

Benefits Administration Committee Agenda

REGULAR MEETING

TUESDAY, JUNE 24, 2025

TIME: 9:00 A.M.

MEETING LOCATION:

LACERS Boardroom
977 N. Broadway
Los Angeles, California 90012

Important Message to the Public

An opportunity for the public to address the Committee in person from the Boardroom and provide comment on items of interest that are within the subject matter jurisdiction of the Committee or on any agenda item will be provided at the beginning of the meeting and before consideration of items on the agenda.

Members of the public who do not wish to attend the meeting in person may listen to the live meeting via YouTube streaming at the following link: [LACERS Livestream](https://www.lacers.org/livestream).

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Please be advised that all LACERS Committee meetings are recorded.

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In compliance with Government Code Section 54957.5, non-exempt writings that are distributed to a majority or all of the Committee in advance of the meeting may be viewed by clicking on LACERS website at www.LACERS.org, at LACERS' offices, or at the scheduled meeting. In addition, if you would like a copy of a public record related to an item on the agenda, please call (213) 855-9348 or email at lacers.board@lacers.org.

Chair: Michael R. Wilkinson

Committee Members: Thuy Huynh
Sung Won Sohn

Manager-Secretary: Todd Bouey

Executive Assistant: Ani Ghoukassian

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

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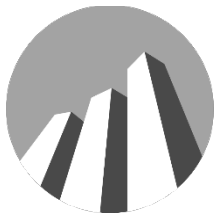
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- I. PUBLIC COMMENTS AND GENERAL PUBLIC COMMENTS ON MATTERS WITHIN THE COMMITTEE'S JURISDICTION AND COMMENTS ON ANY SPECIFIC MATTERS ON THE AGENDA

- II. [APPROVAL OF MINUTES FOR THE MEETING OF FEBRUARY 25, 2025 AND POSSIBLE COMMITTEE ACTION](#)
- III. [HEALTH MANAGEMENT DATA REPORT](#)
- IV. [HEALTH PLAN FINANCIAL DASHBOARDS](#)
- V. VERBAL UPDATE ON 2026 HEALTH PLAN CONTRACT RENEWALS
- VI. OTHER BUSINESS
- VII. 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.
- VIII. ADJOURNMENT



Board of Administration Agenda

SPECIAL MEETING

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Los Angeles, California 90012

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President: Annie Chao
Vice President: Janna Sidley

Commissioners: Thuy T. Huynh
Elizabeth Lee
Gaylord "Rusty" Roten
Sung Won Sohn
Michael R. Wilkinson

Manager-Secretary: Todd Bouey

Executive Assistant: Ani Ghokassian

Legal Counsel: City Attorney's Office
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- VIII. ADJOURNMENT

MINUTES OF THE REGULAR MEETING
BENEFITS ADMINISTRATION COMMITTEE
LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM

February 25, 2025

1:43 p.m.

PRESENT:	Chair:	Michael R. Wilkinson
	Committee Member:	Thuy Huynh Sung Won Sohn
	Executive Assistant:	Ani Ghoukassian
	Legal Counselor:	Miguel Bahamon
	Manager-Secretary:	Todd Bouey

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

I

PUBLIC COMMENTS AND GENERAL PUBLIC COMMENTS ON MATTERS WITHIN THE COMMITTEE'S JURISDICTION AND COMMENTS ON ANY SPECIFIC MATTERS ON THE AGENDA – Chair Wilkinson asked if any persons wished to speak on matters within the Committee's jurisdiction, and there were no public comment cards submitted.

II

APPROVAL OF MINUTES FOR THE MEETING OF OCTOBER 8, 2024 AND POSSIBLE COMMITTEE ACTION – Committee Member Huynh moved approval, and adopted by the following vote: Ayes, Committee Members Huynh, Sohn, and Chair Wilkinson -3; Nays, None.

III

Commissioner Sohn left the meeting at 1:46 p.m.

BOARD RULES RELATED TO MEMBER AND BENEFITS ADMINISTRATION AND POSSIBLE COMMITTEE ACTION – Ferralyn Sneed, Chief Benefits Analyst, and Claudia Batres-Flores, Senior Benefits Analyst, presented and discussed this item with the Committee for five minutes. Committee Member Huynh moved approval, and adopted by the following vote: Ayes, Committee Members Huynh, and Chair Wilkinson -2; Nays, None.

Commissioner Sohn returned to the meeting at 1:53 p.m.

IV

Karen Freire, Chief Benefits Analyst, paid tribute to Stephanie Smith, Senior Project Coordinator with LACERS.

2025 LACERS WELL UPDATE, WORKPLAN, BUDGET AND POSSIBLE COMMITTEE ACTION – Karen Freire, Chief Benefits Analyst, James Kawashima, Senior Benefits Analyst II, Alejandra Zuniga, Benefits Analyst, and Kristal Baldwin, Benefits Analyst, presented and discussed this item with the Committee for 15 minutes. Committee Member Huynh moved approval, and adopted by the following vote: Ayes, Committee Members Huynh, Sohn, and Chair Wilkinson -3; Nays, None.

V

AMENDMENT TO THE BENEFITS ADMINISTRATION COMMITTEE CHARTER AND WORK PLAN AND POSSIBLE COMMITTEE ACTION – Margaret Drenk, Senior Benefits Analyst II, and Tenah Johnson-Taylor, Senior Benefits Analyst I, presented and discussed this item with the Committee for two minutes. Committee Member Sohn moved approval, and adopted by the following vote: Ayes, Committee Members Huynh, Sohn and Chair Wilkinson -3; Nays, None.

VI

Commissioner Sohn left the meeting at 2:39 p.m.

OVERVIEW OF PRESCRIPTION DRUGS AND PHARMACY BENEFIT MANAGERS (PBM) – Bordan Darm, Lead Consultant with Keenan Associates, and James Kawashima, Senior Benefits Analyst II presented and discussed this item with the Committee for 40 minutes.

VII

OTHER BUSINESS – There was no 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.

IX

ADJOURNMENT – There being no further business before the Committee, Chair Wilkinson adjourned the Meeting at 2:50 p.m.

Michael R. Wilkinson
Chair

Todd Bouey

Manager-Secretary



LACERS
LA CITY EMPLOYEES'
RETIREMENT SYSTEM



REPORT TO BENEFITS ADMINISTRATION COMMITTEE

From: Todd Bouey, Interim General Manager

MEETING: JUNE 24, 2025

ITEM: III

SUBJECT: HEALTH MANAGEMENT DATA REPORT

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

Recommendation

That the Committee receive and file this report.

Executive Summary

Each year, as part of the annual premium renewal review process, Keenan & Associates (Keenan), LACERS' Health and Welfare Consultant, prepares a Health Management Data Report. This report analyzes Member health trends and the utilization of health plan resources with the goal of identifying primary health risks and cost drivers within the LACERS membership. The 2024 report focuses on Members enrolled in Kaiser Permanente and Anthem Blue Cross and includes multi-year comparisons, benchmarking against retiree groups, and insights to guide strategic planning. The findings indicate that obesity, hypertension, diabetes, and depression continue to be the most prevalent health issues, with prediabetes and multiple chronic conditions on the rise among Medicare retirees. The report also assesses engagement with preventive care services and digital health tools, providing actionable recommendations to enhance Member outcomes and manage long-term healthcare costs.

Discussion

The 2024 Health Management Data Report provides a comprehensive overview of Member health and utilization trends across both Medicare and non-Medicare populations. The data shows a consistent prevalence of chronic health conditions, particularly hypertension, diabetes, and depression, rising rates of prediabetes, especially among non-Medicare Members, and high rates of two or more chronic conditions in the Medicare population.

Utilization data indicates these conditions are prevalent and drive long-term health costs and diminished quality of life. By aligning wellness initiatives directly with these high-impact conditions, LACERS can optimize engagement, improve outcomes, and manage costs more effectively. 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.

LACERS Well continues to implement a robust calendar of targeted wellness activities in alignment with the health priorities identified in this report. For the 2025 plan year, program offerings include virtual fitness classes, champion-led outdoor activities, webinars on plant-based nutrition, diabetes prevention, blood pressure management, and mental health topics such as isolation, grief, and stress management. These initiatives are designed to support physical activity, promote healthy eating, and provide tools for managing chronic and emotional health conditions. The breadth and accessibility of these programs demonstrate LACERS' ongoing commitment to improving Member well-being through education, engagement, and strategic collaboration with our carrier partners and non-profit organizations.

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

Prepared By: Kristal Baldwin, Benefits Analyst, Health, Wellness, and Buyback Division

TB/DWN/KF/kb

Attachment 1: Keenan Report – LACERS Health Management Data Report

BAC Meeting: 06/24/25
Item: III
Attachment 1

Los Angeles City Employees' Retirement System Health Management Data Report 2024

June 2025

Presented by Vanessa Torres, MPH,
Health & Wellness Manager, Keenan



Table of Contents

Table of Contents

Introduction 3

Executive Summary 4

Comparison to 2023 vs 2024 Benchmarks for Kaiser Member Groups 5

Key Highlights 6

Recommendations 15

Appendix: 2024 Kaiser and Anthem Health Management Metrics..... 19

Introduction

Introduction

This report presents health management metrics for LACERS Non-Medicare and Medicare members enrolled in Kaiser Permanente (KP) and Anthem Blue Cross (ABC) health plans during the 12-month period from January 1 to December 31, 2024. The data presented includes key indicators across the following domains:

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

To provide context and highlight trends, this report includes multi-year comparisons from 2021 through 2024, along with benchmark comparisons between KP Non-Medicare and Medicare groups and municipal retiree benchmark groups.

These metrics serve as a foundation for:

- a) Identifying primary health risks and cost drivers among the LACERS members
- b) Monitoring utilization of available health management resources
- c) Informing the development of targeted health management strategies to improve health member outcomes

Executive Summary

Executive Summary

Obesity, hypertension, diabetes, and depression remain the most prevalent health risks among LACERS members. The effective management of individuals who have been diagnosed with these chronic conditions is also a key factor affecting the health and well-being of those members.

Comparing **2023 vs 2024 LACERS health management metrics compared to those for the Kaiser municipality retiree benchmark groups**, most indicators are **worse than benchmark**, especially among Medicare members, highlighting a need for **targeted lifestyle interventions**. A significant portion of members have **2+ chronic conditions**, particularly in the Medicare population, indicating a need for more **integrated care strategies**.

- **For Non-Medicare members:**
 - **Improvement** in rates compared to the benchmarks for **management of diabetes, hypertension, and preventive care compliance**. **Increase** in rates compared to the benchmarks for **obesity, pre-diabetes, and hypertension**.
- **For Medicare members:**
 - **Improvement** in rates compared to the benchmarks for **diabetes, depression, and preventive care compliance**. **Increase** in rates compared to the benchmarks for **obesity, pre-diabetes, 2+ chronic conditions**.

Key highlights of the report are presented in pages 6-14. The full-size versions of the complete set of Kaiser and Anthem health management metrics charts can be found in the Appendix on pages 19-44.

Recommendations for the 2025/26 health management initiatives for Kaiser and Anthem are provided on pages 15-16.

Comparison to Benchmarks for Kaiser Member Groups – 2023 vs 2024

2023 LACERS KP Member Groups vs KP Benchmark Groups		
Metrics	Non-Medicare Members	Medicare Members
Top 3 Health Risks		
Obesity/Overweight	●	●
Inadequate Exercise	●	●
Pre-Diabetes	●	●
Top 3 Lifestyle-Related Chronic Conditions		
Hypertension	●	●
Diabetes	●	●
Depression	●	●
Prevalence of Lifestyle-Related Chronic Conditions		
1 Condition	●	●
2+ Conditions	●	●
Chronic Condition Management		
Diabetes	●	●
Hypertension	●	●
High Cholesterol	●	●
Depression - Acute	●	●
Depression - Chronic	●	●
Preventive Care Compliance		
Clinic Visit	●	●
Cervical Cancer Screening	●	●
Colorectal Cancer Screening	●	●
Breast Cancer Screening	●	●
Flu Immunization	●	●
Member Engagement		
Getting Connected	●	●
Knowing Your Numbers	●	●
Staying Up to Date	●	●
Seeking Care	●	●

2024 LACERS KP Member Groups vs KP Benchmark Groups		
Metrics	Non-Medicare Members	Medicare Members
Top 3 Health Risks		
Obesity/Overweight	●	●
Inadequate Exercise	●	●
Pre-Diabetes	●	●
Top 3 Lifestyle-Related Chronic Conditions		
Hypertension	●	●
Diabetes	●	●
Depression	●	●
Prevalence of Lifestyle-Related Chronic Conditions		
1 Condition	●	●
2+ Conditions	●	●
Chronic Condition Management		
Diabetes	●	●
Hypertension	●	●
High Cholesterol	●	●
Depression - Acute	●	●
Depression - Chronic	●	●
Preventive Care Compliance		
Clinic Visit	●	●
Cervical Cancer Screening	●	●
Colorectal Cancer Screening	●	●
Breast Cancer Screening	●	●
Flu Immunization	●	●
Member Engagement		
Getting Connected	●	●
Knowing Your Numbers	●	●
Staying Up to Date	●	●
Seeking Care	●	●

LACERS KP Member Rates vs Benchmarks		
● Better	● Similar	● Worse

Key Highlights

Health Risks

KP Members:

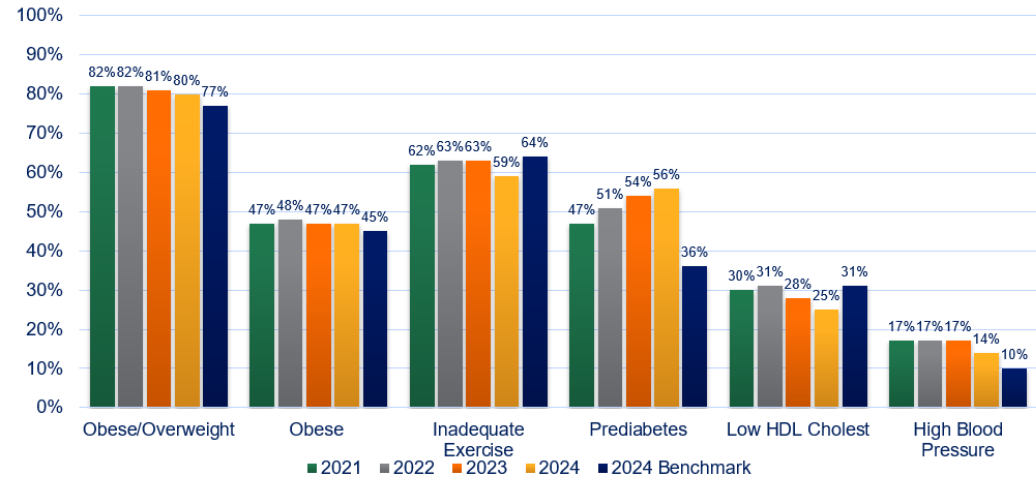
- In 2024, the most common health risks among KP members continued to include **overweight and obesity, inadequate exercise, prediabetes, low HDL (good) cholesterol, and high blood pressure**. A significant number of members presented with **two or more** of these risk factors – many of which are closely linked to poor dietary habits and low levels of physical activity.
- Overall, the prevalence of these risk factors has remained **relatively stable over the past 3 years, except for prediabetes, which has shown a consistent upward trend** in both the Non-Medicare and Medicare populations.
- When comparing the two groups, **Medicare members** have consistently exhibited **slightly lower rates of overweight and obesity**, but **slightly higher rates of inadequate exercise** compared to Non-Medicare members over the past 4 years.
- Notably, in 2024, the prevalence of **prediabetes** among **Non-Medicare members** was **significantly higher** than that of the benchmark group.

Health Risks

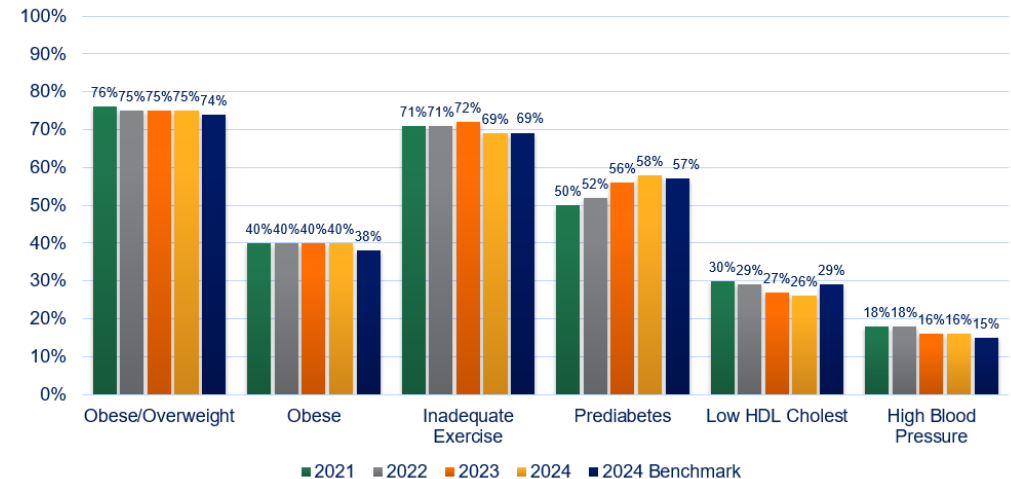
ABC Members:

- Adequate data is not available to produce a representative report on health risks of ABC members. As a result, health risk metrics for this population are not included in this analysis.

Health Risks – KP Members Non-Medicare



Health Risks – KP Members Medicare



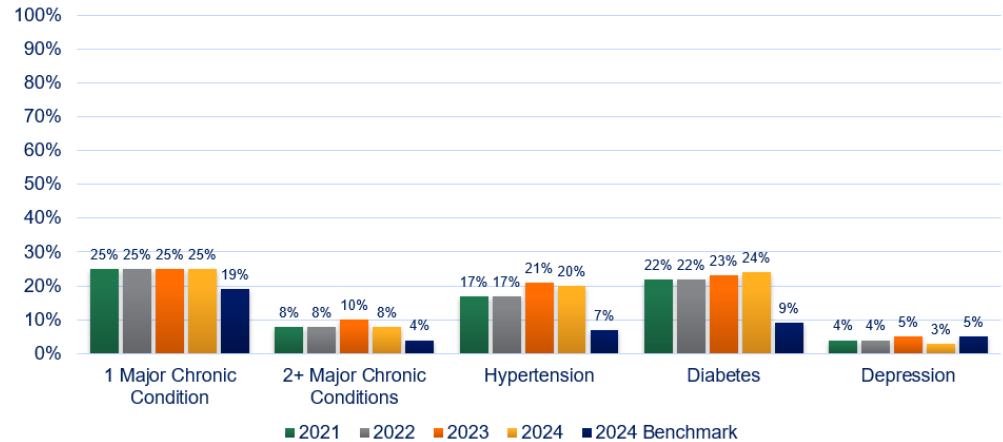
Key Highlights

Lifestyle-Related Chronic Health Conditions

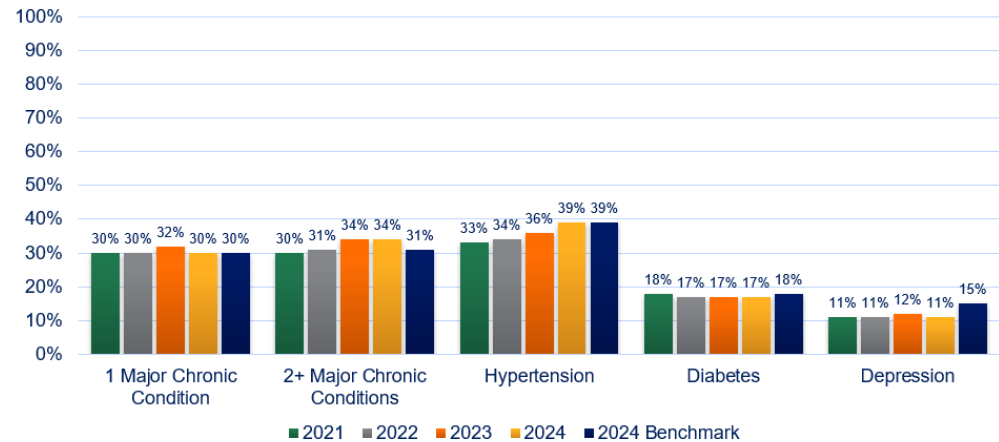
KP Members:

- In 2024, the most prevalent lifestyle-related chronic health conditions among KP members continued to be **hypertension, diabetes, and depression**. Both the **Medicare and Non-Medicare groups** exhibited **high rates** of these conditions; however, the **Medicare group consistently** showed **significantly higher** rates of **hypertension and depression**.
- Over the past 4 years, **diabetes** prevalence among the **Non-Medicare members** has **trended higher** than that of the Medicare group. Additionally, the **Medicare population** has experienced rates of **2+ major chronic conditions** at **3-4 times the rate** of the Non-Medicare population.
- In 2024, most chronic condition rates for the **Non-Medicare group exceeded** those of the **benchmark group**, except for **depression**, which was **notably lower**.

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



Lifestyle-Related Chronic Health Conditions – KP Members Medicare



Key Highlights

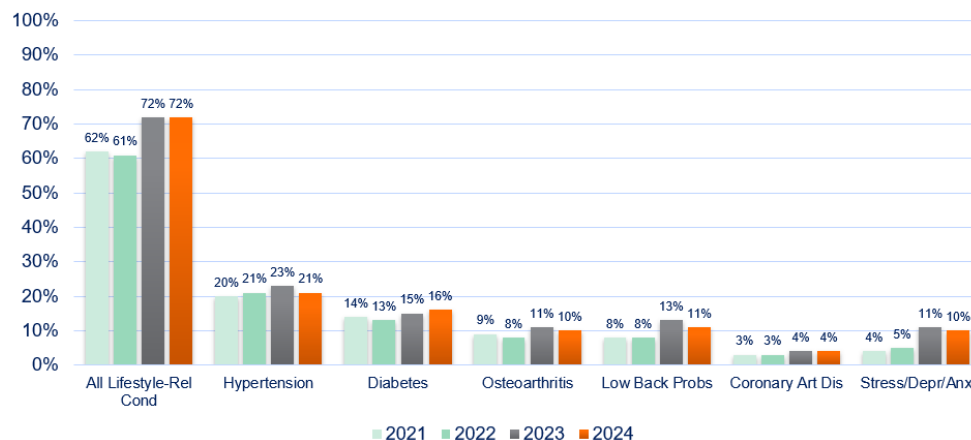
Lifestyle-Related Chronic Health Conditions

ABC Members:

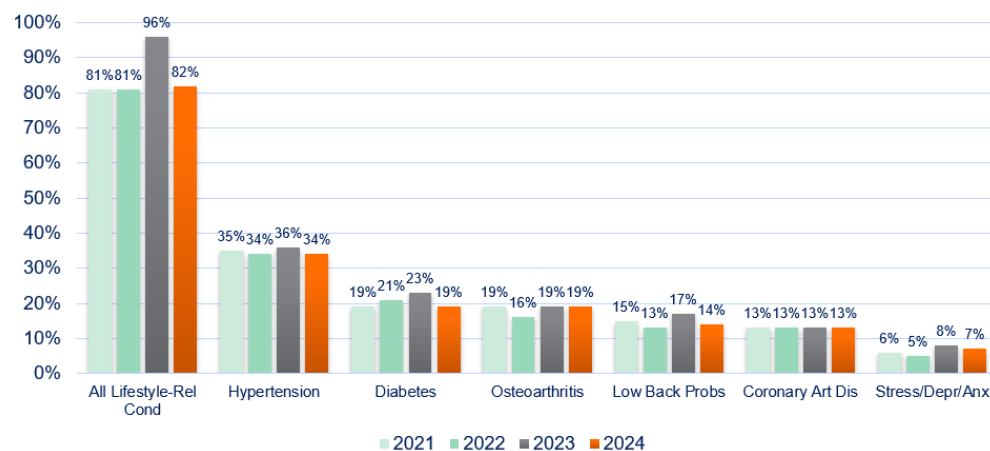
- In 2024, the most common lifestyle-related chronic health conditions among ABC members were **hypertension, diabetes, and osteoarthritis**. These conditions were **more prevalent** among **Medicare members**, who also experienced **notably higher rates of hypertension and coronary artery disease** compared to their Non-Medicare counterparts.
- Encouragingly, both groups showed a **slight downward trend** in the prevalence of many lifestyle-related conditions in 2024.

Note: Valid benchmark comparison groups for ABC retirees were not available for this analysis.

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



Lifestyle-Related Chronic Health Conditions – ABC Members Medicare



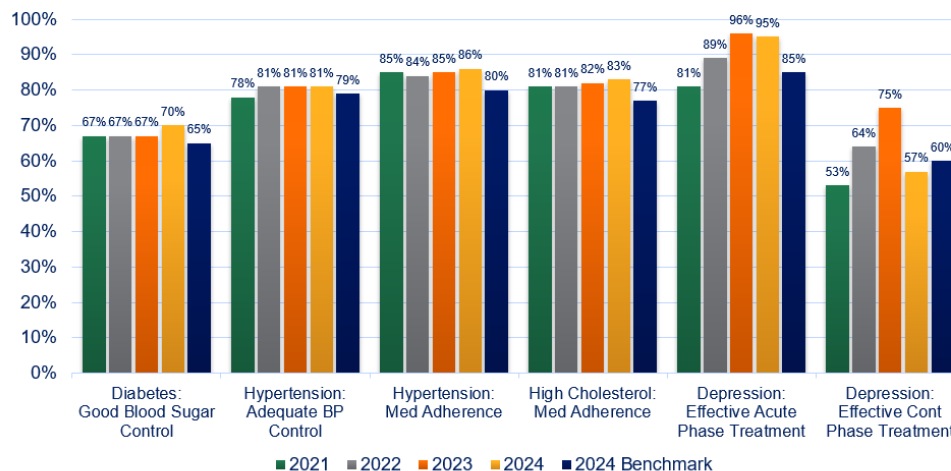
Key Highlights

Chronic Condition Management

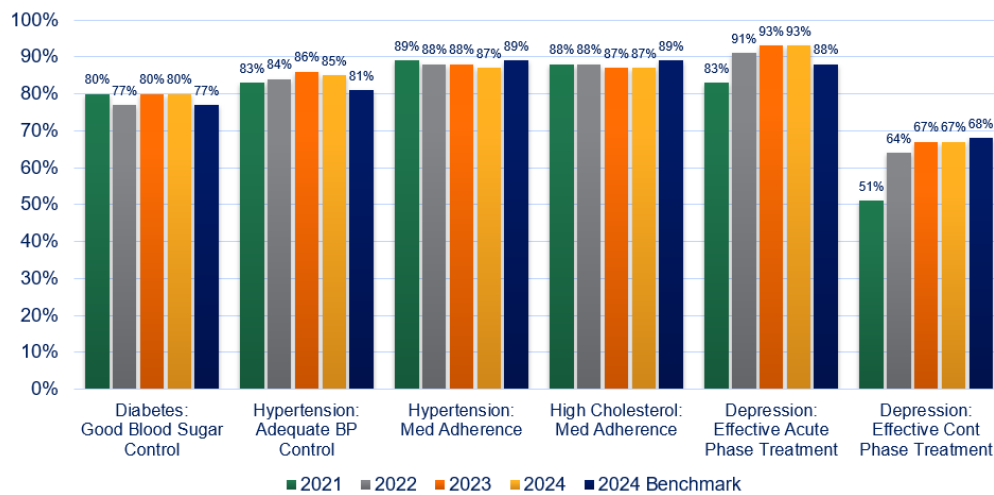
KP Members:

- In 2024, a **high percentage** of KP members with lifestyle-related chronic conditions were **effectively managing** their conditions, with **similar control rates observed across both the Non-Medicare and Medicare groups**. Notably, the **Medicare group demonstrated slightly higher rates of effective management** compared to the Non-Medicare group.
- Encouragingly, the **treatment of depression has shown a positive trend**, with rates of effective management increasing steadily over the past three years.
- In 2024, **most condition management rates for both groups were slightly better than those of the benchmark group**.

Chronic Condition Management – KP Members Non-Medicare



Chronic Condition Management – KP Members Medicare



Key Highlights

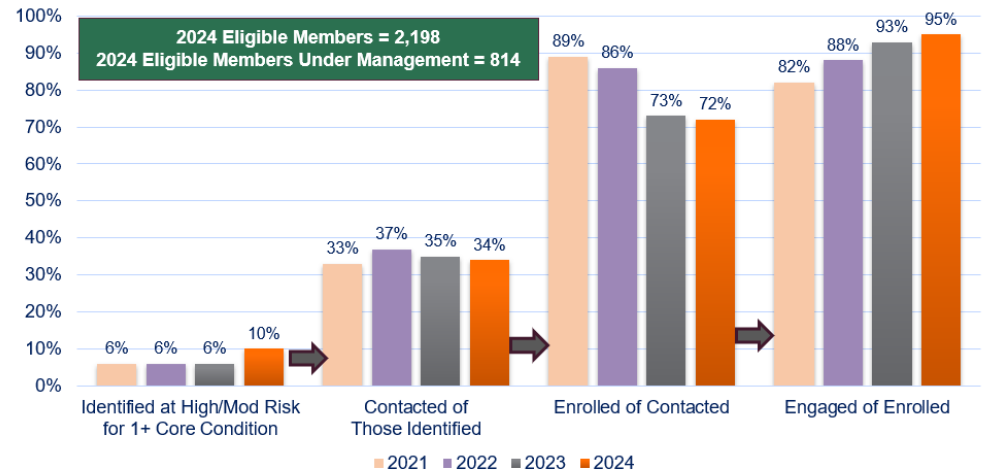
Chronic Condition Management

ABC Members:

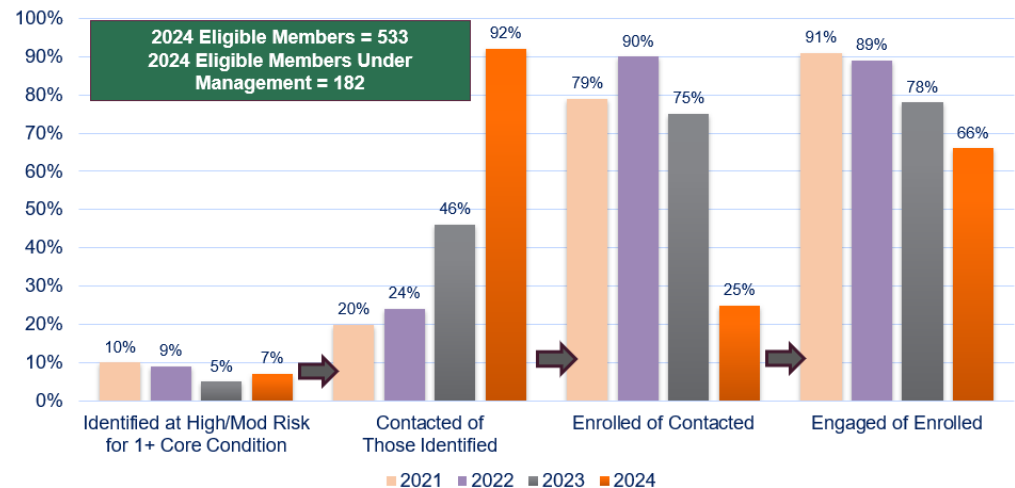
- Since 2023, the percentage of the ABC Medicare and Non-Medicare members **identified as high or moderate risk** for 1 or more of the core chronic conditions has **increased**.
- Among those identified, the percentage of ABC members **successfully contacted by phone** for condition management has also **risen over the past 3 years**, with a **notable increase** in 2024 among the **Medicare group**.
- However, **enrollment rates** among those **contacted** **declined** in 2024, particularly within the **Medicare group**.
- Non-Medicare members enrolled in the condition management program have **maintained high engagement over past 4 years**. In contrast, engagement among **Medicare group has been steadily declining**.

Note: Valid benchmark comparison groups for ABC retirees were not available.

Chronic Condition Management – ABC Members Non-Medicare



Chronic Condition Management – ABC Members Medicare



LACERS Health Management Data Report 2024

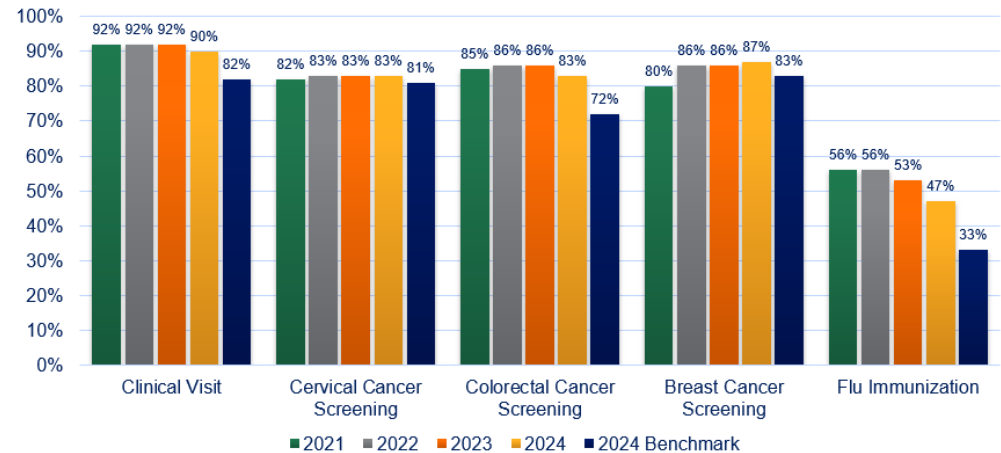
Key Highlights

Preventive Care

KP Members:

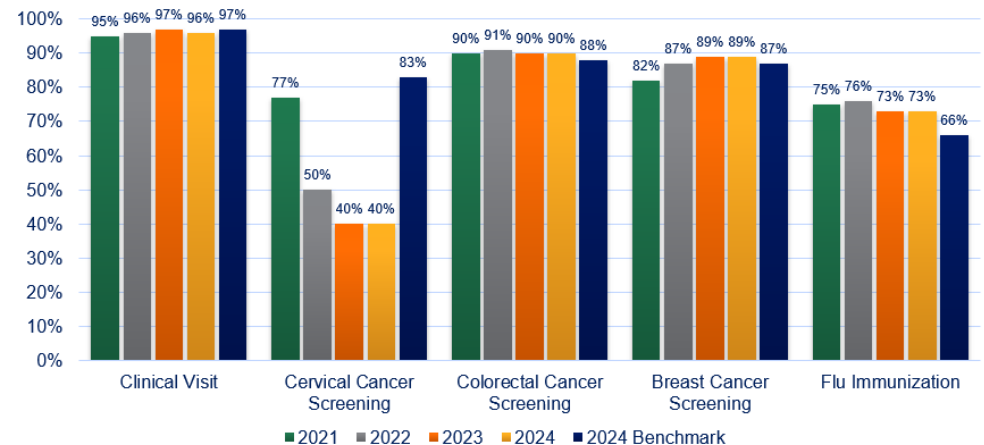
- In 2024, KP members maintained **high overall compliance with preventive care guidelines** across both **Non-Medicare** and **Medicare** groups. However, **cervical cancer screening rates declined among Medicare members**.
- When **compared to benchmarks**, KP members' 2024 **preventive care rates** were generally **aligned**. Notably, **flu immunization rates** were **significantly higher** than the benchmark for the **Non-Medicare group**, while **cervical cancer screening rates** for the **Medicare group** were **substantially lower** than the benchmark.

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

Key Highlights

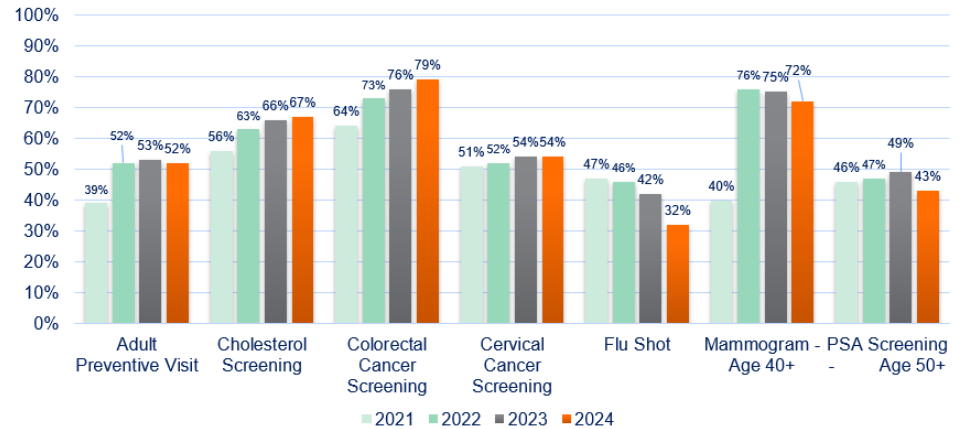
Preventive Care

ABC Members:

- Over the past 2 years, preventive care compliance rates among ABC Non-Medicare and Medicare groups have remained relatively stable. Overall, compliance among the Medicare groups continues to trail behind the Non-Medicare group.
- Colorectal and cervical cancer screenings have improved among the Non-Medicare group. However, Flu vaccination rates continue to lag behind other preventive measures for both groups.

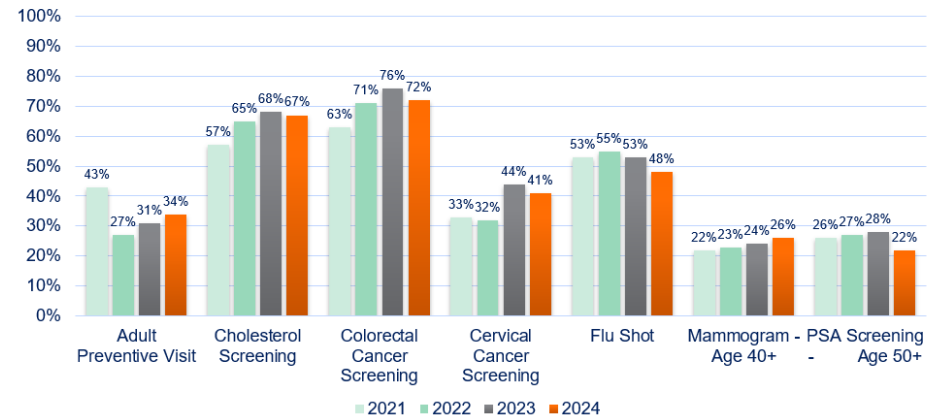
Note: No valid ABC retiree benchmark comparison groups were available.

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



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

Preventive Care Compliance of Eligible Members – ABC Members Medicare



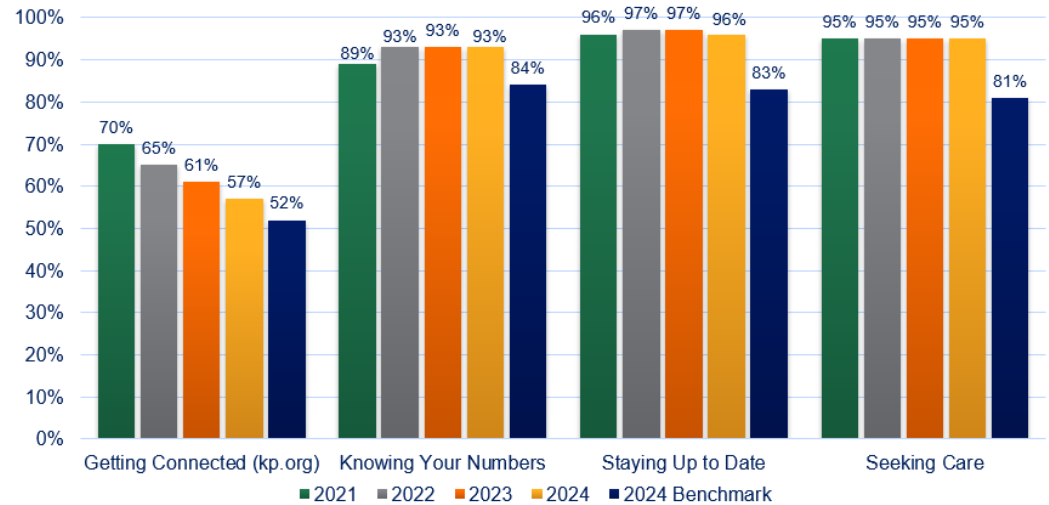
Key Highlights

Member Engagement

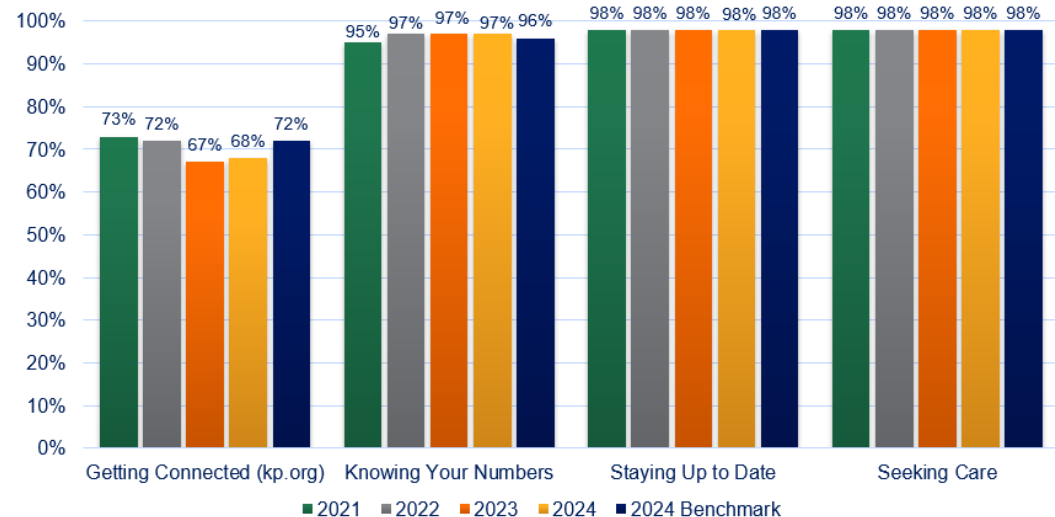
KP Members:

- In 2024, KP members in both the Non-Medicare and Medicare groups demonstrated high engagement across key health activities:
 - Knowing Your Numbers:** BMI, blood pressure, or exercise measured
 - Staying Up to Date:** Cholesterol or glucose testing, cancer screenings, or flu vaccination
 - Seeking Care:** Outpatient visits, nurse line usage, emails to doctors, or prescriptions filled
- Engagement rates for **Non-Medicare members exceeded benchmark levels across all categories. Medicare members also met or exceeded benchmarks in most areas, with the exception of Getting connected, where engagement fell below the benchmark.**

Member Engagement – KP Members Non-Medicare



Member Engagement – KP Members Medicare



Key Highlights

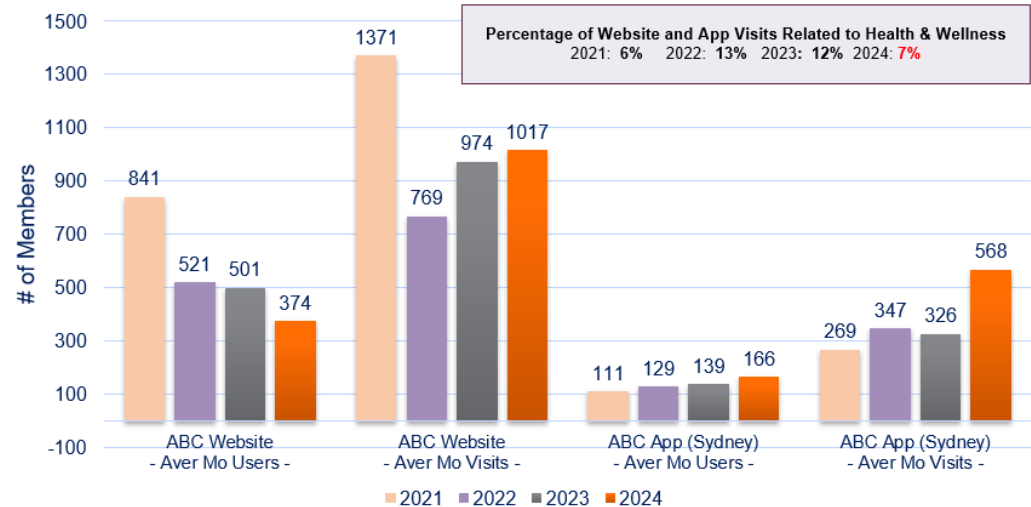
Member Engagement

ABC Members:

- Since 2021, ABC member engagement with the **ABC website** has been **steadily declining**. In contrast, usage of the **ABC Sydney mobile app** has **continued to rise**, although overall utilization **remains relatively low**.
- Health and wellness-related visits** to both the website and the Sydney app have **decreased since 2022**, indicating a **broadier downward trend in digital engagement** for these services.
- The **Lark Diabetes Prevention Program (DPP)** – which replaced the Solera DPP that was sunseted in 2020 – has had **insufficient enrollment** to meet HIPAA requirements for reporting.

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

Member Engagement – ABC Members Medicare & Non-Medicare



Recommendations

Recommendations for Kaiser and Anthem Health Management Initiatives

As part of its long-standing commitment to comprehensive health management, LACERS has partnered with its healthcare carriers –Kaiser Permanente and Anthem Blue Cross– for over 12 years to promote the health and well-being of its members and support the LACERS *Well* program. Based on the data provided by both carriers for this report, the following recommendations are proposed for LACERS 2025/26 health management initiatives:

Recommended 2025/26 Kaiser Permanente Health Management Focuses:

1) Target Key Health Conditions and Co-Morbidities

Overweight/Obesity	Prediabetes/Diabetes
Prehypertension/Hypertension	Depression

2) Improve Chronic Condition Management

- Enhance blood sugar control among diabetic members
- Strengthen continuous phase treatment protocols for depression across all groups

3) Boost Preventive Care Compliance

- Increase flu immunization rates among Non-Medicare members.
- Improve cervical cancer screening rates among Medicare members.

4) Expand Digital Engagement

- Promote greater awareness and utilization of Kaiser Permanente’s mobile app and virtual wellness/condition management resources

5) Strengthen Collaborative Efforts

- Deepen partnerships with the LACERS Well program, other LACERS health carriers, and local nonprofit health organizations.

Recommendations

Recommended 2025/26 Anthem Blue Cross Health Management Focuses:

1. Address High-Impact Health Conditions and Co-Morbidities

- Prioritize targeted strategies for managing the following prevalent conditions among Medicare members:

Overweight/Obesity	Coronary Artery Disease
Prehypertension/Hypertension	Osteoarthritis/Low Back Problems
Prediabetes/Diabetes	Depression/Anxiety

2. Enhance Member Outreach and Engagement

- Improve outreach capabilities to better connect members identified as having chronic health conditions.
- Increase compliance with recommended preventive care, particularly preventive visits and flu vaccinations.

3. Expand Utilization of Digital Health Tools

- Promote greater awareness and engagement with Anthem's telemedicine services and virtual wellness programs.
- Encourage participation in underutilized resources such as the Lark Diabetes Prevention Program and the Sydney mobile app.

4. Strengthen Data Collection and Reporting

- Facilitate more comprehensive collection and analysis of member health risk data, with a focus on overweight and obesity metrics.

5. Foster Collaborative Health Promotion

- Deepen partnerships with LACERS Well program, other LACERS health carriers, and local nonprofit health organizations to support coordinated wellness efforts.

LACERS WELL Program Initiatives Conducted for Calendar Year 2025

The LACERS Well program continues to align wellness activities with the latest health data and priorities identified in this report.

Through targeted initiatives, LACERS Well addresses key health challenges, such as obesity, hypertension, diabetes, and mental health by promoting healthier lifestyles, preventive care, and chronic condition management.

The program has focused on empowering members through wellness challenges, fitness classes, and health education seminars.

LACERS Well Program Initiatives During 2025

Physical Activity	2025: (12) Fitness Made Simple Virtual Fitness Classes; (17) Champion-led Activities (Walks in Park, Hiking, Pickle Ball); (2) 5k Hike-Walk Run Events 5/7/25: Aging Well (FSS) – Tai Chi 5/28/25: Anthem Benefits Webinar: Silver Sneakers 7/29/25 – Kaiser sponsored Zumba Dance Class
Healthy Nutrition Habits	3/13/25: Kaiser Well-being Webinar: Smart Grocery Shopping; 5/15/25: Kaiser Plant-Based Meal Planning Webinar
Weight Control	2/27/25: Kaiser Managing Your Weight Webinar
Blood Pressure Monitoring	4/25/25: Kaiser Dietary Approaches to Stopping Hypertension (DASH) Meal Plan Webinar; 10/1/25: Aging Well (FSS) - Heart Health & After Stroke Planning Webinar 10/16/25: Kaiser Taking Care of Your Heart Webinar 11/19/25: Anthem Benefits Webinar – Hypertension
Diabetes Prevention and Management	5/18/25: Kaiser Keys to Preventing Diabetes Webinar 6/25/25: Anthem Benefits Webinar – Diabetes Awareness
Wellness & Condition Management	10/25 – 12/25: Anthem Benefits Webinar – Breast Cancer Awareness; Cancer Prevention & Preventive Care
Preventative Screenings & Flu Shots	9/24/25: Anthem Benefits Webinar – Immunization Awareness
Depression & Anxiety Resources	5/2025 & 12/2025: Aging Well (FSS) - Coping with Isolation, Grief & Loss webinars 11/5/25: County of L.A. – Holiday Blues Webinar
Mental Health Wellness Resources	5/29/25 – 7/17/25: County of LA Dept of Mental Health Wellness Series – Stress Management, Hoarding, and Avoiding Financial Scams
Health Plan Website Resources	Lacers.org Health Plan Carrier Resources & Microsites

Recommendations

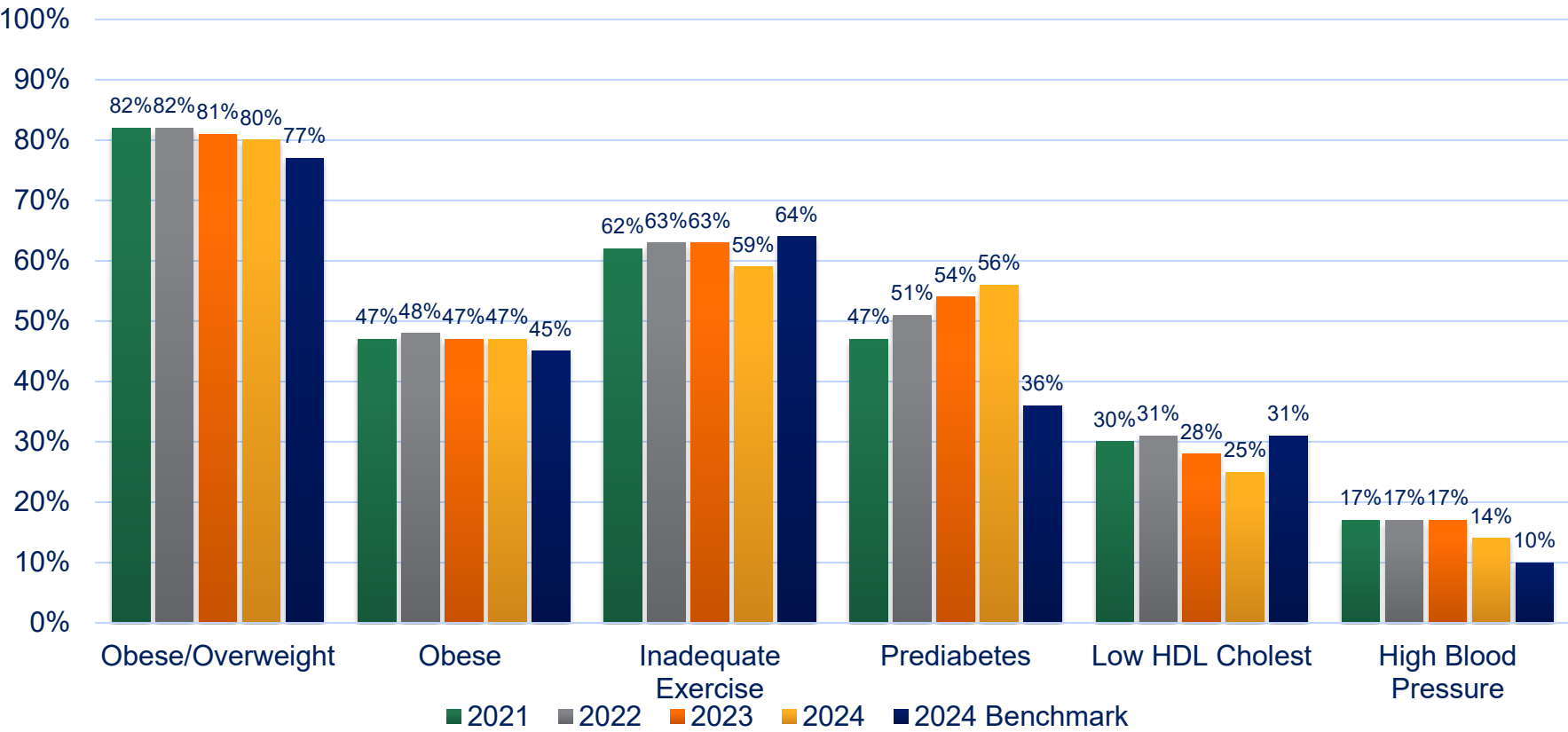
Strategic Initiatives for a Healthier Retirement: LACERS WELL Program Priorities for 2025

- **Promote healthy lifestyles through physical activity, nutrition education, and weight management programs** tailored for retirees.
- **Encourage regular monitoring of key health indicators**, including blood pressure, blood glucose, and cholesterol, to support early detection and management of chronic conditions.
- **Increase awareness and utilization of preventive care services**, including routine screenings, flu vaccinations, and wellness visits.
- **Support mental health and emotional well-being** by expanding programs that address depression, anxiety, social isolation, and loneliness.
- **Provide back care and musculoskeletal health resources**, such as virtual classes and ergonomic education, to help prevent and manage chronic pain.
- **Promote the use of digital health tools**, including telemedicine services, health plan apps, and online platforms, for convenient access to care, medication management, and provider communication.
- **Enhance engagement with virtual wellness and condition management programs** offered by Kaiser and Anthem, including diabetes prevention and management resources.

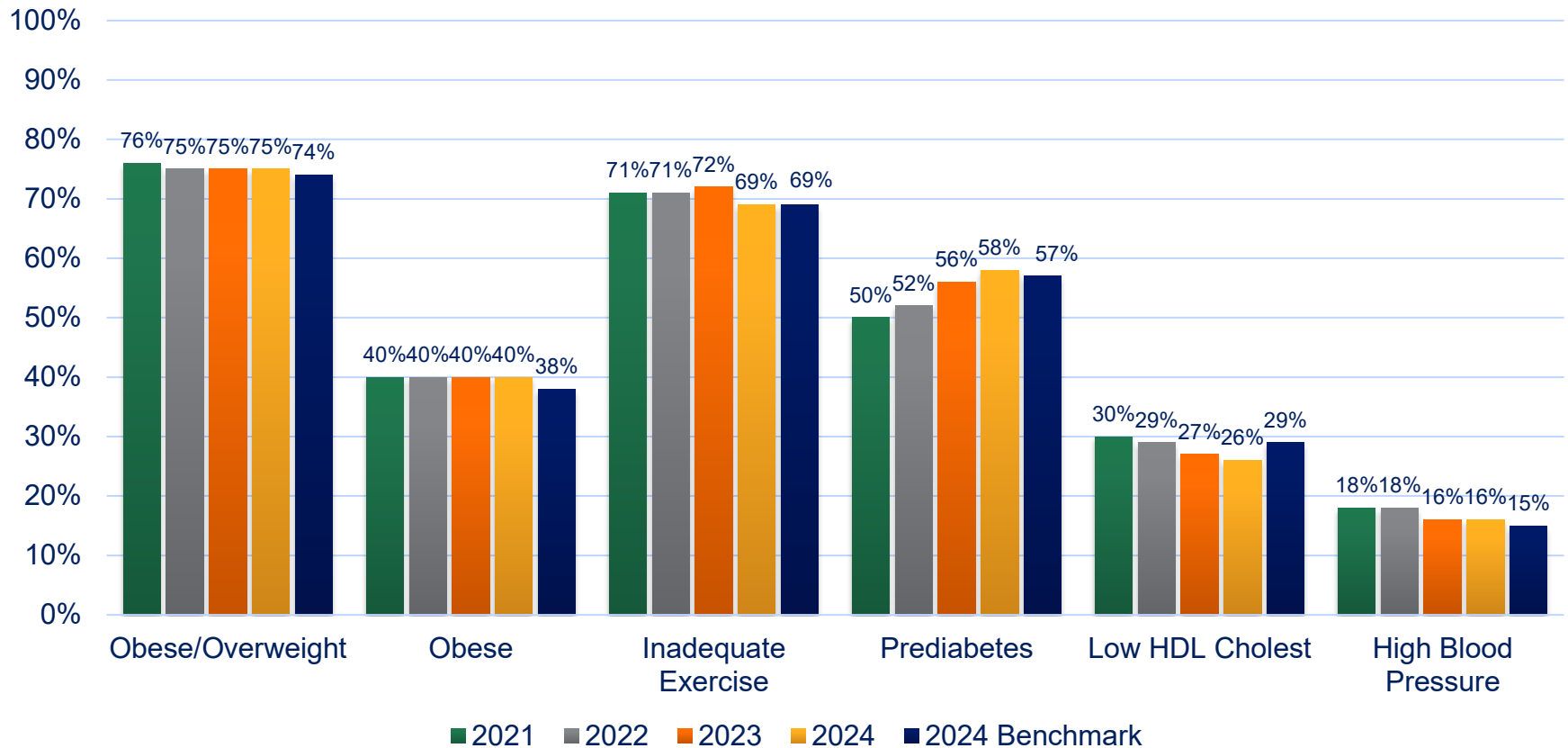
APPENDIX

2024 Kaiser and Anthem Health Management Metrics (Full Size Versions of All Data Charts)

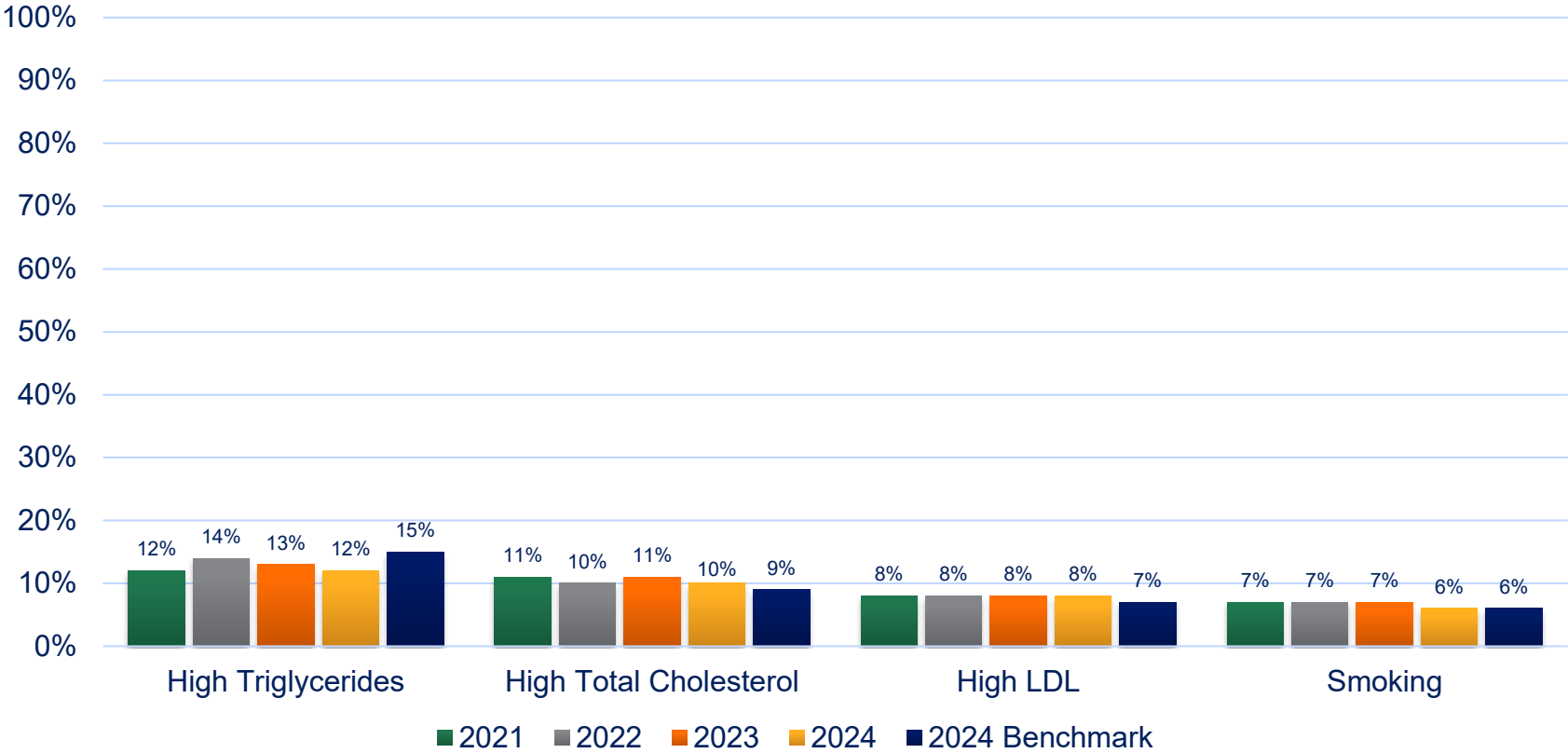
Health Risks – KP Members Non-Medicare



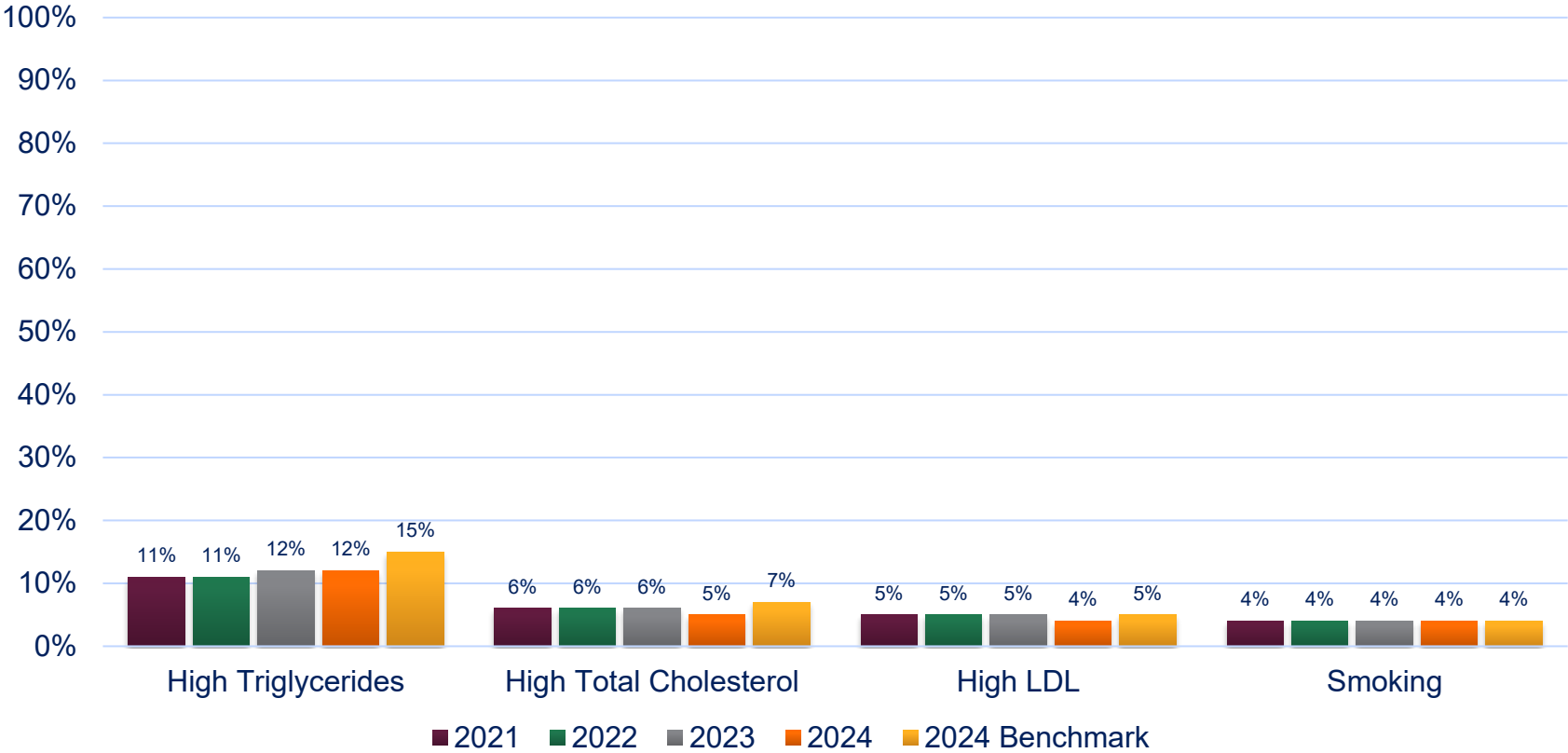
Health Risks – KP Members Medicare



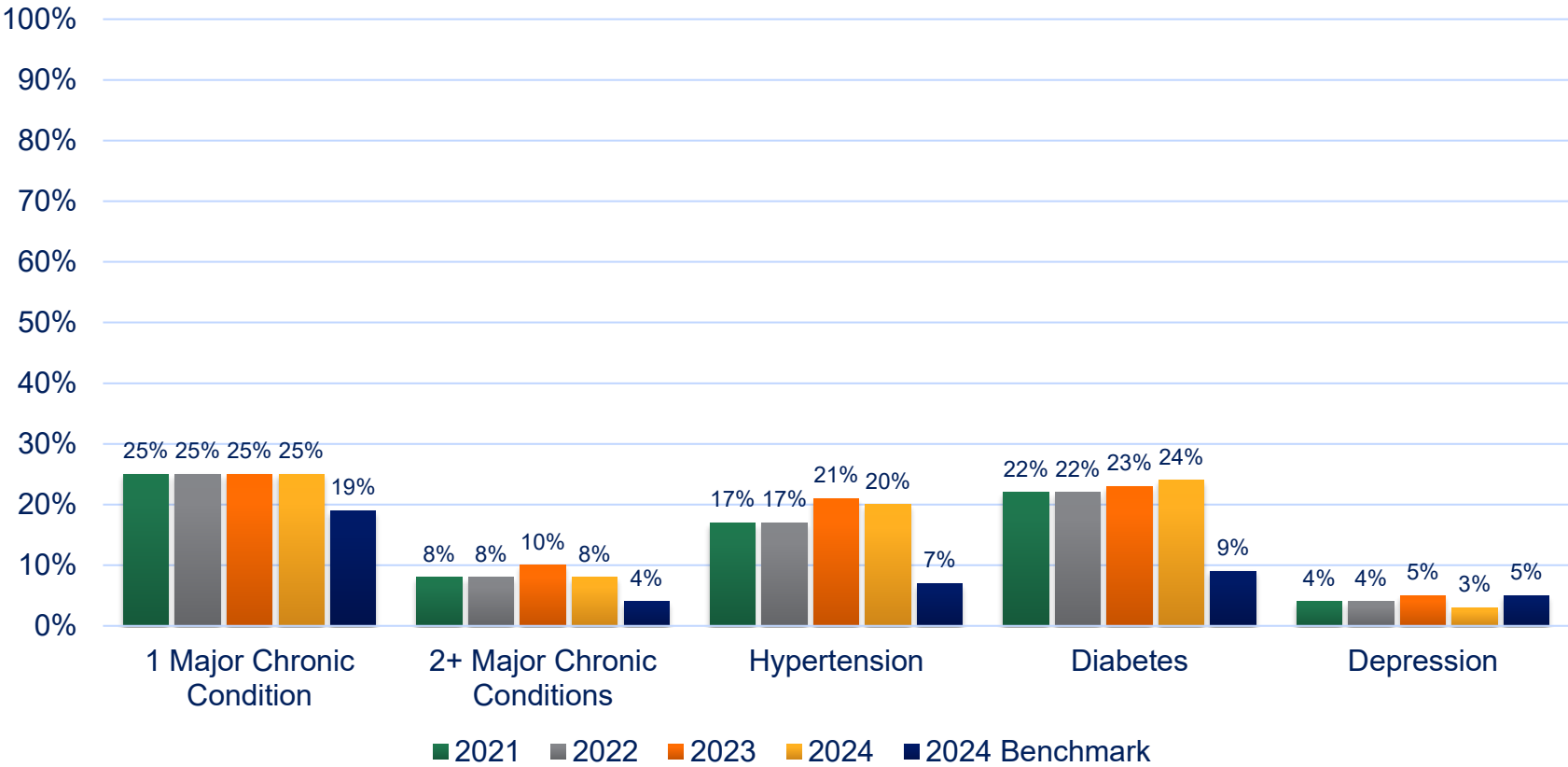
Health Risks – KP Members
Non-Medicare



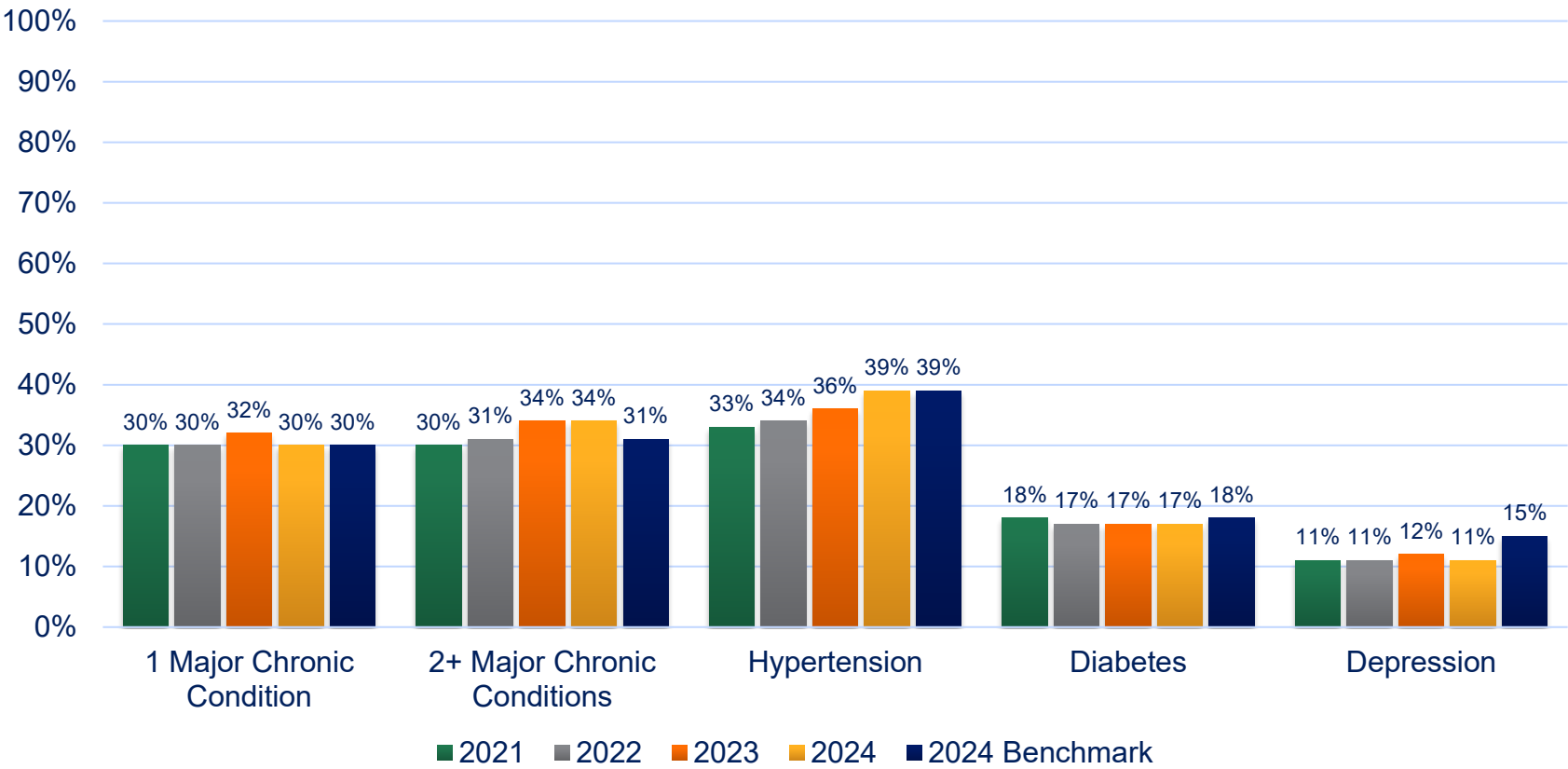
Health Risks – KP Members Medicare



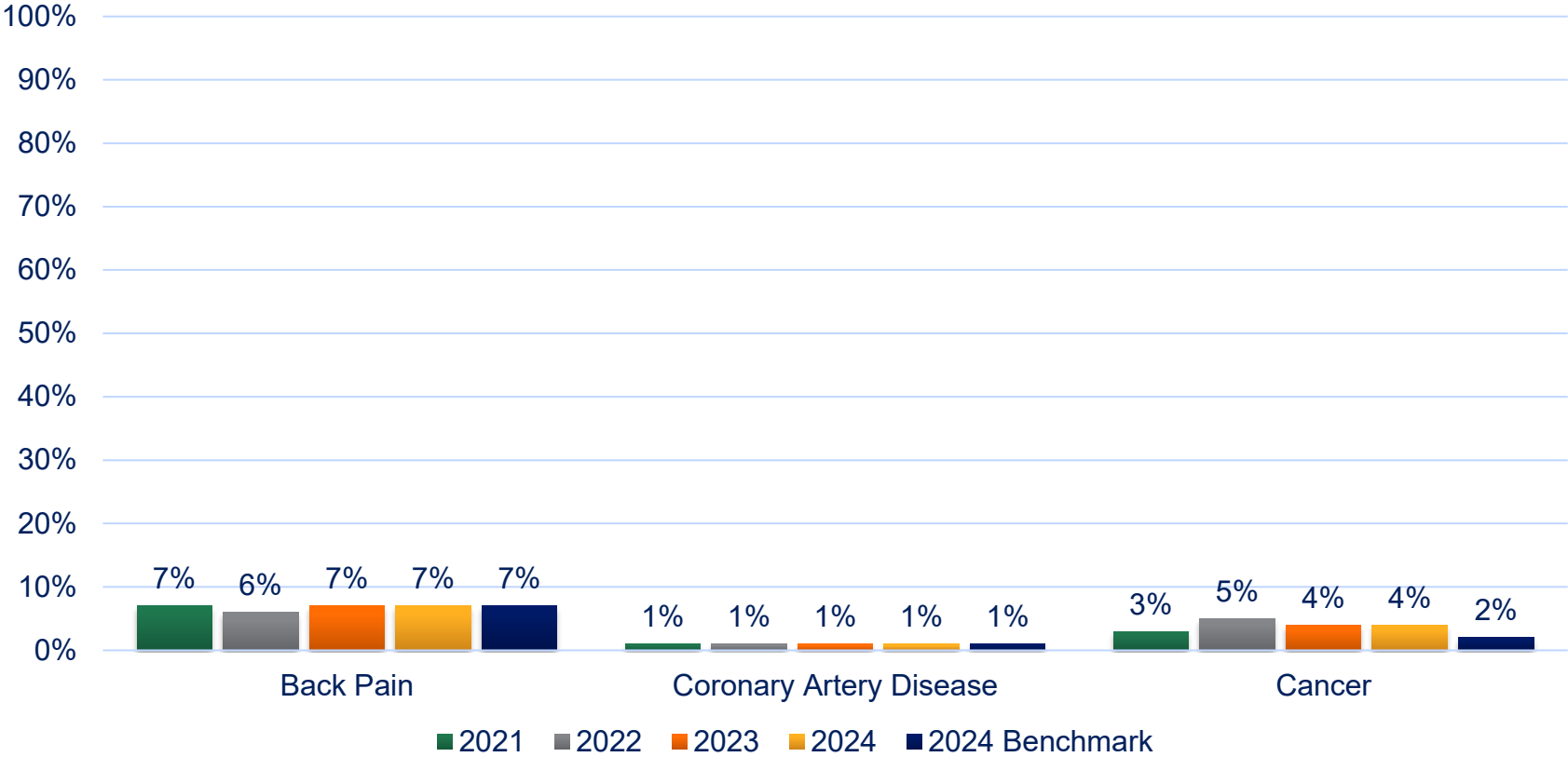
Lifestyle-Related Chronic Health Conditions – KP Members Non-Medicare



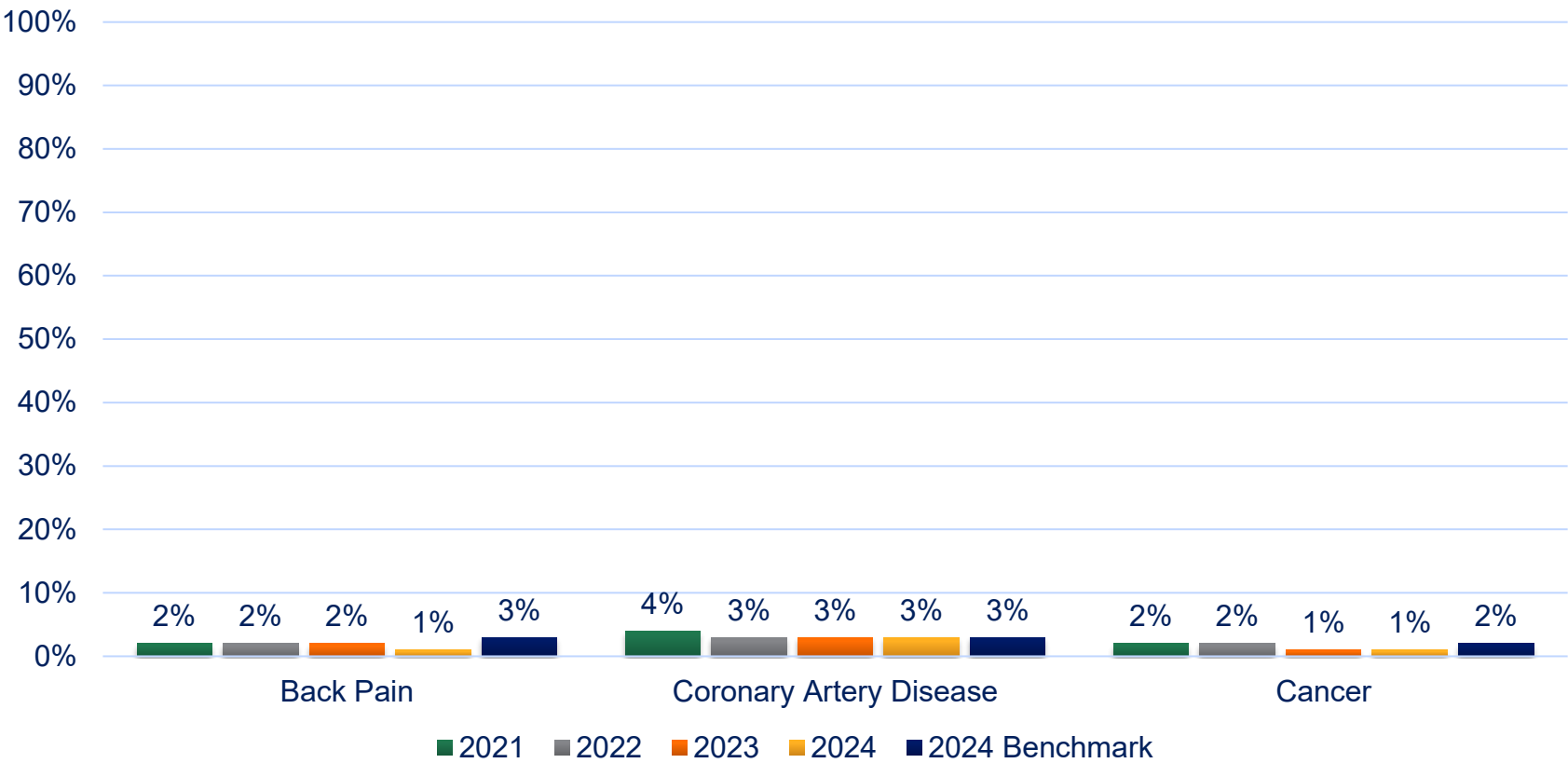
Lifestyle-Related Chronic Health Conditions – KP Members
Medicare



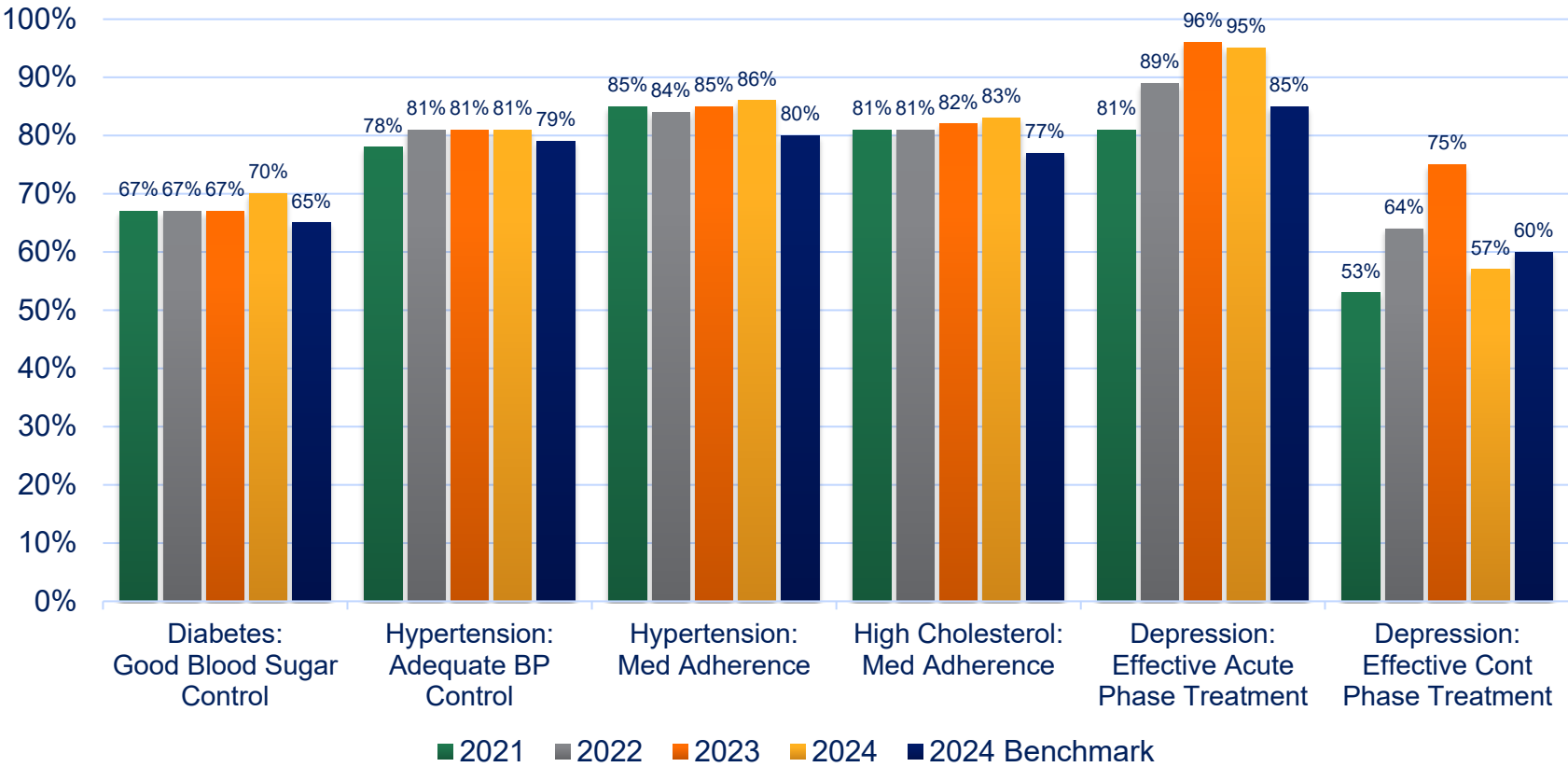
Lifestyle-Related Chronic Health Conditions – KP Members
Non-Medicare



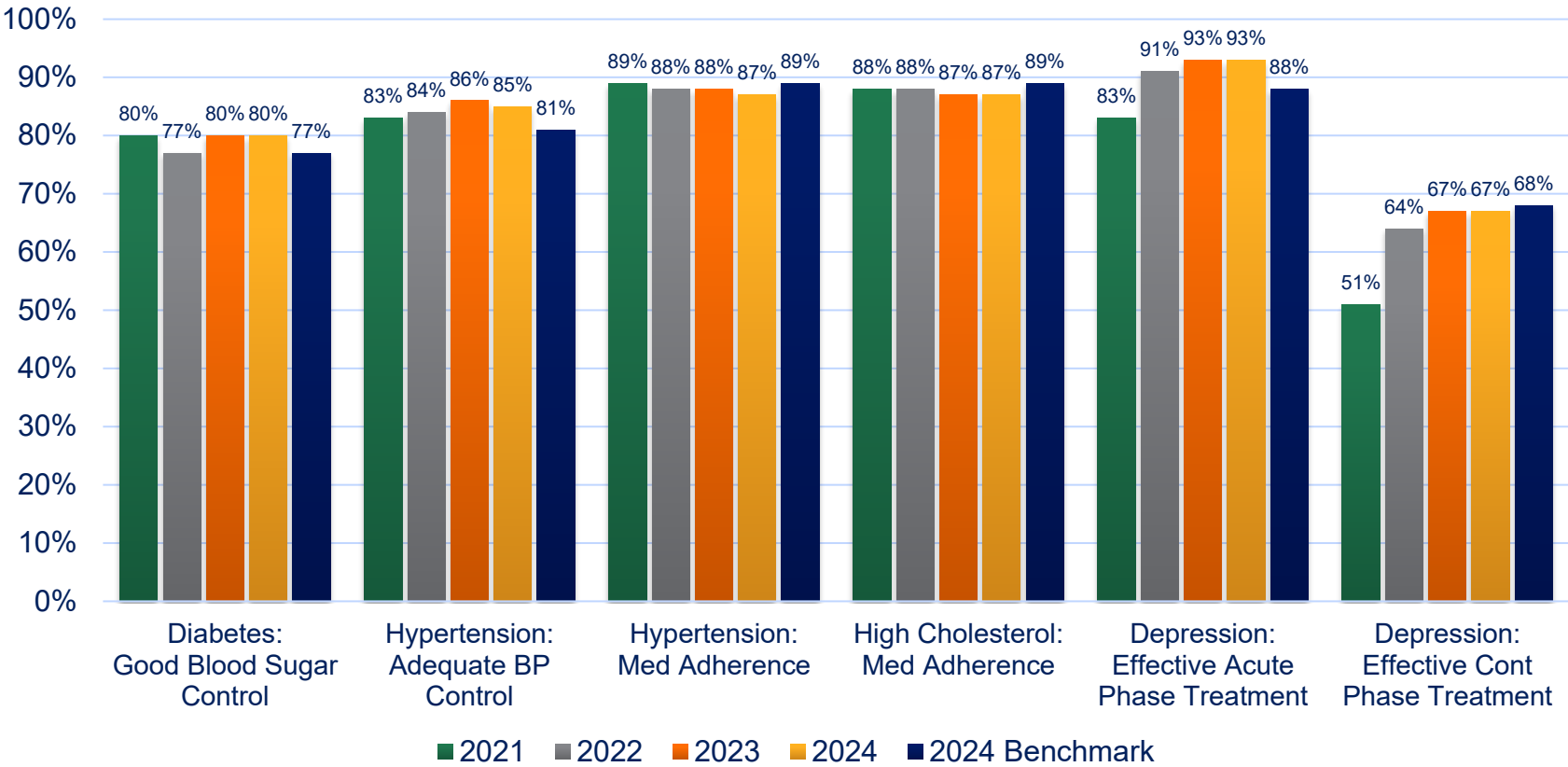
Lifestyle-Related Chronic Health Conditions – KP Members
Medicare



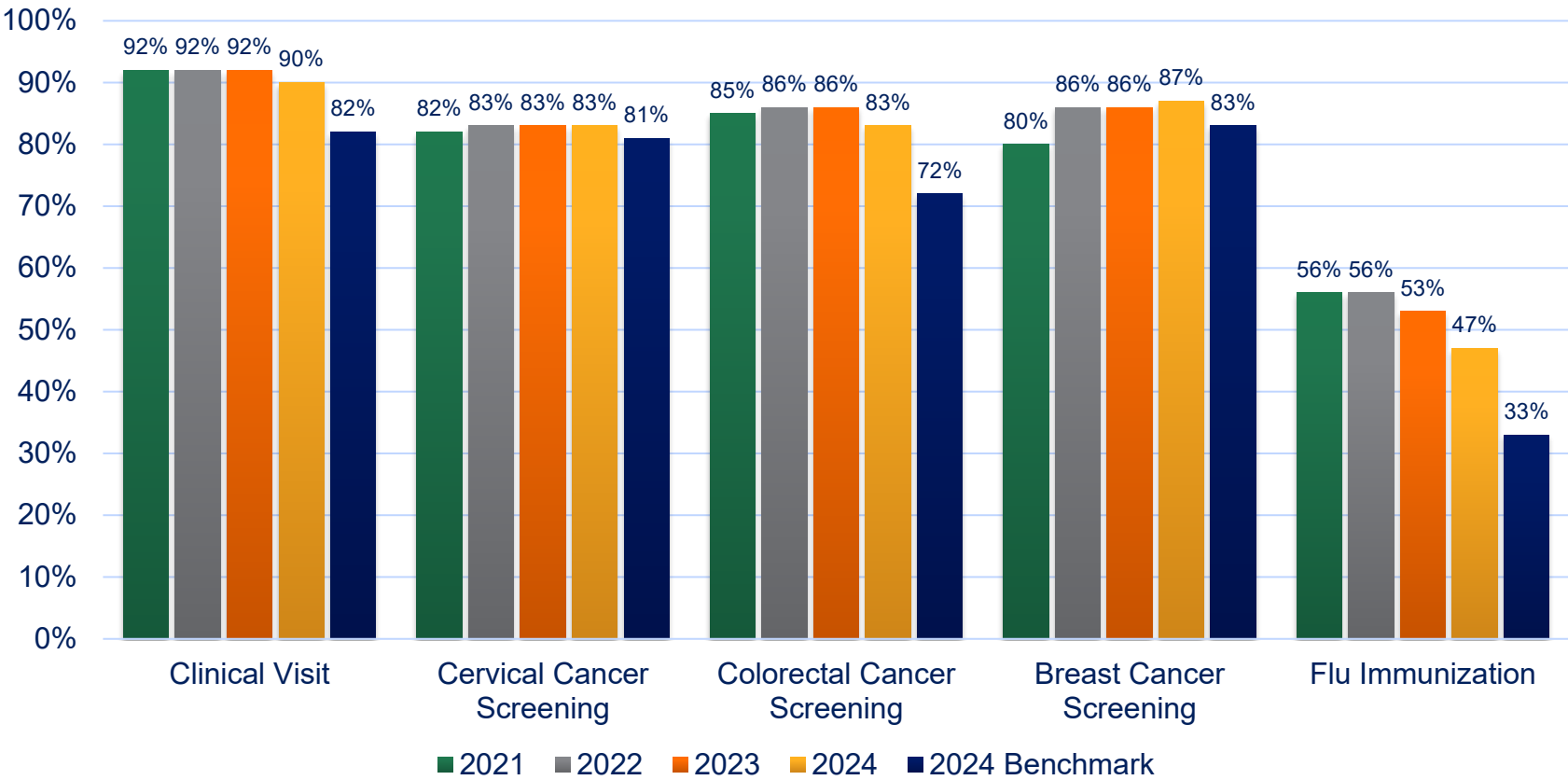
Chronic Condition Management – KP Members
Non-Medicare



Chronic Condition Management – KP Members
Medicare

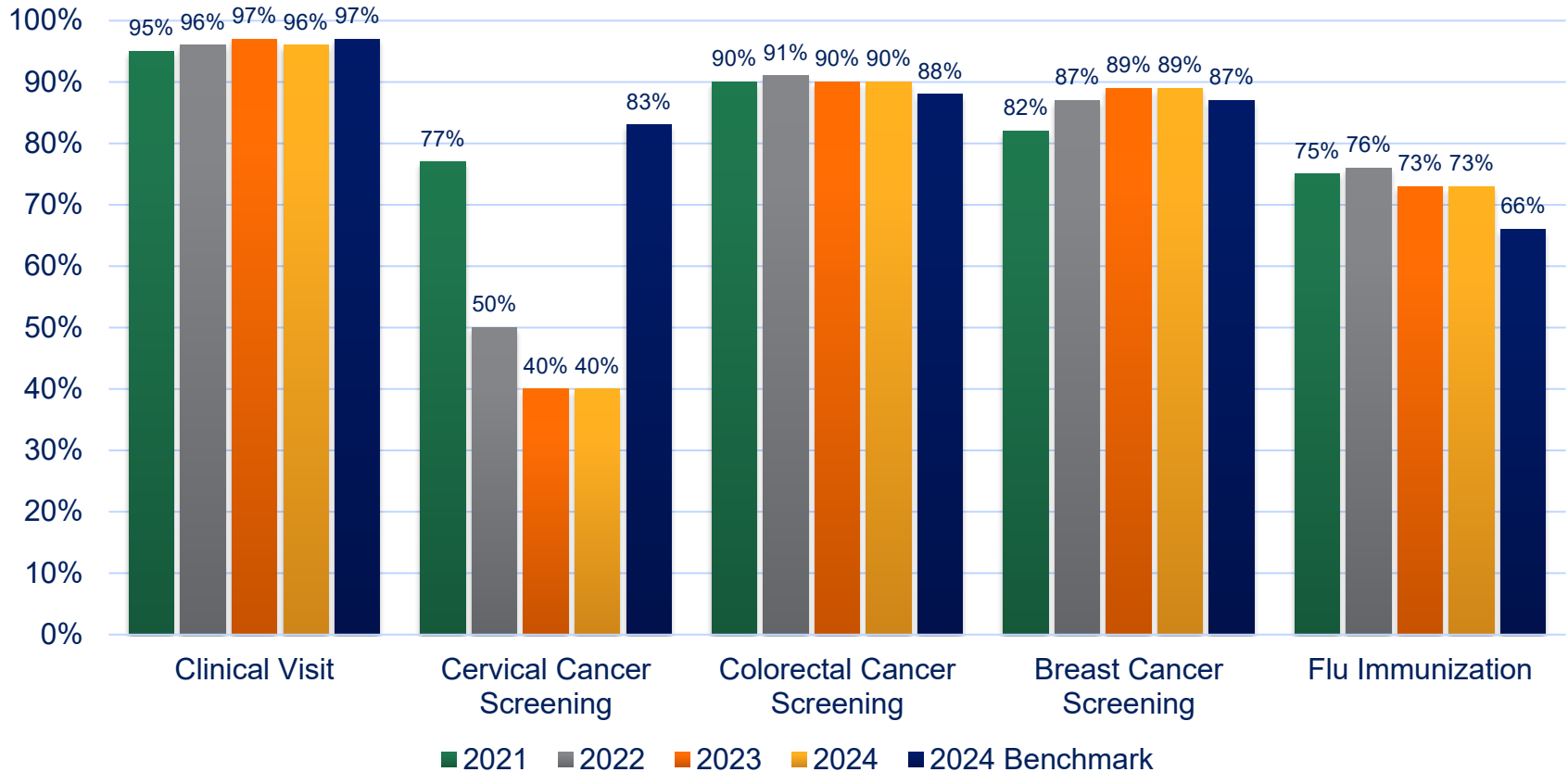


Preventive Care Compliance of Eligible Members – KP Members
Non-Medicare



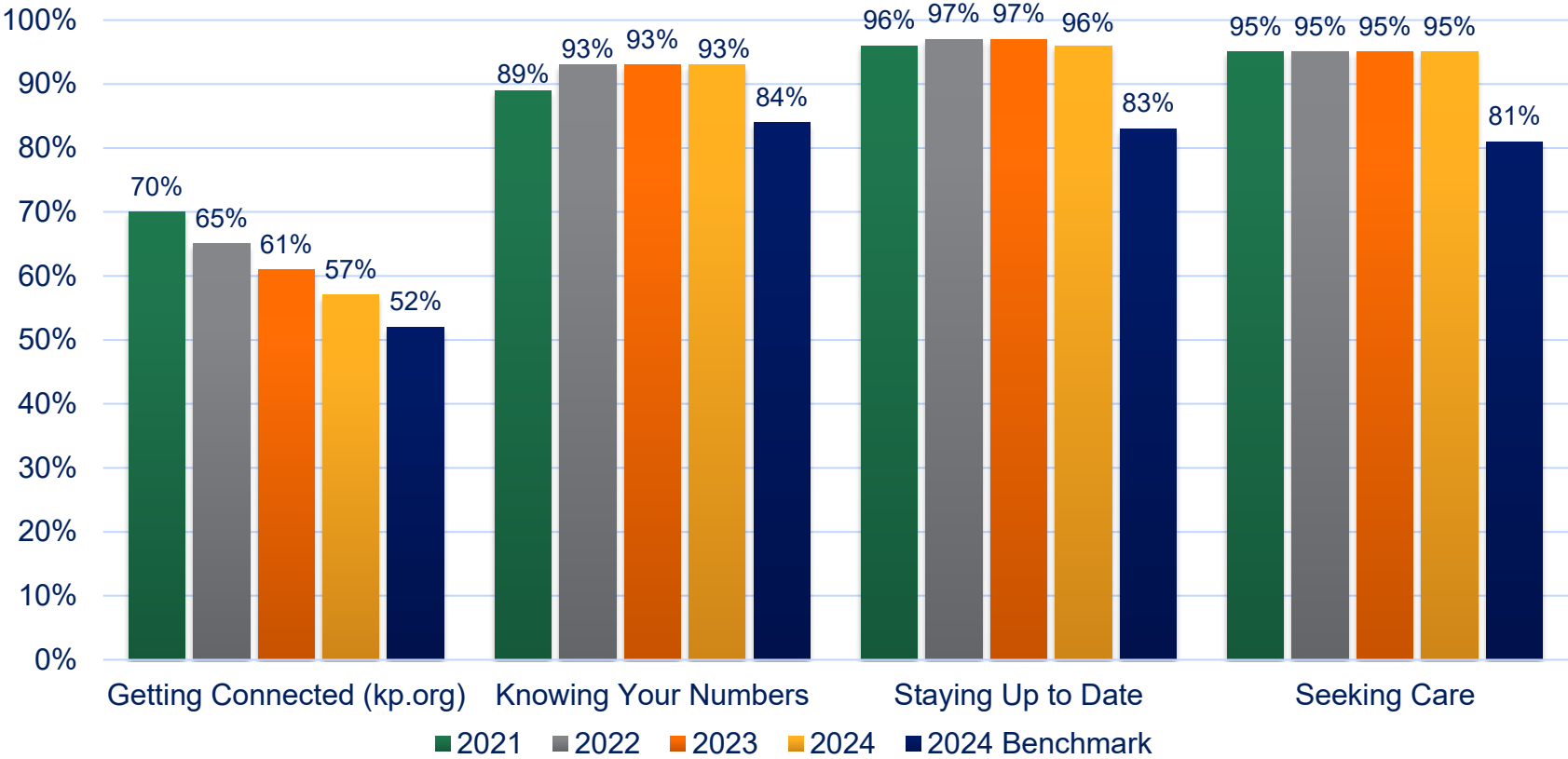
*See Appendix for screening criteria

Preventive Care Compliance of Eligible Members – KP Members Medicare

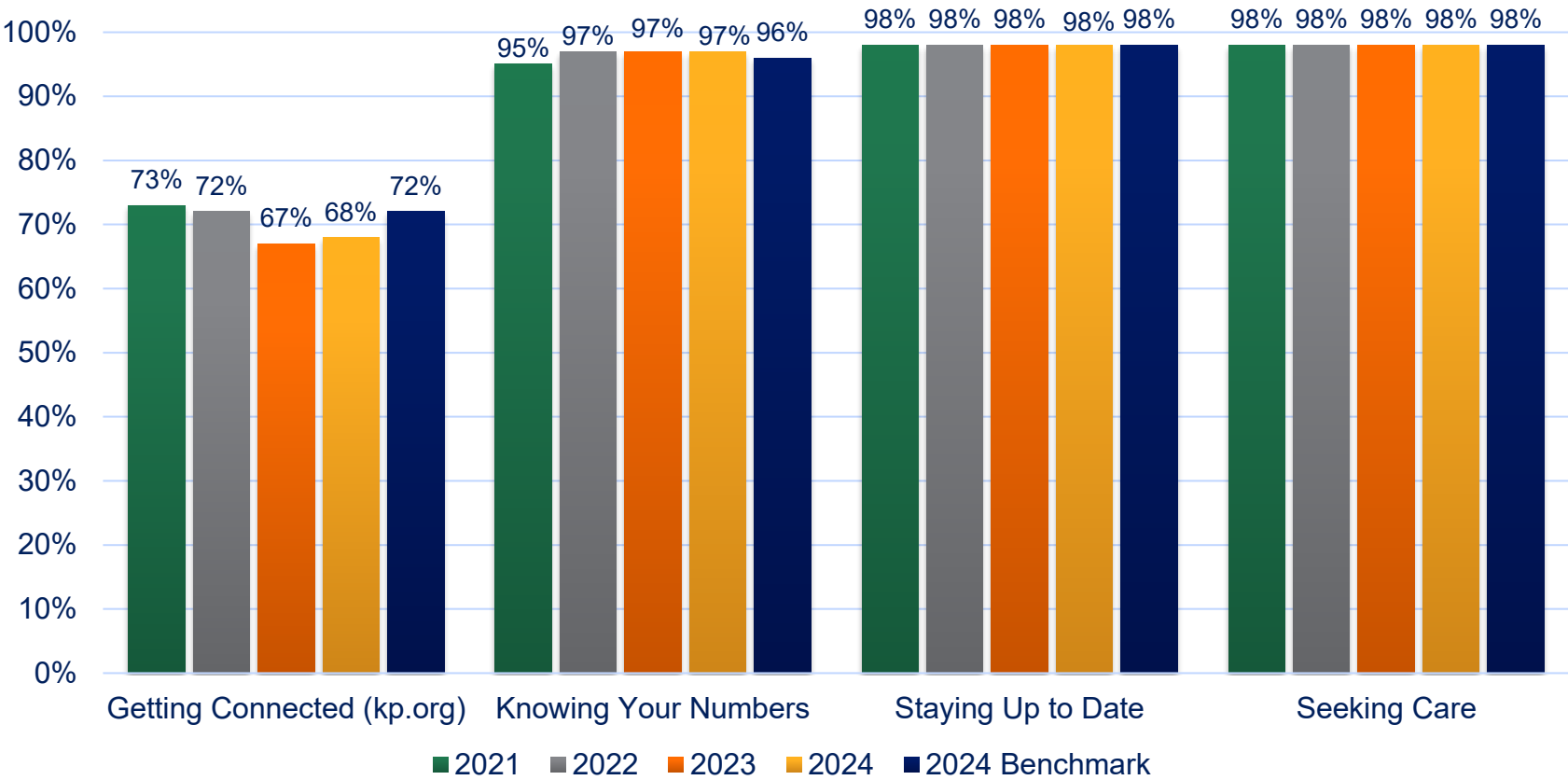


*See Appendix for screening criteria

Member Engagement – KP Members
Non-Medicare



Member Engagement – KP Members
Medicare



Kaiser Permanente Members

Metrics Definitions

Reporting Category	Metric Description	Metric Definition
Summary Demographics	% who saw a clinician	Percentage of enrolled members (both continuously enrolled and those enrolled at the end of the measurement period) who had at least one clinical encounter with Kaiser Permanente during the 12-month measurement period.
% of members measured at clinical visit	Adults ages 18+ with a recorded result for smoking status	Percentage of members aged 18 or older that had their smoking status populated in the social history section of HealthConnect. This is not a 'time captured' element and reflects the current or most recent smoking status.
Weight Management (BMI Measurements)	Adult weight - Overweight BMI 25.0-29.9	Percentage of members aged 21 to 74 who came to the doctor in the measurement period and who had a recorded BMI that is greater than or equal to 25.0 and less than or equal to 29.9. Excludes members who were using maternity services during the time period of measurement.
Weight Management (BMI Measurements)	Adult weight - Obese BMI 30.0 or higher	Percentage of members aged 21 to 74 who came to the doctor in the measurement period and who had a recorded BMI that is greater than or equal to 30.0. Excludes members who were using maternity services during the time period of measurement.
Weight Management (BMI Measurements)	Adult weight - Overweight or obese	Percentage of members aged 21 to 74 who came to the doctor, and were measured, who were overweight or obese (BMI greater than or equal to 25.0). Excludes members who were using maternity services during the time period of measurement.
Adult Exercise (Ages 18+)	Sedentary - Weekly minutes <30, not meeting recommendation	Percentage of members aged 18 or older who came to the doctor, were screened, and reported weekly exercise that is less than 31 minutes. Excludes members who used maternity services.
Blood Sugar Control: Glucose	Prediabetes test result - Fasting glucose 100-125 or hemoglobin A1c 5.7-6.4	Percentage of adults aged 40 or older or BMI that is greater than or equal to 25 or non-white who (excludes those with a Diabetes Diagnosis) were measured over the last 3 years (HbA1c or fasting blood glucose test). This new definition will be reflected in reporting beginning with Q3 2020.
Cholesterol Management (Ages 18-75)	Total cholesterol - High ≥ 240	Percentage of members aged 18 to 75 who came to the doctor, were screened, and had a result of total cholesterol that is greater than or equal to 240.
Cholesterol Management (Ages 18-75)	LDL results - High ≥ 160	Percentage of members aged 18 to 75 who came to the doctor in the measurement period and who had a measured a LDL result that is greater than or equal to 160.
Cholesterol Management (Ages 18-75)	HDL results - Low <40 for males or >0 and <50 for females	Percentage of members aged 18 to 75 who came to the doctor in the measurement period and who had a measured HDL result that is greater than 0 and less than 40 for males or that is greater than 0 and that is less than 50 for females.
Cholesterol Management (Ages 18-75)	Triglyceride results: high >199	Percentage of members aged 18 to 75 who came to the doctor in the measurement period and who had a measured a Triglyceride result that is greater than 199.

Metrics Definitions

Blood Pressure Control - Non-HEDIS	Blood pressure - Undesirable BP systolic/diastolic $\geq 140/90$	Percentage of members aged 18 to 85 who came to the doctor, were screened, and had a result of BP systolic/diastolic $\geq 140/90$. Percentage of adults who saw the doctor and were measured, who have high blood pressure defined as an "average" systolic blood pressure reading of ≥ 140 OR an "average" diastolic blood pressure reading of ≥ 90 . Percentage of adult population that had a recorded result for blood pressure during the 12-month period being measured.
Smoking (Ages 18+)	Smoking rate - yes - I smoke	Percentage of members aged 18 or older who came to the doctor in the measurement period and who had a recorded Smoking Status result of Yes or Infrequent according to HealthConnect. (The data captured in HealthConnect/Clarity are members 18 or older who use tobacco; Cigars, Snuff, Chew, Cigarettes, Pipes).
Prevention Metrics	Flu immunization rate	Percentage of members within the population that had a recorded result for "flu" immunization (injection or nasal spray) in Kaiser Permanente HealthConnect® during the 12-month period being measured. Percentage of population that had a recorded result for "flu" immunization (injection or nasal spray) in KP HealthConnect during the 12-month period being measured.
Prevention Metrics	Breast cancer screening rate	Percentage of female members aged 52 to 74 who had a mammography during the measurement year or one year prior to the measurement year. Follows HEDIS standards. Percentage of females between ages of 52 and 69 who had a mammography during the measurement year or one year prior to the measurement year.
Prevention Metrics	Cervical cancer screening rate	Percentage of female members aged 21 to 64 who were screened for cervical cancer using either of the following HEDIS criteria: <ul style="list-style-type: none"> female members aged 21 to 64 who had cervical cytology performed every 3 years. female members aged 30 to 64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years. Percentage of female members 24 to 64 years of age who received one or more Pap tests during the measurement year or two years prior to the measurement year.
Prevention Metrics	Colorectal cancer screening rate	As of Q4 2022, change to age band from 51-75 to 46-75. New definition as follows: Percentage of male and female members aged 46 to 75 who had appropriate screening for colorectal cancer (CRC). Appropriate screening is a Cologuard Test (FIT-DNA Test) during the measurement year or the 2 years prior to the measurement year, a Fecal Occult Blood Test (FOBT) during the measurement year, a flexible Sigmoidoscopy during the measurement year or the four years prior to the measurement year, or a Colonoscopy during the measurement year or nine years prior to the measurement year. Percentage of adults aged 46 to 75 who had appropriate screening for colorectal cancer (CRC). Appropriate screening is a Cologuard Test (FIT-DNA Test) during the measurement year or the 2 years prior to the measurement year, a fecal occult blood test (FOBT) during the measurement year, a flexible sigmoidoscopy during the measurement year or the 4 years prior to the measurement year, or a colonoscopy during the measurement year or nine years prior to the measurement year.

Kaiser Permanente Members

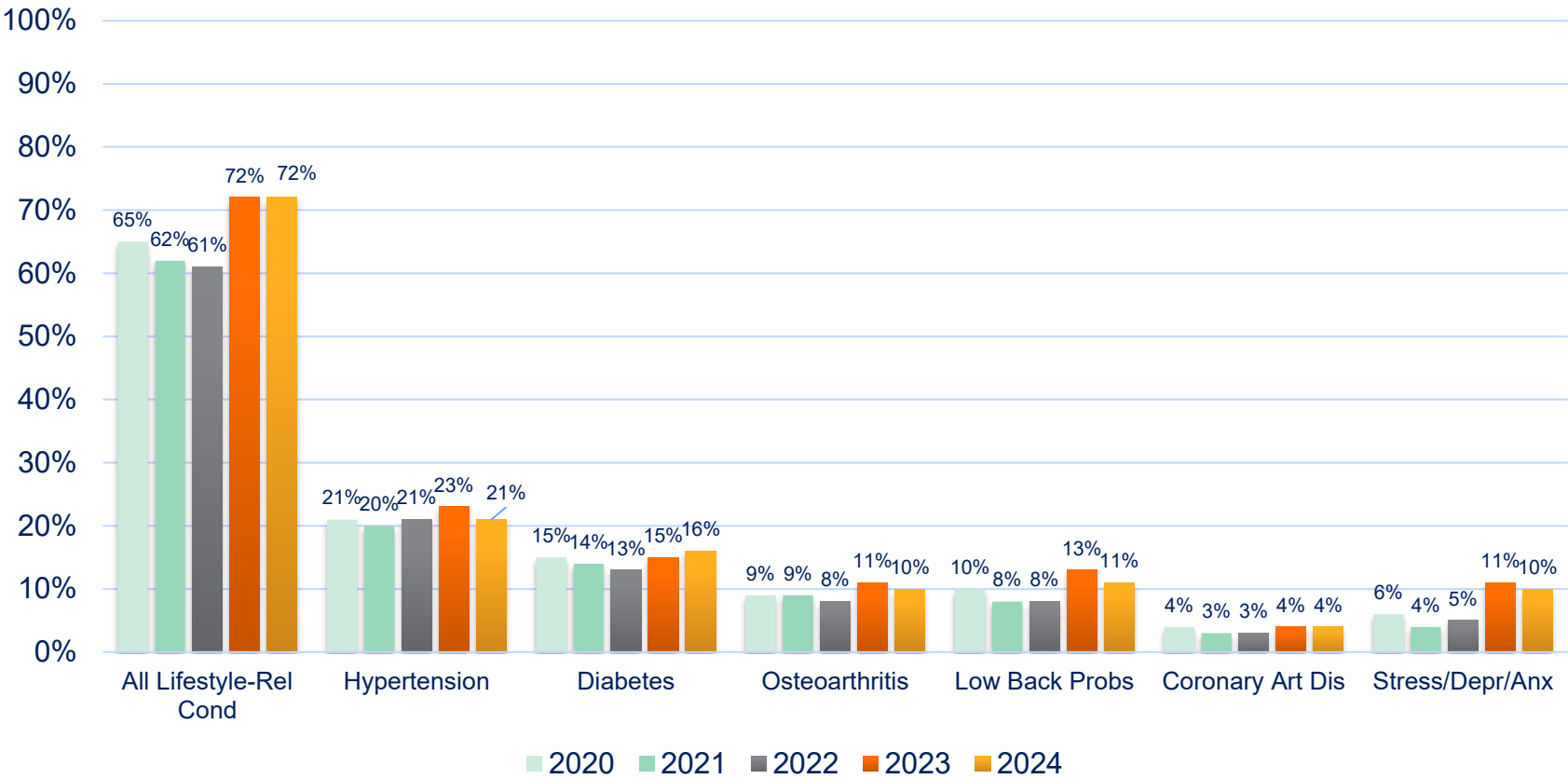
Metrics Definitions

Prevalence / Cost	Coronary artery disease (CAD) prevalence	Percentage of members for the customer that fall into the KP/CMi definition for the eligible population of the CAD cohort based on diagnosis and/or relevant medications (follows the old HEDIS 2014 rules, but was eliminated with HEDIS 2015).
Prevalence / Cost	Coronary artery disease (CAD) prevalence cost	Percentage of cost of members that fall into the CAD disease cohort. Note - It is NOT the cost of the disease, but the cost of the members with the disease, so if a member has co-morbid conditions, their cost would appear in both places.
Prevalence / Cost	Depression prevalence	Percentage of members for the customer that fall into the eligible population of the Depression cohort based on a Major Depression diagnosis and 18 and older age criteria. This is NOT the HEDIS defined AMM eligible population.
Prevalence / Cost	Diabetes prevalence	Percentage of members for the customer that fall into the HEDIS definition for the eligible population of the Diabetes cohort based on diagnosis and/or relevant medications.
Prevalence / Cost	Hypertension prevalence	Percentage of members for the customer that fall into the HEDIS definition for the eligible population of the Hypertension cohort based on diagnosis and/or relevant medications.
Prevalence / Cost	Obesity prevalence (based on BMI)	Percentage of members aged 2 to 74 who came to the doctor in the measurement period and who had a recorded BMI that is greater than or equal to 30.0. Excludes members who were using maternity services during the time period of measurement.
Diabetes	Blood sugar good control - HbA1c <8%	Percentage of Diabetic members for the customer that were in "Good Control" based on a Hemoglobin A1c result of <8% during the measurement period. Follows HEDIS standards.
Hypertension	Adequate blood pressure control <140/90	Percentage of members in the Hypertension cohort that have a blood pressure that is adequately controlled. Adequately controlled is defined as "Both a representative systolic BP less than 140 mm Hg AND a representative diastolic BP less than 90 mm Hg (BP in the normal or high-normal range). Follows HEDIS Standards.
Depression	Effective acute phase treatment	Percentage of members who were diagnosed with a new episode of depression, were treated with antidepressant medication and remained on an antidepressant drug during the entire 84-day (12-week) Acute Treatment Phase. Follows HEDIS Standards.
Depression	Effective continuation phase treatment	Percentage of members who were diagnosed with a new episode of depression and treated with antidepressant medication and who remained on an antidepressant drug for at least 180 days (6 months). Follows HEDIS Standard.
Percent of Members by Condition (Based on DxCG Data)	2 or more major chronic conditions	Percentage of members for the customer that have 2 or more major chronic conditions based on the DxCG Hierarchical Condition Codes (HCC) where members are continuously enrolled. Major chronic conditions = Diabetes, Asthma, CAD, Heart Failure, Depression, CKD, and COPD.

Metrics Definitions

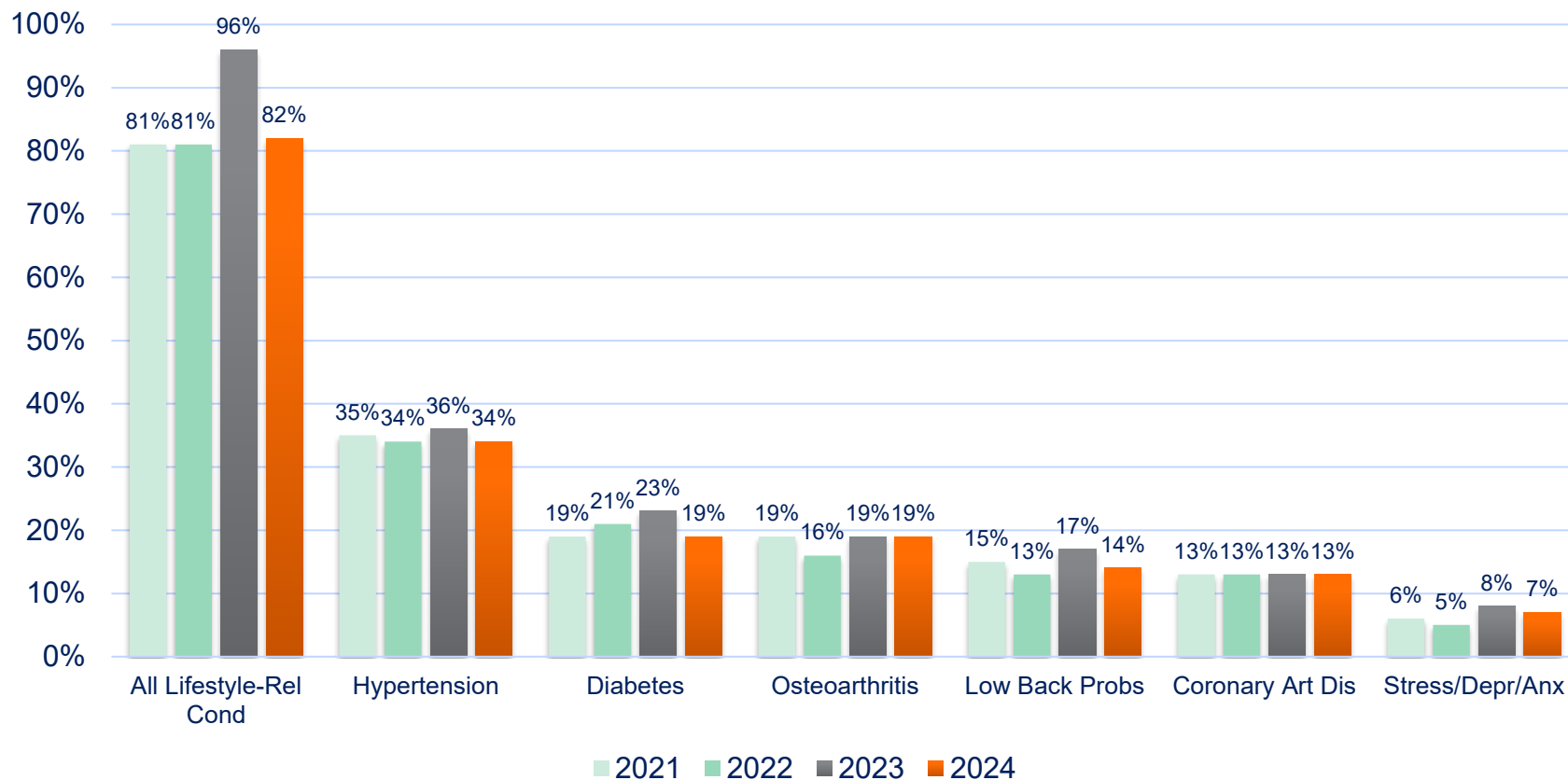
Percent of Members by Condition (Based on DxCG Data)	1 major chronic condition	Percentage of members for the customer that had only 1 major chronic condition based on the DxCG HCC where members are continuously enrolled. Major chronic conditions = Diabetes, Asthma, CAD, Heart Failure, Depression, CKD, and COPD.
Percent of Members by Condition (Based on DxCG Data)	Cancer	Percentage of members for the customer that had a Cancer diagnosis during the measurement period based on the DxCG HCC codes applicable to Cancer. Members are continuously enrolled.
Percent of Members by Condition (Based on DxCG Data)	Back pain	Percentage of members for the customer that had a Back Pain diagnosis during the measurement period based on the DxCG HCC codes applicable to Back Pain. Members are continuously enrolled.
Getting Connected	The % of overall company engagement	Percentage of members aged 18 or older who registered and signed on to kp.org.
Knowing Your Numbers	The % of overall company engagement	Percentage of members aged 18 or older who were measured for body mass index or blood pressure over the past two years, or screened for exercise as a vital sign.
Staying up to Date	The % of overall company engagement	Percentage of members aged 18 or older who got yearly flu shots or received scheduled cancer, cholesterol, or glucose screenings.
Seeking Care	The % of overall company engagement	Percentage of members aged 18 or older who made outpatient visits, consulted our nurse advice line, used secure messaging, or filled prescriptions.
Medication Adherence	Medication adherence - diabetes	Percentage of members with a proportion of days covered (PDC) greater than or equal to 80 percent on the overall diabetes 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.
Medication Adherence	Medication adherence - high cholesterol	Percentage of members with a proportion of days covered (PDC) greater than or equal to 80 percent 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.
Medication Adherence	Medication adherence - hypertension (High Blood Pressure)	Percentage of members with a proportion of days covered (PDC) greater than or equal to 80 percent on the RAS Antagonist 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.

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

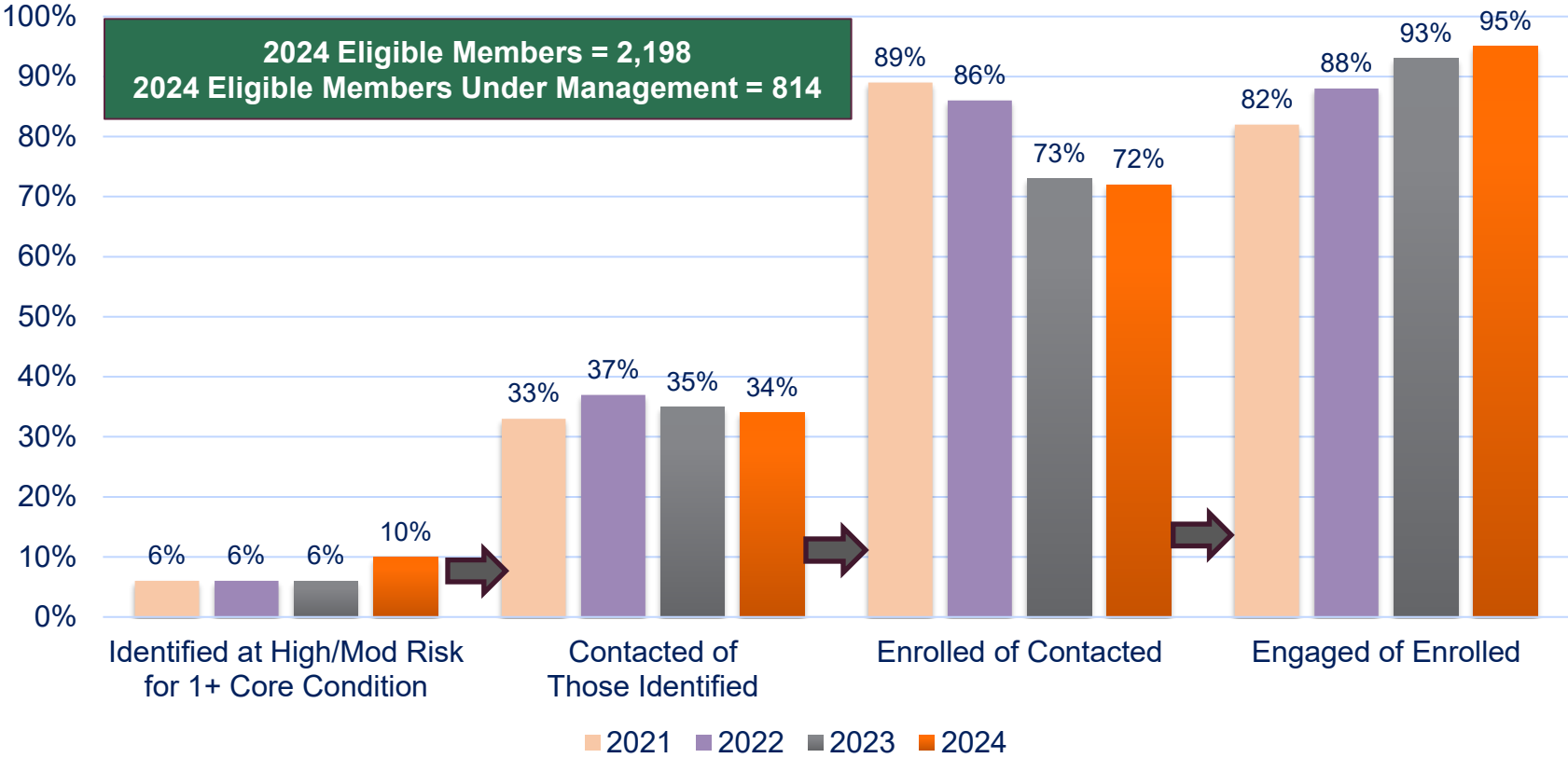


Anthem Blue Cross Members

Lifestyle-Related Chronic Health Conditions – ABC Members Medicare

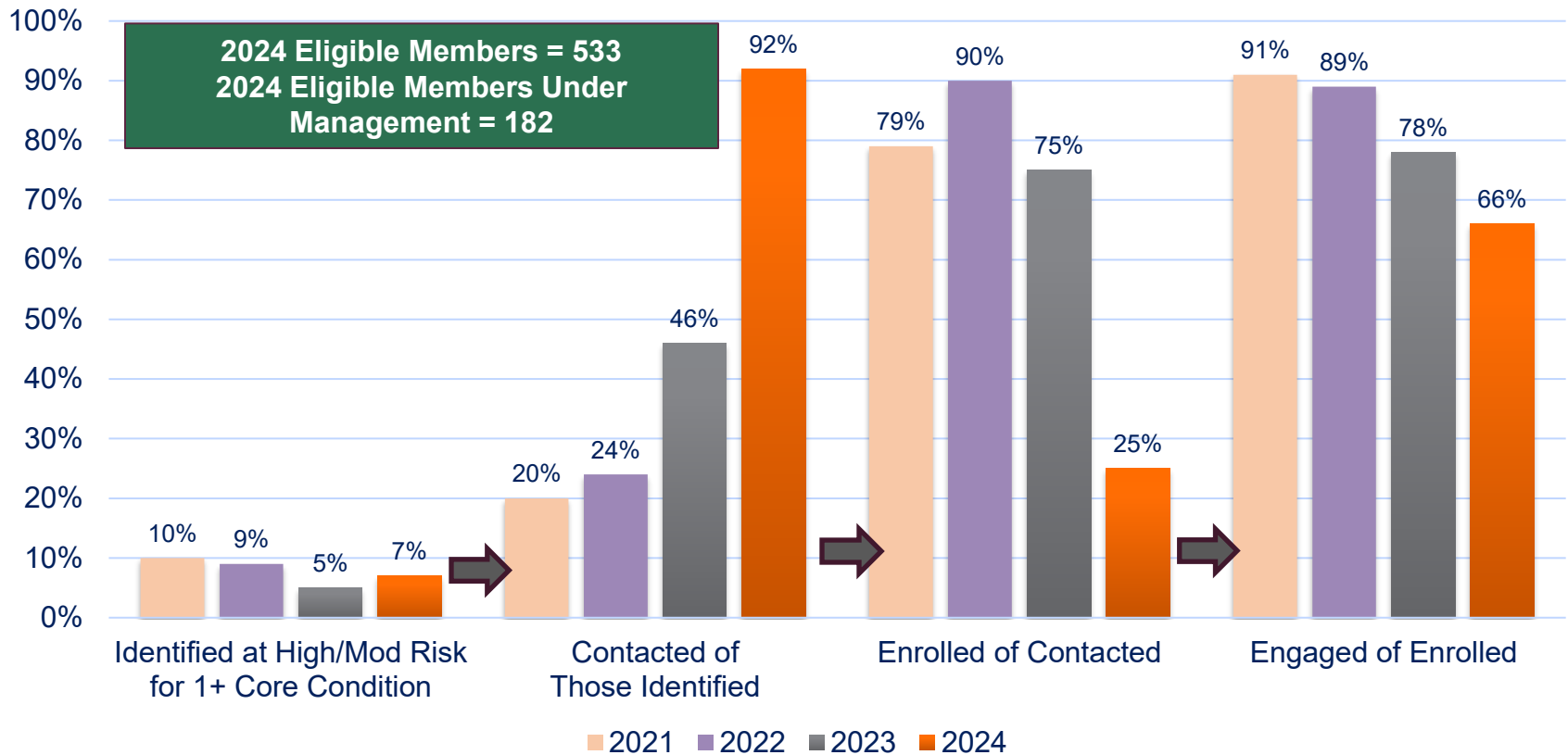


Chronic Condition Management – ABC Members Non-Medicare

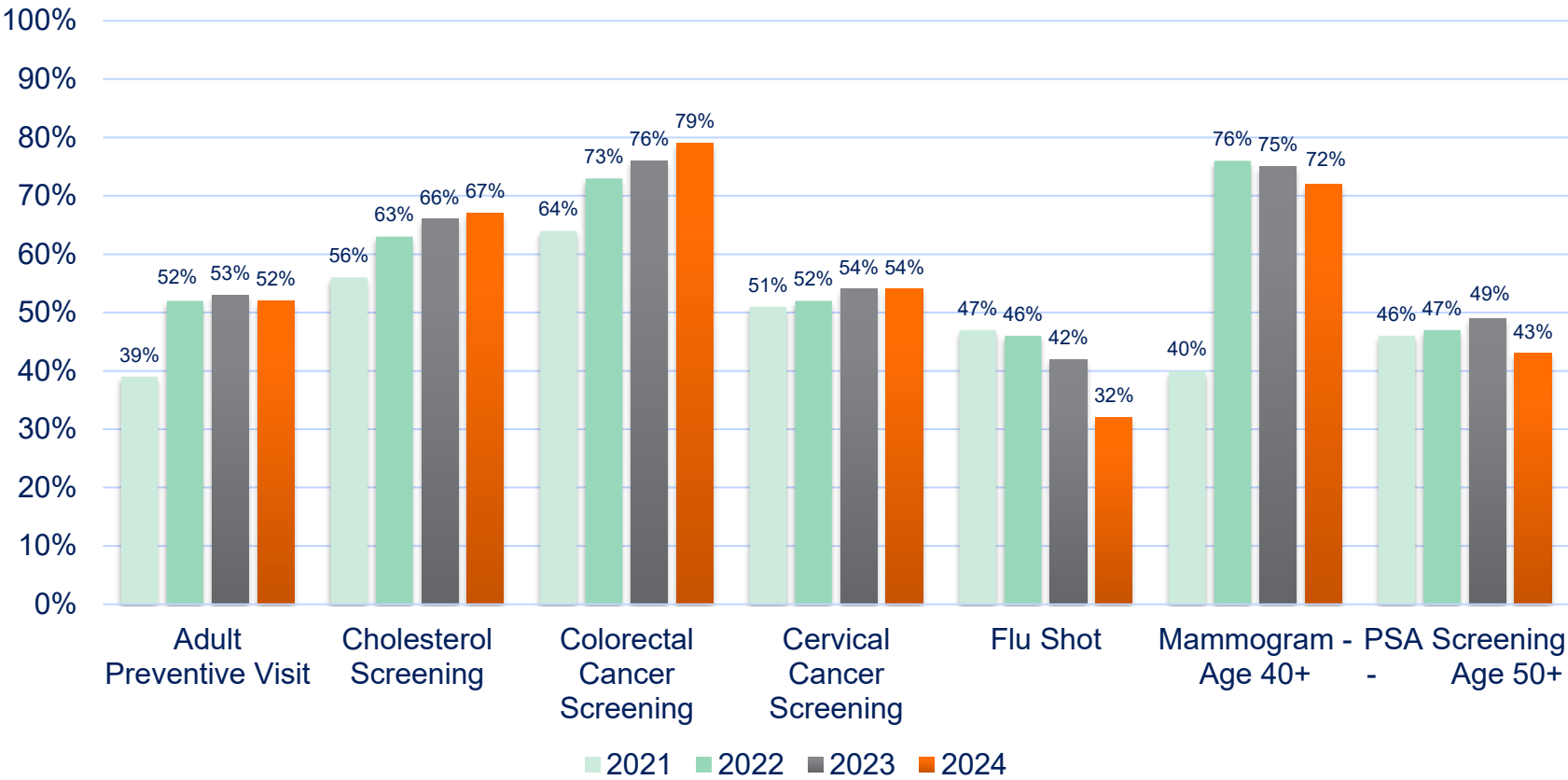


Anthem Blue Cross Members

Chronic Condition Management – ABC Members Medicare

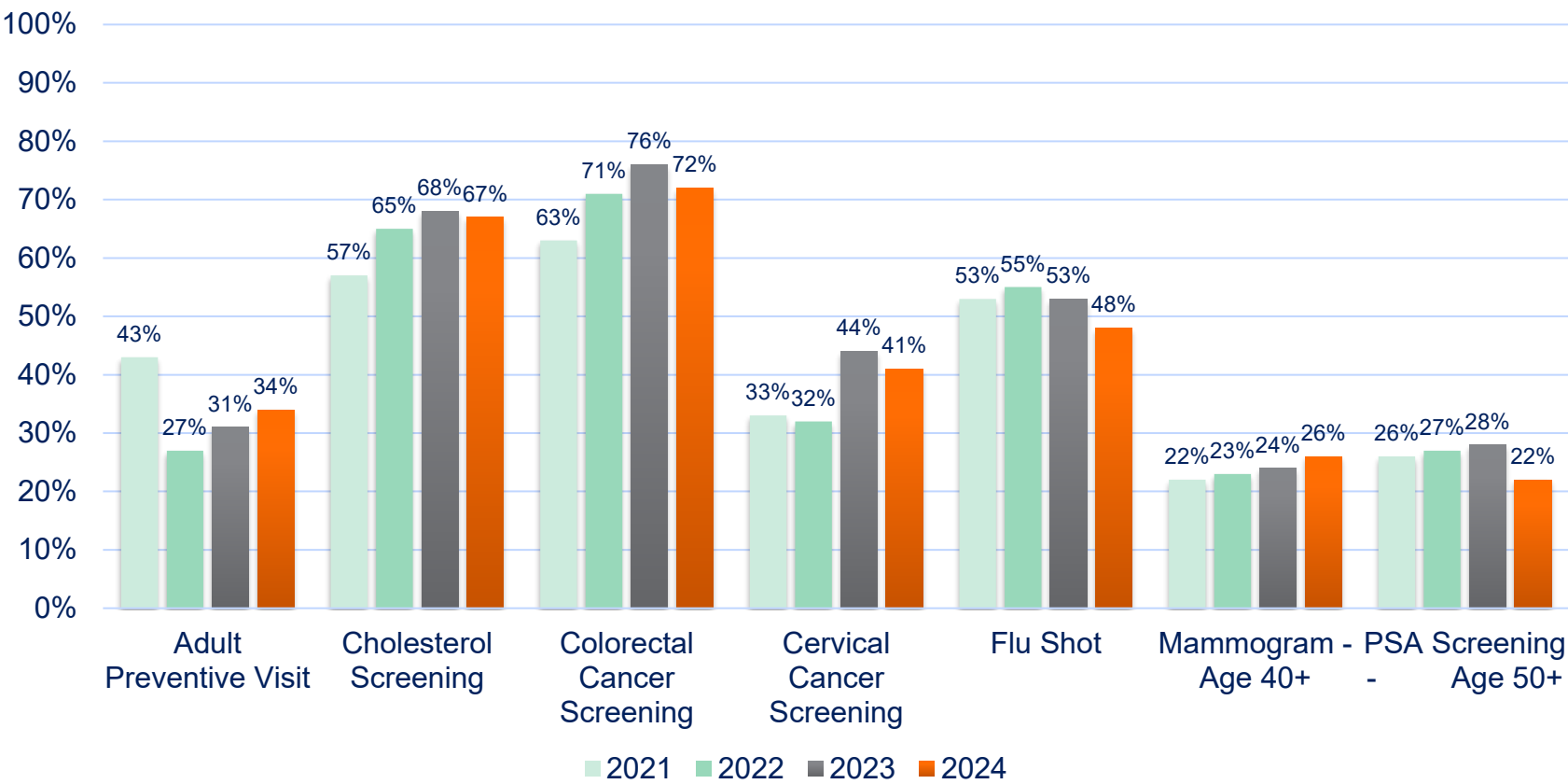


Preventive Care Compliance of Eligible Members – ABC Members
Non-Medicare



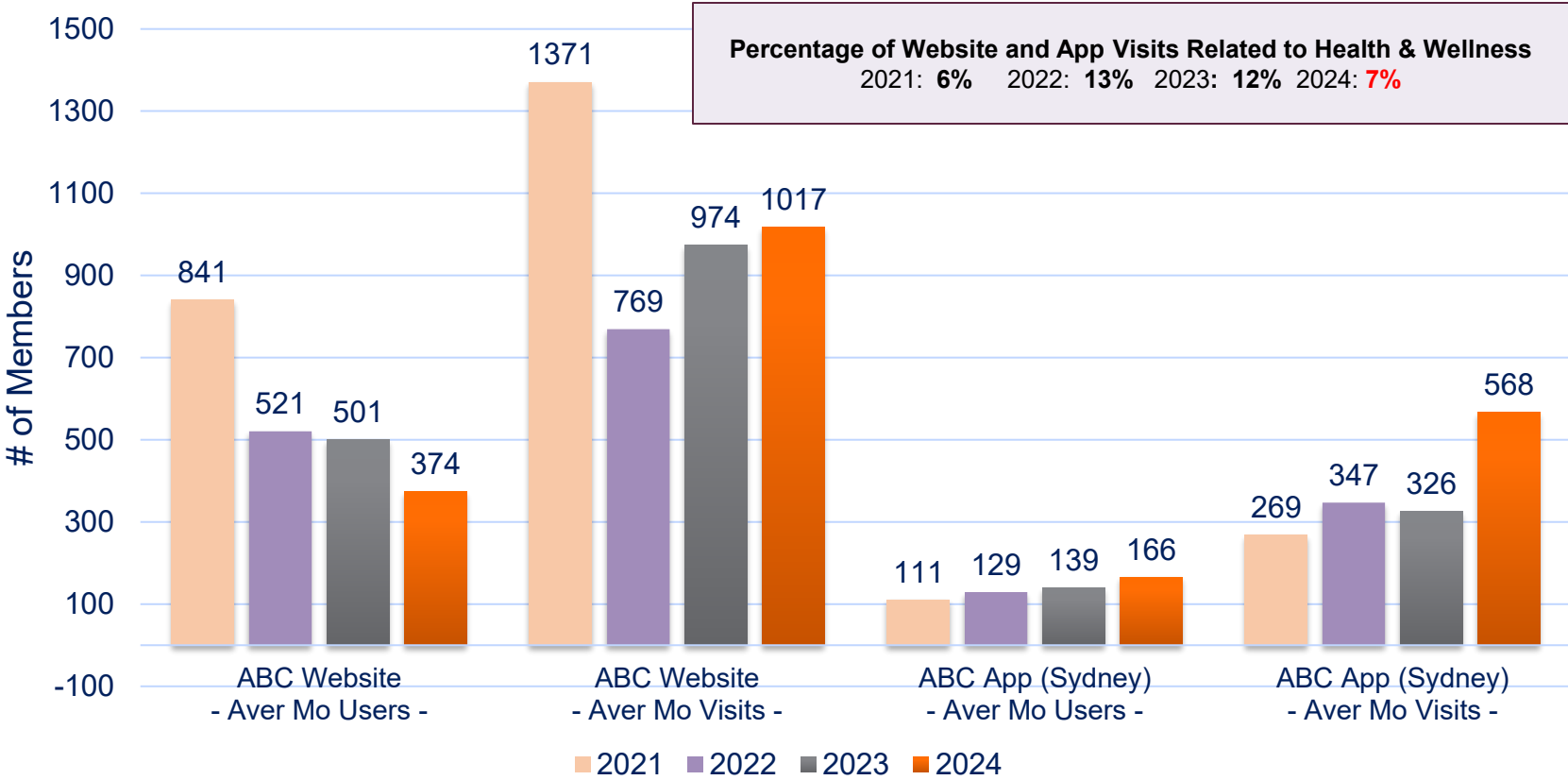
*ABC Medicare group compliance rates reflect claims paid by ABC as secondary to Medicare payment.

Preventive Care Compliance of Eligible Members – ABC Members
Medicare



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

Member Engagement – ABC Members Medicare & Non-Medicare





LACERS
LA CITY EMPLOYEES'
RETIREMENT SYSTEM



REPORT TO BENEFITS ADMINISTRATION COMMITTEE
From: Todd Bouey, Interim General Manager

MEETING: JUNE 24, 2025
ITEM: IV

T. Bouey

SUBJECT: HEALTH PLAN FINANCIAL DASHBOARDS

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

Recommendation

That the Committee receive and file this report.

Executive Summary

On an annual basis, as part of the premium renewal process, LACERS and its Health and Welfare Consultant, Keenan & Associates (Keenan), present the health plan financial dashboards. The dashboard summarizes utilization data to inform LACERS of its previous year's plan experience, as well as health trends that will impact premium renewals.

The financial dashboards for the full completed calendar year 2024 show that the overall health plan loss ratio of the reviewed plans decreased from 100.1% to 97.8%, indicating a positive cost trend from 2023 to 2024.

Discussion

LACERS developed a health plan data initiative to help achieve the strategic plan goal of improving value and minimizing the costs of Members' health and wellness benefits. The purpose of the initiative is to analyze various health plan data reports to better understand utilization trends and their cost impacts, and to identify cost drivers that have the potential to be mitigated. As such cost drivers are identified, LACERS and Keenan develop strategies to minimize the financial impact to LACERS and our Members in an effort to reduce health plan premium increases. The results of these efforts are monitored and reported back to the Board annually through the health plan financial dashboards.

Financial Dashboards

Keenan developed financial dashboards to track plan utilization and cost trends associated with LACERS health plans in relation to diagnostic categories, inpatient and outpatient claims, prescription drug claims, high-cost claims, and therapies.

The health plan financial dashboards are useful in providing insight and monitoring the performance of each plan, explaining changes in premiums, and making informed health plan decisions. These may serve as negotiation points during premium renewals.

Additionally, such dashboards help guide communication and wellness efforts to encourage our health enrollees to utilize plan services offered to improve their health in a cost-effective manner.

Prepared By: Tenah Johnson-Taylor, Senior Benefits Analyst I, Health, Wellness and Buyback Division

TB/DWN/KF/JK/MLD:tjt

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



BAC Meeting: 06/24/25
Item IV
Attachment 1

Los Angeles City Employees' Retirement System Financial Dashboard for Medical, Dental, and Vision Plans Anthem Blue Cross, Kaiser, Delta Dental, and Anthem Blue View Vision

June 10, 2025

Respectfully Submitted by:

Bordan Darm, Lead Consultant | Erin Robinson, Service Consultant

Contents

• Background	Page 3
• Executive Summary	Page 4
• Carrier Detail	Page 8
• Anthem Blue Cross	Page 9
• Anthem Blue Cross PPO	Page 10
• Anthem Blue Cross HMO	Page 19
• Kaiser	Page 30
• Delta Dental	Page 39
• Anthem Blue View Vision	Page 41
• Next Steps	Page 43
• Appendix	Page 46

Background

- The LACERS financial dashboard was developed by Keenan & Associates to assist LACERS in identifying trends and the renewal/Request for Proposal negotiation processes with LACERS' carriers.
- The 2024 financial dashboard includes the experience available from January 1, 2019, to December 31, 2024, for the Under-65 Medical plans (Anthem and Kaiser plans), Dental, and Vision plans. For 2024, LACERS added back into the benefit offering the Anthem Blue Cross Medicare Supplement coverage. Its plan experience is included with the Anthem PPO plan.
- This report is based on information provided by the carriers where plan experience is available.
 - This report excludes Medicare coverage for the following carriers:
 - Anthem Blue Cross Passive PPO Medicare Advantage coverage (which replaced the Anthem Blue Cross Medicare Supplement coverage effective January 1, 2022)
 - Kaiser Medicare coverage
 - UHC Medicare coverage
 - SCAN Medicare coverage
- Both *Anthem HMO and Anthem PPO* refer to coverage for Under-65 retirees/survivors and retirees/survivors with Medicare Part B coverage.
- Plan experience for the *Anthem Passive PPO Medicare Advantage plan Retiree* with Medicare Parts A and B is not available.
- Kaiser refers to coverage for Under-65 retirees/survivors.
- This report is highlighted by red and green thumbs down/up. **Red thumbs down** refers to an unfavorable trend and **green thumbs up** refers to a favorable trend.

Executive Summary

Executive Summary

- LACERS 2024 overall plan experience loss ratio of 97.8% is favorable compared to 100.1% in 2023.



- Kaiser's 2024 Loss Ratio over 2023 is favorable by (-8.6%).



- Anthem's 2024 HMO Loss Ratio over 2023 is unfavorable by 9.9%.



- Anthem's 2024 PPO Loss Ratio over 2023 is slightly favorable by (-0.9%).



- Delta Dental's 2024 Loss Ratio over 2023 is unfavorable by 1.5%.



- Anthem's 2024 Vision Loss Ratio over 2023 is favorable by (-1.9%).

Premium	2019	2020	2021	2022	2023	2024
Kaiser ^{1,5}	\$38,093,074	\$38,136,800	\$45,924,911	\$47,576,637	\$46,078,046	\$48,468,134
Anthem - HMO ^{2,6}	\$12,114,384	\$13,823,064	\$16,500,249	\$16,354,049	\$17,057,697	\$17,979,051
Anthem - PPO ^{3,4,6}	\$26,504,659	\$27,995,073	\$31,685,480	\$20,745,944	\$21,941,583	\$23,727,765
Dental ⁷	\$10,185,820	\$10,586,448	\$11,538,515	\$11,892,388	\$12,024,808	\$12,143,166
Vision ⁷	\$725,266	\$794,534	\$854,178	\$876,222	\$654,392	\$690,374
Total	\$87,623,203	\$91,335,919	\$106,503,333	\$97,445,240	\$97,756,526	\$103,008,490
Claims	2019	2020	2021	2022	2023	2024
Kaiser ^{1,5}	\$34,746,395	\$36,379,932	\$46,920,494	\$48,885,266	\$49,096,349	\$47,489,385
Anthem - HMO ^{2,6}	\$11,297,796	\$11,989,194	\$14,326,329	\$15,314,447	\$15,627,870	\$18,255,163
Anthem - PPO ^{3,4,6}	\$22,481,068	\$23,213,273	\$26,890,328	\$23,355,556	\$21,835,951	\$23,401,447
Dental ⁷	\$7,763,760	\$7,050,619	\$8,904,930	\$10,176,822	\$10,642,358	\$10,933,423
Vision ⁷	\$681,374	\$467,912	\$644,783	\$596,944	\$613,170	\$633,564
Total	\$76,970,393	\$79,100,930	\$97,686,864	\$98,329,035	\$97,815,698	\$100,712,982
Loss Ratio	2019	2020	2021	2022	2023	2024
Kaiser ^{1,5}	91.2%	95.4%	102.2%	102.8%	106.6%	98.0%
Anthem - HMO ^{2,6}	93.3%	86.7%	86.8%	93.6%	91.6%	101.5%
Anthem - PPO ^{3,4,6}	84.8%	82.9%	84.9%	112.6%	99.5%	98.6%
Dental ⁷	76.2%	66.6%	77.2%	85.6%	88.5%	90.0%
Vision ⁷	93.9%	58.9%	75.5%	68.1%	93.7%	91.8%
Total	87.8%	86.6%	91.7%	100.9%	100.1%	97.8%

Notes:

1. Kaiser is for U65 retiree plans only
2. Anthem Blue Cross HMO is for the U65 retiree plans and retirees with Part B. (includes Capitation Fees)
3. Anthem Blue Cross PPO includes the Blue Card plan for U65 retirees and retirees with Part B, and retirees with Parts A and B in Medicare Supplement
4. Anthem Blue Cross 2018-2021 include Medicare Supplement plans for 2024
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
7. In 2015 the Delta Dental and Anthem Blue Vision plans were added; Dental became self-funded in 2019; Vision became self-funded in 2022

Executive Summary (Cont.)

Anthem Blue Cross PPO

- Medical enrollment decreased to 1,119 (-0.4%) and covered lives increased to 1,594 (+12.3%).
- 2024 premiums increased to \$23,727,765 (8.1%).
- 2024 medical claims increased to \$23,401,447 (7.2%).
- 2024 medical loss ratio slightly decreased to 98.6% (-0.9%).
- In-network utilization remains the same for 2023 & 2024 at 85.6%.

Anthem Blue Cross HMO

- Medical enrollment decreased to 878 (-3.2%) subscribers and 1,309 (-3.6%) covered lives.
- The Claim Cost loss ratio including capitation increased to 100.5% (9.7%).
- Premium pmpm increased to \$1,144.58 (9.4%).

Kaiser

- Medical membership decreased by 382 covered lives to 4,009 (-8.7%).
- The Claim Cost loss ratio decreased from 106.6% to 98.0% (-8.6%).
- The average age slightly increased from 54.4 to 54.6.

Executive Summary (Cont.)

Delta Dental

- 2024 was the sixth year LACERS self-funded the dental plan.
- Premium equivalent exceeded claim cost for a 90.0% loss ratio.
- Given Delta Dental's administration cost of \$5.10 prpm (per retiree per month), LACERS accumulated a cash position of \$331,033 in 2024, and an overall self-funded cash position of \$6,285,218 over the six-year period.
- Keenan recommends LACERS maintain an IBNR (Incurred But Not Reported) reserve of \$768,660.
- This leaves an accumulation of margin of \$5,516,558.

Anthem Blue View Vision

- 2024 was the third year LACERS self-funded the vision plan.
- Membership grew 2.2% to 7,260.
- The loss ratio decreased from 93.7% to 91.8%.
- Claim cost prpm increased 1.1% to \$7.27 prpm (from \$7.19 prpm in 2023).
- Given Anthem Blue View's administration cost of \$0.67 prpm, LACERS accumulated a cash position of -\$1,560 in 2024, and an overall self-funded cash position of \$205,769 over the three-year period.
- Keenan recommends LACERS maintain an IBNR reserve of \$44,440.
- This leaves an accumulation of margin of \$163,329.

Carrier Detail

Anthem Blue Cross PPO

Anthem Blue Cross PPO – Medical Summary

Medical	2019	2020	2021	2022	2023	2024
Medical Eligible Subscribers	4,185	4,335	4,597	1,145	1,123	1,119
Medical Eligible Members	5,114	5,322	5,666	1,438	1,419	1,594
Premium	\$26,504,659	\$27,995,073	\$31,685,480	\$20,745,944	\$21,941,583	\$23,727,765
Medical Claims	\$22,481,068	\$23,213,273	\$26,890,328	\$23,355,556	\$21,835,951	\$23,401,447
Loss Ratio	84.8%	82.9%	84.9%	112.6%	99.5%	98.6%
Premium PMPM	\$431.90	\$438.35	\$466.02	\$1,202.25	\$1,288.56	\$1,240.47
Medical Claim Cost PMPM	\$366.33	\$363.48	\$395.49	\$1,353.47	\$1,282.36	\$1,223.41
Percent Paid in network	80.9%	85.1%	83.8%	89.5%	85.6%	85.6%

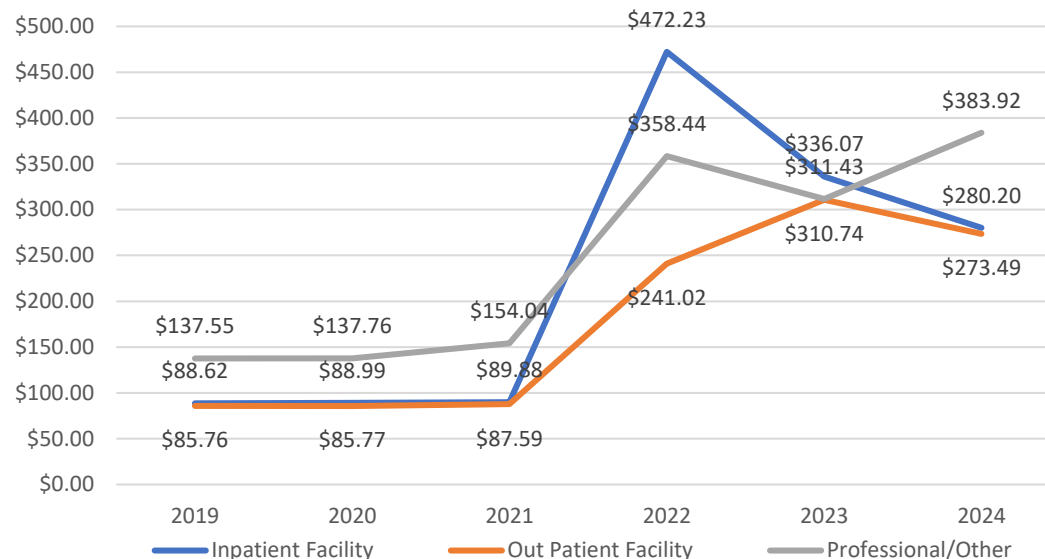
- 2022 sets a new benchmark for the PPO plan since it excluded the Medicare Supplement Plan which was replaced by the Passive PPO Medicare Advantage Plan and requires that the PPO plan data markers be recalibrated.
- Membership in the Anthem PPO plan is 1,119 subscribers and 1,594 covered lives.
- The 2024 Claim Cost loss ratio was 98.6%.
- In-network utilization was 85.6%.

Note: Subscribers include retirees and survivors

Anthem Blue Cross PPO – Medical Summary

Medicare now pays Anthem directly on the Passive PPO Medicare Advantage plan.

- Inpatient Facility cost was \$280.20.
- Outpatient Facility cost was \$273.49.
- Professional/Other cost was \$383.92.



Medical	2019	2020	2021	2022	2023	2024
Inpatient Facility	\$88.62	\$88.99	\$89.88	\$472.23	\$336.07	\$280.20
Out-Patient Facility	\$85.76	\$85.77	\$87.59	\$241.02	\$310.74	\$273.49
Professional/Other	\$137.55	\$137.76	\$154.04	\$358.44	\$311.43	\$383.92
Total Paid PMPM	\$311.93	\$312.52	\$331.51	\$1,071.69	\$958.24	\$937.61

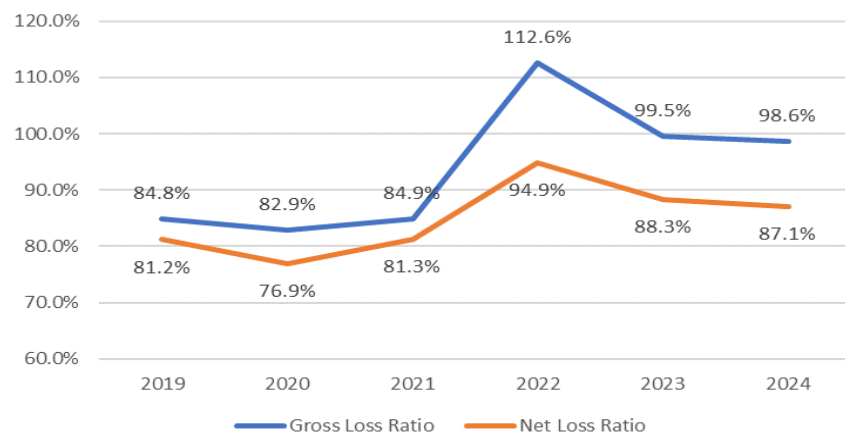
Please note the sharp increase in 2022 cost is due to the removal of covered lives previously enrolled in the PPO Medicare Supplement plan and the benefit of Medicare-subsidized cost. For 2024, LACERS added back into the benefit offering the Anthem Blue Cross Medicare Supplement coverage. Its plan experience is included with the Anthem PPO plan.

Anthem Blue Cross PPO – Large Claim Cost Summary

- For 2024, the pooling level for individual large claimants increased to \$350,000 (from \$300,000).
- There were eight large claimants which reduced the Claim Cost loss ratio by 11.5%.
- The large claimant amount total was \$5,538,779, resulting in a \$2,738,779 pooling credit.

High Cost Claimants	2019	2020	2021	2022	2023	2024
Premium	\$26,504,659	\$27,995,073	\$31,685,480	\$20,745,944	\$21,941,583	\$23,727,765
Gross Paid Claims	\$22,481,068	\$23,213,273	\$26,890,328	\$23,355,556	\$21,835,951	\$23,401,447
Gross Loss Ratio	84.8%	82.9%	84.9%	112.6%	99.5%	98.6%
Pooling Point	\$300,000	\$300,000	\$300,000	\$300,000	\$300,000	\$350,000
Number of Pooled Claimants	4	8	3	7	12	8
Total Large Claims	\$2,165,195	\$4,078,462	\$2,031,055	\$5,768,720	\$6,071,612	\$5,538,779
Pooled Amount	\$965,195	\$1,678,462	\$1,131,055	\$3,668,720	\$2,471,612	\$2,738,779
Net Paid Claims	\$21,515,873	\$21,534,811	\$25,759,272	\$19,686,837	\$19,364,339	\$20,662,668
Net Loss Ratio	81.2%	76.9%	81.3%	94.9%	88.3%	87.1%

2024	
Description	Total Paid
HEREDITARY FACTOR VIII DEFICIENCY	\$2,170,405
MALIGNANT NEOPLASM OF BREAST	\$607,817
ALCOHOL RELATED DISORDERS	\$584,278
MALIGNANT NEOPLASM OF STOMACH	\$557,045
ENCOUNTER FOR OTHER AFTERCARE	\$549,251
MALIG NEO KIDNEY NO RENAL PELVIS	\$361,432
OTHER SEPSIS	\$355,640
PARALYT ILEUS INTEST OBST W/O HERN	\$352,911
Total	\$5,538,779



Anthem Blue Cross PPO – Inpatient Claim Summary by Classification

Inpatient Facility	2019	2020	2021	2022	2023	2024
Medical	\$2,386,304	\$2,837,217	\$2,854,993	\$3,570,435	\$2,800,843	\$2,395,901
Surgical	\$2,286,047	\$2,315,920	\$2,362,903	\$4,127,090	\$2,376,973	\$2,697,143
Behavioral Health	\$145,807	\$46,824	\$130,998	\$188,781	\$303,677	\$151,275
All Other Admissions	\$620,400	\$483,174	\$762,536	\$262,557	\$241,081	\$115,279
Subtotal Inpatient Facility	\$5,438,558	\$5,683,135	\$6,111,430	\$8,148,863	\$5,722,574	\$5,359,598
PMPM	2019	2020	2021	2022	2023	2024
Medical	\$38.89	\$44.43	\$41.99	\$206.91	\$164.48	\$125.26
Surgical	\$37.25	\$36.26	\$34.75	\$239.17	\$139.59	\$141.00
Behavioral Health	\$2.38	\$0.73	\$1.93	\$10.94	\$17.83	\$7.91
All Other Admissions	\$10.11	\$7.57	\$11.22	\$15.22	\$14.16	\$6.03
Subtotal Inpatient Facility	\$88.62	\$88.99	\$89.88	\$472.23	\$336.07	\$280.20

- 2024 medical costs of \$125.26 pmpm is -23.9% favorable to 2023 cost of \$164.48.
- 2024 surgical costs of \$141.00 pmpm is 1.0% unfavorable to 2023 cost of \$139.59.
- 2024 behavioral health costs of \$7.91 pmpm is lower by -55.7% over 2023 cost of \$17.83.
- 2024 All other inpatient charges of \$6.03 pmpm is lower by -57.4% over 2023 cost of \$14.16.

Medicare pays Anthem directly on the Passive PPO Medicare Advantage plan.

Please note the sharp increase in 2022 cost is due to the removal of covered lives previously enrolled in the PPO Medicare Supplement plan and the benefit of Medicare-subsidized cost. For 2024, LACERS added back into the benefit offering the Anthem Blue Cross Medicare Supplement coverage. Its plan experience is included with the Anthem PPO plan.

Anthem Blue Cross PPO – Inpatient Utilization Summary

2024 Inpatient Utilization:

- The total number of admissions was 175 (+8.7%).
- The number of days in hospital was 1,483 (+15.9%).
- The length of stays per admission was 8.5 days (+6.6%).
- The covered charge per admission was \$30,286 (-13.1%).
- The covered charge per day was \$3,574 (-18.5%).

Inpatient Admissions	2019	2020	2021	2022	2023	2024
# of Admits	871	681	796	280	161	175
# of Days	4,559	3,731	4,672	2,478	1,280	1,483
Avg Length of Stay (LOS)	5.2	5.5	5.9	8.9	8.0	8.5
Admits Per 1,000	170	128	140	195	113	110
DOC Per 1,000	891	701	825	1,723	902	930
Covered Charge per Admit	\$5,536	\$7,515	\$6,787	\$28,366	\$34,859	\$30,286
Covered Charge per Day	\$1,058	\$1,372	\$1,156	\$3,205	\$4,385	\$3,574

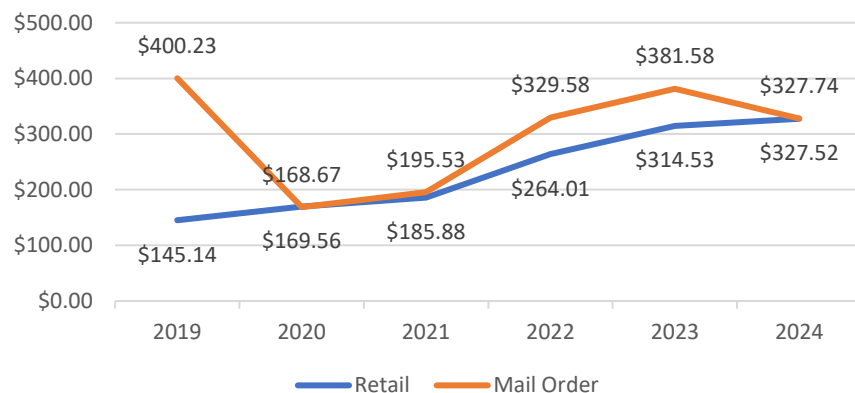
Anthem Blue Cross PPO – Major Diagnostic Category Summary

	2024 Health Conditions Category	Paid Amount by Setting					% of Total
		Unique Claimants	Inpatient	Outpatient	Professional	Total	
1	Neoplasms - Malignant	212	\$786,096	\$1,408,248	\$800,703	\$2,995,047	16.7%
2	Diseases of the Blood	119	\$39,164	\$127,096	\$2,086,593	\$2,252,853	12.6%
3	Circulatory System	706	\$859,943	\$445,255	\$421,208	\$1,726,406	9.6%
4	Musculoskeletal System	766	\$238,172	\$573,528	\$719,114	\$1,530,815	8.5%
5	Infectious/Parasitic	177	\$1,114,744	\$14,612	\$43,547	\$1,172,903	6.5%
6	Digestive System	381	\$615,375	\$260,975	\$284,892	\$1,161,243	6.5%
7	Behavioral Health	260	\$151,275	\$556,950	\$369,825	\$1,078,049	6.0%
8	Ill-Defined Conditions	942	\$148,807	\$291,768	\$527,403	\$967,978	5.4%
9	Genitourinary System	435	\$348,814	\$332,940	\$216,190	\$897,943	5.0%
10	Health Status	995	\$2,037	\$417,469	\$429,302	\$848,809	4.7%
11	Respiratory System	363	\$403,910	\$99,438	\$119,547	\$622,895	3.5%
12	Injury & Poisoning	298	\$290,573	\$150,604	\$131,515	\$572,691	3.2%
13	Endocrine/Metabolic	762	\$147,366	\$120,292	\$261,617	\$529,275	3.0%
14	Nervous System	336	\$101,724	\$183,091	\$237,401	\$522,216	2.9%
15	Diseases of the Eye	530	\$0	\$79,503	\$225,947	\$305,450	1.7%
16	All Other	1,195	\$111,598	\$169,553	\$468,905	\$750,057	4.2%
	Total	8,477	\$5,359,597	\$5,231,322	\$7,343,711	\$17,934,630	100.0%

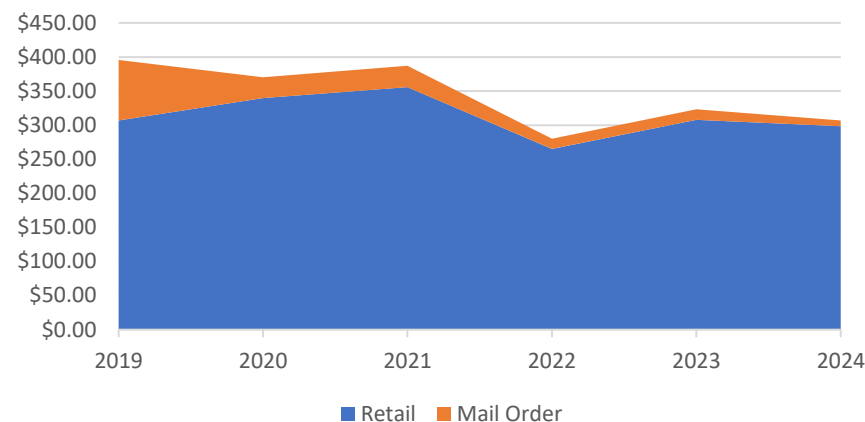
The top 5 diagnostic categories are: 1) Neoplasms – Malignant, 2) Diseases of the Blood, 3) Circulatory System, 4) Musculoskeletal System, and 5) Infectious / Parasitic. This makes up 54.0% of the total health conditions.

Anthem Blue Cross PPO – Pharmacy Summary: Retail vs. Mail Order

Retail vs. Mail Order / Script



Retail vs. Mail Order / PMPM



Pharmacy/Script	2019	2020	2021	2022	2023	2024
Retail	\$145.14	\$169.56	\$185.88	\$264.01	\$314.53	\$327.52
Mail Order	\$400.23	\$168.67	\$195.53	\$329.58	\$381.58	\$327.74
Total	\$169.37	\$169.49	\$186.62	\$266.86	\$317.24	\$327.53
Pharmacy/PMPM	2019	2020	2021	2022	2023	2024
Retail	\$306.81	\$339.79	\$355.81	\$265.19	\$307.73	\$298.40
Mail Order	\$88.81	\$30.31	\$31.11	\$15.05	\$15.73	\$8.52
Total	\$395.62	\$370.11	\$386.92	\$280.24	\$323.46	\$306.91

For 2024:

- Retail drug cost was \$327.52/script, \$298.40 pmpm.
- Mail order drug cost was \$327.74/script, \$8.52 pmpm.
- Overall drug cost was \$327.53/script, \$306.91 pmpm.
- Retail claim cost represented 97.2% of cost.

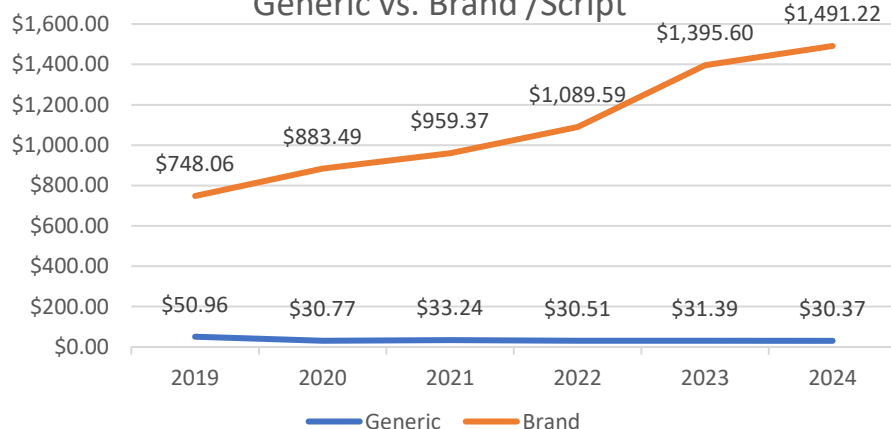
Anthem Blue Cross PPO – Pharmacy Summary: Generic vs. Brand

Pharmacy/Script	2019	2020	2021	2022	2023	2024
Generic	\$50.96	\$30.77	\$33.24	\$30.51	\$31.39	\$30.37
Brand	\$748.06	\$883.49	\$959.37	\$1,089.59	\$1,395.60	\$1,491.22
Total	\$169.37	\$169.49	\$186.62	\$266.86	\$317.24	\$327.53
Pharmacy/PMPM	2019	2020	2021	2022	2023	2024
Generic	\$98.81	\$56.26	\$57.49	\$24.89	\$25.30	\$22.67
Brand	\$296.81	\$313.85	\$329.43	\$255.35	\$298.17	\$284.24
Total	\$395.62	\$370.11	\$386.92	\$280.24	\$323.46	\$306.91

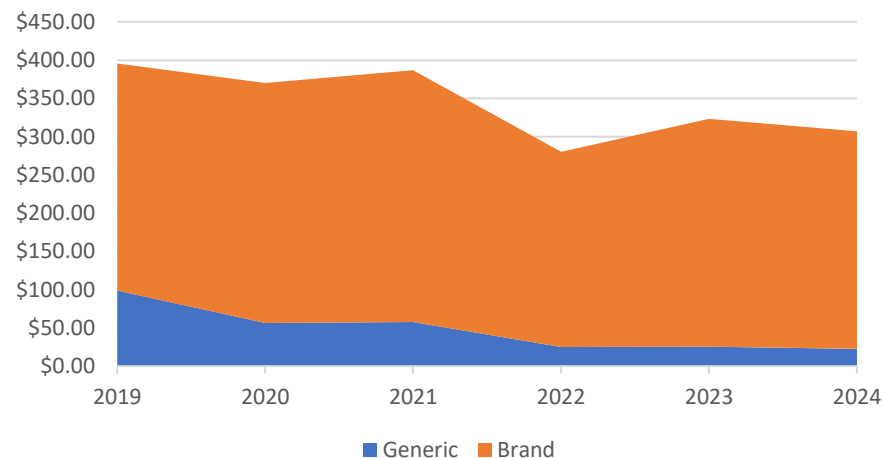
For 2024:

- Generic drug cost was \$30.37/script, \$22.67 pmpm.
- Brand drug cost was \$1,491.22/script, \$284.24 pmpm.
- Overall Drug cost was \$327.53/script, \$306.91 pmpm.

Generic vs. Brand /Script



Generic vs. Brand PMPM



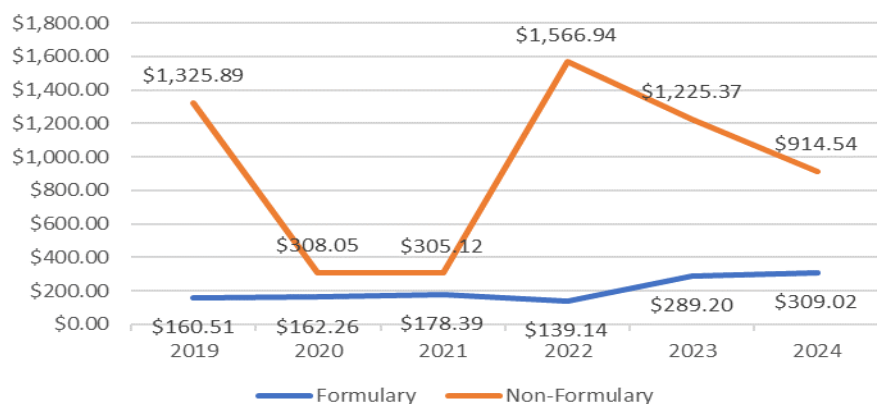
Anthem Blue Cross PPO – Pharmacy Summary: Formulary vs. Non-Formulary

For 2024:

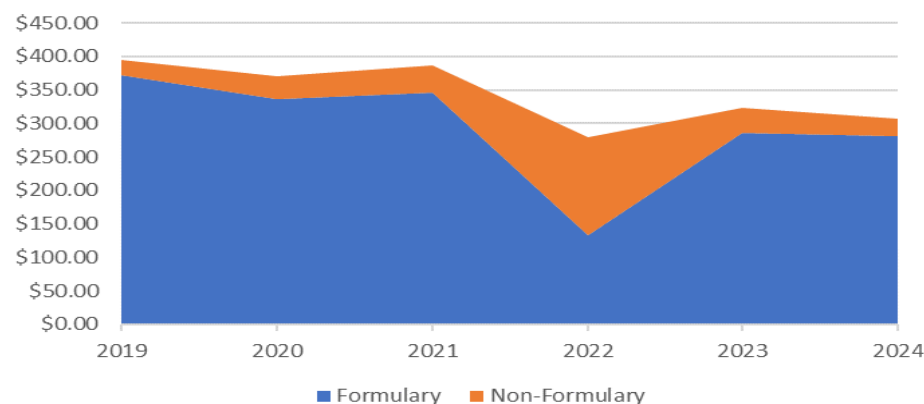
- Formulary drug cost was \$309.02/script, \$280.71 pmpm.
- Non-formulary drug cost was \$914.54/script, \$26.20 pmpm.
- Overall drug cost was \$327.53/script, \$306.91 pmpm.
- The Formulary fill rate represents 91.5% of claim cost and 96.9% of scripts.

Pharmacy/Script	2019	2020	2021	2022	2023	2024
Formulary	\$160.51	\$162.26	\$178.39	\$139.14	\$289.20	\$309.02
Non-Formulary	\$1,325.89	\$308.05	\$305.12	\$1,566.94	\$1,225.37	\$914.54
Total	\$169.37	\$169.49	\$186.62	\$266.86	\$317.24	\$327.53
Pharmacy/PMPM	2019	2020	2021	2022	2023	2024
Formulary	\$372.07	\$336.74	\$345.84	\$133.04	\$286.04	\$280.71
Non-Formulary	\$23.55	\$33.36	\$41.08	\$147.20	\$37.42	\$26.20
Total	\$395.62	\$370.11	\$386.92	\$280.24	\$323.46	\$306.91

Formulary vs. Non-Formulary /Script



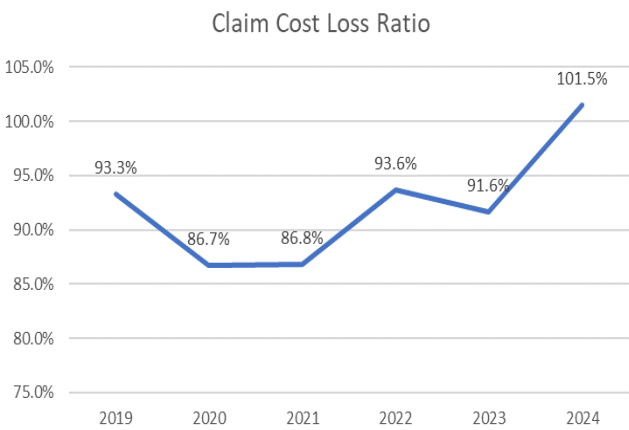
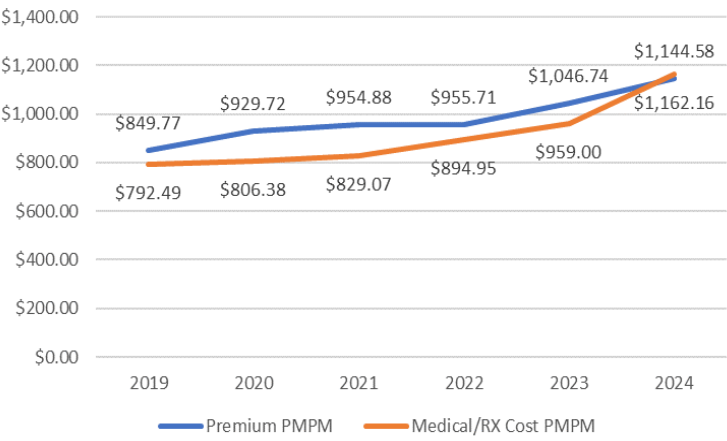
Formulary vs. Non-Formulary PMPM



Anthem Blue Cross HMO

Medical	2019	2020	2021	2022	2023	2024
Eligible Subscribers	804	824	945	942	907	878
Eligible Members	1,188	1,239	1,440	1,426	1,358	1,309
Premium	\$12,114,384	\$13,823,064	\$16,500,249	\$16,354,049	\$17,057,697	\$17,979,051
Medical/RX Cost	\$11,297,796	\$11,989,194	\$14,326,329	\$15,314,447	\$15,627,871	\$18,255,163
Claim Cost Loss Ratio	93.3%	86.7%	86.8%	93.6%	91.6%	101.5%
Premium PMPM	\$849.77	\$929.72	\$954.88	\$955.71	\$1,046.74	\$1,144.58
Medical/RX Cost PMPM	\$792.49	\$806.38	\$829.07	\$894.95	\$959.00	\$1,162.16
Percent Paid in network	95.7%	96.0%	96.2%	96.2%	94.9%	96.2%
Change from Previous Year						
Eligible Subscribers	-9.5%	2.5%	14.7%	-0.3%	-3.7%	-3.2%
Eligible Members	-10.3%	4.3%	16.2%	-1.0%	-4.8%	-3.6%
Premium PMPM	-11.4%	9.4%	2.7%	0.1%	9.5%	9.3%
Medical/RX Cost PMPM	5.0%	1.8%	2.8%	7.9%	7.2%	21.2%


- ❗ Medical Enrollment decreased to 878 subscribers and 1,309 covered lives.
- ❗ The Claim Cost ratio including capitation increased to 101.5%.
- ❗ Premium pmpm increased to \$1,144.58 (+9.4%).
- ❗ Claim Cost including capitation increased to \$1,162.16 (+21.2%).
- ❗ In-network utilization increased to 96.2% (+1.4%).



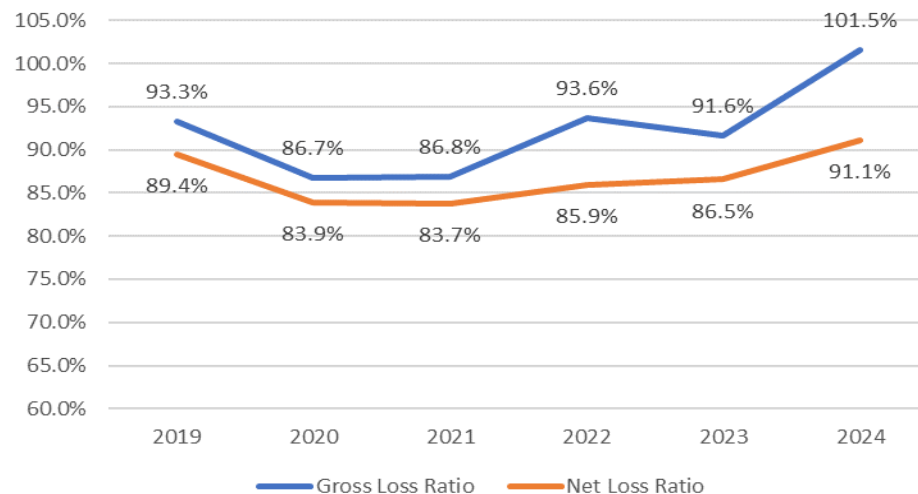
Note: Subscribers include retirees and survivors

Anthem Blue Cross HMO – Large Claim Cost Summary

High Cost Claimants	2019	2020	2021	2022	2023	2024
Premium	\$12,114,384	\$13,823,064	\$16,500,249	\$16,354,049	\$17,057,697	\$17,979,051
Gross Paid Claims	\$11,297,796	\$11,989,194	\$14,326,329	\$15,314,447	\$15,627,871	\$18,255,163
Gross Loss Ratio	93.3%	86.7%	86.8%	93.6%	91.6%	101.5%
Pooling Point	\$175,000	\$175,000	\$175,000	\$175,000	\$175,000	\$300,000
Number of Pooled Claimants	4	4	5	5	9	7
Total Large Claims	\$1,163,641	\$1,093,929	\$1,388,023	\$2,134,126	\$2,439,671	\$3,974,265
Pooled Amount	\$463,641	\$393,929	\$513,023	\$1,259,126	\$864,671	\$1,874,265
Net Paid Claims	\$10,834,155	\$11,595,265	\$13,813,306	\$14,055,321	\$14,763,200	\$16,380,898
Net Loss Ratio	89.4%	83.9%	83.7%	85.9%	86.5%	91.1%

- For 2024, the large claim pooling level increased to \$300,000.
- There were seven large claimants.
-  Pooling claims reduced the loss ratio by 10%.

2024	
Description	Total Paid
Alcoholic Liver Disease	\$755,601
Malignant Neoplasm Bronchus & Lung	\$651,680
Encounter For Other Aftercare	\$592,185
IO Postproc Comp D/O Digstv Sys Nec	\$548,269
Headache	\$523,848
Spinal Musc Atrophy & Related Synd	\$483,279
Other Sepsis	\$419,403
Total	\$3,974,265



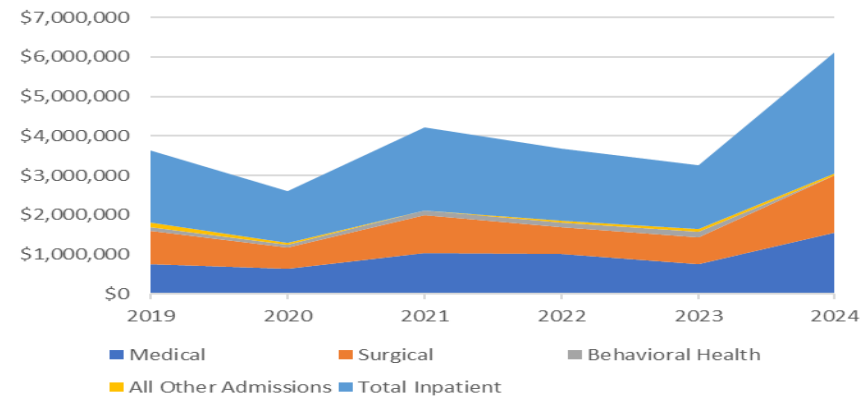
Anthem Blue Cross HMO – Inpatient Claim Summary








Inpatient Summary	2019	2020	2021	2022	2023	2024
Medical	\$750,808	\$637,094	\$1,032,272	\$1,017,889	\$750,602	\$1,537,744
Surgical	\$837,716	\$532,607	\$970,679	\$674,322	\$677,753	\$1,454,980
Behavioral Health	\$99,348	\$64,836	\$116,948	\$119,936	\$149,758	\$2,548
All Other Admissions	\$128,594	\$62,178	-\$10,682	\$31,700	\$53,563	\$56,652
Total Inpatient	\$1,816,466	\$1,296,715	\$2,109,217	\$1,843,847	\$1,631,676	\$3,051,924
PMPM						
Medical	\$52.66	\$42.84	\$59.72	\$59.47	\$46.06	\$97.90
Surgical	\$58.75	\$35.81	\$56.16	\$39.40	\$41.59	\$92.63
Behavioral Health	\$6.97	\$4.36	\$6.77	\$7.01	\$9.19	\$0.16
All Other Admissions	\$9.01	\$4.18	-\$0.62	\$1.85	\$3.29	\$3.61
Total Inpatient	\$127.39	\$87.19	\$122.03	\$107.73	\$100.13	\$194.29
Change from Previous Year PMPM						
Medical	12.0%	-18.6%	39.4%	-0.4%	-22.5%	112.5%
Surgical	-17.2%	-39.0%	56.8%	-29.8%	5.6%	122.7%
Behavioral Health	47.8%	-37.4%	55.3%	3.5%	31.1%	-98.2%
All Other Admissions	-882.1%	-53.6%	-114.8%	-398.7%	77.6%	9.6%
Total Inpatient	4.8%	-31.6%	40.0%	-11.7%	-7.1%	94.0%

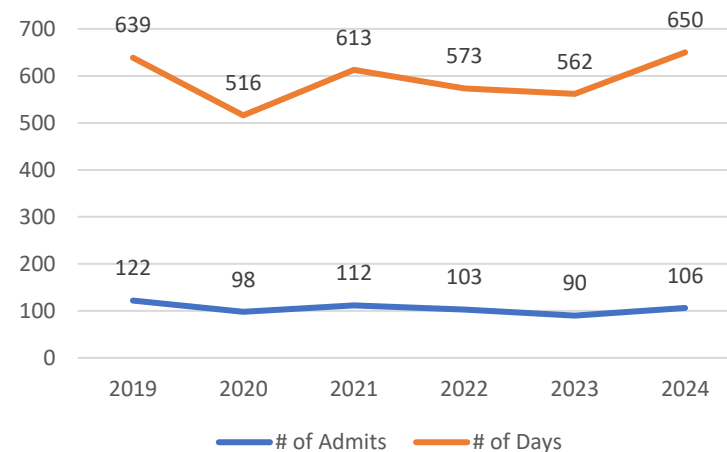
The following year-over-year changes occurred on a pmpm basis:

- Medical Facility claim cost increased 112.5%.
- Surgical claim cost increased 122.7%.
- Behavioral Health claim cost decreased -98.2%.
- Total Inpatient claim cost increased 94.0%.



Anthem Blue Cross HMO – Inpatient Utilization Summary

-  The total number of admissions increased 17.8%.
-  The number of days in hospital increased 15.7%.
-  The length of stays per admission decreased -1.8%.
-  The covered charge per admission increased 68.9%.
-  The covered charge per day increased 66.9%.




Inpatient Utilization Summary	2019	2020	2021	2022	2023	2024
# of Admits	122	98	112	103	90	106
# of Days	639	516	613	573	562	650
Avg Length of Stay (LOS)	5.2	5.3	5.5	5.6	6.2	6.1
Admits Per 1,000	103	79	78	72	66	81
DOC Per 1,000	538	416	426	402	414	497
Covered Charge per Admit	\$25,621	\$32,871	\$30,003	\$30,202	\$30,570	\$51,643
Covered Charge per Day	\$4,729	\$5,605	\$5,692	\$5,525	\$5,246	\$8,758
Change from Previous Year						
# of Admits	22.0%	-19.7%	14.3%	-8.0%	-12.6%	17.8%
# of Days	12.5%	-19.2%	18.8%	-6.5%	-1.9%	15.7%
Avg Length of Stay (LOS)	-7.7%	0.6%	3.8%	1.6%	12.2%	-1.8%
Admits Per 1,000	36.2%	-23.0%	-1.6%	-7.2%	-8.2%	22.2%
DOC Per 1,000	25.5%	-22.6%	2.2%	-5.6%	3.0%	20.1%
Covered Charge per Admit	-17.3%	28.3%	-8.7%	0.7%	1.2%	68.9%
Covered Charge per Day	3.4%	18.5%	1.6%	-2.9%	-5.0%	66.9%


Anthem Blue Cross HMO – Major Diagnostic Category Summary


Health Conditions Category		Unique Claimants	Inpatient	Outpatient	Professional	Total	% of Total
1	Neoplasms - Malignant	113	\$126,650	\$1,156,157	\$210,698	\$1,493,505	21.3%
2	Digestive System	294	\$1,113,226	\$143,783	\$9,097	\$1,266,105	18.0%
3	Nervous System	224	\$165,437	\$54,655	\$524,760	\$744,851	10.6%
4	Circulatory System	435	\$613,221	\$81,141	\$27,754	\$722,117	10.3%
5	Infectious/Parasitic	118	\$693,250	\$275	\$40	\$693,565	9.9%
6	Musculoskeletal System	610	\$86,050	\$278,883	\$20,459	\$385,393	5.5%
7	Health Status	1,089	\$0	\$189,874	\$100,712	\$290,585	4.1%
8	Behavioral Health	170	\$2,548	\$39,474	\$216,731	\$258,753	3.7%
9	Ill-Defined Conditions	722	\$26,376	\$165,990	\$18,716	\$211,081	3.0%
10	Injury & Poisoning	217	\$47,996	\$148,850	\$9,954	\$206,800	2.9%
11	Genitourinary System	334	\$30,123	\$164,940	\$9,031	\$204,095	2.9%
12	Endocrine/Metabolic	606	\$92,453	\$22,635	\$10,129	\$125,217	1.8%
13	Respiratory System	302	\$14,417	\$61,544	\$13,369	\$89,330	1.3%
14	Diseases of the Eye	283	\$0	\$85,722	\$3,153	\$88,876	1.3%
15	Neoplasms - Benign	107	\$12,054	\$58,405	\$0	\$70,459	1.0%
16	All Other	746	\$28,122	\$107,724	\$38,092	\$173,938	2.5%
Total		6,370	\$3,051,924	\$2,760,052	\$1,212,694	\$7,024,670	100.0%

The top 5 diagnostic categories are: 1) Neoplasms – Malignant, 2) Digestive System, 3) Nervous System, 4) Circulatory System, and 5) Infectious / Parasitic. This makes up 70.0% of the total health conditions.

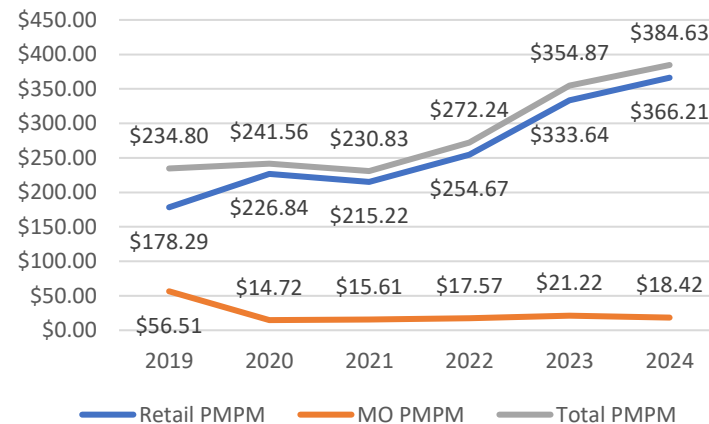
Anthem Blue Cross HMO – Pharmacy Summary: Retail vs. Mail Order

 Drug cost increased 8.4% year-over-year, from \$354.87 to \$384.63 pmpm.

 Retail drug cost increased 9.8% year-over-year, from \$333.64 to \$366.21 pmpm.

 Mail order drug cost decreased -13.2% year-over-year, from \$21.22 to \$18.42 pmpm.




- Retail claim cost represents 95.5% of total scripts and 95.2% of total dollars.

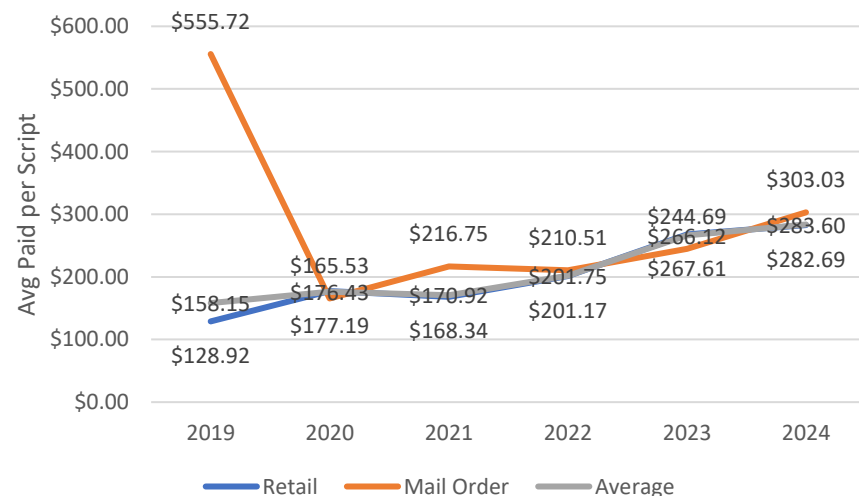
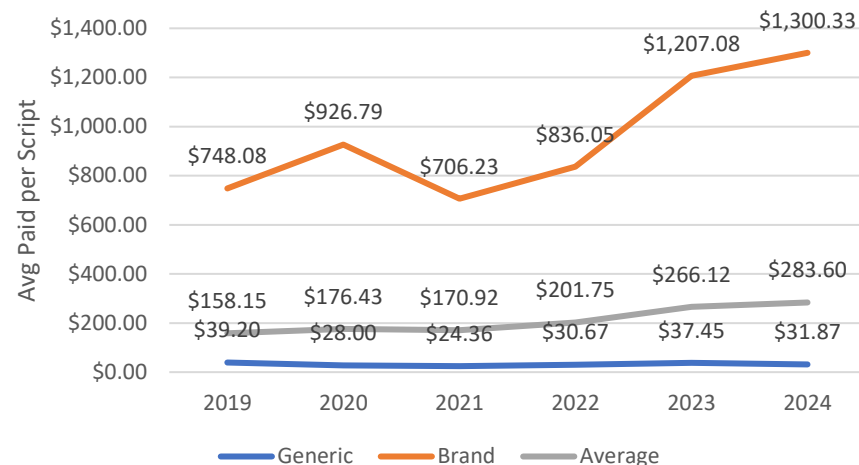


Retail vs Mail Order		2019	2020	2021	2022	2023	2024
Retail	Total Number Of Paid Scripts	16,659	16,182	19,207	18,898	17,579	17,582
	Paid	\$2,147,680	\$2,867,295	\$3,233,288	\$3,801,767	\$4,704,369	\$4,970,257
	PMPM	\$178.29	\$226.84	\$215.22	\$254.67	\$333.64	\$366.21
	Average Payment Per Script	\$128.92	\$177.19	\$168.34	\$201.17	\$267.61	\$282.69
Mail Order	Total Number Of Paid Scripts	1,225	1,124	1,082	1,246	1,223	825
	Paid	\$680,761	\$186,054	\$234,519	\$262,299	\$299,261	\$250,003
	PMPM	\$56.51	\$14.72	\$15.61	\$17.57	\$21.22	\$18.42
	Average Payment Per Script	\$555.72	\$165.53	\$216.75	\$210.51	\$244.69	\$303.03
Total	Total Number Of Paid Scripts	17,884	17,306	20,289	20,144	18,802	18,407
	Paid	\$2,828,441	\$3,053,349	\$3,467,807	\$4,064,066	\$5,003,630	\$5,220,260
	PMPM	\$234.80	\$241.56	\$230.83	\$272.24	\$354.87	\$384.63
	Average Payment Per Script	\$158.15	\$176.43	\$170.92	\$201.75	\$266.12	\$283.60
% of Retail Scripts		93.2%	93.5%	94.7%	93.8%	93.5%	95.5%
% of Retail Dollars		75.9%	93.9%	93.2%	93.5%	94.0%	95.2%

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

2024 realized the following results over 2023:

-  Generic drug cost per script decreased -14.9%, from \$37.45 to \$31.87 per script.
-  Brand drug cost per script increased 7.7%, from \$1,207.08 to \$1,300.33 per script.
-  Total drug cost per script increased 6.6%, from \$266.12 to \$283.60 per script.
- The Generic fill rate represents 9.0% of claim cost and 80.2% of scripts.
- Over the past four years, the Retail (30-day supply) and mail order (90-day supply) cost per script have converged in price.
 - Retail \$282.69 per script
 - Mail Order \$303.03 per script



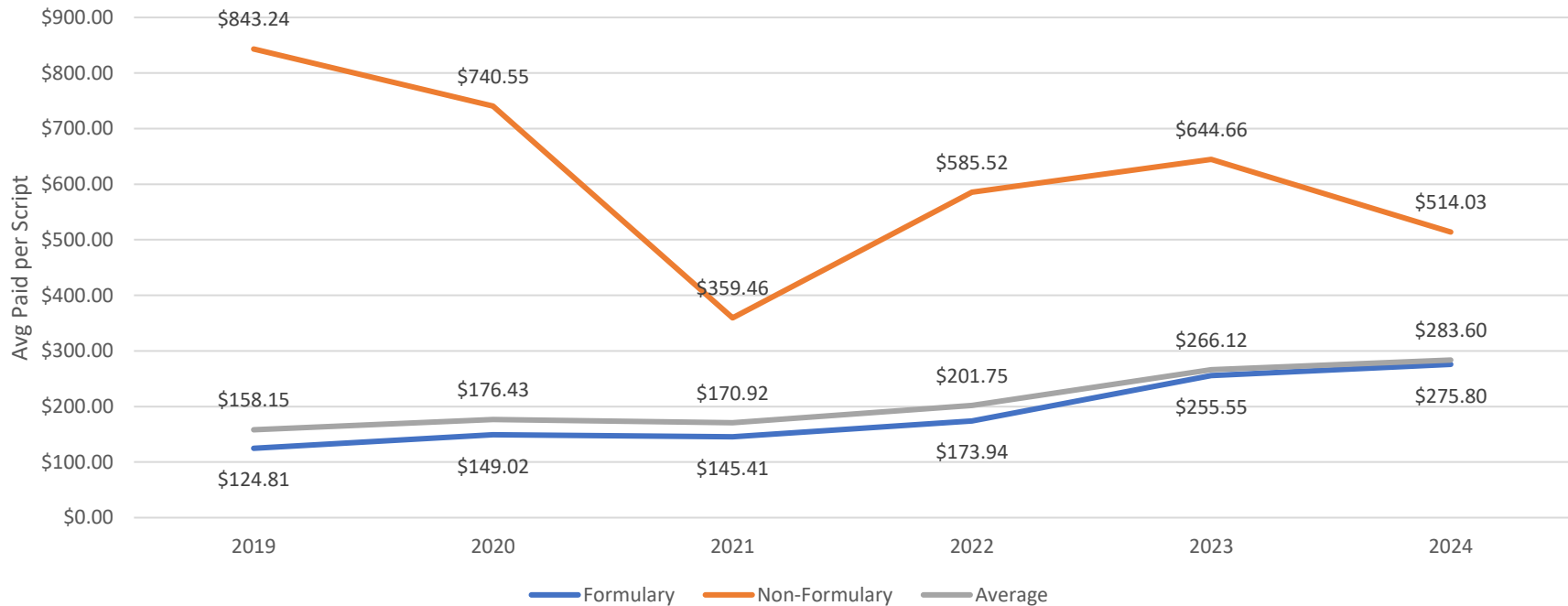
Anthem Blue Cross HMO – Pharmacy Summary: Generic vs. Brand



Generic vs Brand		Data						%					
		2019	2020	2021	2022	2023	2024	2019	2020	2021	2022	2023	2024
Generic													
Retail	Number of Scripts Paid	13,887	13,466	15,033	14,843	14,142	14,117	-12.3%	-3.0%	11.6%	-1.3%	-4.7%	-0.2%
	Paid	\$484,280	\$347,043	\$328,704	\$431,578	\$517,319	\$426,946	-14.7%	-28.3%	-5.3%	31.3%	19.9%	-17.5%
	Average Paid per Script	\$34.87	\$25.77	\$21.87	\$29.08	\$36.58	\$30.24	-2.8%	-26.1%	-15.2%	33.0%	25.8%	-17.3%
Mail Order	Number of Scripts Paid	996	982	895	1,022	984	637	-17.4%	-1.4%	-8.9%	14.2%	-3.7%	-35.3%
	Paid	\$99,166	\$57,546	\$59,225	\$55,023	\$49,080	\$43,222	1.4%	-42.0%	2.9%	-7.1%	-10.8%	-11.9%
	Average Paid per Script	\$99.56	\$58.60	\$66.17	\$53.84	\$49.88	\$67.85	22.8%	-41.1%	12.9%	-18.6%	-7.4%	36.0%
Combined	Number of Scripts Paid	14,883	14,448	15,928	15,865	15,126	14,754	-12.7%	-2.9%	10.2%	-0.4%	-4.7%	-2.5%
	Paid	\$583,446	\$404,589	\$387,929	\$486,601	\$566,399	\$470,168	-12.3%	-30.7%	-4.1%	25.4%	16.4%	-17.0%
	Average Paid per Script	\$39.20	\$28.00	\$24.36	\$30.67	\$37.45	\$31.87	0.4%	-28.6%	-13.0%	25.9%	22.1%	-14.9%
Brand													
Retail	Number of Scripts Paid	2,772	2,716	4,174	4,055	3,437	3,465	-7.8%	-2.0%	53.7%	-2.9%	-15.2%	0.8%
	Paid	\$1,663,400	\$2,520,252	\$2,904,584	\$3,370,189	\$4,187,050	\$4,543,311	32.3%	51.5%	15.2%	16.0%	24.2%	8.5%
	Average Paid per Script	\$600.07	\$927.93	\$695.88	\$831.12	\$1,218.23	\$1,311.20	43.6%	54.6%	-25.0%	19.4%	46.6%	7.6%
Mail Order	Number of Scripts Paid	229	142	187	224	239	188	-32.8%	-38.0%	31.7%	19.8%	6.7%	-21.3%
	Paid	\$581,595	\$128,508	\$175,294	\$207,276	\$250,181	\$206,781	-40.3%	-77.9%	36.4%	18.2%	20.7%	-17.3%
	Average Paid per Script	\$2,539.72	\$904.99	\$937.40	\$925.34	\$1,046.78	\$1,099.90	-11.0%	-64.4%	3.6%	-1.3%	13.1%	5.1%
Combined	Number of Scripts Paid	3,001	2,858	4,361	4,279	3,676	3,653	-10.4%	-4.8%	52.6%	-1.9%	-14.1%	-0.6%
	Paid	\$2,244,995	\$2,648,760	\$3,079,878	\$3,577,465	\$4,437,231	\$4,750,092	0.7%	18.0%	16.3%	16.2%	24.0%	7.1%
	Average Paid per Script	\$748.08	\$926.79	\$706.23	\$836.05	\$1,207.08	\$1,300.33	12.3%	23.9%	-23.8%	18.4%	44.4%	7.7%
Total													
Retail	Number of Scripts Paid	16,659	16,182	19,207	18,898	17,579	17,582	-11.6%	-2.9%	18.7%	-1.6%	-7.0%	0.0%
	Paid	\$2,147,680	\$2,867,295	\$3,233,288	\$3,801,767	\$4,704,369	\$4,970,257	17.7%	33.5%	12.8%	17.6%	23.7%	5.7%
	Average Paid per Script	\$128.92	\$177.19	\$168.34	\$201.17	\$267.61	\$282.69	33.1%	37.4%	-5.0%	19.5%	33.0%	5.6%
Mail Order	Number of Scripts Paid	1,225	1,124	1,082	1,246	1,223	825	-20.8%	-8.2%	-3.7%	15.2%	-1.8%	-32.5%
	Paid	\$680,761	\$186,054	\$234,519	\$262,299	\$299,261	\$250,003	-36.4%	-72.7%	26.0%	11.8%	14.1%	-16.5%
	Average Paid per Script	\$555.72	\$165.53	\$216.75	\$210.51	\$244.69	\$303.03	-19.7%	-70.2%	30.9%	-2.9%	16.2%	23.8%
Combined	Number of Scripts Paid	17,884	17,306	20,289	20,144	18,802	18,407	-12.3%	-3.2%	17.2%	-0.7%	-6.7%	-2.1%
	Paid	\$2,828,441	\$3,053,349	\$3,467,807	\$4,064,066	\$5,003,630	\$5,220,260	-2.3%	8.0%	13.6%	17.2%	23.1%	4.3%
	Average Paid per Script	\$158.15	\$176.43	\$170.92	\$201.75	\$266.12	\$283.60	11.3%	11.6%	-3.1%	18.0%	31.9%	6.6%

Anthem Blue Cross HMO –

Pharmacy Summary: Formulary vs. Non-Formulary



Formulary drug cost increased 7.9% year-over-year, from \$255.55 to \$275.80 per script.

Non-formulary drug cost decreased -20.3% year-over-year, from \$644.66 to \$514.03 per script.

Overall drug cost increased 6.6% year-over-year, from \$266.12 to \$283.60 per script.

- The Formulary fill rate represents 94.1% of claim cost and 96.7% of scripts.

Anthem Blue Cross HMO – Pharmacy Summary: Formulary vs. Non-Formulary



Formulary vs. Non-Formulary		Data						%					
		2019	2020	2021	2022	2023	2024	2019	2020	2021	2022	2023	2024
Formulary													
Retail	Number of Scripts Paid	15,890	15,420	16,884	17,639	17,083	16,985	-12.0%	-3.0%	9.5%	4.5%	-3.2%	-0.6%
	Paid	\$1,727,984	\$2,295,768	\$2,389,356	\$3,028,796	\$4,390,587	\$4,665,676	18.1%	32.9%	4.1%	26.8%	45.0%	6.3%
	Average Paid per Script	\$108.75	\$148.88	\$141.52	\$171.71	\$257.01	\$274.69	34.2%	36.9%	-4.9%	21.3%	49.7%	6.9%
Mail Order	Number of Scripts Paid	1,164	1,084	987	1,144	1,208	819	-19.6%	-6.9%	-8.9%	15.9%	5.6%	-32.2%
	Paid	\$400,565	\$163,658	\$209,268	\$238,374	\$283,621	\$244,625	-34.6%	-59.1%	27.9%	13.9%	19.0%	-13.7%
	Average Paid per Script	\$344.13	\$150.98	\$212.02	\$208.37	\$234.79	\$298.69	-18.7%	-56.1%	40.4%	-1.7%	12.7%	27.2%
Total	Number of Scripts Paid	17,054	16,504	17,871	18,783	18,291	17,804	-12.6%	-3.2%	8.3%	5.1%	-2.6%	-2.7%
	Paid	\$2,128,549	\$2,459,426	\$2,598,624	\$3,267,170	\$4,674,208	\$4,910,301	2.6%	15.5%	5.7%	25.7%	43.1%	5.1%
	Average Paid per Script	\$124.81	\$149.02	\$145.41	\$173.94	\$255.55	\$275.80	17.3%	19.4%	-2.4%	19.6%	46.9%	7.9%
Non-Formulary													
Retail	Number of Scripts Paid	769	762	2,323	1,259	496	597	-1.7%	-0.9%	204.9%	-45.8%	-60.6%	20.4%
	Paid	\$419,697	\$571,527	\$843,932	\$772,970	\$313,782	\$304,581	16.1%	36.2%	47.7%	-8.4%	-59.4%	-2.9%
	Average Paid per Script	\$545.77	\$750.04	\$363.29	\$613.96	\$632.63	\$510.19	18.0%	37.4%	-51.6%	69.0%	3.0%	-19.4%
Mail Order	Number of Scripts Paid	61	40	95	102	15	6	-39.0%	-34.4%	137.5%	7.4%	-85.3%	-60.0%
	Paid	\$280,196	\$22,396	\$25,252	\$23,925	\$15,640	\$5,378	-39.0%	-92.0%	12.8%	-5.3%	-34.6%	-65.6%
	Average Paid per Script	\$4,593.37	\$559.90	\$265.81	\$234.56	\$1,042.67	\$896.33	0.1%	-87.8%	-52.5%	-11.8%	344.5%	-14.0%
Total	Number of Scripts Paid	830	802	2,418	1,361	511	603	-5.9%	-3.4%	201.5%	-43.7%	-62.5%	18.0%
	Paid	\$699,893	\$593,923	\$869,184	\$796,895	\$329,422	\$309,959	-14.7%	-15.1%	46.3%	-8.3%	-58.7%	-5.9%
	Average Paid per Script	\$843.24	\$740.55	\$359.46	\$585.52	\$644.66	\$514.03	-9.4%	-12.2%	-51.5%	62.9%	10.1%	-20.3%
Total													
Retail	Number of Scripts Paid	16,659	16,182	19,207	18,898	17,579	17,582	-11.6%	-2.9%	18.7%	-1.6%	-7.0%	0.0%
	Paid	\$2,147,681	\$2,867,295	\$3,233,288	\$3,801,766	\$4,704,369	\$4,970,257	17.7%	33.5%	12.8%	17.6%	23.7%	5.7%
	Average Paid per Script	\$128.92	\$177.19	\$168.34	\$201.17	\$267.61	\$282.69	33.1%	37.4%	-5.0%	19.5%	33.0%	5.6%
Mail Order	Number of Scripts Paid	1,225	1,124	1,082	1,246	1,223	825	-20.8%	-8.2%	-3.7%	15.2%	-1.8%	-32.5%
	Paid	\$680,761	\$186,054	\$234,520	\$262,299	\$299,261	\$250,003	-36.4%	-72.7%	26.0%	11.8%	14.1%	-16.5%
	Average Paid per Script	\$555.72	\$165.53	\$216.75	\$210.51	\$244.69	\$303.03	-19.7%	-70.2%	30.9%	-2.9%	16.2%	23.8%
Total	Number of Scripts Paid	17,884	17,306	20,289	20,144	18,802	18,407	-12.3%	-3.2%	17.2%	-0.7%	-6.7%	-2.1%
	Paid	\$2,828,442	\$3,053,349	\$3,467,808	\$4,064,065	\$5,003,630	\$5,220,260	-2.3%	8.0%	13.6%	17.2%	23.1%	4.3%
	Average Paid per Script	\$158.15	\$176.43	\$170.92	\$201.75	\$266.12	\$283.60	11.3%	11.6%	-3.1%	18.0%	31.9%	6.6%

Kaiser HMO

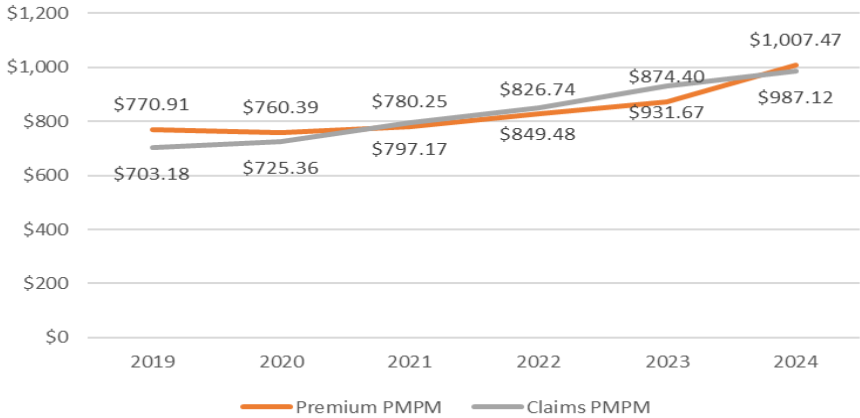
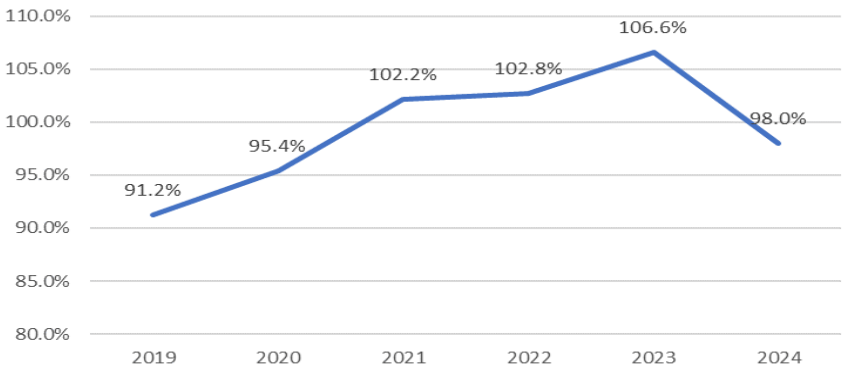
Kaiser HMO – HMO Summary



- 👍 The Claim Cost ratio decreased from 106.6% to 98.0% (-8.6%).
- 👎 Membership decreased by 382 covered lives to 4,009 (-8.7%).
- 👎 The average age slightly increased from 54.4 to 54.6
- 👎 Claim Cost increased 6.0% to \$987.12 pmpm.
- 👎 Premium increased 15.2% to \$1,007.47 pmpm.
- Kaiser values are shown per member per month (PMPM) not per retiree subscriber per month (PRPM)

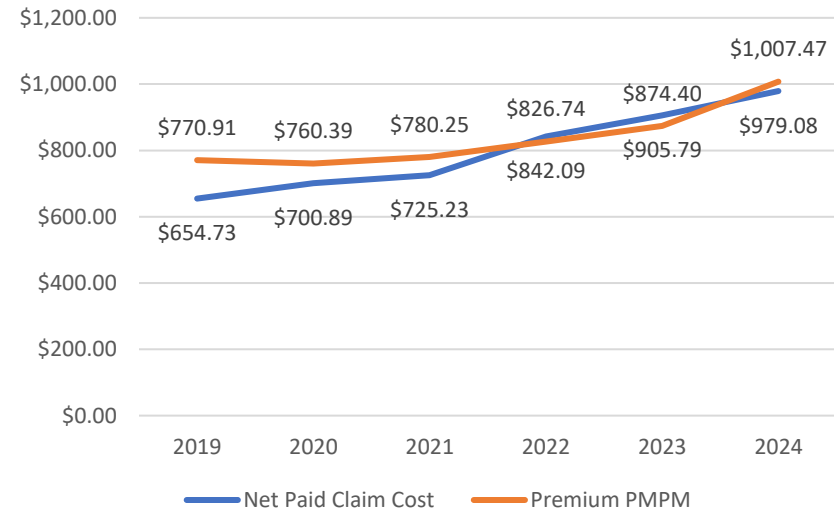
Kaiser	2019	2020	2021	2022	2023	2024
Avg Members	4,118	4,180	4,905	4,796	4,391	4,009
Avg Age	54.1	54.2	53.7	54.0	54.4	54.6
Premium	\$38,093,074	\$38,136,800	\$45,924,911	\$47,576,637	\$46,078,046	\$48,468,134
Claims	\$34,746,395	\$36,379,932	\$46,920,494	\$48,885,266	\$49,096,349	\$47,489,385
Loss Ratio	91.2%	95.4%	102.2%	102.8%	106.6%	98.0%
Per Member Per Month (PMPM)						
Premium PMPM	\$770.91	\$760.39	\$780.25	\$826.74	\$874.40	\$1,007.47
Claims PMPM	\$703.18	\$725.36	\$797.17	\$849.48	\$931.67	\$987.12
Change from Previous Year						
Enrollment	2.6%	1.5%	17.4%	-2.2%	-8.4%	-8.7%
Premium PMPM	-4.0%	-1.4%	2.6%	6.0%	5.8%	15.2%
Claims PMPM	11.4%	3.2%	9.9%	6.6%	9.7%	6.0%
Kaiser	2019	2020	2021	2022	2023	2024
Loss Ratio	91.2%	95.4%	102.2%	102.8%	106.6%	98.0%
Premium PMPM	\$770.91	\$760.39	\$780.25	\$826.74	\$874.40	\$1,007.47
Claims PMPM	\$703.18	\$725.36	\$797.17	\$849.48	\$931.67	\$987.12

Claim Cost Loss Ratio



Kaiser HMO – Large Claim

- The pooling level for large claimants decreased to \$375,000 from \$420,000 in 2023.
- 👍 Pooled claims reduced the claims cost by -0.8% from \$987.12 to \$979.08 pmpm.
- 👍 The net claim cost ratio decreased 6.4%. It went from 103.6% to 97.2%.
- There were eight large claimants above \$375,000 in 2024, compared to eight in 2023 at \$420,000.



Large Claims	2019	2020	2021	2022	2023	2024
Claims	\$34,746,395	\$36,379,932	\$46,920,494	\$48,885,266	\$49,096,349	\$47,489,385
Pooling Level	\$280,000	\$295,000	\$310,000	\$325,000	\$420,000	\$375,000
# of Large Claimants	6	7	12	6	8	8
Total Large Claims	\$4,074,054	\$3,292,702	\$7,954,143	\$2,375,374	\$4,723,886	\$3,386,836
<u>Pooling Level</u>	<u>\$1,680,000</u>	<u>\$2,065,000</u>	<u>\$3,720,000</u>	<u>\$1,950,000</u>	<u>\$3,360,000</u>	<u>\$3,000,000</u>
Pooled Claims	\$2,394,054	\$1,227,702	\$4,234,143	\$425,374	\$1,363,886	\$386,836
Net Claims	\$32,352,341	\$35,152,230	\$42,686,351	\$48,459,892	\$47,732,463	\$47,102,549
	2019	2020	2021	2022	2023	2024
Loss Ratio	84.9%	92.2%	92.9%	101.9%	103.6%	97.2%
Gross Claim Cost	\$703.18	\$725.36	\$797.17	\$849.48	\$931.67	\$987.12
Net Paid Claim Cost	\$654.73	\$700.89	\$725.23	\$842.09	\$905.79	\$979.08
Premium PMPM	\$770.91	\$760.39	\$780.25	\$826.74	\$874.40	\$1,007.47

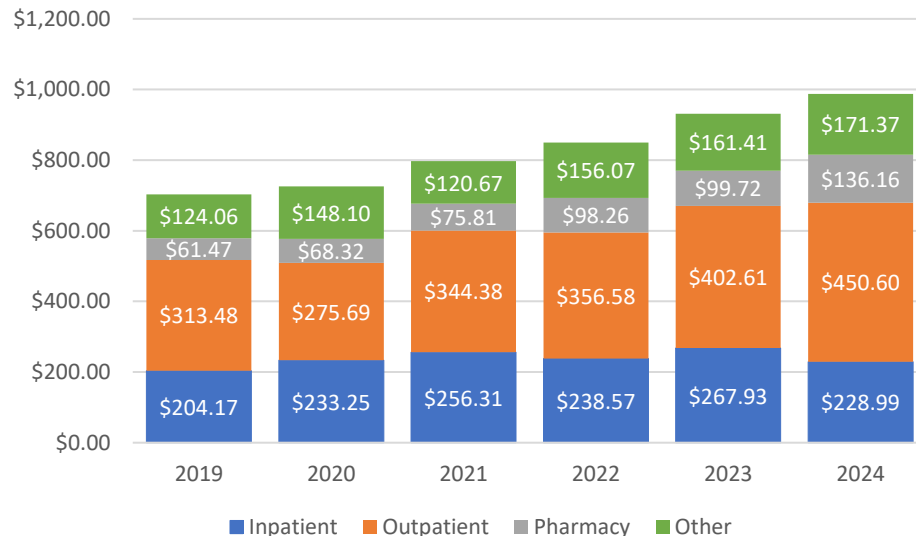
Kaiser HMO – Large Claims

Below are the diagnoses of the eight large claimants in 2024:

	Diagnosis	2024 Claims
1	Hydronephrosis W/ Renal and Ureteral Calculous Obstruction	\$596,080.99
2	Non-St Elevation (NSTEMI) Myocardial Infarction	\$418,225.93
3	Bloodstream Infection Due To Central Venous Catheter; Init	\$417,352.24
4	Central Cord Synd at Unsp Level of Cerv Spinal Cord; Init	\$415,061.22
5	Occlusion and Stenosis of Left Carotid Artery	\$405,460.00
6	Bacteremia	\$381,638.94
7	Sepsis; Unspecified Organism	\$377,301.57
8	Acute Myeloblastic Leukemia; Not Having Achieved Remission	\$375,715.55
	Total	\$3,386,836.44

Kaiser – Claim Summary

- Total Claim cost for 2024, was 6.0% higher than 2023 on a pmpm basis.
- 2024 realized the following results over 2023:
 - 👍 Inpatient costs decreased -14.5%.
 - 👎 Outpatient costs increased 11.9%.
 - 👎 Pharmacy costs increased 36.5%.
 - 👎 The Other category increased by 6.2%.
- More information in each category is detailed on the following pages.



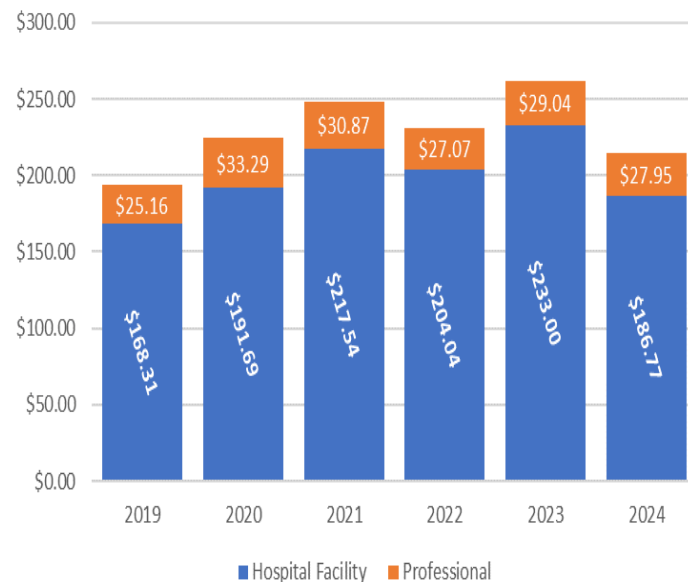
Claims Summary	2019	2020	2021	2022	2023	2024
Inpatient	\$204.17	\$233.25	\$256.31	\$238.57	\$267.93	\$228.99
Outpatient	\$313.48	\$275.69	\$344.38	\$356.58	\$402.61	\$450.60
Pharmacy	\$61.47	\$68.32	\$75.81	\$98.26	\$99.72	\$136.16
Other	\$124.06	\$148.10	\$120.67	\$156.07	\$161.41	\$171.37
Total Claims	\$703.18	\$725.36	\$797.17	\$849.48	\$931.67	\$987.12
Change from Previous Year						
Inpatient	29.4%	14.2%	9.9%	-6.9%	12.3%	-14.5%
Outpatient	8.5%	-12.1%	24.9%	3.5%	12.9%	11.9%
Pharmacy	-14.0%	11.1%	11.0%	29.6%	1.5%	36.5%
Other	9.8%	19.4%	-18.5%	29.3%	3.4%	6.2%
Total Claims	11.4%	3.2%	9.9%	6.6%	9.7%	6.0%

Kaiser – Inpatient (IP) Summary

Inpatient \$ PMPM	2019	2020	2021	2022	2023	2024
Medical - Hospital	\$61.06	\$59.47	\$124.23	\$82.63	\$111.32	\$96.34
Medical - Professional	\$10.12	\$12.95	\$19.99	\$14.46	\$15.67	\$15.54
Medical - Total	\$71.18	\$72.42	\$144.22	\$97.09	\$126.99	\$111.88
Surgical						
Surgical - Hospital	\$106.58	\$131.69	\$91.75	\$120.29	\$121.30	\$89.51
Surgical - Professional	\$14.79	\$20.10	\$10.15	\$12.19	\$13.23	\$12.00
Surgical - Total	\$121.37	\$151.79	\$101.90	\$132.48	\$134.53	\$101.51
Maternity						
Maternity - Hospital	\$0.67	\$0.53	\$1.56	\$1.12	\$0.38	\$0.92
Maternity - Professional	\$0.25	\$0.24	\$0.73	\$0.42	\$0.14	\$0.41
Maternity - Total	\$0.92	\$0.77	\$2.29	\$1.54	\$0.52	\$1.33
Mental Health	\$5.01	\$4.65	\$3.29	\$3.12	\$2.65	\$8.93
Substance Abuse	\$2.76	\$0.73	\$0.76	\$2.18	\$0.34	\$1.62
Skilled Nursing Facility (SNF)	\$2.93	\$2.89	\$3.85	\$2.16	\$2.90	\$3.72
Total Inpatient \$PMPM	\$204.17	\$233.25	\$256.31	\$238.57	\$267.93	\$228.99
Change from Previous Year	2019	2020	2021	2022	2023	2024
Medical - Hospital	7.7%	-2.6%	108.9%	-33.5%	34.7%	-13.5%
Medical - Professional	23.6%	28.0%	54.4%	-27.7%	8.4%	-0.8%
Medical - Total	9.7%	1.7%	99.1%	-32.7%	30.8%	-11.9%
Surgical						
Surgical - Hospital	38.1%	23.6%	-30.3%	31.1%	0.8%	-26.2%
Surgical - Professional	68.5%	35.9%	-49.5%	20.1%	8.5%	-9.3%
Surgical - Total	41.2%	25.1%	-32.9%	30.0%	1.5%	-24.5%
Maternity						
Maternity - Hospital	-53.8%	-20.9%	194.3%	-28.2%	-66.1%	142.1%
Maternity - Professional	-56.9%	-4.0%	204.2%	-42.5%	-66.7%	192.9%
Maternity - Total	-54.7%	-16.3%	197.4%	-32.8%	-66.2%	155.8%
Mental Health	107.1%	-7.2%	-29.2%	-5.2%	-15.1%	237.0%
Substance Abuse	1382.9%	-73.6%	4.1%	186.8%	-84.4%	376.5%
Skilled Nursing Facility (SNF)	28.5%	-1.4%	33.2%	-43.9%	34.3%	28.3%
Total Inpatient \$PMPM	29.4%	14.2%	9.9%	-6.9%	12.3%	-14.5%

2024 realized the following results:

- 👍 IP medical costs decreased - 11.9%.
- 👍 IP surgical costs decreased -24.5%.
- 👍 IP hospital facility charges decreased -13.5%.
- 👍 IP medical professional cost decreased -0.8%.
- 👎 IP Skilled Nursing Facility charges increased 28.3%.

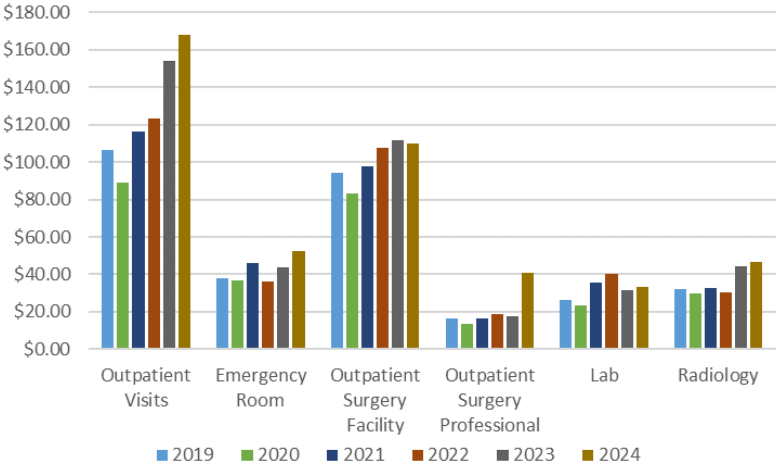


Kaiser – Outpatient (OP) Summary



Outpatient \$ PMPM	2019	2020	2021	2022	2023	2024
Outpatient Visits	\$106.22	\$88.73	\$116.54	\$123.53	\$153.83	\$167.84
Emergency Room	\$37.75	\$36.93	\$46.03	\$36.22	\$43.75	\$52.36
Surgical/Procedures						
Outpatient Surgery Facility	\$94.27	\$83.34	\$97.62	\$107.42	\$111.49	\$109.74
Outpatient Surgery Professional	\$16.60	\$13.31	\$16.26	\$18.82	\$17.56	\$40.78
Lab	\$26.57	\$23.50	\$35.33	\$40.24	\$31.82	\$33.51
Radiology	\$32.07	\$29.88	\$32.60	\$30.35	\$44.16	\$46.37
Total Outpatient \$PMPM	\$313.48	\$275.69	\$344.38	\$356.58	\$402.61	\$450.60
Change from Previous Year	2019	2020	2021	2022	2023	2024
Outpatient Visits	-6.3%	-16.5%	31.3%	6.0%	24.5%	9.1%
Emergency Room	-7.9%	-2.2%	24.6%	-21.3%	20.8%	19.7%
Surgical/Procedures						
Outpatient Surgery Facility	30.4%	-11.6%	17.1%	10.0%	3.8%	-1.6%
Outpatient Surgery Professional	19.2%	-19.8%	22.2%	15.7%	-6.7%	132.2%
Lab	19.1%	-11.6%	50.3%	13.9%	-20.9%	5.3%
Radiology	23.8%	-6.8%	9.1%	-6.9%	45.5%	5.0%
Total Outpatient \$PMPM	8.5%	-12.1%	24.9%	3.5%	12.9%	11.9%

- 🔴 Total Outpatient cost increased 11.9% from \$402.61 to \$450.60 pmpm.
- 🔴 Outpatient visit cost increased 9.1%.
- 🔴 Emergency room cost increased 19.7%.
- 🟢 OP Surgery Facility cost decreased -1.6%.
- 🔴 Laboratory services increased 5.3%.
- 🔴 Radiology increased 5.0%.



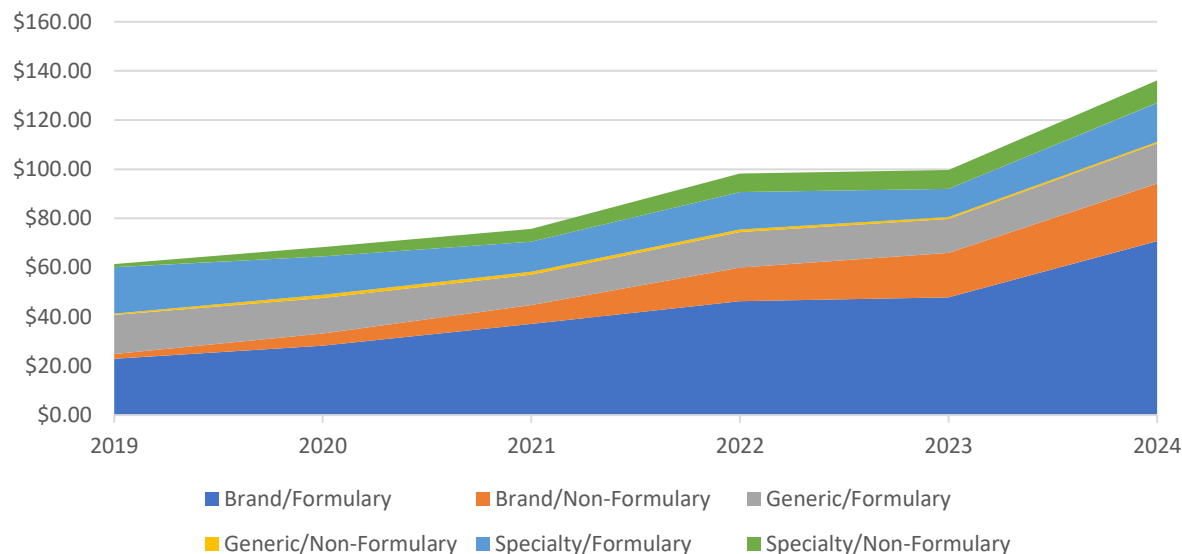
Kaiser – Pharmacy Summary

2024 realized the results over 2023:

📉 Total Pharmacy cost increased 36.5% to \$136.16.

📉 Formulary and Non-Formulary Brand drugs increased 47.8% and 29.9% respectively.

👍 Formulary Specialty drugs increased 36.4% and Non-Formulary Specialty drugs increased 20.2%.



Top Drug Categories:

- Albuterol Sulfate (used for Respiratory Therapy)
- Atorvastatin (used for Cardiovascular Therapy)
- Amlodipine SMG (used for Cardiovascular Therapy)
- Sildenafil (used for Cardiovascular Therapy)
- Omeprazole (used for Gastrointestinal Therapy)

Pharmacy \$ PMPM	2019	2020	2021	2022	2023	2024
Brand/Formulary	\$22.93	\$28.18	\$37.11	\$46.28	\$47.89	\$70.78
Brand/Non-Formulary	\$1.91	\$4.96	\$7.62	\$13.67	\$18.04	\$23.43
Generic/Formulary	\$15.93	\$14.50	\$12.42	\$14.44	\$13.82	\$16.31
Generic/Non-Formulary	\$0.51	\$1.31	\$1.17	\$1.15	\$0.76	\$0.68
Specialty/Formulary	\$18.90	\$15.65	\$12.28	\$15.23	\$11.58	\$15.79
Specialty/Non-Formulary	\$1.29	\$3.72	\$5.21	\$7.49	\$7.63	\$9.17
Total Pharmacy \$PMPM	\$61.47	\$68.32	\$75.81	\$98.26	\$99.72	\$136.16
Change from Previous Year	2019	2020	2021	2022	2023	2024
Brand/Formulary	-27.0%	22.9%	31.7%	24.7%	3.5%	47.8%
Brand/Non-Formulary	0.0%	159.7%	53.6%	79.4%	32.0%	29.9%
Generic/Formulary	-1.0%	-9.0%	-14.3%	16.3%	-4.3%	18.0%
Generic/Non-Formulary	0.0%	156.9%	-10.7%	-1.7%	-33.9%	-10.5%
Specialty/Formulary	-21.3%	-17.2%	-21.5%	24.0%	-24.0%	36.4%
Specialty/Non-Formulary	0.0%	188.4%	40.1%	43.8%	1.9%	20.2%
Total Pharmacy \$PMPM	-14.0%	11.1%	11.0%	29.6%	1.5%	36.5%

Kaiser – Other Summary

2024 realized the following results over 2023:

🚫 Total Other cost increased 6.2% to \$171.37 pmpm.

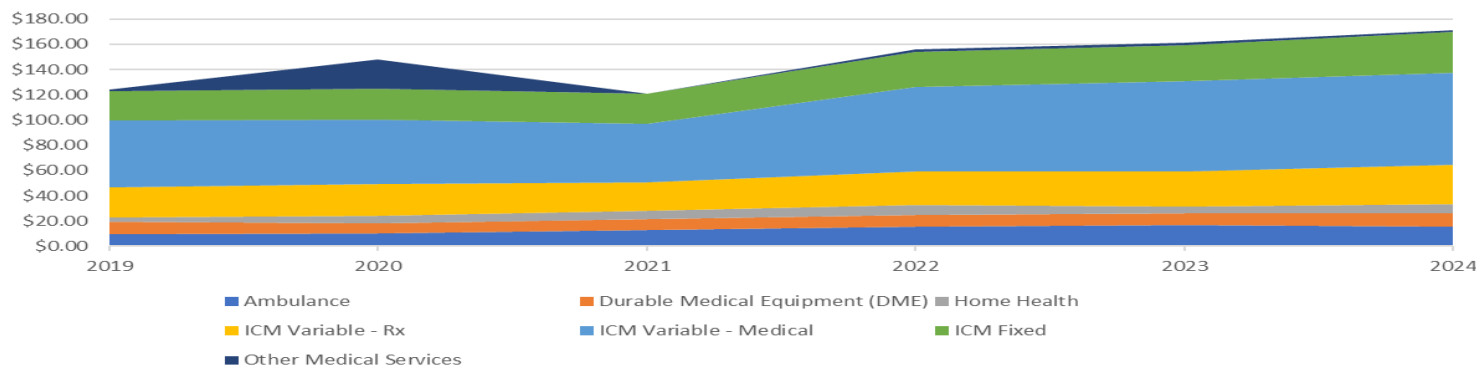
👍 Ambulance Services decreased 8.1% to \$15.34 pmpm.

🚫 Durable Medical Equipment increased 12.1% to \$10.74 pmpm.

🚫 Home Healthcare increased 37.5% to \$7.23 pmpm.

🚫 Total Integrated Care Management (ICM) fees increased 6.6% to \$136.39 pmpm.

Total Other \$ PMPM	2019	2020	2021	2022	2023	2024
Ambulance	\$9.70	\$10.22	\$13.17	\$15.25	\$16.69	\$15.34
Durable Medical Equipment (DME)	\$9.96	\$8.02	\$8.07	\$9.89	\$9.58	\$10.74
Home Health	\$3.07	\$6.17	\$6.78	\$7.42	\$5.26	\$7.23
ICM Variable - Rx	\$23.94	\$24.89	\$22.90	\$26.61	\$28.00	\$31.53
ICM Variable - Medical	\$52.95	\$51.27	\$46.08	\$66.91	\$71.07	\$72.32
ICM Fixed	\$23.09	\$23.95	\$23.58	\$27.65	\$28.88	\$32.54
Other Medical Services	\$1.35	\$23.58	\$0.09	\$2.34	\$1.93	\$1.67
Total Other \$PMPM	\$124.06	\$148.10	\$120.67	\$156.07	\$161.41	\$171.37
Change from Previous Year	2019	2020	2021	2022	2023	2024
Ambulance	29.0%	5.4%	28.9%	15.8%	9.4%	-8.1%
Durable Medical Equipment (DME)	12.5%	-19.5%	0.6%	22.6%	-3.1%	12.1%
Home Health	3.0%	101.0%	9.9%	9.4%	-29.1%	37.5%
ICM Variable - Rx	2.9%	4.0%	-8.0%	16.2%	5.2%	12.6%
ICM Variable - Medical	8.3%	-3.2%	-10.1%	45.2%	6.2%	1.8%
ICM Fixed	3.5%	3.7%	-1.5%	17.3%	4.4%	12.7%
Other Medical Services	-254.8%	1644.1%	-99.6%	2572.8%	-17.6%	-13.6%
Total Other PMPM	9.8%	19.4%	-18.5%	29.3%	3.4%	6.2%

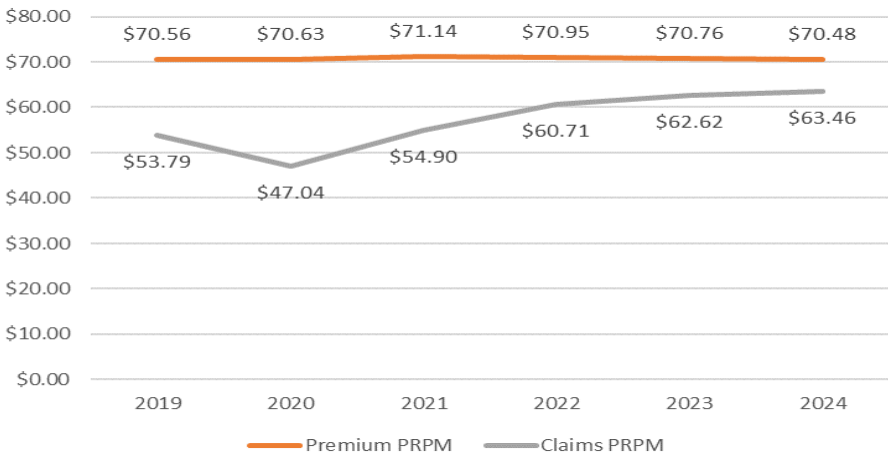
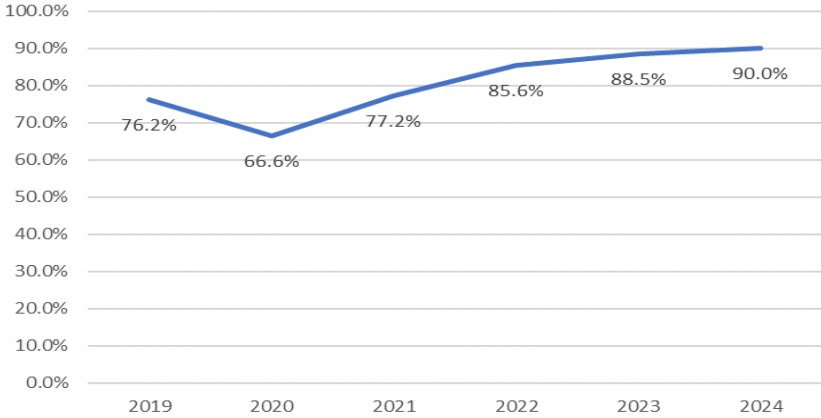


Delta Dental

Delta Dental – Summary



Claim Cost Loss Ratio



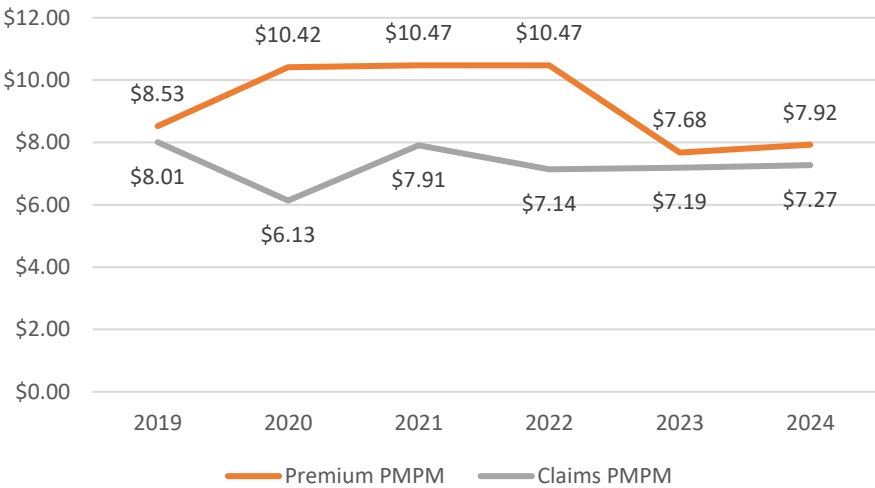
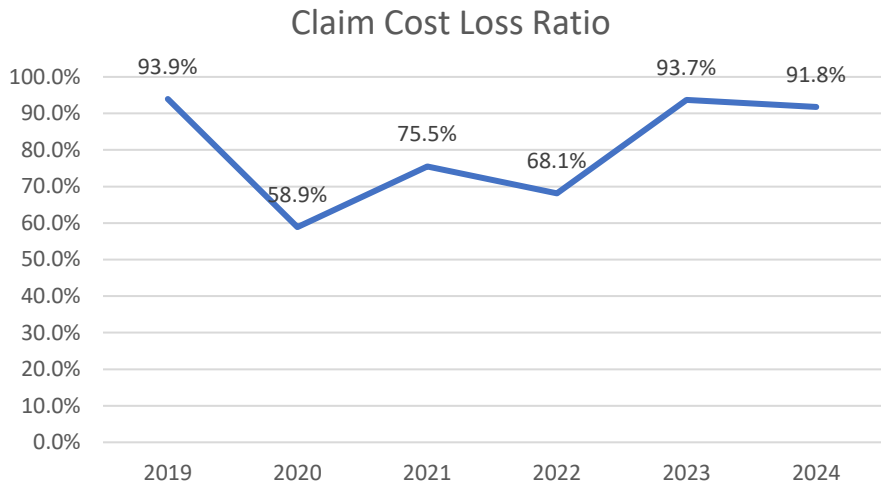
- 2024 was the sixth consecutive year LACERS self-funded the dental plan.
- Premium equivalent exceeded claim cost for a 90.0% loss ratio.
- Given Delta Dental’s administration cost of \$5.10 prpm, LACERS accumulated a cash position of \$331,033 in 2024, and an overall self-funded cash position of \$6,285,218 over the five-year period.
- Keenan recommends LACERS maintain an IBNR reserve of \$768,660.
- This leaves an accumulation of margin of \$5,516,558.

Delta Dental	2019	2020	2021	2022	2023	2024
Avg Subscribers	12,029	12,490	13,517	13,969	14,162	14,358
Premium	\$10,185,820	\$10,586,448	\$11,538,515	\$11,892,388	\$12,024,808	\$12,143,166
Claims	\$7,763,760	\$7,050,619	\$8,904,930	\$10,176,822	\$10,642,358	\$10,933,423
Loss Ratio	76.2%	66.6%	77.2%	85.6%	88.5%	90.0%
Per Retiree Per Month (PRPM)*						
Premium PRPM	\$70.56	\$70.63	\$71.14	\$70.95	\$70.76	\$70.48
Claims PRPM	\$53.79	\$47.04	\$54.90	\$60.71	\$62.62	\$63.46
Change from Previous Year						
Enrollment	4.1%	3.8%	8.2%	3.3%	1.4%	1.4%
Premium PRPM	3.7%	0.1%	0.7%	-0.3%	-0.3%	-0.4%
Claims PRPM	-5.4%	-12.5%	16.7%	10.6%	3.1%	1.3%

Note: Subscribers include retirees and survivors

Anthem Blue View Vision

Anthem Blue View Vision – Summary



- 2024 was the third year of self-funding vision.
- Given Anthem Blue View’s administration cost of \$0.67 prpm, LACERS accumulated a cash position of -\$1,560 in 2024, and an overall self-funded cash position of \$205,769 over the three-year period
- Keenan recommends LACERS maintain an IBNR reserve of \$44,440.
- This leaves an accumulation of margin of \$163,329.
- Membership grew 2.2% to 7,260.
- The loss ratio decreased to 91.8% from 93.7%.
- Claim cost prpm increased 1.1% to \$7.27 prpm (from \$7.19 prpm in 2023).

Vision	2019	2020	2021	2022	2023	2024
Average Subscribers	7,089	6,356	6,796	6,971	7,105	7,260
Premium	\$725,266	\$794,534	\$854,178	\$876,222	\$654,392	\$690,374
Claims	\$681,374	\$467,912	\$644,783	\$596,944	\$613,170	\$633,564
Loss Ratio	93.9%	58.9%	75.5%	68.1%	93.7%	91.8%
Per Retiree Per Month (PRPM)*						
Premium PRPM	\$8.53	\$10.42	\$10.47	\$10.47	\$7.68	\$7.92
Claims PRPM	\$8.01	\$6.13	\$7.91	\$7.14	\$7.19	\$7.27
Change from Previous Year						
Enrollment	-7.2%	-10.3%	6.9%	2.6%	1.9%	2.2%
Premium PRPM	15.1%	22.2%	0.5%	0.0%	-26.7%	3.2%
Claims PRPM	7.2%	-23.4%	28.9%	-9.7%	0.8%	1.1%

Note: Subscribers include retirees and survivors

Next Steps

Next Steps

- Keenan recommends LACERS meet with each carrier to review the utilization data including medical and prescription drug data.
 - Carriers should come prepared to provide recommendations to:
 - Stabilize prescription drug cost and medical cost
 - Explore how virtual care can be utilized more
 - Assist LACERS in the development of targeted communications to comply with preventive screening and care
 - Enhance services to LACERS retirees and survivors

Abbreviations and Glossary

DOC – Days Of Care

DME – Durable Medical Equipment

IBNR – Incurred But Not Reported reserve; a reserve account

PMPM – Per Member Per Month; however, in LACERS's instance, this is per covered lives per month

PRPM – Per Retiree Per Month; however, in LACERS's instance, this is per subscriber per month

SNF – Skilled Nursing Facility

Claim Cost Loss Ratio – The claim cost of a particular line of coverage over a particular time frame divided by the premium for the same line of coverage for the same time frame.

Total Cost Loss Ratio – The total cost of a particular line of coverage over a particular time frame divided by the premium for the same line of coverage for the same time frame.

Total Cost – Claim cost plus the associated carrier retention/administration cost.

Capitation Fee – Applies to HMO coverage. A contracted and carrier-negotiated fee paid to providers and hospitals monthly for certain services eliminating the claim cost. Fee is based on covered lives selection of a primary care physician and hospital selection.

Accumulation of margin – For self-funded plans, if total premium equivalent is greater than total cost then an accumulation of margin is realized.

Pooling Point (Level) – In a fully insured program, the dollar value where individual claimants who have accumulated claims (within the plan year) exceeding the pooling point, the amount above is pooled and not counted towards the plan experience.

Pool Charge – The insurers charge for having a pooling point. Cost decreases as pooling point increases.

Retail Drug – A drug purchased at a local pharmacy (typically no more than a 30-day supply).

Mail Order Drug – A drug purchased through a mail order facility (typically a 3-month supply).

Generic Drug – A drug manufactured by more than one pharmacy drug manufacturer.

Brand Drug – A drug manufactured exclusively by one pharmacy drug manufacturer.

Formulary Drug – A drug the insurance carrier or PBM has a contractual relationship for price and terms.

Non-Formulary Drug – A drug the insurance carrier or PBM does not have a contractual relationship for price and terms.

Appendix

Anthem Blue Cross PPO – Monthly Premium and Claims Summary

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Subscribers	1,131	1,133	1,133	1,123	1,122	1,121	1,121	1,115	1,105	1,111	1,110	1,102	1,119
Premium	\$2,036,707	\$2,041,059	\$2,001,198	\$2,044,387	\$2,000,888	\$1,977,969	\$1,586,851	\$2,035,081	\$2,006,319	\$1,995,635	\$1,984,219	\$2,017,452	\$23,727,765
Claims	\$1,877,635	\$2,152,375	\$1,856,993	\$1,690,927	\$2,298,287	\$1,782,134	\$2,146,143	\$2,246,744	\$1,674,379	\$1,867,725	\$1,640,715	\$2,167,390	\$23,401,447

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Subscribers	1,129	1,131	1,128	1,130	1,128	1,124	1,124	1,125	1,122	1,114	1,111	1,110	1,123
Premium	\$1,860,628	\$1,814,276	\$1,866,099	\$1,862,521	\$1,858,170	\$1,861,388	\$1,821,047	\$1,841,486	\$1,814,584	\$1,711,991	\$1,827,790	\$1,801,604	\$21,941,583
Claims	\$1,419,463	\$1,829,886	\$2,269,182	\$1,797,314	\$1,657,221	\$2,037,652	\$2,057,000	\$1,851,898	\$1,674,958	\$1,655,970	\$1,677,780	\$1,907,627	\$21,835,951

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Subscribers	1,171	1,167	1,158	1,156	1,151	1,149	1,136	1,148	1,136	1,128	1,127	1,116	1,145
Premium	\$1,754,882	\$1,692,089	\$1,744,940	\$2,108,314	\$1,686,712	\$1,709,265	\$1,707,153	\$1,671,232	\$1,695,575	\$1,659,083	\$1,655,430	\$1,661,268	\$20,745,944
Claims	\$1,840,032	\$2,766,281	\$1,839,089	\$2,006,882	\$1,464,351	\$2,132,921	\$1,475,008	\$1,637,073	\$3,063,186	\$1,506,651	\$1,824,581	\$1,799,501	\$23,355,556

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Subscribers	4,444	4,478	4,511	4,560	4,593	4,632	4,638	4,651	4,667	4,665	4,665	4,664	4,597
Premium	\$2,547,104	\$2,555,240	\$2,623,606	\$2,670,443	\$2,680,457	\$2,504,220	\$2,515,410	\$2,757,753	\$2,722,205	\$2,719,113	\$2,699,934	\$2,689,995	\$31,685,480
Claims	\$1,603,152	\$1,880,616	\$3,596,490	\$1,779,559	\$2,155,724	\$2,275,273	\$2,392,084	\$1,931,490	\$2,235,864	\$1,787,648	\$2,357,095	\$2,895,331	\$26,890,328

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Subscribers	4,296	4,305	4,318	4,323	4,329	4,335	4,332	4,336	4,343	4,360	4,358	4,385	4,335
Premium	\$2,265,680	\$2,420,272	\$2,296,023	\$2,403,328	\$2,389,747	\$2,395,109	\$2,383,253	\$2,371,051	\$2,375,524	\$2,384,085	\$1,935,065	\$2,375,936	\$27,995,073
Claims	\$1,644,027	\$1,897,820	\$2,059,820	\$2,132,592	\$1,270,737	\$2,310,895	\$1,745,715	\$1,586,525	\$2,450,826	\$1,952,561	\$1,762,414	\$2,399,341	\$23,213,273

	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
Subscribers	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

Note: Subscribers include retirees and survivors

Anthem Blue Cross PPO –

Per Retiree Per Month Premium and Claims Summary



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Subscribers	1,131	1,133	1,133	1,123	1,122	1,121	1,121	1,115	1,105	1,111	1,110	1,102	1,119
Premium	\$1,800.80	\$1,801.46	\$1,766.28	\$1,820.47	\$1,783.32	\$1,764.47	\$1,415.57	\$1,825.18	\$1,815.67	\$1,796.25	\$1,787.58	\$1,830.72	\$1,767.32
Claims	\$1,660.15	\$1,899.71	\$1,639.01	\$1,505.72	\$2,048.38	\$1,589.77	\$1,914.49	\$2,015.02	\$1,515.28	\$1,681.12	\$1,478.12	\$1,966.78	\$1,742.80

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Subscribers	1,129	1,131	1,128	1,130	1,128	1,124	1,124	1,125	1,122	1,114	1,111	1,110	1,123
Premium	\$1,648.03	\$1,604.13	\$1,654.34	\$1,648.25	\$1,647.31	\$1,656.04	\$1,620.15	\$1,636.88	\$1,617.28	\$1,536.80	\$1,645.18	\$1,623.07	\$1,628.12
Claims	\$1,257.27	\$1,617.94	\$2,011.69	\$1,590.54	\$1,469.17	\$1,812.86	\$1,830.07	\$1,646.13	\$1,492.83	\$1,486.51	\$1,510.15	\$1,718.58	\$1,620.31

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Subscribers	1,171	1,167	1,158	1,156	1,151	1,149	1,136	1,148	1,136	1,128	1,127	1,116	1,145
Premium	\$1,498.62	\$1,449.95	\$1,506.86	\$1,823.80	\$1,465.43	\$1,487.61	\$1,502.78	\$1,455.78	\$1,492.58	\$1,470.82	\$1,468.88	\$1,488.59	\$1,509.31
Claims	\$1,571.33	\$2,370.42	\$1,588.16	\$1,736.06	\$1,272.24	\$1,856.33	\$1,298.42	\$1,426.02	\$2,696.47	\$1,335.68	\$1,618.97	\$1,612.46	\$1,698.55

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Subscribers	4,444	4,478	4,511	4,560	4,593	4,632	4,638	4,651	4,667	4,665	4,665	4,664	4,597
Premium	\$573.16	\$570.62	\$581.60	\$585.62	\$583.60	\$540.63	\$542.35	\$592.94	\$583.29	\$582.88	\$578.76	\$576.76	\$574.35
Claims	\$360.75	\$419.97	\$797.27	\$390.25	\$469.35	\$491.21	\$515.76	\$415.28	\$479.08	\$383.20	\$505.27	\$620.78	\$487.35

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Subscribers	4,296	4,305	4,318	4,323	4,329	4,335	4,332	4,336	4,343	4,360	4,358	4,385	4,335
Premium	\$527.39	\$562.20	\$531.73	\$555.94	\$552.03	\$552.50	\$550.15	\$546.83	\$546.98	\$546.81	\$444.03	\$541.83	\$538.20
Claims	\$382.69	\$440.84	\$477.03	\$493.31	\$293.54	\$533.08	\$402.98	\$365.90	\$564.32	\$447.84	\$404.41	\$547.17	\$446.09

	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
Subscribers	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

Note: Subscribers include retirees and survivors

Anthem Blue Cross HMO – Monthly Premium and Claims Summary

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Subscribers	879	881	886	888	882	884	885	881	874	869	868	859	878
Premium	\$1,509,006	\$1,517,303	\$1,488,601	\$1,555,790	\$1,533,444	\$1,497,198	\$1,415,393	\$1,494,516	\$1,504,274	\$1,508,925	\$1,467,440	\$1,487,161	\$17,979,051
Claims	\$1,341,299	\$1,388,695	\$1,382,361	\$1,128,957	\$1,398,834	\$1,648,878	\$1,862,329	\$1,510,845	\$1,412,800	\$1,418,789	\$1,831,184	\$1,930,192	\$18,255,163

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Subscribers	925	923	918	913	911	909	903	903	905	897	891	887	907
Premium	\$1,470,114	\$1,436,590	\$1,468,181	\$1,453,557	\$1,450,305	\$1,406,202	\$1,425,932	\$1,396,761	\$1,344,141	\$1,405,503	\$1,404,500	\$1,395,912	\$17,057,697
Claims	\$942,925	\$1,272,565	\$2,081,991	\$1,370,386	\$1,223,917	\$1,193,364	\$1,318,868	\$1,190,849	\$1,204,848	\$1,347,838	\$1,306,928	\$1,173,391	\$15,627,870

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Subscribers	955	952	950	951	944	938	935	936	938	937	939	929	942
Premium	\$1,381,873	\$1,356,674	\$1,381,069	\$1,392,194	\$1,365,609	\$1,357,766	\$1,357,149	\$1,329,747	\$1,354,549	\$1,375,398	\$1,341,347	\$1,360,675	\$16,354,049
Claims	\$1,097,647	\$1,072,673	\$1,400,695	\$1,128,846	\$1,426,214	\$1,443,108	\$1,603,026	\$1,294,156	\$1,346,677	\$1,159,421	\$1,257,224	\$1,084,762	\$15,314,447

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Subscribers	864	895	909	946	954	963	963	970	971	973	966	960	945
Premium	\$1,242,023	\$1,316,928	\$1,376,300	\$1,361,375	\$1,422,264	\$1,389,647	\$1,377,995	\$1,415,197	\$1,409,165	\$1,412,764	\$1,356,792	\$1,419,800	\$16,500,249
Claims	\$889,765	\$992,031	\$1,272,805	\$1,565,431	\$1,191,217	\$1,393,004	\$1,067,344	\$1,224,631	\$972,412	\$1,148,672	\$1,277,992	\$1,331,027	\$14,326,329

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Subscribers	795	805	814	819	827	828	821	810	833	840	842	848	824
Premium	\$1,142,063	\$1,108,613	\$1,122,525	\$1,153,462	\$1,169,331	\$1,182,401	\$1,160,469	\$1,150,491	\$1,141,629	\$1,202,984	\$1,110,757	\$1,178,339	\$13,823,064
Claims	\$1,156,915	\$925,146	\$1,078,180	\$859,863	\$872,348	\$979,444	\$999,506	\$1,078,435	\$1,035,419	\$1,028,595	\$1,004,443	\$970,900	\$11,989,194

	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
Subscribers	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

Note: Subscribers include retirees and survivors

Anthem Blue Cross HMO – Per Retiree Per Month Premium and Claims Summary

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Subscribers	879	881	886	888	882	884	885	881	874	869	868	859	878
Premium	\$1,716.73	\$1,722.25	\$1,680.14	\$1,752.02	\$1,738.60	\$1,693.66	\$1,599.31	\$1,696.39	\$1,721.14	\$1,736.39	\$1,690.60	\$1,731.27	\$1,706.54
Claims	\$1,525.94	\$1,576.27	\$1,560.23	\$1,271.35	\$1,585.98	\$1,865.25	\$2,104.33	\$1,714.92	\$1,616.48	\$1,632.67	\$2,109.66	\$2,247.02	\$1,734.17

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Subscribers	925	923	918	913	911	909	903	903	905	897	891	887	907
Premium	\$1,589.31	\$1,556.44	\$1,599.33	\$1,592.07	\$1,591.99	\$1,546.98	\$1,579.11	\$1,546.80	\$1,485.24	\$1,566.89	\$1,576.32	\$1,573.75	\$1,567.02
Claims	\$1,019.38	\$1,378.73	\$2,267.96	\$1,500.97	\$1,343.49	\$1,312.83	\$1,460.54	\$1,318.77	\$1,331.32	\$1,502.61	\$1,466.81	\$1,322.88	\$1,435.52

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Subscribers	955	952	950	951	944	938	935	936	938	937	939	929	942
Premium	\$1,446.99	\$1,425.08	\$1,453.76	\$1,463.93	\$1,446.62	\$1,447.51	\$1,451.50	\$1,420.67	\$1,444.08	\$1,467.87	\$1,428.48	\$1,464.67	\$1,446.76
Claims	\$1,149.37	\$1,126.76	\$1,474.42	\$1,187.01	\$1,510.82	\$1,538.49	\$1,714.47	\$1,382.65	\$1,435.69	\$1,237.38	\$1,338.90	\$1,167.67	\$1,355.30

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Subscribers	864	895	909	946	954	963	963	970	971	973	966	960	945
Premium	\$1,437.53	\$1,471.43	\$1,514.08	\$1,439.09	\$1,490.84	\$1,443.04	\$1,430.94	\$1,458.97	\$1,451.25	\$1,451.97	\$1,404.55	\$1,478.96	\$1,456.05
Claims	\$1,029.82	\$1,108.41	\$1,400.23	\$1,654.79	\$1,248.66	\$1,446.53	\$1,108.35	\$1,262.51	\$1,001.45	\$1,180.55	\$1,322.97	\$1,386.49	\$1,262.56

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Subscribers	795	805	814	819	827	828	821	810	833	840	842	848	824
Premium	\$1,436.56	\$1,377.16	\$1,379.02	\$1,408.38	\$1,413.94	\$1,428.02	\$1,413.48	\$1,420.36	\$1,370.50	\$1,432.12	\$1,319.19	\$1,389.55	\$1,399.02
Claims	\$1,455.24	\$1,149.25	\$1,324.55	\$1,049.89	\$1,054.83	\$1,182.90	\$1,217.43	\$1,331.40	\$1,243.00	\$1,224.52	\$1,192.93	\$1,144.93	\$1,214.24

	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
Subscribers	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

Note: Subscribers include retirees and survivors

Kaiser –

Monthly Premium and Claims Summary

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Members	4,166	4,147	4,114	4,088	4,066	4,041	4,004	3,961	3,925	3,902	3,868	3,827	4,009
Premium	\$4,197,099	\$4,177,957	\$4,144,711	\$4,118,517	\$4,096,353	\$4,071,166	\$4,033,890	\$3,990,569	\$3,954,300	\$3,931,128	\$3,896,875	\$3,855,569	\$48,468,134
Claims	\$3,767,152	\$4,313,066	\$4,533,474	\$4,724,527	\$3,892,190	\$3,411,623	\$4,118,947	\$3,587,729	\$3,380,904	\$4,102,561	\$3,668,532	\$3,988,680	\$47,489,385

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Members	4,551	4,547	4,502	4,460	4,432	4,390	4,369	4,364	4,354	4,290	4,242	4,196	4,391
Premium	\$3,979,376	\$3,975,879	\$3,936,531	\$3,899,806	\$3,875,323	\$3,838,598	\$3,820,236	\$3,815,864	\$3,807,120	\$3,751,159	\$3,709,188	\$3,668,966	\$46,078,046
Claims	\$3,781,417	\$5,262,442	\$4,130,477	\$4,314,653	\$4,410,497	\$3,620,781	\$3,620,780	\$3,264,479	\$4,426,237	\$4,389,361	\$3,918,130	\$3,957,095	\$49,096,349

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Members	4,950	4,937	4,943	4,902	4,857	4,812	4,786	4,780	4,720	4,674	4,622	4,564	4,796
Premium	\$4,092,383	\$4,081,635	\$4,086,596	\$4,052,699	\$4,015,496	\$3,978,292	\$3,956,797	\$3,951,836	\$3,902,232	\$3,864,201	\$3,821,211	\$3,773,260	\$47,576,637
Claims	\$5,475,452	\$3,603,309	\$4,900,078	\$4,018,715	\$3,948,354	\$2,887,342	\$3,257,813	\$4,979,118	\$3,499,588	\$4,136,434	\$4,539,621	\$3,639,442	\$48,885,266

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Members	4,433	4,559	4,670	4,816	4,993	5,064	5,093	5,093	5,064	5,051	5,023	5,000	4,905
Premium	\$3,458,862	\$3,557,173	\$3,643,782	\$3,757,698	\$3,895,803	\$3,951,201	\$3,973,829	\$3,973,829	\$3,951,201	\$3,941,058	\$3,919,211	\$3,901,265	\$45,924,911
Claims	\$3,074,838	\$2,941,216	\$5,381,766	\$2,082,575	\$3,890,047	\$3,788,463	\$3,604,256	\$4,941,464	\$4,204,794	\$3,090,321	\$4,074,584	\$5,846,170	\$46,920,494

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Members	4,049	4,109	4,151	4,141	4,155	4,175	4,091	4,091	4,216	4,277	4,432	4,267	4,180
Premium	\$3,078,835	\$3,124,459	\$3,156,395	\$3,148,792	\$3,159,437	\$3,174,645	\$3,110,772	\$3,110,772	\$3,205,821	\$3,252,205	\$3,370,066	\$3,244,601	\$38,136,800
Claims	\$2,788,400	\$2,882,476	\$3,010,833	\$2,039,703	\$1,909,878	\$1,777,659	\$3,481,047	\$2,999,856	\$2,900,728	\$3,890,059	\$3,368,998	\$5,330,295	\$36,379,932

	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

Note: Members are covered lives

Kaiser –

Per Member Per Month Premium and Claims Summary

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Members	4,166	4,147	4,114	4,088	4,066	4,041	4,004	3,961	3,925	3,902	3,868	3,827	4,009
Premium	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47	\$1,007.47
Claims	\$904.26	\$1,040.04	\$1,101.96	\$1,155.71	\$957.25	\$844.25	\$1,028.71	\$905.76	\$861.38	\$1,051.40	\$948.43	\$1,042.25	\$987.12

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Members	4,551	4,547	4,502	4,460	4,432	4,390	4,369	4,364	4,354	4,290	4,242	4,196	4,391
Premium	\$874.40	\$874.40	\$874.40	\$874.40	\$874.40	\$874.40	\$874.40	\$874.40	\$874.40	\$874.40	\$874.40	\$874.40	\$874.40
Claims	\$830.90	\$1,157.34	\$917.48	\$967.41	\$995.15	\$824.78	\$828.74	\$748.05	\$1,016.59	\$1,023.16	\$923.65	\$943.06	\$931.67

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Members	4,950	4,937	4,943	4,902	4,857	4,812	4,786	4,780	4,720	4,674	4,622	4,564	4,796
Premium	\$826.74	\$826.74	\$826.74	\$826.74	\$826.74	\$826.74	\$826.74	\$826.74	\$826.74	\$826.74	\$826.74	\$826.74	\$826.74
Claims	\$1,106.15	\$729.86	\$991.32	\$819.81	\$812.92	\$600.03	\$680.70	\$1,041.66	\$741.44	\$884.99	\$982.18	\$797.42	\$849.48

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Members	4,433	4,559	4,670	4,816	4,993	5,064	5,093	5,093	5,064	5,051	5,023	5,000	4,905
Premium	\$780.25	\$780.25	\$780.25	\$780.25	\$780.25	\$780.25	\$780.25	\$780.25	\$780.25	\$780.25	\$780.25	\$780.25	\$780.25
Claims	\$693.62	\$645.14	\$1,152.41	\$432.43	\$779.10	\$748.12	\$707.69	\$970.25	\$830.33	\$611.82	\$811.19	\$1,169.23	\$797.17

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Members	4,049	4,109	4,151	4,141	4,155	4,175	4,091	4,091	4,216	4,277	4,432	4,267	4,180
Premium	\$760.39	\$760.39	\$760.39	\$760.39	\$760.39	\$760.39	\$760.39	\$760.39	\$760.39	\$760.39	\$760.39	\$760.39	\$760.39
Claims	\$688.66	\$701.50	\$725.33	\$492.56	\$459.66	\$425.79	\$850.90	\$733.28	\$688.03	\$909.53	\$760.15	\$1,249.19	\$725.36

	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

Note: Members are covered lives

Delta Dental – Monthly Premium and Claims Summary

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Subscribers	14,289	14,315	14,317	14,339	14,334	14,363	14,386	14,400	14,395	14,408	14,395	14,360	14,358
Premium	\$1,009,299	\$1,011,077	\$1,010,642	\$1,011,828	\$1,010,653	\$1,012,313	\$1,013,490	\$1,014,071	\$1,013,449	\$1,014,154	\$1,012,528	\$1,009,662	\$12,143,166
Claims	\$828,459	\$1,179,720	\$954,169	\$938,520	\$1,081,869	\$889,967	\$775,628	\$1,002,371	\$758,349	\$975,961	\$711,133	\$837,277	\$10,933,423

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Subscribers	14,161	14,164	14,171	14,150	14,138	14,130	14,130	14,167	14,185	14,191	14,187	14,165	14,162
Premium	\$1,004,385	\$1,004,573	\$1,004,600	\$1,003,038	\$1,001,450	\$1,000,392	\$999,658	\$1,001,988	\$1,002,477	\$1,002,106	\$1,001,218	\$998,922	\$12,024,808
Claims	\$745,582	\$969,407	\$1,171,507	\$888,418	\$824,968	\$1,047,390	\$737,598	\$1,014,120	\$750,572	\$792,776	\$923,962	\$776,058	\$10,642,358

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Subscribers	13,928	13,953	13,961	13,957	13,956	13,966	13,971	13,991	13,993	13,990	13,989	13,972	13,969
Premium	\$991,612	\$992,650	\$992,461	\$991,176	\$990,235	\$990,641	\$990,661	\$992,121	\$991,450	\$991,031	\$990,347	\$988,004	\$11,892,388
Claims	\$690,889	\$931,991	\$1,109,723	\$835,246	\$903,689	\$924,011	\$702,167	\$761,069	\$930,776	\$742,825	\$768,306	\$876,130	\$10,176,822

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Subscribers	12,923	13,074	13,196	13,385	13,548	13,651	13,692	13,722	13,758	13,756	13,747	13,746	13,517
Premium	\$914,372	\$926,913	\$936,653	\$951,408	\$964,791	\$972,472	\$975,831	\$978,175	\$980,806	\$980,156	\$978,962	\$977,976	\$11,538,515
Claims	\$652,127	\$704,101	\$740,992	\$947,377	\$732,683	\$688,654	\$840,385	\$676,516	\$841,246	\$635,531	\$621,601	\$823,717	\$8,904,930

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Subscribers	12,324	12,372	12,439	12,445	12,469	12,454	12,452	12,447	12,524	12,595	12,652	12,710	12,490
Premium	\$870,198	\$873,660	\$878,822	\$879,340	\$881,352	\$879,801	\$879,397	\$878,669	\$885,061	\$889,347	\$893,133	\$897,668	\$10,586,448
Claims	\$905,378	\$870,292	\$689,302	\$221,127	\$149,923	\$448,055	\$660,701	\$552,036	\$589,843	\$756,617	\$526,483	\$680,862	\$7,050,619

	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
Subscribers	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

Note: Subscribers include retirees and survivors

Delta Dental –

Per Retiree Per Month Premium and Claims Summary

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Subscribers	14,289	14,315	14,317	14,339	14,334	14,363	14,386	14,400	14,395	14,408	14,395	14,360	14,358
Premium	\$70.63	\$70.63	\$70.59	\$70.56	\$70.51	\$70.48	\$70.45	\$70.42	\$70.40	\$70.39	\$70.34	\$70.31	\$70.48
Claims	\$57.98	\$82.41	\$66.65	\$65.45	\$75.48	\$61.96	\$53.92	\$69.61	\$52.68	\$67.74	\$49.40	\$58.31	\$63.46

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Subscribers	14,161	14,164	14,171	14,150	14,138	14,130	14,130	14,167	14,185	14,191	14,187	14,165	14,162
Premium	\$70.93	\$70.92	\$70.89	\$70.89	\$70.83	\$70.80	\$70.75	\$70.73	\$70.67	\$70.62	\$70.57	\$70.52	\$70.76
Claims	\$52.65	\$68.44	\$82.67	\$62.79	\$58.35	\$74.13	\$52.20	\$71.58	\$52.91	\$55.86	\$65.13	\$54.79	\$62.62

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Subscribers	13,928	13,953	13,961	13,957	13,956	13,966	13,971	13,991	13,993	13,990	13,989	13,972	13,969
Premium	\$71.20	\$71.14	\$71.09	\$71.02	\$70.95	\$70.93	\$70.91	\$70.91	\$70.85	\$70.84	\$70.79	\$70.71	\$70.95
Claims	\$49.60	\$66.80	\$79.49	\$59.84	\$64.75	\$66.16	\$50.26	\$54.40	\$66.52	\$53.10	\$54.92	\$62.71	\$60.71

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Subscribers	12,923	13,074	13,196	13,385	13,548	13,651	13,692	13,722	13,758	13,756	13,747	13,746	13,517
Premium	\$70.76	\$70.90	\$70.98	\$71.08	\$71.21	\$71.24	\$71.27	\$71.29	\$71.29	\$71.25	\$71.21	\$71.15	\$71.14
Claims	\$50.46	\$53.86	\$56.15	\$70.78	\$54.08	\$50.45	\$61.38	\$49.30	\$61.15	\$46.20	\$45.22	\$59.92	\$54.90

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Subscribers	12,324	12,372	12,439	12,445	12,469	12,454	12,452	12,447	12,524	12,595	12,652	12,710	12,490
Premium	\$70.61	\$70.62	\$70.65	\$70.66	\$70.68	\$70.64	\$70.62	\$70.59	\$70.67	\$70.61	\$70.59	\$70.63	\$70.63
Claims	\$73.46	\$70.34	\$55.41	\$17.77	\$12.02	\$35.98	\$53.06	\$44.35	\$47.10	\$60.07	\$41.61	\$53.57	\$47.04

	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
Subscribers	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	\$53.79

Note: Subscribers include retirees and survivors

Anthem Blue View Vision – Monthly Premium and Claims Summary

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Subscribers	7,187	7,203	7,222	7,223	7,229	7,256	7,283	7,291	7,291	7,304	7,311	7,316	7,260
Premium	\$67,773	\$69,851	\$41,731	\$47,288	\$62,559	\$55,703	\$54,151	\$57,304	\$44,638	\$73,217	\$57,639	\$58,520	\$690,374
Claims	\$65,018	\$36,906	\$42,442	\$57,718	\$50,864	\$49,278	\$52,394	\$39,739	\$67,757	\$52,740	\$53,614	\$65,094	\$633,564

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Subscribers	7,067	7,077	7,082	7,086	7,101	7,100	7,105	7,119	7,133	7,134	7,129	7,126	7,105
Premium	\$51,073	\$58,850	\$36,177	\$58,298	\$54,173	\$63,780	\$49,144	\$64,672	\$52,062	\$54,774	\$68,404	\$42,985	\$654,392
Claims	\$53,789	\$31,881	\$53,549	\$49,327	\$58,415	\$44,405	\$59,734	\$47,432	\$49,850	\$63,623	\$38,218	\$62,947	\$613,170

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Subscribers	6,947	6,927	6,931	6,943	6,956	6,955	6,967	7,001	7,007	6,996	7,013	7,011	6,971
Premium	\$72,317	\$72,248	\$72,853	\$72,516	\$73,151	\$72,792	\$73,344	\$73,600	\$73,451	\$73,512	\$73,097	\$73,341	\$876,222
Claims	\$58,621	\$42,889	\$44,718	\$44,395	\$48,022	\$44,448	\$47,310	\$53,478	\$57,541	\$59,364	\$49,823	\$46,335	\$596,944

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Subscribers	6,533	6,593	6,652	6,740	6,797	6,852	6,860	6,885	6,905	6,909	6,904	6,917	6,796
Premium	\$68,007	\$68,764	\$69,920	\$70,396	\$71,479	\$71,714	\$72,218	\$72,381	\$72,382	\$72,598	\$71,961	\$72,358	\$854,178
Claims	\$38,601	\$33,167	\$61,771	\$47,527	\$55,810	\$49,973	\$56,695	\$69,239	\$52,626	\$56,940	\$71,050	\$51,384	\$644,783

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Subscribers	6,270	6,291	6,310	6,324	6,344	6,357	6,350	6,344	6,381	6,419	6,422	6,455	6,356
Premium	\$65,308	\$65,642	\$65,313	\$66,763	\$66,290	\$65,367	\$66,242	\$66,181	\$66,070	\$67,073	\$67,308	\$66,977	\$794,534
Claims	\$51,501	\$40,810	\$49,109	-\$217	\$6,583	\$33,848	\$37,211	\$54,239	\$30,164	\$54,650	\$61,519	\$48,495	\$467,912

	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
Subscribers	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

Note: Subscribers include retirees and survivors

Anthem Blue View Vision – Per Retiree Per Month Premium and Claims Summary

	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Total
Subscribers	7,187	7,203	7,222	7,223	7,229	7,256	7,283	7,291	7,291	7,304	7,311	7,316	7,260
Premium	\$9.43	\$9.70	\$5.78	\$6.55	\$8.65	\$7.68	\$7.44	\$7.86	\$6.12	\$10.02	\$7.88	\$8.00	\$7.92
Claims	\$9.05	\$5.12	\$5.88	\$7.99	\$7.04	\$6.79	\$7.19	\$5.45	\$9.29	\$7.22	\$7.33	\$8.90	\$7.27

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Subscribers	7,067	7,077	7,082	7,086	7,101	7,100	7,105	7,119	7,133	7,134	7,129	7,126	7,105
Premium	\$7.23	\$8.32	\$5.11	\$8.23	\$7.63	\$8.98	\$6.92	\$9.08	\$7.30	\$7.68	\$9.60	\$6.03	\$7.68
Claims	\$7.61	\$4.50	\$7.56	\$6.96	\$8.23	\$6.25	\$8.41	\$6.66	\$6.99	\$8.92	\$5.36	\$8.83	\$7.19

	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Total
Subscribers	6,947	6,927	6,931	6,943	6,956	6,955	6,967	7,001	7,007	6,996	7,013	7,011	6,971
Premium	\$10.41	\$10.43	\$10.51	\$10.44	\$10.52	\$10.47	\$10.53	\$10.51	\$10.48	\$10.51	\$10.42	\$10.46	\$10.47
Claims	\$8.44	\$6.19	\$6.45	\$6.39	\$6.90	\$6.39	\$6.79	\$7.64	\$8.21	\$8.49	\$7.10	\$6.61	\$7.14

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Total
Subscribers	6,533	6,593	6,652	6,740	6,797	6,852	6,860	6,885	6,905	6,909	6,904	6,917	6,796
Premium	\$10.41	\$10.43	\$10.51	\$10.44	\$10.52	\$10.47	\$10.53	\$10.51	\$10.48	\$10.51	\$10.42	\$10.46	\$10.47
Claims	\$5.91	\$5.03	\$9.29	\$7.05	\$8.21	\$7.29	\$8.26	\$10.06	\$7.62	\$8.24	\$10.29	\$7.43	\$7.91

	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Total
Subscribers	6,270	6,291	6,310	6,324	6,344	6,357	6,350	6,344	6,381	6,419	6,422	6,455	6,356
Premium	\$10.42	\$10.43	\$10.35	\$10.56	\$10.45	\$10.28	\$10.43	\$10.43	\$10.35	\$10.45	\$10.48	\$10.38	\$10.42
Claims	\$8.21	\$6.49	\$7.78	(\$0.03)	\$1.04	\$5.32	\$5.86	\$8.55	\$4.73	\$8.51	\$9.58	\$7.51	\$6.13

	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
Subscribers	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	\$8.53
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	\$8.01

Note: Subscribers include retirees and survivors

Acknowledgement

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Questions and Answers