

AGENDA

BOARD OF DIRECTORS

STEVE BRANDAU
NATHAN MAGSIG
BUDDY MENDES
LARRY MICARI
BRIAN PACHECO
AMY SHUKLIAN
PETE VANDER POEL

**Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721
February 18, 2022 9:00 AM**

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the SJVIA Manager at 559-600-1810 or the Assistant SJVIA Manager at 559-636-4900. Notification 48 hours prior to the meeting will help enable staff to make reasonable arrangements to ensure meaningful access.

1. Call to Order
2. Pledge of Allegiance
3. Roll Call and Election of President and Vice President of the SJVIA Board of Directors to Serve through the First Meeting of the SJVIA Board in 2024 (A)
4. Approval of Agenda (A)
5. Closed Session CONFERENCE WITH LEGAL COUNSEL – EXISTING LITIGATION (Gov. Code, § 54956.9, subd. (d)(1)) — San Joaquin Valley Insurance Authority v. Gallagher Benefit Services, Inc., Fresno County Superior Court Case No. 17CECG01632, United States District Court for the Eastern District of California Case No. 1:17-cv-00861-LJO-EPG

The public may comment on Closed Session items prior to the Board's recess to Closed Session.

The remainder of the agenda will be heard following the Closed Session item.

6. Public Comment: At this time, members of the public may comment on any item, within the jurisdiction of the SJVIA, not appearing on the agenda. In order for everyone to be heard, please limit your comments to 3 minutes or less. Anyone wishing to be placed on the agenda for a specific topic should contact the SJVIA Manager's Office and submit correspondence at least 14 days before the desired date of appearance.

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7. Approval of Consent Agenda – Item Numbers 19-23 (A)
These matters are routine in nature and are usually approved by a single vote. Prior to action by the Board, the Board Members and the public will be given the opportunity to remove any item from the Consent Calendar. Items removed from the Consent Calendar may be heard immediately following approval of this Consent Calendar or set aside until later in the meeting.
8. Receive Update from Auditor-Treasurer on Cash Flow Projections (I)
9. Receive Update from Auditor-Treasurer on SJVIA Financials as of September 30, 2021 (I)
10. Receive the 2021 Audited Financial Statements (I)
11. Receive Preliminary Budget for Fiscal Year 2022-2023 (I)
12. Receive Consultant's Medical, Dental, and Vision Experience Reports through December 2021 with Update on Projected Plan Experience Surplus Accumulation and Projections (I)
13. Receive and Accept Consultant's SJVIA Actuarially Certified Incurred But Not Reported (IBNR) Reserve Report as of December 31, 2021 and Maintain the Fully-Funded Status of the IBNR Reserve (A)
14. Receive and Approve the Vendor List and Timeline for the Request for Proposal (RFP) for a Plan Administrator for the Self-Funded Medical Plans and a Pharmacy Benefits Manager (PBM) for the Self-Funded Prescription Drug Plans for Plan Year 2023 (A)
15. Receive Consultant's Report on the Health Claims Data (I)

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February 18, 2022 9:00 AM**

16. Receive Consultant's Report on JPA Administration Alternatives and Direct SJVIA Staff to Conduct an RFP for Outsourcing JPA Administration Including JPA Management, JPA Administration, Financial/Auditing Services, and Legal Counsel (A)
17. SJVIA Director Questions, Announcements, and Activity Reports (Gov. Code, § 54954.2, subd. (a)(2)) (I)
18. Adjournment

Consent Agenda

19. Approve and Authorize President to Sign Settlement Agreement and General Release with Gallagher Settlement Benefit Services, Inc., to Receive Payment of \$7,000,000 in Exchange for a Release of all Claims to Settle San Joaquin Valley Insurance Authority v. Gallagher Benefit Services, Inc., Fresno County Superior Court Case No. 17CECG01632, United States District Court for the Eastern District of California Cans No. 1:17-cv-00861-LIO-EPG (A)
20. Approval of Minutes – Board Meeting of December 10, 2021 (A)
21. Receive Update on Plan Year 2022 Anthem High Deductible PPO Pharmacy Discounts Through IngenioRx (A)
22. Receive Update on the Self-Funded Medical and Dental Claims Audit Through TFG Partners (A)
23. Approve Revised 2022 Board Meeting Calendar (A)

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Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item #8

SUBJECT: Receive Update from Auditor-Treasurer on Cash Flow Projections (I)

REQUEST(S): That the Board receives this update on Cash Flow Projections.


DESCRIPTION:

Informational item. Please see attached report.

FISCAL IMPACT/FINANCING:

None.

ADMINISTRATIVE SIGN-OFF:

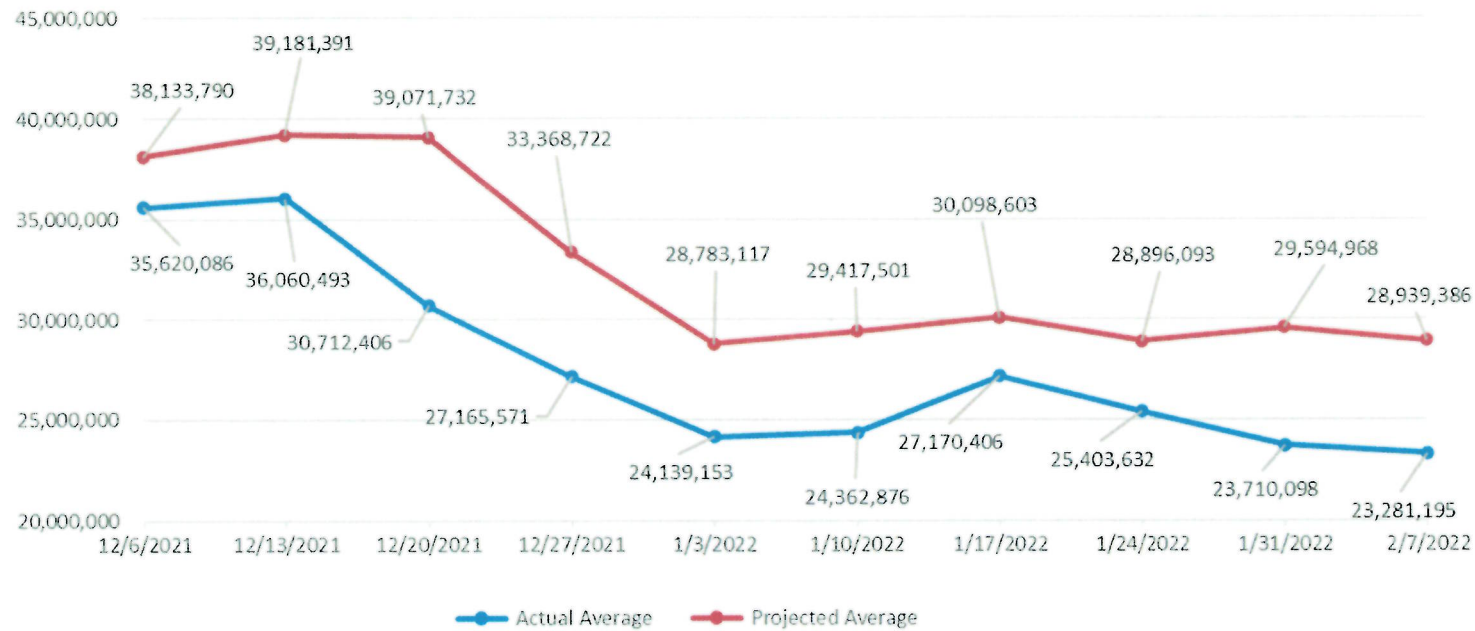


Oscar J. Garcia, CPA
SJVIA Auditor-Treasurer

SJVIA Cash Flow Projections

Ricky Santellana
February 18, 2022

Projected vs. Actual Cash Flows
For the Fiscal Year Ending June 30, 2022
Weekly Averages



Lowest (Actual)

- 2/7/22 - \$23,281,195

Highest (Actual)

- 12/13/21- \$36,060,493

- Decrease in actuals average cash flows attribute to timing of COF
Actives receivables
- Average Weekly PPO/EPO claims for this period = 219K (changed from
daily to weekly, as of 1/1/2022)
- Pharmacy claims and dental claims expenses normalizing
- Member contributions remained steady & consistent.

SJVIA Debt Obligations & Cash Positions 12/10/2021	IBNR Reserves	3-Month Stablization Reserve	Total
Current Debt Obligations	\$ 7,281,020	\$ 18,344,990	\$ 25,626,010
	Debt Obligations Met?		
Current Cash Position	YES	NO	\$ 24,910,978
	Debt Obligations Met?		
Cash Projection, 6/30/2022	YES	YES	\$ 22,303,646

- Current cash position total taken on 2/7/2022.
- Though we cannot meet *all* of our debt obligations now (\$1M short), we should be able to by the end of this fiscal year.
- All loans & interest payable *were paid* as of 2/1/2022.



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AGENDA DATE: February 18, 2022

ITEM NUMBER: Item #9

SUBJECT: Receive Update from Auditor-Treasurer on SJVIA Financials as of September 30, 2021.

REQUEST(S): That the Board receives the financial update through September 30, 2021.

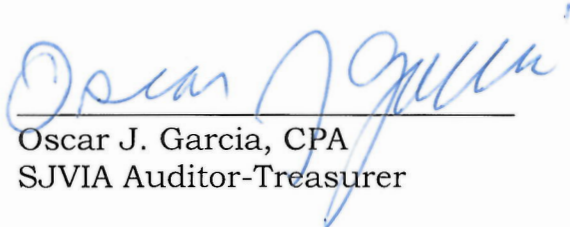
DESCRIPTION:

Informational item. Please see attached report.

FISCAL IMPACT/FINANCING:

None.

ADMINISTRATIVE SIGN-OFF:



Oscar J. Garcia, CPA
SJVIA Auditor-Treasurer

San Joaquin Valley Insurance Authority
Estimated Statement of Net Position
As of September 30, 2021
(UNAUDITED)

ASSETS

Current assets:

Cash and cash equivalents	22,223,774
Restricted cash	12,180,310
Due from other governmental units	154,042
Interest receivable	71,092
Total current assets	<u>34,629,218</u>

Total assets	<u><u>\$ 34,629,218</u></u>
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LIABILITIES

Current liabilities:

Accounts payable	5,018,441
Interest payable	759,040
Loans payable	9,000,000
Unpaid claims and claims adjustment expenses	7,281,020
Total current liabilities	<u>22,058,501</u>

Noncurrent liabilities:

Due to other governmental units	<u>884,432</u>
Total noncurrent liabilities	<u>884,432</u>

Total liabilities	<u><u>\$ 22,942,933</u></u>
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NET POSITION

Unrestricted	(2,832,946)
Restricted - stabilization reserve	<u>12,180,310</u>
Total net position	<u><u>\$ 9,347,364</u></u>

Note:

This statement of net position is presented on an accrual basis. Certain related adjustments presented in this report are estimates. Of the \$9,000,000 currently loaned to SJVIA, \$5,000,000 is payable to the County of Fresno and \$4,000,000 is payable to the County of Tulare, both due by December 30, 2021.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
ACTUALS VS. BUDGETED RECEIPTS & DISBURSEMENTS
AS OF September 30, 2021
(UNAUDITED)

	Current Quarter				Year-To-Date			
	BUDGET*	ACTUALS	FAVORABLE/ (UNFAVORABLE)	% VARIANCE	BUDGET*	ACTUALS	FAVORABLE/ (UNFAVORABLE)	% VARIANCE
RECEIPTS								
TOTAL RECEIPTS	\$30,353,029	\$ 26,903,826	\$ (3,449,203)	(11%)	\$123,416,972	\$26,903,826	(\$96,513,146)	(78%)
DISBURSEMENTS: Fixed								
1 Specific Stop Loss Insurance (EPO/PPO/HDHP)	395,642	399,072	(3,430)	(1%)	1,701,182	399,072	1,302,110	77%
2 Claims Administration & Network Fees	854,083	883,140	(29,057)	(3%)	3,467,643	883,140	2,584,503	75%
3 Consulting Services	126,377	117,468	8,909	7%	488,792	117,468	371,324	76%
4 MyWorkplace (Hourglass) & ASI Admin	113,920	120,862	(6,942)	(6%)	455,680	120,862	334,818	73%
5 SJVIA Administration	55,914	100,475	(44,561)	(80%)	285,720	100,475	185,245	65%
6 Wellness	69,893	-	69,893	100%	279,570	-	279,570	100%
7 Communications	13,979	-	13,979	100%	55,914	-	55,914	100%
8 ACA Reinsurance/PCORI Fees	6,950	14,133	(7,183)	(103%)	29,187	14,133	15,054	52%
9 98Point6	39,174	-	39,174	100%	156,694	-	156,694	100%
10 Conference Allowance	3,635	-	3,635	100%	14,538	-	14,538	100%
TOTAL FIXED DISBURSEMENTS	1,679,564	1,635,150	44,417	3%	6,934,920	1,635,150	5,299,770	76%
DISBURSEMENTS: Claims								
9 Projected Paid Claims (EPO/PPO/HDHP & RX)	17,900,835	19,258,426	(1,357,591)	(8%)	74,491,897	19,258,426	55,233,471	74%
10 Projected Paid Claims: Dental	1,065,565	957,971	107,594	10%	4,368,146	957,971	3,410,175	78%
TOTAL CLAIMS DISBURSEMENTS	18,966,400	20,216,397	(1,249,997)	(7%)	78,860,043	20,216,397	58,643,646	74%
DISBURSEMENTS: Premiums								
11 Delta Dental DHMO	252,203	351,441	(99,238)	(39%)	1,008,809	351,441	657,368	65%
12 Vision Service Plan	173,364	186,377	(13,013)	(8%)	697,809	186,377	511,432	73%
13 Kaiser Permanente	7,578,416	7,199,023	379,393	5%	31,805,772	7,199,023	24,606,749	77%
TOTAL PREMIUM DISBURSEMENTS	8,003,983	7,736,841	267,142	3%	33,512,390	7,736,841	25,775,549	77%
TOTAL DISBURSEMENTS	28,649,947	29,588,388	(938,441)	(3%)	119,307,353	29,588,388	89,718,965	75%
14 Change in Reserve	1,703,082	(2,684,562)	(4,387,644)	(258%)	4,109,619	(2,684,562)	(6,794,181)	(165%)
COMBINED DISBURSEMENTS & CHANGES IN RESERVES	30,353,029	26,903,826	(\$3,449,203)	(11%)	123,416,972	\$26,903,826	(\$96,513,146)	(78%)

*The approved budget contains assumptions that may differ throughout the fiscal year. The budget amounts presented in this report were revised and approved on the 7/23/2021 Board Meeting.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
ANALYSIS OF ADMINISTRATION, WELLNESS & COMMUNICATIONS (FEES) - RECEIPTS & DISBURSEMENTS
AS OF September 30, 2021
(UNAUDITED)

	Current Quarter			Year-To-Date		
	SJVIA FEES			SJVIA FEES		
	Administration (*Line 5)	Wellness (*Line 6)	Communications (*Line 7)	Administration (Line 5)	Wellness (Line 6)	Communications (Line 7)
FY 20-21						
Receipts*	40,323			40,323		
Disbursements:						
Auditor-Treasurer Services	\$ 24,470			\$ 24,470		
Legal Services (CoF & CoT)	3,455			3,455		
Litigation	17,862			17,862		
Human Resource Services	-			-		
Insurance (Liability, Bond, Etc)	45,616			45,616		
Audit Fees	1,850			1,850		
Bank Service Fees	7,222			7,222		
Wellness		-			-	
Communications			-			-
Total Disbursements**	\$ 100,475	\$ -	\$ -	\$ 100,475	\$ -	\$ -
Change in Administration, Wellness & Communications Reserve	\$ (60,152)	\$ -	\$ -	\$ (60,152)	\$ -	\$ -

*Receipts consist of fees collected from relevant enrollees at the following rates per employee per month: Various rates for administration(\$2.00 for SJVIA administration fees & various rates for non-founding member fees depending upon a participant's enrollment), \$2.50 for wellness & \$.50 for communications fees.

**Total disbursements for each column correspond to the line number shown on the "ACTUALS VS. BUDGETED RECEIPTS & DISBURSEMENTS" report.

San Joaquin Valley Insurance Authority
Schedule of Cash Flows by Month
As of September 30, 2021
(UNAUDITED)

	JULY	AUGUST	SEPTEMBER	TOTAL
BEGINNING CASH BALANCES:				
Claims Funding Account (294)	\$ 783,504	\$ 860,143	\$ 406,000	\$ 783,504
Claims Main Account (819)	2,389,649	1,863,340	2,924,157	2,389,649
Investment Pool	<u>30,329,502</u>	<u>31,125,059</u>	<u>31,980,077</u>	<u>30,329,502</u>
Total Beginning Balances	33,502,655	33,848,542	35,310,234	33,502,655
RECEIPTS:				
Claims Funding Account (294)	4,610,396	4,881,204	5,439,794	14,931,394
Claims Main Account (819)	8,732,754	11,707,330	9,409,904	29,849,987
Investment Pool	<u>6,795,557</u>	<u>9,855,018</u>	<u>6,505,006</u>	<u>23,155,580</u>
	20,138,707	26,443,552	21,354,704	67,936,961
DISBURSEMENTS:				
Claims Funding Account (294)	4,533,757	5,335,347	5,303,005	15,172,109
Claims Main Account (819)	9,259,063	10,646,513	10,139,116	30,044,692
Investment Pool	<u>6,000,000</u>	<u>9,000,000</u>	<u>6,000,000</u>	<u>21,000,000</u>
TOTAL DISBURSEMENTS	19,792,820	24,981,860	21,442,121	66,216,801
ENDING CASH BALANCES:				
Claims Funding Account (294)	860,143	406,000	542,789	542,789
Claims Main Account (819)	1,863,340	2,924,157	2,194,945	2,194,945
Investment Pool	<u>31,125,059</u>	<u>31,980,077</u>	<u>32,485,083</u>	<u>32,485,083</u>
Total Ending Balances	<u>\$ 33,848,542</u>	<u>\$ 35,310,234</u>	<u>\$ 35,222,817</u>	<u>\$ 35,222,817</u>
Less Outstanding Checks				(810,527)
Double Booked Entry				<u>8,205</u>
TOTAL CASH				<u>\$ 34,404,085</u>

Glossary of Terms:

Specific Stop Loss Insurance (PPO)

Specific: Insurance coverage for eligible individual specific claims in excess of the \$450,000 plan year deductible

Administration & Network Fees (Anthem EPO/PPO/HDHP):

Administrative services for the EPO/PPO/HDHP plans. Anthem Blue Cross administration fees to process claims, access the Anthem PPO network of providers, and Anthem services including claims management, utilization management, and customer service.

EmpiRx Administration Fee (Anthem EPO/PPO):

Administrative services to process and adjudicate EPO/PPO prescription drug claims. EmpiRx administration fee also includes prescription drug plan discount pricing, clinical management, utilization review, and customer service.

Keenan Pharmacy Services (Anthem EPO/PPO):

Consulting fee service for the negotiations of the PBM contract, preparing prescription drug plan performance reports, audit of PBM performance including: prescription drug rebates, prescription drug pricing performance standards, and claims adjudication accuracy.

Myworkplace (Hourglass) Administration

An independent vendor providing consolidated billing, eligibility and automated enrollment services.

ASI Administration

An independent vendor providing COBRA/retiree billing, and Section 125 administrative services.

Keenan Consulting

Keenan is a benefits consulting and brokerage firm who provides professional guidance to SJVIA and respective members concerning health plan matters including but not limited to compliance, underwriting, renewal bidding, employee communication, cost analysis, actuarial, etc.

SJVIA Association Fee

The association fee is used by SJVIA for administrative, management, legal, accounting and other services needed to effectively establish and maintain proper functioning of the Joint Powers Authority.

SJVIA Non-Founding Member Fee

This fee is assessed to non-founding member entities and is used to offset administrative, management, legal, accounting and other services needed to effectively establish and maintain proper functioning of the Joint Powers Authority.

Wellness (EPO/PPO/HDHP/Kaiser)

SJVIA provides wellness services and a financial allocation for each member entity's wellness program based on available funds.

Communications

SJVIA provides funding for member communication campaigns and special employee communication materials. It may include fees for maintaining a presence at such trade associations as CAJPA, CALPELRA, etc.

ACA Reinsurance/PCORI (EPO/PPO)

The Affordable Care Act (ACA) includes the Patient Centered Outcomes Research Institute (PCORI) fee. No fee announced for 2020, may be reinstated in the future.

98point6

A text based app allowing SJVIA members to have a text-based/virtual based visit with a provider at no cost to the individual member.

Conference Allowance

Conference Allowance for SJVIA staff and Board members to attend conferences which will benefit the SJVIA.

Delta Dental Claims Administration

Administrative services for the dental plans. Delta Dental administration fees to process claims, access the PPO network of providers, and Delta Dental services including claims management, utilization management, and customer service.

Projected Incurred Claims EPO/PPO/HDHP & Rx

Projected self-insured paid claims for medical and prescription drugs and any adjustment to the Incurred But Not Reported (IBNR) reserve

Projected Incurred Claims Dental

Projected self-insured paid claims for dental and any adjustment to the Incurred But Not Reported (IBNR) reserve

Delta Dental

Premium for entities covered under the SJVIA's fully-insured Delta Dental DHMO program

VSP

Premium for entities covered under the SJVIA's fully-insured VSP Vision program

Kaiser Permanente

Premium for entities covered under the SJVIA's fully-insured Kaiser HMO and DHMO program

Kaiser Permanente - Senior Advantage

Premium for entities covered under the SJVIA's fully-insured Kaiser Senior Advantage program



San Joaquin Valley
Insurance Authority

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Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item #10

SUBJECT: Receive the 2021 Audited Financial Statements (I)

REQUEST(S): That the Board receives the 2020-2021 Audited Financial Statements.

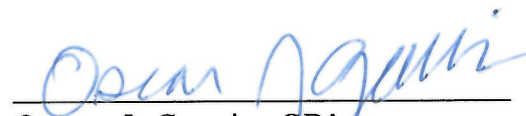
DESCRIPTION:

Informational item. Please see attached report.

FISCAL IMPACT/FINANCING:

None.

ADMINISTRATIVE SIGN-OFF:



Oscar J. Garcia, CPA
SJVIA Auditor-Treasurer

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

**FINANCIAL STATEMENTS WITH
INDEPENDENT AUDITOR'S REPORT**

**FOR THE YEAR ENDED
JUNE 30, 2021**

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

JUNE 30, 2021

TABLE OF CONTENTS

	<u>PAGE</u>
INDEPENDENT AUDITOR'S REPORT	1
BASIC FINANCIAL STATEMENTS:	
STATEMENT OF NET POSITION	4
STATEMENT OF REVENUES, EXPENSES AND CHANGES IN NET POSITION	5
STATEMENT OF CASH FLOWS	6
NOTES TO THE BASIC FINANCIAL STATEMENTS	8
REQUIRED SUPPLEMENTARY INFORMATION:	
CLAIMS DEVELOPMENT INFORMATION	18
OTHER INDEPENDENT AUDITOR'S REPORT:	
INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH <i>GOVERNMENT AUDITING STANDARDS</i>	23
SCHEDULE OF FINDINGS AND RESPONSES	25



INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
San Joaquin Valley Insurance Authority
Fresno, California

Report on the Financial Statements

We have audited the accompanying financial statements of San Joaquin Valley Insurance Authority (the Authority), a component unit of the County of Fresno, California, as of and for the year ended June 30, 2021, and the related notes to the financial statements, which collectively comprise the Authority's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express opinions on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Authority's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Authority's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

570 N. Magnolia Avenue, Suite 100
Clovis, CA 93611

tel 559.299.9540
fax 559.299.2344

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the San Joaquin Valley Insurance Authority, as of June 30, 2021, and the respective changes in financial position, and cash flows thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Required Supplementary Information

Management has omitted the management's discussion and analysis that accounting principles generally accepted in the United States of America require to be presented to supplement the basic financial statements. Such missing information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. Our opinion on the basic financial statements is not affected by this missing information.

Accounting principles generally accepted in the United States of America require that the Claims Development Information on pages 18-19 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated January 12, 2022, on our consideration of the Authority's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Authority's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Authority's internal control over financial reporting and compliance.



Clovis, California
January 12, 2022

BASIC FINANCIAL STATEMENTS

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

STATEMENT OF NET POSITION
JUNE 30, 2021

ASSETS

Current Assets:

Cash and cash equivalents	\$ 1,960,993
Intergovernmental receivables	4,174,779
Investment income receivable	199,126
Prepaid expenses	<u>7,744</u>

Total current assets 6,342,642

Noncurrent Assets:

Investments 30,329,502

Total noncurrent assets 30,329,502

Total assets 36,672,144

LIABILITIES

Current Liabilities:

Accounts payable	2,192,653
Intergovernmental payables	29,819
Unearned member contributions	4,925,154
Unpaid claims and claims adjustment expenses	<u>7,281,020</u>

Total current liabilities 14,428,646

Noncurrent Liabilities:

Intergovernmental interest payable	730,820
Intergovernmental loans payable	9,000,000
Intergovernmental payables	<u>884,432</u>

Total noncurrent liabilities 10,615,252

Total liabilities 25,043,898

NET POSITION

Unrestricted:

Stabilization reserve	12,120,904
Unrestricted (deficit)	<u>(492,658)</u>

Total net position \$ 11,628,246

The notes to the basic financial statements are an integral part of this statement.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

STATEMENT OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
FOR THE YEAR ENDED JUNE 30, 2021

Operating revenues:	
Member contributions	\$ 91,438,330
Total operating revenues	<u>91,438,330</u>
Operating expenses:	
Claims and claims adjustment expenses	77,558,202
Administrative expenses	<u>5,431,701</u>
Total operating expenses	<u>82,989,903</u>
Operating income (loss)	<u>8,448,427</u>
Nonoperating revenues (expenses):	
Interest revenue	405,864
Interest expense	<u>(135,925)</u>
Total nonoperating revenues (expenses)	<u>269,939</u>
Change in net position	8,718,366
Net position, beginning of year	<u>2,909,880</u>
Net position, end of year	<u>\$ 11,628,246</u>

The notes to the basic financial statements are an integral part of this statement.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED JUNE 30, 2021

Cash flows from operating activities:	
Cash received from members	\$ 123,279,304
Cash received from reinsurance and refunds	2,537,822
Cash paid to vendors	(5,340,768)
Cash paid for claims	<u>(110,552,444)</u>
Net cash provided by (used in) operating activities	<u>9,923,914</u>
Cash flows from investing activities:	
Purchase of investments	<u>(11,252,659)</u>
Net cash provided by (used in) investing activities	<u>(11,252,659)</u>
Net increase (decrease) in cash and cash equivalents	(1,328,745)
Cash and cash equivalents - beginning	<u>3,289,738</u>
Cash and cash equivalents - ending	<u><u>\$ 1,960,993</u></u>
Supplemental disclosure of cash flow information	
Cash paid for interest	<u><u>\$ 135,925</u></u>
Reconciliation of operating income (loss) to net cash provided by (used in) operating activities:	
Operating income (loss)	<u>\$ 8,448,427</u>
Adjustments to reconcile operating income (loss) to net cash provided by (used in) operating activities:	
(Increase) decrease in due from other governmental units	(158,015)
(Increase) decrease in other receivables	365,043
(Increase) decrease in deposits receivable	977,819
(Increase) decrease in prepaid expenses	(75)
Increase (decrease) in accounts payable	61,189
Increase (decrease) in due to other governmental units	29,819
Increase (decrease) in unpaid claims and claims adjustment expenses	<u>199,707</u>
Total adjustments	<u>1,475,487</u>
Net cash provided by (used in) operating activities	<u><u>\$ 9,923,914</u></u>

The notes to the basic financial statements are an integral part of this statement.

NOTES TO THE BASIC FINANCIAL STATEMENTS

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2021

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The accompanying financial statements are presented in conformity with accounting principles generally accepted in the United States of America for governmental units as prescribed by the Governmental Accounting Standards Board (GASB) and other authoritative sources.

In November 1989, GASB issued Statement No. 10, *Accounting and Financial Reporting for Risk Financing and Related Insurance Issues*. GASB Statement No. 10 establishes accounting and financial reporting standards for risk financing and insurance-related activities for state and local governmental entities, including public entity risk pools. These financial statements have been prepared in accordance with GASB Statement No. 10, as amended by GASB Statement No. 30, *Risk Financing Omnibus*.

A. Reporting Entity

On October 6, 2009, the County of Fresno and the County of Tulare entered into an agreement creating the San Joaquin Valley Insurance Authority (the Authority) to negotiate, purchase or otherwise fund health, vision, dental, and life insurance for the employees of the County of Fresno and certain employees of the County of Tulare, in all instances subject to obtaining a financial commitment by the County of Fresno and the County of Tulare to pay for their respective costs. Both counties desire to secure such coverage for the purpose of obtaining other coverage and/or insurance policies at more favorable rates, and for the purpose of administering such insurance programs with greater efficiency, than they could obtain by their individual efforts.

The Authority is governed by the Board of Directors which is composed of seven directors. Four of the directors are appointed by the County of Fresno Board of Supervisors and three of the directors are appointed by the County of Tulare Board of Supervisors. The Board of Directors, President and Vice President serve two-year terms. The County of Fresno or the County of Tulare may withdraw from the Authority by giving 120 days written notice to the Board of Directors. Upon the dissolution, all assets of the Authority will be distributed among the County of Fresno and the County of Tulare in proportion to their cash contributions.

The Authority's Board of Directors voted to keep health insurance costs neutral and moved from a claims-servicing pool to a risk-sharing pool and insurance-purchasing pool effective January 1, 2012. The result is that the claims experience of all member entities is pooled and risk is shared among all members, or the risk is transferred to commercial insurers by purchasing insurance. The County of Fresno and the County of Tulare have transferred their reserve funding for incurred but not reported (IBNR) claims to the Authority.

The Authority is legally separate from the County of Fresno (the County). However, the Authority is a component unit of the County due to the fact that the County appoints a voting majority of the Authority's board and, accordingly, can significantly influence the activities and level of services performed by the Authority.

The Authority itself does not employ any personnel. The County of Fresno and the County of Tulare staff provide the necessary services such as maintenance and accounting to the Authority on a reimbursement basis.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2021

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

A. Reporting Entity (Continued)

The Authority's Board of Directors has elected to open membership consideration to other public agencies to increase membership, further reduce imbedded overhead cost and leverage additional growth to improve the Authority's negotiating capabilities with plan vendors in California.

During this fiscal period, there were no new membership applications, and the City of Marysville has elected to terminate its partnership with the Authority. As of June 30, 2021, membership in the Authority consists of the County of Fresno and the County of Tulare, its founding entities.

B. Basis of Accounting

The Authority complies with Generally Accepted Accounting Principles (GAAP). The Authority's reporting entity applies all relevant Governmental Accounting Standards Board (GASB) pronouncements.

The Authority is a proprietary entity; it uses an enterprise fund format to report its activities for financial statement purposes. Proprietary Fund Financial Statements include a Statement of Net Position, a Statement of Revenues, Expenses and Changes in Net Position, and a Statement of Cash Flows.

Proprietary funds are accounted for using the "economic resources" measurement focus and the accrual basis of accounting. Accordingly, all assets and liabilities (whether current or noncurrent) are included on the Statement of Net Position. The Statement of Revenues, Expenses and Changes in Fund Net Position presents increases (revenues) and decreases (expenses) in total net position. Under the accrual basis of accounting, revenues are recognized in the period in which they are earned while expenses are recognized in the period in which the liability is incurred.

Operating revenues in the enterprise fund are those revenues that are generated from the primary operations of the Authority. These revenues include premiums for insurance coverage. All other revenues are reported as nonoperating revenues. Operating expenses are those expenses that are essential to the primary operations of the Authority. All other expenses are reported as nonoperating expenses.

When both restricted and unrestricted resources are available for use, it is the Authority's policy to use restricted resources first, then unrestricted resources as they are needed.

C. Basis of Presentation

The San Joaquin Valley Insurance Authority is a risk-sharing pool, acting as an insurer. As an insurer, operating statements should report member contributions as well as claims and administrative expenses.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2021

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

D. Assets, Liabilities and Net Position

1. Cash

For purposes of the Statement of Cash Flows, the Authority considered all cash in banks to be cash. This includes two active bank accounts with JPMorgan Chase Bank, one used for claims funding and the other for reserves.

2. Investments

Investments are recorded at fair value. Investment income is recorded as earned.

3. Intergovernmental Receivables

Certain revenues are earned by the Authority during the current reporting period but are not received until after the beginning of the next fiscal year. These revenues are reported as intergovernmental receivables on the financial statements.

4. Deposits Receivable

The Authority had made the required minimum claims deposit to Anthem Blue Cross. The full deposit amount of \$977,819 was returned to the Authority by Anthem Blue Cross during the fiscal year ending June 30, 2021.

5. Member Contributions

Each member is assessed a premium which is intended to cover the Authority's claims, operating costs, claim expenses and any premiums for any risk transferred to commercial insurers by purchasing insurance for the insurance programs. Premiums are based upon the approved rates by the Authority's Board of Directors. All premiums are recognized as revenue when earned, based upon the period covered by the premiums. In determining if a premium deficiency exists, the pool does not consider anticipated investment income.

6. Accounts Payable

Certain costs are incurred by the Authority during the current reporting period but are not paid until after the beginning of the next fiscal year. These costs are reported as payables on the financial statements. The Authority's current accounts payable balance of \$2,192,653 as of June 30, 2021, is related to certain contract services and payments for eligibility administration and consulting fees as well as amounts collected or due from pool participants and remitted to the insurance carriers. Adjustments to estimates are charged or credited to expense in the periods in which they are made.

7. Intergovernmental Payables

The County of Fresno has made a required minimum claims deposit of \$884,432 to Anthem Blue Cross on behalf of the Authority. The Authority will repay the County of Fresno after receiving refunds from Anthem Blue Cross. The full deposit amount of \$884,432 is recognized as a noncurrent intergovernmental payable as of June 30, 2021.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2021

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

D. Assets, Liabilities and Net Position (Continued)

8. Unpaid Claims and Claims Adjustment Expenses

The Authority establishes claims liabilities based on estimates of the ultimate cost of claims (including future claim adjustment expenses) that have been reported but not settled, and of claims that have been incurred but not reported (IBNR). Because actual claims costs depend on such complex factors as inflation, changes in doctrines of legal liability, and damage awards, the process used in computing claims liabilities does not necessarily result in an exact amount. Claims liabilities are recomputed periodically using a variety of actuarial and statistical techniques to produce current estimates that reflect recent settlements, claim frequency, and other economic and social factors. Adjustments to claims liabilities are charged or credited to expense in the periods in which they are made.

9. Reinsurance

In the ordinary course of business, the Authority reinsures certain risks with commercial insurers through contractual agreements, commonly referred to as reinsurance ceded. These agreements serve to limit the Authority's potential losses for large aggregate and individual losses. Reinsurance permits recovery of a portion of losses from reinsurers, although it does not discharge the primary liability of the Authority as direct insurer of the risks reinsured. A contingent liability exists with respect to reinsurance ceded to the extent that any reinsurer is unable to meet its obligation assumed under the reinsurance agreements. The Authority does not report reinsured risk as liabilities unless it is probable that those risks will not be covered by reinsurers. Premiums ceded to reinsurers during fiscal year 2021 was \$1,845,070, and the amounts recovered from reinsurers during fiscal year 2021 was \$692,752.

10. Intergovernmental Loans and Interest Payable

As of June 30, 2021, the Authority has obtained operating loans totaling \$5,000,000 from the County of Fresno and \$4,000,000 from the County of Tulare, each accruing interest at their County's respective treasury pool interest rates. The Authority's interest payable balance for these loans as of June 30, 2021 totals \$730,820. Both loans with interest are expected to be repaid by December 30, 2021 or earlier if sufficient funds are available.

11. Net Position

Net position is reported in three categories as follows:

Net Investment in capital assets – This amount consists of capital assets net of accumulated depreciation and reduced by outstanding debt that attributed to the acquisition.

Restricted – This amount is restricted by external creditors, grantors, contributors, or laws or regulations of other governments.

Unrestricted – This amount represents all resources that do not meet the definition of "net investment in capital assets" or "restricted net position."

12. Use of Estimates

The preparation of financial statements in conformity with Generally Accepted Accounting Principles (GAAP) requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2021

NOTE 2 – CASH AND CASH EQUIVALENTS

A. Summary of Deposits

Cash and cash equivalents as of June 30, 2021 are classified in the accompanying financial statements as follows:

Statement of net position:	
Cash and cash equivalents	<u>\$ 1,960,993</u>
Total cash and cash equivalents	<u>\$ 1,960,993</u>

Cash and cash equivalents as of June 30, 2021 consist of the following:

Deposits with financial institutions	<u>\$ 1,960,993</u>
Total cash and cash equivalents	<u>\$ 1,960,993</u>

B. Custodial Credit Risk

Custodial credit risk for deposits is the risk that, in the event of the failure of a depository financial institution, a government will not be able to recover its deposits or will not be able to recover collateral securities that are in the possession of an outside party. The California Government Code and the Authority's investment policy do not contain legal or policy requirements that would limit the exposure to custodial credit risk for deposits, other than the following provision for deposits: The California Government Code requires that a financial institution secure deposits made by state or local governmental units by pledging securities in an undivided collateral pool held by a depository regulated under state law (unless so waived by the governmental unit). The market value of the pledged securities in the collateral pool must equal at least 110% of the total amount deposited by the public agencies.

As of June 30, 2021, the Authority's deposits with financial institutions in excess of federal depository insurance limits were held in fully collateralized accounts, as permitted by the California Government Code.

NOTE 3 – INTERGOVERNMENTAL RECEIVABLES

The Authority's current intergovernmental receivables balance of \$4,174,779 as of June 30, 2021 is related to insurance premiums, claims reserve, eligibility administration service fees, consulting fees and other administrative fees due from the County of Fresno. As of June 30, 2021, all of the intergovernmental receivables are considered by management to be collectible. Therefore, no allowance for doubtful accounts has been recognized.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2021

NOTE 4 – INVESTMENTS

Investments authorized by the Authority's Investment Policy at June 30, 2021 consist of the following:

External Investment pool – Fresno County	
Treasury Investment Pool	\$18,207,097
Stabilization Reserve	<u>12,122,405</u>
 Total investments	 <u>\$30,329,502</u>

Information about the Fresno County Treasury Investment Pool can be found in the County's annual comprehensive financial report which is available on the County's website.

NOTE 5 – RECONCILIATION OF CLAIMS LIABILITIES

Liabilities for claims are based on undiscounted estimates of the ultimate net cost of settling all claims, which are incurred but unpaid at year-end, including claims incurred but not reported. The following represents changes in liabilities for the Authority during the fiscal years ended June 30:

	<u>2021</u>	<u>2020</u>
Unpaid claims and claim adjustment expenses at beginning of year	\$ 7,081,313	\$ 6,924,679
Incurred claims and claim adjustment expenses:		
Provision for insured events of current year	<u>77,558,202</u>	<u>72,398,701</u>
Total incurred claims and claim adjustment expense	<u>77,558,202</u>	<u>72,398,701</u>
Payments:		
Claims and claim adjustment expenses attributable to insured events of current year	70,277,182	65,317,249
Claims and claim adjustment expenses attributable to insured events of prior years	<u>7,081,313</u>	<u>6,924,818</u>
Total payment	<u>77,358,495</u>	<u>72,242,067</u>
Total unpaid claims and claim adjustment expenses at end of the year	<u>\$ 7,281,020</u>	<u>\$ 7,081,313</u>

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2021

NOTE 6 – LONG-TERM LIABILITIES

Long-term liability activity for the year ended June 30, 2021 were as follows:

	Beginning Balance	Additions	Reductions	Ending Balance
Interest Payable	\$ 594,895	\$ 135,925		730,820
Loans Payable	9,000,000	-	-	9,000,000
Intergovernmental Payables	<u>884,432</u>	<u>-</u>	<u>-</u>	<u>884,432</u>
Total	<u>\$ 10,479,327</u>	<u>\$ 135,925</u>	<u>\$ -</u>	<u>\$ 10,615,252</u>

As of June 30, 2020, the Authority had obtained operating loans totaling \$5,000,000 from the County of Fresno and \$4,000,000 from the County of Tulare. The loans are expected to be repaid by December 30, 2021 (fiscal year 2022) or earlier if sufficient funds are available, each accruing interest at their County's respective treasury pool interest rates. As of June 30, 2021, the interest rates were 1.398% for the County of Fresno and 1.07% for the County of Tulare. These rates vary quarterly since the Counties invest public funds in a manner, which will provide a market average rate of return consistent with the objectives of the Authority's Investment Policy while meeting the daily cash flow demands of the County's Treasuries and conform to all state laws governing the investment of public funds.

Since the Authority plans to repay the full loan principal amount with accrued interest in fiscal year 2022, estimated annual debt service requirements for the loan are demonstrated in the table below. Note that calculated total interest equals the current amount of accrued interest and projected interest expense accruals based on current treasury rates up to the loan repayment date.

Annual debt service requirements for the loan are as follows:

Year Ending June 30	County of Fresno Principal	County of Tulare Principal	Interest
2022	<u>\$ 5,000,000</u>	<u>\$ 4,000,000</u>	<u>\$ 763,945</u>
Total	<u>\$ 5,000,000</u>	<u>\$ 4,000,000</u>	<u>\$ 763,945</u>

NOTE 7 – COMMITMENTS AND CONTINGENCIES

Commitments and contingencies, undeterminable in amount, include normal recurring pending claims and litigation. In the opinion of management, based upon discussion with legal counsel, there is no pending litigation, which is likely to have a material adverse effect on the financial position of the Authority.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2021

NOTE 8 – UNCERTAINTY

On March 11, 2020 the World Health Organization declared the outbreak of a coronavirus, COVID-19, a pandemic. The COVID-19 pandemic is ongoing. Accordingly, some functions of the Organization's operations were limited to protect the health and safety of its employees. The financial impact that could occur as a result of the pandemic is unknown at this time.

NOTE 9 – RISK MANAGEMENT

The Authority is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; and errors and omission. During the year ended June 30, 2021, the Authority carried insurance through various commercial carriers for all risks of losses. No settlements have exceeded coverage levels in place during the fiscal year ended June 30, 2021.

The Authority participated in the following insurance coverage programs with various commercial carriers:

<u>Coverage Type</u>	<u>Description</u>	<u>Limit</u>	<u>Deductible</u>
Master Crime Policy	Coverage is provided for incidents such as public employee dishonesty, forgery or alteration, theft, computer fraud and embezzlement.	\$15 Million	\$ 25,000
Trustees Errors & Omissions	Fiduciary liability insurance is a popular vehicle for the financial protection of fiduciaries of employee benefit plans against legal liability arising out of their role as fiduciaries, including the cost of defending those claims that seek to establish such liability. Coverage is provided for incidents such as miscalculation, a class action lawsuit, and enrollment errors.	\$10 Million	\$ 25,000
Special Liability	This program provides coverage for claims from third parties alleging damages due to negligence arising out of personal injury and property damage.	\$10 Million	\$ 1,000
Fiduciary Liability	Pays the legal liability arising from claims for alleged failure to act prudently. Protects the assets of a plan fiduciary due to allegations of breach of fiduciary duties. ERISA explicitly allows for the purchase of fiduciary insurance. It could be a breach of fiduciary duty if a claim arises and no insurance is in place that was readily available.	\$5 Million	\$ 25,000

NOTE 10 – SUBSEQUENT EVENTS

Management has evaluated and concluded that there are no other subsequent events that have occurred from June 30, 2021 through the date the financials were available to be issued at January 12, 2022, that would require disclosure or adjustment.

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REQUIRED SUPPLEMENTARY INFORMATION

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

CLAIMS DEVELOPMENT INFORMATION
JUNE 30, 2021

The following table illustrates how the Authority's earned revenue (net of reinsurance) and investment income compares to related costs of loss (net of loss assumed by reinsurers) and other expenses assumed by the Authority as of the end of the previous five fiscal years. Note that only six months of activity is shown for the fiscal year 2012 since the period for which the Authority used a risk-sharing pool was only six months from January 1, 2012 through June 30, 2012. The rows of the table are defined as follows:

- (1) This line shows the total of each fiscal year's gross earned contribution revenue and investment revenue, contribution revenue ceded to reinsurers, and net earned contribution revenue and reported investment revenue.
- (2) This line shows each fiscal year's other operating costs of the Authority including overhead and claims expenses.
- (3) This line shows the Authority's gross incurred claims and allocated claim adjustment expenses, claims assumed by reinsurers, and net incurred claims and allocated adjustment expense (both paid and accrued) as originally reported at the end of the year in which the event that triggered coverage occurred (called fiscal year).
- (4) This section of one row shows the cumulative net amounts paid as of the end of successive years for each fiscal year.
- (5) This line shows the latest re-estimated amount of claims assumed by reinsurers as of the end of current year for each fiscal year.
- (6) This section of one row shows how each fiscal year's net incurred losses increased or decreased as of the end of successive years. (This annual re-estimation results from new information received on known claims, reevaluation of existing information on known claims, and emergence of new claims not previously known.)
- (7) This line compares the latest re-estimated net incurred claims amount to the amount originally established (line 3) and shows whether this latest estimate of losses is greater or less than originally thought. As data for individual fiscal years mature, the correlation between original estimates and re-estimated amounts is commonly used to evaluate the accuracy of net incurred claims currently recognized in less mature fiscal years. The columns of the table show data for successive fiscal years.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

CLAIMS DEVELOPMENT INFORMATION
JUNE 30, 2021

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
(1) Required contribution and investment revenue:										
Earned	\$ 37,177,277	\$ 71,106,229	\$ 83,391,236	\$ 89,887,953	\$ 110,381,036	\$ 101,397,579	\$ 80,398,094	\$ 82,018,812	\$ 91,839,197	\$ 93,964,685
Ceded	953,519	1,911,418	1,940,663	2,244,758	2,761,514	2,235,292	1,881,130	1,263,754	1,970,531	1,845,070
Net earned	36,223,758	69,194,811	81,450,573	87,643,195	107,619,522	99,162,287	78,516,964	80,755,058	89,868,666	92,119,615
(2) Unallocated expenses	2,385,290	5,000,268	6,159,114	6,917,501	7,622,465	6,308,763	5,709,359	6,362,834	7,349,777	5,431,701
(3) Estimated claims and expenses, end of fiscal year:										
Incurred	30,233,575	67,195,841	75,886,191	86,497,444	111,419,173	98,934,822	68,802,180	70,424,244	72,853,476	78,250,954
Ceded	249,031	1,555,632	1,362,659	1,302,386	198,626	323,314	99,361	554,547	454,775	692,752
Net incurred	29,984,544	65,640,209	74,523,532	85,195,058	111,220,547	98,611,508	68,702,819	69,869,697	72,398,701	77,558,202
(4) Net paid (cumulative) as of:										
End of fiscal year	23,901,668	57,532,430	67,720,407	77,594,079	100,151,412	92,775,406	65,559,526	72,139,822	71,812,035	72,847,735
One year later	28,318,935	63,725,119	77,893,672	81,850,351	100,151,412	92,775,406	65,559,526	72,139,822	71,812,035	-
Two years later	27,175,135	63,726,540	77,893,672	81,850,351	100,151,412	92,775,406	65,559,526	72,139,822	-	-
Three years later	27,175,135	63,726,540	77,893,672	81,850,351	100,151,412	92,775,406	65,559,526	-	-	-
Four years later	27,175,135	63,726,540	77,893,672	81,850,351	100,151,412	92,775,406	-	-	-	-
Five years later	27,157,135	63,726,540	77,893,672	81,850,351	100,151,412	-	-	-	-	-
Six years later	27,157,135	63,726,540	77,893,672	81,850,351	-	-	-	-	-	-
Seven years later	27,157,135	63,726,540	77,893,672	-	-	-	-	-	-	-
Eight years later	27,157,135	63,726,540	-	-	-	-	-	-	-	-
Nine years later	27,157,135	-	-	-	-	-	-	-	-	-
(5) Reestimated ceded claims and expenses	249,031	1,555,632	1,362,659	1,302,386	198,626	323,314	99,361	554,547	454,775	692,752
(6) Reestimated net incurred claims and expenses:										
End of fiscal year	29,984,544	65,640,209	74,523,532	85,195,058	111,220,547	98,611,508	68,702,819	69,869,697	72,398,701	77,558,202
One year later	28,324,433	63,726,540	74,523,532	85,195,058	111,220,547	98,611,508	68,702,819	69,869,697	72,398,701	-
Two years later	27,175,135	63,726,540	74,523,532	85,195,058	111,220,547	98,611,508	68,702,819	69,869,697	-	-
Three years later	27,175,135	63,726,540	74,523,532	85,195,058	111,220,547	98,611,508	68,702,819	-	-	-
Four years later	27,175,135	63,726,540	74,523,532	85,195,058	111,220,547	98,611,508	-	-	-	-
Five years later	27,175,135	63,726,540	74,523,532	85,195,058	111,220,547	-	-	-	-	-
Six years later	27,175,135	63,726,540	74,523,532	85,195,058	-	-	-	-	-	-
Seven years later	27,175,135	63,726,540	74,523,532	-	-	-	-	-	-	-
Eight years later	27,175,135	63,726,540	-	-	-	-	-	-	-	-
Nine years later	27,175,135	-	-	-	-	-	-	-	-	-
(7) Increase (decrease) in estimated net incurred losses and expenses from end of fiscal year	\$ (2,809,409)	\$ (1,913,669)	\$ (2,809,409)	\$ (1,913,669)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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OTHER INDEPENDENT AUDITOR'S REPORT

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INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS
BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN
ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Directors
San Joaquin Valley Insurance Authority
Fresno, California

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the San Joaquin Valley Insurance Authority (the Authority), a component unit of the County of Fresno, California, as of and for the year ended June 30, 2021, and the related notes to the financial statements, which collectively comprise the Authority's basic financial statements, and have issued our report thereon dated January 12, 2022.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Authority's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Authority's internal control. Accordingly, we do not express an opinion on the effectiveness of the Authority's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the Authority's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

570 N. Magnolia Avenue, Suite 100
Clovis, CA 93611

tel 559.299.9540
fax 559.299.2344

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Authority's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Authority's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Authority's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

A handwritten signature in blue ink that reads "Price Paige & Company". The signature is written in a cursive, flowing style.

Clovis, California
January 12, 2022

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA

SCHEDULE OF FINDINGS AND RESPONSES
FOR THE YEAR ENDED JUNE 30, 2021

SECTION I – SUMMARY OF AUDITOR'S RESULTS

Financial Statements

Type of auditor's report issued

Unmodified

Internal control over financial reporting:

Material weaknesses identified?

_____ yes

_____ X _____ no

Significant deficiencies identified that are not
considered to be material weaknesses?

_____ yes

_____ X _____ none reported

Noncompliance material to financial
statement noted?

_____ yes

_____ X _____ no

SECTION II – FINANCIAL STATEMENT FINDINGS

None reported.

**BOARD OF DIRECTORS**

STEVE BRANDAU

NATHAN MAGSIG

BUDDY MENDES

LARRY MICARI

BRIAN PACHECO

AMY SHUKLIAN

PETE VANDER POEL

Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 11

SUBJECT: Receive Preliminary Budget for Fiscal Year 2022-2023 (I)

REQUEST(S): That the Board receive the preliminary 2022-2023 Fiscal Year Budget.

DESCRIPTION:

The SJVIA has traditionally adopted a July 1st to June 30th fiscal year budget. Projected revenue and expenditures for all plans are included for entities currently participating in the SJVIA.

The preliminary budget includes fixed costs established as of January 1, 2022, forecasted enrollment, projected paid claims, and projected fixed costs for the July 1, 2022 – June 30, 2023 budget period.

Staff will come back at the July 2022 SJVIA Board Meeting for final Board approval of the Fiscal Year 2022-2023 Budget.

FISCAL IMPACT/FINANCING:

This budget proposes the revenue and expense projections at \$121,406,891 and \$115,946,636 respectively, for a \$5,460,255 surplus position for the 2022-2023 fiscal year.

ADMINISTRATIVE SIGN-OFF:

A handwritten signature in dark ink, reading "Hollis Magill".

Hollis Magill
SJVIA Manager

A handwritten signature in dark ink, reading "Lupe Garza".

Lupe Garza
SJVIA Assistant Manager

SAN JOAQUIN VALLEY INSURANCE AUTHORITY

2022/2023 FISCAL YEAR PRELIMINARY BUDGET - 02.18.22

	July 1, 2022 - Dec 31,2022	Jan 1, 2023 - June 30, 2023	July 1, 2022 - June 30, 2023
RECEIPTS			
SJVIA Health Plan Revenue	\$ 59,806,350	\$ 61,600,541	\$ 121,406,891
DISBURSEMENTS: Fixed			
1 Specific Stop Loss Insurance (EPO/PPO/HDHP)	\$ 732,239	\$ 842,075	\$ 1,574,314
2 Anthem Claims Administration & Network Fees (EPO/PPO/HDHP)	\$ 1,772,268	\$ 1,825,436	\$ 3,597,704
3 EmpiRx Administration Fee (EPO/PPO)	\$ 131,454	\$ 131,454	\$ 262,909
4 Keenan Pharmacy Services Fee (EPO/PPO)	\$ 75,753	\$ 75,753	\$ 151,507
5 Myworkplace (Hourglass) Administration	\$ 150,926	\$ 150,926	\$ 301,851
6 ASI Administration	\$ 72,072	\$ 72,072	\$ 144,144
7 Keenan Consulting	\$ 158,060	\$ 158,060	\$ 316,120
8 SJVIA Association	\$ 109,764	\$ 109,764	\$ 219,528
9 Wellness	\$ 137,205	\$ 137,205	\$ 274,410
10 Communications	\$ 27,441	\$ 27,441	\$ 54,882
11 Delta Dental Claims Administration	\$ 183,623	\$ 189,131	\$ 372,754
12 ACA Reinsurance/PCORI (EPO/PPO/HDHP)	\$ 16,906	\$ 17,160	\$ 34,066
TOTAL FIXED DISBURSEMENTS	\$ 3,567,711	\$ 3,736,478	\$ 7,304,189
DISBURSEMENTS: Claims			
13 Projected Paid Claims EPO/PPO/HDHP & RX	\$ 38,419,003	\$ 40,339,954	\$ 78,758,957
14 Projected Paid Claims Dental	\$ 2,220,365	\$ 2,286,976	\$ 4,507,340
TOTAL CLAIMS DISBURSEMENTS	\$ 40,639,368	\$ 42,626,929	\$ 83,266,297
DISBURSEMENTS: Premium			
15 Delta Dental DHMO	\$ 406,604	\$ 418,802	\$ 825,405
16 VSP	\$ 307,245	\$ 316,462	\$ 623,706
17 Kaiser Permanente	\$ 11,652,563	\$ 12,235,191	\$ 23,887,754
18 Kaiser Permanente - Senior Advantage	\$ 19,163	\$ 20,121	\$ 39,284
TOTAL PREMIUM DISBURSEMENTS	\$ 12,385,574	\$ 12,990,576	\$ 25,376,150
TOTAL DISBURSEMENTS	\$ 56,592,654	\$ 59,353,983	\$ 115,946,636
Balance	\$ 3,213,697	\$ 2,246,558	\$ 5,460,255

Glossary of Terms:

1 **Specific Stop Loss Insurance (EPO/PPO/HDHP)**

Specific: Insurance coverage for eligible individual specific claims in excess of the \$450,000 plan year deductible

2 **Administration & Network Fees (Anthem EPO/PPO/HDHP):**

Administrative services for the EPO/PPO/HDHP plans. Anthem Blue Cross administration fees to process claims, access the Anthem PPO network of providers, and Anthem services including claims management, utilization management, and customer service.

3 **EmpiRx Administration Fee (Anthem EPO/PPO):**

Administrative services to process and adjudicate EPO/PPO prescription drug claims. EmpiRx administration fee also includes prescription drug plan discount pricing, clinical management, utilization review, and customer service.

4 **Keenan Pharmacy Services (Anthem EPO/PPO):**

Consulting fee service for the negotiations of the PBM contract, preparing prescription drug plan performance reports, audit of PBM performance including: prescription drug rebates, prescription drug pricing performance standards, and claims adjudication accuracy.

5 **Myworkplace (Hourglass) Administration**

An independent vendor providing consolidated billing, eligibility and automated enrollment services.

6 **ASI Administration**

An independent vendor providing COBRA/retiree billing, and Section 125 administrative services.

7 **Keenan Consulting**

Keenan is a benefits consulting and brokerage firm who provides professional guidance to SJVIA and respective members concerning health plan matters including but not limited to compliance, underwriting, renewal bidding, employee communication, cost analysis, actuarial, etc.

8 **SJVIA Association Fee**

The association fee is used by SJVIA for administrative, management, legal, accounting and other services needed to effectively establish and maintain proper functioning of the Joint Powers Authority.

SJVIA Non-Founding Member Fee

This fee is assessed to non-founding member entities and is used to offset administrative, management, legal, accounting and other services needed to effectively establish and maintain proper functioning of the Joint Powers Authority.

9 **Wellness (EPO/PPO/HDHP/Kaiser)**

SJVIA provides wellness services and a financial allocation for each member entity's wellness program based on available funds.

10 **Communications (EPO/PPO/HDHP/Kaiser)**

SJVIA provides funding for member communication campaigns and special employee communication materials. It may include fees for maintaining a presence at such trade associations as CAJPA, CALPELRA, etc.

11 **Delta Dental Claims Administration**

Administrative services for the dental plans. Delta Dental administration fees to process claims, access the PPO network of providers, and Delta Dental services including claims management, utilization management, and customer service.

12 **ACA Reinsurance/PCORI (EPO/PPO/HDHP)**

The Affordable Care Act (ACA) includes the Patient Centered Outcomes Research Institute (PCORI) fee.

13 **Projected Paid Claims EPO/PPO/HDHP & Rx**

Projected self-insured paid claims for medical and prescription drugs

14 **Projected Paid Claims Dental**

Projected self-insured paid claims for dental

15 **Delta Dental DHMO**

Premium for entities covered under the SJVIA's fully-insured Delta Dental DHMO program

16 **VSP**

Premium for entities covered under the SJVIA's fully-insured VSP Vision program

17 **Kaiser Permanente**

Premium for entities covered under the SJVIA's fully-insured Kaiser HMO and DHMO program

18 **Kaiser Permanente - Senior Advantage**

Premium for entities covered under the SJVIA's fully-insured Kaiser Senior Advantage program

**BOARD OF DIRECTORS**

STEVE BRANDAU
NATHAN MAGSIG
BUDDY MENDES
LARRY MICARI
BRIAN PACHECO
AMY SHUKLIAN
PETE VANDER POEL

Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 12

SUBJECT: Receive Consultant's Medical, Dental, and Vision Experience Reports through December 2021 with Update on Projected Plan Experience Surplus Accumulation and Projections (I)

REQUEST(S): That the Board receive the consultant's medical, dental, and vision experience report through December 2021 and update on projected plan experience accumulation.

DESCRIPTION:

The consultant's report shows that on a total cost basis from January through December 2021, the total self-insured medical cost of \$82,645,642 exceeded medical total premium of \$81,247,360 for a deficit accumulation of -\$1,398,283, or a 101.7% loss ratio. It is important to note that plan experience during the COVID-19 pandemic is unprecedented as well as how the plan experience will react after the pandemic.

For the self-insured dental, the report shows that on a total cost basis, the dental premium of \$4,771,036 exceeded total cost of \$4,305,028 for a surplus accumulation of \$466,008, or a 90.2% loss ratio.

The vision plan remains fully insured and has an accumulation of \$50,883. Under the fully insured arrangement all deficit or surplus positions stay with the carrier.

Keenan projected an \$8,821,449 accumulation for the 2021 plan year. The accumulation is built from premium exceeding plan costs, built-in margin on the Kaiser plan, prescription drug rebates, and other sources. For 2021, \$5,081,462 or 57.6% of the annual total has been realized for the 2021 plan year.

AGENDA: San Joaquin Valley Insurance Authority

DATE: February 18, 2022

Please note this is the consultant's report and, prior to allocating funds for IBNR and stabilization reserves, the SJVIA Auditor will provide the unaudited reserve accumulation based on actual revenue received and actual expenses paid.

FISCAL IMPACT/FINANCING:

The 2021 plan year experience through December developed a -\$1,398,283 medical deficit accumulation and a \$466,008 dental accumulation for an adjusted total deficit accumulation of -\$932,275. The addition of the Kaiser reserve of \$788,665, the Kaiser EPO parity reserve of \$2,469,507, and the prescription drug rebates of \$2,755,566 brings the collective total reserve accumulation up to \$5,081,462 (based on Consultant's report; the Auditor will provide the unaudited reserve accumulation based on actual revenue received and actual expenses paid).

ADMINISTRATIVE SIGN-OFF:



Hollis Magill
SJVIA Manager



Lupe Garza
SJVIA Assistant Manager



P. O. Box 1538
Rancho Cordova, CA 95741

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916 859-7167 fax GS
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License No. 0451271

February 18, 2022

SJVIA Board Meeting: Consultant's Report 2021 Plan Experience (Medical, Dental, and Vision) Through December 2021

The following pages provide a summary of the plan experience from January 1 through December 31, 2021 for the self-funded medical and dental plans, as well as the fully insured vision plan (Kaiser and Delta Dental DHMO experience is not available). The SJVIA self-funded plans show a deficit position of -\$932,275 through December 2021.

Accumulation	COF	COT	Total
Medical	\$ (1,045,204)	\$ (353,080)	\$ (1,398,284)
Dental	\$ 396,414	\$ 69,594	\$ 466,009
Total	\$ (648,790)	\$ (283,486)	\$ (932,275)
Vision (Insured)	\$ 64,912	\$ (14,030)	\$ 50,882
Loss Ratio			
Medical	102.0%	101.2%	101.7%
Dental	88.4%	94.9%	90.2%
Vision	87.9%	106.9%	93.1%

The December position is a decrease of -\$2,214,114 from \$1,281,839 reported last through September 2021. Both counties end the year with medical loss ratios above 100%. Since June of 2021, the self-funded reserve accumulation has fluctuated between \$4.8 million and \$5.8 million, with a current position at \$5,081,462 (compared to the budgeted accumulation of \$8,821,449).

Reserve Accumulation	Budget	Actual	\$ Difference	% Difference
Plan Experience (Medical)	\$ 2,761,249	\$ (1,398,284)	\$ (4,159,533)	-150.6%
Plan Experience (Dental)	\$ 72,913	\$ 466,009	\$ 393,096	539.1%
Kaiser Accumulation	\$ 811,898	\$ 788,665	\$ (23,232)	-2.9%
Kaiser EPO Parity Accumulation	\$ 3,175,390	\$ 2,469,507	\$ (705,884)	-22.2%
Prescription Drug Rebates	\$ 2,000,000	\$ 2,755,566	\$ 755,566	37.8%
Other	\$ -	\$ -	\$ -	0.0%
2021 Calculated Accumulation	\$ 8,821,449	\$ 5,081,462	\$ (3,739,987)	-42.4%

SJVIA may still be realizing SJVIA covered members receiving services which were postponed due to COVID, which resulted in a higher-than-normal volume of large claims experience, or higher large claim volume unrelated to COVID. Keenan will continue to monitor the claims experience to detect any trends.

The Anthem self-funded medical plans show an accumulated deficit position of \$1,398,284 for a 101.7% total cost loss ratio.

The Delta Dental self-funded dental plan shows an accumulated surplus position of \$466,009 for a 90.2% total cost loss ratio.

The vision plan remains fully insured and shows an accumulated position of \$50,882 for a 93.1% total cost loss ratio. Under the fully insured arrangement all deficit or surplus positions remain with the carrier.

For 2021, the County of Fresno is continuing with two strategies to keep the EPO affordable for its membership:

1. The County cross subsidizes plan costs between the EPO, PPO and High Deductible Health Plans (HDHP). The EPO is in a -\$4,224,167 deficit position, while the County of Fresno inclusive of all plans has an accumulated deficit position of -\$1,045,204.
2. The County realized a surplus accumulation of \$396,414.
3. The County's EPO/Kaiser parity strategy sets the EPO and Kaiser rates equivalent. This strategy provides margin on the Kaiser rates which funds a parity reserve to offset deficits to the EPO plan. Through 2021, the Kaiser parity reserve accumulated \$2,469,507.
4. The County of Fresno applies a margin to all plans including Kaiser to assist the County and SJVIA in improving its accumulation position. The cumulative Kaiser margin reserve is \$788,665 through 2021.
5. Collectively the strategies implemented by the County of Fresno have resulted in a net accumulated position through 2021 of \$2,609,382 for the SJVIA.

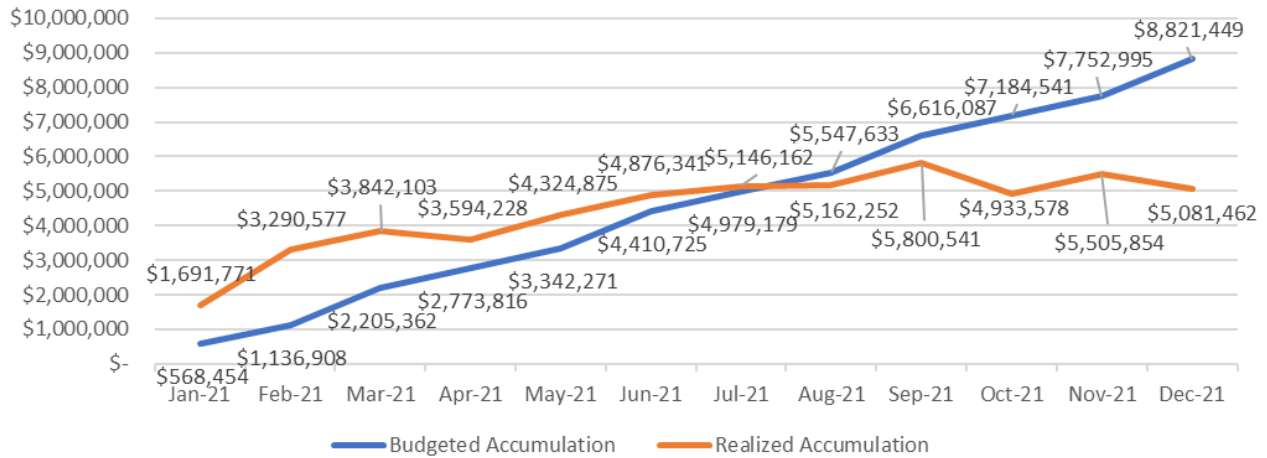
For 2021, the County of Tulare had margin built into the self-funded medical and dental rates to provide coverage for adverse claim activity. No further surplus accumulation strategies are in place.

1. The County realized an accumulated deficit positions on its medical plans of -\$353,080.
2. The County realized an accumulated surplus position on its dental plan of \$69,594.
3. Collectively the plan performance of the County of Tulare plans realized a deficit position on the year of -\$283,486 for the SJVIA.

The SJVIA received the fourth quarter (April - June 2021) prescription drug rebate for \$694,892 (\$194,892 above the budgeted amount). This amount is accounted for in the December accumulated position.

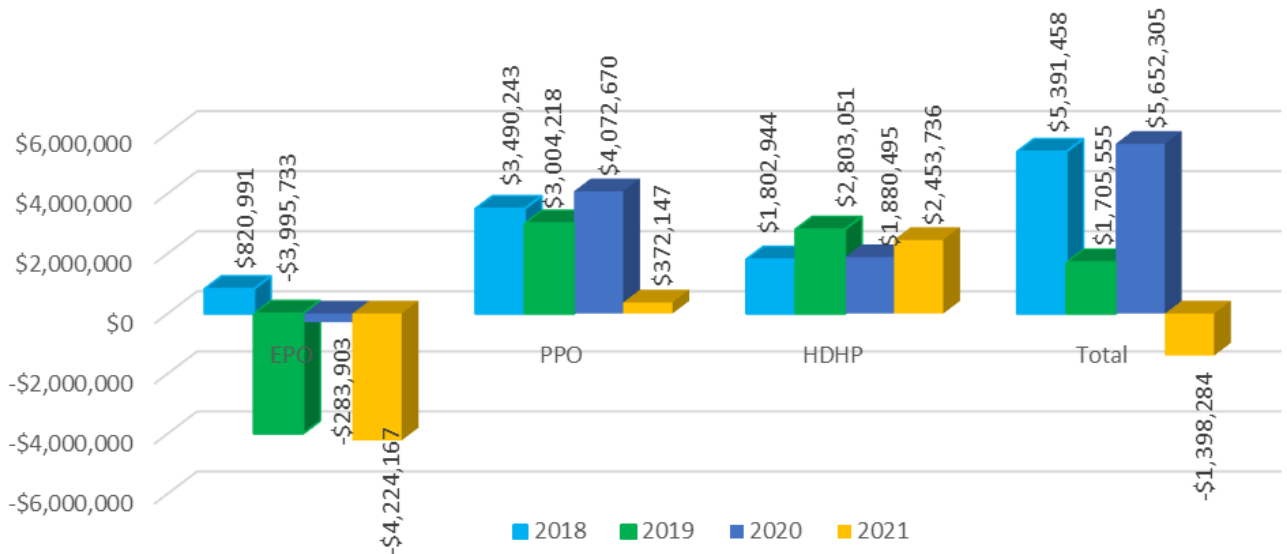
The SJVIA has an annual accumulative position for 2021 of \$5,081,462 or 57.6% of the budgeted accumulative position of \$8,821,449 for the 2021 plan year. Actual accumulations fell \$3,739,987 short of the budgeted accumulation.

Accumulation Comparison

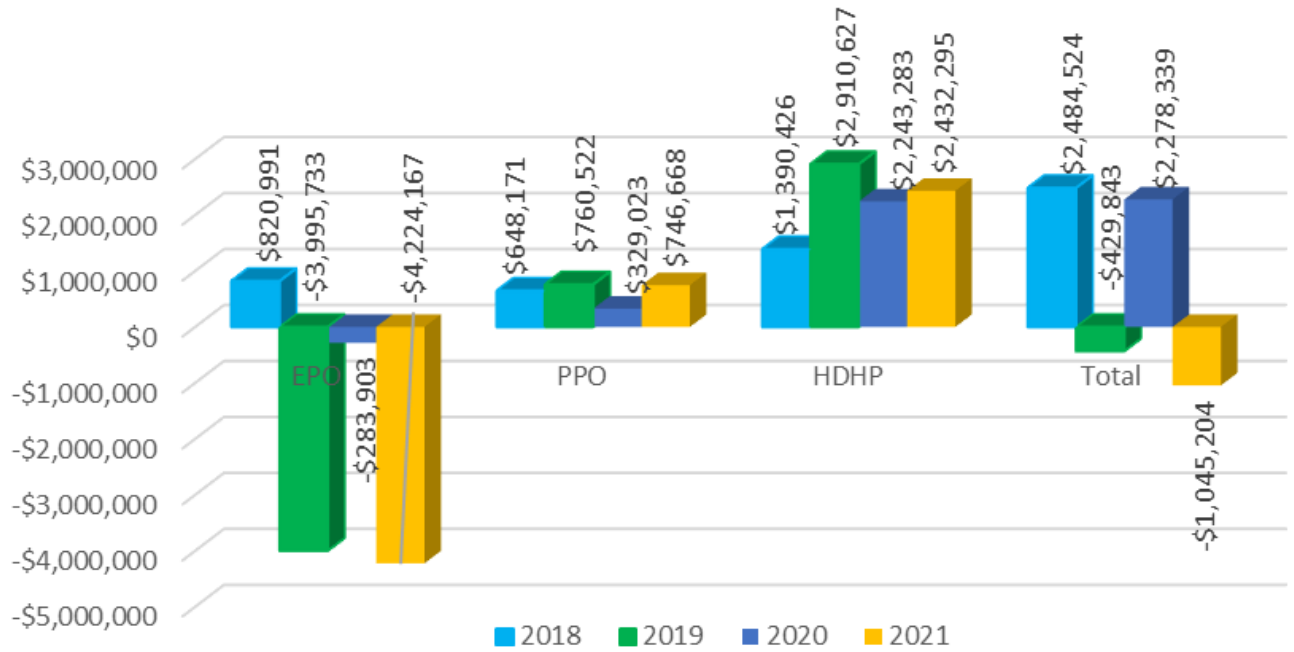


Please note that this is the consultant's report and prior to allocating funds for IBNR, the stabilization reserve, and to provide loan repayment, the SJVIA Auditor will provide the unaudited cash position based on actual revenue received and actual expenses paid.

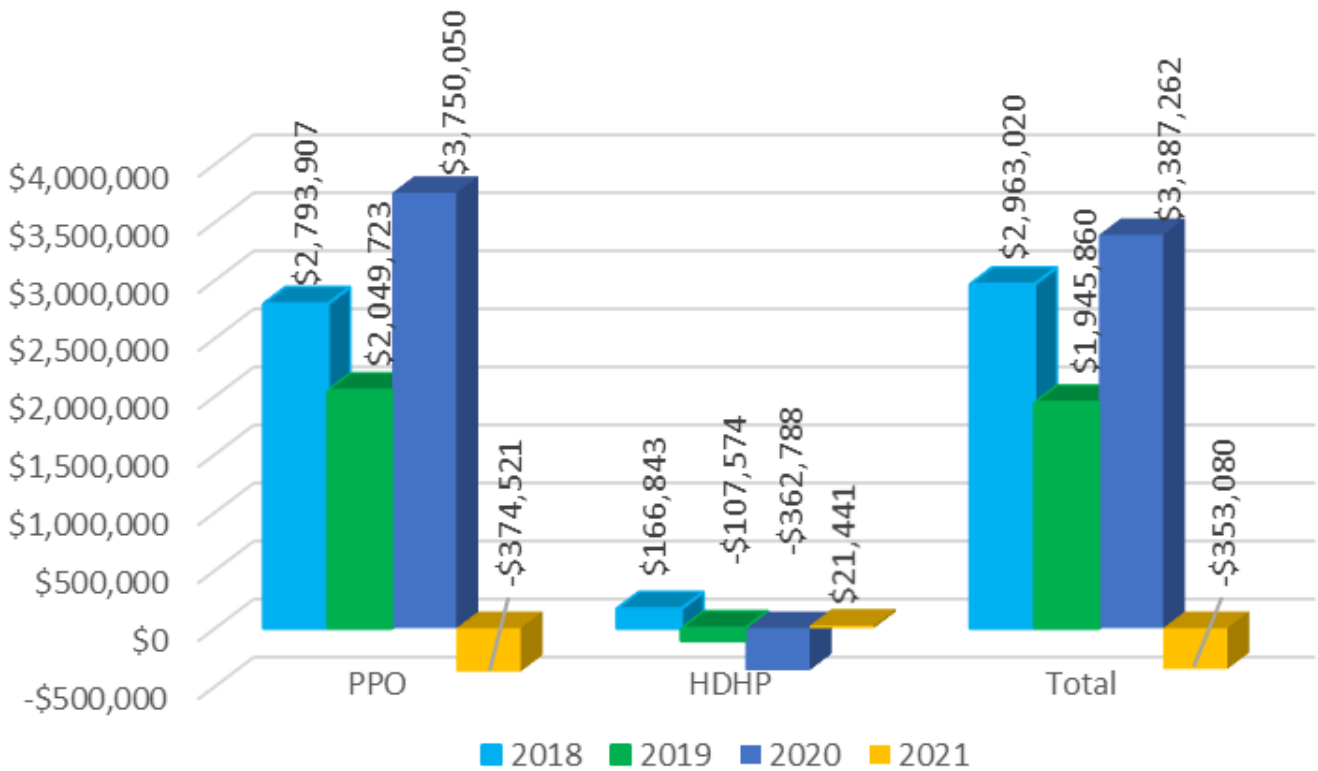
SJVIA - 2018 to 2021



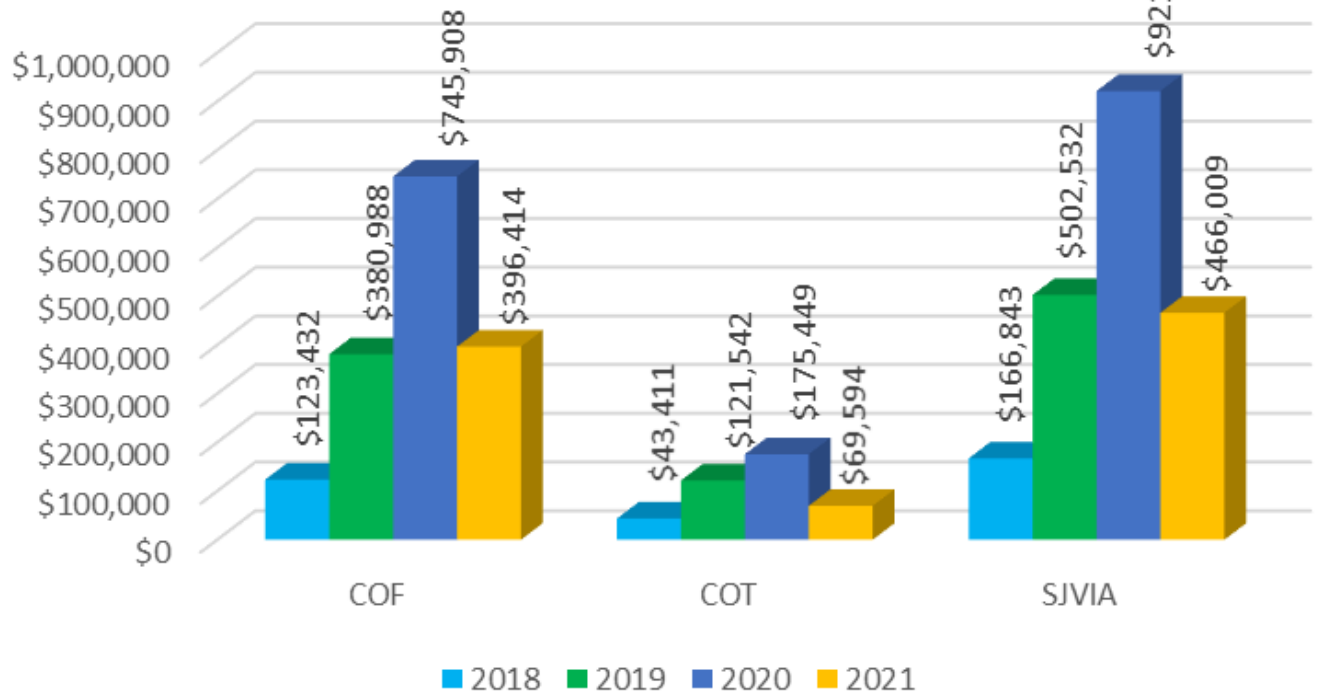
County of Fresno - 2018 to 2021



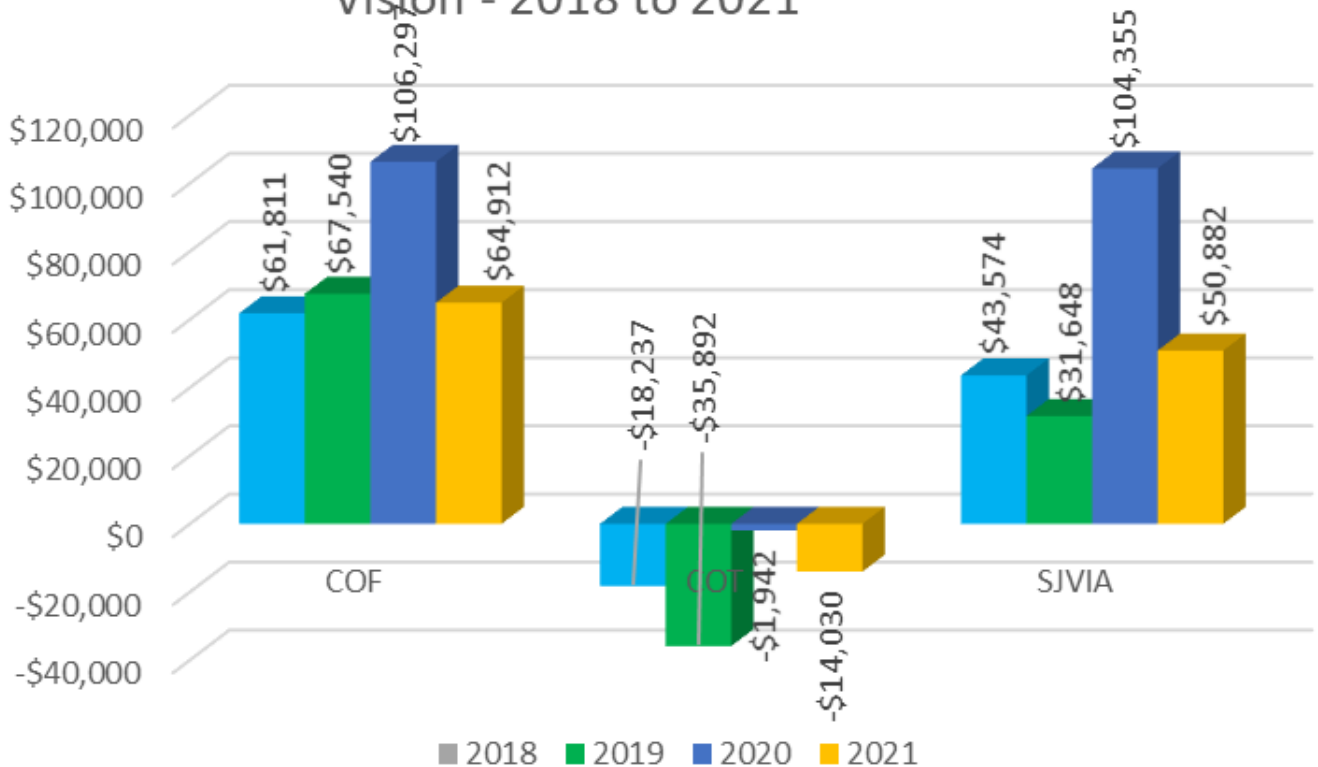
County of Tulare - 2018 to 2021



Dental - 2018 to 2021



Vision - 2018 to 2021



Budget vs. Calculated Accumulation													
2020	January	February	March	April	May	June	July	August	September	October	November	December	Total
Budget													
Plan Experience (Medical)	\$ 168,530	\$ 168,530	\$ 168,530	\$ 168,530	\$ 168,530	\$ 168,530	\$ 168,530	\$ 168,530	\$ 168,530	\$ 168,530	\$ 168,530	\$ 168,530	\$ 2,022,355
Plan Experience (Dental)	\$ 6,991	\$ 6,991	\$ 6,991	\$ 6,991	\$ 6,991	\$ 6,991	\$ 6,991	\$ 6,991	\$ 6,991	\$ 6,991	\$ 6,991	\$ 6,991	\$ 83,897
Kaiser Accumulation	\$ 68,981	\$ 68,981	\$ 68,981	\$ 68,981	\$ 68,981	\$ 68,981	\$ 68,981	\$ 68,981	\$ 68,981	\$ 68,981	\$ 68,981	\$ 68,981	\$ 827,773
Kaiser EPO Parity Accumulation	\$ 168,307	\$ 168,307	\$ 168,307	\$ 168,307	\$ 168,307	\$ 168,307	\$ 168,307	\$ 168,307	\$ 168,307	\$ 168,307	\$ 168,307	\$ 168,307	\$ 2,019,689
Prescription Drug Rebates	\$ -	\$ -	\$ 400,000	\$ -	\$ -	\$ 400,000	\$ -	\$ -	\$ 400,000	\$ -	\$ -	\$ 400,000	\$ 1,600,000
2020 Budgeted Accumulation	\$ 412,810	\$ 412,810	\$ 812,810	\$ 412,810	\$ 412,810	\$ 812,810	\$ 412,810	\$ 412,810	\$ 812,810	\$ 412,810	\$ 412,810	\$ 812,810	\$ 6,553,714
Calculated													
Plan Experience (Medical)	\$ 719,955	\$ 1,022,844	\$ (107,282)	\$ 961,782	\$ 1,013,371	\$ 1,186,760	\$ 229,036	\$ (485,775)	\$ 325,160	\$ 147,490	\$ 169,133	\$ 469,831	\$ 5,652,305
Plan Experience (Dental)	\$ 7,830	\$ (1,602)	\$ 71,933	\$ 244,874	\$ 251,996	\$ 117,106	\$ (2,167)	\$ 83,889	\$ 58,852	\$ (27,210)	\$ 70,676	\$ 45,180	\$ 921,357
Kaiser Accumulation	\$ 67,723	\$ 67,721	\$ 67,742	\$ 67,653	\$ 68,624	\$ 69,209	\$ 68,940	\$ 68,709	\$ 68,821	\$ 68,339	\$ 68,317	\$ 68,542	\$ 820,340
Kaiser EPO Parity Accumulation	\$ 300,988	\$ 301,602	\$ 301,286	\$ 300,610	\$ 305,046	\$ 307,708	\$ 305,644	\$ 304,548	\$ 305,603	\$ 303,806	\$ 303,745	\$ 304,353	\$ 3,644,938
Prescription Drug Rebates	\$ -	\$ 444,726	\$ -	\$ -	\$ 465,054	\$ -	\$ 473,497	\$ 546,922	\$ -	\$ 578,620	\$ -	\$ -	\$ 2,508,819
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 111,779	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 111,779
2020 Calculated Accumulation	\$ 1,096,496	\$ 1,835,290	\$ 333,678	\$ 1,574,919	\$ 2,104,091	\$ 1,792,562	\$ 1,074,950	\$ 518,293	\$ 758,436	\$ 1,071,045	\$ 611,871	\$ 887,906	\$ 13,659,539
2021	January	February	March	April	May	June	July	August	September	October	November	December	Total
Budget													
Plan Experience (Medical)	\$ 230,104	\$ 230,104	\$ 230,104	\$ 230,104	\$ 230,104	\$ 230,104	\$ 230,104	\$ 230,104	\$ 230,104	\$ 230,104	\$ 230,104	\$ 230,104	\$ 2,761,249
Plan Experience (Dental)	\$ 6,076	\$ 6,076	\$ 6,076	\$ 6,076	\$ 6,076	\$ 6,076	\$ 6,076	\$ 6,076	\$ 6,076	\$ 6,076	\$ 6,076	\$ 6,076	\$ 72,913
Kaiser Accumulation	\$ 67,658	\$ 67,658	\$ 67,658	\$ 67,658	\$ 67,658	\$ 67,658	\$ 67,658	\$ 67,658	\$ 67,658	\$ 67,658	\$ 67,658	\$ 67,658	\$ 811,898
Kaiser EPO Parity Accumulation	\$ 264,616	\$ 264,616	\$ 264,616	\$ 264,616	\$ 264,616	\$ 264,616	\$ 264,616	\$ 264,616	\$ 264,616	\$ 264,616	\$ 264,616	\$ 264,616	\$ 3,175,390
Prescription Drug Rebates	\$ -	\$ -	\$ 500,000	\$ -	\$ -	\$ 500,000	\$ -	\$ -	\$ 500,000	\$ -	\$ -	\$ 500,000	\$ 2,000,000
2021 Budgeted Accumulation	\$ 568,454	\$ 568,454	\$ 1,068,454	\$ 568,454	\$ 568,454	\$ 1,068,454	\$ 568,454	\$ 568,454	\$ 1,068,454	\$ 568,454	\$ 568,454	\$ 1,068,454	\$ 8,821,449
Calculated													
Plan Experience (Medical)	\$ 1,353,029	\$ 1,298,026	\$ 279,275	\$ (485,754)	\$ (331,137)	\$ (461,172)	\$ (1,373)	\$ (322,615)	\$ (306,160)	\$ (1,214,629)	\$ 223,704	\$ (1,429,478)	\$ (1,398,284)
Plan Experience (Dental)	\$ 64,691	\$ 26,113	\$ (1,592)	\$ (35,574)	\$ 37,376	\$ 94,161	\$ (1,159)	\$ 66,369	\$ 9,334	\$ 77,344	\$ 83,324	\$ 45,621	\$ 466,009
Kaiser Accumulation	\$ 66,307	\$ 66,453	\$ 66,255	\$ 66,166	\$ 65,959	\$ 66,167	\$ 65,943	\$ 65,952	\$ 65,688	\$ 65,449	\$ 64,245	\$ 64,081	\$ 788,665
Kaiser EPO Parity Accumulation	\$ 207,743	\$ 208,215	\$ 207,587	\$ 207,287	\$ 206,687	\$ 207,226	\$ 206,410	\$ 206,384	\$ 205,598	\$ 204,873	\$ 201,003	\$ 200,492	\$ 2,469,507
Prescription Drug Rebates	\$ -	\$ -	\$ -	\$ -	\$ 751,762	\$ 645,084	\$ -	\$ -	\$ 663,828	\$ -	\$ -	\$ 694,892	\$ 2,755,566
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2021 Calculated Accumulation	\$ 1,691,771	\$ 1,598,807	\$ 551,526	\$ (247,875)	\$ 730,647	\$ 551,466	\$ 269,821	\$ 16,090	\$ 638,289	\$ (866,963)	\$ 572,276	\$ (424,392)	\$ 5,081,462

57.6

Please note that this is the consultant's report and prior to allocating funds for IBNR, the stabilization reserve, and to provide loan repayment, the SJVIA Auditor will provide the unaudited cash position based on actual revenue received and actual expenses paid.



San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
All Districts Combined - All Medical

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	6,976	\$6,841,737	\$3,845,008	\$1,680,161	\$589,327	\$0	\$6,114,496	\$727,241	\$792.03	89.4%
Feb-20	6,952	\$6,810,616	\$3,948,649	\$1,420,793	\$587,431	-\$173,505	\$5,783,367	\$1,027,249	\$747.40	84.9%
Mar-20	6,978	\$6,832,573	\$4,361,721	\$1,933,751	\$589,416	\$50,701	\$6,935,589	-\$103,016	\$909.45	101.5%
Apr-20	6,951	\$6,802,688	\$3,513,095	\$1,741,082	\$586,729	\$0	\$5,840,906	\$961,782	\$755.89	85.9%
May-20	6,958	\$6,816,427	\$3,615,087	\$1,603,786	\$587,347	\$0	\$5,806,221	\$1,010,206	\$750.05	85.2%
Jun-20	6,991	\$6,835,479	\$3,378,527	\$1,671,842	\$590,207	\$0	\$5,640,576	\$1,194,904	\$722.41	82.5%
Jul-20	6,968	\$6,819,610	\$4,475,289	\$1,685,279	\$588,071	-\$158,003	\$6,590,636	\$228,974	\$861.45	96.6%
Aug-20	6,938	\$6,792,540	\$5,008,363	\$1,684,425	\$585,527	\$0	\$7,278,315	-\$485,775	\$964.66	107.2%
Sep-20	6,933	\$6,801,882	\$4,574,477	\$1,739,350	\$585,085	-\$425,617	\$6,473,295	\$328,587	\$849.30	95.2%
Oct-20	6,923	\$6,790,493	\$4,386,987	\$1,679,677	\$584,341	-\$7,062	\$6,643,942	\$146,551	\$875.29	97.8%
Nov-20	6,906	\$6,780,776	\$4,568,373	\$1,596,575	\$582,784	-\$136,088	\$6,611,644	\$169,132	\$872.99	97.5%
Dec-20	6,949	\$6,937,529	\$4,146,495	\$1,790,422	\$586,732	-\$55,952	\$6,467,697	\$469,832	\$846.30	93.2%
Jan-21	6,939	\$6,835,812	\$3,445,192	\$1,445,101	\$606,632	-\$14,142	\$5,482,782	\$1,353,030	\$702.72	80.2%
Feb-21	6,914	\$6,805,840	\$3,486,476	\$1,465,588	\$604,493	-\$48,745	\$5,507,813	\$1,298,027	\$709.19	80.9%
Mar-21	6,920	\$6,817,463	\$4,064,322	\$1,728,420	\$605,278	\$140,168	\$6,538,189	\$279,274	\$857.36	95.9%
Apr-21	6,909	\$6,797,992	\$4,791,356	\$1,888,118	\$604,271	\$0	\$7,283,745	-\$485,753	\$966.78	107.1%
May-21	6,886	\$6,772,350	\$4,870,315	\$1,642,795	\$601,963	-\$11,586	\$7,103,487	-\$331,138	\$944.17	104.9%
Jun-21	6,879	\$6,752,667	\$4,920,296	\$1,764,044	\$601,071	-\$71,571	\$7,213,839	-\$461,172	\$961.30	106.8%
Jul-21	6,871	\$6,746,271	\$4,392,129	\$1,764,690	\$600,295	-\$9,470	\$6,747,644	-\$1,373	\$894.68	100.0%
Aug-21	6,855	\$6,725,330	\$4,513,782	\$1,957,189	\$599,020	-\$22,046	\$7,047,945	-\$322,615	\$940.76	104.8%
Sep-21	6,842	\$6,712,781	\$4,671,941	\$1,787,845	\$598,067	-\$38,912	\$7,018,941	-\$306,160	\$938.45	104.6%
Oct-21	6,840	\$6,714,383	\$5,343,266	\$2,014,316	\$597,769	-\$26,337	\$7,929,013	-\$1,214,629	\$1,071.82	118.1%
Nov-21	6,835	\$6,699,474	\$3,946,356	\$2,080,285	\$597,563	-\$148,433	\$6,475,770	\$223,704	\$860.02	96.7%
Dec-21	6,908	\$6,866,997	\$5,886,847	\$1,881,238	\$605,962	-\$77,573	\$8,296,474	-\$1,429,478	\$1,113.28	120.8%
2018	6,937	\$77,237,343	\$44,923,047	\$19,626,803	\$6,118,960	-\$551,304	\$70,117,506	\$7,119,837	\$768.86	90.8%
2019	6,947	\$79,302,855	\$51,794,033	\$18,908,423	\$7,036,763	-\$39,265	\$77,699,954	\$1,602,901	\$847.62	98.0%
2020	6,952	\$81,862,351	\$49,822,070	\$20,227,143	\$7,042,998	-\$905,527	\$76,186,685	\$5,675,667	\$828.83	93.1%
2021 YTD	6,883	\$81,247,360	\$54,332,276	\$21,419,630	\$7,222,384	-\$328,648	\$82,645,642	-\$1,398,283	\$913.14	101.7%
Current 12 Months	6,883	\$81,247,360	\$54,332,276	\$21,419,630	\$7,222,384	-\$328,648	\$82,645,642	-\$1,398,283	\$913.14	101.7%

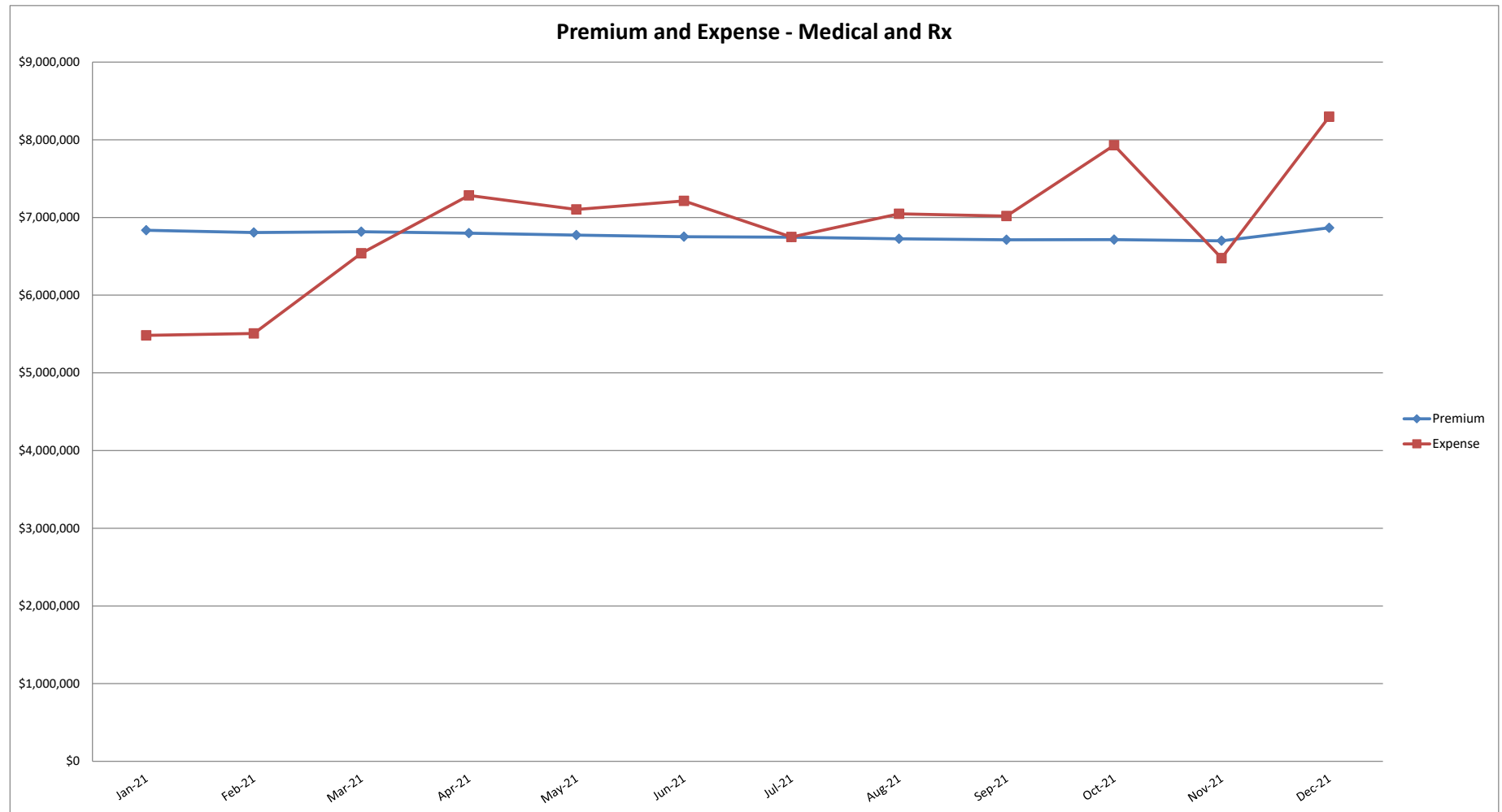
Data Sources:

Enrollment & Premium: Hourglass; Medical Claims & Capitation: Anthem CII, Anthem CLR, Anthem MDP; Rx Claims: Envolve, EmpiRx, Anthem MDP; Fixed Cost Schedule: Appendix

Notes:

1. Fixed Cost Schedule: Appendix
2. Pooling Points: HMO = \$400,000 and EPO/PPO/HDHP = \$450,000.
3. EmpiRx PBM replaced Envolve PBM effective 1/1/2018
4. Fresno converted HMO to EPO plan effective 12/18/2017
5. Waterford and Ceres terminated from SJVIA effective 1/1/2018
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San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
All Districts Combined - All Medical





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
All Districts Combined - EPO

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	3,108	\$3,678,181	\$2,093,413	\$960,589	\$297,591	\$0	\$3,351,593	\$326,588	\$982.63	91.1%
Feb-20	3,103	\$3,666,962	\$2,478,232	\$790,500	\$297,112	-\$173,505	\$3,392,339	\$274,623	\$997.49	92.5%
Mar-20	3,105	\$3,666,293	\$2,566,124	\$1,085,231	\$297,304	\$50,701	\$3,999,360	-\$333,067	\$1,192.29	109.1%
Apr-20	3,075	\$3,632,941	\$2,309,587	\$965,092	\$294,431	\$0	\$3,569,111	\$63,830	\$1,064.94	98.2%
May-20	3,076	\$3,639,696	\$2,167,748	\$866,773	\$294,527	\$0	\$3,329,048	\$310,648	\$986.52	91.5%
Jun-20	3,093	\$3,645,833	\$2,032,116	\$908,516	\$296,155	\$0	\$3,236,787	\$409,046	\$950.74	88.8%
Jul-20	3,074	\$3,630,586	\$2,741,750	\$935,714	\$294,336	-\$158,003	\$3,813,797	-\$183,211	\$1,144.91	105.0%
Aug-20	3,061	\$3,619,689	\$3,087,343	\$895,240	\$293,091	\$0	\$4,275,674	-\$655,985	\$1,301.07	118.1%
Sep-20	3,058	\$3,619,677	\$3,014,014	\$911,800	\$292,804	-\$425,617	\$3,793,000	-\$173,323	\$1,144.60	104.8%
Oct-20	3,061	\$3,617,647	\$2,593,976	\$940,465	\$293,091	-\$7,062	\$3,820,469	-\$202,822	\$1,152.36	105.6%
Nov-20	3,043	\$3,617,395	\$2,769,050	\$845,938	\$291,367	-\$136,088	\$3,770,267	-\$152,871	\$1,143.25	104.2%
Dec-20	3,074	\$3,743,398	\$2,535,971	\$936,403	\$294,336	-\$55,952	\$3,710,757	\$32,641	\$1,111.39	99.1%
Jan-21	3,067	\$3,737,985	\$2,203,064	\$791,611	\$307,896	-\$14,142	\$3,288,428	\$449,557	\$971.81	88.0%
Feb-21	3,058	\$3,722,132	\$2,375,395	\$820,685	\$306,993	-\$48,745	\$3,454,329	\$267,804	\$1,029.21	92.8%
Mar-21	3,072	\$3,733,137	\$2,399,018	\$956,694	\$308,398	\$140,168	\$3,804,278	-\$71,141	\$1,137.98	101.9%
Apr-21	3,065	\$3,717,390	\$3,044,265	\$1,060,084	\$307,695	\$0	\$4,412,044	-\$694,654	\$1,339.10	118.7%
May-21	3,042	\$3,691,769	\$3,502,522	\$919,189	\$305,386	-\$11,586	\$4,715,512	-\$1,023,744	\$1,449.75	127.7%
Jun-21	3,027	\$3,671,906	\$2,929,075	\$944,767	\$303,881	-\$71,571	\$4,106,151	-\$434,245	\$1,256.12	111.8%
Jul-21	3,020	\$3,662,187	\$2,825,914	\$945,999	\$303,178	-\$9,470	\$4,065,620	-\$403,433	\$1,245.84	111.0%
Aug-21	3,018	\$3,652,449	\$3,077,988	\$1,082,497	\$302,977	-\$22,046	\$4,441,416	-\$788,967	\$1,371.25	121.6%
Sep-21	3,020	\$3,649,373	\$2,559,309	\$1,004,805	\$303,178	-\$38,912	\$3,828,380	-\$179,007	\$1,167.29	104.9%
Oct-21	3,014	\$3,645,539	\$3,245,752	\$1,037,188	\$302,575	-\$26,337	\$4,559,179	-\$913,639	\$1,412.28	125.1%
Nov-21	3,022	\$3,637,651	\$2,185,951	\$1,204,195	\$303,379	-\$46,784	\$3,646,741	-\$9,090	\$1,106.34	100.2%
Dec-21	3,139	\$3,854,725	\$3,057,366	\$946,150	\$315,124	-\$40,307	\$4,278,333	-\$423,608	\$1,262.57	111.0%
2018	3,091	\$41,225,886	\$27,109,361	\$10,112,448	\$3,050,694	-\$381,378	\$39,891,126	\$1,334,760	\$993.38	96.8%
2019	3,062	\$42,445,762	\$33,226,729	\$9,750,935	\$3,517,759	-\$39,265	\$46,456,159	-\$4,010,396	\$1,168.74	109.4%
2020	3,078	\$43,778,298	\$30,389,324	\$11,042,260	\$3,536,143	-\$905,527	\$44,062,200	-\$283,903	\$1,097.35	100.6%
2021 YTD	3,047	\$44,376,243	\$33,405,619	\$11,713,863	\$3,670,660	-\$189,731	\$48,600,411	-\$4,224,167	\$1,228.80	109.5%
Current 12 Months	3,047	\$44,376,243	\$33,405,619	\$11,713,863	\$3,670,660	-\$189,731	\$48,600,411	-\$4,224,167	\$1,228.80	109.5%

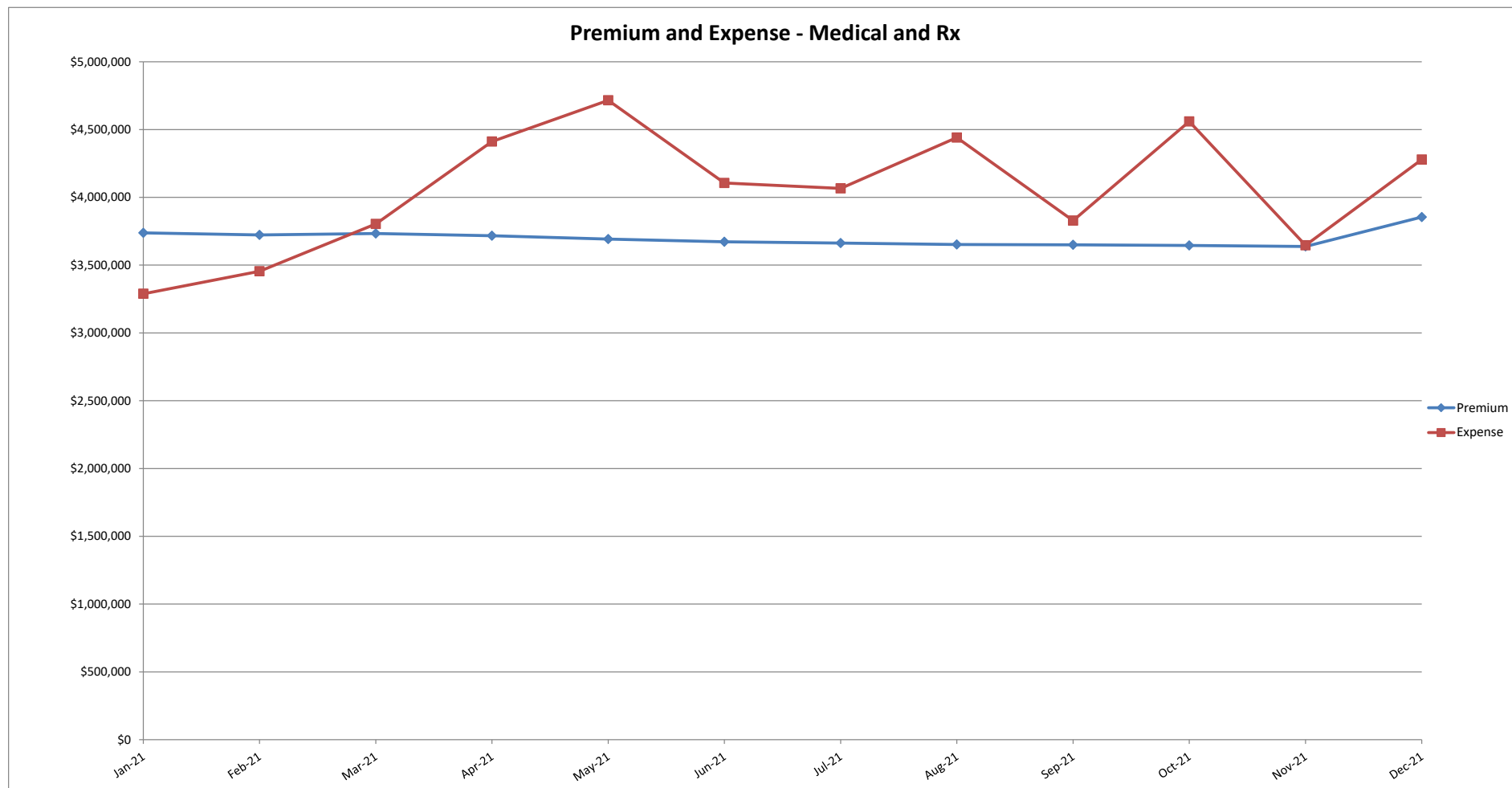
Data Sources:

Enrollment & Premium: Hourglass; **Medical Claims & Capitation:** Anthem CIL, Anthem CLR, Anthem MDP; **Rx Claims:** Envolve, EmpiRx, Anthem MDP; **Fixed Cost Schedule:** Appendix

Notes:

1. Fixed Cost Schedule: Appendix
2. Pooling Points: HMO = \$400,000 and EPO/PPO/HDHP = \$450,000.
3. EmpiRx PBM replaced Envolve PBM effective 1/1/2018
4. Fresno converted HMO to EPO plan effective 12/18/2017
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**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
All Districts Combined - EPO**





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
All Districts Combined - PPO

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	3,105	\$2,577,095	\$1,375,731	\$687,899	\$230,147	\$0	\$2,293,777	\$283,318	\$664.62	89.0%
Feb-20	3,079	\$2,553,570	\$1,122,710	\$585,243	\$228,169	\$0	\$1,936,122	\$617,449	\$554.71	75.8%
Mar-20	3,101	\$2,573,254	\$1,252,820	\$781,173	\$229,808	\$0	\$2,263,801	\$309,453	\$655.92	88.0%
Apr-20	3,107	\$2,579,385	\$1,051,406	\$706,805	\$230,237	\$0	\$1,988,448	\$590,937	\$565.89	77.1%
May-20	3,110	\$2,583,582	\$1,126,316	\$627,606	\$230,516	\$0	\$1,984,438	\$599,144	\$563.96	76.8%
Jun-20	3,121	\$2,593,909	\$1,159,286	\$688,886	\$231,343	\$0	\$2,079,515	\$514,395	\$592.17	80.2%
Jul-20	3,121	\$2,596,813	\$1,500,404	\$631,333	\$231,350	\$0	\$2,363,086	\$233,727	\$683.03	91.0%
Aug-20	3,110	\$2,586,838	\$1,658,725	\$695,098	\$230,530	\$0	\$2,584,354	\$2,485	\$756.86	99.9%
Sep-20	3,111	\$2,598,055	\$1,389,579	\$692,283	\$230,619	\$0	\$2,312,480	\$285,575	\$669.19	89.0%
Oct-20	3,106	\$2,594,307	\$1,545,213	\$659,880	\$230,228	\$0	\$2,435,321	\$158,986	\$709.95	93.9%
Nov-20	3,094	\$2,583,263	\$1,470,375	\$659,322	\$229,341	\$0	\$2,359,039	\$224,224	\$688.33	91.3%
Dec-20	3,101	\$2,595,954	\$1,379,137	\$727,520	\$229,916	\$0	\$2,336,573	\$259,381	\$679.35	90.0%
Jan-21	3,104	\$2,504,597	\$1,157,039	\$593,016	\$239,961	\$0	\$1,990,016	\$514,580	\$563.81	79.5%
Feb-21	3,093	\$2,496,373	\$931,312	\$589,641	\$239,109	\$0	\$1,760,063	\$736,311	\$491.74	70.5%
Mar-21	3,085	\$2,495,225	\$1,455,976	\$691,731	\$238,489	\$0	\$2,386,197	\$109,029	\$696.18	95.6%
Apr-21	3,083	\$2,492,058	\$1,544,764	\$776,655	\$238,338	\$0	\$2,559,757	-\$67,699	\$752.97	102.7%
May-21	3,086	\$2,495,031	\$1,145,567	\$624,326	\$238,569	\$0	\$2,008,462	\$486,569	\$573.52	80.5%
Jun-21	3,087	\$2,488,226	\$1,694,193	\$747,521	\$238,648	\$0	\$2,680,362	-\$192,136	\$790.97	107.7%
Jul-21	3,090	\$2,494,207	\$1,427,272	\$753,534	\$238,882	\$0	\$2,419,688	\$74,519	\$705.76	97.0%
Aug-21	3,087	\$2,491,876	\$1,222,457	\$776,159	\$238,649	\$0	\$2,237,265	\$254,611	\$647.43	89.8%
Sep-21	3,077	\$2,487,175	\$1,830,806	\$721,418	\$237,878	\$0	\$2,790,102	-\$302,927	\$829.45	112.2%
Oct-21	3,072	\$2,488,535	\$1,677,725	\$846,328	\$237,493	\$0	\$2,761,547	-\$273,012	\$821.63	111.0%
Nov-21	3,053	\$2,478,069	\$1,536,450	\$793,988	\$236,025	-\$101,650	\$2,464,813	\$13,255	\$730.03	99.5%
Dec-21	3,053	\$2,471,781	\$2,409,174	\$844,781	\$236,044	-\$37,267	\$3,452,733	-\$980,952	\$1,053.62	139.7%
2018	3,042	\$28,815,253	\$14,613,408	\$8,152,875	\$2,412,885	-\$169,926	\$25,009,242	\$3,806,011	\$619.03	86.8%
2019	3,095	\$29,640,712	\$16,034,925	\$8,042,317	\$2,753,224	\$0	\$26,830,466	\$2,810,246	\$648.25	90.5%
2020	3,106	\$31,016,026	\$16,031,702	\$8,143,049	\$2,762,203	\$0	\$26,936,953	\$4,079,073	\$648.71	86.8%
2021 YTD	3,081	\$29,883,153	\$18,032,736	\$8,759,099	\$2,858,087	-\$138,916	\$29,511,005	\$372,148	\$720.93	98.8%
Current 12 Months	3,081	\$29,883,153	\$18,032,736	\$8,759,099	\$2,858,087	-\$138,916	\$29,511,005	\$372,148	\$720.93	98.8%

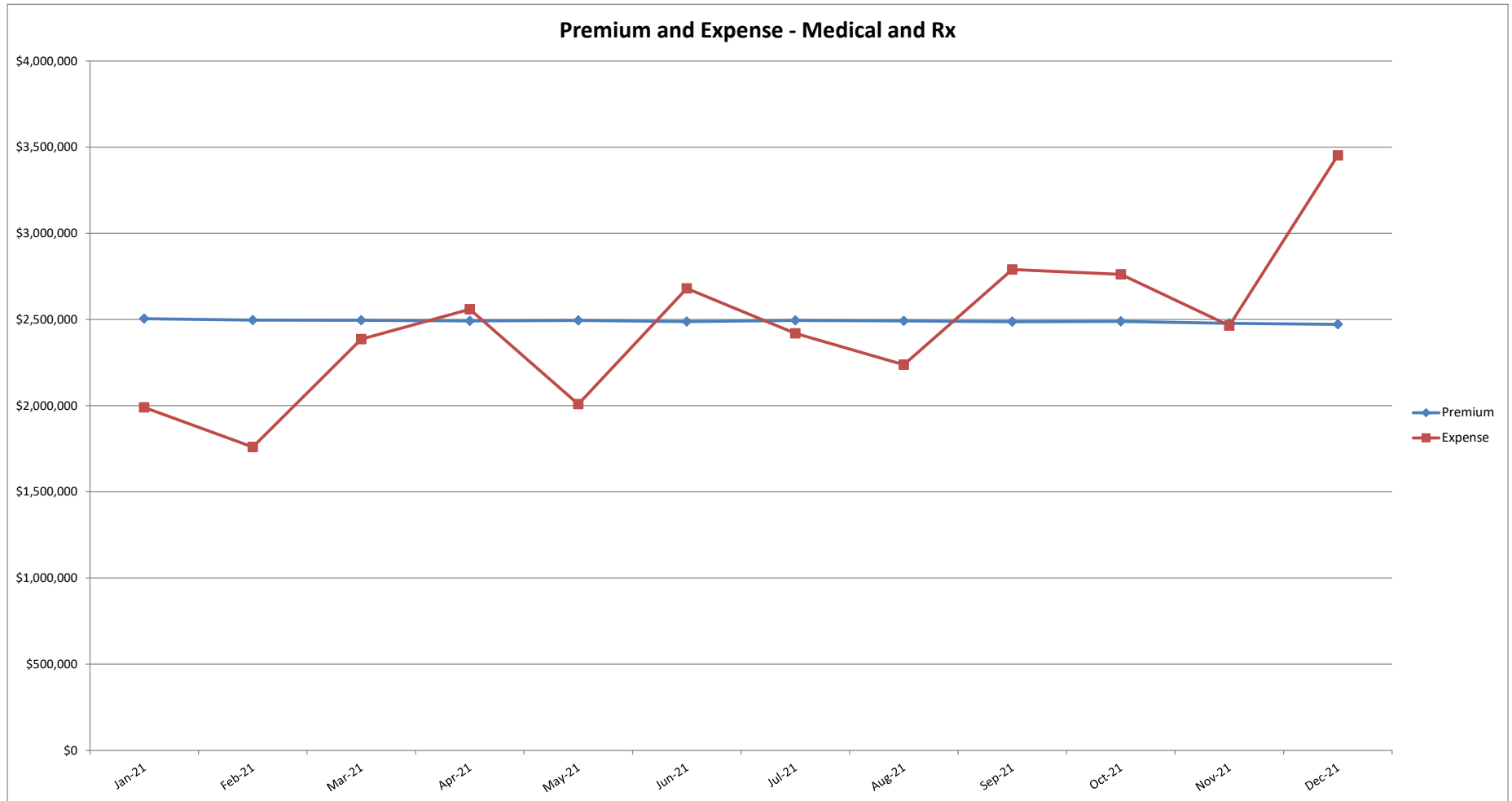
Data Sources:

Enrollment & Premium: Hourglass; **Medical Claims & Capitation:** Anthem CIL, Anthem CLR, Anthem MDP; **Rx Claims:** Envelope, EmpiRx, Anthem MDP; **Fixed Cost Schedule:** Appendix

Notes:

1. Fixed Cost Schedule: Appendix
2. Pooling Points: HMO = \$400,000 and EPO/PPO/HDHP = \$450,000.
3. EmpiRx PBM replaced Envelope PBM effective 1/1/2018
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**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
All Districts Combined - PPO**





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
All Districts Combined - HDHP

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	763	\$586,460	\$375,864	\$31,673	\$61,589	\$0	\$469,126	\$117,334	\$534.12	80.0%
Feb-20	770	\$590,084	\$347,707	\$45,050	\$62,150	\$0	\$454,907	\$135,177	\$510.07	77.1%
Mar-20	772	\$593,027	\$542,777	\$67,347	\$62,304	\$0	\$672,428	-\$79,401	\$790.32	113.4%
Apr-20	769	\$590,363	\$152,102	\$69,184	\$62,061	\$0	\$283,347	\$307,015	\$287.76	48.0%
May-20	772	\$593,149	\$321,023	\$109,407	\$62,304	\$0	\$492,735	\$100,415	\$557.55	83.1%
Jun-20	777	\$595,737	\$187,125	\$74,440	\$62,710	\$0	\$324,274	\$271,463	\$336.63	54.4%
Jul-20	773	\$592,211	\$233,135	\$118,233	\$62,385	\$0	\$413,753	\$178,457	\$454.55	69.9%
Aug-20	767	\$586,013	\$262,294	\$94,087	\$61,906	\$0	\$418,288	\$167,725	\$464.64	71.4%
Sep-20	764	\$584,150	\$170,884	\$135,267	\$61,663	\$0	\$367,814	\$216,336	\$400.72	63.0%
Oct-20	756	\$578,539	\$247,798	\$79,332	\$61,022	\$0	\$388,152	\$190,387	\$432.71	67.1%
Nov-20	769	\$580,118	\$328,948	\$91,315	\$62,076	\$0	\$482,339	\$97,779	\$546.51	83.1%
Dec-20	774	\$598,176	\$231,387	\$126,500	\$62,481	\$0	\$420,367	\$177,809	\$462.39	70.3%
Jan-21	768	\$593,230	\$85,089	\$60,474	\$58,774	\$0	\$204,338	\$388,892	\$189.54	34.4%
Feb-21	763	\$587,334	\$179,768	\$55,262	\$58,392	\$0	\$293,421	\$293,913	\$308.03	50.0%
Mar-21	763	\$589,101	\$209,328	\$79,996	\$58,391	\$0	\$347,714	\$241,387	\$379.19	59.0%
Apr-21	761	\$588,545	\$202,327	\$51,380	\$58,238	\$0	\$311,945	\$276,600	\$333.39	53.0%
May-21	758	\$585,550	\$222,225	\$99,280	\$58,007	\$0	\$379,512	\$206,037	\$424.15	64.8%
Jun-21	765	\$592,535	\$297,028	\$71,756	\$58,542	\$0	\$427,326	\$165,209	\$482.07	72.1%
Jul-21	761	\$589,877	\$138,944	\$65,157	\$58,235	\$0	\$262,336	\$327,541	\$268.20	44.5%
Aug-21	750	\$581,006	\$213,337	\$98,534	\$57,394	\$0	\$369,265	\$211,741	\$415.83	63.6%
Sep-21	745	\$576,233	\$281,826	\$61,622	\$57,011	\$0	\$400,459	\$175,774	\$461.00	69.5%
Oct-21	754	\$580,309	\$419,788	\$130,799	\$57,700	\$0	\$608,287	-\$27,978	\$730.22	104.8%
Nov-21	760	\$583,754	\$223,954	\$82,102	\$58,160	\$0	\$364,216	\$219,538	\$402.71	62.4%
Dec-21	716	\$540,491	\$420,307	\$90,307	\$54,794	\$0	\$565,408	-\$24,917	\$713.15	104.6%
2018	804	\$7,196,204	\$3,200,278	\$1,361,480	\$655,380	\$0	\$5,217,138	\$1,979,065	\$472.77	72.5%
2019	791	\$7,216,380	\$2,532,379	\$1,115,170	\$765,780	\$0	\$4,413,329	\$2,803,051	\$384.52	61.2%
2020	769	\$7,068,027	\$3,401,044	\$1,041,835	\$744,652	\$0	\$5,187,531	\$1,880,496	\$481.56	73.4%
2021 YTD	755	\$6,987,963	\$2,893,921	\$946,668	\$693,637	\$0	\$4,534,226	\$2,453,737	\$423.72	64.9%
Current 12 Months	755	\$6,987,963	\$2,893,921	\$946,668	\$693,637	\$0	\$4,534,226	\$2,453,737	\$423.72	64.9%

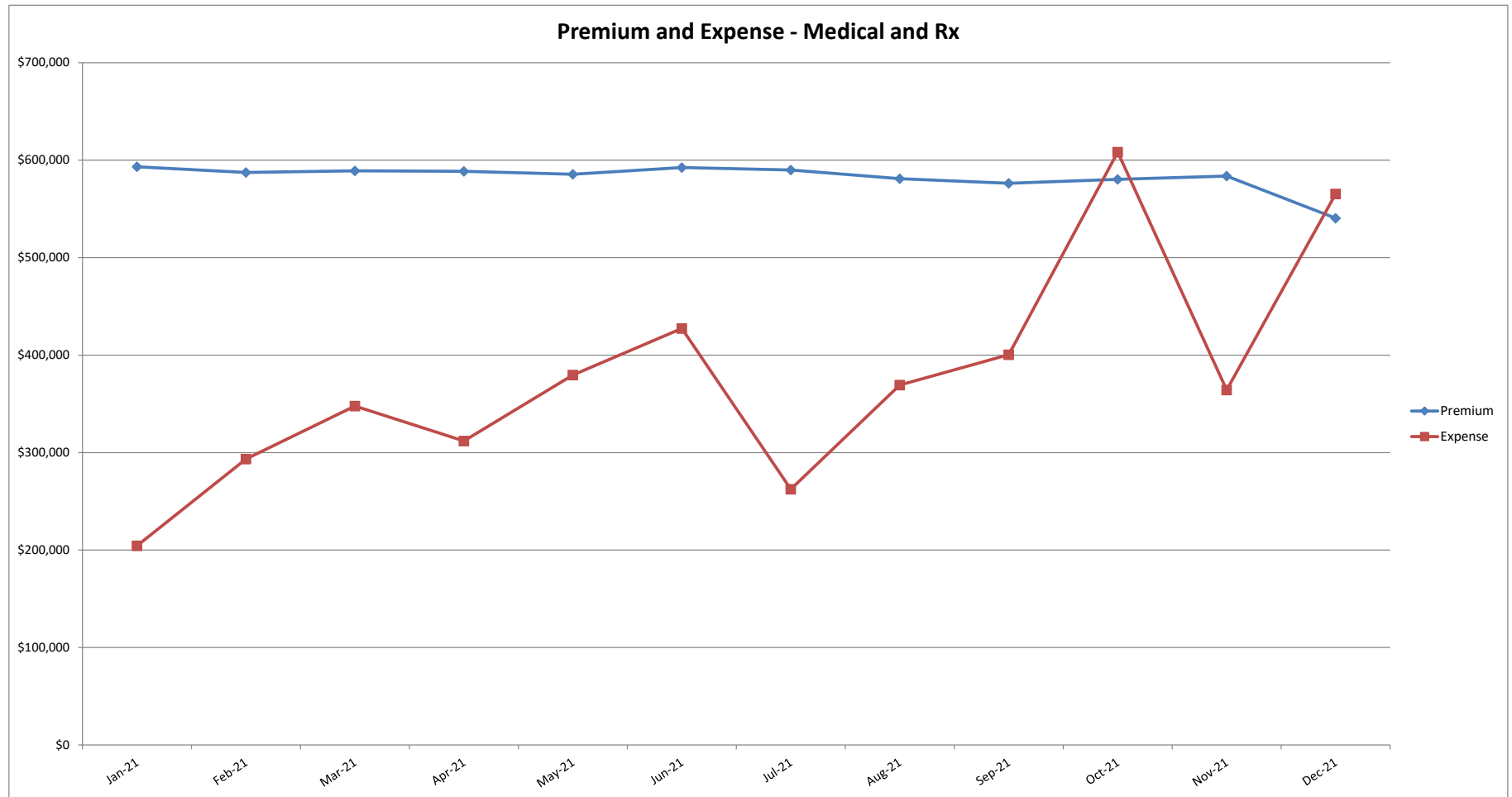
Data Sources:

Enrollment & Premium: Hourglass; Medical Claims & Capitation: Anthem CIL, Anthem CLR, Anthem MDP; Rx Claims: Envelope, EmpiRx, Anthem MDP; Fixed Cost Schedule: Appendix

Notes:

1. Fixed Cost Schedule: Appendix
2. Pooling Points: HMO = \$400,000 and EPO/PPO/HDHP = \$450,000.
3. EmpiRx PBM replaced Envelope PBM effective 1/1/2018
4. Fresno converted HMO to EPO plan effective 12/18/2017
5. Waterford and Ceres terminated from SJVIA effective 1/1/2018
6. All Others Claims include runout for Ceres and Waterford

San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
All Districts Combined - HDHP





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Fresno - All Medical

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	3,950	\$4,389,610	\$2,506,823	\$1,025,374	\$365,827	\$0	\$3,898,023	\$491,586	\$894.23	88.8%
Feb-20	3,943	\$4,371,028	\$2,746,757	\$858,742	\$365,186	-\$173,505	\$3,797,180	\$573,848	\$870.40	86.9%
Mar-20	3,948	\$4,374,673	\$3,051,368	\$1,163,600	\$365,620	\$50,701	\$4,631,290	-\$256,617	\$1,080.46	105.9%
Apr-20	3,913	\$4,334,567	\$2,691,200	\$1,058,690	\$362,343	\$0	\$4,112,233	\$222,334	\$958.32	94.9%
May-20	3,925	\$4,351,224	\$2,397,772	\$981,209	\$363,330	\$0	\$3,742,312	\$608,912	\$860.89	86.0%
Jun-20	3,949	\$4,363,382	\$2,252,852	\$1,008,820	\$365,525	\$0	\$3,627,197	\$736,185	\$825.95	83.1%
Jul-20	3,927	\$4,345,200	\$3,009,522	\$1,075,523	\$363,463	-\$158,003	\$4,290,504	\$54,695	\$1,000.01	98.7%
Aug-20	3,908	\$4,326,792	\$3,425,233	\$1,021,221	\$361,732	\$0	\$4,808,186	-\$481,393	\$1,137.78	111.1%
Sep-20	3,904	\$4,331,783	\$3,268,592	\$1,047,897	\$361,363	-\$425,617	\$4,252,235	\$79,548	\$996.64	98.2%
Oct-20	3,897	\$4,323,016	\$2,912,075	\$1,055,408	\$360,840	-\$7,062	\$4,321,261	\$1,755	\$1,016.27	100.0%
Nov-20	3,892	\$4,324,343	\$3,154,140	\$950,876	\$360,170	-\$136,088	\$4,329,098	-\$4,755	\$1,019.77	100.1%
Dec-20	3,936	\$4,478,663	\$2,815,366	\$1,092,751	\$364,192	-\$55,952	\$4,216,357	\$262,306	\$978.70	94.1%
Jan-21	3,920	\$4,465,232	\$2,293,143	\$869,715	\$373,142	-\$14,142	\$3,521,858	\$943,374	\$803.24	78.9%
Feb-21	3,908	\$4,447,817	\$2,590,421	\$906,160	\$372,009	-\$48,745	\$3,819,846	\$627,971	\$882.25	85.9%
Mar-21	3,924	\$4,462,554	\$2,651,012	\$1,049,983	\$373,568	\$140,168	\$4,214,731	\$247,823	\$978.89	94.4%
Apr-21	3,911	\$4,441,632	\$3,290,878	\$1,140,629	\$372,406	\$0	\$4,803,913	-\$362,281	\$1,133.09	108.2%
May-21	3,887	\$4,415,607	\$3,777,819	\$1,025,040	\$370,020	-\$11,586	\$5,161,294	-\$745,687	\$1,232.64	116.9%
Jun-21	3,878	\$4,399,695	\$3,276,454	\$1,055,994	\$368,974	-\$71,571	\$4,629,850	-\$230,155	\$1,098.73	105.2%
Jul-21	3,866	\$4,385,135	\$3,066,332	\$1,028,681	\$367,888	-\$9,470	\$4,453,431	-\$68,295	\$1,056.79	101.6%
Aug-21	3,854	\$4,366,162	\$3,282,232	\$1,211,160	\$366,923	-\$22,046	\$4,838,268	-\$472,106	\$1,160.18	110.8%
Sep-21	3,849	\$4,356,215	\$2,877,090	\$1,095,114	\$366,588	-\$38,912	\$4,299,880	\$56,336	\$1,021.90	98.7%
Oct-21	3,849	\$4,354,084	\$3,703,729	\$1,185,040	\$366,445	-\$26,337	\$5,228,877	-\$874,793	\$1,263.30	120.1%
Nov-21	3,861	\$4,347,856	\$2,441,215	\$1,324,454	\$367,554	-\$46,784	\$4,086,439	\$261,416	\$963.19	94.0%
Dec-21	3,911	\$4,500,466	\$3,544,531	\$1,050,875	\$374,174	-\$40,307	\$4,929,273	-\$428,808	\$1,164.69	109.5%
2018	3,998	\$50,293,893	\$31,099,478	\$11,964,537	\$3,791,051	-\$381,378	\$46,473,688	\$3,820,205	\$889.74	92.4%
2019	3,933	\$51,210,455	\$36,088,764	\$11,135,254	\$4,364,951	-\$39,265	\$51,549,705	-\$339,249	\$999.83	100.7%
2020	3,924	\$52,314,281	\$34,231,702	\$12,340,110	\$4,359,591	-\$905,527	\$50,025,876	\$2,288,405	\$969.72	95.6%
2021 YTD	3,885	\$52,942,454	\$36,794,855	\$12,942,844	\$4,439,690	-\$189,731	\$53,987,658	-\$1,045,204	\$1,062.85	102.0%
Current 12 Months	3,885	\$52,942,454	\$36,794,855	\$12,942,844	\$4,439,690	-\$189,731	\$53,987,658	-\$1,045,204	\$1,062.85	102.0%

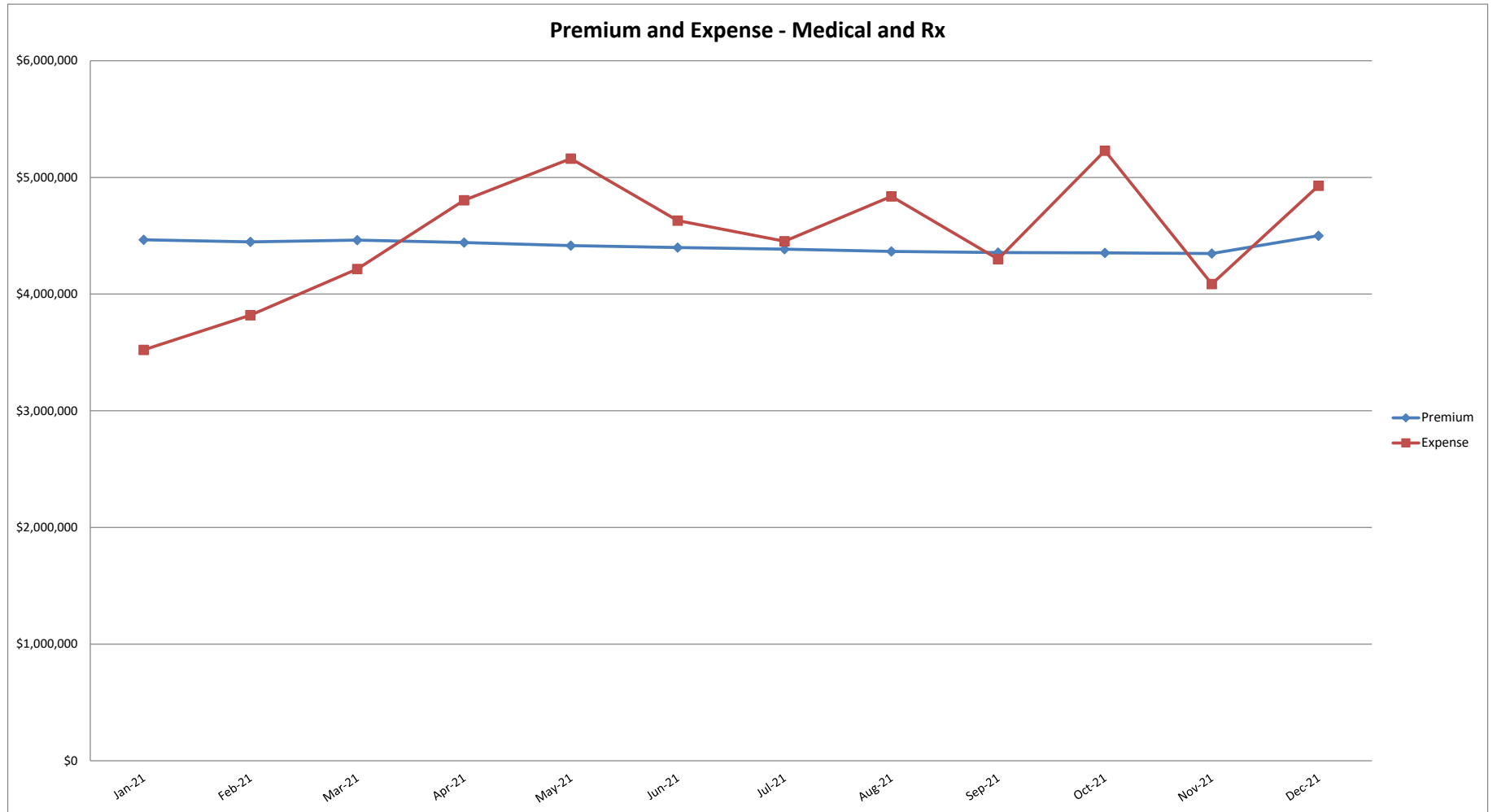
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Enrollment & Premium: Hourglass; **Medical Claims & Capitation:** Anthem CII, Anthem CLR, Anthem MDP; **Rx Claims:** Envelope, EmpiRx, Anthem MDP; **Fixed Cost Schedule:** Appendix

Notes:

1. Fixed Cost Schedule: Appendix
2. Pooling Points: HMO = \$400,000 and EPO/PPO/HDHP = \$450,000.
3. EmpiRx PBM replaced Envelope PBM effective 1/1/2018
4. Fresno converted HMO to EPO plan effective 12/18/2017

San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Fresno - All Medical





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Fresno - EPO

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	3,108	\$3,678,181	\$2,093,413	\$960,589	\$297,591	\$0	\$3,351,593	\$326,588	\$982.63	91.1%
Feb-20	3,103	\$3,666,962	\$2,478,232	\$790,500	\$297,112	-\$173,505	\$3,392,339	\$274,623	\$997.49	92.5%
Mar-20	3,105	\$3,666,293	\$2,566,124	\$1,085,231	\$297,304	\$50,701	\$3,999,360	-\$333,067	\$1,192.29	109.1%
Apr-20	3,075	\$3,632,941	\$2,309,587	\$965,092	\$294,431	\$0	\$3,569,111	\$63,830	\$1,064.94	98.2%
May-20	3,076	\$3,639,696	\$2,167,748	\$866,773	\$294,527	\$0	\$3,329,048	\$310,648	\$986.52	91.5%
Jun-20	3,093	\$3,645,833	\$2,032,116	\$908,516	\$296,155	\$0	\$3,236,787	\$409,046	\$950.74	88.8%
Jul-20	3,074	\$3,630,586	\$2,741,750	\$935,714	\$294,336	-\$158,003	\$3,813,797	-\$183,211	\$1,144.91	105.0%
Aug-20	3,061	\$3,619,689	\$3,087,343	\$895,240	\$293,091	\$0	\$4,275,674	-\$655,985	\$1,301.07	118.1%
Sep-20	3,058	\$3,619,677	\$3,014,014	\$911,800	\$292,804	-\$425,617	\$3,793,000	-\$173,323	\$1,144.60	104.8%
Oct-20	3,061	\$3,617,647	\$2,593,976	\$940,465	\$293,091	-\$7,062	\$3,820,469	-\$202,822	\$1,152.36	105.6%
Nov-20	3,043	\$3,617,395	\$2,769,050	\$845,938	\$291,367	-\$136,088	\$3,770,267	-\$152,871	\$1,143.25	104.2%
Dec-20	3,074	\$3,743,398	\$2,535,971	\$936,403	\$294,336	-\$55,952	\$3,710,757	\$32,641	\$1,111.39	99.1%
Jan-21	3,067	\$3,737,985	\$2,203,064	\$791,611	\$307,896	-\$14,142	\$3,288,428	\$449,557	\$971.81	88.0%
Feb-21	3,058	\$3,722,132	\$2,375,395	\$820,685	\$306,993	-\$48,745	\$3,454,329	\$267,804	\$1,029.21	92.8%
Mar-21	3,072	\$3,733,137	\$2,399,018	\$956,694	\$308,398	\$140,168	\$3,804,278	-\$71,141	\$1,137.98	101.9%
Apr-21	3,065	\$3,717,390	\$3,044,265	\$1,060,084	\$307,695	\$0	\$4,412,044	-\$694,654	\$1,339.10	118.7%
May-21	3,042	\$3,691,769	\$3,502,522	\$919,189	\$305,386	-\$11,586	\$4,715,512	-\$1,023,744	\$1,449.75	127.7%
Jun-21	3,027	\$3,671,906	\$2,929,075	\$944,767	\$303,881	-\$71,571	\$4,106,151	-\$434,245	\$1,256.12	111.8%
Jul-21	3,020	\$3,662,187	\$2,825,914	\$945,999	\$303,178	-\$9,470	\$4,065,620	-\$403,433	\$1,245.84	111.0%
Aug-21	3,018	\$3,652,449	\$3,077,988	\$1,082,497	\$302,977	-\$22,046	\$4,441,416	-\$788,967	\$1,371.25	121.6%
Sep-21	3,020	\$3,649,373	\$2,559,309	\$1,004,805	\$303,178	-\$38,912	\$3,828,380	-\$179,007	\$1,167.29	104.9%
Oct-21	3,014	\$3,645,539	\$3,245,752	\$1,037,188	\$302,575	-\$26,337	\$4,559,179	-\$913,639	\$1,412.28	125.1%
Nov-21	3,022	\$3,637,651	\$2,185,951	\$1,204,195	\$303,379	-\$46,784	\$3,646,741	-\$9,090	\$1,106.34	100.2%
Dec-21	3,139	\$3,854,725	\$3,057,366	\$946,150	\$315,124	-\$40,307	\$4,278,333	-\$423,608	\$1,262.57	111.0%
2018	3,091	\$41,225,886	\$27,109,361	\$10,112,448	\$3,050,694	-\$381,378	\$39,891,126	\$1,334,760	\$993.38	96.8%
2019	3,062	\$42,445,762	\$33,226,729	\$9,750,935	\$3,517,759	-\$39,265	\$46,456,159	-\$4,010,396	\$1,168.74	109.4%
2020	3,078	\$43,778,298	\$30,389,324	\$11,042,260	\$3,536,143	-\$905,527	\$44,062,200	-\$283,903	\$1,097.35	100.6%
2021 YTD	3,047	\$44,376,243	\$33,405,619	\$11,713,863	\$3,670,660	-\$189,731	\$48,600,411	-\$4,224,167	\$1,228.80	109.5%
Current 12 Months	3,047	\$44,376,243	\$33,405,619	\$11,713,863	\$3,670,660	-\$189,731	\$48,600,411	-\$4,224,167	\$1,228.80	109.5%

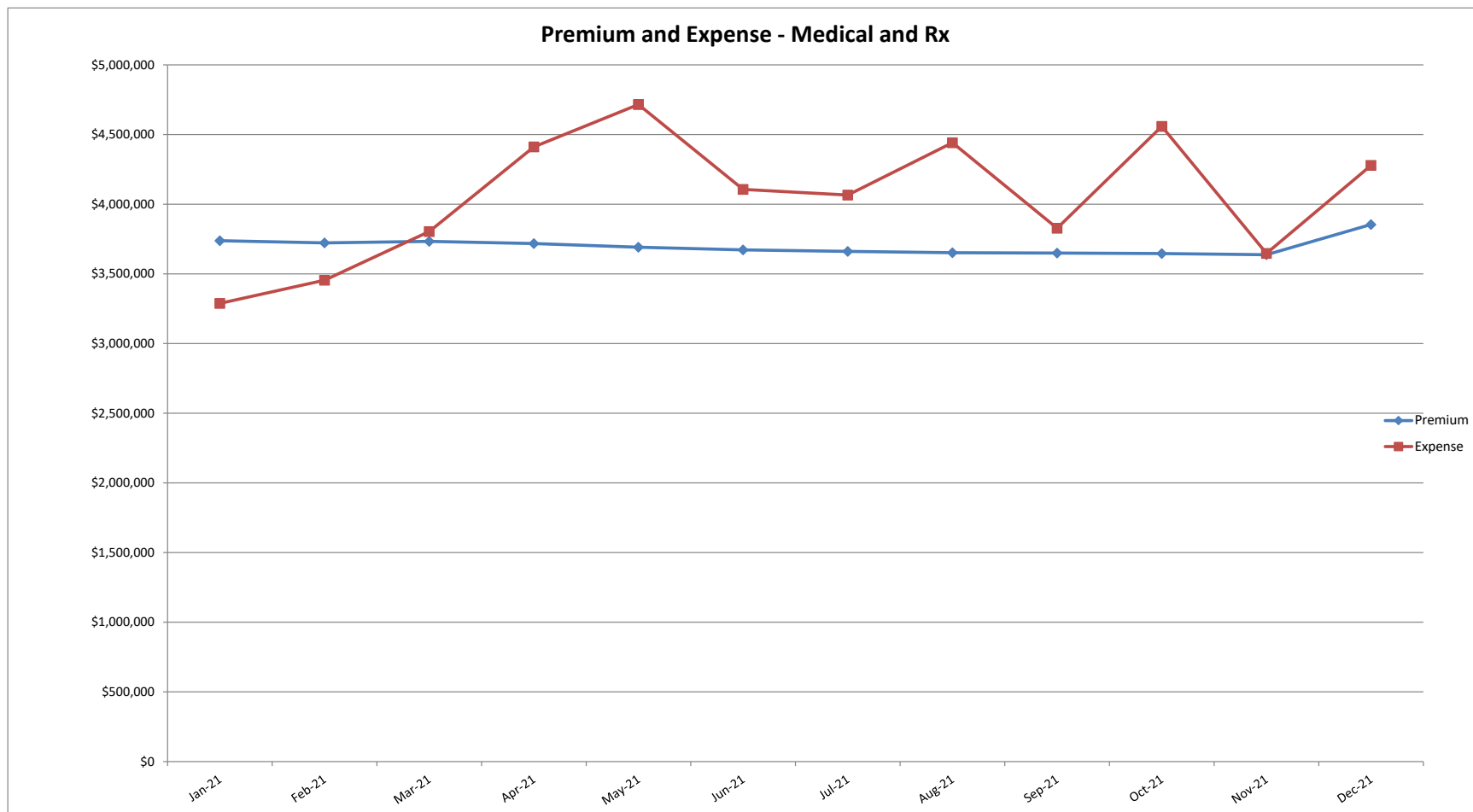
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Notes:

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**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Fresno - EPO**





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Fresno - PPO

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	113	\$150,611	\$44,461	\$33,080	\$9,158	\$0	\$86,699	\$63,913	\$686.20	57.6%
Feb-20	105	\$140,235	\$81,179	\$24,013	\$8,509	\$0	\$113,700	\$26,535	\$1,001.82	81.1%
Mar-20	107	\$142,826	\$94,713	\$28,685	\$8,671	\$0	\$132,069	\$10,757	\$1,153.25	92.5%
Apr-20	105	\$138,736	\$245,999	\$32,705	\$8,509	\$0	\$287,213	-\$148,477	\$2,654.32	207.0%
May-20	113	\$145,851	\$62,705	\$25,127	\$9,158	\$0	\$96,990	\$48,861	\$777.28	66.5%
Jun-20	115	\$149,285	\$40,224	\$26,202	\$9,320	\$0	\$75,745	\$73,539	\$577.61	50.7%
Jul-20	116	\$149,875	\$55,488	\$37,071	\$9,401	\$0	\$101,960	\$47,915	\$797.93	68.0%
Aug-20	115	\$147,953	\$83,102	\$35,624	\$9,320	\$0	\$128,046	\$19,908	\$1,032.40	86.5%
Sep-20	117	\$154,818	\$90,934	\$16,187	\$9,482	\$0	\$116,603	\$38,215	\$915.56	75.3%
Oct-20	114	\$153,082	\$79,009	\$36,150	\$9,239	\$0	\$124,397	\$28,685	\$1,010.16	81.3%
Nov-20	114	\$153,082	\$60,431	\$25,725	\$9,239	\$0	\$95,394	\$57,688	\$755.75	62.3%
Dec-20	122	\$163,341	\$61,762	\$30,209	\$9,887	\$0	\$101,857	\$61,484	\$753.86	62.4%
Jan-21	120	\$159,998	\$11,046	\$26,955	\$9,179	\$0	\$47,179	\$112,818	\$316.67	29.5%
Feb-21	122	\$164,331	\$38,591	\$30,417	\$9,332	\$0	\$78,340	\$85,991	\$565.64	47.7%
Mar-21	123	\$165,713	\$65,374	\$25,689	\$9,408	\$0	\$100,471	\$65,242	\$740.35	60.6%
Apr-21	119	\$161,093	\$52,817	\$30,611	\$9,102	\$0	\$92,531	\$68,562	\$701.08	57.4%
May-21	120	\$162,516	\$55,450	\$20,459	\$9,179	\$0	\$85,088	\$77,428	\$632.57	52.4%
Jun-21	118	\$158,897	\$53,313	\$39,780	\$9,026	\$0	\$102,118	\$56,779	\$788.92	64.3%
Jul-21	116	\$155,641	\$119,445	\$30,593	\$8,873	\$0	\$158,911	-\$3,270	\$1,293.43	102.1%
Aug-21	117	\$155,277	\$27,765	\$30,302	\$8,949	\$0	\$67,017	\$88,260	\$496.31	43.2%
Sep-21	114	\$152,594	\$56,689	\$29,220	\$8,720	\$0	\$94,629	\$57,966	\$753.59	62.0%
Oct-21	112	\$150,806	\$48,498	\$29,709	\$8,567	\$0	\$86,774	\$64,032	\$698.27	57.5%
Nov-21	111	\$149,605	\$52,321	\$39,427	\$8,490	\$0	\$100,238	\$49,368	\$826.55	67.0%
Dec-21	88	\$128,404	\$69,540	\$28,641	\$6,731	\$0	\$104,912	\$23,492	\$1,115.70	81.7%
2018	138	\$2,145,877	\$856,122	\$497,925	\$112,965	\$0	\$1,467,011	\$678,866	\$815.20	68.4%
2019	115	\$1,846,048	\$620,255	\$353,355	\$111,916	\$0	\$1,085,526	\$760,522	\$705.00	58.8%
2020	113	\$1,789,697	\$1,000,007	\$350,776	\$109,890	\$0	\$1,460,673	\$329,023	\$996.15	81.6%
2021 YTD	115	\$1,864,875	\$650,849	\$361,802	\$105,556	\$0	\$1,118,207	\$746,668	\$733.80	60.0%
Current 12 Months	115	\$1,864,875	\$650,849	\$361,802	\$105,556	\$0	\$1,118,207	\$746,668	\$733.80	60.0%

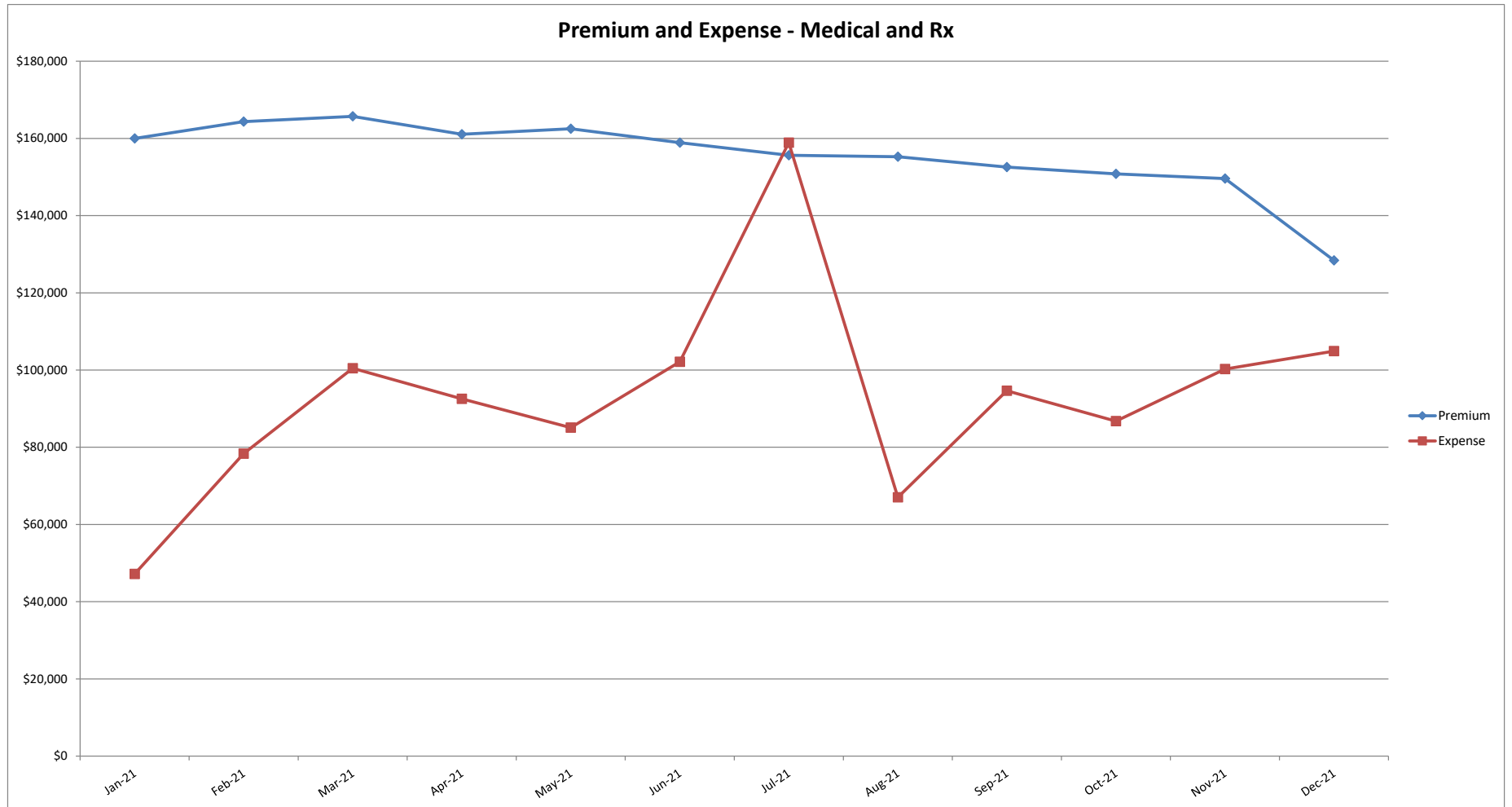
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**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Fresno - PPO**





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Fresno - HDHP

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	729	\$560,817	\$368,949	\$31,705	\$59,078	\$0	\$459,732	\$101,085	\$549.59	82.0%
Feb-20	735	\$563,831	\$187,347	\$44,230	\$59,564	\$0	\$291,141	\$272,690	\$315.07	51.6%
Mar-20	736	\$565,554	\$390,531	\$49,684	\$59,645	\$0	\$499,861	\$65,693	\$598.12	88.4%
Apr-20	733	\$562,890	\$135,614	\$60,893	\$59,402	\$0	\$255,909	\$306,981	\$268.09	45.5%
May-20	736	\$565,677	\$167,319	\$89,310	\$59,645	\$0	\$316,274	\$249,403	\$348.68	55.9%
Jun-20	741	\$568,265	\$180,512	\$74,103	\$60,051	\$0	\$314,665	\$253,599	\$343.61	55.4%
Jul-20	737	\$564,738	\$212,284	\$102,737	\$59,726	\$0	\$374,748	\$189,991	\$427.44	66.4%
Aug-20	732	\$559,150	\$254,788	\$90,357	\$59,321	\$0	\$404,466	\$154,684	\$471.51	72.3%
Sep-20	729	\$557,288	\$163,644	\$119,910	\$59,078	\$0	\$342,632	\$214,656	\$388.96	61.5%
Oct-20	722	\$552,287	\$239,090	\$78,793	\$58,511	\$0	\$376,394	\$175,892	\$440.28	68.2%
Nov-20	735	\$553,866	\$324,660	\$79,213	\$59,564	\$0	\$463,437	\$90,428	\$549.49	83.7%
Dec-20	740	\$571,924	\$217,634	\$126,139	\$59,970	\$0	\$403,743	\$168,181	\$464.56	70.6%
Jan-21	733	\$567,249	\$79,033	\$51,150	\$56,067	\$0	\$186,250	\$380,999	\$177.60	32.8%
Feb-21	728	\$561,353	\$176,435	\$55,057	\$55,685	\$0	\$287,177	\$274,176	\$317.98	51.2%
Mar-21	729	\$563,705	\$186,620	\$67,601	\$55,761	\$0	\$309,982	\$253,723	\$348.73	55.0%
Apr-21	727	\$563,149	\$193,796	\$49,934	\$55,608	\$0	\$299,338	\$263,811	\$335.25	53.2%
May-21	725	\$561,323	\$219,847	\$85,392	\$55,455	\$0	\$360,694	\$200,629	\$421.02	64.3%
Jun-21	733	\$568,892	\$294,067	\$71,447	\$56,067	\$0	\$421,580	\$147,312	\$498.65	74.1%
Jul-21	730	\$567,307	\$120,972	\$52,089	\$55,838	\$0	\$228,899	\$338,407	\$237.07	40.3%
Aug-21	719	\$558,436	\$176,478	\$98,361	\$54,996	\$0	\$329,835	\$228,601	\$382.25	59.1%
Sep-21	715	\$554,248	\$261,091	\$61,089	\$54,690	\$0	\$376,871	\$177,377	\$450.60	68.0%
Oct-21	723	\$557,739	\$409,479	\$118,143	\$55,302	\$0	\$582,924	-\$25,186	\$729.77	104.5%
Nov-21	728	\$560,599	\$202,943	\$80,833	\$55,685	\$0	\$339,461	\$221,138	\$389.80	60.6%
Dec-21	684	\$517,336	\$417,625	\$76,084	\$52,319	\$0	\$546,028	-\$28,692	\$721.80	105.5%
2018	769	\$6,922,130	\$3,133,995	\$1,354,164	\$627,392	\$0	\$5,115,551	\$1,806,579	\$486.52	73.9%
2019	756	\$6,918,645	\$2,241,780	\$1,030,964	\$735,276	\$0	\$4,008,020	\$2,910,625	\$360.71	57.9%
2020	734	\$6,746,287	\$2,842,371	\$947,074	\$713,557	\$0	\$4,503,003	\$2,243,284	\$430.37	66.7%
2021 YTD	723	\$6,701,335	\$2,738,386	\$867,179	\$663,474	\$0	\$4,269,040	\$2,432,295	\$415.68	63.7%
Current 12 Months	723	\$6,701,335	\$2,738,386	\$867,179	\$663,474	\$0	\$4,269,040	\$2,432,295	\$415.68	63.7%

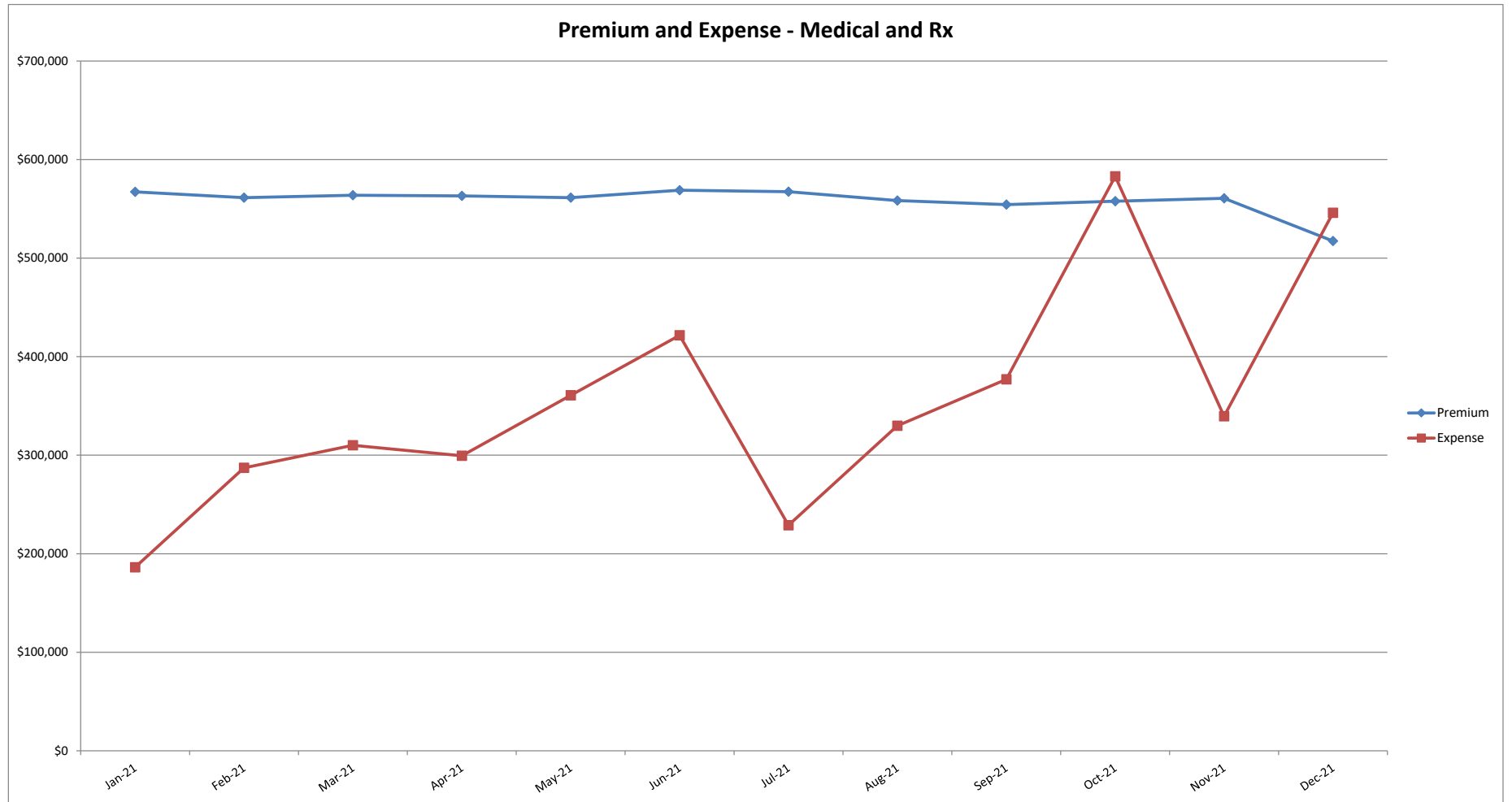
Data Sources:

Enrollment & Premium: Hourglass; **Medical Claims & Capitation:** Anthem CIL, Anthem CLR, Anthem MDP; **Rx Claims:** Envelope, EmpiRx, Anthem MDP; **Fixed Cost Schedule:** Appendix

Notes:

1. Fixed Cost Schedule: Appendix
2. Pooling Points: HMO = \$400,000 and EPO/PPO/HDHP = \$450,000.
3. EmpiRx PBM replaced Envelope PBM effective 1/1/2018
4. Fresno converted HMO to EPO plan effective 12/18/2017

**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Fresno - HDHP**





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Tulare - All Medical

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	3,026	\$2,452,127	\$1,338,185	\$654,787	\$223,500	\$0	\$2,216,472	\$235,655	\$659	90.4%
Feb-20	3,009	\$2,439,588	\$1,201,892	\$562,051	\$222,245	\$0	\$1,986,187	\$453,401	\$586.22	81.4%
Mar-20	3,030	\$2,457,900	\$1,310,352	\$770,151	\$223,796	\$0	\$2,304,299	\$153,601	\$686.63	93.8%
Apr-20	3,038	\$2,468,121	\$821,895	\$682,392	\$224,387	\$0	\$1,728,673	\$739,448	\$495.16	70.0%
May-20	3,033	\$2,465,203	\$1,217,315	\$622,577	\$224,017	\$0	\$2,063,909	\$401,294	\$606.62	83.7%
Jun-20	3,042	\$2,472,097	\$1,125,674	\$663,022	\$224,682	\$0	\$2,013,378	\$458,719	\$588.00	81.4%
Jul-20	3,041	\$2,474,410	\$1,465,767	\$609,757	\$224,608	\$0	\$2,300,132	\$174,278	\$682.51	93.0%
Aug-20	3,030	\$2,465,747	\$1,583,129	\$663,204	\$223,796	\$0	\$2,470,129	-\$4,382	\$741.36	100.2%
Sep-20	3,029	\$2,470,099	\$1,305,885	\$691,453	\$223,722	\$0	\$2,221,060	\$249,040	\$659.40	89.9%
Oct-20	3,026	\$2,467,478	\$1,474,912	\$624,269	\$223,500	\$0	\$2,322,682	\$144,796	\$693.71	94.1%
Nov-20	3,014	\$2,456,433	\$1,414,232	\$645,700	\$222,614	\$0	\$2,282,546	\$173,887	\$683.45	92.9%
Dec-20	3,013	\$2,458,866	\$1,331,128	\$697,672	\$222,540	\$0	\$2,251,340	\$207,525	\$673	91.6%
Jan-21	3,019	\$2,370,580	\$1,152,049	\$575,386	\$233,489	\$0	\$1,960,924	\$409,656	\$572	82.7%
Feb-21	3,006	\$2,358,023	\$896,055	\$559,428	\$232,484	\$0	\$1,687,967	\$670,056	\$484.19	71.6%
Mar-21	2,996	\$2,354,909	\$1,413,310	\$678,437	\$231,711	\$0	\$2,323,458	\$31,451	\$698.18	98.7%
Apr-21	2,998	\$2,356,361	\$1,500,478	\$747,490	\$231,865	\$0	\$2,479,833	-\$123,472	\$749.82	105.2%
May-21	2,999	\$2,356,743	\$1,092,495	\$617,755	\$231,943	\$0	\$1,942,194	\$414,549	\$570.27	82.4%
Jun-21	3,001	\$2,352,971	\$1,643,842	\$708,050	\$232,097	\$0	\$2,583,989	-\$231,018	\$783.70	109.8%
Jul-21	3,005	\$2,361,136	\$1,325,798	\$736,009	\$232,407	\$0	\$2,294,213	\$66,923	\$686.13	97.2%
Aug-21	3,001	\$2,359,169	\$1,231,550	\$746,030	\$232,097	\$0	\$2,209,678	\$149,491	\$658.97	93.7%
Sep-21	2,993	\$2,356,566	\$1,794,851	\$692,731	\$231,479	\$0	\$2,719,061	-\$362,496	\$831.13	115.4%
Oct-21	2,991	\$2,360,299	\$1,639,536	\$829,276	\$231,324	\$0	\$2,700,136	-\$339,837	\$825.41	114.4%
Nov-21	2,974	\$2,351,618	\$1,505,141	\$755,830	\$230,009	-\$101,650	\$2,389,331	-\$37,712	\$726.07	101.6%
Dec-21	2,997	\$2,366,531	\$2,342,316	\$830,364	\$231,788	-\$37,267	\$3,367,201	-\$1,000,670	\$1,046.18	142.3%
2018	2,939	\$26,943,450	\$13,823,569	\$7,662,266	\$2,327,909	-\$169,926	\$23,643,818	\$3,299,632	\$604.43	87.8%
2019	3,015	\$28,092,399	\$15,705,269	\$7,773,168	\$2,671,812	\$0	\$26,150,249	\$1,942,150	\$649.04	93.1%
2020	3,028	\$29,548,070	\$15,590,368	\$7,887,033	\$2,683,408	\$0	\$26,160,808	\$3,387,262	\$646.21	88.5%
2021 YTD	2,998	\$28,304,906	\$17,537,421	\$8,476,786	\$2,782,693	-\$138,916	\$28,657,985	-\$353,079	\$719.16	101.2%
Current 12 Months	2,998	\$28,304,906	\$17,537,421	\$8,476,786	\$2,782,693	-\$138,916	\$28,657,985	-\$353,079	\$719.16	101.2%

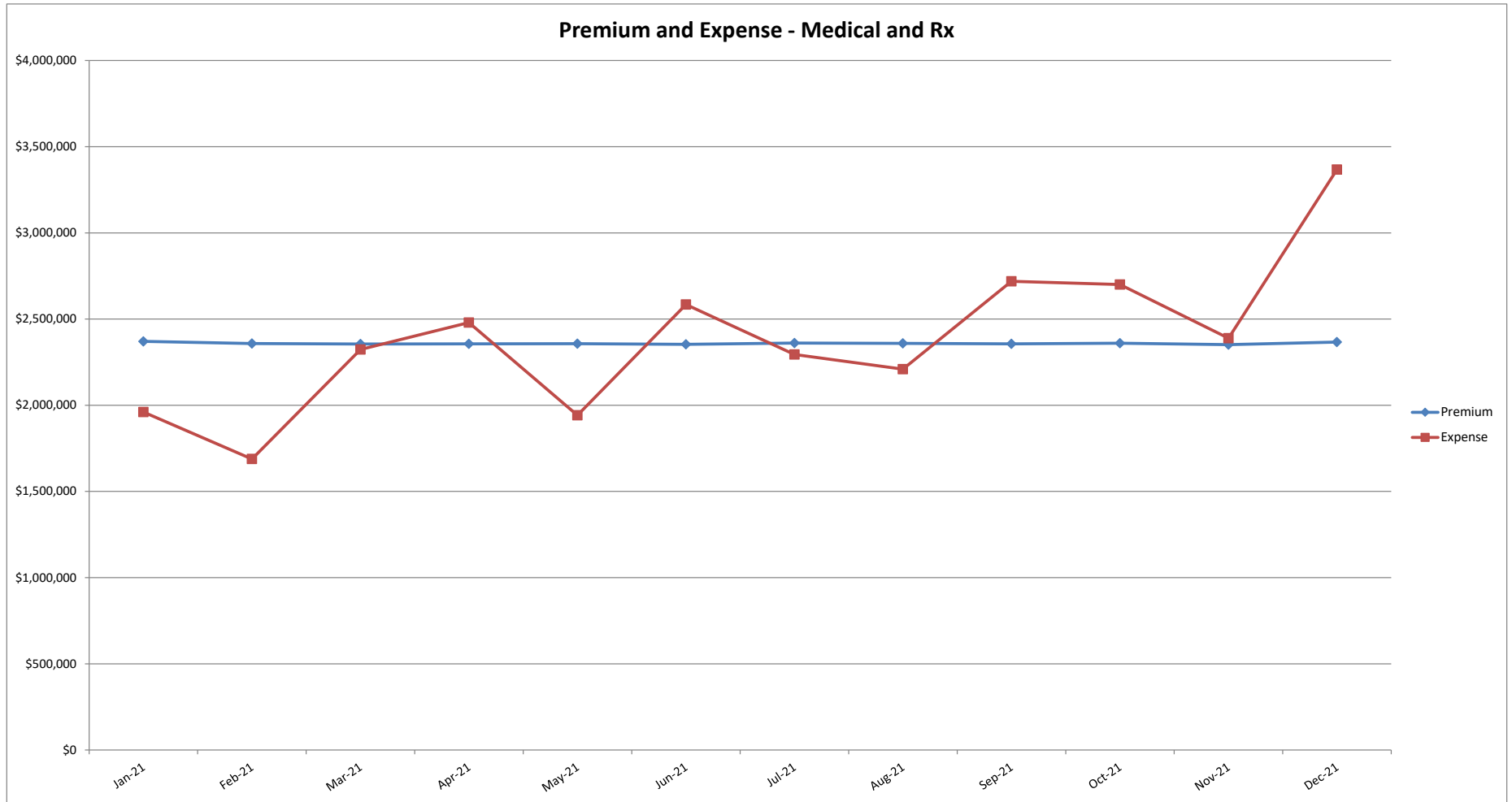
Data Sources:

Enrollment & Premium: Hourglass; **Medical Claims & Capitation:** Anthem CII, Anthem CLR, Anthem MDP; **Rx Claims:** Envolve, EmpiRx, Anthem MDP; **Fixed Cost Schedule:** Appendix

Notes:

1. Fixed Cost Schedule: Appendix
2. Pooling Points: HMO = \$400,000 and EPO/PPO/HDHP = \$450,000.
3. EmpiRx PBM replaced Envolve PBM effective 1/1/2018

San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Tulare - All Medical





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Tulare - PPO

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	2,992	\$2,426,484	\$1,331,270	\$654,819	\$220,989	\$0	\$2,207,078	\$219,405	\$663.80	91.0%
Feb-20	2,974	\$2,413,335	\$1,041,531	\$561,230	\$219,660	\$0	\$1,822,421	\$590,914	\$538.92	75.5%
Mar-20	2,994	\$2,430,428	\$1,158,107	\$752,488	\$221,137	\$0	\$2,131,732	\$298,696	\$638.14	87.7%
Apr-20	3,002	\$2,440,649	\$805,407	\$674,100	\$221,728	\$0	\$1,701,235	\$739,414	\$492.84	69.7%
May-20	2,997	\$2,437,731	\$1,063,611	\$602,479	\$221,358	\$0	\$1,887,449	\$550,282	\$555.92	77.4%
Jun-20	3,006	\$2,444,625	\$1,119,062	\$662,685	\$222,023	\$0	\$2,003,769	\$440,855	\$592.73	82.0%
Jul-20	3,005	\$2,446,938	\$1,444,915	\$594,262	\$221,949	\$0	\$2,261,126	\$185,812	\$678.59	92.4%
Aug-20	2,995	\$2,438,885	\$1,575,623	\$659,474	\$221,211	\$0	\$2,456,308	-\$17,423	\$746.28	100.7%
Sep-20	2,994	\$2,443,237	\$1,298,645	\$676,096	\$221,137	\$0	\$2,195,878	\$247,359	\$659.57	89.9%
Oct-20	2,992	\$2,441,225	\$1,466,205	\$623,730	\$220,989	\$0	\$2,310,924	\$130,301	\$698.51	94.7%
Nov-20	2,980	\$2,430,181	\$1,409,944	\$633,597	\$220,103	\$0	\$2,263,644	\$166,537	\$685.75	93.1%
Dec-20	2,979	\$2,432,613	\$1,317,375	\$697,311	\$220,029	\$0	\$2,234,716	\$197,897	\$676.30	91.9%
Jan-21	2,984	\$2,344,599	\$1,145,993	\$566,062	\$230,783	\$0	\$1,942,837	\$401,762	\$573.74	82.9%
Feb-21	2,971	\$2,332,042	\$892,721	\$559,224	\$229,777	\$0	\$1,681,723	\$650,319	\$488.71	72.1%
Mar-21	2,962	\$2,329,513	\$1,390,603	\$666,042	\$229,081	\$0	\$2,285,726	\$43,787	\$694.34	98.1%
Apr-21	2,964	\$2,330,965	\$1,491,947	\$746,044	\$229,236	\$0	\$2,467,226	-\$136,262	\$755.06	105.8%
May-21	2,966	\$2,332,516	\$1,090,117	\$603,867	\$229,390	\$0	\$1,923,375	\$409,141	\$571.13	82.5%
Jun-21	2,969	\$2,329,329	\$1,640,880	\$707,741	\$229,622	\$0	\$2,578,244	-\$248,915	\$791.05	110.7%
Jul-21	2,974	\$2,338,566	\$1,307,826	\$722,941	\$230,009	\$0	\$2,260,777	\$77,789	\$682.84	96.7%
Aug-21	2,970	\$2,336,599	\$1,194,691	\$745,857	\$229,700	\$0	\$2,170,248	\$166,351	\$653.38	92.9%
Sep-21	2,963	\$2,334,580	\$1,774,117	\$692,198	\$229,158	\$0	\$2,695,473	-\$360,893	\$832.37	115.5%
Oct-21	2,960	\$2,337,729	\$1,629,228	\$816,620	\$228,926	\$0	\$2,674,774	-\$337,044	\$826.30	114.4%
Nov-21	2,942	\$2,328,464	\$1,484,130	\$754,561	\$227,534	-\$101,650	\$2,364,576	-\$36,112	\$726.39	101.6%
Dec-21	2,965	\$2,343,376	\$2,339,634	\$816,140	\$229,313	-\$37,267	\$3,347,821	-\$1,004,444	\$1,051.77	142.9%
2018	2,904	\$26,669,376	\$13,757,286	\$7,654,950	\$2,299,920	-\$169,926	\$23,542,231	\$3,127,146	\$609.68	88.3%
2019	2,980	\$27,794,664	\$15,414,671	\$7,688,962	\$2,641,307	\$0	\$25,744,940	\$2,049,724	\$646.06	92.6%
2020	2,993	\$29,226,330	\$15,031,695	\$7,792,272	\$2,652,313	\$0	\$25,476,280	\$3,750,050	\$635.59	87.2%
2021 YTD	2,966	\$28,018,278	\$17,381,887	\$8,397,297	\$2,752,531	-\$138,916	\$28,392,798	-\$374,521	\$720.43	101.3%
Current 12 Months	2,966	\$28,018,278	\$17,381,887	\$8,397,297	\$2,752,531	-\$138,916	\$28,392,798	-\$374,521	\$720.43	101.3%

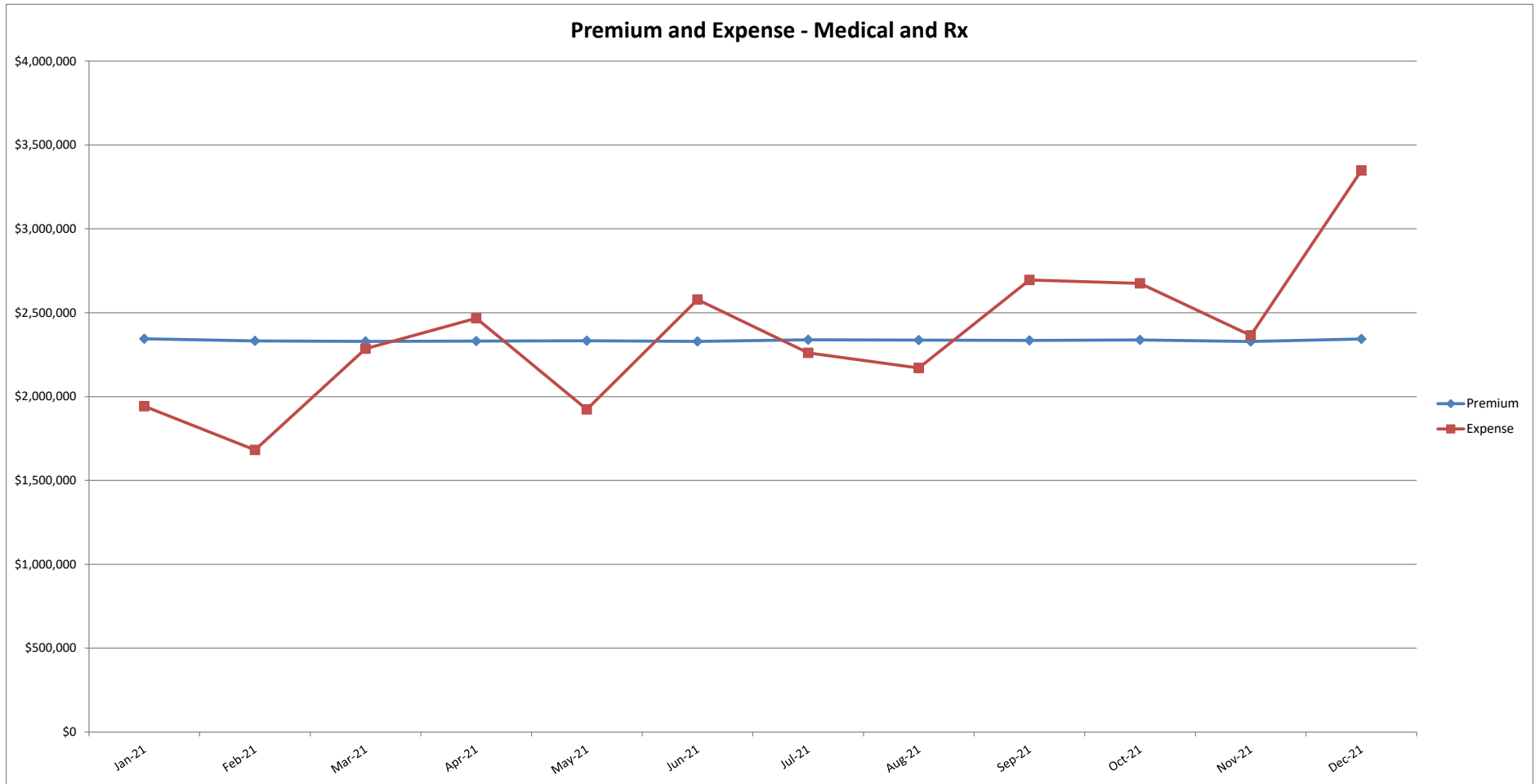
Data Sources:

Enrollment & Premium: Hourglass; **Medical Claims & Capitation:** Anthem CIL, Anthem CLR, Anthem MDP; **Rx Claims:** Envelope, EmpiRx, Anthem MDP; **Fixed Cost Schedule:** Appendix

Notes:

1. Fixed Cost Schedule: Appendix
2. EPO/PPO/HDHP = \$450,000.
3. EmpiRx PBM replaced Envelope PBM effective 1/1/2018

**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Tulare - PPO**





San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Tulare - HDHP

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jan-20	34	\$25,644	\$6,915	-\$32	\$2,511	\$0	\$9,394	\$16,249	\$202.44	36.6%
Feb-20	35	\$26,253	\$160,361	\$820	\$2,585	\$0	\$163,766	-\$137,513	\$4,605.17	623.8%
Mar-20	36	\$27,472	\$152,246	\$17,662	\$2,659	\$0	\$172,567	-\$145,095	\$4,719.67	628.2%
Apr-20	36	\$27,472	\$16,488	\$8,292	\$2,659	\$0	\$27,438	\$34	\$688.32	99.9%
May-20	36	\$27,472	\$153,704	\$20,097	\$2,659	\$0	\$176,461	-\$148,988	\$4,827.82	642.3%
Jun-20	36	\$27,472	\$6,613	\$337	\$2,659	\$0	\$9,609	\$17,863	\$193.06	35.0%
Jul-20	36	\$27,472	\$20,852	\$15,495	\$2,659	\$0	\$39,006	-\$11,533	\$1,009.63	142.0%
Aug-20	35	\$26,862	\$7,506	\$3,730	\$2,585	\$0	\$13,821	\$13,041	\$321.04	51.5%
Sep-20	35	\$26,862	\$7,240	\$15,357	\$2,585	\$0	\$25,182	\$1,680	\$645.63	93.7%
Oct-20	34	\$26,252	\$8,708	\$539	\$2,511	\$0	\$11,758	\$14,495	\$271.96	44.8%
Nov-20	34	\$26,252	\$4,288	\$12,102	\$2,511	\$0	\$18,902	\$7,351	\$482.07	72.0%
Dec-20	34	\$26,252	\$13,753	\$360	\$2,511	\$0	\$16,624	\$9,628	\$415.10	63.3%
Jan-21	35	\$25,981	\$6,056	\$9,324	\$2,707	\$0	\$18,087	\$7,893	\$439.44	69.6%
Feb-21	35	\$25,981	\$3,333	\$204	\$2,707	\$0	\$6,244	\$19,736	\$101.07	24.0%
Mar-21	34	\$25,396	\$22,708	\$12,395	\$2,630	\$0	\$37,732	-\$12,336	\$1,032.42	148.6%
Apr-21	34	\$25,396	\$8,531	\$1,446	\$2,630	\$0	\$12,606	\$12,789	\$293.44	49.6%
May-21	33	\$24,227	\$2,378	\$13,888	\$2,552	\$0	\$18,819	\$5,409	\$492.92	77.7%
Jun-21	32	\$23,642	\$2,962	\$309	\$2,475	\$0	\$5,746	\$17,897	\$102.21	24.3%
Jul-21	31	\$22,570	\$17,971	\$13,067	\$2,398	\$0	\$33,436	-\$10,866	\$1,001.26	148.1%
Aug-21	31	\$22,570	\$36,859	\$173	\$2,398	\$0	\$39,430	-\$16,860	\$1,194.58	174.7%
Sep-21	30	\$21,985	\$20,735	\$533	\$2,320	\$0	\$23,588	-\$1,603	\$708.93	107.3%
Oct-21	31	\$22,570	\$10,309	\$12,656	\$2,398	\$0	\$25,362	-\$2,792	\$740.80	112.4%
Nov-21	32	\$23,155	\$21,011	\$1,269	\$2,475	\$0	\$24,755	-\$1,600	\$696.26	106.9%
Dec-21	32	\$23,155	\$2,682	\$14,224	\$2,475	\$0	\$19,380	\$3,774	\$528.30	83.7%
2018	35	\$274,074	\$66,283	\$7,316	\$27,988	\$0	\$101,587	\$172,487	\$173.58	37.1%
2019	34	\$297,735	\$290,599	\$84,207	\$30,504	\$0	\$405,309	-\$107,574	\$907.52	136.1%
2020	35	\$321,740	\$558,672	\$94,761	\$31,095	\$0	\$684,528	-\$362,788	\$1,552.10	212.8%
2021 YTD	33	\$286,628	\$155,535	\$79,489	\$30,163	\$0	\$265,186	\$21,442	\$602.62	92.5%
Current 12 Months	33	\$286,628	\$155,535	\$79,489	\$30,163	\$0	\$265,186	\$21,442	\$602.62	92.5%

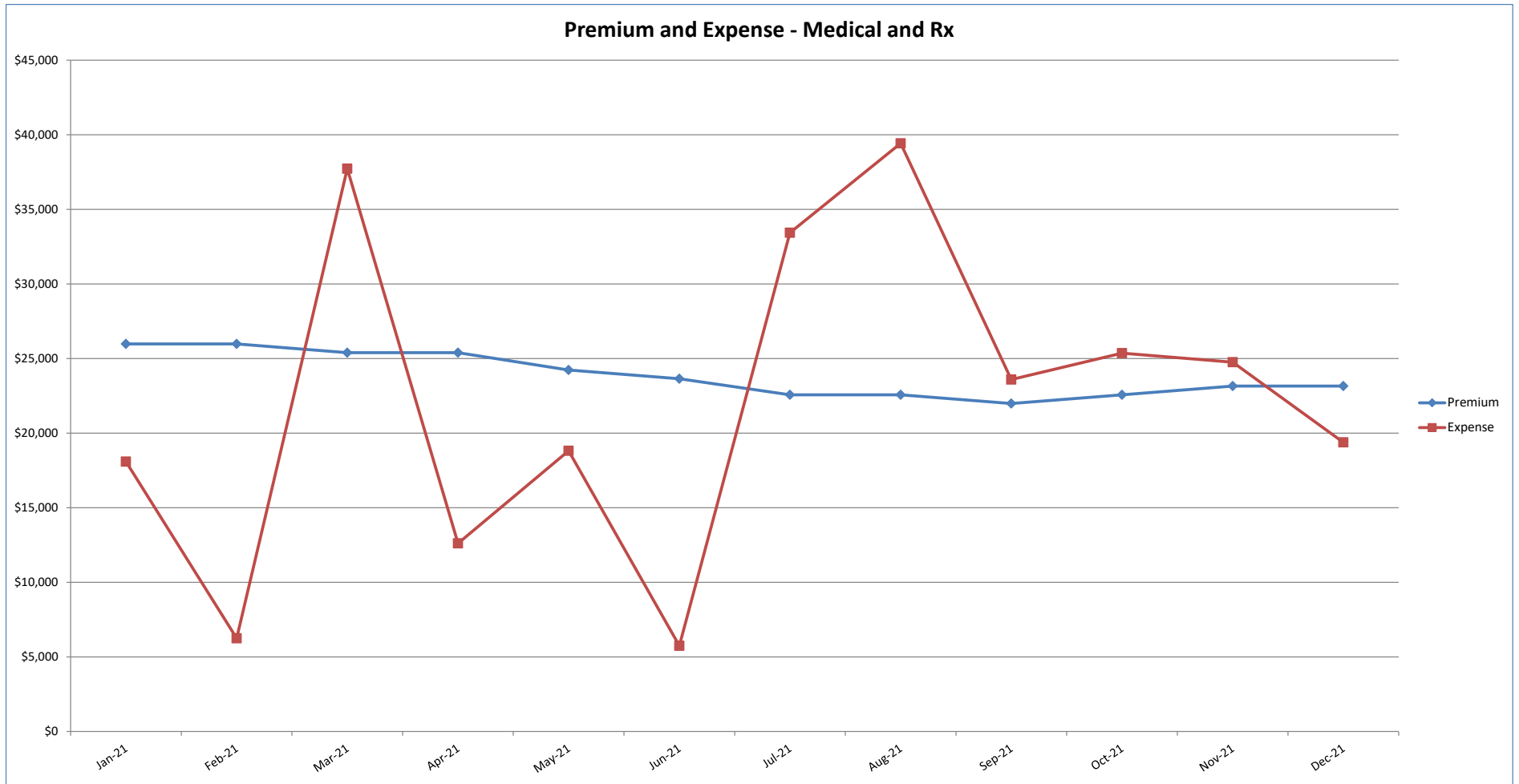
Data Sources:

Enrollment & Premium: Hourglass; **Medical Claims & Capitation:** Anthem CIL, Anthem CLR, Anthem MDP; **Rx Claims:** Envelope, EmpiRx, Anthem MDP; **Fixed Cost Schedule:** Appendix

Notes:

1. Fixed Cost Schedule: Appendix
2. Pooling Points: HMO = \$400,000 and EPO/PPO/HDHP = \$450,000.
3. EmpiRx PBM replaced Envelope PBM effective 1/1/2018

**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of December 2021
County of Tulare - HDHP**



Appendix

Fixed Cost Schedule				
SJVIA	Anthem Blue Cross Premium and Claims Report as of December 2021			
Total Fixed Costs Self-Funded Medical	EPO	PPO/HDHP		
	Fresno	Fresno	Tulare	
Specific Stop-Loss Premium PEPM	\$29.37	\$19.91	\$22.71	
Aggregate Stop-Loss Premium PEPM	\$0.00	\$0.00	\$0.00	
Anthem Network & Admin. Fees	\$50.41	\$36.16	\$36.16	
EmpiRX Admin Fee	\$5.28	\$5.28	\$5.28	
Pooled Risk Charge	\$0.00	\$0.00	\$0.00	
Wellness	\$2.50	\$2.50	\$2.50	
Claims Mgmt/Communication	\$0.50	\$0.50	\$0.50	
Keenan Consulting Fee	\$3.10	\$3.10	\$3.10	
KPS Fee	\$2.16	\$2.16	\$2.16	
SJVIA Fee	\$2.00	\$2.00	\$2.00	
SJVIA Non-Founding Member Fee	\$0.00	\$0.00	\$0.00	
Hourglass - Benefit Administration	\$2.65	\$2.65	\$2.65	
ASI - Benefit Administration	\$2.00	\$2.00	\$0.00	
PCORI Fees	\$0.42	\$0.23	\$0.28	
Total Fixed Cost	\$ 100.39	\$ 76.49	\$ 77.34	



San Joaquin Valley Insurance Authority (SJVIA)
Delta Dental Premium and Claims Report as of December 2021
County of Fresno and County of Tulare

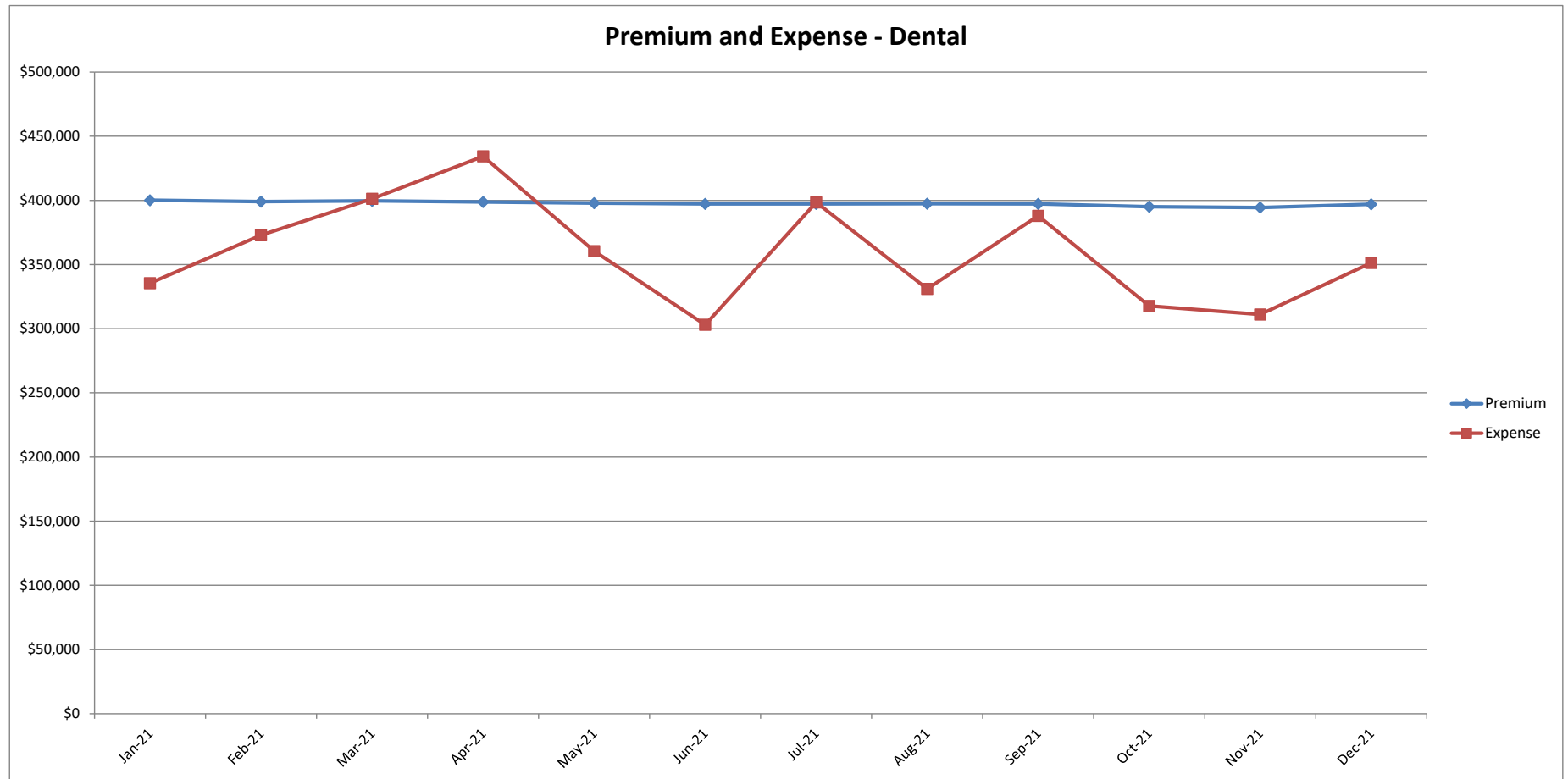
MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	DELTA ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
Jan-20	7,300	\$401,910	\$365,829	\$28,251	\$394,080	\$7,830	98.05%
Feb-20	7,284	\$401,235	\$374,648	\$28,189	\$402,837	-\$1,603	100.40%
Mar-20	7,308	\$402,164	\$301,949	\$28,282	\$330,231	\$71,933	82.11%
Apr-20	7,288	\$400,881	\$127,803	\$28,205	\$156,007	\$244,874	38.92%
May-20	7,310	\$402,682	\$122,396	\$28,290	\$150,686	\$251,996	37.42%
Jun-20	7,354	\$404,481	\$258,916	\$28,460	\$287,376	\$117,105	71.05%
Jul-20	7,328	\$403,096	\$376,903	\$28,359	\$405,262	-\$2,167	100.54%
Aug-20	7,293	\$401,160	\$289,047	\$28,224	\$317,271	\$83,889	79.09%
Sep-20	7,282	\$401,156	\$314,123	\$28,181	\$342,304	\$58,852	85.33%
Oct-20	7,256	\$399,834	\$398,963	\$28,081	\$427,044	-\$27,210	106.81%
Nov-20	7,244	\$399,874	\$301,164	\$28,034	\$329,199	\$70,675	82.33%
Dec-20	7,310	\$400,109	\$326,639	\$28,290	\$354,929	\$45,180	88.71%
Jan-21	7,327	\$400,148	\$307,101	\$28,355	\$335,457	\$64,691	83.83%
Feb-21	7,308	\$399,007	\$344,612	\$28,282	\$372,894	\$26,113	93.46%
Mar-21	7,316	\$399,627	\$372,906	\$28,313	\$401,219	-\$1,592	100.40%
Apr-21	7,308	\$398,731	\$406,024	\$28,282	\$434,306	-\$35,574	108.92%
May-21	7,300	\$397,910	\$332,284	\$28,251	\$360,535	\$37,376	90.61%
Jun-21	7,293	\$397,242	\$274,857	\$28,224	\$303,081	\$94,161	76.30%
Jul-21	7,294	\$397,249	\$370,180	\$28,228	\$398,408	-\$1,159	100.29%
Aug-21	7,297	\$397,422	\$302,814	\$28,239	\$331,053	\$66,369	83.30%
Sep-21	7,293	\$397,263	\$359,705	\$28,224	\$387,929	\$9,335	97.65%
Oct-21	7,248	\$395,106	\$289,713	\$28,050	\$317,763	\$77,343	80.42%
Nov-21	7,246	\$394,404	\$283,037	\$28,042	\$311,079	\$83,325	78.87%
Dec-21	7,310	\$396,926	\$323,016	\$28,290	\$351,305	\$45,621	88.51%
2018	6,765	\$4,317,219	\$3,757,002	\$393,374	\$4,150,375	\$166,843	96.14%
2019	7,079	\$4,609,557	\$3,779,921	\$327,104	\$4,107,025	\$502,533	89.10%
2020	7,296	\$4,818,580	\$3,558,380	\$338,846	\$3,897,225	\$921,355	80.88%
2021 YTD	7,295	\$4,771,036	\$3,966,248	\$338,780	\$4,305,028	\$466,008	90.23%
Current 12 Months	7,295	\$4,771,036	\$3,966,248	\$338,780	\$4,305,028	\$466,008	90.23%

Data Sources: Delta Dental Financial Report Package, Hourglass

Note:

1. The above figures include all the divisions under the County of Fresno and County of Tulare.
2. The number of primary enrollees may change to include retroactive additions and/or deletions in eligibility.
3. Delta Admin Fee: \$3.87 PEPM (2019); in Mar-Dec 2018, it was estimated at 9.11% of the monthly premium due to the change in Delta's reporting.
4. Effective 12/17/18, DPPO contracts changed to self-funded; DHMO remained fully insured (not included in this report).

**San Joaquin Valley Insurance Authority (SJVIA)
Delta Dental Premium and Claims Report as of December 2021
County of Fresno and County of Tulare**





San Joaquin Valley Insurance Authority (SJVIA)
Delta Dental Premium and Claims Report as of December 2021
County of Fresno

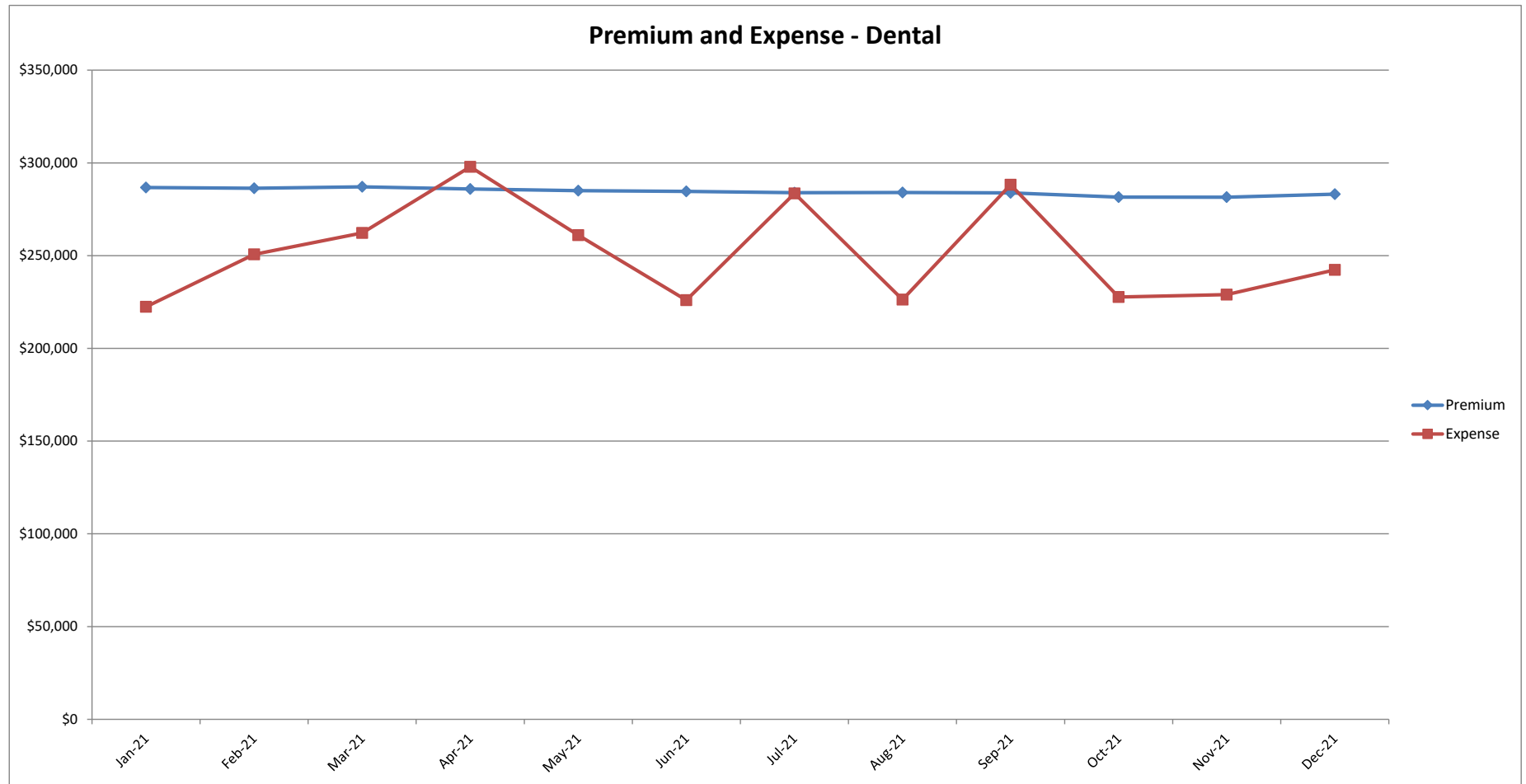
MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	DELTA ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
Jan-20	4,705	\$291,236	\$251,375	\$18,208	\$269,583	\$21,653	92.57%
Feb-20	4,708	\$291,352	\$256,696	\$18,220	\$274,916	\$16,436	94.36%
Mar-20	4,709	\$291,201	\$207,255	\$18,224	\$225,479	\$65,722	77.43%
Apr-20	4,682	\$289,481	\$93,885	\$18,119	\$112,004	\$177,477	38.69%
May-20	4,706	\$291,293	\$92,062	\$18,212	\$110,274	\$181,019	37.86%
Jun-20	4,738	\$292,590	\$181,979	\$18,336	\$200,315	\$92,276	68.46%
Jul-20	4,710	\$290,903	\$274,253	\$18,228	\$292,481	-\$1,578	100.54%
Aug-20	4,682	\$289,183	\$210,375	\$18,119	\$228,494	\$60,689	79.01%
Sep-20	4,679	\$289,285	\$210,179	\$18,108	\$228,286	\$60,999	78.91%
Oct-20	4,660	\$288,246	\$284,800	\$18,034	\$302,834	-\$14,589	105.06%
Nov-20	4,655	\$288,620	\$216,020	\$18,015	\$234,035	\$54,585	81.09%
Dec-20	4,721	\$288,608	\$239,119	\$18,270	\$257,389	\$31,219	89.18%
Jan-21	4,702	\$286,757	\$204,198	\$18,197	\$222,395	\$64,362	77.56%
Feb-21	4,697	\$286,360	\$232,482	\$18,177	\$250,660	\$35,700	87.53%
Mar-21	4,711	\$287,083	\$244,039	\$18,232	\$262,270	\$24,812	91.36%
Apr-21	4,699	\$285,969	\$279,693	\$18,185	\$297,879	-\$11,910	104.16%
May-21	4,686	\$284,989	\$242,930	\$18,135	\$261,065	\$23,924	91.61%
Jun-21	4,681	\$284,648	\$207,906	\$18,115	\$226,022	\$58,626	79.40%
Jul-21	4,672	\$283,978	\$265,448	\$18,081	\$283,529	\$449	99.84%
Aug-21	4,675	\$284,026	\$208,203	\$18,092	\$226,296	\$57,730	79.67%
Sep-21	4,674	\$283,811	\$270,164	\$18,088	\$288,252	-\$4,442	101.56%
Oct-21	4,630	\$281,551	\$209,769	\$17,918	\$227,687	\$53,864	80.87%
Nov-21	4,645	\$281,493	\$210,962	\$17,976	\$228,938	\$52,554	81.33%
Dec-21	4,684	\$283,093	\$224,221	\$18,127	\$242,348	\$40,745	85.61%
2018	4,238	\$3,075,322	\$2,671,656	\$280,234	\$2,951,890	\$123,432	95.99%
2019	4,468	\$3,309,176	\$2,720,697	\$207,490	\$2,928,187	\$380,989	88.49%
2020	4,696	\$3,481,998	\$2,517,998	\$218,094	\$2,736,092	\$745,906	78.58%
2021 YTD	4,680	\$3,413,756	\$2,800,017	\$217,324	\$3,017,340	\$396,416	88.39%
Current 12 Months	4,680	\$3,413,756	\$2,800,017	\$217,324	\$3,017,340	\$396,416	88.39%

Data Sources: Delta Dental Financial Report Package, Hourglass

Note:

1. The number of primary enrollees may change to include retroactive additions and/or deletions in eligibility.
2. Delta Admin Fee: \$3.87 PEPM (2019); in Mar-Dec 2018, it was estimated at 9.11% of the monthly premium due to the change in Delta's reporting.
3. Effective 12/17/18, DPPO contracts changed to self-funded; DHMO remained fully insured (not included in this report).

**San Joaquin Valley Insurance Authority (SJVIA)
Delta Dental Premium and Claims Report as of December 2021
County of Fresno**





San Joaquin Valley Insurance Authority (SJVIA)
Delta Dental Premium and Claims Report as of December 2021
County of Tulare

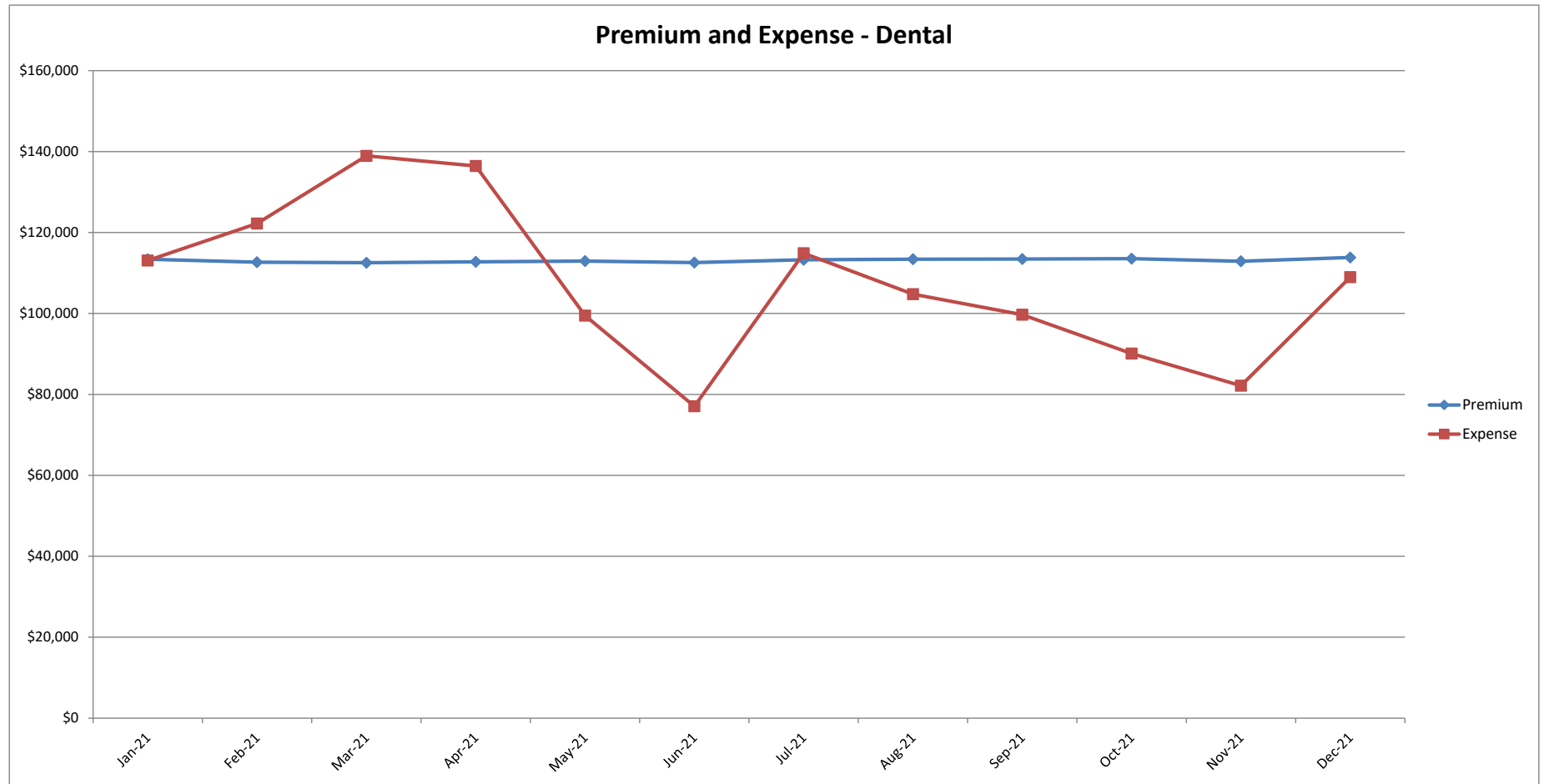
MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	DELTA ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
Jan-20	2,595	\$110,674	\$114,454	\$10,043	\$124,497	-\$13,823	112.49%
Feb-20	2,576	\$109,883	\$117,952	\$9,969	\$127,921	-\$18,038	116.42%
Mar-20	2,599	\$110,963	\$94,694	\$10,058	\$104,752	\$6,211	94.40%
Apr-20	2,606	\$111,400	\$33,918	\$10,085	\$44,003	\$67,397	39.50%
May-20	2,604	\$111,389	\$30,334	\$10,077	\$40,412	\$70,977	36.28%
Jun-20	2,616	\$111,891	\$76,937	\$10,124	\$87,061	\$24,830	77.81%
Jul-20	2,618	\$112,192	\$102,649	\$10,132	\$112,781	-\$589	100.52%
Aug-20	2,611	\$111,977	\$78,672	\$10,105	\$88,776	\$23,200	79.28%
Sep-20	2,603	\$111,871	\$103,944	\$10,074	\$114,018	-\$2,147	101.92%
Oct-20	2,596	\$111,588	\$114,163	\$10,047	\$124,209	-\$12,621	111.31%
Nov-20	2,589	\$111,254	\$85,144	\$10,019	\$95,163	\$16,091	85.54%
Dec-20	2,589	\$111,500	\$87,521	\$10,019	\$97,540	\$13,961	87.48%
Jan-21	2,625	\$113,391	\$102,903	\$10,159	\$113,062	\$329	99.71%
Feb-21	2,611	\$112,647	\$112,130	\$10,105	\$122,234	-\$9,587	108.51%
Mar-21	2,605	\$112,545	\$128,867	\$10,081	\$138,949	-\$26,404	123.46%
Apr-21	2,609	\$112,763	\$126,330	\$10,097	\$136,427	-\$23,664	120.99%
May-21	2,614	\$112,921	\$89,354	\$10,116	\$99,470	\$13,452	88.09%
Jun-21	2,612	\$112,594	\$66,950	\$10,108	\$77,059	\$35,535	68.44%
Jul-21	2,622	\$113,271	\$104,732	\$10,147	\$114,879	-\$1,608	101.42%
Aug-21	2,622	\$113,396	\$94,610	\$10,147	\$104,758	\$8,639	92.38%
Sep-21	2,619	\$113,453	\$89,541	\$10,136	\$99,676	\$13,776	87.86%
Oct-21	2,618	\$113,556	\$79,944	\$10,132	\$90,076	\$23,480	79.32%
Nov-21	2,601	\$112,911	\$72,075	\$10,066	\$82,141	\$30,770	72.75%
Dec-21	2,626	\$113,833	\$98,795	\$10,163	\$108,957	\$4,876	95.72%
2018	2,527	\$1,241,897	\$1,085,346	\$113,140	\$1,198,485	\$43,411	96.50%
2019	2,576	\$1,300,381	\$1,059,223	\$119,614	\$1,178,837	\$121,544	90.65%
2020	2,600	\$1,336,582	\$1,040,382	\$120,752	\$1,161,134	\$175,448	86.87%
2021 YTD	2,615	\$1,357,280	\$1,166,232	\$121,456	\$1,287,688	\$69,593	94.87%
Current 12 Months	2,615	\$1,357,280	\$1,166,232	\$121,456	\$1,287,688	\$69,593	94.87%

Data Sources: Delta Dental Financial Report Package, Hourglass

Note:

1. The number of primary enrollees may change to include retroactive additions and/or deletions in eligibility.
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**San Joaquin Valley Insurance Authority (SJVIA)
Delta Dental Premium and Claims Report as of December 2021
County of Tulare**





San Joaquin Valley Insurance Authority (SJVIA)
VSP Premium and Claims Report as of December 2021
County of Fresno and County of Tulare

MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	VSP ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
Jan-20	7,261	\$62,678	\$56,658	\$8,148	\$64,806	-\$2,128	103.40%
Feb-20	7,224	\$62,310	\$58,332	\$8,100	\$66,432	-\$4,122	106.62%
Mar-20	7,230	\$62,282	\$45,938	\$8,097	\$54,035	\$8,247	86.76%
Apr-20	7,229	\$62,247	\$14,392	\$8,092	\$22,484	\$39,763	36.12%
May-20	7,208	\$62,112	\$23,060	\$8,075	\$31,135	\$30,977	50.13%
Jun-20	7,225	\$62,218	\$50,684	\$8,088	\$58,772	\$3,446	94.46%
Jul-20	7,240	\$62,280	\$41,240	\$8,096	\$49,336	\$12,944	79.22%
Aug-20	7,221	\$62,129	\$52,474	\$8,077	\$60,551	\$1,578	97.46%
Sep-20	7,180	\$61,880	\$49,560	\$8,044	\$57,604	\$4,276	93.09%
Oct-20	7,163	\$61,721	\$49,898	\$8,024	\$57,922	\$3,799	93.84%
Nov-20	7,179	\$61,789	\$53,639	\$8,033	\$61,672	\$117	99.81%
Dec-20	7,147	\$61,489	\$48,039	\$7,994	\$56,032	\$5,456	91.13%
Jan-21	7,183	\$61,942	\$49,034	\$8,052	\$57,086	\$4,856	92.16%
Feb-21	7,191	\$61,905	\$49,514	\$8,048	\$57,561	\$4,344	92.98%
Mar-21	7,164	\$61,746	\$53,775	\$8,027	\$61,802	-\$56	100.09%
Apr-21	7,099	\$61,284	\$51,583	\$7,967	\$59,550	\$1,734	97.17%
May-21	7,164	\$61,660	\$49,898	\$8,016	\$57,913	\$3,746	93.92%
Jun-21	7,140	\$61,325	\$47,233	\$7,972	\$55,205	\$6,120	90.02%
Jul-21	7,147	\$61,390	\$39,676	\$7,981	\$47,656	\$13,733	77.63%
Aug-21	7,120	\$61,142	\$54,222	\$7,948	\$62,170	-\$1,028	101.68%
Sep-21	7,102	\$60,932	\$49,572	\$7,921	\$57,493	\$3,439	94.36%
Oct-21	7,107	\$60,819	\$42,675	\$7,906	\$50,581	\$10,238	83.17%
Nov-21	7,117	\$60,936	\$50,203	\$7,922	\$58,124	\$2,812	95.39%
Dec-21	7,136	\$61,190	\$52,289	\$7,955	\$60,244	\$946	98.45%
2018	7,208	\$740,679	\$602,303	\$96,288	\$698,591	\$42,088	94.32%
2019	7,076	\$731,459	\$604,721	\$95,090	\$699,810	\$31,648	95.67%
2020	7,209	\$745,135	\$543,914	\$96,868	\$640,781	\$104,354	86.00%
2021 YTD	7,139	\$736,270	\$589,671	\$95,715	\$685,386	\$50,883	93.09%
Current 12 Months	7,139	\$736,270	\$589,671	\$95,715	\$685,386	\$50,883	93.09%

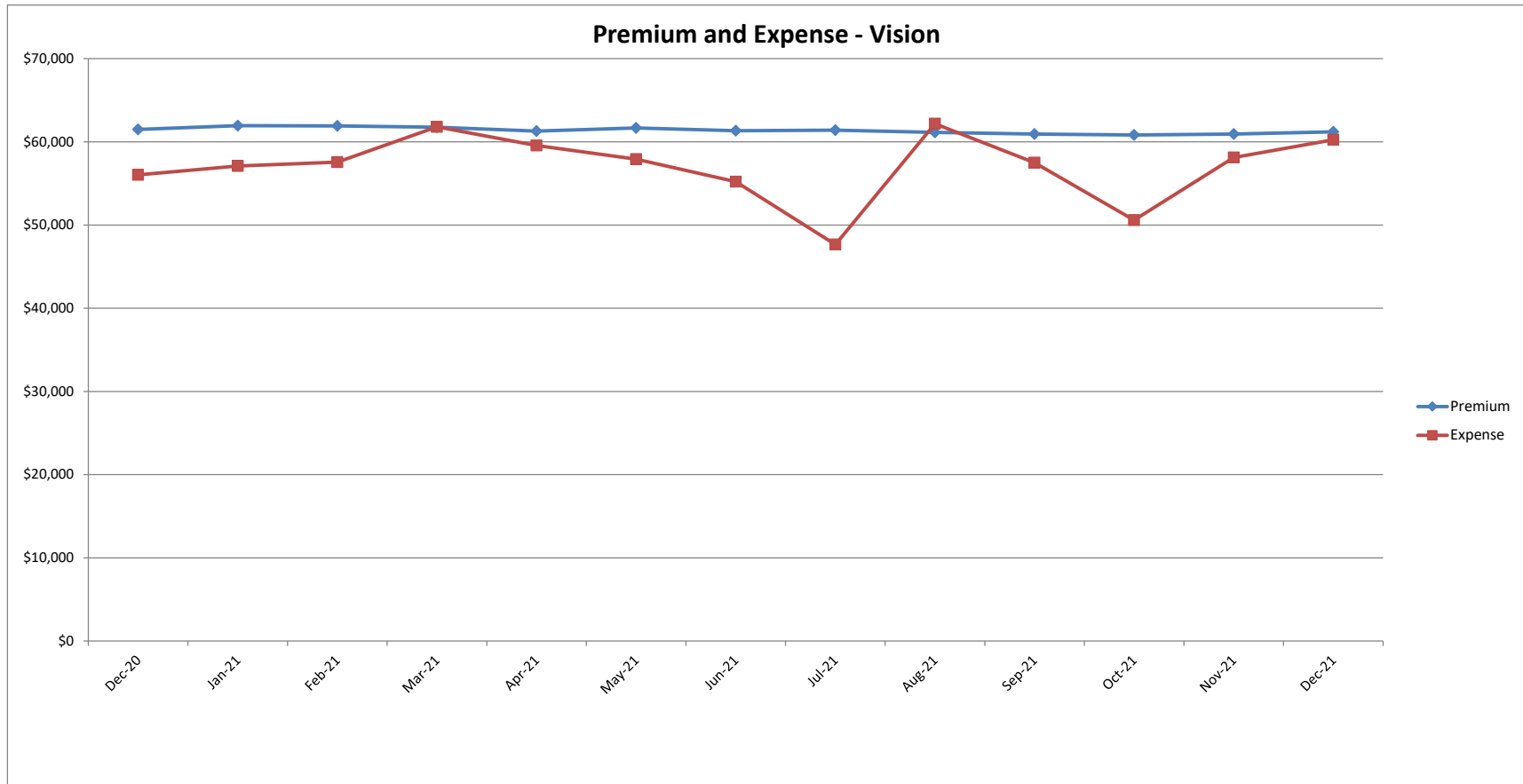
Data Source: VSP SJVIA Utilization Reports

Note:

1. The above figures include all the divisions under the County of Fresno, and County of Tulare.
2. VSP Admin is the retention fee - % of premium (2015: 12%; 2016-2019: 13%).
3. City of Ceres is included in the 2017 figures; however, the City terminated their coverage effective 12/31/17.



San Joaquin Valley Insurance Authority (SJVIA)
VSP Premium and Claims Report as of December 2021
County of Fresno and County of Tulare





San Joaquin Valley Insurance Authority (SJVIA)
VSP Premium and Claims Report as of December 2021
County of Fresno

MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	VSP ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
Jan-20	4,356	\$45,849	\$39,187	\$5,960	\$45,147	\$702	98.47%
Feb-20	4,336	\$45,571	\$41,169	\$5,924	\$47,093	-\$1,522	103.34%
Mar-20	4,331	\$45,452	\$30,212	\$5,909	\$36,121	\$9,331	79.47%
Apr-20	4,330	\$45,419	\$9,926	\$5,904	\$15,830	\$29,589	34.85%
May-20	4,322	\$45,332	\$15,713	\$5,893	\$21,606	\$23,726	47.66%
Jun-20	4,330	\$45,376	\$35,635	\$5,899	\$41,534	\$3,842	91.53%
Jul-20	4,339	\$45,410	\$30,161	\$5,903	\$36,064	\$9,346	79.42%
Aug-20	4,326	\$45,272	\$33,357	\$5,885	\$39,242	\$6,030	86.68%
Sep-20	4,292	\$45,045	\$32,197	\$5,856	\$38,053	\$6,992	84.48%
Oct-20	4,276	\$44,867	\$31,460	\$5,833	\$37,293	\$7,574	83.12%
Nov-20	4,294	\$44,970	\$36,305	\$5,846	\$42,151	\$2,819	93.73%
Dec-20	4,277	\$44,739	\$31,055	\$5,816	\$36,871	\$7,868	82.41%
Jan-21	4,304	\$45,030	\$32,791	\$5,854	\$38,645	\$6,385	85.82%
Feb-21	4,314	\$45,023	\$35,868	\$5,853	\$41,721	\$3,303	92.66%
Mar-21	4,303	\$44,943	\$37,128	\$5,843	\$42,971	\$1,972	95.61%
Apr-21	4,305	\$44,862	\$36,858	\$5,832	\$42,690	\$2,171	95.16%
May-21	4,296	\$44,804	\$32,369	\$5,825	\$38,193	\$6,611	85.24%
Jun-21	4,266	\$44,462	\$30,797	\$5,780	\$36,577	\$7,885	82.27%
Jul-21	4,268	\$44,465	\$27,885	\$5,780	\$33,665	\$10,800	75.71%
Aug-21	4,249	\$44,252	\$38,733	\$5,753	\$44,486	-\$234	100.53%
Sep-21	4,241	\$44,091	\$30,979	\$5,732	\$36,711	\$7,380	83.26%
Oct-21	4,223	\$43,841	\$27,055	\$5,699	\$32,754	\$11,087	74.71%
Nov-21	4,240	\$43,944	\$33,102	\$5,713	\$38,815	\$5,129	88.33%
Dec-21	4,284	\$44,354	\$36,162	\$5,766	\$41,928	\$2,426	94.53%
2018	4,414	\$552,709	\$419,046	\$71,852	\$490,898	\$61,811	88.82%
2019	4,199	\$537,705	\$400,263	\$69,902	\$470,165	\$67,540	87.44%
2020	4,317	\$543,302	\$366,377	\$70,629	\$437,006	\$106,296	80.44%
2021 YTD	4,274	\$534,071	\$399,728	\$69,429	\$469,158	\$64,913	87.85%
Current 12 Months	4,274	\$534,071	\$399,728	\$69,429	\$469,158	\$64,913	87.85%

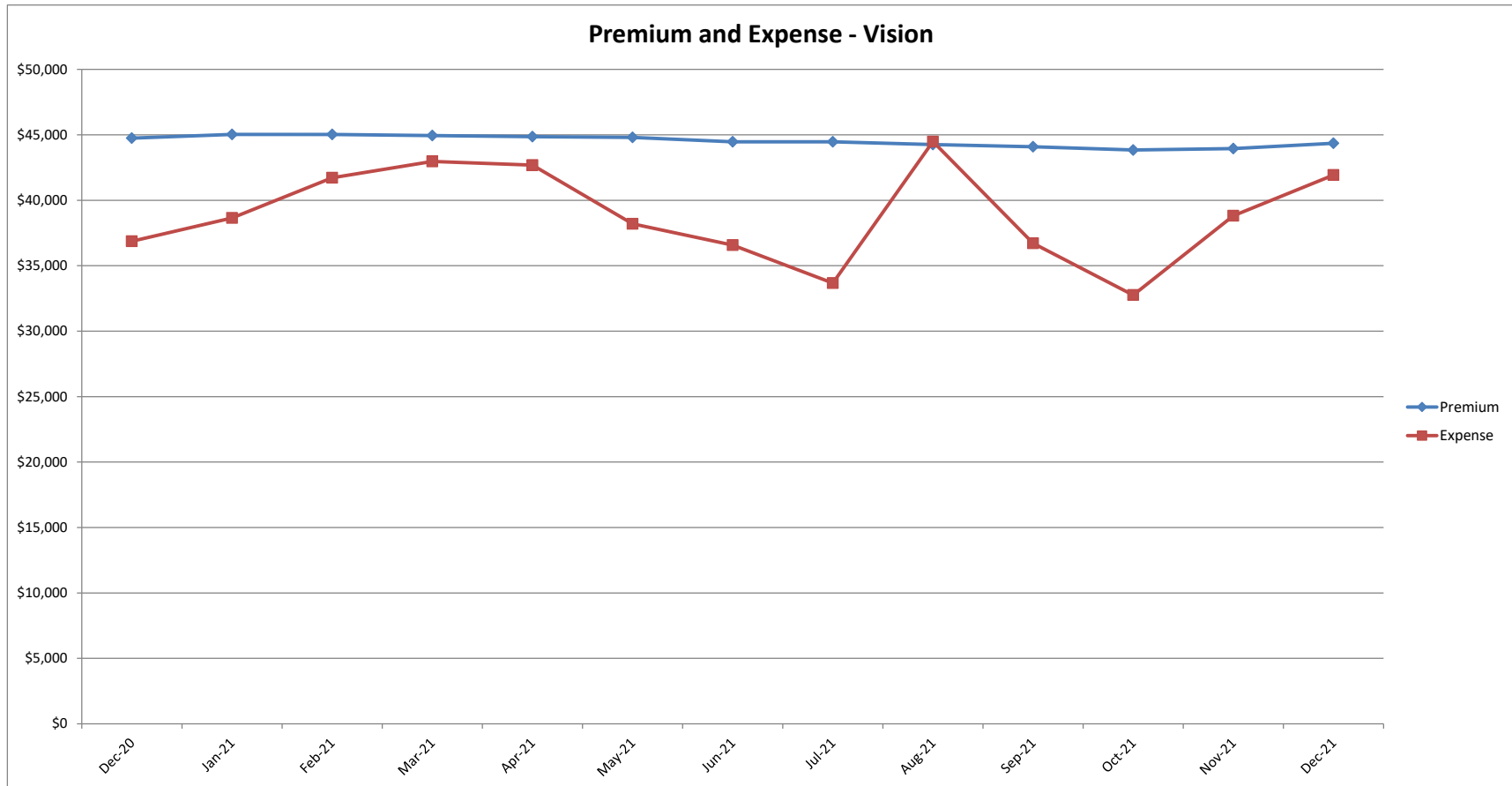
Data Source: VSP SJVIA Utilization Reports

Note:

1. The above figures include the following divisions: 0015, 0016, 0017, 0018, 0019, 0020, and 0021.



San Joaquin Valley Insurance Authority (SJVIA)
VSP Premium and Claims Report as of December 2021
County of Fresno





San Joaquin Valley Insurance Authority (SJVIA)
VSP Premium and Claims Report as of December 2021
County of Tulare

MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	VSP ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
Jan-20	2,905	\$16,829	\$17,471	\$2,188	\$19,659	-\$2,830	116.81%
Feb-20	2,888	\$16,739	\$17,163	\$2,176	\$19,339	-\$2,600	115.53%
Mar-20	2,899	\$16,830	\$15,726	\$2,188	\$17,914	-\$1,084	106.44%
Apr-20	2,899	\$16,828	\$4,466	\$2,188	\$6,654	\$10,174	39.54%
May-20	2,886	\$16,780	\$7,347	\$2,181	\$9,528	\$7,252	56.78%
Jun-20	2,895	\$16,842	\$15,049	\$2,189	\$17,238	-\$396	102.35%
Jul-20	2,901	\$16,870	\$11,079	\$2,193	\$13,272	\$3,598	78.67%
Aug-20	2,895	\$16,857	\$19,117	\$2,191	\$21,308	-\$4,451	126.41%
Sep-20	2,888	\$16,835	\$17,363	\$2,189	\$19,552	-\$2,717	116.14%
Oct-20	2,887	\$16,854	\$18,438	\$2,191	\$20,629	-\$3,775	122.40%
Nov-20	2,885	\$16,819	\$17,334	\$2,186	\$19,520	-\$2,701	116.06%
Dec-20	2,870	\$16,749	\$16,984	\$2,177	\$19,161	-\$2,412	114.40%
Jan-21	2,879	\$16,912	\$16,243	\$2,199	\$18,441	-\$1,529	109.04%
Feb-21	2,877	\$16,882	\$13,646	\$2,195	\$15,840	\$1,041	93.83%
Mar-21	2,861	\$16,803	\$16,647	\$2,184	\$18,831	-\$2,028	112.07%
Apr-21	2,794	\$16,423	\$14,725	\$2,135	\$16,860	-\$437	102.66%
May-21	2,868	\$16,855	\$17,529	\$2,191	\$19,720	-\$2,865	116.99%
Jun-21	2,874	\$16,863	\$16,436	\$2,192	\$18,628	-\$1,765	110.47%
Jul-21	2,879	\$16,925	\$11,791	\$2,200	\$13,991	\$2,934	82.67%
Aug-21	2,871	\$16,890	\$15,489	\$2,196	\$17,684	-\$794	104.70%
Sep-21	2,861	\$16,841	\$18,592	\$2,189	\$20,782	-\$3,941	123.40%
Oct-21	2,884	\$16,977	\$15,620	\$2,207	\$17,827	-\$849	105.00%
Nov-21	2,877	\$16,992	\$17,100	\$2,209	\$19,309	-\$2,317	113.64%
Dec-21	2,852	\$16,836	\$16,127	\$2,189	\$18,315	-\$1,480	108.79%
2018	2,795	\$187,970	\$181,771	\$24,436	\$206,207	-\$18,237	109.70%
2019	2,877	\$193,754	\$204,457	\$25,188	\$229,645	-\$35,892	118.52%
2020	2,892	\$201,832	\$177,537	\$26,238	\$203,775	-\$1,943	100.96%
2021 YTD	2,865	\$202,199	\$189,943	\$26,286	\$216,229	-\$14,030	106.94%
Current 12 Months	2,865	\$202,199	\$189,943	\$26,286	\$216,229	-\$14,030	106.94%

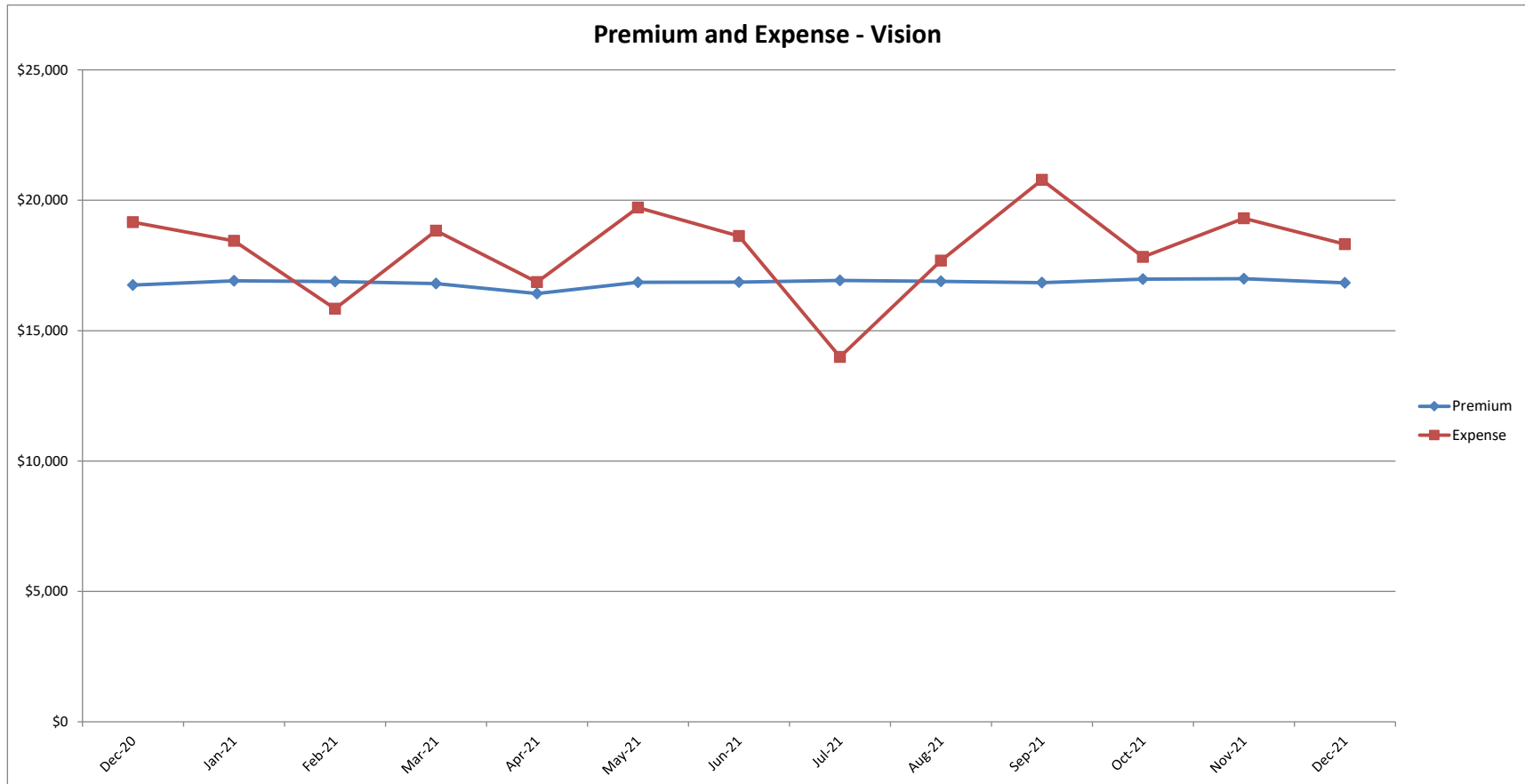
Data Source: VSP SJVIA Utilization Reports

Note:

1. The above figures include the following divisions: 0001, 0002, 0003, and 0004.



San Joaquin Valley Insurance Authority (SJVIA)
VSP Premium and Claims Report as of December 2021
County of Tulare



**BOARD OF DIRECTORS**

STEVE BRANDAU
NATHAN MAGSIG
BUDDY MENDES
LARRY MICARI
BRIAN PACHECO
AMY SHUKLIAN
PETE VANDER POEL

Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 13

SUBJECT: Receive and Accept Consultant's SJVIA Actuarially Certified Incurred But Not Reported (IBNR) Reserve Report as of December 31, 2021 and Maintain the Fully-Funded Status of the IBNR Reserve (A)

REQUEST(S): That the Board receive the consultant's SJVIA Actuarially Certified IBNR Report as of December 31, 2021 and approve an increase of \$1,169,530 to the IBNR reserve to maintain the fully funded status at \$8,450,550, and that the Board approve the \$1,169,530 be taken from surplus margin accumulation and not be built into the 2023 rates.

DESCRIPTION:

IBNR reserve calculates the outstanding liability for claims that have been incurred but have not yet been paid. The SJVIA Board has directed staff to maintain a fully funded IBNR reserve. The SJVIA IBNR reserve is calculated for each participating entity (the County of Fresno and the County of Tulare) and is based on actuarial models.

For the December 31, 2021 valuation date, the total IBNR reserve liability is \$8,450,550 for medical, prescription drugs, and dental. This is an increase of \$1,169,530 from the June 31, 2021 actuarially certified IBNR reserve of \$7,281,020.


FISCAL IMPACT/FINANCING:

The IBNR reserve liability for the self-funded medical, prescription drugs, and the dental PPO coverage program increased by \$1,169,530 from \$7,281,020 on the June 30, 2021 valuation date to \$8,450,550 on the December 31, 2021 valuation date. The December 31, 2021 valuation amount includes a 15% or \$1,102,248 margin.

AGENDA: San Joaquin Valley Insurance Authority

DATE: February 18, 2022

ADMINISTRATIVE SIGN-OFF:



Hollis Magill
SJVIA Manager



Lupe Garza
SJVIA Assistant Manager



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February 3, 2022

Mr. Mario Cabrera
Financial Reporting & Audits Division Chief
Auditor-Controller/Treasurer-Tax Collector
Financial Reporting & Audits
2281 Tulare St., Room 105
Fresno, CA 93721

**SJVA – COUNTY OF FRESNO
INCURRED BUT NOT REPORTED (IBNR) RESERVES AS OF DECEMBER 31, 2021**

Dear Mario:

We have estimated the “Incurred But Not Reported” (IBNR) claims reserves for the self-funded medical, prescription drug and dental plans for County of Fresno as of December 31, 2021.

CLAIM EXPERIENCE – JANUARY 1, 2021 TO DECEMBER 31, 2021

We analyzed the experience in the past 12 months to determine the actual lag between the incurred and payment dates of the medical and drug claims.

Coverage	Paid Claims	Average Monthly Employees	Per Employee Per Month (PEPM)
Medical	\$36,794,854	3885	\$789.25
Prescription Drug	\$12,947,565	3885	\$277.73
Dental	\$2,800,016	4680	\$49.86
Total	\$52,542,435	N/A	\$1,116.84

KEENAN’S IBNR ACTUARIAL RESERVE METHODOLOGY

In Keenan’s IBNR actuarial reserve calculation, the estimated outstanding claims at the end of the period (ending IBNR) is calculated based on the Bornhuetter-Ferguson actuarial method. Under this method, the IBNR is determined based on completion factors and expected incurred claims. The completion factors are derived from actual claim lag data which takes into account the claim payment pattern. When the groups are small, the completion factors are blended with the industry norm completion factors. The IBNR claim reserve is estimated as the sum, for all prior months, of the expected incurred claim for the month multiplied by the proportion of claims expected to still be outstanding based on the completion factors.

Based on our analysis, we estimated the following unpaid claim liabilities for County of Fresno:

Coverage	Number of Employees in December 2021	Reserves on 12/31/2021
Medical	3911	\$3,957,539
Prescription Drug	3911	\$776,854
Dental	4684	\$139,878
Total	N/A	\$4,874,271

ESTIMATED IBNR RESERVES AS OF DECEMBER 31, 2021

Finally, the claims reserves are adjusted to reflect, among other things, claims fluctuation margins, retroactive claim adjustments and enrollment fluctuation. The final reserves are shown below:

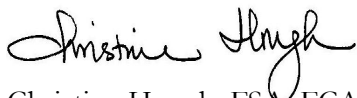
Coverage	Reserves on 12/31/2021	Adjustment Factor	IBNR on 12/31/2021
Medical	\$3,957,539	1.15	\$4,551,170
Prescription Drug	\$776,854	1.15	\$893,380
Dental	\$139,878	1.15	\$160,860
Total	\$4,874,271	1.15	\$5,605,410

CERTIFICATION

The costs, liabilities and other factors under the plan were determined in accordance with generally accepted actuarial principles and procedures. The IBNR reserve calculations reported herein are consistent with our understanding of the Bornhuetter-Ferguson actuarial method. The actuarial assumptions are reasonable and represent our best estimate of the anticipated experience under the plan.

The undersigned credentialed actuary meets the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained in this report.

Sincerely,



Christine Hough, FSA, FCA, MAAA
Vice President & Actuary

Copy: Bordan Darm



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License No. 0451271

February 3, 2022

Mr. Mario Cabrera
Financial Reporting & Audits Division Chief
Auditor-Controller/Treasurer-Tax Collector
Financial Reporting & Audits
2281 Tulare St., Room 105
Fresno, CA 93721

**SJVA – COUNTY OF TULARE
INCURRED BUT NOT REPORTED (IBNR) RESERVES AS OF DECEMBER 31, 2021**

Dear Mario:

We have estimated the “Incurred But Not Reported” (IBNR) claims reserves for the self-funded medical, prescription drug and dental plans for County of Tulare as of December 31, 2021.

CLAIM EXPERIENCE – JANUARY 1, 2021 TO DECEMBER 31, 2021

We analyzed the experience in the past 12 months to determine the actual lag between the incurred and payment dates of the medical and drug claims.

Coverage	Paid Claims	Average Monthly Employees	Per Employee Per Month (PEPM)
Medical	\$17,521,359	2998	\$487.03
Prescription Drug	\$8,476,786	2998	\$235.62
Dental	\$1,166,232	2615	\$37.16
Total	\$27,164,377	N/A	\$759.81

KEENAN’S IBNR ACTUARIAL RESERVE METHODOLOGY

In Keenan’s IBNR actuarial reserve calculation, the estimated outstanding claims at the end of the period (ending IBNR) is calculated based on the Bornhuetter-Ferguson actuarial method. Under this method, the IBNR is determined based on completion factors and expected incurred claims. The completion factors are derived from actual claim lag data which takes into account the claim payment pattern. When the groups are small, the completion factors are blended with the industry norm completion factors. The IBNR claim reserve is estimated as the sum, for all prior months, of the expected incurred claim for the month multiplied by the proportion of claims expected to still be outstanding based on the completion factors.

Based on our analysis, we estimated the following unpaid claim liabilities for County of Tulare:

Coverage	Number of Employees in December 2021	Reserves on 12/31/2021
Medical	2997	\$1,905,848
Prescription Drug	2997	\$508,607
Dental	2626	\$59,576
Total	N/A	\$2,474,031

ESTIMATED IBNR RESERVES AS OF DECEMBER 31, 2021

Finally, the claims reserves are adjusted to reflect, among other things, claims fluctuation margins, retroactive claim adjustments and enrollment fluctuation. The final reserves are shown below:

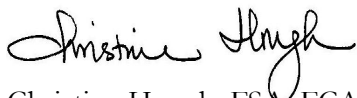
Coverage	Reserves on 12/31/2021	Adjustment Factor	IBNR on 12/31/2021
Medical	\$1,905,848	1.15	\$2,191,730
Prescription Drug	\$508,607	1.15	\$584,900
Dental	\$59,576	1.15	\$68,510
Total	\$2,474,031	1.15	\$2,845,140

CERTIFICATION

The costs, liabilities and other factors under the plan were determined in accordance with generally accepted actuarial principles and procedures. The IBNR reserve calculations reported herein are consistent with our understanding of the Bornhuetter-Ferguson actuarial method. The actuarial assumptions are reasonable and represent our best estimate of the anticipated experience under the plan.

The undersigned credentialed actuary meets the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained in this report.

Sincerely,



Christine Hough, FSA, FCA, MAAA
Vice President & Actuary

Copy: Bordan Darm

SJVIA - Actuarially Certified IBNR Reserve					
County of Fresno	12/31/20	06/30/21	12/31/21	\$ Difference	% Difference
Medical	\$ 3,325,389	\$ 3,334,990	\$ 3,957,539	\$ 622,549	18.7%
Prescription Drug	\$ 740,407	\$ 737,472	\$ 776,854	\$ 39,382	5.3%
Dental	\$ 132,558	\$ 166,433	\$ 139,878	\$ (26,555)	-16.0%
Total	\$ 4,198,354	\$ 4,238,895	\$ 4,874,271	\$ 635,376	15.0%
County of Tulare	12/31/20	06/30/21	12/31/21	\$ Difference	% Difference
Medical	\$ 1,446,034	\$ 1,560,587	\$ 1,905,848	\$ 345,261	22.1%
Prescription Drug	\$ 473,222	\$ 469,116	\$ 508,607	\$ 39,491	8.4%
Dental	\$ 55,685	\$ 62,724	\$ 59,576	\$ (3,148)	-5.0%
Total	\$ 1,974,941	\$ 2,092,427	\$ 2,474,031	\$ 381,604	18.2%
SJVIA	12/31/20	06/30/21	12/31/21	\$ Difference	% Difference
Medical	\$ 4,771,423	\$ 4,895,577	\$ 5,863,387	\$ 967,810	19.8%
Prescription Drug	\$ 1,213,629	\$ 1,206,588	\$ 1,285,461	\$ 78,873	6.5%
Dental	\$ 188,243	\$ 229,157	\$ 199,454	\$ (29,703)	-13.0%
Total	\$ 6,173,295	\$ 6,331,322	\$ 7,348,302	\$ 1,016,980	16.1%
SJVIA - Actuarially Certified IBNR Reserve with 15%					
County of Fresno	12/31/20	06/30/21	12/31/21	\$ Difference	% Difference
Medical	\$ 3,824,200	\$ 3,835,240	\$ 4,551,170	\$ 715,930	18.7%
Prescription Drug	\$ 851,470	\$ 848,090	\$ 893,380	\$ 45,290	5.3%
Dental	\$ 152,440	\$ 191,400	\$ 160,860	\$ (30,540)	-16.0%
Total	\$ 4,828,110	\$ 4,874,730	\$ 5,605,410	\$ 730,680	15.0%
County of Tulare	12/31/20	06/30/21	12/31/21	\$ Difference	% Difference
Medical	\$ 1,662,940	\$ 1,794,680	\$ 2,191,730	\$ 397,050	22.1%
Prescription Drug	\$ 544,210	\$ 539,480	\$ 584,900	\$ 45,420	8.4%
Dental	\$ 64,040	\$ 72,130	\$ 68,510	\$ (3,620)	-5.0%
Total	\$ 2,271,190	\$ 2,406,290	\$ 2,845,140	\$ 438,850	18.2%
SJVIA	12/31/20	06/30/21	12/31/21	\$ Difference	% Difference
Medical	\$ 5,487,140	\$ 5,629,920	\$ 6,742,900	\$ 1,112,980	19.8%
Prescription Drug	\$ 1,395,680	\$ 1,387,570	\$ 1,478,280	\$ 90,710	6.5%
Dental	\$ 216,480	\$ 263,530	\$ 229,370	\$ (34,160)	-13.0%
Total	\$ 7,099,300	\$ 7,281,020	\$ 8,450,550	\$ 1,169,530	16.1%

Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 14

SUBJECT: Receive and approve the Vendor List and Timeline for the Request for Proposal (RFP) for a Plan Administrator for the Self-Funded Medical Plans and a Pharmacy Benefits Manager (PBM) for the Self-Funded Prescription Drug Plans for Plan Year 2023 (A)

REQUEST(S): That the Board receive and approve the vendor list and timeline for the RFP for a plan administrator for the self-funded medical plans and a PBM for the self-funded prescription drug plans for plan year 2023.

DESCRIPTION:

As part of the due diligence in the management of the SJVIA, it is recommended that RFPs be conducted for an Administrative Services Only (ASO) or Third-Party Administrator (TPA), and Pharmacy Benefit Manager (PBM) to be used for the administration of the self-funded medical and pharmacy plans from time to time.

Proposals will be requested from the following vendors and carriers:

Medical ASO/TPA Vendors

- Aetna
- Anthem
- Blue Shield of CA
- Compass Health Administrators
- Delta Health Systems
- HealthComp
- Pinnacle
- United HealthCare

Prescription Drug PBM Vendors

- Aetna (CVS)
- Blue Shield of CA
- EmpiRx
- ExpressScripts
- IngenioRx (Anthem)
- IPM (local)
- MedImpact
- Optum Rx
- United HealthCare

AGENDA: San Joaquin Valley Insurance Authority
DATE: February 18, 2022

The RFPs will be posted to the SJVIA website to allow all other vendors interested on responding, the opportunity to respond.

The proposed timeline is as follows:

<u>2022</u>	<u>Task</u>
• Feb 18	SJVIA Board reviews list of vendors
• Feb 18-21	SJVIA Management review
• Feb 21	Edits or comments due back to Keenan from SJVIA Staff
• Feb 24	Request for Proposal (RFP) finalized by Keenan
• Feb 25	RFP released to vendors
• Mar 1	Bidders conference call (Zoom)
• Mar 3	RFP clarifications and questions due from vendors
• Mar 7	Question responses provided to vendors from Keenan
• Mar 9	Confirmation of intent to bid due from vendors
• Mar 23	RFP responses due from vendors
• Mar 24-Apr 21	Evaluation of RFP; Preliminary Marketing Report development
• Apr 22	Preliminary Marketing Report presented to SJVIA Staff
• Apr 26	Review of Preliminary Marketing Report with Co-Managers
• Apr 29	Preliminary Marketing Report posted to SJVIA Board agenda
• May 6	Preliminary Report presented to SJVIA Board; finalists selected
• May 9-Jun 17	Finalist evaluations (may include interviews, reference checks, tours, etc.)
• Jun 20-Jun 29	Final Marketing Report developed
• Jun 30	Final Marketing Report presented to SJVIA Staff
• Jul 7	Review of Final Marketing Report with Co-Managers
• Jul 12	Final Marketing Report completed
• Jul 14	Final Marketing Report approved by SJVIA Staff
• Jul 15	Final Marketing Report posted to SJVIA Board agenda
• Jul 22	Final Marketing Report presented to SJVIA Board; vendor(s) selected
• Jul 25	Vendors notified; Implementation schedule developed

Please note every effort will be made to adhere to the timeline, however SJVIA Staff reserves the right to modify the timeline as needed.

FISCAL IMPACT/FINANCING:

To be determined.

ADMINISTRATIVE SIGN-OFF:



Hollis Magill
SJVIA Manager



Lupe Garza
SJVIA Assistant Manager



BOARD OF DIRECTORS

STEVE BRANDAU

NATHAN MAGSIG

BUDDY MENDES

LARRY MICARI

BRIAN PACHECO

AMY SHUKLIAN

PETE VANDER POEL

Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 15

SUBJECT: Receive Consultant's Report on the Health Claims Data (I)

REQUEST(S): That the Board receive the Consultant's report on the outline of the health claims data.

DESCRIPTION:

The goal of the SJVIA is to not only provide health coverage for when members are sick or injured, but also to focus on how the health plans can help its members be healthy.

Over the next few months Keenan and SJVIA Staff will work with the SJVIA medical plan carriers (Anthem and Kaiser) to develop a program targeted specifically to address high health risk factors. It is anticipated that the carriers will provide a program that will target specific high health risks and may include:

- Direction for diet/nutrition
- Physical activity
- Medication compliance
- Behavioral health support
- Any associated costs
- Accountability and transparency reporting to the SJVIA

More information will be provided at future SJVIA Board meetings.

FISCAL IMPACT/FINANCING:

To be determined.

ADMINISTRATIVE SIGN-OFF:

A handwritten signature in black ink that reads "Hollis Magill".

Hollis Magill
SJVIA Manager

A handwritten signature in black ink that reads "Lupe Garza".

Lupe Garza
SJVIA Assistant Manager

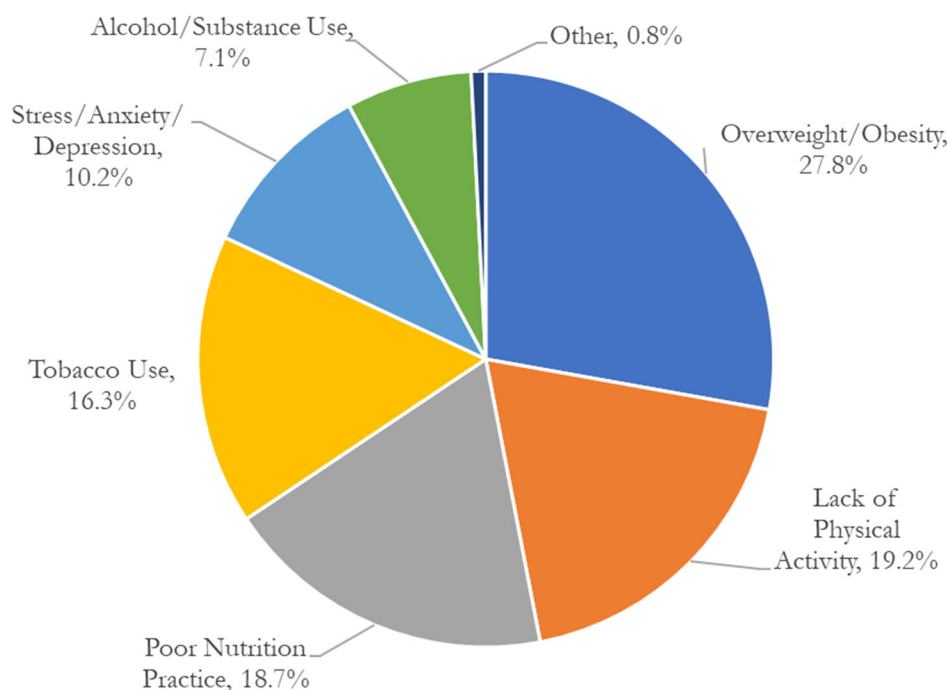
Summary of Health Claims Data

It is the desire of SJVIA staff to provide a health management program geared towards improving the health of members and thus decreasing the overall cost of the health plan.

The SJVIA staff and health plan carriers will look to not only provide coverage for when members are sick or injured but will also focus on how to make its members healthier. SJVIA staff and Keenan will work with its carrier partners to 1) access the carriers existing programs, and 2) require accountability and transparency from the carriers for the results of the program.

Keenan asked Kaiser and Anthem to provide reporting on the health status of SJVIA members specifically as it pertains to claim cost associated with “lifestyle conditions and choices”. Lifestyle conditions and choices (lifestyle) refer to claim costs associated with how members live their lives and the choices they make that have an effect on their health for medical needs.

Anthem determined that 23.1% of claim cost was attributable to lifestyle. Based on 2021 medical claim cost (excludes prescription drugs) of \$54.3 million, \$12.5 million was attributable to lifestyle choices. The following graph illustrates the distribution of lifestyle conditions and choices on lifestyle related claim cost.



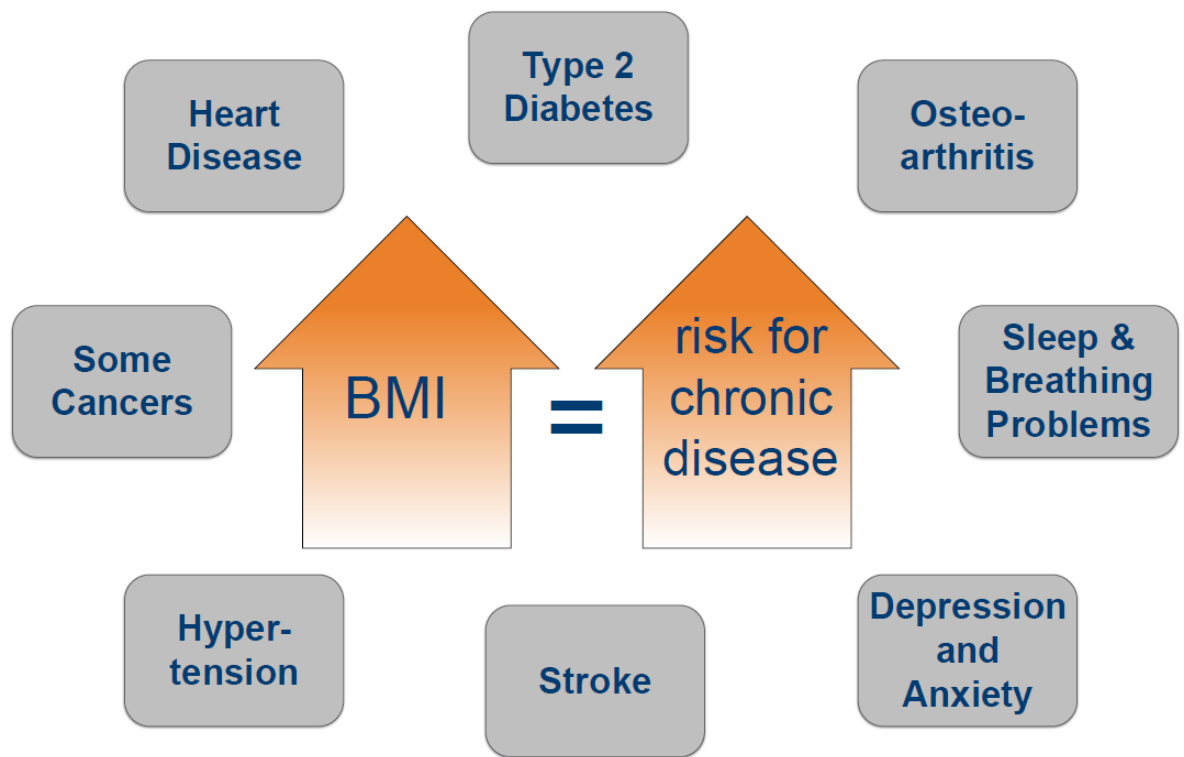
For 2021, the \$12.5 million in lifestyle related claim cost manifested itself in the following diseases and health conditions:

LifestyleCondition	Lifestyle Based Claim
Coronary Artery Disease	\$ 1,252,490
Overweight/Obese	\$ 1,115,803
Chronic Kidney Disease	\$ 1,044,051
Osteoarthritis Except Low Back	\$ 1,022,389
Low Back Problems	\$ 704,929
Gallbladder Disease	\$ 650,855
Cancer - Breast	\$ 576,860
Diabetes Mellitus, Type 2	\$ 536,440
Sleep Apnea	\$ 460,243
Cancer - Female Genital	\$ 373,499
Stress/Anxiety/Depression	\$ 365,711
Hypertension	\$ 363,311
Cancer - Colorectal	\$ 319,847
Digestive Symptoms	\$ 318,769
Alcohol Abuse-Chronic	\$ 310,749
Pain and Coping	\$ 305,912
Cerebrovascular Disease (eg. stroke)	\$ 213,462
Heart Failure	\$ 204,035
Renal Stones	\$ 202,551
Peripheral Vascular Disorders	\$ 199,378
All Other Lifestyle Conditions	\$ 1,943,061
Total of All Lifestyle Conditions	\$ 12,484,346

Please note, the above chart illustrates the proportionate lifestyle costs associated with each disease condition and health condition. It does not include costs realized within these diseases and these health condition outside of lifestyle conditions and choices.

Kaiser Permanente's information showed that 85.0% of SJVIA's adult members are either overweight (27.0%) or obese (58.0%). The overweight/obesity rate has increased over the past four years. Given that obese members have a 45% higher claim cost than healthy weight members, an increasing trend in overweight/obesity will add additional costs to the plan. The following Kaiser illustration supports Anthem's finding by showing that as a member's Body Mass Index (BMI) increases, they become at greater risk for chronic diseases.

BMI as an Indicator of Health Risk Status



As Kaiser says, “We want you to ‘THRIVE not just survive’”. The SJVIA staff, Keenan, Anthem and Kaiser will be working to develop a health management program to help improve the health of SJVIA members. Anthem and Kaiser will work on developing a program and make recommendations to SJVIA staff that will target the health risk factors developed from lifestyle conditions and choices. It is anticipated that the carriers will provide a comprehensive wellness program that will include:

- direction for diet/nutrition
- physical activity
- medication compliance
- behavioral health support
- any associated costs
- accountability and transparency reporting to the SJVIA

The carrier-based programs may need to be supplemented from the SJVIA for costs that are not covered by the carriers. All costs associated with the program will be included in the May SJVIA Board report.

**BOARD OF DIRECTORS**

STEVE BRANDAU
NATHAN MAGSIG
BUDDY MENDES
LARRY MICARI
BRIAN PACHECO
AMY SHUKLIAN
PETE VANDER POEL

**Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721**

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 16

SUBJECT: Receive Consultant's Report on JPA Administration Alternatives and Direct SJVIA Staff to Conduct an RFP for Outsourcing JPA Administration Including JPA Management, JPA Administration, Financial/Auditing Services, and Legal Counsel (A)

REQUEST(S): That the Board receive the consultant's report on JPA administration and direct SJVIA staff to conduct an RFP for outsourcing the four functions of JPA administration on a bundled and unbundled basis.

DESCRIPTION:

At the August 27, 2021 SJVIA Board meeting, the Board requested that the SJVIA Managers look at JPA administrative options to the current self-administration being done by the two Counties.

At the December 10, 2021 SJVIA Board meeting a report was presented providing historical costs of the three main JPA categories: Financial Services, JPA Management Services, and Legal Services.

This report outlines three approaches to JPA administration and requests direction from the SJVIA Board to conduct an RFP for the four functions of JPA administration on a bundled and unbundled basis.

FISCAL IMPACT/FINANCING:

TBD but estimated to be no greater than \$260,000 annually (partially offset by the \$2 per employee per month SJVIA administration fee (\$219,528 annually)).

AGENDA: San Joaquin Valley Insurance Authority

DATE: February 18, 2022

ADMINISTRATIVE SIGN-OFF:



Hollis Magill
SJVIA Manager



Lupe Garza
SJVIA Assistant Manager

February 18, 2022

SJVIA Board Meeting: Consultant's Report Outsourcing of SJVIA Administrative Services

At the August 27, 2021 SJVIA Board meeting, the Board requested that the SJVIA Managers look at JPA administrative options to the current self-administration being done by the two Counties. SJVIA Administration can be divided into four different functions:

- Management (SJVIA Co-managers)
- Financials (County's Auditors Office)
- Administration (County's Human Resources Office)
- Legal (County Counsel's Office)

Keenan identified three approaches to JPA administration:

1. Self-administration – Members of the JPA administer the JPA (current SJVIA approach) and report to the Board
2. JPA staff employees – JPA hires an executive director and staff to administer the program and report to the Board
3. Outsourcing (partial or complete) – JPA outsources one or more functions to administer the program and report to the Board

In all three approaches JPA counsel is either administered from within (approach 1) or (outsourced 3). Most JPA's are not large enough (have enough work) to validate a full-or part-time legal counsel.

Hiring JPA staff employees to manage, administer and provide financial/auditing services is typically reserved for JPAs which offer employee benefit, worker's compensation, and property & liability coverage. This allows the JPA to charge the JPA staff employee expenses over multiple lines of coverage. The SJVIA's estimated budget based on the average annual costs is \$260,000.

Management/Administration	\$	140,000
Financials	\$	80,000
<u>Legal</u>	<u>\$</u>	<u>40,000</u>
Total	\$	260,000

Given the current SJVIA's administrative budget, hiring multiple staff may not be achievable.

Outsourcing all or some functions may be an affordable and practical solution (approach 3). The SJVIA can elect to outsource all four functions, or certain functions only.

Keenan recommends:

1. The SJVIA conduct an RFP and solicit bids on a bundled and unbundled basis for outsourcing
1) Management (Executive Director), 2) Financials/Auditor, 3) Administration, and/or 4) Legal Counsel.
2. The SJVIA reserve the right to outsource all four functions, one to three functions, or none of the functions (i.e. continue with the current arrangement).

Appendix:

As reported at the December 10, 2021 SJVIA Board meeting, a historical cost summary was developed from each Fiscal Year's Financial Statement's Report labeled: "ANALYSIS OF ADMINISTRATION, WELLNESS & COMMUNICATIONS (FEES) - RECEIPTS & DISBURSEMENTS".

SJVIA Administration Analysis

HR/Legal/Auditor JPA Disbursements:	<u>FY 20-21</u>	<u>3YR Avg</u>	<u>5 YR Avg</u>	<u>10 YR Avg</u>
Auditor-Treasurer Services	\$ 60,709	\$ 63,525	\$ 93,409	\$ 103,377
County Counsel Services	\$ 17,809	\$ 56,651	\$ 63,401	\$ 38,073
<u>Human Resources Services</u>	<u>\$ 109,973</u>	<u>\$ 145,289</u>	<u>\$ 172,751</u>	<u>\$ 128,502</u>
Total	\$ 188,491	\$ 265,465	\$ 329,561	\$ 269,952
Other Disbursements:	<u>FY 20-21</u>	<u>3YR Avg</u>	<u>5 YR Avg</u>	<u>10 YR Avg</u>
Audit Fees	\$ 20,700	\$ 44,348	\$ 40,122	\$ 28,954
Actuary Fees	\$ -	\$ 7,346	\$ 7,007	\$ 3,504
Bank Service Fees	\$ 18,502	\$ 23,792	\$ 20,370	\$ 17,330
Litigation	\$ 32,823	\$ 999,076	\$ 718,588	\$ 359,294
Claims Management	\$ -	\$ -	\$ -	\$ 15,209
Wellness	\$ 23,757	\$ 7,919	\$ 4,751	\$ 123,803
Communications	\$ -	\$ -	\$ -	\$ 6,795
Membership Fees - CHCC	\$ -	\$ -	\$ -	\$ -
<u>Insurance (Liability, Bond, Etc)</u>	<u>\$ 76,051</u>	<u>\$ 72,331</u>	<u>\$ 65,446</u>	<u>\$ 64,021</u>
Total Other Disbursements	\$ 171,833	\$ 1,154,812	\$ 856,284	\$ 618,910

SJVIA Administration Analysis From the FY Financial Statement: ANALYSIS OF ADMINISTRATION, WELLNESS & COMMUNICATIONS (FEES) - RECEIPTS & DISBURSEMENTS

HR/Legal/Auditor JPA Disbursements:	<u>FY 10-11</u>	<u>FY 11-12</u>	<u>FY 12-13</u>	<u>FY 13-14</u>	<u>FY 14-15</u>	<u>FY 15-16</u>	<u>FY 16-17</u>	<u>FY 17-18</u>	<u>FY 18-19</u>	<u>FY 19-20</u>	<u>FY 20-21</u>
Auditor-Treasurer Services	\$ 63,600	\$ 107,661	\$ 110,255	\$ 121,483	\$ 110,592	\$ 116,738	\$ 131,908	\$ 144,563	\$ 54,005	\$ 75,860	\$ 60,709
County Counsel Services	\$ 8,012	\$ 9,037	\$ 6,127	\$ 9,067	\$ 12,755	\$ 26,744	\$ 89,258	\$ 57,793	\$ 102,446	\$ 49,698	\$ 17,809
<u>Human Resources Services</u>	<u>\$ -</u>	<u>\$ 12,430</u>	<u>\$ 29,694</u>	<u>\$ 44,424</u>	<u>\$ 112,652</u>	<u>\$ 222,067</u>	<u>\$ 209,467</u>	<u>\$ 218,424</u>	<u>\$ 187,578</u>	<u>\$ 138,315</u>	<u>\$ 109,973</u>
Total	\$ 71,612	\$ 129,128	\$ 146,076	\$ 174,974	\$ 235,999	\$ 365,549	\$ 430,633	\$ 420,780	\$ 344,029	\$ 263,873	\$ 188,491
Other Disbursements:	<u>FY 10-11</u>	<u>FY 11-12</u>	<u>FY 12-13</u>	<u>FY 13-14</u>	<u>FY 14-15</u>	<u>FY 15-16</u>	<u>FY 16-17</u>	<u>FY 17-18</u>	<u>FY 18-19</u>	<u>FY 19-20</u>	<u>FY 20-21</u>
Audit Fees	\$ 8,180	\$ 1,570	\$ 9,750	\$ 24,500	\$ 17,685	\$ 35,420	\$ 21,095	\$ 46,470	\$ 32,200	\$ 80,145	\$ 20,700
Actuary Fees	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,000	\$ 22,037	\$ -	\$ -
Bank Service Fees	\$ 15,308	\$ 9,342	\$ 9,383	\$ 15,103	\$ 16,738	\$ 20,883	\$ 17,373	\$ 13,098	\$ 22,537	\$ 30,338	\$ 18,502
Litigation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 595,711	\$ 856,199	\$ 2,108,207	\$ 32,823
Claims Management	\$ -	\$ 152,091	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Wellness	\$ -	\$ -	\$ 202,804	\$ 82,276	\$ 434,458	\$ 494,734	\$ -	\$ -	\$ -	\$ -	\$ 23,757
Communications	\$ -	\$ -	\$ 16,866	\$ 26,272	\$ 24,812	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Membership Fees - CHCC	\$ 10,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
<u>Insurance (Liability, Bond, Etc)</u>	<u>\$ 35,961</u>	<u>\$ 60,690</u>	<u>\$ 64,480</u>	<u>\$ 90,814</u>	<u>\$ 30,278</u>	<u>\$ 66,719</u>	<u>\$ 86,756</u>	<u>\$ 23,481</u>	<u>\$ 69,317</u>	<u>\$ 71,624</u>	<u>\$ 76,051</u>
Total Other Disbursements	\$ 69,449	\$ 223,693	\$ 303,283	\$ 238,965	\$ 523,971	\$ 617,756	\$ 125,224	\$ 691,760	\$ 1,002,290	\$ 2,290,314	\$ 171,833



BOARD OF DIRECTORS

STEVE BRANDAU
NATHAN MAGSIG
BUDDY MENDES
LARRY MICARI
BRIAN PACHECO
AMY SHUKLIAN
PETE VANDER POEL

Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 19

SUBJECT: Settlement of SJVIA v. Gallagher Benefit Services, Inc.

REQUEST(S): Approve and authorize President to sign Settlement Agreement and Release with Gallagher Benefit Services, Inc.

DESCRIPTION:

Approving the recommended Settlement Agreement and Release ("Settlement Agreement") would settle the SJVIA's lawsuit against its former benefits consultant, Gallagher Benefit Services, Inc. ("Gallagher").

Under the Settlement Agreement, the SJVIA would receive payment of \$7,000,000 from Gallagher, in exchange for a release of all claims. The Settlement Agreement requires Gallagher to make that payment by March 18, 2022. Within 14 days after receiving the payment, the SJVIA would file a dismissal of its lawsuit.

The Settlement Agreement also provides that nothing in it is an admission or concession of wrongdoing or liability by either party.

The Settlement Agreement also provides that neither Gallagher nor the SJVIA will issue any press releases or make any public announcements of any kind regarding the relationship between them, or about the Settlement Agreement.

Gallagher has already signed the Settlement Agreement.

FISCAL IMPACT/FINANCING:

Under the Settlement Agreement, the SJVIA will receive a payment of \$7,000,000.

AGENDA: San Joaquin Valley Insurance Authority

DATE: February 18, 2022

ADMINISTRATIVE SIGN-OFF:



Hollis Magill
SJVIA Manager



Lupe Garza
SJVIA Assistant Manager

SETTLEMENT AGREEMENT AND GENERAL RELEASE

I. **INTRODUCTION**

This Settlement Agreement and General Release ("Agreement") is made on February __, 2022, by and among the Plaintiff, The San Joaquin Valley Insurance Authority, a California joint powers authority, ("SJVIA"), and the Defendant Gallagher Benefit Services, Inc., a Delaware Corporation ("Gallagher"). The Plaintiff and the Defendant are collectively referred to herein as the "Parties."

II. **RECITALS**

1. This Agreement is made with reference to the following facts:
 - a. From 2010 through 2016, Gallagher provided benefit consulting services to the SJVIA related to health insurance offered by the SJVIA to the employees of the County of Fresno, County of Tulare, and other public agencies who joined the SJVIA.
 - b. The services provided by Gallagher to the SJVIA were provided pursuant to two written contracts, the first effective January 1, 2010 through December 31, 2014, and the second effective January 1, 2015 through December 31, 2016.
 - c. On June 28, 2017, SJVIA commenced an action against Gallagher in the United States District Court for the Eastern District of California (Case No. 1:17-cv-00861-EPG) alleging claims against Gallagher for breach of contract and negligence (the "Complaint").
 - d. By way of answer and amended answer, Gallagher timely answered the Complaint and denied, and continues to deny, any wrongdoing or liability to the SJVIA.
 - e. The Parties have conducted multiple mediations during the pendency of this litigation.
 - f. The Parties have now reached a full settlement as set forth in this Agreement.

III. **AGREEMENT**

NOW THEREFORE, for good cause and valuable consideration, the Parties hereto consent and agree as follows:

2. Consideration. To fully and finally resolve all claims relating to the Complaint, the Parties agree that:
 - a. The gross sum of Seven Million Dollars and No Cents (\$7,000,000.00) ("Settlement Amount") shall be paid to the SJVIA by Gallagher by the later of March 18, 2022 or 28 days after the Agreement's effective date.
 - b. Each party shall bear its own attorneys' fees, expenses and costs, including,

but not limited to, any fees, expenses and costs incurred in connection with the Agreement.

3. Effective Date of Agreement. This Agreement shall be effective upon approval by the SJVIA Board. If the SJVIA Board does not approve this Agreement, the parties shall be returned to their respective positions as if the Agreement were never executed.

4. Dismissal of the Complaint. Within fourteen (14) days of the SJVIA's receipt of the Settlement Amount, the SJVIA shall file with the Court for the Eastern District of California where the Complaint is pending, a stipulated dismissal of the Complaint, with prejudice, as to all Defendants.

IV. MUTUAL RELEASES

5. Subject to the payment of the Settlement Amount as provided in Section III.2(a) above, the SJVIA on behalf of itself, and its representatives, successors, heirs, assigns, and in a representative capacity on behalf of its plans, members, and beneficiaries, agrees to finally, fully, unconditionally and completely release, acquit and discharge Gallagher, Gallagher's Insurers, and each of their respective past, present and future officers, directors, representatives, owners, partners, subsidiaries, parent companies, affiliates, joint venturers, predecessors, managers, shareholders, servants, successors-in-interest, assigns, employees, agents, insurers and attorneys, and all persons or entities acting in concert with or affiliated with any of them (the "Gallagher Released Parties") from any and all claims, debts, liabilities, demands, obligations, controversies, agreements, promises, acts, agreements, liens, losses, fees, costs, expenses, damages, injuries, suits, actions, and causes of action, of whatever kind or nature, whether legal or equitable, known or unknown, suspected or unsuspected, contingent or fixed, that the SJVIA now has, claims to have, or may in the future claim to have against the Gallagher Released Parties, including without limitation any claims arising from or related to the events giving rise to the Complaint.

6. Subject to the dismissal with prejudice as provided in Section III.4, Gallagher, on behalf of itself, and its representatives, successors, heirs and assigns, agrees to finally, fully, unconditionally and completely release, acquit and discharge the SJVIA and each of its respective past, present and future officers, directors, representatives, owners, partners, subsidiaries, parent companies, affiliates, joint venturers, predecessors, managers, shareholders, servants, successors-in-interest, assigns, employees, agents, insurers and attorneys, and all persons or entities acting in concert with or affiliated with any of them (the "SJVIA Released Parties") from any and all claims, debts, liabilities, demands, obligations, controversies, agreements, promises, acts, agreements, liens, losses, fees, costs, expenses, damages, injuries, suits, actions, and causes of action, of whatever kind or nature, whether legal or equitable, known or unknown, suspected or unsuspected, contingent or fixed, that Gallagher now has, claims to have, or may in the future claim to have against the SJVIA Released Parties, including without limitation any claims arising from or relating to the events giving rise to the Complaint.

7. It is the intention of the Parties granting a release under this Agreement that the releases shall be effective upon the SJVIA's receipt of the Settlement Amount that has cleared the banking process. It is also the intent of the Parties that the releases under this Agreement shall be

effective as a bar to each and every claim, demand, and cause of action that the Parties each have against the other, arising from or relating to the events giving rise to the Complaint. In furtherance of this intention, the parties hereby expressly waive any and all benefits or rights conferred by the provisions of Section 1542 of the California Civil Code, or any similar provision of California law, federal law, or the law of any other state now in effect or in effect in the future. The Parties hereby expressly consent that this Agreement shall be given full force and effect according to each and all of its express terms and conditions, including those related to unknown and unsuspected claims, demands and causes of action, if any, as well as those relating to any other claims, demands, and causes of action specified above. Section 1542 of the California Civil Code, which the Parties expressly waive with respect to the events giving rise to the Complaint, provides as follows:

A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS THAT THE CREDITOR OR
RELEASING PARTY DOES NOT KNOW OR SUSPECT TO EXIST IN HIS OR HER FAVOR
AT THE TIME OF EXECUTING THE RELEASE AND THAT, IF KNOWN BY HIM OR HER,
WOULD HAVE MATERIALLY AFFECTED HIS OR HER SETTLEMENT WITH THE
DEBTOR OR RELEASED PARTY.

V. COVENANT TO COOPERATE

8. The Parties agree to cooperate and timely perform all acts reasonably necessary to assist each other with the execution and performance of the acts required to effectuate this Agreement.

VI. WARRANTIES AND REPRESENTATIONS

9. The Parties hereby warrant and represent, one to the other, that they have not heretofore assigned, transferred, or granted, or purported to assign, transfer, or grant, any of the claims and properties disposed of by this Agreement. Each person signing this Agreement on behalf of a Party represents and warrants to the other Party that he/she has the requisite power and authority to execute and deliver this Agreement on behalf of that Party and that this Agreement, when so executed and delivered, will be a binding obligation of and enforceable against such Party in accordance with its terms.

10. The Parties have each made such investigation of the facts and matters pertaining to this Agreement as each of them has deemed necessary.

VII. GOVERNING LAW

11. This Agreement shall be governed by and construed in accordance with the laws of the State of California. If an action is filed to enforce the terms of this settlement agreement, the prevailing party shall be entitled to reasonable attorneys' fees and costs.

VIII.
ENTIRE AGREEMENT

12. This Agreement constitutes the entire agreement between the Parties with respect to the subject matter hereof and supersedes all prior and contemporaneous oral and written agreements and discussions. This Agreement may be amended only through the written agreement of all the Parties.

IX.
CONSENT

13. The Parties represent that they were represented by attorneys of their own choosing, or by their own choosing declined to obtain legal representation, in the negotiations and preparation of this Agreement, that they have read this Agreement, that they are fully aware of its contents and of its legal effect by virtue of discussions with their attorneys, and that they have freely and voluntarily entered into the settlement set forth in this Agreement.

X.
CAPTIONS

14. Any captions to the paragraphs of this Agreement are solely for the convenience of the Parties, are not a part of this Agreement, and shall not be used for the interpretation or determination of the validity of this Agreement or any portion thereof.

XI.
SAVINGS CLAUSE

15. If any provision of this Agreement is held by a court of competent jurisdiction to be invalid, void or otherwise unenforceable, the remaining provisions shall nonetheless continue in full force and effect without being impaired or invalidated in any way. Parole evidence shall not be admissible to modify, alter or vary the terms of this Agreement.

XII.
JURISDICTION

16. The Parties hereto agree that the United States Court for the Eastern District of California shall have sole and exclusive jurisdiction, sitting without a jury, to hear and determine any disputes that arise under or on account of this Agreement.

XIII.
COUNTERPARTS

17. This Agreement may be executed in one or more counterparts, and by the different parties hereto in separate counterparts, each of which when executed shall be deemed to be an original but all of which taken together shall constitute one and the same agreement. Copies of this executed Agreement shall have the same force, effect and enforceability as the original.

XIV.
NO ADMISSION OF LIABILITY

18. The Parties agree that the claims, demands, actions and causes of action affected by this Agreement are disputed and that nothing in this Agreement is intended or may be deemed to constitute an admission or concession of wrongdoing or liability, or other evidence of any wrongdoing or liability on the part of Defendants, and that any such asserted liability is expressly denied.

XV.
PUBLIC STATEMENTS

19. The Agreement and its terms will be publicly available upon distribution to the SJVIA Board. Excluding any writings distributed at or statements made in an open meeting subject to California Government Code § 54950, et. seq., and except as may be otherwise required by law, neither Party will issue any press releases or make any public announcements of any kind regarding the relationship between the Parties or this Agreement without the other party's prior consent. No prior consent shall be necessary or required to allow the SJVIA to inform county labor groups of the Agreement or its terms if asked. Nothing contained herein shall prohibit Gallagher or any other person from making public criticism of the policies, procedures, programs, or services of the SJVIA, or the acts or omissions of the SJVIA, to the extent permitted by California Government Code section 54954.3, subdivision (c).

XVI.
NOTICES

20. All notices, requests, claims, demands and other communications hereunder shall be in writing and shall be given or made (and shall be deemed to have been duly given or made upon receipt) by delivery in person, or by courier service, electronic mail, or registered or certified mail (postage prepaid, return receipt requested) to the respective parties hereto at their addresses set forth below (or at such other address a party hereto shall request in writing):

(a) if to Plaintiff:
John Clifford
Smith LC
4 Park Plaza, Suite 1050
Irvine, CA, 92614
E-mail: jclifford@smith-lc.com

With a courtesy copy by email to
pwall@fresnocountyca.gov
dlmendez@tularecounty.ca.gov

(b) if to the Defendants
Stephen D'Amore
Winston & Strawn, LLP
35 W. Wacker Drive
Chicago, IL 60601-9703
sdamore@winston.com

DATED: February ____, 2022

San Joaquin Valley Insurance Authority, a
California Joint Powers Authority

By: _____
Name: Pete Vander Poel
TITLE: President of the Board of Directors

DATED: February ____, 2022

Gallagher Benefit Services, Inc

By: _____
Name:
TITLE:

AGENDA

BOARD OF DIRECTORS

STEVE BRANDAU
NATHAN MAGSIG
BUDDY MENDES
LARRY MICARI
BRIAN PACHECO
AMY SHUKLIAN
PETE VANDER POEL

**Meeting Location:
County of Tulare
Board of Supervisors Chambers
2800 W. Burrel Avenue
Visalia, CA 93291
December 10, 2021 9:00 AM**

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the SJVIA Manager at 559-600-1810 or the Assistant SJVIA Manager at 559-636-4900. Notification 48 hours prior to the meeting will help enable staff to make reasonable arrangements to ensure meaningful access.

1. Call to Order
2. Pledge of Allegiance
3. Roll Call

All Directors Present with the exception of Director Brandau

4. Approval of Agenda (A)

Motion to approve by Director Magsig; Seconded by Director Mendes; Motion approved unanimously

5. Closed Session CONFERENCE WITH LEGAL COUNSEL – EXISTING LITIGATION (Gov. Code, § 54956.9, subd. (d)(1)) — San Joaquin Valley Insurance Authority v. Gallagher Benefit Services, Inc., Fresno County Superior Court Case No. 17CECG01632, United States District Court for the Eastern District of California Case No. 1:17-cv-00861-LJO-EPG

The public may comment on Closed Session items prior to the Board's recess to Closed Session.

The remainder of the agenda will be heard following the Closed Session item.

No public comments were brought forth

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the SJVIA Manager at 559-600-1810 or the Assistant SJVIA Manager at 559-636-4900. Notification 48 hours prior to the meeting will enable staff to make reasonable arrangements to ensure accessibility. Documents related to the items on this Agenda submitted to the Board after distribution of the Agenda packet are available for public inspection at the County of Fresno plaza Building, 2220 Tulare St, 14th Floor, Fresno, CA during normal business hours. All documents are also posted online to www.sjvia.org.

AGENDA

BOARD OF DIRECTORS

STEVE BRANDAU
NATHAN MAGSIG
BUDDY MENDES
LARRY MICARI
BRIAN PACHECO
AMY SHUKLIAN
PETE VANDER POEL

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County of Tulare
Board of Supervisors Chambers
2800 W. Burrel Avenue
Visalia, CA 93291
December 10, 2021 9:00 AM**

6. Public Comment: At this time, members of the public may comment on any item, within the jurisdiction of the SJVIA, not appearing on the agenda. In order for everyone to be heard, please limit your comments to 3 minutes or less. Anyone wishing to be placed on the agenda for a specific topic should contact the SJVIA Manager's Office and submit correspondence at least 14 days before the desired date of appearance.

No public comments were brought forth

7. Approval of Consent Agenda – Item Numbers 18 and 19 (A)

These matters are routine in nature and are usually approved by a single vote. Prior to action by the Board, the Board Members and the public will be given the opportunity to remove any item from the Consent Calendar. Items removed from the Consent Calendar may be heard immediately following approval of this Consent Calendar or set aside until later in the meeting.

Motion to approve by Director Shuklian; Seconded by Director Mendes;
Motion approved unanimously

8. Receive Update from Auditor-Treasurer on Cash Flow Projections (I)

Presented by Jamie Lucas, County of Fresno

9. Receive Consultant's Medical, Dental, and Vision Experience Reports through September 2021 with Update on Projected Plan Experience Surplus Accumulation and Projections (I)

Presented by Bordan Darm, Keenan & Associates

10. Receive Keenan Pharmacy Services' Consultant's Report on EmpiRx Q3 2021 Utilization (I)

Presented via Zoom by Alexandria Van Brundt, Keenan & Associates

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the SJVIA Manager at 559-600-1810 or the Assistant SJVIA Manager at 559-636-4900. Notification 48 hours prior to the meeting will enable staff to make reasonable arrangements to ensure accessibility. Documents related to the items on this Agenda submitted to the Board after distribution of the Agenda packet are available for public inspection at the County of Fresno plaza Building, 2220 Tulare St, 14th Floor, Fresno, CA during normal business hours. All documents are also posted online to www.sjvia.org.

AGENDA

BOARD OF DIRECTORS

STEVE BRANDAU
NATHAN MAGSIG
BUDDY MENDES
LARRY MICARI
BRIAN PACHECO
AMY SHUKLIAN
PETE VANDER POEL

**Meeting Location:
County of Tulare
Board of Supervisors Chambers
2800 W. Burrel Avenue
Visalia, CA 93291
December 10, 2021 9:00 AM**

11. Receive Consultant's Report on Plan Year 2022 Stop Loss/Reinsurance Renewal and Marketing Results and Authorize President to Execute Agreement Subject to Approval of SJVIA Counsel and Staff (A)

Presented by Bordan Darm, Keenan & Associates

Motion to approve by Director Mendes; Seconded by Director Shuklian;
Motion approved unanimously

12. Receive Consultant's Report on COVID-19 Medical Plan Experience with Anthem and Kaiser Through October 2021 (I)

Presented by Bordan Darm, Keenan & Associates

13. Receive Consultant's Report on SJVIA JPA Administration and Management Roles and Costs (I)

Presented by Bordan Darm, Keenan & Associates

14. Receive Report on the RFP for SJVIA Consulting Services and Authorize President to Execute Agreement with Keenan & Associates (A)

Presented by Hollis Magill, County of Fresno

Motion to approve by Director Shuklian; Seconded by Director Magsig;
Motion approved unanimously

15. SJVIA Director Questions, Announcements, and Activity Reports (Gov. Code, § 54954.2, subd. (a)(2)) (I)

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the SJVIA Manager at 559-600-1810 or the Assistant SJVIA Manager at 559-636-4900. Notification 48 hours prior to the meeting will enable staff to make reasonable arrangements to ensure accessibility. Documents related to the items on this Agenda submitted to the Board after distribution of the Agenda packet are available for public inspection at the County of Fresno plaza Building, 2220 Tulare St, 14th Floor, Fresno, CA during normal business hours. All documents are also posted online to www.sjvia.org.

AGENDA

BOARD OF DIRECTORS

STEVE BRANDAU
NATHAN MAGSIG
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BRIAN PACHECO
AMY SHUKLIAN
PETE VANDER POEL

**Meeting Location:
County of Tulare
Board of Supervisors Chambers
2800 W. Burrel Avenue
Visalia, CA 93291
December 10, 2021 9:00 AM**

16. Adjournment

Consent Agenda

17. Approval of Minutes – Board Meeting of October 15, 2021 (A)

18. Approve Amendment to Agreement with 98point6 to Provide Mobile Phone App-Based Telemedicine Services For an Additional Two-Year Term and Authorize President to Execute Amended Agreement Subject to Approval of SJVIA Counsel and Staff (A)

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the SJVIA Manager at 559-600-1810 or the Assistant SJVIA Manager at 559-636-4900. Notification 48 hours prior to the meeting will enable staff to make reasonable arrangements to ensure accessibility. Documents related to the items on this Agenda submitted to the Board after distribution of the Agenda packet are available for public inspection at the County of Fresno plaza Building, 2220 Tulare St, 14th Floor, Fresno, CA during normal business hours. All documents are also posted online to www.sjvia.org.

**BOARD OF DIRECTORS**

STEVE BRANDAU

NATHAN MAGSIG

BUDDY MENDES

LARRY MICARI

BRIAN PACHECO

AMY SHUKLIAN

PETE VANDER POEL

Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 21

SUBJECT: Receive Update on Plan Year 2022 Anthem High Deductible PPO Pharmacy Discounts Through IngenioRx (A)

REQUEST(S): That the Board receive and ratify action taken by SJVIA co-managers and approve the PY 2022 Anthem High Deductible PPO Pharmacy Discount update through IngenioRx.

DESCRIPTION:

During a recent renewal audit, Anthem discovered the IngenioRx pricing summary was not included in the original renewal package. Anthem apologized for this omission. SJVIA co-managers approved the change since all changes had a positive impact on the plan and Anthem needed a timely response for the start of the 2022 plan year. It should be noted that these discounts affect the Anthem High Deductible PPO (HDHP) plans only.

Below is a comparison of discounts and dispensing fees for 2021 vs. 2022 for the HDHP IngenioRx plans.

Network Discounts	2021	2022
Retail Brand Discount % off AWP	17.15%	18.00%
Retail Brand Dispensing Fee per Rx	\$0.75	\$0.70
Retail Generic Discount % off AWP	81.30%	83.25%
Retail Generic Dispensing Fee per Rx	\$0.55	\$0.50
Retail 90 Brand Discount % off AWP	19.65%	20.00%
Retail 90 Brand Dispensing Fee per Rx	\$0.55	\$0.50
Mail Brand Discount % off AWP	24.00%	24.00%
Mail Generic Discount % off AWP	83.25%	85.25%
Exclusive Specialty % off AWP	17.75%	19.00%

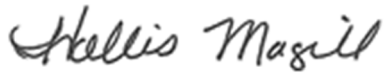
AGENDA: San Joaquin Valley Insurance Authority

DATE: February 18, 2022

FISCAL IMPACT/FINANCING:

\$2,000 to \$7,000 Reduction to the plan

ADMINISTRATIVE SIGN-OFF:



Hollis Magill
SJVIA Manager



Lupe Garza
SJVIA Assistant Manager



BOARD OF DIRECTORS

STEVE BRANDAU

NATHAN MAGSIG

BUDDY MENDES

LARRY MICARI

BRIAN PACHECO

AMY SHUKLIAN

PETE VANDER POEL

Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 22

SUBJECT: Receive Update on the Self-Funded Medical and Dental Claims Audit Through TFG Partners (A)

REQUEST(S): That the Board receive and approve the updated Agreement with TFG Partners.

DESCRIPTION:

At the August 27, 2021 SJVIA Board meeting, the Board approved the recommended vendor, TFG Partners, to conduct a claims audit of the SJVIA self-funded medical and dental plans for the 2019 and 2020 plan years.

In the process of drafting the final Agreement it was recommended to change the scope of service timeframe from the 2019 and 2020 plan years to 2020 and 2021 (dropping 2019).

The attached agreement between the SJVIA and TFG Partners is recommended for approval by the SJVIA Board.

FISCAL IMPACT/FINANCING:

The total cost for auditing the self-funded medical and dental claims for plan years 2020 and 2021 is \$65,000.

ADMINISTRATIVE SIGN-OFF:

A handwritten signature in black ink that reads "Hollis Magill".

Hollis Magill
SJVIA Manager

A handwritten signature in black ink that reads "Lupe Garza".

Lupe Garza
SJVIA Assistant Manager

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A. The SJVIA is a joint powers agency that purchases health, pharmacy, vision, dental, and life insurance for the employees of its Participating Entities. For purposes of this Agreement, the County of Tulare and the County of Fresno are the “Participating Entities” of the SJVIA, and each is a “Participating Entity” of the SJVIA.

B. The SJVIA desires to conduct a claims audit of the Plan Year 2019 and 2020 self-insured Medical and Dental claims.

Article 1

1.1 **Scope of Services.** The Contractor shall perform all service provided in Exhibit A to the Agreement, titled “Scope of Services.”

1.3 **Compliance with Laws.** The Contractor shall, at its own cost, comply with all applicable federal, state, and local laws and regulations in the performance of its

obligations under this Agreement, including but not limited to workers compensation, labor, and confidentiality laws and regulations.

Article 2

SJVIA's Responsibilities

2.1 Subject to the terms of this Agreement, the SJVIA will provide or authorize the vendors of its Insurance Programs to provide the Contractor with data and information that is necessary to the Contractor's provision of services under this Agreement.

Article 3

Compensation, Invoices, and Payments

3.1 **Compensation.** The SJVIA agrees to pay, and the Contractor agrees to receive, compensation for the performance of its services under this Agreement as described in Exhibit B to this Agreement, titled "Compensation."

3.2 **Invoices.** For "Audit Fees" as provided in Exhibit B, the Contractor shall submit an invoice, billed individually by audit, to the SJVIA for each stage of the audit as described in Exhibit B. The Contractor shall include all of its "Travel Expenses," including supporting documentation, as provided in Exhibit B in its final invoice to the SJVIA. If there are any "administrator-related costs for obtaining claims data or responding to audit results" as provided in Exhibit B, the Contractor shall invoice those separately to the SJVIA.

3.3 **Payment.** The SJVIA shall pay each correctly completed and timely submitted invoice within 30 business days after receipt. The SJVIA shall remit any payment to the Contractor's address specified in the invoice.

3.4 **Incidental Expenses.** The Contractor is solely responsible for all of its expenses that are not specified as payable by the SJVIA under this Agreement.

Article 4

Term of the Agreement

4.1 **Term.** This Agreement is effective on November 15, 2021 and terminates on November 14, 2022.

Article 5

Notices

5.1 **Contact Information.** The persons and their addresses having authority to give and receive notices provided for or permitted under this Agreement include the following:

For the SJVIA:

SJVIA Manager

2220 Tulare Street, 14th Floor

Fresno, California 93721

SJVIA-Admin@fresnocountyca.gov

For the Contractor:

Auke van Scheltinga

Two Gateway Center, Suite 1350

603 Stanwix Street

Pittsburgh, PA 15222

avanscheltinga@tfqpartners.com

1 5.2 **Change of Contact Information.** Either party may change the information
2 in section 5.1 by giving notice as provided in Section 5.3.

3 5.3 **Method of Delivery.** All notices between the SJVIA and the Contractor
4 provided for or permitted under this Agreement must be in writing and delivered either
5 by personal service, by first-class United States mail, by an overnight commercial
6 courier service, by telephonic facsimile transmission, or by Portable Document Format
7 (PDF) document attached to an email.

8 (A) A notice delivered by personal service is effective upon service to the
9 recipient.

10 (B) A notice delivered by first-class United States mail is effective three
11 County of Fresno Business days after deposit in the United States mail, postage
12 prepaid, addressed to the recipient.

13 (C) A notice delivered by an overnight commercial courier service is effective
14 one County of Fresno business day after deposit with the overnight commercial
15 courier service, delivery fees prepaid, with delivery instructions given for next day
16 delivery, addressed to the recipient.

17 (D) A notice delivered by PDI document attached to an email is effective
18 when transmission to the recipient is completed (but, if such transmission is
19 completed outside of County of Fresno or County of Tulare business hours, then
20 such delivery is deemed to be effective at the next beginning of the County of
21 Fresno or County of Tulare business day), provided that the sender maintains a
22 machine record of the completed transmission.

5.4 **Claims Presentation.** For all claims arising from or related to this Agreement, nothing in this Agreement establishes, waives, or modifies any claims presentation requirements or procedures provided by law, including the Government Claims Act (Division 3.6 of Title 1 of the Government Code, beginning with section 810).

Article 6

Termination and Suspension

6.1 **Termination for Non-Allocation of Funds.** The terms of this Agreement are contingent on the approval of funds by the appropriating government agency. If sufficient funds are not allocated, then the SJVIA, upon at least 30 days' advance written notice to the Contractor may:

- (A) Modify the services provide by the Contractor under this Agreement; or
- (B) Terminate this Agreement.

6.2 Termination for Breach.

(A) Upon determining that a breach (as defined in paragraph (C) below) has occurred, the SJVIA may give written notice of the breach to the Contractor. The written notice may suspend performance under this Agreement and must provide at least 30 days for the Contractor to cure the breach.

(B) If the Contractor fails to cure the breach to the SJVIA's satisfaction within the time stated in the written notice, the SJVIA may terminate this Agreement immediately.

(C) For purposes of this section, a breach occurs when, in the determination of the SJVIA, the Contractor has:

- 1) Obtained or used funds illegally or improperly;

- 2) Failed to comply with any part of this Agreement;
 - 3) Submitted a substantially incorrect or incomplete report to the SJVIA;
 - 4) Improperly performed any of its obligations under this Agreement;
- or
- 5) Given a notification under section 10.5(B) of this Agreement.

6.3 **Termination without Cause.** In circumstances other than those set forth above, either party may terminate this Agreement by giving at least 30 days' advance written notice to the other party.

6.4 **No Penalty or Further Obligation.** Any termination of this Agreement by the SJVIA under this Article 6 is without penalty to or further obligation of the SJVIA.

Article 7

Independent Contractor

7.1 **Status.** In performing under this Agreement, the Contractor, including its officers, agents, employees, and volunteers is at all times acting and performing as an independent contractor, in an independent capacity, and not as an officer, agent, servant, employee, joint venturer, partner, or associate of the SJVIA.

7.2 **Supervision.** The SJVIA has no right to control, supervise, or direct the manner or method of the Contractor's performance under this Agreement, but the SJVIA may verify that the Contractor is performing according to the terms of this Agreement.

7.3 **Benefits.** Because if its status as an independent contractor, the Contractor has no right to employment rights or benefits available to employees of the

SJVIA or its Participating Entities. The Contractor is solely responsible for providing to its own employees all employee benefits required by law. The Contractor shall save the SJVIA harmless from all matters relating to the payment of Contractor's employees, including compliance with Social Security withholding and all related regulations.

7.4 **Services to Others.** The parties acknowledge that, during the term of this Agreement, the Contractor may provide services to others unrelated to the SJVIA.

Article 8

Indemnity and Defense

8.1 **Indemnifiable Losses.** For purposes of this Article 1, the phrase “Indemnifiable Loss” includes all claims, demands, injuries, damages, costs, expenses (including attorney fees and costs), fines, penalties, and liabilities of any kind.

8.2 **Indemnity.** The Contractor shall indemnify the SJVIA (including its officers, agents, employees, and volunteers) against any Indemnifiable Loss to the SJVIA, the Contractor, or any third party that arises from or relates to the performance or failure to perform by the Contractor (or any of its officers, agents, or employees) under this Agreement.

8.3 **Defense.** If requested by the SJVIA, the Contractor shall defend the actions or proceedings brought or threatened against the SJVIA (including its officers, agents, employees, and volunteers) for any Indemnifiable Loss to the SJVIA, or any third party that arises from or relates to the performance or failure to perform by the Contractor (or any of its officers(agents, or employees) under this Agreement. The SJVIA may conduct or participate in its own defense without affecting the Contractor's obligation to indemnify or defend the SJVIA.

8.4 Survival. This Article 8 survives the termination of this Agreement.

Article 9

Insurance

9.1 The Contractor shall comply with all of the insurance requirements in Exhibit C to this Agreement.

Article 10

Inspections, Audits, and Public Records

10.1 **Inspection of Documents.** The Contractor shall make available to the SJVIA, and the SJVIA may examine at any time during business hours and as often as the SJVIA deems necessary, all of the Contractor's records and data with respect to the matters covered by this Agreement. The Contractor shall, upon request by the SJVIA, permit the SJVIA to audit and inspect all of such records and data to ensure the Contractor's compliance with the terms of this Agreement.

10.2 **State Audit Requirements.** If the compensation to be paid by the SJVIA under this Agreement exceeds \$10,000, the Contractor is subject to the examination and audit of the California State Auditor, as provided in Government Code section 8546.7, for a period of three years after final payment under this Agreement. This section survives the termination of this Agreement.

10.3 Contractor's Independent Nondisclosure Obligations; Effect on Deliverables.

(A) The Contractor may omit within the records and data that the Contractor provides to the SJVIA, including deliverables that the Contractor is obligated to provide under this agreement (“Records and Data”), any information

1 that the Contractor has determined in good faith to be (i) a trade secret of the
2 Contractor, (ii) subject to nondisclosure under a nondisclosure agreement to
3 which the Contractor is a party, or (iii) protected health information under the
4 federal Health Insurance Portability and Privacy Act.

5 (B) Notwithstanding the provisions of paragraph (A) of this section
6 10.5, the Contractor is obligated to provide the deliverables as described in
7 Exhibit A in a form that complies with the requirements of this Agreement. If the
8 Contractor determines that it is unable to do so, then Contractor shall notify the
9 SJVIA immediately and the SJVIA may terminate this Agreement as provided in
10 section 6.2 of this Agreement.

11 10.4 **Public Records.** Except as expressly provided in Article 12 of this
12 Agreement, the SJVIA is not limited in any manner with respect to its public disclosure
13 of this Agreement or the Records and Data. The SJVIA'S public disclosure of this
14 Agreement or the Records and Data may include but is not limited to the following:

15 (A) The SJVIA may voluntarily, or upon request by any member of the
16 public or governmental agency, disclose this Agreement to the public or such
17 governmental agency.

18 (B) The SJVIA may voluntarily, or upon request by any member of the
19 public or governmental agency, disclose to the public or such governmental
20 agency any of the Records and Data, unless such disclosure is prohibited by
21 court order.

1 (C) This Agreement, and the Records and Data, is subject to public
2 disclosure under the Ralph M. Brown Act (California Government Code, Title 5,
3 Division 2, Part 1, Chapter 9, beginning with section 54950).

4 (D) This Agreement, and the Records and Data, is subject to public
5 disclosure as a public record under the California Public Records Act (California
6 Government Code, Title 1, Division 7, Chapter 3.5, beginning with section 6250)
7 ("CPRA").

8 (E) This Agreement, and the Records and Data, is subject to public
9 disclosure as information concerning the conduct of the people's business of the
10 State of California under California Constitution, Article 1, section 3, subdivision
11 (b).

12 (F) Any marking of confidentiality or restricted access upon or
13 otherwise made with respect to any of the Records and Data shall be
14 disregarded and have no effect on the SJVIA's right or duty to disclose to the
15 public or governmental agency any such record or data.

16 **10.5 Public Records Act Requests.** If the SJVIA receives a written or oral
17 request under the CPRA to publicly disclose any record that is in the Contractor's
18 possession or control, and which the SJVIA has a right, under any provision of this
19 Agreement or applicable law, to possess or control, such as the deliverables that the
20 Contractor is obligated to provide under this Agreement, then the SJVIA may demand,
21 in writing, that the Contractor deliver to the SJVIA, for purposes of public disclosure, the
22 requested records that may be in the possession or control of the Contractor. Within five
23 business days after the SJVIA's demand, the Contractor shall (a) deliver to the SJVIA

1 all of the requested records that are in the Contractor's possession or control, together
2 with a written statement that the Contractor, after conducting a diligent search, has
3 produced all requested records that are in the Contractor's possession or control, or (b)
4 provide to the SJVIA a written statement that the Contractor, after conducting a diligent
5 search, does not possess or control any of the requested records. The Contractor shall
6 cooperate with the SJVIA with respect to any SJVIA demand for such records. If the
7 Contractor wishes to assert that any specific record or data is exempt from disclosure
8 under the CPRA or other applicable law, it must deliver the record or data to the SJVIA
9 and assert the exemption by citation to specific legal authority within the written
10 statement that it provides to the SJVIA under this section. The Contractor's assertion of
11 any exemption from disclosure is not binding on the SJVIA, but the SJVIA will give at
12 least 10 days' advance written notice to the Contractor before disclosing any record
13 subject to the Contractor's assertion of exemption from disclosure. The Contractor shall
14 indemnify the SJVIA for any court-ordered award of costs or attorney's fees under the
15 CPRA that results from the Contractor's delay, claim of exemption, failure to produce
16 any such records, or failure to cooperate with the SJVIA with respect to any SJVIA
17 demand for any such records.

18 **10.6 News and Promotional Releases.** New releases and promotional
19 activities regarding the services provided by the Contractor under this Agreement shall
20 be undertaken only in a manner that is mutually acceptable, in advance, to both parties
21 and upon their respective express, prior written approval. Nothing in this section limits
22 the information that may be provided by SJVIA staff to the board of directors for the

1 SJVIA that is subject to disclosure under the CPRA, or any other information that is
2 subject to disclosure under the CPRA.

3 **Article 11**

4 **Confidential Information**

5 11.1 The Contractor shall protect Confidential Information from inadvertent
6 disclosure to any third party in the same manner that it protects its own confidential
7 information, unless such disclosure is required in response to a validly issued subpoena
8 or other process of law. The provisions of this Article 11 survive the termination or
9 expiration of this Agreement.

10 **Article 12**

11 **Health Insurance Portability and Accountability Act (HIPAA)**

12 12.1 The parties to this Agreement shall be in strict conformance with all
13 applicable Federal and State of California laws and regulations, including but not limited
14 to Sections 5328, 10850, and 14100.2 *et seq.* of the Welfare and Institutions Code,
15 Sections 2.1 and 431.300 *et seq.* of Title 42, Code of Federal Regulations (CFR),
16 Section 56 *et seq.* of the California Civil Code, Sections 11977 and 11812 of Title 22 of
17 the California Code of Regulations, and the Health Insurance Portability and
18 Accountability Act (HIPAA), including but not limited to Section 1320 D *et seq.* of Title
19 42, United States Code (USC) and its implementing regulations, including, but not
20 limited to Title 45, CFR, Parts 142, 160, 162, and 164, The Health Information
21 Technology for Economic and Clinical Health Act (HITECH) regarding the confidentiality
22 and security of patient information, and the Genetic Information Nondiscrimination Act
23 (GINA) of 2008 regarding the confidentiality of genetic information.

1 12.2 Except as otherwise provided in this Agreement, the Contractor, as a
2 Business Associate of SJVIA, may use or disclose Protected Health Information (PHI) to
3 perform functions, activities, or services for or on behalf of SJVIA, as specified in this
4 Agreement, provided that such use or disclosure shall not violate the Health Insurance
5 Portability and Accountability Act (HIPAA), 45 USC 1320d *et seq.* The uses and
6 disclosures of PHI may not be more expansive than those applicable to the SJVIA, as
7 the “Covered Entity” under the HIPAA Privacy Rule (45 CFR 164.500 *et seq.*), except as
8 authorized for management, administrative or legal responsibilities of the Business
9 Associate.

10 12.3 The Contractor, including its subcontractors and employees, shall protect,
11 from unauthorized access, use, or disclosure of names and other identifying
12 information, including genetic information, concerning persons receiving services
13 pursuant to this Agreement, except where permitted in order to carry out data
14 aggregation purposes for health care operations [45 CFR Sections 164.504 (e)(2)(i),
15 164.504 (3)(2)(ii)(A), and 164.504 (e)(4)(i)]. This pertains to any and all persons
16 receiving services pursuant to the SJVIA funded program. This requirement applies to
17 electronic PHI. The Contractor shall not use such identifying information or genetic
18 information for any purpose other than carrying out the Contractor’s obligations under
19 this Agreement.

20 12.4 The Contractor, including its subcontractors and employees, shall not
21 disclose any such identifying information or genetic information to any person or entity,
22 except as otherwise specifically permitted by this Agreement, authorized by Subpart E
23 of 45 CFR Part 164 or other law, required by the Secretary, or authorized by the

1 client/patient in writing. In using or disclosing PHI that is permitted by this Agreement or
2 authorized by law, the Contractor shall make reasonable efforts to limit PHI to the
3 minimum necessary to accomplish intended purpose of use, disclosure, or request.

4 12.5 For purposes of the above sections, identifying information shall include,
5 but not be limited to name, identifying number, symbol, or other identifying particular
6 assigned to the individual, such as finger or voice print, or photograph.

7 12.6 For purposes of the above sections, genetic information shall include
8 genetic tests of family members of an individual or individual, manifestation of disease
9 or disorder of family members of an individual, or any request for our receipt of, genetic
10 services by individual or family members. Family member means a dependent or any
11 person who is first, second, third, or fourth degree relative.

12 12.7 The Contractor shall provide access, at the request of SJVIA, and in the
13 time and manner designated by the SJVIA, to PHI in a designated record set (as
14 defined in 45 CFR Section 164.501), to an individual or to the SJVIA in order to meet
15 the requirements of 45 CFR Section 164.524 regarding access by individuals to their
16 PHI. With respect to individual requests, access shall be provided within thirty (30) days
17 from request. Access may be extended if the Contractor cannot provide access and
18 provides individual with the reasons for the delay and the date when access may be
19 granted. PHI shall be provided in the form and format requested by the individual of
20 SJVIA.

21 (A) The Contractor shall make any amendment(s) to PHI in a designated
22 record set at the request of SJVIA or individual, and in the time and manner
23 designated by the SJVIA in accordance with 45 CFR Section 164.526.

1 (B) The Contractor shall provide to the SJVIA or to an individual, in a time and
2 manner designated by the SJVIA, information collected in accordance with 45 CFR
3 Section 164.528, to permit the SJVIA to respond to a request by the individual for an
4 account of disclosures of PHI in accordance with 45 CFR Section 164.528.

5 12.8 The Contractor shall report to the SJVIA, in writing, any knowledge or
6 reasonable belief that there has been unauthorized access, viewing, use, disclosure,
7 security incident, or breach of unsecured PHI not permitted by this Agreement of which
8 it becomes aware, immediately and without reasonable delay and in no case later than
9 two (2) business days of discovery. Immediate notification shall be made to the SJVIA's
10 Privacy Officer within two (2) business days of discovery. The notification shall include,
11 to the extent possible, the identification of each individual whose unsecured PHI has
12 been, or is reasonably believed to have been, accessed, acquired, used, disclosed, or
13 breached. The Contractor shall take prompt corrective action to cure any deficiencies
14 and any action pertaining to such unauthorized disclosure required by applicable
15 Federal and State Laws and regulations. The Contractor shall investigate such breach
16 and is responsible for all notifications required by law and regulation or deemed
17 necessary by the SJVIA and shall provide a written report of the investigation and
18 reporting required to the SJVIA's Privacy Officer. This written investigation and
19 description of any reporting necessary shall be postmarked as mailed to the SJVIA's
20 Privacy Officer within the thirty (30) working days of the discovery of the breach.

21 12.9 The Contractor shall make its internal practices, books, and records
22 related to the use and disclosure of PHI received from SJVIA, or created or received by
23 the Contractor on behalf of SJVIA, in compliance with HIPAA's Privacy Rule, including,

1 but not limited to the requirements set forth in Title 45, CFR, Parts 160 and 164. The
2 Contractor shall make its internal practices, books, and records relating to the use and
3 disclosure of PHI received from SJVIA, or created or received by the Contractor on
4 behalf of the SJVIA, available to the Secretary upon demand.

5 12.10 The Contractor shall cooperate with the compliance and investigation
6 reviews conducted by the Secretary. PHI access to the Secretary must be provided
7 during the Contractor's normal business hours, however, upon exigent circumstances
8 access at any time must be granted. Upon the Secretary's compliance or investigation
9 review, if PHI is unavailable to the Contractor and in possession of a subcontractor, it
10 must certify efforts to obtain the information to the Secretary.

11 12.11 **Safeguards.**

12 (A) The Contractor shall implement administrative, physical, and technical
13 safeguards as required by the HIPAA Security Rule, Subpart C of 45 CFR Part 164,
14 that reasonably and appropriately protects the confidentiality, integrity, and
15 availability of PHI, including electronic PHI, that is creates, receives, maintains, or
16 transmits on behalf of SJVIA and to prevent unauthorized access, viewing, use,
17 disclosure, or breach of PHI other than as provided for by this Agreement. The
18 Contractor shall conduct an accurate and thorough assessment of the potential
19 risks and vulnerabilities to the confidentiality, integrity, and availability of electronic
20 PHI. The Contractor shall develop and maintain a written information privacy and
21 security program that includes administrative, technical, and physical safeguards
22 appropriate to the size and complexity of the Contractor's operations and the nature

1 and scope of its activities. Upon the SJVIA's request, the Contractor shall provide
2 the SJVIA with information concerning such safeguards.

3 (B) Contractor shall implement strong access controls and other security
4 safeguards and precautions in order to restrict logical and physical access to
5 confidential, personal (e.g., PHI) or sensitive data to authorized users only. Said
6 safeguards and precautions shall include the following administrative and technical
7 password controls for all systems used to process or store confidential, personal, or
8 sensitive data:

9 1) Passwords must NOT be:

- 10 a. Shared or written down where they are accessible or
- 11 recognizable by anyone else; such as taped to computer
- 12 screens, stored under keyboards, or visible in a work area;
- 13 b. A dictionary word; or
- 14 c. Stored in clear text

15 2) Passwords must be:

- 16 a. Eight characters or more in length;
- 17 b. Changed every 90 days;
- 18 c. Changed immediately if revealed or compromised; and
- 19 d. Composed of characters from at least three of the following four
- 20 groups from the standard keyboard:
 - 21 i. Upper case letters (A-Z);
 - 22 ii. Lowercase letters (a-z);
 - 23 iii. Arabic numerals (0 through 9); and

1 iv. Non-alphanumeric characters (punctuation symbols).

2 (C) The Contractor shall implement the following security controls on each
3 workstation or portable computing device (e.g., laptop computer) containing
4 confidential, personal, or sensitive data;

- 5 1) Network-based firewall and/or personal firewall;
6 2) Continuously updated anti-virus software; and
7 3) Patch management process including installation of all operating
8 system/software vendor security patches.

9 (D) The Contractor shall utilize a commercial encryption solution that has
10 received FIPS 140-2 validation to encrypt all confidential, personal, or sensitive
11 data stored on portable electronic media (including, but not limited to, compact
12 disks and thumb drives) and on portable computing devices (including, but not
13 limited to laptop and notebook computers).

14 (E) The Contractor shall not transmit confidential, personal, or sensitive data
15 via email or other internet transport protocol unless the data is encrypted by a
16 solution that has been validated by the National Institute of Standards and
17 Technology (NIST) as conforming to the Advance Encryption Standard (AES)
18 Algorithm. The Contractor must apply appropriate sanctions against its employees
19 who fail to comply with these safeguards. The Contractor must adopt procedures
20 for terminating access to PHI when employment of employee ends.

21 12.12 **Mitigation of Harmful Effects.** The Contractor shall mitigate, the extent
22 practicable, any harmful effect that is suspected or known to the Contractor of an
23 unauthorized access, viewing, use, disclosure, or breach of PHI by the Contractor or its

subcontractors in violation of the requirements of these provisions. The Contractor must document suspected or known harmful effects and the outcome.

12.13 Contractor's Subcontractors. The Contractor shall ensure that any of its contractors, including subcontractors, if applicable, to whom the Contractor provides PHI received from or created or received by the Contractor on behalf of SJVIA, agree to the same restrictions, safeguards, and conditions that apply to the Contractor with respect to such PHI and to incorporate, when applicable, the relevant provisions of these provisions into each subcontract or sub-award to such agents or subcontractors.

12.14 Employee Training and Discipline. The Contractor shall train and use reasonable measures to ensure compliance with the requirements of these provisions by employees who assist in the performance of functions or activities on behalf of SJVIA under this Agreement and use or disclose PHI and discipline such employees who intentionally violate any provisions of these provisions, including termination of employment.

12.15 Termination for Cause. Upon the SJVIA's knowledge of a material breach of this Article 12 by the Contractor, the SJVIA shall either:

(A) Provide an opportunity for the Contractor to cure the breach or end the violation and terminate this Agreement if the Contractor does not cure the breach or end the violation within the time specified by SJVIA; or

(B) Immediately terminate this Agreement if the Contractor has breached a material term of these provisions and cure is not possible.

If neither cure nor termination is feasible, the SJVIA's Privacy Officer shall report the violation to the Secretary.

1 **12.16 Judicial or Administrative Proceedings.** The SJVIA may terminate this
2 agreement in accordance with the provisions of this Agreement if:

3 (A) The Contractor is found guilty in a criminal proceeding for a violation of the
4 HIPAA Privacy or Security Laws or the HITECH Act; or

5 (B) There is a finding or stipulation that the Contractor has violated a privacy
6 or security standard or requirement of the HITECH Act, HIPAA or other security or
7 privacy laws in an administrative or civil proceeding in which the Contractor is a
8 party.

9 **12.17 Effective of Termination.** Upon termination or expiration of this
10 Agreement for any reason, the Contractor shall return or destroy all PHI received from
11 SJVIA (or created or received by the Contractor on behalf of the SJVIA) that the
12 Contractor still maintains in any form and shall retain no copies of such PHI. If return or
13 destruction of PHI is not feasible, it shall continue to extend the protections of these
14 provisions to such information, and limit further use of such PHI to those purposes that
15 make the return or destruction of such PHI infeasible. This provision shall apply to PHI
16 that is in the possession of subcontractors or agents, if applicable, of the Contractor. If
17 the Contractor destroys the PHI data, a certification of date and time of destruction shall
18 be provided to the SJVIA by the Contractor.

19 **12.18 Disclaimer.** The SJVIA makes to warranty or representation that
20 compliance by the Contractor with these provisions, the HITECH Act, HIPAA, or the
21 HIPAA regulations will be adequate or satisfactory for the Contractor's own purposes or
22 that any information in the Contractor's possession or control, or transmitted or received
23 by the Contractor, is or will be secure from unauthorized access, viewing, use

disclosure, or breach. The Contractor is solely responsible for all decisions made by the Contractor regarding the safeguarding of PHI.

12.19 Amendment. The parties acknowledge that federal and State laws relating to electronic data security and privacy are rapidly evolving and that amendment of this Agreement may be required to provide for procedures to ensure compliance with such developments. The parties specifically agree to take such action as is necessary to amend this Agreement in order to implement the standards and requirements of HIPAA, the HIPAA regulations, the HITECH Act, and other applicable laws relating to the security or privacy of PHI. The SJVIA may terminate this Agreement upon 30 days' written notice if the Contractor does not enter into an amendment providing assurances regarding the safeguarding of PHI that the SJVIA, in its sole discretion, deems sufficient to satisfy the standards and requirements of HIPAA, the HIPAA regulations, and the HITECH Act.

12.20 No Third-Party Beneficiaries. Nothing express or implied in the terms and conditions of these provisions is intended to confer, nor shall anything herein confer, upon any person other than the SJVIA or the Contractor and their respective successors or assigns any rights, remedies, obligations, or liabilities whatsoever.

12.21 Interpretation. The provisions of this Article 12 shall be interpreted as broadly as necessary to implement and comply with HIPAA regulations and applicable State laws. The parties agree that any ambiguity in the provisions of this Article 12 shall be resolved in favor of a meaning that complies and is consistent with HIPAA and the HIPAA regulations.

1 13.5 **Construction.** The final form of this Agreement is the result of the parties'
2 combined efforts. If anything in this Agreement is found by a court of competent
3 jurisdiction to be ambiguous, that ambiguity shall not be resolved by construing the
4 terms of this Agreement against either party.

5 13.6 **Headings.** The heading and section titles in this Agreement are for
6 convenience only and are not part of this Agreement.

7 13.7 **Severability.** If anything in this Agreement is found by a court of
8 competent jurisdiction to be unlawful or otherwise unenforceable, the balance of this
9 Agreement remains in effect, and the parties shall make best efforts to replace the
10 unlawful or unenforceable part of this Agreement with lawful and enforceable terms
11 intended to accomplish the parties' original intent.

12 13.8 **Nondiscrimination.** During the performance of this Agreement, the
13 Contractor shall not unlawfully discriminate against any employee or applicant for
14 employment, or recipient of services, because of race, religious creed, color, national
15 origin, ancestry, physical disability, mental disability, medical condition, genetic
16 information, marital status, sex, gender, gender identity, gender expression, age, sexual
17 orientation, military status or veteran status pursuant to all applicable State of California
18 and Federal statutes and regulation.

19 13.9 **No Waiver.** Payment, waiver, or discharge by the SJVIA of any liability or
20 obligation of the Contractor under this Agreement on any one or more occasions is not
21 a waiver of performance of any continuing or other obligation of the Contractor and does
22 not prohibit enforcement by the SJVIA of any obligation on any other occasion.

1 13.10 **Entire Agreement.** This Agreement, including its exhibits, is the entire
2 agreement between the Contractor and the SJVIA with respect to the subject matter of
3 this agreement, and it supersedes all previous negotiations, proposals, commitments,
4 writings, advertisements, publications, and understandings of any nature unless those
5 things are expressly included in this Agreement. If there is any inconsistency between
6 the terms of this Agreement without its exhibits and the terms of the exhibits, then the
7 inconsistency will be resolved by giving precedence first to the terms of this Agreement
8 without its exhibits, and then to the terms of the exhibits.

9 13.11 **No Third-Party Beneficiaries.** This Agreement does not and is not
10 intended to create any rights or obligations for any person or entity except for the
11 parties.

12 13.12 **Authorized Signature.** The Contractor represents and warrants to the
13 SJVIA that:

14 (A) The Contractor is duly authorized and empowered to sign and perform its
15 obligations under this Agreement.

16 (B) The individual signing this Agreement on behalf of the Contractor is duly
17 authorized to do so and his or her signature on this Agreement legally binds the
18 Contractor to the terms of this Agreement.

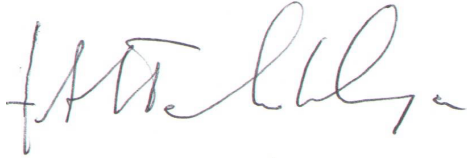
19 13.13 **Counterparts.** This Agreement may be signed in counterparts, each of
20 which is an original, and all of which together constitute this Agreement.

21 *[SIGNATURE PAGE FOLLOWS]*
22
23

1 The parties are signing this Agreement on the date stated in the introductory
2 clause.

3 TFG Partners, LLC

SAN JOAQUIN VALLEY INSURANCE
AUTHORITY

5
6 

7 _____
8 Auke van Scheltinga, Partner
9 Two Gateway Center, Suite 1350
10 603 Stanwix Street
11 Pittsburgh, PA 15222
12 (212) 769-9008 Cell

Pete Vander Poel, President of the
Board of Directors

13 Reviewed and recommended for
14 approval.

15
16
17 _____
18 SJVIA Manager

Exhibit A

SCOPE OF SERVICES

TFG Partners will review 100 percent of SJVIA's medical claims administered by Anthem Blue Cross ("Anthem") and Delta Dental ("Delta") (each an "Administrator" and together, "Administrators") under SJVIA's eight benefit plan designs ("100% Claims Audit"), as provided in this Exhibit A. This review will cover the period the 2020 and 2021 plan years up to the maximum allowable period under SJVIA's Administrative Service Agreements with Anthem and Delta.

TFG Partners will also perform a Medical Plan members' Eligibility Review, Operational Review, and Discount Analysis as provided in this Exhibit A.

DESCRIPTION OF TASKS

100% Claims Audit

The 100% Claims Audit consists of the following six tasks to be performed by TFG Partners.

Task 1. Audit Commencement & Data Gathering

This task consists of a series of activities. TFG Partners will arrange for all contractual Health Insurance Portability and Accountability Act ("HIPAA") business associate agreements and other confidentiality agreements to be executed to obtain the paid claims files for the audit period from Anthem and Delta. TFG Partners will obtain a copy of SJVIA's Administrative Services Agreements from SJVIA and review the documents within the context of the audit services and other contract compliance provisions.

TFG Partners will thoroughly review all SJVIA's medical and dental plan benefit provisions and work with SJVIA team members to define each plan element and group application, specifically reflecting SJVIA's unique plan design information.

Upon execution by TFG Partners of any required pre-audit documents (e.g., nondisclosure agreements from the Administrators), TFG Partners receives the paid claims file for the audit period from Anthem and Delta. TFG Partners requires from Anthem and Delta:

- All data elements needed for the audit in a single and consistent file format;
- Accurate documentation of the file format and data dictionary used.

Task 2. System Programming

Once task 1 is complete, TFG Partners will customize its system's program logic to include the plan elements specific for SJVIA. This custom logic will provide the basis for conducting the electronic audit and manual claims reviews identified in Task 3.

Task 3. Electronic Audit, Manual Claims Reviews and Claim Sample Selection

This task consists of a variety of electronic audits, manual reviews, and claim sample selection for both the Anthem as well as the Delta audits that involve both general or universal medical claim analysis logic and specific analysis unique to SJVIA's medical and dental health care claims administration.

The following reviews are included:

Review: Duplicate and Erroneous Claims

In the duplicate and erroneous claims review, TFG Partners will conduct a comprehensive electronic review of SJVIA's medical claims paid during the audit period to identify any actual duplicate, erroneous or inappropriate charges applied to overall claims utilization. TFG Partners will conduct three levels of electronic duplicate and erroneous payment reviews at both the individual claim summary and claim detail (line item) level. Level I will identify pure potential duplicate claims, using a match on specified data fields.

The final two levels incorporate additional data elements to identify complex duplicate claim exceptions (e.g., individual unbundled charges while a global fee applies) and a variety of other erroneous claim conditions.

Review: Other Party Liability (OPL)

A major component of the medical cost containment effort typically resides in the administration of the following programs:

- Coordination of Benefits (COB)
- Workers' Compensation Exclusion
- Automobile Liability Subrogation
- Medicare Coordination and Medicare End Stage Renal Disease

In the OPL review, TFG Partners will perform OPL consistency reviews and code logic, such as identification of other party coverage with coverage gaps, high probability Medicare covered claims, and presence of car accident related or workers compensation related codes in ER claims, all designed to identify erroneously paid other party liability claims. This review will list all exception claims that potentially should be paid by the other carriers, Medicare,

automobile carriers and workers' compensation and therefore should not have been covered and paid under the medical plan.

Review: Plan Benefit Compliance and Exclusions

In the plan benefit compliance and exclusions review, TFG Partners will electronically identify benefit payment errors made over the entire audit period. TFG Partners' system will electronically reprocesses 100 percent of the claims to identify payments for non-covered services, misapplied deductibles, co-payments, maximums, and payment levels.

Review: High Dollar Claims

In the High Dollar claims review, TFG Partners will identify all high dollar claims by diagnostic category. Additionally, TFG Partners will review the claim history of each SJVIA plan member with a high dollar claim, to review the total available cost for the treatment episode of which the high dollar claim is part. After identification of the high-cost claims and claimants, TFG Partners will confirm member eligibility, and check that all prior authorization criteria have been met.

With the information acquired on-site, TFG Partners will verify that the appropriate network or out-of-network pricing rates have been applied and will calculate the payment rate and check it against any contractual provisions. TFG Partners will review all procedure codes in relation to the diagnostic documentation for appropriateness (i.e., to determine whether procedures performed supported by the diagnostic codes) and check for unusual high medical supply charge outliers (e.g., pacemakers, prostheses).

TFG Partners will also review the diagnostic and procedure codes for potential other party liability and check if proper subrogation procedures have been implemented. The TFG Partners audit team will request information from the Administrators on OPL process status and total of dollars recovered for identified subrogation claims.

Review: Administrative Technical Correct Coding

In the administrative technical correct coding review, TFG Partners will assess all claims adjudicated in the audit period for technical processing and entry errors such as incorrect reversal of debits or credits, entry and transaction problems, claims processing system insufficiencies, manual processing errors or non-approved billing for administrative functions.

Review: Administrative Medical Correct Coding

In the administrative medical correct coding review, TFG Partners will assess all claims adjudicated in the audit period for compliance to medical correct coding practices such as

proper reductions of surgical procedures, application of global fees, repeat procedure billings and unbundling of procedure codes.

As part of task three and, as a result, of the initial 100 percent electronic audits and subsequent manual reviews of the identified exception categories described above, TFG Partners will select a claims sample for on-site or virtual off-site review. The sample and review process encompasses both the selection of sample claims that, based on the information available to TFG Partners, demonstrate potential as a payment exception, as well as the selection of sample claims for which there is insufficient claim file data available to TFG Partners to make a determination when it selects the sample. All sample claims require further investigation through review of Anthem and Delta's claim documentation (typically additional detail not on the claims tape such as case management notes or plan sponsor emails explaining exceptions or approving any deviations from the plan benefit design), or access to the member history file, which is done on-site by TFG Partners.

Review: Administrative : Dental Medical and Technical Correct Coding

For the dental audit, TFG Partners reviews dentally specific medical logic (e.g., extraction of same tooth twice), procedural frequency limits (e.g., root canals), bundling, and unbundling of procedures.

Task 4. Claims Sample Validation

TFG Partners will conduct an on-site or virtual off-site claim validation commensurate with the Administrative Services Only Agreement audit terms. In this process, TFG Partners will confirm adjudication exceptions and identify any deficiencies that support the findings of the electronic audits. The process consists of a number of steps: First Anthem and Delta will be presented with a sample of exception claims. TFG and each Administrator's audit team will then follow a formal resolution process to come to claim by claim conclusions: Both parties either agree that a claim is in error or is not in error. If no agreement can be reached it will be documented in the "Agree" to "Disagree" category. Claims in the latter category will be documented as such (see task 5 below). Subsequently in task 6 below, the claims will be presented for review and resolution to SJVIA, the plan sponsor responsible for benefit design and interpretation. This happens as part of the final closing activities (see task 6 below).

Upon completion of the validation review, TFG Partners will conduct individual exit meetings with Anthem and Delta and address any open issues as well as any questions that Anthem and Delta might have.

Task 5. Exception Analysis and Audit Report

Upon completion of the on-site validation process and operational review, and by utilizing all Anthem and Delta responses, TFG Partners will conduct a final exception analysis to develop a comprehensive written audit report, which includes an itemization of agreed upon payment exceptions, like and related claims to the sample claims by error category, and constructive process improvement recommendations.

Task 6. Final Recommendations and Closing Strategy Summary

This task is intended to assist SJVIA in the presentation of a Final Recommendations and Closing Summary to Anthem and Delta to ensure clear goals for closure are defined.

Goals for closure that may be defined in the Final Recommendations and Closing Summary may include, but are not limited to:

- Resolution of processing issues with Anthem and Delta, such as:
 - Benefit applications or interpretation not according to SJVIA's plan design or intent often requiring plan sponsor confirmation of true intent;
 - Anthem and Delta processing policies versus SJVIA's plan design and intent; and
 - Systemic processing problems
- Implementation of process improvements; and
- Recovery of findings agreed-upon by Anthem or Delta and related claims, or a settlement as deemed appropriate by both SJVIA and Anthem or Delta and under direction of SJVIA.

Once the goals for closure are defined, TFG Partners will:

- Develop a strategy to assist SJVIA in achieving its goals, both from a prevention, as well as recovery perspective;
- Create the documentation, required back-up data files and support to fulfill the strategy, including provision of preliminary lists of charges by category likely billed in error, and final lists of claims by category paid in error that, after consultation with SJVIA, can be used by Anthem and Delta for recovery; and
- Ensure that all expected corrective actions were taken by Anthem and Delta via post audit corrective action verification.

TFG Partners shall work with SJVIA and Anthem and Delta to develop a common understanding of the SJVIA's issues, and receipt of firm written commitments from Anthem or Delta that address specific goals. TFG Partners shall work with Anthem and Delta throughout the closing meeting (final meeting to close out the audit) until all exceptions and issues identified during the audit are appropriately resolved.

Eligibility Review

The electronic eligibility review consists of the following tasks to be performed by TFG Partners:

1. Collection of eligibility files or change files. TFG Partners will create a “negative” file with all non-eligible members to be excluded before a specific effective or after termination date by member;
2. 100% paid claims files review by TFG Partners, against the non-eligible file to detect any exception claims paid;
3. Provision by TFG Partners of “non-eligible members” list and claims paid before or after their eligibility period.

The non-eligible member list is for internal review by SJVIA and is intended to help SJVIA eliminate any false positives that TFG Partners cannot detect (such as dismissed employees re-instated after, e.g., union appeals). The eligibility review is contingent upon availability of eligibility data.

Operational Review

TFG Partners will perform an operational review to assess whether Anthem has the appropriate , industry standard processes and controls in place when paying claims:

- Operational Processes and Controls Assessment – Assesses the operational controls and administrative procedures used by Anthem to adjudicate claims. The review by TFG Partners includes an in-depth survey of the operational set-up (including, but not limited to, systems, security, appeals approach and timeliness, subrogation, customer service follow-up and timeliness, paper claims handing) and review of key issues in parallel with the 100% claim audit;
- Security and Fraud Waste and Abuse Review – TFG Partners will assess to what extent Anthem complies with HIPAA, Health Information Technology for Economic and Clinical Health Act (“HITECH”), and Patient Protection and Affordable Care Act (“ACA”) related privacy and security requirements, including review of their most recent SSAE-16 and SOC2 audit results, as well as review of Fraud, Waste and Abuse (FWA) controls.

Discount Analysis

TFG Partners will perform an assessment of discount levels for all claims during the audit period. This assessment will cover all in-network and out-of-network claims, as well as specialty drug claims, such as injectables and J-code discounts.

Exhibit B

AUDIT FEES

The fee to perform the medical claims audit portion of the 100% Claims Audit is \$48,000.00 (“Medical Claims Audit Fee”). The fee to perform the dental claims audit portion of the 100% Claims Audit is \$17,000.00 (“Dental Claims Audit Fee”). The fee will be invoiced to the SJVIA as follows:

- One third (1/3) of the Medical Claims Audit Fee and one third (1/3) of the Dental Claims Audit Fee upon execution of this Agreement, billed individually by audit;
- One third (1/3) of the Medical Claims Audit Fee upon the completion and written acceptance by the SJVIA Manager of the on-site or virtual off-site claim validation, as included in Task 4, and one third (1/3) of the Dental Claims Audit Fee upon delivery and written acceptance by the SJVIA Manager of the dental claims audit sample to Dental, as included in Task 3, billed individually by audit; and
- One third (1/3) of the Medical Claims Audit Fee and one third (1/3) of the Dental Claims Audit Fee upon delivery and written acceptance by the SJVIA Manager of the Final Recommendations and Closing Summary, as included in Task 6, billed individually by audit.

TRAVEL EXPENSES

TFG Partners is entitled to reimbursement from SJVIA only for documented travel expenses that are reasonably incurred and necessary for TFG Partners’ performance of the audits under this Agreement. Such reimbursements are subject to SJVIA’s policy concerning reimbursement of such expenses, as updated by SJVIA from time to time. TFG Partners represents that, under Anthem and Delta COVID-19 restrictions, travel expenses are not likely to be incurred.

ADMINISTRATOR-RELATED COSTS FOR OBTAINING CLAIMS DATA OR RESPONDING TO AUDIT RESULTS

If an Administrator (as defined in Exhibit A of this Agreement) charges a fee for claims data required for any audit under this Agreement, or for responding to audit results, TFG Partners shall inform the SJVIA Manager of the amount of the fee and provide a reasonable opportunity of at least three SJVIA business days for the SJVIA Manager to approve or object to the fee before TFG Partners incurs it. TFG Partners shall separately invoice the SJVIA for all such fees actually incurred by TFG Partners.

**BOARD OF DIRECTORS**

STEVE BRANDAU

NATHAN MAGSIG

BUDDY MENDES

LARRY MICARI

BRIAN PACHECO

AMY SHUKLIAN

PETE VANDER POEL

Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721

AGENDA DATE: February 18, 2022

ITEM NUMBER: Item 23

SUBJECT: Approve Revised 2022 Board Meeting Calendar (A)

REQUEST(S): That the Board approve the revised 2022 Board Meeting Calendar.

DESCRIPTION:

At the October 15, 2021 SJVIA Board meeting, the Board approved the 2022 Board meeting calendar.

The attached revised 2022 Board Meeting calendar reflects a change to the meeting location for meetings held at Tulare County. The location has been changed from the Board of Supervisors Chambers to the following:

Human Resources & Development Department
Innovation Conference Room
2500 W. Burrell Avenue
Visalia, CA 93291

FISCAL IMPACT/FINANCING:

None.

ADMINISTRATIVE SIGN-OFF:

A handwritten signature in dark ink, appearing to read "Hollis Magill", written over a horizontal line.

Hollis Magill
SJVIA Manager

A handwritten signature in dark ink, appearing to read "Lupe Garza", written over a horizontal line.

Lupe Garza
SJVIA Assistant Manager

Board of Directors Meetings 2022 SCHEDULE

<u>Date</u>	<u>Time</u>	<u>City</u>	<u>Location</u>
February 18, 2022 (Friday)	9:00am - 12:00pm	Fresno	Fresno County BOS Chambers
May 6, 2022 (Friday)	9:00am - 12:00pm	Visalia	Tulare County HR & D Innovation Conf. Rm.
July 22, 2022 (Friday)	9:00am - 12:00pm	Fresno	Fresno County BOS Chambers
August 26, 2022 (Friday)	9:00am - 12:00pm	Visalia	Tulare County HR & D Innovation Conf. Rm.
October 14, 2022 (Friday)	9:00am - 12:00pm	Fresno	Fresno County BOS Chambers
December 9, 2022 (Friday)	9:00am - 12:00pm	Visalia	Tulare County HR & D Innovation Conf. Rm.

LOCATIONS:

Fresno County Board of Supervisors Chambers

2281 Tulare Street, #301
Fresno, CA 93721

FCERA - Fresno County Employees' Retirement Association*

7772 N. Palm Avenue
Fresno, CA 93711

Tulare County Human Resources & Development (HR&D) Dept; Innovation Conference Rm.

2500 W. Burrel Avenue
Visalia, CA 93291

Tulare County Board of Supervisors Chambers*

Human Resources & Development Department; Innovation Conference Room
2500 W. Burrel Avenue
Visalia, CA 93291

TCERA - Tulare County Employee Retirement Association*

136 N. Akers Street
Visalia, CA 93291

*Alternate location as necessary