Health Benefits Trust Board Regular Session Google Meet joining info https://meet.google.com/vgs-

sanm-nmz Or dial: ?(US) +1 646-653-5071? PIN: ?579 983

989?#



Health Benefits Trust Board Regular Session Google Meet joining info https://meet.google.com/vgs-

sanm-nmz Or dial: ?(US) +1 646-653-5071? PIN: ?579

983 989?#

NOTICE OF PUBLIC MEETING AND EXECUTIVE SESSION PINAL COUNTY HEALTH BENEFITS TRUST BOARD SUMMARY OF AGENDA FOR MEETING Tuesday, February 25, 2025

10:00 AM - CALL TO ORDER

PINAL COUNTY ADMINISTRATIVE COMPLEX IRONWOOD CONFERENCE ROOM 135 N. PINAL STREET FLORENCE, AZ 85132

(1) Call to Public -

> Consideration and discussion of comments from the public. Those wishing to address the Pinal County Health Benefits Trust Board need not request permission in advance. Action taken as a result of public comment will be limited to directing staff to study the matter or rescheduling the matter for further consideration and decision at a later date.

(2) Roll Call of Member Present In-Person and Virtually

(3) **CONSENT ITEMS:**

All items indicated by an asterisk (*) will be handled by a single vote as part of the consent agenda, unless a Board Member, County Manager, or member of the public objects at the time the agenda item is called.

- * A. Discussion/approval/disapproval of the Minutes from the February 4, 2025 Special Session of the Pinal County Health Benefits Trust Board.
- Discussion Only- Health Benefits Trust Financial Audit Presentation (ShaunaBrewster and Michael Lauzon (4) of HeinfeldMeech)
- (5) Discussion Only- Medical, Dental, and Vision Plan Performance through December 31, 2024 (Mike Barberio, CBIZ)
- Discussion Only- Review of the Health Benefits Trust Fund Financial Statements (Randee Stinson) (6)
- **(7)** Discussion Only- Discussion of items to include in Future Health Benefits Trust Board meeting agenda

ADJOURNMENT

(SUPPORTING DOCUMENTS ARE AVAILABLE AT THE HUMAN RESOURCES **DEPARTMENT**)

NOTE: One or more members of the Board may participate in this meeting by telephonic conference call.

The Board may go into Executive Session for the purpose of obtaining legal advice from the County's

Page 1

Attorney(s) on any of the above agenda items pursuant to A.R.S. 38-431.03 (A)(3).

In accordance with the requirement of Title II of the Americans with Disabilities Act (ADA), the Pinal County Health Benefits Trust Board does not discriminate against qualified individuals with disabilities admission to public meetings. If you need accommodation for a meeting, please contact the Human Resources Department at (520) 866-6231, at least (3) three business days prior to the meeting (not including weekends or holidays) so that your request may be accommodated.

Posted this 20th of February, 2025 around 9:00 AM/Danielle Watkins



AGENDA ITEM

February 25, 2025 ADMINISTRATION BUILDING A FLORENCE, ARIZONA

REQUESTED BY: Funds #: Dept. #: Dept. Name: Director:		
BRIEF DESCRIPTION OF AGEI Roll Call of Member Present In	NDA ITEM AND REQUESTED B -Person and Virtually	OARD ACTION:
BRIEF DESCRIPTION OF THE ITEM:	FISCAL CONSIDERATIONS AN	D/OR EXPECTED FISCAL IMPACT OF THIS AGENDA
BRIEF DESCRIPTION OF THE	EXPECTED PERFORMANCE IN	MPACT OF THIS AGENDA ITEM:
MOTION:		
History		
Time	Who	Approval
ATTACHMENTS:		
Click to download		
No Attachments Available		



AGENDA ITEM

February 25, 2025 ADMINISTRATION BUILDING A FLORENCE, ARIZONA

REQUESTED BY:		
Funds #:		
Dept. #:		
Dept. Name:		
Director:		
BRIEF DESCRIPTION OF AGENDA ITE	M AND REQUESTED BOARD ACTION:	
Discussion/approval/disapproval of the Benefits Trust Board.	Minutes from the February 4, 2025 Spec	ial Session of the Pinal County Health
BRIEF DESCRIPTION OF THE FISCAL (ITEM:	CONSIDERATIONS AND/OR EXPECTED	FISCAL IMPACT OF THIS AGENDA
BRIEF DESCRIPTION OF THE EXPECT	ED PERFORMANCE IMPACT OF THIS A	GENDA ITEM:
MOTION:		
MOTION: History		
	Who	Approval
History	Who	Approval
History Time	Who	Approval



PINAL COUNTY HEALTH BENEFITS TRUST BOARD ACTION SUMMARY Tuesday, February 4, 2025

9:00 AM - CALL TO ORDER

PINAL COUNTY ADMINISTRATIVE COMPLEX IRONWOOD CONFERENCE ROOM 135 N. PINAL STREET FLORENCE, AZ 85132

(1) Call to Public -

Consideration and discussion of comments from the public. Those wishing to address the Pinal County Health Benefits Trust Board need not request permission in advance. Action taken as a result of public comment will be limited to directing staff to study the matter or rescheduling the matter for further consideration and decision at a later date.

(2) Roll Call of Member Present In-Person and Virtually

BOARD MEMBERS PRESENT VIRTUALLY: RONA CURPHY, MIKE GOODMAN, MATT BUSBY AND GINGER FLIGGER.

BOARD MEMBERS PRESENT IN PERSON: KELLI MUNROE

CALL TO ORDER AT 9:00AM

(3) **CONSENT ITEMS:**

All items indicated by an asterisk (*) will be handled by a single vote as part of the consent agenda, unless a Board Member, County Manager, or member of the public objects at the time the agenda item is called.

* A. Discussion/approval/disapproval of the Minutes from the December 3, 2024 Regular Meeting of the Pinal County Health Benefits Trust Board.

ITEM ACTION: APPROVED

(4) Discuss/approve/disapprove- Proposed policy regarding the financial stability reserve of the trust. (Angeline Woods)

ITEM ACTION: APPROVED

(5) Discussion Only- Projected Funding Recommendations for the 2025-2026 Medical, Dental, and Vision Plans. (Mike Barberio, CBIZ)

ITEM ACTION: DISCUSSION ONLY

(6) Discuss/approve/disapprove- Funding recommendations for the 2025-2026 Medical, Dental, and Vision Plans. (Angeline Woods)

ITEM ACTION:POSTPONE DECISION TO FEBRUARY 25, 2025 REGULAR SESSION

(7) Discussion Only- Discussion of items to include in Future Health Benefits Trust Board meeting agenda

ITEM ACTION: DISCUSSION ONLY



AGENDA ITEM

February 25, 2025 ADMINISTRATION BUILDING A FLORENCE, ARIZONA

REQUESTED BY:		
Funds #:		
Dept. #:		
Dept. Name:		
Director:		
BRIEF DESCRIPTION OF AGENDA ITE	M AND REQUESTED B	OARD ACTION:
Discussion Only- Health Benefits Trust HeinfeldMeech)	Financial Audit Present	tation (ShaunaBrewster and Michael Lauzon of
BRIEF DESCRIPTION OF THE FISCAL ITEM:	CONSIDERATIONS AN	D/OR EXPECTED FISCAL IMPACT OF THIS AGENDA
BRIEF DESCRIPTION OF THE EXPECT	TED PERFORMANCE IN	MPACT OF THIS AGENDA ITEM:
MOTION:		
MOTION: History		
	Who	Approval
History	Who	Approval
History Time	Who	Approval





Who Are We?





Michael Loren Lauzon, CPA, MBA Audit Partner



Shauna R. Brewster, CPA, MBA Audit Manager



Overview

- Purpose of the audit
- Roles and responsibilities
 - Auditor responsibility
 - Management responsibility
- Audit process
 - Plan and perform preliminary analytics for risk
 - Understand internal controls
 - "Fieldwork"
 - Compile financial statements

Audit Highlights

- Unmodified Opinion highest opinion we can give
 - Not a statement of perfection but that the "financial statements are materially free from misstatement due to error or fraud"
 - Not giving an opinion on internal control

	2024	2023
Assets		
Current assets:		
Cash and cash equivalents	\$ 10,572,128	\$ 8,920,942
Accounts receivable	847,615	834,643
Prepaid items	5,512	16,039
Total current assets	11,425,255	9,771,624
Total assets	11,425,255	9,771,624
Liabilities		
Current liabilities:		
Accounts payable	85,039	115,747
Claims payable	173,250	202,013
Incurred but not reported claims	2,643,315	2,571,605
Total current liabilities	2,901,604	2,889,365
Total liabilties	2,901,604	2,889,365
Net Position		
Restricted for:		
Healthcare	8,523,651	6,882,259
Total net position	\$ 8,523,651	\$ 6,882,259



Statement of Net Position

		2024		2023
Operating revenues	-			
Employee contributions	\$	6,787,578	\$	5,944,822
Employer contributions		21,528,478		18,630,478
Cobra contributions		10,043		21,122
Rebates		2,381,751		1,982,681
Wellness reimbursement		100,000		101,792
Miscellaneous revenue	_	40,047		222,480
Total operating revenues	8	30,847,897	5H	26,903,375
Operating expenses				
Administrative		1,914,900		1,668,418
Claims		22,742,425		20,460,601
Professional and outside services		76,073		76,033
Wellness		149,469		134,958
Employer provided insurance		1,058,147		1,128,547
Health savings accounts		736,681		650,398
Flexible spending accounts		1,236,904		1,205,091
Voluntary products		1,401,987		1,000,289
Miscellaneous expenses		29,256		21,764
Total operating expenses	5	29,345,842		26,346,099
Operating income (loss)		1,502,055		557,276
Nonoperating revenues (expenses)				
Interest revenue	_	139,337		98,504
Total nonoperating revenue (expenses)		139,337		98,504
Changes in net position		1,641,392		655,780
Total net position, beginning of year		6,882,259		6,226,479
Total net position, end of year	\$	8,523,651	\$	6,882,259



Statement of Revenues, Expenditures and Changes in Net Position

6

	2024	2023
Increase/Decrease in Cash and Cash Equivalents	311	
Cash flows from operating activities:		
Cash received from contributions	\$ 28,326,099	5 24,596,422
Cash received from other sources	2,508,826	2,514,003
Cash payments to suppliers for goods and services	(6,623,598)	(6,003,469)
Cash payments for claims	(22,699,478)	(20,761,454)
Net cash provided by/used for operating activities	1,511,849	345,502
Cash flows from investing activities:		
Interest income	139,337	98,504
Net cash provided by/used for investing activities	139,337	98,504
Net increase/decrease in cash and cash equivalents	1,651,186	444,006
Cash and cash equivalents, beginning of year	8,920,942	8,476,936
	\$ 10,572,128	\$ 8,920,942



Statement of Cash Flows

Reconciliation of Operating Income/Loss to Net Cash Provided by/Used for Operating Activities

Operating income/loss

Adjustments to reconcile operating income/loss		
to net cash provided by/used for operating activities:		
Changes in assets and liabilities:		
Increase/decrease in accounts receivable	(12,972)	207,050
Increase/decrease in prepaid expenses	10,527	4,678
Increase/decrease in accounts payable	(30,708)	(122,649)
Increase/decrease in claims payable	(28,763)	35,792
Increase/decrease in incurred but not reported claims	71,710	(336,645)
Total adjustments	9,794	(211,774)
Net cash provided by/used for operating activities	\$ 1,511,849 \$	345,502

1,502,055 \$

557,276



Summary of Financial S Findings

- No material weaknesses or significant deficiencies noted
- Recommendations for improvement
 - Bank reconciliation timeliness (verbal)



Questions?

Michael Loren Lauzon, CPA, MBA 928-556-5271 michael.lauzon@hm.cpa

Shauna R. Brewster, CPA, MBA 928-556-5269 shauna.brewster@hm.cpa



AGENDA ITEM

February 25, 2025 ADMINISTRATION BUILDING A FLORENCE, ARIZONA

REQUESTED BY:		
Funds #:		
Dept. #:		
Dept. Name:		
Director:		
BRIEF DESCRIPTION OF AGENDA ITE	M AND REQUESTED E	BOARD ACTION:
Discussion Only- Medical, Dental, and	Vision Plan Performan	ice through December 31, 2024 (Mike Barberio, CBIZ)
BRIEF DESCRIPTION OF THE FISCAL ITEM:	CONSIDERATIONS A	ND/OR EXPECTED FISCAL IMPACT OF THIS AGENDA
BRIEF DESCRIPTION OF THE EXPECT	TED PERFORMANCE I	MPACT OF THIS AGENDA ITEM:
MOTION:		
History		
Time	Who	Approval
ATTACHMENTS:		
Click to download		
Plan Performance		

Pinal County Medical, Rx, Dental, and Vision Experience

Plan Year: July 2024 – June 2025

Month End: December 2024

Presented by your CBIZ Team

Mike Barberio, Melissa Barbakoff, and Lindsey Steinhoff



Pinal County Executive Summary Report: For the month of December- Plan Year 2024-2025

For the month of December medical and pharmacy claims continued to hold steady at \$1,727,368 which was 97.5% of the expected claims liability. The first plan year quarterly rebate has now been received in the amount of \$667,730 which drops the loss ratio for the month to 59.8% on an adjusted basis. At the mid-way point of the plan year pharmacy and medical claims were \$10,164,846 (including an adjustment of \$80,982 which reflects a performance guarantee reconciliation payment from CVS Caremark and the aforementioned first rebate payment) which brings the loss ratio to 96.3% of expected claims liability with one quarter of rebates still in arrears. Total medical and pharmacy claims were \$937.28 Year to Date (YTD).

Pharmacy claims were \$552,610 for the month and \$2,536,811 YTD when adjusted for performance guarantees and rebates. PrudentRx returned \$24,773 in monthly net savings for December bringing the plan year total to \$103,723.

Medical and pharmacy costs are projected (see page 9) to increase by ~ 7.5% over last year with pharmacy costs estimated to increase more than medical costs on a percentage basis. This projection includes an upwards manual adjustment for anticipated higher year end utilization. The Year-To-Date (YTD) enrolled percentages and the average paid claims by plan through December are shown just below:

PPO Basic (Performance Network):
 36% enrolled - \$837.82 PEPM

PPO Plus (Broad Network): 39.4% enrolled - \$1,312.35 PEPM

HDHP Basic (Performance Network):
 8.6% enrolled - \$392.70 PEPM

HDHP Plus (Broad Network):
 4.7% enrolled - \$577.50 PEPM

• EPO Basic (Performance Network): 6.0 % enrolled - \$612.23 PEPM

• EPO Plus (Broad Network): 5.3% enrolled - \$1,703.73 PEPM

Eleven members (up from nine last month) have now exceeded \$100,000 of the individual stop loss deductible which is set at \$240,000. Claimant number one (see large claim report on page 11) is a recurring claim from last year (\$415,484 paid in the prior plan year) who has exceeded the stop loss deductible for this year. We continue to work with Aetna to try and contain costs on this member. Aetna has not been successful in engaging the member in any type of case management. Virtually all of the charges are out of network. Claimant number eight is a large pharmacy claimant from the 2022-2023 plan year who is now back utilizing high-cost therapies. You can expect this member to exceed the stop loss deductible.

The dental plans paid claims for the for the first half of the plan year are right on the estimate at 100.7% of estimated claims liability. Utilization continues to trend downward, with December's claims liability at 89.2% Participation has averaged 1895 enrolled employees, with almost 87% of members enrolled in the buy-up plan.

The vision plans paid claims for through December were 103.1%. Utilization continues to trend downward, with December's claims liability at 76.6%. The buy-up plan, with the new, enhanced benefits loss ratio is 107.5% YTD, while the base plan sits at 69.4%. Participation for the year has averaged 1849 enrolled employees, with 79.4% enrolled in the buy-up plan.

Paid Medical Plan Costs

Plan Year: July 2024 to June 2025 (as of December 2024)

	Aetna - All Plans						Loss Ratio		PEPM	Costs					
Month	Subscribers	Expected Claims Liability	Medical Claims Paid	Rx Claims Paid	Rx Rebates	Claims in Excess of Stop Loss**	Total Claims Paid	Fixed Costs	HSA Contributions	Total Paid Claims and Admin Fees	Actual Claims vs. Expected Claims Liability	Medical ims Paid	Rx Claims Paid	Total Paid Claims	Total Paid Claims and Admin Fees
Jul-24	1,797	\$ 1,749,541	\$ 1,270,207	\$ 512,513	\$ -	\$ -	\$ 1,782,720	\$ 169,709	\$ 32,196	\$ 1,984,626	101.9%	\$ 706.85	\$ 285.21	\$ 992.05	\$ 1,104.41
Aug-24	1,810	\$ 1,762,198	\$ 1,276,850	\$ 534,633	\$ -	\$ -	\$ 1,811,483	\$ 170,936	\$ 32,172	\$ 2,014,591	102.8%	\$ 705.44	\$ 295.38	\$ 1,000.82	\$ 1,113.03
Sep-24	1,807	\$ 1,759,277	\$ 1,298,706	\$ 591,283	\$ (80,982)	\$ -	\$ 1,809,007	\$ 170,653	\$ 32,130	\$ 2,011,790	102.8%	\$ 718.71	\$ 327.22	\$ 1,001.11	\$ 1,113.33
Oct-24	1,800	\$ 1,752,462	\$ 1,435,020	\$ 572,438	\$ -	\$ -	\$ 2,007,458	\$ 169,992	\$ 31,713	\$ 2,209,163	114.6%	\$ 797.23	\$ 318.02	\$ 1,115.25	\$ 1,227.31
Nov-24	1,812	\$ 1,764,145	\$ 1,172,495	\$ 522,045	\$ -	\$ -	\$ 1,694,540	\$ 171,125	\$ 32,706	\$ 1,898,371	96.1%	\$ 647.07	\$ 288.10	\$ 935.18	\$ 1,047.67
Dec-24	1,819	\$ 1,770,960	\$ 1,174,758	\$ 552,610	\$ (667,730)	\$ -	\$ 1,059,638	\$ 171,786	\$ 32,675	\$ 1,264,099	59.8%	\$ 645.83	\$ 303.80	\$ 582.54	\$ 694.94
Jan-25															
Feb-25															
Mar-25															
Apr-25															
May-25															
Jun-25															
Total	10,845	\$ 10,558,584	\$ 7,628,036	\$ 3,285,523	\$ (748,712)	\$ -	\$ 10,164,846	\$ 1,024,202	\$ 193,592	\$ 11,382,641	96.3%	\$ 703.37	\$ 302.95	\$ 937.28	\$ 1,049.57

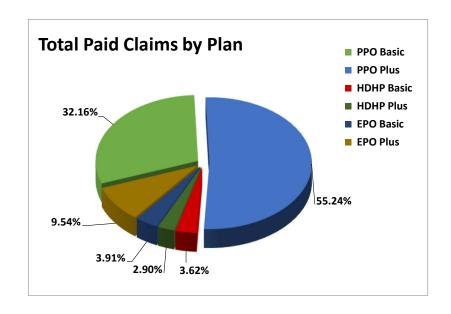
Avg	1,808
Enrollment	1,000

^{*}The amount in Rx Rebates column for September 2024 pertains to a performance guarentee reconciliation from CVS for the prior plan year credited to current
**Includes received and outstanding stop loss recovery

Specific Stop Loss Limit \$240,000 with a 24/12 Contract Period; Individual Aggregating Specific Deductible \$200,000 Aggregate Stop Loss declined

Fixed Costs (e.g. Admin Fees, Stop Loss, etc.)	Employee	EE & Spouse	EE & Child(ren)	EE & Family
Claim/Premium Administration Fee	\$38.89	\$38.89	\$38.89	\$38.89
HSA Administration	\$0.26	\$0.26	\$0.26	\$0.26
Rx Admin Fee	\$0.73	\$0.73	\$0.73	\$0.73
COBRA Admin Fee	\$0.30	\$0.30	\$0.30	\$0.30
Wellness & Communication/Implementation Credit	-\$4.88	-\$4.88	-\$4.88	-\$4.88
Individual Stop Loss	\$54.81	\$54.81	\$54.81	\$54.81
EAP	\$1.89	\$1.89	\$1.89	\$1.89
Consulting Fee	\$2.44	\$2.44	\$2.44	\$2.44
Total PEPM Fees for All Plans	\$94.44	\$94.44	\$94.44	\$94.44

Claim Factors		PEPM
Expected Claims	Factor	\$973.59





Plan Year: July 2024 to June 2025 (as of December 2024)

	Aetna - PPO Basic													Loss Ratio	PEPM Costs									
Month	Subscribers		Expected ims Liability		Medical aims Paid	F	Rx Claims Paid	Claims in Excess of Stop Loss	f	Total Claims Paid		Admin Fees		Total Paid Claims and Admin Fees		Actual Claims vs. Expected Claims Liability	Medical Claims Paid		R	x Claims Paid	Total Paid Claims		Cla	otal Paid aims and Imin Fees
Jul-24	639	\$	581,055	\$	357,481	\$	135,114	\$ -		\$	492,595	\$	60,347	\$	552,943	84.8%	\$	559.44	\$	211.45	\$	770.88	\$	865.32
Aug-24	650	\$	588,219	\$	451,074	\$	138,690	\$ -		\$	589,764	\$	61,386	\$	651,150	100.3%	\$	693.96	\$	213.37	\$	907.33	\$	1,001.77
Sep-24	650	\$	588,778	\$	561,677	\$	146,896	\$ -		\$	708,573	\$	61,386	\$	769,959	120.3%	\$	864.12	\$	225.99	\$	1,090.11	\$	1,184.55
Oct-24	651	\$	588,107	\$	468,478	\$	151,095	\$ -		\$	619,573	\$	61,480	\$	681,054	105.4%	\$	719.63	\$	232.10	\$	951.73	\$	1,046.17
Nov-24	653	\$	587,878	\$	302,195	\$	141,875	\$ -		\$	444,070	\$	61,669	\$	505,739	75.5%	\$	462.78	\$	217.27	\$	680.05	\$	774.49
Dec-24	659	\$	597,078	\$	252,607	\$	162,002	\$ -		\$	414,609	\$	62,236	\$	476,845	69.4%	\$	383.32	\$	245.83	\$	629.15	\$	723.59
Jan-25																								
Feb-25																								
Mar-25																								
Apr-25																								
May-25																								
Jun-25																								
Total	3,902	\$	3,531,115	\$	2,393,512	\$	875,673	\$	-	\$:	3,269,185	\$	368,505	\$	3,637,690	92.6%	\$	613.41	\$	224.42	\$	837.82	\$	932.26

Avg	650
Enrollment	

Fixed Costs (e.g. Admin Fees, Stop Loss, etc.)	Employee	EE & Spouse	EE & Child(ren)	EE & Family
Total PEPM Fees for the PPO Basic Plan	\$94.44	\$94.44	\$94.44	\$94.44

Claim Expenses	Employee	EE + Spouse	EE + Children	EE + Family
Expected Claim Factor	\$475.27	\$1,034.01	\$943.74	\$1,440.25

^{*}Includes received and outstanding stop loss recovery

Enrollment by Tier										
Month	EE	EE + Sp	EE & Ch	EE & Fam	Total EE's					
Jul-24	241	83	147	168	639					
Aug-24	247	84	152	167	650					
Sep-24	246	85	152	167	650					
Oct-24	248	83	154	166	651					
Nov-24	253	80	153	167	653					
Dec-24	252	81	153	173	659					
Jan-25	0	0	0	0	0					
Feb-25	0	0	0	0	0					
Mar-25	0	0	0	0	0					
Apr-25	0	0	0	0	0					
May-25	0	0	0	0	0					
Jun-25	0	0	0	0	0					
Total	1,487	496	911	1,008	3,902					



Page 21 3 of 28

Plan Year: July 2024 to June 2025 (as of December 2024)

	Aetna - PPO Plus													Loss Ratio	Loss Ratio PEPM Costs										
Month	Subscribers		Expected Claims Liability		Medical aims Paid	R	x Claims Paid	Claims in Excess of Stop Loss*	xcess of Total		Total Claims Paid		Admin Fees		C	Total Paid Claims and dmin Fees	Actual Claims vs. Expected Claims Liability		Medical aims Paid	R	x Claims Paid		otal Paid Claims	Cla	otal Paid nims and nin Fees
Jul-24	716	\$	751,900	\$	690,264	\$	274,734	\$ -	\$	964,998	\$	67,619	\$	1,032,617	128.3%	\$	964.06	\$	383.71	\$	1,347.76	\$	1,442.20		
Aug-24	712	\$	750,997	\$	605,100	\$	301,318	\$ -	\$	906,418	\$	67,241	\$	973,659	120.7%	\$	849.86	\$	423.20	\$	1,273.06	\$	1,367.50		
Sep-24	711	\$	748,796	\$	601,931	\$	315,013	\$ -	\$	916,944	\$	67,147	\$	984,090	122.5%	\$	846.60	\$	443.06	\$	1,289.65	\$	1,384.09		
Oct-24	712	\$	746,780	\$	608,970	\$	311,262	\$ -	\$	920,232	\$	67,241	\$	987,474	123.2%	\$	855.29	\$	437.17	\$	1,292.46	\$	1,386.90		
Nov-24	714	\$	744,002	\$	598,362	\$	263,792	\$ -	\$	862,154	\$	67,430	\$	929,584	115.9%	\$	838.04	\$	369.46	\$	1,207.50	\$	1,301.94		
Dec-24	714	\$	742,721	\$	772,960	\$	271,822	\$ -	\$	1,044,782	\$	67,430	\$	1,112,212	140.7%	\$	1,082.58	\$	380.70	\$	1,463.28	\$	1,557.72		
Jan-25																									
Feb-25																									
Mar-25																									
Apr-25																									
May-25																									
Jun-25																									
Total	4,279	\$	4,485,197	\$	3,877,587	\$	1,737,941	\$ -	\$	5,615,528	\$	404,109	\$	6,019,637	125.2%	\$	906.19	\$	406.16	\$	1,312.35	\$	1,406.79		

Avg	713
Enrollment	7.10

Fixed Costs (e.g. Admin Fees, Stop Loss, etc.)	Employee	EE & Spouse	EE & Child(ren)	EE & Family
Total PEPM Fees for the PPO Plus Plan	\$94.44	\$94.44	\$94.44	\$94.44

Claim Expenses	Employee	EE + Spouse	EE + Children	EE + Family
Expected Claim Factor	\$572.82	\$1,240.06	\$1,133.30	\$1,720.48

^{*}Includes received and outstanding stop loss recovery

Enrollment by Tier												
Month	EE	EE + Sp	EE & Ch	EE & Fam	Total EE's							
Jul-24	307	108	129	172	716							
Aug-24	299	111	132	170	712							
Sep-24	299	112	132	168	711							
Oct-24	303	109	133	167	712							
Nov-24	308	110	133	163	714							
Dec-24	308	109	136	161	714							
Jan-25	0	0	0	0	0							
Feb-25	0	0	0	0	0							
Mar-25	0	0	0	0	0							
Apr-25	0	0	0	0	0							
May-25	0	0	0	0	0							
Jun-25	0	0	0	0	0							
Total	1,824	659	795	1,001	4,279							



Page 22 4 of 28

Plan Year: July 2024 to June 2025 (as of December 2024)

	Aetna - HDHP Basic													Loss Ratio	PEPM Costs											
Month	Subscribers		Expected Claims Liability		Medical aims Paid	R	x Claims Paid	E	Claims in xcess of op Loss*	Tol	al Claims Paid	A	dmin Fees	Co	HSA ntributions	c	Total Paid Claims and dmin Fees	Actual Claims vs. Expected Claims Liability		Medical lims Paid	R	x Claims Paid		otal Paid Claims	Cla	ital Paid ims and nin Fees
Jul-24	155	\$	125,899	\$	28,903	\$	27,682	\$	-	\$	56,585	\$	14,638	\$	28,099	\$	99,322	44.9%	\$	186.47	\$	178.59	\$	365.06	\$	640.79
Aug-24	155	\$	125,060	\$	27,562	\$	22,253	\$	-	\$	49,815	\$	14,638	\$	28,075	\$	92,527	39.8%	\$	177.82	\$	143.57	\$	321.38	\$	596.95
Sep-24	155	\$	124,573	\$	20,858	\$	34,922	\$	-	\$	55,780	\$	14,638	\$	28,061	\$	98,479	44.8%	\$	134.57	\$	225.30	\$	359.87	\$	635.35
Oct-24	153	\$	123,378	\$	65,777	\$	30,649	\$	-	\$	96,426	\$	14,449	\$	27,709	\$	138,585	78.2%	\$	429.92	\$	200.32	\$	630.23	\$	905.78
Nov-24	159	\$	127,120	\$	25,665	\$	40,805	\$	-	\$	66,470	\$	15,016	\$	28,764	\$	110,251	52.3%	\$	161.42	\$	256.64	\$	418.05	\$	693.40
Dec-24	159	\$	127,197	\$	18,698	\$	23,791	\$	-	\$	42,489	\$	15,016	\$	28,764	\$	86,269	33.4%	\$	117.60	\$	149.63	\$	267.22	\$	542.57
Jan-25																										
Feb-25																										
Mar-25																										
Apr-25																										
May-25																										
Jun-25																										
Total	936	\$	753,227	\$	187,463	\$	180,101	\$	-	\$	367,564	\$	88,396	\$	169,472	\$	625,433	48.8%	\$	200.28	\$	192.42	\$	392.70	\$	668.20

Avg	156
Enrollment	130

Expected Claim Factor

Fixed Costs (e.g. Admin Fees, Stop Loss, etc.)	Employee	EE & Spouse	EE & Child(ren)	EE & Family
Total PEPM Fees for the HDHP Basic Plan	\$94.44	\$94.44	\$94.44	\$94.44
Claim Expenses	Employee	EE + Spouse	EE + Children	EE + Family

	Employee	EE + Spouse	EE + Children	EE + Family
HSA Contributions	\$168.95	\$182.73	\$182.45	\$193.31

\$392.93

\$880.29

	Enrollment by Tier													
Month														
Jul-24	55	28	21	51	155									
Aug-24	56	28	21	50	155									
Sep-24	57	27	21	50	155									
Oct-24	56	27	20	153										
Nov-24	59	29	21	50	159									
Dec-24	59	30	20	50	159									
Jan-25	0	0	0	0	0									
Feb-25	0	0	0	0	0									
Mar-25	0	0	0	0	0									
Apr-25	0	0	0	0	0									
May-25	0	0	0	0	0									
Jun-25	0	0	0	0	0									
Total	342	169	124	301	936									



\$802.32

\$1,231.19

^{*}Includes received and outstanding stop loss recovery

Plan Year: July 2024 to June 2025 (as of December 2024)

	Aetna - HDHP Plus												Loss Ratio	PEPM Costs																																						
Month	Subscribers		xpected Claims Liability		Medical aims Paid	R	x Claims Paid	Claims in Excess of Stop Loss*		Total Claims Paid																												Ad	min Fees	Cor	HSA ntributions	CI	Total Paid laims and dmin Fees	Actual Claims vs. Expected Claims Liability		Medical aims Paid	R	x Claims Paid		otal Paid Claims	Cla	otal Paid aims and Imin Fees
Jul-24	87	\$	73,418	\$	20,259	\$	12,031	\$	-	\$	32,290	\$	8,216	\$	4,097	\$	44,604	44.0%	\$	232.86	\$	138.29	\$	371.15	\$	512.69																										
Aug-24	87	\$	73,418	\$	14,580	\$	21,096	\$	-	\$	35,676	\$	8,216	\$	4,097	\$	47,990	48.6%	\$	167.59	\$	242.49	\$	410.07	\$	551.61																										
Sep-24	86	\$	72,422	\$	7,142	\$	28,979	\$	-	\$	36,121	\$	8,122	\$	4,070	\$	48,313	49.9%	\$	83.05	\$	336.97	\$	420.01	\$	561.77																										
Oct-24	85	\$	71,497	\$	73,997	\$	15,307	\$	-	\$	89,304	\$	8,027	\$	4,004	\$	101,335	124.9%	\$	870.55	\$	180.08	\$	1,050.63	\$	1,192.18																										
Nov-24	83	\$	68,461	\$	28,198	\$	28,518	\$	-	\$	56,716	\$	7,839	\$	3,941	\$	68,496	82.8%	\$	339.73	\$	343.59	\$	683.32	\$	825.25																										
Dec-24	82	\$	66,943	\$	19,149	\$	25,266	\$	-	\$	44,415	\$	7,744	\$	3,910	\$	56,070	66.3%	\$	233.52	\$	308.13	\$	541.65	\$	683.77																										
Jan-25																																																				
Feb-25																																																				
Mar-25																																																				
Apr-25																																																				
May-25																																																				
Jun-25																																																				
Total	510	\$	426,160	\$	163,325	\$	131,198	\$	-	\$	294,523	\$	48,164	\$	24,120	\$	366,808	69.1%	\$	320.25	\$	257.25	\$	577.50	\$	719.23																										

Avg	85
Enrollment	•

Fixed Costs (e.g. Admin Fees, Stop Loss, etc.)	Employee	EE & Spouse	EE & Child(ren)	EE & Family
Total PEPM Fees for the HDHP Plus Plan	\$94.44	\$94.44	\$94.44	\$94.44

Claim Expenses	Employee	EE + Spouse	EE + Children	EE + Family
Expected Claim Factor	\$498.32	\$1,091.06	\$996.23	\$1,517.86

	Employee	EE + Spouse	EE + Children	EE + Family
HSA Contributions	\$60.97	\$26.74	\$27.94	\$31.30

^{*}Includes received and outstanding stop loss recovery

	Enrollment by Tier													
Month	EE EE + Sp EE & Ch EE & Fam													
Jul-24	49	13	6	19	87									
Aug-24	49	13	13 6 19											
Sep-24	49	13	13 5 19											
Oct-24	48	14	14 5 18											
Nov-24	48	14	5	16	83									
Dec-24	48	14	5	15	82									
Jan-25	0	0	0	0	0									
Feb-25	0	0	0	0	0									
Mar-25	0	0	0	0	0									
Apr-25	0	0	0	0	0									
May-25	0	0	0	0	0									
Jun-25	0	0	0	0	0									
Total	291	81	32	106	510									



Plan Year: July 2024 to June 2025 (as of December 2024)

	Aetna - EPO Basic L											Loss Ratio	PEPM Costs														
Month	Subscribers		Expected Claims Liability		Medical aims Paid	R	x Claims Paid	Claims in Excess of Stop Loss*	То	tal Claims Paid	Ad							otal Paid laims and Imin Fees	Actual Claims vs. Expected Claims Liability	Medical Claims Paid		R	x Claims Paid		otal Paid Claims	Cla	otal Paid ims and nin Fees
Jul-24	104	\$	91,986	\$	41,708	\$	32,667	\$ -	\$	74,375	\$	9,822	\$	84,197	80.9%	\$	401.04	\$	314.10	\$	715.14	\$	809.58				
Aug-24	108	\$	95,402	\$	50,211	\$	19,836	\$ -	\$	70,047	\$	10,200	\$	80,246	73.4%	\$	464.92	\$	183.66	\$	648.58	\$	743.02				
Sep-24	109	\$	96,466	\$	34,257	\$	21,327	\$ -	\$	55,584	\$	10,294	\$	65,878	57.6%	\$	314.28	\$	195.66	\$	509.94	\$	604.38				
Oct-24	107	\$	95,463	\$	35,715	\$	26,838	\$ -	\$	62,553	\$	10,105	\$	72,658	65.5%	\$	333.79	\$	250.82	\$	584.61	\$	679.05				
Nov-24	110	\$	98,510	\$	35,984	\$	18,474	\$ -	\$	54,458	\$	10,388	\$	64,847	55.3%	\$	327.13	\$	167.95	\$	495.07	\$	589.51				
Dec-24	111	\$	100,501	\$	49,596	\$	30,724	\$ -	\$	80,320	\$	10,483	\$	90,803	79.9%	\$	446.81	\$	276.80	\$	723.61	\$	818.05				
Jan-25																											
Feb-25																											
Mar-25																											
Apr-25																											
May-25																											
Jun-25																											
Total	649	\$	578,328	\$	247,471	\$	149,866	\$ -	\$	397,337	\$	61,292	\$	458,628	68.7%	\$	381.31	\$	230.92	\$	612.23	\$	706.67				

Avg Enrollment	108

Fixed Costs (e.g. Admin Fees, Stop Loss, etc.)	Employee	EE & Spouse	EE & Child(ren)	EE & Family
Total PEPM Fees for the EPO Basic Plan	\$94.44	\$94.44	\$94.44	\$94.44
Claim Expenses	Employee	EE + Spouse	EE + Children	EE + Family
Expected Claim Factor	\$501.11	\$1,064.12	\$971.44	\$1,481.22

^{*}Includes received and outstanding stop loss recovery

Enrollment by Tier									
Month	EE	EE + Sp	EE & Ch	EE & Fam	Total EE's				
Jul-24	48	14	18	24	104				
Aug-24	49	14	21	24	108				
Sep-24	49	15	21	24	109				
Oct-24	47	15	21	24	107				
Nov-24	48	16	21	25	110				
Dec-24	48	16	20	27	111				
Jan-25	0	0	0	0	0				
Feb-25	0	0	0	0	0				
Mar-25	0	0	0	0	0				
Apr-25	0	0	0	0	0				
May-25	0	0	0	0	0				
Jun-25	0	0	0	0	0				
Total	289	90	122	148	649				



Plan Year: July 2024 to June 2025 (as of December 2024)

	Aetna - EPO Plus								Loss Ratio	PEPM Costs												
Month	Subscribers		Expected Claims Liability		Medical aims Paid	R	x Claims Paid	Claims in Excess of Stop Loss*	To	otal Claims Paid	Adr	nin Fees	С	Total Paid laims and dmin Fees	Actual Claims vs. Expected Claims Liability		Medical aims Paid	R	x Claims Paid	otal Paid Claims	Cla	otal Paid nims and min Fees
Jul-24	96	\$	100,004	\$	131,592	\$	30,284	\$ -	\$	161,876	\$	9,066	\$	170,943	161.9%	\$	1,370.75	\$	315.46	\$ 1,686.21	\$	1,780.65
Aug-24	98	\$	100,987	\$	128,323	\$	31,440	\$ -	\$	159,763	\$	9,255	\$	169,018	158.2%	\$	1,309.42	\$	320.82	\$ 1,630.23	\$	1,724.67
Sep-24	96	\$	99,213	\$	72,841	\$	44,146	\$ -	\$	116,987	\$	9,066	\$	126,053	117.9%	\$	758.76	\$	459.86	\$ 1,218.62	\$	1,313.06
Oct-24	92	\$	96,183	\$	182,083	\$	37,287	\$ -	\$	219,370	\$	8,688	\$	228,058	228.1%	\$	1,979.16	\$	405.29	\$ 2,384.45	\$	2,478.89
Nov-24	93	\$	96,770	\$	182,091	\$	28,581	\$ -	\$	210,672	\$	8,783	\$	219,455	217.7%	\$	1,957.97	\$	307.32	\$ 2,265.29	\$	2,359.73
Dec-24	94	\$	97,357	\$	61,748	\$	39,005	\$ -	\$	100,753	\$	8,877	\$	109,630	103.5%	\$	656.89	\$	414.95	\$ 1,071.84	\$	1,166.28
Jan-25																						
Feb-25																						
Mar-25																						
Apr-25																						
May-25																						
Jun-25																						
Total	569	\$	590,515	\$	758,678	\$	210,743	\$ -	\$	969,421	\$	53,736	\$	1,023,157	164.2%	\$	1,333.35	\$	370.37	\$ 1,703.73	\$	1,798.17

Avg	95
Enrollment	33

Fixed Costs (e.g. Admin Fees, Stop Loss, etc.)	Employee	EE & Spouse	EE & Child(ren)	EE & Family
Total PEPM Fees for the EPO Plus Plan	\$94.44	\$94.44	\$94.44	\$94.44

Claim Expenses	Employee	EE + Spouse	EE + Children	EE + Family
Expected Claim Factor	\$587.08	\$1,268.59	\$1,159.55	\$1,759.28

^{*}Includes received and outstanding stop loss recovery

Enrollment by Tier									
Month	EE	EE + Sp	EE & Ch	EE & Fam	Total EE's				
Jul-24	47	11	14	24	96				
Aug-24	50	9	14	25	98				
Sep-24	48	9	15	24	96				
Oct-24	45	8	15	24	92				
Nov-24	46	8	15	24	93				
Dec-24	47	8	15	24	94				
Jan-25	0	0	0	0	0				
Feb-25	0	0	0	0	0				
Mar-25	0	0	0	0	0				
Apr-25	0	0	0	0	0				
May-25	0	0	0	0	0				
Jun-25	0	0	0	0	0				
Total	283	53	88	145	569				



Paid Medical Plan Costs

Plan Year: July 2023 to June 2024

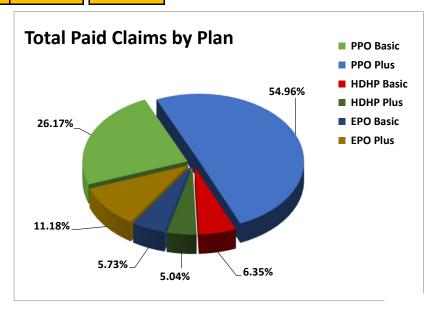
	Aetna - All Plans									Loss Ratio	PEPM Costs				
Month	Subscribers	Expected Claims Liability	Medical Claims Paid	Rx Claims Paid	Rx Rebates*	Claims in Excess of Stop Loss**	Total Claims Paid	Fixed Costs	HSA Contributions	Total Paid Claims and Admin Fees	Actual Claims vs. Expected Claims Liability	Medical Claims Pa		Total Paid Claims	Total Paid Claims and Admin Fees
Jul-23	1,679	\$ 1,621,472	\$ 774,718	\$ 354,893	\$ -	\$ -	\$ 1,129,611	\$ 134,051	\$ 28,900	\$ 1,292,563	69.7%	\$ 461.4	2 \$ 211.37	\$ 672.79	\$ 769.84
Aug-23	1,688	\$ 1,628,394	\$ 1,171,005	\$ 431,870	\$ -	\$ -	\$ 1,602,875	\$ 134,770	\$ 28,918	\$ 1,766,562	98.4%	\$ 693.7	2 \$ 255.85	\$ 949.57	\$ 1,046.54
Sep-23	1,691	\$ 1,632,572	\$ 1,212,642	\$ 401,290	\$ (62,324)	\$ -	\$ 1,551,608	\$ 135,009	\$ 28,812	\$ 1,715,429	95.0%	\$ 717.1	2 \$ 237.31	\$ 917.57	\$ 1,014.45
Oct-23	1,694	\$ 1,632,897	\$ 1,253,000	\$ 440,187	\$ -	\$ -	\$ 1,693,187	\$ 135,249	\$ 28,674	\$ 1,857,110	103.7%	\$ 739.6	\$ 259.85	\$ 999.52	\$ 1,096.29
Nov-23	1,708	\$ 1,642,952	\$ 966,793	\$ 451,869	\$ -	\$ -	\$ 1,418,662	\$ 136,367	\$ 28,589	\$ 1,583,618	86.3%	\$ 566.0	\$ 264.56	\$ 830.60	\$ 927.18
Dec-23	1,730	\$ 1,658,775	\$ 1,528,766	\$ 459,243	\$ (503,280)	\$ (58,458)	\$ 1,426,271	\$ 138,123	\$ 29,561	\$ 1,593,955	86.0%	\$ 883.6	8 \$ 265.46	\$ 824.43	\$ 921.36
Jan-24	1,735	\$ 1,663,861	\$ 1,686,460	\$ 435,153	\$ -	\$ (196,554)	\$ 1,925,059	\$ 138,522	\$ 29,897	\$ 2,093,479	115.7%	\$ 972.0	2 \$ 250.81	\$ 1,109.54	\$ 1,206.62
Feb-24	1,750	\$ 1,677,559	\$ 1,047,826	\$ 476,721	\$ -	\$ (153,941)	\$ 1,370,606	\$ 139,720	\$ 30,696	\$ 1,541,023	81.7%	\$ 598.7	6 \$ 272.41	\$ 783.20	\$ 880.58
Mar-24	1,753	\$ 1,681,702	\$ 1,445,301	\$ 424,036	\$ (520,707)	\$ (42,169)	\$ 1,306,461	\$ 139,960	\$ 30,143	\$ 1,476,563	77.7%	\$ 824.4	7 \$ 241.89	\$ 745.27	\$ 842.31
Apr-24	1,762	\$ 1,688,736	\$ 1,480,657	\$ 649,212	\$ -	\$ (146,914)	\$ 1,982,955	\$ 140,678	\$ 29,982	\$ 2,153,616	117.4%	\$ 840.3	3 \$ 368.45	\$ 1,125.40	\$ 1,222.26
May-24	1,765	\$ 1,691,089	\$ 1,523,483	\$ 472,754	\$ -	\$ (68,363)	\$ 1,927,874	\$ 140,918	\$ 30,651	\$ 2,099,443	114.0%	\$ 863.1	6 \$ 267.85	\$ 1,092.28	\$ 1,189.49
Jun-24	1,764	\$ 1,689,164	\$ 1,174,302	\$ 523,171	\$ (626,558)	\$ (252,920)	\$ 817,995	\$ 140,838	\$ 30,905	\$ 989,738	48.4%	\$ 665.7	0 \$ 296.58	\$ 463.72	\$ 561.08
Total	20,719	\$ 19,909,172	\$ 15,264,953	\$ 5,520,400	\$ (1,712,869)	\$ (919,320)	\$ 18,153,164	\$ 1,654,205	\$ 355,729	\$ 20,163,098	91.2%	\$ 736.7	6 \$ 266.44	\$ 876.16	\$ 973.17
Avg Enrollment	1 1727		\$ 15,264,953	\$ 5,520,400	\$ (2,300,149)	\$ (919,320)	\$ 17,565,884	\$ 1,654,205	\$ 355,729	\$ 19,575,817	88.2%				

Includes rebate payment of \$587,280 as the 4th rebate distribution for the 2023-2024 plan year

Specific Stop Loss Limit \$240,000 with a 24/12 Contract Period; Individual Aggregating Specific Deductible \$200,000 Aggregate Stop Loss declined

Fixed Costs (e.g. Admin Fees, Stop Loss, etc.)	Employee	EE & Spouse	EE & Child(ren)	EE & Family
Claim/Premium Administration Fee	\$38.89	\$38.89	\$38.89	\$38.89
HSA Administration	\$0.26	\$0.26	\$0.26	\$0.26
Rx Admin Fee	\$0.38	\$0.38	\$0.38	\$0.38
COBRA Admin Fee	\$0.30	\$0.30	\$0.30	\$0.30
Wellness & Communication/Implementation Credit	-\$4.97	-\$4.97	-\$4.97	-\$4.97
Individual Stop Loss	\$40.60	\$40.60	\$40.60	\$40.60
EAP	\$1.89	\$1.89	\$1.89	\$1.89
Consulting Fee	\$2.49	\$2.49	\$2.49	\$2.49
Total PEPM Fees for All Plans	\$79.84	\$79.84	\$79.84	\$79.84

Claim Factors	PEPM
Expected Claims Factor	\$964.03





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^{*}The amount in Rx Rebates column for September 2023 pertains to a performance guarentee reconciliation from CVS for the prior plan year credited to current

^{**}Includes received and outstanding stop loss recovery

Paid Medical Plan Costs

Plan Year: July 2024 to June 2025 (as of December 2024)

Annual Cost Comparison 2023/2024 vs. 2024/2025

Cost Categories	2023/2024 Annual Costs	PEPM Costs	2024/2025 Annual Estimated Costs	PEPM Costs
Medical Claims Costs	\$15,264,953	\$736.76	\$16,018,876	\$738.54
Rx Claims Costs	\$5,520,400	\$266.44	\$6,571,045	\$302.95
Rx Rebates	(\$2,300,149)	(\$111.02)	(\$2,994,849)	(\$138.08)
Stop Loss Recoveries**	(\$919,320)	(\$44.37)	\$0.00	\$0.00
Admin Fees	\$1,654,205	\$79.84	\$2,048,404	\$94.44
HSA Contributions	\$355,729	\$17.17	\$387,185	\$17.85
Total Costs	\$19,575,817	\$944.82	\$22,030,660	\$1,015.71

% Cost Change	\$ Cost Change	% PEPM Change	\$ PEPM Change
4.9%	\$753,923	0.2%	\$1.78
19.0%	\$1,050,646	13.7%	\$36.51
30.2%	(\$694,700)	24.4%	(\$27.06)
	\$919,320		\$44.37
23.8%	\$394,199	18.3%	\$14.60
8.8%	\$31,456	4.0%	\$0.68
12.5%	\$2,454,843	7.5%	\$70.88

PEPM	PEPM History						
2021/2022	\$845.22						
2022/2023	\$905.21	7.1%					
2023/2024	\$944.82	4.4%					
2024/2025	\$1,015.71	7.5%					

	Annual
Subscribers	20,719

Annualized
21,690

% Subscribers	# Subscribers
Change	Change
4.7%	971

Annual Cost Comparison 2022/2023 vs. 2023/2024

Cost Categories	2022/2023 Annual Costs	PEPM Costs	2023/2024 Annual Costs	PEPM Costs	
Medical Claims Costs	\$16,643,433	\$829.06	\$15,264,953	\$736.76	
Rx Claims Costs	\$4,989,762	\$248.56	\$5,520,400	\$266.44	
Rx Rebates	(\$2,004,292)	(\$99.84)	(\$2,300,149)	(\$111.02)	
Stop Loss Recoveries**	(\$3,191,532)	(\$158.98)	(\$919,320)	(\$44.37)	
Admin Fees	\$1,422,872	\$70.88	\$1,654,205	\$79.84	
HSA Contributions	\$311,849	\$15.53	\$355,729	\$17.17	
Total Costs	\$18,172,091	\$905.21	\$19,575,817	\$944.82	

% Cost Change	\$ Cost Change	% PEPM Change	\$ PEPM Change
(8.3%)	(\$1,378,480)	(11.1%)	(\$92.30)
10.6%	\$530,637	7.2%	\$17.89
14.8%	(\$295,857)	11.2%	(\$11.18)
	\$2,272,212		\$114.61
16.3%	\$231,333	12.6%	\$8.96
14.1%	\$43,880	10.5%	\$1.64
7.7%	\$1,403,726	4.4%	\$39.61

	Annual
Subscribers	20,075

% Subscribers Change	# Subscribers Change
3.2%	644



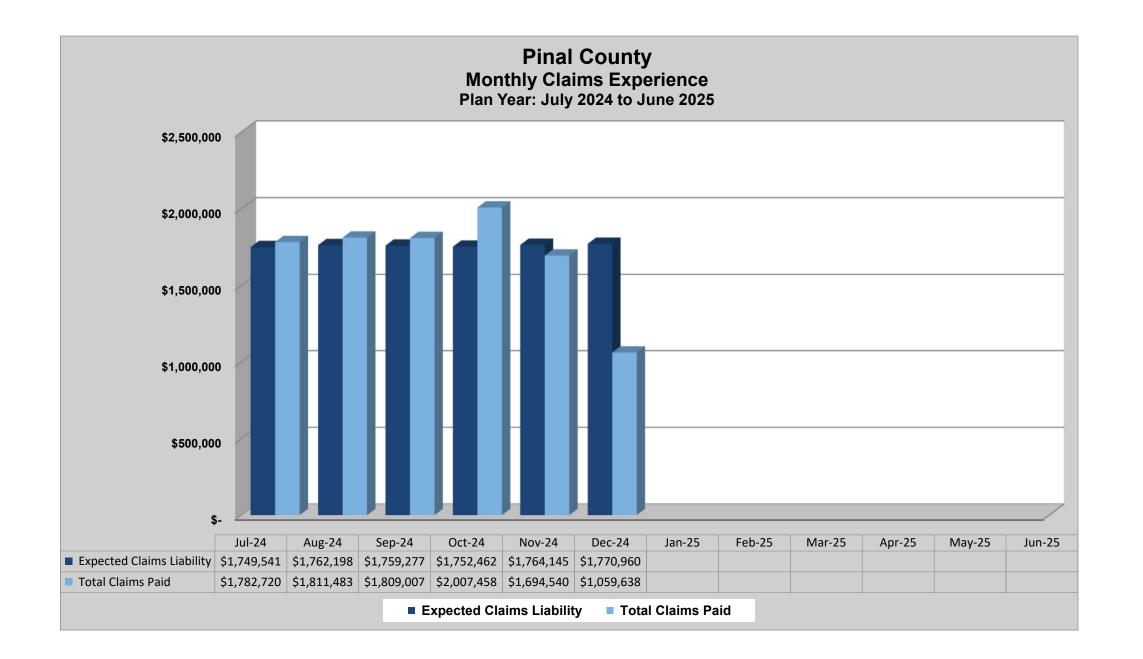
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^{*}Claims costs includes an escalator load.

^{**}Stop Loss Recoveries are YTD and not annualized.

Annual 20,719

^{**}Stop Loss Recoveries are YTD and not annualized.





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Aetna - Large Loss Claims Report Over \$100k

2024-2025 Plan Year: Processed July 2024 through June 2025 (as of December 2024)

Claimant	Unique ID	Prior Year Large	Plan	Prior Month's	Current Month	's Paid Claims	Current Month's Paid	Change from Prior Paid	% of \$240K	% of \$200K Aggregating
Claimant	Offique ID	Claimant (Y/N)	ΓΙάΙΙ	Paid Claims	Medical	Pharmacy	Claims	Claims	ISL*	Specific Limit**
1	C003	Y	PPO Plus	\$287,408	\$343,468		\$343,468	\$56,059	100%	52%
2	C018	Y	PPO Plus	\$238,347	\$292,605		\$292,605	\$54,258	100%	26%
3	D001	N	PPO Basic	\$202,101	\$230,986		\$230,986	\$28,885	96%	
4	D002	N	PPO Basic	\$202,366	\$218,696		\$218,696	\$16,330	91%	
5	A020***	Y	PPO Plus	\$202,792	\$202,792		\$202,792	\$0	68%	
6	C005	Y	EPO Plus	\$158,612	\$153,475	\$2,830	\$156,304	(\$2,308)	65%	
7	D004	N	PPO Plus		\$151,460		\$151,460	\$151,460	63%	
8	A004	Y	PPO Plus	\$119,464		\$146,094	\$146,094	\$26,630	61%	
9	D003	N	PPO Basic	\$136,723	\$127,079	\$11,545	\$138,624	\$1,901	58%	
10	D005	N	PPO Basic		\$112,204		\$112,204	\$112,204	47%	
11	A013	Y	EPO Plus	\$106,517	\$104,482	\$4,805	\$109,286	\$2,769	46%	

Grand Total	\$1,654,330	\$1,937,247	\$165,272	\$2,102,519	\$448,189
-------------	-------------	-------------	-----------	-------------	-----------

Large Claims % of Total Paid Claims	19.3%
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Green highlight indicates new claimant.

*ISL is the Individual Stop Loss Limit set at \$240K.

IAD (Aggregating Specific) Stop Loss Limit is set at \$200K * Claimant A020 ISL is 300K



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Aetna - Large Loss Claims Report Over \$100k

2023-2024 Plan Year: Processed July 2023 through June 2024

Claimant	Unique ID	Prior Year Large	Plan	Prior Month's	Current Month	's Paid Claims	Current Month's Paid	Change from Prior Paid	% of \$240K	% of \$200K Aggregating	Stop Loss Reimburse-	Net Paid after SL Reimburse-
Claimant	Offique ID	Claimant (Y/N)	Fidii	Paid Claims	Medical	Pharmacy	Claims	Claims	ISL*	Specific Limit**	ments	ments
1	A020	N	PPO Plus	\$571,683	\$662,419	\$133	\$662,553	\$90,870	100%		(\$422,553)	\$240,000
2	A018***	Y	PPO Basic	\$607,994	\$571,769	\$37,655	\$609,424	\$1,430	100%	100%	(\$109,424)	\$500,000
3	C003	N	PPO Plus	\$285,651	\$413,484	\$1,989	\$415,473	\$129,822	100%		(\$175,473)	\$240,000
4	C002	N	HDHP Basic	\$395,684	\$392,808	\$4,311	\$397,119	\$1,435	100%		(\$157,119)	\$240,000
5	C012	N	PPO Basic	\$264,406	\$50,281	\$214,270	\$264,551	\$145	100%		(\$24,551)	\$240,000
6	C004	N	PPO Plus	\$235,932	\$223,220	\$32,922	\$256,142	\$20,210	100%		(\$16,142)	\$240,000
7	C005	N	EPO Plus	\$233,384	\$175,520	\$75,108	\$250,628	\$17,244	100%		(\$10,628)	\$240,000
8	C008	N	PPO Basic	\$240,981	\$242,883	\$546	\$243,429	\$2,448	100%		(\$3,429)	\$240,000
9	C016	N	EPO Basic	\$209,736	\$211,256		\$211,256	\$1,520	88%			\$211,256
10	A013	Y	EPO Plus	\$183,646	\$174,190	\$15,303	\$189,493	\$5,847	79%			\$189,493
11	B014	Y	PPO Basic	\$160,786	\$46,542	\$132,560	\$179,102	\$18,317	75%			\$179,102
12	C017	N	PPO Plus	\$110,771	\$174,613		\$174,613	\$63,842	73%			\$174,613
13	C018	N	PPO Plus	\$132,691	\$149,635		\$149,635	\$16,944	62%			\$149,635
14	C020	N	PPO Plus	\$130,913	\$64,520	\$83,244	\$147,764	\$16,851	62%			\$147,764
15	C009	N	PPO Basic	\$139,793	\$138,649	\$3,180	\$141,829	\$2,036	59%			\$141,829



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Aetna - Large Loss Claims Report Over \$100k

2023-2024 Plan Year: Processed July 2023 through June 2024

Claimant	Unique ID	Prior Year Large		Prior Month's	Current Month's Paid Claims		Current Month's Paid		% of \$240K	% of \$200K Aggregating	Stop Loss Reimburse-	Net Paid after SL Reimburse-
Claimant	Onique ib	Claimant (Y/N)	i iaii	Paid Claims	Medical	Pharmacy	Claims	Claims	ISL*	Specific Limit**	ments	ments
16	C015	N	PPO Basic	\$136,969	\$140,783		\$140,783	\$3,814	59%			\$140,783
17	C001	N	PPO Plus	\$133,104	\$134,205		\$134,205	\$1,101	56%			\$134,205
18	C019	N	PPO Plus	\$113,742	\$43,885	\$87,661	\$131,546	\$17,804	55%			\$131,546
19	C010	N	HDHP Basic	\$120,363	\$84,847	\$38,155	\$123,002	\$2,640	51%			\$123,002
20	C014	N	PPO Plus	\$114,356	\$90,747	\$24,550	\$115,297	\$941	48%			\$115,297
21	C013	N	HDHP Plus	\$108,375		\$111,464	\$111,464	\$3,089	46%			\$111,464
22	C011	N	PPO Plus	\$105,819	\$28,965	\$79,799	\$108,764	\$2,946	45%			\$108,764
23	C021	N	PPO Plus		\$86,315	\$21,315	\$107,630	\$107,630	45%			\$107,630
24	C007	N	PPO Plus	\$106,453	\$106,453		\$106,453	\$0	44%			\$106,453

Grand Total	\$4,843,231	\$4,407,990	\$964,167	\$5,372,157	\$528,926
-------------	-------------	-------------	-----------	-------------	-----------

(\$919,320)	\$4,452,838
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Large Claims % of Total Paid Claims 25.8%

^{*}ISL is the Individual Stop Loss Limit set at \$240K.

^{**}IAD (Aggregating Specific) Stop Loss Limit is set at \$200K

^{***} Claimant A018 ISL is 300K, A004 ISL is 450K

Dental Reports

Delta Dental Paid Claims

Plan Year: July 2024 to June 2025 (as of December 2024)

	All Plans - Basic Plan and Buy-Up Plan							
Month	Enrollment	Claim Count	Estimated Claims Liability	Admin Fee	Dental Paid Claims	% Actual Claims vs. Estimated Claims Liability	Paid Claims PEPM	
Jul-24	1,888	791	\$127,100	\$7,420	\$161,355	127.0%	\$85.46	
Aug-24	1,898	672	\$127,773	\$7,459	\$131,927	103.3%	\$69.51	
Sep-24	1,891	603	\$127,302	\$7,432	\$110,218	86.6%	\$58.29	
Oct-24	1,890	705	\$127,235	\$7,428	\$132,270	104.0%	\$69.98	
Nov-24	1,900	560	\$127,908	\$7,467	\$120,528	94.2%	\$63.44	
Dec-24	1,904	605	\$128,177	\$7,483	\$114,311	89.2%	\$60.04	
Jan-25								
Feb-25								
Mar-25								
Apr-25								
May-25								
Jun-25								
Total	11,371	3,936	\$765,496	\$44,688	\$770,609	100.7%	\$67.77	
Average Enrollment	1,895							

Admin Fees	Employee
Administration	\$3.93

Claim Expenses	
Estimated Claim Factor	\$67.32



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Delta Dental Paid Claims

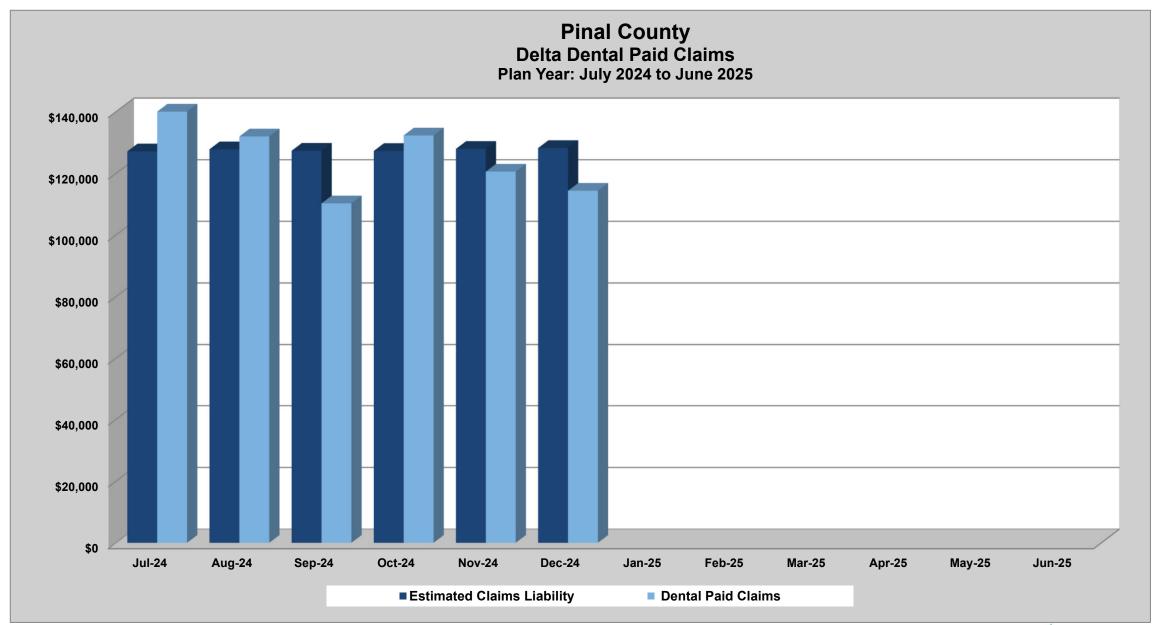
Plan Year: July 2024 to June 2025 (as of December 2024)

	Basic Plan							
Month	Enrollment	Claim Count	Estimated Claims Liability	Admin Fee	Dental Paid Claims	% Actual Claims vs. Estimated Claims Liability	Paid Claims PEPM	
Jul-24	345	119	\$23,225	\$1,356	\$24,936	107.4%	\$72.28	
Aug-24	350	108	\$23,562	\$1,376	\$17,819	75.6%	\$50.91	
Sep-24	352	90	\$23,697	\$1,383	\$13,531	57.1%	\$38.44	
Oct-24	346	102	\$23,293	\$1,360	\$22,076	94.8%	\$63.80	
Nov-24	350	102	\$23,562	\$1,376	\$17,790	75.5%	\$50.83	
Dec-24	351	80	\$23,629	\$1,379	\$13,403	56.7%	\$38.18	
Jan-25								
Feb-25								
Mar-25								
Apr-25								
May-25								
Jun-25								
Total	2,094	601	\$140,968	\$8,229	\$109,553	77.7%	\$52.32	
Average	349					-		

	Buy-Up Plan							
Month	Enrollment	Claim Count	Estimated Claims Liability	Admin Fee	Dental Paid Claims	% Actual Claims vs. Estimated Claims Liability	Paid Claims PEPM	
Jul-24	1,543	672	\$103,875	\$6,064	\$136,419	131.3%	\$88.41	
Aug-24	1,548	564	\$104,211	\$6,084	\$114,109	109.5%	\$73.71	
Sep-24	1,539	513	\$103,605	\$6,048	\$96,687	93.3%	\$62.82	
Oct-24	1,544	603	\$103,942	\$6,068	\$110,195	106.0%	\$71.37	
Nov-24	1,550	458	\$104,346	\$6,092	\$102,738	98.5%	\$66.28	
Dec-24	1,553	525	\$104,548	\$6,103	\$100,908	96.5%	\$64.98	
Jan-25								
Feb-25								
Mar-25								
Apr-25								
May-25								
Jun-25								
Total	9,277	3,335	\$624,528	\$36,459	\$661,056	105.8%	\$71.26	
Average	1,546		•					



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Delta Dental Paid Claims

Plan Year: July 2023 to June 2024

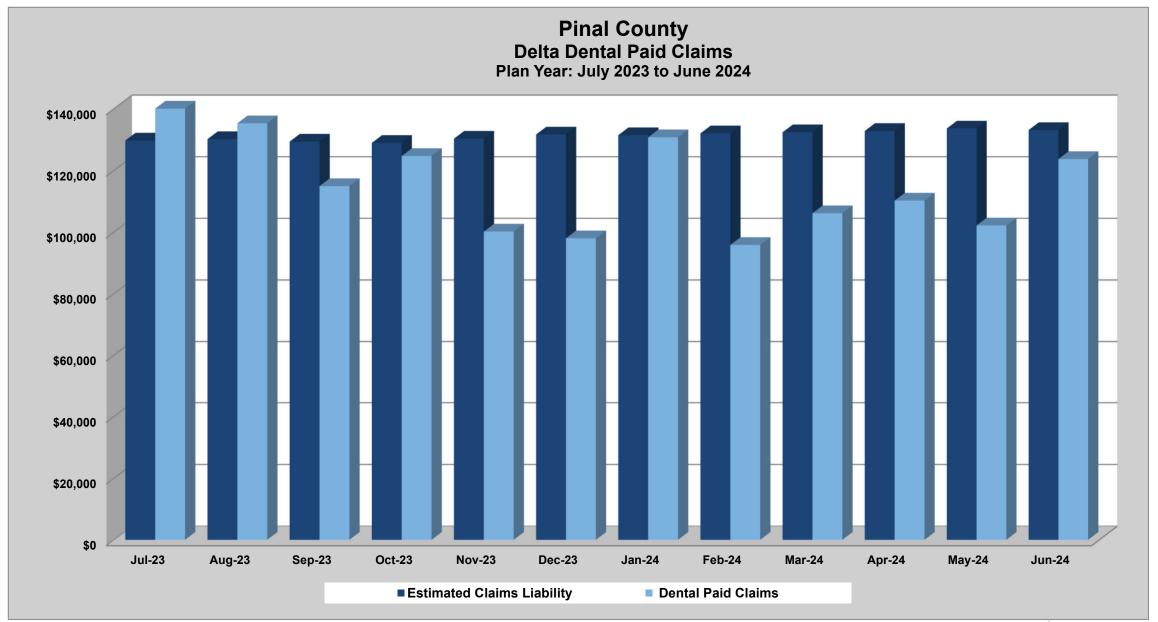
	All Plans - Basic Plan and Buy-Up Plan						
Month	Enrollment	Claim Count	Estimated Claims Liability	Admin Fee	Dental Paid Claims	% Actual Claims vs. Estimated Claims Liability	Paid Claims PEPM
Jul-23	1,797	664	\$129,654	\$6,757	\$144,213	111.2%	\$80.25
Aug-23	1,803	780	\$130,086	\$6,779	\$135,231	104.0%	\$75.00
Sep-23	1,792	594	\$129,293	\$6,734	\$114,853	88.8%	\$64.09
Oct-23	1,786	665	\$128,860	\$6,715	\$124,601	96.7%	\$69.77
Nov-23	1,805	504	\$130,231	\$6,787	\$100,079	76.8%	\$55.45
Dec-23	1,824	563	\$131,602	\$6,858	\$97,915	74.4%	\$53.68
Jan-24	1,821	708	\$131,385	\$6,847	\$130,694	99.5%	\$71.77
Feb-24	1,829	538	\$131,962	\$6,877	\$95,742	72.6%	\$52.35
Mar-24	1,834	586	\$132,323	\$6,896	\$106,044	80.1%	\$57.82
Apr-24	1,840	597	\$132,756	\$6,922	\$110,141	83.0%	\$59.86
May-24	1,851	552	\$133,550	\$6,960	\$102,076	76.4%	\$55.15
Jun-24	1,844	680	\$133,045	\$6,937	\$123,612	92.9%	\$67.03
Total	21,826	7,431	\$1,574,746	\$82,070	\$1,385,202	88.0%	\$63.47
Average Enrollment	1,819						

Admin Fees	Employee	
Administration	\$3.76	

Claim Expenses	
Estimated Claim Factor	\$72.15



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Delta Dental Claims

Plan Year: July 2024 to June 2025 (as of December 2024)

Annual Cost Comparison Analysis 2023/2024 vs. 2024/2025

Cost Categories	2023/2024 Annual Costs	PEPM Costs	2024/2025 Estimated Annual Costs	PEPM Costs
Dental Claims	\$1,385,202	\$63.47	\$1,510,393	\$66.41
Admin Fees	\$82,070	\$3.76	\$89,376	\$3.93
Total Costs	\$1,467,271	\$67.23	\$1,599,770	\$70.34

% Cost Change	\$ Cost Change	% PEPM Change	\$ PEPM Change
9.0%	\$125,192	4.6%	\$2.95
8.9%	\$7,307	4.5%	\$0.17
9.0%	\$132,498	4.6%	\$3.12

PEPM Total C	Increase/ Decrease	
2021/2022	\$62.32	
2022/2023	\$63.48	1.9%
2023/2024	\$67.23	5.9%
2024/2025	\$70.34	4.6%

	Annual
Enrollment	21,826

Annualized
22,742

% Enrollment	# Enrollment
Change	Change
4.2%	916

Annual Cost Comparison Analysis 2022/2023 vs. 2023/2024

Cost Categories	2022/2023 Annual Costs	PEPM Costs	2023/2024 Annual Costs	PEPM Costs
Dental Claims	\$1,248,719	\$59.72	\$1,385,202	\$63.47
Admin Fees	\$78,629	\$3.76	\$82,070	\$3.76
Total Costs	\$1,327,348	\$63.48	\$1,467,271	\$67.23

% Cost Change	\$ Cost Change	% PEPM Change	\$ PEPM Change
10.9%	\$136,483	6.3%	\$3.75
4.4%	\$3,440	0.0%	(\$0.00)
10.5%	\$139,924	5.9%	\$3.75

	Annual
Enrollment	20,910

Annual
21,826

% Enrollment	# Enrollment
Change	Change
4.4%	916



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Vision Reports

VSP Vision Paid Claims

Plan Year: July 2024 to June 2025 (as of December 2024)

	VSP - All Plans							
Month	Enrollment	Claim Count	Estimated Claims Liability	Admin Fee Including Adjustments	Vision Paid Claims	% Actual Claims vs. Estimated Claims Liability	Paid Claims PEPM	
Jul-24	1,840	289	\$36,972	\$3,399	\$47,507	128.5%	\$25.82	
Aug-24	1,850	415	\$37,125	\$3,415	\$52,254	140.8%	\$28.25	
Sep-24	1,848	272	\$36,999	\$3,405	\$37,829	102.2%	\$20.47	
Oct-24	1,850	236	\$36,895	\$3,411	\$34,266	92.9%	\$18.52	
Nov-24	1,849	198	\$36,729	\$3,428	\$28,395	77.3%	\$15.36	
Dec-24	1,858	166	\$36,917	\$3,432	\$28,274	76.6%	\$15.22	
Jan-25								
Feb-25								
Mar-25								
Apr-25								
May-25								
Jun-25								
Total	11,095	1,576	\$221,636	\$20,491	\$228,524	103.1%	\$20.60	
Average Enrollment	1,849							

Admin Fees	
Administration	\$1.30

Claim Expenses	
Estimated Claim Factor	\$19.93



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VSP Vision Paid Claims

Plan Year: July 2024 to June 2025 (as of December 2024)

	Base Plan							
Month	Enrollment	Claim Count	Estimated Claims Liability	Admin Fee	Vision Paid Claims	% Actual Claims vs. Estimated Claims Liability	Paid Claims PEPM	
Jul-24	378	36	\$4,231	\$491	\$3,353	79.2%	\$8.87	
Aug-24	380	40	\$4,269	\$494	\$3,119	73.1%	\$8.21	
Sep-24	383	38	\$4,265	\$498	\$3,572	83.7%	\$9.33	
Oct-24	382	45	\$4,252	\$495	\$3,641	85.6%	\$9.53	
Nov-24	383	27	\$4,271	\$499	\$2,812	65.8%	\$7.34	
Dec-24	384	14	\$4,292	\$499	\$1,248	29.1%	\$3.25	
Jan-25								
Feb-25								
Mar-25								
Apr-25								
May-25								
Jun-25								
Total	2,290	200	\$25,580	\$2,977	\$17,745	69.4%	\$7.75	
Average	382							

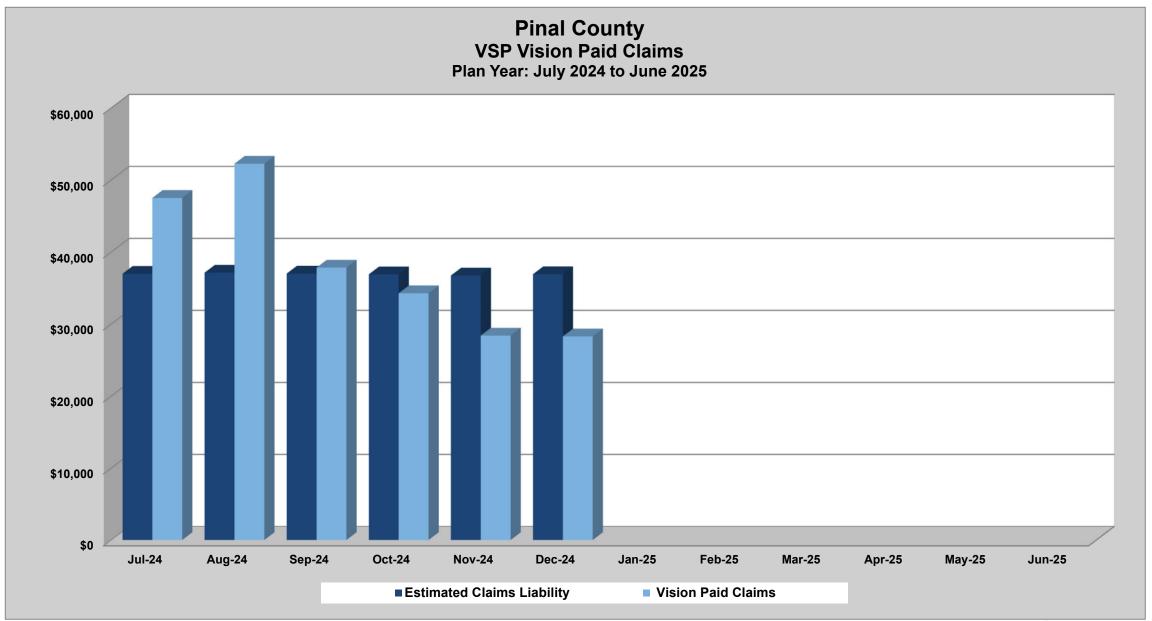
Claim Expenses	Employee	EE + Spouse	EE + Children	EE + Family
Expected Claim Factor	\$5.51	\$13.40	\$11.69	\$19.50

Buy-Up Plan							
Month	Enrollment	Claim Count	Estimated Claims Liability	Admin Fee	Vision Paid Claims	% Actual Claims vs. Estimated Claims Liability	Paid Claims PEPM
Jul-24	1,462	253	\$32,740	\$2,907	\$44,154	134.9%	\$30.20
Aug-24	1,470	375	\$32,856	\$2,921	\$49,135	149.5%	\$33.43
Sep-24	1,465	234	\$32,734	\$2,907	\$34,257	104.7%	\$23.38
Oct-24	1,468	191	\$32,644	\$2,915	\$30,625	93.8%	\$20.86
Nov-24	1,466	171	\$32,458	\$2,929	\$25,582	78.8%	\$17.45
Dec-24	1,474	152	\$32,625	\$2,933	\$27,026	82.8%	\$18.33
Jan-25							
Feb-25							
Mar-25							
Apr-25							
May-25						l i	
Jun-25						l i	
Total	8,805	1,376	\$196,056	\$17,514	\$210,779	107.5%	\$23.94
Average	1,468						

Claim Expenses	Employee	EE + Spouse	EE + Children	EE + Family
Expected Claim Factor	\$10.65	\$25.01	\$23.10	\$38.12



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Pinal County VSP Vision Paid Claims

Plan Year: July 2023 to June 2024

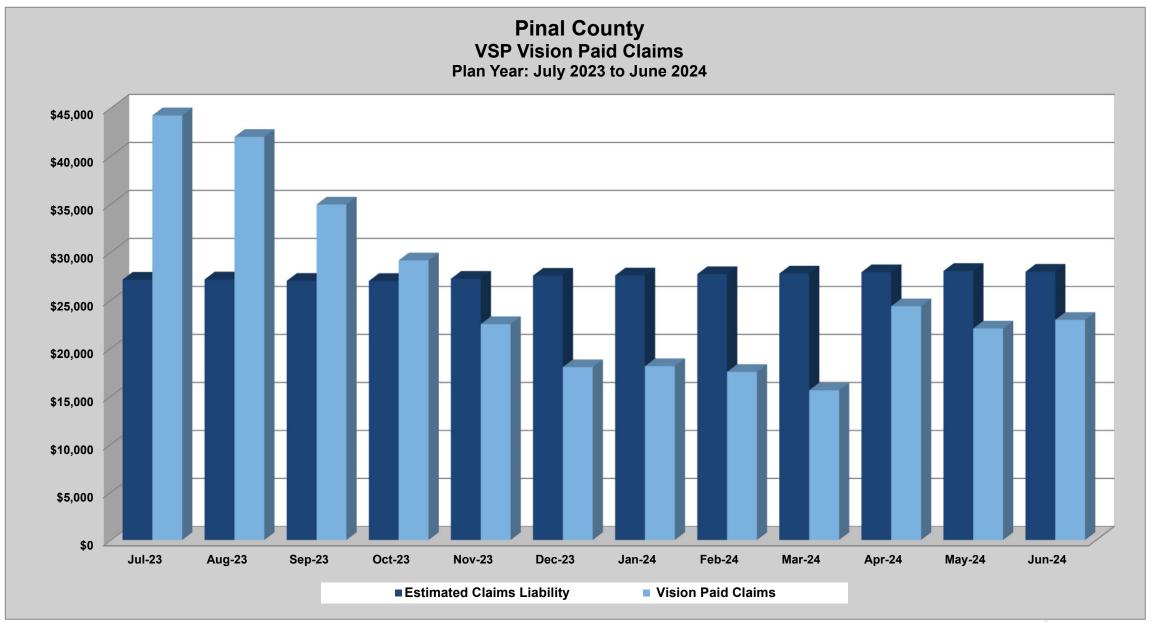
	VSP						
Month	Enrollment	Claim Count	Estimated Claims Liability	Admin Fee Including Adjustments	Vision Paid Claims	% Actual Claims vs. Estimated Claims Liability	Paid Claims PEPM
Jul-23	1,739	344	\$27,111	\$2,934	\$44,220	163.1%	\$25.43
Aug-23	1,741	319	\$27,142	\$2,934	\$41,981	154.7%	\$24.11
Sep-23	1,731	279	\$26,986	\$2,918	\$34,945	129.5%	\$20.19
Oct-23	1,730	223	\$26,971	\$2,916	\$29,119	108.0%	\$16.83
Nov-23	1,745	176	\$27,205	\$2,944	\$22,483	82.6%	\$12.88
Dec-23	1,766	135	\$27,532	\$2,979	\$18,002	65.4%	\$10.19
Jan-24	1,767	161	\$27,548	\$2,980	\$18,102	65.7%	\$10.24
Feb-24	1,776	131	\$27,688	\$2,993	\$17,508	63.2%	\$9.86
Mar-24	1,780	148	\$27,750	\$3,000	\$15,594	56.2%	\$8.76
Apr-24	1,789	206	\$27,891	\$3,016	\$24,347	87.3%	\$13.61
May-24	1,797	184	\$28,015	\$3,029	\$22,028	78.6%	\$12.26
Jun-24	1,792	193	\$27,937	\$3,021	\$22,923	82.1%	\$12.79
Total	21,153	2,499	\$329,775	\$35,664	\$311,253	94.4%	\$14.71
Average Enrollment	1,763						

Admin Fees	
Administration	\$1.42

Claim Expenses	
Estimated Claim Factor	\$15.59



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Pinal County VSP Vision Paid Claims

Plan Year: July 2024 to June 2025 (as of December 2024)

Annual Cost Comparison Analysis 2023/2024 vs. 2024/2025

Cost Categories	2023/2024 Annual Costs	PEPM Costs	2024/2025 Estimated Annual Costs	PEPM Costs
Vision Claims	\$311,253	\$14.71	\$356,498	\$16.07
Admin Fees	\$35,664	\$1.69	\$40,982	\$1.85
Total Costs	\$346,917	\$16.40	\$397,480	\$17.91

% Cost Change	\$ Cost Change	% PEPM Change	\$ PEPM Change
14.5%	\$45,245	9.2%	\$1.35
14.9%	\$5,318	9.5%	\$0.16
14.6%	\$50,563	9.2%	\$1.51

PEPM Total Cost History		Increase/ Decrease
2021/2022	\$15.39	
2022/2023	\$15.89	3.2%
2023/2024	\$16.40	3.2%
2024/2025	\$17.91	9.2%

	Annual
Enrollment	21,153

Annualized
22,190

% Enrollment	# Enrollment
Change	Change
4.9%	1,037

Annual Cost Comparison Analysis 2022/2023 vs. 2023/2024

Cost Categories	2022/2023 Annual Costs	PEPM Costs	2023/2024 Annual Costs	PEPM Costs
Vision Claims	\$284,247	\$14.20	\$311,253	\$14.71
Admin Fees	\$33,730	\$1.69	\$35,664	\$1.69
Total Costs	\$317,977	\$15.89	\$346,917	\$16.40

% Cost Change	\$ Cost Change	% PEPM Change	\$ PEPM Change
9.5%	\$27,006	3.6%	\$0.51
5.7%	\$1,934	0.0%	\$0.00
9.1%	\$28,940	3.2%	\$0.51

	Annual
Enrollment	20,014

Annual	
21,153	

% Enrollment	# Enrollment
Change	Change
5.7%	1,139



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AGENDA ITEM

February 25, 2025 ADMINISTRATION BUILDING A FLORENCE, ARIZONA

REQUESTED BY:					
Funds #:					
Dept. #:					
Dept. Name:					
Director:					
BRIEF DESCRIPTION OF AGENDA ITE	M AND REQUESTED BOARD ACTION:				
Discussion Only- Review of the Health	Benefits Trust Fund Financial Statement	s (Randee Stinson)			
BRIEF DESCRIPTION OF THE FISCAL (ITEM:	BRIEF DESCRIPTION OF THE FISCAL CONSIDERATIONS AND/OR EXPECTED FISCAL IMPACT OF THIS AGENDA ITEM:				
BRIEF DESCRIPTION OF THE EXPECT	ED PERFORMANCE IMPACT OF THIS A	AGENDA ITEM:			
MOTION:					
History					
Time	Who	Approval			
ATTACHMENTS:					
Click to download					
Financial Statements					



Employee Health Benefits Trust Fund Financial Statements Period Ended December 31, 2024

Period Ended

		2/31/2024
OPERATING REVENUES		
Employee Contributions		
Medical		879,532
Dental		657,576
Vision		148,170
Voluntary Products		1,159,022
HSA/EE		205,444
FSA/EE		595,001
Employer Contributions		
Medical		10,696,850
Dental		191,576
Vision		49,610
Voluntary Products		283,971
HSA/ER		170,004
FSA/ER		55,032
STD Admin Fee		36,951
Cobra Contributions		8,874
Rebates		665,185
Wellness Reimbursement		26,041
Miscellaneous Revenue		2,545
Interest Revenue		86,220
Total Operating Revenues		15,917,604
OPERATING EXPENSES		
Administrative		
Medical		467,906
Medical Stop Loss		585,535
Dental		44,779
Vision		20,487
STD Admin Fee		36,952
Claims		20,502
Medical		8,478,427
Prescription		3,269,367
Dental		772,330
Vision		228,524
Professional & Outside Services		50,170
Wellness		20,170
Preventative Well Being		22,529
EAP		23,738
Employer Provided Insurance		
Short Term Disability		184,100
Life Insurance		403,198
Health Savings Accounts		371,984
Flexible Spending Accounts		630,898
Voluntary Products		820,558
Miscellaneous Expenses		(3,653)
Total Operating Expenditures		16,407,829
Excess (deficiency) of revenues over expenditures		(490,226)
	*	
Change in Fund Balances	_\$	(490,226)
Fund Balance June 30, 2024		8,523,651
Fund Balance December 31, 2024	\$	8,033,426

Pinal County, Arizona Health Benefits Trust Fund - Balance Sheet For the Period Ended December 31, 2024

	Period Ended 12/31/2024
ASSETS	
Cash and Cash Equivalent	11,120,184
Accounts Receivable	19,756
Prepaid Expenses	9,631
Total Assets	11,149,571
LIABILITIES	
Accounts Payable	57,383
Claims Payable	415,447
IBNR	2,643,315
Total Liabilities	3,116,145
NET POSITION (Deficit)	
Unrestricted	8,033,426
Total Net Position	\$ 8,033,426



AGENDA ITEM

February 25, 2025 ADMINISTRATION BUILDING A FLORENCE, ARIZONA

REQUESTED BY: Funds #: Dept. #: Dept. Name: Director:				
BRIEF DESCRIPTION OF AGENDA ITE	M AND REQUESTE	D BOARD ACTION:		
Discussion Only- Discussion of items to include in Future Health Benefits Trust Board meeting agenda				
BRIEF DESCRIPTION OF THE FISCAL ITEM:	CONSIDERATIONS	AND/OR EXPECTED FISCAL IMPACT OF THIS AGENDA		
BRIEF DESCRIPTION OF THE EXPEC	TED PERFORMANC	E IMPACT OF THIS AGENDA ITEM:		
MOTION:				
History				
Time	Who	Approval		
ATTACHMENTS: Click to download				
No Attachments Available				



AGENDA ITEM

February 25, 2025 ADMINISTRATION BUILDING A FLORENCE, ARIZONA

REQUESTED BY:				
Funds #:				
Dept. #:				
Dept. Name:				
Director:				
BRIEF DESCRIPTION OF AGENDA ITEM	AND REQUESTED BOARD ACTION:			
Posted this 20th of February, 2025 aroun	nd 9:00 AM/Danielle Watkins			
BRIEF DESCRIPTION OF THE FISCAL O	CONSIDERATIONS AND/OR EXPECTED	FISCAL IMPACT OF THIS AGENDA		
BRIEF DESCRIPTION OF THE EXPECTED PERFORMANCE IMPACT OF THIS AGENDA ITEM:				
MOTION:				
History				
Time	Who	Approval		
ATTACHMENTS:				
Click to download				
No Attachments Available				