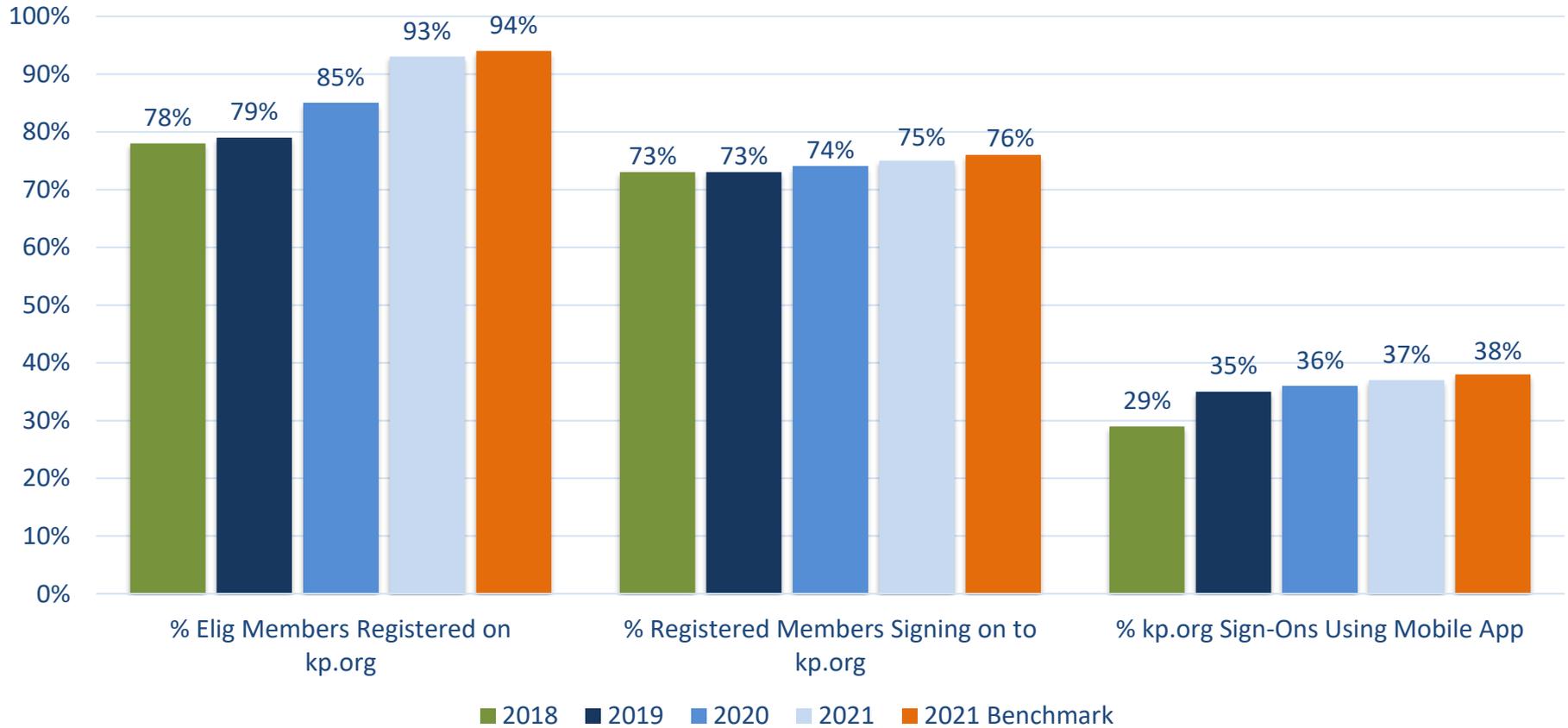
Member Engagement – KP Members Medicare



Online/Mobile Connection – KP Members Non-Medicare

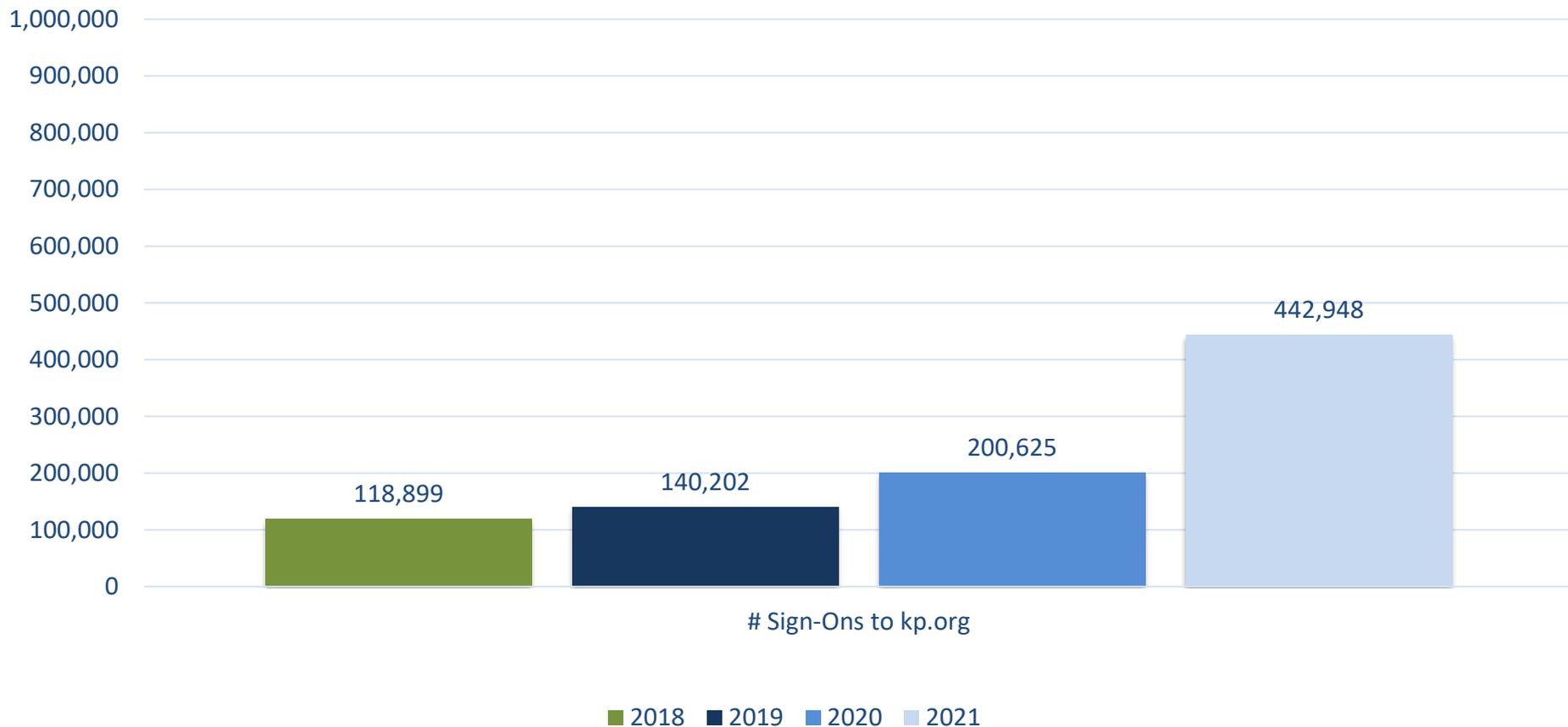


Online/Mobile Connection – KP Members Medicare



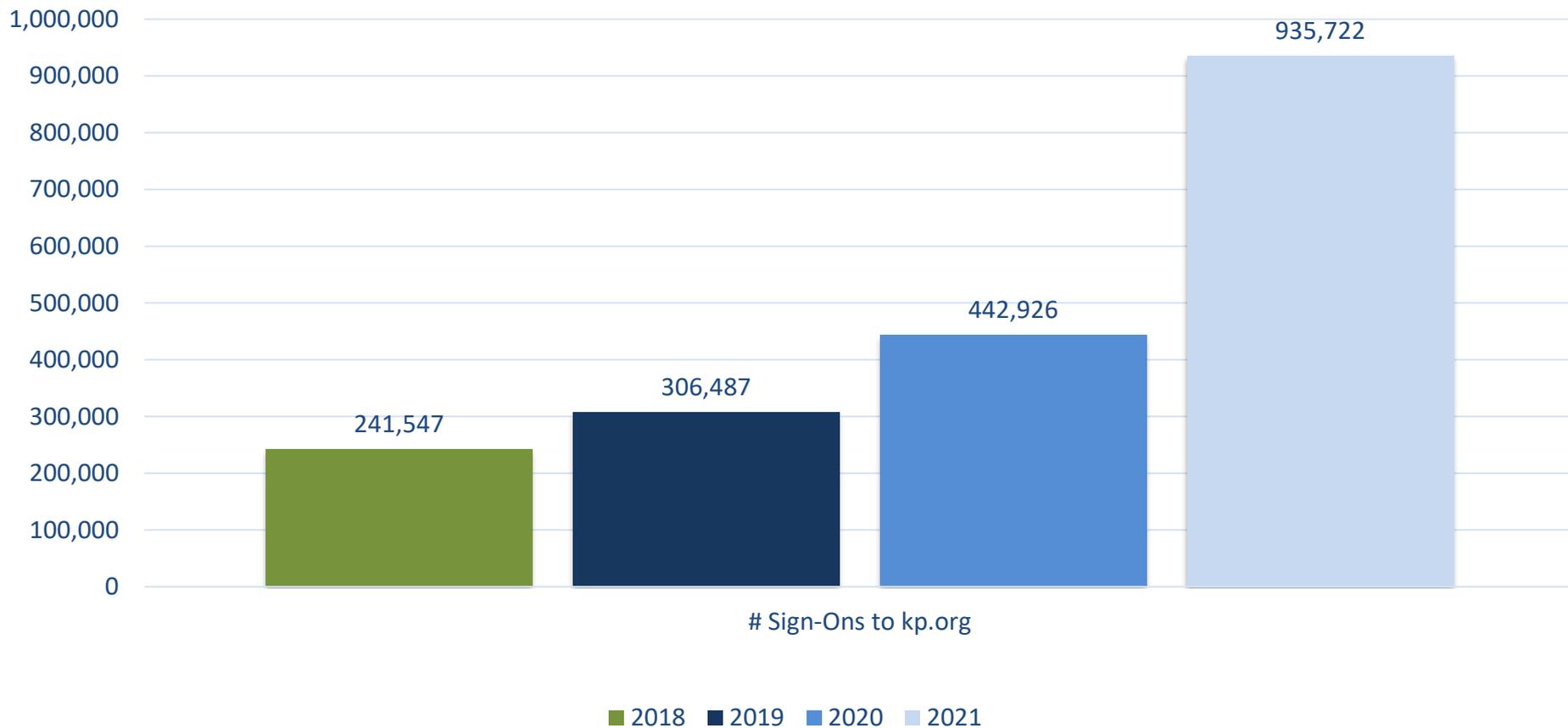
Kaiser Permanente Members

Online/Mobile Connection – KP Members Non-Medicare



Kaiser Permanente Members

Online/Mobile Connection – KP Members Medicare



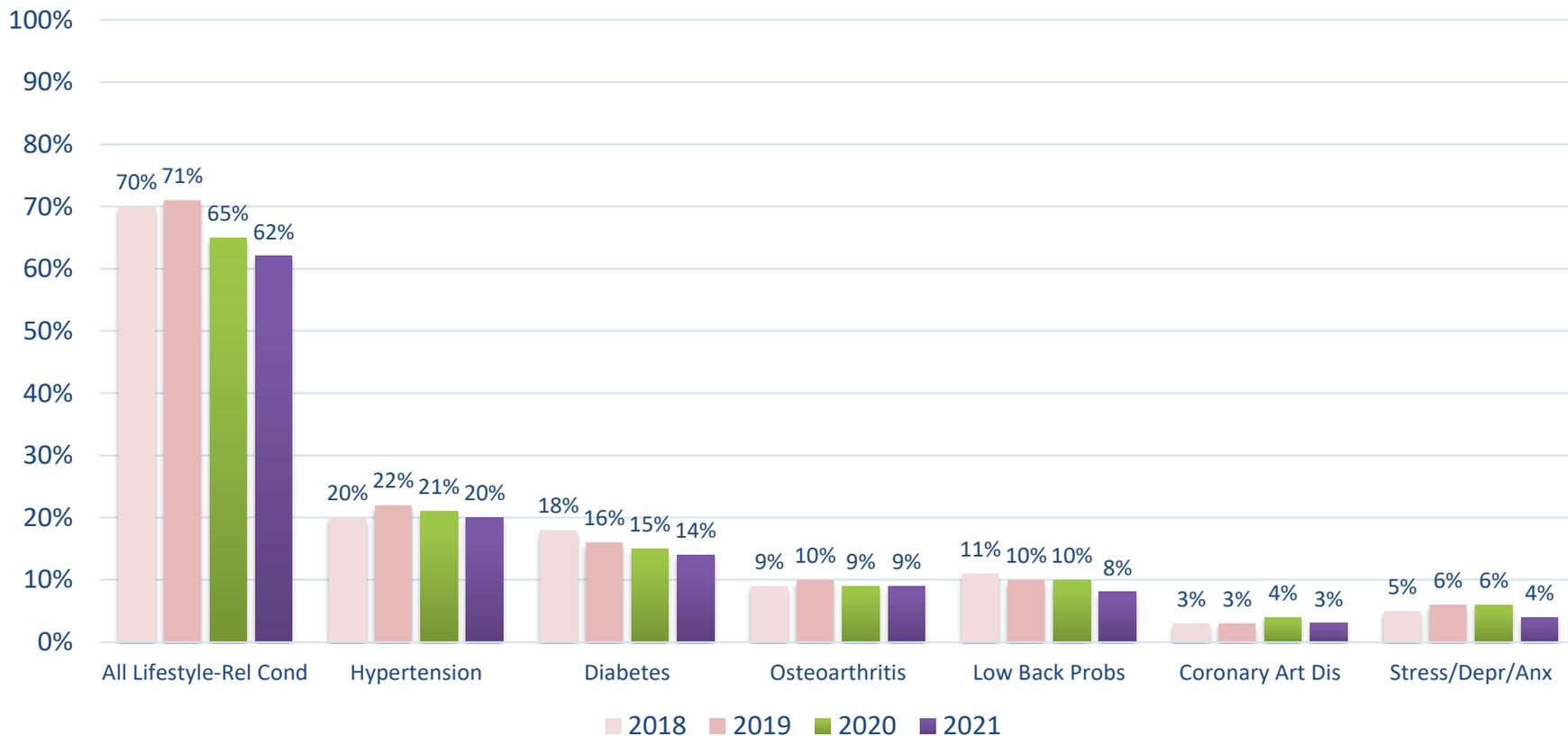
KP Metrics Notes

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.

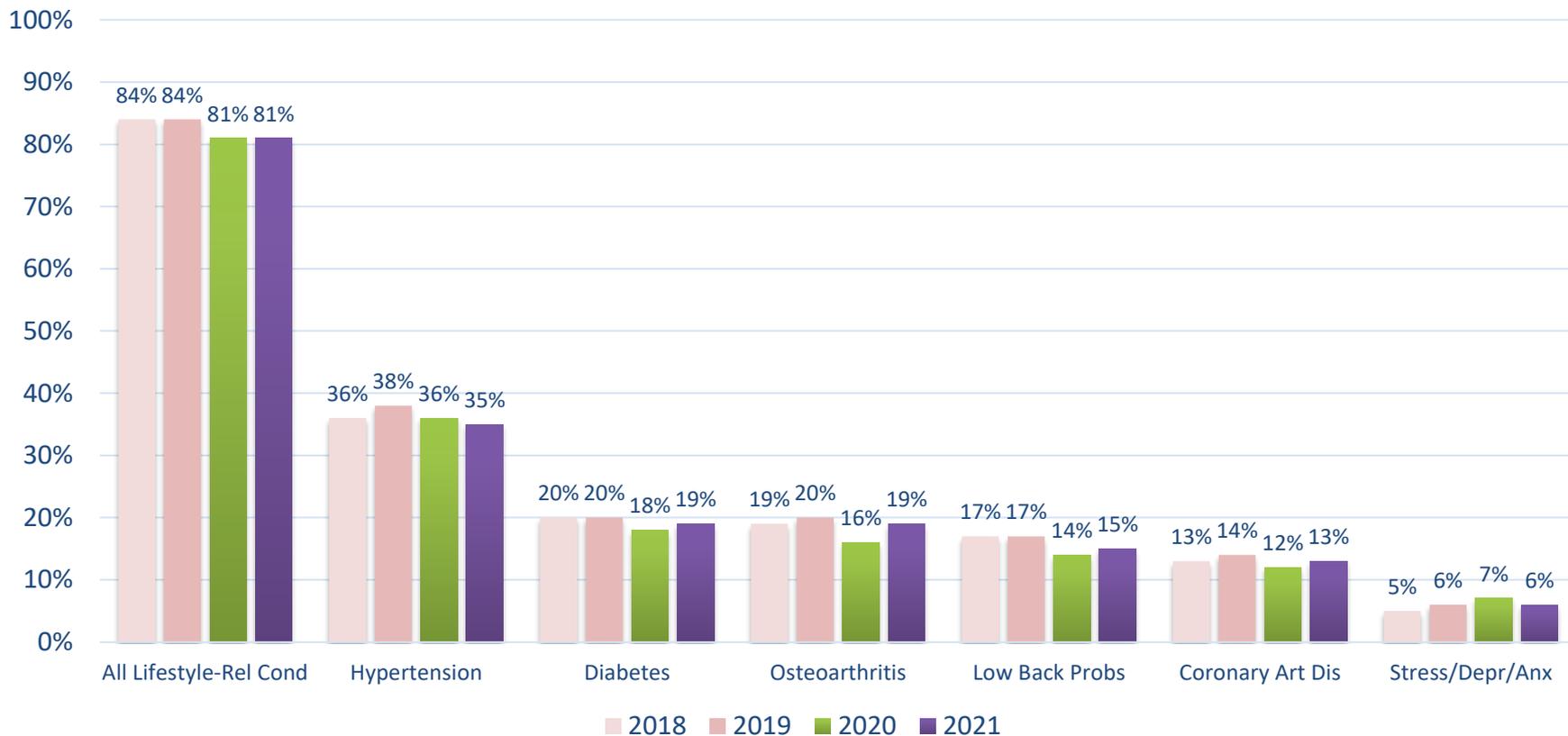
KP Metrics Notes

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: <ul style="list-style-type: none"> · 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+

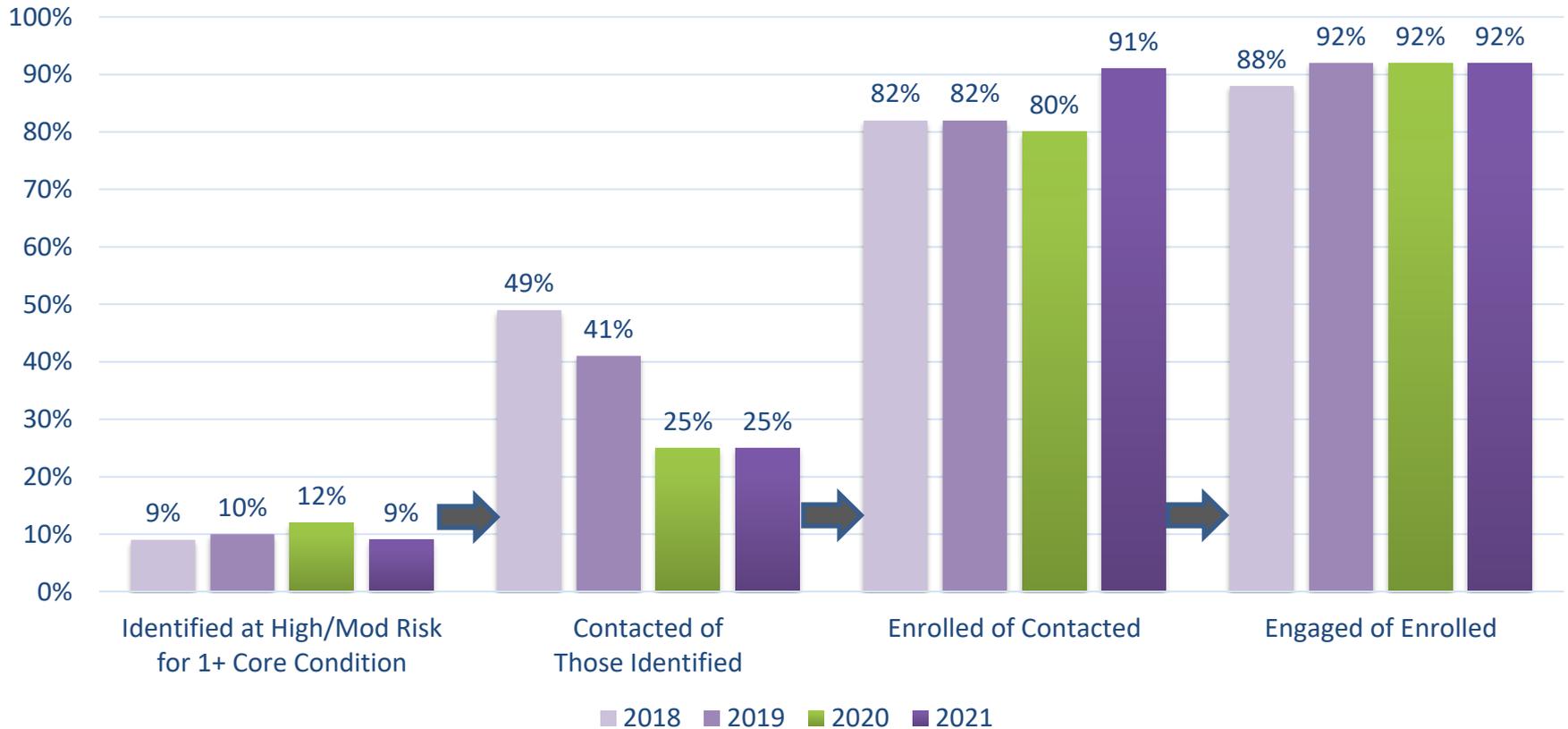
Lifestyle-Related Chronic Health Conditions – ABC Members Non-Medicare



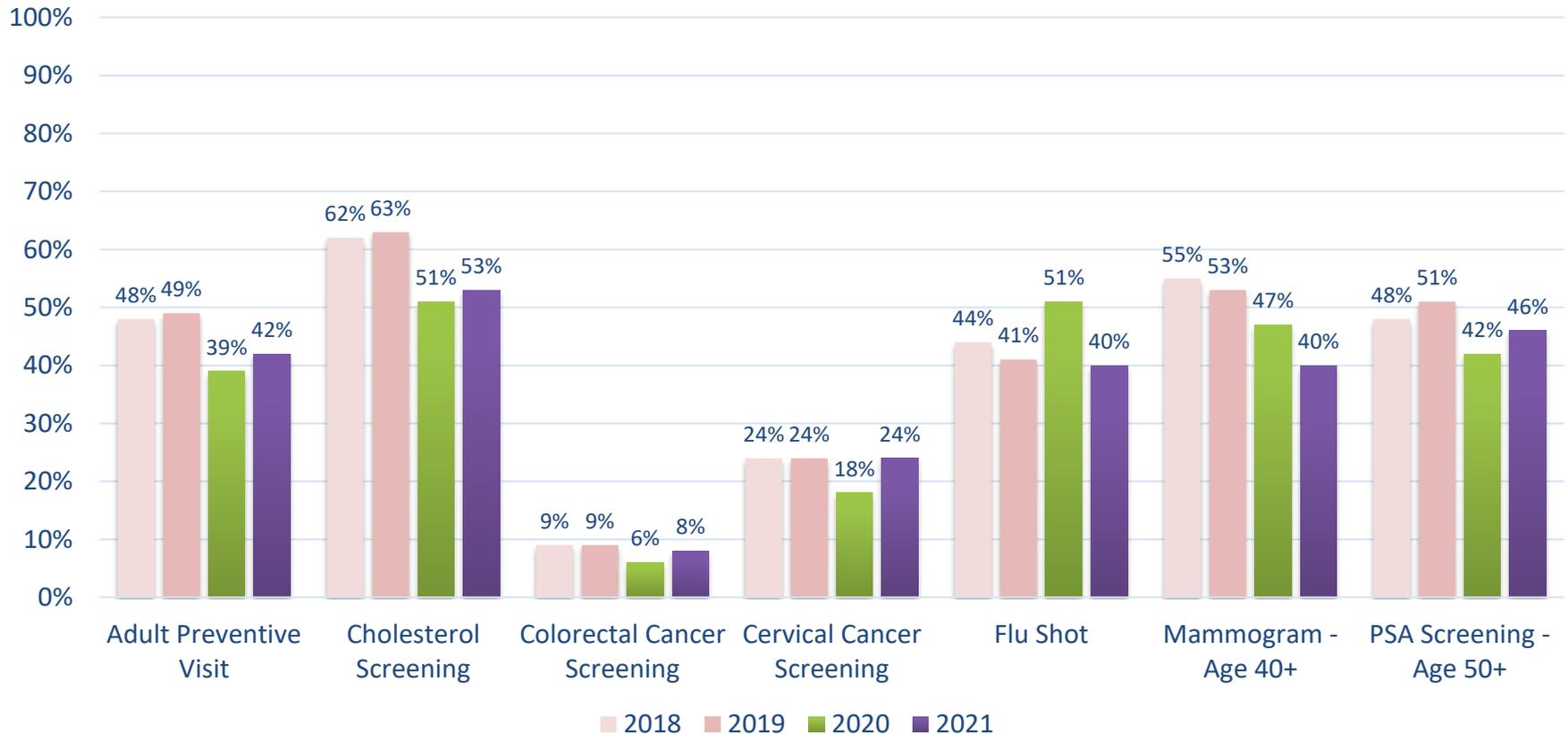
Lifestyle-Related Chronic Health Conditions – ABC Members Medicare



Chronic Condition Management – ABC Members Non-Medicare & Medicare

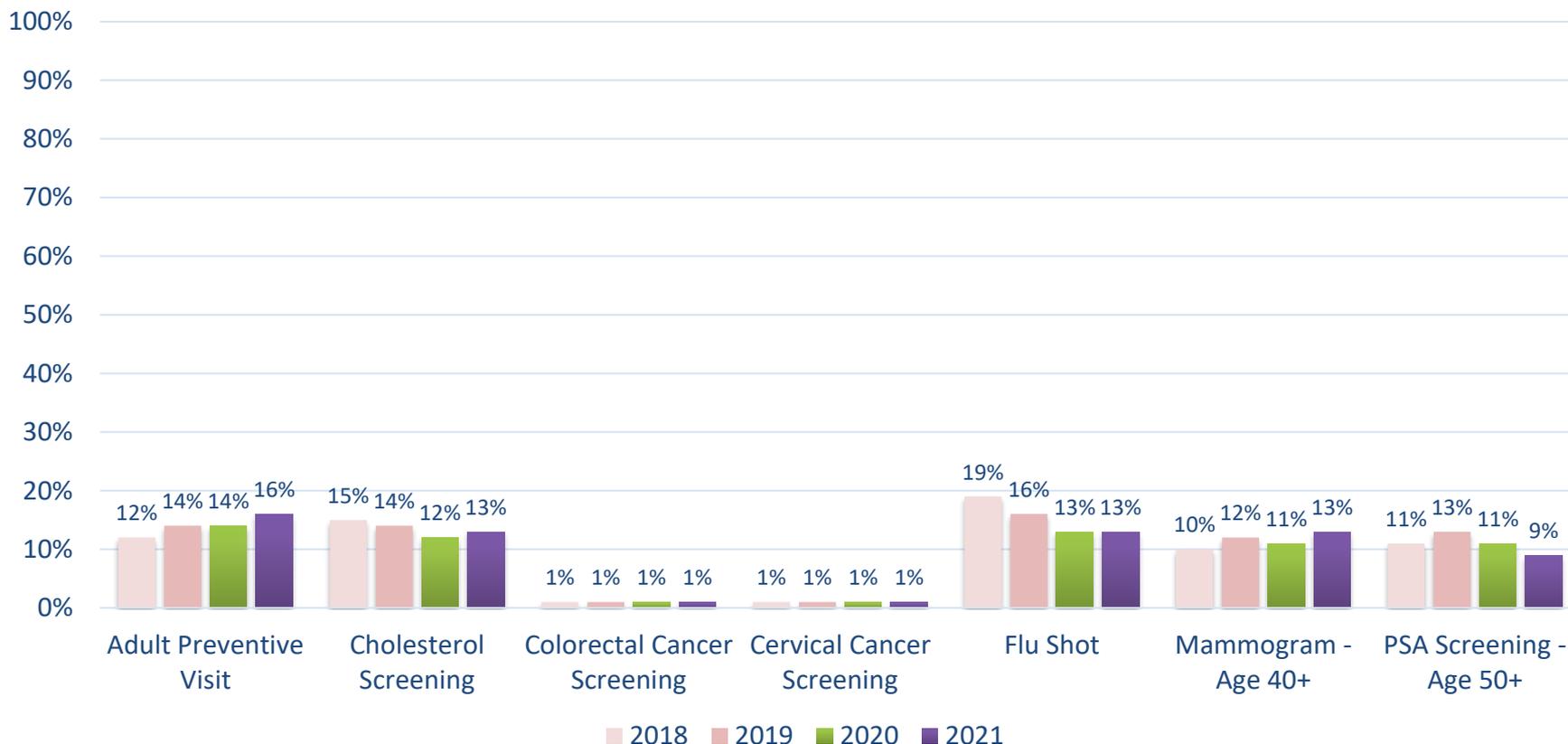


Preventive Care Compliance of Eligible Members – ABC Members Non-Medicare



Note: ABC Medicare group compliance rates reflect claims paid by ABC as secondary to Medicare payment.

Preventive Care Compliance of Eligible Members – ABC Members Medicare



Note: ABC Medicare group compliance rates reflect claims paid by ABC as secondary to Medicare payment.

Member Engagement – ABC Members Medicare & Non-Medicare

