

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
July 27, 2023, 1:00 PM**

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the SJVIA Manager at 559-636-4900 or the Assistant SJVIA Manager at 559-600-1801. 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
4. Approval of Agenda (A)
5. 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.
6. Approval of Consent Agenda – Item Numbers 16-17

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.

7. Receive Update from Auditor-Treasurer on Cash Flows (I)
8. Receive the 2022 Audited Financial Statements (I)

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9. Receive Consultant's Medical, Dental, and Vision Experience Reports through May 2023 with Update on Projected Plan Experience Surplus Accumulation and Projections (I)
10. Adopt Budget for Fiscal Year 2023-2024 (A)
11. Receive Report on SJVIA/CMC Direct Contract and Anthem/CMC Contract and Ratify the SJVIA Manager's Selection to Apply the Anthem/CMC Contract to SJVIA, Retroactive to January 1, 2023 (A)
12. Receive Subcommittee Report and Recommendation and take action to select Plan Year 2024 Self-Funded Medical and Prescription Drug Plan Vendors (A)
13. Receive Consultant's Report on Plan Year 2024 Preliminary Renewal (I)
14. SJVIA Director Questions, Announcements, and Activity Reports (Gov. Code, § 54954.2, subd. (a)(2)) (I)
15. Adjournment

Consent Agenda

16. Approval of Minutes - Board Meeting of May 5, 2023 (A)
17. Approve and Authorize President to Execute SJVIA Agreement with TFG Partners, Updating the Term of the Agreement to Expire the Latter of When the Audit is Complete or December 31, 2023, Subject to the Approval of SJVIA Staff and Counsel (A)

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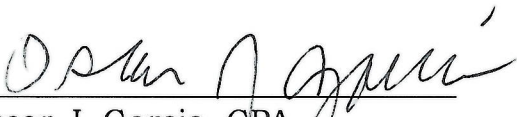
**Meeting Location:
County of Fresno
Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721
July 27, 2023 1:00PM**

AGENDA DATE: July 27, 2023
ITEM NUMBER: Item #7
SUBJECT: Receive Update from Auditor-Treasurer on Cash Flows (I)
REQUEST(S): That the Board receives this update on Cash Flows.

DESCRIPTION:
Informational item. Please see attached report.

FISCAL IMPACT/FINANCING:
None.

ADMINISTRATIVE SIGN-OFF:



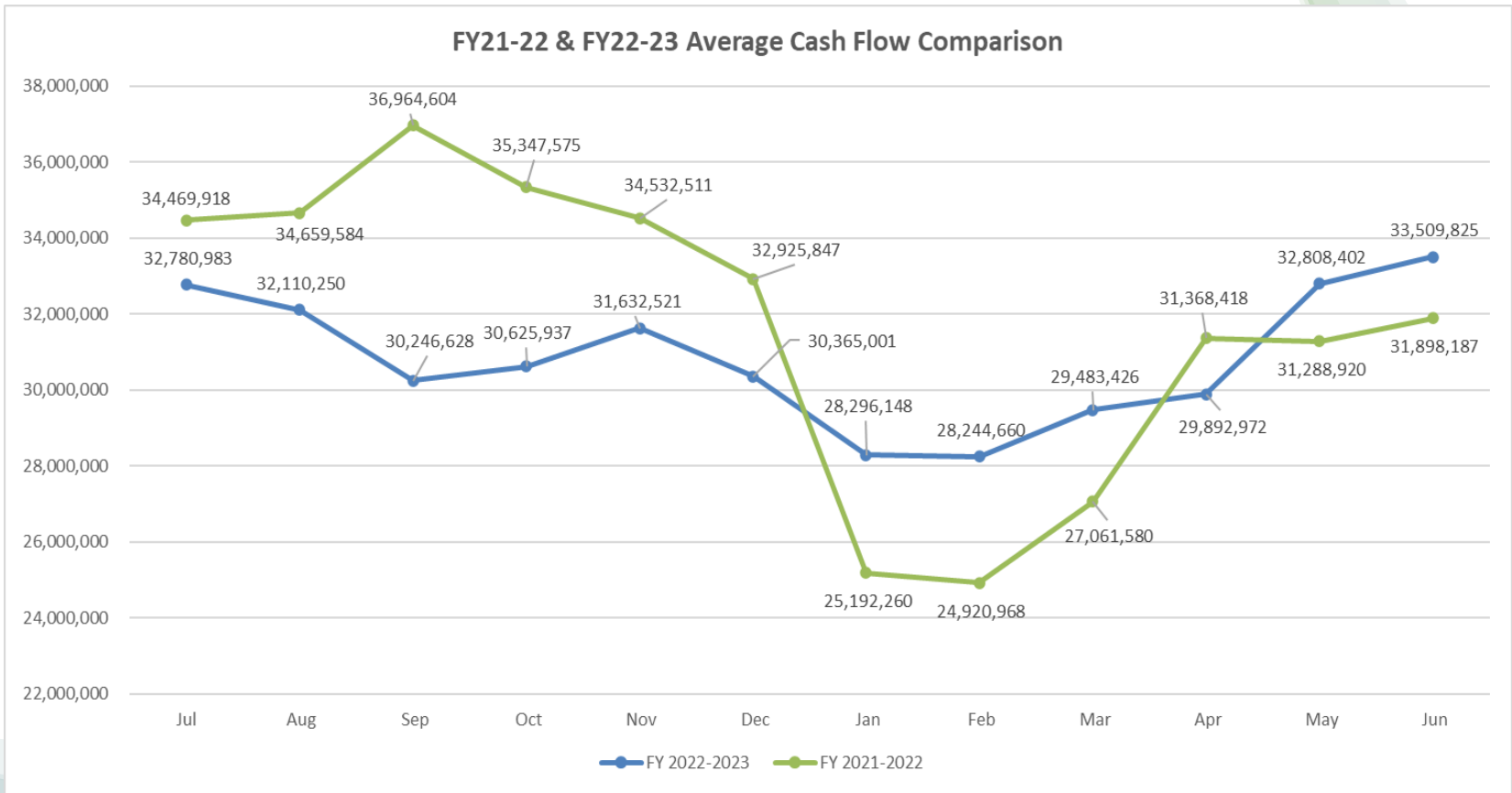
Oscar J. Garcia, CPA
SJVIA Auditor-Treasurer

A close-up photograph of a wooden pencil with a sharpened lead tip, resting diagonally across a document. The document features a line graph with a grid. The y-axis has numerical labels '50' and '100'. The x-axis has year labels '93' and '98'. The pencil is positioned over the graph, and the background is softly blurred.

SJVIA Cash Flow Update

Matthew Blanks

July 27, 2023



FY 22-23 Monthly Average

- \$30,833,063

FY 21-22 Monthly Average

- \$31,719,198

- FY 22-23 monthly average for cash was \$886,135 lower than the previous fiscal year.

SJVIA Reserves, Liabilities & Cash Balance	
Cash Balance as of 6/30/2023	\$ 34,706,330
Minus: IBNR	<u>10,363,820</u>
Excess/(Deficit) of Cash	24,342,510
Minus: 3-Month Stabilization	<u>20,741,256</u>
Excess/(Deficit) of Cash	3,601,254
Minus: Gallagher Settlement	<u>7,000,000</u>
Total Excess/(Deficit) of Cash	\$ (3,398,746)

- This table depicts whether our current cash balance is sufficient to cover our projected Incurred But Not Reported (IBNR), maintain our 3-month stabilization target, and settlement set aside.
- At fiscal year end, there was enough cash on hand to meet the IBNR and 3-month stabilization target.



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Board of Supervisors Chambers
2281 Tulare Street, #301
Fresno, CA 93721
July 27, 2023 1:00PM**

AGENDA DATE: July 27, 2023
ITEM NUMBER: Item #8
SUBJECT: Receive the 2022 Audited Financial Statements (I)
REQUEST(S): That the Board receives the 2021-2022 Audited Financial Statements.

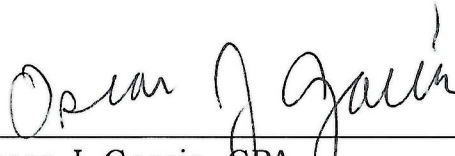
DESCRIPTION:

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, 2022**

**SAN JOAQUIN VALLEY INSURANCE AUTHORITY
FRESNO, CALIFORNIA**

JUNE 30, 2022

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INDEPENDENT AUDITOR'S REPORT

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

Report on the Audit of the Financial Statements

Opinions

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, 2022, and the related notes to the financial statements, which collectively comprise the Authority's basic financial statements as listed in the table of contents.

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the Authority, as of June 30, 2022, 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.

Basis for Opinions

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. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Authority and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for 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.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Authority's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

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

tel 559.299.9540
fax 559.299.2344

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinions. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit 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, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Authority's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

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 20-21 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 June 26, 2023, 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.

Price Pange & Company

Clovis, California
June 26, 2023

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BASIC FINANCIAL STATEMENTS

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
STATEMENT OF NET POSITION
JUNE 30, 2022

ASSETS

Current assets:

Cash and cash equivalents	\$ 2,902,236
Intergovernmental receivables	2,056,296
Investment income receivable	99,988
Prepaid expenses	<u>8,506</u>

Total current assets 5,067,026

Noncurrent assets:

Investments	<u>30,749,572</u>
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Total noncurrent assets 30,749,572

Total assets 35,816,598

LIABILITIES

Current liabilities:

Accounts payable	3,626,179
Intergovernmental payables	30,749
Unearned member contributions	4,925,154
Unpaid claims and claims adjustment expenses	<u>8,855,820</u>

Total current liabilities 17,437,902

Noncurrent liabilities:

Intergovernmental payables	<u>884,432</u>
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Total noncurrent liabilities 884,432

Total liabilities 18,322,334

NET POSITION

Unrestricted:

Stabilization reserve	18,404,396
Unrestricted	<u>(910,132)</u>

Total net position \$ 17,494,264

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

**SAN JOAQUIN VALLEY INSURANCE AUTHORITY
STATEMENT OF REVENUES, EXPENSES
AND CHANGES IN NET POSITION
FOR THE YEAR ENDED JUNE 30, 2022**

Operating revenues:	
Member contributions	\$ 89,462,234
Legal settlement revenue	<u>7,000,000</u>
Total operating revenues	<u>96,462,234</u>
Operating expenses:	
Claims and claims adjustment expenses	85,379,985
Administrative expenses	<u>5,551,133</u>
Total operating expenses	<u>90,931,118</u>
Operating income (loss)	<u>5,531,116</u>
Nonoperating revenues (expenses):	
Interest revenue	391,029
Interest expense	<u>(56,127)</u>
Total nonoperating revenues (expenses)	<u>334,902</u>
Change in net position	5,866,018
Net position - beginning	<u>11,628,246</u>
Net position - ending	<u><u>\$ 17,494,264</u></u>

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

**SAN JOAQUIN VALLEY INSURANCE AUTHORITY
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED JUNE 30, 2022**

CASH FLOWS FROM OPERATING ACTIVITIES	
Cash received from members	\$ 124,079,775
Cash received from reinsurance and refunds	2,021,655
Cash received from legal settlement	7,000,000
Cash paid to vendors	(2,599,696)
Cash paid for claims	<u>(119,801,560)</u>
Net cash provided by (used for) operating activities	<u>10,700,174</u>
CASH FLOWS FROM INVESTING ACTIVITIES	
Purchase of investments	<u>(29,041)</u>
Net cash provided by (used for) investing activities	<u>(29,041)</u>
CASH FLOWS FROM NONCAPITAL FINANCING ACTIVITIES	
Cash paid for intergovernmental loan payable	(9,000,000)
Cash paid for intergovernmental loan and interest payable	<u>(729,890)</u>
Net cash provided by (used for) noncapital financing activities	<u>(9,729,890)</u>
Net increase (decrease) in cash and cash equivalents	941,243
Cash and cash equivalents - beginning	<u>1,960,993</u>
Cash and cash equivalents - ending	<u>\$ 2,902,236</u>
Supplemental disclosure of cash flow information:	
Cash paid for interest	<u>\$ 56,127</u>
Reconciliation of operating income (loss) to net cash provided by (used for) operating activities:	
Operating income (loss)	<u>\$ 5,531,116</u>
Adjustments to reconcile operating income (loss) to net cash provided by (used for) operating activities:	
(Increase) decrease in due from other governmental units	2,118,483
(Increase) decrease in other receivables	99,138
(Increase) decrease in prepaid expenses	(762)
Increase (decrease) in accounts payable	1,433,526
Increase (decrease) in due to other governmental units	(56,127)
Increase (decrease) in unpaid claims and claims adjustment expenses	<u>1,574,800</u>
Total adjustments	<u>5,169,058</u>
Net cash provided by (used for) operating activities	<u>\$ 10,700,174</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
NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2022**

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.

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. As of June 30, 2022, membership in the Authority consists of the County of Fresno and the County of Tulare, its founding entities.

**SAN JOAQUIN VALLEY INSURANCE AUTHORITY
NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2022**

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

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.

D. Assets, Liabilities and Net Position

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.

Investments

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

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.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2022

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

D. Assets, Liabilities and Net Position (Continued)

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. There were no deposit receivables for the fiscal year 2022.

Member Contribution

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.

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 \$3,626,179 as of June 30, 2022, 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.

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, 2022.

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.

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2022

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

D. Assets, Liabilities and Net Position (Continued)

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 2022 was \$1,401,126, and the amounts recovered from reinsurers during fiscal year 2022 was \$620,529.

Intergovernmental Loans and Interest Payable

As of June 30, 2022, 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. Both loans with interest were repaid by December 30, 2021.

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".

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
NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2022**

NOTE 2 – CASH AND CASH EQUIVALENTS

A. Summary of Deposits

Cash and cash equivalents as of June 30, 2022, are classified in the accompanying financial statements as follows:

Statement of net position:

Cash and cash equivalents	\$ <u>2,902,236</u>
Total	\$ <u>2,902,236</u>

Cash and cash equivalents as of June 30, 2022, consist of the following:

Deposits with financial institutions	\$ <u>2,902,236</u>
Total cash and cash equivalents	\$ <u>2,902,236</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, 2022, 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 \$2,056,296 as of June 30, 2022, 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, 2022, 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
NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2022**

NOTE 4 – INVESTMENTS

Investments authorized by the Authority's Investment Policy at June 30, 2022, consist of the following:

External Investment Pool – Fresno County

Treasury Investment Pool	\$ 12,184,836
Stabilization Reserve	<u>18,564,736</u>
 Total investments	 <u>\$ 30,749,572</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>2022</u>	<u>2021</u>
Unpaid claims and claim adjustment expenses at beginning of year	\$ 7,281,020	\$ 7,081,313
Incurred claims and claim adjustment expenses:		
Provision for insured events of current year	<u>85,379,985</u>	<u>77,558,202</u>
Total incurred claims and claim adjustment expense	<u>85,379,985</u>	<u>77,558,202</u>
Payments:		
Claims and claim adjustment expenses attributable to insured events of current year	76,524,165	70,277,182
Claims and claim adjustment expenses attributable to insured events of prior years	<u>7,281,020</u>	<u>7,081,313</u>
Total payments	<u>83,805,185</u>	<u>77,358,495</u>
Total unpaid claims and claim adjustment expenses at ending of year	<u>\$ 8,855,820</u>	<u>\$ 7,281,020</u>

**SAN JOAQUIN VALLEY INSURANCE AUTHORITY
NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2022**

NOTE 6 – LONG-TERM LIABILITIES

Long-term liability activity for the year ended June 30, 2022 were as follows:

	Beginning Balance	Additions	Reductions	Ending Balance
Interest Payable	\$ 730,820	\$ 56,127	\$ (786,947)	\$ -
Loans Payable	9,000,000	-	(9,000,000)	-
Intergovernmental Payables	884,432	-	-	884,432
 Total	 <u>\$ 10,615,252</u>	 <u>\$ 56,127</u>	 <u>\$ (9,786,947)</u>	 <u>\$ 884,432</u>

The Authority obtained operating loans totaling \$5,000,000 from the County of Fresno and \$4,000,000 from the County of Tulare. These were repaid by December 30, 2021, with each accruing interest at their County's respective treasury pool interest rates. As of December 31, 2021, the interest rates were 1.281% for County of Fresno and 0.93% for 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.

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
NOTES TO THE BASIC FINANCIAL STATEMENTS
JUNE 30, 2022**

NOTE 8 – 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, 2022, 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, 2022.

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 9 – SUBSEQUENT EVENTS

Management has evaluated and concluded that there are no subsequent events that have occurred from June 30, 2022 through the date the financials were available to be issued at June 26, 2023, that would require disclosure or adjustment.

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REQUIRED SUPPLEMENTARY INFORMATION

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
CLAIMS DEVELOPMENT INFORMATION
JUNE 30, 2022

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 nine fiscal years. 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
CLAIMS DEVELOPMENT INFORMATION
JUNE 30, 2022**

	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
(1) Required contribution and investment revenue:										
Earned	\$ 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	\$ 90,202,266
Ceded	<u>1,911,418</u>	<u>1,940,663</u>	<u>2,244,758</u>	<u>2,761,514</u>	<u>2,235,292</u>	<u>1,881,130</u>	<u>1,263,754</u>	<u>1,970,531</u>	<u>1,845,070</u>	<u>1,401,126</u>
Net earned	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	88,801,140
(2) Unallocated expenses	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	5,551,133
(3) Estimated claims and expenses, end of fiscal year:										
Incurred	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	86,000,514
Ceded	<u>1,555,632</u>	<u>1,362,659</u>	<u>1,302,386</u>	<u>198,626</u>	<u>323,314</u>	<u>99,361</u>	<u>554,547</u>	<u>454,775</u>	<u>692,752</u>	<u>620,529</u>
Net incurred	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	85,379,985
(4) Net paid (cumulative) as of:										
End of fiscal year	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	78,463,365
One year later	63,725,119	77,893,672	81,850,351	100,151,412	92,775,406	65,559,526	72,139,822	71,812,035	72,847,735	-
Two years later	63,726,540	77,893,672	81,850,351	100,151,412	92,775,406	65,559,526	72,139,822	71,812,035	-	-
Three years later	63,726,540	77,893,672	81,850,351	100,151,412	92,775,406	65,559,526	72,139,822	-	-	-
Four years later	63,726,540	77,893,672	81,850,351	100,151,412	92,775,406	65,559,526	-	-	-	-
Five years later	63,726,540	77,893,672	81,850,351	100,151,412	92,775,406	-	-	-	-	-
Six years later	63,726,540	77,893,672	81,850,351	100,151,412	-	-	-	-	-	-
Seven years later	63,726,540	77,893,672	81,850,351	-	-	-	-	-	-	-
Eight years later	63,726,540	77,893,672	-	-	-	-	-	-	-	-
Nine years later	63,726,540	-	-	-	-	-	-	-	-	-
(5) Reestimated ceded claims and expenses	1,555,632	1,362,659	1,302,386	198,626	323,314	99,361	554,547	454,775	692,752	620,529
(6) Reestimated net incurred claims and expenses:										
End of fiscal year	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	85,379,985
One year later	63,726,540	74,523,532	85,195,058	111,220,547	98,611,508	68,702,819	69,869,697	72,398,701	77,558,202	-
Two years later	63,726,540	74,523,532	85,195,058	111,220,547	98,611,508	68,702,819	69,869,697	72,398,701	-	-
Three years later	63,726,540	74,523,532	85,195,058	111,220,547	98,611,508	68,702,819	69,869,697	-	-	-
Four years later	63,726,540	74,523,532	85,195,058	111,220,547	98,611,508	68,702,819	-	-	-	-
Five years later	63,726,540	74,523,532	85,195,058	111,220,547	98,611,508	-	-	-	-	-
Six years later	63,726,540	74,523,532	85,195,058	111,220,547	-	-	-	-	-	-
Seven years later	63,726,540	74,523,532	85,195,058	-	-	-	-	-	-	-
Eight years later	63,726,540	74,523,532	-	-	-	-	-	-	-	-
Nine years later	63,726,540	-	-	-	-	-	-	-	-	-
(7) Increase (decrease) in estimated net incurred losses and expenses from end of fiscal year	<u>\$ (1,913,669)</u>	<u>\$ (2,809,409)</u>	<u>\$ (1,913,669)</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

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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, 2022, and the related notes to the financial statements, which collectively comprise the Authority's basic financial statements, and have issued our report thereon dated June 26, 2023.

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.

Our consideration of internal control was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. However, as described in the accompanying schedule of findings and questioned costs, we identified certain deficiencies in internal control that we consider to be material weaknesses and significant deficiencies.

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 entity's financial statements will not be prevented, or detected and corrected, on a timely basis. We consider the deficiency described in the accompanying schedule of findings and questioned costs as item 2022-01 to be a material weakness.

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. We consider the deficiency described in the accompanying schedule of findings and questioned costs as item 2022-02 to be a significant deficiency.

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

tel 559.299.9540
fax 559.299.2344

Report on 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*.

Authority's Responses to Findings

Government Auditing Standards requires the auditor to perform limited procedures on the Authority's response to the findings identified in our audit and described in the accompanying schedule of findings and questioned costs. The Authority's response was not subjected to the other auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the response.

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.

Price Pange & Company

Clovis, California
June 26, 2023

FINDINGS AND QUESTIONED COSTS

**SAN JOAQUIN VALLEY INSURANCE AUTHORITY
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
FOR THE YEAR ENDED JUNE 30, 2022**

SECTION I – SUMMARY OF AUDITOR'S RESULTS

Financial Statements

Type of auditor's report issued	<u>Unmodified</u>	
Internal control over financial reporting:		
Material weaknesses identified?	<u> X </u> yes	<u> </u>
Significant deficiencies identified that are not considered to be material weaknesses?	<u> X </u> yes	<u> </u>
Noncompliance material to financial statement noted?	<u> </u> yes	<u> X </u> no

SECTION II – FINANCIAL STATEMENT FINDINGS

Finding 2022-01 – Accounts Receivable and Revenues Recognition (Material Weakness)

Criteria: A strong system of internal controls and management review requires that general ledger account balances be properly reconciled to adequate supporting documentation during the year-end financial close process in order to accurately and completely close the current year general ledger in a timely matter. Management is responsible for maintaining its accounting records in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Condition: During the audit of the Authority's financial statements, we identified material misstatements related to the accuracy and completeness of the Authority's receivables and claims revenues.

Cause: The accounting department of the County of Fresno had a significant turnover of experienced staff during the fiscal year ended June 30, 2022. Accordingly, the year-end closing procedure was not followed correctly.

Effect: The accounts receivable and claims revenues noted above were initially misstated, which required a journal entry to be posted subsequent to receiving the Authority's final trial balance.

Recommendation: We recommend the Authority review the receivable balance and claims revenue balance next year to ensure they are appropriately supported and recorded as part of the year-end close. In addition, we recommend the Authority to initiate the training of employees regarding the end-year closing procedures to improve the accuracy of receivables and claims revenues for next year.

Management's Response: See Corrective Action Plan.

**SAN JOAQUIN VALLEY INSURANCE AUTHORITY
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
FOR THE YEAR ENDED JUNE 30, 2022
(Continued)**

SECTION II – FINANCIAL STATEMENT FINDINGS (Continued)

Finding 2022-02 – Bank Reconciliation (Significant Deficiency)

Criteria: A strong system of internal controls and management review requires that general ledger account balances be properly reconciled to adequate supporting documentation during the year-end financial close process in order to accurately and completely close the current year general ledger in a timely manner. Management is responsible for maintaining its accounting records in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Condition: Bank reconciliations were not prepared and reviewed in a timely manner. Bank statements accumulated for several months before they were reconciled to the appropriate general ledger accounts.

Cause: The accounting department of the County of Fresno had a significant turnover of experienced staff during the fiscal year ended June 30, 2022. Accordingly, the bank reconciliation procedure was not followed correctly or timely.

Effect: Without a timely preparation of the bank reconciliations and a review by management, errors or fraud may not be recognized and resolved in a timely manner.

Recommendation: We recommend bank reconciliations are prepared and reviewed monthly as quickly as possible, but no later than 30 days after month-end and recommend they are reviewed by management on regular basis.

Management's Response: See Corrective Action Plan.

**SAN JOAQUIN VALLEY INSURANCE AUTHORITY
SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS
FOR THE YEAR ENDED JUNE 30, 2022**

FINANCIAL STATEMENT FINDINGS

None reported.



County of Fresno

Oscar J. Garcia, CPA
Auditor-Controller/Treasurer-Tax Collector

**SAN JOAQUIN VALLEY INSURANCE AUTHORITY
CORRECTIVE ACTION PLAN
YEAR ENDED JUNE 30, 2022**

Finding Number	Planned Corrective Action	Anticipated Completion Date	Responsible Contact Person
2022-01	SJVIA staff agrees with the finding. We will review, and ensure all year-end balances are supported and accurately recorded before completing the trial balance. Additionally, management will ensure staff assigned to SJVIA tasks, are properly trained and understand all applicable year-end closing procedures.	October 30, 2023	Angelica Arellano, Accounting & Financial Manager
2022-02	SJVIA staff agrees with the finding and will ensure that bank reconciliations are prepared and reviewed within 30 days after month-end. This will ensure all transactions are properly recorded.	June 30, 2023	Angelica Arellano, Accounting & Financial Manager

Rochelle M. Garcia

Name: Rochelle M. Garcia
Title: Accounting & Financials Division Chief

E. Garcia

Name: Enedina Garcia
Title: Deputy Auditor-Controller



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: July 27, 2023

ITEM NUMBER: Item 9

SUBJECT: Receive Consultant's Medical, Dental, and Vision Experience Reports through May 2023 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 reports through May 2023 and update on projected plan experience accumulation.

DESCRIPTION:

The Consultant's report shows that on a total cost basis from January through May 2023, the self-insured medical premium of \$36,406,985 exceeded the total cost of \$31,616,519 for an accumulation of \$4,790,466, or an 86.8% loss ratio.

Please note that claims incurred from January 1, 2023 through May 31, 2023 at Community Medical Center (CMC) are being held by Anthem. Keenan has estimated the paid claims and current discounts as shown in the Consultant's Report (Attachment 1).

For the self-insured dental, the report shows that on a total cost basis, the dental premium of \$2,045,656 exceeded total cost of \$1,811,764 for an accumulation of \$233,892 or an 88.57% loss ratio.

The vision plan remains fully insured and has an accumulation of \$25,650. Under the fully insured arrangement all deficit or surplus positions stay with the carrier.

Keenan has projected a \$6,513,479 accumulation for the 2023 plan year. The accumulation is built from premium exceeding plan costs, built-in margin on the Kaiser plan, prescription drug rebates, and other sources. After the first

AGENDA: San Joaquin Valley Insurance Authority

DATE: July 27, 2023

five months of 2023, the position is \$1,158,618, 17.8% of the projected annual total.

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

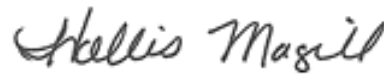
FISCAL IMPACT/FINANCING:

The 2023 plan year experience developed a \$4,790,466 medical surplus and a \$233,893 dental surplus for a total self-funded surplus of \$5,024,358. A prescription drug rebate in the amount of \$532,281 has been received. The Kaiser reserve of \$165,306 and the Kaiser EPO parity reserve of \$821,715, brings the collective total reserve accumulation to a surplus of \$4,299,950 for the first five months of 2023 (note: total includes estimated CMC held claims deduction). This is 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:



Lupe Garza
SJVIA Manager



Hollis Magill
SJVIA Assistant Manager

July 27, 2023

SJVIA Board Meeting: Consultant's Report 2023 Plan Experience (Medical, Dental, and Vision) through May 2023

The following pages provide a summary of the plan experience from January 1 through May 31, 2023 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).

Please note that claims incurred from January 1, 2023 through May 31, 2023 at Community Medical Center (CMC) are being held by Anthem and have not been paid. These claims will be paid once the SJVIA direct network contract with CMC has been implemented or possibly a network discount agreement has been reached between Anthem and CMC. For purposes of this report, Keenan has estimated the paid claims and current discounts. Please see the following chart:

CMC Billed Charge Adjustment	5 Month Total	Monthly Avg
CMC Billed Charges (01.01 - 06.02)	\$ 6,556,726	
Anthem Network Discount Paid	65.8%	
Claims Estimate	\$ 2,243,712	\$ 448,742
95% Fresno County	\$ 2,131,525	\$ 426,305
05% Tulare County	\$ 112,186	\$ 22,437

The monthly average paid claims (\$448,742) will be added for January through May; these amounts will be removed once actual claims are processed.

The SJVIA self-funded plans show a net surplus position of \$2,780,648 through May 2023. The County of Fresno has a \$3,258,545 surplus position and the County of Tulare has a (\$477,897) deficit position prior to adjustments for the Kaiser margin and parity, prescription drug rebates, and other adjustments.

Accumulation	COF	COT	Total
Medical	\$ 5,206,396	\$ (415,931)	\$ 4,790,465
CMC Claims	\$ (2,131,525)	\$ (112,185)	\$ (2,243,710)
Net Medical	\$ 3,074,871	\$ (528,116)	\$ 2,546,755
Dental	\$ 183,674	\$ 50,219	\$ 233,893
Total	\$ 3,258,545	\$ (477,897)	\$ 2,780,648
Vision (Insure)	\$ 36,474	\$ (10,824)	\$ 25,650
Loss Ratio			
Medical	87.0%	104.1%	93.0%
Dental	87.1%	92.0%	88.6%
Vision	84.0%	112.1%	91.9%

The County of Tulare reduced its margin to 0.0% for 2022 and 2023. The County of Fresno has maintained a 1.5% for 2022 and 2023. These levels will be reconsidered for the 2024 renewal.

The Anthem self-funded medical plans show a net accumulated surplus position of \$2,546,755 for a 93.0% total cost loss ratio.

The Delta Dental self-funded dental plan shows an accumulated surplus position of \$233,892 for an 88.6% total cost loss ratio.

The vision plan remains fully insured and shows an accumulated position of \$25,650 for a 91.9% total cost loss ratio. Under the fully insured arrangement all deficit or surplus positions remain with the carrier. SJVIA may want to consider going to a self-funded arrangement for 2024.

Fresno County continues its cross-subsidy strategy between the EPO, PPO, and High Deductible Health Plans (HDHP). Additionally, Fresno County has an EPO/Kaiser parity strategy setting the EPO and Kaiser rates equivalent.

The County of Tulare had greater than expected claim costs in 2022 driven by large claims. For the first five months of 2023, Tulare County's claim run has softened to an accumulated medical deficit position of (\$528,116).

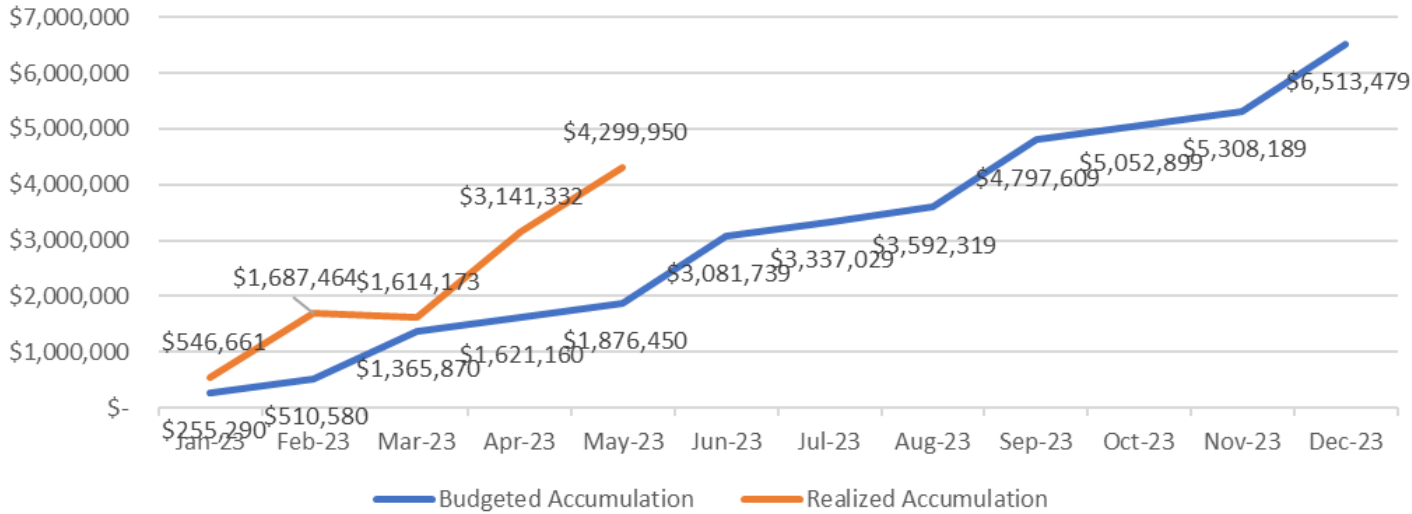
Keenan projects prescription drug rebates of \$3,450,000 for 2023. A rebate in the amount of \$532,281 was received and posted in April 2023.

For 2023, Fresno County budgeted the Kaiser margin and EPO Parity margin at \$2,197,502. Over the first five months, the SJVIA has realized \$987,021 (44.9% of the annual target).

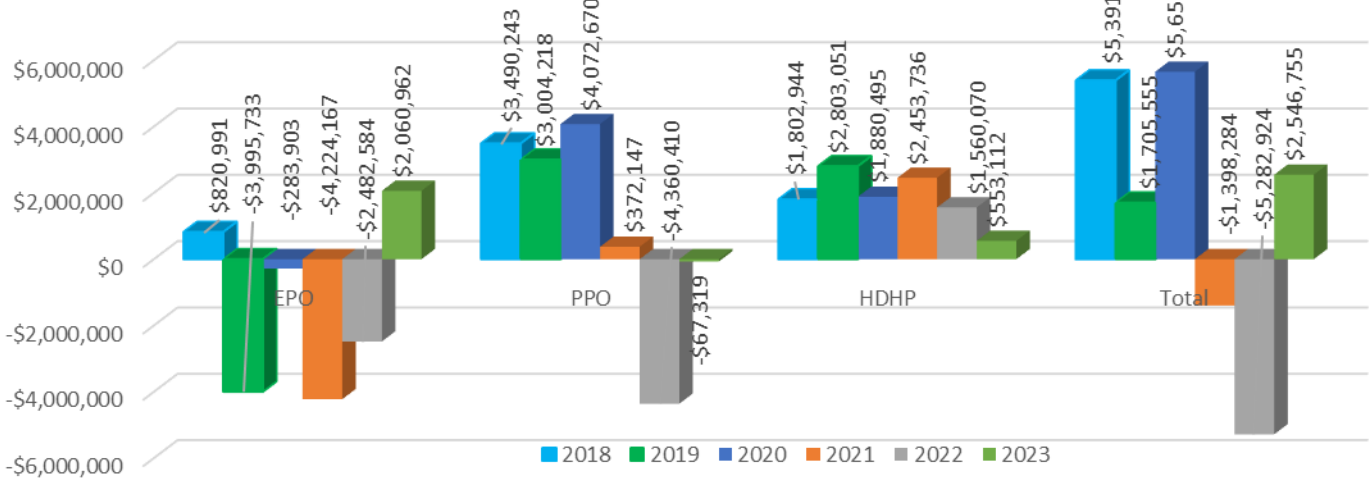
Over the first five months of 2023, the SJVIA has accumulated \$4,299,950 in margin (66.0% of the \$6,513,479 annual budget), well ahead of the 41.7% that was projected.

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

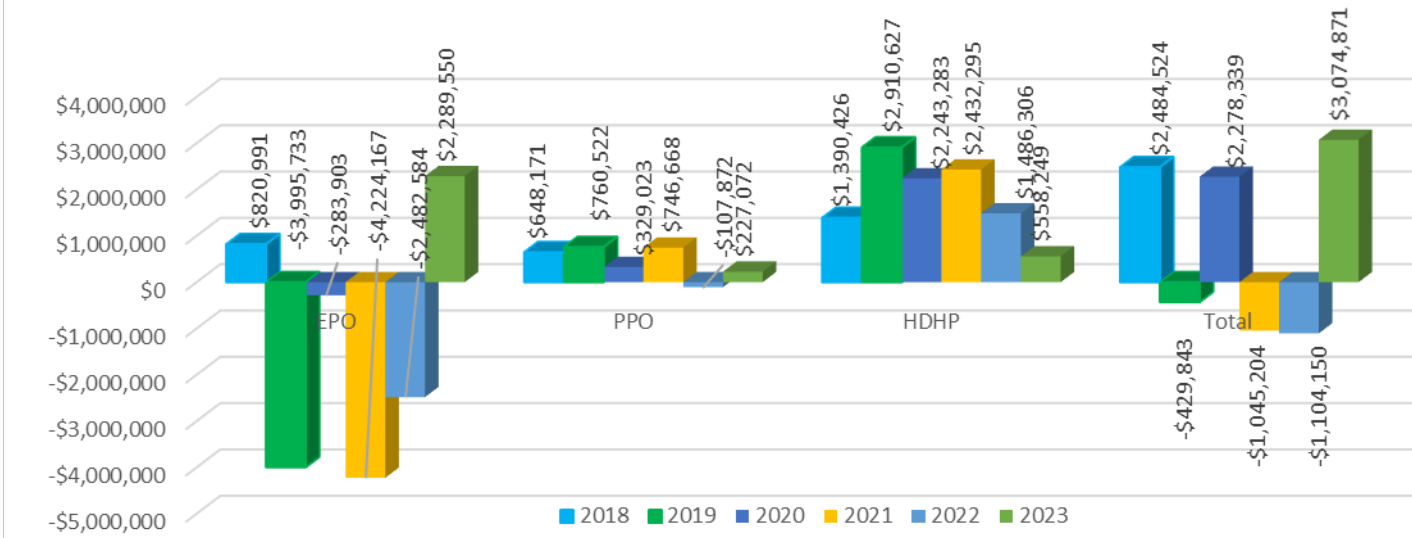
Accumulation Comparison



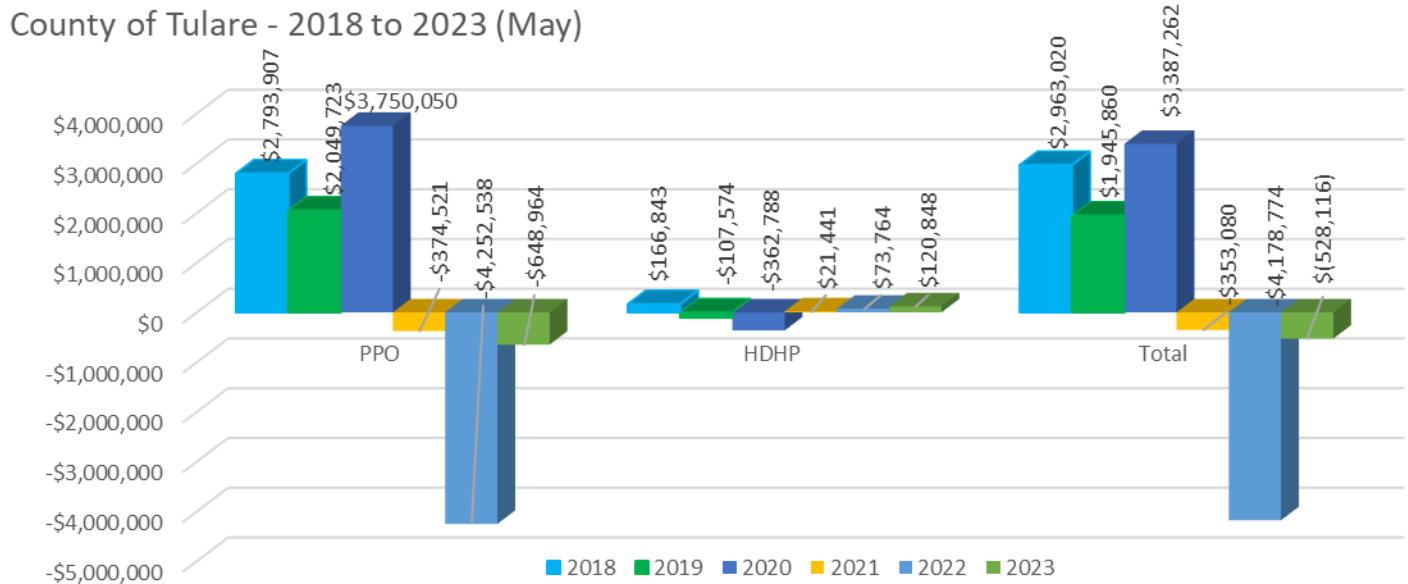
SJVIA - 2018 to 2023 (May)

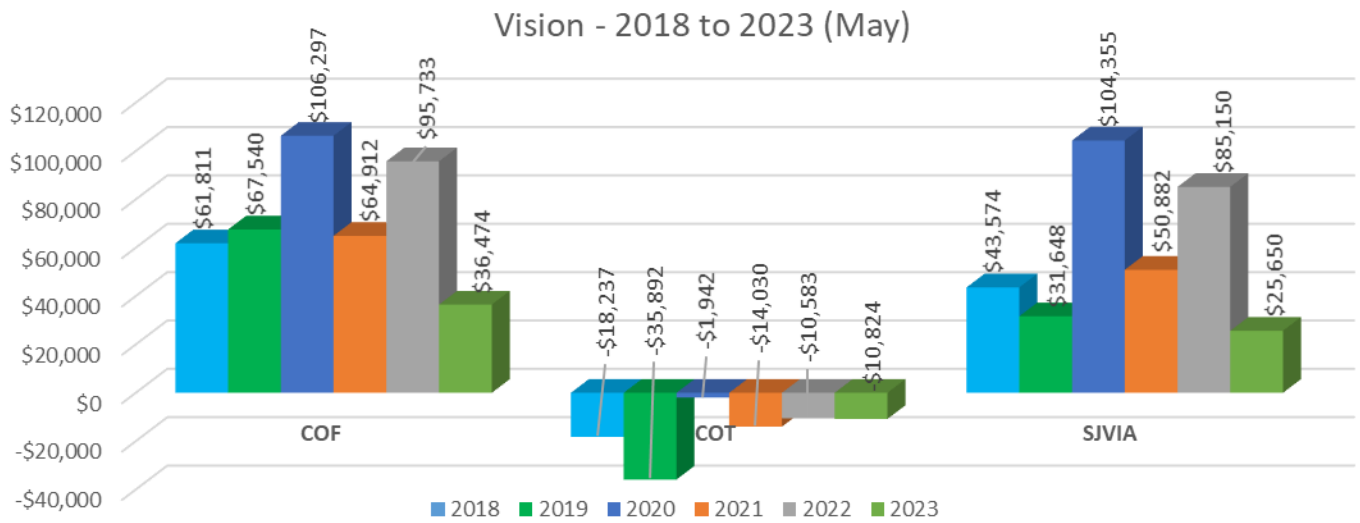
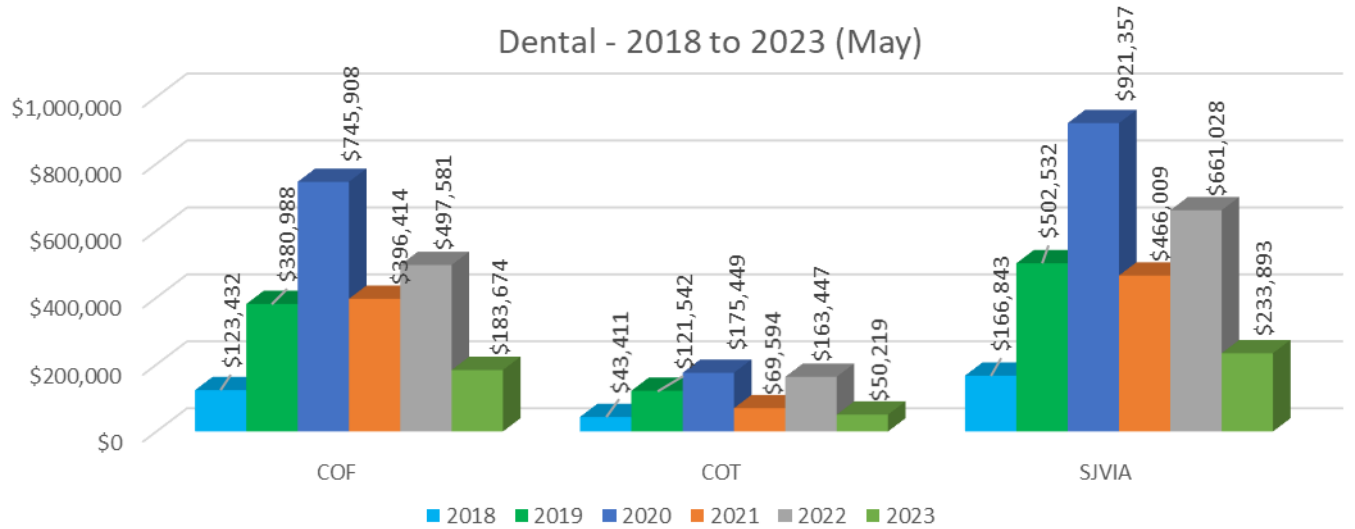


County of Fresno - 2018 to 2023 (May)



County of Tulare - 2018 to 2023 (May)





In the Budget vs Calculated Accumulation Report, Keenan reported a recovery of ARPA funds for Fresno County of \$2,426,734. This was posted for December 2022, in the February 2023 Experience Report. Since then, Keenan has learned that the funds have not yet been received; however the funds are expected to post in the near future. Therefore, Keenan has removed the December 2022 entry, thus restating the accumulated position from a surplus position of \$1,335,591 to a deficit position of (\$1,091,143).

Budget vs. Calculated Accumulation													
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	\$ -	\$ -	\$ 633,828	\$ -	\$ -	\$ -	\$ 2,725,566
Other	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2021 Calculated Accumulation	\$ 1,691,771	\$ 1,598,807	\$ 551,526	\$ (247,875)	\$ 730,647	\$ 551,466	\$ 269,821	\$ 16,090	\$ 608,289	\$ (866,963)	\$ 572,276	\$ (424,392)	\$ 5,051,462
2022	January	February	March	April	May	June	July	August	September	October	November	December	Total
Budget													
Plan Experience (Medical)	\$ 62,242	\$ 62,242	\$ 62,242	\$ 62,242	\$ 62,242	\$ 62,242	\$ 62,242	\$ 62,242	\$ 62,242	\$ 62,242	\$ 62,242	\$ 62,242	\$ 746,903
Plan Experience (Dental)	\$ 5,584	\$ 5,584	\$ 5,584	\$ 5,584	\$ 5,584	\$ 5,584	\$ 5,584	\$ 5,584	\$ 5,584	\$ 5,584	\$ 5,584	\$ 5,584	\$ 67,005
Kaiser Accumulation	\$ 38,565	\$ 38,565	\$ 38,565	\$ 38,565	\$ 38,565	\$ 38,565	\$ 38,565	\$ 38,565	\$ 38,565	\$ 38,565	\$ 38,565	\$ 38,565	\$ 462,781
Kaiser EPO Parity Accumulation	\$ 38,249	\$ 38,249	\$ 38,249	\$ 38,249	\$ 38,249	\$ 38,249	\$ 38,249	\$ 38,249	\$ 38,249	\$ 38,249	\$ 38,249	\$ 38,249	\$ 458,983
Prescription Drug Rebates	\$ -	\$ -	\$ 600,000	\$ -	\$ -	\$ 600,000	\$ -	\$ -	\$ 600,000	\$ -	\$ -	\$ -	\$ 2,400,000
2022 Budgeted Accumulation	\$ 144,639	\$ 144,639	\$ 744,639	\$ 144,639	\$ 144,639	\$ 744,639	\$ 144,639	\$ 144,639	\$ 744,639	\$ 144,639	\$ 144,639	\$ 744,639	\$ 4,135,672
Calculated													
Plan Experience (Medical)	\$ 416,646	\$ (707,755)	\$ 334,315	\$ (579,163)	\$ (111,439)	\$ (76,438)	\$ (125,469)	\$ (2,224,386)	\$ 257,541	\$ (781,002)	\$ (907,033)	\$ (778,741)	\$ (5,282,924)
Plan Experience (Dental)	\$ 115,834	\$ 64,486	\$ (58,680)	\$ 46,312	\$ 40,850	\$ 13,054	\$ 107,262	\$ 76,505	\$ 23,023	\$ 82,402	\$ 88,343	\$ 61,637	\$ 661,028
Kaiser Accumulation	\$ 34,185	\$ 33,794	\$ 33,676	\$ 33,547	\$ 33,454	\$ 33,279	\$ 33,080	\$ 32,987	\$ 33,071	\$ 32,712	\$ 32,711	\$ 32,388	\$ 398,886
Kaiser EPO Parity Accumulation	\$ 34,429	\$ 34,110	\$ 34,004	\$ 33,848	\$ 33,684	\$ 33,536	\$ 33,169	\$ 33,011	\$ 33,202	\$ 32,507	\$ 32,768	\$ 32,249	\$ 400,516
Prescription Drug Rebates	\$ -	\$ -	\$ 745,118	\$ -	\$ 700,150	\$ -	\$ -	\$ 642,132	\$ -	\$ 643,951	\$ -	\$ -	\$ 2,731,351
Other: COF-COVID-19 Reimbursemer	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2022 Calculated Accumulation	\$ 601,094	\$ (575,365)	\$ 1,088,433	\$ (465,456)	\$ 696,699	\$ 3,431	\$ 48,043	\$ (1,439,750)	\$ 346,837	\$ 10,570	\$ (753,211)	\$ (652,468)	\$ (1,091,143)
2023	January	February	March	April	May	June	July	August	September	October	November	December	Total
Budget													
Plan Experience (Medical)	\$ 65,284	\$ 65,284	\$ 65,284	\$ 65,284	\$ 65,284	\$ 65,284	\$ 65,284	\$ 65,284	\$ 65,284	\$ 65,284	\$ 65,284	\$ 65,284	\$ 783,407
Plan Experience (Dental)	\$ 6,881	\$ 6,881	\$ 6,881	\$ 6,881	\$ 6,881	\$ 6,881	\$ 6,881	\$ 6,881	\$ 6,881	\$ 6,881	\$ 6,881	\$ 6,881	\$ 82,570
Kaiser Accumulation	\$ 34,161	\$ 34,161	\$ 34,161	\$ 34,161	\$ 34,161	\$ 34,161	\$ 34,161	\$ 34,161	\$ 34,161	\$ 34,161	\$ 34,161	\$ 34,161	\$ 409,938
Kaiser EPO Parity Accumulation	\$ 148,964	\$ 148,964	\$ 148,964	\$ 148,964	\$ 148,964	\$ 148,964	\$ 148,964	\$ 148,964	\$ 148,964	\$ 148,964	\$ 148,964	\$ 148,964	\$ 1,787,564
Prescription Drug Rebates	\$ -	\$ -	\$ 600,000	\$ -	\$ -	\$ 950,000	\$ -	\$ -	\$ 950,000	\$ -	\$ -	\$ 950,000	\$ 3,450,000
2023 Budgeted Accumulation	\$ 255,290	\$ 255,290	\$ 855,290	\$ 255,290	\$ 255,290	\$ 1,205,290	\$ 255,290	\$ 255,290	\$ 1,205,290	\$ 255,290	\$ 255,290	\$ 1,205,290	\$ 6,513,479
Calculated													
Plan Experience (Medical)	\$ 704,945	\$ 1,360,540	\$ 186,596	\$ 1,188,022	\$ 1,350,362	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,790,465
Plan Experience (Dental)	\$ 94,579	\$ 30,896	\$ (9,934)	\$ 58,534	\$ 59,818	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 233,893
Kaiser Accumulation	\$ 32,807	\$ 33,162	\$ 33,294	\$ 33,008	\$ 33,035	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 165,306
Kaiser EPO Parity Accumulation	\$ 163,072	\$ 164,948	\$ 165,495	\$ 164,055	\$ 164,146	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 821,715
Prescription Drug Rebates	\$ -	\$ -	\$ -	\$ 532,281	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 532,281
Other: CMC Claims held by Anthem	\$ (448,742)	\$ (448,742)	\$ (448,742)	\$ (448,742)	\$ (448,742)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (2,243,710)
2023 Calculated Accumulation	\$ 546,661	\$ 1,140,804	\$ (73,291)	\$ 1,527,158	\$ 1,158,618	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,299,950

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



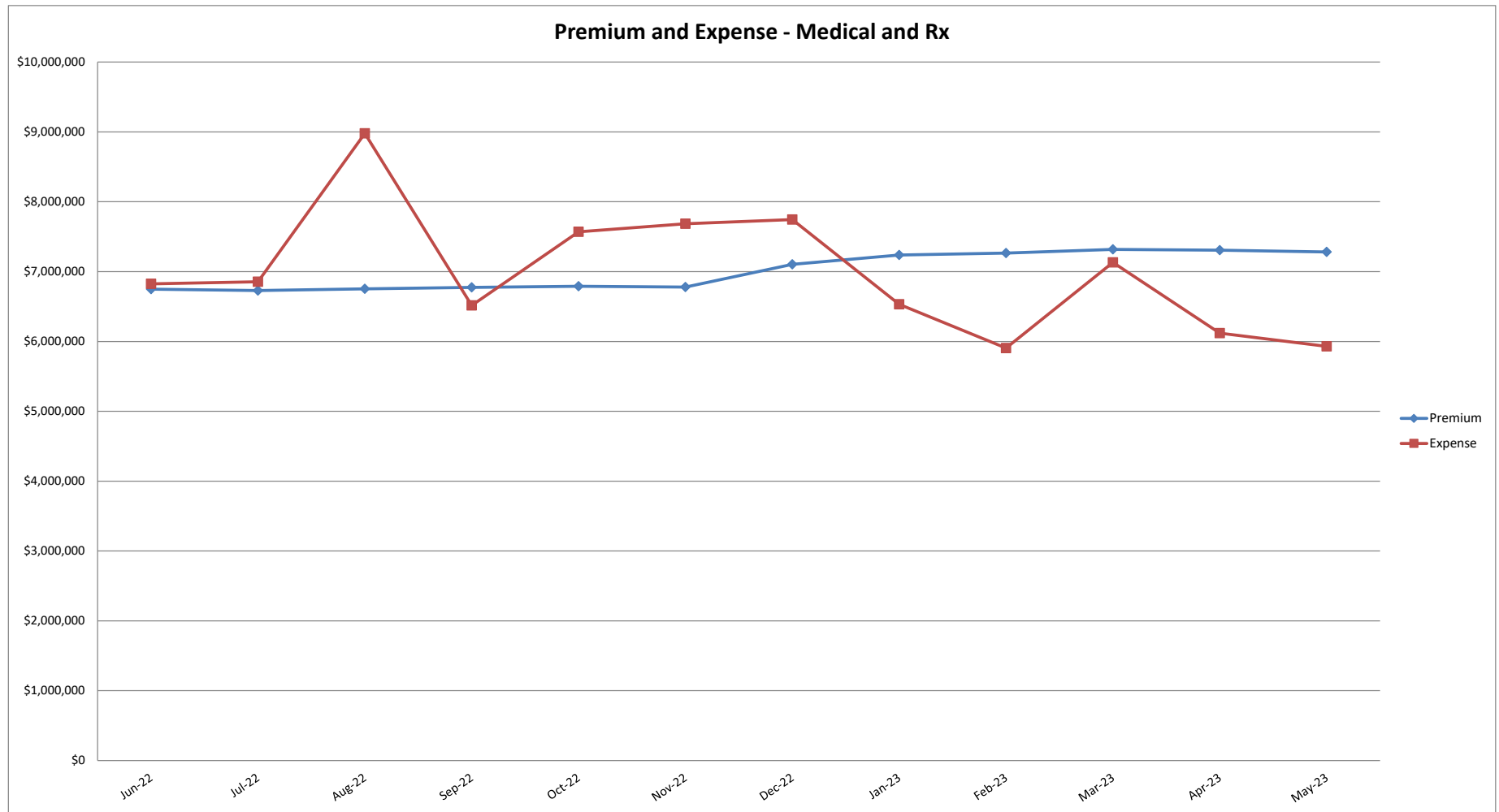
San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
All Districts Combined - All Medical

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
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%
Jan-22	6,908	\$6,849,292	\$3,972,472	\$1,872,019	\$605,806	-\$17,651	\$6,432,646	\$416,645	\$843.49	93.9%
Feb-22	6,767	\$6,688,617	\$5,169,746	\$1,804,436	\$594,784	-\$172,594	\$7,396,372	-\$707,755	\$1,005.11	110.6%
Mar-22	6,753	\$6,662,993	\$3,854,656	\$1,880,411	\$593,611	\$0	\$6,328,678	\$334,314	\$849.26	95.0%
Apr-22	6,705	\$6,607,160	\$5,391,769	\$1,919,594	\$589,103	-\$714,143	\$7,186,323	-\$579,163	\$983.93	108.8%
May-22	6,712	\$6,615,024	\$4,186,239	\$1,950,480	\$589,745	\$0	\$6,726,464	-\$111,440	\$914.29	101.7%
Jun-22	6,844	\$6,749,043	\$4,177,448	\$2,044,212	\$599,980	\$3,842	\$6,825,482	-\$76,439	\$909.63	101.1%
Jul-22	6,819	\$6,728,792	\$4,448,150	\$1,807,229	\$598,045	\$836	\$6,854,261	-\$125,468	\$917.47	101.9%
Aug-22	6,839	\$6,753,897	\$6,273,503	\$2,142,952	\$599,507	-\$37,678	\$8,978,283	-\$2,224,386	\$1,225.15	132.9%
Sep-22	6,871	\$6,772,731	\$4,006,728	\$2,066,819	\$602,706	-\$161,062	\$6,515,191	\$257,541	\$860.50	96.2%
Oct-22	6,900	\$6,789,567	\$4,748,203	\$2,217,947	\$605,505	-\$1,087	\$7,570,568	-\$781,001	\$1,009.43	111.5%
Nov-22	6,890	\$6,778,443	\$4,804,297	\$2,277,788	\$604,595	-\$1,204	\$7,685,475	-\$907,032	\$1,027.70	113.4%
Dec-22	7,010	\$7,104,751	\$5,207,942	\$2,010,979	\$617,413	-\$91,208	\$7,745,126	-\$640,375	\$1,016.79	109.0%
Jan-23	7,024	\$7,236,876	\$4,044,716	\$2,110,263	\$618,533	-\$241,581	\$6,531,930	\$704,945	\$841.88	90.3%
Feb-23	7,062	\$7,265,806	\$3,350,286	\$1,981,223	\$622,050	-\$48,293	\$5,905,266	\$1,360,540	\$748.12	81.3%
Mar-23	7,307	\$7,317,706	\$4,217,191	\$2,269,771	\$646,568	-\$2,420	\$7,131,111	\$186,595	\$887.44	97.5%
Apr-23	7,105	\$7,306,138	\$3,409,483	\$2,081,107	\$626,733	\$792	\$6,118,116	\$1,188,023	\$772.89	83.7%
May-23	7,090	\$7,280,459	\$3,083,103	\$2,221,828	\$625,273	-\$108	\$5,930,096	\$1,350,363	\$748.21	81.5%
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	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%
2022	6,835	\$81,100,311	\$56,241,154	\$23,994,864	\$7,200,801	-\$1,191,949	\$86,244,870	-\$5,144,559	\$963.74	106.3%
2023 YTD	7,118	\$36,406,985	\$18,104,780	\$10,664,192	\$3,139,157	-\$291,610	\$31,616,519	\$4,790,466	\$800.20	86.8%
Current 12 Months	6,980	\$84,084,210	\$51,771,051	\$25,232,117	\$7,366,908	-\$579,171	\$83,790,905	\$293,305	\$912.41	99.7%

Data Sources:

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

San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
All Districts Combined - All Medical





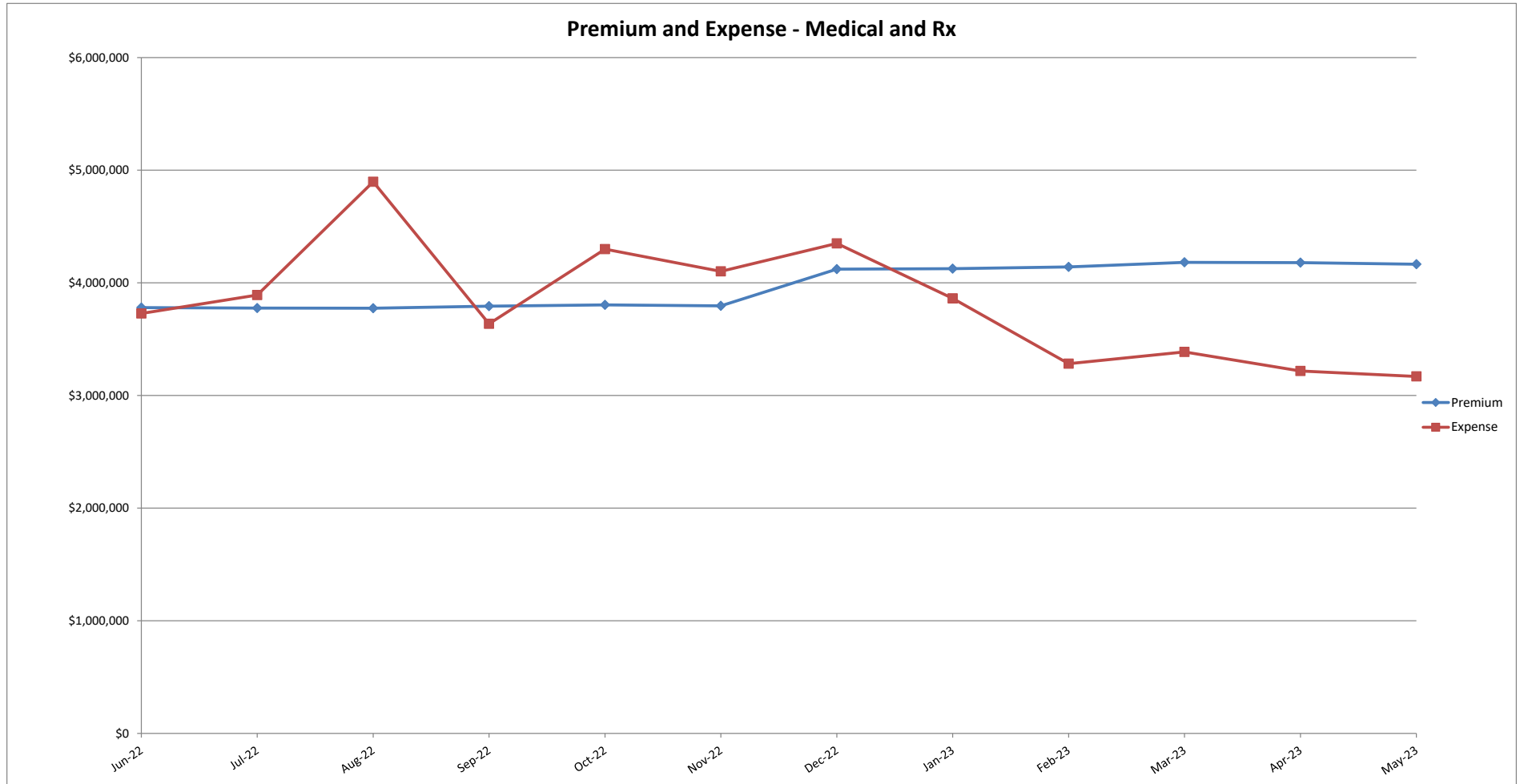
San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
All Districts Combined - EPO

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
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%
Jan-22	3,132	\$3,843,069	\$2,244,009	\$1,034,255	\$314,421	-\$17,651	\$3,575,034	\$268,035	\$1,041.06	93.0%
Feb-22	3,127	\$3,837,525	\$2,999,183	\$951,654	\$313,920	-\$172,594	\$4,092,163	-\$254,638	\$1,208.26	106.6%
Mar-22	3,123	\$3,821,163	\$2,205,661	\$967,899	\$313,518	\$0	\$3,487,078	\$334,084	\$1,016.19	91.3%
Apr-22	3,088	\$3,779,197	\$3,765,649	\$978,614	\$310,004	-\$714,143	\$4,340,124	-\$560,927	\$1,305.09	114.8%
May-22	3,093	\$3,781,688	\$2,594,361	\$1,007,873	\$310,506	\$0	\$3,912,740	-\$131,052	\$1,164.64	103.5%
Jun-22	3,094	\$3,779,828	\$2,382,427	\$1,030,610	\$310,607	\$3,842	\$3,727,486	\$52,342	\$1,104.36	98.6%
Jul-22	3,094	\$3,775,558	\$2,657,908	\$922,057	\$310,607	\$836	\$3,891,407	-\$115,849	\$1,157.34	103.1%
Aug-22	3,090	\$3,774,880	\$3,545,196	\$1,079,441	\$310,205	-\$37,678	\$4,897,164	-\$1,122,284	\$1,484.45	129.7%
Sep-22	3,121	\$3,793,032	\$2,374,801	\$1,015,831	\$313,317	-\$68,131	\$3,635,818	\$157,214	\$1,064.56	95.9%
Oct-22	3,145	\$3,804,887	\$2,860,186	\$1,123,379	\$315,727	\$0	\$4,299,292	-\$494,405	\$1,266.63	113.0%
Nov-22	3,139	\$3,796,401	\$2,552,274	\$1,235,054	\$315,124	-\$370	\$4,102,082	-\$305,682	\$1,206.42	108.1%
Dec-22	3,290	\$4,121,768	\$3,066,123	\$1,032,959	\$330,283	-\$78,642	\$4,350,723	-\$228,955	\$1,222.02	105.6%
Jan-23	3,291	\$4,125,856	\$2,653,373	\$1,120,346	\$330,383	-\$241,581	\$3,862,522	\$263,334	\$1,073.27	93.6%
Feb-23	3,316	\$4,141,809	\$1,935,610	\$1,062,124	\$332,893	-\$48,293	\$3,282,334	\$859,475	\$889.46	79.2%
Mar-23	3,558	\$4,181,933	\$1,862,516	\$1,168,999	\$357,188	-\$2,420	\$3,386,282	\$795,651	\$851.35	81.0%
Apr-23	3,375	\$4,179,891	\$1,751,886	\$1,126,353	\$338,816	\$792	\$3,217,847	\$962,044	\$853.05	77.0%
May-23	3,362	\$4,165,140	\$1,666,100	\$1,165,456	\$337,511	-\$108	\$3,168,960	\$996,180	\$842.19	76.1%
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	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%
2022	3,128	\$45,908,995	\$33,247,778	\$12,379,625	\$3,768,239	-\$1,084,532	\$48,311,111	-\$2,402,116	\$1,186.67	105.2%
2023 YTD	3,380	\$20,794,629	\$9,869,485	\$5,643,278	\$1,696,792	-\$291,610	\$16,917,945	\$3,876,684	\$900.55	81.4%
Current 12 Months	3,240	\$47,640,983	\$29,308,401	\$13,082,608	\$3,902,661	-\$471,754	\$45,821,916	\$1,819,066	\$1,078.31	96.2%

Data Sources:

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

**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
All Districts Combined - EPO**





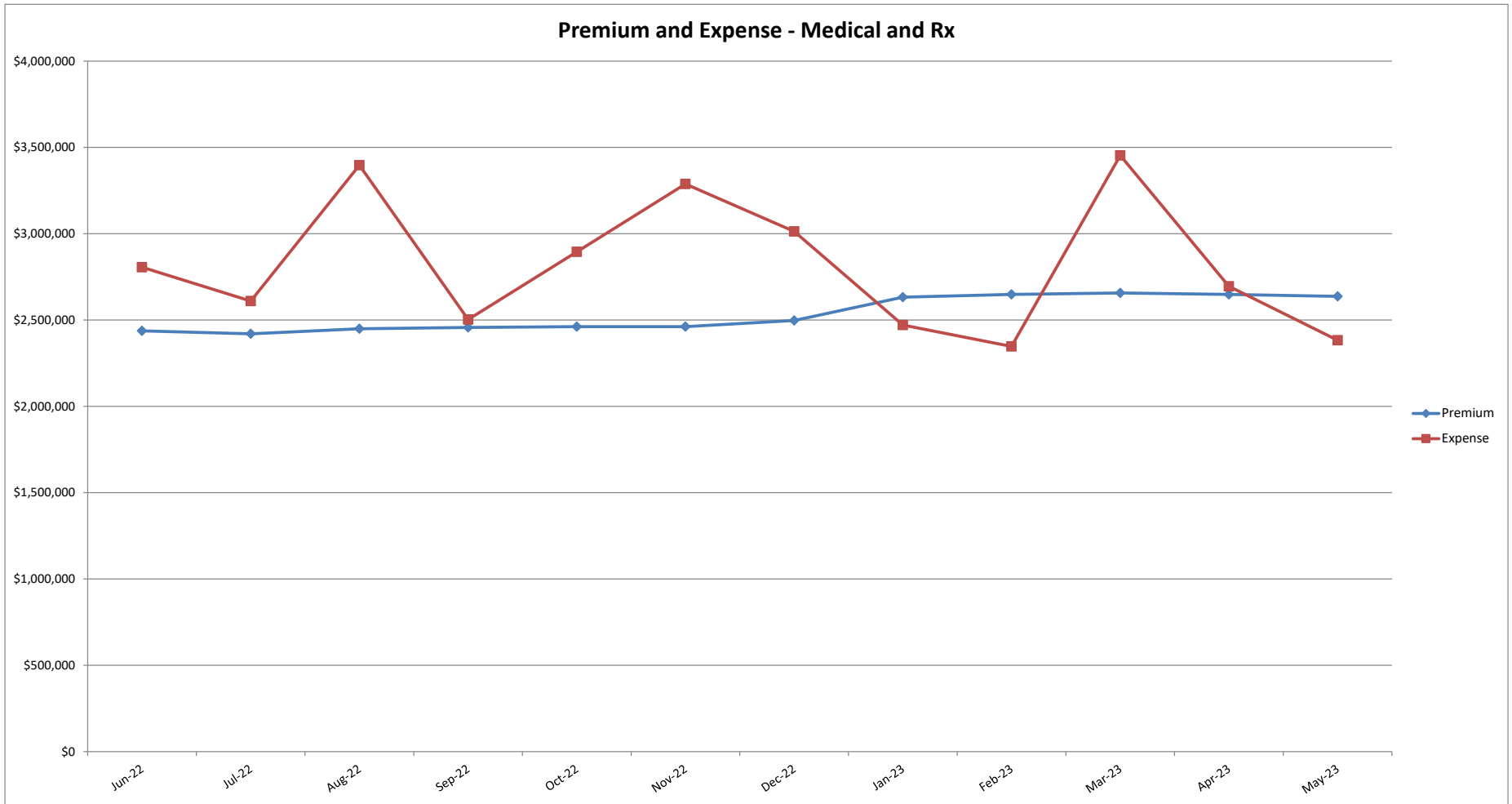
**San Joaquin Valley Insurance Authority (SJVIA)
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All Districts Combined - PPO**

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
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%
Jan-22	3,061	\$2,469,279	\$1,248,318	\$791,296	\$236,665	\$0	\$2,276,279	\$193,000	\$666.32	92.2%
Feb-22	2,923	\$2,315,333	\$1,947,940	\$816,778	\$225,990	\$0	\$2,990,708	-\$675,376	\$945.85	129.2%
Mar-22	2,917	\$2,310,116	\$1,442,855	\$862,356	\$225,524	\$0	\$2,530,735	-\$220,619	\$790.27	109.6%
Apr-22	2,916	\$2,302,514	\$1,447,734	\$828,948	\$225,448	\$0	\$2,502,130	-\$199,616	\$780.76	108.7%
May-22	2,903	\$2,298,189	\$1,273,822	\$871,587	\$224,442	\$0	\$2,369,851	-\$71,662	\$739.03	103.1%
Jun-22	3,036	\$2,437,299	\$1,676,534	\$894,936	\$234,729	\$0	\$2,806,199	-\$368,900	\$846.99	115.1%
Jul-22	3,010	\$2,420,242	\$1,595,471	\$781,725	\$232,718	\$0	\$2,609,914	-\$189,672	\$789.77	107.8%
Aug-22	3,040	\$2,450,028	\$2,204,773	\$956,985	\$235,039	\$0	\$3,396,797	-\$946,768	\$1,040.05	138.6%
Sep-22	3,050	\$2,457,034	\$1,309,975	\$957,342	\$235,814	\$0	\$2,503,131	-\$46,096	\$743.38	101.9%
Oct-22	3,055	\$2,461,844	\$1,676,279	\$982,714	\$236,203	\$0	\$2,895,196	-\$433,351	\$870.37	117.6%
Nov-22	3,054	\$2,461,350	\$2,111,834	\$940,700	\$236,125	\$0	\$3,288,660	-\$827,310	\$999.52	133.6%
Dec-22	3,095	\$2,497,248	\$1,872,561	\$901,538	\$239,292	\$0	\$3,013,390	-\$516,142	\$896.32	120.7%
Jan-23	3,119	\$2,632,312	\$1,265,464	\$964,505	\$241,152	\$0	\$2,471,120	\$161,192	\$714.96	93.9%
Feb-23	3,137	\$2,648,404	\$1,223,699	\$881,086	\$242,543	\$0	\$2,347,328	\$301,075	\$670.95	88.6%
Mar-23	3,135	\$2,656,940	\$2,155,967	\$1,055,186	\$242,385	\$0	\$3,453,538	-\$796,598	\$1,024.29	130.0%
Apr-23	3,123	\$2,648,661	\$1,556,865	\$897,305	\$241,456	\$0	\$2,695,627	-\$46,966	\$785.84	101.8%
May-23	3,117	\$2,637,547	\$1,135,596	\$1,006,286	\$240,995	\$0	\$2,382,876	\$254,671	\$687.16	90.3%
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	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%
2022	3,005	\$28,880,476	\$19,808,096	\$10,586,905	\$2,787,987	\$0	\$33,182,989	-\$4,302,513	\$842.90	114.9%
2023 YTD	3,126	\$13,223,864	\$7,337,590	\$4,804,367	\$1,208,532	\$0	\$13,350,489	-\$126,625	\$776.79	101.0%
Current 12 Months	3,081	\$30,408,910	\$19,785,017	\$11,220,307	\$2,858,451	\$0	\$33,863,775	-\$3,454,865	\$838.64	111.4%

Data Sources:

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

**San Joaquin Valley Insurance Authority (SJVIA)
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All Districts Combined - PPO**





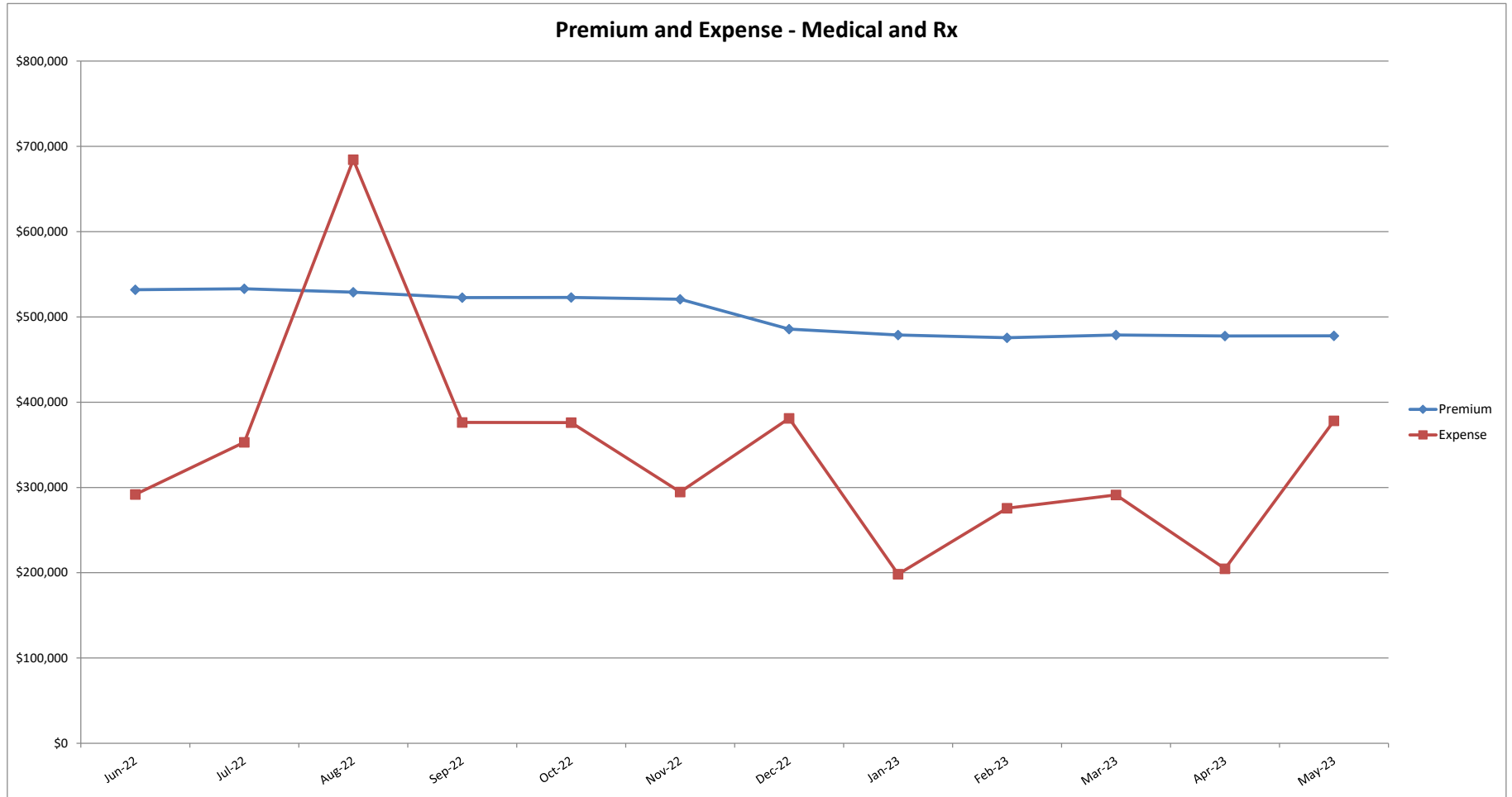
San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
All Districts Combined - HDHP

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
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%
Jan-22	715	\$536,944	\$480,145	\$46,468	\$54,720	\$0	\$581,333	-\$44,389	\$736.52	108.3%
Feb-22	717	\$535,760	\$222,623	\$36,003	\$54,875	\$0	\$313,501	\$222,259	\$360.71	58.5%
Mar-22	713	\$531,715	\$206,140	\$50,156	\$54,569	\$0	\$310,865	\$220,849	\$359.46	58.5%
Apr-22	701	\$525,449	\$178,386	\$112,032	\$53,651	\$0	\$344,069	\$181,380	\$414.29	65.5%
May-22	716	\$535,148	\$318,056	\$71,020	\$54,797	\$0	\$443,873	\$91,275	\$543.40	82.9%
Jun-22	714	\$531,916	\$118,487	\$118,666	\$54,644	\$0	\$291,797	\$240,119	\$332.15	54.9%
Jul-22	715	\$532,992	\$194,772	\$103,447	\$54,721	\$0	\$352,940	\$180,053	\$417.09	66.2%
Aug-22	709	\$528,988	\$523,534	\$106,526	\$54,263	\$0	\$684,323	-\$155,334	\$888.66	129.4%
Sep-22	700	\$522,665	\$321,952	\$93,646	\$53,574	-\$92,931	\$376,242	\$146,423	\$460.95	72.0%
Oct-22	700	\$522,835	\$211,738	\$111,854	\$53,575	-\$1,087	\$376,081	\$146,754	\$460.72	71.9%
Nov-22	697	\$520,693	\$140,189	\$102,033	\$53,346	-\$834	\$294,734	\$225,959	\$346.32	56.6%
Dec-22	625	\$485,735	\$269,257	\$76,483	\$47,839	-\$12,566	\$381,013	\$104,722	\$533.08	78.4%
Jan-23	614	\$478,707	\$125,879	\$25,412	\$46,997	\$0	\$198,288	\$280,419	\$246.40	41.4%
Feb-23	609	\$475,593	\$190,977	\$38,013	\$46,613	\$0	\$275,604	\$199,990	\$376.01	57.9%
Mar-23	614	\$478,833	\$198,708	\$45,587	\$46,995	\$0	\$291,291	\$187,543	\$397.88	60.8%
Apr-23	607	\$477,586	\$100,732	\$57,449	\$46,461	\$0	\$204,642	\$272,944	\$260.60	42.8%
May-23	611	\$477,771	\$281,407	\$50,086	\$46,767	\$0	\$378,260	\$99,512	\$542.54	79.2%
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	755	\$6,987,963	\$2,893,921	\$946,668	\$693,637	\$0	\$4,534,226	\$2,453,737	\$423.72	64.9%
2022	702	\$6,310,841	\$3,185,280	\$1,028,334	\$644,574	-\$107,418	\$4,750,770	\$1,560,070	\$487.56	75.3%
2023 YTD	611	\$2,388,492	\$897,705	\$216,547	\$233,833	\$0	\$1,348,085	\$1,040,407	\$364.73	56.4%
Current 12 Months	660	\$6,034,317	\$2,677,633	\$929,202	\$605,796	-\$107,418	\$4,105,213	\$1,929,104	\$442.12	68.0%

Data Sources:

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

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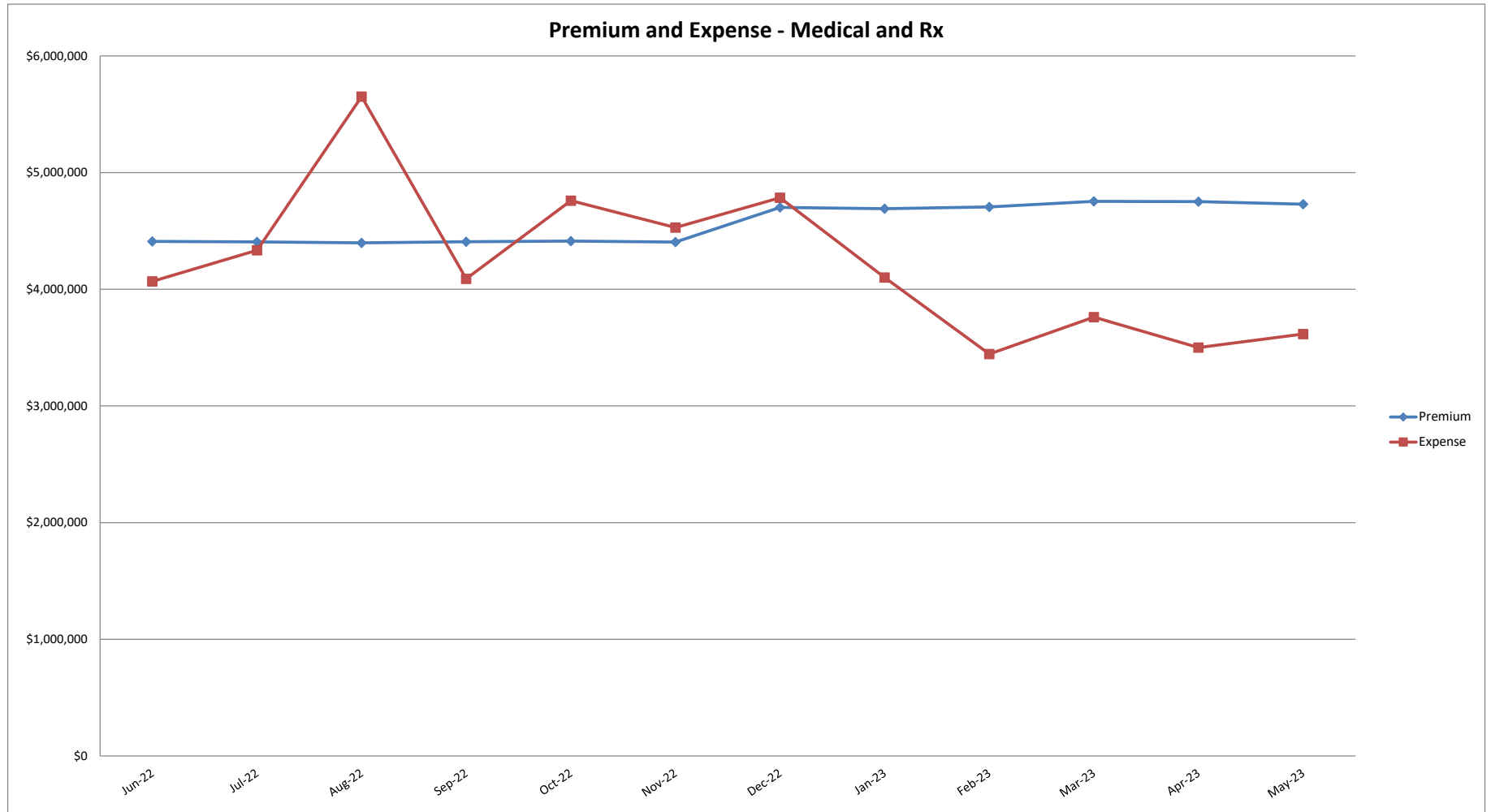


San Joaquin Valley Insurance Authority (SJVIA)
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County of Fresno - All Medical

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
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%
Jan-22	3,898	\$4,479,015	\$2,780,562	\$1,106,544	\$373,013	-\$17,651	\$4,242,468	\$236,547	\$992.68	94.7%
Feb-22	3,895	\$4,471,686	\$3,652,956	\$1,007,677	\$372,664	-\$172,594	\$4,860,702	-\$389,016	\$1,152.26	108.7%
Mar-22	3,889	\$4,453,442	\$2,500,688	\$1,048,284	\$372,109	\$0	\$3,921,081	\$532,361	\$912.57	88.0%
Apr-22	3,841	\$4,401,669	\$3,994,614	\$1,109,253	\$367,601	-\$714,143	\$4,757,325	-\$355,656	\$1,142.86	108.1%
May-22	3,863	\$4,414,905	\$2,934,848	\$1,075,963	\$369,404	\$0	\$4,380,214	\$34,691	\$1,038.26	99.2%
Jun-22	3,861	\$4,409,814	\$2,524,734	\$1,169,408	\$369,274	\$3,842	\$4,067,258	\$342,556	\$957.78	92.2%
Jul-22	3,862	\$4,405,743	\$2,916,770	\$1,048,063	\$369,351	\$836	\$4,335,020	\$70,722	\$1,026.84	98.4%
Aug-22	3,850	\$4,397,983	\$4,120,398	\$1,200,341	\$368,338	-\$37,678	\$5,651,398	-\$1,253,415	\$1,372.22	128.5%
Sep-22	3,870	\$4,407,803	\$2,751,356	\$1,128,522	\$370,608	-\$161,062	\$4,089,424	\$318,379	\$960.93	92.8%
Oct-22	3,890	\$4,412,595	\$3,128,194	\$1,259,442	\$372,712	-\$1,087	\$4,759,261	-\$346,666	\$1,127.65	107.9%
Nov-22	3,882	\$4,404,337	\$2,806,061	\$1,351,656	\$371,956	-\$1,204	\$4,528,470	-\$124,132	\$1,070.71	102.8%
Dec-22	3,966	\$4,701,115	\$3,366,633	\$1,127,092	\$381,990	-\$91,208	\$4,784,507	-\$83,393	\$1,110.06	101.8%
Jan-23	3,951	\$4,690,217	\$2,782,895	\$1,179,047	\$380,867	-\$241,581	\$4,101,228	\$588,990	\$941.63	87.4%
Feb-23	3,974	\$4,705,473	\$1,973,260	\$1,136,960	\$383,224	-\$48,293	\$3,445,150	\$1,260,323	\$770.49	73.2%
Mar-23	4,225	\$4,753,642	\$2,108,665	\$1,246,283	\$408,206	-\$2,420	\$3,760,735	\$992,907	\$793.50	79.1%
Apr-23	4,035	\$4,750,946	\$1,897,257	\$1,212,686	\$389,300	\$792	\$3,500,034	\$1,250,912	\$770.94	73.7%
May-23	4,023	\$4,729,562	\$1,965,318	\$1,263,017	\$388,071	-\$108	\$3,616,298	\$1,113,264	\$802.44	76.5%
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	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%
2022	3,881	\$53,360,107	\$37,477,813	\$13,632,245	\$4,459,020	-\$1,191,949	\$54,377,129	-\$1,017,022	\$1,071.96	101.9%
2023 YTD	4,042	\$23,629,841	\$10,727,394	\$6,037,993	\$1,949,668	-\$291,610	\$18,423,445	\$5,206,395	\$815.21	78.0%
Current 12 Months	3,949	\$54,769,230	\$32,341,540	\$14,322,518	\$4,553,897	-\$579,171	\$50,638,784	\$4,130,446	\$972.48	92.5%

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

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County of Fresno - All Medical**





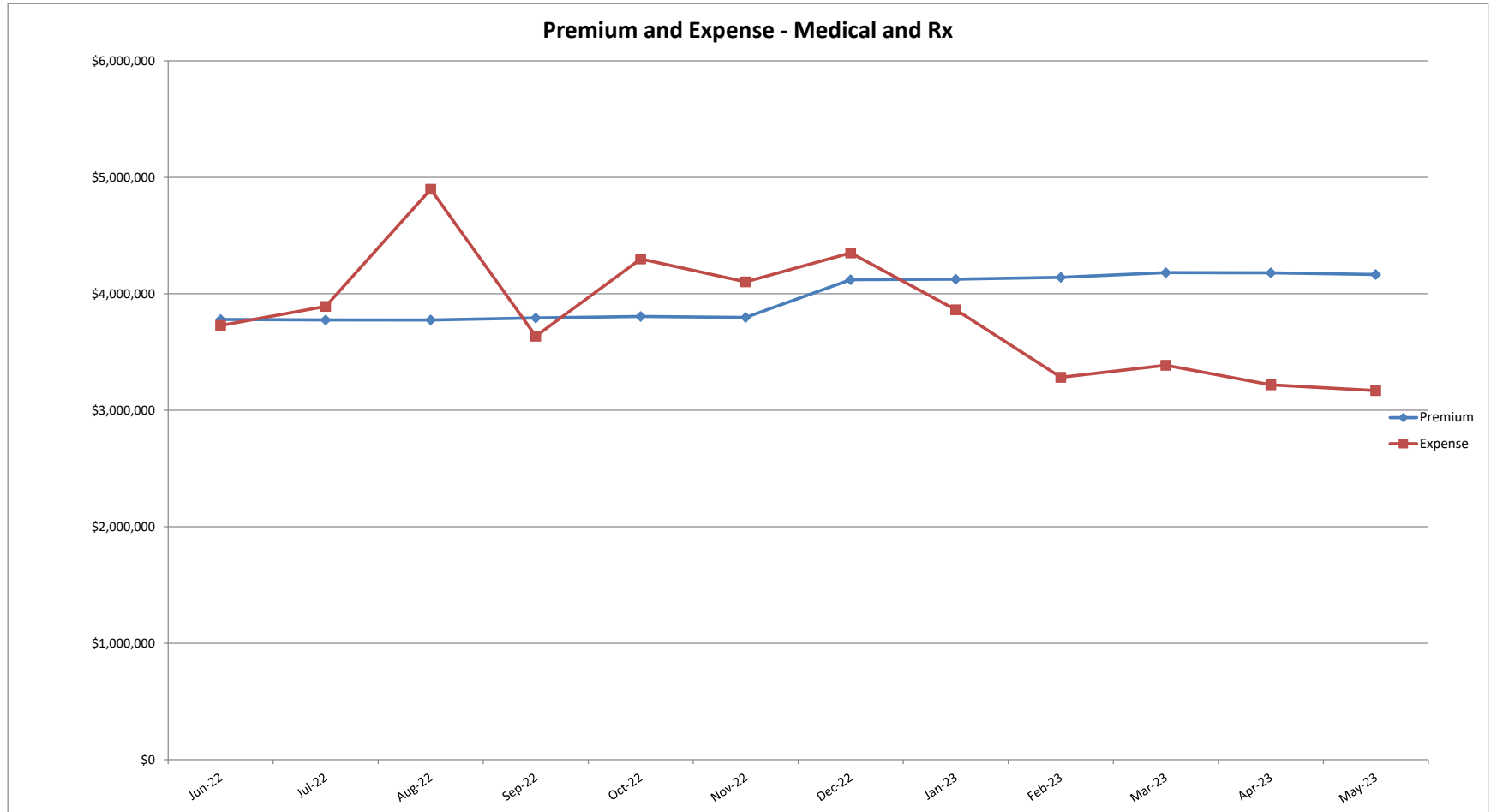
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MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jun-21	3,027	\$3,671,906	\$2,929,075	\$944,767	\$303,881	-\$71,571	\$4,106,151	-\$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%
Jan-22	3,132	\$3,843,069	\$2,244,009	\$1,034,255	\$314,421	-\$17,651	\$3,575,034	\$268,035	\$1,041.06	93.0%
Feb-22	3,127	\$3,837,525	\$2,999,183	\$951,654	\$313,920	-\$172,594	\$4,092,163	-\$254,638	\$1,208.26	106.6%
Mar-22	3,123	\$3,821,163	\$2,205,661	\$967,899	\$313,518	\$0	\$3,487,078	\$334,084	\$1,016.19	91.3%
Apr-22	3,088	\$3,779,197	\$3,765,649	\$978,614	\$310,004	-\$714,143	\$4,340,124	-\$560,927	\$1,305.09	114.8%
May-22	3,093	\$3,781,688	\$2,594,361	\$1,007,873	\$310,506	\$0	\$3,912,740	-\$131,052	\$1,164.64	103.5%
Jun-22	3,094	\$3,779,828	\$2,382,427	\$1,030,610	\$310,607	\$3,842	\$3,727,486	\$52,342	\$1,104.36	98.6%
Jul-22	3,094	\$3,775,558	\$2,657,908	\$922,057	\$310,607	\$836	\$3,891,407	-\$115,849	\$1,157.34	103.1%
Aug-22	3,090	\$3,774,880	\$3,545,196	\$1,079,441	\$310,205	-\$37,678	\$4,897,164	-\$1,122,284	\$1,484.45	129.7%
Sep-22	3,121	\$3,793,032	\$2,374,801	\$1,015,831	\$313,317	-\$68,131	\$3,635,818	\$157,214	\$1,064.56	95.9%
Oct-22	3,145	\$3,804,887	\$2,860,186	\$1,123,379	\$315,727	\$0	\$4,299,292	-\$494,405	\$1,266.63	113.0%
Nov-22	3,139	\$3,796,401	\$2,552,274	\$1,235,054	\$315,124	-\$370	\$4,102,082	-\$305,682	\$1,206.42	108.1%
Dec-22	3,290	\$4,121,768	\$3,066,123	\$1,032,959	\$330,283	-\$78,642	\$4,350,723	-\$228,955	\$1,222.02	105.6%
Jan-23	3,291	\$4,125,856	\$2,653,373	\$1,120,346	\$330,383	-\$241,581	\$3,862,522	\$263,334	\$1,073.27	93.6%
Feb-23	3,316	\$4,141,809	\$1,935,610	\$1,062,124	\$332,893	-\$48,293	\$3,282,334	\$859,475	\$889.46	79.2%
Mar-23	3,558	\$4,181,933	\$1,862,516	\$1,168,999	\$357,188	-\$2,420	\$3,386,282	\$795,651	\$851.35	81.0%
Apr-23	3,375	\$4,179,891	\$1,751,886	\$1,126,353	\$338,816	\$792	\$3,217,847	\$962,044	\$853.05	77.0%
May-23	3,362	\$4,165,140	\$1,666,100	\$1,165,456	\$337,511	-\$108	\$3,168,960	\$996,180	\$842.19	76.1%
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	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%
2022	3,128	\$45,908,995	\$33,247,778	\$12,379,625	\$3,768,239	-\$1,084,532	\$48,311,111	-\$2,402,116	\$1,186.67	105.2%
2023 YTD	3,380	\$20,794,629	\$9,869,485	\$5,643,278	\$1,696,792	-\$291,610	\$16,917,945	\$3,876,684	\$900.55	81.4%
Current 12 Months	3,240	\$47,640,983	\$29,308,401	\$13,082,608	\$3,902,661	-\$471,754	\$45,821,916	\$1,819,066	\$1,078.31	96.2%

Data Sources:

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

**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
County of Fresno - EPO**





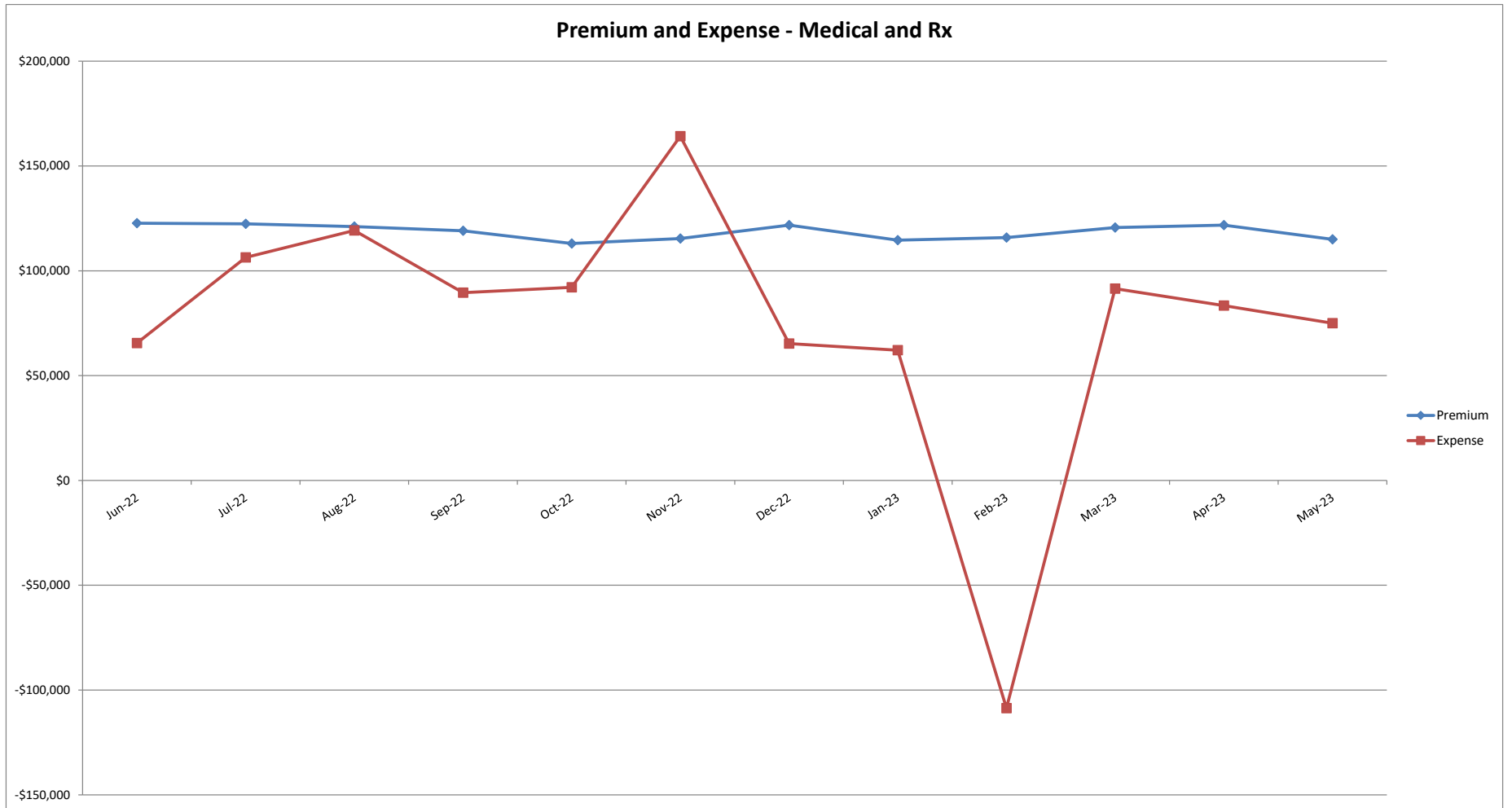
**San Joaquin Valley Insurance Authority (SJVIA)
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County of Fresno - PPO**

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
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%
Jan-22	86	\$123,053	\$63,564	\$25,475	\$6,578	\$0	\$95,617	\$27,436	\$1,035.33	77.7%
Feb-22	88	\$124,188	\$433,483	\$20,126	\$6,731	\$0	\$460,340	-\$336,152	\$5,154.65	370.7%
Mar-22	90	\$126,352	\$92,397	\$30,319	\$6,884	\$0	\$129,600	-\$3,248	\$1,363.51	102.6%
Apr-22	89	\$122,811	\$53,663	\$18,645	\$6,808	\$0	\$79,115	\$43,695	\$812.44	64.4%
May-22	90	\$122,699	\$61,273	\$20,698	\$6,884	\$0	\$88,855	\$33,845	\$910.78	72.4%
Jun-22	89	\$122,699	\$38,626	\$20,113	\$6,808	\$0	\$65,546	\$57,153	\$659.98	53.4%
Jul-22	89	\$122,429	\$75,391	\$24,197	\$6,808	\$0	\$106,396	\$16,033	\$1,118.97	86.9%
Aug-22	88	\$121,115	\$74,926	\$37,604	\$6,731	\$0	\$119,260	\$1,855	\$1,278.74	98.5%
Sep-22	86	\$119,106	\$60,223	\$22,775	\$6,578	\$0	\$89,576	\$29,530	\$965.09	75.2%
Oct-22	83	\$113,030	\$60,666	\$25,087	\$6,349	\$0	\$92,101	\$20,928	\$1,033.17	81.5%
Nov-22	84	\$115,401	\$122,634	\$35,138	\$6,425	\$0	\$164,197	-\$48,796	\$1,878.24	142.3%
Dec-22	89	\$121,769	\$34,961	\$23,491	\$6,808	\$0	\$65,260	\$56,509	\$656.76	53.6%
Jan-23	84	\$114,612	\$22,274	\$33,386	\$6,425	\$0	\$62,085	\$52,528	\$662.61	54.2%
Feb-23	85	\$115,814	-\$152,914	\$37,785	\$6,502	\$0	-\$108,627	\$224,440	-\$1,354.45	-93.8%
Mar-23	89	\$120,618	\$50,908	\$33,802	\$6,808	\$0	\$91,518	\$29,100	\$951.80	75.9%
Apr-23	90	\$121,820	\$45,785	\$30,721	\$6,884	\$0	\$83,389	\$38,430	\$850.06	68.5%
May-23	87	\$115,001	\$20,801	\$47,561	\$6,655	\$0	\$75,017	\$39,983	\$785.78	65.2%
2020	113	\$1,789,697	\$1,000,007	\$350,776	\$109,890	\$0	\$1,460,673	\$329,023	\$996.15	81.6%
2021	115	\$1,864,875	\$650,849	\$361,802	\$105,556	\$0	\$1,118,207	\$746,668	\$733.80	60.0%
2022	88	\$1,454,651	\$1,171,806	\$303,666	\$80,391	\$0	\$1,555,864	-\$101,213	\$1,403.87	107.0%
2023 YTD	87	\$587,864	-\$13,146	\$183,255	\$33,273	\$0	\$203,383	\$384,482	\$391.06	34.6%
Current 12 Months	87	\$1,423,413	\$454,282	\$371,659	\$79,779	\$0	\$905,720	\$517,693	\$791.89	63.6%

Data Sources:

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

**San Joaquin Valley Insurance Authority (SJVIA)
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County of Fresno - PPO**





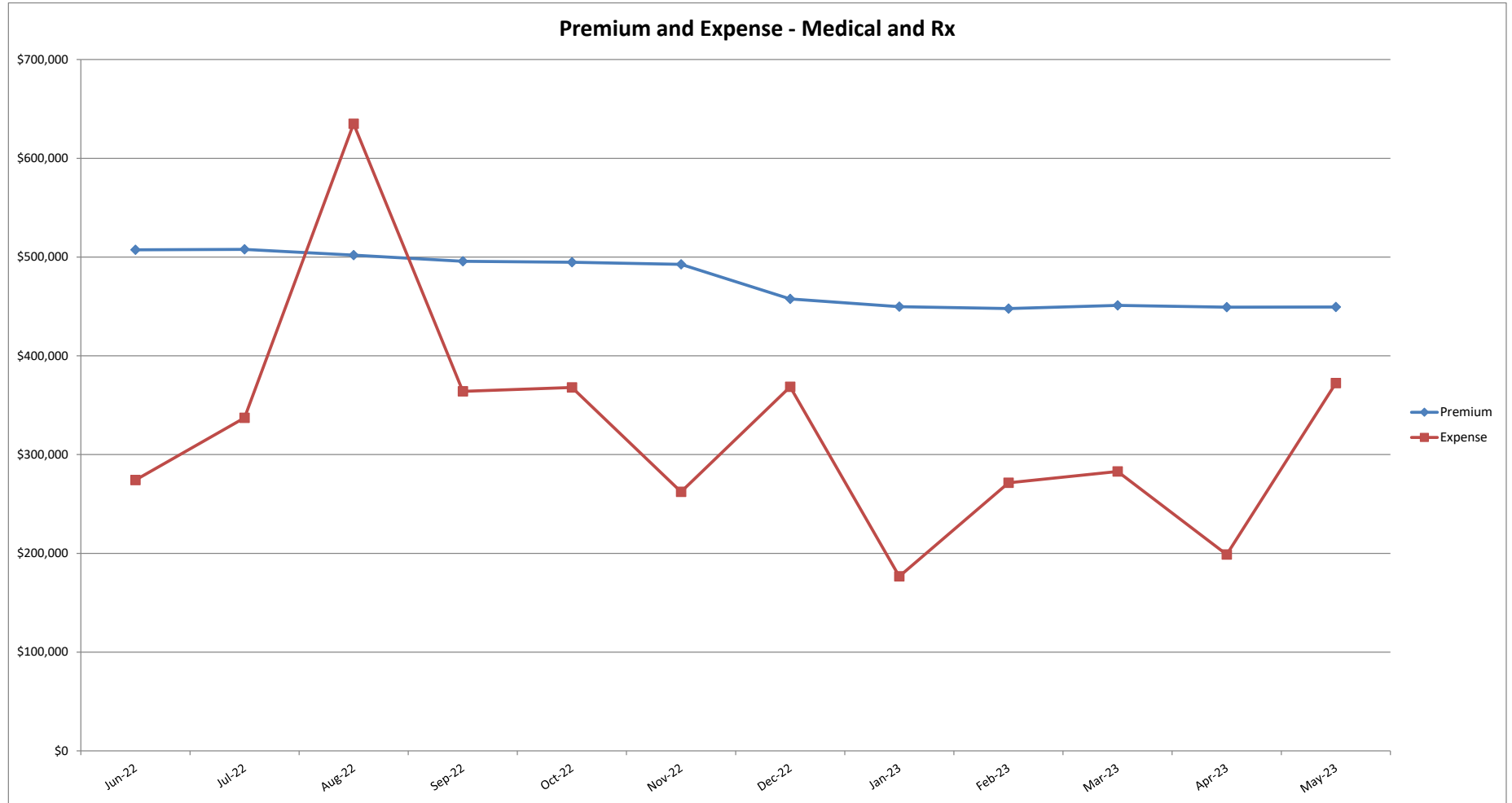
San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
County of Fresno - HDHP

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
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%
Jan-22	680	\$512,893	\$472,990	\$46,814	\$52,013	\$0	\$571,817	-\$58,924	\$764.42	111.5%
Feb-22	680	\$509,973	\$220,289	\$35,896	\$52,013	\$0	\$308,199	\$201,775	\$376.74	60.4%
Mar-22	676	\$505,928	\$202,630	\$50,066	\$51,707	\$0	\$304,403	\$201,525	\$373.81	60.2%
Apr-22	664	\$499,662	\$175,302	\$111,994	\$50,789	\$0	\$338,086	\$161,576	\$432.68	67.7%
May-22	680	\$510,518	\$279,214	\$47,392	\$52,013	\$0	\$378,620	\$131,898	\$480.30	74.2%
Jun-22	678	\$507,287	\$103,681	\$118,685	\$51,860	\$0	\$274,226	\$233,060	\$327.97	54.1%
Jul-22	679	\$507,756	\$183,471	\$101,809	\$51,937	\$0	\$337,217	\$170,539	\$420.15	66.4%
Aug-22	672	\$501,988	\$500,276	\$83,297	\$51,401	\$0	\$634,974	-\$132,986	\$868.41	126.5%
Sep-22	663	\$495,665	\$316,331	\$89,917	\$50,713	-\$92,931	\$364,030	\$131,635	\$472.57	73.4%
Oct-22	662	\$494,678	\$207,342	\$110,976	\$50,636	-\$1,087	\$367,867	\$126,811	\$479.20	74.4%
Nov-22	659	\$492,536	\$131,153	\$81,464	\$50,407	-\$834	\$262,190	\$230,345	\$321.37	53.2%
Dec-22	587	\$457,577	\$265,549	\$70,642	\$44,900	-\$12,566	\$368,525	\$89,052	\$551.32	80.5%
Jan-23	576	\$449,749	\$107,248	\$25,315	\$44,058	\$0	\$176,621	\$273,128	\$230.14	39.3%
Feb-23	573	\$447,851	\$190,563	\$37,051	\$43,829	\$0	\$271,443	\$176,408	\$397.23	60.6%
Mar-23	578	\$451,091	\$195,241	\$43,483	\$44,211	\$0	\$282,935	\$168,156	\$413.02	62.7%
Apr-23	570	\$449,236	\$99,586	\$55,613	\$43,599	\$0	\$198,798	\$250,438	\$272.28	44.3%
May-23	574	\$449,421	\$278,416	\$49,999	\$43,905	\$0	\$372,320	\$77,101	\$572.15	82.8%
2020	734	\$6,746,287	\$2,842,371	\$947,074	\$713,557	\$0	\$4,503,003	\$2,243,284	\$430.37	66.7%
2021	723	\$6,701,335	\$2,738,386	\$867,179	\$663,474	\$0	\$4,269,040	\$2,432,295	\$415.68	63.7%
2022	665	\$5,996,461	\$3,058,228	\$948,954	\$610,390	-\$107,418	\$4,510,155	\$1,486,306	\$488.69	75.2%
2023 YTD	574	\$2,247,348	\$871,054	\$211,461	\$219,603	\$0	\$1,302,118	\$945,230	\$377.05	57.9%
Current 12 Months	623	\$5,704,835	\$2,578,858	\$868,251	\$571,457	-\$107,418	\$3,911,148	\$1,793,687	\$447.02	68.6%

Data Sources:

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

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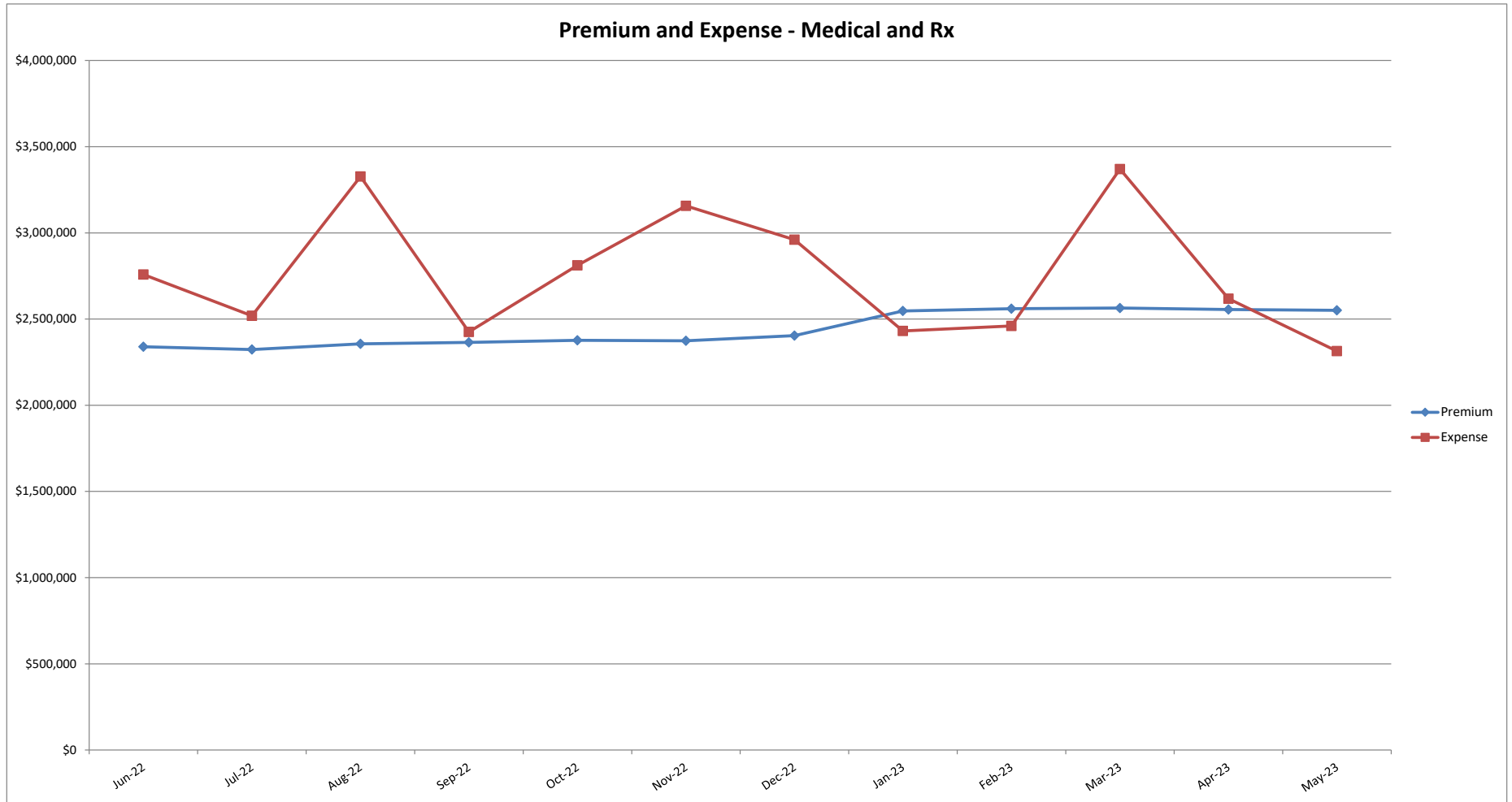


San Joaquin Valley Insurance Authority (SJVIA)
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County of Tulare - All Medical

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
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	142.3%
Jan-22	3,010	\$2,370,277	\$1,191,910	\$765,475	\$232,793	\$0	\$2,190,178	\$180,099	\$650	92.4%
Feb-22	2,872	\$2,216,931	\$1,516,791	\$796,759	\$222,120	\$0	\$2,535,671	-\$318,739	\$805.55	114.4%
Mar-22	2,864	\$2,209,550	\$1,353,968	\$832,127	\$221,502	\$0	\$2,407,597	-\$198,046	\$763.30	109.0%
Apr-22	2,864	\$2,205,491	\$1,397,155	\$810,341	\$221,502	\$0	\$2,428,998	-\$223,507	\$770.77	110.1%
May-22	2,849	\$2,200,119	\$1,251,391	\$874,517	\$220,342	\$0	\$2,346,250	-\$146,130	\$746.19	106.6%
Jun-22	2,983	\$2,339,229	\$1,652,714	\$874,804	\$230,705	\$0	\$2,758,223	-\$418,994	\$847.31	117.9%
Jul-22	2,957	\$2,323,050	\$1,531,380	\$759,166	\$228,694	\$0	\$2,519,240	-\$196,190	\$774.62	108.4%
Aug-22	2,989	\$2,355,914	\$2,153,106	\$942,610	\$231,169	\$0	\$3,326,885	-\$970,971	\$1,035.70	141.2%
Sep-22	3,001	\$2,364,929	\$1,255,373	\$938,297	\$232,097	\$0	\$2,425,767	-\$60,838	\$730.98	102.6%
Oct-22	3,010	\$2,376,972	\$1,620,009	\$958,505	\$232,793	\$0	\$2,811,307	-\$434,336	\$856.65	118.3%
Nov-22	3,008	\$2,374,106	\$1,998,236	\$926,131	\$232,639	\$0	\$3,157,006	-\$782,900	\$972.20	133.0%
Dec-22	3,044	\$2,403,636	\$1,841,309	\$883,887	\$235,423	\$0	\$2,960,619	-\$556,982	\$895	123.2%
Jan-23	3,073	\$2,546,658	\$1,261,821	\$931,216	\$237,666	\$0	\$2,430,703	\$115,956	\$714	95.4%
Feb-23	3,088	\$2,560,333	\$1,377,026	\$844,263	\$238,826	\$0	\$2,460,115	\$100,217	\$719.33	96.1%
Mar-23	3,082	\$2,564,064	\$2,108,526	\$1,023,488	\$238,362	\$0	\$3,370,376	-\$806,312	\$1,016.23	131.4%
Apr-23	3,070	\$2,555,192	\$1,512,227	\$868,421	\$237,434	\$0	\$2,618,081	-\$62,889	\$775.46	102.5%
May-23	3,067	\$2,550,897	\$1,117,785	\$958,811	\$237,202	\$0	\$2,313,798	\$237,099	\$677.08	90.7%
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	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%
2022	2,954	\$27,740,204	\$18,763,341	\$10,362,619	\$2,741,780	\$0	\$31,867,740	-\$4,127,536	\$821.58	114.9%
2023 YTD	3,076	\$12,777,144	\$7,377,386	\$4,626,199	\$1,189,489	\$0	\$13,193,073	-\$415,930	\$780.47	103.3%
Current 12 Months	3,031	\$29,314,979	\$19,429,511	\$10,909,599	\$2,813,010	\$0	\$33,152,121	-\$3,837,141	\$834.13	113.1%

Data Sources:
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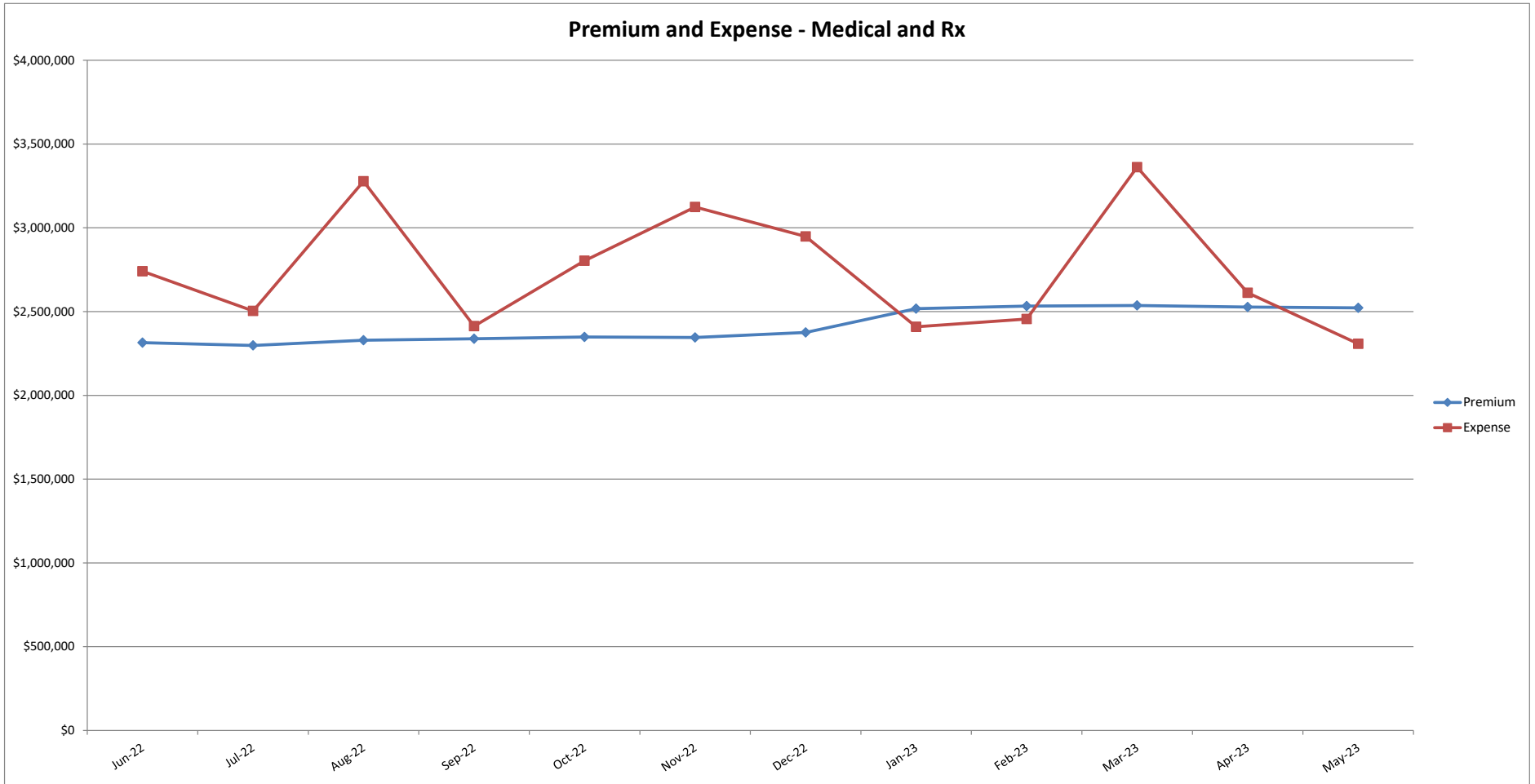
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			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
Jun-21	2,969	\$2,329,329	\$1,640,880	\$707,741	\$229,622	\$0	\$2,578,244	-\$248,915	\$791.05	110.7%
Jul-21	2,974	\$2,338,566	\$1,307,826	\$722,941	\$230,009	\$0	\$2,260,777	\$77,789	\$682.84	96.7%
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%
Jan-22	2,975	\$2,346,226	\$1,184,755	\$765,821	\$230,087	\$0	\$2,180,662	\$165,564	\$655.66	92.9%
Feb-22	2,835	\$2,191,145	\$1,514,457	\$796,652	\$219,259	\$0	\$2,530,368	-\$339,223	\$815.21	115.5%
Mar-22	2,827	\$2,183,764	\$1,350,458	\$832,037	\$218,640	\$0	\$2,401,135	-\$217,371	\$772.02	110.0%
Apr-22	2,827	\$2,179,704	\$1,394,071	\$810,303	\$218,640	\$0	\$2,423,015	-\$243,311	\$779.76	111.2%
May-22	2,813	\$2,175,489	\$1,212,549	\$850,890	\$217,557	\$0	\$2,280,996	-\$105,507	\$733.54	104.8%
Jun-22	2,947	\$2,314,599	\$1,637,908	\$874,823	\$227,921	\$0	\$2,740,653	-\$426,053	\$852.64	118.4%
Jul-22	2,921	\$2,297,813	\$1,520,080	\$757,528	\$225,910	\$0	\$2,503,518	-\$205,705	\$779.74	109.0%
Aug-22	2,952	\$2,328,913	\$2,129,848	\$919,381	\$228,308	\$0	\$3,277,537	-\$948,623	\$1,032.94	140.7%
Sep-22	2,964	\$2,337,929	\$1,249,752	\$934,567	\$229,236	\$0	\$2,413,555	-\$75,626	\$736.95	103.2%
Oct-22	2,972	\$2,348,815	\$1,615,613	\$957,627	\$229,854	\$0	\$2,803,094	-\$454,280	\$865.83	119.3%
Nov-22	2,970	\$2,345,949	\$1,989,200	\$905,563	\$229,700	\$0	\$3,124,463	-\$778,514	\$974.67	133.2%
Dec-22	3,006	\$2,375,479	\$1,837,600	\$878,047	\$232,484	\$0	\$2,948,131	-\$572,652	\$903.41	124.1%
Jan-23	3,035	\$2,517,700	\$1,243,190	\$931,119	\$234,727	\$0	\$2,409,036	\$108,664	\$716.41	95.7%
Feb-23	3,052	\$2,532,590	\$1,376,612	\$843,301	\$236,042	\$0	\$2,455,955	\$76,635	\$727.36	97.0%
Mar-23	3,046	\$2,536,322	\$2,105,059	\$1,021,384	\$235,578	\$0	\$3,362,020	-\$825,698	\$1,026.41	132.6%
Apr-23	3,033	\$2,526,842	\$1,511,081	\$866,584	\$234,572	\$0	\$2,612,237	-\$85,396	\$783.93	103.4%
May-23	3,030	\$2,522,546	\$1,114,794	\$958,725	\$234,340	\$0	\$2,307,859	\$214,687	\$684.33	91.5%
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	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%
2022	2,917	\$27,425,825	\$18,636,290	\$10,283,239	\$2,707,596	\$0	\$31,627,125	-\$4,201,300	\$826.06	115.3%
2023 YTD	3,039	\$12,636,000	\$7,350,736	\$4,621,112	\$1,175,259	\$0	\$13,147,106	-\$511,107	\$787.83	104.0%
Current 12 Months	2,994	\$28,985,497	\$19,330,736	\$10,848,648	\$2,778,672	\$0	\$32,958,055	-\$3,972,558	\$840.00	113.7%

Data Sources:

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

**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
County of Tulare - PPO**





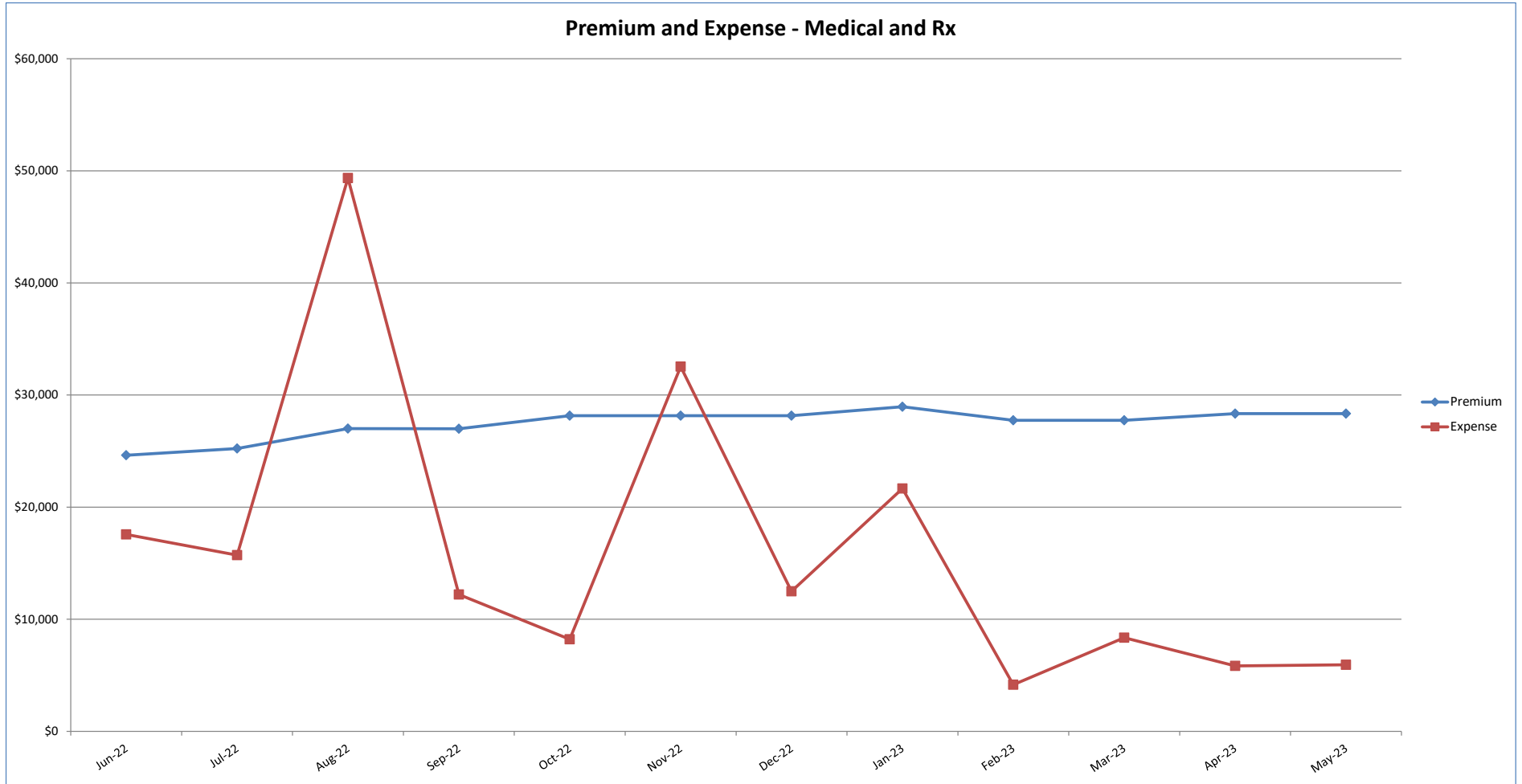
San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
County of Tulare - HDHP

MONTH-YEAR	ENROLLED	FUNDING / PREMIUM	CLAIMS EXPENSE					SURPLUS / (DEFICIT)	AVERAGE CLAIM COST PEPM	TOTAL EXPENSE LOSS RATIO
			MEDICAL	RX	FIXED	POOLED CLAIMS	TOTAL EXPENSE			
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%
Jan-22	35	\$24,051	\$7,156	-\$346	\$2,707	\$0	\$9,516	\$14,535	\$194.55	39.6%
Feb-22	37	\$25,787	\$2,334	\$107	\$2,862	\$0	\$5,303	\$20,484	\$65.98	20.6%
Mar-22	37	\$25,787	\$3,510	\$90	\$2,862	\$0	\$6,462	\$19,325	\$97.31	25.1%
Apr-22	37	\$25,787	\$3,084	\$38	\$2,862	\$0	\$5,983	\$19,804	\$84.36	23.2%
May-22	36	\$24,630	\$38,842	\$23,627	\$2,784	\$0	\$65,253	-\$40,624	\$1,735.25	264.9%
Jun-22	36	\$24,630	\$14,806	-\$19	\$2,784	\$0	\$17,571	\$7,059	\$410.74	71.3%
Jul-22	36	\$25,237	\$11,300	\$1,638	\$2,784	\$0	\$15,722	\$9,514	\$359.40	62.3%
Aug-22	37	\$27,000	\$23,258	\$23,229	\$2,862	\$0	\$49,349	-\$22,348	\$1,256.41	182.8%
Sep-22	37	\$27,000	\$5,621	\$3,730	\$2,862	\$0	\$12,212	\$14,788	\$252.72	45.2%
Oct-22	38	\$28,157	\$4,396	\$878	\$2,939	\$0	\$8,213	\$19,944	\$138.80	29.2%
Nov-22	38	\$28,157	\$9,036	\$20,568	\$2,939	\$0	\$32,543	-\$4,386	\$779.06	115.6%
Dec-22	38	\$28,157	\$3,709	\$5,840	\$2,939	\$0	\$12,488	\$15,669	\$251.29	44.4%
Jan-23	38	\$28,958	\$18,631	\$97	\$2,939	\$0	\$21,667	\$7,291	\$492.85	74.8%
Feb-23	36	\$27,743	\$414	\$962	\$2,784	\$0	\$4,160	\$23,582	\$38.23	15.0%
Mar-23	36	\$27,743	\$3,467	\$2,104	\$2,784	\$0	\$8,356	\$19,387	\$154.77	30.1%
Apr-23	37	\$28,350	\$1,146	\$1,837	\$2,862	\$0	\$5,844	\$22,506	\$80.61	20.6%
May-23	37	\$28,350	\$2,991	\$86	\$2,862	\$0	\$5,939	\$22,411	\$83.18	20.9%
2020	35	\$321,740	\$558,672	\$94,761	\$31,095	\$0	\$684,528	-\$362,788	\$1,552.10	212.8%
2021	33	\$286,628	\$155,535	\$79,489	\$30,163	\$0	\$265,186	\$21,442	\$602.62	92.5%
2022	37	\$314,379	\$127,051	\$79,380	\$34,184	\$0	\$240,616	\$73,764	\$467.04	76.5%
2023 YTD	37	\$141,144	\$26,650	\$5,087	\$14,231	\$0	\$45,967	\$95,177	\$172.48	32.6%
Current 12 Months	37	\$329,483	\$98,776	\$60,951	\$34,339	\$0	\$194,065	\$135,417	\$359.74	58.9%

Data Sources:

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

**San Joaquin Valley Insurance Authority (SJVIA)
Anthem Blue Cross Premium and Claims Report as of May 2023
County of Tulare - HDHP**



Appendix

Fixed Cost Schedule				
SJVIA	Anthem Blue Cross Premium and Claims Report as of May 2023			
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 May 2023
County of Fresno and County of Tulare

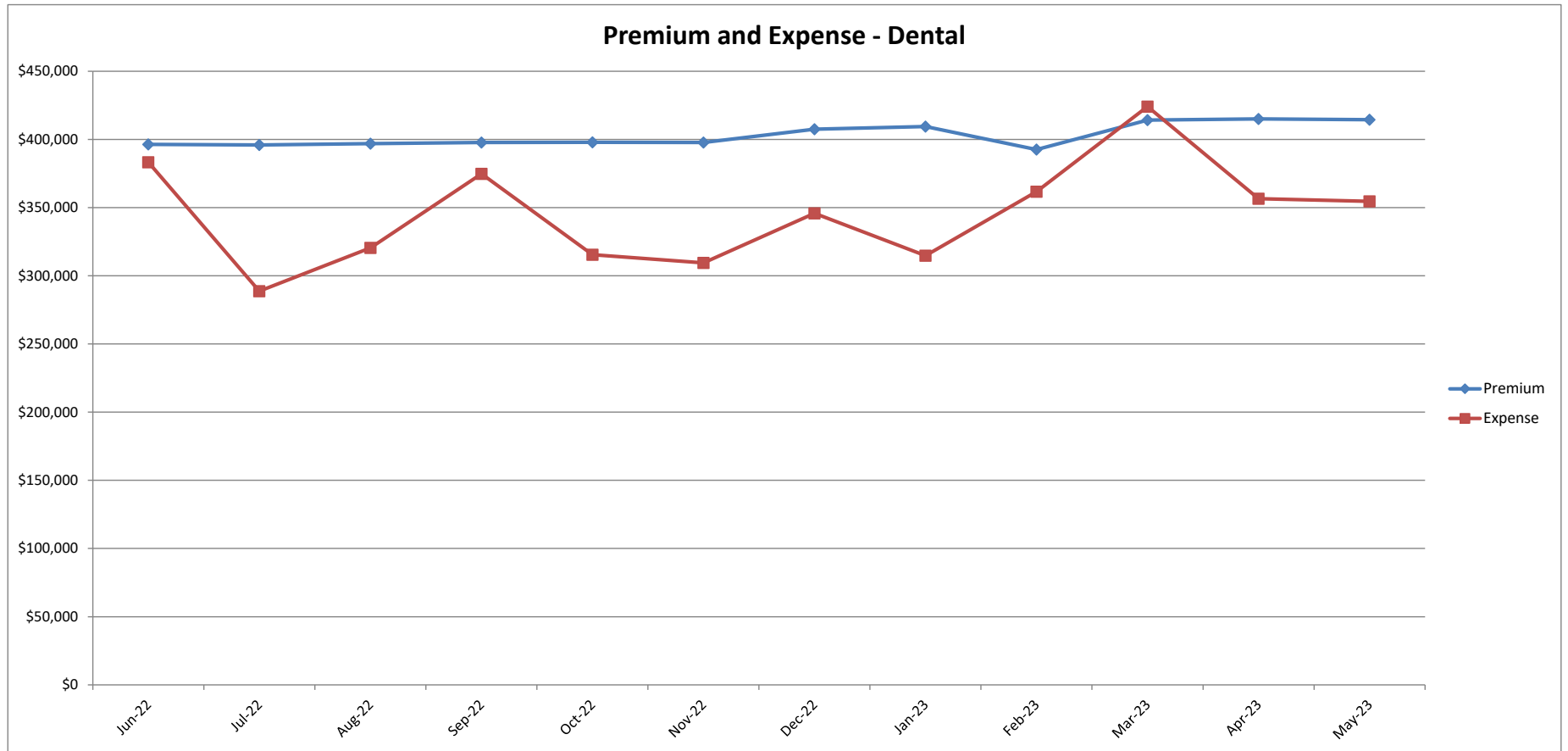
MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	DELTA ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
Jun-21	7,293	\$397,242	\$274,857	\$28,224	\$303,081	\$94,161	76.30%
Jul-21	7,294	\$397,249	\$370,180	\$28,228	\$398,408	-\$1,159	100.29%
Aug-21	7,297	\$397,422	\$302,814	\$28,239	\$331,053	\$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%
Jan-22	7,306	\$400,454	\$256,345	\$28,274	\$284,620	\$115,834	71.07%
Feb-22	7,291	\$399,860	\$307,158	\$28,216	\$335,374	\$64,486	83.87%
Mar-22	7,266	\$397,815	\$428,376	\$28,119	\$456,495	-\$58,680	114.75%
Apr-22	7,233	\$395,836	\$321,532	\$27,992	\$349,524	\$46,313	88.30%
May-22	7,250	\$397,113	\$328,205	\$28,058	\$356,262	\$40,850	89.71%
Jun-22	7,243	\$396,382	\$355,298	\$28,030	\$383,328	\$13,054	96.71%
Jul-22	7,232	\$396,018	\$260,768	\$27,988	\$288,756	\$107,262	72.91%
Aug-22	7,248	\$396,999	\$292,444	\$28,050	\$320,494	\$76,505	80.73%
Sep-22	7,270	\$397,815	\$346,657	\$28,135	\$374,792	\$23,023	94.21%
Oct-22	7,281	\$397,925	\$287,346	\$28,177	\$315,523	\$82,402	79.29%
Nov-22	7,270	\$397,831	\$281,353	\$28,135	\$309,488	\$88,343	77.79%
Dec-22	7,423	\$407,470	\$317,107	\$28,727	\$345,834	\$61,637	84.87%
Jan-23	7,459	\$409,403	\$285,958	\$28,866	\$314,824	\$94,579	76.90%
Feb-23	7,503	\$392,579	\$332,646	\$29,037	\$361,682	\$30,896	92.13%
Mar-23	7,532	\$414,177	\$394,962	\$29,149	\$424,111	-\$9,934	102.40%
Apr-23	7,549	\$415,062	\$327,314	\$29,215	\$356,529	\$58,533	85.90%
May-23	7,541	\$414,435	\$325,434	\$29,184	\$354,617	\$59,818	85.57%
2020	7,296	\$4,818,580	\$3,558,380	\$338,846	\$3,897,225	\$921,355	80.88%
2021	7,295	\$4,771,036	\$3,966,248	\$338,780	\$4,305,028	\$466,008	90.23%
2022	7,276	\$4,781,517	\$3,782,588	\$337,901	\$4,120,490	\$661,028	86.18%
2023 YTD	7,517	\$2,045,656	\$1,666,313	\$145,450	\$1,811,764	\$233,892	88.57%
Current 12 Months	7,379	\$4,836,096	\$3,807,286	\$342,692	\$4,149,978	\$686,117	85.81%

Data Sources: Delta Dental Financial Report Package, MyWorkplace

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: Effective 1/1/2022 through 12/31/2023 the Dental PPO ASO fee is \$4.19
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 May 2023
County of Fresno and County of Tulare**





San Joaquin Valley Insurance Authority (SJVIA)
Delta Dental Premium and Claims Report as of May 2023
County of Fresno

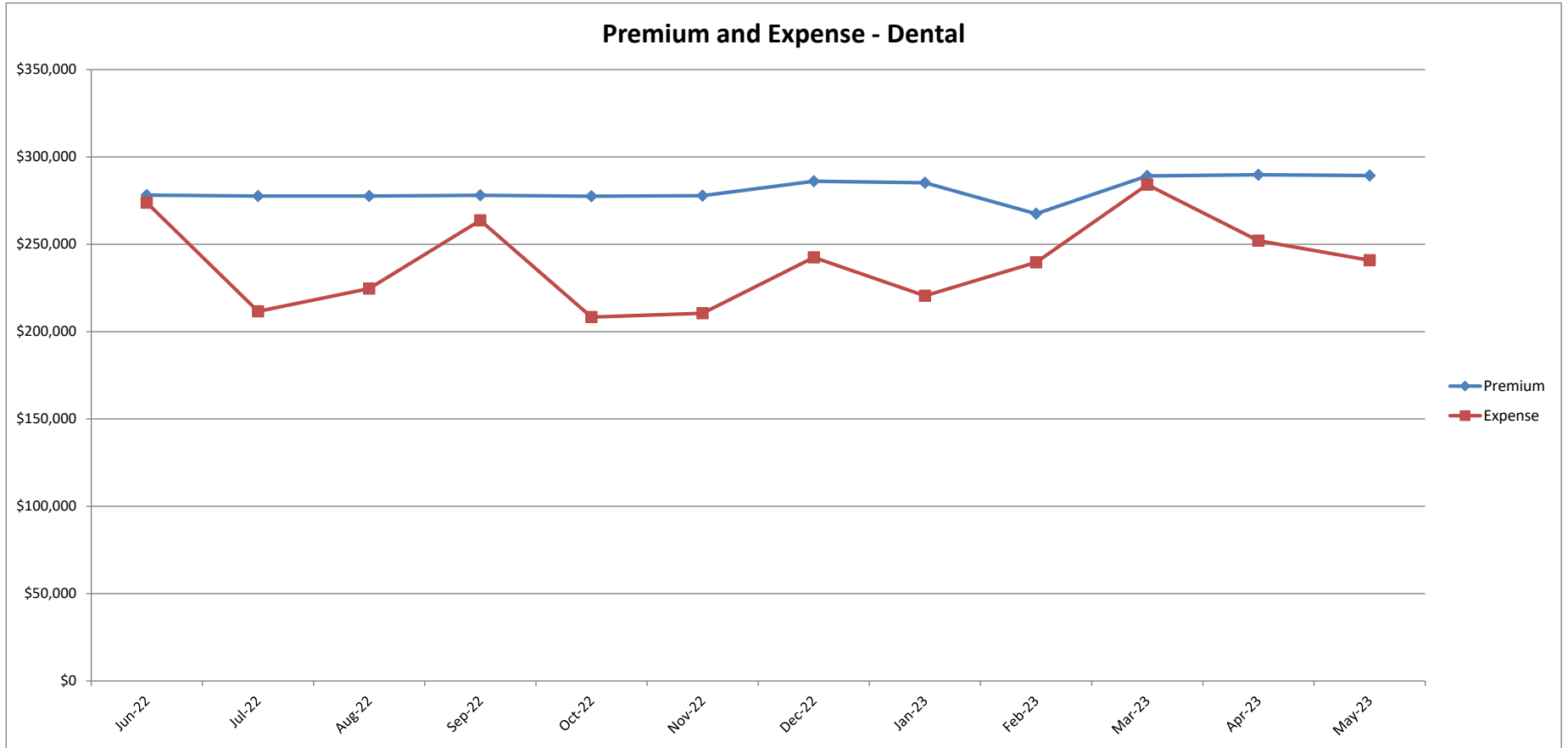
MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	DELTA ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
Jun-21	4,681	\$284,648	\$207,906	\$18,115	\$226,022	\$58,626	79.40%
Jul-21	4,672	\$283,978	\$265,448	\$18,081	\$283,529	\$449	99.84%
Aug-21	4,675	\$284,026	\$208,203	\$18,092	\$226,296	\$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%
Jan-22	4,661	\$281,483	\$167,223	\$18,038	\$185,261	\$96,222	65.82%
Feb-22	4,643	\$280,631	\$207,159	\$17,968	\$225,128	\$55,503	80.22%
Mar-22	4,630	\$279,228	\$292,166	\$17,918	\$310,084	-\$30,856	111.05%
Apr-22	4,594	\$277,518	\$225,770	\$17,779	\$243,549	\$33,969	87.76%
May-22	4,621	\$278,873	\$236,071	\$17,883	\$253,954	\$24,919	91.06%
Jun-22	4,611	\$278,151	\$255,946	\$17,845	\$273,791	\$4,360	98.43%
Jul-22	4,603	\$277,581	\$193,741	\$17,814	\$211,555	\$66,026	76.21%
Aug-22	4,601	\$277,653	\$206,848	\$17,806	\$224,654	\$52,999	80.91%
Sep-22	4,612	\$278,055	\$245,891	\$17,848	\$263,739	\$14,316	94.85%
Oct-22	4,615	\$277,537	\$190,459	\$17,860	\$208,320	\$69,218	75.06%
Nov-22	4,612	\$277,816	\$192,713	\$17,848	\$210,562	\$67,254	75.79%
Dec-22	4,734	\$286,089	\$224,117	\$18,321	\$242,438	\$43,651	84.74%
Jan-23	4,718	\$285,189	\$202,249	\$18,259	\$220,508	\$64,681	77.32%
Feb-23	4,746	\$267,461	\$221,324	\$18,367	\$239,691	\$27,770	89.62%
Mar-23	4,786	\$289,084	\$265,604	\$18,522	\$284,126	\$4,958	98.28%
Apr-23	4,801	\$289,801	\$233,464	\$18,580	\$252,044	\$37,758	86.97%
May-23	4,794	\$289,355	\$222,295	\$18,553	\$240,848	\$48,507	83.24%
2020	4,696	\$3,481,998	\$2,517,998	\$218,094	\$2,736,092	\$745,906	78.58%
2021	4,680	\$3,413,756	\$2,800,017	\$217,324	\$3,017,340	\$396,416	88.39%
2022	4,628	\$3,350,615	\$2,638,106	\$214,928	\$2,853,034	\$497,581	85.15%
2023 YTD	4,769	\$1,420,890	\$1,144,937	\$92,280	\$1,237,217	\$183,674	87.07%
Current 12 Months	4,686	\$3,373,772	\$2,654,653	\$217,622	\$2,872,274	\$501,498	85.14%

Data Sources: Delta Dental Financial Report Package, MyWorkplace

Note:

1. The number of primary enrollees may change to include retroactive additions and/or deletions in eligibility.
2. Delta Admin Fee: Effective 1/1/2022 through 12/31/2023 the Dental PPO ASO fee is \$4.19
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 May 2023
County of Fresno**





San Joaquin Valley Insurance Authority (SJVIA)
Delta Dental Premium and Claims Report as of May 2023
County of Tulare

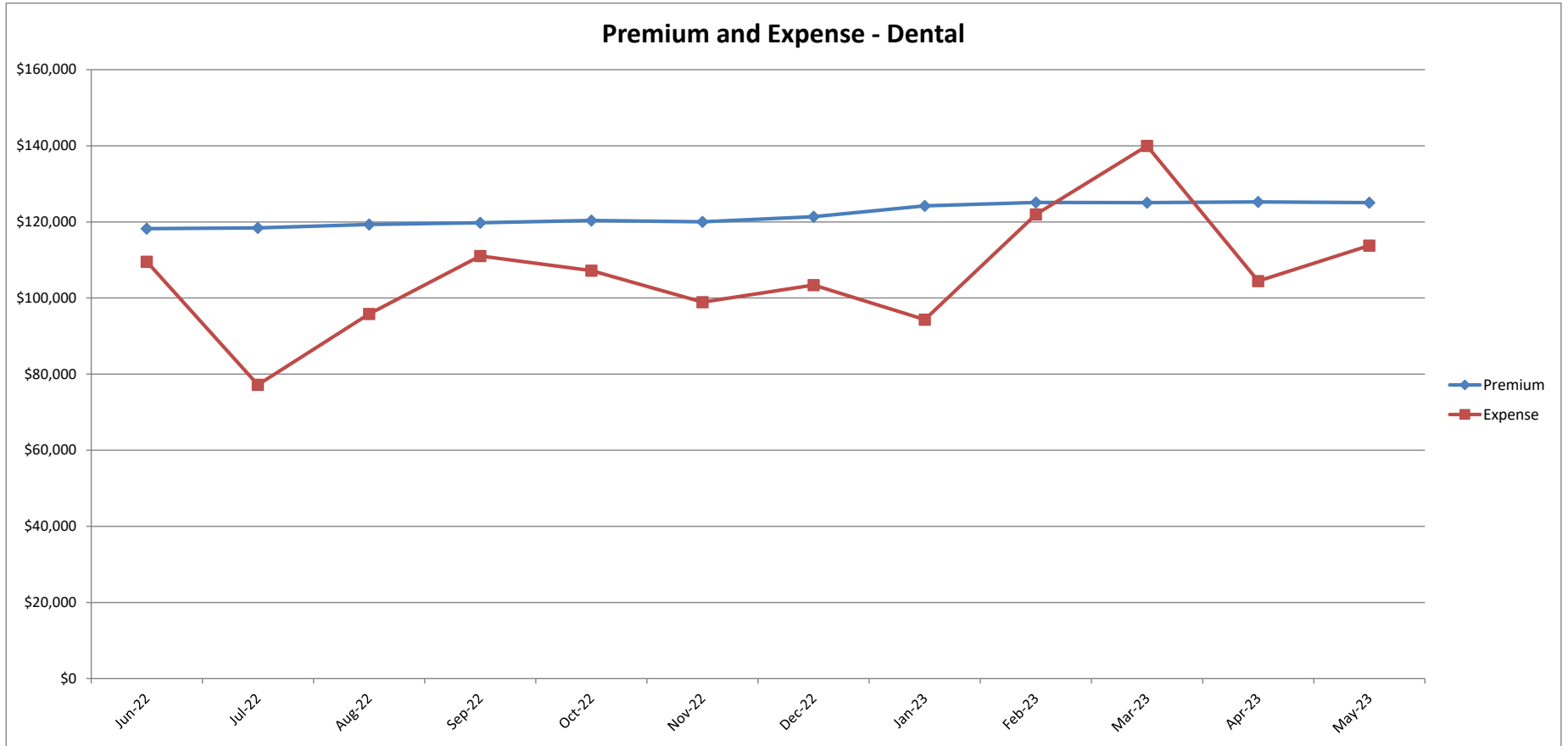
MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	DELTA ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
Jun-21	2,612	\$112,594	\$66,950	\$10,108	\$77,059	\$35,535	68.44%
Jul-21	2,622	\$113,271	\$104,732	\$10,147	\$114,879	-\$1,608	101.42%
Aug-21	2,622	\$113,396	\$94,610	\$10,147	\$104,758	\$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%
Jan-22	2,645	\$118,970	\$89,122	\$10,236	\$99,358	\$19,612	83.52%
Feb-22	2,648	\$119,229	\$99,998	\$10,248	\$110,246	\$8,983	92.47%
Mar-22	2,636	\$118,587	\$136,210	\$10,201	\$146,411	-\$27,824	123.46%
Apr-22	2,639	\$118,318	\$95,762	\$10,213	\$105,975	\$12,343	89.57%
May-22	2,629	\$118,239	\$92,134	\$10,174	\$102,308	\$15,931	86.53%
Jun-22	2,632	\$118,231	\$99,352	\$10,186	\$109,538	\$8,694	92.65%
Jul-22	2,629	\$118,437	\$67,027	\$10,174	\$77,201	\$41,236	65.18%
Aug-22	2,647	\$119,346	\$85,596	\$10,244	\$95,840	\$23,506	80.30%
Sep-22	2,658	\$119,759	\$100,766	\$10,286	\$111,052	\$8,707	92.73%
Oct-22	2,666	\$120,388	\$96,887	\$10,317	\$107,204	\$13,184	89.05%
Nov-22	2,658	\$120,015	\$88,640	\$10,286	\$98,926	\$21,089	82.43%
Dec-22	2,689	\$121,381	\$92,990	\$10,406	\$103,396	\$17,985	85.18%
Jan-23	2,741	\$124,214	\$83,709	\$10,608	\$94,316	\$29,898	75.93%
Feb-23	2,757	\$125,118	\$111,322	\$10,670	\$121,991	\$3,126	97.50%
Mar-23	2,746	\$125,092	\$129,358	\$10,627	\$139,985	-\$14,892	111.91%
Apr-23	2,748	\$125,261	\$93,850	\$10,635	\$104,485	\$20,776	83.41%
May-23	2,747	\$125,080	\$103,138	\$10,631	\$113,769	\$11,311	90.96%
2020	2,600	\$1,336,582	\$1,040,382	\$120,752	\$1,161,134	\$175,448	86.87%
2021	2,615	\$1,357,280	\$1,166,232	\$121,456	\$1,287,688	\$69,593	94.87%
2022	2,648	\$1,430,902	\$1,144,483	\$122,973	\$1,267,456	\$163,447	88.58%
2023 YTD	2,748	\$624,766	\$521,377	\$53,170	\$574,547	\$50,219	91.96%
Current 12 Months	2,693	\$1,462,323	\$1,152,634	\$125,071	\$1,277,704	\$184,619	87.37%

Data Sources: Delta Dental Financial Report Package, MyWorkplace

Note:

1. The number of primary enrollees may change to include retroactive additions and/or deletions in eligibility.
2. Delta Admin Fee: Effective 1/1/2022 through 12/31/2023 the Dental PPO ASO fee is \$4.19
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 May 2023
County of Tulare**





**San Joaquin Valley Insurance Authority (SJVIA)
VSP Premium and Claims Report as of May 2023
County of Fresno and County of Tulare**

MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	VSP ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
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%
Jan-22	7,184	\$62,230	\$49,541	\$8,090	\$57,631	\$4,598	92.61%
Feb-22	7,174	\$62,040	\$42,443	\$8,065	\$50,509	\$11,532	81.41%
Mar-22	7,140	\$61,700	\$54,419	\$8,021	\$62,440	-\$740	101.20%
Apr-22	7,107	\$61,441	\$48,056	\$7,987	\$56,043	\$5,397	91.22%
May-22	7,084	\$61,144	\$46,179	\$7,949	\$54,127	\$7,017	88.52%
Jun-22	7,131	\$61,179	\$47,233	\$7,953	\$55,186	\$5,993	90.20%
Jul-22	7,103	\$61,323	\$42,981	\$7,972	\$50,953	\$10,370	83.09%
Aug-22	7,103	\$61,373	\$51,874	\$7,979	\$59,853	\$1,520	97.52%
Sep-22	7,111	\$61,420	\$42,926	\$7,985	\$50,911	\$10,509	82.89%
Oct-22	7,116	\$61,407	\$44,493	\$7,983	\$52,476	\$8,931	85.46%
Nov-22	7,162	\$61,862	\$44,617	\$8,042	\$52,659	\$9,203	85.12%
Dec-22	7,224	\$62,402	\$43,471	\$8,112	\$51,583	\$10,819	82.66%
Jan-23	7,314	\$63,156	\$49,414	\$8,210	\$57,624	\$5,532	91.24%
Feb-23	7,277	\$62,850	\$47,869	\$8,170	\$56,040	\$6,810	89.16%
Mar-23	7,366	\$63,531	\$53,620	\$8,259	\$61,879	\$1,652	97.40%
Apr-23	7,335	\$63,387	\$48,334	\$8,240	\$56,574	\$6,813	89.25%
May-23	7,380	\$63,677	\$50,556	\$8,278	\$58,834	\$4,843	92.39%
2020	7,209	\$745,135	\$543,914	\$96,868	\$640,781	\$104,354	86.00%
2021	7,139	\$736,270	\$589,671	\$95,715	\$685,386	\$50,883	93.09%
2022	7,137	\$739,521	\$558,234	\$96,138	\$654,371	\$85,150	88.49%
2023 YTD	7,334	\$316,600	\$249,792	\$41,158	\$290,950	\$25,650	91.90%
Current 12 Months	7,219	\$747,567	\$567,387	\$97,184	\$664,571	\$82,996	88.90%

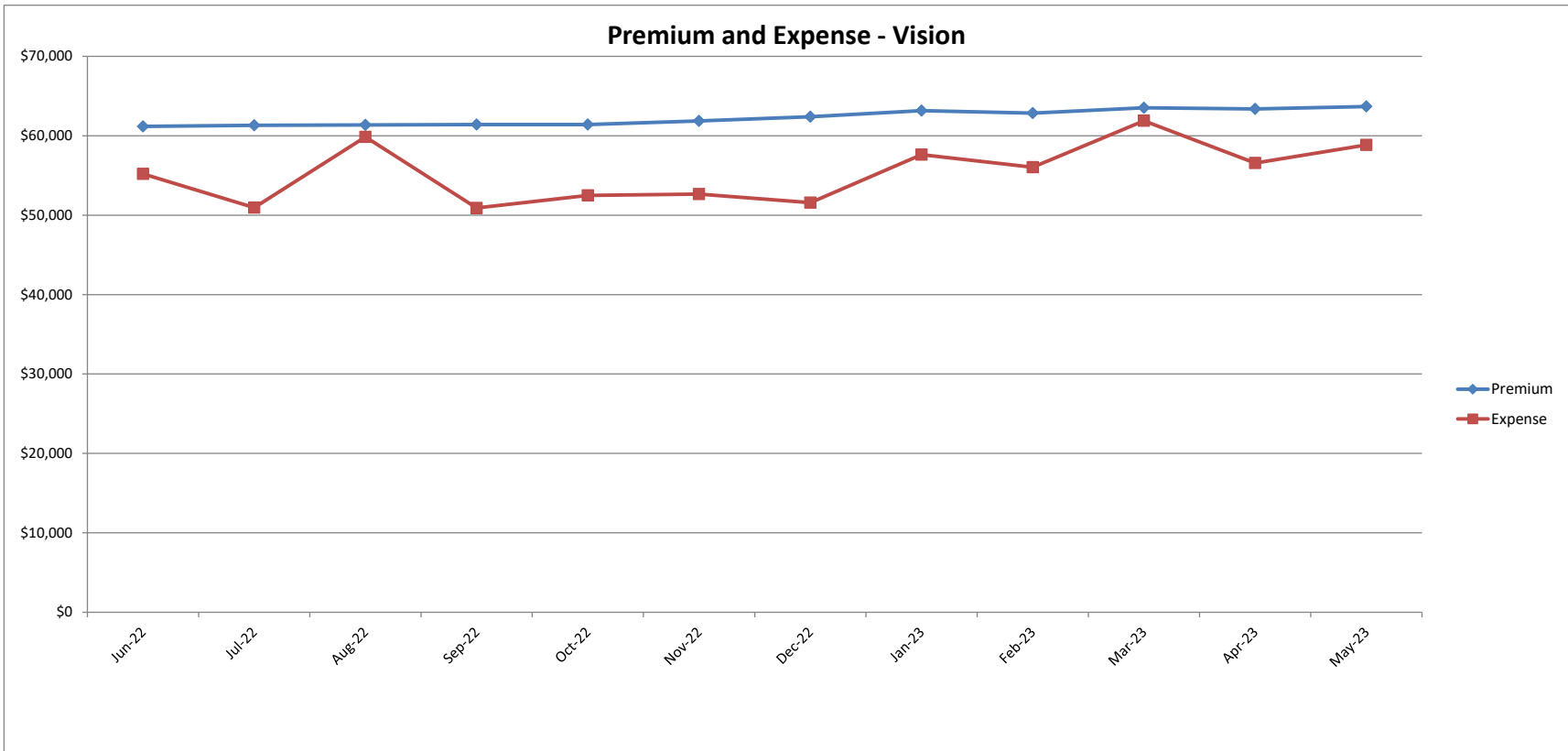
Data Source: VSP SJVIA Utilization Reports

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 May 2023
County of Fresno and County of Tulare





San Joaquin Valley Insurance Authority (SJVIA)
VSP Premium and Claims Report as of May 2023
County of Fresno

MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	VSP ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
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%
Jan-22	4,319	\$45,027	\$34,945	\$5,854	\$40,798	\$4,229	90.61%
Feb-22	4,291	\$44,738	\$27,532	\$5,816	\$33,348	\$11,391	74.54%
Mar-22	4,274	\$44,505	\$39,054	\$5,786	\$44,840	-\$335	100.75%
Apr-22	4,263	\$44,393	\$31,866	\$5,771	\$37,637	\$6,756	84.78%
May-22	4,233	\$44,077	\$30,024	\$5,730	\$35,754	\$8,323	81.12%
Jun-22	4,261	\$44,340	\$30,797	\$5,764	\$36,561	\$7,778	82.46%
Jul-22	4,255	\$44,207	\$30,398	\$5,747	\$36,145	\$8,062	81.76%
Aug-22	4,256	\$44,251	\$32,461	\$5,753	\$38,213	\$6,038	86.36%
Sep-22	4,252	\$44,220	\$28,582	\$5,749	\$34,330	\$9,889	77.64%
Oct-22	4,243	\$44,086	\$25,827	\$5,731	\$31,558	\$12,528	71.58%
Nov-22	4,283	\$44,493	\$28,274	\$5,784	\$34,058	\$10,435	76.55%
Dec-22	4,318	\$44,880	\$28,407	\$5,834	\$34,241	\$10,639	76.30%
Jan-23	4,361	\$45,341	\$31,951	\$5,894	\$37,845	\$7,496	83.47%
Feb-23	4,342	\$45,107	\$29,690	\$5,864	\$35,554	\$9,553	78.82%
Mar-23	4,397	\$45,578	\$35,778	\$5,925	\$41,703	\$3,875	91.50%
Apr-23	4,407	\$45,662	\$32,810	\$5,936	\$38,746	\$6,917	84.85%
May-23	4,423	\$45,765	\$31,182	\$5,949	\$37,132	\$8,633	81.14%
2020	4,317	\$543,302	\$366,377	\$70,629	\$437,006	\$106,296	80.44%
2021	4,274	\$534,071	\$399,728	\$69,429	\$469,158	\$64,913	87.85%
2022	4,271	\$533,217	\$368,166	\$69,318	\$437,485	\$95,733	82.05%
2023 YTD	4,386	\$227,453	\$161,410	\$29,569	\$190,979	\$36,474	83.96%
Current 12 Months	4,301	\$536,242	\$364,998	\$69,711	\$434,709	\$101,533	81.07%

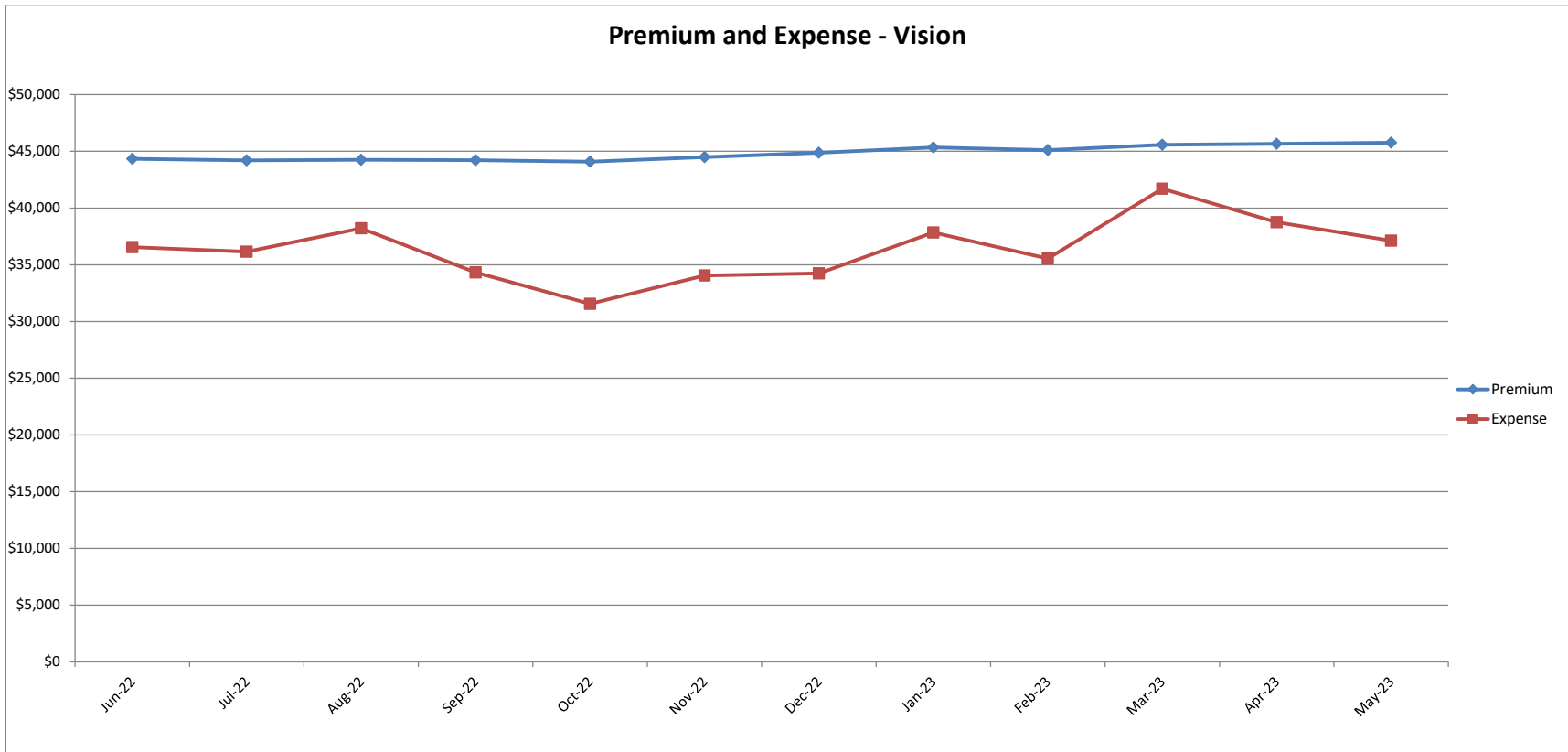
Data Source: VSP SJVIA Utilization Reports

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 May 2023
County of Fresno





**San Joaquin Valley Insurance Authority (SJVIA)
VSP Premium and Claims Report as of May 2023
County of Tulare**

MONTH-YEAR	ENROLLED	FUNDING/ PREMIUM	PAID CLAIMS	VSP ADMIN	TOTAL EXPENSE	SURPLUS / (DEFICIT)	TOTAL EXPENSE LOSS RATIO
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%
Jan-22	2,865	\$17,202	\$14,597	\$2,236	\$16,833	\$369	97.85%
Feb-22	2,883	\$17,302	\$14,912	\$2,249	\$17,161	\$141	99.18%
Mar-22	2,866	\$17,195	\$15,365	\$2,235	\$17,600	-\$405	102.35%
Apr-22	2,844	\$17,048	\$16,190	\$2,216	\$18,407	-\$1,359	107.97%
May-22	2,851	\$17,068	\$16,155	\$2,219	\$18,374	-\$1,306	107.65%
Jun-22	2,870	\$16,839	\$16,436	\$2,189	\$18,625	-\$1,786	110.60%
Jul-22	2,848	\$17,116	\$12,583	\$2,225	\$14,808	\$2,308	86.51%
Aug-22	2,847	\$17,122	\$19,414	\$2,226	\$21,640	-\$4,518	126.39%
Sep-22	2,859	\$17,201	\$14,345	\$2,236	\$16,581	\$620	96.40%
Oct-22	2,873	\$17,321	\$18,666	\$2,252	\$20,918	-\$3,597	120.76%
Nov-22	2,879	\$17,369	\$16,343	\$2,258	\$18,601	-\$1,232	107.09%
Dec-22	2,906	\$17,522	\$15,064	\$2,278	\$17,342	\$180	98.97%
Jan-23	2,953	\$17,814	\$17,463	\$2,316	\$19,779	-\$1,964	111.03%
Feb-23	2,935	\$17,743	\$18,179	\$2,307	\$20,486	-\$2,743	115.46%
Mar-23	2,969	\$17,953	\$17,842	\$2,334	\$20,176	-\$2,223	112.38%
Apr-23	2,928	\$17,725	\$15,524	\$2,304	\$17,828	-\$104	100.58%
May-23	2,957	\$17,912	\$19,374	\$2,329	\$21,702	-\$3,790	121.16%
2020	2,892	\$201,832	\$177,537	\$26,238	\$203,775	-\$1,943	100.96%
2021	2,865	\$202,199	\$189,943	\$26,286	\$216,229	-\$14,030	106.94%
2022	2,866	\$206,304	\$190,067	\$26,820	\$216,887	-\$10,583	105.13%
2023 YTD	2,948	\$89,147	\$88,382	\$11,589	\$99,971	-\$10,824	112.14%
Current 12 Months	2,893	\$208,792	\$198,012	\$27,143	\$225,155	-\$16,363	107.84%

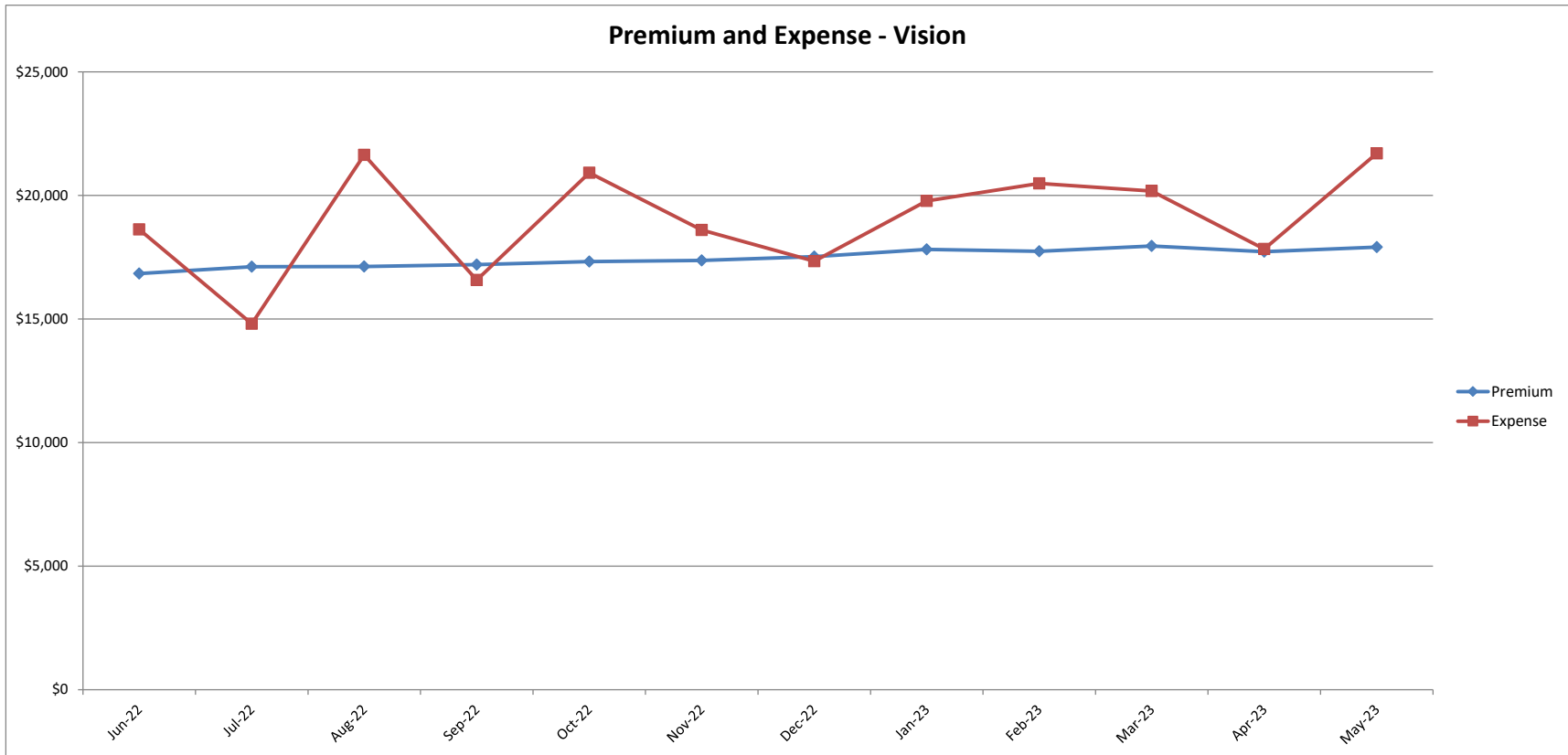
Data Source: VSP SJVIA Utilization Reports

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 May 2023
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: July 27, 2023
ITEM NUMBER: Item 10
SUBJECT: Adopt Budget for Fiscal Year 2023-2024 (A)
REQUEST(S): That the Board adopt the proposed 2023-2024 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 all entities currently participating in the SJVIA.

The proposed budget compares projected revenue to projected expenditures including:


- Fixed costs,
- Claim cost, and
- Fully insured premium

Projections are based on 2023 contracts in place, 2024 renewal requests, and current enrollment.

FISCAL IMPACT/FINANCING:

The budget proposes revenue and expense projections of \$129,518,751 and \$128,007,468 respectively, for a \$1,511,283 balance for the 2023-2024 fiscal year. The balance is based on margin applied to the SJVIA coverage.

ADMINISTRATIVE SIGN-OFF:



Lupe Garza
SJVIA Manager



Hollis Magill
SJVIA Assistant Manager

SAN JOAQUIN VALLEY INSURANCE AUTHORITY
2023/2024 FISCAL YEAR FINAL BUDGET - 07.27.23

	July 1, 2023 - Dec 31,2023	Jan 1, 2024 - June 30, 2024	July 1, 2023 - June 30, 2024
RECEIPTS			
SJVIA Health Plan Revenue	\$ 62,187,618	\$ 67,331,133	\$ 129,518,751
DISBURSEMENTS: Fixed			
1 Specific Stop Loss Insurance	\$ 911,618	\$ 1,056,471	\$ 1,968,089
2 Anthem Claims Administration & Network Fees	\$ 1,626,324	\$ 1,647,295	\$ 3,273,619
3 EmpiRx Administration Fee	\$ 143,374	\$ 171,436	\$ 314,810
4 Keenan Pharmacy Services Fee	\$ 82,172	\$ 68,019	\$ 150,191
5 Myworkplace (Hourglass) Administration	\$ 152,708	\$ 158,171	\$ 310,879
6 ASI Administration	\$ 72,840	\$ 72,840	\$ 145,680
7 Keenan Consulting	\$ 134,938	\$ 134,573	\$ 269,511
8 SJVIA Administration	\$ 111,060	\$ 111,060	\$ 222,120
9 Wellness	\$ 138,825	\$ 138,825	\$ 277,650
10 Communications	\$ 27,765	\$ 27,765	\$ 55,530
11 Delta Dental Claims Administration	\$ 190,360	\$ 196,440	\$ 386,800
12 ACA Reinsurance/PCORI	\$ 16,998	\$ 16,142	\$ 33,140
13 98.6 Rider	\$ 65,833	\$ 68,029	\$ 133,862
TOTAL FIXED DISBURSEMENTS	\$ 3,674,815	\$ 3,867,066	\$ 7,541,881
DISBURSEMENTS: Claims			
14 Projected Paid Claims EPO/PPO/HDHP & RX	\$ 40,253,293	\$ 43,378,467	\$ 83,631,760
15 Projected Paid Claims Dental	\$ 2,306,786	\$ 2,300,706	\$ 4,607,492
TOTAL CLAIMS DISBURSEMENTS	\$ 42,560,079	\$ 45,679,173	\$ 88,239,252
DISBURSEMENTS: Premium			
16 Delta Dental DHMO	\$ 446,137	\$ 448,080	\$ 894,217
17 VSP	\$ 383,919	\$ 389,281	\$ 773,200
18 Kaiser Permanente	\$ 13,923,152	\$ 16,604,427	\$ 30,527,579
19 Kaiser Permanente - Senior Advantage	\$ 15,438	\$ 15,901	\$ 31,339
TOTAL PREMIUM DISBURSEMENTS	\$ 14,768,646	\$ 17,457,689	\$ 32,226,335
TOTAL DISBURSEMENTS	\$ 61,003,540	\$ 67,003,928	\$ 128,007,468
Balance	\$ 1,184,078	\$ 327,205	\$ 1,511,283

Glossary of Terms:

- 1 **Specific Stop Loss Insurance (PPO)**
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**
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)**
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.
- 14 **Projected Paid Claims EPO/PPO/HDHP & Rx**
Projected self-insured paid claims for medical and prescription drugs
- 15 **Projected Paid Claims Dental**
Projected self-insured paid claims for dental
- 12 **Delta Dental**
Premium for entities covered under the SJVIA's fully-insured Delta Dental DHMO program
- 13 **VSP**
Premium for entities covered under the SJVIA's fully-insured VSP Vision program
- 14 **Kaiser Permanente**
Premium for entities covered under the SJVIA's fully-insured Kaiser HMO and DHMO program
- 15 **Kaiser Permanente - Senior Advantage**
Premium for entities covered under the SJVIA's fully-insured Kaiser Senior Advantage program

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

AGENDA DATE: July 27, 2023

ITEM NUMBER: Item 12

SUBJECT: Receive Subcommittee Report and Recommendation and Take Action to Select Plan Year 2024 Self-Funded Medical and Prescription Drug Plan Vendors (A)

REQUEST(S): That the Board receive the Subcommittee Report and Recommendation and Authorize Plan Year 2024 Self-Funded Medical and Prescription Drug Plan Vendors.

DESCRIPTION:

Authorization was received at the May 5, 2023 SJVIA Board Meeting to hold finalist interviews for Plan Year 2024 Health Plan and Prescription Drug Plan vendors. Finalist vendors included:

- Medical ASO/ASC/TPA Vendors
 - Aetna
 - Anthem
 - Blue Shield of California
 - HealthComp

- Prescription Drug PBM Vendors
 - Aetna (CVS)
 - EmpiRx

After interviews and discussion, the subcommittee (comprised of SJVIA Manager, SJVIA Assistant Manager and County Administrative Officers from the County of Fresno and County of Tulare) reconvened to determine a final recommendation for SJVIA Board approval.

AGENDA: San Joaquin Valley Insurance Authority

DATE: July 27, 2023

The recommendation of the subcommittee is to stay with the incumbent vendors due to the recent negotiated contract with Community Medical Centers, discounts, and least amount of disruption to membership.


FISCAL IMPACT/FINANCING:

None.

ADMINISTRATIVE SIGN-OFF:



Lupe Garza
SJVIA Manager



Hollis Magill
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: July 27, 2023

ITEM NUMBER: Item 13

SUBJECT: Receive Consultant’s Report on Plan Year 2024 Preliminary Renewal (I)

REQUEST(S): That the Board receive the consultant’s report on the Plan Year 2024 preliminary renewal and provide direction to finalize the renewal.

DESCRIPTION:

The preliminary renewal is presented to the SJVIA Board to provide a preview of the 2024 final renewal and an opportunity for the Board to give direction to staff and Keenan in preparing the final renewal.


On an overall basis, the SJVIA contract renewals have resulted in an increase of 8.15%:

- County of Fresno 6.75%,
- County of Tulare 11.60%

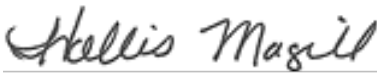
FISCAL IMPACT/FINANCING:

Should the SJVIA Board adopt the preliminary 2024 plan year renewal, the increase in cost would be \$10,338,761 or 8.15%. Keenan will work with SJVIA staff to mitigate the cost increase in the final 2024 renewal.

ADMINISTRATIVE SIGN-OFF:



 Lupe Garza
 SJVIA Manager



 Hollis Magill
 SJVIA Assistant Manager

July 27, 2023

SJVIA Board Meeting: Consultant's Report 2024 Preliminary Renewal Report

Introduction

Keenan is pleased to present the SJVIA 2024 preliminary renewal. The preliminary renewal is prepared in accordance with SJVIA Board direction and standard insurance industry underwriting guidelines. Anthem Blue Cross medical, EmpiRx pharmacy, and Delta Dental PPO dental coverages are self-funded. Kaiser medical, Delta Dental DHMO, and VSP vision coverages are fully-insured.

The self-funded preliminary renewal is produced with the following factors:

- The self-funded medical plans are underwritten on the most recent 12 months of plan experience available from June 1, 2022 through May 31, 2023
- All self-funded coverage is underwritten based on its own claim experience; the plan experience is considered 100% credible
- Fixed cost components continue to be blended for both participating entities to receive overall economies of scale and reduced fixed costs
- The preliminary renewal assumes the continuation of the \$450,000 specific stop-loss deductible and a 20% increase in reinsurance cost
 - Please note, the stop loss market has hardened over the past year and we are using 20% to be conservative and are hopeful to finalize stop loss coverage below 20%; quotes will be solicited from the market for stop loss and staff will return at the December 2023 Board meeting with a complete analysis and recommendation
- The preliminary renewal includes the December 31, 2022 IBNR reserve level approved by the SJVIA Board at the February 18, 2023 SJVIA Board meeting; the final renewal will update the IBNR reserve with the June 30, 2022 actuarially-certified IBNR reserve calculations
- The 2024 rates include 1.0% margin for the County of Fresno and 1.0% margin for the County of Tulare; margin is available to cover adverse claim fluctuation and if unused, improves SJVIA's cash position

The preliminary renewal is presented to the SJVIA Board to provide a preview of the 2024 final renewal and an opportunity for the Board to give direction to staff and Keenan in preparing the final renewal. The final renewal will be based on the plan experience from July 1, 2022 through June 30, 2023 for the self-funded coverage. We will work with Keenan's underwriting team to ensure the medical and pharmacy renewal projections take into consideration the past plan performance and the impact of COVID-19 on the plans.

Executive Summary

Keenan is pleased to present the 2024 SJVIA preliminary renewal. On an overall basis, the SJVIA contract renewals have resulted in an increase of 8.15% (County of Fresno 6.75% and County of Tulare 11.60%). The following table illustrates the 2024 preliminary rate adjustments based on carrier requested renewals and standard underwriting practices:

Executive Summary	Preliminary Renewal			Comments
	COF	COT	SJVIA	
Self-Funded Medical EPO PPO / HDHP Total	5.40% -34.62% -0.08%	n/a 11.62% 11.62%	5.40% 2.47% 3.04%	The 2024 preliminary renewal rates include \$818,350 in margin (1.0%). Change in IBNR will be calculated in the final renewal when the June 30, 2022 actuarial certification of the IBNR reserve is done.
Kaiser HMO Deductible HMO	19.74% n/a	19.76% 19.80%	19.74% 19.80%	Kaiser is requesting a renewal increase of 19.74%. Kaiser's original renewal was 25%. SJVIA is one of the few entities in the state to receive rate relief. The rate relief is contingent upon Fresno County adding a HDHP plan offering. Kaiser declared that for 2024, higher increases would be realized after Kaiser realized a \$4.5 billion loss for 2022 (with \$1.3 billion being an operating loss).
Kaiser Senior Advantage Medicare	n/a	21.63%	21.635%	The 2023 Kaiser Medicare Senior Advantage rates follow the active plan with a 21.63% renewal request.
Delta Dental PPO DHMO	-5.32% 0.00%	5.67% 0.00%	-1.95% 0.00%	The 2024 preliminary renewal rate underwriting show a renewal rate decrease of 1.95%. This includes a 2.0% margin. DHMO rates held with a 0.00% 2024 renewal.
VSP	0.00%	0.00%	0.00%	The VSP rates remain unchanged with rates guaranteed from 2024 through 2026.

Executive Summary

The following chart illustrates the projected cost for 2023 and 2024, the dollar cost differential, and percentage differential based on the recommended renewal action.

County of Fresno	2023	2024	\$ Difference	% Difference
EPO	\$ 49,635,627	\$ 52,315,609	\$ 2,679,982	5.40%
PPO/HDHP	\$ 6,802,483	\$ 6,802,483	\$ -	0.00%
Total Anthem	\$ 56,438,110	\$ 59,118,092	\$ 2,679,982	4.75%
Kaiser	\$ 29,115,394	\$ 32,536,213	\$ 3,420,819	11.75%
Kaiser - KPSA	\$ -	\$ -	\$ -	0.00%
Total Medical	\$ 85,553,504	\$ 91,654,305	\$ 6,100,802	7.13%
Delta Dental PPO	\$ 3,494,587	\$ 3,494,587	\$ -	0.00%
Delta Dental DHMO	\$ 762,710	\$ 762,710	\$ -	0.00%
Total Dental	\$ 4,257,297	\$ 4,257,297	\$ -	0.00%
Vision	\$ 553,374	\$ 553,374	\$ -	0.00%
Grand Total	\$ 90,364,175	\$ 96,464,976	\$ 6,100,802	6.75%
County of Tulare	2023	2024	\$ Difference	% Difference
EPO	\$ -	\$ -	\$ -	0.00%
PPO/HDHP	\$ 31,026,140	\$ 34,631,424	\$ 3,605,284	11.62%
Total Anthem	\$ 31,026,140	\$ 34,631,424	\$ 3,605,284	11.62%
Kaiser	\$ 3,044,393	\$ 3,677,067	\$ 632,675	20.78%
Kaiser - KPSA	\$ 30,876	\$ 37,555	\$ 6,679	0.00%
Total Medical	\$ 34,070,533	\$ 38,308,491	\$ 4,237,959	12.44%
Delta Dental PPO	\$ 1,499,707	\$ 1,499,707	\$ -	0.00%
Delta Dental DHMO	\$ 762,710	\$ 762,710	\$ -	0.00%
Total Dental	\$ 2,262,417	\$ 2,262,417	\$ -	0.00%
Vision	\$ 214,464	\$ 214,464	\$ -	0.00%
Grand Total	\$ 36,547,414	\$ 40,785,372	\$ 4,237,959	11.60%
SJVIA	2023	2024	\$ Difference	% Difference
EPO	\$ 49,635,627	\$ 52,315,609	\$ 2,679,982	5.40%
PPO/HDHP	\$ 37,828,623	\$ 41,433,908	\$ 3,605,284	9.53%
Total Anthem	\$ 87,464,250	\$ 93,749,516	\$ 6,285,266	7.19%
Kaiser	\$ 32,159,786	\$ 36,213,280	\$ 4,053,494	12.60%
Kaiser - KPSA	\$ 30,876	\$ 37,555	\$ 6,679	0.00%
Total Medical	\$ 119,624,036	\$ 129,962,797	\$ 10,338,761	8.64%
Delta Dental PPO	\$ 4,994,294	\$ 4,994,294	\$ -	0.00%
Delta Dental DHMO	\$ 1,525,420	\$ 1,525,420	\$ -	0.00%
Total Dental	\$ 6,519,714	\$ 6,519,714	\$ -	0.00%
Vision	\$ 767,838	\$ 767,838	\$ -	0.00%
Grand Total	\$ 126,911,588	\$ 137,250,349	\$ 10,338,761	8.15%

Executive Summary

The 2024 plan year renewal cost adjustments for medical/prescription drug, dental, and vision by entity and SJVIA overall, are as follows:

- County of Fresno 6.75%
- County of Tulare 11.6%
- SJVIA 8.15%

The Kaiser renewal is driving a significant portion of these adjustments.

The self-funded program will utilize the most recent available twelve months of plan experience (through June 30, 2023) in the final renewal.

As Keenan prepares the final renewal, we will work with the SJVIA and each County to implement strategies to minimize increases to the cost of coverage. These strategies include:

- Further negotiations with carriers
- Renewal strategies focused to minimize renewal impacts on members
 - The County of Fresno's EPO/Kaiser parity strategy has been eliminated
 - The County of Tulare could apply a cross-subsidy strategy from the dental PPO, thus reducing the PPO/HDHP renewal
- Given that many of the claims realized over the experience period represent run-out COVID-related claims and/or members receiving care for surgeries and non-essential services postponed during the pandemic, it is difficult to project claims with a high degree of confidence. This has made the underwriting process very conservative. The SJVIA may want to consider a buy down strategy for rates to normalize the 2024 renewals, rather than passing on a higher rate increase to employees and their members. As an example, a 5.0% buy-down of the rates would be:
 - \$2,858,662 for the County of Fresno
 - \$1,516,504 for the County of Tulare
 - These funds would be funded from excess reserves and would only be realized if needed
- The self-funded plan's premium equivalent rates will be shown in conjunction with the final renewal

As the final 2024 renewal is prepared, Keenan will continue to include a component for margin accumulation to improve the SJVIA's cash position.

Self-funded Medical Underwriting EPO and PPO/HDHP

Line	EPO and PPO/HDHP Line Item/Description	Fresno			Tulare			Total		
		Medical	Rx	Total	Medical	Rx	Total	Medical	Rx	Total
1	Paid Claims (Jun 2021 through May 2022)	\$32,341,540	\$14,322,518	\$46,664,058	\$19,429,511	\$10,909,599	\$30,339,110	\$51,771,051	\$25,232,117	\$77,003,168
2	Claim Adjustments (CMC Claim Adjustment)	\$2,131,525	\$0	\$2,131,525	\$112,185	\$0	\$112,185	\$2,243,710	\$0	\$2,243,710
3	Plan Change Adjustments (Med ARPA, RX VCAP)	(\$1,088,993)	(\$707,442)	(\$1,796,435)	(\$640,279)	(\$614,562)	(\$1,254,841)	(\$1,729,272)	(\$1,322,004)	(\$3,051,276)
4	Rx Change Adjustments (Rx Rebates)	\$0	(\$2,267,211)	(\$2,267,211)	\$0	(\$1,732,789)	(\$1,732,789)	\$0	(\$4,000,000)	(\$4,000,000)
5	Large Claim Adjustment (Pooling Level: \$450,000)	<u>(\$527,684)</u>	<u>\$0</u>	<u>(\$527,684)</u>	<u>(\$16,920)</u>	<u>\$0</u>	<u>(\$16,920)</u>	<u>(\$544,604)</u>	<u>\$0</u>	<u>(\$544,604)</u>
6	Adjusted Paid Claims	\$32,856,388	\$11,347,865	\$44,204,253	\$18,884,497	\$8,562,248	\$27,446,745	\$51,740,885	\$19,910,113	\$71,650,998
7	Beginning Reserves @ 12/31/2022	(\$6,247,900)	(\$946,640)	(\$7,194,540)	(\$2,214,590)	(\$718,560)	(\$2,933,150)	(\$8,462,490)	(\$1,665,200)	(\$10,127,690)
8	<u>Ending Reserves @ 12/31/2022</u>	<u>\$6,247,900</u>	<u>\$946,640</u>	<u>\$7,194,540</u>	<u>\$2,214,590</u>	<u>\$718,560</u>	<u>\$2,933,150</u>	<u>\$8,462,490</u>	<u>\$1,665,200</u>	<u>\$10,127,690</u>
9	Incurred Claims (Jun 2021 through May 2022)	\$32,856,388	\$11,347,865	\$44,204,253	\$18,884,497	\$8,562,248	\$27,446,745	\$51,740,885	\$19,910,113	\$71,650,998
10	Total Covered Employees (Apr 2021 through Mar 2022)	<u>47,035</u>	<u>47,035</u>	<u>47,035</u>	<u>35,948</u>	<u>35,948</u>	<u>35,948</u>	<u>82,983</u>	<u>82,983</u>	<u>82,983</u>
11	Claims Cost PEPM	\$698.55	\$241.26	\$939.82	\$525.33	\$238.18	\$763.51	\$623.51	\$239.93	\$863.44
12	Trend Factor	<u>1.1101</u>	<u>1.1213</u>	<u>1.1129</u>	<u>1.1131</u>	<u>1.1213</u>	<u>1.1157</u>	<u>1.1112</u>	<u>1.1213</u>	<u>1.1140</u>
13	Projected Claims Cost Per Employee	\$775.43	\$270.53	\$1,045.96	\$584.74	\$267.08	\$851.82	\$692.83	\$269.03	\$961.86
14	<u>Recommended Funding Margin</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>
15	Adjusted Projected Claims	\$797.29	\$278.28	\$1,075.58	\$590.59	\$269.75	\$860.34	\$699.75	\$271.72	\$971.48
	Fixed Costs PEPM									
16	Specific Stop-Loss Premium PEPM (Estimate)			\$26.47			\$24.35			\$25.55
17	Aggregate Stop-Loss Premium PEPM (Estimate)			\$0.00			\$0.00			\$0.00
18	Anthem Network & Administrative Fees			\$38.00			\$38.00			\$38.00
19	All Other Program Fees			<u>\$20.28</u>			<u>\$18.28</u>			<u>\$19.42</u>
	Total Fixed Costs			\$84.76			\$80.63			\$82.97
20	Required Premium PEPM			\$1,160.34			\$940.97			\$1,054.45
21	Current Premium PEPM			\$1,161.24			\$843.01			\$1,023.39
22	Required Increase			-0.08%			11.62%			3.04%
23	Current Subscribers (June 2023)	4,023	4,023		3,067	3,067		7,090	7,090	
24	Base Trend	6.82%	7.50%		7.00%	7.50%		6.88%	7.50%	
25	Months Trended	19	19		19	19		19	19	

Self-funded Medical Underwriting EPO

Line	EPO Line Item/Description	Fresno			Tulare			Total		
		Medical	Rx	Total	Medical	Rx	Total	Medical	Rx	Total
1	Paid Claims (Jun 2021 through May 2022)	\$29,308,401	\$13,082,608	\$42,391,009				\$29,308,401	\$13,082,608	\$42,391,009
2	Claim Adjustments (CMC Claim Adjustment)	\$1,931,621	\$0	\$1,931,621				\$1,931,621	\$0	\$1,931,621
3	Plan Change Adjustments (Med ARPA, RX VCAP)	(\$986,862)	(\$646,198)	(\$1,633,060)				(\$986,862)	-\$646,198	(\$1,633,060)
4	Rx Change Adjustments (Rx Rebates)	\$0	\$ (1,847,077)	(\$1,847,077)				\$0	(\$1,847,077)	(\$1,847,077)
5	Large Claim Adjustment (Pooling Level: \$450,000)	<u>(\$445,226)</u>	<u>\$0</u>	<u>(\$445,226)</u>				<u>(\$445,226)</u>	<u>\$0</u>	<u>(\$445,226)</u>
6	Adjusted Paid Claims	\$29,807,934	\$10,589,333	\$40,397,267				\$29,807,934	\$10,589,333	\$40,397,267
7	Beginning Reserves @ 12/31/2022	(\$5,668,213)	(\$883,363)	(\$6,551,576)				(\$5,668,213)	(\$883,363)	(\$6,551,576)
8	<u>Ending Reserves @ 12/31/2022</u>	<u>\$5,668,213</u>	<u>\$883,363</u>	<u>\$6,551,576</u>				<u>\$5,668,213</u>	<u>\$883,363</u>	<u>\$6,551,576</u>
9	Incurred Claims (Jun 2021 through May 2022)	\$29,807,934	\$10,589,333	\$40,397,267				\$29,807,934	\$10,589,333	\$40,397,267
10	Total Covered Employees (Apr 2021 through Mar 2022)	<u>38,319</u>	<u>38,319</u>	<u>38,319</u>				<u>38,319</u>	<u>38,319</u>	<u>38,319</u>
11	Claims Cost PEPM	\$777.89	\$276.35	\$1,054.24				\$777.89	\$276.35	\$1,054.24
12	Trend Factor	<u>1.1131</u>	<u>1.1213</u>	<u>1.1152</u>				<u>1.1131</u>	<u>1.1213</u>	<u>1.1152</u>
13	Projected Claims Cost Per Employee	\$865.87	\$309.87	\$1,175.74				\$865.87	\$309.87	\$1,175.74
14	<u>Recommended Funding Margin</u>	<u>3.0%</u>	<u>3.0%</u>	<u>3.0%</u>				<u>3.0%</u>	<u>3.0%</u>	<u>3.0%</u>
15	Adjusted Projected Claims	\$891.84	\$319.16	\$1,211.01				\$891.84	\$319.16	\$1,211.01
	Fixed Costs PEPM									
16	Specific Stop-Loss Premium PEPM (Estimate)			\$27.44						\$27.44
17	Aggregate Stop-Loss Premium PEPM (Estimate)			\$0.00						\$0.00
18	Anthem Network & Administrative Fees			\$38.00						\$38.00
19	All Other Program Fees			<u>\$20.29</u>						<u>\$20.29</u>
	Total Fixed Costs			\$85.73						\$85.73
20	Required Premium PEPM			\$1,296.74						\$1,296.74
21	Current Premium PEPM			\$1,230.31						\$1,230.31
22	Required Increase			5.40%						5.40%
23	Current Subscribers (June 2023)	3,362	3,362					3,362	3,362	
24	Base Trend	7.00%	7.50%					7.00%	7.50%	
25	Months Trended	19	19					19	19	

Self-funded Medical Underwriting PPO/HDHP

Line	PPO/HDHP Line Item/Description	Fresno			Tulare			Total		
		Medical	Rx	Total	Medical	Rx	Total	Medical	Rx	Total
1	Paid Claims (Jun 2021 through May 2022)	\$3,033,139	\$1,239,910	\$4,273,049	\$19,429,511	\$10,909,599	\$30,339,110	\$22,462,650	\$12,149,509	\$34,612,159
2	Claim Adjustments (CMC Claim Adjustment)	\$199,904	\$0	\$199,904	\$112,185	\$0	\$112,185	\$312,089	\$0	\$312,089
3	Plan Change Adjustments (Med ARPA, RX VCAP)	(\$102,131)	(\$61,244)	(\$163,375)	(\$640,279)	(\$614,562)	(\$1,254,841)	(\$742,410)	(\$675,806)	(\$1,418,216)
4	Rx Change Adjustments (Rx Rebates)	\$0	\$ (420,134)	(\$420,134)	\$0	(\$1,732,789)	(\$1,732,789)	\$0	(\$2,152,923)	(\$2,152,923)
5	Large Claim Adjustment (Pooling Level: \$450,000)	<u>(\$82,458)</u>	<u>\$0</u>	<u>(\$82,458)</u>	<u>(\$16,920)</u>	<u>\$0</u>	<u>(\$16,920)</u>	<u>(\$99,378)</u>	<u>\$0</u>	<u>(\$99,378)</u>
6	Adjusted Paid Claims	\$3,048,454	\$758,532	\$3,806,986	\$18,884,497	\$8,562,248	\$27,446,745	\$21,932,951	\$9,320,780	\$31,253,731
7	Beginning Reserves @ 12/31/2022	(\$579,687)	(\$63,277)	(\$642,964)	(\$2,214,590)	(\$718,560)	(\$2,933,150)	(\$2,794,277)	(\$781,837)	(\$3,576,114)
8	Ending Reserves @ 12/31/2022	<u>\$579,687</u>	<u>\$63,277</u>	<u>\$642,964</u>	<u>\$2,214,590</u>	<u>\$718,560</u>	<u>\$2,933,150</u>	<u>\$2,794,277</u>	<u>\$781,837</u>	<u>\$3,576,114</u>
9	Incurred Claims (Jun 2021 through May 2022)	\$3,048,454	\$758,532	\$3,806,986	\$18,884,497	\$8,562,248	\$27,446,745	\$21,932,951	\$9,320,780	\$31,253,731
10	Total Covered Employees (Apr 2021 through Mar 2022)	8,716	8,716	8,716	35,948	35,948	35,948	44,664	44,664	44,664
11	Claims Cost PEPM	\$349.75	\$87.03	\$436.78	\$525.33	\$238.18	\$763.51	\$491.07	\$208.69	\$699.75
12	Trend Factor	<u>1.0803</u>	<u>1.1213</u>	<u>1.0885</u>	<u>1.1131</u>	<u>1.1213</u>	<u>1.1157</u>	<u>1.1085</u>	<u>1.1213</u>	<u>1.1123</u>
13	Projected Claims Cost Per Employee	\$377.84	\$97.58	\$475.42	\$584.74	\$267.08	\$851.82	\$544.37	\$234.00	\$778.37
14	<u>Recommended Funding Margin</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>	<u>1.0%</u>
15	Adjusted Projected Claims	\$381.62	\$98.56	\$480.18	\$590.59	\$269.75	\$860.34	\$549.81	\$236.34	\$786.15
Fixed Costs PEPM										
16	Specific Stop-Loss Premium PEPM (Estimate)			\$22.24			\$24.35			\$23.94
17	Aggregate Stop-Loss Premium PEPM (Estimate)			\$0.00			\$0.00			\$0.00
18	Anthem Network & Administrative Fees			\$38.00			\$38.00			\$38.00
19	All Other Program Fees			<u>\$20.24</u>			<u>\$18.28</u>			<u>\$18.66</u>
	Total Fixed Costs			\$80.48			\$80.63			\$80.60
20	Required Premium PEPM			\$560.66			\$940.97			\$866.75
21	Current Premium PEPM			\$857.60			\$843.01			\$845.86
22	Required Increase			-34.62%			11.62%			2.47%
23	Current Subscribers (June 2023)	661	661		3,067	3,067		3,728	3,728	
24	Base Trend	5.00%	7.50%		7.00%	7.50%		6.72%	7.50%	
25	Months Trended	19	19		19	19		19	19	

Self-funded Dental Underwriting Total SJVIA

		County of Fresno	County of Tulare	SJVIA
1	Paid Claims (6/1/2022 - 5/31/2023)	\$2,654,653	\$1,152,634	\$3,807,286
2	Beginning Reserve	(167,970)	68,160	(99,810)
3	Ending Reserve	167,970	(68,160)	99,810
4	Incurred Claims	\$2,654,653	\$1,152,634	\$3,807,286
5	Covered Employees	56,233	32,318	88,551
6	Incurred Claims/EE/Month	\$47.21	\$35.67	\$43.00
7	Trend Factor	1.0803	1.0803	1.0803
		5.0%		
8	Expected Incurred Claims (1/1/2024 - 12/31/2024)	\$51.00	\$38.53	\$46.45
9	Administration	\$4.40	\$4.40	\$4.40
10	Plan Adjustments	\$0.00	\$0.00	\$0.00
11	Calculated Funding Level Without Margin	\$55.40	\$42.93	\$50.85
12	Current Average Funding Level	\$59.59	\$45.47	\$54.43
13	Calculated Funding Action Without Margin = (10)/(11)	-7.03%	-5.59%	-6.58%
14	Recommended Margin = Margin % x (8)	\$1.02	\$0.77	\$0.93
		2.0%		
15	Calculated Funding Level With Margin = (10)+(13)	\$56.42	\$43.70	\$51.78
16	Current Average Funding Level = (11)	\$59.59	\$45.47	\$54.43
17	Calculated Funding Action With Margin = (14)/(15)	-5.32%	-3.90%	-4.87%

Note: Tulare County plan design changes: \$1,500 Plan Max. +5.67%, \$2,000 Plan Max. +12.34%

Fully Insured Vision Underwriting Total SJVIA - The plans are fully insured with VSP with a two-year rate guarantee for 2024 - 2025.

				<u>County of Fresno</u>	<u>County of Tulare</u>	<u>SJVIA</u>
1	Paid Claims (6/1/2021 - 5/31/2022)			\$366,156	\$201,231	\$567,387
2	Beginning Reserve 5%			(19,407)	(9,419)	(28,825)
3	Ending Reserve 5%			18,308	10,062	28,369
4	Incurred Claims			\$365,057	\$201,874	\$566,931
5	Covered Employees			51,798	34,824	86,622
6	Incurred Claims/EE/Month			\$7.05	\$5.80	\$6.54
7	Trend Factor	3.5%		1.0560	1.0560	1.0560
8	Expected Incurred Claims (1/1/2024 - 12/31/2024)			\$7.44	\$6.12	\$6.91
9	Administration			\$1.36	\$1.36	\$1.36
10	Plan Adjustments			\$0.00	\$0.00	\$0.00
11	Calculated Funding Level Without Margin			\$8.80	\$7.48	\$8.27
12	Current Average Funding Level			\$10.37	\$6.05	\$8.63
13	Calculated Funding Action Without Margin = (10)/(11)			-15.15%	23.69%	-4.21%
14	Recommended Margin = Margin % x (8)	2.0%		\$0.15	\$0.12	\$0.14
15	Calculated Funding Level With Margin = (10)+(13)			\$8.95	\$7.60	\$8.41
16	Current Average Funding Level = (11)			\$10.37	\$6.05	\$8.63
17	Calculated Funding Action With Margin = (14)/(15)			-13.72%	25.72%	-2.61%

EPO Renewal

Total PEPM Cost	EPO 0	EPO 500	EPO 1000	Total
Premium	\$ 1,268.67	\$ 1,099.99	\$ 1,053.17	\$ 1,228.92
Paid Claims				
Medical	\$ 942.33	\$ 417.21	\$ 325.81	\$ 826.39
RX	\$ 381.53	\$ 243.91	\$ 114.97	\$ 336.08
Total	\$ 1,323.86	\$ 661.11	\$ 440.78	\$ 1,162.48
Fixed Cost	\$ 100.39	\$ 100.39	\$ 100.39	\$ 100.39
Total Cost	\$ 1,424.25	\$ 761.50	\$ 541.17	\$ 1,262.87
Loss Ratio	112.3%	69.2%	51.4%	102.8%
2024 Renewal				
Enrollment	2,528	208	626	3,362
Renewal %	9.0%	0.0%	0.0%	5.4%
Annual Premium	\$ 41,599,515	\$ 2,745,575	\$ 7,911,413	\$ 52,256,503
PEPM Premium	\$ 1,371.29	\$ 1,099.99	\$ 1,053.17	\$ 1,295.27

Recommendation:

EPO 0 +9.0%

EPO 500 +0.0%

EPO 1000 +0.0%

Kaiser – SJVIA

County of Fresno Bi-Weekly Rates*	Lives	2023 (with EPO Parity)					2024 (without EPO Parity)				
		Kaiser Rate	Margin	SJVIA Admin.	Vision	SJVIA Rate	Kaiser Rate	Margin	SJVIA Admin.	Vision	SJVIA Rate
Subscriber Only	1,370	\$ 408.93	\$ 30.60	\$ 5.62	\$ 3.64	\$ 448.79	\$ 489.67	\$ 4.90	\$ 5.69	\$ 3.64	\$ 503.90
Subscriber & Spouse	94	\$ 733.87	\$ 67.95	\$ 5.62	\$ 6.54	\$ 813.98	\$ 878.78	\$ 8.79	\$ 5.69	\$ 6.54	\$ 899.80
Subscriber & Child(ren)	417	\$ 646.97	\$ 54.57	\$ 5.62	\$ 6.42	\$ 713.58	\$ 774.72	\$ 7.75	\$ 5.69	\$ 6.42	\$ 794.58
Subscriber & Family	122	\$ 971.13	\$ 86.84	\$ 5.62	\$ 9.39	\$ 1,072.98	\$ 1,162.87	\$ 11.63	\$ 5.69	\$ 9.39	\$ 1,189.58
Annual Amount	2,003	\$26,454,538	\$ 2,123,146	\$ 292,678	\$ 245,031	\$29,115,394	\$31,677,922	\$ 316,937	\$ 296,324	\$ 245,031	\$32,536,213
\$ Difference		\$ 697,919	\$ 536,629	\$ (10,416)	\$ -	\$ 1,224,132	\$ 5,223,384	\$(1,806,210)	\$ 3,645	\$ -	\$ 3,420,819
% Difference		2.71%	33.82%	-3.44%	0.00%	4.39%	19.74%	-85.07%	1.25%	0.00%	11.75%
County of Tulare Monthly HMO Rates	Lives	2023					2024				
		Kaiser Rate	Margin	SJVIA Admin.	Vision	SJVIA Rate	Kaiser Rate	Margin	SJVIA Admin.	Vision	SJVIA Rate
Subscriber Only	52	\$ 929.05	\$ -	\$ 10.18	\$ -	\$ 939.23	\$ 1,112.59	\$ 11.13	\$ 10.32	\$ -	\$ 1,134.04
Subscriber & Spouse	6	\$ 1,858.10	\$ -	\$ 10.18	\$ -	\$ 1,868.28	\$ 2,225.18	\$ 22.25	\$ 10.32	\$ -	\$ 2,257.75
Subscriber & Child(ren)	7	\$ 1,681.57	\$ -	\$ 10.18	\$ -	\$ 1,691.75	\$ 2,013.78	\$ 20.14	\$ 10.32	\$ -	\$ 2,044.24
Subscriber & Family	3	\$ 2,787.16	\$ -	\$ 10.18	\$ -	\$ 2,797.34	\$ 3,337.78	\$ 33.38	\$ 10.32	\$ -	\$ 3,381.48
Annual Amount	68	\$ 2,069,383	\$ -	\$ 17,998	\$ -	\$ 2,087,382	\$ 2,478,205	\$ 24,788	\$ 18,246	\$ -	\$ 2,521,238
\$ Difference		\$ 54,706	\$ -	\$ (796)	\$ -	\$ 53,910	\$ 408,821	\$ 24,788	\$ 248	\$ -	\$ 433,857
% Difference		2.72%	0.00%	-4.23%	0.00%	2.65%	19.76%	0.00%	1.38%	0.00%	20.78%
County of Tulare Monthly DHMO Rates	Lives	2023					2024				
		Kaiser Rate	Margin	SJVIA Admin.	Vision	SJVIA Rate	Kaiser Rate	Margin	SJVIA Admin.	Vision	SJVIA Rate
Subscriber Only	29	\$ 712.15	\$ -	\$ 10.18	\$ -	\$ 722.33	\$ 853.15	\$ 8.53	\$ 10.32	\$ -	\$ 872.00
Subscriber & Spouse	2	\$ 1,424.29	\$ -	\$ 10.18	\$ -	\$ 1,434.47	\$ 1,706.30	\$ 17.06	\$ 10.32	\$ -	\$ 1,733.68
Subscriber & Child(ren)	10	\$ 1,288.98	\$ -	\$ 10.18	\$ -	\$ 1,299.16	\$ 1,544.20	\$ 15.44	\$ 10.32	\$ -	\$ 1,569.96
Subscriber & Family	0	\$ 2,136.45	\$ -	\$ 10.18	\$ -	\$ 2,146.63	\$ 2,559.46	\$ 25.59	\$ 10.32	\$ -	\$ 2,595.37
Annual Amount	41	\$ 946,159	\$ -	\$ 10,852	\$ -	\$ 957,011	\$ 1,133,495	\$ 11,333	\$ 11,001	\$ -	\$ 1,155,829
\$ Difference		\$ 25,055	\$ -	\$ (480)	\$ -	\$ 24,575	\$ 187,336	\$ 11,333	\$ 149	\$ -	\$ 198,818
% Difference		2.72%	0.00%	-4.23%	0.00%	2.64%	19.80%	0.00%	1.38%	0.00%	20.77%

Kaiser Senior Advantage – County of Tulare

County of Tulare Kaiser Senior Advantage	Enrollment	Kaiser KPSA Rates	
		2023	2024
Subscriber with Medicare	9	\$233.91	\$284.51
Subscriber with Medicare + Spouse with Medicare	<u>1</u>	<u>\$467.82</u>	<u>\$569.02</u>
Total	10	\$30,876.12	\$37,555.32
\$ Difference			\$6,679.20
% Difference			21.63%

Delta Dental – Self-Funded PPO

COF - Dental PPO	Enrollment	2023	2024
Employee Only	3165	\$ 50.29	\$ 50.29
Employee + Spouse	392	\$ 80.19	\$ 80.19
Employee + Children	904	\$ 69.88	\$ 69.88
Employee + Family	365	\$ 102.58	\$ 102.58
Total	4826	\$ 3,494,587	\$ 3,494,587
\$ Difference		\$ -	\$ -
% Difference		0.00%	0.00%
COT - Dental PPO	Enrollment	2023	2024
Employee Only	2126	\$ 36.64	\$ 36.64
Employee + Spouse	200	\$ 63.51	\$ 63.51
Employee + Children	301	\$ 71.97	\$ 71.97
Employee + Family	119	\$ 106.84	\$ 106.84
Total	2746	\$ 1,499,707	\$ 1,499,707
\$ Difference		\$ -	\$ -
% Difference		0.00%	0.00%

Delta Dental – Fully Insured DHMO

County of Fresno - DHMO	Enrollment	2023	2024
Employee Only	1418	\$ 27.38	\$ 27.38
Employee + Spouse	130	\$ 47.51	\$ 47.51
Employee + Children	277	\$ 47.83	\$ 47.83
Employee + Family	77	\$ 68.95	\$ 68.95
Total	1902	\$ 762,710	\$ 762,710
\$ Difference		\$ -	\$ -
% Difference		0.00%	0.00%
County of Tulare - DHMO	Enrollment	2023	2024
Employee Only	237	\$ 27.38	\$ 27.38
Employee + Spouse	23	\$ 47.51	\$ 47.51
Employee + Children	11	\$ 47.83	\$ 47.83
Employee + Family	39	\$ 68.95	\$ 68.95
Total	310	\$ 129,564	\$ 129,564
\$ Difference		\$ -	\$ -
% Difference		0.00%	0.00%

2023 Delta Dental DHMO rates are guaranteed for 2024 and 2025.

Vision Service Plan – VSP

County of Fresno	Enrollment	2023	2024
Employee Only	3012	\$ 7.89	\$ 7.89
Employee + Spouse	368	\$ 14.18	\$ 14.18
Employee + Children	764	\$ 13.90	\$ 13.90
Employee + Family	320	\$ 20.35	\$ 20.35
Total	4464	\$ 553,374	\$ 553,374
\$ Difference		\$ -	\$ -
% Difference		0.00%	0.00%
County of Tulare	Enrollment	2023	2024
Employee Only	2283	\$ 5.02	\$ 5.02
Employee + Spouse	216	\$ 8.47	\$ 8.47
Employee + Children	322	\$ 8.96	\$ 8.96
Employee + Family	127	\$ 13.36	\$ 13.36
Total	2948	\$ 214,464	\$ 214,464
\$ Difference		\$ -	\$ -
% Difference		0.00%	0.00%

2024 VSP rates are guaranteed for 2024 and 2025.

Fully Insured Vision Plan Options offered by VSP for SJVIA

COUNTY OF FRESNO • Fully Insured • 24 Months • 1/1/24 – 12/31/25 • Commissions = Net	Renewal With No Changes	<input type="checkbox"/>	\$7.89 / \$14.18 / \$13.90 / \$20.35
	Renewal With Options to Enhance		
	\$180 Frame	<input type="checkbox"/>	\$8.16 / \$14.66 / \$14.38 / \$21.05
	\$180 Contacts	<input type="checkbox"/>	\$8.12 / \$14.59 / \$14.30 / \$20.93
	Anti-Reflective (\$0 copay)	<input type="checkbox"/>	\$9.94 / \$17.87 / \$17.51 / \$25.64
	Anti-Reflective (\$30 copay)	<input type="checkbox"/>	\$9.15 / \$16.45 / \$16.12 / \$23.61
	UV Protection	<input type="checkbox"/>	\$8.05 / \$14.46 / \$14.18 / \$20.76
	LightCare™	<input type="checkbox"/>	\$8.13 / \$14.61 / \$14.32 / \$20.96

COUNTY OF TULARE • Fully Insured • 24 Months • 1/1/24 – 12/31/25 • Commissions = Net	Renewal With No Changes	<input type="checkbox"/>	\$5.02 / \$8.47 / \$8.96 / \$13.36
	Renewal With Options to Enhance		
	\$150 Frame	<input type="checkbox"/>	\$5.12 / \$8.64 / \$9.14 / \$13.63
	\$130 Contacts	<input type="checkbox"/>	\$5.07 / \$8.55 / \$9.05 / \$13.49
	Anti-Reflective (\$0 copay)	<input type="checkbox"/>	\$6.33 / \$10.67 / \$11.29 / \$16.83
	Anti-Reflective (\$30 copay)	<input type="checkbox"/>	\$5.82 / \$9.83 / \$10.39 / \$15.50
	UV Protection	<input type="checkbox"/>	\$5.12 / \$8.64 / \$9.14 / \$13.63
	LightCare™	<input type="checkbox"/>	\$5.17 / \$8.72 / \$9.23 / \$13.78

SJVIA – Fixed Costs

SJVIA Fixed Costs	County of Fresno		County of Tulare	
	2023	2024	2023	2024
Actual Specific Stop-Loss Premium Employee Only	\$16.52	TBD	\$16.52	TBD
Actual Specific Stop-Loss Premium Employee + Dependents	\$33.17	TBD	\$33.17	TBD
Estimated Specific PPO/HDHP Stop-Loss Premium PEPM	\$16.64	\$22.24	\$18.45	\$24.35
Estimated Specific EPO Stop-Loss Premium PEPM	\$21.60	\$27.44	N/A	N/A
Aggregate Stop-Loss Premium PEPM	N/A	N/A	N/A	N/A
PPO/HDHP Anthem Network & Admin. Fees	\$38.00	\$38.00	\$38.00	\$38.00
EPO Anthem Network & Admin. Fees	\$38.00	\$38.00	N/A	N/A
EmpiRx Administration Fee	\$3.35	\$4.50	\$3.35	\$4.50
Wellness	\$2.50	\$2.50	\$2.50	\$2.50
Claims Mgmt/Communication	\$0.50	\$0.50	\$0.50	\$0.50
Keenan Consulting Fee	\$2.43	\$2.42	\$2.43	\$2.42
Keenan Pharmacy Services Fee (EPO/PPO)	\$1.92	\$1.34	\$1.92	\$1.34
SJVIA Fee	\$2.00	\$2.00	\$2.00	\$2.00
MyWorkplace - Benefits Administration	\$2.75	\$2.90	\$2.75	\$2.90
Navia - COBRA and Retiree Administration	\$2.00	\$2.00	\$0.00	\$0.00
PCORI/Transitional Reinsurance Fees PPO/HDHP	\$0.30	\$0.34	\$0.36	\$0.38
PCORI/Transitional Reinsurance Fees EPO	\$0.45	\$0.40	N/A	N/A
98.6 Rider	\$1.65	\$1.74	\$1.39	\$1.74
Total Fixed Cost - Self-Funded PPO Medical Plans	\$74.04	\$80.48	\$73.65	\$80.63
Total Fixed Cost - Self-Funded HDHP HSA Medical Plans	\$74.04	\$80.48	\$73.65	\$80.63
Total Fixed Cost - Self-Funded EPO Medical Plans	\$79.15	\$85.74	N/A	N/A
Total Fixed Cost - Kaiser	\$12.18	\$12.32	\$10.18	\$10.32
Total Fixed Cost - Delta Dental	\$4.19	\$4.40	\$4.19	\$4.40

MINUTES

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
May 5, 2023 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 559-636-4900 or the Assistant SJVIA Manager at 559-600-1801. Notification 48 hours prior to the meeting will help enable staff to make reasonable arrangements to ensure meaningful access.

1. Call to Order

Meeting was called to order at 9: 03 AM by Vice Chair Shuklian

2. Pledge of Allegiance

3. Roll Call

All Directors Present; Director Vander Poel arrived during Item 14

4. Approval of Agenda (A)

It was noted Item 14, Receive Consultant's Report on Carrier Proposals, will be presented as an Informational Item (I), rather than an Action item (A)

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

5. 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

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MINUTES

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6. Approval of Consent Agenda – Item Numbers 18-19

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 Magsig; Seconded by Director Mendes; Motion approved unanimously

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

Presented by Matt Blanks, County of Fresno

8. Receive Update on Fiscal Year 2021-2022 Audited Financial Statements and Quarterly Financial Reporting (I)

Presented by Rochelle Garcia, County of Fresno

9. Receive Consultant's Medical, Dental, and Vision Experience Reports through February 2023 with Update on Projected Plan Experience Surplus Accumulation and Projections (I)

Presented by Bordan Darm, Keenan

10. Receive Consultant's Report on EmpiRx Plan Year 2022 Pharmacy Utilization (I)

Presented by Rob Welker, Keenan

11. Receive Update on Direct Contract with Community Medical Center (CMC) and ratify SJVIA Management's execution of the Direct Contract with CMC (A)

Presented by Hollis Magill, County of Fresno

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County of Tulare
Board of Supervisors Chambers
2800 W. Burrel Avenue
Visalia, CA 93291
May 5, 2023 9:00 AM**

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

12. Receive Update on the April 6, 2023 Strategic Planning Meeting (I)

Presented by Bordan Darm, Keenan with additional comments made by Paul Nerland, County of Fresno and Director Magsig

13. Receive Strategic Planning Review Panel Update and Authorize Finalist Interviews for Plan Year 2024 Health Plan and Prescription Drug Plan Vendors (A)

Presented by Paul Nerland, County of Fresno with additional comment by Hollis Magill, County of Fresno

Motion to approve by Director Micari; Seconded by Director Pacheco; Motion approved unanimously

14. Receive Consultant's Report on Carrier Proposals ~~(A)~~ (I)

Presented by Bordan Darm, Keenan with additional comments made by Kristyn Nelms, Anthem

It was noted Item 14, Receive Consultant's Report on Carrier Proposals, will be presented as an Informational Item (I), rather than an Action item (A)

Request was made after Agenda Item 16 by Susan Vogt and Andrew Conroy, Aetna/CVS, to make additional comments on Item 14, Receive Consultant's Report on Carrier Proposals; Request was granted

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact the SJVIA Manager at 559-636-4900 or the Assistant SJVIA Manager at 559-600-1801. 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.

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**Meeting Location:
County of Tulare
Board of Supervisors Chambers
2800 W. Burrel Avenue
Visalia, CA 93291
May 5, 2023 9:00 AM**

15. Receive and Approve Revised SJVIA Mission and Vision Statements (A)

Presented by Lupe Garza, County of Tulare

Motion to approve by Director Vander Poel; Seconded by Director Magsig;
Motion approved unanimously

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

17. Adjournment

Consent Agenda

18. Approval of Minutes - Board Meeting of February 17, 2023 (A)

19. Approve Assignment of Subscription Agreement with 98point6 Inc. to Transcarent, Inc. (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 559-636-4900 or the Assistant SJVIA Manager at 559-600-1801. 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

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PETE VANDER POEL

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

AGENDA DATE: July 27, 2023

ITEM NUMBER: Item 17

SUBJECT: Approve and Authorize President to Execute SJVIA Agreement with TFG Partners, Updating the Term of the Agreement to Expire the Latter of When the Audit is Complete or December 31, 2023, Subject to the Approval of SJVIA Staff and Counsel (A)

REQUEST(S): That the Board approve and authorize the President to execute agreement with TFG Partners, in substantial form as the attached agreement, subject to the approval of SJVIA Staff and Counsel, as to legal form.

DESCRIPTION:

The SJVIA entered into an agreement with TFG Partners on February 18, 2022 for a claims audit of self-insured medical and dental claims for the 2020 and 2021 plan years. An Amendment to the Agreement was approved at the May 6, 2022 Board meeting updating the timeframe of the audit from plan years 2020 and 2021, to plan years 2021 and 2022.

The audit is still ongoing but nearing completion. The initial Agreement expired November 14, 2022. The new Agreement will update the term of the Agreement effective November 15, 2022 and to expire the latter of when the audit is complete or December 31, 2023.

SJVIA staff are currently trying to confirm TFG's status with the Secretary of State as a foreign corporation. The term will be the only substantial change to the new Agreement.

AGENDA: San Joaquin Valley Insurance Authority

DATE: July 27, 2023

FISCAL IMPACT/FINANCING:

Allows for financial recovery for errors found in the audit periods.

ADMINISTRATIVE SIGN-OFF:



Lupe Garza
SJVIA Manager



Hollis Magill
SJVIA Assistant Manager

1 **SERVICE AGREEMENT**

2 This Service Agreement (“Agreement”) is dated July 21, 2023 and is between
3 TFG Partners, a Pennsylvania LLC (“Contractor”) and the San Joaquin Valley Insurance
4 Authority, a California joint powers agency (“SJVIA”).

5 **Recitals**

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

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

12 The Parties therefore agree as follows:

13 **Article 1**

14 **Contractor’s Services**

15 1.1 **Scope of Services.** The Contractor shall perform all service provided in
16 Exhibit A to the Agreement, titled “Scope of Services.”

17 1.2 **Contractor’s Representation.** The Contractor represents that is ready,
18 willing, and able to provide the self-insured medical and dental claims audit services
19 desired by the SJVIA according to the terms of this Agreement.

20 1.3 **Compliance with Laws.** The Contractor shall, at its own cost, comply with
21 all applicable federal, state, and local laws and regulations in the performance of its

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

3 **Article 2**

4 **SJVIA’s Responsibilities**

5 2.1 Subject to the terms of this Agreement, the SJVIA will provide or authorize
6 the vendors of its Insurance Programs to provide the Contractor with data and
7 information that is necessary to the Contractor’s provision of services under this
8 Agreement.

9 **Article 3**

10 **Compensation, Invoices, and Payments**

11 3.1 **Compensation.** The SJVIA agrees to pay, and the Contractor agrees to
12 receive, compensation for the performance of its services under this Agreement as
13 described in Exhibit B to this Agreement, titled “Compensation.”

14 3.2 **Invoices.** For “Audit Fees” as provided in Exhibit B, the Contractor shall
15 submit an invoice, billed individually by audit, to the SJVIA for each stage of the audit
16 as described in Exhibit B. The Contractor shall include all of its “Travel Expenses,”
17 including supporting documentation, as provided in Exhibit B in its final invoice to the
18 SJVIA. If there are any “administrator-related costs for obtaining claims data or
19 responding to audit results” as provided in Exhibit B, the Contractor shall invoice those
20 separately to the SJVIA.

21 3.3 **Payment.** The SJVIA shall pay each correctly completed and timely
22 submitted invoice within 30 business days after receipt. The SJVIA shall remit any
23 payment to the Contractor’s address specified in the invoice.

1 3.4 **Incidental Expenses.** The Contractor is solely responsible for all of its
2 expenses that are not specified as payable by the SJVIA under this Agreement.

3 **Article 4**

4 **Term of the Agreement**

5 4.1 **Term.** This Agreement is effective on November 15, 2022 and terminates
6 the latter of when the audit is complete or December 31, 2023.

7 **Article 5**

8 **Notices**

9 5.1 **Contact Information.** The persons and their addresses having authority
10 to give and receive notices provided for or permitted under this Agreement include the
11 following:

12 **For the SJVIA:**

13 SJVIA Manager

14 2220 Tulare Street, 14th Floor

15 Fresno, California 93721

16 SJVIA-Admin@fresnocountyca.gov

17
18 **For the Contractor:**

19 Auke van Scheltinga

20 Two Gateway Center, Suite 1350

21 603 Stanwix Street

22 Pittsburgh, PA 15222

23 avanscheltinga@tfpartners.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.

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

5 **Article 6**

6 **Termination and Suspension**

7 6.1 **Termination for Non-Allocation of Funds.** The terms of this Agreement
8 are contingent on the approval of funds by the appropriating government agency. If
9 sufficient funds are not allocated, then the SJVIA, upon at least 30 days' advance
10 written notice to the Contractor may:

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

13 6.2 **Termination for Breach.**

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

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

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

- 23 1) Obtained or used funds illegally or improperly;

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

7 **6.3 Termination without Cause.** In circumstances other than those set forth
8 above, either party may terminate this Agreement by giving at least 30 days' advance
9 written notice to the other party.

10 **6.4 No Penalty or Further Obligation.** Any termination of this Agreement by
11 the SJVIA under this Article 6 is without penalty to or further obligation of the SJVIA.

12 **Article 7**

13 **Independent Contractor**

14 **7.1 Status.** In performing under this Agreement, the Contractor, including its
15 officers, agents, employees, and volunteers is at all times acting and performing as an
16 independent contractor, in an independent capacity, and not as an officer, agent,
17 servant, employee, joint venturer, partner, or associate of the SJVIA.

18 **7.2 Supervision.** The SJVIA has no right to control, supervise, or direct the
19 manner or method of the Contractor's performance under this Agreement, but the
20 SJVIA may verify that the Contractor is performing according to the terms of this
21 Agreement.

22 **7.3 Benefits.** Because of its status as an independent contractor, the
23 Contractor has no right to employment rights or benefits available to employees of the

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

5 7.4 **Services to Others.** The parties acknowledge that, during the term of this
6 Agreement, the Contractor may provide services to others unrelated to the SJVIA.

7 **Article 8**

8 **Indemnity and Defense**

9 8.1 **Indemnifiable Losses.** For purposes of this Article 1, the phrase
10 “Indemnifiable Loss” includes all claims, demands, injuries, damages, costs, expenses
11 (including attorney fees and costs), fines, penalties, and liabilities of any kind.

12 8.2 **Indemnity.** The Contractor shall indemnify the SJVIA (including its
13 officers, agents, employees, and volunteers) against any Indemnifiable Loss to the
14 SJVIA, the Contractor, or any third party that arises from or relates to the performance
15 or failure to perform by the Contractor (or any of its officers, agents, or employees)
16 under this Agreement.

17 8.3 **Defense.** If requested by the SJVIA, the Contractor shall defend the
18 actions or proceedings brought or threatened against the SJVIA (including its officers,
19 agents, employees, and volunteers) for any Indemnifiable Loss to the SJVIA, or any
20 third party that arises from or relates to the performance or failure to perform by the
21 Contractor (or any of its officers(agents, or employees) under this Agreement. The
22 SJVIA may conduct or participate in its own defense without affecting the Contractor’s
23 obligation to indemnity or defend the SJVIA.

1 8.4 **Survival.** This Article 8 survives the termination of this Agreement.

2 **Article 9**

3 **Insurance**

4 9.1 The Contractor shall comply with all of the insurance requirements in
5 Exhibit C to this Agreement.

6 **Article 10**

7 **Inspections, Audits, and Public Records**

8 10.1 **Inspection of Documents.** The Contractor shall make available to the
9 SJVIA, and the SJVIA may examine at any time during business hours and as often as
10 the SJVIA deems necessary, all of the Contractor's records and data with respect to the
11 matters covered by this Agreement. The Contractor shall, upon request by the SJVIA,
12 permit the SJVIA to audit and inspect all of such records and data to ensure the
13 Contractor's compliance with the terms of this Agreement.

14 10.2 **State Audit Requirements.** If the compensation to be paid by the SJVIA
15 under this Agreement exceeds \$10,000, the Contractor is subject to the examination
16 and audit of the California State Auditor, as provided in Government Code section
17 8546.7, for a period of three years after final payment under this Agreement. This
18 section survives the termination of this Agreement.

19 10.3 **Contractor's Independent Nondisclosure Obligations; Effect on**
20 **Deliverables.**

21 (A) The Contractor may omit within the records and data that the
22 Contractor provides to the SJVIA, including deliverables that the Contractor is
23 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 is 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

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

3 **12.13 Contractor’s Subcontractors.** The Contractor shall ensure that any of its
4 contractors, including subcontractors, if applicable, to whom the Contractor provides
5 PHI received from or created or received by the Contractor on behalf of SJVIA, agree to
6 the same restrictions, safeguards, and conditions that apply to the Contractor with
7 respect to such PHI and to incorporate, when applicable, the relevant provisions of
8 these provisions into each subcontract or sub-award to such agents or subcontractors.

9 **12.14 Employee Training and Discipline.** The Contractor shall train and use
10 reasonable measures to ensure compliance with the requirements of these provisions
11 by employees who assist in the performance of functions or activities on behalf of SJVIA
12 under this Agreement and use or disclose PHI and discipline such employees who
13 intentionally violate any provisions of these provisions, including termination of
14 employment.

15 **12.15 Termination for Cause.** Upon the SJVIA’s knowledge of a material
16 breach of this Article 12 by the Contractor, the SJVIA shall either:

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

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

22 If neither cure nor termination is feasible, the SJVIA’s Privacy Officer shall
23 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

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

3 12.19 **Amendment.** The parties acknowledge that federal and State laws
4 relating to electronic data security and privacy are rapidly evolving and that amendment
5 of this Agreement may be required to provide for procedures to ensure compliance with
6 such developments. The parties specifically agree to take such action as is necessary
7 to amend this Agreement in order to implement the standards and requirements of
8 HIPAA, the HIPAA regulations, the HITECH Act, and other applicable laws relating to
9 the security or privacy of PHI. The SJVIA may terminate this Agreement upon 30 days'
10 written notice if the Contractor does not enter into an amendment providing assurances
11 regarding the safeguarding of PHI that the SJVIA, in its sole discretion, deems sufficient
12 to satisfy the standards and requirements of HIPAA, the HIPAA regulations, and the
13 HITECH Act.

14 12.20 **No Third-Party Beneficiaries.** Nothing express or implied in the terms
15 and conditions of these provisions is intended to confer, nor shall anything herein
16 confer, upon any person other than the SJVIA or the Contractor and their respective
17 successors or assigns any rights, remedies, obligations, or liabilities whatsoever.

18 12.21 **Interpretation.** The provisions of this Article 12 shall be interpreted as
19 broadly as necessary to implement and comply with HIPAA regulations and applicable
20 State laws. The parties agree that any ambiguity in the provisions of this Article 12 shall
21 be resolved in favor of a meaning that complies and is consistent with HIPAA and the
22 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 statues 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 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
approval.

14

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 (FWA²) 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.