

San Joaquin Valley Insurance Authority

2026/2027 FISCAL YEAR PROJECTED BUDGET

Category	July 1, 2026 - Dec 31, 2026		Jan 1, 2027 - June 30, 2027		July 1, 2026 - June 30, 2027
RECEIPTS					
SJVIA Health Plan Revenue - Premium	\$	77,893,113	\$	100,616,231	\$ 178,509,345
Estimated Rx Rebate Revenue	\$	4,329,735	\$	4,329,735	\$ 8,659,471
Total SJVIA Revenue	\$	82,222,849	\$	104,945,967	\$ 187,168,815
DISBURSEMENTS: Fixed					
1 Specific Stop Loss Insurance	\$	2,097,807	\$	3,146,711	\$ 5,244,518
2 Anthem Claims Administration & Network Fees	\$	1,919,386	\$	1,950,843	\$ 3,870,228
3 Carelon Rx Administration Fee	\$	110,592	\$	110,592	\$ 221,184
4 Myworkplace (Hourglass) Administration	\$	149,914	\$	149,914	\$ 299,827
5 Navia Benefits Administration	\$	74,777	\$	74,777	\$ 149,555
6 Consulting Services	\$	200,000	\$	200,000	\$ 400,000
7 SJVIA Administration	\$	219,572	\$	219,572	\$ 439,145
8 Wellness	\$	154,380	\$	154,380	\$ 308,760
9 Communications	\$	30,876	\$	30,876	\$ 61,752
10 Delta Dental Claims Administration	\$	219,437	\$	219,437	\$ 438,874
11 ACA Reinsurance/PCORI	\$	30,000	\$	30,000	\$ 60,000
12 98.6 Rider	\$	93,389	\$	93,389	\$ 186,778
TOTAL FIXED DISBURSEMENTS	\$	5,300,130	\$	6,380,491	\$ 11,680,621
DISBURSEMENTS: Claims					
13 Projected Paid Claims EPO/PPO/HDHP & RX	\$	64,468,928	\$	71,933,090	\$ 136,402,018
14 Projected Paid Claims Dental	\$	2,780,295	\$	2,840,680	\$ 5,620,975
15 Rx Rebate Pre-Funding	\$	4,329,735	\$	4,329,735	\$ 8,659,471
TOTAL CLAIMS DISBURSEMENTS	\$	71,578,958	\$	79,103,506	\$ 150,682,464
DISBURSEMENTS: Premium				\$	-
16 Delta Dental DHMO	\$	381,568	\$	381,568	\$ 763,136
17 VSP	\$	472,144	\$	472,144	\$ 944,288
18 Kaiser Permanente (Medical + Vision)	\$	14,849,026	\$	16,281,499	\$ 31,130,525
19 Kaiser Permanente - Senior Advantage	\$	25,978	\$	31,173	\$ 57,151
TOTAL PREMIUM DISBURSEMENTS	\$	15,728,717	\$	17,166,385	\$ 32,895,101
				\$	-
TOTAL DISBURSEMENTS	\$	92,607,805	\$	102,650,381	\$ 195,258,186
				\$	-
Balance	\$	(10,384,956)	\$	2,295,585	\$ (8,089,371)

The County has advanced approximately \$8.58 million (Current 12 Month Period) and \$2.01 million (Prior 12 Month Period) in claims above the stop loss deductible that are expected to be reimbursed by the stop loss carrier. We recommend reserving funds accordingly to accommodate the reimbursement timing gap

For the 2027 stop loss projection, we have assumed a 50% rate increase based on the current ClearPoint stop loss rates to reflect the plan's recent claims experience and provide a conservative budgeting approach.

Estimated Rx rebates are based on the most recent rebate information available for the current 12-month period and are assumed to remain consistent for projection purposes.

Term	Definition
Estimated Rx Rebate Revenue	Represents the estimated manufacturer rebate payments expected to be received from the pharmacy benefit manager (PBM) based on projected prescription drug utilization during the fiscal year. While these funds are anticipated to offset a portion of overall pharmacy costs, there is a timing lag between when prescription claims are paid and when rebate revenue is remitted to the plan.
Specific Stop Loss Insurance	Insurance that covers eligible individual claims exceeding the \$450,000 plan year deductible.
Anthem Claims Administration & Network Fees	These are fees paid to Anthem Blue Cross for processing claims, accessing provider networks, and additional services such as management and customer service for EPO/PPO/HDHP plans.
Carelon Rx Administration Fee	Costs for processing and adjudicating EPO/PPO prescription drug claims, including plan discount pricing, clinical management, and customer service.
Myworkplace (Hourglass) Administration	Vendor fee for consolidated billing, eligibility management, and automated enrollment services.
Navia Benefits Administration	Vendor fee for administering COBRA/retiree billing and Section 125 pre-tax benefits.
Consulting Services	Professional consulting and brokerage fees for guidance relating to health plans, compliance, renewal, communication, cost analysis, and actuarial review.
SJVIA Administration	Fee used by SJVIA for administrative, legal, management, and accounting services to operate the Joint Powers Authority.
Wellness	SJVIA funds for wellness programs for each member entity, based on available funds.
Communications	Funds for member communication campaigns, materials, and association participation.
Delta Dental Claims Administration	Delta Dental fees for claim processing, managing provider access, and customer service for dental plans.
ACA Reinsurance/PCORI	Fees required under the Affordable Care Act for the Patient Centered Outcomes Research Institute.
98.6 Rider	Vendor fee for the 98.6 virtual care program offered to eligible Anthem EPO/PPO/HDHP members.
Projected Paid Claims EPO/PPO/HDHP & Rx	Estimated self-insured claims costs for medical and prescription drug coverage.
Projected Paid Claims Dental	Estimated self-insured claims costs for dental coverage.
Rx Rebate Pre-Funding	Estimated amount the Joint Powers Authority must initially fund to cover prescription drug claim costs prior to the receipt of manufacturer rebate payment.
Delta Dental DHMO Premium	Premium for members covered under SJVIA's fully insured Delta Dental DHMO plan.
VSP Premium	Premium for members covered under SJVIA's fully insured VSP Vision plan.
Kaiser Permanente Premium	Premium for members covered under SJVIA's fully insured Kaiser HMO and DHMO plans.
Kaiser Permanente - Senior Advantage	Premium for members under SJVIA's fully insured Kaiser Senior Advantage program.