

ITEM: 3.41 (ID # 22727) MEETING DATE: Tuesday, August 29, 2023

FROM : HUMAN RESOURCES:

**SUBJECT:** HUMAN RESOURCES: Dental, and Vision Plan Rates; Benefit Changes for Active Employees and Retirees for the 2024 Calendar Year, All Districts. [Total Cost - \$15,756,100, 100% Employee and Retiree Dental and Vision Premiums]

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Approve the 2024 Dental and Vision plan rates listed in Attachments A and B for active employees and early retirees. CalPERS monthly plan rates are provided for information purposes only in Attachment C.

ACTION:Policy

lichael Bowers 8/17/2023

## MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Spiegel, seconded by Supervisor Perez and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes:	Jeffries, Spiegel, Perez, Washington, and Gutierrez
Nays:	None
Absent:	None
Date:	August 29, 2023
xc:	H.R.

Kimberly A. Rector Clerk of the Board By: )ma Depu

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$7,878,050	\$7,878,050	\$15,756,100	\$
NET COUNTY COST	\$	\$	\$	\$
SOURCE OF FUNDS	ms	ustment: No /ear: 23/24 – 24/25		

## C.E.O. RECOMMENDATION: Approve BACKGROUND: Summary

The County contracts with the CaIPERS Health Program to provide medical coverage for County employees and retirees. To assist employees and retirees with the cost of health benefits, the County provides Flexible Benefit Credits and a retiree medical contribution. The Flexible Benefit Credit amount is determined by the applicable Memorandum of Understanding (MOU) governing each bargaining unit, Management Resolution for unrepresented employees or the Ordinance 440 for the Resident Physicians and Pharmacy Residents classifications. The retiree medical contribution is based on the Minimum Contribution amount as prescribed in the Government Code section 22892 of the Public Employees' Medical and Hospital Care Act (PEMHCA). The contribution is adjusted annually to reflect any changes in the medical care component of the Consumer Price Index-Urban (CPI-U), or the amount prescribed by the Memorandum of Understanding or resolution for the retirees bargaining unit or employee resolution at the time of their retirement.

## Health Plan Rates and Plan Design

## Active Employee and Early Retiree Medical Rates

The CaIPERS Board of Administration approved medical plan premiums for calendar year 2024 at an overall premium rate increase of 10.77%. CaIPERS reported the primary driver of the premium increases is rising costs due to high medical inflation. The national healthcare trend is projected at 7% in 2024 with industry citing increases are associated with high inflation along with increased wages and workforce shortages as primary cost drivers.

### Dental Plans

For Dental Health Maintenance Organization (DHMO) and Dental Preferred Provider Organizations (DPPO) plans, the current national trend rates are at 3.9% for DHMOs and 4.8% for PPOs. These factors are also not adjusted for regional differences nor for fully insured plans.

Delta Dental continues to offer the largest national dental provider network with a full range of dental care programs. Under the Delta Dental plan, employees and retirees have the option to select a DHMO or DPPO plan design.

### **Dental Plan Reserves**

Human Resources has reviewed and finalized fund balance reserves for the County's selfinsured dental plans: Local Advantage, Local Advantage Blythe, and Delta Dental PPO. These plans have accumulated excess reserve balances that can only be used to benefit the participants of these plans.

The County will utilize and apply the excess reserve amounts to cover recommended rate increases as calculated in the renewal. These actions will maintain premiums for employees and retirees in plan year 2024 and deplete excess reserves to a reasonable reserve balance sufficient to cover future claims Incurred But Not Reported (IBNR) and claim run-out expenses.

It is recommended that the County use reserves as indicated for the 2024 plan year and reevaluate the plan reserves next summer in preparations for the 2025 plan year. Once excess dental plan reserves are depleted, dental rates are expected to increase in the 2025 plan year due to the benefit enhancements that were added to the dental plans in the 2022 plan year.

### Delta Dental PPO

The Delta Dental PPO and Premier plan features freedom of choice to visit any dentist and receive lower out-of-pocket pocket cost when services are provided by contract providers. Delta Dental continues to successfully manage the County's dental plans and expand their network with new and local service providers throughout Riverside County. Currently, there are 11,946 participants enrolled in the Delta PPO plan option, which is a combined total of active employees and retirees.

Actuaries initially recommended a rate increase of 11.7% for the self-funded PPO plan. However, excess plan reserves will be used to cover the recommended increase, which will result in a rate pass to participants in 2024 plan year. In addition, excess plan reserves will be used to cover the costs of the additional benefits enhancements during the 2024 plan year.

### Delta Care HMO

DeltaCare is the dental DHMO plan which features set copays, no annual deductibles, and no maximums for in-network benefits. Many diagnostic and preventative services are available at no cost or with very low copays. Presently, there are 7,453 participants enrolled in the Delta DHMO plan option, which is a combined total of active employees and retirees. There are no plan design changes proposed to the DeltaCare HMO plan for the 2024 plan year. There will be no rate increase for the 2024 plan year due to the DHMO rates guaranteed for a three-year rate period (01/01/2023 – 12/31/2025).

### Local Advantage Plus and Local Advantage Blythe

The Local Advantage Plus and Local Advantage Blythe are self-funded (Exclusive Provider Organizations (EPO)) plans that utilize local providers including Riverside Dental Group and Hospitality Dental group. Presently, there are 810 participants enrolled in the Local Advantage Plus and 22 participants enrolled in the Local Advantage Blythe plans, which is a combined total of active employees and retirees.

Plan reserves will be used to cover the recommended rate increase, which will result in a rate pass to participants for 2024. In addition, excess plan reserves will be used to cover the additional costs of plan benefits enhancements during the 2024 plan year.

### Vision Plans

The Vision Services Plan (VSP) is an employer paid self-funded program available to Elected Officials, employees covered by the Exempt Management, Management, Confidential, and Unrepresented Resolution, Resident Physicians and Pharmacy Residents classifications, and employees in bargaining units of the Riverside County Deputy District Attorney Association (RCDDAA) and Law Enforcement Management Unit (LEMU). There are 2,755 employees enrolled in the VSP plan.

The actuarial recommended rate of \$14.30 was effective July 1, 2023 for eligible employees per month to cover the cost of this plan.

The EyeMed Vision Care (EyeMed) is a voluntary vision program offered to employees covered by the Service Employee' International Union (SEIU), Local 721, the Laborers' International Union of North America (LIUNA), Local 777, and the Riverside Sheriffs' Association Public Safety (PSU) Units. There are 11,931 active employees and 2,356 early retirees enrolled in the MES plans.

There is no change in plan design for the vision plans for the 2024 Plan Year. There will be no rate increase for the 2024 plan year due to the rates guaranteed for a four-year rate period (01/01/2023 - 12/31/2026).

#### **CalPERS**

The CalPERS Health Program offers more medical options and a variety of choices of plan types to County employees. Plan changes for the 2024 plan year: Health Net SmartCare of California will no longer be part of CalPERS health plan offerings.

CalPERS members can make changes to their health plan choices during the annual Open Enrollment period, which is scheduled for September 18 to October 13, 2023. The CalPERS medical plan rates are listed in the Attachment C for information and comparative purposes only. The County is included in Region 3 under the CalPERS Health Program.

#### **Regions**

Region 1 – Alameda, Alpine, Amador, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Placer, Plumas, Sacramento, San Benito, San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yolo and Yuba

**Region 2** – Fresno, Imperial, Inyo, Kern, Kings, Madera, Orange, San Diego, San Luis Obispo, Santa Barbara, Tulare, and Ventura

Region 3 – Los Angeles, Riverside, and San Bernardino

#### Impact on Residents and Businesses

There is no impact to residents or businesses in the County of Riverside.

#### **Contract History and Price Reasonableness**

The annual cost of dental and vision plans for active employees and retirees is estimated to remain the same at \$15 million in plan year 2024. This estimate is based on current enrollments and is the amount County active employees and retirees will pay towards premiums in 2024. The standing cost is a result of the dental and vision rate guarantees.

If approved, plan rates will be communicated to employees and retirees during the County's annual Open Enrollment period, which is scheduled for September 18, 2023, through October 13, 2023, for active employees and retirees.

### ATTACHMENTS

- A. Dental Plan Monthly Rates (Actives and Retirees)
- B. Vision Plan Monthly Rates (Actives and Retirees)
- C. CalPERS Plan Monthly Rates (Informational Purposes Only)

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## County of Riverside 2024 County Dental Plan Renewal Rates Actives and Retirees

	Total Enrollment	2023 Renewal	2024 Renewal	Monthly Dollar	Percent change
Local Advantage - Plus				Change	
	101	400.00	400.00	40.00	
Single	481	\$32.26	\$32.26	\$0.00	0%
Two-Party	168	\$61.50	\$61.50	\$0.00	0%
Family	161	\$91.50	\$91.50	\$0.00	0%
Sub-Total	810	\$40,580.56	\$40,580.56	\$0.00	0%
Local Advantage - Blythe					
Single	9	\$20.98	\$20.98	\$0.00	0%
Two-Party	7	\$32.02	\$32.02	\$0.00	0%
Family	6	\$50.36	\$50.36	\$0.00	0%
Sub-Total	22	\$715.12	\$715.12	\$0.00	0%
Delta USA DHMO - High Option Plan (1	.0A)				
Single	4114	\$21.62	\$21.62	\$0.00	0%
Two-Party	1690	\$32.98	\$32.98	\$0.00	0%
Family	1649	\$51.86	\$51.86	\$0.00	0%
Sub-Total	7453	\$230,198.02	\$230,198.02	\$0.00	0%
Delta Dental PPO					
Single	6212	\$45.00	\$45.00	\$0.00	0%
Two-Party	2888	\$78.00	\$78.00	\$0.00	0%
Family	2846	\$115.00	\$115.00	\$0.00	0%
Sub-Total	11946	\$832,094.00	\$832,094.00	\$0.00	0%
ANNUAL TOTAL	20231	\$13,243,052.40	\$13,243,052.40	\$0.00	0%

## County of Riverside 2024 County Vision Plan Renewal Rates Actives and Retirees

	Active Enrollment	2023 Renewal	2024 Renewal	Monthly Dollar Increase	Percent Increase
EyeMed Vision Care Plan 2 - Hardwa	re only (Active Empl	oyees)	•		
Single	334	\$7.22	\$7.22	\$0.00	0%
Two-Party	83	\$11.50	\$11.50	\$0.00	0%
Family	86	\$15.88	\$15.88	\$0.00	0%
Sub-Total	503	\$4,731.66	\$4,731.66	\$0.00	0%
EyeMed Vision Care Plan 1 - Exam &	Hardware (Active E	mployees)			
Single	6664	\$8.56	\$8.56	\$0.00	0%
Two-Party	2060	\$12.92	\$12.92	\$0.00	0%
Family	2704	\$17.48	\$17.48	\$0.00	0%
Sub-Total	11428	\$130,924.96	\$130,924.96	\$0.00	0%
VSP			•		
Self-Funded Fee		12% of claims	12% of claims	N/A	N/A
Recommended funding level	2755	\$15.93	\$14.30	(\$1.63)	-10%
Sub-Total	2755	\$43,887.15	\$39,396.50	(\$4,490.65)	-10%
EyeMed Vision Care Retiree Plan			•		
Single	1342	\$10.17	\$10.17	\$0.00	0%
Two-Party	862	\$19.48	\$19.48	\$0.00	0%
Family	152	\$25.84	\$25.84	\$0.00	0%
Sub-Total	2356	\$34,367.58	\$34,367.58	\$0.00	0%
Annual Total	17042	\$2,566,936.20	\$2,513,048.40	(\$53,887.80)	-2%

## July Board of Administration Offsite

## Proposed Regional 2024 Premiums Per Subscriber Per Month (PSPM) One Risk Pool Three-Year Phase In with PPO Benefit Design Changes

	2023			2024			
Basic Plans	Single	2-Party	Family	Single	2-Party	Family	Percent Change
	Bas	ic Premium	s - Region	1			
Alameda, Alpine, Amador, Butte, Calaveras, Mendocino, Merced, Modoc, Mono, Monterey, N Santa Clara, Santa Cruz, Shasta, Sierra,	lapa, Nevada,	Placer, Plun	nas, Sacrame	ento, San Ber	nito, San Frar	ncisco, San .	Joaquin, San Mateo,
Anthem Blue Cross Select HMO	\$1,128.83	\$2,257.66	\$2,934.96	\$1,138.86	\$2,277.72	\$2,961.04	0.89%
Anthem Blue Cross Traditional HMO	1,210.71	2,421.42	3,147.85	1,339.70	2,679.40	3,483.22	10.65%
Anthem EPO Del Norte	1,200.12	2,400.24	3,120.31	1,314.27	2,628.54	3,417.10	9.51%
Blue Shield Access+ HMO	1,035.21	2,070.42	2,691.55	1,076.84	2,153.68	2,799.78	4.02%
Blue Shield Trio HMO	888.94	1,777.88	2,311.24	946.84	1,893.68	2,461.78	6.51%
Kaiser Permanente	913.74	1,827.48	2,375.72	1,021.41	2,042.82	2,655.67	11.78%
PERS Gold	825.61	1,651.22	2,146.59	914.82	1,829.64	2,378.53	10.81%
PERS Platinum	1,200.12	2,400.24	3,120.31	1,314.27	2,628.54	3,417.10	9.51%
UnitedHealthcare SignatureValue Alliance	1,044.07	2,088.14	2,714.58	1,091.13	2,182.26	2,836.94	4.51%
UnitedHealthcare SignatureValue Harmony	N/A	N/A	N/A	937.39	1,874.78	2,437.21	N/A
Western Health Advantage HMO	760.17	1,520.34	1,976.44	807.23	1,614.46	2,098.80	6.19%
	Bas	ic Premium	s - Region	2			
Fresno, Imperial, Inyo, Kern, Kings	s, Madera, Ora	ange, San Di	ego, San Luis	s Obispo, Sar	nta Barbara,	Tulare and V	'entura
Anthem Blue Cross Select HMO	\$765.37	\$1,530.74	\$1,989.96	\$807.71	\$1,615.42	\$2,100.05	5.53%
Anthem Blue Cross Traditional HMO	935.12	1,870.24	2,431.31	1,034.38	2,068.76	2,689.39	10.61%
Blue Shield Access+ HMO	842.61	1,685.22	2,190.79	869.14	1,738.28	2,259.76	3.15%
Blue Shield Trio HMO	760.71	1,521.42	1,977.85	810.24	1,620.48	2,106.62	6.51%
Health Net Salud y Más	698.91	1,397.82	1,817.17	684.77	1,369.54	1,780.40	(2.02%)
Kaiser Permanente	756.21	1,512.42	1,966.15	904.95	1,809.90	2,352.87	19.67%
PERS Gold	695.93	1,391.86	1,809.42	799.44	1,598.88	2,078.54	14.87%
PERS Platinum	1,014.80	2,029.60	2,638.48	1,151.50	2,303.00	2,993.90	13.47%
Sharp Performance Plus	764.96	1,529.92	1,988.90	833.24	1,666.48	2,166.42	8.93%
UnitedHealthcare SignatureValue Alliance	793.63	1,587.26	2,063.44	837.88	1,675.76	2,178.49	5.58%
UnitedHealthcare SignatureValue Harmony	781.58	1,563.16	2,032.11	792.65	1,585.30	2,060.89	1.42%
The second s	Bas	ic Premium	s - Region	3	Support States		
	Los Angel	es, Riverside	and San Ber	nardino			
Anthem Blue Cross Select HMO	\$737.91	\$1,475.82	\$1,918.57	\$841.13			13.99%
Anthem Blue Cross Traditional HMO	942.73	1,885.46	2,451.10		2,025.34	2,632.94	7.42%
Blue Shield Access+ HMO	738.29	1,476.58				1,967.29	2.49%
Blue Shield Trio HMO	661.49	1,322.98					
Health Net Salud y Más	606.34	1,212.68	1,576.48			1,638.34	
Kaiser Permanente	754.64	1,509.28	1,962.06	865.41	1,730.82	2,250.07	
PERS Gold	680.37	1,360.74	1,768.96				
PERS Platinum	992.59	1,985.18		1,131.47	2,262.94		
UnitedHealthcare SignatureValue Alliance	790.46	1,580.92		826.44			
UnitedHealthcare SignatureValue Harmony	713.55				1,469.52	1,910.38	2.97%
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Kaiser Permanente Out of State	\$1,155.43						
PERS Platinum	1,003.90	2,007.80	2,610.14	1,146.86	2,293.72	2,981.84	14.24%

## July Board of Administration Offsite

# 2024 Associations (ASN) Plan Premiums Per Subscriber Per Month (PSPM)

		2023			2024		
Basic Plans	Single	2-Party	Family	Single	2-Party	Family	Percent Change 1
САНР	\$768.67	\$1,492.25	\$1,951.73	\$845.54	\$1,641.48	\$2,146.90	10.00%
CCPOA North	928.26	1,861.19	2,512.99	992.57	1,990.33	2,687.43	6.93%
CCPOA South	765.32	1,535.24	2,074.72	818.30	1,641.73	2,218.70	6.92%
PORAC State	775.00	1,525.00	2,000.00	853.00	1,708.00	2,220.00	10.06%
PORAC Region 1	825.00	1,875.00	2,300.00	931.00	2,117.00	2,651.00	12.85%
PORAC Region 2	820.00	1,650.00	2,100.00	926.00	1,863.00	2,371.00	12.93%
PORAC Region 3	820.00	1,600.00	2,100.00	926.00	1,863.00	2,371.00	12.93%
PORAC Out of State	935.00	1,899.00	2,250.00	1,056.00	2,144.00	2,540.00	12.94%
ASN Basic Weighted A	Vorago						9.73%

#### **ASN Basic Weighted Average**

		2023			2024		
Medicare Plans	Single	2-Party	Family	Single	2-Party	Family	Percent Change <sup>1</sup>
CAHP	\$518.96	\$958.27	\$1,218.41	\$570.85	\$1,054.10	\$1,340.26	10.00%
CCPOA North	401.00	799.00	1,197.00	424.48	848.96	1,273.44	5.86%
CCPOA South	401.00	799.00	1,197.00	424.48	848.96	1,273.44	5.86%
PORAC State	465.00	1,030.00	1,395.00	465.00	1,030.00	1,395.00	0.00%
PORAC Region 1	465.00	1,030.00	1,395.00	465.00	1,030.00	1,395.00	0.00%
PORAC Region 2	465.00	1,030.00	1,395.00	465.00	1,030.00	1,395.00	0.00%
PORAC Region 3	465.00	1,030.00	1,395.00	465.00	1,030.00	1,395.00	0.00%
PORAC Out of State	465.00	1,030.00	1,395.00	465.00	1,030.00	1,395.00	0.00%
ASN Medicare Weighte	d Average						5.98%

#### **ASN Medicare Weighted Average**

	2024										
Combination Plans	Subscriber in M & 1 Dependent in B	Subscriber in M & 2+ Dependents in B	Subscriber in M, 1 Dependent in B & 1 Dependent in M	Subscriber in B & 1 Dependent in M	Subscriber in B & 2+ Dependents in M	Subscriber in B, 1 Dependent in B & 1 Dependent in M					
САНР	\$1,366.79	\$1,872.21	\$1,559.52	\$1,328.79	\$1,614.95	\$1,834.21					
CCPOA North	1,422.24	2,119.34	1,846.72	1,417.05	1,835.53	2,414.81					
CCPOA South	1,247.91	1,824.88	1,672.39	1,242.78	1,661.26	2,066.21					
PORAC State	1,320.00	1,832.00	1,542.00	1,318.00	1,883.00	1,832.00					
PORAC Region 1	1,651.00	2,185.00	1,564.00	1,396.00	1,961.00	2,185.00					
PORAC Region 2	1,402.00	1,910.00	1,538.00	1,391.00	1,956.00	1,910.00					
PORAC Region 3	1,402.00	1,910.00	1,538.00	1,391.00	1,956.00	1,910.00					
PORAC Out of State	1,553.00	1,949.00	1,426.00	1,521.00	2,086.00	1,949.00					

<sup>1</sup> Percent Change column represents the change based only on Single Party premiums from 2023 to 2024.